

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 Tuesday 7 February 2017 at 10.00 am

Present: Cllr PM Morgan (Herefordshire Council) (Chairman)
Dr Dominic Horne (NHS Herefordshire Clinical Commissioning Group) (Vice Chairman)

Prof Rod Thomson	Director of Public Health
Mr P Deneen	Healthwatch Herefordshire
Ms J Bremner	Healthwatch Herefordshire
Mr M Samuels	Director for adults and wellbeing
Mr C Baird	Assistant director commissioning and education
Ms J Melling	NHS England
Cllr JA Hyde	Herefordshire Council
Ms H Braund	NHS Herefordshire Clinical Commissioning Group

Officers: Jade Brooks (NHS Herefordshire CCG), John Coleman (Herefordshire Council), Sally Halls (Herefordshire Safeguarding Children Board), Ivan Powell (Herefordshire Safeguarding Adults Board)

94. APOLOGIES FOR ABSENCE

Apologies were received from Jo Davidson, Simon Hairsnape, Diane Jones, and Cllr JG Lester.

95. NAMED SUBSTITUTES (IF ANY)

Chris Baird substituted for Jo Davidson, Hazel Braund for Simon Hairsnape and Councillor JA Hyde for Councillor JG Lester.

96. DECLARATIONS OF INTEREST

None.

97. MINUTES

RESOLVED

That the minutes of the meeting held on 19 October 2016 be agreed as a correct record of the meeting and signed by the chairman.

It was noted that, with reference to the previous meeting during which members were briefed on the sustainability and transformation plan (STP), communications and engagement activity had been taking place, and clarification was being sought from health leadership on the extent to which this involved wider staff groups within health. A report was expected on the STP communications and engagement processes for the health and social care overview and scrutiny committee on 27 February.

There had been a proposal for a joint Herefordshire and Worcestershire health and wellbeing board on the outcomes from the engagement exercise for the STP. A date for the meeting was under negotiation and board members were asked to prioritise this meeting.

98. QUESTIONS FROM MEMBERS OF THE PUBLIC

There were no questions received.

99. HEREFORDSHIRE SAFEGUARDING CHILDREN BOARD (HSCB) ANNUAL REPORT 2015/16 AND BUSINESS PLAN 2016-18 HEREFORDSHIRE SAFEGUARDING ADULT BOARD (HSAB) ANNUAL REPORT 2015/16 AND BUSINESS PLAN 2017-18

Herefordshire Safeguarding Children Board (HSCB)

The independent chair, HSCB, presented the annual report for 2015/16, setting out progress on the board's priorities.

The priorities of the safeguarding board and the health and wellbeing strategy were aligned, so it was important for both to have critical oversight of each other to make a difference to safety of children. The following key points were highlighted:

- The number of child protection plans in the county were found to be higher than expected and this had been addressed by supporting professionals to manage risk and access higher thresholds of need only when in the best interest of the child, by focusing on early help and ensuring early indicators of harm were spotted
- A new priority to focus on neglect was identified as this was an emerging concern and this was an area that the health and wellbeing board could support
- there were other areas that the health and wellbeing board could consider that would improve health outcomes for children to give them the best start. Examples included fluoridation of the water supply to improve dental health, and further co-ordinated early intervention and commissioning to address the 'toxic trio' of domestic abuse, mental health and substance misuse
- that there was a significantly higher rate of sexual offences against children in Herefordshire compared with national figures, which needed to be better understood

In the discussion that followed, these key points were noted:

- water fluoridation had been considered in the past and although it was generally an obvious solution it was not the whole solution. The nature of the county also meant that there was no single water supply to households, and it would be a significant cost that would not benefit the whole population
- there was an awareness of dental health amongst children that had been assessed through work on dental care by Healthwatch and Crucial Crew
- domestic abuse was a priority for the community safety partnership board
- it was important to ensure that all partners were supported to attend MARAC (multi-agency risk assessment conference) meetings so that all were connected and sharing information
- sexual abuse of children could coincide with domestic abuse and as rates were high in the county, a multi-agency approach was needed to understand this issue better in terms of patterns of incidence. This was something the community safety partnership could look at.
- the refreshed joint strategic needs assessment could provide a focus on sexual abuse of children and coincidence with domestic abuse, linking to mental health and adult safeguarding
- a further dimension was that these issues featured as having an impact on children coming into care

Herefordshire Safeguarding Adults Board (HSAB)

The independent chair, HSAB, presented the annual report, highlighting the following:

- both safeguarding boards and the community safety partnership were supported by a joint business unit and this facilitated the sharing of cross-cutting themes
- the focus of adult safeguarding was different from that of children as it worked within the personalisation agenda and within the context of people making choices
- the presenting issues centred on the Care Act, domestic abuse and dementia, and West Mercia Police were leading on a bid focused on bespoke services to support the issue of domestic abuse by people with dementia. However other partners needed to be involved as disclosures were not made exclusively to the police. The stigma needed to be lifted to support people to feel able to make disclosures especially where an issue was seen as part of the illness rather than domestic abuse.
- There was ongoing work on domestic abuse including research work in Shropshire and there was value in bringing partners together for a domestic abuse summit to consolidate intelligence and approach
- 'making safeguarding personal' was the subject of a council-led external ADASS peer review and significant progress had been made on this and agencies were committed to the work
- Adult sexual exploitation needed a clearer national definition to include issues other than prostitution
- modern slavery was highlighted as an issue in the county, which included a crown court case this year
- there had been 4 adult safeguarding reviews this year under the Care Act. There was more flexibility in the approach to this compared with children's, and these were conducted using different methodologies
- a draft prevention strategy was developed as a requirement of the Care Act and it was hoped that there would be wider contribution to refreshing this. For example, broadening the scope of fire safety checks to include other aspects of the health and wellbeing agenda. An event was taking place on 14 February to encourage wider engagement on this issue.

In the ensuing discussion, the following comments were noted:

- it was important for partners to work together to support particular issues, such as domestic abuse, work on prevention, and hospital discharge, as many professionals contribute. If there were areas where greater engagement could be encouraged, this could be flagged up to the health and wellbeing board, and formal arrangements could be considered.
- the joint business unit was a good example of working together, enhanced by the appointment of the business manager
- the strategic intelligence team was exploring the extent of adult sexual exploitation and developing a definition
- boards needed to be sighted jointly on modern slavery and trafficking and also on domestic abuse. Research was noted on the impact of domestic abuse, finding adverse impact on children and their emotional resilience in the long term.

RESOLVED

That:

- (a) the annual reports and business plans of the two safeguarding boards be noted;**
- (b) the Community Safety Partnership board report to the meeting in May 2017, with a particular focus on domestic abuse and harm from alcohol and drugs, and incidents of sexual harm against children;**

- (c) a report on the public health strategic plan be presented at the May 2017 meeting;
- (d) a report by public health on children's dental health and possible actions be presented at the May 2017 meeting; and
- (e) the following action points be addressed:
 - community safety partnership board to facilitate a multi-agency approach in order to gain a better understanding of patterns of incidence of sexual abuse of children coinciding with domestic abuse
 - the refreshed joint strategic needs assessment be developed to provide a focus on sexual abuse of children coinciding with domestic abuse, and linking this to mental health and adult safeguarding
 - In developing a bid focused on bespoke services to support the issue of domestic abuse by people with dementia, West Mercia Police to involve partners in recognition that disclosures were not being made exclusively to the police
 - Partners to work on lifting the stigma of domestic abuse to support people in feeling able to make disclosures especially where an issue was seen as part of the illness rather than domestic abuse
 - For the adult safeguarding board to co-ordinate a domestic abuse summit for partners to consolidate intelligence and approach
 - both safeguarding boards and the community safety partnership board to ensure they are sighted on modern slavery and trafficking and also on domestic abuse, with a clear lead board to be identified.

100. MENTAL HEALTH UPDATE

The deputy director of operations (NHS Herefordshire Clinical Commissioning Group) presented an update on the mental health priority contained within the health and wellbeing strategy. It was noted that this was a positive report as developments in mental health care provision had started to take effect. The update noted the following points:

- a feature of the strategy was to reduce the stigma associated with mental health, and there had been a groundswell of talking within communities, and this could be developed through the strong young minds project.
- Work was progressing with increasing access to psychological therapies, supported by the crisis care concordat, the children and young people's plan and these were extending to enhance adult services. A number of agencies contributed to these and a multi-disciplinary and co-ordinated approach to early intervention was progressing
- referrals into services were being seen within 4 weeks for adults and 2 weeks for children and dementia services and the child and adolescent mental health services were regarded highly within the West Midlands
- The focus was now on promoting early intervention and prevention. Communities had contributed to development of this and the message could be reinforced through organisations such as Carers' Support, Healthwatch and the Ross project, a community-led focus on mental health support
- with regard to provision of a formal place of safety, a capital build was to commence in March 2017 at the Stonebow Unit. This would support crisis care management and Mental Health Act section 136 assessments. This was a positive step as it meant that people were no longer being taken to a police cell
- multi-agency training on mental health awareness was ongoing
- a mental health toolkit was developed and there was awareness raising through young peoples' ambassadors. The board was reminded this it was children's mental health week and the young peoples' ambassadors were working on a blog and using the online community to promote mental health awareness

