

**PUBLIC Minutes of the meeting of the Health and Wellbeing Board held 15th
September 2016 at 1.00 pm**

Present: Councillors James Halden (Chair), Robert Gledhill, Sue Little, Leslie Gamester and Steve Liddiard.

Mandy Ansell Acting Interim Accountable Officer, Thurrock CCG
Roger Harris, Corporate Director of Adults, Housing and Health
Steve Cox, Corporate Director of Environment and Place
Liv Corbishley, Lay Member for Public and Patient Participation, Thurrock CCG
David Peplow, Independent Chair of Local Safeguarding Children's Board
Kim James, Chief Operating Officer, Thurrock Healthwatch
Ian Wake, Director of Public Health
Rory Patterson, Corporate Director of Children's Services
Dr Anjan Bose, Clinical Representative, Thurrock CCG
Tania Sitch, Integrated Care Director Thurrock, North East London Foundation Trust
Malcolm McCann Executive Director of Community Services and Partnerships

Apologies: Andrew Pike, Director of Commissioning Operations, NHS England Essex and East Anglia
Kristina Jackson, Chief Executive, Thurrock CVS
Michelle Stapleton, Director of Integrated Care Basildon and Thurrock University Hospitals Foundation Trust
Dr Anand Deshpande, Chair of Thurrock NHSCCG
Clare Panniker, Chief Executive of Basildon and Thurrock University Hospitals Foundation Trust
Jane Foster-Taylor, Executive Nurse, Thurrock CCG
Graham Carey, Chair of Thurrock Adults Safeguarding Board

In attendance: Tom Abell, Deputy Chief Executive, Basildon and Thurrock University Hospitals Foundation Trust
Andy Vowles, Programme Director, Essex Success Regime
Jeanette Hucey, Director of Transformation, Thurrock CCG
Les Billingham Head of Adult Social Care and Community Development
Kirsty Paul, Principal Planning Officer
Grant Greatrex, Sport and Leisure and Policy Development Manager
Ceri Armstrong, Strategy Officer
Darren Kristiansen, Business Manager, Health and Wellbeing Board

1. Welcome and Introductions

Apologies were noted.

2. Minutes

The minutes of the Health and Wellbeing Board held on 14th July were approved as a correct record.

3. Urgent Items

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

Councillor Halden informed members that he had visited Basildon and Thurrock University Hospital on 14 August. Roger Harris made the Board aware the joint working between Adult Social Care and the Hospital continued to be excellent and that work to identify collaborative solutions to system issues was continuing. Current challenges for the system included:

- Domiciliary Care and Joint Reablement services are experiencing unprecedented pressure and increased demand;
- An increase in demand is being experienced at the Hospital. For example, on 14 September approximately 130 ambulances arrived at the Hospital compared with the expected average at this time of year of approximately 70;
- There has been an increase in delayed discharges from hospital;
- There are ongoing workforce issues including difficulty recruiting staff for domiciliary and residential care across Thurrock and recruitment of nursing staff at the Hospital.
- Cllr Halden will revisit Basildon and Thurrock University Hospital with the Director of Adults Housing and Health in December for an update on progress with identifying opportunities for more joint working.

Tom Abel stated that the Trust is considering how to further support partners with patients that are released from hospital but who require support in the community. A multi-agency Accident and Emergency Delivery Board has been established replacing the System Resilience Group and meets on a fortnightly basis.

4. Declaration of Interests

There were no declarations of interest.

5. Sustainability and Transformation Plan

Andy Vowles, Programme Director, Essex Success Regime provided the Board with an update on the Essex Success Regime (ESR) and the Mid and South Essex Sustainability and Transformation Plan (STP). In summary:

- All areas in England are required to have a STP in place – there are 44 areas. The key difference with the Success Regime is that it was

announced prior to the requirement for STPs and only applied to three areas of the Country – Essex, Devon and Cumbria. The STP and Success Regime requirements were now aligned;

- The programme comprises two strategic elements. The first focusses on Local Health and Care which involves considering the development of local teams and integrated hubs, the creation of care pathways (initially a frailty care pathway) and access to emergency care. The second focusses on hospitals and considers clinical services and the delivery of wider services including emergency care, surgery, women and children and paediatric services;
- The Out of Hospital strategy focusses on joining up Primary and Secondary Care services and considers physical and mental health as well as Social Care service delivery;
- The STP refresh is scheduled for 21 October and will be considered by Health and Wellbeing Board at its meeting in November.

