

HEALTH SELECT COMMITTEE

DRAFT MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 28 JULY 2015 AT KENNET ROOM - COUNTY HALL, TROWBRIDGE BA14 8JN.

Present:

Cllr Chuck Berry, Cllr Mary Champion, Cllr Christine Crisp, Cllr Mary Douglas, Cllr Sue Evans, Cllr David Jenkins, Cllr Bob Jones MBE, Cllr Gordon King, Cllr John Knight, Cllr Paul Oatway, Cllr Jeff Osborn, Cllr John Walsh and Irene Kohler and Cllr Helen Osborn (Substitute)

Also Present:

Cllr Peter Edge, Cllr Magnus MacDonald

45 Election of Chairman

Adam Brown, Democratic Services Officer, sought nominations for Chairman for the 2014/15 municipal year.

Resolved:

Councillor Chuck Berry was elected Chairman of the Health Select Committee for the 2015/16 municipal year.

46 Election of Vice-Chairman

The Chairman, Cllr Chuck Berry, sought nominations for the position of Vice-Chairman of the Health Select Committee for the 2015/16 municipal year.

Resolved:

Councillor Gordon King was elected Vice-Chairman of the Health Select Committee for the 2015/16 municipal year.

47 Apologies

Apologies were received from:

Cllr Chris Caswill
Cllr Keith Humphries
Cllr Nina Philips
Diane Gooch
Steve Wheeler

Cllr Chris Caswill was substituted by Cllr Helen Osborn.

48 Minutes of the Previous Meeting

Resolved

To confirm and sign the minutes of the previous meeting held on 5 May 2015 as a true and accurate record, subject to the following amendment:

Minute No. 39 – Joint Health and Wellbeing Strategy Consultation

“To respond with the following –

“The Committee is grateful for the chance to comment and would recommend the following:

- **That an action plan is essential**
- **That the concept of wellbeing appears to be unduly focused on mental illness as oppose to housing, poverty, isolation, and loneliness as demonstrated by the diagrams within the document.**
- **That greater clarity is required around what is specific investment in early intervention.””**

49 Declarations of Interest

50 Chairman's Announcements

- a) CQC Mental Health Warning (national press release previously circulated)

The previously circulated press release was referred to.

- b) Dental Health Briefing Update

The update in the agenda pack was referred to.

- c) Salisbury Hospital Staff Comments and AGM

It was proposed that a letter of congratulations be sent to the staff at Salisbury Hospital.

- d) Care Cap Postponed

The announcement was referred to.

Resolved

To send a letter of congratulations from the Health Select Committee to the staff at Salisbury Hospital

51 **Public Participation**

There were no questions or statements received.

52 **Public Health Service Plan**

Frances Chinemana, Consultant in Public Health was in attendance to present the Public Health Service Plan.

The first page of the service plan set out the broad public health environment in Wiltshire. Wiltshire was described as comprising of a generally healthy population. It was noted that there is however, pockets of deprivation coupled with an aging population. The priorities set out in the Joint Strategic Assessment (JSA) and the Health and Wellbeing Strategy were important in showing what the significant problems were, both locally and nationally.

The strategic priorities of the service plan were listed, these included:

- Protecting the population's health from major incidents and other threats (protect)
- Enabling early intervention and reducing preventable ill health to reduce the number of people dying prematurely (prevent)
- Ensuring that people make informed choices and live healthier lifestyles (promote)
- Tackling health inequalities
- Ensuring all of our services are working together to improve health outcomes as measured through PHOF (partnership)

The follow services were brought together under the service plan: Public Health, Public Protection, Leisure, Occupational Health, Knowledge and Information. Occupational Health had been integrated in order to help improve the wellbeing of the Wiltshire Council workforce. The Knowledge and Information Team had provided the information for the Joint Strategic Assessment (JSA).

The service plan was noted as providing the overarching objectives for the schemes, which they would all be working towards.

Demand trends for Wiltshire were explained. Both Wiltshire's ageing population and the pressure of military civil integration created an increase in demand for all services within the Council. Obesity was a key issue, with 62% of Wiltshire's adult population categorised as overweight or obese.

