

HEALTH AND WELLBEING BOARD

WEDNESDAY, 25 OCTOBER 2017

PRESENT: Brian Mattock (Lay Member) (Chair), Councillors Brian Ford, Fionuala Foley and Ray Ballman (Swindon Borough Council), Michelle Howard and Tori Jones (Healthwatch Swindon), Dr Peter Mack (NHS Swindon Clinical Commissioning Group) (Vice-Chair), Nicki Millin (NHS Swindon Clinical Commissioning Group), David Wray (Voluntary Action Swindon) and Angus Macpherson (Police and Crime Commissioner).

Also in attendance were: Sue Wald, David Haley, Cherry Jones, Doug Bale, Simon Ratcliff, David Miles, Carey Tulloch and Claire Smith (Swindon Borough Council), Diana Fulbrook OBE (Local Safeguarding Adult Board), Alex Walters (Swindon Safeguarding Children Board) and Fiona Castle (Providers Forum).

Apologies for absence were received from: Gill May (NHS Swindon Clinical Commissioning Group) and John Gilbert (Swindon Borough Council).

22. Declarations of Interest

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

23. Minutes

Resolved – That the minutes of the meeting held on 12th July 2017 be confirmed and signed as a correct record.

24. Public Question Time

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

25. Safeguarding Adults in Swindon Annual Report 2016/2017

The Board considered a report presenting the Annual Report for Safeguarding Adults in Swindon 2016/17, which details progress against the Local Safeguarding Adults Board's (LSAB) Strategic Plan, and provides details on activity in relation to safeguarding adults.

Ms Diana Fulbrook OBE, Independent Chair of the Local Safeguarding Adults Board, introduced the report and highlighted key points contained within the Annual Report which included:

- a) That 1184 concerns were raised in this year, amounting to a 5.6% increase on the previous year;
- b) That, of these, 42% of those progressed to a safeguarding enquiry whilst 245 did not meet the criteria;
- c) That 32% of referrals came from the police and 26% from ambulance crews (with police referrals being a national problem);
- d) That there has been a significant increase in the incidences of financial abuse;

- e) The high turnover in membership of the LSAB, and;
- f) The lack of dedicated administrative support to the LSAB.

Following the presentation of the report and the Safeguarding Adults in Swindon Annual Report for 2016/2017, attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- Exploring the reasons behind the 3.82% decrease in people receiving services between 2015/16 and 2016/17.
- The ethnicity of alleged victims as demonstrated within Figure 6 in the report, and the level to which hidden problems are being addressed in vulnerable communities.
- How the quality of referrals can be improved through offering appropriate induction and training sessions in partnership organisations.
- The lack of dedicated officer support for the LSAB and how this affects what the LSAB can realistically achieve. The Board noted the current funding split for the LSAB between the Police, Clinical Commissioning Group and the Borough Council, and discussed how the support and resources for the LSAB could be increased. It was agreed that this item would be discussed at a future meeting of the Chair's Advisory Group, and that the One Swindon Board could be invited to consider this issue at a future meeting.
- The Board noted that Healthwatch Swindon are not currently obtaining feedback from those who are subject of a safeguarding concern to ascertain their experience of the process as set out in the Annual Report.
- The need to focus on different ways to tackle the reduction of referrals, particularly concentrating on reducing the number of referrals from the Police.

Resolved – (1) That the Safeguarding Adults in Swindon Annual Report for 2016-2017, attached at Appendix 1 to the report, be noted.

(2) That the Corporate Director of Adult Social Services be asked to explore equitable funding for LSAB with partners, for potential discussion at the One Swindon Board.

26. Local Safeguarding Children Board Annual Report

The Board considered a report presenting the Annual Report for the Local Safeguarding Children Board (LSCB) for 2016/2017, which details the progress made against the annual Business Plans.

Ms Alex Walters, Independent Chair of the Swindon Safeguarding Children Board, introduced the report and highlighted key points contained within the Annual Report which included:

- a) Key performance against children and young people indicators;
- b) The Swindon LSCB's scrutiny and challenge of single and multi-agency safeguarding arrangements;
- c) Learning points from the 'Section 11' audit;
- d) The LSCB role in overseeing the process for the consideration of serious and local case reviews;
- e) The LSCB role in Child Death Overview Panels, and;
- f) The LSCB priorities for 2017/2018.

