HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held on Wednesday, 21 June 2017 at 10.00 am in Conference Room A, Civic Offices, Portsmouth.

Present

Councillor Luke Stubbs (in the Chair)
Councillor Donna Jones
Councillor Gerald Vernon-Jackson CBE

Innes Richens
Dr Jason Horsley
Dr Linda Collie
Dr Nick Moore
Dianne Sherlock
Sue Harriman
Jackie Powell
Patrick Fowler

Officers Present

Alison Jeffery Julia Katherine Kelly Nash

6. Apologies for absence, Declarations of Interest and Introductions (Al 1)

Apologies for absence were received on behalf of Councillor Ryan Brent and also from David Williams and Peter Mellor.

There were no declarations of interest.

7. Minutes of Previous Meeting - 15 February 2017 (Al 2)

RESOLVED that the minutes of the meeting held on 15 February 2017 be agreed as a correct record to be signed by the Chair subject to an amendment on page 2, bullet point 5 from 'Care UK Inspection' to 'Care Quality UK Commission'.

8. Membership update (Al 3)

Councillor Stubbs explained that the Health & Wellbeing Board is asked to note and endorse changes to the HWB membership as set out on the agenda with the addition of Councillor Leo Madden as Chair of HOSP as a non-voting member. The membership changes were agreed.

RESOLVED that

(a) CCG membership and new joint Chair - Dr Linda Collie as Chief Clinical Officer and Clinical Leader becomes the new joint Chair

following the retirement of Dr Jim Hogan. The new substitute PCCG Executive Members are Dr Annie Eggins and Dr Nick Moore.

(b) PCC membership - the updated membership approved by Portsmouth City Council at the annual council meeting on 16 May 2017 were as follows:-

Councillor Donna Jones (Leader)
Councillor Luke Stubbs (Deputy Leader, Cabinet Member for Health & Social Care)
Councillor Ryan Brent, (Cabinet Member for Children & Families)
Councillor Gerald Vernon-Jackson (Leader of the Opposition)
Councillor Jennie Brent as a co-opted member
Councillor Leo Madden as a non-voting member.

9. Special Educational Needs (SEND) Strategy (Information item) (Al 4)

(TAKE IN REPORT)

Dr Julia Katherine, PCC Head of Inclusion introduced the report. She said that the effectiveness of the strategy would be tested by a new inspection framework whereby all local areas will be inspected over the next 4 years. Inspections would take place with a week's notice and involve 3 inspectors on-site for 5 days testing out key lines of enquiry. Dr Katherine said that the Health & Wellbeing Board has a key role in overseeing the effectiveness of the system for supporting children and young people with SEND. The Board alongside leaders across the system will be expected to demonstrate that they have a thorough understanding of how effectively Portsmouth is fulfilling its responsibilities for children and young people with SEND under the Children & Families Act 2014. She went on to say that the key strengths identified are set out in paragraph 4.6 of the report. 4.7 of the report shows that areas for further development have been identified as -

- Educational outcomes for children on SEN support
- Transition to Adult Services
- Exclusions ie time out of school for that group

Finally, Dr Katherine advised that a refreshed SEND strategy would be brought to the Health & Wellbeing Board in September 2017 for approval.

Councillor Luke Stubbs thanked Dr Katherine for the report and asked those attending if there was anything they wished to add.

Alison Jeffery said that she would welcome anything any members of the Health & Wellbeing Board could do to address Section 6.1.9 of the report concerning wheelchairs, where unacceptably long waiting times were a major problem. Basically all wheelchairs had to be custom built for the individual concerned and this was taking such a long time that often the individual had outgrown the wheelchair by the time it arrived.

A discussion followed during which members were advised that it was not possible to buy-in a "job lot" of wheelchairs as each had to be built according to individual specifications. It was suggested that an action plan could perhaps be drawn up to assist with this and Innes Richens said that he would pursue this matter.

Jackie Powell congratulated those involved with co-production set out in 5.2.4 of the report for the significant co-production activity with young people.

Councillor Stubbs added his congratulations to all concerned.

The Health & Wellbeing Board noted the report.

