

## Shadow Health and Wellbeing Board

At the meeting of the shadow Health and Wellbeing Board held on 19 April 2012 at County Hall, Chichester.

**Present:**

Louise Goldsmith (Chairman)			
Howard Bloom*	Peter Evans	Judith Wright	Kieran Stigant
Mike Sadler	Amanda Rogers	Peter Latham	Katie Armstrong
Amit Bhargava	Minesh Patel	Stuart Gallimore	Christopher Snowling
Garrick Lloyd	Martin Pearson	Vicki King	

### Apologies:

Crispin Atkinson	Peter Catchpole (* Dr Bloom acted as substitute)
Amanda Fadero	David Clayton-Smith

### Appointments

1. The Chairman announced that appointments had been completed to the shadow Health and Wellbeing Board. New appointments to the membership of the Board comprised; David Clayton-Smith, Chairman of the Sussex Cluster PCT; Martin Pearson, 4SIGHT; and Dr Mike Sadler, Executive Director Health and Social Care, WSCC.

### Declaration of Interests

2. In accordance with the code of conduct, Dr Bloom declared a personal interest in the meeting as a salaried GP in Crawley.

### Health and Wellbeing Board priorities

3. The Board received and noted a report summarising the position statements of the Board, and the updated report tabled at the meeting, relating to priorities considered at previous meetings (copies of both appended to the signed version of the minutes).

### End of life and palliative care update

4. Dr Mike Sadler, Executive Director Health and Social Care provided an update on national developments relating to end of life and palliative care. Mr Sadler outlined the development of the national end of life care strategy, and a range of initiatives that have arisen from this work, including pilots to study palliative care funding flows. The work of Dying Matters, a forum consisting of 15,000 member organisations, was highlighted and an awareness week was to be held in May. It was proposed that a presentation on the priority be provided by the National Council for Palliative Care (NCPC) at the next meeting of the Board.

#### **Action Note – M.E.**

5. The Board supported a presentation to the next meeting and recognised that the priority was a significant element in local plans. It was hoped that CCGs would be involved in the joint initiative, end of life and palliative care was an area which required greater clarity concerning the interrelation of care pathways.

6. Resolved – That the Board notes the update and agrees a presentation on the priority to the meeting of the Board in June.

## Independence Priority

7. The Board received a presentation on the Independence Priority (copy appended to the signed version of the minutes). The priority was presented by Ann Corkery, Public Health Consultant and Dee Christie, Operations Manager, Adults Services, WSCC. The role of wellbeing hubs was outlined and in particular the social engagement service provided. The work of multi-agency Prevention Assessment Teams (PATs) was highlighted and commissioning intentions relating to Community Support services were outlined. Independent Living and Self Directed Support strategies were also presented to the Board.

8. The Board raised the points below in the discussion that followed:

- The wellbeing hubs provided signposting to existing services and commissioned services where gaps were identified. It was felt that the work of multi-disciplinary teams and proactive care would complement the role of the hubs. The Board urged the formalisation of the relationships between the hubs and multi-disciplinary teams drawn from the voluntary sector/PCT and incorporation into commissioning plans;
- The Board noted the 27% increase in community equipment service referrals which represented a very significant increase. Such significant events occurred periodically and intelligence was not adequate to anticipate similar circumstances in the future;
- The Board was supportive of the work undertaken by the wellbeing hubs to encourage social engagement and recognised the detrimental impact of social isolation on the health of an individual;
- Work was ongoing to review how to co-ordinate the work of multi-agency Prevention Assessment Teams (PATs) and the Memory Assessment Service as part of the reablement team;
- Wellbeing hubs were investigating the possibility of extending the outreach programme to enable face-to-face interaction in venues such as G.P.s surgeries. Currently such facilities existed at the K2 in Crawley; and
- **The Board would seek to ensure that intelligence was adequate to anticipate significant increases in service demand, such as the 27% increase in community equipment service referrals. (Amendment agreed at the 28 June meeting of the Board).**

9. Resolved – That the Board endorses the themes and key principles of Promoting Independence.

## Carers Priority

10. The Board received a presentation on the Carers Priority (copy appended to the signed version of the minutes). The priority was presented by Sam Tearle, Principal Manager, Specialist Support, Joint Commissioning Unit. Mr Tearle set out the strategic context of the priority, including the demographic predictions for West Sussex up to 2016. The West Sussex Interagency Carers Strategy 2010 – 2015 was outlined to the Board along with future plans relating to the priority.

