

PETERBOROUGH



**MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING
HELD AT 1PM, ON
19 MARCH 2018
BOURGES/VIERSEN ROOM, TOWN HALL, PETERBOROUGH**

Committee Members Present: Dr Gary Howsam, Clinical Commissioning Group (Vice-Chair)
Councillor Ferris
Councillor Fitzgerald, Deputy Leader, Cabinet Member for Integrated Adult Social Care and Health
Councillor Lamb, Cabinet Member for Public Health
Dr Liz Robin, Director for Public Health
Wendi Ogle-Welbourn, Executive Director People and Communities
Joanne Proctor, Head of Service, Adult and Children's Safeguarding Boards
Gordon Smith, Healthwatch
Claire Higgins, Chief Executive, Cross Keys Homes

Officers Present: Daniel Kalley, Senior Democratic Services Officer

Also Present: Helen Gregg, Partnership Manager, Peterborough and Cambridgeshire Councils
Aidan Fallon, Head of Communities & Engagement
Cambridgeshire & Peterborough STP
Caroline Townsend, Better Care Fund Lead
Val Moore, Chair Healthwatch Cambridgeshire and Peterborough

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Holdich, Cath Mitchell, Russell Wate, Simon Evans-Evans, Hilary Daniels and Adrian Chapman, Joanne Proctor was in attendance as substitute for Russell Wate.

2. DECLARATIONS OF INTEREST

Dr Gary Howsam declared a personal interest in item 5 as he sits on the STP Board.

3. MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 4 DECEMBER 2017

The minutes of the meeting held on 4 December 2017 were agreed as a true and accurate record with the exception of the following amendments:

Reference Page 4. Item: Amended Health and Wellbeing Board Membership and Terms of Reference:

It was noted that at bullet point 2 the date of the meeting should read 11 September 2017 and not 11 September 2018.

Reference Page 5. Item The Health Benefits of Trees and Woodland:

It was noted that the following sentence should be corrected from:

It was noted that the Forest of Peterborough had recently planted their one hundred thousand tree in Central Park, Peterborough.

The sentence to be corrected to read as follows:

It was noted that the Forest of Peterborough had recently planted their one hundred thousandth tree in Central Park, Peterborough.

4. HEALTHWATCH - PRIORITIES WAYS OF WORKING ACROSS CAMBRIDGESHIRE AND PETERBOROUGH

The Health and Wellbeing Board received a report in relation to Healthwatch - Priorities and ways of working across Cambridgeshire and Peterborough. The report was introduced by the Chair of Healthwatch Cambridgeshire and Peterborough.

The purpose of the report was to update the Board on the Healthwatch arrangements for Cambridgeshire and Peterborough. The report outlined background information on the Healthwatch priorities and sought the views of the Board on the development of how Healthwatch was working in the local area.

Members of the Board were informed that the statutory requirement for a Healthwatch function had not changed and the function of Healthwatch was to provide an independent champion for people who used health and social care services. The Cambridgeshire and Peterborough organisations merged in April 2017 and directors of these separate board had now combined to form a new Board.

The Board were informed of a number of experiences people in the local community had of the Healthwatch service. Most concerns focused on the waiting times people experienced in accessing health services, especially around the quality of care and communication from those services. The organisation didn't have specific projects that they were working on, however there was a strong focus on mental health issues and identifying concerns raised. There were a number of complex health and social issues that were affecting those residents with severe or complex health needs, for example a lack of communication between different service providers.

The Chair of Healthwatch Cambridgeshire and Peterborough commented that there were a number of priorities and ways of working which were a key focus, including scrutinising the quality of patient and public engagement by the providers and promoting the value of the lived experience.

Member were also directed to six key priorities that Healthwatch were keen to focus on over the coming years.

The Health and Wellbeing Board debated the report and in summary the key points raised and responses to questions included:

- Members of the public struggled to grasp what the STP did or understood their role. People were starting to understand that the role of their GP was changing and how they worked with other organisations. The STP were conscious of the way they were coming across and there was a lot of work being undertaken to improve the perception of the work they carried out.
- Delayed transfer of care had come under a lot of scrutiny from data sets and challenging targets of which there was a lot of awareness of from officers and members of the public. There was a lot of work to carry out over the

reluctance of some families surrounding people staying in hospitals more than was necessary.

