

## Suffolk Health and Wellbeing Board

*A committee of Suffolk County Council*

**Minutes** of the meeting of the **Suffolk Health and Wellbeing Board** held on 12 May 2016 at 9:30 am in the Elisabeth Room, Endeavour House, Ipswich

Present:

Suffolk County Council (SCC):	Councillor Tony Goldson, Cabinet Member for Health ( <b>Chairman</b> )
	Councillor Beccy Hopfensperger, Cabinet Member for Adult Care
	Councillor Gordon Jones, Cabinet Member for Children's Services
	Tessa Lindfield, Director of Public Health
	Sue Cook, Corporate Director for Children and Adult Services
	Dr John Stammers, CCG Chairman
NHS Great Yarmouth and Waveney Clinical Commissioning Group (CCG)	Andy Evans, CCG Chief Executive
NHS Great Yarmouth and Waveney Clinical Commissioning Group (CCG)	
NHS West Suffolk Clinical Commissioning Groups (CCG)	Dr Christopher Browning, CCG Chairman
NHS Ipswich and East Suffolk Clinical Commissioning Group (CCG)	Dr Mark Shenton, CCG Chairman
NHS Ipswich and East and West Suffolk Clinical Commissioning Groups (CCGs)	Ed Garratt, CCG Chief Officer
Ipswich Borough Council	Councillor Neil MacDonald
Suffolk Coastal District Council and Waveney District Council	Councillor Mary Rudd
Babergh and Mid Suffolk District Councils	Councillor Diana Kearsley
Forest Heath District and St Edmundsbury Borough Councils	Councillor Robin Millar
Healthwatch Suffolk	Dr Tony Rollo
Deputy Chief Constable	Steve Jupp
Suffolk's Voluntary and Community Sector Congress	Nicola Bradford
Suffolk's Chief Officers Leadership Team	Charlie Adan
NHS England	Carole Theobald

### 67. Confirmation of appointment of Chairman

The Board confirmed the appointment of Councillor Tony Goldson as its Chairman for the remainder of the 2015/16 municipal year.

*Councillor Goldson took the chair. He welcomed members, representatives of 'providers', guests and observers as follows:*

*Alison Armstrong, Norfolk and Suffolk Foundation Trust*

*Sue Cook, in her new role as Corporate Director for Children and Adult Services*

*Andrew Cozens, Independent Social Care and Health Policy and Improvement Specialist*

*Jane Day, Head of Health Studies, University Campus Suffolk*

*Stephen Dunn, Chief Executive of West Suffolk Hospital Trust*

*Ed Garratt, in his new role as Chief Officer for Ipswich & East and West Suffolk Clinical Commissioning Groups*

*Nick Hulme, Chief Executive of Ipswich Hospital Trust*

*Alister Huong, Chair of the Local Pharmaceutical Committee*

*Councillor Diana Kearsley, Mid Suffolk District Councillor, now representing Mid Suffolk and Babergh District Councils (having previously been the nominated substitute)*

*Mark Sanderson, Deputy Chief Fire Officer*

*Richard Watson, Chief Redesign Officer, NHS Ipswich and East Suffolk CCG*

*David White, Chairman, Ipswich Hospital Trust*

*The Chairman congratulated all concerned, but especially Natacha Bines, Programme Manager, Public Health and Protection, on the fact that Suffolk County Council had been "highly commended" in the research impact awards organised by the Local Area Research and Intelligence Association, for the successful way in which Suffolk's Joint Strategic Needs Assessment website presented local area research.*

*The Chairman drew attention to the fact that Tessa Lindfield would be leaving her post of Director of Public Health at the end of May 2016. On behalf of the Board, he thanked her for her contribution to its work and development and for the strong support she had given to the chairmen. He paid tribute to her work locally and nationally as a champion for health, and thanked her personally for the support she had given him in his role as Cabinet Member for Health. The Board joined the Chairman in wishing Tessa every success in the future.*

68. **Election of Vice-Chairman**

Ed Garratt was elected as Vice-Chairman of the Board for the period up to the end of the 2016/17 municipal year.

69. **Public Participation Session**

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

70. **Apologies for Absence and Substitutions**

Apologies for absence were received from: Deborah Cadman; Councillor Steve Gallant (substituted by Councillor Mary Rudd); Tim Passmore; and

Chief Constable Gareth Wilson (substituted by Temporary Deputy Chief Constable Steve Jupp).

71. **Declarations of Interest and Dispensations**

There were no declarations of interest or dispensations.

72. **Minutes of the Previous Meeting**

The minutes of the meeting held on 10 March 2016 were confirmed as a correct record and signed by the Chairman.