During discussions the following points were made:

- It was acknowledged that Thurrock has effective partnership arrangements which facilitate the planning and delivery of Health and Social Care services. It is important to ensure that broader governance arrangements established as a consequence of the STP does diminish a Thurrock focus. Cllr Halden stated that it was important that the STP did not disempower local decision making and that decisions should be taken via the Health and Wellbeing Board;
- Cllr Halden advised members that he has been engaging with Councillor Salter (Southend Borough Council) and Councillor Butland (Essex County Council) to develop a set of key principles that provide the basis upon which Success Regime decisions affecting Thurrock, Southend and Essex should be made. Board members were advised that the principles will be presented at a future Health and Wellbeing Board, once they have been agreed and endorsed by Essex and Southend Health and Wellbeing Board chairs.
- Board members were reassured that mental health remains a priority area of focus within the STP and ESR programmes.

RESOLVED:

The update was noted and the Board agreed to continue participating in discussions within the Mid and South Essex Success Regime and STP engagement and consultation programmes, which include stakeholder meetings and meetings of the Essex, Southend and Thurrock Health and Wellbeing Boards.

6. Item in Focus – Health and Wellbeing Strategy Goal B ‘Healthier Environments’

The Health and Wellbeing Strategy contains five Strategic Goals. The Item in Focus for this meeting was Goal B, which comprises four objectives:

- B1 Create outdoor places that make it easier to exercise and be active.
- B2 Develop Homes that keep people well and independent.

- B3 Build strong, well connected communities.
- B4 Improve Air Quality in Thurrock

Cllr Halden advised Board members that action plan B4 has been deferred and the Air Quality Strategy and action plan will be presented at a future meeting. The remaining action plans, created to support the delivery of Health and Wellbeing Strategy's objectives and goals were presented to Board members. In summary:

Action Plan B1 was presented by Kirsty Paul, Principal Planning Officer. During the presentation the following points were made:

- Evidence demonstrating the relationship between environment and health is acknowledged. Some of the challenges currently experienced in Thurrock include high levels of inactivity and high levels of adult and childhood obesity (10–11 year olds)
- It is important to address engagement feedback received as part of developing the Active Places Strategy and Local Plan consultation which shows that members of the public:
 - Have a varied opinion on the overall quality of the environment and open spaces
 - Lack of facilities for older children
 - Have raised concerns about safety surrounding open spaces, air quality and road safety.
- There are a wide range of interrelated Strategies that support the development of places that comprise high quality streets and civic spaces with well-connected walking and cycling routes.

Engagement feedback was presented by Kim James, Chief Operating Officer Healthwatch Thurrock:

- 179 people were engaged and provided feedback on B1 and key themes reinforced feedback received as part of the Active Places and Local Plan consultation exercises and included:
 - Improved access to parks by including a wider range of activities on offer, tackling anti-social behaviour and maintaining equipment.
 - Communities are keen to assume responsibility by engaging in local groups to maintain parks and green spaces.

During discussions the following points were made:

- It is important to ensure that synergies are created between emerging strategies and plans and compliment Thurrock's 'Clean It, Cut It, Fill It' agenda.
- Consideration should be provided to the impact of new housing developments on the capacity of existing facilities, such as leisure centres.
- The Council's Infrastructure Requirements List (which forms the basis for all future Section 106 negotiations including new applications) remains an important instrument for ensuring that new developments give due consideration to improving health and wellbeing outcomes.

- Consideration should be given to how other partners can support health and wellbeing outcomes. For example, how school facilities could be used for the benefit of the wider community.

Action Plan B2 was presented by Les Billingham, Head of Adult Social Care and Community Development. During the presentation the following points were made:

- Funding had been successfully secured to develop HAPPI Housing which aimed to improve the quality of life of Thurrock's ageing population through complying with a set of specific design requirements. Thurrock also secured £787,000 for 6 specialised homes for young people with Autism or Learning Disabilities to be built in Grays in partnership with Family Mosaic.
- The Health and Wellbeing Housing and Planning Advisory Group is a multi-agency group (including Public Health, the CCG and NHS England) which considers the health and well-being implications of major planning applications, and provides advice and guidance on the health, social care and community impacts of proposed new developments.

Engagement feedback provided by Healthwatch included:

- People living in twenty six sheltered housing accommodation facilities across the Borough were engaged.
- It is important to ensure that local people have an opportunity to inform the design of housing developments to ensure that they can accommodate individuals with wide ranging health needs.

During discussions the following points were made:

- The relationship between the place and the impact on health and wellbeing was acknowledged. It is important to ensure that health and wellbeing continues to remain a key element of the design, planning and delivery of new housing developments. In relation to this point, Councillor Halden raised concerns about the lack of attendance from officers leading on the regeneration agenda.
- It remains vital that new housing developments and section 106 agreements are informed by health and social care requirements.
- It was acknowledged that while the Well Homes programme is targeted at the private sector lessons can be learnt and adopted within public sector tenancy and property management.

