

HEALTH AND WELLBEING BOARD

WEDNESDAY, 9 MARCH 2016

PRESENT:- Councillors David Renard (Chair), Brian Mattock, Fionuala Foley, Ray Ballman, Crouch (Vice-Chair), May and Angus Macpherson

Also in attendance were: John Gilbert (Chief Executive, Swindon Borough Council), Cherry Jones (Director of Public Health, Swindon Borough Council), Sue Wald (Interim Director of Adult Social Services, Swindon Borough Council), Tom Frost (Swindon Borough Council) and Mike Ash (Swindon Borough Council).

Apologies for absence were received from: Nicki Millin (NHS Swindon Clinical Commissioning Group) and Debra Elliott (NHS England).

44. Declarations of Interest

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

45. Public Question Time

At the invitation of the Chair, Ms Hayley Jackson submitted questions to the Board on behalf of a group of parents whose children are on the Autistic spectrum or who are awaiting diagnosis. The questions were regarding: what the Board will do to make sure these children's learning and medical needs are met and the diagnosis service developed to see children at the earliest point possible; how the Board will develop services that will address these issues; if the Board will consider using other professionals within Swindon to do diagnosis and enable these to be recognised as viable routes to services within the town; and if the commissioners will meet representatives of the parents to discuss this further.

The Chair thanked Ms Jackson for her submission and invited the NHS Swindon Clinical Commissioning Group (CCG) to respond.

Gill May, Executive Nurse at the CCG, confirmed that these issues have been identified as concerns. Terms of Reference have been drafted to undertake a full review of children's services and this area has been identified as the first priority area within that review. The Terms of Reference can be circulated upon request, and the CCG will welcome their input on how parents and children can be involved with the review.

The following matters were raised by Board members during discussion:

- The acceptable waiting time as identified within the CCG Constitution, and how to reduce waiting times whilst ensuring that assessments are still comprehensively done.
- Representations made by members of the public to the two Swindon MPs regarding waiting times, and the request from the MPs for a briefing with the CCG to help resolve concerns.

46.

Minutes

Resolved – That the minutes of the meeting held on 9 December 2015 be confirmed as a correct record.

47.

Indices of Deprivation 2015

The Board considered a report providing a summary of the Indices of Deprivation 2015, focusing on data and results for the Swindon Health and Wellbeing Board area. Approval is required from the Board to make a suite of reports, data and analyses available on the Joint Strategic Needs Assessment (JSNA) website. Using this data, the Council and its Partners will also be able to understand communities better, target resources, plan and monitor services, and understand the relationship between deprivation, behaviour, service utilisation and outcomes.

Tom Frost, Senior Public Health Intelligence Analyst at Swindon Borough Council, introduced the report. It was noted that the pockets of severe deprivation across Swindon have not really changed over the last 15 years and that the results from the data produced by the Department for Communities and Local Government for 2015 showed that the focus in Swindon had been on the right areas, and also where there was more to do in the future.

Following the presentation of the report, Board members discussed the matters raised, including:

- Ways of making the information available to members of the public in a format that was easy to understand and interpret.
- The lessons learnt from interpreting changes over time, and identifying ways to address subsequent issues.
- Ways to utilise the data at locality level to generate interest and momentum by highlighting ward issues.
- Using the data to inform community discussions to help improve local areas.
- The level of detail currently available within the data, and future plans for analysis of the data to identify issues and problems.
- The potential for analysing specific gradients of deprivation in an area.

Resolved – (1) That the contents and main findings of the summary report attached at Appendix 1 to the report and the other associated reports and resources be noted.

(2) That the report and its findings as the preferred evidence base for measuring and understanding area deprivation in Swindon be adopted.

(3) That the reports, data and analyses through publication on the Joint Strategic Needs Assessment website be promoted.

(4) That the dissemination of ward 'packs' to staff and members working at a local level be approved.

48.

Joint Strategic Needs Assessment Summary 2015-2016

The Board considered a report regarding its 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 Health and Wellbeing Strategy. The Swindon

JSNA is an iterative process led by Swindon Borough Council's public health team and involving a wide range of stakeholders. The JSNA also informs decisions about how services are commissioned and designed.

Tom Frost, Public Health Senior Information Analyst at Swindon Borough Council, introduced the report and noted that the 2015/16 JSNA Summary, attached at Appendix 1 to the report, provides an overview of the current and future health and wellbeing needs of people in Swindon and provides an update to the 2014/15 JSNA Summary published in January 2015. It collates evidence and intelligence from previous JSNA topic reports, the Public Health Outcomes Framework, and a range of other local and national data sources. He confirmed that an additional page for equalities has been included, and that attempts have been made to ensure the data is more accessible for general readership.

