

Suffolk Health and Wellbeing Board

A committee of Suffolk County Council

Unconfirmed

Minutes of the meeting of the **Suffolk Health and Wellbeing Board** held on 12 December 2013 at 10:00 am in the Elisabeth Room, Endeavour House, Ipswich

Present:

Suffolk County Council:

Councillors Joanna Spicer (**Chairman**),
Lisa Chambers and Alan Murray
Deborah Cadman, Chief Executive
Carol Carruthers, Assistant Director, Children and
Young People's Services
Tessa Lindfield, Director of Public Health
Bernadette Lawrence, Assistant Director, Adult
and Community Services
Andrew Evans, Chief Executive

NHS Great Yarmouth and
Waveney Clinical Commissioning
Group

Dr Mark Shenton, CCG Chairman

NHS West Suffolk Clinical
Commissioning Group (CCG)
NHS West Suffolk and Ipswich
and East Suffolk Clinical
Commissioning Groups (CCGs)

Julian Herbert, Accountable Officer (**Vice-
Chairman**)

Ipswich Borough Council

Councillor Neil MacDonald

Suffolk Coastal and Waveney
District Councils

Councillor Mary Neale

Babergh and Mid Suffolk District
Councils

Councillor Diana Kearsley

Forest Heath District and St
Edmundsbury Borough Councils

Councillor Warwick Hirst

HealthWatch Suffolk

David Evans, HealthWatch Suffolk Chairman

Police and Crime Commissioner

Tim Passmore

Suffolk Constabulary

Temporary Assistant Chief Constable David
Skevington

Suffolk's Voluntary and
Community Sector Congress

Jacqui Martin

Suffolk's Chief Executive Group

Charlie Adan

NHS England (East Anglia Area)

Adrian Marr

Also present: Councillor Tony Goldson, Chairman of the Health Scrutiny Committee
Councillor Colin Spence, Chairman of the Safer Suffolk Partnership and Suffolk County Council Cabinet Member for Public Protection

29. **Public Participation Session**

There were no applications to speak in the Public Participation Session.

30. **Apologies for Absence and Substitutions**

Apologies for absence were received from Councillor Dr Michael Bamford, substituted by Councillor Diana Kearsley, Dr Christopher Browning, Sue Cook, substituted by Carol Carruthers, Anna McCreddie, substituted by Bernadette Lawrence, Chief Constable Douglas Paxton, substituted by Temporary Assistant Chief Constable David Skevington, and from Dr John Stammers.

31. **Declarations of Interest**

There were no declarations of interest or dispensations.

32. **Minutes of the Previous Meeting**

- a) The Minutes of the meeting held on 5 September 2013 were confirmed as a correct record and signed by the Chairman.
- b) With regard to Minute No. 20(e), it was confirmed that information about the Public Health Ring Fenced Grant in Suffolk would be circulated to all Board members.
- c) With regard to Minute No. 21(b), the Board noted that the subject of the Primary Care Strategy was not on the current agenda, because the consultation on a national strategy had now closed. However, discussions were continuing about developing strategies for East Anglia and for Suffolk. It was confirmed that the voluntary and community sector would be involved in these discussions. The aim would be to produce a five-year strategy to ensure equity across the region and county.
- d) With regard to Minute 25(a), the Board noted that a response to questions 1, 2 and 11 of the "Caring for our Future" consultation had been drafted and emailed to all Board members for comment. The Chairman had authorised the final response. The Chairman apologised for the fact that time had not allowed for the group referred to in Minute 25(a) to be involved in developing the first draft of the response.

33. **Joint Health and Wellbeing Strategy – Action Plans Monitoring Report**

- a) Tessa Lindfield introduced a report at Agenda Item 5 which provided a first progress update on the four Joint Health and Wellbeing Strategy (JHWS) Action Plans.

