

## HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held virtually on Wednesday, 25 November 2020 at 10.00 am

### Present

Councillor Matthew Winnington (Joint Chair) in the Chair

Dr Linda Collie, PCCG and Joint Chair  
Councillor Suzy Horton  
Councillor Jeanette Smith  
Councillor Judith Smyth  
Councillor Gerald Vernon-Jackson

Steve Ash, Hampshire Fire & Rescue Service  
Helen Atkinson, PCC  
Sarah Beattie, National Probation Service  
Siobhain McCurrach, Healthwatch Portsmouth  
Alison Jeffery, PCC  
Jacqueline Markie, Community Rehabilitation Company  
Rob Mitchell, Portsmouth Police  
Jackie Powell, PCCG  
Innes Richens, PCCG / PCC  
Suzannah Rosenberg, Solent NHS  
Dianne Sherlock, Age UK

### Non-voting members

#### Officers present

David Goosey, Alison Lawrence, Dominique Le Touze, Kelly Nash, Innes Richens, David Williams, Dr Fiona Wright

#### **37. Chair's introduction and apologies for absence (AI 1)**

Councillor Matthew Winnington, Cabinet Member for Health, Wellbeing & Social Care, as Chair, opened the meeting by welcoming members to the third virtual meeting of the Health and Wellbeing Board (HWB). All present introduced themselves.

Apologies for absence had been received from Roger Batterbury (represented by Siobhain McCurrach), Superintendent Steve BurrIDGE (represented by Rob Mitchell), Mark Cubbon, Frances Mullen and Dr Nick Moore. Alison Jeffery gave her apologies as she arrived later due to a previous meeting.

#### **38. Declarations of Interests (AI 2)**

There were no declarations of interest.

#### **39. Minutes of previous meeting - 23 September 2020 (AI 3)**

**RESOLVED that the minutes of the Health and Wellbeing Board held on 23 September 2020 be approved as a correct record.**

**40. Portsmouth Safeguarding Adults Board - Annual Report (AI 4)**

David Goosey, Independent Chair of the Portsmouth Safeguarding Adults Board (PSAB), introduced the report and highlighted the Board's seven key strategic priorities. Despite progress in some areas such as developing a new transitions policy for children's to adult services, the business plan needs to be more aspirational and focused on outcomes so the Board is working on a new set of strategic priorities. It is more beneficial to be proactive than present work retrospectively. It is hoped to report next year on the new plan. Priorities need to align more closely with the Health & Wellbeing Board and other work across Portsmouth, for example, with the Safer Communities Partnership and health and social care generally. Safeguarding adults to be more prominent. The fact that nearly 60% of about 1,500 referrals were for neglect or self-neglect shows where the new strategic priorities should focus. Focus should also be directed at groups who may not have received attention in the past, for instance, the homeless; more has become known about the homeless and their needs during Covid-19. Another neglected group are drug and alcohol users.

Deputy Police Commander Rob Mitchell had discussed hate crime with the Independent Advisory Group a couple of days ago. Hate crime reporting has increased nationally since Covid-19, including across Hampshire, but the number of reported incidents does not reflect the amount of hate crime that is happening in Portsmouth. The police are working with their cohesion officer and partners to generate third-party reporting centres as more work is needed to encourage reporting. Much of the hate crime is finger pointing and blaming people for a number of matters such as inequalities and causing Covid-19. David Williams, Chief Executive, thought the emergence of work around the City Vision (Imagine Portsmouth) would help as it shows the extent to which compassion and the need to ensure that people feel secure is evident. Work on the City Vision would be brought to the HWB and it would be an opportunity to discuss how it links to other groupings that feed into the PSAB. Councillor Smyth thought linking the work of the PSAB to other strategies such as the City Vision was beneficial, particularly in view of Covid-19, as it provides an impetus to consider outcomes holistically.

The Chair noted safeguarding priorities provide every opportunity to expand into other issues such as health, housing and adult social care as well as connecting with drug and alcohol users and the homeless. He thanked Mr Goosey for his report and sterling work in difficult circumstances.

**RESOLVED that the Health and Wellbeing Board note the report.**

**41. Local Outbreak Engagement Board activity related to the pandemic (information item) (AI 5)**

Kelly Nash, Corporate Performance Manager, introduced the report, outlining the Local Outbreak Engagement Board's (LOEB) activity since the previous

HWB meeting. The LOEB has an extraordinary meeting on 1 December by which time the local tier of Covid-19 restrictions will be known.

