Medway Council Meeting of Health and Wellbeing Board Thursday, 17 November 2022 3.00pm to 4.47pm

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)

Councillor Vince Maple, Leader of the Labour and Co-operative

Group

Lee-Anne Farach, Director of People - Children and Adults'

Services

James Williams, Director of Public Health

Martin Riley, Joint Senior Responsible Officer, Medway and

Swale Integrated Care Partnership

Substitutes: Vincent Badu, Chief Strategy Officer, Integrated Care Board

Executive Team, NHS Kent & Medway (For Paul Bentley,

Integrated Care Board (ICB) representative.

In Attendance: Mark Breathwick, Head of Strategic Housing

Rebecca Cooper, Head of Safeguarding and Quality Assurance

Stephanie Davis, Democratic Services Officer

Dan Hill, Partnerships Strategy & Customer Relations Manager

Rory Patterson, Independent Scrutineer

Nikki Teesdale, Director of Delivery, Medway & Swale Health

and Care Partnership

388 Apologies for absence

Apologies for absence were received from the following Board Members: Councillors Howard Doe, Adrian Gulvin, Martin Potter and Stuart Tranter, Paul Bentley, Integrated Care Board (ICB) Representative, Jackie Brown, Assistant Director Adult Social Care and Donna Marriott, Assistant Director Child Social Care, Medway Council.

Jayne Black, Chief Executive, Medway NHS Foundation also gave her apologies.

389 Record of meeting

The record of the meeting held on 1 September 2022 was agreed and signed by the Chairman as correct.

390 Urgent matters by reason of special circumstances

There were none.

391 Declarations of Disclosable Pecuniary Interests and Other Significant Interests

Disclosable pecuniary interests

There were none.

Other significant interests (OSIs)

There were none.

Other interests

There were none.

392 Medway and Swale Health and Care Partnership Community Diagnostics Centre Briefing Report

Discussion:

The Director of Delivery, Medway & Swale Health and Care Partnership introduced the report which highlighted the plans to develop community diagnostic centres in Medway and Swale following a successful bid. The plans were to establish a hub at Sheppey community hospital and a Spoke based at Rochester Healthy living centre. The work of the diagnostics centres would focus on recovery following the Covid- 19 Pandemic and address issues with health inequality and improve lives of those in the community. The hub and spoke would be designed and tailored to meet the needs of the community.

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

Site of the Spoke Hub – in response to a question on whether Chatham Healthy Living hub was considered in the decision process, the officer said that Chatham was considered. If the opportunity arose in the future for further Spokes, then other sites in Medway would be considered. It was important that all residents of Medway benefitted from access to good health services.

Benefit to Children and Young People of Medway- it was asked how children and young people of Medway would benefit from the provision at the site. The officer responded that the diagnostic centre, with built in expert test facilities, would be crucial to the development of much needed health pathways for young people of Medway.

The Board welcomed the plans and the news of development of the diagnostic centres in Medway.

Decision:

The Board agreed to support the plans for the Community Diagnostic Centre Spokes site at the Rochester Healthy Living Hub as outlined in the report.

393 Update on Population Health Management

Discussion:

The Chief Strategy Officer, Integrated Care Board Executive Team, NHS Kent and Medway introduced the update report. The second population health management (PHM) action learning set was launched in July 2022. It brought together a wide section of partners across the health and care system, to explore ways to utilise knowledge and use different tools to progress the work. The Integrated Care Board had moved onto the next phase of the PHM project. It was working with its partners and building on existing public health programmes, to address health inequality and disparities.

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

Pilot Scheme- in response to a question on how Swale was identified as the best place for the pilot scheme when there were other areas with a greater population that could have been used, in particular in Medway. The Director of Delivery, Medway and Swale Health and Care Partnership said that Medway Central was the first Primary Care Network (PCN) area that was launched, with Sheppey PCN area the second to go live. The PHM action learning set was a small part of the work being done on population health management in Medway. The expertise of the public health team at Medway greatly benefitted the programme as it enabled team working to identify areas of inequality. The first area of the programme that was rolled out in Medway Central, was focussed on childhood obesity and adults with a long-term condition and the second part of the programme was now being rolled out in Sheppey. There were currently a number of initiatives on population health underway in Medway. The voluntary sector had been central to the work being done which had resulted in the development of a framework that all organisations had signed on working and thinking differently and ensuring the community was at the heart of all its work. The voluntary sector now also sat on all the Health and Care Partnership Boards.

Kent Public Health - it was asked what contribution was being made to the PHM programme in Medway Swale by the Kent Public Health team. It was vital that Kent played their part due to the limited capacity of the Medway Public Heath Team. The Director of Delivery, Medway & Swale Health and Care Partnership said that Kent colleague were involved in analysis, data distribution and roll out of programmes.

