

## DARTFORD BOROUGH COUNCIL

### DARTFORD GRAVESHAM AND SWANLEY HEALTH AND WELLBEING BOARD

**MINUTES** of the meeting of the Dartford Gravesham and Swanley Health and Wellbeing Board held on Wednesday 7 October 2015.

**PRESENT:** Councillor Roger Gough (Chairman) Kent County Council  
Councillor Ann Allen MBE – Dartford Borough Council  
Councillor Tony Searles – Sevenoaks District Council  
Councillor David Turner – Gravesham Borough Council  
Lesley Bowles – Sevenoaks District Council  
Stuart Collins – Kent County Council  
Sheri Green – Dartford Borough Council  
Sarah Kilkie - Gravesham Borough Council  
Val Miller – Kent Public Health (representing Andrew Scott-Clark)  
Melanie Norris - Gravesham Borough Council  
Dr Su Xavier – DGS Clinical Commissioning Group

**ALSO PRESENT** Tristan Godfrey (KCC), Karen Sharp (Kent Public Health) and Adam Green (CRI Gravesend)

#### 100. APOLOGIES FOR ABSENCE

Apologies for absence were received from Graham Harris Dr Elizabeth Lunt, and Cecilia Yardley.

#### 101. DECLARATIONS OF INTEREST

A declaration of Interest was made by Councillor Ann Allen in the additional item on the Agenda (taken as item 5) as she was Chair of Dartford Healthy Living Centre and they received funding from Kent County Council for commissioned services that they provided.

#### 102. MINUTES

The Minutes of the Dartford, Gravesham and Swanley Health and Wellbeing Board held on 19 August 2015 were agreed as a correct record of that meeting.

#### 103. KENT COUNTY COUNCIL, HEALTH AND WELLBEING BOARD.

The Chairman reviewed the meeting of the Kent Health and Wellbeing Board held on 16 September 2015 and drew Members' attention to the following items which were discussed

- Young Persons' Emotional Wellbeing
- Effects of Winter on Health Care
- Healthwatch Kent – Strategic Priorities

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- Relationships between Kent HWB and the Voluntary Sector

He noted that two further items – Joint Strategic Needs Assessment and Arrangements For Local Boards - had been placed on the Agenda for this Board to consider and would be discussed later in the meeting.

**104. URGENT ITEMS**

The Chairman announced that he had been informed that there was one additional item, which was considered urgent as the report concerned the re-tendering of public health services and consultation on this was necessary before the next meeting of the Board.

Councillor Gough further announced that the matter would be considered as the first substantive item on the Agenda for the meeting.

**105. PUBLIC HEALTH SERVICES TRANSFORMATION AND COMMISSIONING PLANS.**

The Board received a presentation from Ms Karen Sharp the Head of Public Health Commissioning at Kent County Council together with a report explaining a review which was currently being undertaken on the use of the Public Health Grant, currently administered by Kent County Council.

It was noted that the review was driven by various initiatives including the NHS Five Year Forward View, and The Care Act both of which identified that effective prevention is key to the success of future Public Health provision and had used a Life Course model.

Ms Sharp also explained that it was felt that a move away from the currently favoured multi track individual specialist treatment approach to an holistic approach where more generically trained staff provided counselling services to be necessary and would be beneficial.

It was noted that a public consultation exercise is due to commence in November 2015 and that each of Kent's regional Health and Wellbeing Boards was to receive this report and presentation before that.

The following issues were raised by Board Members

- The possible negative aspects that can be raised by the proposed holistic approach
- The necessary balance which must be struck when deciding procurement priorities between specialist and generic services

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- The maintenance of service provision by the voluntary sector given the difficulties involved in providing proofs of achievement
- The acceptance that generic counsellors will, in effect, become gatekeepers to specialised service provision.
- The necessity to maintain strong links between Clinical Commissioning Groups and Public Health commissioners.
- There is no one size fits all approach to this – what works in the leafy suburbs of Surrey will not apply to urban Gravesend

Having discussed this issue at some length it was agreed that the Board

- a) should structure its future approach to individual problem areas to take into account the aims of the review.
- b) Participate in identifying local priorities and shaping future service delivery.
- c) Promote the public consultation on public health programmes during November utilising any appropriate partner publication and engagement activities

**106. ACTIONS OUTSTANDING FROM PREVIOUS MEETINGS**

The Board received a report on work issues outstanding from previous meetings and noted that the only uncompleted matter related to ongoing work on engagement with schools being undertaken by the Chairman.

