

## CANTERBURY CITY COUNCIL

### CANTERBURY AND COASTAL HEALTH AND WELLBEING BOARD

Minutes of a meeting held on Thursday, 5th October, 2017  
at 6.00 pm in The Guildhall, Westgate, Canterbury

**Present:** Simon Dunn (Chairman)

Velia Coffey  
Wendy Jeffreys  
Simon Perks  
Mr Gibbens  
Councillor Howes  
Councillor Cllr Pugh  
Marie Royle

#### 1 **APOLOGIES FOR ABSENCE**

Jonathan Sexton  
Amber Christou  
Sue Chandler  
Ana Paula Nacif

#### 2 **MINUTES OF THE LAST MEETING AND MATTERS ARISING**

The minutes were agreed as an accurate record.

Page 1 of the minutes. The first action is now complete.

Page 3 of the minutes. Wendy Jeffreys and Marie Royle met with Janine Hodges from the Local Childrens' Partnership Group (LCPG). There is a focus on Northgate and Heron wards and this will be linked to the LCPG agenda. The LCPG holds funds to allocate small grants and their funding priorities will be set by 31 October and take into account the Health and Wellbeing Board's focus on obesity and oral health.

**Action: Feedback to be given at the next meeting.**

Joe Howes commented that it is good that the focus is on the deprived wards and suggested that the one stop shop approach taken in Ashford model is considered. There will be links from the website to the Ashford service.

The Health Visitor services has gone through a transformation phase and the intention is to integrate the service into children's centres wherever possible. Concern was raised at the LCPG that capacity in the Herne Bay centre as a location is limited as the building is shared with other services. It was noted that the aim is to get services working together and sharing data and making outcomes better so this can be virtual sharing centre. There is focus on these wards and their children's centres so uses existing facilities and resources.

Page 3 item 11. A councillor briefing has taken place regarding the temporary transfer of some services from Kent and Canterbury Hospital and it was well attended. Simon Perks reported that the move has gone as planned and had no significant problems in itself. Given current staffing levels it is unlikely that these services will change in the near future.

The action on item 11 is not yet complete:

**All to send details of the comms contacts to Alison Hargreaves to pass to the Chairman.**

### 3 **EAST KENT PUBLIC HEALTH WORKSTREAM PROJECT**

Marie Royle reported that Thanet District Council is leading on an East Kent (EK) Public Health workstream, and she highlighted the following:

- They are looking at the spend across the five EK districts.
- Phase 1 involves data collection on spend on public health initiatives and looking at whether these were motivating change.
- This project looks at common issues and how to best use resources to benefit the maximum number of people possible. Smoking prevention has been identified as a common theme. Canterbury has the second lowest prevalence however is higher for routine manual workers.
- Canterbury is looking at ways to address this eg awareness campaigns, talking to employers etc and looking at ways to reach the business sector eg Serco, Parker Steel specifically in Northgate and Heron wards
- This will be reported to the Leaders and Chief Executives of the five districts in the near future. An ambition is to tie into the Sustainability and Transformation Partnership (STP) and hope to bid for funding for this from the STP.

Cllr Howes suggested working with the Canterbury Business Improvement District to access businesses or with Canterbury4Business.

Cllr Gibbens reported that he has funded 'smoke free school gates' projects using his member grant money and has been encouraged by the results. He suggested that awareness of this was raised to encourage other councillors to use their grants in a similar way.

The STP priorities are smoking cessation and tackling obesity and there is a need to encourage local authorities and health to work together.

Velia Coffey commented that the STP has made local authorities feel more remote from health. Local authorities have a lot of knowledge and experience to positively influence the preventative agenda which is not being fully recognised.

### 4 **SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP**

Simon Perks talked through the August report.

The EK Delivery Board is considering the proposal around hospital changes.

Productivity workstream - looking at ways to bridge the financial gap through increasing productivity.

Hospital care - there have been a number of events and the changes in emergency care shows how important it is to drive this workstream forward.

