

DRAFT MINUTES

Health and Wellbeing Board – **First** Formal Meeting

Meeting held on Wednesday 26 March 2014 at 09:30am

Committee Room, Swale House, East Street, Sittingbourne, ME10 3HT

- Present:**
- Cllr Ken Pugh (KP), Cabinet Member for Health, SBC(chair)**
 - Amber Christou (AC), Head of Housing, SBC**
 - Patricia Davies (PD), Accountable Officer, Swale CCG**
 - Cllr Chris Smith (CS), Chair Social Care and Public Health Cabinet Committee, KCC**
 - Tristan Godfrey(TG), Policy Manager, KCC**
 - Terry Hall (TH), Public Health, KCC**
 - Dr Faiza Khan (FK), Public Health Consultant, KCC**
 - Bill Ronan (BR), Community Engagement Manager, KCC**
 - Neil Fisher (NF), Head of Strategy and Planning, Canterbury and Coastal CCG**
 - Graham Harlow (GH), Commissioning Officer, KCC**
 - Dr Phil Barnes (PB), Medical Director, Medway NHS Foundation Trust**
 - Nigel Beverley (NB), Interim Chief Executive, Medway NHS Foundation Trust**
 - Jo Purvis (JP), Health Partnerships Officer, SBC**
- Apologies:**
- Cllr Andrew Bowles, Leader, SBC**
 - Abdool Kara, Chief Executive, SBC**
 - Debbie Stock, Chief Operating Officer, Swale CCG**
 - Dr Fiona Armstrong, Chair Swale CCG**
 - Paula Parker, Commissioning Manager, KCC**
 - Mark Lemon, Strategic Business Advisor, KCC**
 - Simon Perks, Accountable Officer, Canterbury and Coastal CCG**
 - Penny Southern, Director Learning Disability and Mental Health KCC**

NO	ITEM	ACTION
1.	Introductions	
1.1	KP welcomed attendees to the first Board meeting in public	
1.2	All attendees introduced themselves and apologies were noted	
2.	Minutes from Informal Meeting	
2.1	The minutes from the previous informal meeting were approved	
2.2	Outstanding actions: <ul style="list-style-type: none"> ▪ p5 – Healthy Swale Action Plan – this is a work in progress over the next few months 	
3.	Transforming Medway	
3.1	PB and NB gave a presentation on improving Medway Maritime Hospital following the Keogh Mortality Review carried out last year: <ul style="list-style-type: none"> ▪ Keogh Review developed a Quality Improvement Plan for the hospital, 	

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3.2	<p>consisting of 50 actions grouped under key themes of leadership, staffing and skills, unscheduled and critical care pathways, clinical assessments, culture and public reputation</p> <ul style="list-style-type: none"> ▪ Current focus is on improving emergency care, patient experience and leadership. Proposing a redesign of the emergency area within the hospital to enable a the creation of a single acute assessment area ▪ The hospital is having a CQC inspection at the end of April. Not expecting the position to have changed much since the previous one but are having open and transparent dialogue with CQC about the issues the hospital faces ▪ There are ongoing concerns regarding operational challenges for the hospital and a worsening financial position. There is a need to work out how it will be sustainable in the long-term and meet existing and future populations' need for acute care <p>Points made in the discussion included:</p> <ul style="list-style-type: none"> ▪ Staff vacancy rate is still high but is improving, however are still some issues around recruiting senior staff to Medway ▪ Need to ensure that the patient experience is feeding into service improvement, potentially through co-design or involvement of patients at Board. Swale CCG has the Chair of their Patient Participation Group on their Board and it works well. Canterbury and Coastal CCG have found involvement of local residents and service users around the Faversham MIU to be really positive ▪ MFT have plans to asset map what services/facilities are available within local communities to consider how to relieve some of the pressure on acute services. Need to look at how some services/treatments (eg diabetes) could be delivered differently in the future without the need to visit an acute hospital ▪ SBC would be happy to help support MFT around public engagement throughout the transformation progress. Regular dialogue between MFT and SBC Members would also be helpful. Separate meeting to be arranged 	JP
4. CCG Commissioning Plans		
4.1	<p>PD introduced the Swale CCG 2 Year Operating Plan:</p> <ul style="list-style-type: none"> ▪ Priorities around health inequalities. Average life expectancy on the Isle of Sheppey is around 11-12 years lower than in Sittingbourne. Sheppey also suffers from high rates of youth unemployment. Pleased that Swale CCG received an uplift in their base budget in recognition of these local issues ▪ CCG will focus on obesity, cardiac and respiratory issues and diabetes. These are occurring at a younger age amongst Swale residents than would normally expect ▪ Key to delivery of plan will be the Integrated Primary Care Teams (IPCTs), which will wrap health, social care and community services around GPs. Starting to set these up now so are ready for the pooled funding in 2015/16 under Better Care Fund ▪ A joint programme office has been established with KCC to manage 	

