

Minutes of the Meeting of the Health and Wellbeing Board held on 21 September 2018 at 10.30am

- Present:** Councillors James Halden (Chair), and Tony Fish
- Mandy Ansell, Accountable Officer, Thurrock NHS Clinical Commissioning Group (Thurrock CCG)
Jane Foster-Taylor, Executive Nurse Thurrock NHS CCG
Roger Harris, Corporate Director of Adults, Housing and Health
Kim James, Chief Operating Officer, Healthwatch Thurrock
Malcolm McCann, Executive Director of Community Services and Partnerships South Essex Partnership Foundation Trust
Andrew Pike, Managing Director BTUH
Jeanette Hucey, Director of Transformation, Thurrock CCG
Ian Wake, Director of Public Health
Gillian Ross, Laymember, Thurrock CCG
- Apologies:** Cllr Robert Gledhill, Susan Little and Barbara Rice
Dr Anjan Bose, Clinical Representative, Thurrock CCG
Graham Carey, Independent Chair of Thurrock Adults Safeguarding Board
David Archibald, Independent Chair of Local Safeguarding Children's Board
Adrian Marr, NHS England
Tania Sitch, Integrated Care Director Thurrock, North East London Foundation Trust
Julie Rogers, Chair Thurrock Community Safety Partnership / Director of Environment and Highways
Kristina Jackson, Chief Executive Thurrock CVS
Rory Patterson, Corporate Director of Children's Services
Tom Abell, Deputy Chief Executive and Chief Transformation Officer Basildon and Thurrock University Hospitals Foundation Trust
Steve Cox, Corporate Director for Place
- Did not attend:** Dr Anand Deshpande, Chair of Thurrock CCG
- In attendance:** Tania Sitch represented by Rita Thakaria,
Maria Payne (Public Health)
Malcolm Taylor (Thurrock Council, Children's Directorate)
Elozona Umeh (Public Health).

1. Welcome and Introductions

Apologies were noted.

2. Minutes

The minutes of the Health and Wellbeing Board meeting held on 20 July 2018 were approved as a correct record.

3. Urgent Items

There were no urgent items raised in advance of the meeting.

4. Declaration of Interests

There were no declarations of interest.

5. Mid & South Essex Sustainability and Transformation Programme (STP) Update

Mandy Ansell, Accountable Officer, Thurrock CCG provided members with a verbal update. The following points were made:

- The first meeting of the People Panel, created to help inform the relocation of services and ensure continued community engagement, had taken place and membership has been agreed.
- It has previously been agreed that services provided to Thurrock residents by Orsett will remain available in Thurrock and that Integrated Medical Centres are key to facilitating a transfer of services between locations.
- Members were advised that Cabinet had approved the request to tender for building works for Tilbury and Chadwell IMC.
- Members raised concern about the limited planning and project management material that is readily available for partners. It was agreed that Roger Harris, Corporate Director for Adult Housing and Health, Mandy Ansell, Accountable Officer Thurrock CCG and Andrew Pike, Managing Director BTUH will meet and consider pathways and plans for implementation.

Action Roger Harris, Mandy Ansell and Andrew Pike

RESOLVED: HWB members noted the update and provided comments.

6. SEND

SEND JSNA

Thurrock Council and Thurrock CCG SEND Priorities

Members were provided with three presentations by Helen Farmer (Thurrock CCG), Malcolm Taylor (Thurrock Council, Children's Directorate) and Elozona Umeh (Public Health). Key points included:

JSNA

- Thurrock Council has a statutory duty to provide certain children and public health services to children and young people aged 0-19 living in the borough. This includes provision for children with Special Educational Needs and Disability (SEND) from age 0-25 years.
- To enable the council's Public Health team alongside Children's Services and the CCG to commission services effectively, a Joint Strategic Needs Assessment (JSNA) is required to identify level of

need, characteristics of children and young people with SEND, their health and wellbeing needs as well as current and future demand for services.

- The main recommendations identified within the JSNA included greater collaborative work between education, health and social care, development of a SEND strategy, further improvement in local data to aid detailed modelling of expected demand on services, enhancement of the local offer, strengthening of transition between child and adult services and re-commissioning of short break provision.
- The number of children and young people aged 0 - 25 in Thurrock is set to increase over the next decade by approximately 10%.

