

## Health and Well-Being Board

### Tuesday, 23 February 2021, Online - 2.00 pm

#### Minutes

#### Present:

Mr J H Smith (Chairman), Simon Adams, Dr Kathryn Cobain, Dr R Davies, Lynn Denham, Kevin Dicks, Sarah Dugan, Paula Furnival, Mr A I Hardman, Dr A Kelly (Vice Chairman), Jo Newton, Mr A C Roberts, Tina Russell, Jonathan Sutton, Dr Ian Tait and Simon Trickett

#### Also attended:

Emma Allen, Derek Benson, Bridget Brickley, Owen Cave, Rachael Leslie, Bernadette Louise, Tanya Richardson, Steph Simcox and Laura Westwood.

#### 592 Apologies and Substitutes

Apologies for absence had been received from Dr Louise Bramble.

The Chairman asked for a moment's silence to remember Peter Pinfield who sadly died recently.

Simon Adams was welcomed to the Board as the new Healthwatch representative.

#### 593 Declarations of Interest

None

#### 594 Public Participation

None

#### 595 Confirmation of Minutes

The minutes of the previous meeting held on 17 November 2020, were agreed to be a correct record of the meeting and would be signed by the Chairman.

#### 596 Rough Sleepers Thematic Safeguarding Adults Review

Derek Benson, Chairman of the Worcestershire Adults Safeguarding Board, explained that the Review of Rough Sleeping and had been published late last year. Brendan Clifford was the independent author of the report. Other areas around the country had also completed similar reviews. The review had looked at the multi-agency responses to rough sleeping, the impact of physical and mental impairment on the risks of rough sleepers, legislation such as the Care Act 2014, the Mental Capacity Act 2005 and housing legislation as well as other issues such as family situation, debt and self-neglect.

A stakeholder event had been held (prior to Covid) and good practice was recognised. Derek thanked the people within the County who were knowledgeable and committed to helping to support and safeguard rough sleepers.

There were no direct recommendations for the Health and Well-being Board but there was a role for its members. Lots of work was already being done by the WSAB and the Strategic Housing partnership but more needed to be done. Some areas which the Board did need to consider included who 'owned' the issue of rough sleeping; how to integrate the work of small scale community groups into the whole system; reviewing arrangements for suicide prevention; the possibility of a nominated GP lead and learning from the Homeless patients pathway.

Members of the Board made various contributions:

- The Strategic Housing Partnership was working on some areas of the recommendations and had received input from the WSAB, however issues around rough sleeping were systemic and were not just down to strategic housing.
- The Homelessness and Rough Sleeping Strategy was currently being reviewed at a district level but it could be brought back to the Health and Well-being Board and discussed by other partners.
- Over the past year the Homelessness task group had worked to make system wide improvements and issues was being fed into the ICS by Paula Furnival and work was being done with the leaders of the Acute Trust, Health and Care Trust and the CCG but more was needed.
- Comments were made that the report was quite dense and academic in tone which made it difficult for Councillors or the public to engage with but it was recognised as a good piece of work.
- Members discussed where they felt accountability lay. They believed that the Health and Well-being Board had strategic oversight and should discharge its duties by instructing the Adults Safeguarding Board to oversee the response to the report. However, the learning needed to be taken forward to ensure Worcestershire was not in the same situation again.
- Partners needed to consider how services were planned to deal with the complex issues such as substance misuse, mental health issues, adverse childhood experiences and access to safe housing

and to prevent individuals ending up as rough sleepers.

- It was pointed out that more transparency was needed so all the different groups were aware of the work being done; Healthwatch agreed to help with that. Also, more regular reports should be received by the Health and Well-being Board.
- It was an important issue for District Councils and Worcester City was considered a centre of excellence for dealing with homelessness and there Rough Sleeping was usually considered the responsibility of the Safer Communities Board or the Police.
- With regard to the issue of who was the single point of leadership or whether there could be a 'Lead Member for Rough Sleeping' the Chairman reiterated that he felt it was everyone's responsibility. District Councils had statutory responsibility for housing but everyone needed to work together to stop the problem occurring in future.
- The 'Everyone In' policy had been hugely beneficial and it showed what could be done; it had been well organised by public health. It was recognised that there were many organisations who offered support to rough sleepers but there needed to be an alliance approach between the 'state' and voluntary organisations so that everyone worked together towards the same aim. Worcester Cares had been organised within Worcester City and was an approach that could be adopted in other districts.
- It was agreed that further conversations were required and that wider issues of substance misuse, mental health, adverse childhood experiences and other issues were all important to helping with tackling rough sleeping and would be looked at through the Health and Well-being Board priorities.

