

Health and Well-Being Board

Tuesday, 24 September 2019, Council Chamber, County Hall
- 2.00 pm

Minutes

Present:

Mr A C Roberts (Chairman), Dr L Bramble,
Dr Kath Cobain, Dr Catherine Driscoll, Peter Pinfield,
Mr A C Roberts and Simon Trickett, Shirley Webb and
Sarah Wilkins

Also attended:

Derek Benson, Chairman of the Children's Safeguarding
Board and Adults Safeguarding Board.
Matt Fung, Public Health Consultant
Tim Rice, Senior Public Health Practitioner

**542 Apologies and
Substitutes**

Apologies had been received from the Chairman John
Smith and the Vice-Chairman Carl Ellson so the
members present were asked to nominate a Chairman
for the meeting. Andy Roberts was nominated and
seconded and as there were no other nominations he
took the Chair.

Other apologies given were from Richard Davies, Lynn
Denham, Adrian Hardman, Anthony Kelly, Paul Robinson
and Avril Wilson.

Natalie McVey attended for Lynn Denham, Sarah Wilkins
attended as Paul Robinson's substitute and Elaine
Carolan attended for Avril Wilson.

**543 Declarations of
Interest**

None

**544 Public
Participation**

None

**545 Confirmation of
Minutes**

The minutes of the previous meeting held on 21 May
2019 were agreed to be a correct record of the meeting
and were signed by the Chairman.

Peter Pinfield wished to note that Healthwatch
Worcestershire Board had endorsed the Time to Change
employer's pledge as had been agreed originally at the
meeting in October 2017 and was part of the Good
Mental health and well-being plan discussed at the
previous meeting. He hoped it would be possible to

**546 Worcestershire
Safeguarding
Children Board
Annual Report
2018/19 and
Child Death
Overview Panel
Annual Report
2018/19**

check if other organisations had also signed the pledge.

Derek Benson gave the Board a brief overview of the Worcestershire Safeguarding Children Board Annual Report 2018/19. It was explained that the annual report covered the period up to the end of March 2019. Various points were highlighted.

The report offered an assessment of the effectiveness of the Board and confirmed that the links to other Boards such as the Adults Safeguarding Board, the Community Safety Partnership and the Health and Well-being Board were very important as safeguarding was everyone's responsibility.

Key areas for the Board were the further development of the Neglect Strategy and work with the County Council and West Mercia on exploitation which included areas such as gang activity, trafficking, modern day slavery, forced marriage and criminal exploitation, among others. There had also been significant moves forward with Early Help.

Listening to the voice of the child was a perennial challenge and was an on-going priority for the Board. The Service improvement plan and Ofsted inspections were mentioned in the report and things had continued to move on in a positive way since March. No serious case reviews were commissioned during 2018/19 although learning events had taken place following previous case reviews.

Significant time had been taken to prepare for the new Safeguarding Partnership over the last year. Going forward there was a strong multi-agency commitment to safeguarding with improvement in Children's social care and Early Help which meant he felt more reassured about Children's safeguarding than in previous years.

The Child Death Overview Panel Annual Report detailed 38 notifications and 23 child death reviews. Modifiable factors were found such as lack of parental supervision, maternal smoking, alcohol, bed sharing and young inexperienced drivers. Along with the new Safeguarding procedures there would be new CDOP arrangements.

During the discussion the following comments were made:

- Derek Benson was asked how he saw the various organisations working together to support the emotional health and well-being of young people.

He felt that it was timely that organisations should consider how to make the right identifications of safeguarding issues at the right time and referrals to the right services. The next Joint Targeted Area Inspections would be around adolescent mental health so it would be worth Partners working out where Worcestershire was on this issue

- Following a query about why e-learning had been removed as it was now more difficult to train certain groups of staff; such as those in the Voluntary and Community Sector; it was explained that under the new Partnership Arrangements it was believed the old way of delivering training had not been delivering value or significant benefits. Under the new Partnership arrangements training would be directed at improving multi agency working
- The Chairman highlighted that mental health was an important cross-cutting theme as shown by the references to the Time to Change Pledge, the focus that Children's Services placed on mental well-being, the commissioning of services by the CCGs, the provision of services by the Health and Care Trust, as well as the role schools and social care had in children's mental well-being. It was an issue that should be looked at further.

