

**PUBLIC Minutes of the meeting of the Special Health and Wellbeing Board held
11th February 2016 at 2.00 pm**

Present: Councillors Barbara Rice (Chair), Brian Little and Joy Redsell

Mandy Ansell, Acting Interim Accountable Officer Thurrock CCG
Graham Carey, Chair of Thurrock Adults Safeguarding Board
Roger Harris, Director of Adults, Health and Commissioning
Kim James, Chief Operating Officer, Thurrock Healthwatch
David Archibald, Interim Director of Children's Services
Malcolm McCann, South Essex Partnership Foundation Trust
Kristina Jackson, Chief Executive, Thurrock CVS
Tania Sitch, Integrated Care Director Thurrock, NELFT
Michelle Stapleton, Basildon & Thurrock University Hospital
Ian Wake, Director of Public Health
Dr Anjan Bose, Clinical Representative, Thurrock CCG

Apologies:

Councillor Bukky Okunade
Andrew Pike, Director of Commissioning Operations, NHS
England Essex and East Anglia
Councillor John Kent, Leader of the Council
Lesley Buckland, Lay Member, Thurrock CCG
David Peplow, Chair of Local Safeguarding Children's Board
Jane Foster- Taylor, Executive Nurse NHS CCG
Lucy Magill, Head of Residents Services
Clare Panniker, Chief Executive Basildon and Thurrock
University Hospitals Foundation Trust
Dr Anand Deshpande, Chair Thurrock CCG
Jane Foster-Taylor, Executive Nurse Thurrock CCG

In attendance:

Ceri Armstrong, Strategy Officer
Tim Elwell- Sutton, Public Health Registrar (Item 5)
Mark Tebbs, Thurrock CCG (Item 6)

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

2. Minutes

The minutes of the Health and Wellbeing Board, held on 7th January 2016, were approved as a correct record

3. Urgent Items

Public Health Grant

Ian Wake, Director of Public Health, provided an update on the Public Health Grant.

Ian stated that the Department of Health had just published the Public Health Grant allocations for 2016-17. Ian reminded the Board that a 6.2% in-year cut for the 2015-16 financial year had already been applied and would be recurrent. A further cut amounting to £267,000 had been allocated which amounted to a 7.34% total reduction. Board members were made aware that further detailed work was needed to fully understand the ramifications of the budget including its impact on current and future commissioning plans. Ian would be providing a detailed report on the full impact of the cuts to the Grant to a future Board meeting.

Roger Harris stated that in cash terms, the total reduction equated to £924,000 on a £12.5 million Public Health budget. This would have a significant impact.

4. Declaration of Interests

There were no declarations of interests stated.

5. Thurrock Joint Health and Wellbeing Strategy 2016-2021

Tim Elwell-Sutton, Public Health Registrar presented Thurrock's Joint Health and Wellbeing Strategy 2016-2021. Tim stated that the following aspects had been considered when developing the Strategy: that it is co-created through effective engagement with providers and the community; driven using intelligence from the Joint Strategic Needs Assessment (JSNA); adds value to strategic plans to reduce health inequalities; addresses wellbeing and not just health; systematically aligns partner resources with strategic priorities; has clear delivery mechanisms in place; holds partners to account for actions; and that outcomes are presented in an accessible and compelling way.

Tim stated that the Strategy's focus was on prevention and early intervention to ensure that Thurrock people could 'add years to life and life to years'

The goals and objectives set out within the Strategy focused on the areas that would make the most difference to the health and wellbeing of Thurrock people. These had been developed through a period of engagement and in response to detailed needs analysis.

Tim stated that whilst the timeframe for engagement with the community and stakeholders had been limited, it had been very beneficial.

Kim James stated that Healthwatch had managed to canvass and speak face to face with 250 people, with survey responses still being received. Kim stated

that alongside the consultation document, a piece of work had been conducted to ask residents what they thought of the engagement survey. Kim stated that many people had commented that they had not seen the first Strategy and wanted to know what it had achieved. Kim stated that the consultation had been circulated widely across the Borough including to churches, ethnic groups, mums and also residents who commute outside of the Borough. The contact details of those who fed back have been collated and a suggestion was that a focus group be held in the future to plan further work connected to the Strategy – e.g. action plans. Kim stated that once the Strategy was finalised, Healthwatch would be organising to engage with the community on a theme per month. The themes would mirror the Strategy's goals and be used to inform action plans, performance monitoring, and feedback to the Board.

