

Medway Council
Meeting of Health and Wellbeing Board
Tuesday, 16 April 2019
4.03pm to 5.57pm

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 Adults' Services (Chairman)
Ian Ayres, Managing Director for Dartford, Gravesham and Swanley, Medway, Swale and West Kent CCGs
Ann Domeney, Deputy Director, Children and Adults Services
Councillor Gary Etheridge
Dr Peter Green, Clinical Chair, NHS Medway Clinical Commissioning Group (Vice-Chairman)
Councillor Adrian Gulvin, Portfolio Holder for Resources
Eunice Lyons-Backhouse, Healthwatch Medway CIC Representative
Councillor Vince Maple, Leader of the Labour Group
Ian Sutherland, Director of People - Children and Adults Services
Councillor Stuart Tranter
James Williams, Director of Public Health

In Attendance: Sharon Akuma, Legal Services
James Devine, Chief Executive, Medway NHS Foundation Trust
John Drew, Independent Chair of Medway Safeguarding Children Board
Louise Drury, Head of Service Improvement
Scott Elliott, Head of Health and Wellbeing Services
Jade Milnes, Democratic Services Officer
Heidi Shute, Engagement Director, Medway Community Healthcare
Vanessa White, Head of Provider Services

988 Chairman's Announcements

The Chairman welcomed invited attendee, James Devine, Chief Executive of Medway NHS Foundation Trust to his first meeting of the Board and advised Members that a notice of resignation had been received from Ivor Duffy, the representative for NHS England (South East).

The Chairman recommended that agenda item 7 (Strategic Assessment and Draft Community Safety Plan 2016 to 2020) be considered as the second substantive item on the agenda to enable the Chairman of the Community

Health and Wellbeing Board, 16 April 2019

Safety Partnership, Councillor Gulvin, to attend another meeting. This was agreed.

The Chairman further explained that this meeting was the final meeting of the 2018/19 municipal year and thanked Members and officers for their contribution to the work of the Board.

989 Apologies for absence

Apologies for absence were received from Board Members, Councillor Potter and the NHS Medway Clinical Commissioning Group representative Dr Antonia Moore.

Apologies for absence were also received from invited attendees Martin Riley (Managing Director, Medway Community Healthcare) and Dr Mike Parks (Medical Secretary, Kent Local Medical Committee).

990 Record of meeting

The record of the meeting held on 19 February 2019 was agreed and signed by the Chairman as correct.

991 Urgent matters by reason of special circumstances

There were none.

992 Declarations of Disclosable Pecuniary Interests and Other Significant Interests

Disclosable pecuniary interests

There were none.

Other significant interests (OSIs)

There were none.

Other interests

Councillor Adrian Gulvin declared an interest in agenda item 7 (Strategic Assessment and Draft Community Safety Plan 2016 to 2020) as he was the Chairman of the Community Safety Partnership.

993 The Medway Safeguarding Children Board (MSCB) Update Report

Discussion:

The Board welcomed the Medway Safeguarding Children Board (MSCB) Independent Chair who presented the Board with a report which set out details of the work of the MSCB during 2018-19, including an update on the MSCB

Health and Wellbeing Board, 16 April 2019

Business Plan 2017-20 and an update on recent Serious Case Reviews (SCRs), which were either ongoing or completed.

The Board was advised that the Children and Social Work Act 2017 had introduced a new duty on three agencies, namely the Local Authority, the Chief Officer of Police and the Clinical Commissioning Group (referred to as Safeguarding Partners), to make arrangements for safeguarding and promoting the welfare of children in the area. The new arrangements would streamline the current arrangements and would be published by 29 June 2019. Transition to the new arrangements would take place by 29 September 2019.

Members raised a number of points and questions, including:

Serious Case Review (SCR), historic case – Clarification was sought with regards to the circumstances of the SCR detailed in paragraph 3.3 of the report. In response, the MSCB Independent Chair confirmed that this was a historical case in which the primary abuse that the individual had suffered occurred in the early years of childhood and came to light many years later upon review of the individual's case notes. The outcome of the review had not yet been published but would be circulated to the Board on publication.

SCR, Medway Secure Training Centre (STC) - In response to questions concerning learning for the Health and Wellbeing Board following the SCR of Medway STC, Members were advised that the Board could focus on two areas, these were the Local Authority Designated Officer (LADO) Service and implementation of the action plan.