RESOLVED that The Health and Well-being Board:

- a) Noted the key headlines and conclusions from the 2018/19 Annual Report;**
- b) Considered any points which may inform future work of the HWB in respect of its strategic priorities; and**
- c) Agreed to consider cross cutting themes where the HWB has a role to play in reducing risks to children.**

**547 Worcestershire
Safeguarding
Adults Board**

Derek Benson gave an overview of the Worcestershire Safeguarding Adults Board Annual Report for 2018/19. Work had been on-going around raising awareness of issues; briefings had taken place on how to make referrals at the appropriate time and also the mental capacity Act; and a new website had been created. Representation in the Partnership by people with lived experience was improving, which was helping to make safeguarding personal and improve outcomes for people with care and support needs.

Work was being done around the changes of the Deprivation of Liberty Safeguards to Liberty Protection Safeguards. More reviews had been undertaken in this area than in other areas, but it was believed that they added value and highlighted issues around domestic abuse, coercive control and information sharing.

For the future work would continue around promoting appropriate referrals and priorities for the year were around effective pathways for referral, the mental capacity act and making safeguarding personal. The pressures on Partners were recognised.

Comments made by the Board included:

- Elaine Carolan thanked Derek Benson for the positive working done by the Safeguarding Board. The priorities for Adult Services were around the work being done with Children's Services around transitions and working together with Partners on the Vulnerable People Programme which follows a national recommendation. Adult Services were committed to supporting providers to be able to get the best outcomes for people in their care
- The Deprivation of Liberty standards had changed to Liberty Protection Safeguards and 16 and 17 year olds would now be covered by the legislation which was expected to be implemented from Autumn 2020. This has meant a big workforce training issue as the implications were being worked through, meaning that Partnership working with Adults and Children's services and different Boards was very important
- It was queried whether the Safeguarding work was being fed back into the Long Term Plan and an assurance was given that Partners were committed to working together
- The Chairman mentioned that information regarding the Get Safe project was being spread around local councils.

RESOLVED that The Health and Well-being Board considered any cross cutting themes and to refer issues either directly to the WSAB or, through the next Joint Cross Cutting Issues meeting to be held between the Chairs of the four Boards.

548 Better Care Fund

The Health and Well-being Board were asked to approve the expenditure plans for the Better Care Fund for 2019/20. The fund consisted of more than £45million which included money for the Disabled Facilities Grant

which was passported straight through to the six districts. It was felt that it would be helpful for the Board to hold a development session to discuss the details of how the grant was being used for various projects.

Various points were discussed:

- When asked how children with profound disabilities living with their families could access the DSG, it was explained that the County Council worked with District Councils to look at how the DFG was utilised. The all age promoting independence service was about to be re-commissioned and it was important that the DFG was used strategically and decisions were made in conjunction with the Strategic Housing Partnership
- It was suggested that the DFG was not always used in the most effective way possible and that was something for District Councils to review. Increased awareness of the needs of children was something that would be considered going forward
- There were concerns that there was very little information available to enable members of the Board to be able to sign off £45 million. More information should have been supplied to be able to justify the spend and show the money was being used in the best way to improve health and well-being within Worcestershire, helping with the Boards priorities and using the funding appropriately
- It was explained that the Better Care Fund had grown in each year of the six years that the fund had been in existence in terms of money and services. Most of the funding for the integrated Health and Social Care teams came from the Better Care Fund and it was important to state that the better Care Fund was there to finance integrated health and care services not the Health and Well-being Board priorities. It was accepted that the presentation and description of services could be improved
- A future development session would be used to look in greater detail at the various areas which were funded by the BCF. The CCG and Adult Services would work on the details and present the information at a development session in 2020.

RESOLVED that the Health and Well-being Board:

a) approved the expenditure plans for the Better Care Fund for 2019/20; and

549 JSNA Annual Summary

b) agreed that a development session be held on the Better Care Fund to ensure that it is able to exercise strategic oversight of this funding stream.

Matt Fung gave a presentation about the main findings of the JSNA Annual Summary. The JSNA followed a life course approach and presented in a single document the current and future health and well-being needs of the people of Worcestershire. Worcestershire performed well on many indicators of health and well-being compared to England but Worcestershire was an affluent County and indicators were often expected to be better.

Emerging issues included:

- Increased inequalities in life expectancy and healthy life expectancy. This issue was also picked up in the NHS Long Term Plan
- Upward trend in killed or seriously injured on the roads
- Variation in uptake in cancer screening between GP practices
- Upward trend in emergency re-admissions
- Upward trend in smoking in pregnancy
- Increasing numbers of overweight adults. Obesity in children was an existing issue.

