### **Medway Council**

# Meeting of Kent and Medway Joint Health and Wellbeing Board

# Tuesday, 28 July 2020 3.05pm to 4.20pm

## Record of the meeting

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

Present: Mrs Clair Bell, Cabinet Member for Adult Social Care and Public

Health, Kent County Council

Councillor David Brake, Portfolio Holder for Adults' Services,

Medway Council

Mr Paul Carter CBE, Kent County Council

Mrs Sue Chandler, Cabinet Member for Integrated Childrens

Services, Kent County Council

Councillor Howard Doe, Deputy Leader and Portfolio Holder for

Housing and Community Services

Penny Graham, Local Healthwatch representative, Kent

Mr Roger Gough, Leader, Kent County Council

Councillor Angela Harrison, Swale Borough Council - District

Council representative

Councillor Alan Jarrett, Leader, Medway Council

Councillor Martin Potter. Portfolio Holder for Education and

Schools, Medway Council

Andrew Scott-Clark, Director of Public Health, Kent County

Council

Richard Smith, Interim Corporate Director Adult Social Care and

Health, Kent County Council

Suzanne Westhead, Interim Assistant Director, Adult Social

Care, Medway Council

James Williams, Director of Public Health, Medway Council

**Substitutes:** Caroline Selkirk, substitute for Wilf Williams, Kent and Medway

**Clinical Commissioning Group** 

Graham Genoni, substitute for Matt Dunkley CBE, Corporate

Director for Children, Young People and Education,

Kent County Council

In Attendance: Dr Bob Bowes, Kent and Medway CCG Governing Body

Member (appointed to the Joint Board under minute number

133)

Karen Cook, Policy and Relationships Adviser (Health), Kent

County Council

Rachel Jones, Executive Director of Strategy and Population Health, Kent and Medway STP (appointed to the Joint Board

under minute number 133)

Navin Kumta, Kent and Medway CCG Clinical Chair (appointed

to the Joint Board under minute number 133)

Dr Logan Manikam, Interim Public Health Consultant, Medway

Council

Terry Martin, Chief Executive, KALC

Teri Reynolds, Democratic Services Officer, Medway Council Councillor John Rivers, President, KALC (appointed to the Joint

Board under minute number 133)

Jacqueline Shicluna, Lawyer (Adults), Medway Council

Dr Robert Stewart, Clinical Design Director for the Design and Learning Centre for Clinical and Social Innovation (appointed to

the Joint Board under minute number 133)

#### 127 Election of Chairman

Councillor David Brake was elected as Chairman for the 2020/21 municipal year.

#### 128 Election of Vice-Chairman

Mrs Clair Bell was elected Vice-Chairman for the 2020/21 municipal year.

#### 129 Apologies for absence

Apologies for absence were received from Dr John Allingham (Kent Local Medical Committee), Louise Ashley (Dartford, Gravesham and Swanley ICP Senior Responsible Officer), Matt Dunkley CBE (Corporate Director, Children, Young People and Education, Kent County Council), Councillor Mrs Jenny Hollingsbee (District Council representative), Eunice Lyons-Backhouse (Local Healthwatch representative, Medway), Martin Riley (Medway and Swale ICP Senior Responsible Officer), Matthew Scott (Kent Police and Crime Commissioner), Ian Sutherland (Director of People – Children and Adult Services, Medway Council) and Wilf Williams (Accountable Officer of Kent and Medway Clinical Commissioning Group).

#### 130 Record of Meeting

The record of the meeting held on 25 June 2019 was agreed and signed by the Chairman as correct, subject to Councillor Angela Harrison (District Council representative) being added to the list of Board Members present.

#### 131 Declaration of Disclosable Pecuniary Interests and other interests

Disclosable Pecuniary Interests

None.

Other Significant Interests

None.

Other interests

None.

#### 132 Urgent matters by reason of special circumstances

There were none.

