

## **HEALTH AND WELLBEING BOARD**

**WEDNESDAY, 15 MARCH 2017**

PRESENT: Brian Mattock (Chair) (Lay Member), Councillors Ray Ballman, Fionuala Foley, and Brian Ford (Swindon Borough Council), Mark Edwards (Project Coordinator, Healthwatch Swindon), Dr Peter Mack (Vice-Chair) (Clinical Chair, NHS Swindon Clinical Commissioning Group), Gill May (Executive Nurse, NHS Swindon Clinical Commissioning Group), and David Wray (Voluntary Action Swindon).

Also in attendance were: Cherry Jones (Director of Public Health, Swindon Borough Council), Peter Nathan (Head of Education Services, Swindon Borough Council), Tom Frost (Public Health Senior Information Analyst, Swindon Borough Council), Ross Miller (Commissioning Support Officer – Growth and Regeneration, Swindon Borough Council) and Emma Gee (Strategic Commissioner – Growth and Regeneration, Swindon Borough Council).

Apologies for absence were received from: John Gilbert (Chief Executive, Swindon Borough Council), Sue Wald (Director of Adult Services, Swindon Borough Council), Karen Reeve (Director of Children's Services, Swindon Borough Council), Nicki Millin (Accountable Officer, NHS Swindon Clinical Commissioning Group) and Angus Macpherson (Police and Crime Commissioner).

### **53. Declarations of Interest**

The Chair reminded members of the need to declare any known interests in any matters to be considered at the meeting. No declarations were made.

### **54. Minutes**

Resolved – That the minutes of the meeting held on 14 December 2016 be confirmed and signed as a correct record.

### **55. Public Question Time**

No public questions were received prior to or during the meeting.

### **56. Health and Wellbeing Strategy Refresh 2017**

The Board considered a report setting out how Swindon's Health and Wellbeing Strategy has been refreshed for 2017 – 2022 informed by the Swindon Joint Strategic Needs Assessment (JSNA). The report set out how the Health and Wellbeing Board has a duty to produce a Health and Wellbeing Strategy, in accordance with the Health and Social Care Act 2012, informed by the needs of its population outlined in its JSNAs, and also how the Swindon Clinical Commissioning Group, NHS England, and Swindon Borough Council plans for commissioning services are expected to be informed by the Health and Wellbeing Strategy and the JSNA.

Cherry Jones, Director of Public Health at Swindon Borough Council, introduced the report and referred to the five priorities previously identified for the Strategy when it

was first created in 2013, as detailed in paragraph 3.8 of the report. There are two areas which will be made more explicit within the Strategy following the refresh: ensuring that all adults have the opportunity and support to sustain paid employment or volunteering, and; to reduce the incidence of domestic abuse.

Following the presentation of the report, and the refreshed Health and Wellbeing Strategy for 2017 – 2022 attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- The targets contained within the Borough Council's Vision regarding increasing the numbers of adults with learning disabilities being in paid employment, and how the refreshed Strategy will help to achieve this.
- The different options available to raise awareness of the refreshed Strategy.

Resolved – (1) That the refreshed Health and Wellbeing Strategy for 2017 – 2022, attached at Appendix 1 to the report, be adopted.

(2) That the proposal to engage further with local communities and residents to ensure our shared vision and proprieties are relevant and proportionate to local opinions be supported.

(3) That the Cabinet and the Governing Body of the Swindon Clinical Commissioning Group be recommended to adopt the refreshed Health and Wellbeing Strategy for 2017 – 2022.

## **57. Joint Strategic Needs Assessment Summary 2016/17: An overview of Health and Wellbeing in Swindon**

The Board considered a report setting out how the Health and Wellbeing Board has a statutory responsibility to prepare a Joint Strategic Needs Assessment (JSNA) for Swindon. The JSNA must describe the current and future health and wellbeing needs of the people of Swindon, and is the principal work stream to inform the Joint Health and Wellbeing Strategy. The report also set out how the Swindon JSNA is an on-going iterative process led by Swindon Borough Councils public health team and involving a wide range of stakeholders, and informs decision about how services are commissioned and designed.