- with regard to improving access to psychological therapies (IAPT), there was under-representation for mild and moderate depression and a workplace project was to commence in 2018
- a joint pathway was being developed for working with emotional and behavioural development issues around attachment and bonding and there would be further work to inform this
- there were to be further developments on mental health partnerships, workforce development and awareness raising. It was noted that suicide prevention work would commence this spring and also a care pathway for physical and mental health care.
- prevention and mental health promotion remained a cornerstone

In response to the update, the following points were noted:

- It would be beneficial to produce a briefing note to provide reassurance on positive developments in mental health work. There was a press campaign for young peoples' mental health week, and it was noted that a range of media was required to help to promote mental health work. The briefing note would be a useful medium in which to define the common mental health issues that affected the 1 in 4 people statistically
- It was noted that the place of safety under development at the Stonebow Unit was located in order to be close to the accident and emergency department. This meant that it was also close to the railway, however, and in mitigating this suicide risk, there had been discussions with transport police.
- Healthwatch focused on mental health in a question time event held last year. This was a multi-agency panel and the good partnership working on mental health was noted.
- With regard to schools, there were a number of strands including a network for special educational needs co-ordinators and CAMHS had started a helpline aimed at schools to talk through an issue or concern on a child
- there was also a task and finish group in progress which was focusing on children and young people, and a range of support and resources for schools were being developed which included a self-harm policy, mental health first aid training and the MindEd programme, which would provide a menu of options for schools to choose
- it was difficult to engage people in discussions on mental health and suicide prevention, and it was noted that input from the CCG could support this

RESOLVED

That:

(a) the report be noted; and

(b) action points, as set out below, be addressed:

- **the aim of the health and wellbeing strategy to reduce stigma associated with mental health be developed through the strong young minds project**
- **Carers' Support, Healthwatch and the Ross project (a community-led focus on mental health support) to support the promotion of early intervention and prevention**
- **CCG to produce a briefing note for councillors to provide reassurance on positive developments in mental health work and to define the common mental health issues that affect the 1 in 4 people statistically**

101. BETTER CARE FUND 2016/17 QUARTER TWO PERFORMANCE REPORT

The director for adults and wellbeing outlined that this report set out the quarter 2 return that had already been submitted to NHS England as it had not been possible to align the

national deadline for submissions with board meetings. The headlines of the report were that:

- with regard to residential care, there was more detailed analysis on the rate of admissions for the over 65 age group, showing that admissions were broadly in line with demographics
- demand for residential care was being overtaken by transfers directly into nursing care, with dementia care needs becoming more prevalent
- new guidance on the better care fund was awaited and so some informed projections were necessary with regard to funding
- It was hoped that the guidance would take a lighter touch approach and it was anticipated that under new guidance, with regard to full health and social care integration by 2020, this would be outlined in the BCF plan, with local interpretation

Discussion took place regarding delayed transfers of care, noting a shift from health related transfers, towards delays relating to social care support, particularly for transfers to out of county services. There was better understanding of the delays and identifying opportunities to support discharge planning, working together across the system, and addressing delays earlier. The patient's perspective was noted as it was important for people to be fully aware of care needs in time to be able to plan.

The following additional points were noted:

- the BCF would reflect limited changes in the overall budget as it was a small element and the majority of budget commitment sat outside the BCF and it was expected that the planned 2 per cent increase in the social care precept would be more than absorbed by cost increases
- the overall budget for adults and wellbeing was £85k less in cash terms in 2017/18 than it had been in 2016/17 and without the council tax increase there would have been a shortfall of around £2million. The budget for social care therefore needed to be reviewed to ensure it was sustainable once central government grant ceased and the council became fully reliant on locally-raised taxation from 2020
- there was regular dialogue with MPs about the budgetary pressures and ability to meet demand. However there were national pressures and changes to peoples' care provision, with all services facing significant reductions which put pressure on healthcare
- delayed transfers of care was a whole system issue and about working together to keep people safe
- there was value in the board looking at aspects of joint commissioning work as the BCF represented just 5 per cent of the budget

RESOLVED

That:

- (a) the quarter 2 BCF return, as submitted, be noted; and**
- (b) a report on joint working across the Herefordshire health and wellbeing system be presented to the next meeting**

The meeting ended at 12.17 pm

CHAIRMAN