

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held on Wednesday, 17 June 2015 at 9.00 am in Conference Room A, Civic Offices, Portsmouth.

Present

Councillor Luke Stubbs (in the Chair)

Councillor Jennie Brent (Standing Deputy)

Councillor Colin Galloway (Standing Deputy)

Dr Janet Maxwell

Innes Richens

Ruth Williams

Di Smith

Rob Watt

Tony Horne

Dianne Sherlock

Sue Harriman

Jackie Powell

Simon Jupp (in attendance for Ursula Ward)

Dr Elizabeth Fellows

Dr Dapo Alalade

Officers Present

Matt Gummerson, Jo York, Mary Shek, Preeti Sheth, Barry Dickinson, Alan Knobel

11. Welcome, introductions and apologies for absence (AI 1)

Apologies for absence had been received from Councillors Gerald Vernon-Jackson and Councillor Donna Jones. Councillor Colin Galloway was attending as standing deputy for Councillor Vernon-Jackson and Councillor Jennie Brent was attending as standing deputy for Councillor Jones.

Apologies had also been received from Dr Jim Hogan and Ursula Ward. Simon Jupp was in attendance for Ursula Ward and Dr Dapo Alalade was in attendance for Dr Hogan.

Councillor Luke Stubbs as chair welcomed everyone to the meeting and asked if introductions could be made around the table.

12. Declarations of Members' Interests (AI 2)

There were no declarations of members' interests.

13. Minutes of Previous Meeting - 25 February 2015 and matters arising (AI 3)

The minutes of the Health & Wellbeing Board meeting held on 25 February 2015 were approved as a correct record by the Board.

The Board noted that the changes to governance recommended by the Board in February had been fully endorsed by Full Council and have now taken effect.

14. Better Care - update/progress report (AI 4)

A presentation was made to the HWB on the progress of the Better Care Fund (BCF) by Jo York, Head of Better Care Programme and Innes Richens, Chief Operating Officer, Portsmouth CCG. The slides would be circulated to the Board following the meeting.

In response to questions the following points were clarified:

- The governance is provided by a multi-agency Better Care Project Board which reports to the CCG, Cabinet and the HWB.
- With regard to IT, Innes advised that the Project Board is in discussions with the Adult Social Care and Children's Social Care teams about investing in IT developments and they are looking to implement the same software solutions with all GP practices. Rob Watt added that the appetite for this is there and there is an Inter-operability programme on how to link systems together.

Councillor Stubbs said he agreed that IT was an issue and advised that he had asked Matt Gummerson to look at whether the Council can consider options for an improved IT system.

Jo York and Innes Richens were thanked for their presentation.

15. Portsmouth Dementia Action Plan (AI 5)

Preeti Sheth, Head of Integrated Commissioning, introduced the report and advised that Portsmouth has one of the highest rates across Wessex region with diagnosing dementia. The dementia steering group is a strong partnership which ensures that all partners are working together to oversee the dementia action plan.

Dr Fellows said that from the GP's perspective they welcome a clear offer to patients who are diagnosed with dementia early.

In response to a question from Councillor Stubbs relating to the recommendations from the East London Dementia Pathway Review listed in paragraph 7.2 of the report, Preeti Sheth advised that there were currently five pilots running which had been extended until December.

16. Use of Public Health Grant (AI 6)

Dr Janet Maxwell introduced the report which outlined the way forward for distributing the Public Health Grant.

In response to a question Dr Maxwell advised that she was in discussion with all directorates with regard to the redistribution of the public health grant. A series of seminars called 'Building a Healthier City' had been held last autumn to ensure that public health is in the heart of all the directorates. Following this the focus is on ensuring children get the best possible start in life, with work taking place on sports development and supporting arts and culture development. Also work with the housing team to help the homeless health pathway and work with to the transport directorate to provide safer routes to school to encourage children to walk or cycle to school.

17. Pre-birth to 5 years old - update on the Health Visitor transfer and the Healthy Child Programme (AI 7)

Dr Janet Maxwell introduced the report updating the board on the pre-birth to 5 public health services, the health visiting transfer and the healthy child programme. In response to questions the following points were clarified:

- There are up to 60 health visitors who are led by Solent but commissioned by the local authority. They will be part of the multi-agency teams (MAT's) which are being developed by Children's Services and partners.
- The focus is on 0-5 year olds to ensure they are given the best start in life and are ready to start school, however this is part of the overall 0-19 year old programme.
- Health visitors use children's centres regularly but the team are keen to ensure that they are being used to their full potential. A scoping/mapping exercise is currently taking place to monitor use. There are potential opportunities to increase the use of children's centres e.g. to bring in more activities so building are used to their maximum potential and ensure that the work is well meshed with primary care.
- Di Smith, Interim Director of Children's Services added that there is a move nationally to change the children centre offer so that the focus is on outcomes instead of whether centres are getting the maximum use.
- It is recognised that more work is needed in communities and engagement with families is in progress to ensure that what is offered meets the needs.

