

HEALTH AND WELLBEING BOARD

WEDNESDAY, 21 OCTOBER 2015

PRESENT:- Councillors David Renard (Chair), Brian Mattock, Fionuala Foley and Ray Ballman (Swindon Borough Council), Iain Watts (Healthwatch Swindon), Nicki Millin (NHS Swindon Clinical Commissioning Group), Dr Peter Crouch (Vice-Chair) (NHS Swindon Clinical Commissioning Group), Gill May (NHS Swindon Clinical Commissioning Group), Dave Potts (Third Sector), Angus Macpherson (Police and Crime Commissioner), Gavin Jones (Chief Executive, Swindon Borough Council), Cherry Jones (Director of Public Health, Swindon Borough Council) and John Gilbert (Board Director – Commissioning, Swindon Borough Council).

Also in attendance were: Thomas Kearney (NHS Swindon Clinical Commissioning Group), Alex Walters (Chair – Local Safeguarding Children Board), Pete Rowe (Healthwatch Swindon), Victoria Guillaume (Swindon Borough Council), Doug Bale (Swindon Borough Council), and Sue Wald (Swindon Borough Council).

An apology for absence was received from Debra Elliott (NHS England).

20. 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.

21. Public Question Time

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

22. Minutes

Resolved – That the minutes of the meeting held on 8 July 2015 be confirmed as a correct record.

23. Safeguarding Adults at Risk in Swindon and Local Safeguarding Children Board Annual Reports

The Board received a report presenting the 2014/2015 Annual Reports for Safeguarding Adults in Swindon and the Local Safeguarding Children Board (LSCB). The Annual Reports detail progress against the annual Business Plan for the LSCB and the Local Safeguarding Adults Board (LSAB) Strategy.

With the agreement of the Chair, the Board first considered the Safeguarding Adults in Swindon Annual Report 2014/15 (attached at Appendix 1 to the report) which is the Annual Report from the Swindon LSAB. Doug Bale, Adult Safeguarding Manager, introduced this section of the report and highlighted the new statutory responsibility placed upon LSABs to produce an annual report. The definition of those who are to be supported by safeguarding procedures and need to be the focus of the LSAB has also changed. The Board noted that referrals received have gone up and that Swindon is reflecting national trends and the higher profile of safeguarding. The LSAB also has a new Chair, Diana Fulbrook, who was unfortunately unable to

attend this meeting.

Following the presentation of the Safeguarding Adults in Swindon Annual Report for 2014/15, Board members asked questions and made observations on the following issues:

- The challenge of resourcing the Board (which currently has no budget) as it has to fund case reviews which is a new requirement under the Care Act 2014. The Board agreed to recommend to the One Swindon Board that they consider a proposal to fund the LSAB with its new statutory functions.

The Board then considered the LSCB Annual Report for 2014/15 as attached at Appendix 2 to the report. Alex Walters, the new Chair of the LSCB, introduced the report and highlighted how the LSCB is successfully co-ordinating the arrangements of all partners in relation to safeguarding, and ensuring the effectiveness of those arrangements. The data being received is more robust than ever, and there is a transparent analysis of how well agencies are working together to safeguarding children and young people.

Following the presentation of the LSCB Annual Report for 2014/15, Board members asked questions and made observations on the following issues:

- The involvement of secondary schools at LSCB meetings.
- The Board wished to acknowledge its thanks to Mr Mike Howard, the previous Chair of both the LSCB and LSAB, for his contribution to safeguarding in Swindon through the years of his tenure.
- The increase in activity and referral rates in to social care, with more assessments being completed and more children on child protection plans.
- The Police and Crime Commissioner working with the Youth Parliament on the lessons being learnt by children at school on these issues.
- The challenge of dealing with safeguarding issues in relation to academy schools, and the involvement of the Regional Schools Commissioner.
- Plans within the NHS Swindon Clinical Commissioning Group to demonstrate that safeguarding concerns are taken into account within their commissioning activity.

