

EAST SUSSEX HEALTH AND WELLBEING BOARD

MINUTES of a meeting of the East Sussex Health and Wellbeing Board held at County Hall, Lewes on 12 April 2016.

PRESENT	Councillors Keith Glazier (Chair) Councillors Bill Bentley, Kathryn Field and Trevor Webb; Councillor Claire Dowling, Councillor Mike Turner, Dr Elizabeth Gill, Dr Martin Writer, Jessica Britton, Stuart Gallimore, Keith Hinkley, Cynthia Lyons and Julie Fitzgerald
ALSO PRESENT	Councillor Margaret Robinson, Becky Shaw, Marie Casey and Jayne Phoenix
WITNESSES	Martin Packwood, Head of Joint Commissioning (Mental Health) Kate Parkin, Director Sussex Collaborative Neil Waterhouse, Service Director Older Peoples Mental Health Services Graham Bartlett, Independent Chair of East Sussex Safeguarding Adults Board

22 MINUTES OF MEETING OF HEALTH AND WELLBEING BOARD HELD ON 26 JANUARY 2016

22.1 The Board RESOLVED to agree the minutes of the meeting held on 26 January 2016.

23 APOLOGIES FOR ABSENCE

23.1 Apologies for absence were received from the following Board members: Cllr Pat Rodohan (substitute: Cllr Kathryn Field), Cllr Martin Kenward (substitute: Cllr Claire Dowling), and Amanda Philpott (substitute: Jessica Britton).

23.2 Apologies were also received from the following invited observers: Cllr Linda Walraven, Colm Donaghy, and Sarah MacDonald.

24 DISCLOSURE BY ALL MEMBERS PRESENT OF PERSONAL INTERESTS IN MATTERS ON THE AGENDA

24.1 Cllr Mike Turner declared a personal interest as a relative of the author of a report titled *Emergency Ambulance Services in England* by the NHS Support Federation.

24.2 Stuart Gallimore declared a personal interest in item 5 as the Chair of the health and social care committee of the armed forces charity SSAFA.

24.3 Cllr Trevor Webb declared a personal interest in item 5 as a fundraiser for SSAFA; and item 8 as a member of the East Sussex Better Together Scrutiny Board.

24.4 Cllr Bill Bentley declared a personal interest in item 5 as the treasurer of the 249 Squadron – Royal Air Force Air Cadets, which performs fundraising for the Royal Legion and SSAFA.

24.5 Cllr Kathryn Field declared a personal interest in item 8 as the Chair of the East Sussex Better Together Scrutiny Board.

25 EAST SUSSEX ARMED FORCES COMMUNITY

25.1 The Board considered a report by the Director of Sussex Collaborative, Lead Sussex Armed Forces Network, providing assurance on the progress to meet the needs of the armed forces community in East Sussex.

25.2 The Director of the Armed Forces Network clarified that the Armed Forces Network is not a service itself but raises awareness and brings together other services for the common purpose of meeting the needs of the armed forces community. Some of its current key pieces of work include:

- Looking at the needs and issues of the children of armed forces personnel in recognition that they have poorer outcomes than their peers, and raising their profile within the Local Safeguarding Children Board;
- Producing information and e-learning for families and young carers within the armed forces community on how they can access additional services;
- Working with SSAFA, Combat Stress, and other organisations to ensure that there is additional support available for the armed forces community in Hastings because of the identified higher levels of mental health issues and homelessness in the area.

25.3 The Director of Healthwatch East Sussex said that the organisation has a low profile amongst the armed forces community but is keen to raise that profile in order to collect their experiences of the health service and identify where gaps in healthcare provision may be. The Director of Healthwatch and the Director of the Armed Forces Network agreed to discuss how best to raise Healthwatch's profile.

