



# Minutes

of the Meeting of the

## Health & Wellbeing Board

### Monday 28 October 2019

held at Town Hall, Weston-super-Mare, North Somerset

Meeting Commenced: 2.00 p.m. Meeting Concluded: 3.25 p.m.

#### Councillors:

P Mike Bell (Board Chairman)	A Wendy Griggs
A Don Davies	P Mark Crosby
A Catherine Gibbons	Richard Tucker

P: Present

A: Apologies for absence submitted

**Members of the Board:** Sheila Smith (Director of People & Communities, NSC), Matt Lenny (Director of Public Health, NSC), Colin Bradbury (Area Director, BNSSG CCG), Georgie Bigg (Chair, Healthwatch, North Somerset), Paul Lucock, (Acting CEO, Voluntary Action North Somerset)

**Other Councillors in Attendance:** Councillors Ann Harley, Ruth Jacobs, Geoff Richardson

**Also in attendance:** Jo Walker (Chief Executive, NSC), Mike Newman (Strategy & Policy Development Manager, NSC), Michèle Chesterman (Democratic & Electoral Services Officer, NSC), Jeremy Blatchford (Avon Local Councils Association)

#### **HWB Chairman's Welcome**

1

The Chair welcomed all to the first meeting of the newly convened Health and Wellbeing Board.

#### **HWB Declaration of Disclosable Pecuniary Interest by Members (Standing Order 37) (Agenda Item 3)**

2

None

#### **HWB Minutes of the Meeting held on 4 March 2019 (Agenda Item 4)**

3

**Resolved:** that the minutes of the meeting of the People and Communities Board held on 4 March 2019 be approved as a correct record

## **HWB Agreement of Terms of Reference (Agenda Item 7)**

**4**

The Strategy & Policy Development Manager outlined the revised Terms of Reference for the North Somerset Health and Wellbeing Board. He asked for members to consider the detail in the terms of reference and whether the correct stakeholders were represented, at the right level and to advise if any additional members should be added.

Members asked whether the police should be represented on the Board. It was noted that a suggestion had been made to create a separate Community Safety Board or Panel to ensure that the Board remained focussed on health and wellbeing. However, this did not preclude representatives from agencies who were not represented on the Board from attending. The aim was to work as collaboratively as possible with a broad a range of health partners as possible. Therefore, it was agreed to co-opt, if necessary, for specific issues.

Members asked for clarification under 4.2.3 Non-Voting Members – GP Provider Representatives (Clinical Directors of the two North Somerset Localities). The Area Director, BNSSG CCG noted that there were two GP provider localities and two primary care networks. The Director of Public Health responded that this referred to the Chairs of the GP Locality Providers. The Chair asked members to advise of any additional health providers who should participate in the Board, for example, pharmacies.

A discussion took place on the number of voting members (7) and quoracy (5 voting members). It was agreed to allow voting Members to appoint substitutes.

### **Resolved:**

(1) that the representative of Avon Local Councils be added to the list of members of the Board.

(2) that 4.2.1 be amended to read Chief Officer (or appointed deputy), BNSSG CCG.

(3) that a clause be inserted to allow voting Members to appoint substitutes to attend in their place.

(4) that a clause be inserted around co-opting members for specific issues.

(5) that 4.2.3 be amended to read Chief Officer, Community NHS Provider.

(6) that the Area Director, BNSSG CCG contact the Strategy and Policy Development Manager, People & Communities with details of any additional health providers to be included on the Board.

(7) that Members of the Board contact the Strategy and Policy Development Manager, People & Communities with additional names for membership.

(8) that the Strategy and Policy Development Manager update the terms of reference and circulated to Board members for comments.

