

THANET HEALTH AND WELLBEING BOARD

Minutes of the meeting held on 11 January 2018 at 10.00 am in the Business Suite - Council Offices.

Present: Dr Tony Martin (Chairman); Councillor Gibbens (Kent County Council), Clive Hart (Thanet Clinical Commissioning Group), Madeline Homer (Thanet District Council), Steve Inett (Healthwatch Kent), Sharon McLaughlin (Thanet Children's Committee), Ailsa Ogilvie (Thanet Clinical Commissioning Group) and Claudia Sykes (Voluntary Sector Adult Services)

In Attendance: Councillor Johnston and Ged Timson

7. APOLOGIES FOR ABSENCE

Apologies were received from Councillor Wells.

8. DECLARATION OF INTEREST

There were no declarations of interest made at the meeting.

9. MINUTES OF THE PREVIOUS MEETING

The minutes were agreed as a correct record of the meeting that was held on 09 November 2017.

10. EAST KENT PROGRAMME BOARD UPDATE

Ms Ailsa Ogilvie presented some updates to the meeting and made the following points:

- Interviews for the Kent and Medway Accountable Officer post will be held on 16 January;
- Development of the STP was progressing well;
- The change process was at a critical stage;
- The focus is on making local improvements for the patients.

In response to the update, other Board members made the following comments:

- It is important that the role of the district councils be articulated clearly in this STP;
- Local Council CExs attended STP Partnership meetings and at the November 2017 meeting, it was agreed that district councils would be giving updates on what was happening at the district level;
- Involvement of district councils was a positive move forward, particularly for agreeing governance arrangements under the new STP;
- A view was shared that Thanet CCG was not yet ready to share an Accountable Officer at the moment;
- It was important to agree the modalities of how this shared arrangement would work;
- Initial plans were that Ashford will provide the main hub for Acute Care. However there was not much detail at the moment;
- Consultation on hospitals had not yet started and there appeared to be slippage on the timing of the consultation;
- Work on the other Stroke Care work stream seems to be progressing well;

- This was likely to be centralised at Ashford. A meeting was scheduled for 31 January to progress this issue further.
- There was a likelihood that the NHS England might intervene on health and safety grounds if the time slippage on making the changes continued;

The Board agreed that it was important to get the communication out to the public regarding the various stages of progress for making the changes to the patient care in the district.

The report was noted.

11. LOCAL CARE UPDATE

Ged Timson, ART and IACO Delivery Lead gave an update presentation and made the following points:

- Work on the Workforce Plan was progressing on well;
- The international recruitment of 55-155 GPs was underway and it would be noted that it would take some months for all the GPs to be in placement across Kent and Medway;
- GP workforce was particularly challenging in Thanet;
- 4 Primary Care Homes (PCH) had been reconfigured to 3;
- A lot of work was taking place that would lead to improved patients experience;
- Social prescribing training was underway and progressing on well;
- The Acute Response Teams (ARTs) were set up in November 2016 and had now been made a permanent service; that would help work with patients who would otherwise be routinely admitted to hospital;
- Planning for the future workforce for this new service was in progress;
- There have been discussions with clinicians on how best to integrate the work of the ARTs with the A&E for the benefit of the patients;
- The intention was to extend this approach to other services like Social Care;
- The GP Five Year Forward View - work was underway to improve patient access to GPs;
- Additional capacity procurement being considered as from April 2018;
- Other parts of the country had already started work on this pilot scheme and Thanet could learn some lessons from the pilot;
- Winter support for additional GP hours will continue to be provided through the Primary Care at QEQM Hospital up to March this year;
- Registration of frail patients will give the patients better care;
- The Acute Response Teams will ensure that acute patients are kept out of hospital through triaging of patients in the A&E to GPs;
- So far there has been a reduction of 196 cases of hospital admissions through the work of these teams;
- GPs have access of patients' records in real time that helps the work of ARTs.

Board members made the following observations in response to the presentation:

- Board members agreed the need to come up with a title for PCH that would offer better clarity on the service being offered to the public;
- The more there was integrated working the more common language there would be, making it easier for the patients to understand the new services;
- It was important for the 14 GP practices to understand the need to share practices;

- It was also important for the public to be advised of that will be fewer (than the current 14) but that they will not be three;
- There was a need to put out some good news story coming out of the change process for better health service delivery to the area;
- The Hub premises for to be built at Westwood Cross will be going to the Planning Committee in February/March 2018;
- A few of the surgeries were on the edge of delicate in terms of their capacity, hence the need for change;
- It should be noted that the CCG should be prepared to step in at short notice;

- Proposals for development at Westwood Cross had received very positive from both TDC and KCC;
- £700,000 had been set aside to look at the pre-building works;
- KCC were happy to be the project manager;
- 6 surgeries were also happy to move to the proposed premises at the Westwood Cross;
- More meetings for further discussion had been planned for this project;
- £10 million may be required to complete this project;
- It was important to put out key messages coming out of this change process, on the CCG website. The webpage would need to be updated regularly;

- The Clinical Network was looking at the non-acute services that included the outpatients, therapies and diagnostics;
- Steve Inett would attend one of the Clinical Network meetings to provide a view on what challenges to the patients come across;
- GPs have to be advised that they will be taking on more patients who would be referred from the A&E;

The Board agreed the following:

1. That more good news story be put out as part of the CCG communication of progress on the new STP;
2. That key messages regarding progress for implementing the new STP should be communicated by the CCG;
3. A timeline of key events/activities relating to the STP should be regularly put be made available on the website;
4. Updates on Local Care to be made a standing item on the Board agenda.

12. THANET LEADERSHIP GROUP - STATEMENT OF INTENT

Madeline Homer gave a verbal presentation to the Board and highlighted the following points:

- The Thanet Leadership Group supports the work of the Board;
- The Group was set up in October 2017 to focus on a place based approach for partnership working across public sector agencies working in Thanet;
- The purpose of the Group is to provide leadership for integrated working and provide better co-ordination of the work of public sector organisations;
- The remit is to re-align partnership agencies for improving education achievements, safeguarding children and vulnerable adults;
- It was also felt that the Group could contribute to the development of the local care model for Thanet;

- The Group could assist with work on the preventative approach;
- The view of the Group was that the strategic direction regarding the local care model could come from the centre, but the delivery could have a local focus and be locally controlled.

- Ms Ogilvie was assisting with putting together the proposal for such an approach and this will inform the creation of the hub for delivering such a service;
- A role for the Group on the integrated commissioning group would need to be clearly defined;
- Ms Ogilvie was exploring ideas with organisations that make up the Leadership Group on building the proposed local care model;
- This will lead to the first workshop for the preventative care model for Thanet;
- Ms Ogilvie was exploring availability with the Leadership group with the aim that the workshop is planned for February 2018.

Members raised the following points:

- It was important that Kent County Council and its leadership be involved in these discussions;
- It was also important to ensure that at the centre of these innovative approaches localism is retained.

The Chairman requested that further updates on this issue be brought to the next Board meeting.

AOB

LCPG Update

There were better applications made by families on speech and language improvement. There was significant interest from the Margate Task Force towards engaging families in increasing speech among the affected children. Ms Sharon McLaughlin will provide updates on Grants at the next meeting.

Meeting concluded: 11.10 am