

**Minutes of the Meeting of the Health and Wellbeing Board held on 14 November 2017 at 2.00 pm**

**Present:** Councillors James Halden (Chair), Steve Liddiard, Sue Little and Leslie Gamester  
Mandy Ansell Accountable Officer, Thurrock CCG  
Steve Cox, Corporate Director of Environment and Place  
Roger Harris, Corporate Director of Adults, Housing and Health  
Kim James, Chief Operating Officer, Thurrock Healthwatch  
Rory Patterson, Corporate Director of Children's Services  
Ian Wake, Director of Public Health  
Tania Sitch, Integrated Care Director Thurrock, North East London Foundation Trust  
David Archibald, Independent Chair of Local Safeguarding Children's Board

**Apologies:** Councillor Robert Gledhill  
Tom Abell, Deputy Chief Executive and Chief Transformation Officer Basildon and Thurrock University Hospitals Foundation Trust  
Jane Foster-Taylor, Executive Nurse, Thurrock CCG  
Kristina Jackson, Chief Executive, Thurrock CVS  
Malcolm McCann Executive Director of Community Services and Partnerships, South Essex Partnership Foundation Trust  
Clare Culpin, Managing Director Basildon and Thurrock University Hospitals Foundation Trust  
Andrew Pike, Director of Commissioning Operations, NHS England Essex and East Anglia  
Clare Panniker, Chief Executive of Basildon and Thurrock University Hospitals Foundation Trust  
Dr Anjan Bose, Clinical Representative, Thurrock CCG  
Graham Carey, Chair of Thurrock Adults Safeguarding Board  
Liv Corbishley, Lay Member for Public and Patient Participation, Thurrock CCG

**Representatives** Michelle Stapleton, Director of Integrated Care Basildon and Thurrock University Hospitals Foundation Trust was represented by Charlotte Williams Group Director for Strategy and New Care Models  
Julie Rogers, Chair Thurrock Community Safety Partnership was represented by Grant Greatrex Sports & Leisure Policy & Development Manager

**Did not attend:** Dr Anand Deshpande, Chair of Thurrock CCG  
**In attendance:** Ceri Armstrong, Senior Health and Social Care Development Manager, Thurrock Council  
Andrew Vowles Programme Director STP  
Andrea Winstone, School Improvement Manager

**1. Minutes**

The minutes of the Health and Wellbeing Board held on 22 September were approved as a correct record. Roger Harris, Corporate Director of Adults Housing and Health, advised members that the Better Care Fund Plan had been approved by NHS England without any conditions being attached.

**2. Urgent Items**

There were no urgent items provided in advance of the meeting

**3. Declaration of Interests**

There were no declarations of interest.

**4. STP Update on Consultation**

Andrew Vowles, Programme Director for the STP, provided members with an update on the forthcoming STP consultation exercise. Key points included:

- The programme will no longer be referred to as the Success Regime and will be referred to as the STP.
- Concerns that had been previously raised by partners have informed current STP proposals whereby all three hospital A&E departments will be able to continue to receive “blue light” ambulances and that most patients would be diagnosed, stabilised and would receive the start of their treatment at the nearest local A&E, rather than all “blue light” ambulances transporting people direct to a specialised emergency centre in Basildon.
- The forthcoming consultation document will explain proposals for:
  - Enhancing A&E at all three hospitals
  - Specialised stroke services
  - Specialised vascular services
  - Specialised cardiac services
  - Specialised respiratory services
  - Specialised gynaecological surgery
  - Specialised urological surgery
  - Specialised renal services
  - Trauma and orthopaedics surgery
- The Joint Committee of the five CCGs considered and approved the draft pre-consultation business case for submission to the national regulators. The Joint Committee will sign off the final business case and consultation documents on behalf of the five CCGs, prior to the start of consultation. This is expected to take place on 29 November.

During discussions the following points were made:

- It is proposed that current informal Maternity and Paediatric care will be formalised.

- The formal consultation will be designed to ensure that any misleading information that emerges about the STP can be addressed at the earliest opportunity, ensuring that members of the public continue to be well informed about the proposals.
- Members were reassured that members of the public wishing to respond only to proposals about Orsett Hospital will not be expected to consider the whole STP consultation document. Members were advised that proposals for the STP and Orsett hospital will be provided in separate bespoke consultation documents.

RESOLVED: The Board noted the update

**5. Health and Wellbeing Strategy Objective 1A - All children in Thurrock making good educational progress.**

Rory Patterson Corporate Director, Children's services described the strategic Plan on a Page to members which:

- Provides a vision for schools in Thurrock, agreed by schools and Thurrock council. The vision is to ensure that every school and setting in Thurrock is continuing the journey to outstanding and providing excellent learning experiences for all of our children and young people so that they are the best they can be.
- Sets out strategic priorities for the forthcoming academic year which includes producing a meaningful SEND strategy and action plan; ensuring value for money and improved outcomes for some of our most vulnerable and disadvantaged pupils and developing appropriate alternative provision, where possible, in borough.
- Contains key actions agreed with schools and expected outcomes.
- Is refreshed in partnership with schools on an annual basis

Andrea Winstone, School Improvement Manager, explained provisional data on pupil attainment to members. Key points included:

- Thurrock is performing above the national average across many indicators.
- As a result of a continued support for Early Years teaching & moderation in schools, outcomes at the end of Reception (GLD – Good Levels of Development) are above national for the fifth year running.
- The Good Level of Development (GLD) measure is awarded at the end of EYFS when a pupil has achieved at least the expected level in the entire prime areas of learning and in literacy and mathematics. Early indications suggest the GLD has risen again and exceeds the national average for the fifth year.
- The 2017 GCSE results show an improvement on last year. The key measure of combined English (EN) and mathematics (MA) is being used by the Department of Education this year and will be supplemented to include Progress 8 and Attainment 8.