It was explained that where there were a large number of children and young people in custody i.e. within Medway STC and also Cookham Wood, there was a need for the LADO Service to focus primarily on these children and young people. The SCR of Medway STC concluded that for a period in 2015 into the first month of 2016, the Service had not served the children for whom it had responsibility very well, as detailed within the published report. The Council had acknowledged this weakness and, at the time, commissioned its own review of the Service and developed an action plan for implementation. The most recent Ofsted focussed visit concluded that the Council had improved this Service. The Council, as one of the Safeguarding Partners, was responsible for overseeing the implementation of the action plan. It was noted that the Safeguarding Partners had proposed the creation of a specific body to oversee safeguarding in the two establishments; Medway STC and Cookham Wood.

MSCB Business Plan 2017-20 - In response to a concern expressed in relation the number of amber actions within the MSCB Business Plan 2017-20, the Board was advised that the Business Plan was a three year plan and the expectation was that some actions would be amber at this stage. It was explained that where there was a clear plan to implement an action but where implementation had not yet happened, it would not be graded anything other than amber. A Member suggested that this be explained within the report.

Health and Wellbeing Board, 16 April 2019

Action number 1.1.1 within the MSCB Business Plan 2017-20 - In response to a question regarding engagement with schools, the Board was advised that this had been challenging, owing to the nature of recent education reforms. The two umbrella bodies representing primary and secondary schools had facilitated engagement, however there had been particular difficulty in accessing independent schools. The new arrangements for safeguarding partnerships placed a requirement on them to identify how they would work with relevant agencies which included all schools.

Working Together to Safeguard Children 2018 - With respect to paragraph 3.12 of the report, bullet point number one, a member expressed the view that it should read 'the three safeguarding partners must' rather than 'should'. In response, the Board was advised that this was the language utilised by the Department for Education (DfE).

Transition to the new arrangements - In response to a query concerning the time gap between publishing the new arrangements and the deadline to transition to them, the Board was advised that the dates had been prescribed by the DfE and an assurance was given that the MSCB would continue to exist until the transition to the new arrangements was complete. The new arrangements had been designed to ensure continuity. It was added that on 9 April 2019, the Cabinet approved the proposed safeguarding partnership arrangements and it was intended that the new arrangements would be published ahead of the June deadline.

Multi agency audit, Child Sexual Exploitation (CSE) - In response to concerns expressed regarding some of the key themes identified within the CSE audit, it was explained that the bullet points set out at paragraph 3.15 of the report were a summary of the themes that had emerged from a review of six randomly chosen cases. These cases demonstrated that, in some cases, professionals may respond incorrectly to children who might be victims of CSE by misunderstanding or misinterpreting the characteristics and behaviours displayed by the individual(s). An example of the Rotherham case, was used to illustrate this to the Board. The relatively small sample had revealed that children were not always being protected as well as they should be and that there were continuing education, supervision and recruitment needs that had to be addressed. It was noted that the MSCB had particular responsibility for training and therefore the audit facilitated an improved understanding of CSE. Furthermore, individual employers who were part of the MSCB had a responsibility to improve practice.

Decision:

The Health and Wellbeing Board thanked the MSCB Independent Chair for his informative update and his contribution to the Board during his time as Independent Chair.

The Health and Wellbeing Board noted the contents of the update report and requested that the final report of the Serious Case Review of the historic case be circulated to Board Members.

994 Corporate Parenting Board Annual Report

Discussion:

The Corporate Parenting Board (CPB) Annual Report set out the achievements of the CPB over the last 12 months in securing good outcomes for children and young people. The report highlighted the role and challenge function of the CPB, which was predominantly focused on driving the overarching Looked after Children (LAC) Strategy 2018-2021.

The Head of Provider Services highlighted a number of achievements including:

- The Early Help and Targeted Services Team had supported a number of children who had been on the 'edge of care' to remain at home or return to their birth families. The Ofsted Focussed Visit in February 2019 found that there had been good quality interventions to enable this to happen.
- The restructuring of the 'front door' to Children's Services was complete and was functioning well. The Ofsted focused visit in February 2019 noted a marked improvement in partnership working since the Joint Targeted Area Inspection (JTAI) in the summer of 2018, which had noted the need for improvement.