Challenges - It was commented that being a unitary authority and having previously had a coterminous Clinical Commissioning Group, put Medway in a position where conversations were easier to maintain. The new landscape and

new way of working meant that collaborative working may be more challenging. It was important to recognise the difference in population and landscape between Medway and Swale and to continue to ensure that the places selected for pilots continued to be evidence driven. The work that was being done by Medway Public Health team was commendable as well as the work by Kent. It was suggested that going forward, it would be beneficial that some of the work took place in more remote parts of Medway, for example, the peninsula and in areas of Swale where access to services was extremely challenging. It was also important to recognise that post Covid, there were some underlying issues that had yet to materialise. There was a need to build a system that would be able to cope with, and respond adequately to, emerging problems.

The Director of Public Health advised the HWB it was extremely important to collaborate. The Board were reminded of their duty under the Health and Social Care Act 2012 to provide support to NHS partners. Regular meetings took place with Kent officers to share learning and work through any boundary issues as well as resolve any conflicts. The resource issues alluded to were appropriately managed and there was no cause for concern.

Complexity of Organisations - it was commented that any service improvement in Swale, had a knock-on benefit to Medway residents. The successful bid on the diagnostics centre was evidence of this. By putting a hub in Sheppey, there was positive benefit for Medway as it reduced demand at Medway Hospital from people outside of Medway. The pathways being explored were centred on identifying where the biggest impact could be achieved. Additionally, work was underway on a primary care needs assessment with nine PCN's across Medway and Swale. The aim was to better understand the differences in need in each area and therefore set priorities to benefit the patients and community in different areas.

Decision:

The Board noted the Update on Population Health Management Report.

394 Children and Young People's Plan

Discussion:

The Director of People, Children and Adults' services introduced the Plan, which had been based on previous consultation with young people and partners and sets out the vision and priorities of the partnership.

The Board was informed that whilst there was no statutory requirement for a Plan, it was decided that it was necessary given the improvement and transformation journey that was being undertaken in the service.

Members made the following comments:

 The decision to develop a Plan despite not being statutorily required was commended.

- Asked how to ensure that the voices of all children in Medway were consulted on as part of the plan and the role services had in this, the Director of People said that the Child Friendly Medway initiative played a major role in capturing the voice of children and young people. Schools also played an instrumental part in capturing the diverse views of children.
- Asked what assurance could be given to families in Medway given the recent tragic news of the death of a child In Rochdale of respiratory problems as a result of prolonged exposure to household mould, the Head of Strategic Housing said that lessons could be learnt from the recent events. There were 15,000 rented homes in the private sector across Medway and the department did not have access to all of them. It was vital that the team continued to try to access homes where issues with damp had been identified in order to provide education on ventilation as well hold landlords to account or deal with issues in public sector housing stock. The challenge was in raising awareness in the community of the support available and accessibility. The Director of People added that there was strong interaction across Medway services and children's social care would continue to pass on any information received to housing as well as public health services.

Decision:

The Board noted report.

395 Medway Safeguarding Children Partnership Annual Report 2021-22

Discussion:

The Head of Safeguarding and Quality Assurance introduced the third annual report which detailed the work undertaken by the Medway Safeguarding Children's Partnership over the last year.

The multiagency training offer which influenced the effectiveness of safeguarding children in Medway for professionals and volunteers working with children continued to receive high uptake. In the last year, virtual training sessions took place which was attended by over 550 delegates and over 360 delegates attended conferences and learning events. The E-learning platform continued to be accessed by and increasing number of delegates.

The Board was informed that two rapid reviews had taken place over the course of the year which was well attended by partner agencies as was the multi-agency audit group that were forums to discuss ways to positively impact quality of practice. Positive feedback was received from the national child safeguarding practice review panel on the quality of Medway's rapid reviews.

Neglect remained a key area of focus and priority for the partnership with the importance of a whole multiagency approach at the forefront of its objective.

The Neglect Strategy was published last year, and a conference was held. In response to comments regarding the Council's ability to adequately respond to issues and failings as highlighted by the tragedy that had recently occurred in Rochdale, the independent scrutineer said that whilst it was a difficult question to answer, the incident highlighted the fundamental importance of partnership working. More work needed to be done to ensure effective information sharing amongst agencies.

The partnership in Medway was strong, with the leadership committed to making improvements to information sharing.

There were areas of weakness identified which included the need for increased third sector engagement and the impact being made by the partnership and ways to develop in these areas were being explored.