Following the presentation of the report and the JSNA Summary in Appendix 1, Board members discussed the matters raised, including:

- The challenges identified as a result of the process such as addressing obesity amongst 11 year olds, or inequalities in the life expectancy of men from differing social backgrounds, and the need to focus resources on key areas.
- The work with MOSAIC data and Newton Europe, and the need to use targeted communication with different members of the public to help drive changes in their behaviours.

It was agreed that the App for the current Public Health England 'One You' campaign aimed at 40 – 60 year olds would be publicised in the Member's Bulletin.

Resolved – (1) That the Joint Strategic Needs Assessment Summary report for 2015-2016 attached as Appendix 1 to the report be noted.

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

49. Children and Young People - Best Start Joint Strategic Needs Assessment

The Board considered a report regarding the findings of the Children and Young People Best Start Joint Strategic Needs Assessment (JSNA) which looks at available local and national data to describe the current picture with regard to Children and Young People and early years (0 – 4 year olds) in Swindon. The JSNA is part of a suite of documents to understand the needs of children and young people in Swindon, and the Bulletin attached at Appendix 1 to the report provides a brief summary of the full JSNA which is a comprehensive and detailed analysis of all aspects of the first five years of a child's life and the influences on this.

Cherry Jones, Director of Public Health at Swindon Borough Council, introduced the report. The full JSNA document is around 300 pages and there are some data protection issues which may affect its ability to go into the public domain. Partner organisations can request access to the information if they would find it useful however. The Board noted that some service changes may be required to fulfil the population needs in Swindon because of the number of births. Focus groups have also been held with service users and providers which helped identify some high impact areas. The JSNA has also identified 19 specific recommendations under

these six early years high impact areas, as set out in the report. A multi-agency forum will be established and tasked with monitoring these.

Following the presentation of the report, Board members discussed the matters raised, including:

- The usefulness of the full 300 page JSNA as a resource for professionals to dip into.
- The Council recently recruiting to a Strategy and Development post, and how this post will be creating the scope for the early help strategy which is broader than just under five year olds.
- Historical service changes being used as a good baseline from which to identify progress.

Resolved – That the recommendations identified in the Children and Young People Best Start Joint Strategic Needs Assessment attached as Appendix 1 to the report be noted and agreed.

50. Swindon and Wiltshire Strategy to reduce Domestic Abuse 2015-2017

The Board considered a report regarding the 2015 – 2017 Swindon and Wiltshire Strategy to reduce Domestic Abuse, and how the Swindon and Wiltshire Community Safety Partnerships are committed to reducing the prevalence and impact of domestic abuse in local communities.

Mike Ash, Head of Housing and Community Safety at Swindon Borough Council, introduced the report. He noted that they are seeing a 45% return of people who have been in a multi-agency risk assessment conference before, and that five priorities have been identified within the Strategy to tackle domestic abuse. Ways of working with perpetrators are also being looked at.

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

- Going forward, tackling domestic abuse is a focus within the Chief Inspectors plans for the Police.
- The future funding of the Independent Domestic Violence Advisor who works in surgeries and at the hospital with victims of abuse. It was agreed that a report on this work will be presented to the May meeting of this Board.
- The difficulties of managing domestic abuse situations where reporting can sometimes make the issue worse.
- The pressures of demand on the service areas involved and the importance of partner organisations to work together and share information.
- The announcement by the Home Secretary regarding £18m of funding being available to help tackle domestic abuse.
- The rise in child to parent abuse, and the need to raise awareness amongst specialists to help identify possible cases of abuse.
- The importance of and benefits from utilising the learning points from previous incidents.
- The widening access to personal and sensitive information through electronic access to healthcare records and the potential for this to be abused.

Resolved – (1) That the 2015 – 2017 Swindon and Wiltshire Strategy to reduce Domestic Abuse be approved.

(2) That the NHS Swindon Clinical Commissioning Group be recommended to adopt this strategy which was adopted by Swindon Borough Council Cabinet on 9 December 2015.

51. Swindon Clinical Commissioning Group Operational Planning 2016/17 - 2020/21

The Board considered a report regarding Phase 1 of the NHS Swindon Clinical Commissioning Group (CCG) transformational agenda for 2016 – 2021 and the steps required to deliver the Five Year Forward View Vision.

Dr Peter Crouch, Clinical Chair at NHS Swindon CCG, introduced the report. He noted that the CCG is considering three elements as part of this phase:

- the review of the existing community services provider model in Swindon which is currently provided by SEQOL, considering the national and local context;
- a consideration of primary care at scale, and;
- the impact of new models on commissioning functions.