System transformation - looking to use existing legislation to bring Clinical Commissioning Groups (CCG) together to give a strategic commissioning entity.

Proposals will be going to the CCG boards in the next couple of months.

The focus of the clinical board has been on care for the elderly. It now includes children, cancer and mental health.

A query was raised as to whether the local maternity system is this being integrated into the STP.

**Action - Simon Perks to investigate this and how it may relate to the STP.**

Velia Coffey queried whether the local care investment case is linked with Kent County Council and other local authorities regarding preventative care. Simon Perks reported not at this stage but it is recognised that other elements could be brought into this. A framework would be built on how the invested pound could be best used and where the savings from that investment would be attributed.

## 5 FOCUS ON LOCAL CARE

Local care is defined as any care that happens outside of a hospital. The Herne Bay minor injuries unit opened in September 2017, feedback has been excellent and the public response has been very positive. Now looking at how to support frail and elderly people to live independently for as long as possible.

Simon Perks reported that they looking to implement the STP at a local level. He talked through the presentation and highlighted the following:

The four CCGs in Kent are looking to create a single management team

It was noted that the Secretary of State had previously prevented a merger however thinking has changed and many CCGs are now merging.

The proposal is that the eight CCGs remain as the statutory bodies but they have an MD for EK and one for West Kent with a single accountable officer.

Maintaining the local focus will be through whatever entities have already been set up to deliver local care.

The Accountable Care Partnership (ACP) will be groups of GPs working with the community trust and mental health trust and will form the focus for local care delivery. Senior social care officers are attending the ACP development meetings and further integration of adult social care will take place. Cllr Gibbens advised that KCC are keen to work with Ashford and Canterbury on the health agenda.

It is intended that community prevention schemes will prevent significant admissions for elderly and frail people.

Many local services are now in place eg catheter services, dementia support, health trainers, WaitLess app.

Cllr Pen Pugh reported that public health are considering reducing health trainers and this is of concern.

**Action: Wendy Jeffreys to report back on this.**

There have been reductions in admissions in the Canterbury area already.

Also significant savings are now being seen and Vanguard has exceeded savings target for Q1 and also expected to exceed them for Q2.

It was agreed that Vanguard has been a success and this should be more widely publicised and highlighted as a good news story.

The Vanguard work has significantly influenced the STP and its success has been recognised internally and with NHS England. It was agreed that councillors could take this good news story out to the public as well as directly from the NHS.

**Action: Simon Perks to send some good news headlines that can be distributed to councillors.**

Communication teams in the CCG, hospitals trust and the STP are now all linked and this will help with co-ordinated communications.

It was noted that Swale and North Kent are combining their CCG communications and this should be focussed through their GP hub.

- 6 **ACCIDENT AND EMERGENCY PERFORMANCE AND RECOVERY PLAN**  
The Hospitals Trust had to submit an improvement plan three weeks ago. Actions for all partners were included and this has been signed off by NHS England. It was regularly the bottom performer in the country.

There has been a slow decline in performance over a number of years and there is recognition by leaders that improvements are now essential.

Oversight is given every week and many actions need results within weeks rather than longer term.

One of the main problems is workforce and the trust cannot recruit the number of clinicians needed so some solutions will be longer term.

The need for a medical school was discussed and its possible location and political support was offered.

- 7 **CANTERBURY VANGUARD UPDATE**  
Included above.

- 8 **ANY OTHER BUSINESS**  
Marie Royle advised that the University of Kent and Canterbury Christ Church University met today regarding an application for Suicide Safer Communities status. This will look at how the university supports students, provides a cohesive approach across sites and assesses data and identifies patterns.

- 9 **DATE OF NEXT MEETING**

5 April 18.00 - 20.00 - Guildhall Canterbury

Operational meetings to be held on:

25 January 10.00 - 12.00 - Marion Attwood Room at the Council Offices

19 July 10.00 - 12.00 - Marion Attwood Room at the Council Offices