

Medway Council
Meeting of Health and Wellbeing Board
Thursday, 4 February 2016
4.10pm to 6.00pm

Record of the meeting

Subject to approval as an accurate record at the next meeting of this committee

Present: Councillor David Brake, Portfolio Holder for Adult Services (Chairman)
Councillor Adrian Gulvin, Portfolio Holder for Resources
Councillor Andrew Mackness, Portfolio Holder for Corporate Services
Councillor Vince Maple, Leader of the Labour Group
Councillor Mike O'Brien, Portfolio Holder for Children's Services
Dr Alison Barnett, Director of Public Health
Ian Sutherland, Deputy Director, Children and Adults Services
Dr Peter Green, Chief Clinical Officer, NHS Medway Clinical Commissioning Group (Vice-Chairman)
Caroline Selkirk, Interim Chief Operating Officer, NHS Kent and Medway Clinical Commissioning Group
Cath Foad, Chair, Healthwatch Medway
Dr Antonia Moore, Elected Clinical Member, NHS Medway Clinical Commissioning Group

In Attendance: Justin Chisnall, Deputy Chief Operating Officer, Medway CCG
Lesley Dwyer, Chief Executive, Medway NHS Foundation Trust
Scott Elliott, Senior Public Health Manager
Tim England, Head of Safer Communities
Jan Guyler, Head of Legal Services/Deputy Monitoring Officer
Peter Horn, Chair, Medway Community Healthcare
Julia Duke - MacRae, Consultant in Public Health Medicine
Dr Mike Parks, Kent Local Medical Committee
Stephen Platt, Democratic Services Officer

742 Apologies for absence

Apologies were received from Councillor Doe, Councillor Howard, Barbara Peacock, Director of Children and Adult Services, Pennie Ford, Director of Operations and Delivery, NHS England (Kent and Medway), Angela McNab, Chief Executive, Kent and Medway NHS and Social Care Partnership Trust and Martin Riley, Managing Director, Medway Community Healthcare.

743 Record of meeting

The record of the meeting held on 3 November 2015 was agreed and signed by the Chairman as correct.

744 Declarations of disclosable pecuniary interests and other interests

Disclosable pecuniary interests

There were none.

Other interests

There were none.

745 Urgent matters by reason of special circumstances

The Chairman confirmed that he had agreed that two agenda items be considered by the Committee as urgent. Item 6 (Reducing Cancer Mortality in Medway) was requested by the Board as a result of its review of its selected outcome indicators. This was an important issue for local residents which could not wait for the next meeting of the Board as it was important to present current, up to date statistics. It could not be despatched with the main agenda as accurate figures were not available when the main agenda was despatched. Item 12 (Sustainability and Transformation Plan) was urgent because of the need to meet NHS England deadlines. It could not be despatched with the main agenda as the item was added to the agenda at the pre-agenda meeting on 21 January and sufficient time was needed to draft the report.

746 Chairman's Announcements

The Chairman welcomed Caroline Selkirk, Interim Chief Operating Officer at Medway Clinical Commissioning Group (CCG), to her first meeting since joining the Board. The Chairman reported that this would be the last meeting of the Health and Wellbeing Board attended by Dr Alison Barnett, Director of Public Health. On behalf of the Board, he congratulated Dr Barnett on her appointment as Deputy Centre Director for Public Health England (South East) and praised her excellent work in guiding the Health and Wellbeing Board. The Chairman also congratulated Angela McNab, who would be taking up role of Chief Executive of Camden and Islington Foundation Trust in the spring and thanked her for her contribution to the Board. In addition, the Chairman congratulated Councillor Anne Claire Howard on the birth of her baby girl.

747 Medway CCG's 'quantifiable levels of ambition' to reduce health inequalities

Discussion:

The Deputy Chief Operating Officer (CCG) introduced a report setting out the CCG's 2015/16 quantifiable levels of ambition to reduce local health and

Health and Wellbeing Board, 4 February 2016

healthcare inequalities and improve outcomes for health and wellbeing. Members were advised of errors within the report at Figures 2, 3 and 4 where the headings of the x and y axes were the wrong way round.

It was reported that the proposed approach was to narrow the gap between each population group and the next by 50% with proportionally more effort being required in the worst performing groups that will result in a reduction in the slope of health inequalities.

The following points were made:

- It would be necessary and appropriate for different approaches to be taken for different parts of Medway.
- The delivery of the ambitions was key and partners would need to challenge each other to ensure this was progressed quickly.
- This was a comprehensive report and the authors were to be congratulated for setting the scene for the onward journey.

Decision:

The Board considered and noted Medway CCG's proposals on quantifiable levels of ambition, as set out in the report, and provided comments.

