

## HEALTH & WELLBEING BOARD (SHADOW)

### Minutes of the Meeting held

Tuesday, 30th April, 2013, 2.00 pm

Councillor Paul Crossley	- Bath & North East Somerset Council
Councillor Simon Allen	- Bath & North East Somerset Council
Ashley Ayre	- Bath & North East Somerset Council
Dr. Ian Orpen	- Member of the Clinical Commissioning Group
Dr Simon Douglass	- Member of the Clinical Commissioning Group
Councillor Dine Romero	- Bath & North East Somerset Council
Pat Foster	- Healthwatch

#### 1 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting. The Chair and every other Board Member introduce themselves to the present public.

#### 2 EMERGENCY EVACUATION PROCEDURE

The Democratic Services Officer drew attention to the evacuation procedure.

#### 3 APOLOGIES FOR ABSENCE

Apologies were received from Jo Farrar (Council Chief Executive) and Paul Scott (Acting Director of Public Health).

#### 4 DECLARATIONS OF INTEREST

There were none.

#### 5 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIR

There was no urgent business.

#### 6 PUBLIC QUESTIONS/COMMENTS

The Chair invited Pamela Galloway (Secretary of the Warm Water Inclusive Swimming and Exercise – WWISE) to address the Board with her statement.

Pamela Galloway explained that she was speaking on behalf of B&NES residents who, because of disability or short and/or long term health conditions, need access to warm water pools to exercise and swim so they can help, and/or maintain, their health and fitness.

Pamela Galloway described the needs of those residents and the necessity for the adequate facilities in local leisure centres.

Pamela Galloway concluded that the WWISE network applaud the Council's strategy for the provision of leisure facilities for health outcomes, not just for recreation, and welcomed that the draft Health and Wellbeing Strategy placed emphasis on enabling everyone to live healthy and fulfilling lives, reducing health inequalities and improving the health of local people and communities.

*A full copy of the statement from Pamela Galloway is available on the Minute Book in Democratic Services.*

The Chair thanked Pamela Galloway for her statement.

The Board asked what would be suitable water temperature for people who need warm water pools and whether the access to pools is acceptable.

Pamela Galloway responded that lot of people from the WWISE network feel that 30°C is still too cold for them so they were asking for anything between 31°C and 33°C. Pamela Galloway also said that currently many people who use warm water pools are excluded from using their local leisure centres because the water is too cold for them and/or the facilities do not meet their access needs.

The Board suggested that the WWISE network should have their facts and figures (water temperature, number of users, accessibility needs and similar) ready and forwarded to the Cabinet Member for Neighbourhood and also to Jon Poole (Research and Intelligence Manager).

## **7 MINUTES OF PREVIOUS MEETING**

The minutes of the previous meeting were approved as a correct record and signed by the Chair.

## **8 FEEDBACK FROM PROVIDER ENGAGEMENT SESSION - VERBAL UPDATE (10 MINUTES)**

The Chair introduced this item by saying that the first Public Engagement Session of the Health and Wellbeing Board (Shadow) happened earlier in the day and invited Helen Edelstyn (Strategy and Plan Manager) to summarise the session.

Helen Edelstyn said that 35 organisations were at the session today, which was more than expected and showed that participants and stakeholders are willing to engage in this kind of event.

Helen Edelstyn informed the Board that the main focus of the session was on the draft Joint Health and Wellbeing Strategy consultation, with the emphasis on the equality issues. The responses from the session will be summarised in one document and sent to all participants.

The Chair said that the Public Engagement Session was quite successful considering that 35 organisations were present at the session, and that they

engaged quite well in the consultation.

It was **RESOLVED** to note the update.

## 9 **OUTLINE JOINT HEALTH AND WELLBEING STRATEGY (20 MINUTES)**

The Chair invited Helen Edelstyn to introduce the Strategy by giving the presentation to the Board.

Helen Edelstyn highlighted the following points in her presentation:

- The Strategy – intentions
- Theme 1 – Helping people to stay healthy
- Theme 2 – Improving the quality of people's lives
- Theme 3 – Creating fairer life chances
- Consultation
  - Public consultation runs from 30<sup>th</sup> April until 7<sup>th</sup> June this year
  - The Strategy will go to the Full Council in September 2013 for final approval

*A full copy of the presentation from Helen Edelstyn is available on the Minute Book in Democratic Services.*

Members of the Board welcomed the layout of the Strategy. They felt that the Strategy was easy to read and in the accessible format.

The Board also welcomed the start of the consultation pointing out that it is the right time for it.

Members of the Board debated what other issues should be addressed in the Strategy and suggested that the Strategy should also include the following:

- More information on the work towards reduction of health and wellbeing inequalities
- More information about parts of B&NES with income deficiencies
- Specification on dementia current and future figures
- Focus on the deprivation and complex families
- Focus on the smoking cessation
- More transparency on the financial pressure over the next 4 to 5 years

Councillor John Bull said that he expected more on children's centres in the Strategy. The Board replied that pages 6 and 7 of the Strategy cover work with partners and the purpose of the Strategy is to set its strategic intentions rather than going into details.

The Chair closed the debate by saying that the Joint Health and Wellbeing Strategy is a broad framework to start solving particular issues. This is an excellent first step and the Board will be committed to the open dialogue with the communities.

The Chair invited the Board to formally launch the consultation on the Strategy.

The Chair also suggested that details (names and email addresses) of all Board Members should be included in the Strategy along with the general contact email.