Members commended the report and work of the CPB. With reference to a centre for LAC in the Member's ward, a Member recognised the brilliant work of the centre, agencies involved and the young people. With reference to an example within his ward and the invaluable experience gained as a Corporate Parent, another Member asked how Councillors could engage with residential settings and Looked After Children. The Director of People – Children and Adults Services welcomed the engagement of Councillors with their responsibility as Corporate Parents and he explained that obtaining a sense and understanding of the experience of LAC was central to the role. It was noted that feedback from members of the Young Lives Foundation and Medway Youth Council revealed that there was a desire for Councillors to engage with young people in care, as demonstrated by the reverse takeover day, however there was a need to ensure that engagement was not overly intrusive.

Decision:

The Health and Wellbeing Board noted the annual report and commended the effectiveness of the Corporate Parenting Board.

995 Strategic Assessment and Draft Community Safety Plan 2016 to 2020

Discussion:

The Chairman of the Community Safety Partnership (CSP) introduced the report which presented the current Strategic Assessment and the Community Safety Plan covering the period from 2016 to 2020. He drew the Board's

Health and Wellbeing Board, 16 April 2019

attention to the update on five priorities of the Plan set out at paragraphs 4.15 to 4.25 of the report. He also explained to the Board that a Medway Task Force would be established as part of the Police and Crime Commissioner's (PCC) Violence Reduction Challenge, details of which were set out at paragraphs 4.26 to 4.30 of the report.

By way of an update, it was added that the Task Force would be accommodated at Gun Wharf, the lead Sergeant had been appointed and the lead civilian officer would be in post imminently. It was expected that the Task Force would be in place by October 2019.

It was noted that the CSP had built a good working relationship with the London Borough of Islington and together they were undertaking a joint piece of work to understand county lines. In addition, the CSP had been able to shadow the Islington Integrated Gangs Unit, which was an established task force, to share lessons learned. It was explained that partnership working between many agencies and services was integral to the success of the Islington Integrated Gangs Unit and reference was made to the agencies that had already agreed to support Medway's initiative, set out a paragraph 4.30 of the report. It was noted that the CSP would like other agencies to also be involved.

Members raised a number of points and questions, including:

Update on rough sleepers - In response to a question concerning the number of rough sleepers that had been re-housed, the Chairman of the CSP confirmed that approximately 65 rough sleepers had been re-housed. He explained that a number of rough sleepers had drug, alcohol or mental health problems and advised that the Council's Housing Service now implemented a housing first policy, accompanied by a wraparound intensive programme to support these individuals.

Addressing Homelessness and Begging - The Chairman of the CSP explained that the CSP had worked with partners, including the Housing Service and the police, to reduce the number of people begging as well as the associated Anti-Social Behaviour (ASB). He added that he would like to engage with the Magistrates Courts to discuss options for restorative justice in preference to financial penalties.

Perception of safety - A Member emphasised the importance of local residents not only being safe but also feeling safe. Linked to this was a need to communicate the complexity of problems associated with homelessness, actions being undertaken and what members of the public could and should not do to assist. The Chairman of the CSP agreed that the perception of crime was most likely worse than the reality. Whilst it was recognised that crime had increased in Medway, it was explained that one single incident may generate more than one crime report, which might skew the data.

He added that the CSP had undertaken a series of engagement events with the community and in particular with young people. It was noted that engagement with the Medway Youth Council had been particularly useful and it was

Health and Wellbeing Board, 16 April 2019

explained that they had produced a good report on how young people felt about crime in Medway. It was recognised that the CSP might need to explain more clearly how members of the public could engage with schemes to assist rough sleepers.

Task Force – A Member supported the creation of the Task Force and drew the Board's attention to learning opportunities from Margate and a previous Medway task force which had focused on particular streets. He emphasised the importance of partnership working with the agencies outlined in paragraph 4.30 of the report, in addition to other agencies. In response, the Chairman of the CSP explained that Medway's Task Force had been based on the experience from the Margate Task Force. The senior police officer in Kent, who was also the Divisional Commander in East Kent and of whom had worked with the Margate Task Force had assisted Medway with establishing its Task Force. It was noted that the emphasis of the Medway Task force would be different to that of Margate's. It would focus on a wider geographical area, i.e. the whole of Medway, rather than defined wards. It would also focus on violent crime reduction.

Risk Management - A Member expressed concern that the risk ratings set out at section 6 of the report were 'low'. The Chairman explained that all partners of the CSP were committed to engaging with the issues highlighted and had the necessary resources to do so and therefore, this was why the risk could be considered to be low.

