

EAST SUSSEX HEALTH AND WELLBEING BOARD

MINUTES of a meeting of the East Sussex Health and Wellbeing Board held at County Hall, Lewes on 25 July 2017.

PRESENT Councillor Keith Glazier (Chair) Councillors Carl Maynard, John Ungar, Sue Beaney; Councillor Linda Wallraven, Amanda Philpott, Keith Hinkley, Ashley Scarff, Joanne Bernhaut and John Routledge

INVITED OBSERVERS Councillor Claire Dowling, Councillor John Barnes, Councillor Margaret Robinson, Becky Shaw, Neil Waterhouse and Marie Casey

ALSO PRESENT Councillors Sylvia Tidy and Colin Belsey

1 MINUTES OF MEETING HELD ON 23 JANUARY 2017

1.1 The minutes of the meeting held on 23 January 2017 were agreed.

2 APOLOGIES FOR ABSENCE

2.1 Apologies for absence were received from:

- Cynthia Lyons (substitute: Joanne Bernhaut)
- Cllr Trevor Webb
- Sarah Macdonald
- Dr Martin Writer
- Dr Elizabeth Gill (substitute: Ashley Scarff)

2.2 Cllr Colin Belsey and Cllr Sylvia Tidy were in attendance as observers.

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

3.1 There were no disclosures of interest.

4 URGENT ITEMS

4.1 There were no urgent items.

5 STRATEGIC INVESTMENT PLAN (SIP)

5.1 The Board considered a report on the East Sussex Better Together (ESBT) Strategic Investment Plan (SIP) for 2017/18.

5.2 In response to questions from the Board, the following answers were provided:

- The SIP is a commissioning plan for the commissioning organisations within ESBT that allocate health and care resources in the ESBT area, i.e., East Sussex County Council and the two Clinical Commissioning Groups. Sussex Partnership NHS Foundation Trust (SPFT) and East Sussex Healthcare NHS Trust (ESHT) are healthcare providers so are part of the broader ESBT Alliance Agreement, but are not part of the commissioning budget, i.e., the SIP.
- The strength of the ESBT Alliance Agreement partnership is that there is a collective commitment to manage the resources available and work to a common outcomes framework. It is therefore robust and clear enough about how it reaches collective agreements to avoid being adversely effected by the new performance metrics in the Department of Health's changes to the Better Care Fund (BCF) planning guidance.

5.3 The Board resolved to note the report.

6 HEALTH AND WELLBEING IN THE NATIONAL PARK AND THE NEW NATIONAL ACCORD

6.1 The Board considered a presentation and report on the role of the South Downs National Park (SDNP) in improving the health and wellbeing of residents in East Sussex.

6.2 The following answers were provided in response to questions from the Board:

- The SDNP jointly funded the Green Open Spaces project with East Sussex County Council, which is now reaching the end of its funding cycle. SDNP is discussing with the ESCC Public Health Department about what best to do next with the project. The Public Health Department will also provide SDNP with information about how the project links in with Health Walks, along with other community and personal resilience projects.
- Wealden District Council has developed a health strategy that includes a dedicated walking website, called *Wealden do Sussex Walks*, that contains themed walks, health information, and the ability to allow people to submit their own walks. It has received a lot of hits and other organisations would be advised to invest in their own separate walking website rather than host it on their existing website.
- SDNP is actively working with ESCC and the district & borough councils on Miles Without Stiles to help disabled or visually impaired people access the countryside. Discussions are underway with the New Forest about Dementia Friendly Parks. There may be some lessons which South Downs can take from this work.
- The SDNP is working with bus and rail companies to advertise the South Downs National Park. There is potential for SDNP to map the entrances to the South Downs with bus routes to see where there are gaps in access using the SHAPE tool. It may be possible for SDNP officers to map the distance to the South Downs from GP practices so that the GP practices can promote how people can access the national park from their area. SDNP will share this learning with other parks such as the Hastings Country Park Nature Reserve to increase opportunities to improve health and wellbeing across the county.
- Public Health England has strong evidence as to the good countryside walking does for people's health and wellbeing. The next step is to integrate it into the broader preventative system so that people associate it with being a vital way to improve health and wellbeing.

6.3 The Board RESOLVED to:

1) Note the opportunities available for the SDNP to support the delivery of Health and Well Being in East Sussex;

2) Ensure future links with the South Downs National Park; and

3) Note that members are invited to attend the SDNP Health and Wellbeing conference on 11 Oct 2017 in Midhurst.

7 HEALTHWATCH EAST SUSSEX LOCALITY ENGAGEMENT PROJECT

7.1 The Board welcomed John Routledge as the new Chief Executive of Healthwatch East Sussex and Member of the Board.

7.2 The Board RESOLVED to agree that the Healthwatch East Sussex Locality Engagement Project should be deferred to the next meeting of the Board.

