HEALTH AND WELLBEING BOARD

Minutes of the Meeting held

Monday, 4th December, 2023, 2.30 pm

Paul Harris Curo

Laura Ambler Integrated Care Board

Councillor Alison Born Bath and North East Somerset Council

Scott Hill Avon and Somerset Police

Sara Gallagher Bath Spa University

Will Godfrey Bath and North East Somerset Council

Julia Griffith B&NES Enhanced Medical Services (BEMS)

Nicola Hazle Bath and North East Somerset, Swindon and Wiltshire

(BSW) Integrated Care Board (ICB)

Mary Kearney-Knowles Bath and North East Somerset Council

Alex Luke AWP

Kate Morton Bath Mind

Stephen Quinton Avon Fire & Rescue Service

Val Scrase HCRG Care Group

31 WELCOME AND INTRODUCTIONS

The Vice-Chair welcomed everyone to the meeting.

32 EMERGENCY EVACUATION PROCEDURE

The Democratic Services Officer drew attention to the emergency evacuation procedure.

33 APOLOGIES FOR ABSENCE

Apologies for absence were received from:

Cllr Paul May

Sophie Broadfield
Cara Charles-Barks
Jayne Davis
Sara Gallagher
Alice Ludgate
Rebecca Reynolds
Alison Smith (Alex Luke substituting)

34 DECLARATIONS OF INTEREST

Nicola Hazle declared an interest in item 12 as a CQC Inspector but confirmed that as she did not undertake the role within the BSW area.

35 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIR

There was no urgent business.

36 PUBLIC QUESTIONS, STATEMENTS AND PETITIONS

Gail Grant read a statement emphasising the importance of parks and green spaces to health and wellbeing and expressing concern that access to Royal Victoria Park was unsafe due to the lack of clear places to cross roads and the behaviour of users of bikes, e-scooters and in particular, cars which were being driven above the speed limit in the internal park roads.

Scott Hill undertook to contact Ms Grant to discuss her concerns and it was also agreed that her comments be fed back to the Liveable Neighbourhoods Team.

37 MINUTES OF PREVIOUS MEETING

RESOLVED that the minutes of the meeting of 26 September 2023 were approved as a correct record and signed by the Chair.

38 JOINT HEALTH AND WELLBEING STRATEGY - PRIORITY INDICATOR SET

Gareth Jones (B&NES Business Intelligence Team) gave a live demonstration of the Power BI report which would be used as one of the processes for monitoring the implementation of the Joint Health and Wellbeing Strategy. He confirmed that not all measures had been finalised and asked the Board for any comments on the work undertaken so far.

In response to questions, the Board was advised:

- 1. Some of the measures would be static, e.g., energy performance and so it was important to consider this process along with the complementary processes (1) reports from partners on relevant projects across the year; (2) exception reporting on delivery of all the actions in the Implementation Plan twice a
 - Year and (3) Development Sessions with the HWB that enable longer scrutiny and discussion of progress or delays within the implementation plan.
- 2. The air quality indicator referred to was nitrogen dioxide.
- 3. It would be possible to benchmark this data with the English average.
- 4. The indicator set would be finalised in time for Quarter 4 (February) and

- would be refreshed annually.
- 5. Board members would be able to access the data directly via a link.

Board Members raised the following comments:

- 1. It was useful to see the data in this format.
- 2. The data was a helpful articulation of what was being achieved, but it was generic, and it would be useful to also report on some specific examples.
- 3. Consideration needed to be given on how the indicators could translate to targets.

The Board RESOLVED to agree the priority indicator set and the proposed process for accessing and monitoring the indicators.

39 BETTER CARE FUND UPDATE

Laura Amber introduced the item which sought the Board's approval for the Quarter 2 return.

Board Members raised the following comments:

- 1. There was a need for a strategic discussion about the use of the Better Card Fund over the next 18 months to ensure that the fund was being used in the most effective way.
- 2. There needed to be a more imaginative approach to the funding as continuing to roll out current activity may not get the best return.
- 3. It was agreed that it would be useful to have an in-depth discussion at a future meeting of the Board.

The Board RESOLVED to ratify the Quarter 2 return.

40 AGE-FRIENDLY COMMUNITIES

The Board received a presentation (attached to the minutes) on a jointly funded 2-year programme by Age Concern and St John's Foundation working towards Bath and North East Somerset becoming an Age Friendly Community, as defined by the World Health Organisation (WHO) with contributions from:

Simon Allen, Chief Executive of Age Concern, Bath Louise Harvey: Executive Director, St. John's Foundation

Melissa Hiller: CEO, Rice Clinic Becky Brooks: Director, 3SG

The Board was asked to support the programme as follows:

- 1. Provide political support for the application to the WHO to become an Age Friendly Community.
- 2. Nominate a representative from the HWB to sit on the Steering Group.
- 3. Receive Quarterly Reports on the progress of the Ageing Well/Bath & North East Somerset programme.