During discussions the following points were made:

- Board members welcomed results that had been achieved by Thurrock schools and settings and the continually improving educational outcomes for children and young people.
- Records are kept on all children that are schooled at home by the Education Welfare Service. If there are concerns about children they are referred to Children's Social Services. All parents and carers of children schooled at home receive guidance issued to schools, including immunisation advice. The council has no statutory provision to inspect the quality of education being provided to children schooled at home.
- Children living in transient communities are monitored as much as practicable. Mandated checks are undertaken in school and at home. However, it was acknowledged that potential gaps in intelligence may occur where children are not registered with a GP.
- Rory Patterson, Corporate Director for Children's Services, agreed to consider the issues raised and report directly on the monitoring of children not in school to the Portfolio holder for Children and Adults Social Care, Cllr Little.

**Action Rory Patterson**

- To ensure that 'more able children' receive high quality education and support action has been identified as a priority on the Strategic Plan on a Page, agreed with schools.

RESOLVED: Health and Wellbeing Board members noted the provisional outcomes of the summer 2017 tests and examinations and commended schools, pupils, and parents/carers on their achievements.

## **6. New Models of Care - A Case for Change**

Ian Wake, Director for Public Health, provided a PowerPoint presentation to members on the new models of care, case for change. Key points included:

- The case for change new models of care pilot has been informed by the Annual Report of the Director of Public Health 2016, the Tilbury Integrated Healthy Living Centre Needs Assessment and the Needs Assessment to support the development of an Accountable Care Partnership for Tilbury.
- The existing system can often be fragmented whereby:
  - There is an inadequate understanding of patient/client flow between constituent parts of the system.
  - The money and the patients are in the wrong place
  - Inadequate quality in Primary Care, Community Care and ASC keeps the money and the people in the wrong place
  - Solving the quality issue requires integrating the system
  - a period of double running may be required to solve the problem
- It is recognised that 50% of the Health and Social Care budget is currently allocated to 1.8% of the population of Thurrock and those with the most complex needs.

- A mixed skill workforce can help to address the balance of the current deficit of GP appointments to meet demand by ensuring that individuals can access a professional who can provide necessary support.
- As part of enhancing the capability and capacity of primary care a number of programmes have been developed including:
  - Social Prescribing
  - The strengthening of Patient Participation Groups
  - Front door triage
- To support GP surgery resilience it has been agreed that the mixed skilled workforce can be shared between practices.
- Long Term Conditions (LTCs) remain a challenge. Finding and treating 100 people with high blood pressure will save 10 strokes over a three year period. The introduction and roll out of a long term condition Management Card will support GPs with identifying and managing LTCs.
- The new model of care comprises five pillars of a holistic person centred approach, personal, localised, proactive and coordinated services.

During discussions the following points were made:

- Board members welcomed the new model of care and acknowledged the importance of ensuring that the right interventions are provided in the right place, at the right time.
- It is important to ensure that good practice demonstrated by other areas across the country is considered and incorporated into the Thurrock model where it is appropriate to do so.
- Board members acknowledged that it can be a challenge to introduce a whole system approach and welcomed local partners in Thurrock developing innovative approaches to integration of services.
- Board members welcomed the robust governance structure established for the Accountable Care Partnership.

RESOLVED: Board members noted the update and agreed to receive a further update at a future meeting.

## **7. Health and Wellbeing Strategy Outcomes Framework**

Ceri Armstrong, Senior Health and Social Care Development Manager, provided a summary of proposals made in the Board's report which comprised:

- Proposals to revise Key Performance Indicators previously approved by Board members in July 2016 to ensure that they remain current and fit for purpose. Where possible key performance indicators reflect corporate and wider reporting measurements.

- Describing that the report included in the meeting papers provided Board members with an update on progress being made against specific key performance indicators, where data is available

Board members welcomed the report and amendments to key performance indicators.

RESOLVED: Board members:

- Agreed proposed revisions to Key Performance Indicators within the framework;

## **8. Integrated Executive Committee (ICE) Minutes**

RESOLVED: Board members noted the ICE minutes for meetings that took place on 17 and 31 August 2017.

## **9. Health and Wellbeing Board Work Programme**

Health and Wellbeing Board members noted the future work plan. It was agreed that standing STP item will be a substantive item at January's Health and Wellbeing Board meeting.

RESOLVED: The Health and Wellbeing Board work plan was noted by members.

**The meeting finished at 3.37pm**

Approved as a true and correct record

**CHAIR**

**DATE**

**Any queries regarding these Minutes, please contact  
Democratic Services at [Direct.Democracy@thurrock.gov.uk](mailto:Direct.Democracy@thurrock.gov.uk)**