

## **HEALTH AND WELLBEING BOARD**

**WEDNESDAY, 7 MAY 2014**

PRESENT: Councillors Brian Mattock, Ray Ballman and David Renard (Chair), Gavin Jones (Chief Executive, Swindon Borough Council), John Gilbert (Director of Adult Social Care and Children's Services, Swindon Borough Council), Cherry Jones (Acting Director of Public Health, Swindon Borough Council), Ben Curtis (Healthwatch Swindon), Dr Peter Crouch (NHS Swindon Clinical Commissioning Group Clinical Chair and Vice-Chair), Ian Biggs (NHS England), Angus Macpherson (Police and Crime Commissioner), David Wray (Third Sector representative), Paul Bearman (NHS Swindon Clinical Commissioning Group Executive Director of Commissioning), Amanda Castellino (Swindon Borough Council) and Sarah Weld (Swindon Borough Council).

Also in attendance were: Councillors Wayne Crabbe, Bob Wright and Julie Wright.

Apologies for absence were received from: Tony Ranzetta (NHS Swindon Clinical Commissioning Group Accountable Officer), and Jennifer Howells (NHS England).

### **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. Public Question Time**

No public questions were received during the meeting.

### **55. Minutes**

Resolved – That the minutes of the meeting held on 12 March 2014 be accepted as a correct record.

### **56. Population Projections**

The Board considered this late report, presented by Amanda Castellino, Policy and Research Officer, which provided an overview of the population projections work undertaken by the Strategy and Research Team, including methodology and results. The Board received a presentation from Ms Castellino in support of the report, and were asked to note that their approval was required to release the projections for use by the Council and its partners for the purpose of forward planning.

The Board welcomed the report and presentation and discussed the following issues:

- It was agreed that members would be sent information on Swindon's figures compared to the UK average, the South West and a statistical neighbour where this information is available. These figures are based on policy projections, but trend projections can be compared.

- Migration by age information is helpful for service planning purposes. A more detailed briefing session on the data and findings is being held on 29 May 2014 which members are welcome to attend.
- It was queried what level of accuracy is expected on these figures. It was noted that the figures are based on Office for National Statistic (ONS) estimates of births, deaths and migrations, and they have done detailed work on the levels of certainty around their estimates.
- It was noted that an analysis of the most recent census information is not part of the projections work. The increase in Black and Minority Ethnic groups is picked up in other work such as the Joint Strategic Needs Assessment (JSNA) process.
- Uncertainty was raised over the predicted population growth as it has risen steadily over the last four decades. The death rate is also declining, and people move to Swindon as the house prices are cheaper and they can easily commute to other places like Bristol and London. It was noted that these projections are anticipated to be higher than ONS trend-based projections due to be published at the end of May because they have factored in housing growth and this increases migration. More analysis of this will be done when ONS projections for Swindon are published.
- It will be important to understand how each of the age groups will affect public sector spending in the future.

Resolved – (1) To adopt the projections as the best fit for Swindon until such time as they are updated, subject to final testing of the results against ONS sub-national trend-based projections due to be published at the end of May 2014.

(2) To promote the projections through publication on the JSNA section of the Council's website.

(3) To agree the production of more locally sensitive policy-based projections for Swindon, based on the ONS producing a set of trend-based projections at sub-national level every two years.

## **57. NHS England Area Team Commissioning Plan 2014/15 - 2015/16**

The Board considered this report, presented by Ian Biggs, NHS England, on the draft delivery plan which sets out the strategic framework for the development of commissioned health services in the Bath, Gloucestershire, Swindon and Wiltshire area.

The Board noted that the plan sits alongside the Clinical Commissioning Group (CCG) Strategic Plan, and the Council's plans and services, and aims to tailor services to local need and improve outcomes for patients. Mr Biggs referred to the national challenges for the NHS, the five main categories of better outcomes that are expected within the health service, and their agreed priorities on general practice services. With regards to public health, there will be a focus on vaccination take-ups, the numbers of screenings and the expansion of programmes. There will also be on-going consultations on specialist services. Members are invited to submit comments on the draft plan up till the final submission date of 20 June 2014.