8 PHARMACEUTICAL NEEDS ASSESSMENT

8.1 The Board considered a draft of the 2017 East Sussex Pharmaceutical Needs Assessment.

8.2 In response to questions from the Board the following answers were provided:

- The Pharmaceutical Needs Assessment (PNA) is a comprehensive assessment of need for everybody and so does not mention specifically the needs of children and young people; the majority of pharmacy users tend to be older people. There is, however, mention of individual projects that are aimed at young people, for example, Chlamydia testing for 15-25 year olds, free emergency hormonal contraception for people under 25 and free pregnancy testing for people under 25. There are also details of community pharmacy providing tailored advice to parents and children for illnesses and ailments such as eczema and coughs/ colds.
- The PNA emphasises the importance of community pharmacies, which are a vital part of the East Sussex Better Together (ESBT) medicines optimisation workstream. The PNA will help ESBT to target areas for improvement in existing pharmacies and for NHS England to consider new market entries.
- The PNA indicates that a small number of rural areas are more than two hours away from a pharmacy by public transport on weekends and public holidays, which can make accessing medicine over the weekend difficult for some patients. East Sussex Healthcare NHS Trust (ESHT) hospital pharmacies provide sufficient medicine to patients being discharged to last them over the weekend period when local pharmacy access is more difficult.
- Pharmacies are independent businesses and as such are paid by NHS England to stay open on days where it would be uneconomical for them to do so, for example, on public holidays and Sundays they are paid £250 per hour. In larger rural areas it is also difficult to encourage pharmacies to be open for 100 hours a week over seven days, and those that do are usually in supermarkets and restricted by its Sunday opening hours. The pharmacy budget is a global sum and is apportioned to provide the best possible spread of pharmacy access for residents in East Sussex; paying pharmacies in rural areas to stay open beyond the hours they do now would, therefore, impact pharmacy availability elsewhere.
- Pharmacies are encouraged to maintain an online presence. NHS Choices contains a profile of all pharmacies, such as its hours of opening and services it provides. Since April 2017, as part of the new Quality Service for Communities, pharmacies qualified for a payment if their NHS Choice profile was updated – 9,700 Of 11,500 pharmacies submitted up-to-date profiles to qualify for this payment. Community pharmacies are also paid to include six health promotion campaigns per year in their window.

36.3 The Board RESOLVED to:

1) approve the final draft of the 2017 East Sussex Pharmaceutical Needs Assessment and agree to its publication; and

2) recommend that the final draft emphasises the pharmaceutical needs of and available pharmaceutical services for children and young people.

9 SUSSEX AND EAST SURREY SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP UPDATE

9.1 The Board considered a presentation providing an update on the progress of the Sussex and East Surrey Sustainability and Transformation Partnership (STP).

9.2 In response to questions from the Board, the following answers were provided:

- The recruitment of a Chair for the STP Executive Board is on hold following the national assessment of the progress of all STPs by NHS England. NHS England has recognised the size and scale of the challenges in East Surrey, and Sussex and the plans to address them, and has rated the STP in the category *needs most improvement*.
- The investments made so far through ESBT in crisis response and frailty services have led to a 78% reduction in readmissions to hospital after 90 days, which is bucking the trend of emergency admissions nationally. This shows the value in investing in community based care. The STP-wide workstreams, such as those around ICT and shared care records, will help to underpin these improvements.
- There is a recognition that the scale of the STP is important for certain workstreams, such as those around workforce, that are not economical at place-based plan level.
- The ESBT programme has taken considerable time and effort to make the progress it has made to date, and further integration is still required. ESBT is a lot further ahead than other place-based plans in the STP area, so the lessons and best practice from the ESBT programme need to be passed to the others.
- Engagement with stakeholders, staff and the public is critical to the success of the STP. The place-based plan level, however, is a more appropriate level for meaningful patient engagement on behalf of the STP.

9.3 The Board RESOLVED to note the presentation.

10 NHS UPDATES

10.1 The Board considered verbal updates from High Weald Lewes Havens Clinical Commissioning Group (HWLH CCG) and Eastbourne, Hailsham and Seaford Clinical Commissioning Group (EHS CCG)/ Hastings and Rother Clinical Commissioning Group (HR CCG).

10.2 The following key points were made:

HWLH CCG

- HWLH CCG was assessed by NHS England as 'good'. Focus on quality, dementia initiatives, financial control and integrational working via Connecting 4 You (C4Y) were all identified as strengths. Underlying financial challenge was identified as an area for improvement.
- C4Y is progressing well. District councils, Healthwatch East Sussex and carer organisations are all on board with the programme; as are the key NHS providers – Sussex Community NHS Foundation Trust (SCFT) and Sussex Partnership NHS Foundation Trust (SPFT).

- HWLH CCG is working with colleagues in the STP and in West Kent to ensure that commissioning decisions are made at the most appropriate scale, e.g., on a local CCG footprint or across the whole regional area for more specialist services.

EHS CCG & HR CCG

- ESBT won the Fostering Partnerships across Health and Care award at the National Health and Care awards. The I-Rock youth mental health service in Hastings came second.
- The Legal vehicle for Accountable Care agreed by the East Sussex County Council Cabinet is to be discussed by the CCG and ESHT boards.
- NHS England rated EHS CCG as 'good' and HR CCG as 'requires improvement'. HR CCG received the lower rating because of the recruitment and retention of GP workforce in Hastings – everything else was identical.

11 DATE OF NEXT MEETING: TUESDAY, 12 SEPTEMBER, 2.30PM

11.1 The Board RESOLVED to:

- 1) note that a report will be considered at its December meeting on what organisations in East Sussex are doing to train staff and raise awareness about dementia. and what they are planning to do to account for future increases in dementia prevalence; and
- 2) agree to postpone its September meeting to later in the year.

The meeting ended at 4.12 pm.

Councillor Keith Glazier (Chair)