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, 28 January 2015.

PRESENT: Mr I Ayres, Dr B Bowes (Vice-Chairman), Ms H Carpenter, Mr P B Carter, CBE, Mr A Scott-Clark, Dr D Cocker, Ms P Davies, Mr G K Gibbens, Mr S Inett, Mr A Ireland, Dr M Jones, Dr E Lunt, Dr T Martin, Mr P J Oakford, Dr M Philpott (Substitute for Dr F Armstrong), Cllr K Pugh (Substitute for Mr A Bowles), Dr R Stewart and Cllr L Weatherly

IN ATTENDANCE: Ms J Frazer (Programme Manager Health and Social Care Integration), Ms F Kroll (Director, Early Help and Preventative Services), Mr M Lemon (Strategic Business Adviser), Ms K Sharp (Head of Public Health Commissioning), Ms M Varshney (Consultant in Public Health), Mr T Wilson (Head of Strategic Commissioning (Children's)) and Mrs A Hunter (Principal Democratic Services Officer)

UNRESTRICTED ITEMS

120. Chairman's Welcome

(Item 1)

There were no announcements.

121. Apologies and Substitutes

(Item 2)

Apologies for absence were received from Dr F Armstrong, Cllr A Bowles, Mr Gough, Dr N Kumta and Mr S Perks. Dr M Philpott and Cllr K Pugh attended as substitutes for Dr Armstrong and Cllr Bowles respectively.

122. Declarations of Interest by Members in Items on the Agenda for this Meeting (Item 3)

There were no declarations of interest.

123. Minutes of the Meeting held on 19 November 2014 (Item 4)

- (1) Dr Bowes confirmed that the Joint Health and Social Care Assessment Framework for 2014 had been signed-off by Mr Gough for submission in January 2015 as agreed at the last meeting.
- (2) Resolved that the minutes of the meeting held on 19 November 2014 are correctly recorded and that they be signed by the Chairman.

124. Strategic Workforce Issues

(Item 5)

- (1) Philippa Spicer (Local Director of Health Education England) introduced herself and said that Health Education England had been established in mid-2012 with responsibility for the education and training of staff in NHS funded services and care. She gave a presentation which set out the Kent context, profiles of the workforce, workforce trends and some examples of service transformation.
- (2) A copy of the presentation is available on–line as Appendix A to these minutes
- (3) In response to a question she said that remuneration and accommodation packages had been used in the past to attract doctors to the area and continued to be available to support their rotation as part of their learning and development, however any such packages had to be sustainable and should be looked at in conjunction with providers She also said work was being undertaken to encourage young people to consider careers in health.
- (4) She said discussion about the nature of future services and the projected population growth was required to plan appropriate recruitment and training as was detailed information about the skills required to facilitate the ambition to provide care closer to home.
- (5) It was generally accepted that Health Education had a role in ensuring that Kent attracted sufficient GPs to meet the needs of the projected population and that CCGs needed to articulate more clearly the skills required for the future and the training that should be provided as well as using their contacts with providers to assist Health Education with the provision of good quality placements.
- (6) Dr Bowes thanked Mrs Spicer for her presentation.

125. Early Years Restructure

(Item 6)

- (1) Thom Wilson (Head of Strategic Commissioning) introduced the report which set out a series of recommendations to refresh a partnership approach to children and young people's services across the county and aimed to start a conversation about how best to do this.
- (2) Florence Kroll (Director of Early Help and Preventative Services) gave a presentation which included: a definition of early help; a brief description of the changes required, the design principles, values, aspirations; the partnership landscape and information about some achievements between September and December 2014.
- (3) The presentation is available on-line as Appendix B to these minutes.
- (4) During the discussion that followed, the role of children's operating groups and their relationship with the Children's Health and Wellbeing Board was raised.

The complexity of partnership arrangements and the opportunities arising from the transfer of responsibility for the Family Nurse Partnership and health visiting services were acknowledged. It was also suggested that a workshop be arranged to enhance the understanding of the legal responsibilities of all partnerships.

(5) Resolved that

- (a) All partners review the membership of the Children's Health and Wellbeing Board and identify appropriate representatives to ensure they were able to effectively represent them and help steer the strategic direction for children's services in the county;
- (b) The Children's Health and Wellbeing Board reviews Outcome 1 of Kent's Health and Wellbeing Strategy – Give Every Child the Best Start in Life to ensure it meets the strategic priorities of the organisations involved, and could be used to drive the delivery of the most important priorities for the county;
- (c) The arrangements for working together at a local level be reviewed in partnership across the Districts, clinical commissioning groups and the Kent Safeguarding Children Board to quickly establish local governance which is meaningful and effective for all partners;
- (d) Public Health commissioners, in partnership with all colleagues across the Health and Wellbeing Board, refresh and re-develop the model for health visiting to deliver an integrated service for families with young children;
- (e) Working together Early Help & Preventative Services and health commissioners would agree the actions and programme of work to achieve the priorities of the Healthy Child Programme;
- (f) A workshop be arranged to understand the complexity of partnership arrangements, the corporate and legal responsibilities of partners, share learning and understand how best to hold people to account for service delivery.

