

WEST KENT HEALTH AND WELLBEING BOARD
MINUTES OF THE MEETING HELD ON 15TH SEPTEMBER 2015

Present:

Gail Arnold	Chief Operating Officer, NHS West Kent CCG
Dr Bob Bowes - Chair	Chair, West Kent Clinical Commissioning Group (CCG)
Cllr Pat Bosley	Sevenoaks District Council
Alison Broom	Chief Executive, Maidstone Borough Council
Cllr Roger Gough - Vice Chair	Kent County Council (KCC), Chair, Kent Health & Wellbeing Board
Steve Innet	Chief Executive Officer, Healthwatch Kent
Dr Tony Jones	GP Representative, NHS West Kent CCG
Mark Lemon	Strategic Business Adviser, KCC
Cllr Marion Ring	Portfolio Holder, Maidstone Borough Council
Gary Stevenson	Head of Environment & Street Scene, TWBC
Malti Varshney	Public Health Consultant KCC, NHS West Kent CCG
Cllr Lynne Weatherly	Portfolio Holder, Tunbridge Wells Borough Council (TWBC)

In Attendance:

Sarah Richards	TWBC
Kathryn Braggins	TWBC
Karen Hardy	KCC Public Health
Mark Gilbert	KCC Public Health & Commissioning
Jane Heeley	T&MBC
Yvonne Wilson - Minutes	NHS West Kent CCG
Sarah Robson	MBC
Heidi Ward	T&MBC
Becca Pilcher	KCC Public Health
Emily Lucas	KCC Public Health
Afshan Shah	GP Trainee
Indarpreet Channa	GP Trainee

1. WELCOME, APOLOGIES FOR ABSENCE AND SUBSTITUTES:

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

William Benson	Chief Executive (Resigned, Gary Stevenson to replace)
Cllr Annabelle Blackmore	Substitute Cllr Marion Ring - MBC
Lesley Bowles	Chief Officer for Communities and Business – Substitute Hayley Brooks, Sevenoaks District Council
Cllr Maria Heslop	Tonbridge & Malling Borough Council (T&MBC)
Dr Caroline Jessel	Clinical Transformation and Outcomes Lead, NHS England
Dr Andrew Roxburgh	GP representative, NHS West Kent CCG
Dr Sanjay Singh	GP representative, NHS West Kent CCG

2. DECLARATION OF DISCLOSABLE PECUNIARY INTERESTS

There were none.

3. MINUTES OF THE PREVIOUS MEETING HELD 15 JULY 2015

3.1 The minutes of the previous meeting were agreed.

4. MATTERS ARISING

4.1 Action Points – See Actions Schedule attached.

5/15: To be reported upon under agenda item 5

7/15: To be reported upon under agenda item 6

3/15: Steve Innet reported that discussions had taken place between Public Health and Healthwatch Kent as part of the PH Transformation Plan.

5/15: It was reported that ability to provide this information was hampered by the school holiday period.

5/15: It was reported that the provision of vending machines was determined under existing school contracts and there was therefore no scope for any further action.

5/15: Bob Bowes reported that there was wide variation in the provision of ante natal classes across West Kent. The matter of revising the maternity services contract to address the need for action on smoking and obesity would be reflected in the revised service specification.

5/15: Malti Varshney reported that this would be addressed through the Public Health Commissioning process as the Health Visiting commissioning responsibility was due to transfer from NHS England to local authorities from October 2015.

9/15: Bob Bowes reported that no CCG representation had been secured and also outlined inherent challenges in securing GP representation for Task Groups. Concern was expressed about this outcome - the need for an appropriate lead (not necessarily a GP was emphasised).

RESOLVED: This remains an important issue for the West Kent Health & Wellbeing Board (WK HWB) further efforts be made to secure a representative from the CCG with consideration given to identifying a nursing or other appropriate officer, who could participate in the Children's Operational Groups. **ACTION: HB/YW**

4.2 Update on Children's Operational Group – Oral Report

4.2.1 Hayley Brooks reported on the progress towards establishing new arrangements for ensuring the health and wellbeing of children and young people. Main developments reported:

- Each local Borough/District had arrangements in place for considering the future direction of Children's Operational Groups

- KCC Strategic Commissioning Lead for Children's Social Care (Tom Wilson) was working with local areas to ensure the design of effective bodies across West Kent – in line with KCC's 'The Blueprint for Children's Partnership Working'
- Arrangements would be such that KCC Strategic Commissioning would acknowledge local circumstances but also seek to ensure effective relationships with the top tier Kent Children & Young People Health and Wellbeing Board; Kent Safeguarding Children Board; Troubled Families Programme and Local Health & Wellbeing Boards.
- Sevenoaks District had a workshop to consider these matters on 16/09/2015..
- Maidstone Borough has a 'holding group' in place which has agreed a timetable for contributing to a brand new Kent-wide Children & Young People Plan (to be in place by March 2016).
- Tonbridge & Malling and Tunbridge Wells Boroughs did not yet have arrangements in place, though KCC Community Development officers were poised to assist.