Kristina Jackson stated that part of the engagement process had included attendance at some of the Borough's Community Forums and that this had been welcomed. The chance for the Forums to give feedback on the Strategy and have an input was felt to be beneficial. Kristina stated that this Strategy was looking more like a partnership approach than a top down approach and would welcome involvement in developing the Strategy further.

Tim stated that some of the themes to come from engaging with the community included Air Quality; Access to GPs; Access to open and green space and support for Mental Health. These themes had helped to develop the Strategy and were reflected within it.

Tim gave the Board an overview of the key aspects of the Strategy including the five goals, principles, and also the objectives. Tim stated that one of the intentions of having a goal-based Strategy was to allow the Board and also the community to hold partners to account. Performance indicators have been set and are contained within an Outcomes Framework. The indicators help to define what success looks like. Tim made the Board aware that there was further work to be done to the Outcomes Framework including the modelling of targets.

Tim stated that further work would also be taking place to develop co-produced action plans. The action plans would assign action owners enabling the relevant organisations and individuals to be held to account for their part in delivering the Strategy.

The Chair acknowledged the immense amount of work that officers, members and partner organisations had carried out over the lifespan of the first Strategy. Cllr Rice stated that it was important to highlight the success of the previous Strategy and what had been achieved.

Roger asked the representatives of the three key NHS providers how their respective organisations could ensure that the relevant elements of the Strategy were incorporated into their key plans.

Malcolm comments that one of the ways in which the Strategy could be embedded within provider organisations' plans would be to place the objectives or indicators into their contracts.

Tania stated that she would welcome the chance to be measured against the Strategy's objectives and that partners would also be able to do this via their contribution to actions contained within the Strategy's action plans.

Michelle commented that it was positive that Basildon Hospital being out of 'special measures' had been acknowledged within the report. Michelle stated that whilst in 'special measures', the Hospital had had to be internally focused whilst but that the Hospital was now focusing on being more outward looking – which included the creation of her role. Michelle commented that she was keen to take the Strategy to Hospital's Board.

Roger further commented that Thurrock's regeneration agenda was very strong, and as such it was important to have an equally strong 'People Strategy'. The Health and Wellbeing Strategy would act as that People Strategy.

Ian stated that the buy-in with the community and partners had been influential and that this was something that had not always been achieved in the past.

RESOLVED:

- 1.1 That the Health and Wellbeing Board agree the draft Thurrock Joint Health & Wellbeing Strategy and Outcomes Framework.**
- 1.2 That the Health and Wellbeing Board delegate authority to approve any further changes to the Strategy and Outcomes Framework to the Board's chair.**

6. Thurrock Transformation Plan: Delivering our Vision

Mark Tebbs, Head of Integrated Commissioning at Thurrock CCG stated the Transformation Plan outlined the CCG's vision for providing health and care closer to or at home for the population of Thurrock – For Thurrock in Thurrock. This was in line with the strategic direction set out in the 5 year Strategic Plan 2014-19.

The Plan also aligned with Thurrock's Health and Wellbeing Strategy and would build on the aims of the Better Care Fund.

Mark stated that patients often said they found the health and care system overwhelmingly complex and disjointed. Whilst there had been major improvements in health and care services recently, these improvements had not kept pace with changes in society over the years. If the changes were not addressed, the system would struggle to meet the population's future needs.

NHS England had launched 50 vanguard sites in 2015 to test new models to integrated care and there was lots that could be learnt from their experience.

Mandy stated that the CCG were working against the backdrop of the Essex Success Regime which for the Essex CCGs and Acute Trusts was proving a challenge.

was Cllr Rice stated that we need to think about how to communicate this strategy to the community, for example through roadshows or like the meeting that held in Tilbury regarding Health and Primary Care in the area.

Kim commented that there is a two page document that summarises the Strategy in simple terms for all residents to be able to understand. Healthwatch were currently in the process of distributing the document between now and March for when the consultation starts.

Cllr Redsell asked whether a 47.5% increase in the over 85 population between 2001 and 2011 meant people were living better lives, and Ian replied that whilst people were living longer, they were living with multiple long term conditions.

RESOLVED:

1.1 The Board is asked to note and comment on the contents of the transformation plan and the CCG's Vision for Thurrock.

7. Work Programme

The Chair stated that the meeting on the 10th march will be extended to start at 2.00pm and finish at 5.00pm.

The meeting finished at 3.07 pm.

Approved as a true and correct record

CHAIR

DATE

Any queries regarding these Minutes, please contact

Democratic Services at