

KENT COUNTY COUNCIL

HEALTH AND WELLBEING BOARD

MINUTES of a meeting of the Health and Wellbeing Board held in the Darent Room, Sessions House, County Hall, Maidstone on Wednesday, 18 September 2013.

PRESENT: Dr F Armstrong, Mr P B Carter, Ms F Cox, Cllr J Cunningham, Mr G K Gibbens, Mr R W Gough (Chairman), Mr A Ireland, Dr M Jones, Ms V Segall Jones, Dr T Martin, Ms M Peachey, Mr S Perks, Mrs J Whittle, Dr D Cocker, Ms P Davies, Ms H Carpenter and Mr I Ayres

ALSO PRESENT: Ms M Blyth

IN ATTENDANCE: Mr M Lemon (Strategic Business Adviser), Mrs A Tidmarsh (Director of Older People and Physical Disability) and Mrs A Hunter (Principal Democratic Services Officer)

UNRESTRICTED ITEMS

33. Chairman's Welcome

(Item 1)

- (1) The chairman said that following agreement of the HWB in May 2013 he had met with Deborah Tomlin from the South East Coast Clinical Networks who had expressed an interest in developing a relationship with the Health and Wellbeing Board. He said the networks were bringing forward work programmes that would be of interest to the Health and Wellbeing Board and proposed that these be presented to the Board in the future.
- (2) The chairman said that since the last meeting of the Board there the NHS Call to Action had been made and there was a strong suggestion that health and wellbeing boards, local area teams, clinical commissioning groups and others had a role to play in public debate and engagement. He suggested that this should be considered by the Health and Wellbeing Board in due course
- (3) The chairman said he would canvass opinion to determine whether the Kent Health and Wellbeing Board had a role to play in the Primary Care Call to Action.

34. Substitutes

(Item 2)

Apologies were received from Dr Bob Bowes and Dr Navin Kumta. There were no substitutes.

35. Declarations of Interest by Members in Items on the Agenda for this Meeting

(Item 3)

There were no declarations of interest.

36. Minutes of the Meeting held on 17 July 2013

(Item 4)

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on 17 July 2013 are correctly recorded and that they be signed by the chairman.

37. Kent Safeguarding Children Board - 2012/13 Annual Report

(Item 5)

- (1) Maggie Blyth, Independent Chair of Kent Safeguarding Children Board (KSCB), introduced her annual report which described the progress made in improving the safeguarding services provided to Kent's children and young people in 2012/13, and outlined the challenges for the next year. She also outlined the role and composition of the Kent Safeguarding Children Board and the recommendation set out in Working Together to Safeguard Children (2013) that annual reports of safeguarding children boards be submitted to health and wellbeing boards.
- (2) Maggie Blyth said progress had been made across Kent in improving child protection arrangements and this had been acknowledged by the three most recent statutory inspections. She said the KSCB would continue to monitor the numbers of re-referrals to specialist children's services; the numbers of children with child protection plans being referred for a second or subsequent time; and that the spotlight would be retained on young people at risk of: going missing; child sexual exploitation; and trafficking; as well as understanding why certain groups of children, including some unaccompanied asylum seeking children, go missing and on children who required early intervention.
- (3) Maggie Blyth said she would welcome the views of the KHWB on the following issues in particular:
 - The placement of high numbers of children in Kent by other local authorities;
 - Scoping the commissioning of services for children at risk of sexual exploitation and trafficking;
 - Waiting times for assessment and treatment of some specific groups of children especially teenagers needing mental health and emotional wellbeing services.
- (4) During discussion the need to communicate the findings of the KSCB and other organisations to practitioners engaging with children was raised as was the importance of sharing early warning signs picked up by GPs, education and other services.
- (5) Felicity Cox reported that the directors of nursing in Kent, Surrey and Sussex were undertaking specific work to identify the issues and patterns in the provision of children and adolescent mental health services and would be able to report to this board and the KSCB in due course.
- (6) Hazel Carpenter said:

- a children's summit would take place in Thanet next week to review a range of children's issues and agreed the ambition and direction of services for children;
- the report of an external review of safeguarding arrangements within Kent and Medway would be available at the end of the month;
- a year ago, the chief executive of Thanet District Council had written to local authorities placing children in Thanet and that she (Hazel Carpenter) had followed this up by writing to the 16 clinical commissioning groups in those areas and had received some positive responses

(7) **RESOLVED:**

- (a) That the progress and improvements made during 2012/13, as detailed in the Annual Report from the Independent Chair of Kent Safeguarding Children Board be noted.
- (b) That a formal response to the KSCB be prepared by the Health and Wellbeing Board in due course.
- (c) That mental health and emotional wellbeing services including early non-specialist intervention, the transition to adult services and tier-four provision be considered by the Health and Wellbeing Board.

38. 2013/14 Health Monies- Verbal Update

(Item 6)

- (1) Anne Tidmarsh (Director of Older People and Physical Disability) gave an update on the Pioneer bid that had been considered at the meeting of the Health and Wellbeing Board on 17 July 2013. She said that 29 of the 110 bidders had been called for interview, it was anticipated that between 10-15 bids would be selected and the successful bids would be announced at the end of October.
- (2) She also said work on health and social care monies was nearing completion and suggested that this together with outcome of the Pioneer bid and the review of governance arrangements requested at the last meeting be presented to the Health and Wellbeing Board on 20 November 2013.

39. The Integration Transformation Fund

(Item 7)

- (1) Dr Robert Stewart (Clinical Design Director) joined the board for discussion of this item.
- (2) Mark Lemon, Strategic Business Advisor, introduced the report which said that the £3.8bn Integration Transformation Fund (ITF) announced by the Government dramatically accelerated the timescales for achieving the integration of health and social services. He said Government expectations were that a fully integrated system would be in place by 2018 based on actions identified to start in 2014-15 and with significant delivery in 2015-16. The funding consisted of a number of existing components as well as new allocations from clinical commissioning groups' budgets.

- (3) Mark Lemon said plans to spend the funding must be agreed by health and wellbeing boards who must assume responsibility for monitoring the achievement of targets, agreeing contingency plans for re-allocating funding if targets were missed and be satisfied that providers, especially acute hospital trusts, had been effectively engaged in the planning process.
- (3) In response to a question it was confirmed that no new money being was being made available.
- (4) During discussion the need to involve the acute sector and health education providers was acknowledged. It was also agreed that this was an opportunity to consider the funding and services in their totality including the third sector, the process would need to be clinically led with the support of the council and other organisations and, given the scale of change, the impact on patients would need to be monitored and controlled. It was further acknowledged that timescales were short, the development of the plan would need to dovetail with the development of operational commissioning plans and the key milestones and a timetable could be built into a piece of work being undertaken by NHS England.
- (5) RESOLVED:
 - (a) That the timescales involved in the preparation of the Kent plan for the Integration Transformation Fund be acknowledged.
 - (b) That the Pioneer Group takes the work forward with support from elsewhere as required.
 - (c) That provider engagement already taking place at local and whole systems level be further strengthened.
 - (d) That progress in the preparation of the Kent Plan for the Integration Transformation Fund be reviewed at the next meetings of the Health and Wellbeing Board.

40. Long Term Conditions

(Item 8)

- (1) Ian Ayres (West Kent CCG) gave a presentation called Mapping the Future – Towards a Blueprint for a Sustainable Health Care System in West Kent. He said that growth in demand for care had to be met without growth in resources, a change in health services was required to avoid a widening gap between income and spend and the Mapping the Future programme aimed to describe an agreed vision for the future. Workshops had been held during the summer involving patient representatives, professionals and managers covering four clinical topics as exemplars for how the system could be re-organised. Key themes emerging from the workshops had been distilled and work was underway to identify how the draft blueprint could be applied to activity and resource patterns.
- (2) Patricia Davies (Dartford, Gravesham and Swanley CCG) gave a presentation called “Developing an Integrated Admissions Avoidance and Discharge Management Model”. The model brought together a multi-professional team

based approach to facilitating the timely discharge for people to ensure best outcomes for patients, timely access to community-based health and social services and the optimum use of acute, community and social services. She also outlined the enablers and key elements of the model as well as possible key performance indicators.

