

HEALTH AND WELLBEING BOARD

MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 26 NOVEMBER 2015 AT KENNET ROOM - COUNTY HALL, TROWBRIDGE BA14 8JN.

Present:

Cllr Baroness Scott of Bybrook O.B.E (Chairman), Dr Peter Jenkins (Vice Chairman), Dr Simon Burrell, Dr Toby Davies, Dr Richard Sandford-Hill, Christine Graves, Angus Macpherson, Cllr Keith Humphries, Cllr Laura Mayes, Nikki Luffingham, Dr Gareth Bryant, Carolyn Godfrey, Maggie Rae, Cllr Sheila Parker, Chief Executive or Chairman Bath RUH, Deborah Fielding/Simon Truelove and Toby Sutcliffe

83 **Chairman's Welcome and Introduction**

The Chairman welcomed all to the meeting, and formally introduced Dr Peter Jenkins (Wiltshire CCG) as Vice-Chairman of the Health & Wellbeing Board.

84 **Apologies for Absence**

The meeting noted the following apologies:

- Chief Constable Mike Veale
- Peter Hill from Salisbury, represented at the meeting by Dr Nick Marsden
- Ken Wenman from SWAST, represented at the meeting by Nick Wilson

85 **Minutes of the Previous Meeting**

The meeting considered the minutes of the previous meeting.

Resolved

To approve and sign the minutes of the previous meeting held on 24 September 2015.

86 **Declarations of Interest**

There were no declarations of interest.

87 **Chairman's Announcements**

(A) Child Adolescent and Mental Health Services Transformation Plan

In addition to the text of the Chairman's announcement in the pack, the meeting noted that a further additional £600m funding for mental health had been announced in the spending review.

This should mean that significantly more people will have access to talking therapies every year by 2020. NHS England's Mental Health Taskforce will report in early 2016 and the government will work with them to set out transformative plans, including for perinatal mental health and coverage of crisis care.

(B) Update on relocation of services from 'the Min' (RNHRD)

The Chairman invited James Scott (Bath RUH) to comment on the plans. It was noted that the changes affected a small number, under 100, from Wiltshire; and that patients had been written to about this change.

88 **Public Participation**

(A) Dementia Care Services

The Chairman drew the meetings attention to a letter she had received from James Gray MP on provision dementia care services in the north of the county.

Cllr Keith Humphries, Cabinet Member for Adult Services, stated that a response had been provided by the NHS and Wiltshire Council. The balance of services across the county had been discussed at the Dementia Delivery Board, who were now looking at how resources could be used best for communities. It was noted that inpatient beds provision had been reviewed.

Chris Graves, Healthwatch, stated that it was important to note that some people don't always want to access day care centres, and that Wiltshire should offer flexible, appropriate services. In these circumstances an enhancement of general services would be preferable.

(B) RUH Hopper Bus

Cllr Jeff Osborn presented an update on the Hopper petition, following the receipt of further signatures. The petition read as follows:

"We, the undersigned, call upon Wiltshire Council to reconsider any changes to the RUH Hopper service and call upon the Council to re-instate the £130,000 that has been cut from the Budget to fund this service. It is understood that Wiltshire Council must seek savings but any change in the way this service is provided would cause hardship for those who rely on this valuable service to the Bath RUH.

At present this service provides a door to door service that is disabled friendly, and it is vital this service is retained in its present form.

We would ask Wiltshire Council to remember Wiltshire is the County, "Where everyone matters".

Cllr Osborn emphasised the strong feeling in the community regarding this matter.

Dr Peter Jenkins, Chair of the Wiltshire CCG, stated that he was aware of the strength of feeling, and would take due account of it when considering the matter.

Cllr Helen Osborn, speaking in support of the petition, stated that removing the service could cost authorities more in the long run if access to services deteriorated.

The Council and CCG gave a commitment to comment further once the consultation period had ended.

89 **Children's Community Health Services**

The Board considered an update on the issues, noting that a bidder had been jointly selected; that officers were working with bidder to start service on the 1st April, which was recognised as a tight timescale; that officers were aware of the concerns of users and were working with user groups so that these can aired and addressed; and that Virgin was already working in others areas.

Resolved

To note the approval of the three commissioning organisations to progress to award of contract with Virgin Care Services Ltd.

90 **Wiltshire Safeguarding Adults Board**

Heather Alleyne, Safeguarding Board Manager, presented the Annual Report and also introduced chair of the Safeguarding Adults Board Chairman, Richard Compton.

Issues highlighted in the course of the presentation and discussion included: the reductions in funding that had impacted on partners abilities to participate; the need to focus on outcomes for users across the partners; the Care Act 2014 and its implications; that the Act recognises that partners need to work together to meet the requirements of the act and protect Adults from harm; the need to put users views at the heart of reviews, not just looking at organisational process; a recent serious case review and the action plan; the implications of

recent Supreme Court rulings; the training provided and coordinated; that there had been over 3000 alerts, 912 of which went on to investigation; the increasing awareness of reporting arrangements; and the development of prevention strategy. Chris Graves, commended the prevention strategy as a priority.

In response to a question from the Chairman, James Cawley (Associate Director) stated that the number of alerts had increased, partly as a result of the work with providers and families to encourage make more alerts, so that the Board had better picture of the issue across the area. It was noted that despite the increased number of alerts, the number of investigations that resulted was relatively constant.

Resolve

To note the report.