Persistent issues included

- Antibiotic prescribing in primary care
- Poor air quality
- Significant inequality in school readiness and educational outcomes for those with free school meal status
- Increasing numbers of children needing social care
- Children's oral health inequality
- Poor breastfeeding initiation rates
- Rise in deaths from drugs misuse

Board Members queried how the data could be used to drive work across the system to improve these issues. They felt that improvement was not being made on certain inequalities. It was important to concentrate on children's issues to prevent issues from escalating in future. Could Public Health guide partners in what needed to be done? It was explained that Public Health could look at the evidence base and advise on what could make a difference. The Children and Young People's Partnership Group and the STP were linking up to look at Children's issues and some issues had obvious

programmes to work on the issue such as the 0-19 Programme and fluoridation programme.

It was suggested that some of the issues were directed to the District Councils so that they could consider work on specific action plans. There were public health consultants to link with each district area but their role was as an enabler rather than telling the Districts what they should do. Districts were encouraged to move health and well-being issues up the agenda and then use County Public Health Consultants as a resource. Some issues were dealt with by the sub groups of the Board – for example the HIG which developed the strategies and oversaw operational activities. The HWB decided on priorities and plans were then created by the HIG and Public Health consultants who worked in conjunction with the Districts.

It was noted that the current Health and Well-being Strategy was coming to an end and discussions would be starting about whether the priorities needed to change in the new Strategy.

RESOLVED that the Health and Well-being Board:

- a) **Noted the contents of the JSNA Annual Summary and compendium of indicators in service planning and commissioning; and**
- b) **Noted the new population health dashboards on the JSNA website.**

550 Housing and Health JSNA

The Housing JSNA came about following a PHE document 'Improving Health and Care through the home' which took note of building regulations, homelessness legislation and Planning for Health. Contributors to this report included the County Council, District Councils and the NHS and Healthwatch.

Housing was a key determinant of health and had an impact on the mental and physical health of the population. With the rise in the numbers of older people it was necessary to get the environment right for healthy living. As Worcestershire was an affluent county it should be possible to say that people had suitable accommodation but that was not always the case. For most public health indicators Worcestershire was similar to England although homelessness in young people was worse than for England.

Non decent housing caused hazards to health and well-being and increased demands on health and care

services. Interventions targeted at the most deprived were likely to have a significant effect on the health of the population.

The recommendations suggested a preventative approach be embedded into planning to maintain people's independence at home and reduce hospital admissions; there should be a focus on issues such as fuel poverty preparing for an aging population; homelessness; falls prevention; children and young people and planning for health.

In the ensuing discussion the following main points were made:

- The Board queried how recent the figures were and it was explained that some of the data was census data which would be refreshed in two years and would then give a ten-year snapshot
- There was a query as to whether care leavers were considered as a specific sub set under homelessness figures. It was agreed that Children's Services would liaise with Public Health about the figures
- The Strategic Housing Partnership had seen the JSNA information and there had been acceptance of the issues. A task group was currently looking to develop a homelessness and rough sleeping strategy and an action plan
- When asked if it was possible to state what actions would be achieved and by when it was accepted that this was something which needed to be looked at
- From an adult care point of view, care packages were being put into homes which were not suitable and people were being forced to move to care homes due to unsuitable housing. As the numbers of older people was increasing in the County, the ability to be able to allow people to live independently at home for longer needed to be considered. A strategic, whole county view was needed to provide suitable houses to give people a choice of where they could live independently.

RESOLVED that the Health and Well-being Board is asked to note and approve the contents and recommendations of the housing and health JSNA.

Sarah Wilkins presented the six-monthly update of the SEND improvement programme. Following an Ofsted and Care Quality Commission inspection in March 2018

**551 SEND
Improvement**

Programme

significant areas of weakness had been identified which necessitated a written statement of action which detailed how the 12 areas of weakness would be addressed. There were five workstreams which had a cross organisational leadership who came together on a monthly basis and reported to the SEND Improvement Board, the Children and Young People's Strategic Partnership, ICEOG and to the CCG. A re-inspection was now anticipated.

The monitoring that occurred consisted of the DfE and NHS Leads attending Board meetings and listening to the progress being made but also challenge the actions being taken.

Local area leadership had been progressed through having multi-agency leads for the workstreams. The work was extended to schools and to GPs via the CCGs to ensure they knew how to support and signpost children and families. District Councils were also being asked to consider their local offer for SEND. This work was being done to ensure there was a good accessible local offer for SEND.