11. The Board raised the points below in the discussion that followed:

- The Board requested further details of the composition of the Expert Group and the Carers Group which played a role in the development of plans and services for Carers. *The Expert Group consisted of Clinicians, representatives from Adult Social Care and those with commissioning experience. The Carers Group was broader in its membership and included*

*those with a direct experience of providing care. The Carers Group was a consultative forum that influenced the work of the Expert Group.*

- The Board recognised that a current priority was improvement to dementia services. Such improvement should be coupled to projects and initiatives aimed at people caring for dementia sufferers.

12. Resolved – That the Board supports the future plans relating to the Carers priority.

### **Sussex Together review outcomes**

13. The Board received a report by the Sussex Together Programme Manager which provided a summary of the outcomes of the Sussex Together Review (copy appended to the signed version of the minutes). Amanda Philpott, Director of Strategy and Provider Development, NHS Sussex introduced the report. The objective of the Review was to consider the healthcare needs of the population of Sussex in the future and develop strategies to meet such needs. A projected funding gap of £440m by April 2014 had been identified which represented 16% of the budget in West Sussex. The Review sought to identify areas of cost avoidance to reduce the deficit and build on existing plans, working in partnership to develop pathways for the local implementation of models of care identified in the report.

14. The Board provided the comments below in the discussion that followed:

- Clarification was sought regarding the timescales for proposals concerning paediatrics and maternity. *Over Summer 2012 the need for change and the methods to undertake change would be agreed and by Autumn the way forward would be established;*
- The Clinical Summits had been a broad and constructive forum for clinical leaders and commissioners to discuss local plans;
- The Board recognised that the Review set out the framework for change but implementation would have to be undertaken on a local level. Local Plans would result from the Review framework and it was unlikely that implementation would be consistent across the county. It would be appropriate for change to be tailored to the area in which it was applied. *Strategies for changes to models of care would be taken forward on a local basis and it was agreed that an update would be provided to the Board in 6 months time to provide detail of area specific implementation of the models of care identified in the Review.*

#### **Action Note – M.S.**

- The Frail and Elderly model of care implementation required an action plan to be formulated to coordinate between local government and CCGs, enabling the development of multi-disciplinary teams.
- During implementation the diversity of areas needed to be acknowledged together with an objective to ensure the fair division of resources across different areas.

15. Resolved – That the Board notes the update relating to the Sussex Together Review and requests an update in 6 months time on the local implementation of models of care.

### **Health and Wellbeing Strategy**

16. The Board considered a report by the Director of Public Health & Wellbeing and Safeguarding concerning the developing Health and Wellbeing Strategy for West Sussex (copy appended to the signed version of the minutes). The report

was introduced by Linda Corn, Senior Policy Officer, who advised the Board of the timescales for the approval of the Strategy; the final version would be presented to the Board in June.

17. The Board emphasised the importance of incorporating a strong commitment to Community Engagement in the Strategy and highlighted the key questions posed in the briefing note circulated to members of the Board before the meeting (copy appended to the signed version of the minutes). *It was confirmed that the Strategy would be developed in line with principles of community engagement. The key questions posed in the briefing note would be considered at the next meeting following the meeting of the Health and Wellbeing Cooperative. The key questions would be used as measures to assess the incorporation of community engagement principles into the Strategy. An agenda item on community engagement would be on the agenda for the next meeting.*

**Action Note – L.C. & M.L.**

18. Resolved – That the Board approves the draft Health and Wellbeing Strategy.

### **District Health and Wellbeing Partnerships**

19. The Board received a report by the Chief Executive of Adur and Worthing Councils and a tabled additional paragraph (copies of both appended to the signed version of the minutes). Peter Latham, Chief Executive of Adur and Worthing Councils introduced the report and requested the input of the Board to the recommendations contained in the report.

20. The Board provided the comments below in the discussion that followed:

- The CCGs were coordinated with the district and borough councils in a functional manner but clear priorities and actions were required to ensure that such coordination was constructive;
- The equality of opportunity for health needed to be improved across the County;
- CCGs and district and borough councils had very strong local connections. The County Council needed to ensure that it was not a remote organisation; and
- It was the role of each member of the Board to define what the Board was seeking to achieve, to agree this with the Board and to then ensure this was communicated to local organisations.

21. Resolved – That the Board supports the work of the Health and Wellbeing Partnerships and notes the report.

### **Date of the next meeting**

22. The next meeting of the Board would be held at 2.15 p.m. on Thursday 28 June 2012 at County Hall North, Horsham.

The meeting ended at 3.50 pm.

The Chairman.