Following the presentation of the report, and the Local Safeguarding Children Board

Annual Report for 2016/2017, attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- The ethnic make-up of Swindon, and the level to which hidden problems are being addressed in vulnerable communities. The Board noted that priority is being given to engagement work this year to help raise awareness within communities, and to support the Voluntary and Community Sector around their safeguarding arrangements. The LSCB Annual Conference will also be looking at how to assess and understand neglect within communities.
- The work of the Multi-Agency Safeguarding Hub (MASH), and the need to manage the significant demand on services, both now and in the future. The Board noted that concerns have already been raised about early help records and plans reducing, as if agencies do not do these then a referral ends up coming back through into MASH again. The LSCB will be re-launching work around thresholds and understanding barriers to help organisations do the early help process.
- How the National Association of LSCB Chairs (of which Mrs Walters is Vice-Chair) provides an opportunity to raise issues nationally, and to lobby on key concerns with government departments and other organisations.
- How the training needs analysis undertaken by the LSCBs Training and Development Subgroup will consider the needs for all, and not just those who responded to its request for information.

Resolved – That the Swindon Local Safeguarding Children Board Annual Report for 2016/2017, attached at Appendix 1 to the report, be noted.

27. Swindon Affordable Warmth Strategy 2017-2019

The Board considered a report which provided information on the refreshed Swindon Affordable Warmth Strategy. The report set out how Swindon Borough Council and its partners have, for a number of years, been delivering initiatives to reduce the incidence of fuel poverty in the Swindon area. The first Swindon Affordable Warmth Strategy was written in 2007, building on the work of the Wiltshire & Swindon Affordable Warmth Strategy 2002. This latest version brings the strategy up to date, providing a snapshot of the current levels and distribution of fuel poverty and describing the planned focus to help those affected over the next two years. The Board noted that the strategy covers both private sector and social housing.

Mr David Miles, Affordable Warmth Coordinator, Swindon Borough Council, introduced the report and highlighted that the refreshed Strategy has been brought in line with what is happening nationally in this area, with a focus on public and private housing.

Following the presentation of the report, and the Swindon Affordable Warmth Strategy for 2017-2019 attached at Appendix 1 to the report, Board members discussed the matters raised, including:

- The proposed establishment of a new steering group to replace the previous Swindon Affordable Warmth Partnership.
- The difficulties in addressing building issues for those who receive benefits and rent from private landlords. It was noted that whilst help can be offered to

a resident on their personal financial situation, for example with debt collection, nothing can be done to make a landlord maintain a property.

- How those in social housing are least likely to be in fuel poverty, followed by owner occupied properties, and then privately rented properties. The Board noted the difficulties in identifying where and who the worse private landlords are, especially as best practise groups tend to attract the better landlords.
- The more streamlined referral network going forward, with one point of contact for health and housing. It was hoped that more targeted work will encourage better engagement with people rather than general promotion through things like leaflet drops which have diminished returns.
- Other targeted work being done in deprived areas such as encouraging residents to sign up for rebates when events are held. Other key objectives in the Strategy include looking at fuel tariffs and rebates, and utilising limited resources in such a way as to assist the most vulnerable.
- How the Communications team at the Clinical Commissioning Group can liaise with the Affordable Warmth Coordinator on messages for winter planning, and how Patient Participation Groups across Swindon can be given information to disseminate across surgeries.

Resolved – (1) That the Swindon Affordable Warmth Strategy 2017-19, attached at Appendix 1 to the report, be approved.

(2) That Cabinet and the NHS Swindon Clinical Commissioning Group Governing Body be recommended to adopt the Swindon Affordable Warmth Strategy for 2017-19.

(3) That an update on progress against the Swindon Affordable Warmth Strategy 2017-19 will be provided to a future meeting of this Board.

28. SEND Joint Strategic Needs Assessment

The Board considered a report which provided a briefing on the Special Educational Needs and Disability (SEND) Joint Strategic Needs Assessment (JSNA). The report set out how Swindon Borough Council (SBC) and NHS Swindon Clinical Commissioning Group (CCG) are required by the Children and Families Act 2014 to have a co-ordinated and joint analysis of the data available for SEND need, services and provision available across education, health and social care for ages 0-25. The JSNA has drawn upon existing data sources to identify gaps in knowledge and data, to determine a clear picture of need across Swindon, to identify areas of concern, and current services and provision which will be used to inform the development of SEND Commissioning priorities and strategy. The Board noted that the draft SEND JSNA 2017 Bulletin, set out in Appendix 1 to the report, highlights the findings and that the full JSNA report will be available at <http://www.swindonjsna.co.uk>.

Carey Tulloch, SEND Commissioning Manager, Swindon Borough Council, introduced the report and highlighted how the JSNA has identified service gaps which targeted commissioning activity will help to reduce. Mrs Tulloch referred to some of the key messages that have arisen from the JSNA which included:

- a) Children and young people with SEND finding it more difficult to achieve their potential;
- b) The number of children and young people with Education Health and Care (EHC) Plans increasing;
- c) The number of children in care in Swindon increasing, a large majority of whom have a statement of SEN or an EHC Plan, and;

- d) The good range of services and provision for children and young people with SEND across education, health and social care in Swindon.