(9) that the terms of reference be reviewed and revised annually by the Board

## **HWB 5 Future Joint Strategic Needs Assessment (JSNA) Approach (Agenda Item 8)**

The Director of Public Health presented the report on the Joint Strategic Needs Assessment (JSNA). He informed members that it had been recognised that the current JSNA needed refreshing and the development of the new Health and Wellbeing Board along with the Health and Wellbeing Strategy provided the opportunity to develop a new approach. Models of future working based on local needs and opportunities and best practice from other JSNAs across the country had been examined. This work had informed a suggested new model of working based on developing a core data set by March 2020, providing easy to understand public facing information and the Health and Wellbeing Board commissioning up to three detailed investigations in health and wellbeing challenges facing North Somerset from April 2020. Regular updates would be provided to the Board on the implementation of the plan and learning that emerged from moving to a new model for the JSNA.

A discussion took place on data sources. It was noted that it was vital to identify a core set of data which had to be accessible and predicated on what the data was needed for. There were a range of quantitative and qualitative data evidence sources. Examples of qualitative data accessed included views collected by the local Healthwatch, local voluntary organisations, feedback given to local providers by service users; and views fed in as part of community participation within the JSNA and Health and Wellbeing Strategy process.

Members agreed that the JSNA was an exciting and positive move forwards and would be helpful in terms of prioritising work.

**Resolved:** that Members of the Health and Wellbeing Board endorsed the following next steps in developing the Joint Strategic Needs Assessment (JSNA):

(1) A new core data set for the JSNA be developed and made easily accessible to all partner organisations and the public by March 2020. This should provide an easy gateway to a range of local and national data sets that helped to describe local population needs and ways to improve outcomes.

(2) Based on that collection of data, a list of potential investigation topics to be developed by March 2020 for the Board to consider and then select up to three priority investigations for the 2020/21 year.

(3) Wider engagement on the development of the JSNA to be supported through the delivery of a stakeholder workshop early in 2020. The findings of the workshop to be shared with the Board to support its review of progress on the new core data set and agreement on investigation priorities for 2020/21.

## **HWB NHS Long Term Plan (LTP) Sign Off (Agenda Item 9)**

**6**

The Assistant Director, BNSSG CCG, presented the report on the NHS Long Term Plan Response. The purpose of the report was to update the Board on the status of the Bristol, North Somerset and South Gloucestershire (BNSSG) five-year system plan in response to the NHS Long Term Plan. The Sustainability and Transformation Partnership (STP) was leading on the development of the BNSSG plan with submission in November 2019. A Power Point presentation pack was attached as an appendix to the report which was the output of workshop engagement by healthcare providers and commissioners.

The Assistant Director, BNSSG CCG, drew members' attention to the 17 key priorities identified by the STP and the Integrated Care System. The proposed approach was one based on patient outcomes, moving from asking the patient 'What's the matter with you to what matters to you?'. He also highlighted the benefits of explaining the pros and cons of treatment which could lead to considerable benefits in terms of less costly treatments. He stressed the importance of population health management and the shortage of emergency medicine practitioners with a shift towards de-medicalising the care offered.

The Director of Public Health advised members that with regards the final submission on 15 November 2019 to the NHS, the proposed approach would be through the Executive Member for Social Care and Health. Other local authorities were following a similar process.

The Chair informed the Board that North Somerset Council members had raised a few queries and caveats, notably around the impacts of NHS LTP on social care and in particular challenges on local authority services in terms of how it would be managed going forwards and issues around an increased demand for services. In terms of tackling health inequalities there was a danger that North Somerset was viewed as relatively healthy and prosperous but there were large differences in health in the district and not just the CCG footprint. It was noted that the NHS LTP mentioned locality differences.

### **Resolved:**

(1) that the Health and Wellbeing Board received and commented on the Contents of the NHS Long Term Plan Response and agreed that the Chair, in principle, supported the final submission on its behalf at the STP Board on 15 November 2019.

(2) that the Chair of Healthwatch, North Somerset, re-circulate the commissioned Healthwatch England public consultation feedback on the NHS LTP.

**Health Protection Annual Assurance Group Report 2018-19 (Agenda Item 10)**

**HWB**

**7**

The Director of Public Health presented the Health Protection Annual Assurance Group Report 2018-19. The scope of the Health Protection Assurance Group covered emergency planning, environmental health and communicable disease control, screening and immunisation programmes, effective management of sexually transmitted infections (STIs) and blood borne viruses and infection protection and control.