Councillor Smyth was reassured by the LOEB's activity and expressed gratitude for its interagency work with its clear sight lines. The Chair noted that the LOEB built on the joint working that has existed for many years in Portsmouth. In addition, the difference the increased partnership working has made during Covid-19 is apparent at the LOEB. Involving key partners means more can be achieved than the statutory minimum and it can address issues that are not being addressed nationally. He thanked those involved with the LOEB for the report and their work. The LOEB will report to the next HWB meeting.

**RESOLVED that the Health and Wellbeing Board note the report.**

#### **42. Plan for Health and Care Portsmouth (AI 6)**

Innes Richens, Chief of Health and Care Portsmouth, introduced the report and emphasised that it drew together current work on revising existing plans with the aim of refreshing them. At its recent meeting the CCG Board recommended three areas in particular should be strengthened: focus on inequalities and where the city should be aligned on specific inequalities and where different practices are needed; clarity on when it is right to work within the city and when to work in the wider Hampshire and Isle of Wight area; the concept of "no wrong front door" in the mental health strategy to be adopted across other strategies.

Siobhain McCurrach said Healthwatch were currently undertaking a survey of the impact on Covid-19 on carers, many of whom became carers overnight and are unaware of the services available. The survey ends in January and a report, whose results Healthwatch are happy to share, will be completed in February. Ms McCurrach made the following comments on the Plan:

- What was the rationale for the target of 67% for uptake of annual health checks for people with learning disabilities?
- Where would people with lower-level mental health needs get support if the emphasis of Positive Minds changes?
- It would be beneficial for the "no wrong front door" concept to be incorporated into other services like Positive Minds and Talking Change.
- Does the reference to mental health assessments for young people undertaken in under four hours mean they are seen or registered on a waiting list?
- It was good to see MECC (Making Every Contact Count) included in the adult care priorities. Will priority be given to rolling out MECC training to frontline primary care staff and the voluntary sector? Healthwatch had found the MECC training very good.

Mr Richens acknowledged the impact of Covid-19 on carers and will work with Healthwatch as the survey would be very useful in shaping the Plan. He would respond to Healthwatch in more detail on the other points raised.

Councillor Smyth suggested rather than statements such as "improving access" the objectives should be more specific about the impact on service users, for example, the number of people supported and how they were supported. A service might have been overwhelmed with inappropriate demand or people had poor service. What one person saw as an improvement could be the opposite for someone else. The strategy needs measurable outcomes at the front to clarify what is trying to achieve. Mr Richens explained that it was challenging trying to marry adult priorities with NHS strategic priorities, one of which is the numbers coming through its doors. He agreed it was important to focus on outcomes and that the section on adults needed some development which was why he brought the Plan to the HWB.

David Williams said an important aspect of the Plan was about finding interfaces between work in Portsmouth and work in the wider South East Hampshire area. There is sometimes a misguided feeling that Portsmouth is seen as not always being involved in the wider geographical area. The Plan should be celebrated for focusing on better outcomes for Portsmouth people. However, it could include a comment to show how Portsmouth is committed to working within the wider geographical area where appropriate.

The Chair said one of the most important and valuable practices in Portsmouth was integrating health and care as well as bringing other statutory functions such as businesses, schools, the police and fire service closer together. There is always pressure from outside so organisations need to be careful not to move their focus away from Portsmouth, particularly during uncertain times when policies may be imposed from above. Ms McCurrach suggested that when times are more normal initiatives like Project Bridge could resume as they are a good mechanism for identifying and achieving key goals. The Chair said some Project Bridge developments were in the pipeline but delayed due to Covid-19; however, once there is funding they will proceed.

The Chair thanked Mr Richens for his report and asked HWB members to send any comments or suggestions to Mr Richens and his team.

**RESOLVED that the Health and Wellbeing Board note the report.**

The Portsmouth Mental Health Alliance report was presented after the Physical Activity Strategy due to technical issues. For ease of reference, the minutes will be kept in the original order.

**43. Portsmouth Mental Health Alliance (AI 7)**

Dr Fiona Wright, Public Health Consultant and Co-Chair of the Portsmouth Mental Health Alliance, introduced the report and gave a presentation on the Alliance which was established in May 2020 in response to Covid-19. In workstream 4 (Debt and Financial Issues) the Ask Twice approach is being used when training staff. In workstream 7 (Raising Awareness in Workplaces) the Alliance is working with Shaping Portsmouth to engage employers, which is important as many Portsmouth businesses are small and medium enterprises whose staff have been affected during Covid-19. It is hoped

bigger businesses might fund activities. Co-occurring conditions used to be known as dual diagnosis (when people have substance misuse and mental health conditions). An online event to raise awareness of mental health and Covid-19 in the BAME community was attended by the Lord Mayor.