748 Reducing Cancer Mortality in Medway

Discussion:

The Consultant in Public Health Medicine introduced a report providing an overview of cancer in Medway focusing on lung, colorectal and breast cancer. The report described achievements to date and highlighted where further improvements could be made to prevent the onset of cancer, reduce premature deaths from cancer and improve survival.

The following were made:

- Variation in performance between GPs was causing concern and should be robustly challenged.
- Referral rates in Medway were in line with the national average.
- There was a need to establish why people presented for diagnosis at a late stage, for example through A&E departments.
- The data suggested that it was not necessarily the case that more people in Medway were presenting later so there was also a need to examine how they were managed.

Health and Wellbeing Board, 4 February 2016

- Given the reduction in deaths from cardiovascular disease, the reasons why there had not also been a reduction in cancer mortality needed to be understood.
- The high risk factors identified in the report were consistent with those set out in the previous report on health inequalities and this highlighted the need for new ways to be found to encourage people to change their lifestyle choices.
- The Board was keen to understand better the causes of the high mortality rate from cancer in Medway and recognised that this was likely to be multifactorial. All parts of the health and social care system needed to act to understand the many factors involved.
- In response to a question on whether specific groups experienced particularly poor outcomes, the Consultant in Public Health Medicine advised that it was possible to identify groups that were more likely to have certain types of cancer and it was important to maintain campaigns to raise awareness.
- An ongoing awareness programme should be maintained, using different methods to deliver information. The Consultant in Public Health Medicine said that various forums were used to raise awareness and information was available through voluntary groups and at community outlets.
- As the information within the report was based on data up to 2013, a quicker assessment of local information would improve understanding of the latest position. The Consultant in Public Health Medicine responded that this would be difficult as information needed to be gathered from various sources. This task was undertaken by the National Cancer Registry.
- In response to a question regarding the possible link between cancer rates and the number of workers employed in Chatham dockyard in the 1980's, the Consultant in Public Health Medicine said that the data collected nationally did not identify the number of people who had worked with asbestos.

Decision:

The Board considered and commented on the information provided in the report including the recommendations to reduce mortality from cancer.

749 National Diabetes Prevention Programme

Discussion:

The Senior Public Health Manager introduced a report that provided an update on the successes to date of the programme and plans for year 2. Having been

Health and Wellbeing Board, 4 February 2016

chosen as a demonstrator site, Medway had been tasked with supporting 600 high risk clients through the programme by 31 March 2016.

The following points were made:

- It would be helpful if any further report could provide a breakdown by gender, ward, and the risk factors identified in the report.
- In response to a question on the support offered to people with “borderline diabetes”, the Senior Public Health Manager advised that the National Diabetes Prevention Programme was built into the weight management programme so that those who did not meet the criteria for high risk diabetes could access the weight management interventions.

Decision:

The Board noted the progress in delivering the National Diabetes Prevention Programme locally and agreed to continue to support the project board in delivering the programme objectives.

750 Joint Health and Wellbeing Strategy: Monitoring Report

Discussion:

The Director of Public Health presented a report updating the Board on Joint Health and Wellbeing Strategy (JHWS) indicators and highlighted several indicators including the following:

- Smoking at the time of delivery – this remained a challenge and was consistently higher than the national rate.
- Children aged 4-5 classified as obese – the downward trend had continued keeping Medway below the national average.
- Children aged 10-11 classified as obese – this had risen sharply since 2013/14 but given the Year R rate 6 years ago, was lower than expected.
- Circulatory disease mortality (under 75) – there had been a considerable improvement in the rate which was now similar to the national average.
- Children in low income families – it was concerning that, whilst the national rate was falling, the Medway rate remained constant.

The following points were made:

- Medway Youth Trust was progressing work on the Not in Education, Employment or Training indicator and a second conference would be held next week.

Health and Wellbeing Board, 4 February 2016

- Approaches to promoting breast feeding had been discussed at length at a recent Better Beginnings event.
- A member of the Board reported that there were changes to the funding of veterans' mental health services by NHS England and asked that the Director of Public Health seek further information for the Board.

Decision:

The Board considered and noted the indicator updates.

751 Annual Public Health Report of the Director of Public Health 2014/15

Discussion:

The Director of Public Health introduced her Annual Public Health Report for 2014/15 stating that it had been inspired by the transfer of responsibility for commissioning the Healthy Child Programme for children aged 0-5 from the NHS to Local Authorities from October 2015.

During the discussion, members of the Board praised the report and raised a number of points and questions, which included:

- Embedding the report into the Council. The report highlighted important current issues and challenges set in a historical context and should be used to inform action across the Council. The Board asked that all officers should read the plan. The Director of Public Health advised that one example of embedding public health was the Directorate's work with colleagues in Planning on the development of the Local Plan.
- Availability of the report to GPs. The Director of Public Health confirmed that the report would be provided to all GP practices and was available on-line.
- Immunisation rates. The Director of Public Health confirmed that data accuracy remained an issue and must be addressed in order to focus action on increasing uptake.