The report provided a summary of activity reported to the North Somerset Health Protection Assurance Group (HPAG), an update on progress against priorities set during 2018-19 and identified seven priority work areas for 2019-20. It sought to provide assurance that all appropriate steps were being taken to meet local health protection needs.

**Resolved:**

(1) that the Board was assured that all appropriate steps were being taken to meet local health protection needs.

(2) that the Board received information in relation to progress against the 2018-19 priorities of the Health Protection Assurance Group.

(3) that the Board endorsed the priorities set for 2019-20 and considered what support and actions the board could take to further strengthen local health protection outcomes.

**HWB Better Care Fund (BCF) Update (Agenda Item 11)**

**8**

The report outlined the planned activity and performance relating to use of the Better Care Fund in North Somerset. Due to the very delayed issue of guidance for the BCF the usual quarterly performance requirements for quarters one and two had been postponed. There was a separate requirement to report quarter two performance on the Improved Better Care Fund (IBCF) only. There were currently no concerns with performance and spend.

A key deliverable in the BCF plan required NSC and BNSSG to co-operate to ensure prompt discharge from hospital either for further social care assessments or into a sustainable ongoing care setting (community, residential or nursing) when patients were medically optimised. Appendix 2 detailed the current overall performance against regional partners, and the attribution of delays to either adult social care or the NHS.

**Resolved** that the Board approved the 2019/20 Better Care Fund (BCF) plan enclosed as Appendix one, subject to clarification of the issue of outstanding disagreement regarding the clarification of usage of inflation on the Adult Protection element of the Better Care Fund. Finalisation of this outstanding item was delegated to the Chair of Health and Wellbeing with advice from the Director of People and Communities.

## **HWB 9 Children & Young People's Emotional Health & Wellbeing Local Transformation Plan (LTP) (Agenda Item 12)**

The Assistant Director, BNSSG CCG, presented the report on the North Somerset Local Transformation Plan (LTP) for Children and Young People's Emotional Health and Wellbeing 2019/20. NHS England required CCGs to produce an annual Children and Young People's Emotional Health and Wellbeing Transformation plan in response to the five year strategy 'Future in Mind' (2015). The document served as the 2019/20 'refresh' of the plan, the last required under the Future in Mind strategy. For this reason, it was felt important that a forward plan of actions on behalf of all partners was included.

The conclusion noted that whilst steady progress had been made, considerable gaps remained across North Somerset from a capacity perspective and service availability. The intention going forwards was to prioritise developing capacity for Prevention work and early interventions (tier 2 and 3) with Children and young people in North Somerset presenting with emotional difficulties.

The membership of the Future in Mind group was comprised of practitioners from provider organisations at operational and strategic levels chaired by Kate Wilcox from North Somerset Council. Members felt it would be of value to have elected members represented on the 'Future in Mind' group. The Director of People and Communities agreed to contact the lead officer, Kate Wilcox to discuss with the Executive Member for Children's Services and Life Long Learning.

Members asked what reporting mechanisms were in place. The Assistant Director BNSSG CCG responded that reporting was via LTP delivery and signing off also via the BNSSG CCG governing body. Routine or specific items would be reported to the Children and Young People's Policy and Scrutiny Panel and the Health Overview and Scrutiny Panel or Children's Champion Group (Corporate Parenting).

An error was noted on page 1 of the report under 2 Recommendations - SEND Board should read Health & Wellbeing Board

### **Resolved:**

(1) that the Board received and commented on the final draft Children & Young People's Emotional Health & Wellbeing Local Transformation Plan prior to submission to the CCG Commissioning Executive on 14 November 2019 and made suggestions for further consultation.

(2) that the Director of People and Communities contacted Kate Wilcox to discuss membership on 'Future in Mind' with the Executive Member for Children's Services and Life Long Learning.

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Chairman

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