25.4 SEAP carried out specialist advocacy work in the Thames Valley area funded by the British Legion for the most vulnerable and hard to reach service personnel. The Chief Executive of SEAP vouched for the importance of having advocates of the armed forces community with a military background because they were better able to identify the most vulnerable and hard to reach armed forces personnel. The Chief Executive of SEAP offered to share the information and experiences gathered by SEAP through this advocacy work with the Armed Forces Network.

25.5 The Board RESOLVED to:

- 1) note the progress made to date by Sussex Armed Forces Network and services and partners within Health and Social Care;
- 2) support and encourage the continuation of the work of the system working together to deliver the needs for this community;
- 3) note the work undertaken by the East Sussex Safer Communities Team to review data held on veterans and agree this is used, where possible, to implement these recommendations;
- 4) continue joint working across Sussex through the Sussex Armed Forces Network to provide leadership, champion the needs of this community and raise its profile; and

5) agree that consideration is given by all agencies, through the East Sussex Safer Communities partnership to improve data collection.

26 THE EAST SUSSEX SAFEGUARDING ADULTS BOARD (SAB) STRATEGIC PLAN 2015-18 PROGRESS REPORT

26.1 The Board considered a report by the Independent Chair of East Sussex Safeguarding Adults Board (SAB) providing an update on the progress to date on the delivery of the SAB Strategic Plan 2015-18.

26.2 The following key points emerged in response to questions from the Board:

- SAB is carrying out an end of year review of its performance against its annual work plan 2015/16; any 'Action/ Measure' that has not been achieved will be added to next year's work plan. Next year's work plan will also include 'success criteria' so that the SAB can monitor its performance throughout the year.
- The SAB carries out an ongoing and iterative process of identifying the current main safeguarding issues by examining the available data. This is because the data shows that the priority safeguarding issues change over time and are not just directed by national policy. The SAB also examines the data to identify safeguarding areas that have been under reported and acts to address them, for example, by carrying out specific work with home care agencies to increase the awareness of safeguarding issues amongst home care staff. Domestic violence and financial abuse – which are relatively recently recognised as priority areas in safeguarding – pose significant challenges that the SAB is working to address.
- The SAB has developed strong partnerships amongst its member organisations that enable those organisations to understand some of the potential impacts of funding reductions across the whole of the health and social care system. Individual organisations can use this collective information to coordinate and adjust the work that they do to minimise the effect of these funding reductions and make the best use of their available resources.
- Each GP practice must have a named adult safeguarding lead and all GPs must have been trained to Level 3 Safeguarding Training. Most GPs in East Sussex now operate a triaging system that ensures if a patient with a safeguarding issue is known to a GP, they will always be prioritised when trying to make an appointment.

26.3 The Board RESOLVED to note the report and its appendix.

27 UPDATE ON MENTAL HEALTH CRISIS CONCORDAT

27.1 The Board considered a report by the Head of Strategic Commissioning for Mental Health, ESCC, and the Service Director for East Sussex, Sussex Partnership NHS Foundation Trust, providing an update against the East Sussex Crisis Care Concordat Action Plan.

27.2 The Board welcomed the progress that had been made against the Crisis Care Concordat Action Plan to date.

27.3 The key points of the discussion, raised in response to questions from the Board, included:

- The Head of Strategic Commissioning for Mental Health shared the Board's concern that it had not been possible to agree a Business Case for developing specialist services for people with personality disorders but reassured the Board that work would continue to find a solution. A solution would likely involve the use of pump priming funding and the

use of the parity esteem principle (the national recognition that mental health must be given equal priority to physical health).

- It is currently difficult for people to access mental health services within primary care as a whole – some GP surgeries are well equipped to deal with complex mental health difficulties but other practices find it less easy to do so. Whilst GP surgeries are keen to improve their ability to treat patients with mental health issues, there is a significant national shortage of GPs that makes it difficult to recruit sufficient qualified staff to provide the additional required level of care. The East Sussex Better Together (ESBT) programme is investigating ways to upskill and incentivise primary care to do more for the routine management of people with long-term, stable mental health problems.
- Sussex Partnership NHS Foundation Trust (SPFT) provides information to South East Coast Ambulance NHS Foundation Trust's (SECAmb) Intelligence Based Information System (IBIS) on certain mental health patients along with advice on how they should be treated – often this is to send the patient straight to SPFT and avoid A&E. IBIS is available to ambulance technicians and paramedics on board their ambulance.

