#### Health and Wellbeing Board Minutes of the meeting held on 02 May 2018 at 11am in the Edwards Room, County Hall

#### Present:

Cllr Yvonne Bendle (Vice-Chair) Cllr David Bills Cllr Bill Borrett (Chairman) James Bullion Cllr Stuart Dark Cllr Paul Claussen Melanie Craig Dr Joyce Hopwood Adam Clark Dan Mobbs **Cllr Elizabeth Nockolds** Cllr Maggie Prior Cllr Roger Foulger Dr Janka Rodziewicz ACC Paul Sanford Dr Louise Smith Dr Wendy Thomson Sara Tough Alex Stewart Dr Paul Williams Tracey Williams (Vice-Chair)

# **Invitees Present:**

Christine Allen Dr Sanjay Kaushal Rt Hon Patricia Hewitt Cllr Mary Rudd Tony Osmanski

# **Officers Present:**

Linda Bainton John Barber

Jane Harper-Smith

# 1. Apologies

#### **Representing:**

South Norfolk District Council Norfolk County Council (NCC) Adult Social Care Committee, NCC Adult Social Services, Norfolk County Council Children's Services Committee, Norfolk County Council **Breckland District Council** NHS Great Yarmouth & Waveney CCG Voluntary Sector Representative Norwich City Council Voluntary Sector Representative Borough Council of King's Lynn and West Norfolk North Norfolk District Council **Broadland District Council** Voluntary Sector Representative Norfolk Constabulary Public Health, Norfolk County Council Norfolk County Council Children's Services, Norfolk County Council Healthwatch Norfolk West Norfolk Clinical Commissioning Group Norwich Clinical Commissioning Group

# **Representing:**

James Paget University Hospital Norfolk Independent Care Chair, STP Chairs Oversight Group Waveney District Council East Coast Community Healthcare

Senior Planning & Partnerships Officer, Public Health, NCC Director of Strategy, James Paget University Hospitals NHS Foundation Trust Norfolk & Waveney STP Programme Director, NCC

- 1.1 Apologies were received from Dr H Byrne, Mr L Green, Mr A Lejk, Cllr K Maguire (Mr A Clark substituting), Cllr A Proctor (Cllr R Foulger substituting), Ms J Smithson, Mr J Webster, and Mr J Williams (Mr T Osmanski substituting).
- 1.2 Also absent were Ms J Cave, Mr M Davies, Dr A Dhesi, Mr S Evans-Evans, Ms R Fallon-Williams, Cllr A Grant, Mr J Green and Dr L Stevens.

# 2. Chairman's Opening Remarks

2.1 The Chairman welcomed new members Helen Stratton, acting Chief Officer of NHS

North and South Norfolk CCG (Clinical Commissioning Group), and Dr Sanjay Kaushal who replaced John Bacon as Chairman of Norfolk Independent Care.

- 2.2 The Chairman **proposed** to take item 9, "Health and Wellbeing Board Governance" as the first report on the agenda, after Declarations of Interest.
- 2.3 The Chairman reported that draft extracts of the CCGs Annual Reports 2017-18 relating to the Health & Wellbeing Board/Joint Health and Wellbeing Strategy had been signed off at the Chair and Vice-Chairs' meeting in order to meet the NHS England deadline. The Chairman was keen that in future these extracts of the Annual Reports are brought to the Board for discussion and sign off before submission. A draft resolution was circulated (see appendix A); the Health and Wellbeing Board **RESOLVED** to **ENDORSE** this resolution.
- 2.4 The Better Care Fund (BCF) 2017-18 Quarter 4 monitoring report had also been signed off on behalf of the Health & Wellbeing Board (HWB) at the Chair and Vice-Chairs' meeting, and the BCF was discussed in full in the report at item 10, "Integration a vision for Norfolk Adult Social Services and review of the Better Care Fund 2017/18".
- 2.5 The Chairman commented that there was no forum for the District Councillors on the HWB, together with their senior lead officers, to discuss their work across the County and explore the issues; therefore he **proposed** that a sub-group was set up to facilitate this. The Health and Wellbeing Board **SUPPORTED** this proposal.

# 3. Minutes

3.1 The minutes of the meeting held on the 06 March 2018 were agreed as an accurate record and signed by the Chairman.

# 4. Actions arising from minutes

- 4.1 7a.2.3: Information was covered in the report at item 8, "Update on integrating health and care services".
- 4.2 9.3.1: Having been endorsed by the HWB, the Norfolk Pharmaceutical Needs Assessment 2018 was now published online, in line with statutory guidelines.

