

HEALTH & WELLBEING BOARD

Minutes of the Meeting held

Wednesday, 12th October, 2016, 10.30 am

Dr Ian Orpen	Member of the Clinical Commissioning Group
Councillor Vic Pritchard	Bath & North East Somerset Council
Mike Bowden	Bath & North East Somerset Council
Tracey Cox	Clinical Commissioning Group
Morgan Daly	Director for Communities - Healthwatch B&NES
Councillor Michael Evans	Bath & North East Somerset Council
Diana Hall Hall	Healthwatch Representative
Bruce Laurence	Bath & North East Somerset Council
Councillor Tim Warren	Bath & North East Somerset Council
Councillor Eleanor Jackson	Bath & North East Somerset Council (Observer)

23 **WELCOME AND INTRODUCTIONS**

The Chair welcomed everyone to the meeting.

24 **EMERGENCY EVACUATION PROCEDURE**

The Democratic Services Officer drew attention to the evacuation procedure as listed on the call to the meeting.

25 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Ashley Ayre (substitute Jane Shayler) and John Holden.

26 **DECLARATIONS OF INTEREST**

There were no declarations of interest.

27 **MINUTES OF PREVIOUS MEETING - 7 SEPTEMBER 2016**

The minutes of the previous meeting were approved as a correct record and signed by the Chair subject to the following amendment:

Page 3 paragraph 6 delete the words “providing information for the health commissioners” and replace with “collating commissioning plans for the forthcoming year”.

28 **TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIR**

The Chair informed the Board that there was one item of urgent business. This was a programme update regarding “Your Care Your Way”. The reason for urgency was the need to update the Health and Wellbeing Board in advance of a key decision by the CCG Board and the Council.

29 **ITEMS FROM THE PUBLIC**

Sylvia Jones addressed the Board on behalf of “Protect Our NHS B&NES” regarding community health and social care services and concerns about the probable awarding of the community services contract to Virgin Care.

The Chair stated that a considered response would be provided in due course.

A copy of the statement is attached as *Appendix 1* to these minutes.

30 **YOUR CARE YOUR WAY UPDATE**

Sue Blackman, Project Lead, presented a programme update regarding “Your Care Your Way”. A copy of the presentation is attached as *Appendix 2* to these minutes. The programme is now at the preferred bidder stage and there will be two outputs from this stage – a full business case and a draft contract. There were six workstreams as follows:

- Commissioning – The due diligence process has been worked through. Work is being carried out to ensure a point of safe transfer on 1 April 2017.
- Communication – Including branding, future public engagement and participation strategy, for example, locality hubs.
- Workforce – Council and CCG staff and the impact on workforce transfer.
- Estates
- Finance – Including assurance, open book accounting and pooled budgets.
- Information Management and Technology – Including information governance, infrastructure and safe transfer.

No major risks or gaps had been identified in the due diligence process.

Outcomes based commissioning would look at:

- How much service did we deliver?
- How well did we deliver it?
- How much change/effect did we produce?

- What quality of change/effect did we produce?

Timescales are:

- November 2016 to March 2017 – Mobilisation
- April 2017 to March 2018 – Transition
- April 2018 to March 2020 – Transformation

Key dates are:

- 20 October – Provider event
- 25 October – Preferred bidder stage completed
- 10 November – Full business case to governing bodies

Tracey Cox stated that it was important to remember other providers and sub-contractors during this process and asked how Virgin Care was developing relationships with these providers. It was confirmed that Virgin Care had been given clear direction regarding engagement with other providers. They were being positive and proactive and also working with the voluntary sector.

Morgan Daly welcomed the work undertaken so far and asked whether there were ideas about reviewing this with community champions. It was noted that all community champions had been offered the chance to review the business case. There would be further opportunities for them to be involved at the end of the preferred bidder stage of the process.

RESOLVED: To note the update.

31 **SUSTAINABILITY AND TRANSFORMATION PLAN (STP) BRIEFING**

The Board received an update from James Scott, Senior Responsible Officer, regarding the work being carried out on the Sustainability and Transformation Plan (STP). The report outlined the progress made since the programme was established in April 2016 and the next steps towards delivering both the next phase of the plan development and commencement of the system-wide transformation work to be outlined within it.

The model of care across the workstreams was focussed around the needs of the individual. It was important to engage neighbourhoods in the delivery of care.

There were three main workstreams:

- Urgent and emergency care
- Planned care
- Prevention

There were also a range of supporting systems including estates, digital and workforce.

The difficulties recruiting and retaining key staff such as GPs and domiciliary care staff were noted.

There were currently broad design ideas and this would then progress to engagement with consultation at the appropriate times. It was acknowledged that there had been some debate around whether the footprint of B&NES, Swindon and Wiltshire was correct. There were no plans to change referral flows. The possible devolution deal and elected mayor proposals were also noted.

It was hoped that the STP would be published before Christmas.

James Scott explained that expertise across the footprint would be identified and that cross-fertilisation of ideas and good practice would be helpful. Two examples of this were the provision of fracture liaison services and diabetes services.

Morgan Daly pointed out that there was some anxiety from the public and stressed the need for a concrete timeframe for public involvement.

RESOLVED: To note the report.

32 **DEMENTIA FRIENDLY COMMUNITIES**

The Board considered a report by the Commissioning and Contracts Officer and the Consultant in Public Health.

