EAST SUSSEX HEALTH AND WELLBEING BOARD

MINUTES of a meeting of the East Sussex Health and Wellbeing Board held at Council Chamber, County Hall, Lewes on 13 December 2022.

MEMBERS PRESENT Councillor Keith Glazier (Chair)

Councillor John Ungar, Councillor Trevor Webb, Jessica Britton, Mark Stainton, Darrell Gale, Alison Jeffery, John

Routledge and Charlotte O'Brien

INVITED OBSERVERS PRESENT Councillor Andy Batsford, Councillor Emily O'Brien,

Councillor John Barnes MBE and Becky Shaw

Presenting Officers Chris Robson, Independent Chair, East Sussex

Safeguarding Children Partnership

Vicky Smith, Programme Director, East Sussex Health

and Social Care Transformation

Graham Evans, Head of Public Health Intelligence

23. <u>MINUTES OF MEETING OF HEALTH AND WELLBEING BOARD HELD ON 29 SEPTEMBER 2022</u>

23.1 The minutes of the meeting held on 29 September 2022 were agreed as a correct record.

24. APOLOGIES FOR ABSENCE

24.1 Apologies for absence were received from Councillor Carl Maynard, Councillor Pam Doodes, Joe Chadwick-Bell, ESHT (Charlotte O'Brien substituting) and Mark Matthews, ESFRS.

25. <u>DISCLOSURE BY ALL MEMBERS PRESENT OF PERSONAL INTERESTS IN MATTERS ON THE AGENDA</u>

25.1 There were no disclosures of interests.

26. URGENT ITEMS

26.1 There were none.

27. <u>EAST SUSSEX SAFEGUARDING CHILDREN PARTNERSHIP (ESSCP) ANNUAL</u> REPORT 2021/22

- 27.1 The Board considered a report on the East Sussex Safeguarding Children Partnership (ESSCP) Annual Report for 2021-2022, which focuses on partnership learning, impact, evidence and assurance.
- 27.2 The Chair commented that it was re-assuring that all the systems are working well and thanked the Independent Chair for a clear and easy to read report. There were no questions raised by the Board on the report.
- 27.3 The Board RESOLVED to note the East Sussex Safeguarding Children Partnership Annual Report for 2021-2022.

28. EAST SUSSEX JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) UPDATE

- 28.1 The Board considered an update report on the East Sussex Joint Strategic Needs Assessment (JSNA) and the future direction of the JSNA.
- 28.2 The Board asked if all the information currently available on East Sussex in Figures (ESiF) will be available on the new web site.
- 28.3 Graham Evans, Head of Public Health Intelligence confirmed that the intention is that all the information currently available on ESiF will be available on the new web site.
- 28.4 The Board asked how the cost of living crisis and the resultant pressures on housing, food and dietary needs would be taken into account in the JSNA.
- 28.5 Darrell Gale, Director of Public Heath outlined that there may be some direct impacts of these changes but the impact on health and wellbeing might not be the same for everyone. The changes will be reflected in the data which will be produced at the District or Borough level, ward level and for lower super output areas. Graham Evans added that ESiF will change in future to allow profiling to be undertaken at the local level which will include indicators that track the cost of living and benefits. The data available will include qualitative and quantitative information. Cllr O'Brien outlined that District councils hold some qualitative data from cost of living summits which could be provided to the Public Health team.
- 28.6 The Board questioned whether dementia should be included in the JSNA framework as it did not appear to be mentioned in it.
- 28.7 Darrell Gale acknowledged that dementia had been overlooked in the JSNA framework and confirmed that it will be amended to include dementia.
- 28.8 The Board commented that equalising life expectancy is seen as being a long-term goal and asked what progress there had been with short term and interim measures.
- 28.9 Darrell Gale outlined that as well as life expectancy it is also important to measure quality of life as well. There are some shorter-term markers in behavioural things regarding life expectancy, but there is more work to be done on these measures including at a national level such as the work of Marmot on inequalities and the life course model. There have been some recent changes in life expectancy graph in a downward direction (e.g. due to the impact of Covid and the impact on the health care system) and also some backward looking work.

Graham Evans added that there is some work being carried out on healthy life expectancy based on the average age when people change from being in good health to not being in good health as a measure of quality of life. There is a statistic being developed on the amount of time people are in good health. There is some work being undertaken on the conditions that are likely to lead to people stating they are not in good health (e.g. diabetes, heart disease and chronic respiratory conditions) and this is being fed into the work of the Population Health, Prevention and Health Inequalities Steering Group.

- 28.10 Members of the Board commented that statutory guidance states that Healthwatch and members of the community should be involved in the development of the JSNA and asked for more detail on how that might happen.
- 28.11 Darrell Gale commented that part of the involvement of Healthwatch in the development of the JSNA is through Healthwatch's membership of the Health and Wellbeing Board. The other areas are through the inclusion of Healthwatch's work in the Needs Assessment and through consultation exercises that are carried out on the development of parts of the JSNA. There is also an ongoing process to look at how better Public Health can engage with the community and groups of residents, and particularly those who are not often heard from. The team is happy to work with Healthwatch on how better to engage with the community and include the work Healthwatch already undertakes through its engagement events.
- 28.12 Jessica Britton, Executive Director NHS Sussex commented that there is a really helpful integrated process for developing the JSNA. In terms of the point made about wider engagement it may be helpful for the East Sussex Health and Social Care System Partnership Board and the Population Health, Prevention and Health Inequalities Steering Group to consider this as part of the governance process for the development of the JSNA.
- 28.13 Darrell Gale confirmed that Public Health would be happy to include better engagement in the work of the East Sussex Health and Social Care System Partnership Board and the Population Health, Prevention and Health Inequalities Steering Group.
- 28.14 The Board RESOLVED to approve the JSNA refresh plans for 2023 and beyond.