Outcome 1

- b) Councillor Neil MacDonald, link member for the children and young people theme, presented an update on Outcome 1 – “Every child in Suffolk has the best start in life”.
- c) The Board heard that some progress had been made in obtaining data to support the evaluation of the Suffolk Family Focus programme. However, some problems remained, and it was agreed that these should be the subject of detailed discussions.

Outcome 2

- d) Councillor Mary Neale, link member for the healthy environment theme, presented an update on Outcome 2 – “Suffolk residents have access to a healthy environment and take responsibility for their own health and wellbeing”
- e) The Board heard that on 7 February 2014 a workshop focusing on the relationship between housing and the preventative health agenda in Suffolk would be held for Board members in partnership with the Suffolk Strategic Housing Partnership. It was noted that a county-wide housing needs assessment was currently underway, and that a housing chapter would need to be included in the Local Enterprise Partnership Plan, so there would be a need to consider how these different timetables could be co-ordinated.

Outcome 3

- f) Councillor Warwick Hirst, link member for the older people theme, presented an update on Outcome 3 – “Older people in Suffolk have a good quality of life”. The Board noted that it would be asked to consider a more detailed progress report on this outcome under Agenda Item 6.

Outcome 4

- g) On behalf of Councillor Dr Michael Bamford, link member for the mental health theme, Tessa Lindfield introduced an update on Outcome 4 – “People in Suffolk have the opportunity to improve their mental health and wellbeing”.
- h) The Board heard that the new Mental Health/Learning Disabilities Joint Commissioning Group would be organising a workshop session in early 2014. The Board requested that the date for this workshop be fixed and made known as soon as possible.

Decision: The Board agreed:

- i) To confirm that it wished performance monitoring reports for the Joint Health and Wellbeing Strategy to be a standing item on the agenda of Board meetings.

- ii) To review the Forward Work Programme to reflect the issues highlighted in the report (Minute No. 41 below refers).

Reason for Decision: Members were satisfied with the format of the report at Agenda Item 5, and wished to continue to have oversight of progress in relation to each JHSW outcome. Where they considered it appropriate, they would modify their forward work programme to include any issues which required further consideration.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

With the agreement of the Board, the Chairman altered the order of business as set out below.

34. **Proposal for the Suffolk Alcohol Strategy**

- a) Tessa Lindfield introduced a report at Agenda Item 7, which set out a draft proposed Suffolk Alcohol Strategy, the aim of which was to contribute to the safety, health and prosperity of the people of Suffolk. The intention was to seek further comment on the draft Strategy over the coming six weeks.
- b) Councillor Colin Spence, as Chairman of the Safer Suffolk Partnership and as Suffolk County Council Cabinet Member for Public Protection, welcomed the Strategy. He considered it important that the Safer Suffolk Partnership, the local Community Safety Partnerships and the Suffolk Voluntary Congress should have an opportunity to comment on the draft Strategy, but doubted whether the consultation could be completed within six weeks. The Board heard that the consultation period could be extended if necessary.
- c) Board members also suggested that Suffolk Domestic Abuse Forum and the local drinks industry should be consulted.
- d) Members noted that Theme 3 included a commitment to improve access to mutual aid and support for families and people in recovery, and agreed that this point required further emphasis.
- e) The Board also noted that community based medical assistance for withdrawal from alcohol dependency was available to only a small percentage of the people who could benefit from it. Members agreed that it would be helpful to include further information about what could be done to increase the numbers receiving this kind of help.
- f) Members heard that it was intended that a new Alcohol Strategic Partnership Group should be formed to oversee delivery of the actions set out in the Strategy. They agreed to invite Councillor Colin Spence to chair this Group.

Decision: The Board:

- i) approved the draft Suffolk Alcohol Strategy as set out in the report at Agenda Item 7, subject to amendment to reflect the comments set out in Minutes 34 (d) and (e) above;

- ii) agreed in principle that the delivery of the Suffolk Alcohol Strategy should be overseen by a multi-agency commissioning group, reporting to an Alcohol Strategic Partnership Group, as set out in paragraph 6 of the report at Agenda Item 7, subject to further information about the detail of the proposed membership of the two groups;
- iii) agreed that the amended draft Suffolk Alcohol Strategy should be circulated widely as soon as possible. Board members would receive information about the groups to which the draft Strategy had been sent, and would be invited to suggest additions to the circulation list.
- iv) Agreed to receive a progress report from the Alcohol Strategic Partnership Group six months after its launch.