Organisations on the Health and Wellbeing Board were invited to become members of the B&NES Dementia Action Alliance (DAA). This would involve signing up to the National Dementia Declaration for England and submitting a short Action Plan setting out three actions that the organisation would do to contribute to delivering better quality of life for people living with dementia and their carers. Membership would provide a visible commitment to improving the lives of those people with dementia.

Cllr Warren supported the proposal and asked about the availability of training for both councillors and Council staff regarding dementia. It was noted that this training was available and that some councillors had already a session. Healthwatch also agreed to publicise and encourage training in this area. Councillor Jackson asked that any training should also be extended to include development management officers to assist them in ensuring that building developments were suitable for those suffering from dementia.

Mike Bowden noted that there was also a B&NES child friendly alliance and suggested that the two organisations could work together.

Morgan Daly proposed that organisations signing up to the DAA could provide an update regarding the actions they have signed up to.

RESOLVED:

(1) That organisations on the Health and Wellbeing Board become members of the B&NES Dementia Action Alliance (DAA), thus signing up to becoming dementia friendly organisations.

(2) To request that organisations signing up to the DAA provide an update to the

Health and Wellbeing Board regarding the actions they have identified and progress within six months.

33 **B&NES HEALTH PROTECTION BOARD ANNUAL UPDATE 2015-16**

The Board considered a report by the Health Protection Manager giving an update on progress made by the Health Protection Board on the priorities and recommendations made in the 2015-16 report, highlighting the key areas of work that has taken place in 2015-16 and identifying priorities for the next 12 months. A copy of the presentation is attached as *Appendix 3* to these minutes.

It was noted that on page 7 of the report the total number of cases of clostridium difficile infection was 83 and not 237 as printed.

The Health Protection Board had been set up to ensure that local partners have the relevant plans in place. Members of the Board plan and identify public protection risks, provide mutual challenge and are able to build relationships with partner organisations.

There were three amber rated priorities in 2014-15 as follows:

- Fully operationalise health protection plans in B&NES – it was noted that a plan is in place but still needs to be tested.
- Help to ensure resilience of health emergency planning in B&NES.
- Improve uptake in all childhood immunisation programmes.

There was one red rated priority regarding improving the uptake of flu vaccination in target groups. This had still not improved although more vaccinations had taken place there had been an increase in the number of people in each target group category.

The following areas of work were highlighted:

- Work was being carried out in schools to raise awareness of antimicrobial resistance by the use of antibiotics. A poster competition was being run for Year 3 pupils in all B&NES schools.
- Work was being carried out to raise awareness of ticks and lyme disease among the public and frontline healthcare staff. Posters and leaflets have been produced.
- Projects to address inequalities in health screening were underway.

The Board welcomed the work being carried out and thanked officers for the very clear and comprehensive report. There was a clear link to the work of the Health and Wellbeing Board.

It was noted that a national advertising strategy for the flu vaccine would begin today. This would include radio, TV and magazine advertising. Flu vaccinations are now available at local pharmacies as well as GP surgeries.

The Board also welcomed the work being carried out to address inequalities in health screening, in particular for those people with learning difficulties. Healthwatch

would be keen to help to disseminate any information around this issue as required.

The Chair stressed the importance of antibiotic guardians and was keen to publicise this area of work.

RESOLVED: To note the B&NES Health Protection Annual Report 2015-16 and the following priorities for the Health and Wellbeing Board for 2016/17:

- (1) Assurance: to continue to monitor performance of specialist area, identify risks, ensure mitigation is in place and escalate as necessary.
- (2) To support the B&NES Antimicrobial Resistance Strategic Collaborative.
- (3) To continue to ensure that the public are informed about emerging threats to health.
- (4) To support the review of the Bath Air Quality Action Plan and support the implementation of the actions in the Saltford and Keynsham Air Quality Action Plans.
- (5) To increase the uptake of MMR vaccination in B&NES.
- (6) To improve the uptake of flu vaccinations in at risk groups, pregnant women, children and health care workers and support the STP work-stream to run collective campaigns for the influenza and pneumococcal vaccine.
- (7) To continue to reduce health inequalities in screening programmes.

34 **ANNUAL DIRECTOR OF PUBLIC HEALTH REPORT: GET FRESH - HEALTH AND WELLBEING IN BATH AND NORTH EAST SOMERSET**

The Board considered a report by the Director of Public Health regarding the state of public health in the area.

The Director explained that this was a time of paradox and contradiction for example:

- There is a great interest in cooking and local farmers' markets while at the same time the use of food banks is increasing.
- Leisure centres and cycleways provide good services but over 50% of adults are overweight leading to an increase in diabetes.
- Educational attainment is improving but the UK is currently placed in only 16th place for child wellbeing.
- Life expectancy is increasing but the gap between rich and poor remains unchanged. The number of care homes has also decreased by 10%.
- Fewer people are now smoking but the cost of some types of alcohol is extremely cheap.
- There are excellent building developments taking place within B&NES but global warming remains a threat and bio-diversity is falling.

There were many challenges which need to be considered and it is important to take stock and focus on priorities. The Board thanked the Director for his excellent report and stated that it should be disseminated via social media and the local press. It will also be presented to the CCG Board. Board members also suggested that the Director should produce a short podcast to promote the messages contained in the report.

RESOLVED:

- (1) To note the annual report.
- (2) To agree that the areas of focus in the report reflect current public health priorities in Bath and North East Somerset.
- (3) To endorse the importance of preventative and health protection services to the residents of Bath and North East Somerset.
- (4) To request that the report and its key messages be disseminated as widely as possible.

The meeting ended at 12.10 pm

Chair

Date Confirmed and Signed

Prepared by Democratic Services