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	the integration processes for all of North Kent	
4.2	<p>NF introduced the Canterbury and Coastal CCG 5 Year Commissioning Plan and 2 Year Operating Plan:</p> <ul style="list-style-type: none"> ▪ Focus on community services and adopting a community first approach – change the culture of public perception that their NHS is just their local hospital ▪ Key to this will be the new community hubs, which will enable services to be tailored to local needs. Looking to engage local residents in co-design of these hubs, building on the model used in Faversham around the MIU ▪ Undertaking a range of direct local consultations with residents about the plans, using pop-up stands at key local events 	
4.3	<p>Points made in the general discussion were:</p> <ul style="list-style-type: none"> ▪ Tackling health inequalities is vital, particularly on Sheppey. Minimising health inequalities is good for residents and can prevent future high demand on acute services ▪ KCC Public Health has funded Sheppey Matters to set-up a community hub. This could help to support the IPCTs ▪ Scale of change facing health and social care services is huge and will take time ▪ Public engagement is crucial to helping residents understand the scale of the changes and manage expectations around the pace of change 	
5.	Better Care Fund	
5.1	<p>TG updated the Board on the Kent BCF submission:</p> <ul style="list-style-type: none"> ▪ Kent 1st draft submission was submitted to Department of Health at beginning of February. Positive feedback received and submission compared favourably with other Pioneer areas ▪ Final drafts to be submitted on 4th April. Will be discussed at the Kent HWB tonight ▪ Deadline of September for final metrics and finances to be all lined up 	
5.2	<p>PD outlined the North Kent BCF vision:</p> <ul style="list-style-type: none"> ▪ Main focus on integration. Have engaged with key partners, providers are on board and the acute trusts have signed the submission off ▪ Planning to start rolling out the IPCTs in June 2014 	
5.3	<p>NF outlined the Canterbury and Ashford BCF vision:</p> <ul style="list-style-type: none"> ▪ Major push around services for older people. Also trying to access the middle aged as they will be the older people of tomorrow ▪ Through the BCF will wrap services around GP localities ▪ Currently undertaking service mapping as part of the community services review. Identifying overlap between commissioning by the CCG, KCC and District Councils and potential for co-commissioning and joint posts between organisations 	
5.4	The Board congratulated both CCGs on getting their BCF submissions to	

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	this current state and acknowledged the work that has gone into achieving this	
6.	Kent Health and Wellbeing Board	
6.1	Commissioning Plans and BCF <ul style="list-style-type: none"> Discussed under items 4 and 5 	
6.2	East Kent Hospitals University Foundation Trust (EKHUFT) <ul style="list-style-type: none"> EKHUFT submitted an information report to the Kent HWB with an update on the consultation around outpatients services SBC submitted their response expressing concerns about the proposal to re-locate existing outpatient services from Faversham to a 1-stop shop at Estuary View, Whitstable Consultation on the proposals has now closed. Around 1500 responses were received and these are now being reviewed 	
6.3	Children's Health and Wellbeing Board (CHWB) <ul style="list-style-type: none"> Proposal to make the CHWB a formal sub-group of the Kent HWB Agreed need to ensure that children's health and wellbeing issues are adequately supported 	
7.	Partners Update	
7.1	KCC <ul style="list-style-type: none"> Director of Social Services at KCC has written to the Chairs of the local HWBs disbanding the local Children's Trust Boards and advising that local Children's Operational Groups should be established as sub-groups of the local HWBs. Copy of letter to be circulated to the Board The Board agreed that it should sit under the HWB but needs further consideration how this will work. KCC and SBC to meet to discuss further and a paper to be brought back to the next HWB in May KCC Cabinet Committee on Social Care is being split into 2 Cabinet Committees, one focusing on Adults and one on Children 	JP BR
7.2	KCC Public Health <ul style="list-style-type: none"> PH reported back to the Swale Public Services Board the previous week. Advised that the Community Chef programme will be expanded Phase 2 of KCC Social Care transformation beginning, which will focus on the health side of social care Undertaking promotion around Kent Healthy Business, highlighting the importance of employees health to businesses 	
7.3	Swale CCG <ul style="list-style-type: none"> From September, KCC will be the commissioning service for children's services for Swale CCG Need to understand where teenage pregnancy sits within this 	
8.	Any Other Business	
8.1	Troubled Families <ul style="list-style-type: none"> TF workers undertake high levels of intervention with families who 	

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	have poor health, particularly mental health. Finding it difficult to get health agencies to engage with them and to share relevant information	
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Next meeting date: Wednesday 28 May 2014*

Time: 9.30am – 11.30am

Location: Committee Room , Swale Borough Council

Future Meetings Dates (all 9.30 – 11.30 at Swale House):

Wednesday 16 July;

Wednesday 17 September;

Wednesday 19 November

***This meeting will be in public**

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