**RESOLVED that The Health and Well-being Board:**

- a) Considered the recommendations made in the attached Thematic Safeguarding Adults Review which were of relevance to their strategic oversight;**
- b) Delegated to the Worcestershire Safeguarding Adults Board the role of responding to the recommendations in the Rough Sleepers Safeguarding Adults Review; and**
- c) Agreed that, going forward, Partners would**

**have more detailed conversations regarding planning services to proactively minimise the chance of people ending up as rough sleepers.**

**597 Autism Strategy**

The Co-Chairs of the Worcestershire Autism Partnership Board, Owen Cave and Laura Westwood presented an update to the Board. It was explained that a refresh of the Strategy happened in 2019 as new guidance had been expected from the Secretary of State in 2020 which would include a duty to link the children's and Adult's Strategies; those details were still awaited. When the guidance was received a new strategy would be developed.

Currently work was being done through an action plan but progress had been slow in the last few months due to both the pandemic and the work being done in children's services following the Ofsted inspection and creation of Worcestershire Children First. How well actions were picked up would partly depend on how quickly health services got moving again following Covid.

Work was now happening on the All-Age disability offer and a group were looking at children's priorities with a view to adding that as an appendix to the current strategy. Autism was being considered in the STP and plans were being put in place to get through the back log of adult referrals.

Achievements included increasing work with Worcestershire Children First and people were motivated to ensure that the needs of children and families were properly addressed. Work with partners within the criminal justice system had been helped by being able to hold meetings using zoom. Worcestershire had worked with the University of Portsmouth on helping people with autism into work and that had now been rolled out as a national programme by the DWP.

The next steps included focusing on delivering outcomes in the 2021 Action plan and looking at the impact of the pandemic. Some services had found that some more introverted people had actually engaged more with services over the last year. Bernadette Louise was introduced and she would be taking over Owen's role as one of the co-chairs. She explained that she was a parent to two autistic children and she was on the spectrum herself and had a great deal of personal and professional expertise to bring to the role.

Board members believed there was certainly a need for action around autism services and had concerns about the support and services available once young people transitioned into being supported by adult services. They felt there was awareness of the umbrella pathway but believed more was needed in terms of delivery and they questioned what support was available around mental health issues and support for parents and carers.

In response Owen explained that he represented Autistic people on the Board, but other people with autism were encouraged to join or contribute when they could and they had found that meetings on zoom actually made it easier for more people to engage with the meetings. Transitions were anxious times for people with autism and it was hoped the voluntary sector could engage more and help in areas such as helping people with autism get into employment. There was currently limited information within the action plan about transitions but more would be available in the updated plan when all transitions, such as between different stages of school, moving house or bereavement would also be looked at. It was confirmed that detailed work had begun in the People's and Children's Directorate concerning the transition from Children's to Adult's Services.

Work was being planned around the Umbrella pathway and what services would be available and a plan could be sent to Board Members within a few months. Since the publication of the last strategy it has been clear that more was needed around mental health. People with Autism People found it hard to access services and work was ongoing with service providers to improve the situation such as those for Mental Health and access to services was listed on the action plan for when the pandemic was over.

Owen Cave was thanked for enthusiasm and work with the Board.

**RESOLVED that The Health and Well-being Board noted the progress made on the Worcestershire's All-Age Autism Strategy and Action Plan 2019-2022 and endorsed the work in progress on a 2021 Autism Action Plan.**

**598 Better Care Fund**

The indicative forecast and budget for the Better Care Fund (BCF) for 2021 was presented for the Board to note.

It was pointed out that the Better Care Fund was a static

599      **ICS  
Development**

investment into a range of services which were constantly evolving. In the past year Covid as well as the National Hospital Discharge Fund had affected services. There was a review underway into how the BCF fund was used but there was limited flexibility in how the BCF could be used and Government Policy in the area was vague. The Fund was also usually only confirmed for 12 months but it was hoped that as the Integrated Care System evolved then more direction may be available from the Government. It was clarified that the grants given to Districts was a central government allocation and was not distributed according to need or population.

**RESOLVED that The Health and Well-being Board considered the current position regarding the expenditure plans for the Better Care Fund for 2020/21 in line with national guidance for 2020/21.**

Simon Trickett explained that he was expecting to be updating the Board that the ICS was continuing along the lines already described to the Board but the recently published White Paper would bring legislative changes to the 2012 Care Act which would be implemented in April 2022.