There were five main strategic priorities. Priority one was to protect the population from major incidents and other threats. Priority two was to enable early intervention and reduce preventable ill health and increase healthy life expectancy. Priority three was to ensure that people make informed choices and live healthier lifestyles. Priority four was to ensure all of our services work together to improve health outcomes as measured through PHOF. Priority five

was to tackle health inequalities. Much of priority five was explained as being linked to social deprivation, including age and social isolation.

It was confirmed that there were six mobile air quality units out in Wiltshire constantly monitoring air quality in their locations. The information they generated could be viewed through a Wiltshire air quality website. Their locations were noted as Salisbury, Marlborough, Devizes, Calne, and Bradford on Avon. Two other mobile air quality units were available for use in emergencies.

It was explained that the Public Health budget had not yet been cut, but indications suggested it would be cut by 4% in the future, with a potential £1.4million cut for Wiltshire. Maggie Rae, Corporate Director at Wiltshire Council, had lobbied the Secretary of State regarding this. A risk assessment had also been performed to identify areas which would be looked at to meet cuts.

A question was asked regarding the combination of sexual health and contraception as one priority. It was asked if more focus was needed on relationship aspects of sexual health regarding making the right choices. It was explained that information on services regarding this is provided.

Regarding the priority to ensure people make informed choices it was asked what the motivation was for people to change their lifestyles. Incentives were at a community and an individual level. Health Trainers were available around the county to help with any aspects of change. It was noted that 45% of those who have put in place lifestyle changes continue to maintain them 5months later.

Figures regarding alcohol related crimes on page six of the report were noted as coming from the police through a data sharing agreement.

It was clarified that the black incident at the Royal United Hospital was due to a lack of flow through the hospital, and that no patients from Wiltshire were a part of this incident.

Resolved

- 1. To note the Public Health Service Plan**
- 2. To bring details of service cuts to the Health Select Committee as soon as Cabinet is aware**

53 Public Health England - Local Health Profiles

Frances Chinemana was in attendance to present the Local Health Profile for Wiltshire from Public Health England.

Children's health was explained as being a key area of early intervention. Public Health had been working with the CCG, recently holding the first Obesity

Summit to develop a strategy around tackling the issue. It was explained that adult obesity was not as much of an issue as child obesity, but that the preference would be to reduce the figure from its current 22%.

Key problem areas were noted as being in the Public Health Service Plan. There included: smoking, malignant melanoma, and self-harm.

In response to these key problem areas it was explained that there was a stop smoking service available, a crucial danger area was noted as smoking during pregnancy and time of delivery. With regards to malignant melanoma it was important to ensure information was available to those concerned about their skin, and to provide education for those working outdoors and those who may be in a position to diagnose or notice the warning signs if malignant melanoma through their work. A new suicide prevention group had been set up within the previous six months to focus on suicide and self-harm.

The Committee noted that information on dental health was not included within the Public Health Service Plan; it was asked if this may be included in the future. It was explained that a member of staff would be going through a relevant survey and that this would be brought to the Committee when available.

It was noted that whilst the number of road incidents remained a large number this was most likely part of an overall downward yearly trend.

The Committee considered that it would be useful for indicators to be placed by each issue to indicate whether there is an overall improving or deteriorating trend. It was noted that this could be implemented.

Resolved

To note the Local Health Profile for Wiltshire from Public Health England

54 Task Group Update

a) Better Care Plan Task Group

Cllr John Walsh explained that a meeting had been arranged before the first main meeting of the Task Group to examine available data to help in the drafting of the Task Group's terms of reference to ensure that they are focussed.

The Task Group would be looking at key elements of the Better Care Plan due to its significance in improving overall health within Wiltshire. The Task Group was explained as being preceded by the Transfer to Care Task Group which concluded that it would be useful for a task group to look at the Better Care Plan and leave the task group to decide on areas of focus within this.

b) Passenger Transport Review (joint with Health Select Committee, Children's Select Committee and Environment Select Committee)

Cllr Peter Evans explained that the joint task group had recently formed and had a long process ahead of them. The task group had their first three meetings on 10 June, 16 June and 09 July 2015.