Reason for Decision:

The Board recognised that reducing the harm caused by alcohol misuse was an important part of the Joint Health and Wellbeing Strategy. They considered that the draft Suffolk Alcohol Strategy (subject to minor amendment) set out an appropriate means of encouraging safe and sensible drinking and reducing the harmful effects of alcohol misuse. Members anticipated that the proposed governance structure would facilitate the monitoring of the delivery of the actions set out in the Strategy. However, they wished to retain oversight of the Strategy, and therefore wished to receive a progress report in due course.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

35. **Ageing Well**

Councillor Warwick Hirst, link member for the older people theme, introduced a report at Agenda Item 6 which provided an update on delivery of the Board's Joint Health and Wellbeing Strategy Priority 3 "older people in Suffolk have a good quality of life".

Decision: The Board agreed:

- i) That priority one: "Ensuring that health and social care are integrated at the point of delivery" and priority two: "A focus on prevention including the promotion of healthy lifestyles and self-care" descriptions should be the overarching principles for the delivery of the whole Joint Health and Wellbeing Strategy.
- ii) That the priorities in the Outcome 3 action plan should be reworded by a recently established steering group, taking into account the new principles set out in paragraph 13 of the report at Agenda Item 6. Further, that the recommendations of the steering group should be considered by the Board at its meeting on 12 June 2014.
- iii) That all agency and community work with older people should be based on building on the person's current strengths to enable them to be as connected, active, well and independent as possible.

- iv) To endorse the principle that success measures should be developed against the impact on the individual and the community rather than on organisational achievements.
- v) That in developing the Outcome 3 action plan and assessing its impact, the views of older people and their family carers should be included.
- vi) That the Suffolk Health and Wellbeing Board Programme Office should discuss how housing issues would be included across the priority action plans and make a recommendation to a future Board meeting, taking into account the outputs of the joint Board and Suffolk Strategic Housing Partnership housing workshop scheduled for 7 February 2014.
- vii) That the use of the term “age friendly Suffolk” was not supported.

Reason for Decision:

The Board was aware that the Suffolk Commissioners Group and the Suffolk Leadership Partnership group had been in operation for seven months. These groups were tracking the progress of the integration of health and social care against action plans. Members recognised that Government policy was moving fast and would drive a timescale for the Health and Wellbeing Board to agree proposals for better integration of the system in February 2014. Therefore, members considered it sensible that integration should become an overarching work stream of the Health and Wellbeing Board as it was a major transformation programme that would impact across the entirety of the Board’s work.

Members agreed with the Board link member and the steering group that the time was right to build on the current plan to ensure everyone could engage with its objectives and achieve measurable change for older people.

Members considered that rather than using the term “age friendly Suffolk”, the Board should continue to use its previously agreed objective “older people in Suffolk have a good quality of life”.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

36. **Future Service Planning within the Health and Wellbeing System**

- a) Julian Herbert introduced a report at Agenda Item 8, which provided an overview of the different planning systems between health and local government. It highlighted the fact that as Government expectation for integration across health and wellbeing increased, it would be important to understand and, where possible, align the planning processes across all of the Board’s member organisations.
- b) The Board heard that Government had recently renamed the Integration Transformation Fund. It was now called the “Better Care Fund”. Members were also advised that this Fund was to be

made up entirely from existing funding, and that there was no new money associated with it. An announcement on the value of the Better Care Fund for Suffolk was expected within the next two weeks.

- c) It was confirmed that the Disabled Facilities Grant, currently administered by district and borough councils, would be subsumed into the Better Care Fund. This highlighted the need for district and borough councils to be fully involved with the System Leadership Partnerships.