# 5. Declarations of Interests

5.1 No interests were declared.

# 6. Point of Order

6.1 The HWB resolved to take Item 9, "Health and Wellbeing Board; "Governance and systems leadership" next and then continue with the running order set out on the agenda.

# 7. Health and Wellbeing Board (HWB); Governance and systems leadership

7.1 The Board received the report highlighting key areas of the HWB's governance arrangements in terms of membership and current ways of working, inviting Members to consider and make comments on proposals for change.

- 7.2.1 The Chairman noted it had been previously suggested that there should be an opportunity for the public to ask questions at Health and Wellbeing Board meetings. He welcomed Patricia Hewitt and Cllr Mary Rudd, noting the importance of involvement of Waveney District Council and the Norfolk and Waveney Sustainability & Transformation Partnership (STP) in HWB business and discussions.
- 7.2.2 Mr T Osmanski of East Coast Community Care noted that the HWB comprised a number of organisations and there may be issues related to competitive advantage brought about by the public questions process; he **requested** that a review of the process was carried out after 6 months.
- 7.3 The Health and Wellbeing Board **RESOLVED** to:
  - 1. **AGREE** that the Chair of the Norfolk and Waveney Sustainability & Transformation Partnership (STP) and the Norfolk and Waveney STP Executive Lead become full members of the HWB (para 2.3 of the report)
  - 2. **AGREE** that the cabinet member for Community Health and Safety at Waveney District Council becomes a full member of the HWB (para 2.5 of the report)
  - 3. **AGREE** that there should be provision for members of the public to ask questions in-line with procedural rules (as outlined in Appendix B of the report)
  - 4. **RECOMMEND** that Norfolk County Council be asked to consider amending its constitution accordingly to enable the changes above (para 4.1 of the report)

# 8. Norfolk & Waveney Sustainability and Transformation Partnership (STP): Update on integrating health and care services

- 8.1 The HWB received a report giving an update on integration of health and care services in Norfolk and Waveney, following on from the paper presented at the March 2018 meeting about the Expression of Interest for an Integrated Care System (ICS).
- 8.2.1 Rt Hon P Hewitt, Chair, Norfolk & Waveney STP, thanked members for endorsing the Expression of Interest discussed at the last HWB meeting. She reported that the publication of the HWB papers had led to a 'lay person's guide' being published in local papers, helping increase public understanding and a good example of the STP and the HWB working together.
- 8.2.2 The STP Chair confirmed that NHS England (NHSE) would provide extra support over the next 6-12 months and were enthusiastic about the progress being made. NHSE had commented on the Norfolk and Waveney STP strengthening relationships with District Councils and showing a positive emphasis on primary care and prevention.
- 8.2.3 The finances were challenging; the NHS across Norfolk and Waveney was reported to be £70m off budget with a larger deficit, out of a total spend of £1.6bn. To make better use of resources, a system wide modelling and analysis of resources would be carried out.
- 8.2.4 The deadline for submitting the next round of NHS capital funding bids was 16 July 2018; capital bids by Norfolk and Waveney NHS providers were required to come through the STP and be part of the strategic plan and outcomes. Rt Hon P Hewitt stressed the value of working with District Councils to ensure housing developments were taken into account when planning for area hubs.
- 8.3.1 Collectively, and with considerable engagement, we will need to decide what we want an ICS to mean for Norfolk and Waveney NHSE (NHS England) were not dictating the structure and governance, it would be informed by local need. The STP will want to come back to the HWB with emerging ideas around this.

- 8.3.2 In the course of the discussion, the Executive Director, Adult Social Services, supported the view that the drive for sustainability was about better outcomes, but also about an economic case and the shift towards demand management. The Vice Chair (District Councils), commented on the collaborative work related to Delayed Transfers of Care (District Direct project) and hoped this would be supported by CCG colleagues and integrated into the STP moving forward.
- 8.3.3 It was considered important to ensure registered social landlords were included in the estates debate and, more generally, the Board queried how relevant people would be informed about how they could contribute to the NHS capital bids. The STP Programme Director reported that the STP Executive sub-group had an estates workstream which included relevant organisations and would be reviewed to ensure the correct organisations were involved, including district councils.
- 8.3.4 Mr D Mobbs, voluntary sector representative, reported from the perspective of the STP engagement group that it was important to have the STP vision in the public eye.
- 8.3.5 The Chief Officer, Great Yarmouth and Waveney CCG, reported that capital bids were seen as an opportunity for Norfolk and Waveney and therefore a top priority by the STP Executive team; additional communication would be sent out to partners.
- 8.4 The Health and Wellbeing Board **NOTED** the update on the integration of health and care services in Norfolk and Waveney.