#### 133 Kent and Medway Joint Health and Wellbeing Board: Membership

#### Discussion:

The Policy and Relationship Advisor (Health), Kent County Council introduced the report which set out the current position on the membership of the Joint Board and asked the Joint Board to consider appointing additional voting and non-voting Members as recommended by each respective Health and Wellbeing Boards and by the Kent and Medway STP Non-Executive Oversight Group. The proposed changes, which were set out at Appendix 2, reflected changes to the NHS landscape.

The President of the Kent Association of Local Councils (KALC) and Chairman of KALC's Health and Wellbeing Advisory Committee, provided a short presentation to the Joint Board on the work of KALC, both generally and in relation to health and wellbeing, one of KALC's priority areas.

Members then raised a number of questions and comments, which included:

- Six month rule in response to a question about the impact of Covid-19 and Councillor attendance at meetings (which required Councillors to attend at least one meeting within a six month period), the KALC Chief Executive confirmed that they had sent advice and reminders to all member authorities about the six month rule and how to manage the issue in the context of the pandemic.
- Liaison between local town and district councils and Kent County Council (KCC) – The KALC Chief Executive confirmed that KALC held regular meetings with KCC, particularly around highways, transport, community safety and the environment. Area Committees were the focal point to engage with Medway and parish and town councils and 2

representatives from each of the 13 area committees sat on the KALC Executive Board.

Purpose of KALC's inclusion on the Joint Board membership – it
was confirmed that KALC wanted to work together in partnership with
KCC and Medway Council on health and wellbeing issues.

#### **Decision:**

The Kent and Medway Joint Health and Wellbeing Board:

- a) noted the current position on membership of the Joint Board as set out in paragraphs 2.4 and 2.5 of the report.
- b) confirmed its agreement to:
  - the appointment of the Clinical Chair of single Kent and Medway CCG, as a voting member of the Joint Board, and
  - the appointment of the Senior Responsible Officer of the four Integrated Care Partnerships (ICPs) as non-voting members of the Joint Board noting that this will be reviewed when the ICPs are fully mobilised

as set out in paragraph 3.1 of the report.

- agreed to re-appoint Dr Robert Stewart in his capacity as the Clinical Design Director of the Design and Learning Centre for Clinical and Social Innovation as a non-voting member of the Joint Board.
- d) agreed to appoint the following non-voting members to the Joint Board:
  - the Kent and Medway CCG Governing Body Member, Dr Bob Bowes for a further year to support the Clinical Chair of the Kent and Medway CCG;
  - the Director of Strategy and Population Health, Kent and Medway CCG, Rachel Jones;
  - the Director of Health Improvement, Kent and Medway CCG, Caroline Selkirk;
  - the Chairman of the Kent Association of Local Councils (KALC) Health and Wellbeing Advisory Committee, Councillor John Rivers, as the KALC (parish councillor) representative on the Joint Board.

#### 134 Covid-19 Local Outbreak Control Plan Briefing

#### **Discussion:**

The Director of Public Health for Medway introduced the report which had been co-produced with the Director of Public Health for Kent and provided the Joint

Board with an overview of the response and recovery strategy to protect Kent and Medway's populations from Covid-19 impacts. It set out the Kent and Medway Local Outbreak Control Plan (LOCP), which covered eight key themes including governance, complex settings, arrangements for tracing and testing, outbreak management, how to support vulnerable populations and communications strategies. The report also recommended that the Joint Board fulfil the role of the Local Outbreak Engagement Board (LOEB).

Members then raised a number of questions and comments, which included:

