

Draft Notes

of the informal Meeting of the

Informal Health and Wellbeing Board

Thursday, 5th November 2021

Held as a Virtual Meeting.

Meeting Commenced: 14:00

Meeting Concluded: 16:30

Voting Members:

P Cllr Mike Bell (Board Chairman and Executive Member Adult Social Care and Health)

P Colin Bradbury (Board Vice-Chairman and Area Director BNSSG CCG)

P Councillor Catherine Gibbons (Executive Member Children and Young People)

P Matt Lenny (Director of Public Health, NSC)

P Sheila Smith (Director of Children's Services, NSC)

P Hayley Verrico (Director of Adult's Services, NSC)

P Georgie Bigg (Chair Healthwatch)

A Paul Lucock (VANS)

P Jeremy Blatchford (ALCA)

Non-voting Members:

P Councillor Ciaran Cronnelly

P Councillor Mark Crosby

P Councillor Wendy Griggs

P Mark Graham (North Somerset Wellbeing Collective)

A Sarah James (UHBW)

P Emmy Watts (AWP)

A Dr John Heather (GP representative)

A Dr Shruti Patel (GP representative)

P: Present

A: Apologies for absence submitted

Others in attendance: Dr Natasha Ward (Harbourside Family Practice).

NSC Officers also in attendance: Emma Diakou (Head of Business Insight, Policy and Partnerships) Finlay Kidd (People and Communities), Dr Georgie MacArthur (Public Health Specialist), Leo Taylor and Brent Cross (Democratic Services)

HWB Declaration of disclosable pecuniary interest (Standing Order 37)

1

None

HWB Notes of the meeting held on 18 February 2021

2

Noted

HWB Integrated Care Systems/Partnerships – verbal update Colin Bradbury

3

The Area Director (BNSSG CCG) updated Members on ICS and ICPs developments.

Concluded: that this should be a standing item on future H&WB meetings.

HWB Update on Accelerated Progress Plan following LJAR revisit

4

The Director of Children's Services confirmed that since the update at the last meeting, the Accelerated Progress Plan was now in place. She emphasised that this was a "whole system" response involving the CCG and providers - and in evidencing progress, referred to the strengthening support focussed on schools, the appointment of an interim of Director in Education and the implementation of a new governance structure chaired by the Executive Member Children and Young People.

The Chairman sought assurance from the Board that each of the contributing partners were perceived as delivering their part in the plan. The Area Director (BNSSG CCG) confirmed that the CCG recognised the importance of the workstream and was working positively and constructively.

The Director of Children's Services praised the provider, Sirona, in addressing the challenges (eg reducing waiting lists). There were, however, still challenges around CAHMS, but progress was being made by AWP (subcontractor). There were also outstanding challenges in respect of commissioning such as around the tripartite funding of children with most complex needs. This was being escalated but before referral to the Improvement Board, regular sessions were being held with Chief Executives (CCG & Council). The key was challenging each other around the whole system approach to delivering improved outcomes.

Concluded: that the update be noted.

HWB Joint Health and Wellbeing Strategy Action Plan

5

The Public Health Specialist (NSC) presented the report setting out the Action Plan which contained a range of planned actions to achieve agreed Health and Wellbeing Strategy objectives - for implementation between 2021 and 2024. This was a "live" plan which would be refreshed annually, and it was anticipated that an accessible dashboard showing progress would be available in due course.

The Director of Public Health encouraged partners to consider opportunities to draw down additional time/resource, particularly around inequalities as we move into business planning. It was important to see this plan as the partnership "binding point".

In response to a query about when the board would see evidence of impact (supported by data), the Board noted that, in addition to the interactive dashboard, quarterly update reports would be provided, incorporating an impact assessment. The Chairman emphasised the need to distinguish between long- and short-term interventions: tracking was particularly important for monitoring and evaluating short-term intervention impacts.

In response to a question about impacts of housing on mental and physical health and the importance of ensuring that different strategies were integrated, it was acknowledged that more effective relationships with “place-based” partnerships were needed. The Director of Public Health commented that there was lots of interest in these structures and consideration was being given to integrating this theme into the Board’s work plan.

Dr Natasha Ward referenced challenges around community-based opportunities (eg social prescribing) and delivering against “wider determinants” objectives. She said the bottle neck was around funding and involvement of the community sector. Chairman agreed that this was a recurring theme, noting that these structures and funding streams were not well developed in North Somerset. Mark Graham commented that there was a real desire to develop this in the sector, agreeing they were starting from a low base. He also referenced issues around commissioning competition and the need to look more to local agencies.