However, the White Paper continues and confirms the direction the Health System in Worcestershire had already begun. There would be ideological changes which would remove certain procurement obligations; there would be a general duty for NHS bodies to collaborate more and there would be the introduction of Herefordshire and Worcestershire Integrated Care System as a legal statutory body entity which would mean the CCG would be abolished and all its duties and staff would be transferred over to the ICS.

The Governance changes would see an introduction of an NHS Board with representation from NHS bodies and the Local Authority, and alongside the Board there would be a Health and Care Partnership Board which would enable wider partnership input. Consideration would be needed around the roles of the Health and Well-being Boards and the Partnership Board.

Worcestershire had already applied to become a formal ICS system and the response to the application would be received in March.

In the ensuing discussion various points were made:

- All changes that have taken place so far have

been voluntary but the new legislation would make it statutory and there would be a Chairman and accountable officers on the Board.

- The aims of health system could only be achieved by all bodies working together and District Councils can also fit into that. Redditch Primary Care Network was working well with its District Council and that could be mirrored across other areas.
- It was queried what would happen about governance as both new Boards would presumably have to report to Herefordshire, as well as Worcestershire, Health and Well-being Boards. There were concerns around duplication.
- It was agreed that it would be a good idea to discuss these issues at a private Development session. Local Authority and Health Officers were already discussing possible arrangements as there would need to be some changes to the Health and Well-being Board to ensure the different Boards fit well together.

**RESOLVED that The Health and Well-being Board:**

- a) Noted the development and submission of the Herefordshire and Worcestershire Integrated Care System (ICS) application, seeking designation as an ICS from April 2021, and committed to work with health and care partners on its implementation; and**
- b) Agreed to further discuss the governance arrangements and the impact the new arrangements would have on the Health and Well-being Board at a forthcoming private development session.**

**600 Covid 19 Health Protection Board quarterly Update**

The Director of Public Health updated the Board about the current situation in the County regarding Covid-19; explaining that the dominant variant was now the B117 Kent variant. The Local Outbreak Response Team (LORT) was funded by the Containment Fund and was operational seven days a week. As lockdown was loosened the LORT expected that there would be more demand for their help and advice. Contact tracing was important and Public Health was working well in partnership with Worcestershire Regulatory Services. Backward contact tracing was able to provide local information on how infections were happening and information could then lead the necessary local

communications. Lateral flow testing would be encouraged as there was currently an under usage. Testing and outbreak control would be key for the rest of the year.

Board Members made various queries and comments:

- Simon Trickett and the CCGs were thanked for the efficient roll out of vaccine
- Information on how testing would be delivered in schools was still awaited
- It was queried whether the fact that 42% of claims for payments during isolation were refused was having an effect on the number of people who were correctly isolating. It was confirmed that self isolation was key to suppressing the virus and although it was challenging for individuals the Here2Help service and District Incident Management Teams were helping to support people
- It was noted that there was currently a small uptick in the number of positive cases in Wyre Forest and Malvern and it was explained that these statistical bumps would be seen more frequently as numbers reduced overall and then when lockdown was loosened
- In Fernhill Heath surge testing had been implemented to identify cases of a particular variant and the Cabinet Office had visited to see how the County had organised the process and feedback had been positive.
- The Cabinet Office had recognised that Worcestershire's Here2Help project was one which empowered volunteered and worked from the ground up and volunteers had been mobilised quickly and efficiently to allow testing
- In response to a query about whether there were any key messages to go out to groups which needed to be reached it was mentioned that The Cabinet Office visit had highlighted that NHS and LA senior response teams and Instant Monitoring Teams worked well together but vigilance was needed to ensure that inequalities did not creep in with the delivery of the vaccination
- The Chairman commented that in his role as Cabinet Member with responsibility for Health and Well-being he had visited vaccination centres and had been told that the local system for recording vaccinations did not communicate with the national system as well as was hoped.



**RESOLVED that the Health and Well-being Board:**  
a) Thanked all staff and partners for the work done during the pandemic; and  
b) noted the delivery of Worcestershire's Outbreak Control Plan, the arrangements for governance and the current situation of Local Outbreak Response Team (LORT) operation.

**601 Future Meeting Dates**

**Public meetings** (All Tuesday at 2pm)

- 25 May 2021
- 28 September 2021
- 16 November 2021

**Private Development meetings** (All Tuesday at 2pm)

- 30 March 2021
- 22 June 2021
- 19 October 2021

**Comment**

It was noted that this was the last meeting that would be Chaired by John Smith as he was standing down at the forthcoming election. He was thanked for all the work he had done in the area of Health and Well-being and the support he had given to the Director of Public Health.

The meeting ended at 4.00pm

Chairman .....