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12 May 2017

Dear Councillor

I am now able to enclose, for consideration at the meeting of the **SOUTH KENT COAST HEALTH AND WELLBEING BOARD** on Tuesday 16 May 2017 at 3.00 pm, the following reports that were unavailable when the agenda was printed.

6 **MINUTES** (Pages 2 - 6)

To confirm the Minutes of the meeting of the Board held on 21 March 2017.

Yours sincerely

A handwritten signature in black ink, appearing to be "Nicky", is written over a horizontal line. Below the signature, the text "Chief Executive" is printed.

Chief Executive

Minutes of the meeting of the **SOUTH KENT COAST HEALTH AND WELLBEING BOARD** held at the Council Offices, Whitfield on Tuesday, 21 March 2017 at 3.00 pm.

Present:

Chairman: Councillor P A Watkins

Councillors: Dr J Chaudhuri (Vice-Chairman in the Chair Min No.50 - 53)
Councillor P M Beresford
Ms K Benbow
Councillor S S Chandler
Ms C Fox
Councillor J Hollingsbee
Mr S Inett

Also Present: Hilary Knight (South Kent Coast Clinical Commissioning Group)
Mark Needham (Chief Officer, Integrated Accountable Care Organisation)
Wendy Slater (Project Manager Integrated Commissioning South Kent Coast Clinical Commissioning Group)

Officers: Head of Leadership Support
Leadership Support Officer
Team Leader – Democratic Support

43 APOLOGIES

Apologies for absence were received from Councillor M Lyons (Shepway District Council) and Councillor G Lymer (Kent County Council).

44 APPOINTMENT OF SUBSTITUTE MEMBERS

There were no substitute members appointment.

45 DECLARATIONS OF INTEREST

There were no declarations of interest made by members of the Board.

46 MINUTES

It was agreed that the Minutes of the Board meeting held on 24 January 2017 be approved as a correct record and signed by the Chairman.

47 MATTERS RAISED ON NOTICE BY MEMBERS OF THE BOARD

There were no items raised on notice by members of the Board.

48 PREVENTION, SELF-CARE AND HOUSING WORKSTREAMS UPDATE

The Board received an update on the Prevention, Self-Care and Housing work streams from Dr J Chaudhuri and Wendy Slater (Project Manager Integrated Commissioning South Kent Coast Clinical Commissioning Group).

Housing

Members were advised that South Kent Coast Clinical Commissioning Group was working with Dover District Council and Shepway District Council to identify opportunities to support people remaining independent at home, preventing avoidable hospital admissions and enabling people to be discharged more easily from hospital through the use of Disabled Facilities Grants (DFG) to help adapt properties. This also covered identifying needs assessments for falls.

A task and finish group led by EK Housing was preparing to address the issues raised including improving communications and raising awareness of available support services.

Shepway District Council was looking at bringing services together in a pilot area to speed up delivery and both district councils had commissioned work on private sector housing data.

Prevention and Self-Care

South Kent Coast Clinical Commissioning Group had been awarded the bid to deliver the Age UK Personalised Integrated Care Programme. This was a national programme to be administered locally. The Programme promoted independence and the prevention of avoidable hospital admissions for people with long term conditions. The programme had been launched in January 2017.

In respect of Care Navigation, ensuring that people received the support they needed at the right time underpinned South Kent Coast Clinical Commissioning Groups local care model. Work was underway to increase current resources in order to provide equitable access across the area and it was complemented it the work of the Age UK Personalised Integrated Care Programme.

The Public Health Priorities for South Kent Coast were focussed on healthy weight with opportunities to support early identification are being considered.

RESOLVED: That the update be noted.

49 DOVER DISTRICT COUNCIL LOCAL PLAN REVIEW PROCESS

The Principal Infrastructure and Delivery Officer and the Senior Planner presented the process for the Dover District Council Local Plan Review.

As part of the review it was recognised that the built and natural environment were

major determinants of health and that the design of the built environment and access to natural spaces had an influence on health and wellbeing. In addition, the National Planning Policy Framework required planners to take account of local health and wellbeing needs and strategies/service plans as part of the development of the Local Plan and there was a duty to co-operate in the making of the Local Plan on health issues.