The terms of reference would be presented to the 01 September 2015 Environment Select Committee meeting for approval.

c) Help to Live at Home Task Group

Cllr Gordon King explained that the Task Group had been at work for 8-9 months.

The Task Group had interviewed AgeUK on their links with the voluntary sector and how it could help improve the quality of care at home.

Wiltshire Clinical Commissioning Group (CCG) had been interviewed about how they tasked and prioritised their inspections. The Task Group also spoke to Acute NHS Trusts regarding their management of patient flow. Two additional of the Acute Trusts would be spoken to in the future regarding this.

Upcoming activities for the Task Group included visits to Help to Live at Home clients, and delivering the Task Group's draft final report to the Health Select Committee in September 2015.

d) Joint Health Scrutiny Working Group – Avon and Wiltshire Partnership

The written update in the agenda pack was referred to.

e) Obesity and Child Poverty Task Group (joint with Children's Select Committee)

Cllr Magnus MacDonald explained that the first Wiltshire Obesity Summit on 09 July 2015 had provided the Task Group with a large amount of information to consider. All aspects of the Local Authority's activities were noted as being critical to the issue.

The terms of reference had been agreed by the Task Group at their 22 July 2015 meeting.

Volunteers for membership on the Task Group were sought as two members had stepped down. Cllr John Knight expressed his willingness to volunteer.

It was noted that part of the Task Group's work was to explore the possible extent of a link between poverty and obesity.

Resolved

- 1. To endorse the Obesity and Child Poverty Task Group's terms of reference.**
- 2. To note the Obesity and Child Poverty Task Group's revised membership.**
- 3. To note Cllr John Knight's interest in joining the Obesity and Child Poverty Task Group.**
- 4. To note the update on the Obesity and Child Poverty Task Group's activity.**

f) Continence Services Task Group

Ted Wilson from Wiltshire CCG was in attendance to present Continence Service briefing note provided in the agenda pack.

The briefing note was explained as indicating that some changes around accessibility, availability, and delivery of products had been made to the service.

A review would be undertaken at the end of the year regarding the contract which would be taking into consideration complaints and compliments. Comments would be looked at on a case by case basis.

It was asked if a report could be provided in three months on progress, with particular focus on delivery frequency as storage was a particular concern for those living in small accommodation. Mr Wilson explained that the frequency of delivery was among the best in the country and that those with difficulties are looked at on a case by case basis.

As a part of the Better Care Plan it was noted that there is a prevention work scheme and a board chaired by Frances Chinemana which examines prevention work needed. Work was taking place with care homes regarding continence and hydration, as urinary tract infections (UTIs) were found to be a major cause of hospital admissions.

It was explained that pull ups were not recommended by the CCG but would be discussed case by case to examine need. Members expressed that this demonstrated a lack of flexibility and could result in social isolation. Mr Wilson stated that this was a point he could take back as the social aspect was a cause for concern.

A £1million overspend was noted within the budget. It was suggested by the Committee that a top-up could be implemented where the customer pays the

difference in price between products. Mr Wilson stated that this was a scheme that could be looked into.

Paul Lefever, Healthwatch Wiltshire, stated that pull ups were important in helping people to get out into the community and continue life as best as possible. They were noted as also being useful for those with learning difficulties.

Resolved

- 1. To receive a progress report on Continence Services in three months.**
- 2. For the Continence Services Task Group to compose a letter in response to the briefing note provided by the Wiltshire CCG on Continence Services.**

55 Forward Work Programme

The Forward Work Programme was presented.

Resolved

To note the Forward Work Programme

56 Urgent Items

There were no urgent items.

57 Date of Next Meeting

It was noted that the next meeting would be on Tuesday 22 September, 2015 at 10.30am in the Kennet Room - County Hall, Trowbridge BA14 8JN.

(Duration of meeting: 10.30 am - 12.30 pm)

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