

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held on Wednesday, 26 February 2014 at 9.00 am in the Executive Meeting Room, third floor, The Guildhall, Portsmouth.

Present

Councillor Leo Madden (in the Chair)

Dr James Hogan (Vice-Chair)
Councillor Rob Wood
Councillor Sandra Stockdale
Dr Janet Maxwell, Director of Public Health
Tony Horne , Healthwatch, Portsmouth
Mark Orchard, Director of Finance
Dr Linda Collie
Dr Elizabeth Fellows
Julian Wooster, Strategic Director
Innes Richens, Chief Operating Officer

Officers Present

Rob Watt, Head of Adult Social Care
Matt Gummerson, Principal Strategy Adviser

1. Welcome and introductions - (Chair) Councillor Leo Madden (AI 1)

Councillor Leo Madden, chair of the board welcomed everyone to the meeting.

2. Apologies for Absence (AI 2)

Apologies for absence were received from Councillor Mike Hancock, Councillor Jim Patey, Councillor Rob New and from David Williams.

3. Declarations of Members' Interests (AI 3)

There were no declarations of members' interests.

4. Minutes of the meeting held on 4 December 2013 (AI 4)

RESOLVED that the minutes of the meeting of the Health & Wellbeing Board held on 4 December 2013 be confirmed and signed by the chair as a correct record.

5. Better Care Fund (AI 5)

(TAKE IN REPORT AND PRESENTATION)

Rob Watt and Innes Richens introduced the report and gave a slide presentation. The Better Care Fund previously referred to as the Integration Transformation Fund was announced in June 2013 as part of the 2013 spending round. The Better Care Fund is a pooled budget which can be deployed locally on social care and health. The slide presentation covered

- The aim of the Better Care Fund plan
- The Better Care Fund five years on
- The recommendations from stakeholder engagement
- The delivery of three interconnected schemes for 2014/15 and 2015/16
- Enabling workstreams
- Metrics
- Key risks and
- The Better Care Fund timetable.

In response to questions the following matters were clarified

- With regard to the proportion of older people who were still at home 91 days after discharge from hospital it was confirmed that the readmission rates within this figure were not the best but that they are improving. Rob Watt said that there seemed to be a difference in what was counted within this as compared with other authorities. He said that there was now a move to standardising data so that the comparisons gave a truer picture.
- With regard to IT systems, concerns were raised about whether enough emphasis was given to this. It was crucial that the various IT systems being used were compatible and that they were given sufficient priority.
- With regard to timescales when local people could be involved and could understand what is to happen, it was explained that a number of workstreams were already going ahead for example the integrated community teams looking at community beds. In addition events had been arranged to bring together Hampshire CCGS Southern and Solent to see how the whole system could be made sustainable and what could be done now. Consideration is currently being given to how to engage the community more. A communication strategy is also being developed.
- Dr Janet Maxwell said that many conditions are preventable and said she would like to bring something to the Health & Wellbeing Board about plans to improve wellbeing and prevention in parallel with flexibility in services generally to cover specifics such as healthy weight, smoking cessation etc.

- With regard to general lack of communication it was acknowledged that this is very frustrating and the fundamental aim is to bring teams together in order to pool information and to encourage better communication.

6. Special Educational Needs and Disabilities (SEND) reforms (AI 6)

(TAKE IN REPORT)

Mr Julian Wooster introduced the report which updates the board on the implications of the Children's and Families Bill Part 3 for Health and Wellbeing Boards and Clinical Commissioning Groups. In Portsmouth, preparation for the implementation of the SEND reforms is integral to the Children's Trust Plan Priority G - Improving Services and Outcomes for Children, Young People and their families with disabilities.

Julian Wooster said that there had been a very successful conference on Monday 24 February concerning SEND reforms and linkages with the Better Care Fund and that there is a good understanding about the issues and good engagement with partners. He said that the City Council has signed up to the Disabled Persons Charter.

