

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held on Wednesday, 30 November 2016 at 10.00 am in Conference Room A, Civic Offices, Portsmouth.

Members Present

Councillor Luke Stubbs (in the Chair)
Councillor Donna Jones
Councillor John Ferrett
Councillor Colin Galloway (Standing Deputy)
Innes Richens, CCG & PCC
Patrick Fowler Healthwatch Portsmouth
Dianne Sherlock, Voluntary Sector
Sue Harriman, Solent NHS Trust
Jackie Powell, CCG Lay Member

Officers Present

Kelly Nash
David Williams PCC Chief Executive

64. Apologies, Declarations of Interest, Introductions and Deputation (AI 1)

Apologies for absence had been received from Dr James Hogan (Joint Chair), Councillor Ryan Brent, Councillor Gerald Vernon-Jackson (who was represented by standing deputy Cllr Galloway), and Alison Jeffery.

There were no declarations of members' interests.

The Chair asked everyone to introduce themselves and explained that he had agreed to receive a deputation from a member of the public about an item that was not specifically on the agenda at this meeting, relating to counselling services.

Public Deputation

Katie Magro addressed the Board to make a statement as a voluntary counsellor with Portsmouth Counselling Service which had provided an affordable and experienced service in the city. It had relied on funding from PCC which was coming to an end so was due to close on 16 December and she asked what could be done to help retain the skills of the volunteers in providing this much needed service and she felt that there would be a knock-on effect on other services such as health, social care and housing.

Councillor Stubbs thanked Ms Magro for attending and explained that discussions were taking place between PCC and David Miles to look at possible solutions and the Leader reiterated that consideration was being

given to unlocking Voluntary Sector Transition Funds, but that this would have to be subject to full Council sign-off.

65. Minutes of Previous Meeting - 21 September 2016 (AI 2)

RESOLVED that the minutes of the previous meeting held on 21 September 2016 were approved as a correct record.

66. Verbal update on appointment of Joint Director of Public Health (AI 3)

David Williams, PCC Chief Executive, reported that Dr Jason Horsley had been appointed as the Joint Director of Public Health for both Portsmouth and Southampton, and was due to start in January. He was currently at Sheffield City Council and had wide-ranging experience.

Councillor Stubbs had recently attended a course in Coventry at which it was evident that the City Council's close relationship with the CCG and successful joint working arrangements, including sharing of chief officers, was ahead of those experienced by most other cities.

67. Portsmouth Children Safeguarding Board (PCSB) - Annual Report (AI 4)

Reg Hooke, Chair of the PCSB, presented the annual report, which set out how areas of responsibility for children's safety in the city and how the priorities of the annual report (as set out on page 3/4) would be delivered through the Board, multi-agency training and audits/case reviews. The report included 5 examples (page 9) of where constructive challenges had been made. He reported that next year the legal status of the safeguarding boards would be under review, with local areas being given more powers to set their own arrangements.

There were questions and responses on the following:

- Emphasis to be given to the 'neglect' priority - a major conference had been held in the city and on-going work was taking place on the level of impact of the tool-kit, and joint areas of inspections would focus on neglect. The reasons for the spike in figures of neglect for 2015/16 would need to be further investigated but the audits had indicated that appropriate responses had been made.
- The capacity of the Youth Offending Team - this was due to be fully staffed by July 2017.
- Police Data - Hampshire Constabulary had responded positively to requests for improved sharing of data and this was being further developed.
- Support for unaccompanied child asylum seekers - the care support given in the city was good but the risk was where children go missing as they are not in the care system, and there was the need to continue to be aware of the diversity of communities in Portsmouth so that children do not fall under the radar of the authorities.

The PSCB's annual report was noted and welcomed by the Health & Wellbeing Board.

68. Portsmouth Adult Safeguarding Board (PASB) - Annual Report (AI 5)

Robert Templeton, the Chair of the PASB, presented their annual report and touched on the close links with the PCSB with the cross-cutting themes to be addressed by both boards. The report set out how partners would be working together and learning for any mistakes via the review process. Commissioning of reviews was expensive and there are other options to consider when looking at the adequacy of processes in place such as clear workforce plans and governance arrangements being in place to give a consistent approach to safeguarding.