4.2.3 Cllr Ring suggested that the recommendations of the Kent Health Overview Scrutiny Committee will need to be considered in the process of establishing Children's Partnership arrangements.

4.2.4 Malti Varshney suggested that each area would need to identify local strategic, operational and outcome focused priorities based on local knowledge and formal data and information.

4.2.5 **RESOLVED:** That the Board noted the oral report and points raised in discussion (4.2.3 and 4.2.4) and receive further reports on progress at future meetings .

4.3 Update on Obesity Strategy – Oral Report

4.3.1 Jane Heeley reported on progress against the Obesity Strategy 'action points'; at 4.1 above. Good progress was reported at district/borough level:

- Through the vehicle of the National Child Measurement Programme,
- Healthy Weight programmes commissioned by KCC PH and
- 'Other' measures, including forging links with practice based staff; borough meetings scheduled with WK CCG Medicines Optimisation Team, Maidstone area Practice Managers' Forum.

4.3.2 Letters had been drafted on behalf of the WK HWB Champion, for distribution to Early Years, Education and the WK CCG regarding contracts commitments.

4.3.3 Jane Heeley outlined the elements of a potential 'high profile' media campaign which could secure positive engagement and deliver positive messages to the strategy target market – total costs £60,000 - £70,000:

- Heart Radio adverts; Celebrity Chef and Heart Angels participation in 'community' events £41,000
- Development of a supporting website with data, measurement of engagement, social media blogs, press releases £10,000
- Bus advertising over 5 week period £9,000
- All WK HWB Members/Partner's Activities with consistent messages

4.3.4 The following comments and questions were raised in discussion:

- What evidence exists from elsewhere about the value for money of this proposed campaign?
- Need to ensure there is a clear understanding about the nature of the target market (susceptibility to the message, audience numbers)
- Kent Waste Partnership Initiative could link – with messages about reducing food waste and healthy eating
- Suggested that messages about healthy weight must start with local 'captive audiences' e.g., in GP settings (with GP based Health Trainers) and schools. Opportunities to focus on GP training in understanding how to make 'every conversation count' and effective sign-posting is key area of focus

4.3.5 Jane Heeley confirmed the following;

- Population group/age profile for target audience correct
- Broadcast Transmitter splits so possible to target West Kent and Medway NHS Heart broadcasts to 399,00 weekly
- Good evidence of similar campaigns on health matters and Keep Kent Tidy

4.3.6 **RESOLVED:**

- To distribute information outlining evidence of success of this approach to all WK HWB partners
- Consider securing a proportionate sum from each agency represented on the WK HWB to resource this project total £60,000

ACTION: JH/YW

4.4 Update on Alcohol Summit – Oral Report

4.4.1 Karen Hardy reported that the Task& Finish Group had met once since the last Board meeting to plan the event. Proposals include:

- Half day event on 22/10/2015 with external facilitator

- Provisional list of 80 delegates
- Advance information (data analysis) to be provided to delegates so that the Summit focuses on outcomes
- Agenda to include; multi-agency workshop groups considering case studies to identify and build knowledge, skills, gaps and find solutions.

4.4.2 **RESOLVED:**

- That the Summit Brief detailing the objectives and expected outcomes be circulated to Board members
- Task Group to consider day/date change to a Wednesday which may enable participation of GPs during their 'protected learning time'

ACTION: KH/YW, TASK&FINISH GROUP

5. **TOTAL PLACE**

5.1 Health & Social Care Integration

5.1.1 Cllr Roger Gough laid copies of the schedule setting out the financial information by social care groups around the table and explained the information was presented according to age and 'other' adult services.

5.1.2 Bob Bowes sought clarification that the information related to the first four months of this year; and commented on the nature of the 'productivity' challenge.

5.1.3 Cllr Gough acknowledged the scale of overspend (though there was an expectation that improvements would be shown during the year), and highlighted the particular challenge of addressing the matter of unaccompanied asylum seeking children in East Kent.

5.2 Better Care Fund

5.2.1 Gail Arnold introduced the report and outlined current monitoring and reporting arrangements. The lack of synchronicity between dates for monitoring and WK HWB meeting meant the Board could not consider progress reports in advance of the submission.