- Public now understood the pressures on the current system. One of the key issues was the living experience and the issues of transferring from one service to another. The input from Healthwatch was having a reassuring role to the public.
- The STP were moving to a more locality focus with primary care on board, which would be beneficial to the local community and a step in the right direction.

RESOLVED: That the Board

1. Notes the recent examples of impact following the development of a combined Healthwatch (section 4.5)
2. Commented on the priorities and ways of working adopted for 2017/18 (section 4.4) to inform a refresh for the coming year.
3. Notes the future review of Healthwatch's Strategy from 2019 onwards (section 5.)

5. REVISED GOVERNANCE FRAMEWORK FOR THE CAMBRIDGESHIRE & PETERBOROUGH SUSTAINABILITY & TRANSFORMATION PROGRAMME

The Health and Wellbeing Board received a report in relation to the Revised Governance Framework for the Cambridgeshire and Peterborough Sustainability and Transformation Programme. The report was introduced by the Head of Communications and Engagement, Cambridgeshire and Peterborough Sustainability and Transformation Partnership.

The purpose of the report was to update members on the changes to the STP Governance Framework, the revised STP Governance Framework and the revised Memorandum of Understanding. This follows the previous report that was presented to the Board on 11 September 2017.

Some of the changes outlined had been pushed through at a quick pace due to announcements made by the Government in relation to the NHS forward five year review. This required the establishment of an STP Board, this also allowed an opportunity for other changes to come forward, including the revival of the Living Well Partnerships. Differences highlighted over the Governance arrangements over the past few years include the establishment of an STP Board, which was made up of the Chairs and Chief Executives of partner organisations, this also included Directors from local authorities and two elected representatives. It was not a statutory body so powers were delegated to it from other bodies. It was proposed to meet in public for the first time in May and run under the same rules as other NHS bodies.

The Executive Programme Director informed Members that the executives and chairs of the STP Board had been discussing how to ensure more was done at a local level. There were a number of distinctive needs across Cambridgeshire and Peterborough and the needs of people were different across the two areas. Transformation needed to be done at a local level. A number of governance arrangements needed to be changed in order for this to take place. Members of the Health and Wellbeing Board would be kept up to speed with any changes.

The Health and Wellbeing Board debated the report and in summary. key points raised and responses to questions included:

- Recognition that some areas work in different ways. GP's were now in a much better place to lead on developments as they knew their communities best. Primary care was the best leader for this as they were aware of how communities worked and how they could work together in the best interests of the community.
- There needed to be clearer explanation of how this was going to work made to the public. It would be helpful to see the differences of how things worked at the current time and how they were going to work in the future.
- Have developed relationships between all directors of organisations, can look at care in the broader spectrum and make it more practicable. With GP's coming together, they were now able formulate the narrative for members of the public.
- The workforce was the biggest challenge. There needed to be a more imaginative way of working together to provide a more personal care. It was important to make sure that GP inputs were adding real value to people and ensure that they had the support of the voluntary sector and other organisations that could offer care.
- There needed to be an understanding of taking responsibility for targets and budgets around Primary Care. It was important that this could then be measured.
- System was under massive pressures around resilience.
- The North-South divide was intended to drive forward processes and issues across local areas. It was not to place boundaries in front of people who needed specific care. It was to celebrate the differences in local communities.

RESOLVED:

That the Health and Wellbeing Board note the changes to the Sustainability & Transformation Partnership (STP) Governance Framework.

6. PHARMACEUTICAL NEEDS ASSESSMENT

The Health and Wellbeing Board received a report in relation to the Pharmaceutical Needs Assessment. The report was introduced by the Director of Public Health.

The purpose of the report was to present the final update of the Pharmaceutical Needs Assessment 2018 for approval by the Board.

The Pharmaceutical Needs Assessment was an important statutory duty of the Health and Wellbeing Board. The PNA was used by NHS England when making decisions on applications to open new pharmacies. A multi-agency steering group was created to go through the process of overseeing the Pharmaceutical Needs Assessment. Members were informed that although the PNA was updated every three years it was looked at during the intervening period.

NHS England valued the work that went into the document. There were a number of applications made to open new Pharmacies, which needed to be properly scrutinised.