# 9. Norfolk & Waveney Sustainability and Transformation Partnership (STP): Update on the Acute Care Workstream

- 9.1 The HWB considered a report giving an update on the work of the STP Acute Care workstream, with a focus on the Acute Speciality Sustainability Review involving Cardiology, Radiology and Urology. Christine Allen, Chief Executive, James Paget University Hospitals NHS Foundation Trust (JPH) introduced the report and updated members that Ear Nose and Throat (ENT) services had also now been reviewed.
- 9.2.1 Jonathan Barber, Director of Strategy (JPH), confirmed that the Norfolk Acute Hospitals Group were working together to accelerate the pace of change and deliver the 'Five Year Forward View'. He emphasised that the key principle of this work was sustainable services and people closer to home as far as possible. Considerable progress had been made by the three acute hospitals on these specialist services.
- 9.2.2 The Group had met on 30 April 2018 and further discussions were planned with commissioners, primary and community care, patients and relatives. Mr Barber reported that the centre and unit model of delivery was discussed, which would require service models for each area of speciality across the system. Draft timescales and resources would be presented to STP Chairs later in the week and, following on from this, consultation and engagement with stakeholders would be important; the new models would aim to provide services were closer to patients' homes where possible.
- 9.2.3 As ENT services were now included in the workstream, Mr Barber **proposed** an additional recommendation "that the board supported the strategic direction of work around Ear, Nose and Throat Services".
- 9.2.4 In response to a query about whether there were any early indications around implications for community services, Christine Allen confirmed that it may be possible to offer some services provided by units through community services, however

conversations were needed with commissioners about what services to commission across Waveney and Norfolk.

- 9.2.5 In answer to a question by the Director of Public Health, NCC, Ms Allen confirmed there was a strong transformational element to the approach based on best practice evidence. Implementation would take time (approximately 6 to 9 months) and would inform the work that could be done in developing and transforming other services. The specialities to develop next had not yet been identified.
- 9.2.6 It was queried how South Norfolk fitted in to the unit model; Ms Allen reported that some of the Queen Elizabeth Hospital's work was provided by Addenbrookes Hospital, therefore work related to this hospital needed careful mapping over a longer period.
- 9.2.7 Cllr S Dark, NCC Children's Services Committee representative, queried the difference in level of service between centres and units. Ms Allen clarified that, where safe to do so, services would be provided locally, however, where services required a tertiary centre, they would be provided at the centre and not at the King's Lynn or James Paget Hospitals. The current centre and hub model for cancer services meant radiotherapy was carried out only at the centre.
- 9.2.8 The Vice Chair (CCG) commented that it was positive to see the three hospitals working together in this way and referred to the fact that the New Models of Care and services were about the importance of services being transformed for the future and closer to peoples' homes.
- 9.2.9 The Chairman asked about the pace of change and whether we were being ambitious enough; Ms Allen reported there had been much debate around cardiac services and new techniques and that they were working hard to keep a balance, being mindful of the need to take staff, patients, voluntary staff and carers along with them.
- 9.3 The Director of Public Health proposed a recommendation to "invite Christine Allen in 6 months to update the Health and Wellbeing Board meeting and hold a further discussion with the HWB about the transformational plans".

# 9.4 The HWB **AGREED** to:

- 1. **SUPPORT** the strategic direction of joint working focused around Cardiology, Radiology, and Urology
- 2. **NOTE** that the service redesign seeks to ensure sustainable and resilient services across the Norfolk and Waveney system
- 3. **INVITE** Christine Allen, in 6 months, to update the Health and Wellbeing Board meeting and hold a further discussion about the transformational plans

# 10. Integration – a vision for Norfolk Adult Social Services and review of the Better Care Fund 2017/18

- 10.1 The HWB considered a report discussing the commitment of Norfolk County Council and the health and care system to pursue integration, and progress through the Better Care Fund (BCF) and Integration Plan.
- 10.2 Mr J Bullion, Executive Director of Adult Social Services, NCC, outlined the contents of the paper which:
  - Described how Norfolk Adult Social Care were working together with the NHS in Norfolk and Waveney on integration based on their delivery model
  - Updated on the BCF overall performance for the year, and