73. **Feedback from the Health in All Policies Review**

a) Tessa Lindfield introduced a report at Agenda Item 7, setting out the feedback received from a Health in All Policies (HIAP) review in the context of the Health and Wellbeing Board. Sara Blake, Head of Localities and Partnerships, Public Health and Protection, presented the feedback.

b) In the ensuing discussion, the following were among the points noted:

- There was a recognition that the feedback resonated with members' experience of the Health and Wellbeing Board. It was acknowledged that the Board was faced with the challenge of leading on change when it did not control the levers with which to bring about change.
- The voluntary sector agreed that there were currently too many priorities. They welcomed the recommendation that the County Council should build on partnerships and develop greater trust amongst key players.
- Some members said they would welcome a regular opportunity to hear about the personal stories of patients or service users through a variety of media such as video clips, case histories or patient complaints.

**Decision:** The Board agreed:

- a) To note the feedback from the Health in All Policies review as set out in the report at Agenda Item 7.
- b) To consider the feedback as part of an informal partnership meeting (following the Board meeting) which would be considering the future form and function of the Board.

**Reason for Decision:** The Board agreed that it was important to use the feedback from the review to ensure effective delivery of the refreshed Suffolk Joint Health and Wellbeing Strategy and to make best use of the resources of the Suffolk system.

**Alternative options:** None considered.

**Declarations of interest:** None declared.

**Dispensations:** None noted.

#### 74. **The Way Forward**

- a) Tessa Lindfield introduced a report at Agenda Item 8 which provided an update in relation to the emerging Sustainability Transformation Plans (STPs) and outlined an approach to developing and delivering both the outcomes and the cross cutting themes within the refreshed Joint Health and Wellbeing Strategy. The report also provided some contextual information for an informal session (to follow the Board meeting) which would consider the form, function and principles of the Board itself.
- b) Nick Hulme, Chief Executive of Ipswich Hospital Trust and chairman of the group steering the development of the STP for Suffolk and North Essex, spoke about the work done on the STP so far. There would need to be an acceptance that the only way to effect real change was to do things differently, which would require the organisations involved to abandon any traditional instinct for self-preservation and could lead to some difficult discussions. Nevertheless, the group must not allow these perceived difficulties to distract it from the truly difficult but vital work of putting prevention of ill health at the core of the STP.
- c) Richard Watson, Chief Redesign Officer, NHS Ipswich and East Suffolk CCG, presented the report at Agenda Item 8. He explained that it related to Suffolk (excluding Waveney) and North East Essex. At Appendices A and B were two checkpoint reports which had been submitted to NHS England. Initial feedback had been positive. The challenge was to save £100 million each year over five years. The final version of the STP was due to be submitted at the end of June 2016.
- d) Andy Evans explained that Waveney sat within the Norfolk and Waveney STP footprint, and highlighted the following points:
  - Despite being part of the Norfolk and Waveney STP, the Great Yarmouth and Waveney CCG was still focussed on having strong working connections with Suffolk.
  - The STP should not be regarded simply as an NHS planning process, as it offered real potential for forcing the pace of the integration of public services.
  - Compared to the rest of Norfolk and Suffolk, Lowestoft and Great Yarmouth had high levels of deprivation and NHS England had been very helpful in recognising the danger that this could be underestimated.
  - In Great Yarmouth and Waveney the System Leaders Partnership had produced a local informal sustainability and transformation plan.
  - The development of community resilience and the prevention of ill health were vital to the STP and must not be overshadowed by the drive to save money. In Norfolk and Waveney the challenge involved finding savings of more than £100 million each year over five years.

- The group working on the Norfolk and Waveney STP had considered current gaps in health, value and finances and had concluded that radical change was needed. There would need to be a significant rationalisation of the services across the three acute hospitals in Norfolk and Waveney, but the needs of residents would be protected. At its next meeting the Board would receive a written report describing the changes proposed.
- e) Sara Blake, Head of Localities and Partnerships, Public Health and Protection, spoke about the suggested approach to developing and delivering the outcomes and the cross cutting themes within the refreshed Joint Health and Wellbeing Strategy, as set out in paragraphs 17 to 32 of the report at Agenda Item 8.
- f) In the ensuing discussion the following were among the points noted:
- The Norfolk and Suffolk Foundation Trust was fully involved in the development of the STPs, and the Plans were seen as an opportunity to gain acceptance that mental health was as important as physical health.
  - The importance of education as one of the wider determinants of health was appreciated and was reflected in the Family 2020 Strategy which itself formed part of the STPs.
  - The changes would need to be explained to patients and staff clearly and in a way that took account of the patient's experience.
  - It was recognised that economic growth was important for the health and wellbeing of Suffolk residents and that the district and borough councils played an important role in creating prosperous communities.

**Decision:** The Board agreed:

- i) To support the emerging Sustainability Transformation Plans (STPs) in Suffolk and confirm commitment to use the STPs to deliver the cross cutting themes within the Joint Health and Wellbeing Strategy and contribute to the delivery of the outcomes.
- ii) To delegate responsibility for delivering the four outcomes and the cross cutting themes to the three forums identified: Children's Trust; Joint Commissioning Group; and Health, Care and Safety Group, subject to further consideration as to whether the voluntary sector was adequately represented on these forums (decision (vi) below refers).
- iii) That the leads for the cross cutting themes be invited to attend the Health, Care and Safety Group.
- iv) That responsibility for the delivery of Outcome Three move from the current Steering Group to the Health, Care and Safety Group.
- v) That the Joint Commissioners Group should look to develop its focus around physical disability during 2016/17 in order to ensure this element of the outcome had a plan in place.