5.2.2 The following points were raised in discussion:

- Anxious to consider how the Board can contribute to productivity (Bob Bowes)- linked to 5.1.3
- View expressed that resources directed to communities often came with advice about health limiting behaviours but with insufficient attention given to how to connect properly with communities; avoid duplication; enhance consistency and ensure closer co-operation between the boroughs and CCG.(Cllr Ring)

- It is through the Urgent Care Board that Social Care and CCG programmes are initiated with a focus on working in teams, innovating and agreeing joint projects (Dr T Jones)
- BCF is a useful discipline in taking steps towards sharing data, though some way to go yet regarding merging budgets. Swale HWB were reported to be moving ahead with information-sharing and partner examination which is helping build evidence for a way forward (Cllr Gough)
- Suggestion that 'pooling budgets' strategically goes beyond BCF and a mechanism of merging budgets and that the Board should begin to consider what this might look like (Steve Innet)
- BCF report helpful, would like better understanding of the impact of different work streams and to know what are the barriers to achieving more; also the HWB should reflect on whether there are actions other agencies can take? Ideas for cross cutting projects could include – Winter planning; Falls Prevention Pathway; Supporting Independence (including Disabled Facilities grant-giving and outcomes) and improving Co-ordinating services to deliver value for older people (Alison Broom).

5.2.3 **RESOLVED:**

- That the Board notes the Better Care Fund report
- That the KCC Revenue Budget Forecast Schedule 2015/2016 be discussed in the NHS West Kent CCG as part of exploring areas of joint working
- That a Frail Elderly Task & Finish Group be established with membership drawn from Chief Operating Officer level of the local districts and boroughs, CCG, KCC Social Care and Voluntary Sector to consider:
 - Assessment
 - Interdependencies
 - Benefits (welfare and adaptations)
 - Health
 - Mental Wellbeing
 - Delivering Value
 - Identification of/addressing barriers

ACTION: MV/YW

6. CONSIDERATION OF WEST KENT HEALTH & WELLBEING PROFILE

- 6.1 Malti Varshney introduced this item and explained that the draft document was not intended to replace the Kent Joint Strategic Needs Assessment, but was locally focused, with local analysis using available data sources including data and information provided by other public sector partners. The following key issues were highlighted in the presentation:

- Support the efforts of the WK HWB in setting its strategic direction and priorities for action
- Identify areas of high need that are contributing towards variation in health outcomes
- Information for Commissioners to target commissioning resources
- Methodology designed to reflecting on the 'lifecourse' approach – setting out issues for starting well; living well and ageing well
- Population level improved outcomes identified to promote understanding of the key areas/issues of challenge and highlights agencies with particular roles to play
- Further information on children's needs to be added
- Next Steps
 - Board members invited to comment on findings and recommendations and ultimately use to determine priorities
 - Instruct respective commissioners to note findings and use to inform commissioning intentions
 - Align commissioning intentions across the organisations
 - Seek assurance form respective commissioners

6.2 Points highlighted in discussion:

- Positive development recognised in helping to inform earlier in commissioning cycle
- Should there be a stronger focus on certain key geographical areas?
- How might a 'Total Place' approach apply?
- Should the Board be recommending a Total Place approach – advised to consider Margate Taskforce approach
- Lifecourse approach welcomed
- Is obesity a topic that is poorly addressed because of fragmented actions and should the focus be on prevention and lifestyle?
- Suggested that people often find 'behaviour change' a challenge and so likely need intensive resources to help ensure the expected change can be successful - is this a trade-off that might then lead to narrower focus of provision (because resources were targeted to those most in need of change in behaviours and outcomes)?
- Some local communities never think too far into the future.

6.3 **RESOLVED:**

- That the Board notes the report.
- That the slide presentation be made available to Board Members
- That Board members assess the Health & Wellbeing Profile and consider the implications for commissioning within their respective agencies.

- That an agenda item be added to the November Board meeting – for reports for each agency on implications and actions proposed

ACTION: YW/ALL BOARD MEMBER AGENCIES

7. PUBLIC HEALTH SERVICES IMPROVEMENT STRATEGIES

7.1 Mark Gilbert (KCC Public Health Commissioning & Performance Manager) and Malti Varshney made a joint slide presentation.