Decision: The Board agreed:

- i) To endorse the principles: that the development of strategic and budget plans should be aligned as much as possible going forward across all of the Board's member organisations; that district and borough councils should be fully involved in planning how the Better Care Fund would be used in Suffolk; and that the district and borough councils should participate in the System Leadership Partnerships. Further, to request that the membership of the System Leadership Partnerships be circulated to all Board members."
- ii) To ask the System Leadership Partnerships to consider the impact of the different planning systems across all Board members when developing work to integrate health and wellbeing in Suffolk.
- iii) To be mindful of and, wherever possible, work to reduce future challenges presented by the differently driven systems and decision-making protocols for individual organisations.
- iv) To seek opportunities to encourage integrated approaches in the future where possible;
- v) To recognise the importance of the continued delivery of the Joint Health and Wellbeing Strategy.

Reason for Decision:

The Board acknowledged that the Better Care Fund arrangements represented the beginning of a very significant transformation, which would take place within a relatively tight timetable. Members agreed that the Fund itself was simply a starting point and that the new arrangements would offer an opportunity to create a situation where all those organisations concerned with the health and wellbeing of the same population could work together to improve its health and wellbeing.

Members were aware that the differences in the planning systems across the Board's membership could have serious implications for the achievement of integration. They recognised the importance of reducing any associated risks, and agreed that the integration of health and social services would need to be the subject of further informal discussions.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

37. **Winter Planning**

- a) Julian Herbert and Andy Evans introduced a report at Agenda Item 9, providing an update on the winter planning by the Suffolk clinical commissioning groups and local authorities. The Board heard that winter planning had been considered in some detail by the Health Scrutiny Committee, whose Chairman, Councillor Tony Goldson, was present at the Board meeting and was invited to join in the discussion of this item.
- b) The Board was aware of the importance of preventative measures in reducing the number of emergency hospital admissions during the winter period. Members agreed that as health and social care services became more integrated, one of the first priorities should be to move to the single management of the operational arrangements relating to the discharge of patients.

Decision: The Board agreed:

- i) To note the winter planning arrangements that had been put in place across Suffolk by the Suffolk clinical commissioning groups and local authorities.
- ii) To suggest that, where this was not already the case, district and borough councils should be represented on the urgent care networks or boards in each CCG area.
- iii) To request that in future, updates on winter planning be provided where there was an issue requiring action to be taken by the Board.

Reason for Decision:

The Board recognised that, whilst no one organisation had overall responsibility, all Board member organisations were jointly accountable for preparing to meet the increased demand for services which was expected over the winter season. District and borough councils had an important role to play, therefore members considered that they should be involved in the planning of urgent care.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

38. **Effective Communication and Collaboration**

- a) Tony Osanski, Strategic Director, Suffolk Coastal and Waveney District Councils, and Programme Office Lead for Communications, introduced a report at Agenda Item 10, providing a strategic context for collaborative working and effective communication. He spoke about the cultural shift which would be required in order to achieve effective collaboration.
- b) Chris Pyburn, Public Health Manager, Social Marketing and Knowledge, Suffolk County Council, made a presentation to the

Board. He highlighted the need to identify key messages and then agree which person or organisation would be the most appropriate messenger. Members noted that alternative designs for a Suffolk Health and Wellbeing logo would be on display at the end of the meeting.

- c) The Board noted that the communications officers would need to be prepared to challenge leaders of the member organisations in order to ensure that the principle of collaboration became embedded.
- d) Members were aware that further consideration would need to be given to the funding mechanism for the Board, including how a new website and targeted campaigns were to be financed.

Decision: The Board agreed:

- i) To endorse the proposed principles and framework for a Suffolk Health and Wellbeing Communications Plan as outlined in the report at Agenda Item 10, including the principle of establishing a simple parent logo to which all partners could subscribe, with associated sub-logos that could be linked to specific campaigns.
- ii) To review the effectiveness of the Communications Plan on a regular basis.

