

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held on Wednesday, 2 July 2014 at 4.30 pm in Conference Room A, Civic Offices, Portsmouth.

Present

Councillor Frank Jonas (in the Chair)

Councillor Donna Jones
Councillor Luke Stubbs

Dr Tim Wilkinson, PCCG
Tony Horne, Healthwatch Portsmouth
Innes Richens, PCCG
Dr Elizabeth Fellows, PCCG
Dr Janet Maxwell, PCC

Non-voting members

David Williams & Julian Wooster, PCC

11. Welcome and Introductions (AI 1)

Councillor Frank Jonas, the new chair of the board welcomed everyone to the meeting and asked everyone to introduce themselves.

12. Apologies for Absence (AI 2)

Apologies for absence had been received from Councillors Neill Young and Gerald Vernon-Jackson, and also from Mark Orchard (NHS England).

13. Declaration of Interests (AI 3)

There were no declarations of interests.

14. Minutes of Previous Meeting - 26 February 2014 (AI 4)

There was one matter arising regarding the Better Care Fund with Tony Horne asking for an update on progress. Innes Richens replied that there had been a communications resource for the consultation to take place and Healthwatch would be contacted as part of this and it was hoped that further communication events would take place in September.

As the current city council representatives had not been at the previous meeting it was asked for confirmation by others who had been present that the minutes were a correct record which was confirmed.

RESOLVED that the minutes of the meeting of the Health & Wellbeing Board held on 26 February 2014 be confirmed and signed by the previous chair as a correct record.

15. Draft Joint Health & Wellbeing Strategy 2014-17 (AI 5)

(A copy of the Draft Joint Health & Wellbeing Strategy 'Working better together to improve health and wellbeing in Portsmouth' 2014-17 had been circulated with the agenda papers)

Janet Maxwell introduced the draft strategy, stating that this was an important occasion for this partnership to improve the health of the Portsmouth population. The strategy represented the vast amount of work taking place in key areas. It was stressed that this was a draft document that would go out to public engagement, setting out priority areas and workstreams with the ambit to improve health outcomes for Portsmouth's population.

Whilst the order was changed to have presentation of priority 4 at the beginning the following speakers spoke to each of the identified workstreams (with reference to the draft strategy workstream development templates) as follows:

Priority 1 - Giving Children and Young People the best start in life

1(a) Review and redesign of the pre-birth to 5 pathway (Page 9)

Jackie Charlesworth from the Integrated Commissioning Unit presented this joint plan on behalf of PCC and Health to review the pre-birth to 5 pathway and service redesign in support of the healthy child pathway and transfer of commissioning for Health Visiting into PCC

1(b) Support the delivery of the 'Effective Learning for Every Pupil' strategy (Page 10)

This workstream was presented by Marc Harder regarding educational improvement, setting out the seven aims of the 'effective learning for every pupil' strategy. The priority areas included effective governance, improving attendance and effective learning.

1(c) Understand more about the emotional wellbeing in children and young people (Page 10)

Dr Janet Maxwell introduced this workstream, which is a cross-cutting theme within the Children's Trust Plan priorities, and which will draw on recent surveying of young people in Portsmouth.

Questions were then taken regarding priority areas 1(a)-(c), points included:

- * low achievement at schools and the importance of improvement in KS2
- * the value of parents reading at home to their children to give a positive impact

* the equally strong part played by governors at schools with the need to put in key people especially at schools where there were challenges.

Julian Wooster pointed out that some of Portsmouth's top schools were performing very well nationally and work was taking place in vulnerable and deprived communities and it was noted that, for example, both Charter Academy and Portsdown Primary Schools were achieving good results. The high achievements for under 5s in the city was noted, but there was still a large number who were not achieving basic levels at the age of 5 who would then remain behind during their educational progress.

Action: It was asked that a letter could be sent on behalf of the board to ask for the co-operation of NHS property company and the University of Portsmouth with the proposals for the release of land and the use of this for the Harbour School provision. Innes Richens confirmed that on behalf of the CCG he would be happy to be part of discussions with their partner property company in the NHS, and David Williams would draft the letter, to be sent by the Chair.

Priority 2 - Promoting Prevention

2(a) Create sustainable healthy environments (Page 11)

Janet Maxwell presented, touching on the promotion of healthy choices and close work with regeneration, the active travel agenda, shaping the food environment, increasing levels of physical activity and looking at barriers to exercise.

2(b) Improve mental health (Page 12)

Janet Maxwell presented the proposals to establish a mental health alliance in Portsmouth which will develop an action plan based on scoping against key national policies eg. Closing the Gap.

2(c) Tackle issues relating to smoking, alcohol and substance misuse (Page 12)

Rachael Dalby explained the combined approach of prevention, treatment and enforcement to increase life expectancy whilst decreasing criminality. The Safer Portsmouth Partnership is leading in delivering the aims around alcohol and substance misuse and the Tobacco Control Alliance had been re-established.

Questions were then taken regarding Priority 2(a)-(c). Councillor Jones made reference to the opportunities of older persons' physical activity being increased by the facilities at Hilsea Lido and her discussions with Portsmouth Cycle Forum regarding improving safety on Portsmouth streets and encouragement of cycling schemes (such as borrowing bikes). She also reported that there was lobbying taking place on legal highs via Council.