It was **RESOLVED** to:

- 1) Welcome and approve the Joint Health and Wellbeing Strategy (subject to suggestions made by the Board in the debate).
- 2) Launch the consultation on the Joint Health and Wellbeing Strategy and include Board Members' details.

10 **ENHANCED QUALITY OF LIFE FOR PEOPLE WITH DEMENTIA: DEMENTIA FRIENDLY COMMUNITIES - VERBAL UPDATE (30 MINUTES)**

The Chair invited Corrine Edwards (Clinical Commissioning Group) to give a presentation named 'Enhancing the quality of life for people with Dementia in B&NES'.

Corrine Edwards highlighted the following points in her presentation:

- Prime Minister's Challenge
- Driving improvements in health and care
- Creating dementia-friendly communities
- Belter research
- NHS Outcomes Framework
- B&NES population projections
- What is happening in health, social care and housing?
- Our priorities
- What have we achieved so far?
- Next steps

*A full copy of the presentation from Corrine Edwards is available on the Minute Book at Democratic Services.*

Members of the Board welcomed the presentation and highlighted the importance of creating dementia-friendly communities. Members of the Board in particular emphasised the significance of raising the awareness and understanding across society and encouraging more companies to commit to being dementia friendly.

Dr Ian Orpen shared his experience as General Practitioner by saying that it is not straightforward helping people with dementia as most of the people are hiding the syndrome.

Members of the Board agreed with all priorities set in the presentation, and highlighted the importance of the following:

- Improving standards in care homes and domiciliary care
- Better information for people with dementia (and their carers)
- Increase availability of dementia nursing home beds; and
- Supporting people with dementia at end of life.

The Board felt that end of life planning, with people who have early signs of

dementia, needs to be discussed at that stage, whether with the specialist or family members/carers, as those conversations are not easy at a later stage.

The Chair concluded the debate by asking for a report with the general update on Dementia in six months' time.

It was **RESOLVED** to note the presentation and to receive a general update on Dementia in six months' time.

## 11 **HEALTH AND WELLBEING BOARD TERMS OF REFERENCE (10 MINUTES)**

The Chair invited Helen Edelstyn to introduce the report.

Members of the Board commented that apart from a couple of minor points (i.e. National Commissioning Board is now called NHS England) they were happy with the document before them.

It was **RESOLVED** that the Board agreed with the Terms of Reference for the Bath and North East Somerset Health and Wellbeing Board.

## 12 **JOINT STRATEGIC NEEDS ASSESSMENT VERBAL UPDATE (20 MINUTES)**

The Chair invited Jon Poole to give a presentation.

Jon Poole highlighted the following points in his presentation:

- Helping People Stay Healthy
  - Measles
  - Multiple unhealthy lifestyle behaviours
- Improving the Quality of people's lives
  - Strategic Housing Market Assessment
  - Welfare Reforms
- Fairer life chances
  - Child poverty
  - Teenage pregnancy

*A full copy of the presentation is available on the Minute Book in Democratic Services.*

Members of the Board thanked Jon Poole for providing this information in his presentation.

Members of the Board commented that figures on fairer life chances and new child poverty figures in deprived areas need to be addressed in detail.

The Chair felt that one of the jobs that this Board will have is to think how to fix these issues and how to reduce figures across the whole area.

Ashley Ayre added that there are quite a lot of initiatives happening at the moment within the education and schools area, such as Healthy Schools Initiative funded by the Public Health, and also the work of the Skills and Employment agency.

The Chair closed the debate by requesting more information on the initiative mentioned by Ashley Ayre in the next Joint Strategic Needs Assessment update.

It was **RESOLVED** to note the presentation and for officers to take on board requirements for the next update.

13 **LOCAL HEALTHWATCH WELCOME AND INTRODUCTION - VERBAL UPDATE (15 MINUTES)**

The Chair invited Pat Foster (Healthwatch Bath and North East Somerset) to give the presentation.

Pat Foster gave a presentation in which she informed the Board that the Care Forum, as a 'body corporate', has been awarded the Healthwatch Bath and North East Somerset contract. Local Healthwatch will be quite different from the Local Involvement Network – there will be no host organisation to support Healthwatch as The Care Forum is a company able to employ staff.

Pat Foster also outlined the powers and duties of the local Healthwatch, what had happened since the contract with The Care Forum had been signed, Healthwatch governance and the flowchart explaining what particular groups and individuals are in Healthwatch.

Pat Foster concluded her presentation by saying that the local 01225 number will be soon operational.

*A full copy of the presentation from Pat Foster is available on the Minute Book in Democratic Services.*

Members of the Board welcomed the presentation from Pat Foster. Members of the Board asked how the Healthwatch will ensure that volunteers would present the views of the community group/s and not their own personal, views.

Pat Foster replied that the Healthwatch want to have everyone views on board. Volunteers will be listed directly from the community groups. The other difference between the Local Involvement Network (LINK) and the Healthwatch is that LINK was network of individuals whilst Healthwatch will be network of groups.

Dr Ian Orpen asked to be noted that the Clinical Commissioning Group's Patient and Public Forum is not there to duplicate the work of the Healthwatch.

The Chair concluded by saying that he was very pleased that the Healthwatch Bath and North East Somerset is now formally established and that they will have two seats on the Health and Wellbeing Board.

It was **RESOLVED** to note the presentation from Pat Foster.

The meeting ended at 3.45 pm

Chair .....

Date Confirmed and Signed .....

**Prepared by Democratic Services**

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