Members then made the following further comments:

- It was important that any issues with organisational turnover of senior or middle management continued to be managed effectively to ensure minimal impact as a result of gaps in service and staff replaced with experienced knowledgeable officers.
- The role of the missing parents was highlighted as an area of continued learning that needed good progress to be made on and it was asked what positive impacts of the partnership in this area had been made. The independent scrutineer said that the role of men was important and needed more engagement. Medway was doing some good work in this difficult area such the ICON project which looked at ways of proactive engagement with men. Increased provision of awareness training was being provided across medway. It was difficult to measure the impact of the work done to date due to lack of data to evidence impact. This was an area that could be explored as well as promotion of culture change and taking further proactive steps to address issues through early identification of risks as well as strengths.

Decision:

The Board noted the report.

396 Making Every Adult Matter (MEAM)

Discussion:

The Housing Partnerships Strategy and Customer Relations Manager, delivered a presentation on Making Every Adult Matter (MEAM) Network Area and highlighted the following:

 Making Every Adult Matter is a national coalition of charities that has been established for over 10 years and represents 1300 member organisations across 42 areas in England

- Having been approached in June 2022 to become part of the network due to its recognised strong network of partner organisations, it was confirmed on 7 September 2022 that Medway had been successfully included in the programme.
- Being part of the Network provides Medway with a dedicated critical friend and support from MEAM who will guide us to improve services and systems through access to a wide range of learning including access to core training, including trauma informed and strength-based approaches.
- There would also be access to focused intensive support to manage systemic issues
- MEAM had received funding to work with Medway for two years and Medway would recruit to a Coordinator post. The programme was expected to build on established panels already in place in Medway.
- A strategic board had been set up to agree and track progress and explore and identify areas that require improvements that have been recognised as systemic barriers where joint working can be strengthened to ensure appropriate delivery of services to vulnerable people in the community.
 - To keep the project moving forward, support was required to identify key contacts, support was sought for staffing and sharing the goals, plans and outcomes of the Medway MEAM project.

The following comments were made:

The Director of Delivery, Medway & Swale Health and Care Partnership informed the Board that contact had already been made with Officers regarding this project as the work underway would significantly affect colleagues working in health. There was some resource availability in her team and discussions were taking place on how they could support the project.

The Director of Public Health and the Director of People, Children and Adults Services were both in support of engagement and support of the project. They advised they would ensure their services responded positively to the request of colleagues involved in the MEAM work to unblock any barriers quickly and effectively.

The Chief Strategy Officer, Integrated Care Board Executive Team, NHS Kent and Medway, stated the ICB would link into the work of this project. There was good evidence from similar pilots, that outcomes could be used to inform work to improving life expectancy through prevention. The development of the current Integrated Care Strategy would take this further. It would focus on partnership working at neighbourhood level to tailor intervention to the needs of the local population.

The work that was proposed was welcomed and the commitment from partners to link into this initiative to support the most vulnerable, was commended. Discussions on how the work could be taken forward on a longer-term basis beyond the two-year pilot would be undertaken in due course.

Decision:

The Chair thanked Officers on behalf of the Board for the information presented and looked forward to an update at a future meeting of the HWB on next phase of the project.

397 Work Programme

Discussion:

An update was provided by the Director of Public Health on the briefings at appendices 2 and 3 to the report as well as a verbal update on cost of living.

Health Determinants Research Collaboration - The briefing provided an update following the successful partnership bid which was achieved in April 2022, with the contract signed recently. This allowed until October 2023 for development of the programme and recruitment to ensure the appropriate people were in post. There was a funding allocation of just over £5 million over 5 years to support the work. This collaboration would be focused on transformation of the system to identify issues and allow research to drive evidence-based solutions.

Covid-19 Local Outbreak Management – There was a reduction in Medway Covid rates to 26.9 per 100 thousand. Medway was moving in the right direction, but it was important that vaccination rates increase. Partners were working proactively through the use of different resources such as the mobile bus to reach out to areas of the community with low take up rates. The flu vaccination programme was also being actively run concurrently and promoted.

Cost of Living – Assurance was provided on the work being done through this challenging time. Discussions continue to be held with the different divisions on how to coordinate available resource, within the Council as well as exploring other opportunities in preparedness for the next three to six months. Following the statement from the Chancellor on 17 November, another meeting would be convened to firm up any additional actions to be taken.

The Director of People, Children and Adults' Services added that the coordination of the Household Support Fund was important and accessible to the most vulnerable residents of Medway. The Education Partnership Group had at their recent meeting stood down Covid as a regular item as they were assured that the Public Health team was working well with them and schools. They would continue to deal with Covid on an exceptional basis.

A request was made for an item on to be added to the work programme for 2 February 2023 meeting for the NHS Joint Five Year Forward Plan.

Decision:

- a) The Board agreed the work programme as attached at Appendix A.
- b) The Board agreed that the NHS Joint Five-Year Plan be added to the work programme for the item to be considered at its meeting of 9 February 2023.

Chairman

Date:

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