Steve McDermott, Chair of the Youth Parliament (who was accompanied by Ash Fountain) wished to make his observations on what he had heard with particular reference to the need for PHSE lessons to be more effective in outlining the dangerous consequences of drug taking. He stressed that the education system should not miss out those pupils in the middle who were not either gifted and talented or those at most risk. He encouraged further consultation with young people. In response it was confirmed that both officers and members (especially the group leaders) would wish to meet with the Youth Parliament to ensure that proper consultation did take place and Steven was thanked for his constructive comments.

Priority 3 - Reporting Independence

3(a) Develop and implement the Better Care Fund (Page 13)

Innes Richens presented this programme of work between PCC/NHS to provide better integrated care out of hospital, shifting to prevention and earlier intervention. The aim was to help people maintain their independence in the community and reduce emergency hospital admissions.

3(b) Explore and develop lifestyle hubs (Page 14)

Rachael Dalby presented and explained the aims to reduce inequalities in health outcomes, to promote self-help and community empowerment as well as individual responsibility. The intention was for the hubs to be established throughout the city.

3(c) Implement the city of service model (Page 14)

Brian Bracher, City of Service Chief Service Officer, presented and explained the implementation of this American model to harness the power of volunteers in the city, with projects on coaching and mentoring, numeracy challenge, Love Your Street and Love Your Loft.

Questions were then taken regarding the encouragement of volunteers from all areas, not just the more deprived areas. It was stressed that the Love Your Street was to be citywide with the aim to be at least two per ward and they would encourage young people to do volunteering and numeracy coaches would come from the local areas (they would not have to be experts). City councillors welcomed the City of Service initiative and hoped that there would be work with volunteers in the litter picking and dog fouling areas and also involving the third sector in dementia care provision.

Priority 4 - Intervening Earlier

4(a) Safeguard the welfare of children, young people and adults (page 15)

Julian Wooster stressed that there was a need to ensure the safeguarding of children and adults was understood and seen as everybody's business, and a key element was to give people at risk a

voice. This workstream will ensure those at risk are able to access mainstream support and that there are effective partnership arrangements to support this work.

4(b) Delivering the Portsmouth Clinical Commissioning Group Strategic Priorities (Page 16)

Innes Richens, Chief Operating Officer for the CCG presented - this five year strategy sets out the CCG's priorities to ensure the accessing of good quality and safe services, with patients being treated with respect and compassion. There is move away from hospital based to care in the community and homes, aiming to reduce readmissions and to help people live more independently.

4(c) Improve the quality of dementia services and care (Page 17)

Jackie Charlesworth presented the Dementia strategy for 2014-15. She stressed the need to give the right support and reported on the launching of a new advice pilot service, development of the Dementia Action Alliance as well as work with the universities of East London and Portsmouth. She outlined the range of support being rolled out towards making Portsmouth a dementia-friendly city.

Questions were then asked regarding Priorities 4(a)-(c). Regarding the Better Care Fund and pooling of resources Innes Richens reported that £10 million had already been invested in joint services including rehabilitation and reablement to support around hospital discharge. He stressed there would be a report to a future meeting of the Health & Wellbeing Board regarding the progress on the Better Care Fund.

Priority 5 - Reducing Health Inequalities

5(a) Implement a refreshed Tackling Poverty Strategy (Page 17)

Kate Kennard, the Tackling Poverty Co-ordinator at PCC stressed the links between health inequality and poverty, for example with financial worries leading to stress and substance misuse, pointing out that those needing debt advice were less likely to ask for it. There can be lower expectations for children from poorer socio economic backgrounds and Portsmouth children who are not as likely to go to university as children in other areas. There is also a high cost for public services of child poverty. There was emphasis on employability, budgeting and digital inclusion.

5(b) Tackle health related barriers to employment (Page 18)

Janet Maxwell outlined the aim to make sure there were appropriate interventions so that all had the opportunity to be valued in society and she made reference to the funding from the City Deal for supporting people who are long-term unemployed back into work.

5(c) Address issues raised in the Public Health Annual Report (Page 19)

Janet Maxwell referred to this statutory report, the latest version of which focussed on male health inequalities in Portsmouth.

Questions were then asked regarding Priorities 5 (a)-(c) again referring to the need for PHSE to be properly funded and prioritised by schools. Dr Maxwell reported that there was already some public health funding going towards this, and there is national debate as to whether PHSE should be statutory.

With regard to poverty, there was reference made to the minimum and living wages which were issues being addressed by PCC's Employment Committee and there was on-going consultation with schools.

Matt Gummerson summed up by explaining that the next step would be for the process of engagement to take place on all the workstreams in the community and the board would be asked to approve the final strategy at their September meeting.

The chair thanked all present for their participation in this positive discussion. It was asked that the Board's work should select a shorter subset from within these priorities to give the Board greater focus on where it can add most value and avoid duplication.

RESOLVED that the Health & Wellbeing Board

- (1) confirmed their support for the priorities as previously agreed by the HWB in February 2014;**
- (2) had discussed the detail and proposed workstreams under each priority as summarised in the Joint Health & Wellbeing Strategy;**
- (3) agreed that further development of the workstreams including any changes recommended by the HWB be undertaken during July and August by the lead for each workstream in partnership with others;**
- (4) agreed that the final version of the JHWS will be presented for approval at the Health & Wellbeing Board in September 2014.**

16. Date of next meeting (AI 6)

It was noted that the next meeting would take place on Wednesday 3 September 2014 at 9.00 am in the Executive Meeting Room, Guildhall.

The meeting concluded at 6.45 pm.

Councillor Frank Jonas
Chair