

## CANTERBURY CITY COUNCIL

### CANTERBURY AND COASTAL HEALTH AND WELLBEING BOARD

**Minutes of a meeting held on Wednesday, 6th July, 2016  
at 6.00 pm in the The Guildhall, Westgate, Canterbury**

**Present:** Dr Sarah Phillips (Chairman)

Sam Bennett  
Simon Perks  
Velia Coffey  
Amber Christou  
Mr Gibbens  
Steve Inett  
Mark Lemon  
Councillor Cllr Pugh  
Jonathan Sexton  
Sari Sirkia-Weaver  
Bill Millar

**1 APOLOGIES FOR ABSENCE**

Cllr Andrew Bowles, Cllr Joe Howes, Simon Perks, Cllr Sue Chandler, Neil Fisher, Lorraine Goodsell.

**2 MINUTES OF THE LAST MEETING AND ACTIONS**

The minutes were approved as an accurate record.

*Action: Sari Sirkia-Weaver to further analyse data for looked after children to establish whether the data is accurate and whether there is more that can be done to better provide for them.*

New data sets will be provided in July and then on the first of every month thereafter.

*Action: Mark Lemon to invite Thom Wilson, Head of Strategic Commissioning, Children's, Social Care, Health & Wellbeing at Kent County Council to the next meeting.*

Complete.

*Action: Neil Fisher and Wendy Jeffreys to further investigate the accuracy of the breastfeeding data.*

Breastfeeding data is collected at the birth of the child and has now reached the required standards at 6 week.

*Action: Cllr Sue Chandler and Sari Sirkia-Weaver to raise this at the Chairs meeting.*

Ongoing.

*Action: Outcomes of the Dover child obesity pilot stakeholder meeting to be reported at the Health and Wellbeing Board meeting in July 2016.*

It was decided to bring this to a future meeting.

*Action: Canterbury and Coastal Health and Wellbeing Board to write to Roger Gough to ask to delegate this responsibility to the local HWB.*

Complete.

*Action: Neil Fisher to produce a summary document of the Annual Plan which could be circulated to Councillors and more widely eg community networks to show what the changes will mean to local people.*

Ongoing

*Action: It was agreed that a report on progress towards meeting the constitutional standards would be brought to the next meeting.*

Complete

### 3 **KENT CHILDREN AND YOUNG PEOPLE'S PLAN - THOM WILSON, KCC**

Thom Wilson did not attend.

Sari Sirkia-Weaver advised that the final version is now live and is waiting for sign off from Kent Health and Wellbeing Board (HWB).

### 4 **PROGRESS TOWARDS MEETING CONSTITUTIONAL STANDARDS - BILL MILLAR**

Bill Millar gave an update and advised that a paper would be circulated with the minutes.

The following was highlighted:

- A&E wait no longer than 4hrs for 95% of patients. This target remains a challenge. A recovery plan has been agreed with the Trust and over the last 8 weeks there has been an increase in performance up to 87%. The aim is to be 93% by September 2016.
- Cancer. There is good progress on improving pathways for cancer services. 2 areas are under pressure although communication with patients has been improved. Meeting these referral targets is still a challenge.
- Referral to treatment 18 weeks from GP to treatment. Orthopaedic and dermatology are still challenging areas and a plan has been agreed to get the orthopaedics on track by September 2016.
- Dementia. For early diagnosis Canterbury stands out as achieving the national standard and is rated 5<sup>th</sup> best across the country.
- Improving Access to Psychological Therapies (IAPT). Canterbury and Coastal are achieving the target of 95% of patients to be seen within 18 weeks.

It is recognised that there are still challenges but all partners are working together closely to achieve these standards. There have been improvements in collaboration in the past year and all senior members of partner organisations are attending meetings and working together to solve problems and meet targets.

### 5 **HOWE BARRACKS - VELIA COFFEY**

Velia Coffey reported that Canterbury City Council (CCC) have now met with all agencies regarding the movement of Redbridge residents to Howe Barracks. 147 families are due to be moved and this will happen at a steady rate.

It was noted that that as these houses were previously occupied it should present no additional burden on health services unless they have special health needs.

These are all family sized homes and it is expected that Redbridge will not under occupy them therefore there may be more families than there were previously. Redbridge are sharing information about the families as they receive it.

Secondary school provision is more of a concern and KCC have advised that places would be at Whitstable Community College which is difficulty journey from Howe Barracks. Primary school provision is likely to be met locally.

CCC have been working with Redbridge to manage the moves and are receiving full information from Redbridge. There is the possibility of an increase in hate crime as many people feel that these houses have been lost to local people. The profile in the local press has been high and CCC are collaborating fully with all agencies and welcoming people into the community.