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

- That 29.8% of children and young people on EHC Plans have autism, not 29.8% of the whole school population.
- How officers are looking closely at commissioning support and working with colleges and providers to offer things like supported internships to young people with autism to help them transition into adulthood and mainstream employment.
- The importance placed on colleagues from across SBC and the CCG working together on commissioning and / or decommissioning specialist provision and services in Swindon to meet the needs of children and young people with SEND and improve their outcomes.

Resolved – That the recommendations set out in the JSNA 2017 Bulletin be noted and approved, and that progress towards implementing the SEND commissioning strategy to deliver better outcomes for children and young people in Swindon with SEND be monitored.

29. Carers Joint Strategic Needs Assessment

The Board considered a report setting out the recommendations of the Carers Joint Strategic Needs Assessment (JSNA). The report set out how, at the 2011 Census, 19,140 people in Swindon (9.4%) reported they were providing some level of unpaid care, an increase of 23.7% compared to the 2001 Census. Carers UK estimate that in 2015 this figure had increased to 21,006, an increase of 33.6% since 2001. The report also set out how understanding the needs of Carers in Swindon, via a Carers JSNA, gives a local context to the issues faced by carers, and also informs a whole range of Swindon Borough Council and partner provision, policies and strategies, including the development of a Carers Strategy and the NHS Memorandum of Understanding.

Claire Smith, Commissioning Manager – Voluntary and Third Sector, Swindon Borough Council, introduced the report and highlighted how carers are a diverse group of people who make a significant contribution to the health and care system, valued at around £4m a year. Ms Smith advised that the 33% increase from 2011 to 2015 in the number of carers in Swindon is well above the national average, with the number being projected at around 26,000 carers by 2030, and that the health and wellbeing of older carers is of particular concern. The Board noted the recommendations that had arisen from the JSNA, which were set out in the Bulletin attached at Appendix 1 to the report.

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

- The distinction between young carers looking after adults and those looking after siblings, and how the support offered to both is assessed to determine what kind of service they are entitled to.

- The huge amount of work done with schools to help with capacity issues in the carers centre.
- The low number of schools in Swindon which have young carer awards, and how the Head of Education Services will be asked to raise this as an issue at the meetings he attends with schools.
- The emergency cards provided to carers which assists paramedics or hospital staff in determining if there is a person requiring care at home.
- How the Carers Register does not appear to encourage people to be registered, and the need for a working group and action plan to encourage more joined up working and pick up issues such as this.
- The Diversity Impact Assessment done on this issue which will be circulated to members subsequent to the meeting.
- Swindon being above the national target on Carers Assessments (around 74%).

Resolved – That the recommendations identified in the Carers JSNA Bulletin, attached at Appendix 1 to the report, be noted and approved.

30. Better Care Fund 2017-2019

The Board considered a report providing an update on the Better Care Fund Plan (BCF) 2017/19 which was submitted to NHS England on 11th September 2017 for approval. The report set out how the plan has been assured by the Regional Better Care Fund Manager, and how the Better Care Fund provides financial support for the closer integration of health and social care. The Board noted that the BCF Financial Plan was set out in Appendix 1 (funding sources, expenditure, BCF metrics and national conditions); the Swindon BCF Narrative Plan 2017/19 was set out in Appendix 2; the Delayed Transfers Of Care (DTOC) Plan (including the High Impact Change Self-Assessment) was set out in Appendix 3, and; the Adults with Needs Emerging Market Position Statement 2017-2022 was set out within Appendix 4.

Mrs Sue Wald, Director of Adult Services, Swindon Borough Council, introduced the report and confirmed that the initial submission from Swindon had not been accepted due to queries over the discharge figures. The Board noted that these figures had been revised, and the second submission approved.

Mrs Wald referred to a joint letter sent to Swindon Borough Council from the Secretaries of State for Health and Communities and Local Government on Swindon's social care performance in relation to DTOC. The Board noted that the 2016/17 figures for delayed discharges in Swindon had been higher than the national average, but that concerns have been raised for the current year leading to the joint letter mentioned above. A further assessment on DTOC performance in Swindon will be undertaken using the data from September 2017, and a Care Quality Commission inspection may be triggered as a result.

Mrs Wald gave a presentation on the latest figures for DTOC (a hand out for which was circulated at the meeting) which will also be considered by the A&E Board and the relevant Overview and Scrutiny Committee. Mrs Wald highlighted that the South West is the worst region nationally for 'bed blocking' and has had challenges in the domiciliary care market in the area. The Board noted that the DTOC figures for Swindon have dropped considerably since its peak in July 2017, and noted what the next steps will be to further improve the situation.