There were questions and responses given on:

- Training - there was already multi-agency training regarding children's safeguarding, and it was felt that a similar programme was needed for adult safeguarding, and joint awareness campaigns were encouraged
- Isolation - it was noted that the figures and reporting of this had increased.

Councillor Stubbs thanked both chairs for their work and the wider work taking place as evidenced in the annual reports.

The Portsmouth Adult Safeguarding Annual Report was noted and welcomed.

69. HIOW Sustainability and Transformation Plan (STP) - presentation (AI 6)

Richard Samuel from the STP Programme Team attended and circulated a copy of the HIOW STP summary and draft Delivery Plan. As part of developing the strategy engagement was taking place at this HWB and similar bodies and with local communities on this 5 year forward view. The commonalities of the communities in the area were recognised and he commented on Portsmouth being ahead in terms of integration of sectors. The report set out 8 areas in which, for the wider area, it had been identified that it would be more powerful to act together at a time of financial constraints for the public sector there was in fact £0.33b more available for health. The challenge is for the operating model for its delivery. The 8 areas are:

- i) Acute physical healthcare - creation of an alliance for Portsmouth, Southampton and the Isle of Wight - such as the major trauma centre at Southampton - to maximise expertise for the population of the Solent area.
- ii) Mental Health Services - there is a mental health alliance with Solent NHS Trust but there are still problems when people present in crisis and beds for acute services are not always local; collaboration with the 3 suppliers of services allows a better recovery.

- iii) Workforce - this covered training and re-designing roles to maximise efficiency.
- iv) Digital Transformation - this needed to be embraced as currently 98% of interactions were face to face where alternative methods could be used and patients could be more in control such as via their own care plans. There would be a roll-out of e-consult models, help to self-diagnose and consultancy at the appropriate level such as use of pharmacists.
- v) Intelligence and People Insight - predictions on how people will behave and their care needs, such as use of personalised medicines and better targeted cancer screenings.
- vi) Scaled Solutions and Preventions - earlier targeting where there are high mortality rates e.g. sclerosis of the liver.
- vii) Simplified Flow and Discharge - work with Portsmouth Hospitals Trust to improve the flow of discharge.
- viii) Cost Reduction Programmes at Scale - needing more collaboration e.g. there are currently 5 separate pathology services in the area.

The chair circulated a proposed response and stated the need for consultation at the start of the process and further comments were made by HWB members:

Innes Richens, in representing the CCG, felt that from a NHS point of view the focus of the STP was on what we need to do beyond Portsmouth and the STP should reflect what NHS partners have planned for the city, and they would continue to commit to make the plan work. Kate Lees on behalf of PCC Public Health reiterated the importance of supporting collaboration of services.

Councillor Ferrett, as previous Chair of HOSP, commented on the vascular debate which had caused a lot of concern for residents about moving services from Queen Alexandra hospital and the sustainability effects of doing so. He therefore asked about the view of Portsmouth hospitals? Richard responded that there would be challenging discussions ahead but that the Chair of PHT also chairs the Acute Alliance where issues surrounding services such as vascular and neurology would be raised. He hoped that these would not be approached from a competitive process but one of collaboration to find solutions to retain service presence and access to expertise for the local communities who would also be consulted.

Councillor Jones, as Leader of PCC, was concerned by the geographical footprint of the plan on an historic basis rather than recognising the partnership work taking place locally for the Portsmouth postcode area. Richard responded that there had been a lot of discussion about boundaries and delivery should take place at the lowest place therefore 8 areas had been identified and the flow issues were for the Portsmouth & SE Hants area, and for public health a lot of work would continue to take place between the cities

of Portsmouth and Southampton. The plan sought the delivery of best outcomes and most of this would be delivered at the locality level - David Williams, Innes Richens and Sue Harriman were all involved in these discussions. The HWB Chairs would be invited to be involved in the top level of consultation meetings.

David Williams stressed that this machinery had been imposed by NHS England and some of the biggest issues to resolve would be governance and structures when there are 24 partners involved. The STP is being promoted nationally and people do want to be consulted as part of the process.

Sue Harriman reported on her involvement for Solent NHS Trust and whilst there may be some parochial concerns being raised there is the opportunity to do things differently and more effectively at scale. There would be benefits for residents and the workforce and the plan is an enabler to deliver the aspirations of the Portsmouth Blueprint.