Resolved – (1) To note the Annual Reports for 2014/15 for Safeguarding Adults and the Swindon Local Safeguarding Children Board.

(2) To recommend to the One Swindon Board that they consider a proposal to begin funding the Local Safeguarding Adults Board in view of its new statutory responsibilities under the Care Act 2014.

24. Children and Young People Mental Health Joint Strategic Needs Assessment and Transformation Plan

The Board considered a report regarding the Children and Young People's Mental Health and Wellbeing Joint Strategic Needs Assessment (JSNA) which outlines the national strategies and guidance on children and young people's mental health, current services and performance in Swindon. The JSNA Bulletin attached at Appendix 1 to the report also contains the views of children and young people, the recommendations for the future direction of service delivery and commissioning, and will inform the Children and Young People's Mental Health Strategy. The JSNA

has also informed the Transformation Plan for Swindon, the bid for which is attached as Appendix 2 to the report.

Frances Mayes, Senior Public Health Manager, introduced the report and noted that the mental health JSNA focuses on the needs of children and young people from 5 – 18 years but also includes transition to adult services up to the age of 25. It profiles activities with services, has sought the views of users, and has reviewed mental health provision within schools in Swindon. The JSNA has also looked at the provision of care against the Mental Health Crisis Care Concordat. A suite of recommendations have been produced which the Board is being asked to note. The Board also noted that the Transformation Plan bid attached at Appendix 2 aims to promote resilience and good mental health, whilst also improving capacity and reducing waiting times.

Following the presentation of the report, the JSNA Bulletin and the Transformation Plan bid, Board members asked questions and made observations on the following issues:

- The hospital admissions for self harm for 15 – 24 year olds in Swindon and the representation of those figures in terms of repeat attendances.
- Engagement with the Youth Parliament who also have mental health on their agenda.
- Potential additional resources that may be required to fulfil the recommendations contained within the JSNA Bulletin.
- The opportunities for Healthwatch Swindon to be involved in engaging with young people on the transformation plan.

Resolved – (1) To note the recommendations from the Children and Young People's Mental Health and Wellbeing Joint Strategic Needs Assessment Bulletin.

(2) To support the development of a Children and Young People's Mental Health Strategy and action plan for Swindon.

(3) To note the Transformation Plan bid attached at Appendix 2 to the report.

25. Children and Young People with Complex and Life Limiting Conditions Joint Strategic Needs Assessment

The Board considered a report on the findings of the Children and Young People with Complex and Life Limiting Conditions Joint Strategic Needs Assessment (JSNA) which looks at available local and national data to describe the current picture with regard to Swindon. The report contained a summary of the estimated numbers of children affected in Swindon, information about the support and services available, and the experiences of children and young people living with complex and life limiting conditions in Swindon. The findings from the JSNA inform a suite of recommendations that aim to support these children and young people, with a steering group being established to develop the action plan and oversee delivery against these recommendations.

Cherry Jones, Director of Public Health, introduced the report and advised the Board that this area is one of five sub-headings being looked at by the JSNA process under the key heading of 'disabilities'. The JSNAs contribute to an ongoing organic process looking at available data and information to get a picture of the services and support on offer in Swindon. This particular JSNA has resulted in 16

recommendations which the Board is being asked to approve.

Following the presentation of the report and the Children and Young People with Complex and Life Limiting Conditions JSNA Bulletin attached at Appendix 1, Board members asked questions and made observations on the following issues:

- Duplication of mainstream work within the action plan, and the areas of work to be looked at by the steering group once it has been established.
- Prospect Hospice has an agreement in place to provide urgent support where required for a child and their family.
- The opportunities for parents and carers to help develop the steering group.

Resolved – To note and agree the recommendations from the Children and Young People with Complex and Life Limiting Conditions Joint Strategic Needs Assessment Bulletin.

