

Draft Notes

of the informal Meeting of the

Informal Health and Wellbeing Board

Thursday, 17 February 2022

Held as a Virtual Meeting.

Meeting Commenced: 14:00

Meeting Concluded: 16:18

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)

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

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

P Georgie Bigg (Chair Healthwatch)

P Paul Lucock (VANS)

P Jeremy Blatchford (ALCA)

Non-voting Members:

A Councillor Ciaran Cronnelly

A Councillor Mark Crosby

P Councillor Wendy Griggs

P Mark Graham (North Somerset Wellbeing Collective)

A Sarah James (UHBW)

P Emmy Watts (AWP)

P Stephen Quinton (Avon Fire and Rescue)

P Dr John Heather (GP representative)

A Dr Shruti Patel (GP representative)

P: Present

A: Apologies for absence submitted

Others in attendance: David Moss (Delivery Director – Woodspring Integrated Care Partnership); Erin Blackburn (Work Experience Student)

NSC Officers also in attendance: Emma Diakou (Head of Business Insight, Policy & Partnerships); Pip Hesketh (Assistant Director, Education Partnerships), Samuel Hayward (Public Health Specialty Registrar), Dr Georgie MacArthur (Public Health Consultant), Sandra Shcherba (Public Health Researcher); Leo Taylor, Brent Cross (Democratic Services)

HWB 1 Notes of the informal Board meeting held on 5 November 2021

1

Noted

HWB 2 Terms of Reference & Membership

2

Concluded: that, subject to endorsement at the next formal meeting of the Board, Avon and Fire Rescue be appointed as a Member of the Health and Wellbeing Board and that the Board's Terms of Reference be amended accordingly.

HWB SEND Improvement Plan update (Agenda Item 7)

3

This item was taken early.

The Assistant Director, Education Partnerships (NSC) presented the report setting out the background to the requirement that the Local Area produce a SEND Improvement Plan together with progress made to date.

In opening discussions, the Chairman said he was reassured by the pace of work and investment by the Council and health sector but wanted to hear more about the gaps and initial challenge.

The Director of Public Health said that the initial focus of the Integrated Care Partnership (ICP) had been on older adults and a key challenge was to ensure that the needs of children were now “plugged into” the ICP agenda going forward.

The Assistant Director referred to the importance of two related strategies: the Education and Early Years strategies and the need to ensure these were focussed effectively. She said much had been done to ensure there were no partnership barriers, citing the Executive Member for Children’s Services’ initiative to establish a Health and Voluntary Sector practitioner forum.

Concluded: that the update be noted.

HWB Joint Health and Wellbeing Strategy Action Plan (Agenda Item 4)

4

The Consultant in Public Health (NSC) presented the report setting out progress on the implementation of the Health and Wellbeing Strategy 2021-2024 Action Plan with particular focus on those actions that aim to improve mental health and wellbeing and diet, nutrition, and food insecurity (outlined in the ‘prevention’ theme).

Members welcomed the progress made, particularly in respect of the development of the dashboard which they felt offered great potential. The Chairman commented that this approach would provide a useful tool, enabling effective monitoring and coordination across partners around agreed outcomes.

Stephen Quinton, Avon Fire and Rescue (AFR) agreed, welcoming the coordination opportunities, noting for example that there were areas where the AFR could contribute to supporting positive outcomes. Mark Graham (North Somerset Wellbeing Collective) also agreed but felt that, for this to work, a more sophisticated approach to engaging with the third sector was needed in the first place.

In response to a question about integration with other partner monitoring systems, the Director of Public Health confirmed that there were different approaches, but the key would be to linking this into the Integrated Care Partnership Action Plans and other work plans the Integrated Care Partnerships were delivering. There was discussion around monitoring and the need for a reporting mechanism as ICP processes took shape, with general agreement that it would be useful to plan a schedule of focussed (“deep-dive”) reports.

