

## WEST KENT CCG HEALTH AND WELLBEING BOARD

### DRAFT MINUTES OF THE MEETING HELD ON TUESDAY 17<sup>TH</sup> MARCH 2015

#### Present:

Cllr Roger Gough (Chair)	Chair of Kent Health and Wellbeing Board
William Benson	Chief Executive, Tunbridge Wells District Council
Cllr Annabelle Blackmore	Leader of Maidstone Borough Council
Lesley Bowles	Chief Officer for Communities & Business, Sevenoaks District Council
Hayley Brooks	Health and Communities Manager, Sevenoaks District Council
Alison Broom	Chief Executive, Maidstone Borough Council
Cllr Alison Cook	Sevenoaks District Councillor
Nick Fenton	Head of Service (West), Early Help and Prevention, Education and Young Peoples Directorate, Kent County Council
Mark Gilbert	Public Health, Commissioning and Performance Manager (Public Health) Kent County Council
Wayne Gough	Business Planning and Strategy Manager (Public Health) Kent County Council
Christine Grosskopf	Kent County Council
Mark Lemon	Kent County Council
Louise Matthews	Deputy Chief Operating Officer, WK CCG
Mark Raymond	Tonbridge and Malling Borough Council
Cllr Mark Rhodes	Tonbridge and Malling Borough Council
Dr Andrew Roxburgh	GP Governing Body member, WK CCG, (Sevenoaks locality)
Penny Southern	Director of Learning Disability and Mental Health, Kent County Council
Malti Varshney	Consultant in Public Health, Kent County Council

#### In attendance:

Francesca Guy (minutes)	Deputy Company Secretary, WK CCG
Sophie Lyon	South East Commissioning Support Unit

#### 1. WELCOME AND APOLOGIES FOR ABSENCE

The Chair welcomed everyone to the meeting. Apologies had been received from the following:

Dr Bob Bowes (Cllr Roger Gough chaired the meeting on his behalf)  
Gail Arnold, Chief Operating Officer, WK CCG  
Julie Beilby, Chief Executive, Tonbridge and Malling Borough Council  
Jane Heeley, Tonbridge and Malling Borough Council  
Fran Holgate, HealthWatch  
Dr Caroline Jessell, NHS England  
Dr Tony Jones, GP Governing Body member, WK CCG  
Reg Middleton, Chief Finance Officer, WK CCG  
Dr Sanjay Singh, GP Governing Body member, WK CCG

Cllr Lynne Weatherly, Tunbridge Wells Borough Councillor

## 2. MINUTES OF THE MEETING HELD ON TUESDAY 20<sup>TH</sup> JANUARY 2015

**RESOLVED:** That the minutes of the meeting held on Tuesday 20<sup>th</sup> January 2015 be approved as a correct record.

## 3. MATTERS ARISING

The following actions were discussed:

**4.15:** Louise Matthews reported that it had not been possible to present the performance report for the Better Care Fund as the inaugural meeting had only taken place last week. It was anticipated that the first performance report could be presented to the May meeting of the West Kent Health and Wellbeing Board (WKHWB). **Action: Louise Matthews/Reg Middleton**

**5.15:** Malti Varshney reported that a task and finish group for the healthy weight programme had been established and progress would be reported to the WKHWB.

Malti Varshney agreed to check whether there were any outstanding actions from previous WKHWB meetings. **Action: Malti Varshney**

## 4. BEHAVIOURAL CHANGE CAMPAIGNS

### 4.1 Public Health Campaigns

Malti Varshney opened this discussion by stating that a coherent and systematic approach towards public health campaigns was needed which brought together actions from across the system.

Wayne Gough gave an overview of recent public health campaigns delivered by Kent County Council (KCC) and noted that there were broadly three approaches: service promotion; education and awareness raising; and social marketing campaigns. Examples of recent campaigns were flu vaccinations for pregnant women and HIV.