Tom Frost, Public Health Senior Information Analyst at Swindon Borough Council, introduced the report and confirmed that the JSNA website, which contains signposts to other sources of information, is being reviewed by subject matter experts to ensure its accuracy and will be updated by the end of March 2017. Mr Frost also referred to the Key Facts from the JSNA Summary, which were set out in detail in paragraph 3.9 of the report.

Following the presentation of the report, and the JSNA Summary for 2016/17 attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- The options for communicating the key messages from the JSNA Summary to a wider audience.
- The differences between data concerning the length of life in good health, and life expectancy figures, and how more focus is being placed on having good health whilst ageing.
- The report coming to a future Board meeting concerning people having more

than one long term condition, and the differences with how chronic illnesses are dealt with between deprived and less deprived areas.

Resolved – (1) That the 2016/17 Joint Strategic Needs Assessment Summary report, attached at Appendix 1 to the report, be noted.

(2) That its use in commissioning and strategy preparation, including the Joint Health and Wellbeing Strategy, be endorsed.

## **58. Swindon Substance Misuse Joint Strategic Needs Assessment**

The Board considered a report setting out how Swindon Borough Council is responsible for reducing the harm caused by substance misuse and, as such, how it is important to review the needs of drug and alcohol users and assess the impact their substance misuse is having on themselves, their families and their communities. This information is used to inform the strategy and commissioning of a range of services that aim to impact on substance misuse.

The report also highlighted the purpose of the Joint Strategic Needs Assessment (JSNA) for substance misuse, and how it will lead to the development of a substance misuse strategy which will outline how key partners in Swindon will work together to reduce the number of people who misuse substances, reduce the harm caused by substance misuse, and support those recovering from substance misuse thereby addressing health inequalities.

Frances Mayes, Senior Public Health Manager at Swindon Borough Council, introduced the report and referred to the four priorities around which the recommendations from the JSNA have been grouped (as set out in the Substance Misuse JSNA Bulletin attached at Appendix 1 to the report). These are: early intervention with young people and their families; prevention of substance related harms for adults; treatment services deliver effective harm reduction and sustained recovery, and; reduce substance misuse related crime and anti-social behaviour.

Following the presentation of the report, and the Substance Misuse JSNA Bulletin attached at Appendix 1 to the report, Board members discussed the impact of the integration of the drugs and the alcohol provision, and the impact on the Swindon and Wiltshire Alcohol and Drugs Service (SWADS).

Resolved – (1) That the findings of the Substance Misuse Joint Strategic Needs Assessment, as set out in the Bulletin attached at Appendix 1 to the report, be noted.

(2) That its use in the commissioning of substance misuse services in Swindon be endorsed.

(3) That the development of the Substance Misuse Strategy 2017 – 2022 based on the recommendations of the Joint Strategic Needs Assessment be endorsed.

## **59. Diabetes Joint Strategic Needs Assessment 2017**

The Board considered a report on the incidence of diabetes in the UK and its emergence as a major health problem requiring urgent action. In particular, the report highlighted the increased prevalence of diabetes in Swindon. It was noted that outcomes for people with diabetes remain poor and spend on diabetes and its

complications are high. The Joint Strategic Needs Assessment (JSNA) provides evidence to help understand diabetes prevention and care in Swindon, building on the diabetes profile completed in 2013. The report also set out how there has been significant improvement in diabetes care since the 2013 profile, however the number of people who develop diabetes remains high while some outcomes remain poor.

Cherry Jones, Director of Public Health at Swindon Borough Council, introduced the report and referred to the high number of lower limb amputations taking place in Swindon due to patients not managing their condition well. Mrs Jones referred to the recommendations set out in the JSNA Bulletin, attached at Appendix 1 to the report, which will be taken to the Swindon Diabetes Transformation Board for action.

Following the presentation of the report, and the Diabetes JSNA 2017 Bulletin attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- How type 2 diabetes is formally diagnosed, and the varying symptoms that can be checked for.
- The potential reasons behind why there is a low uptake of structured education for people with type 2 diabetes in Swindon.
- The new National Diabetes Prevention Programme being developed across the Sustainability and Transformation Plan (STP) footprint (Wiltshire, Swindon and Bath and North East Somerset) whereby patients who are identified by GPs as pre-diabetic will be sent a letter to offer them a chance to learn how to avoid developing the full condition. This will target between 3 – 4000 people a year across the STP footprint.
- Prevention being the key to this disease in future, by ensuring that both adults and children learn about maintaining a healthy weight and having an active lifestyle, and that activities are designed in to new housing estates.
- The focus on educational achievement and standards within education settings at the moment, rather than promoting a more holistic approach which targets physical education as well.