The Board welcomed the report and discussed the following issues:

- It was noted that the focus on Mental Health Crisis Concordat as agreed at the last meeting of the Board is not reflected within the draft plan.

- It was noted that the Police should be included as a partner in conversations on vulnerable people.
- It was noted that the sexual assault services as referred to on page 26 of the draft plan should be broadened to Sexual Assault Referral Centres.
- It was noted that the Police and Crime Commissioner should be listed under paragraph 6.15 of the draft plan, not the Wiltshire Police, and that the Commissioner should also be listed under paragraph 8.6 of the draft plan.
- It was queried how transformational the draft plan is, and how they will achieve financial balance whilst addressing health needs. It was noted that NHS England is linking in to the CCG on a local level which will ensure transformation. Both the CCG Strategy and the NHS England plan will work in synergy.
- It was noted that more emphasis needs placing in the draft plan on safeguarding issues.
- It was queried that the health inequalities present in Swindon should be reflected in any funding allocation process, and suggested that localities ought to be focussing on improving health and reducing inequalities. It was noted that there is deprivation allocation of funding and there is an effort to address this issue in Swindon.
- It was noted that there is no specific reference to radiotherapy within the draft plan which does need including.
- It was noted that there needs to be emphasis on both health and wellbeing within the draft plan.
- It was agreed that the revised draft of the plan would be brought to a future meeting of the Board.

Resolved – (1) To consider the draft plan and provide any comments on the content by 20 June 2014.

(2) To note any implications for the plan on the Health and Wellbeing Strategy of the Board.

## **58. NHS Swindon Clinical Commissioning Group Strategic Plan 2014-2019**

The Board considered this report, presented by Paul Bearman, Executive Director of Commissioning at NHS Swindon Clinical Commissioning Group (CCG), on the Strategic Plan 2014-19 which describes the direction of travel for the CCG, and provides the basis for further detailed planning and should stimulate change in the system. The Strategy sets the vision, ambition and framework against which the two year detailed operational plan is set.

The Board noted that the final version of the Plan has to be produced by 20 June 2014 and the CCG is welcoming comments through consultation activities. The Plan is transformational, with the aims of getting people to look after their own health and wellbeing where possible, getting care closer to home, and people managing their own care with help and intervention from care services. The Plan also tries to address the ambitions set by NHS England in their Commissioning Plan.

Dr Peter Crouch, Clinical Chair of the CCG, highlighted some key points within the Plan including the summary from Swindon's 2013/14 Service Redesign Programme, the CCGs ambitions, their programme of change, priority interventions, and their two year operational plan for 2014-16.

The Board welcomed the report and discussed the following issues:

- It was queried how the plans were assisting mental health based issues for people who are living longer with multiple conditions. It was noted that there is an award winning psychology service in Swindon, and that doctors will be asked to take a holistic approach to patients.
- It was noted that the focus on Mental Health Crisis Concordat as agreed at the last meeting of the Board is not reflected within the draft plan.
- It was noted that the figure for mental health admissions per capita is low in Swindon.
- It was noted that further work is required on navigation and levels of support before issues gets to crisis point. Meeting unmet need in this way will help funding pressures.
- It was suggested that further detail needs to be put in the plan on promoting community based approaches, and the tools required by commissioners to better challenge providers.
- It was noted that the dynamics of the town centre will change with the building of new homes. Issues such as more affluent areas receiving better care than deprived areas, and understanding the need to reduce pressure on the low rental sector with high health problems have been taken on board when drafting the plan.
- It was noted that the CCG will adopt an asset based approach based on wants and needs.

Resolved – To note and comment upon the draft Strategic Plan by the deadline of 20 June 2014.

## **59. Better Care Fund**

The Board considered this report, presented by Cherry Jones, Acting Director of Public Health, which gave an update on the Better Care Fund (BCF) Plan submission for 2014-16.

The Board noted that it had been reported in the press that the BCF project may be cancelled by government but this had not been substantiated. Ian Biggs from NHS England confirmed that the Cabinet Office have been assessing BCF plans and decided that they need more joined-up work. This was felt to be a reality check after having received the plans and appreciating that investments will take time to work through.