Dr Roxburgh commented that hepatitis B and C represented a similar risk to that of HIV and suggested that this could be an area of focus for a future campaign.

Alison Broom asked how campaigns could be used specifically to address health inequalities. Wayne Gough responded that smoking during pregnancy was an example of a campaign which targeted health inequalities. The focus of these types of campaigns was to understand the communities and the motivators for behaviour. Campaigns targeted at reducing health inequalities tended to use the social marketing approach.

Alison Broom asked whether there was an opportunity to link with healthy business initiatives eg if vaccinations could be administered in the work place, whether other options could be considered.

Alison Broom also asked whether people could be captured through children's centres. Wayne Gough agreed that there was more work to be done to develop relationships with children's centres.

Wayne Gough agreed to explore the above ideas further. **Action:** Wayne Gough

#### 4.2 Approaches to changing behaviour and achieving better health

Mark Lemon presented his paper on approaches to changing behaviour and the factors that influenced the success of campaigns. The evidence highlighted the importance of understanding both the communities targeted and the motivation of the individuals within the community. It was also important to understand how best to deliver these messages, to understand the product offered and why people would want it. Social marketing had been shown to be an effective approach in delivering behavioural change messages.

#### Learning from other sectors

Alison Broom gave an overview of learning from other sectors and noted that the key themes were the importance of understanding the attitudes and behavioural preferences of individuals and developing a method to extrapolate this information to a whole-population approach. An example of a successful behavioural change campaign was the campaign by local government to promote recycling. Loyalty cards used by the retail sector also highlighted the importance of obtaining data on your customers.

The Chair commented that the starting point should be the data that was already available to identify the areas in which West Kent was an outlier. The next step would be to consider the campaign approach and to identify the assets available. The Chair added that this should include those areas within West Kent that were outliers, even if West Kent as a whole was not an outlier. The Chair added that the methodology to be applied to these groups should also be identified.

Mark Lemon commented that the data should be supported by soft intelligence and he emphasised the importance of testing the approach to ensure that it resonated with communities.

Cllr Alison Cook commented that she personally found campaigns that highlighted negative behaviours or that focussed on the cost to the NHS to have little impact. Cllr Cook suggested identifying best practice from other countries.

Cllr Annabelle Blackmore suggested obtaining feedback from campaigns across the country and identifying what had been successful.

The Health and Wellbeing Board agreed to trial this process with child obesity and to present the findings to the May WK HWB. Malti Varshney agreed to take forward the following:

- Identify what data was already available and to identify those areas where West Kent was an outlier;
- Drill down into the data to identify specific areas within West Kent that were outliers, even if West Kent as a whole was not an outlier;
- Gather soft intelligence to support the data;
- Agree the methodology.

**Action: Malti Varshney**

## 5. TOWARDS TOTAL PLACE

### Financial and Service Overview of the Better Care Fund

Louise Matthews gave a presentation on the Better Care Fund, the funding that was available in West Kent and how this aligned to Mapping the Future.

Alison Broom asked what mechanism would need to be in place to start this conversation and how the WKHWB would make connections with what other services delivered eg Age UK and the British Red Cross. Louise Matthews responded that it would rely on joined up working.

The Chair noted that this was an opportunity to review what was working, even though the budgets had already been allocated. There was also an opportunity to learn from best practice in other areas eg the integrated discharge system in North Kent.

William Benson asked whether the membership of the board should have a representative from the acute trust to facilitate better partnership working.

### Public Health Spending in West Kent

Mark Gilbert gave an overview of public health spend by programme area and the outcomes against each activity. Alison Broom asked whether there was any scope to develop the commissioning plan in a collaborative/co-designed way. Mark Gilbert confirmed that this was the intention going forward, however it would likely be by involvement rather than consultation. Malti Varshney added that there needed to be a population-level and lifestyle approach to commissioning, rather than a programme approach, and a paper to that effect was going to the Kent Health and Wellbeing Board the following day. Prevention should form part of various pathways and should not be a standalone programme. Alison Broom reiterated that future design and commissioning of public health services should involve partners. Malti Varshney and Mark Gilbert agreed to present the public health commissioning plan to the May meeting of the West Kent Health and Wellbeing Board.