7. City of Service (AI 7)

(TAKE IN REPORT)

This item was presented by Dr Janet Maxwell who advised the Health and Wellbeing Board of Portsmouth's successful application to be one of the UK cities of service. She said that this would enable Portsmouth to explore how mobilising volunteers can deliver against some of the city's key challenges as public services reduce. The background to the city of service bid is set out in the report. A total of four service initiatives were included adapting the blueprints from the US cities of service programme to reflect existing priorities in the city. These are

- Coaching and mentoring
- Numeracy challenge
- Love your street
- Volunteer neighbour navigators

Matt Gummerson said that there was evidence that where tangible results can be shown, this encourages more people to volunteer. He explained the four initiatives were in their early stages and that currently a person is being recruited to lead the programme with a view to launching it in June or July 2014.

8. Sustainable, Resilient, Healthy People and Places (Information Only Report) (AI 8)

This item was deferred to the next meeting.

9. Joint Health and Wellbeing Strategy 2014 to 2017 - emerging themes and priorities (AI 9)

(TAKE IN REPORT AND SLIDE PRESENTATION)

Dr Janet Maxwell and Matt Gummerson jointly presented the report and slides. The purpose of the report is to set out the emerging themes and potential priorities which the Health & Wellbeing Board is asked to consider as it develops a refreshed Joint Health & Wellbeing Strategy for 2014-2017.

In response to queries the following matters were clarified

- With regard to consultation, this was already being carried out and the intention was to work with the groups already in place such as Health & Social Care partnership, Youth Parliament etc.
- With regard to 6.9 and 6.10 of the report, Dr Maxwell emphasised the alignment between the suggested priorities under each theme with the regeneration strategy to reshape Portsmouth. Huge structural and economic changes were about to be introduced and Portsmouth's own residents should benefit from that. It was suggested that Kathy Wadsworth be invited to come to the Health & Wellbeing Board to provide a presentation on regeneration and new businesses as this should have a dramatic effect on raising attainment locally. There is a need to see how the health agenda ties in with the economic regeneration and the interplay between strategies was very important. She said that this Board needs to sort out the priorities for Health & Wellbeing.

Members of the Board discussed the priorities suggested under each theme in 6.10. The following matters were considered

- The priorities are all works in progress. It was suggested that two or three matters should be concentrated on for this year and these were the items highlighted in bold.
- There was a lot of overlapping in the various priorities and the issues are complicated.
- Some of the issues/ priorities for the city are already led by other partnerships or organisations with a clear plan agreed or in development. While they are all important as part of the overall vision/ strategy only those in bold in the table are suggested as forming the Health & Wellbeing Board's priorities.
- Concern was expressed that there did not seem to be many actual actions for example in 6.10 - tackling poverty, the action appeared to be confined to the 0-5 age range. Dr Maxwell explained that tackling poverty from the very beginning was a starting point and this underpinned making sure children were well enough to go to school.

- The words "explore and enhance community development models" were clarified as referring to things such as the fact that where a person lives affects their outcomes and that local people have a key role in addressing their own local community's challenges.
- With regard to the words exploring the role housing plays in determining wider health and wellbeing outcomes, Dr Maxwell said that the aim was to raise awareness and make every contact count. For example housing officers should know what health questions they can ask in order to understand the housing issues when they visit.

Mr Julian Wooster said that it seems that the Health & Wellbeing Board want specific actions to be identified under each of the headings in the table and more detail was needed to populate it.

The chair said that there was a need to know exactly what it is intended to do within the broad aims outlined.

In response to queries from the public, the following matters were clarified

- With regard to the housing issue it was difficult to challenge unscrupulous private landlords although there was some control where houses are in multi-occupation. Solutions were being looked at but it was likely to be a long process.

RESOLVED that the Health & Wellbeing Board

- (1) endorse the process and timescales for the refresh of the JHWS as set out in the report;**
- (2) agree that the suggested themes at 6.5 should form the basis of a JHWS for the period 2014-17;**
- (3) agreed the potential priorities set out in section 6.6 to 6.10 and in the presentation to the board as the starting point for further work to develop strategy in line with the discussions of the board.**

10. Date of Next Meeting (AI 10)

To be agreed.

The meeting concluded at 10.40 am.

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Councillor Leo Madden
Chair