The data set had been updated and the SEND JSNA was about to be refreshed. A key area of development would be around using the vast amount of information, including information from the NHS, and distilling it down into a useable format.

Financially there was a huge amount of pressure around the specialist services and placements for SEND provision but work was on-going to understand the implications of the Government announcements that there would be more funding for SEND. A high needs recovery plan has been developed with 'building blocks for recovery' which were aligned with areas of the written statement of action to ensure demand was managed through engagement with parents, carers and providers; improving the Graduated Response in schools; ensuring a 19-25 education offer; developing an efficient provision whether within Worcestershire or out of County and reviewing EHC plans.

Board Members made the following comments:

- It was felt that this area showed that Inspection Regimes can be effective in raising the profile of an area and improving partnership working
- In response to a query about whether there should be a communication programme to inform parents and carers just what would be provided, it was

stated that Ofsted pointed out that there was a fragile relationship with parents and carers and it was accepted that communication was important. In anticipation of the next inspection, professionals were looking at what difference the improvement plan might have made to the experience of a parent or carer and how a public progress report might be presented. Work was being done with the parent/carer forum to improve feedback

- It was clarified that the Local Offer sets out what is on offer and has been available for a number of months. With regards to the Graduated Response Worcestershire had a higher proportion of children being placed out of county in specialist schools but the aim was to develop a properly inclusive school system within the County.

RESOLVED that the Health and Well-being Board:

- a) **noted the steps taken to address the key concerns identified in the Local Area SEND inspection in particular in relation to Local Area Leadership; and**
- b) **having discussed the report made comments regarding the inspection process and communication with parents /carers which could be fed back to the SEND Improvement Board prior to the next meeting on 14 October 2019.**

552 Revised Health and Well-being Board Terms of Reference and Board Working Arrangements

Tim Rice outlined the changes that were being suggested for the updated terms of reference for the Board. The changes had been discussed with the Board Chairman, the Accountable Officer for the CCGs and the Interim Director of Public Health.

As arrangements were changing within the CCGs there were some proposed changes to the Board membership to ensure that the balance between Local Authority and CCG remained. Other membership changes included that the representative of the Housing Authorities should become a permanent non-voting Associate Member of the Board and that Worcestershire Acute NHS Trust and Worcestershire Health and Care Trust should be invited to join the Board as non-voting members. To match what had happened over the last few years it was suggested that the number of development sessions be reduced to 3, the details of the sub-groups had been updated, and there would be one Stakeholder event a year.

**553 Development
Session 22
October 2019 -
Items for
consideration**

The representative from the Voluntary Sector queried what the Board wanted from the Voluntary Sector with regard to some of the sub groups of the Board. He felt they had a role to play but there was a question of remuneration. It was felt the issue could be explored at a future development session.

RESOLVED that the Health and Well-being Board:

- a) **Considered and agreed the refreshed Terms of Reference,**
- b) **Considered the proposed revisions to the membership and agreed to invite any new members as set out in the report to join the Board,**
- c) **Noted that the agreed revised ToR would have to be presented at a full Worcestershire County Council meeting for ratification if required,**
- d) **Considered and agreed the changes to the stakeholder events and the private development sessions.**

Various issues were suggested for the next development session on 22 October:

- Children and young people's mental well-being
- The role of the voluntary sector in Health and Well-being and its participation in the Board's sub groups.
- Where the Board should be going and how it linked to Integrated Care Systems
- Details of the Better Care Fund
- Where healthcare and support sit corporately in the industrial strategy
- Long term plan submission

It was agreed that the Better Care Fund and healthcare and the industrial strategy were topics for next years' development sessions. The long term plan would be discussed at the public meeting on 3 December.

Members felt that previous development sessions had looked at how the Board could be developed and what the future should be for the Board and it would therefore be better to get stuck into some of the important issues such as Children's mental well-being and the role of the Voluntary Sector in health and Well-being and specifically on the Board and the sub-groups.

554 Future Meeting Dates

RESOLVED that the Board would consider children and young people’s mental well-being and the role of the voluntary sector in Health and Well-being at the private development meeting on 22 October 2019.

The next private development session would be held on:

- 22 October 2019 at 2pm

The next public meeting of the Board would be held on:

- 3 December 2019 at 2pm.

The meeting ended at 3.55 pm

Chairman