Members of the Board were advised that from 1 April 2017, NHS England would be delegating responsibility for S106 agreements to local Clinical Commissioning Groups. As part of this South Kent Coast Clinical Commissioning Group was developing the resources to deal with these more proactively.

Councillor P A Watkins advised that there was the opportunity for South Kent Coast Clinical Commissioning Group to help Dover District Council and Shepway District Council identify where there were health needs.

The Board was advised that primary care funding was based on population rather than the number of dwellings in contrast to the housing growth numbers of the Councils.

In response to a question on the impact of space on physical and mental health, members were advised that the Council controlled this through setting a policy on housing density and minimum space standards.

It was intended that the establishment of good working relationships between planning and health and the sharing of information would provide evidence to justify planning outcomes.

- RESOLVED:
- (a) That the presentation be noted.
 - (b) That officers from Shepway District Council provide a presentation on their Local Plan to a future meeting.

50 VARIATION TO THE ORDER OF THE AGENDA

The Chairman, Councillor P A Watkins, left the meeting and the Vice-Chairman assumed the Chairmanship.

A variation to the order of the agenda was announced to take the item on Maternal Smoking Cessation before the Local Care Update.

- RESOLVED: That the order of the agenda be varied to take the item on Maternal Smoking Cessation as the next item of business.

51 MATERNAL SMOKING CESSATION

The Board received an update from Hilary Knight (South Kent Coast Clinical Commissioning Group) on Maternal Smoking Cessation.

The Improvement and Assessment Framework (IAF) provided information of the effectiveness of local commissioning of Maternity services enabling the South Kent

Coast Clinical Commissioning Group as well as other local health systems and communities to conduct self-assessments of their progress in respect of maternal smoking cessation and assisting improvement. As a result of this data NHS England offered the South Kent Coast Clinical Commissioning Group £75,000 in additional financial support for reducing smoking in pregnant women. The funding could be used for a range of measures such as

- Carbon monoxide monitors and consumables;
- Training for midwives (both in using the equipment and in better engaging with women on the issue of smoking cessation);
- Leadership, project management and administration; and
- Training to enable stop smoking services to make the most of referrals

The Board was advised that Kent County Council Public Health had also provided funding for a one year secondment for a Specialist Midwife in smoking cessation. This secondment would run until September 2017.

It was acknowledged that there were factors such as transport links and local topography that impacted on the accessibility of smoking cessation services.

RESOLVED: That the update be noted.

52 LOCAL CARE UPDATE

The Board received an update from Mark Needham, (Chief Officer, Integrated Accountable Care Organisation).

It was stated that the majority of the 30 practices in the South Kent Coast area had signed up to developing a single legal entity for the purpose of delivering more services collectively (Channel Healthcare Alliance). The Alliance would have the following benefits:

- It would give Primary Care one voice and enable it to organise more effectively and efficiently to manage demand and provide better care in the community;
- It would be better prepared in the event of any future practice closures driven partly by a combination of finance, workforce and/or performance issues;
- It would break the chain of more people going to hospital, resulting in exponential growth of hospital budgets and more limited growth in the funding of out of hospital services; and
- It would offer better recruitment and retention opportunities for clinical staff.

There were also plans to create four Primary Care Access Hubs in the South Kent Coast areas located in the three Community Hospitals (Deal, Buckland, Royal Victoria Hospital) and one most likely situated in the Oaklands Surgery in Hythe (with satellite branches for the Marshes). These would enable any patient to access any hub and receive the same level of high quality care on the same day.

Work undertaken had found that over 50% of the care provided by GPs for minor illness could be provided by another suitably qualified professional such as a Nurse practitioner, Mental Health Nurse or Physiotherapist.

A decision had been made to continue with the remaining 2 years of the contract with the Kent Community Health NHS Hospital Foundation Trust although a market engagement process was underway to identify what other providers could provide. The formal procurement process for a provider after the existing contract had expired was expected to start during 2017/18.

The Board discussed the role that community services could provide and the importance in ensuring that the public were aware of the changes.

RESOLVED: That the progress on local care and current thinking of the localities for future joint ventures / partners for community services be noted.

53 URGENT BUSINESS ITEMS

There were no items of urgent business.

The meeting ended at 4.41 pm.