Concluded;

(1) that the report be noted; and

Action

(2) a follow-up email would be circulated to Members including a link to a survey inviting proposals for “deep-dive” topics in order to generate a list for forward planning purposes.

HWB 5 Joint Strategic Needs Assessment and Pharmaceutical Needs Assessment (Agenda Item 5)

The Head of Business Insight, Policy and Partnerships, Public Health Researcher and Director of Public Health presented the report which provided updates on:-

- the Joint Strategic Needs Assessment (JSNA) refresh, focussing in particular on the dashboard approach to presenting supporting data and progress on the development of a series of spotlight reports; and
- the development of the Pharmaceutical Needs assessment (PNA)

Members welcomed the dashboard, with comments on the opportunities this would provide around effective and consistent engagement with partners on local and strategic priorities.

Other specific discussion points included the following:

Action

- there was agreement that the data sets needed to be clearly dated.
- how to engage with Parish and town councils (and other stakeholders at community level)? – it was agreed that a question be added to the Members email/survey referred to above for suggestions.
- ensuring we get the best out of this by building-in ongoing surveillance together with analysis and predictive value. Members noted that this was work in progress and the current development phase was focussed on basic data sets and initial analysis. It was understood that more analysis was needed, hence the focus on the next phase on deep dives. It was also noted that more data sets were being added.

In concluding discussions, the Chairman agreed that this was the start of a conversation around embedding the JSNA as an agreed foundation for the on-going development of the joint health and wellbeing strategy and wider policies across partners.

Further to discussion about the PNA, the Public Health Researcher confirmed that the scheduled statutory public consultation on the draft PNA would take place between 1st March and 15th June 2022. Statutory consultees including Parish and Town Council's and the GP Forum would be included. Board Members would be given sight of the consultation draft for review prior to the commencement of the consultation.

Concluded: that the report be noted.

HWB 6 Update on ICS and ICP developments (Agenda Item 6)

The Delivery Director (Woodspring Integrated Care Partnership) gave a presentation updating Members on progress towards integrating Health and Wellbeing Board and Integrated Care Partnership planning.

The ensuing discussion focussed on key challenges ahead and thoughts on how these might be addressed:

- Ensuring strong relationships between the ICPs and the Health and Wellbeing Board, recognising the plurality of different entities working on one plan that all have a stake in.
- The work around the JSNA and H&WS was a good start. The main challenge was getting “need” down to the systems on the ground.
- Cultural change was needed across the partnership: leadership needed to be better aligned together with more integrated meetings. This was a marathon, not a sprint and “learning was in the doing”.
- A fundamentally different mindset was needed: the existing model of care focussed on “medical” escalation. This model was the opposite: about de-escalation and de-medicalisation and getting away from a transactional approach around “thresholds”.
- Work in Social Care needed to be a critical integral part of this but recognition that more work was needed with front-line practitioners. This would take focussed effort and time to achieve.
- Need to engage differently including a discussion around the need for a better understanding of what “well-being” actually meant to people and communities.
- The critical need for ICPs to understand the need for engagement with the voluntary sector and social prescribers – these groups were well embedded in the wider landscape

In addressing comments about community engagement, the Delivery Director said that he had been overwhelmed by the energy of the third sector. He gave assurance that there was full recognition that they were the answer to what we were trying to solve. The need now was to focus on what sort of infrastructure was required to support these important community assets.

In concluding discussions, the Chairman said that it had been a helpful conversation and noted that this would be a standing item on Board agendas going forward to keep pace with developments.

Concluded: that the presentation be received.

HWB
7

H&WB Work Plan

In discussing proposed agenda items for the next meeting the following were agreed:-

- HWBS action plan delivery
- ICP/ICS progress
- VCSE sector overview
- Covid-19
- Healthy Weston (phase 2) priorities

In also addressing other matters arising, the Chairman referred to the Better Care Fund agreement reached in partnership with the CCG and the Board was content that this be signed off”.

Chairman