26. Troubled Families

The Board received a report setting out the achievements and learning from Phase 1 of the Troubled Families Programme, and outlining the requirements of Swindon Borough Council and its partners for Phase 2 of the Programme. The Board noted that the draft outcome plan for 2015 – 2020 was attached at Appendix 1 to the report.

Sue Wald, Head of Commissioning for Children and Adults, introduced the report and highlighted that most families under Phase 1 have been claimed for, and that more families were identified than originally planned. The criteria for identifying families has been widened under Phase 2 and other agencies will be required to start referring families such as housing services for example.

Following the presentation of the report and the draft outcome plan for 2015 – 2020 attached at the appendix, Board members asked questions and made observations on the following issues:

- The Board noted that work is being undertaken to identify how voluntary and community sector groups can get involved with the Troubled Families Programme based against the Phase 2 criteria.
- The next stage of the Programme currently being discussed within the Home Office, and the opportunities to begin working with individuals such as rough sleepers as well as families.
- Data sharing amongst organisations and how this can be improved.

Resolved – (1) To note the contents of the report regarding the shape and delivery of Phase 2 of the Troubled Families Programme.

(2) To note partner organisation's existing contributions to Phase 2 of the Troubled Families Programme.

(3) To note the Outcome Plan 2015 – 2020.

27. Update on review of community health and social care services

The Board received this report regarding the contract with SEQOL for community health and social care services which comes to an end in March 2016. The report

sets out how the contract is already on a 12 month rolling notice period, and how the Council and Swindon Clinical Commissioning Group (CCG) have undertaken a range of consultation and soft market testing events.

Sue Wald, Head of Commissioning for Children and Adults, introduced the report and provided an update on the process undertaken to engage with providers, members of the public, patients, and the public sector on community health and social care services in Swindon. The next steps for the approach as set out in Appendix 1 to the report were also highlighted.

Nicki Millin, Accountable Officer at the CCG, provided more information to the Board on the soft market testing that has taken place, and indicated there is no evidence so far to show that there is a strong market. Events are also being run which ask members of the public to detail what their experiences have been, and where they feel the systems need support, changing or strengthening. The Board noted that an options paper will be taken to the CCG in November, and to Swindon Borough Council in December.

Resolved – To note the report and agree to receive a further update once the information from the soft market testing has been analysed.

28. Joint Commissioning Group - Minutes for information and comment

The Board noted the minutes of the Joint Commissioning Group meetings held on 2 June, 8 July, 4 August and 1 September 2015. The Group have been looking at delayed discharges and the number of corrective actions taken amongst other issues.

Board members made the following comments and observations:

- Issues and pressures across the whole South West that are being discussed at sector-led groups, and agencies taking ownership to resolve them.
- Problems with consistency, procedures and practices when it comes to managing discharges.

Resolved – To note the minutes of the Joint Commissioning Group meetings held on 2 June, 8 July, 4 August and 1 September 2015.

29. Healthy New Towns Programme - expression of interest

The Board received a report regarding NHS proposals to establish up to five ambitious, long-term partnerships with local areas through which to develop healthier neighbourhoods and towns. They have launched a Healthy New Towns initiative and invited areas to put forward expressions of interest in the scheme. Swindon has submitted an application proposing the New Eastern Villages development, led by Swindon Borough Council with support from NHS Swindon Clinical Commissioning Group, Great Western Hospitals NHS Trust, SEQOL, and Swindon and Wiltshire Local Enterprise Partnership.

Resolved – To approve the Swindon Expression of Interest submission attached at Appendix 1 to the report.

30.

Any Other Business

Gavin Jones, Chief Executive of Swindon Borough Council, advised members of the Board that he had received a letter from Duncan Selbie, Chief Executive of Public Health England, regarding Winter preparedness and the health system.

Resolved – That the letter from Duncan Selbie, Chief Executive of Public Health England, would be circulated to all Board members following the meeting to ensure salient points can be taken away and developed.