- (3) The chairman thanked Ian Ayres and Patricia Davies for their presentations.

41. Update on the Assurance Framework for the Kent Health and Wellbeing Board

(Item 9)

- (1) Mark Lemon (Strategic Business Advisor) introduced the report which proposed that indicators relevant to the Kent Health and Wellbeing strategy were taken as the basis to develop an overview of the health and social care system across Kent. These indicators would form a relatively simple Assurance Dashboard for the KHWB to assess current service effectiveness. In addition indicators had been derived from the NHS England South Escalation Framework that could alert the Board to potentially unsustainable pressures in the component sectors. The Dashboard would also provide assurance to the Health and Wellbeing Board on a regular basis if overall status of the indicators was progressing in the right direction.
- (2) During the discussion it was suggested that additional indicators be included in the dashboard relating to “no place of safety”, out of area acute bed placements and to monitoring progress on the implementation of the transformation plan.
- (3) RESOLVED:
- (a) That the contents of the paper be noted and the proposal for the development of a Kent wide assurance framework be approved.
- (b) That the development and ownership of the dashboard for regular monitoring of the agreed indicators be approved.
- (c) That a populated dashboard be presented to the next meeting of the Health and Wellbeing Board on 20 November 2013 with further reports at six-monthly intervals.

42. Improving Health Outcomes for Children and Young People - Better Health Outcomes Pledge

(Item 10)

- (1) Meradin Peachey (Director of Public Health) introduced the report which asked the Kent Health and Wellbeing Board to consider and endorse the Better Health Outcomes for Children and Young People pledge.
- (2) The Department of Health, the Local Government Association, the Royal College of Paediatrics and Child Health, and Public Health England had sent a joint letter to all lead members for children and young people and the chairs of health and wellbeing boards in July 2013 highlighting consistently poor health

outcomes for children in England especially amongst those in vulnerable groups such as looked after children. The letter also noted considerable variations in child health across England with international comparisons showing clear areas for improvements in child health outcomes. The signatories to the letter called for all health and wellbeing boards to sign up to the "Better Health Outcomes for Children and Young People pledge" to demonstrate a commitment to giving children and young people a better start in life.

- (3) Meradin Peachey said the pledge listed five ambitions for the Health and Wellbeing Board and these were in direct alignment with Outcome 1 of the Kent and Health and Wellbeing Strategy which aimed to give every child the best start in life, with a particular focus on the integration of services for 0-11 year olds and improving the mental health of children and young people.
- (4) RESOLVED:
 - (a) That the Better Health Outcomes for children and young people pledge be endorsed.
 - (b) That to ensure the success of Ambition 2 of the pledge the need to plan for the following be noted:
 - (i) seamless pathways for children and young people aged 0-25;
 - (ii) integrated holistic multi-agency services that recognise the correlation between children's wellbeing and family and community systems;
 - (iii) inclusive services that are accessible for all with clear transitional arrangements in place for young carers, parent carers, adult carers and disabled people of all ages.
 - (c) That children's issues be considered in the light of the pledge at a meeting of the Health and Wellbeing Board.

43. CCG- Level HWBs' Children's Sub Group

(Item 11)

- (1) Jenny Whittle (Cabinet Member for Specialist Children's Services) introduced the report which set out the terms of reference for the Clinical Commissioning Group Level Health and Wellbeing Boards' Children's Sub Group (Children's Operational Group).
- (2) During discussion concerns were raised about the capacity of clinicians to support all the groups being established and about the governance arrangements for reporting to two different groups.
- (3) RESOLVED to defer consideration of this matter to a future meeting of the Health and Wellbeing Board.

44. Date of Next Meeting - 20 November 2013