The Board noted that the CCG is testing new models at workshops it is currently holding, with a view to creating a new accountable care organisation. Proposals will then be consulted upon from April through to June. The CCG recognise that the current way of procuring will not be suitable in the future and will be looking at how community services are provided. He confirmed that the biggest changes will be within the originating organisation, such as only having one electronic record for patients, one contract for HR functions, changes to the way services are procured and delivered and other types of efficiencies.

The Board also noted that the footprints for the Sustainability and Transformation Plans have been decided nationally and that Swindon is now grouped with Bath and North East Somerset and Wiltshire. This will not be a merger, and any plans will have to be signed off by each of the three Health and Wellbeing Boards involved.

Following the presentation of the report, Board members discussed the matters raised, including:

- Gloucester being grouped with Worcester to better recognise patient flows.
- The appointment of the Chief Executive from the Royal United Hospital to lead on planning the footprint.
- The content of the letter received from the Chair of the Wiltshire Health and Wellbeing Board regarding opportunities for the three Boards to work more closely together.

Resolved – That the progress made to date on the development of the Operational Plan for 2016/17 and the Sustainability and Transformation Plan for 2016-2021 be noted.

52. Transforming Care Partnership Service Model Plan

The Board considered a report regarding the proposed plans for Swindon, working with Wiltshire to implement the changes required as stated within the Transforming Care programme. As part of the governance requirements prior to final submission to NHS England, the plan must be shared and signed off by the Health and Wellbeing Board.

Gill May, Executive Nurse at NHS Swindon Clinical Commissioning Group, introduced the report. She noted that Swindon is acknowledged as best practise on how to deal with these issues. The Board noted the 9 Core Principles set out in the National Service Model Plan upon which the delivery plan has been based, and it was confirmed that the plan had been presented to NHS England for initial comments.

Following the presentation of the report, Board members discussed the clarification required within the plan on the population figures of both Wiltshire and Swindon, which appear to be logged in different ways.

Resolved – (1) That the Swindon elements of the plan be noted.

(2) That an update on the implementation progress be submitted to the Board meeting in October 2016.

53. Better Care Fund

The Board considered a report regarding the detailed policy framework for the implementation of the Better Care Fund (BCF) in 2016/17 which has been published by the Department of Health and Department for Communities and Local Government. The Better Care Fund provides financial support for the closer integration of health and social care, and the Government requires that the BCF Plan 2016/17 is considered by this Board.

Sue Wald, Interim Director of Adult Social Services at Swindon Borough Council, introduced the report and noted that only one week had been given for a response to be produced. The main changes since the last submission have been set out in the report, and the Board noted that the detailed financial information had been submitted on 2 March. The Narrative Plan has to be submitted by 21 March 2016 and this will be circulated electronically to Board members prior to submission.

Following the presentation of the report, Board members discussed how advanced the BCF negotiations are of the authorities within the new proposed CCG grouping, and the potential impact this may have on working together.

Resolved – (1) That the Better Care Fund Financial Information 2016/17 as submitted on 2 March 2016 (attached at Appendix 1 to the report), and the draft Narrative Plan to be submitted by 21 March 2016, be endorsed.

(2) That the proposed capital expenditure to support the Better Care Fund be agreed.

54. Healthwatch Swindon Retender Update

The Board considered a report regarding the recent procurement for the Healthwatch Swindon contract. The Health and Social Care Act 2012 stated that

local Healthwatch providers be established from 1 April 2013. Local Healthwatch providers are independent bodies, able to employ their own staff and involve volunteers, to become the influential and effective voice of the public. They act as an independent consumer champion for both health and social care. The current contract with Parkwood expires on 31 March 2016 and from 1 April 2016 the new provider for Healthwatch Swindon will be The Care Forum.

Cherry Jones, Director of Public Health at Swindon Borough Council, introduced the report and noted that the Annual Report is still expected to be produced by Parkwood. The Care Forum has written to volunteers and have explained how they work differently at Director level, and how they will ask their volunteers to help direct the healthwatch agenda.

Following the presentation of the report, Board members discussed the opportunities for the different Healthwatch organisations to work together across boundaries.

Resolved – That the report and the appointment of The Care Forum as the Healthwatch Swindon provider from 1 April 2016 be noted.

55. Joint Commissioning Group - Minutes for information and comment

The Board noted the minutes of the Joint Commissioning Group meetings held on 1 December 2015 and 5 January 2016. The Group have been looking at delayed discharges, available capacity within the system, and dementia amongst other issues.

Resolved – That the minutes of the Joint Commissioning Group meetings held on 1 December 2015 and 5 January 2016 be noted.