The Health and Wellbeing Board debated the report and in summary. key points raised and responses to questions included:

- Pharmacies were not promoting the work they carried out as much as they should. People were unaware of the scope of work and advice Pharmacies could give instead of people visiting their GP's.
- Some Pharmacies were keen to take up extra responsibility, however this was not the case for all Pharmacies.
- There was a cohort of health workers leaving the health system. Pharmacies were working in teams and were hoping to use pharmacies to help patients.
- All pharmacies had a consulting room and patients had the right to go somewhere quiet to discuss medical matters.

RESOLVED: That the Health and Wellbeing Board

1. Noted the findings of the PNA and approve the final PNA submitted by the multi-agency PNA Steering Group.
2. Approved the monitoring protocol for keeping the PNA up to date between now and March 2021, including the delegated authority for approval of supplementary statements to the Director of Public Health, in discussion with the Chair or Vice-Chair of the Board.

7. ANNUAL HEALTH PROTECTION REPORT FOR PETERBOROUGH 2016/17

The Health and Wellbeing Board received a report in relation to the Annual Health Protection Report for Peterborough 2016/17. The report was introduced by the Director of Public Health.

The purpose of the report was to provide an annual summary on activities in Peterborough ensuring health protection for the local population. It was important that there was publicly available information that demonstrated that statutory responsibilities for health protection had been fulfilled.

Members were informed that the report raised issues around protecting the health of the public and placed this in the public arena. There had been input from a wide range of agencies, this involved a wide range of reports which fed into the officer led steering group. This group met on a quarterly basis.

Some of the issues highlighted included an increase nationally in some communicable diseases, furthermore screening had a below average uptake for breast, cervical and bowel cancer screening. In addition the Board were informed that latent TB screening uptake had increased.

The Health and Wellbeing Board debated the report and in summary. key points raised and responses to questions included:

- There was a raft of information contained within the report that would link to the HWB Strategy.
- There had been a lot of work carried out with migrant communities. Some solutions suggested included extending opening hours for some communities to be able to access some services.

RESOLVED:

That the Health and Wellbeing Board commented on the Annual Health Protection Report and on future priorities for health protection in Peterborough.

8. FEEDBACK FROM THE JOINT DEVELOPMENT SESSION WITH PETERBOROUGH AND CAMBRIDGESHIRE HEALTH AND WELLBEING BOARD

The Health and Wellbeing Board received a report in relation to feedback from the Joint Development Session with Peterborough and Cambridgeshire Health and Wellbeing Boards. The report was introduced by the Executive Director People and Communities Cambridgeshire and Peterborough.

The purpose of the report was to provide Members on discussions at the joint session on 23 January 2018 and ways of working going forward. Both Chair's agreed that there were common themes across both Cambridgeshire and Peterborough, along with a common membership on both boards. There was a case as to whether more work could be done together. A joint session to develop this had been provisionally agreed for 31 May 2018.

Looked at issues of common interest and other NHS colleagues using this as an opportunity to share and gather information.

It was up to Full Council to delegate to the Health and Wellbeing powers to enter into joint meetings with other local authorities if required in the future.

RESOLVED: That the Health and Wellbeing Board

1. Approved a joint meeting with Cambridgeshire Health & Wellbeing Board to explore the key themes identified in the development session. To be held on 31 May 2018.
2. Recommend to Full Council amending the Health and Wellbeing Board Terms of Reference, in order to delegate powers from the Council to the Health and Wellbeing Board to establish a joint Cambridgeshire and Peterborough sub-committee in relation to issues that cross local authority boundaries, if the need arises.

INFORMATION AND OTHER ITEMS

The remainder of the items on the agenda were for information only and the Health and Wellbeing Board **RESOLVED** to note them without comment.

9. UPDATED TERMS OF REFERENCE

RESOLVED:

That the Health and Wellbeing Board Noted and agree the amended Terms of Reference

10. ADULT SOCIAL CARE, BETTER CARE FUND UPDATE

11. QUARTERLY HEALTH AND WELLBEING STRATEGY PERFORMANCE UPDATE

12. SCHEDULE OF FUTURE MEETINGS AND DRAFT AGENDA PROGRAMME

Chairman
1pm – 2.13pm