- vi) To ask the Programme Office to scope current participation and make specific recommendations to the Board to ensure that relevant officers and stakeholders were represented on the three delivery forums.
- vii) To reduce the number of Programme Office meetings and focus on information sharing.
- viii) To agree the items proposed for inclusion in the Health and Wellbeing Board forward programme as proposed by the delivery forums in paragraphs 19, 23, 27 and 29 of the report at Agenda Item 8, subject to an amendment to the Outcome Three priorities to acknowledge the role played by families in ensuring that older people had a good quality of life.

**Reason for Decision:**

The Board supported the emerging Sustainability and Transformation Plans (STPs) because members recognised that they could be a means of effecting radical change, which was urgently needed in view of the rapidly increasing demand for health and care services. Members agreed that the Plans provided an opportunity to work in a different way in order to limit demand on hard pressed local services by focusing on the cross cutting themes of the refreshed Joint Health and Wellbeing Strategy which were: developing stronger resilient communities; embedding prevention; addressing inequalities; and integrating health and care services. This would enable effective and efficient delivery of the ambitions in the Joint Health and Wellbeing Strategy (JHWS) for Suffolk.

In supporting the development of the STPs, the Board acknowledged that the scale of the challenge to find savings of at least £100 million each year over five years was unprecedented in the history of the NHS. Members were also aware that the difficulties involved in integrating services must not be underestimated.

Members recognised that the proposed new arrangements were intended to provide a mechanism by which the Board could maintain oversight of the JHWS in a light touch manner and focus on a limited number of priorities in the future. They were in general agreement with the priorities proposed, but wished to see further emphasis on the role of family members in supporting older people.

Members were aware that not all partner organisations were represented on the three delivery forums (the Children's Trust Board, the Joint Commissioning Group, and the Health, Care and Safety Commissioners Group). They therefore agreed that the Programme Office should be asked to consider the membership of the forums and make recommendations to the Board, bearing in mind particularly that there was a view that the voluntary and community sector did not have sufficient opportunity to make its opinions known and influence governance.

**Alternative options:** None considered.

**Declarations of interest:** None declared.

**Dispensations:** None noted.

75. **Family 2020 Strategy**

- a) Sue Cook introduced a report at Agenda Item 9, concerning the Family 2020 Strategy, which it was intended would deliver Outcome One of the Joint Health and Wellbeing Strategy “Giving every child in Suffolk the best start in life”. Richard Selwyn gave a presentation about the Strategy.
- b) Members welcomed the Strategy and there followed a brief discussion, during which the importance of treating people as producers of their own health was highlighted.
- c) The Strategy was now at final draft stage, but there remained an opportunity for comments to be considered. Any Board member wishing to make further comments was asked to contact Sue Cook or Richard Selwyn.

**Decision:** The Board agreed:

- i) To support engagement and delivery of the Family 2020 Strategy as set out in the report at Agenda Item 9.
- ii) To receive a final version of the Family 2020 Strategy in the autumn of 2016.

**Reason for Decision:**

Members recognised that this was a system-wide family strategy, aimed at transforming family services to meet future challenges, and enabling effective delivery of Outcome One of the Joint Health and Wellbeing Strategy.

**Alternative options:** None considered.

**Declarations of interest:** None declared.

**Dispensations:** None noted.

77. **Reports from Scrutiny Committees and other Partnership Groups**

At Agenda Item 10 the Board received written updates on the Ipswich and East Suffolk Integrated Care Network Forum and on the Safe and Strong Communities Group and an oral update on a recent meeting of the Local Health Resilience Partnership.

78. **Information Bulletin**

The Board received an Information Bulletin at Agenda Item 11.

In relation to item 5, it was noted that the Board would be asked to receive a draft Local Digital Roadmap by email no later than 13 June, and within a week feed back comments and/or approval, so that these could be factored into the final submission to NHS England. The Chairman was authorised to give final approval of the submission on behalf of the Board by 29 June 2016.

79. **Urgent Business**

There was no urgent business.

Members noted that Charlie Adan would be leaving her current post at the end of July 2016, and that therefore the Suffolk Chief Officers and Leaders Team would be asked to consider who should be its new representative on the Board. The Board congratulated Charlie on her appointment as Chief Executive to the Royal Borough of Kingston.

80. **Dates and Topics for Future Meetings**

The Board noted:

- a) the dates, venues and topics for future meetings as set out on the agenda sheet; and
- b) that the next Board meeting would take place on Thursday, 21 July 2016 in Endeavour House, Ipswich;
- c) that a Development Session on Co-production had provisionally been arranged for 29 June 2016 (venue to be confirmed);
- d) that the Board's Annual Conference would take place on 6 October 2016.

The meeting closed at 11:06 am.