

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held on Wednesday, 26 November 2014 at 9.00 am in Conference Room A, Civic Offices, Portsmouth.

Present

Councillor Frank Jonas (in the Chair)

Councillor Donna Jones
Councillor Luke Stubbs
Councillor Neill Young
Councillor Gerald Vernon-Jackson
Councillor John Ferrett

Tony Horne
Innes Richens
Dr Elizabeth Fellowes
Dr Linda Collie
Ruth Williams NHS England

Non-voting members

Julian Wooster

27. Apologies for Absence (AI 1)

These had been received from Dr J Hogan and from David Williams.

28. Introductions and Declarations of Interest (AI 2)

There were no members' declarations of interest. Introductions were made around the table.

29. Previous Minutes - 3 September 2014 and Matters Arising (AI 3)

The minutes of the Health and Wellbeing Board held on 3 September 2014 were approved as a correct record, with no matters arising.

30. PSCB Annual Report and Business Plan 2014-17 (AI 4)

Helen Donelan, Business Manager for the Portsmouth Safeguarding Children's Board (PSCB), presented the PSCB's Annual report and explained the PSCB's role in scrutinising the effectiveness of local children's services, with membership covering the key agencies such as the police and probation as well as linking with charities such as Barnado's. The plan set out key

priorities, and the business plan set out 4 objectives/tasks which she asked the HWB members to consider the links with:

- i) **Neglect** - as had been highlighted in the serious case reviews
- ii) **Communication** - of key safeguarding messages (including FGM work with the communities)
- iii) **The voice of children/young people** - ensuring this is heard as part of the decision making process
- iv) **Governance arrangements**

Members then asked questions regarding the links with the Better Care Fund (BCF) and the Troubled Families programme. Julian Wooster reported that the Ofsted report on Safeguarding from July had identified the area of support in providing early help. There were messages of the importance of better integration between the local authority and health through the BCF, the importance of the Troubled Families programme providing early support to parents, and that a different approach to large case conferences was being considered. The Trouble Families unit had worked with over 500 families (and had met this government target) and Phase 2 was to be welcomed, which would allow more flexibility in identifying the families to work with, although it attracted less funding.

It was also asked why the plan did not refer to the context of cuts in budgets; the PSCB is a scrutiny rather than decision making body regarding the provision of services, but the pressure on services was acknowledged. It was also reported that Primary Care are undertaking educational work with GPs around early intervention and there is work being done with the local schools.

RESOLVED the members of the HWB received the Portsmouth Safeguarding Children Board's Annual Report and Business Plan and noted the areas of progress and challenges identified in the context of services being planned and commissioned.

31. Adult Safeguarding Annual Report and update on the Care Act in relation to Safeguarding (AI 5)

David Cooper, the independent Chair of the Adult Safeguarding Board since March 2014, presented their annual report outlining the achievements from the previous year. It had to be seen in the context of national challenges such as the scandals of Mid Staffs, Winterbourne View & Orchid View where clients had received very poor care.

There were also the implications of the **Care Act** to be considered which would make safeguarding boards for adults statutory from April 2015. In Portsmouth there had already been reorganisation so that the previous two boards had moved to one board; this single body would improve communication. The act had also included important guidance on personalisation and prevention, to ensure positive outcomes for individuals. There are strong expectations to raise the quality of information sharing.

David Cooper stressed the need for the boards to be supported to undertake their business. A development day had been held in June and a peer review undertaken which would be reported on within the next annual report. Work had taken place to review the board's governance and membership arrangements. There had been no dedicated budget but there was now interim financial support for this year. He would be tabling a report to the Safeguarding Adults Board shortly, regarding additional funding for 2014\15 to meet the requirements of the Care Act. There is the need for robust information from agencies so risk areas can be identified. A multi-agency hub was being explored with the police and children's and adults' services.

A key issue arising from a High Court decision is **Deprivation of Liberty (DOL)** regarding mental capacity assessments. The result meant that whilst these used to be at a level of 2 or 3 a month the frequency was now far higher. Angela Dryer reported that Adult Social Care used to have a budget for £18k pa for this and £340k was now predicted as the spend this year for these independent assessments.

The new Head of Safeguarding is Rachael Roberts, who was working on the national pilot of personalisation, and progress on this would be monitored by the board. Work was also taking place on training and development with multi-agency training and with neighbouring authorities on the Care Act policy. There is now an appointed nurse across the SHIP group area. Innes Richens confirmed that for Portsmouth and the Isle of Wight there is now a designated lead for adult safeguarding (as for children) in the CCG.

With increase in alerts being recorded (doubling over the last 3 years) the board was trying to bring information from the agencies together. David Cooper was concerned by the lack of dedicated budget and contributions from the 3 key statutory agencies had been sought (local authority, health and police) but the police had indicated the contribution to their 4 area boards (Portsmouth, Hants, Southampton & Isle of Wight) was limited to 11%.

Questions

- (i) HWB members asked the justification of the police contribution being limited to 11%, and it was felt that this should be raised further with the local Police & Crime Commissioner Simon Hayes due to the budgetary pressures on local authorities. Julian Wooster felt that it would be useful to find out how neighbouring police forces were contributing. Whilst prior to the Care Act this had been a shared responsibility, the local authority was now seen as the lead, with health as the second partner.