Patrick Fowler, representing Healthwatch Portsmouth, expanded on the need for consultation and also involvement of staff to help inform the process of change. He asked how the engagement could be meaningful and the timescales for contributions? Elizabeth Fellows asked what the consultation would be on?

Richard acknowledged that this had been done at pace by NHS England (for endorsement by the end of December) but that there would be consultation through communities and conversations with local providers, and representatives would be happy to be invited to give talks on the STP. He reported that there would be accompanying investment such as WiFi provision and hub development (in Portsmouth, Emsworth and Bordon). The capital bids submissions however had been prior to the launching of the STPs. There would also be consultation on any changes to acute services..

Jackie Powell asked if big savings were required? Richard explained the 5 year approach for financial allocation, which commissioners welcomed for forecasting purposes and this gave 5 years to identify opportunities to make savings such as via the use of technology, and the only way to deliver cost reductions and improved quality was by working together.

Councillor Stubbs proposed a formal response which supported :
"The Health and Wellbeing Board notes the progress to date on the STP. It welcomes the recognition of the importance of place and the implied support for the Portsmouth Blueprint. It also acknowledges that the health and care system will not be able to continue to provide high quality care and stay within budgets without an increased emphasis on community provision.

The STP is an important document. It sets the direction of travel for health and care across Hampshire and the Isle of Wight for the coming decade. It is therefore important that the public has the opportunity to express its views.

The Health and Wellbeing Board therefore asks partner organisations in Portsmouth to consult on the STP, with Healthwatch Portsmouth co-ordinating the process. The questions asked should be aligned where possible with any similar consultations elsewhere in Hampshire and Isle of Wight and the consultation should at a minimum be open for the whole of January."

70. Joint Strategic Needs Assessment (JSNA) Annual Summary 2016 (Information Item) (AI 7)

Kate Lees, Consultant in Public Health, presented this annual summary report of the health needs in the city. She drew members' attention to the demographic figures for Portsmouth's increasing over 65 population, and the deprivation statistics with Portsmouth lying 63rd out of 326 local authorities. The life expectancy figures in Chapter 4 were worse for males in the city than for the national average over the last 3 years, and there is a gap of 9.5 years between those living in the most affluent ward and the least affluent ward. Female life expectancy was now significantly worse than the English average.

Going forward aims included increasing the number of years of good health of residents for which there would be less burden on the health system and to give the best start in life such as through increasing breast-feeding rates and decreasing smoking by mothers at the time of delivery. Other prevention work included taking forward progress in tackling childhood obesity (although there had been an increase in the number of girls who were overweight).

Another area of focus was mental health especially deaths from suicide and other preventable deaths which were linked to smoking and drinking; it was known that 57% of adults in Portsmouth have 2 or more unhealthy behaviours. Page 55 of the report set out the recommendations of the annual summary, with key priorities including data sharing, and the appendix set out key areas for research.

Questions and comments were raised by HWB members, covering:

- The report contained useful information, especially at the time of choices needing to be made on targeting budgets, and it was asked if Portsmouth was becoming more deprived? Kate felt that the rankings should be treated with some caution as small changes can affect these.
- The JSNA website included further information on comparators with similar local authorities
- There were concerns raised about the effect of cuts to services such as counselling and substance misuse and a squeeze on public health finances was being seen nationally
- The City Council leaders would take forward the deprivation information to use in attracting national investment, along with our close neighbours, and there was close work with partner organisations such as the police on the links between the rise in serious crime and drugs and alcohol.

- The City Council had data sharing protocols in place and being taken forward.
- There is dialogue with core city group authorities in sharing good practice e.g. there are good links with Plymouth Council
- Solent NHS Trust also has a range of intervention work such as healthy eating, smoking cessation etc to encourage citizens to take more control
- Communities should be involved in helping to find solutions and the new Director of Public Health would be asked to encourage local participation

Councillor Stubbs asked for views of HWB members on breast-feeding in the Civic Offices and this was supported by HWB members so the Civic Offices should be endorsed and publicised as a breast-feeding friendly public building.

71. Dates of meetings in 2017 (AI 8)

The suggested dates were noted (for 10am starts) and the date of the next meeting in February would be consulted on with HWB members:

15th or 22nd February (later confirmed as 15th February)
21st June, 20th September and 29th November

The meeting concluded at 12.07 pm.

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Councillor Luke Stubbs
Chair