10. Pharmaceutical Needs Assessment Refresh (Al 5)

(TAKE IN REPORT)

Dr Jason Horsley introduced the report advising that the Health & Wellbeing Board has a statutory responsibility to:

- Publish a statement of the needs for pharmaceutical services of the population in its area referred to as a Pharmaceutical Needs Assessment (PNA) and advised that this report defines what needs to be done and the steps being taken to ensure this is in place.
- Make a representation to NHS England on consolidation applications of community pharmacies in its area (since December 2016).

This report notes that a process is being developed to facilitate this requirement. Dr Horsley advised that there had been a big change in the pharmaceutical provision in that on-line pharmacies had been set up and these impacted on traditional pharmacy models. He advised that paragraph 4.1 sets out what a PNA has to contain. He said that paragraph 4.4 shows the proposed timetable for developing the PNA with a view to publishing the final PNA on the website on 1 April 2018.

In response to questions the following matters were clarified:

- It was confirmed that pharmacy businesses are aware of the impending change and Dr Horsley confirmed that his directorate is working with them.
- It was confirmed that Portsmouth is well supplied with pharmacies but that there is a need to also look at internet provision.
- It was confirmed that changes in the funding for pharmacies nationally are likely to put pressure on community pharmacies and may mean that some pharmacies are at risk of closing.
- With regard to a particular query about Tesco's in Fratton wanting a pharmacy which was turned down, it was suggested to the Board that

the reason for this may have been that it was considered that adequate provision was already in place.

- A query was raised about whether in those circumstances Tesco could go ahead without government funding, Dr Horsley said that he would find out whether or not that would be possible.
- With regard to provision of a status report, the Board was advised that pharmacies would be unlikely to confirm or deny whether or not they intended to close which would make a status report inaccurate.
- With regard to a query about whether there were any trends, the response was that there are likely to be closures and consolidation of pharmacy services.
- With regard to the process to be followed, it was expected that there would be an application to NHS England if any changes were required to the service. Then it would be a case of sending in what the provision is expected to look like afterwards. The job of the Health and Wellbeing Board is to say whether the proposals would create a gap in pharmaceutical services. This would also be open to challenge. The HWB would receive proposals as they came in and there is a tight timescale for a response so it would not be possible to do a full public consultation each time.

RESOLVED that the Health & Wellbeing Board

- 1) Approved the plan to refresh the pharmaceutical needs assessment (PNA) for Portsmouth.
- 2) Noted that a process to facilitate the HWB to consider pharmacy consolidation applications within the allotted 45 days is being developed. Approval from the HWB on the proposed process will be sought.

11. Health & Wellbeing Board Strategy Refresh (Al 6)

(TAKE IN REPORT)

Dr Jason Horsley introduced the report advising that his view is that broadly the main health problems in the city are understood. He said that there is a statutory duty on local Health and Wellbeing Boards to produce a strategy for the health and wellbeing of their population. Portsmouth's current strategy runs from 2014 to 2017 so it is now necessary to consider how this needs to be refreshed. Members of the Health & Wellbeing Board were invited to comment on the proposed principles, objectives and focus areas set out in the

report and to agree the proposals for next steps. During discussion the following matters were raised:

- With regard to E-cigarettes, a query was raised about whether there would be a move to offer free E-cigarettes in order to get people off ordinary cigarettes. Dr Horsley said that this was hard to do because E-cigarettes did not come within the definition of 'medication'. There are also difficult ethical considerations. Manufacturers of E cigarettes do not seem to have sought a licence on the grounds that E-cigarettes stop people smoking ordinary cigarettes. In addition there is a problem about whether funding E-cigarettes would also fund the tobacco companies who make E-cigarettes as well as producing ordinary cigarettes. Dr Horsley also said that First Generation E-cigarettes were not the latest ones and safety advice was not very recent. The later versions produce more heat and so potentially are more dangerous. Also the long-term effects of smoking E- cigarettes are not very clear.
- With regard to reducing the harms from alcohol and other substance misuse, members were advised that there is a move to push for a minimum unit price for alcohol to be in place nationally. If this is not possible then perhaps a voluntary minimum unit price could be introduced in the city. Evidence shows that this is an effective way of reducing alcohol consumption. However, voluntary agreements are not enforceable. Some members disagreed with a minimum pricing policy for alcohol as this could be seen to be unfair to responsible consumers.