Action Plan B3 was presented by Les Billingham, Head of Adult Social Care and Community Development. During the presentation the following points were made:

- The Voluntary and Community Sector plays a key role in designing and delivering the Stronger Communities agenda. It is important to acknowledge that Thurrock Council is utilising expertise and knowledge across the VCS and local communities to build resilience that empowers members of the community and provides alternatives to the existing health and social care service offer.

- The 'strong well-connected communities' agenda is managed through the cross-agency Stronger Together Partnership. The programme recognises that people live more fulfilled lives if they can connect with the communities they live in.
- Basildon Council are interested in learning lessons from effective practice demonstrated by Thurrock's Local Area Coordinator (LACs) programme.

Engagement feedback provided by Healthwatch included:

- Groups primarily consulted in this instance were young mothers and members of the polish community across Thurrock.
- 7 additional volunteers were secured as part of consulting with the public on action plan B3
- 55% of consultees feel that they are active in their community
- 26% of consultees are members of a local community group
- 57% of consultees were aware of community hubs.

During discussions the following points were made:

- It is important to ensure that services are developed across the Borough and are not focussed on specific geographical areas.
- GP practices have been engaged to determine their appetite for Social Prescribing. While there is currently limited funding available to develop this programme it is hoped that Social Prescribing will be rolled out across the Borough in due course.
- The positive impact that Community Hubs have on local communities was recognised and acknowledged.
- There is clear evidence that demonstrates how well connected communities facilitate an increase in personal resilience amongst members of the public and that this leads to good mental and physical health outcomes.

RESOLVED:

Action plans developed to support the achievement Thurrock's Health and Wellbeing Strategy Goal B, Healthier Environments were agreed.

7. For Thurrock in Thurrock

Jeanette Hucey, Director of Transformation, Thurrock CCG provided the Board with an update on the For Thurrock in Thurrock Programme. In summary:

- The scope of this programme includes Out of Hospital adult care, Community Health and Mental Health;
- Intermediate care beds will be reconfigured from 49 beds across 6 sites to 32 beds at Thurrock Community Hospital and 5 additional beds at Collins House, creating 37 beds for Thurrock in Thurrock.
- The For Thurrock in Thurrock programme will inform and respond to the Essex Success Regime programme

During discussions the following points were made:

- Reassurance was provided to Board members by Dr Bose that GPs are totally committed to the Programme and the Programme remains a regular item at the Clinical Engagement Group and CCG Board meetings.

RESOLVED:

The update was noted by members as recommended.

8. Ofsted Safeguarding Inspection Action Plan

Rory Patterson, Corporate Director of Children's Services provided the Board with a summary of the Ofsted Inspection Report and action plan. In summary:

- The previous inspection in 2012 provided an assessment rating of good. The 2016 inspection provided an assessment rating of requiring improvement
- While 75% of all authorities have received an assessment rating of requiring improvement it was acknowledged that Thurrock's inspection demonstrates a decline in the quality of service provided.
- An action plan has been developed to address all areas of service requiring improvement and has been approved by Ofsted.
- It remains vital that individuals that are placed in under the care of Thurrock experience improved personal outcomes.
- It should be acknowledged that the Ofsted inspection also identified areas of particular strength within Thurrock which included:
 - A strong multi-agency safeguarding hub
 - A strong offer being provided for adolescents
 - A strong approach for tackling child sexual exploitation
 - Thurrock's Safeguarding Board has been assessed as good.

During discussions the following points were made:

- Board members welcomed the Council's recognition that improvement is required across a number of inspection domains and the positive action that has been taken to address areas that have been assessed as requiring improvement;
- It was difficult to achieve a rating of 'good' whilst employing a high level of agency staff, but innovative approach were being used to respond to this challenge

RESOLVED:

Health and Wellbeing Board members noted the outcomes of the recent Ofsted Inspection and approved the draft action plan, created to address the recommendations made by Ofsted.

9. Integrated Commissioning Executive – Meeting minutes

RESOLVED:

The minutes of the Integrated Commissioning Executive were noted.

10. Health and Wellbeing Board Executive Committee Minutes

RESOLVED:

The minutes of the Health and Wellbeing Executive Committee were noted.

11. Work Programme

Board members agreed that the Essex Success Regime should remain a standing item and an update should be provided at each meeting.

A paper on integrated data management will be brought to a future meeting.

Tania Sitch requested that a paper on the Single Point of Access be brought to a future Board meeting.

The meeting finished at 3.16 pm. Approved as a true and correct record

CHAIR.....

DATE.....