**Action: Malti Varshney/Mark Gilbert**

A discussion followed about the fact that some services would need to be commissioned county-wide and therefore the WKHWB would need to understand what money was available in West Kent and what type of services were required.

William Benson and Cllr Alison Blackmore left the meeting.

### Scope of future integrated commissioning

Alison Broom gave a presentation on approaches to commissioning and the next steps. The Chair commented that the starting point of a joint commissioning plan in West Kent was the continual review of the Better Care Fund.

Malti Varshney suggested setting up a sub-group comprising finance officers from each of the partners, in order to develop a common understanding of the total assets and resource available in West Kent and to develop a commissioning methodology. Alison Broom suggested that this approach would be too broad and instead suggested focussing on one particular outcome. Alison Broom and Malti Varshney agreed to discuss this further outside of the meeting. **Action: Alison Broom/Malti Varshney.**

### Spending on out of hospital care in West Kent

The Health and Wellbeing Board noted that it was not yet clear how much was spent on out of hospital care in West Kent. Penny Southern commented that it was possible to give a breakdown of spend in certain areas eg mental health. Penny Southern agreed to discuss this further with Anne Tidmarsh and Malti Varshney outside of the meeting. **Action: Penny Southern.**

## 6. CHILDREN'S DEVELOPMENT INCLUDING TROUBLED FAMILIES

### 6.1 Local state of play and proposed governance arrangements

Hayley Brooks gave an update on progress against her action to work with all districts to understand what gaps there were in the governance arrangements for children's development. Ms Brooks reported that she would be convening a meeting of all chairs and local authority representatives to identify the common themes from the strategic plans and to ensure that the Children's Operational Groups (COGs) were working towards the same priorities. This would ensure that there was consistency in terms of reference and local objectives. Ms Brooks agreed to report back to the next WK HWB on the progress made. **Action: Hayley Brooks.**

Lesley Bowles commented that the Children's Operational Groups would be based on district boundaries rather than CCG boundaries and that some groups were already in place.

### 6.2 Update from Kent County Council Children and Young People's Services

Nick Fenton gave an update on the new structure of the Early Help and Prevention, Education and Young Peoples Directorate at Kent County Council. The department was

keen to support the work of the Children's Operational Groups which were at different stages of development. Mr Fenton gave an example of the reporting tool used by Dartford, Gravesham and Swale COG. The Health and Wellbeing Board agreed that this would be a useful tool.

Malti Varshney noted that children's and young people's health could be another key area of focus in terms of the total place perspective.

#### 7. WEST KENT STRATEGIC NEEDS ASSESSMENT

RESOLVED: That a West Kent strategic needs assessment is undertaken for the use of the West Kent Health and Wellbeing Board.

Malti Varshney agreed to set up a group to take this action forward. **Action: Malti Varshney**

#### 8. SYSTEM LEADERSHIP

Louise Matthews reported that the System Leadership document had been updated to reflect the comments made at the last meeting.

RESOLVED: The West Kent Health and Wellbeing Board approved the System Leadership Structure as outlined in the paper.

#### 9. CARE ACT 2014

Christine Grosskopf joined the meeting to give a presentation on the Care Act 2014 and the impact this would have on service users.

Malti Varshney commented that these services needed to link with the CCG self-care strategy and other prevention services that had already been commissioned by the CCG.

#### 10. ANY OTHER BUSINESS

There were no items of other business.

#### 11. DATE OF NEXT MEETING

The date of the next meeting is Tuesday 19<sup>th</sup> May at Tunbridge Wells Borough Council, Committee Room B, Town Hall, Tunbridge Wells TN1 1RS.