Following the presentation, and consideration of the BCF submission as set out in Appendix 1 – 4 of the report, Board members discussed the matters raised, including:

- The removal of the social workers from the hospital wards prior to August, which had increased the number of days it took to move people in to residential care. The service has now been reinstated on the wards and workers are helping to ensure that people are better assessed and not just passed straight through to nursing care.
- The reduction in the DTOC figures in Swindon since these issues were first considered by the Secretaries of State, and the hope that this reduction will be taken into consideration when assessing the September 2017 data.
- The pressures faced by staff at the Great Western Hospital (GWH) when dealing with delayed transfers, and the importance of partners working together effectively during the winter period.
- How GWH aims to release elderly patients early enough so they can arrive home at lunch time, and the challenges faced by patients should this not be the case. It was noted that Healthwatch Swindon can monitor this.

Resolved – (1) That the Better Care Fund Submission for 2017/19, attached at Appendix 1 – 4 to the report, be noted.

(2) That the update on the latest position with regards to Delayed Transfer of Care be noted.

31. Joint Commissioning Group - Minutes for information and comment

Ms Tori Jones, Team Manager at Healthwatch Swindon, referred to Item 6 (Voluntary Sector) of the minutes of the Joint Commissioning Group held on 29th June 2017 which indicate that Healthwatch has a children's participation contract which will be reviewed for re-commissioning in the autumn. The Board noted that Healthwatch does not have a children's participation contract, and it's contract is being re-commissioned in 2019.

Councillor Ray Ballman referred to Item 4 (Learning Disability Partnership Board) of the minutes of the Joint Commissioning Group held on 25th July 2017 and queried what is happening with the Autism Board. The Board noted that there had been difficulty in getting people to attend meetings of the Autism Board, and it had been referred back to the Clinical Commissioning Group for further review.

Resolved – That the minutes of the Joint Commissioning Group meetings held on 29th June, 25th July, 31st August and 18th September 2017 be noted.

32. Health and Wellbeing Board Terms of Reference

The Chair referred to a request from John Gilbert, Chief Executive of Swindon Borough Council, to consider whether there is overlap and duplication between this Board and the One Swindon Board. This had been raised as an issue at a recent One Swindon Board meeting and the possibility of amalgamation had been suggested. Members were invited to submit comments to the Clerk subsequent to the meeting to be forwarded to the Chief Executive.

Cherry Jones, Director of Public Health, referred to the Board's statutory duty to publish a revised Swindon Pharmaceutical Needs Assessment (PNA) by 1st April 2018. Mrs Jones highlighted how a draft PNA has been written in conjunction with stakeholders, agreed by the Joint Strategic Needs Assessment Steering Group, and now requires sign off from the Board to go forward for further consultation. The draft PNA must be consulted on for a minimum period of 60 days (from early November 2017 to early January 2018) before the final version is agreed by this Board. Members were asked to approve the draft version of the PNA by email to enable the commencement of the consultation phase.

Mrs Jones confirmed that Swindon will need to consult with all the neighbouring Health and Wellbeing Board areas, and in turn they are obliged to consult with Swindon. The five questions set out below were used to assess neighbouring PNAs in 2014/15, and it is suggested that this framework be used again with delegated authority being given to Mrs Jones as the Director of Public Health to respond on the Board's behalf.

- Does the neighbouring area provide pharmaceutical services (pharmacy or dispensing GP) to a significant number of Swindon residents?
- If so, are these adequate in terms of number, opening hours and services offered? Have these been noted in the PNA?
- Do a significant number of residents from the neighbouring area use Swindon pharmaceutical services? If so, what is the impact?
- Are there plans for significant house building or other relevant developments close to the Swindon boundary? What impact may these have in the future?
- Has the neighbouring PNA identified any gaps in provision that are relevant to Swindon?

Resolved – (1) That initial comments on the draft version of the Swindon PNA be sought from members of the Board via email prior to the commencement of the public consultation phase in November 2017.

(2) That the Director of Public Health be authorised to respond to PNA consultation requests submitted by neighbouring local authorities using the framework as identified above.

The Chair referred to the current version of the Board's Work Programme, which had been circulated at the meeting, and requested that amendments or additions be submitted to the Clerk subsequent to the meeting.

The Chair referred to the Chair's Advisory Group meeting taking place on 15th November 2017 at the Clinical Commissioning Group office. This will be a joint meeting with the Providers Forum to discuss the development of the accountable care system, which is a recurring agenda item at the Board meetings.