126. Integration Pioneer Update and Vision re the Five Year Forward View (Item 7)

- (1) Dr Robert Stewart introduced the report by giving a short presentation which is available on-line as Appendix C to these minutes.
- (2) He referred, in particular, to system leadership workshops to decide future working of the Integration Pioneer, the visit of Simon Stevens (Chief Executive of NHS England) to the Kent Integration Pioneer on 24 February 2015 and examples of innovation in Kent. He said that Thanet was not working towards the development of a hybrid PACS as had been stated in the Powerpoint slide
- (3) Resolved that the report be noted.

127. A - Assurance Framework B - Update on Quality (Item 8)

A – Assurance Framework

- (1) Malti Varshney (Consultant in Public Health) introduced the report which provided performance information on a suite of indicators based on the Kent Health and Wellbeing Strategy and additional stress indicators. She drew the board's attention, in particular, to indicators relating to bed occupancy rate by Trust and by speciality and the percentage of A&E discharges, admittances or transfers within 4 hours by Trust. She said the figures relating to A&E discharges for December, which had become available since publication of the report, showed an improvement.
- (2) During discussion about demand for services over the Christmas period, it was reported that West Kent had been extremely busy with 30% more admissions than on a normal Sunday but the system had been able to absorb this increase because of the commitment of all partners. It was also said that it was important to validate the perception that increased acuity was driving the increase in admissions.
- (3) With considerable effort East Kent had been able to maintain its performance at 89.3% and had followed this up with a "perfect week" exercise which confirmed that it had been the commitment of all partners that enabled performance to be maintained. A further "perfect week" exercise was planned for March to understand the capacity required, workforce issues across all partners and whether there might be a need for "sub-acute" capacity.
- (4) The Darent Valley Hospital was the only Trust to achieve the targets set for quarter 1 and quarter 2 and the Integrated Discharge team had played a significant role in avoiding the need to move into major incident mode and in enabling the Trust to recover quickly from increased demand, particularly the 40% increase in the admission of elderly patients compared with the same period last year. Ms Davies also said that Secamb had seen an increase of 40-50% in activity levels above projected levels which had resulted in issues covering some shifts. For the first time ever IC24 and Meddoc had difficulty covering shifts and had been let down by agencies.
- (5) Work to improve performance at Medway NHS Foundation Trust was continuing. Activity had reduced over the last couple of weeks and consequently performance had improved.
- (6) Social care services had seen an increase in activity too and, although the general response had been good, there were issues relating to workforce, particularly in domiciliary care, which may be related to the increase in acuity and the need for double handed care packages.
- (7) Resolved that:
 - (a) The report be noted;
 - (b) A robust analysis of trends be undertaken to understand what was driving demand with a report to a future meeting of the HWB.

B – Update on Quality

(8) Steve Inett (Chief Executive – Healthwatch Kent) gave a presentation on the progress made to produce a quality report that fulfilled the requirements set out in the Francis report. A copy of the presentation is available on-line as Appendix D to these minutes.

(9) Resolved that:

- (a) The Quality Report highlighting the complex systemic issues that have the most impact on providing high quality services in Kent be noted;
- (b) Healthwatch Kent contacts representatives from commissioners, providers and working groups to gather feedback on the main issues of concern;
- (c) Healthwatch Kent presents a further report analysing the issues and identifying key trends.

128. Better Care Fund - S75 Agreement (Item 9)

- (1) Jonathan Bates (Chief Financial Officer South Kent Coast and Thanet CCGS) introduced the report. He said the £100m available across Kent represented a substantial start towards the integration of services, and that the government's initial approach to the BCF had been based on a 3.5% reduction in urgent care admissions to acute hospitals with the resulting savings available for the BCF to develop integrated health and social care. More recently health organisations had been asked to identify an appropriate target band for the first year. Following discussions with CCGs, and taking into account performance for the year to date as well as the projected population growth, it was proposed that the target band of 0.6%-1% be set for Kent.
- (2) During discussion, there was general support for the proposed target band, however the importance of maintaining local ambitions and delivering the positive outcomes set out in commissioning plans was emphasised. The need to understand local relationships, establish them quickly and to ensure good governance arrangements were in place (including robust quarterly reporting to the Kent HWB and to local health and wellbeing boards) was identified.
- (3) Resolved that the progress made to date on developing the section 75 agreement to support the delivery of the approved BCF plan be noted.

129. Minutes of the Children's Health and Wellbeing Board (Item 10)

Resolved that the minutes of the Children's Health and Wellbeing Board held on 28 November 2014 be noted.

130. Minutes of the Local Health and Wellbeing Boards (Item 11)

- (1) It was reported that Ashford HWB had met on the 21 January and that the minutes would be available shortly.
- (2) Resolved that the minutes of the meetings of the local health and wellbeing boards be noted as follows:

Canterbury and Coastal HWB - 25 November;

Dartford, Gravesham and Swanley HWB - 29 October;

South Kent Coast HWB – 16 September and 25 November

Swale HWB – 19 November

Thanet HWB – 13 November

West Kent HWB – 18 November

131. Date of Next Meeting 18 March 2015

(Item 12)

Appendices available on-line

Appendix A— Strategic Workforce Issues

Appendix B Early Years Restructure and (Integrating the approach of Children

and Young Peoples Services

Appendix C Integration Pioneer Update and Vision re Five Year Forward View

Appendix D Update on Quality