# MINUTES of the meeting of Health and Wellbeing Board held at Committee Room 1 - The Shire Hall, St. Peter's Square, Hereford, HR1 2HX on Wednesday 19 October 2016 at 3.30 pm

Present: Councillor PM Morgan (Herefordshire Council) (Chairman)

Dr Dominic Horne (NHS Herefordshire Clinical Commissioning Group) (Vice

Chairman)

Mr S Hairsnape NHS Herefordshire Clinical Commissioning Group

Ms J Bremner Healthwatch Herefordshire
Mr M Samuels Director for adults and wellbeing

Mrs A Westlake Public health specialist

In attendance: Councillor AJW Powers

Officers: Sharon Amery, Sarah Dugan (Worcestershire Health and Care NHS Trust), Dr

Jonathan Shapiro (One Herefordshire), Dr Alison Talbot-Smith (One

Herefordshire)

#### 88. APOLOGIES FOR ABSENCE

Apologies for absence were received from Jo Davidson, Paul Deneen, Diane Jones MBE, Cllr JG Lester, Jo Melling and Prof R Thomson.

### 89. NAMED SUBSTITUTES (IF ANY)

Andrea Westlake attended as a substitute for Prof Rod Thomson.

#### 90. DECLARATIONS OF INTEREST

None.

#### 91. QUESTIONS FROM MEMBERS OF THE PUBLIC

None.

## 92. MINUTES

#### **RESOLVED**

That the minutes of the meeting held on 20 September 2016 be agreed as a correct record of the meeting and signed by the chairman.

# 93. UPDATE ON HEREFORDSHIRE AND WORCESTERSHIRE SUSTAINABILITY AND TRANSFORMATION PLAN

The director for adults and wellbeing gave a brief overview of the work to date towards developing a sustainability and transformation plan (STP) for Herefordshire and Worcestershire:

 STPs were a national requirement and Herefordshire and Worcestershire formed one of 44 footprints; this was one of the smallest of the footprints in terms of population although it was one of the biggest geographic areas

- partners were represented on the STP programme board to respond to the requirement for high quality, sustainable services
- There had been a previous draft plan submitted to NHS England which had undergone an assurance process, with a further submission on 21 October being the next stage in the process, and there would be scope make further changes to the plan later
- The health and wellbeing board had taken part in a workshop earlier today to view the plan; the meeting today would consider the engagement process and the role of the board in engagement to support delivery of services and the HWB strategy as board members would play a lead role in implementing and promoting the plan to the public and to the people who provide the delivery

Discussion took place regarding communications and engagement for the STP, during which it was noted that:

- there was a communications strategy being developed which would include a detailed plan
- getting this right was critical as, before implementation, there would be a period
  of development of the plan once it was made public, during which stage it may
  not be possible to confirm some details
- the broad aims of the One Herefordshire programme, which supported delivery of the STP, could however be shared, although it was important to be clear about the role of the two to avoid confusion
- public awareness through #YourConversation had commenced and would be developed to enable more targeted dialogue regarding specific parts of the plan, which together with formal consultation, would be ongoing into next year
- it was important to ensure that peoples' views were taken into account and show that the plan had some flexibility

In terms of delivery of the health and wellbeing strategy, the chairman felt that the Herefordshire HWB strategy was broadly recognised in the STP.

A number of recommendations regarding the STP were discussed from a Herefordshire perspective to ensure that local priorities were taken into account, and which would be submitted to the STP board for Herefordshire and Worcestershire:

- to recognise tension between pressures to deliver the short term control figures which could lead to making poor short term decisions, as opposed to strategic planning for the long term. Currently as the plan stands it will not deliver all organisational control totals for the next two financial years.
- to be prepared to be radical but realistic
- to ensure the transformation money is used for transformation and not simply to maintain existing structures in the short term
- to recognise rurality in relation to costs of providing community care, workforce availability and future of the funding of hospital services and to reinforce digital issues, such as availability of broadband and potential to replace face-to-face interactions, in light of rurality
- to recognise more fully the wider determinants of health such as housing and employment as detailed in the Herefordshire HWB strategy
- to place children's services and mental health at the top of the plan as these were a priority in Herefordshire
- to recognise and develop the strengths of workforce, seeing staff as an asset but recognising the challenges that existed
- to recognise and develop the strengths of carers, communities and families
- to provide clear terminology e.g., what self-care means to the public

- to recognise that some solutions will require co-production between professionals and the public
- to see mental health and learning disability separated as different issues
- to promote positive messages and benefits regarding system changes
- specifically for priority 3 of the plan:
  - o to think widely in terms of "family"; refer to the education gap e.g. for those receiving free school meals, and include dental health
  - o to include mental health prevention
  - care out of hospital One Herefordshire is the delivery vehicle, which needs to be strengthened and accelerated; recognise that there is urgent need to see this work coming forward
- for priority 4 maternity and A&E identify innovative solutions that are clinically safe and sustainable whilst meeting the needs of the population
- with regard to communications and engagement, this must be genuine and there must be an effective feedback loop

#### **RESOLVED**

That the Herefordshire health and wellbeing board ask the STP board to note the recommendations agreed above, and to ask the STP programme board to raise these issues in its submission to NHS England on behalf of the health and wellbeing board.

The meeting ended at 4.06 pm

**CHAIRMAN**