- Testing the LOCP reference was made to the ongoing testing of the LOCP, using scenarios that were being experienced elsewhere to learn from those and how best agencies and communities should respond.
- Kent and Medway LOCP reference was made to the fact that the Plan covered the whole area of Kent and Medway and this was commended as it helped partnership working with other agencies in the area that covered the whole geographic area of both Kent and Medway, such as one Clinical Commissioning Group and one Resilience Liaison Forum.
- Strategic responsibilities of each local authority clarification was
  made that the LOCP and LOEB would not absolve each individual
  upper tier local authority's from its own strategic responsibilities and
  reference was made to the additional layers of engagement and
  governance that would sit within the structures of both KCC and Medway
  Council to enable the two local authorities to discharge their specific
  public health responsibilities.
- Communication in response to a comment made regarding the Kent Resilience Forum (KRF) and the LOEB's role in communication strategies, the Director of Public Health for Medway explained that the KRF had responsibility through the Civil Contingencies Act in relation to the warning and informing elements of communication. In addition to that, there were also local Kent Protect/Medway Protect campaigns to champion the work of the local authority to reach out to certain groups, businesses etc in a tailored approach.
- Governance Structure clarification was sort in relation to the
  governance structure at figure 1 of the LOCP. In response, the Director
  of Public Health for Medway confirmed that existing gold command
  structures within each authority had been used. He added that the role
  of the Health Protection Committee was set out in the framework within
  the LOCP and provided assurance that existing mechanisms for
  escalation would be used. Communication and lines of engagement
  would be escalated through the governance structure when there was a
  need for wider consequential management, such as containment
  measures.
- Education concern was raised about how secondary schools would manage bubbles of students in year groups as well as the addition of

young people possibly being invited back in the Autumn to sit the exams they had not been able to in the summer months. In response, the Director of Public Health for Medway explained that one of the tests of the LOCP and its effectiveness had focused on schools. He added that officers were working closely with schools to ensure appropriate risk assessments and guidance were in place to assist them. It was also confirmed by the Director of Public Health for Kent that more guidance from the Department for Education and Public Health England was anticipated to support schools further and in addition, work was underway to deliver the flu vaccine to all primary school aged children and those in year 7.

- Quarantine requirements clarification was sought about the most recent quarantine measures advice that had been issued by the Government. The Director of Public Health for Medway undertook to report back to the Member separately, once he had looked at the specifics of the guidance.
- Membership of the Health Protection Committee some errors to the membership were raised, in relation to organisations and job titles detailed at paragraphs 3.4, 3.5 and 3.6. Officers undertook to correct these.
- How to make populations ready in the context of vulnerable people, reference was made to the importance of ensuring those with underlying health conditions such as diabetes, hypertension and obesity, were reviewed and supported to help with the readiness of any further waves of Covid-19.

#### **Decision:**

The Kent and Medway Joint Health and Wellbeing Board:

- a) agreed, in principle, that this Board should fulfil the role of the Local Outbreak Engagement Board (i.e. to provide political ownership and public-facing engagement and communication for outbreak response) subject to formal agreement of both the Medway and Kent Health and Wellbeing Boards.
- b) recommended to both Councils' Health and Wellbeing Boards that they formally delegate the function of the Local Outbreak Engagement Board (LOEB) to this Board and agree the terms of reference of the LOEB to be fulfilled by this Board.

#### 135 Work Programme

#### Discussion:

The Democratic Services Officer introduced the report which invited the Joint Board to consider the work programme in light of the latest priorities, issues

and circumstances and made some recommended changes, as set out at section 2 of the report.

Members then raised a number of comments, which included:

- Strategy Delivery Plan The Policy and Relationship Advisor (Health), KCC explained that this was work done by NHS colleagues to translate the NHS Long Term Plan into a local health plan. This, together with the review of the Joint Board, provided an opportunity for the Joint Board to think about its own future and what it wanted to achieve going forward, considering the impact of Covid-19 and health inequalities experienced by some sections of the population.
- Wider determinants of health reference was also made to the
  opportunity the Joint Board had to address the wider determinants of
  health in partnership. There were many issues that cut across health and
  social care and it was considered that a development session to
  determine how best to take this forward and become effective system
  leaders should be explored.
- Case for change: children and young people strategic framework –
  it was suggested that this work should also be refreshed in light of
  Covid-19 and in the context of health inequalities and wider ambitions
  and should therefore be deferred to the December meeting of the Joint
  Board.
- The ESTHER Philosophy of Care reference was also made to the rollout of the ESTHER Philosophy of care across Kent and Medway, which was person-centred care and had been requested by the ICPs. It was suggested the Joint Board should consider this further in relation to sustainable joint working of organisations around the person.

#### Decision:

The Joint Board agreed the work programme as set out at Appendix 1, subject to the points raised by Joint Board Members raised above being discussed at the next agenda planning meeting.

#### Chairman

Date:

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