Concern was raised that the families may be more vulnerable and have additional housing and health needs to the previous residents. Amber Cristou commented that London Boroughs are actively looking for housing in Kent (either existing properties or land for development) therefore this is unlikely to be an isolated event.

## **6 ENHANCED HOUSING PROVISION IN CANTERBURY DISTRICT - VELIA COFFEY**

Velia Coffey advised that Canterbury has four enhanced sheltered schemes which offer services between a sheltered scheme and one offering extra care services.

The extra support is funded by a grant from KCC and this funding has now been reduced so CCC is looking to change the status of these to ordinary sheltered schemes.

CCC has been consulting on the options to move to that model and there has been resistance from some sections of community to the proposals and a compromise has been proposed. The original proposal involved removing some of the domestic services during the day and reducing the night support service. The night service is not good value for money and although the night service will be replaced with a peripatetic service this has been perceived as the service being cut. It was noted that the perception of the care provided was greater than the actual care that was provided.

The proposals have been to CCC's Community Committee 5 times with amendments and the latest proposal is that the peripatetic night service is rejected and residents pay an increased subsidy to include the night service. This proposal will be represented in September and, if agreed will be implemented in October.

Graham Gibbens commented that KCC's policy is to provide extra care sheltered housing and they will work with Canterbury to achieve this.

## **7 VANGUARD MODEL - BILL MILLAR**

Bill Millar advised that there are 16 practices within Vanguard. This is a national pilot looking at delivering new models of care. Working within the community has offered the biggest opportunities in improving healthcare and work is being done on how community hubs can bring together communities and shift resources to support the change from acute to more community settings.

It was noted that Healthwatch have been involved with the East Kent Strategy Board (EKSB) and the consultation and queried how this would be integrated with Vanguard. It was advised that the strategy sets out direction of travel and defines the

outcomes and Vanguard is looking at what services should be seen as part of the provision of service.

It was noted that discussions are just starting, all partner input will be taken into account and the thinking will be shared.

The formal consultation will include all of East Kent and the Case for Change will then be made public and models of care such as Vanguard will be discussed.

Concern was raised that Local Authorities (LAs) are not being included and yet have significant input into facilities for physical activity, housing etc. Sarah Phillips commented that KCC are actively involved but there is a need to greater involve LAs for their more local knowledge.

This will be brought back to the Board as it progresses.

## **8 EAST KENT HEALTH AND SOCIAL CARE STRATEGY BOARD UPDATE - SARAH PHILLIPS**

Sarah Phillips advised that there is a great deal of operational development within the EKSB and how it relates to Vanguard. It was noted that the Sustainability and Transformation Plan (STP) submissions were not permitted to be made public.

It was reported that EKSB is focussing on the Case for Change which is amalgamation of familiar data on EK as a whole. A narrative has been developed around this data to bring out the main points. A public facing document from this is being drawn up and is expected to generate a wide public debate around what, in healthcare, is not being done well and what needs to change.

Different demographics are being consulted in late summer/autumn and this will feed into a clinically led discussion on what provision is needed. This will include input from representatives of acute clinical care as well as social and preventative care. These ideas will be considered using evaluation criteria such as estates, workforce and deliverability and possible service configurations will be developed from there. These options will then be presented for formal consultation.

The Board discussed this and the following was highlighted:

- Healthwatch have been part of this and support the Case for Change. It has included good engagement and a robust process.
- How the high level strategy relates to services on the ground could be difficult to envisage and needs a wide range of people and input to bring different perspectives and ideas.
- The Strategy includes children and mental health services etc and involves looking to plug some of the current gaps and change the way that care is delivered to embed mental health service provision within all services so they are an integral part of the design.
- There is a new Chief Executive of Kent and Medway NHS and Social Care Partnership Trust (KMPT) and greater engagement has already been seen.
- The Board should be involved in contributing across many issues such as homelessness, rough sleeping, substance abuse etc. LAs must be included across all these discussions.
- Prevention is cheaper than crisis response. With regards to domestic abuse CCC have modelled that money spent by CCC on preventative measures benefits all agencies and if this money is not spent then cost of crisis support is higher.

- Communities are extremely important with regards to prevention and this should be kept at the forefront of any plans.

9 **ANY OTHER BUSINESS**

Sari Sirkia-Weaver reported that commissioning contracts for emotional wellbeing and family support were released last week and will be awarded in the autumn/winter. Childrens' and Adolescent Mental Health Services (CAMHS) and school nursing are expected to be contracted in April 2017.

10 **DATE OF NEXT MEETING**

14 September 2016, 18.00 at the Guildhall.