Resolved – That the recommendations identified in the Swindon Diabetes Joint Strategic Needs Assessment, as set out in paragraphs 3.6.1 to 3.6.7 of the report, be noted and approved.

## **60. Update on Swindon's Economic Strategy**

The Board considered a report presenting the evidence base that underpins the draft Economic Strategy. Formulation of the Strategy resulted in the identification of four key themes, and the suite of recommendations set out in the Joint Strategic Needs Assessment (JSNA) Bulletins associated with each of these four themes (attached at Appendix 1 – 4 of the report) will help to accelerate Swindon's economic growth.

Ross Miller, Commissioning Support Officer – Growth and Regeneration at Swindon Borough Council, introduced the report and confirmed that the draft Swindon Economic Strategy for 2016 – 2026 (attached at Appendix 5 to the report) was being rewritten and therefore withdrawn from consideration by the Board at this meeting.

Following the presentation of the report, and the JSNA Bulletins attached at Appendix 1 – 4 to the report, Board members discussed the matters raised, including:

- The need for easily accessible green open space within the town to help promote physical activity, and how this could be built into infrastructure planning.
- How the approach to solving some health problems can be designed in to projects, such as helping to promote the falls agenda by removing trip hazards for the elderly in a given space.
- The reasons why the levels of CO2 in Swindon are comparatively high, focussing on the high reliance on cars in the area, and the high level of manufacturers based within the town who are producing emissions.

Resolved – That the findings of the Economic Strategy Joint Strategic Needs Assessment, as set out in the Bulletins attached at Appendix 1 to 4 to the report, be noted.

## **61. Swindon Tobacco Control Strategy 2017-2022**

The Board considered a report presenting the Swindon Tobacco Control Strategy for 2017 – 2022. The Strategy sets out how, over the next five years, partners will work together across Swindon to reduce the number of people who smoke and the harm caused by tobacco use and create a smokefree Swindon. The Strategy will also ensure that partners continue to work collaboratively to protect and improve the health of the population and future generations in the creation of a smokefree Swindon.

Chris Woodward, Public Health Programme Manager at Swindon Borough Council, introduced the report and advised that smoking prevalence in Swindon is above the England average of 16.9% at 18.7%, and smoking rates from workers in routine and manual jobs in the town (25%) are higher than the smoking rates of adults in general. Smoking rates are also much higher in our population with mental health conditions and in our areas of highest deprivation.

Following the presentation of the report, and the draft Swindon Tobacco Control Strategy for 2017 – 2022 attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- The increase in the numbers of people using e-cigarettes, and whether there is evidence to suggest that the use of them encourages people to move on to normal cigarettes.
- The confusion surrounding e-cigarettes, and whether they are healthier or not to use. The latest studies suggest that they are 95% less harmful than normal cigarettes.
- ‘Vaping’ figures are not identified separately within the statistics in the report. E-cigarettes are still an unlicensed product, and the National Institute for Health and Care Excellence has not indicated that funds should be invested in this area yet.
- The potential for workers in the health services to be ‘role models’ for members of the public, and for organisations to go completely smokefree on

their sites.

- That Swindon has the lowest uptake of smoking amongst teenagers across the south west.
- The 'Make Every Contact Count' initiative which incorporates stopping smoking.
- The potential for spatial planning and transport to incorporate the principal of smokefree areas in to the design stage, which helps to promote healthy environments from the beginning.
- Other ideas such as smokefree children's play areas, smokefree school gates which could help assist teachers to stop smoking and be role models for their pupils, and potential fosterers and adopters being required not to smoke.
- How organisations will be approached to see what they could pledge to help deliver the Strategy.

Resolved – (1) That the Swindon Tobacco Control Strategy 2017 – 2022, attached at Appendix 1 to the report, be approved and the ongoing focus on tobacco control work in Swindon be supported.