- Provided some information about one innovative and social approach Social Prescribing and Community Support
- 10.3 The Executive Director stated that the approach built on a history of integrated commissioning and joint working, and included looking at how the delivery of integration might be developed further to make our budgets more sustainable, in the light of more complex casework being seen and a more acute financial situation.
- 10.4 Dr J Rodziewicz left the meeting at 12.01
- 10.5.1 Mr Bullion reported that the default way of working is a Multi-Disciplinary Team around a vulnerable person, and the broad model going forward would be to work with primary care partners through 19 or 20 hubs, with community health, mental health and social care practitioners coming together. To support this, the BCF was now much better aligned with the emphasis very much on the healthcare and housing aspects. The Executive Director confirmed that the BCF delivery was on track, with the exception of delayed transfers of care, and announced that a Multi-Agency Discharge Event, centred on progress on hospital and care discharges, was due to be held in June 2018. Mr Bullion stated that prevention was key to integration and confirmed that a preventative social work and nursing strategy was now in place, and work underway on preventative measures and initiatives focussed on social prescribing and tackling loneliness. It was noted that the County Council also had a deficit in their budget, and £17m savings would be made by Adult Social Care through demand avoidance and providing services more cost-effectively.
- 10.5.2 Cllr R Foulger, Broadland District Council, reported that the BCF had enabled the parameters of the disabled facilities grant to be broadened in Broadland District Council.
- 10.5.3 The Vice-Chair, District Council Representative, thanked the Executive Director for support from social care, noting that 2 more GP practices in South Norfolk would offer community connectors and early help support by 1 June 2018.
- 10.5.4 Mr A Clark, Norwich City Council, commented that for the district councils the process around social prescribing had been very positive and the approach had enabled a supportive countywide network of support.
- 10.5.5 Cllr E Nockolds, Borough Council of King's Lynn and West Norfolk, reported that the extra income from BCF had enabled the Borough Council of King's Lynn and West Norfolk to consider a permanent member of staff to target social isolation.
- 10.5.6 Ms M Craig updated the Board that Great Yarmouth had been shortlisted for a national award because of the work done through this scheme.
- 10.5.7 Mr D Mobbs welcomed the paper and the plan and noted that a future challenge for the HWB would be to show how one part of the system had impacted on outcomes for another part of the system.
- 10.5.8 The Chairman encouraged HWB partners, and the system as a whole, to continue to move forward with the focus on prevention, and keeping the public at front and centre.
- 10.6 The Health and Wellbeing Board:
  - 1. **CONSIDERED** system progress in relation to integration in Norfolk over the past year (2017-18)
  - 2. **ENDORSED** Adult Social Services' vision for integration and agree to commit to collaborate on developing and implementing the model

# 11. Any Other Business

- 11.1 Dr L Smith, the Director of Public Health, NCC, reported that, throughout May, a blood pressure check campaign was being run to encourage people to get their blood pressure checked; it was thought that around 140,000 people were being treated for high blood pressure and many more were still undiagnosed; it was hoped that the campaign would help prevent incidences of heart attacks and strokes by identifying undiagnosed cases of high blood pressure.
- 11.2 Cllr D Bills, NCC, reported that, following discussions about annual health checks held before Christmas 2017, he had tried to book a health check however found he was not eligible as he was under 76 years of age. Dr L Smith clarified that NHS healthchecks were aimed at people aged from 40 to 75 years every 5 years, unless they had a qualifying health condition.

The Meeting Closed at 12.19

# Cllr Bill Borrett, Chairman, Health and Wellbeing Board



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# Health and Wellbeing Board meeting 2 May 2018

# **Draft Resolution**

# CCGs Annual Reports – extract relating to the Health & Wellbeing Board and the Joint Health and Wellbeing Strategy

- Each year the HWB Chairman, and more recently the Vice Chairs Group, has reviewed and provided comments on draft extracts of the Clinical Commissioning Groups (CCGs) Annual Reports relating to the HWB/Joint Health and Wellbeing Strategy. This has been undertaken each year on behalf of the Health & Wellbeing Board (HWB), in order to meet the annual deadline for submission to NHS England (NHSE).
- 2. It is proposed that, in future, the relevant extracts of the CCGs Annual Reports are brought to the HWB for consideration and comments, before submission to NHSE. In order to meet the annual submission deadline this will need to be considered at the HWB's early spring meeting (usually February).

# The HWB resolves to:

• Consider and comment on the relevant extracts of the CCGs Annual Reports each year at its early spring meeting (usually February), in advance of their submission to NHSE.