Reason for Decision:

The Board recognised that a Suffolk Health and Wellbeing Communications Plan, regularly reviewed, would be an essential element in ensuring effective joint working and effective communication.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

39. **National Autism Strategy**

- a) Bernadette Lawrence introduced a report at Agenda Item 11, concerning the role of the Health and Wellbeing Board in planning, commissioning and reviewing services for adults with autism. The report provided a summary of the key actions arising from a 2013 self-assessment, and where possible, an assessment of the progress made since a previous self-assessment carried out in 2011.

Decision: The Board:

- i) noted the summary of the recent self-assessment as set out in the report at Agenda Item 11;
- ii) agreed the actions highlighted in the main body of the report at Agenda Item 11; and
- iii) agreed that at its meeting on 13 March 2014 it would receive information about recent reforms for children with Special Educational Needs (SEN).

Reason for Decision:

The Board recognised that the Autism Act 2009 laid down statutory obligations for improving the lives of adults with autism, as set out in paragraph 6.1 of the report at Agenda Item 11. Members were aware that the statutory obligations were the responsibility of local councils and NHS bodies, but that the statutory guidance made it clear that the Board also had a key part to play in the planning, commissioning and reviewing of services for adults with autism.

Members wished to receive information about recent reforms for children with SEN in order to gain a fuller understanding of services for people with autism from birth through to adulthood.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

40. **Information Bulletin**

a) Members received an Information Bulletin at Agenda Item 12. A further update on the Francis Report from the West and Ipswich & East Suffolk CCGs had been circulated to Board members.

b) The following were among the points noted:

On paragraph 3 – “Caring for Our Future”: It was confirmed that the Government would respond to the consultation in 2014.

On paragraph 4 – Suffolk Commissioners Group update: It was agreed that the membership of the Group would be circulated to the Board.

On paragraph 5 – drug testing on arrest (pilot): The Board requested a further update when the results of the pilot were available.

On paragraph 7 – Suffolk Family Focus: The Board noted that whilst the primary focus of the programme was not finance or governance, some clarification of these issues was required.

41. **Forward Work Programme**

a) At Agenda Item 13 the Board considered its Forward Work Programme.

Decision: The Board agreed:

i) To include in the Forward Work Programme items relating to: the Alcohol Strategy; Ageing Well; housing; the Communications Plan; children with Special Educational Needs; and drug testing on arrest, as agreed in Minutes 34, 35, 38, 39 and 40 above.

ii) That Board members wishing to suggest any further additions or amendments to the Forward Work Programme should ask their Programme Office member to put forward the proposed changes for consideration.

Reason for Decision:

The Board recognised that there needed to be some flexibility in the Forward Work Programme, and that the Programme Office was well placed to consider areas where the Board would need to have input.

Alternative options: None considered.

Declarations of interest: None declared.

Dispensations: None noted.

42. **Urgent Business**

There was no urgent business.

43. **Dates of Future Meetings**

- a) The Board noted that at 10:00 am on 7 February 2014, there would be an informal event involving Board members and the Strategic Housing Partnership. This would be followed by a formal Board meeting at 2:00 pm. Both meetings were currently scheduled to take place at Endeavour House, Ipswich.
- b) Dates of future Board meetings were noted, and venues were agreed as follows:

Friday, 7 February 2014	Endeavour Hse, Ipswich
Thursday, 13 March 2014	West Suffolk Hse, Bury St Edmunds
Thursday, 12 June 2014	provisional venue: Aداstral Park, Ipswich
Thursday, 24 July 2014	Endeavour Hse, Ipswich
Wed 10 September 2014	venue to be confirmed
Thurs 20 November 2014	provisional venue: Sudbury Health Centre
Thursday 15 January 2015	venue to be confirmed
Friday 13 March 2015	venue to be confirmed

- c) The Board noted that dates after May 2014 were subject to confirmation at the Annual Meeting of the County Council on 30 May 2014.

The meeting closed at 1:00 pm.