The Board also noted that the only main change to the submission since the last time they had viewed it was the confirmation of the local indicator for consideration. This has been set as increasing the number of those with a learning disability aged 18 – 30 living in residential care with an annual review to 100% from a baseline of 62.5% in March 2014.

The Board welcomed the report and discussed the following issues:

- It was agreed that more information on when we can expect final feedback and the next stages of the process will be obtained and circulated to members.
- It was noted that the BCF plan is a great example of joined up working in

Swindon.

- It was noted that Section 11 of the submission regarding implications for the acute sector had not yet been fully finalised.

Resolved – To endorse the final Better Care Fund Plan for submission to central government, subsequent to revisions having been negotiated with NHS England.

## **60. Falls and Bone Health Joint Strategic Needs Assessment**

The Board received a presentation, presented by Sarah Weld, Public Health Speciality Registrar, on the Falls and Bone Health Joint Strategic Needs Assessment (JSNA). The Board noted that the JSNA was undertaken as a way of providing information to help understand the current picture regarding falls and bone health in Swindon, and to help make recommendations for future work to prevent falls in older people. The Board considered the report which gave further details on the numbers of people who fall, the services available to support them, prevention initiatives in Swindon, and gaps in service and areas for improvement.

The Board welcomed the presentation and the report and discussed the following issues:

- Awareness needs to be raised on background circumstances as to why someone may be falling over. For example, visitors could check tripping hazards in the property.
- It was agreed that the issue of delays in getting adaptations incorporated into people's homes would be investigated.
- Call buttons should be encouraged, and people can be directed towards Swindon Homeline for assistance with callouts to falls.
- Possibilities for preventative work by training people on how to deal with falls at a younger age, before it becomes an issue in their older age, will be investigated.

Resolved – (1) That the recommendations from the Falls and Bone Health JSNA Bulletin be noted.

(2) That the establishment of a Clinical Commissioning Group led task and finish group to develop an action plan for the implementation of the recommendations be supported.

## **61. Health Overview and Scrutiny Committee referral**

The Board considered this report which contained references and recommendations arising from the meeting of the Health Overview and Scrutiny Committee held on 2 April 2014, with particular regard to providing information, choices and alternatives to prescription medicine.

Councillor Bob Wright addressed the Board as one of the members who had been involved in the Task Group set up to look at this issue. He noted that practitioners do not have the time to advise patients about the possible side effects of prescription medicines, and that patients should be informed to look after their own health. He suggested that there is a postcode of inequality in Swindon, with only some pharmacies consistently going through side effects with patients.

The Board welcomed this report and discussed the following issues:

- It was noted that if the National Institute for Health and Care Excellence (NICE) approved alternative therapies then the Swindon Clinical Commissioning Group (CCG) would offer them. Their Commissioning Support Unit produced a report that confirmed some complementary and alternative medicines (CAMS) are currently being used and these are consistent with NICE guidelines.
- It was noted that doctors and pharmacists do check interactions on the drugs prescribed to patients, and medication comes with a leaflet inside the box which further explains side effects.
- The commissioning of CAMS is done by the CCG, but the Board has no authority to instruct the CCG on what it should commission.
- The CCG commission in accordance with NICE guidelines.
- It was noted that a Joint Strategic Needs Assessment (JSNA) could be undertaken on CAMs to provide more of an evidence base for discussion. However, there are limited resources and it would require two separate JSNAs – one for alternatives to prescription medicine and one for complementary medicine as these are two separate things.
- It was noted that Healthwatch Swindon could undertake a survey on this issue.
- It was agreed that a JSNA on CAMS would be considered as a potential subject on the JSNA workplan for the following municipal year, but that this should be weighed against other priorities.
- It was agreed that this issue will also need to be referred on to NHS England.

Resolved – (1) To note the report, comments and recommendation arising from the meeting of the Health Overview and Scrutiny Committee held on 2 April 2014.

(2) To promote the access to information on alternative and complementary medicine with the Swindon Clinical Commissioning Group.