91 Winterbourne View Update

Barbara Smith presented the report which updated the Board on the Transforming Care Project.

Issues highlighted in the course of the presentation and discussion included: that the project was funded for a fixed term by the Department of Health; the progress that had arisen out of the Winterbourne View concordat; how services and housing facilities had been commissioned; how people can be supported to stay within their communities; the involvement of the users in developing the Daisy project; how quality assurance is being improved; the implications of personal budgets for those with Learning Difficulties (LD); improving training and skills for those delivering care in this area; the improvements that are required to improve services for people with Autism; how Wiltshire's performance compares to other parts; and that the Daisy project will be able to take on sectioned clients.

In response to an issues raised by Chris Graves , Healthwatch, regarding the impact on the wider LD community, Barbara Smith stated that work had already been down with a wide range of service users, along with other consultation, and that the LD Partnership Board were fully engaged.

Chris Graves went on to mention to opportunity to use the quality checkers project involving people with LD who are trained to engage with changes.

Maggie Rae, Corporate Director, highlighted the importance of the fact that the Daisy Centre is registered by the Care Quality Commission (CQC), and that this would set the tone of how it will move forward as a residential care centre.

The Chairman highlighted the importance of involving the Wiltshire Parent Carers forum, and the need to ensure a smooth transition from children's to adult's services.

Resolved

To note:

- a) That the Winterbourne View, Transforming Care Project action plan will need further work to deliver its outcomes, and continued oversight post December 2015.**

- b) That further work will be required to meet the NHS England Transforming Care agenda over the next year.**

92 **Better Care Plan**

James Roach presented the update, a copy of which was circulated as a supplementary paper.

Issues highlighted in the course of the presentation and discussion included: Action to reduce infections and falls, and how people can be diverted from admissions once they present at hospital; the impact of the complexity and acuteness of patients; the limited number of weekend discharges; how reducing Delayed Transfers of Care (DTOCs) had been achieved with fewer beds; the key lessons from the recently launched Home First project in Salisbury; how co-locating professionals can increase efficacy; the key areas of operational focus for the remainder of the year, including revisions to communications to the public and professional partners as to how they can reduce admissions, and manage their care in the community; the future challenges and risks, including workforce challenges; the workforce action group developing a focus on four keen themes; how shadowing and shared training can help integrate understanding and approaches; how the choice agenda is being managed within the plan; how patient's and volunteers sector's views are fed into the plan; the intentions for commissioned services in 2016/17;

James Scott, Bath RUH, thanked the officer for the comprehensiveness of the report, and asked when more information on the Home First project would be presented. James Roach stated that he would hope to share info at the end of month and January, following formal evaluation of its impact, for which there were encouraging signs already. In response to a question from the Chairman, it was noted that the Home First project could expand in 2016.

James Scott discussed how RUH was looking to target frequent admissions, and had identified a cohort including younger people abusing some substances. He wanted to work on how this can be expanded and how Mental Health

services can be targeted to prevent admissions. Debbie Fielding, stated that some was already underway in other areas, and hoped this good work could be replicated elsewhere. The Chairman hoped that a joint approach could be taken and asked that officers work on bringing a paper on this matter to a future meeting.

Resolved

To note the update.

93 **System Capacity Management Plan**

James Roach, Debbie Fielding and Jo Cullen presented the report which provided an update following on from the report to the last meeting.

Issues highlighted in the course of the presentation and discussion included: The view that there is capacity to cope with high demand periods if it is allocated properly; a summary of key actions; the key role of the Ambulance Trust, and their awareness of alternatives within the community; how alternative capacity can be accessed; how arrangements for reviewing patients can be applied consistently so they capacity can be improved; the accuracy of patient information to drive proactive action; how pathways for types of care, including palliative, can be managed well; and how professionals are made aware of key information

Resolved

- 1. To review and sign off this plan**
- 2. To consider the capacity and demand analysis underpinning this in an accompanying presentation**
- 3. To launch weekly situation reports to begin on the 1st December**
- 4. To agree to receive a further update at the January Health and Wellbeing Board**

94 **Winter Communications Messages**

Debbie Fielding, Sarah Maclennan and Tim Edmonds presented the report which provided an update on the joint communications plan.

Issues highlighted in the course of the presentation and discussion included: That the document will continue to evolve; how social media and local radio is

used; the circulation of printed material to a range of settings; and that work was well underway ahead of December.

Christine Graves, Healthwatch, welcomed the report.

Officers confirmed, in response to a question from the Chairman, that parishes and Area Boards were part of the communication plan.

Resolved

To note the joint communications plan agreed by Wiltshire Council and Wiltshire's Clinical Commissioning Group and supports the intention of the plan to prevent ill health and to reduce pressures on public services.

95 **Public Health Annual Report 2014/5**

Maggie Rae, Director of Public Health, presented the Annual Report.

Issues highlighted in the course of the presentation included: How partnership working had contributed to the successes highlighted in the report; how communities were involved in solutions; and the impact of specific projects, such as Beat the Streets.

Nicky Mathews, NHS England, commended the report for being very clear and user friendly.

Resolved

To note the publication of the Annual Report

96 **Date of Next Meeting**

The meeting's attention was drawn to the changes to meeting dates, and the Chairman wished all a Happy Christmas.

97 **Urgent Items**

There were no urgent items

(Duration of meeting: 3.00 - 5.02 pm)

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