Wards reporting ASB, crime statistics and repeat offenders - Asked about the correlation between these three areas, the Board was advised that there was a need for a strategic, cross agency approach. It was explained that the task group might elect to focus on the five wards set out on page 112 of the agenda.

Decision:

The Health and Wellbeing Board:

- a) noted the strategic assessment set out at Appendix 1 to the report;
- b) noted the action plan set out at Appendix 3 to the report; and
- c) noted that as a Policy Framework document the Community Safety Plan was adopted by Full Council on 21 July 2016.

996 Draft Medway Joint Carers' Strategy

Discussion:

The Head of Health and Wellbeing Services introduced the Draft Medway Joint Carers' Strategy set out at Appendix 1 to the report. It was noted that the Strategy reconfirmed the Council's and NHS Medway Clinical Commissioning Group's commitment to support carers. It was explained that the Strategy had been coproduced with carers and in consultation with stakeholders and met the

Health and Wellbeing Board, 16 April 2019

Council's legal duty to assess and identify the needs of eligible carers. The Strategy described how health and social care services, provider organisations and the voluntary sector would work together over the next five years to respond to and meet the needs of carers in Medway. It was noted that whilst the vision had not changed since the previous Carers' Strategy the health and social care system had and the refreshed Strategy responded to this.

The Board's attention was drawn to the six key priorities of the Strategy, set out at paragraph 2.5 of the report. It was also noted that during the development of the Strategy, the Council and NHS Medway CCG had commissioned a new Carers' Service for both adults and young people in Medway, funded through the Better Care Fund. The Service, provided by Carers FIRST, commenced in January 2019 and formed part of the wider Voluntary Community Sector (VCS) 'Better together' Consortium contract.

Referring to page 160 of the agenda (page 13 of the Strategy) paragraph three, which pertained to support for young carers, a Member requested that this section be strengthened to include information on how this would be achieved and how partners would ensure that all young carers were captured. He noted, in particular, that young carers might suffer from social isolation from their peers, their school work could suffer and they might withdraw from other activities.

In response, the Head of Health Wellbeing Services undertook to update the Strategy, explaining that the theme 'support for young carers' was prominent in the feedback from the consultation. Assurance was given that the Service recognised the importance of support for young carers and it was suggested that the Board receive an update report, in due course, setting out progress over the action plan period.

The Chairman of the Board highlighted a successful initiative in which young carers had visited Medway Telecare. This helped to demonstrate to the young carers that support was available to them. He requested that the Service consider reinstating this initiative.

Decision:

The Health and Wellbeing Board:

- a) noted the comments of the Health and Adult Social Care Overview and Scrutiny Committee set out at section 4 of the report;
- b) commented, as set out within the minute, on the Medway Joint Carers' Strategy to improve the content and delivery of the Strategy outcomes; and
- c) noted the timetable for approval, as set out in paragraph 6.5 of the report.

997 Joint Health and Wellbeing Strategy: Monitoring Report

Discussion:

The Director of Public Health introduced the report which presented, at Appendix 1 to the report, an update on the indicators which related to the five themes of the Joint Health and Wellbeing Strategy (JHWS). It was noted that the JHWS had been refreshed in 2018, following consideration by the Board. The Director of Public Health drew the Board's attention to a number of key achievements under each theme, as set out at section 3 of the report.

Members raised a number of points and questions, including:

Links to the JHWS - A Member commended the achievements obtained thus far and in relation to examples of initiatives in his ward, such as a project to improve accessibility of high street shops and a proposal to host a community café within the local Adult Education Centre, asked the Director of Public Health how Councillors could connect with the workstreams underpinning the JHWS. The Director of Public Health emphasised the value of work undertaken within the community and he recognised the importance of capturing this. He explained that the Public Health Team, working with the Medway NHS CCG, were creating a Directory of Services which would be utilised to assist Care Navigators and others in social prescribing, he recognised that valuable links could be made in this regard. He also explained that support could be provided to assist the initiatives set out by the Member and he agreed to discuss this further with the Member outside the meeting.

Initiatives to reduce obesity - A Member outlined an initiative within his ward, in which a local supermarket had invited children and young people to take part in an event to pick and prepare fresh food. The Director of Public Health welcomed further engagement with supermarkets on projects such as this and undertook to liaise with the Member outside of the Meeting. He added that there was a healthy weight network within Medway which held an annual conference.

