

Minutes of the meeting of Health and Wellbeing Board held in Conference Room 1 - Herefordshire Council, Plough Lane Offices, Hereford, HR4 0LE on Monday 10 June 2024 at 2.00 pm

Board members present in person, voting:

Stephen Brewster	VCS representative
Jon Butlin	Assistant Director (Prevention), Hereford & Worcester Fire and Rescue Service
Councillor Carole Gandy (Chairperson)	Cabinet Member Adults, Health and Wellbeing, Herefordshire Council
Dr Mike Hearne	Herefordshire General Practice
Jane Ives (Vice-Chairperson)	Managing Director, Wye Valley NHS Trust
Councillor Jonathan Lester	Leader of the Council, Herefordshire Council
David Mehaffey	Executive Director of Strategy and Integration, NHS Herefordshire and Worcestershire ICB
Matt Pearce	Director of Public Health, Herefordshire Council
Christine Price	Chief Officer, Healthwatch Herefordshire

Board members in attendance remotely, non-voting:

Kevin Crompton	Independent Chair, Herefordshire Safeguarding Adults Board
Helen Wain	Superintendent, West Mercia Police

Note: Board members in attendance remotely, e.g. through video conference facilities, may not vote on any decisions taken.

Others present in person:

Michael Dalili	Public Health Registrar	Herefordshire Council
Hayley Doyle	Service Director - All Age Commissioning	
Mohamed Essoussi	Public Health Programme Officer (Strategy and Partnerships)	
Kristan Pritchard	Health Improvement Practitioner	
Valerie Fitch	Chair, Herefordshire Autism Partnership Board	

65. APOLOGIES FOR ABSENCE

Apologies were received from: Ross Cook, Hilary Hall, Susan Harris, and Simon Trickett.

66. NAMED SUBSTITUTES (IF ANY)

There were no named substitutes.

67. DECLARATIONS OF INTEREST

There were no declarations of interest.

68. MINUTES

The board approved the minutes of the meeting 11 March 2024.

69. QUESTIONS FROM MEMBERS OF THE PUBLIC

There were no questions from members of the public.

70. QUESTIONS FROM COUNCILLORS

There were no questions from councillors.

71. UPDATE TO THE BOARD ON THE GOOD MENTAL HEALTH ACTION PLAN AND MENTAL HEALTH NEEDS ASSESSMENT

Kristan Pritchard provided a brief overview on progress of the implementation plan of the good mental health action plan.

The Chair asked where progress was in relation to 'promoting voluntary activities available via Herefordshire Wellbeing Ambassadors and Strong Young Minds Champions' (page 32).

Kristan Pritchard responded that work is ongoing with partners in this area and the review date has been set for December 2024.

Michael Dalili provided an overview on the Herefordshire Mental Health Needs Assessment.

The Director of Public Health noted that this is one part of a stage as part of mental health needs of those in communities, especially in harder to reach communities. The mental health action plan needs to be able to address issues which are present in those communities.

Dr Mike Hearne noted that something is needed on access to services and it would be helpful to have data on access to such services.

The Chair added that it is important to recognise that the council and voluntary sector have worked hard to get as many rough sleepers into supported accommodation.

David Mehaffey asked if smoking-quit rates are known amongst people who have specific mental health conditions.

Michael Dalili responded that this is something he would look into to find data on this group of people.

Kevin Crompton noted that from a safeguarding perspective, there is concern around the self-harm figure and will take that away to the Safeguarding Children Partnership.

The Chair added that the estimated dementia diagnosis was displayed in red, however, it is better than the England rate and region rate.

The Director of Public Health responded that some of the targets are arbitrary and some are red because they are lower than the national average.

David Mehaffey noted that on dementia diagnosis it is better to have a higher number as it is necessary to find people who have dementia to be able to treat them with it.

Jane Ives added that statistically there is a number of people who should be diagnosed with dementia and the aim is to find and diagnose those people who have dementia.

Stephen Brewster noted that a lot is going on amongst the VCS which is not necessarily being captured and it is important to capture the whole picture not only the statutory services provided.

Kristan Pritchard responded that this was a very useful point and it is vital that as this work continues to evolve, that the work all partners do is included.

The report recommendations were proposed, seconded, and approved unanimously.

Resolved

That:

- a) That the Board considers the reports and notes the progress to date;**
- b) That the Board considers how to ensure that all partnership organisations are clearly sighted on the implementation plan and reference it across their own strategies and plans.**

72. BETTER CARE FUND (BCF) YEAR END REPORT 2023-2024

Hayley Doyle provided an overview of the BCF year-end report 2023-24.

Adrian Griffiths commented on finance. The main points provided were:

1. Each pool of the BCF is in itself limited to national allocation and therefore the fund has to balance back to each funding stream.
2. This year, the funds overspent slightly (1%) and was expected and came down towards the end of the year.
3. The two statutory partners, the ICB and the council, have different responsibilities for each partner as part of the risk sharing agreement.
4. It was planned to use all accumulated reserves from underspends in previous years from the BCF to cover the cost of the discharge system for 23/24 and this was achieved.
5. For 24/25, this reserve is not available. Improvements have been made in the discharge system and the 24/25 planned refresh of the BCF has been completed.
6. There is a planned continued improvement in both occupancy and lengths of stay within the services to further reduce the amount of care that is bought in the market making the system better integrated, better for patients, and more affordable.

Jane Ives noted that on people being at home 91 days after a reablement service, the work being done on reablement is something that will be expected to move over the course of the year and that will make a difference to other areas.