7.2 Key points highlighted included:

- Key drivers for change (NHS Five Year Forward View; Care Act; Health & Wellbeing Board priorities; Improving healthy life expectancy; Tackling Health inequalities; a growing, ageing, diversifying population and Financial and contractual drivers (reduction in grant in 2015/2016)
- Current West Kent Public Health spend data
- Current service models
- Recent research evidence – 'clustering of unhealthy behaviours'; health improvement hub' approach and potential for innovation; 'invest to save over longer term' principles
- Recommended move to life-course approach
- Need to strengthen outcomes and so there are key themes to apply (inequalities focus; population wide health promotion with better multi-agency action and integration; children and young people's services to include emphasis on emotional wellbeing)
- Timeline for engagement and consultation (March – September 2015); revision of procurement models planned (October 2015); transition to new service models (April 2016)
- 9 High Impact Areas identified (Start in life; Healthy Schools/Pupils; Economically Active Communities; Active Travel; Housing; Environment; Stronger Communities; Public Protection; Health and Spatial Services).

7.3 The following range of questions were put to the Board for consideration/discussion:

- Are services fit for purpose?
- Is grant invested in the right way?
- What should be mandated and discretionary?
- How many and are the right people benefitting from services?
- How do services perform?
- How do contractual arrangements limit what can be done?
- Are we planning for the future?

7.4 Comments and Questions discussed:

- Is the funding for West Kent which was handed over by health correct? (Bob Bowes)
- The West Kent *share* of the grant had been historically 'underfunded' (Cllr Gough)
- Clarification sought on staffing costs (Dr T Jones)
- High Impact Area are complimentary to wider health determinants, HWB partners could assess what health and local councils do to address these issues and determine what activities have the biggest and least impact (Alison Broom)
- Local councils with partners have opportunities to 'design' communities (Sarah Robson)
- Suggestion that 'settings' are important, as is the need to consider the importance of being effective in communications with 'captive audiences' e.g., in the 1:1 communications between GP and patient or work in settings such as education/schools (Dr Tony Jones)
- Would be useful to see trend analysis and be able to understand what's happened after 'added investment' (Bob Bowes)
- Suggested that there is a wide body of knowledge about deprivation (see Marmot Review) partners involved in HWB must acknowledge key issues – about motivation to change, responses to deprivation and poverty needs to be increasingly sophisticated and nuanced (Mark Lemon)
- Need to encourage healthier choices to be the *easier choices* people make – Troubled Families approach with work with families or people 1:1 deserves careful consideration (Gary Stevenson)
- Important that PH understand the nature of existing services which often operate with 'add-ons' including effective sign-posting and referrals that could be described as 'wraparound and holistic' (Hayley Brooks)
- Districts/Boroughs welcome opportunity for involvement (Alison Broom).

7.5 **RESOLVED:**

- The Board duly noted the report and work carried out to date
- That each partner organisation represented on the Board participate in identifying local priorities and shaping future service delivery

ACTION: MG/MV/KH/YW; WK HWB Members

8. **ACTIVE TRAVEL**

- 8.1 The Chair reported on an approach from the Tunbridge Wells Bike Group who were involved with partners in the Borough Council and Kent County Council in a campaign which supports the development of a new Cycling Strategy which included proposals for the introduction of 20mph speed limits.

8.2 The Chair suggested that there were links between travel and health including air quality and physical inactivity and sought views from Board Members on whether the Board could add additional value to work ongoing across the local boroughs.

8.3 **RESOLVED:** That a report on Active Travel measures be produced jointly by local authority partners and submitted to the WK HWB for endorsement.
ACTION: Local Authority partners; WK HWB

9. **ANY OTHER BUSINESS**

9.1 Kent HWB

9.1.2 Roger Gough referred WK HWB members to the minutes of the Kent HWB meeting of 15 July 2015 and reported on key issues considered at the Kent HWB of interest for the WK HWB including:

- Public Estates Initiative – **ACTION: Local HWB will need to take actions agreed forward/BB**
- Healthwatch, Quality and the Health & Wellbeing Board

9.1.2 The Kent HWB would be considering An important paper at the next Scheduled meeting (16/09/2015) on Kent Health and Wellbeing Board and Local Health and Wellbeing Boards Relationships and Future Actions

9.1.3 **RESOLVED:**

- That this be added to the agenda for consideration at the next meeting.
- In order to facilitate effective communication between the two Boards, that consideration be given to amending the dates for the future meetings in 2016 to be held on 'even' months.

ACTION: YW/BB/RG

9.2 Steve Innet asked whether the issues surrounding the current position of Medway Maritime Hospital could be considered at the Board.

9.2.1 This was felt to be an Overview and Scrutiny Committee function, however it would be useful for the Board to discuss Winter Preparedness.

9.2.2 **RESOLVED:** That a paper be brought to a future meeting on Preparedness for Winter 2015.

ACTION: GA

10. **DATE OF NEXT MEETING**

Tuesday 17 November 2015, 4.00pm – 6.00pm, Conference Room, Sevenoaks District Council, Council Offices, Argyle Road, Sevenoaks, Kent, TN13 1HG.