18. Smoking, Alcohol and Substance Misuse (AI 8)

Dr Maxwell, Alan Knobel (Alcohol Strategy Lead) and Barry Dickinson (Senior Programme Manager) presented the report which highlighted the potential impact of planned cuts to substance misuse budgets. In response to questions the following points were clarified:

- Concerns were raised by some members of the HWB about this resource potentially being reduced, with the costs of not providing this

service potentially exceed the savings. A collective solution to finding the funds to support this was advocated.

- Dr Maxwell explained that there is a case that spend on the service needs to remain stable over the next few years.
- The city had a significant number of heroin users who require a particular intense journey and the service had been redesigned to provide an improved treatment programme, with risks to disrupting that at this stage.
- It was intended that the funds would also be used to do more to educate young people on the effects of drug and alcohol use to prevent them becoming dependent on drugs and alcohol.
- The next HWB will receive a report on the Public Health Annual Report which will include the expected health impact of redistributed funding from the Public Health grant.

The HWB felt this was a crucial service and would support, in principle, finding the savings required from other services, while recognising the reality of the scale of cuts imposed on the council. Innes Richens asked Dr Maxwell that the depth of savings be thoroughly considered and that the redistribution of funds and expected health outcomes be made absolutely clear in the future report to the HWB.

19. Integrated Wellbeing Service (AI 9)

Mary Shek, Transition Manager introduced the report on the progress towards the implantation of the integrated wellbeing service, and in response to questions from the Board clarified the following points:

- The skillsets of staff for the wellbeing service are varied, and a robust training programme including online and face to face training was proposed. Following one of the pilots it was felt that this training needed to be paced and this would be reviewed at the end of July.
- The service would be working with families and links to all services.
- Following the feedback received at the NHS event on 3 June, the team are looking to tighten the criteria on which patients the service is able to assist so it is targeted to the most vulnerable. Those who are able to access the support they need themselves will be signposted to where they can obtain help e.g. pharmacies or the voluntary sector. The team are also looking to enhance capacity of the service following feedback from GP's. The service is primarily for those who are in greatest need of help.
- Will look at criteria and work with GP's to improve the referral process and ensure that there are clear pathways. It was agreed a separate conversation between Mary Shek and GP colleagues would be organised to discuss the best way forward.
- The service is working closely with Solent NHS Trust as there are many different interfaces with Solent. Sue Harriman said she would ensure that a meeting takes place between Mary and relevant people from Solent NHS Trust.
- A newsletter on the Integrated Wellbeing Service would shortly be produced and this would be sent to the members of the HWB.

- On target for the full service to be launched on 1 October 2015.

20. Tackling Poverty Strategy draft priorities (AI 10)

Matthew Gummerson advised that Kate Kennard, Tackling Poverty Coordinator, had provided the draft Tackling Poverty Strategy and circulated this to the HWB. This follows on from the board's approval of the Tackling Poverty Needs Assessment at its February meeting.

Kate has asked if she can have feedback from the HWB on the strategy by Tuesday 11 August, so that she can build this into the strategy before the September meeting. Kate will in the meantime be working with a multi-agency steering group to develop the detailed action plan.

The final strategy and action plan will be presented for approval in September with agreed actions for all organisations to help deliver this key agenda.

21. Work programme for the Health & Wellbeing Board (AI 11)

Matthew Gummerson reported that the work programme was attached for information to ensure accountability. Tony Horne advised that the Healthwatch annual report is now completed and it was agreed to add this onto the agenda for the next meeting. Dr Maxwell also confirmed that as part of the Public Health Annual Report that was on the work programme for the next meeting, she would include an update on the latest situation with the distribution of the public health grant.

22. Date of next meeting (for information) and briefing on Liver Health Needs Assessment (AI 12)

The date of the next meeting was confirmed as Wednesday 16 September at 9:00am in the Civic Offices.

The meeting was followed by a briefing led by Dr Maxwell on the Liver Health Needs Assessment.

The meeting concluded at 10.45 am.

Councillor Luke Stubbs
Chair