

HEALTH AND WELLBEING BOARD

MINUTES of a meeting of the Health and Wellbeing Board held on 15 October 2013 at County Hall, Lewes.

PRESENT - Councillor Keith Glazier, ESCC – Leader (Chair)
Councillor Bill Bentley, ESCC – Lead Cabinet Member for Adult Social Care
Councillor Trevor Webb, ESCC
Councillor Pat Rodohan, ESCC
Dr Elizabeth Gill – Chair, High Weald Lewes Havens CCG (Deputy Chair)
Amanda Philpott – Chief Operating Officer, Hastings and Rother CCG in attendance for Dr Greg Wilcox
Dr Martin Writer – Chair, Eastbourne, Hailsham and Seaford CCG
Ged Rowney – Interim Director of Children’s Services, ESCC
Cynthia Lyons – Acting Director of Public Health, ESCC
Julie Fitzgerald – Representative, Healthwatch East Sussex

ALSO PRESENT - Councillor Bob White – Rother District Council
Councillor Troy Tester – Eastbourne Borough Council
Councillor Claire Dowling – Wealden District Council
Councillor Tony Nicholson – Lewes District Council
Marie Casey – Voluntary and Community Sector representative
Pennie Ford – Director of Operations, NHS England Surrey and Sussex Area Team
Catherine Ashton – Associate Director of Strategy and Whole Systems Working, Eastbourne, Hailsham and Seaford CCG and Hastings and Rother CCG
John Eagles – Chief Finance Officer, Sussex Police and Crime Commissioner
Amanda Harrison – Director of Strategic Development and Assurance, East Sussex Healthcare NHS Trust
Dr Graham Bickler – Centre Director Kent, Surrey and Sussex, Public Health England
Ian Kedge – Lewes District Council
Jeremy Leach – Wealden District Council
Ian Fitzpatrick – Eastbourne Borough Council
Richard Homewood – Hastings Borough Council
Lorraine Reid – Managing Director of Specialist Services, Sussex Partnership NHS Foundation Trust
Lisa Schrevel – Policy Officer, ESCC

11. WELCOME AND INTRODUCTIONS

11.1 Councillor Glazier, Chair of the Health and Wellbeing Board welcomed Dr Graham Bickler, Centre Director Kent, Surrey and Sussex, Public Health England to the meeting who was shadowing Cynthia Lyons for the day.

12. MINUTES

12.1 The Minutes of the last meeting dated 23 July 2013 were approved as a correct record.

13. APOLOGIES

13.1 Apologies for absence were received from Greg Wilcox, Hastings and Rother CCG. Amanda Philpott, Chief Operating Officer for Hastings and Rother CCG was in attendance for Dr Greg Wilcox. Apologies for absence were also received from Councillor Turner, Hastings Borough Council, Keith Hinkley, Director of Adult Social Care and Katy Bourne, Sussex Police and Crime Commissioner. John Eagles, Chief Finance Officer for Sussex Police and Crime Commissioner was in attendance for Katy Bourne.

14. INTERESTS

14.1 None.

15. URGENT ITEMS

15.1 The Chair agreed to receive an update on funding for an Extra Care Housing scheme from Councillor Bentley as it would be informative for the Board.

16. HEALTH AND WELLBEING BOARD GOVERNANCE REVIEW

16.1 The Board considered a report by the Chief Executive of ESCC concerning the Health and Wellbeing Board's Governance Review. Becky Shaw (the Chief Executive) presented the report.

16.2 The Board noted that all the responses received during the review had been considered by the Chair and Deputy Chair of the Health and Wellbeing Board.

16.3 Councillor Tester, Eastbourne Borough Council informed the Board that Eastbourne Borough Council did not support the proposal for two District and Borough representatives, because not all key stakeholders would be represented. The other representatives from District and Borough Councils present at the meeting confirmed that they accepted the proposal for two representatives and that these would rotate between the Councils on an annual basis.

16.4 The Voluntary and Community Sector (VCS) representative said the VCS is an important element in integration and full status on the Board would give a good message, but they accepted the decision made.

16.5 It was also noted that the Board would continue to work by consensus and that it sat in the middle of a range of networks making sure connections were being made.

16.6 RESOLVED – to agree the proposals for Board Membership as set out in section 3 and Appendix 1 of the report. (Appendix 1 is attached to these Minutes)

17. CLINICAL COMMISSIONING GROUPS (CCGs) UPDATE

17.1 Amanda Philpott, Chief Operating Officer Hastings and Rother CCG and Accountable Officer Eastbourne Hailsham and Seaford CCG provided an update about the Hastings and Rother CCG on behalf of Dr Greg Wilcox and also the Eastbourne, Hailsham and Seaford CCG. Both CCGs have continued to make progress towards full authorisation. The Eastbourne, Hailsham and Seaford CCG have had their Directions removed and now only had two Conditions in place, as did Hastings and Rother CCG. The Conditions related to the Clear and Credible Plan for East Sussex which remained a challenge during the difficult financial climate. The CCG was looking to the NHS publication, the NHS belongs to all people "Call to Action" which is a paper addressing public and patient involvement and care pathways and sets out the challenges facing the NHS, including more people living longer with more complex conditions and increasing costs. The CCGs have been running key stakeholder events quarterly with Voluntary and Community Sector groups, the public and patient representative groups. The next round will focus on the NHS Call to Action and

the CCGs plans for East Sussex to ensure good public engagement in developing those plans.

