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CANTERBURY CITY COUNCIL

CANTERBURY AND COASTAL HEALTH AND WELLBEING BOARD

Minutes of a meeting held on Thursday, 9th July, 2015 at 6.00 pm in the Canteen, Council Offices

Present: Dr Mark Jones (Chairman)

Jane Durant Jayne Faulkner

Jo Pannell (for Steve Innett)

Faiza Khan

Councillor S Chandler

Velia Coffey Neil Fisher Mr Gibbens

Councillor Howes Mark Lemon Paula Parker

Councillor Cllr Pugh Councillor P Watkins

1 APOLOGIES FOR ABSENCE

Simon Perks, Sari Sirkia Weaver, Lorraine Goodsell, Jonathan Sexton, Cllr Andrew Bowles, Debbie Smith, Mark Kilbey, Steve Inett, Amber Cristou.

2 MINUTES OF THE LAST MEETING AND ACTIONS

The minutes were approved as an accurate record.

Actions:

All actions were complete except the action under item 4 regarding sourcing age related statistics on alcohol related acute admission. This action is still ongoing.

3 MATTERS ARISING NOT ALREADY ON THE AGENDA

It was noted that a review of the structure and function of the Health and Wellbeing Board would follow the priorities that will be presented later in the meeting.

4 CANTERBURY HWB STRATEGY AND PRIORITIES FOR CANTERBURY - FAIZA KHAN

Faiza Khan gave a presentation and reported that her remit was to identify key areas that were showing poor performance in the district. Nine priorities have been identified and a slide was presented for each.

It was noted that they are grouped into three main areas; starting well, living well, ageing well with any targets set to be achieved in the next three years. All data is on a district level rather than based on the local Clinical Commissioning Group (CCG) area. It was agreed that data for wards that cover Faversham and Ash as well as the parts of Dover that are covered by the CCG area need to be included where possible.

The Board was asked to agree the priorities and the key responsible organisations.

The following comments were made:

Flu vaccination for children – The CCG does not commission these services from nurses and General Practitioners (GPs) therefore it was felt that the Children's Operational Group (COG) should be responsible for this rather than the CCG.

Smoking in pregnancy – A query was raised regarding the quality and completeness of the data however Faiza Khan advised that there is a poor quality marker against East Kent Hospitals University NHS Foundation Trust (EKHUFT) and this is definitely a concern in Canterbury.

Concern was raised that the COG does not represent Swale but Velia Coffey advised that there is effective liaison between Swale agencies and Canterbury COG.

Alcohol – It was queried how the Community Safety Partnership (CSP) would deliver the target around providing information. It was suggested that the target relates instead to the CSP effectively delivering the Alcohol Action Plan.

Obesity – It was suggested that the high student population in Canterbury could be skewing the data and it was agreed that the data should be broken down to under 25s and over 25s. It was noted that solutions for tackling for obesity are different for each age group therefore more age specific information was be needed.

Action: To be picked up by the Core Group.

Smoking amongst routine and manual workers – The Board discussed this and agreed that this is probably due to social and economic inequalities for people who do these types of work. As this probably refers to a small number of people/employers it was hoped that this could be addressed relatively quickly and easily.

Dementia – Neil Fisher advised that Canterbury is performing very well against this already.

Ageing well – It was agreed that the responsible organisation should be the Joint Commissioning Delivery Steering Group and that the priorities were narrowed to a small number of long term conditions.

The Board agreed these nine priorities and it was noted that there will be an action plan for each of them put in place with the agencies who are leading on each and progress will be reported back to the Health and Wellbeing Board.

JOINT COMMISSIONING DELIVERY STEERING GROUP REPORT - NEIL FISHER Neil Fisher presented the report on behalf of Lorraine Goodsell and invited questions.

It was noted that Vanguard now includes all but five practices in the CCG (these five are mainly in Herne Bay).

The Vanguard programme aims to integrate primary and community services to provide proactive care in the community. It is a different model of care to the current one and focuses on identifying vulnerable people and preventing illness. It was highlighted that this is a pilot model and there are different models running across the country.

It was agreed that the NHS needed to communicate better with Local Authorities specifically around membership of stakeholder groups.

Paula Parker described the Age UK Integrated Care Programme project and advised that Ashford and Canterbury CCG and their partners had been successful in securing funding, a project officer has been appointed and a cohort of patients identified in Canterbury Ash and Faversham. The aim of this 18 month project is to reduce the number of admissions and support people in their homes.

6 MENTAL HEALTH GROUP REPORT - NEIL FISHER

Neil Fisher advised that this report is presented to Mental Health Action Group and it was agreed that it should also be presented at the Health and Wellbeing Board.

Action: Neil Fisher to recirculate the report with all acronyms in full.

It was noted that 15-18 year olds have now been recognised within Improving Access to Psychological Therapies (IAPT). Jayne Faulkner advised that mental health is a focus for The Department for Work (DWP) and Pensions and they have secured funding for local IAPT services which is currently out to tender. It was agreed that the CCG and DWP should work closely on this.

7 CHILDREN'S OPERATIONAL GROUP REPORT - FOR INFO

The report was received.

8 ANY OTHER BUSINESS

Cllr Pugh reported that he had attended a Health and Wellbeing session at the recent Local Government Association (LGA) Conference in Harrogate and that it had been suggested that Health and Wellbeing Boards were reviewed.

Action: Core Group to consider a peer review.

Cllr Howes advised that a document had been produced by the LGA on the future of Health and Wellbeing Boards.

http://www.local.gov.uk/publications/-/journal content/56/10180/7363877/PUBLICATION

It was noted that any devolution and combined authorities model in the future may mean that CCG money could be released to combined authorities from NHS England as long as CCGs and Public health are significantly linked. Kent Leaders and Chief Executives are discussing the possibility of devolution and how this may work in Kent.

Mark Jones reported that clinical leaders had met recently and it was suggested that the outcome of these discussion was reported to the Core Group.

9 DATE OF FUTURE MEETINGS

September TBA 2 November 2015 19 January 2016 9 March 2016 10 May 2016

All meetings start at 18.00