Dr Horsley said that there was a need to be realistic about what the Health & Wellbeing Board can achieve. There was a need to make sure that the strategy is deliverable when factoring in day-to-day business. He said that subject to the comments of the Health & Wellbeing Board, it is proposed to work up a draft of the strategy and bring this to the next Health & Wellbeing Board in September 2017. This would enable the Health & Wellbeing Board to agree their new strategy for recommendation for adoption to the relevant boards before March 2018. He said that alongside the development of the strategy it would be necessary to develop a high level action plan and an associated work programme for the Health & Wellbeing Board including consideration of the wider determinant where work is led through other partnerships.

RESOLVED that the Health & Wellbeing Board:

- (i) Commented on the proposed principles, objectives and focus areas set out in Section 8 of the report.
- (ii) Agreed the proposals for next steps.

12. The Blueprint for Health and Care in Portsmouth and relationship to the delivery system (Information item) (Al 7)

(TAKE IN INFORMATION ONLY REPORT)

The report was introduced by Innes Richens who said its purpose was to present to the Health & Wellbeing Board a summary of key programmes underway in support of the Portsmouth Blueprint for Health & Care, key governance arrangements and links with other system levels and demonstrating how these are expected to contribute to meeting the financial challenge. He said that Appendix 1 - Local Programmes and Projects mapped to wider assistant planning levels was attached at the end of the report. The document seeks to map the local Portsmouth programmes and projects under the blueprint to the wider system planning levels specifically:

- Portsmouth and South East Hampshire accountable care system planning level
- NHS system transformation planning level
- Portsmouth/Southampton 2 City Work.

During discussion the following matters were raised -

- Members of the Board said the format of the report and appendix was helpful.
- Members were concerned that inflation was likely to put the local authority budgets under strain and that there did not appear to be any compensation for inflation at all.

Innes Richens said that 6.1 of the report sets out next steps which are that: it is suggested that key conclusions from this mapping exercise are presented to the ACF Leadership Group to set out the work that is called the transformation of health and care services in the city. It is also suggested that this work is used to guide the development of a clear series of 'asks', potentially developed jointly with the ACF Leadership, to the STP Team to ensure that system-wide work is in support of and driving achievement through the local delivery system.

The Health & Wellbeing Board noted the report.

13. Public Health Business Plan 2017/18 (Information Item) (AI 8) (TAKE IN FOR INFORMATION REPORT)

The report was introduced by Dr Jason Horsley who advised that members of the Health & Wellbeing Board are asked to note the Public Health Business Plan for 2017/18 attached to the report as Appendix 1. He went on to advise that the Portsmouth City Council Public Health Team aims to prevent ill health

and prolong lives through a co-ordinated effort with partners both inside and outside the Council. Local health and wellbeing priorities are set by the Health & Wellbeing Board and are reflected in the Local Health & Wellbeing Strategy. Progress against these priorities is tracked through the annual summary of the Joint Strategic Needs Assessment. The priorities set in the Public Health Business Plan 2017/18 seek to be aligned with and will support delivery of the Health & Wellbeing Strategy (due to be refreshed in the coming year) to improve the lives of our local residents.

Dr Horsley drew the attention of the Board to paragraph 2.2 that sets out specific actions where efforts will be directed across 8 priority areas.

During discussion the following matters were raised:

- Alison Jeffery said that she would like Children's Services to engage with this. She also said that she would like to bring the Population Priority 3 - mitigate against the health effect of child poverty to the Children's Trust Board.
- With regard to a query about the budgets to cope with everything that appears in the business plan it was confirmed that this was not the public health budget but a business plan. There was a need to capture the spend of the CCG and the local authority and to look at resources available within the city.

Innes Richens pledged his support to Population Priority 7 - system priority - reduce health and social care needs in later life.

Members of the Health & Wellbeing Board noted the report and confirmed that they would like an update on the Public Health Business Plan to come back to the committee in 6 months' time.

14. Dates of future meetings (information item) (Al 9)

Members were asked to note the dates of the next meetings being on Wednesday 20 September at 10 am in Conference Room B, Civic Offices and Wednesday 29 November at 10 am in Conference Room A, Civic Offices.

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Chair