Thurrock Council and Thurrock CCG SEN Priorities

- All CCG key priorities underpinned by The Children and families ACT 2014 and SEND Code of Practice 2014
- Thurrock CCG has a designated SEND Clinical Officer who has oversight across the range of health professionals delivering care to children with SEND, promotes best practice and works across service boundaries to enhance the provision of health care to children with complex health needs and medical conditions.
- The SEND Champions Health Forum Meeting meets monthly with provider agencies. The Forum aims to raise visibility and awareness across providers and enhance practice through, empowerment, effective communication and inter team working. The Forum also shares best practice and specific case discussions to provide opportunities to reflect on practice.
- Thurrock CCG and Council are utilising an integrated audit tool which can align priorities and support coordination of action plans.
- NHS England East – Collating data and forming networks to support the health SEND agenda supported by the DFE regional advisor.
- Key areas identified: Multiagency outcome measures, joint commissioning intentions, co-production.
- Thurrock Council is responsible for the Local Area Special Educational Needs and Disability Strategy 2018-2020. Key Strategic Priority Areas include to ensure:
 - That children and families are at the heart of an effective SEN system
 - Every child and young person is making good progress and attends a good place to learn
 - Children and families are well supported
 - An effective and responsive approach to assessing and meeting children and families' needs.

During discussions the following points were made:

- It is important to ensure that transitional arrangements are robust and enable people to continue to access relevant services during the transition from being a child to adulthood.
- Substantial work that has been undertaken over the last few years was acknowledged by members and action has been taken to improve performance which includes a staffing review and utilising data across the system to inform medium to long term planning.

- Members noted that East Tilbury Primary School has made impressive progress and specialist schools Treetops and Beacon Hill are rated as outstanding.

RESOLVED: Health and Wellbeing Board members:

- Provided comments upon the JSNA and approved the recommendations made Agree to the publication of the SEND JSNA and noted SEND priorities and action for both Thurrock Council and Thurrock CCG.

7. Mental Health Peer Review follow up report and recommendations - Adult Mental Health Service Transformation in Thurrock

Ian Wake, Director of Public Health introduced this item. Key points included:

- There has been considerable effort undertaken within Thurrock to transform local health and care services over the last three years including plans to create four new Integrated Medical Centres, a *New Model of Care* for Tilbury and Chadwell, the *Stronger Together* programme of community development and asset-based approaches, a *Thurrock Integrated Care Alliance*, the joint *For Thurrock in Thurrock* CCG-Adult Social Care programme and considerable efforts to transform Primary Care services. However mental health systems transformation has not perhaps featured as strongly as it should within these programmes to date.
- Public Health have committed to fund a new Strategic Lead post a key remit of working with all stakeholder organisations and local service users to develop a new Thurrock Mental Health Systems Transformation strategy and associated new models of care and commissioning arrangements.
- By triangulation of the intelligence, evidence and recommendations set out in the Mental Health JSNA, LGA Peer Review and User Voice, this paper proposes five Key Themes that warrant attention of local system leaders in order to improve and transform local mental health services for the benefit of Thurrock residents. These are summarised below and then discussed in turn in the context of the published evidence base, policy and other local intelligence.
 - Addressing Under-Diagnosis
 - Getting into the system
 - A new treatment offer for Common Mental Health Disorders
 - A new 'enhanced treatment' model including a greater focus on prevention and early intervention
 - Integrated Commissioning

During discussions the following points were made:

- Thurrock CCG are leading the commissioning of mental health services across Mid and South Essex. It was agreed that Ian Wake would be invited to an event scheduled for 27 September which will consider redesigning mental health support.
- Board members welcomed the report and the clear sense of direction which it provides. It was acknowledged that mental health should be embedded and made available within the new Integrated Medical Centres. It will be important to ensure that IMCs are not primarily focussed on providing primary and acute care services.

- The Winter Planning Operational Group is now established and will consider mental health. It was agreed that a strategic mental health planning group should be established to support improved planning and stimulate capacity modelling.
- The challenging environment within which EPUT operates (across 7 CCGs and 3 Local Authorities) was acknowledged given each area wishes to create comprehensive mental health support. The merits on considering services that could be focussed across Essex or within specific geographical locations were acknowledged
- Members acknowledged the increased demand experienced at BTUH which is often used as a place of safety for people detained under Sections 135/136 of the Mental Health Act.