27.4 The Board RESOLVED to note the report and its appendix.

28 BETTER CARE FUND 2016/17

28.1 The Board considered a report by the Director of Adult Social Care and Health providing a summary of the Better Care Fund (BCF) requirements for 2016/17, the East Sussex plans, and the arrangements for the Section 75 Pooled Budgets.

28.2 The Board RESOLVED to:

- 1) note the requirements for 2016/17 Better Care Fund;
- 2) approve the East Sussex Better Care Fund Plans, subject to any final amendments, prior to submission by 25 April 2016;
- 3) note and approve the 2016/17 Better Care Fund Section 75 Pooled Budget arrangements; and
- 4) agree that authority for final approval of the plans and the revised pooled budget governance be delegated to Adult Social Care (ASC) and Clinical Commissioning Group Chief Officers pending any final minor amendments prior to submission.

29 NHS UPDATES

29.1 The Board considered verbal updates from representatives of the three East Sussex NHS Clinical Commissioning Groups (CCGs).

29.2 The Chair of High Weald Lewes Havens CCG (HWLH CCG) informed the Board of the following recent news:

- The CCG's Board has been re-elected for a three year term.
- A Connecting 4 You Board has been established to oversee the implementation of a Connecting 4 You health and social care programme.
- Four new 'Communities of Practice' multi-disciplinary health and social care hubs are being rolled out.
- Five new Diabetes Clinics provided by Sussex Community NHS Trust are opening in the Brighton & Hove and High Weald Lewes Havens areas.

- The Golden Ticket Dementia pilot has been evaluated and will be rolled out in September 2016.
- HWLH CCG has achieved a financial surplus for a third year in a row.
- HWLH CCG has improved its performance on the NHS Staff Survey.
- HWLH CCG is part of the Sussex and East Surrey Sustainability and Transformation Plan (STP) 'footprint'.

29.3 The Chief Operating Officer, Hastings and Rother Clinical Commissioning Group (HR CCG), and the Chair of Hailsham and Seaford Clinical Commissioning Group (EHS CCG), updated the Board on the recent news from both CCGs, this included:

- Dr Roger Elias stepped down from his role as Chair of HR CCG on 31 March 2016, the new Chair, Dr David Warden, took up the role on 1 April 2016.
- HR CCG and EHS CCG are also part of Sussex and East Surrey STP 'footprint'; this has particular relevance to how acute care networks are best delivered.
- HR CCG and EHS CCG will have an informal role in the development of the acute STP footprint being developed in the Kent area.
- The East Sussex Better Together programme is in week 90; recent developments include the upcoming rollout of Health and Social Care Connect to the public, and the formal implementation of the integrated locality teams from 1 April 2016.
- The CCGs are exploring suitable Accountable Care Models for the EHS & HR CCG areas along with East Sussex County Council and healthcare providers.
- HR CCG has taken on delegated commissioning of primary care from 1 April 2016.
- The Healthy Hastings and Rother Programme has shown good results and funding has been agreed for 2016/17.
- Work is ongoing to identify a greater number of people with dementia – all East Sussex CCGs are below the national target (National Ave 67.6%, EHS 63.5%, H&R 60.7% and HWLH 58.3%).

29.4 The Chief Operating Officer, HR CCG, agreed to clarify an issue Cllr Turner had raised with the CCG regarding a NHS Support Federation's report on ambulance trusts.

29.5 The Board RESOLVED to:

- 1) note the verbal updates; and
- 2) thank Roger Elias for his significant contribution towards healthcare in East Sussex.

The meeting ended at 4.10 pm.

Councillor Keith Glazier
Chair