(2) That the Cabinet and the Clinical Commissioning Group Governing Body be recommended to adopt the Swindon Tobacco Control Strategy 2017 – 2022.

(3) That the development of the action plan associated with this Strategy, which will be monitored by the Swindon Smokefree Alliance (the Swindon tobacco control partnership of key stakeholders), be supported.

## **62. Sustainability and Transformation Plan - update**

The Board considered a report setting out how the NHS in England is required to produce place-based Sustainability and Transformation Plans (STP), driving the Five Year Forward View over the period October 2016 to March 2021. The report set out how Swindon Clinical Commissioning Group (CCG) are working with Bath and North East Somerset and Wiltshire CCGs to develop a footprint plan, and provided an update on the development of this plan across the footprint.

Gill May, Executive Nurse at Swindon CCG, introduced the report and referred to the STP short guide, attached at Appendix 1 to the report, which is a public facing document setting out the purpose of the STP, highlights areas for action over the next five years, and seeks feedback from the public on those proposals.

Following the presentation of the report, and the Sustainability and Transformation Plan short guide attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- How there are no plans to close departments at the Great Western Hospital in Swindon as part of the STP proposals.
- How the consultation is going to be rolled out to seek as many views as possible across the board, and the perceived lack of consultation to date.
- How the project is moving towards the implementation phase of the Swindon approach, and how members of the public can help co-design what services will look like at stakeholder events.
- The work that will be undertaken over the next few months to ensure that a coherent and compelling message is communicated to Swindon residents about future service delivery.

- The Board noted that the report to its July meeting will contain more comprehensive information on the consultation process.

Resolved – That the content of the Sustainability and Transformation Plan short guide, attached at Appendix 1 to the report, be noted.

### **63. Healthwatch Swindon Update - Winter 2016**

The Board received a report which provided an update on the activities of Healthwatch Swindon during the period October to December 2016.

Mark Edwards, Healthwatch Swindon, introduced the report and confirmed that the Board will receive the Annual Report from Healthwatch Swindon at its next meeting in May. Mr Edwards also referred to the work plan priorities that the Healthwatch Swindon advisory group have been asked to consider for 2017/2018 which include the Sustainability and Transformation Plan, the mental health and wellbeing of young people, ageing well, and the new Community Health contract.

Following the presentation of the report, Board members discussed the survey of 500 young people commissioned by the Swindon Ten to Eighteen Project, and how Healthwatch Swindon have been working with them on the issues around the mental health of young people.

Resolved – That the report and the work completed by Healthwatch Swindon during October to December 2016 be noted.

### **64. Update on Mental Health Crisis Care Concordat**

The Board considered a report which provided an update on the Swindon Mental Health Crisis Care Concordat.

Gill May, Executive Nurse at Swindon Clinical Commissioning Group, introduced the report and reflected on how the Concordat is about supporting people in crisis, and also helping them to access support before reaching a crisis point. Ms May referred to the Crisis Care Concordat Action Plan, attached at Appendix 1 to the report, and highlighted the commitment already obtained from partner agencies to deliver the actions against the areas identified in the Plan, and the progress made to date.

Resolved – That the update provided on the Swindon Crisis Care Concordat be noted.

### **65. Joint Commissioning Group - Minutes for information and comment / Better Care Fund update**

Resolved – (1) That the minutes of the Joint Commissioning Group meetings held on 16 November 2016, 8 December 2016, 12 January 2017 and 7 February 2017 be noted.

(2) That the update provided on the Better Care Fund Quarter 3 2016-2017 data be noted.

### **66. Any Other Business**

At the invitation of the Chair, Cherry Jones, Director of Public Health at Swindon Borough Council, addressed the Board and advised that there is an opportunity for 10 areas to bid for up to £10m each from Sport England to run local delivery pilots which address physical inactivity.

Sport England has acknowledged that there is not yet a solution to achieving a population shift in activity levels and so are offering a unique experimental opportunity for a population shift approach to 10 areas across England. The purpose of the Local Pilot Fund is to create a whole system approach to tackle stubborn inequalities through reducing inactivity among the underrepresented.

Resolved – That a Swindon Expression of Interest for this Pilot be supported.