Smoking prevention (including vaping) - In response to a concern expressed in relation to a lack of emphasis on smoking prevention, the Board was assured that smoking prevention was being addressed. The Director of Public Health explained that much work had been undertaken in conjunction with the Council's Licencing and Enforcement Team's to minimise the availability of illegal and counterfeit tobacco products. In addition, it was explained that the Public Health Team had engaged with Medway's schools and 84% of them (89 schools in total) had undertaken the Personal, Social, Health and Economic (PSHE) education programme which addresses smoking prevention. The Chairman of the Board also provided examples of initiatives in Medway concerning reducing smoking prevalence, such as work with Medway Foundation Trust (MFT) to reduce smoking at time of delivery (SATOD). The Chairman asked the Chief Executive of MFT to express his thanks to maternity staff for their help in this regard.

Health and Wellbeing Board, 16 April 2019

Health inequalities in Medway - Asked whether there were any areas of deprivation within Medway causing concern and of which were not outlined in the report presented to the Board, the Director of Public Health advised the Board that the Public Health Team had recently completed work on health inequalities for the NHS Medway CCG which he would share with the Board. The Clinical Chair, NHS Medway CCG stressed the importance further exploring health inequalities in Medway. He noted that the life expectancy gap between the most and least deprived was getting wider and that people living in areas in the most deprived decile of deprivation are particularly disadvantaged and experiencing poorer outcomes. He drew the Board attention to the example of diabetes. There was a clear inequality in relation to hospital admissions for diabetes complications. This needed to be better understood given that metrics of diabetic care in primary care didn't show the same level of variation. The Clinical Chair suggested that this was a complex matter that should be reviewed in detail. A Member requested that health inequality (deprivation) be added to the Board's Work Programme. It was suggested that to enable a fuller discussion that it be added to agenda of the Board's development session, scheduled for later in the year.

In summarising the discussion, the Chairman stressed the importance of partnership working and highlighted a number of upcoming initiatives including a breastfeeding friendly campaign.

Decision:

The Health and Wellbeing Board:

- a) noted the indicator updates set out in Appendix 1 to the report; and
- b) agreed to add consideration of health inequalities (deprivation) to the agenda for the development session.

998 Pharmacy Opening Hours

Discussion:

The Director of Public Health introduced the report which presented a summary of a meeting held on 29 June 2018 between Council Members and officers and representatives of NHS England and the Local Pharmaceutical Committee to discuss concerns raised at the Board meeting on 18 April 2018 in relation to the out of hours pharmaceutical provision in Medway. Appendix 1 to the report set out the briefing note provided to Board Members in advance of the meeting.

A member noted that this had been a very helpful meeting and he recognised the importance of the ongoing monitoring and communication. A Member recommended that the briefing note be shared with new Members of the Board, post-election.

The Board was advised that the General Pharmaceutical Council had released guidance for pharmacy owners which sought additional safeguards for people

Health and Wellbeing Board, 16 April 2019

seeking medicines online. It was the intention that pharmacies would need to arrange for a face to face consultation before prescribing any prescription only medicines. It was explained that at this stage it was not known how this would be achieved or what the local obligations were, however there was an expectation that this policy would be implemented in due course.

Clarification was provided in relation to paragraph 3.4.6 of the report. It was explained that 24/7, year round, access to GP services had always been available to patients via the NHS, however, GPs might now have access to patient clinical notes at the time of consultation.

Decision:

The Health and Wellbeing Board:

- a) noted the report of the meeting with NHS England and other parties held to discuss out of hours access to community pharmacies in Medway; and
- b) requested that the report, together with Appendix 1 (the briefing note) be shared with new Board Members, post-election.

999 Work Programme

Discussion:

The Democratic Services Officer introduced the work programme report and drew the Board's attention to the recommended amendments to the work programme set out at paragraphs 2.2 and 2.3 of the report. These had been reflected in the work programme set out at Appendix 1 of the report.

It was suggested that the Board receive the NHS local Five Year Plan in November 2019.

In addition, it was reaffirmed that health inequality (deprivation) be added to the agenda of the Board's development session scheduled for later in the year. A Member reserved the right to request that a subsequent item be added to the work programme of the Board.

Decision:

The Health and Wellbeing Board

- a) agreed the work programme attached at Appendix 1 to the report, subject to the addition of the NHS local Five Year Plan to the work programme in November 2019; and
- b) reaffirmed that health inequality (deprivation) be added to the agenda of the Board's development session scheduled for later in the year.

Health and Wellbeing Board, 16 April 2019

Chairman

Date:

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