RESOLVED: Health and Wellbeing Board members provided feedback on the high level recommendations made within the 'Next Steps' sections of the paper and on the questions posed within it.

8. Emotional Wellbeing in Schools Thurrock Dementia Local Action Plan

Elozona Umeh, Public Health, presented this item. This Key points included:

- It is clear from both local research and discussions with Head Teachers and NHS partners, that there is a need for more mental health support for children and young people (CYP) and schools in Thurrock.
- There is an increase in demand for treatment services and pressure is being placed on schools and colleges to cope with emerging issues around mental health.
- The CYP JSNA 2018 discussed the increasing incidence of mental health problems in children and young people at both a national and local level, and the associated rising demand on treatment services.
- The School Wellbeing Service is a partnership model between Thurrock Council, Thurrock Clinical Commissioning Group and Thurrock schools and academies that will primarily focus on prevention in order to strengthen and improve the emotional and mental wellbeing of children and young people as well as school staff, in response to feedback from the Schools Mental Health Summit.

During discussions the following points were made:

- Members welcomed the link to Open Up Reach Out and that Children's Directorate and Thurrock CCG has been engaged in developing proposals for school wellbeing teams in schools in response to the Government's Green Paper.

RESOLVED: members approved the strategic direction of travel for improving children and young people's mental health and wellbeing and provided feedback on the proposed school wellbeing service model.

9. Integrated Care Alliance Memorandum of Understanding (MOU)

Roger Harris provided members advised members that Thurrock Integrated Care Alliance comprising key partner agencies had developed a MOU to support the alignment and integration for planning and delivering health and care services. Members were advised that the draft MOU would be presented to the Board at its meeting in November for comment.

Board members acknowledged the importance of ensuring that the MOU is right and shows how partners will work together as a single system.

10. Report on BTUH visit

Cllr Halden introduced the item by explaining that Health and Wellbeing Board members visited BTUH on Friday 24 August 2018 to consider the impact of interventions introduced within the hospital to effectively manage an increase in demand experienced by the A&E department.

The visit was arranged as part of understanding how measures taken were impacting on the patient's experience in A&E and to explore how previous issues considered by the HWB are managed at BTUH. These included:

- The potential increase in Sepsis and the work that has been done so that people can identify early signs of Sepsis.
- A&E waiting times and performance
- The work that the BTUH had undertaken to stream patients to the most appropriate service
- The impact of providing a GP service based at BTUH whose role is to divert patients that can be seen by the GP away from A&E
- Work of the Social Care discharge team
- Creating of space within A&E to effectively manage patients experiencing mental ill health
- Cllr Fish's experience when he visited A&E during a particularly busy time

Members welcomed the visit and those that participated found it helpful. Members learned about the robust presentation on action being taken by BTUH on identifying and treating Sepsis.

11. Cancer Care Report

Andrew Pike, Managing Director BTUH, provided members with a presentation on Cancer Care. Key points included:

- The number of people waiting 28 days for diagnosis now been halved
- A range of control documents have been developed that support the effective management of the identification and treatment of cancer
- Senior management consider a weekly dashboard that sets out referrals and outpatients
- Every single patient is now monitored and a daily escalation process has been introduced,
- As a result of action taken approximately 96% of patients will not be diagnosed with cancer at the two weeks referral.
- GP referral system can help patients to understand the pathway that they are on and the importance of attending appointments within two weeks for diagnosis.

During discussions the following points were made:

- Members acknowledged and welcomed the comprehensive action taken to ensure cancer can be diagnosed and treated earlier.
- Health Watch may be able to provide support with identifying whether patients understand the two weeks wait target and what it means for them.

**12. Integrated Commissioning Executive and Health and Wellbeing
Executive minutes**

RESOLVED: Members considered and noted ICE minutes for meetings that took place in May, June and July 2018

13. Work Programme

RESOLVED: The Board noted the future work programme.

The meeting finished at 13.20hours. Approved as a true and correct record

CHAIR.....

DATE.....