The Board considered the above request and responded as follows:

1. The Board was unanimous in supporting the programme, but in terms of "political" support, it was agreed that as the Health and Wellbeing Board was not a political body, a cross party motion to B&NES Council may be a more

- appropriate route for achieving "political" support. It was noted that "political" support was a requirement of the WHO application.
- 2. The request for nominations to sit on the Steering Group would be followed up after the meeting.
- 3. It was noted that the programme aligned with priorities (3) and (4) of the Health and Wellbeing Strategy and reports to the Board could be picked up through the exception reporting and/or Development Sessions.

The Board RESOLVED to support the Age-Friendly Communities programme.

41 BSW PRIMARY AND COMMUNITY CARE DELIVERY PLAN

Caroline Holmes, Deputy Place Director (Swindon Locality BSW ICB) gave a presentation on the BSW Primary and Community Care Delivery Plan as included in the agenda pack.

She asked the Board to consider the following questions:

- 1. Are the actions and interventions we have identified the right ones to help deliver our transformation priorities?
- 2. Which of the actions and interventions are most important to you and why?
- 3. In what order do you think we should undertake or prioritise these?
- 4. Which groups, individuals and organisations do you think are most important to involve in further work around the actions and interventions? How should we best engage with them?
- 5. Do you have any other comments, ideas or observations that you would like to make?

The following comments were raised by Board Members:

- 1. Contracts and commissioning were significant issues for the Third Sector.
- 2. A co-ordinated approach was important to make sure all relevant organisations were involved.
- 3. Co-production with communities was essential to ensure their priorities were identified.
- 4. The plan was written for people within the system and consideration needed to be given to making the language more accessible to all.
- 5. More information was required on the financial modelling.
- 6. Priorities needed to be more explicit in articulating support for the workforce.
- 7. There needed to be more information on what difference would be made on the ground, e.g., to families of children whose learning had suffered as a result of the Covid pandemic.
- 8. The model needed to be flexible to allow for the local differences in the B&NES, Swindon and Wiltshire Communities.

It was noted that the plan would be finalised towards the end of the financial year and Laura Ambler undertook to update the Board at a future meeting.

The Board RESOLVED to note the presentation.

42 ICB AND DEALING WITH PATIENT SAFETY

Gill May, ICB gave a presentation (attached to the minutes) on Care Quality Commission (CQC) inspections of Integrated Care Boards (ICBs).

In response to questions from Board members, it was confirmed:

- 1. There would be one dashboard for all providers which Board members would be able to see, but this would take a few months to develop.
- 2. The inspections would include services provided for all age groups. Feedback would be used from existing data and therefore children and young people would not need to participate in a separate data gathering exercise.
- 3. In terms of how the HWB Board could interact with the System Quality Groups, Laura Ambler would be a link between the groups and the Board.

The Board RESOLVED to note the update.

43 TERMS OF REFERENCE - REVIEW

The Board RESOLVED to agree the minor changes to the Terms of Reference.

44 SEXUAL HEALTH BOARD ANNUAL REPORT 2022/23

Board Members acknowledged the positive achievement of preventative work undertaken to minimise Mpox cases in B&NES throughout the outbreak.

The Board RESOLVED to note the report.

45 PHARMACY CONSOLIDATION AND ASSOCIATED PHARMACEUTICAL NEEDS ASSESSMENT (PNA) SUPPLEMENTARY STATEMENT

The Board RESOLVED to note that a supplementary statement would be published.

KEY MESSAGES FROM THE MEETING

- 1. Progress on developing performance indicators for H&WB priorities welcomed and supported.
- 2. Good progress being made on this year's Better Care funded projects. A future meeting to include a strategic discussion on future priorities for the fund.
- 3. Unanimous support for developing B&NES as an Age Friendly Community which will help deliver priorities 3 and 4 of the H&WB strategy. Thanks to Age UK and St John's for their support and leadership on the project.
- 4. Good to hear of ICB led plans to transform primary and community services across BSW.
- 5. A CQC inspection programme is being developed for ICBs. This together with provider inspections and the new local authority inspection should provide assurance of health and care quality on a community basis.

The meeting ended	at 4.10 pm	
Chair		

Date Confirmed and Signed	

Prepared by Democratic Services