There was also discussion around “front end issues” such as transport in rural areas. There were significant challenges around widening inequalities in accessing health care and the Chairman noted, for example, that there were just two vaccine centres in the Area. It was also noted these issues were not exclusive to more rural areas – eg people with disabilities also faced transport challenges in urban areas.

Concluded;

- (1) that the report be noted; and
- (2) that the mode of delivery and implementation of the action plan and resourcing of the action plan be endorsed.

HWB Joint Strategic Needs Assessment (JSNA) update

6

The Head of Business Insight, Policy and Partnerships and Director of Public Health presented the report outlining the suggested approach for the refresh of the North Somerset JSNA, the governance arrangements, and timescales. The presentation also included a preview of the JSNA interactive data dashboard which would bring together data sets, providing the evidence base for understanding Health and wellbeing in North Somerset. Members noted that this activity would be overseen by the JSNA Advisory Group.

As well as quantitative data also looking at adding qualitative data through research initiatives and looking to pick up evidence reviews as a way of identifying the most effective interventions.

Members were very supportive of the dashboard and particularly around the aspirations around evidence reviews.

Action The Vice-Chairman noted that that data was largely demand focussed and suggested that consideration be given to incorporating supply-side data (eg around workforce/capacity). It was **agreed** that this be brought to the next Advisory Group meeting as a discussion point

Georgie Bigg suggested that qualitative work undertaken by Healthwatch around patient experience could be incorporated and agreed to contact officers to discuss.

Members noted that there would be a regular “insight” newsletter providing updates (board added to circulation) and, in considering future Board engagement, it was agreed that an annual “deep-dive” into the data to help inform work etc would be arranged.

Concluded:

- (1) that the update be noted; and
- (2) that the approach for the refresh of the JSNA be endorsed

HWB Winter preparedness

7

The Director for Adult Services presented the report for social care services on planning for winter pressures together with the challenges arising from Covid-19.

The presentation included:

- an update on vaccination (and risks to the Care Home Sector)
- support to care providers
- the innovation and sustainability grant
- Discharge to Assess
- Technology enables care (new opportunities, local integration and system wide collaboration)
- Updates on Care Homes and Domiciliary Care

The Area Director BNSSG CCG provided an update on health sector plans, referring to work around managing GP and hospital visits/consultations and more broadly around the need to manage demand through sensible use of a scarce staffing resource and the challenge around balancing the impacts of increasing non-elective demand with elective waiting lists longer term.

Dr Natasha Ward, in providing a frontline perspective, referred to the need to address the significant bureaucracy and pathway bottlenecks in hospitals (mainly covid treatment protocols and Discharge to Assess issues) which were having significant knock-on effects on primary care. The Area Director emphasised the guidance on infection control at acute hospitals were provided nationally and there was a balance between productivity and risk of hospitals acquired infections.

In response to a question about the local implications of treatment backlogs, The Area Director said the challenges tended to be on a discipline-by-discipline basis (eg affecting all areas in the district rather than there being geographical hotspots).

There was also discussion around the significant labour market and workload pressures facing both the Health and Social care sector which were significantly impacting staff recruitment and retention.

In concluding the debate, the Chairman, commenting on the range and extent of the interventions speculated that there must come a point where we are doing more harm than good by adding further pressure on already overworked health and social care staff.

Concluded: that the report be noted

HWB **H&WB Work Plan**
8

Members noted that this would be a standing item on future agendas.

Proposed agenda items for the next meeting and beyond included:-

- (1) Updates to the next meeting on:-
 - Health & Wellbeing Strategy: Action Plan and performance framework to include a thematic “deep dive”.
 - JSNA development: including a data “deep dive”.
- (2) Regular updates on ICS and ICP developments. In particular on the “place-based” approach, providing assurance that appropriate links are being made and that ICPs refer matters to the H&WB as needed.
- (3) A further update on the SEND accelerated Improvement Plan.
- (4) With reference to OFSTED’s inspection emphasis on children’s wellbeing, a standing agenda item was proposed to ensure continued board focus.

There was also a suggestion that the Board might seek to encourage momentum around Community Wellbeing Partnerships and that further community representation would help. The Chairman noted that VANs and the North Somerset Wellbeing Collective were represented on the H&WB. He saw the board’s role as encouraging joined-up thinking and consideration was being given to how this might be further promoted and integrated into the Board’s work plan.

Chairman