17.2 The CCGs are developing their 2014/15 commissioning intentions for their main providers – East Sussex Healthcare NHS Trust, Sussex Partnership NHS Foundation Trust and South East Coast Ambulance Service, for services overall and also possible significant service changes. They highlighted the need to achieve best value and will be working with their partners on care pathways to achieve that. Other areas of focus for the CCGs include how pediatric and maternity services might be configured in the future; memory assessment services and dementia beds; and improving access to services for patients with musculoskeletal conditions.

17.3 Dr Martin Writer, Chair of Eastbourne, Seaford and Hailsham CCG updated the Board about this CCG. Dr Writer explained that currently the CCG was involved in a number of strands of work looking at the short, medium and longer term to create the health economy East Sussex needs. They are about to embark upon East Sussex 2020 Vision which will involve the County Council, the Acute Trust, Healthwatch and the wider community including the Voluntary and Community Sector. It includes work already in hand including the Shaping our Future programme; maternity and pediatric services which they are looking at; dementia assessment beds currently out for consultation; and the Primary Care Strategy which looks at how primary care is designed and configured.

17.4 There had been a temporary emergency reconfiguration of maternity and pediatric services in East Sussex earlier in the year. The CCGs are looking at all the options available regarding how the services could be arranged. The plan is that the engagement process would be completed by the end of this year and will be reported to Health Overview and Scrutiny Committee (HOSC) in January 2014 where HOSC will decide if there is a need for consultation on any proposed changes. If agreed, there will be a 12 week consultation period with final proposals on future maternity and pediatric services being considered by HOSC in July 2014.

17.5 Dr Writer informed the Board that the majority of health contacts are within GP practices but the majority of the cost is in secondary care. Primary Care needed to be strengthened to improve access, quality of service and more care closer to home. Meetings were being held in Hastings and Eastbourne to start the engagement process and it was envisaged that a draft Primary Care Strategy would be ready by the end of this year.

17.6 The consultation on dementia assessment beds was underway and would close at the end of October 2013. It would go before the East Sussex CCG Governing Bodies in December and to HOSC in January 2014. The purpose of the consultation was to consider if the CCGs were using the limited resources available to them in the best way possible and see if any resources could be freed up to invest in more community services, to prevent people needing to be admitted to assessment beds and ensure people live well in their own homes.

17.7 Dr Elizabeth Gill, Chair of High Weald Lewes Havens CCG updated the Board about this CCG. The CCG continued to move at pace and had had a successful assurance meeting with the NHS England Area Team, where only two Conditions remained. The CCG's Strategy depends upon delivering care closer to people's homes due to the geography of the area which is mainly rural. There are three Community Hospitals in the area and the CCG is working to promote services within these hospitals for supporting people at home. The CCG is undertaking much patient consultation with the next meeting being on 6th November at Lewes Town Hall. In addition to these events, they are also getting regular feedback from GPs on what they are hearing from their patients, and the CCG Governing Body looks a range of data on the quality of services people are receiving.

17.8 The CCG was also looking at Primary Care and was focusing on how to increase capacity in general practice. As part of the Dementia Project, which is being launched, the CCG will ensure that each practice has a GP and Nurse who leads on dementia. The CCG confirmed that it was looking at various models of care for people with dementia to help them develop the best model of care locally within available resources.

17.9 RESOLVED – to note the updates.

18. THE DEVELOPMENT OF HEALTHWATCH EAST SUSSEX.

18.1 The Board received a presentation from Julie Fitzgerald, Director of East Sussex Community Voice about the development of Healthwatch East Sussex to date. The presentation covered Healthwatch East Sussex's key functions, the benefits of its services for the public, patients, commissioners and providers, and examples of some of the projects it has undertaken. The presentation slides can be found attached to these Minutes.

18.2 During such a time of change in the health service, the Chair asked how the public were aware of Healthwatch East Sussex and its services, and what the Board could do to assist in raising awareness. The Board noted that during its first six months Healthwatch East Sussex had focused on setting itself up and making sure its systems were robust enough to be able to respond to the public and others contacting them. Healthwatch East Sussex is now asking partners to complement its communications strategy and raise awareness within their networks. Healthwatch East Sussex's collaboration with libraries would play an important role in informing the public about Healthwatch East Sussex services, as will other collaborations in development.

18.3 Recognising the number of changes taking place Healthwatch East Sussex is in the process of formalising a clear and transparent process for prioritising which issues it would tackle and will explain its decisions through its website, publications and partners. These decisions will be informed by their capacity but also by what matters to local people. The Board noted that Healthwatch East Sussex is an independent organisation which hoped to amplify the public voice, and provide evidence to inform decisions.

18.4 The CCGs acknowledged and thanked Healthwatch East Sussex for the strong and independent advice and guidance they had given the CCGs on engaging service users and the public.

18.5 The Board noted the new networks Healthwatch East Sussex was creating and that partners could give Healthwatch East Sussex access to their networks for example Parish Councils, the Youth Cabinet and harder to reach groups.

18.6 RESOLVED – to note the presentation.

19. URGENT ITEM - FUNDING FOR EXTRA CARE HOUSING SCHEME

19.1 Councillor Bentley informed the Board that a £2.36 million partnership bid to the Government for a new Extra Care Housing scheme in Sidley, Rother District comprising 58 flats has been successful. The Board, which had endorsed the funding bid, noted that Extra Care Housing helps to keep people in their own homes. Of the current Extra Care Housing supply across the county, 63% of the tenants would have been in residential care at a high cost, but instead they are in their own home and part of the community.

19.2 RESOLVED – the Health and Wellbeing Board welcomed the update and noted the successful bid, which had been supported by the Board.