**107. KENT ALCOHOL STRATEGY - UPDATE**

The Board received a verbal update from Mr Adam Green, Criminal Justice Team Leader from CRI Gravesend, on the work of his organisation which is implementing the Kent wide alcohol strategy in our area.

In view of the complexity of this matter Mr Green agreed to provide a written update on this matter when it returns to the Board in six months time. The Board also agreed that it would be helpful to invite Linda Smith, Kent Public Health to the same meeting in order that local progress can be put into a county-wide context.

**108. HEALTHY TOWNS BID**

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The Board received a copy of a bid document submitted to the NHS for registration of interest to join the Healthy New towns Programme for the Ebbsfleet Development.

The bid document had been completed by the local Clinical Commissioning Group in conjunction with health partners from across the Board area.

The Board were informed that the bid document had recently been submitted and that an initial response was expected in November 2015.

It was also noted that the bid if successful would be included within the Ebbsfleet Masterplanning process, that an Estate Strategy Team was to be constituted, and that relevant partners would be involved.

The Board noted the current situation and that further reports on the bid would be provided in the standing item relating to New Developments. . It was also noted that KCC and the CCG were looking at their public estate strategies with a view to 'One Public Estate'. It was agreed that the Board should receive a future report on this.

**109. UPDATE ON IMPLICATIONS OF NEW DEVELOPMENTS FOR THE HEALTH SECTOR AND THE NEW SHAPE OF SERVICE PROVISION**

It was noted that there were no issues to report on this item.

**110. JOINT STRATEGIC NEEDS ASSESSMENT: RECOMMENDATIONS**

The Board received a report, originally presented to the Kent Health and Wellbeing Board on 16 September 2015, which outlined recommendations from the Joint Strategic Needs Assessment to that Board and to Clinical Commissioning Groups.

The recommendations relate to priorities to be adopted when considering commissioning plans for 2016/2017.

It was reported that a number of priority areas had been identified namely

- Obesity
- Alcohol, Smoking, Cancer and Stroke
- Integrated Care for the elderly
- Young Carers
- Mental Health

The Board discussed the need to differentiate between assurance that the service provision was achieving the correct outcomes and the introduction of actions to overcome problems.

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The Board also raised the issue of how education could be engaged to include health education on the curriculum and it was noted that Public Health are already working to improve support to schools on health issues.

It was agreed that the Board would receive reports at the February meeting monitoring the effectiveness of local services relating to the identified service priorities.

**111. ARRANGEMENTS FOR LOCAL BOARDS**

The Board received a report which provided information on a review which has been undertaken of the relationship between the Kent Board and the local Health and Wellbeing Boards. This report had been presented to the Kent Board on 16 September 2015, which had accepted its recommendations.

The report explained the review process and set out the structures of the local boards and also made recommendations regarding

- Work to be carried out by the Kent Board to aid the work of local Boards
- The future relationship between the Kent board and the area boards.
- The business to be carried out by local Boards
- The structure and governance of local Boards
- The relationships between local Boards and the wider community.

It was accepted that many of the recommendations had already been accepted as good practice by the DGS Board and were being put into effect already, although there were some exceptions which were noted.

The Board therefore agreed to note the report and its recommendations.

**112. INFORMATION EXCHANGE**

It was noted that there was no information to be disseminated amongst Board Members.

**113. BOARD WORK PROGRAMME**

The Board received and noted a report on its work plan and on a number of additions and amendments which were made arising from this meeting, specifically, that the Board would receive reports on commissioning plans and current activity addressing priorities at its February meeting, and on the new Public Health model and its implications for Local Boards

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