It was AGREED that a letter be sent by the Chair of HWB to Mr Hayes to outline the board's concerns regarding the police contribution to the work of the Adult Safeguarding Board.

- (ii) HWB members were also concerned by the DOL implications, and Angela Dryer explained that the local authorities are designated as the supervisory body and the care homes as the managing authority; there is a duty to refer to PCC where there is a DOL issue

to appoint a doctor to assess capacity, and to ensure the individual has a representative (family or advocate). It was asked if it would be more economical for PCC to employ its own doctor? This had not yet been explored.

It was AGREED that the Chair and Leader should write to the Secretary of State for Health and the Chief Executive of the LGA to raise the HWB's concerns regarding the escalation of DOLs and referencing the new burdens principle for local government and Cllr G Vernon- Jackson undertook to raise this with the LGA as a matter of national concern.

Councillor Jones welcomed the appointment of David Cooper as independent chair and hoped he would work with her as Leader and Councillor Jonas as the Chair of HWB and Cabinet Member for Health & Social Care regarding Adult Social Care matters. The co-location of police officers within the Civic Offices was also welcomed as part of the multi-agency working.

- (iii) Training and development - it was asked how training was provided and monitored for the private sector providers? Angela Dryer explained that SCATPP allowed the voluntary and private sector to receive safeguarding training at a reduced rate. David Cooper hoped for the large independent providers to have some representation on the ASB to ensure the issue of training was addressed more broadly.
- (iv) A question was raised by a Mr Burns, regarding the police budget and whether their work in safeguarding cases counted towards the 11% they contribute to the safeguarding board. David Cooper stressed that the support to the board is completely separate and that the working relationship with the police was good.

32. Joint Health and Wellbeing Strategy report (AI 6)

Matthew Gummerson presented the report (and made available larger print outs of the appendices) which set out the baseline positions on the outcome measures from the approved strategy. This gave some further definition of data, trends and comparisons to the English national averages. There would be detailed reports on the workstream areas at future meetings, with the dementia update later in this meeting and for mental health at the February meeting. The quarterly performance reports on priorities managed by other boards are available upon request to HWB members. It was suggested that the links to the other bodies' priorities (such as the Children's Trust Board) be shown more explicitly.

Discussion took place regarding the success in the early years/foundation education in the city which then tailed off at Key Stages 2 & 4. Julian Wooster responded that there was the need to encourage progress by the schools, as whilst some were top performers (such as Portsdown, Charter and St. Edmunds) others were not making enough added progress. He felt that the abandoning of Key Stage 3 tests had had a negative impact. He was pleased

that the KS2 results had improved for the city and the KS4 data was still to be validated but it was hoped that Portsmouth was moving closer to the national average.

Matthew Gummerson would circulate the agreed timetable for future agenda items to the board, following discussion with the Chair.

33. Portsmouth Dementia Action Plan 2014-16 (AI 7)

Preeti Sheth, the Head of Integrated Commissioning Unit, presented this information report which outlined the severity of the syndrome nationally and locally and reported progress against this priority workstream in the Joint Health and Wellbeing Strategy. In Portsmouth 2186 residents have some form of dementia, of differing severity with 2135 having onset over the age of 65. 1703 live in the community and 483 in residential care. The report set out the work with GP practices to implement projects such as the introduction of an enhanced service scheme for dementia identification, data harmonisation, care home case finding and the regional Dementia Toolkit. Work was also taking place with Solent NHS Trust and the Alzheimer's Society, Solent Mind and Age UK as service providers for the city.

There is a proactive Dementia Action Group (DAG) which PCC co-chair with Solent NHS Trust. The report also detailed the achievements against the 2014/15 dementia action plan including the Solent Mind Dementia Reablement Advisors, the Housing 21 Dementia Voice Nurse, the Dementia cafes and support programme with the Alzheimer's Society and their new Dementia Adviser Service. Other achievements included the Elder Friendly Community Pharmacy and the opening of the 'Memory Lane' at QA hospital. The report further identified the direction of travel for the future including the establishment of a local Dementia Action Alliance to create a Dementia Friendly Community.

It was asked if information was being received back from the pilot programmes, and Preeti Sheth confirmed that these were being received and would be reported back as appropriate.

34. Training Opportunity - Dementia Friends (AI 8)

At the conclusion of the meeting members of the HWB were offered the opportunity to participate in a Dementia Friends training session hosted by Natalie of the Alzheimer's Society which was well attended and appreciated by the HWB and which improved the understanding of participants of the different ways dementia affects individuals.

35. Any Other Business and Date of Next Meeting (AI)

- (i) NHS England letter - congenital heart disease - a copy of the consultative letter would be circulated to members of the HWB by Matthew Gummerson, and Ruth Williams reported that this had also been sent to the Health & Overview Scrutiny Panel (HOSP).

(ii) Innes Richens reported on the changes in Primary Care Commissioning for which the CCG had expressed an interest to NHS England on taking on further areas of activity and which had a range of option. He could provide further details on request and he offered to bring an update back to the HWB.

(iii) The next meeting would take place on 25 February 2015 at 10am at St. James' hospital.

The meeting concluded at 10.35 am.

Councillor Frank Jonas
Chair