Decision:

The Board noted the Annual Public Health Report and the priorities identified for improving the health and wellbeing of children.

752 Strategic Assessment and Draft Community Safety Plan 2016 to 2020

Discussion:

The Head of Safer Communities introduced a report that presented the current Medway Community Safety Partnership Strategic Assessment and the proposed Community Safety Plan to cover the period from 2016 to 2020.

The following points were made:

- The inclusion of substance misuse within the documents was welcomed as there had been an increase in drugs related deaths in 2013.
- The Council had reviewed how it shared intelligence with the Police in relation to the local drug market.
- Public Health had recently provided evidence to a Licensing Hearing Panel which had resulted in the application for a premises licence being refused.
- The report referred to the protocol setting out the relationship between key strategic boards in Medway and it was noted that this had been signed by the Chairs of a number of Boards in addition to those mentioned.

Decision:

The Board:

- (a) noted and commented on the Community Safety Partnership Strategic Assessment;
- (b) noted that, as a Policy Framework document, the Community Safety Plan would be reported to Cabinet on 5 April 2016 and that Cabinet would be asked to formally consider and recommend the proposed plan for 2016 to 2020, containing new priorities for the Community Safety Partnership, to Full Council on 28 April 2016; and
- (c) noted the Boards that were included in the protocol setting out the relationship between key strategic Boards in Medway.

753 CCG Local Digital Maps

Discussion:

The Chief Clinical Officer, NHS Medway CCG, introduced a report informing the Board of the requirement for the CCG to submit their plans, in the form of a local digital roadmap, on how their local health and care economies would

Health and Wellbeing Board, 4 February 2016

achieve the ambition of being paper-free at the point of care by 2020. The CCG would engage with partners across health and social care to ensure that their systems were interoperable and that records were sufficiently protected.

Decision:

The Board:

- (a) supported the development and delivery, through the health and care forum collaborative, of the digital roadmap for north Kent; and
- (b) noted that an update would be provided to a future meeting of the Board.

754 Sustainability and Transformation Plan

Discussion:

The Interim Chief Operating Officer, Medway CCG, introduced a report setting out the background, context and development steps of the Medway CCG Sustainability and Transformation Plan (STP). Two STP footprints were proposed for the Medway area. The first would describe the provision across Kent and Medway and the second would describe provision in Medway and Swale and would allow local focus on flows around Medway NHS Foundation Trust. The footprints would evolve as discussions with partners and stakeholders took place before the end of April 2016.

The following points were made:

- The Board would need to see further details on the proposal as soon as these had been developed.
- It was important that GPs, as providers of primary care, were fully involved in discussions about the development of the STP. In response the Chief Clinical Officer, Medway CCG, confirmed that a local care team approach was being developed.
- The timing of the proposal gave limited scope for initial consultations. Further consultations should be undertaken at a sufficiently early stage to influence the decision making process.
- Acute trusts were required to submit operational plans and collaborative working would ensure connectivity between these and the STP.
- A meeting was being arranged with the Leader of Medway Council to discuss the footprint proposals . Dr Green of the CCG and Pennie Ford of NHS England would be in attendance.

Decision:

Health and Wellbeing Board, 4 February 2016

The Board noted the report and asked the report authors to note the comments made during the discussion.

755 Work Programme

Discussion:

A member of the Board referred to a research paper that had been produced by the Kent and Medway Military Civilian Partnership on the needs of serving and ex-service personnel and their families. He proposed that the Board consider this report and the Board discussed the most appropriate meeting for this item.

It was suggested by a Board member that the report of a Medway Council Housing Task Group be considered at a future meeting of the Board.

The Board noted that, at its next meeting on 15 March, the Board would be reviewing commissioning plans for 2016/17 and their alignment to Joint Health and Wellbeing Strategy priorities.

Decision:

The Board agreed the following changes to the work programme:

- a) to add the research paper by the Kent and Medway Military Civilian Partnership on the needs of serving and ex-service personnel and their families to the agenda for the meeting on 28 April 2016.
- b) to bring forward the start time of the meeting on 28 April 2016 to 3.00pm as there was now a meeting of Medway's Full Council on that day.
- c) to add the Medway Council Housing Task Group report to the work programme, with the date to be confirmed.

Chairman

Date:

Stephen Platt, Democratic Services Officer

Telephone: 01634 332011

Health and Wellbeing Board, 4 February 2016

Email: democratic.services@medway.gov.uk