The Chair said HWB members would receive an email about MECC and Connect 5 training and urged them to do the training, which he had found very worthwhile. Dr Wright confirmed MECC training would be offered to frontline staff and Shaping Portsmouth partners on a rolling programme.

Dr Wright acknowledged the impact of Covid-19 on the student and college population in the life course; the Alliance is working with the University of Portsmouth. It seems to be older children and young adults who are suffering more. Alison Jeffery noted that referrals were increasing to the Multi-Agency Safeguarding Hub for primary school age children where the main need is emotional wellbeing; referrals to CAMHS were also increasing. There is a trauma informed board which brings together key senior leaders from Hampshire-wide organisations such as the police and it would be beneficial to include the Alliance in their work. The board has just received funding for 1,000 places for training on trauma informed approaches. In Children's Services Ian Hunkin (formerly of the Harbour School) has run training for teachers on trauma informed approaches. The Harbour School adapted an American pilot (PACE Programme) for looked after children to help excluded children return to school. Dianne Sherlock thanked Dr Wright for her work and said Age UK was delighted to join the Alliance and participate in the training; its work is valuable as the impact of Covid-19 will continue for some considerable time.

Healthwatch had provided resources on bereavement for a central hub used by their host organisation Help & Care. Ms McCurrach will send the resources to Dr Wright who will put her in touch with Dr Paul Beadon, who hosts a bereavement forum. Dr Wright will liaise with children's and young persons' voluntary services and Stuart McDowell (Children & Families Commissioning), the link with the Social & Emotional Mental Health Strategy, to see if it was helpful for them to be in the Alliance.

The Chair noted that Dr Wright was leaving on 30 November when Claire Currie returned from maternity leave and thanked her for her work with the Alliance, which was a great example of partnership working. He also thanked Gordon Muvuti (Solent NHS), the Alliance's other co-chair for his work. An online debt event (Managing Money Worries) was being held the following week. The report on the Alliance would be considered at the Cabinet meeting on 1 December. The PHMA will report to the next HWB meeting.

Post-meeting note: on 1 December HWB members received an email from Councillor Winnington about MECC and Connect 5 training.

**It was RESOLVED that the Health and Wellbeing Board**

- 1) note the establishment of the PMHA, membership organisations, work streams, the work to date and future plans.**

- 2) **agree the terms of reference and accountability of the alliance.**
- 3) **consider how individual Board members and organisations get involved in and support the work of the alliance (including training, communications and embedding a trauma informed approach).**

**44. Physical Activity Refresh (information item) (AI 8)**

Dominique Le Touze, Public Health Consultant, introduced the report.

With regard to progress on the Superzone pilot around Arundel Court Primary, Ms Le Touze said she had met Councillor Horton and Pam Turton (Assistant Director, Transport) to discuss school streets. It was hoped to fund school streets via Tranche 2 of the Emergency Active Travel Fund but the funding earmarked for them was not as much as hoped so officers are looking to modify plans to make them more realistic. They are studying Southampton City Council's work on school streets that was undertaken on a modest budget. The Superzone around Arundel Court has paused as schools already have significant other pressures; however, some work could be done to progress the initiative prior to its proposed start in September 2021. Councillor Horton said it was important not to miss the opportunity to implement school streets while there is support for them.

Dianne Sherlock offered to publicise the initiative at the workshops planned for winter 2020/2021. Accessible streets and open spaces are also important for older people. In the last few months older people have lost physical ability leading to muscle deterioration as they are going out less; some are also afraid of going out because of Covid-19 or abuse.

The Chair noted that the council takes a holistic and integrated approach towards implementing active travel through the cross-council Air Quality Board. The Air Quality Board is discussing active travel with the NHS as much travel is generated by staff going to work or people going to appointments. In addition, Public Health has a dedicated officer who promotes healthy environments as a healthy city benefits all ages.

**RESOLVED that the Health and Wellbeing Board note the report.**

**45. Health and Wellbeing Strategy Refresh (information item) (AI 9)**

Kelly Nash, Corporate Performance Manager, introduced the report. Unfortunately since the Strategy's underlying themes were identified at the workshop on 5 February there has been limited capacity to work on it. However, officers are keen to resume progress in the New Year, taking into account the context of Covid-19 and other strategies such as the Health and Care Plan. She and the Chair acknowledged the work Wigan Council were doing; they are similar to Portsmouth in the way health and care are integrated, and their approach to co-production and what services can and cannot do is valuable.

**RESOLVED that the Health and Wellbeing Board note the report.**

The meeting concluded at 11.48 am.

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Councillor Matthew Winnington and Dr Linda Collie  
Chair

Dates of future meetings for reference:

3 February, 16 June, 22 September, 24 November - all Wednesdays at 10 am