29. DRAFT SUSSEX INTEGRATED CARE STRATEGY

- 29.1 The Board considered a report of the draft Sussex Integrated Care Strategy (ICS).
- 29.2 The Board asked if the Strategy will look at the cost of living crisis, loneliness and isolation and whether it is going to cover reducing smoking, alcohol misuse and addiction.
- 29.3 Mark Stainton, Director of Adult Social Care and Health outlined that East Sussex County Council had been working on benefit maximisation and other types of support to help residents with the cost of living crisis. The Public Health team will continue to work on smoking cessation and addiction. The Integrated Care Strategy provides a high-level vision and case for change and focuses on three key priorities that will make a difference to people's health and wellbeing. The details will be in the delivery plan and accompanying equalities impact assessment.
- 29.4 The Board commented that how the Strategy is implemented and having enough resources to deliver it will be key. The Board also commented that the workforce and use of technology such as artificial intelligence and digital technologies will be important in delivering the Strategy. It asked when the delivery plan would be available and whether success measures will be included in the delivery plan.

- 29.5 The Chair commented that the implementation plan will be developed by the end of March 2023 and the resources will be addressed as part of the plan. Mark Stainton confirmed that a draft delivery plan will be ready to share with the Board in March 2023 and key measures of success will be developed for inclusion in the plan.
- 29.6 Vicky Smith, Programme Director, East Sussex Health and Social Care Transformation added that the Integrated Care Strategy is high level and delivery planning will need to be undertaken in the place-based partnerships. There is existing work in East Sussex taking place to tackle the issues flagged in the Strategy such as loneliness and isolation. The Strategy will help recast some of our local partnership priorities with the added benefit of system-wide support at a Sussex level. The population health and wellbeing measures are fundamentally important and national guidance on a shared outcomes framework is awaited, which should cover social care, the NHS and public health. This will also shape how the system carries out the measurement of population health and wellbeing in concert with the work Public Health is undertaking through the Population Health, Prevention and Health Inequalities Steering Group.
- 29.7 Alison Jeffery, Director of Children's Services, thanked East Sussex colleagues and partners for advocating for Children and Young People to be a priority in the pan Sussex Integrated Care Strategy. It will be important to ensure this commitment is reflected in the delivery plan for the Strategy.
- 29.8 The Board commented that there is some confusion about what is meant by working at a local level. Is this place, District or Borough, neighbourhood, locality network, or community of interest level and does this differ if it refers to Brighton, West Sussex or East Sussex? When it comes to integration, locality, and joint working it would be good to have some clarity about what is meant by working at a local level.
- 29.9 Mark Stainton acknowledged this point. One of the first actions in developing the delivery plan will be to clarify some definitions. The one of 'place' is clear, there are three places across Sussex which coincide with the boundaries of the three upper tier authorities and HWBs. Below that level it is less clear, and more discussion needs to take place. In terms of integration, there needs to be clarity about what is meant by integration, joint working and partnership working. It does not have to mean changes in organisational structures but that different professionals work together from Districts, Boroughs, NHS and voluntary sector organisations around a discrete group of individuals in the community. When this work was done before there were twelve localities across East Sussex that aligned with the District and Borough council boundaries. This needs to be looked at again, including whether Primary Care Networks could be a good local level to work at. Alison Jeffery commented that sometimes it is necessary to work at on different footprints for different purposes. For example, in Children's Services that might be around different groups of schools.
- 29.10 The Board RESOLVED to endorse the draft Sussex Integrated Care Strategy, specifically the elements that relate to East Sussex and its alignment with priorities set out in the East Sussex Health and Wellbeing Strategy 'Healthy Lives, Healthy People 2022–2027'.

30. WORK PROGRAMME

- 30.1 The Board discussed the work programme which contains the reports planned for future meetings.
- 30.2 It was agreed that a report on the Healthwatch Eastbourne listening tour would be added to the work programme for the March 2023 meeting.

- 30.3 It was clarified that oversight of the JSNA starts with the Board which has the responsibility of the producing the JSNA report. Mark Stainton added that it is a statutory function which is fulfilled by having an annual presentation of a report. A report on the JSNA will be added to the work programme for 2023.
- 30.4 It was reported that the Director of Public Health annual report will be scheduled for the July 2023 meeting and not the March meeting, which is a change to the work programme contained in the report.
- 30.5 The Board RESOLVED to agree the work programme with these amendments.
- 31. ANY OTHER ITEMS PREVIOUSLY NOTIFIED UNDER AGENDA ITEM 4
- 31.1 There were none.

The meeting ended at 3.35 pm.

Councillor Keith Glazier (Chair)