David Mehaffey asked if it is known whether there is an increase in the number of people who are falling or an inability in the NHS to prevent them from being admitted once they have arrived.

The Director of Public Health noted that some work is currently being done on a Falls Needs Assessment which may be helpful in addressing those concerns.

Adrian Griffiths added that whilst the number of falls per head increased compared to the previous year, Herefordshire still benchmarks favourably nationally.

David Mehaffey acknowledged the point about national benchmarks but noted that the data is in need of being updated in order to be able to act quickly in response to an increase in falls.

The report recommendation was proposed, seconded, and approved unanimously.

Resolved

That:

- a) The Better Care Fund (BCF) 2023-2024 year-end template at appendix 1, as submitted to NHS England, be reviewed and retrospectively approved by the board.**

Action:

1. To bring back the Falls Needs Assessment to the board at a future meeting.

73. DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

The Chair thanked the Director of Public Health, on behalf of the board, for the work he has done at the council and out in the community, and wished him the best for the future.

The Director of Public Health thanked the Chair and the board and acknowledged the positive things that are ongoing in Herefordshire supporting public health.

The Director of Public Health proceeded to provide an overview of the DPH Annual Report 2023.

Stephen Brewster thanked the Director of Public Health for the recognition of the VCS in terms of its contribution and asked what specifically can be done in relation to physical activity in order to reduce, for example, the risk of falls.

The Director of Public Health responded that there is a 'physical activity deficiency' where people do not realise how much physical activity they need to do. More can be done on social prescription on lighter physical activities such as dance which can be promoted. There is also more structured work that can be done on falls to target people who are more highly at risk of falls.

The Chair noted that it is difficult to find out who those people are who are lonely if they do not come out of their homes. It was added that this is more acute among people who live in more rural settings across the county.

The Director of Public Health responded that people are coming along to events because they are able to form social connections and the physical activity became secondary.

David Mehaffey noted that funding has been received from DWP to run the 'WorkWell' service which will enable a service to be put in place to allow people who are at risk of falling out of employment due to ill health then they can access this new service to help them overcome the barriers that help keep them in work.

Jane Ives pointed out that the numbers are getting worse including the healthy life expectancy particularly for men, for example. The figures are from four years ago and it was asked if there is newer data available to understand it better in real time. The Director of Public Health responded that the data is not available and it is difficult to say what has happened in the time since.

Jane Ives asked about performance on health checks and how they are tracked.

The Director of Public Health answered that Herefordshire is one of the best in the West Midlands for the number of people being invited for NHS health checks and completing health checks. This has been successful in large part with respect to the partnership with Taurus. In terms of tracking health checks, this is something that can be done in the future.

David Mehaffey added that on health checks, the ICB is particularly interested in relation to the health inequality issues surrounding health checks.

The report recommendation was proposed, seconded, and approved unanimously.

Resolved

That:

- a) **That the board note the content of the report, and for board members to share with respective organisations and networks to consider the recommendations contained within.**

74. HEREFORDSHIRE AND WORCESTERSHIRE ALL AGE AUTISM STRATEGY 2024-2029

Hayley Doyle presented an overview of the Herefordshire and Worcestershire All Age Autism Strategy 2024-29 report.

Valerie Fitch gave a presentation on how autism affects people throughout their lives.

The Chair noted that she attended a supported living accommodation in Hereford where she met some young autistic people, aged 18-25, which highlighted the positive things they are doing which they were previously unable to do.

Dr Mike Hearne noted he was supportive of the strategy and highlighted the delay in diagnosis of autism. It was asked what the wait is and the timelines that are being worked towards. It was also noted that delivery of the strategy must be ensured across all partners.

Jane Ives added that the wait is too long in which there is difficulty in relation to workforce and recruitment into this specialty. There is a range of things that are being done including the commissioning of a regional review to see if there is a different shape of the workforce that could be used compared to how traditionally this has been carried out. There is particular concern around pre-school children and more resources are being put into that area.

The Director of Public Health noted the links around mental health needs and suicide prevention in which there is now a suicide prevention officer in post. It is important that this work is linked into the better mental health action plan in order to help support the ambitions of the strategy.

Stephen Brewster requested that the training be extended to the VCS to raise awareness across the voluntary sector rather than just the statutory services.

David Mehaffey noted that he understood that conversations are ongoing to look at wider groups who can access the NHS training package on it. The NHS is aiming to have 40% of all staff trained by March 2025 in this programme before rolling it out further.

The Leader of the Council welcomed the strategy and recognised the strength of personal experience. The more case studies the better in order to underline the challenges that people face with autism.

The Chair added that the training which is provided to young people with autism is limited to certain activities such as farming, cooking, gardening etc. There is an opportunity in Herefordshire to find some organisations that are involved in technical functions including the gaming industry, for example, in order to work with young people with autism who have such relevant skills.

Valerie Fitch noted that there are autistic people who have many strengths who can be highly suitable to particular jobs, especially in gaming and software testing. The report recommendations were proposed, seconded, and unanimously approved.

Resolved

That:

- a) The Board considers the reports and notes progress to date**
- b) The Board considers how to ensure that all partnership organisations are clearly sighted on the strategy and cross references it with their own plans**

75. WORK PROGRAMME

The board considered the work programme.

76. DATE OF NEXT MEETING

The next scheduled meeting is 16 September 2024, 14:00-17:00.

The meeting ended at 4.25 pm

Chairperson