Notes of the meeting of the **SOUTH KENT COAST SHADOW HEALTH AND WELLBEING BOARD** held at the Council Offices, Whitfield on 4 December 2012 at 3.30 pm.

Present:

- Chairman: Councillor P A Watkins
- Present: Ms H Armstrong (Canterbury and Coastal Clinical Commissioning Group) Ms K Benbow (Chief Operating Officer, South Kent Coast Clinical Commissioning Group) Councillor S S Chandler (Dover District Council) Councillor P Carr (Shepway District Council) Dr J Chaudhuri (Deputy Clinical Chair, South Kent Coast Clinical Commissioning Group) Ms C Davis (Strategic Business Advisor, Kent County Council) Councillor R Gough (Kent County Council) Councillor P G Heath (Dover District Council) Councillor M Lyons (Shepway District Council) Mr C Mackenny (Practice Managers Representative, South Kent Coast Clinical Commissioning Group) Mr C Thompson (NHS Kent and Medway)
- Also Present: Ms C Dawe (East Kent Hospitals University Foundation Trust) Ms R Jones (East Kent Hospitals University Foundation Trust) Ms L Shutter (East Kent Hospitals University Foundation Trust) Mr R Jackson (Policy and Performance Officer, Shepway District Council) Mr J Lampert (Commissioning Manager, Kent County Council) Ms J Empson (Kent County Council)
- Officers: Chief Executive Leadership Support and Corporate Communications Manager Leadership Support Officer Team Leader – Democratic Support

24 <u>APOLOGIES</u>

Apologies for absence were received from Ms J Mookherjee (Assistant Director of Public Health at NHS Kent and Medway), Mr M Lobban (Director of Strategic Commissioning, Kent County Council) and the Alternative Service Delivery Manager.

25 APPOINTMENT OF SUBSTITUTE MEMBERS

The Board was advised that Mr C Thompson was present as substitute for Ms J Mookherjee (Assistant Director of Public Health at NHS Kent and Medway).

26 DECLARATIONS

Councillor Lyons declared that he was a governor of East Kent University Hospitals Foundation Trust.

27 <u>NOTES</u>

It was agreed that the Notes of the Board meeting held on 23 October 2012 be approved as a correct record and signed by the Chairman.

28 CLINICAL STRATEGY ENGAGEMENT PROCESS

The Board received a presentation from Ms C Dawe, Assistant Director of Strategic Development – East Kent Hospitals University NHS Foundation Trust, on the options proposed for consultation in relation to its clinical strategy review. It was stated that the consultation would run from 4 October 2012 through to the end of January 2013 and in addition to the public would include representative groups such as the Royal Colleges and local Clinical Commissioning Groups (CCG).

The Board was advised that there were three options being considered as part of the consultation. These were:

- Option One 1 Hub at William Harvey Hospital (WHH), 1 Spoke at Queen Elizabeth the Queen Mother Hospital (QEQM), Kent and Canterbury Hospital (KCH) remained largely unchanged.
- Option Two 1 Hub at KCH, 2 Spokes at QEQM and WHH
- Option Three 2 Hubs at QEQM and WHH

EKHUFT's preferred option in the consultation would be to concentrate services into a single hub under Option One as it would be create a specialist centre of excellence and be more clinically sustainable in terms of staffing. The Board welcomed proposals for the creation of a dedicated paediatric emergency centre.

In addition, the consultation on the Clinical Strategy would review the provision of outpatient services with a view to concentrating the provision on a smaller number of sites to give the benefit of a 'one-stop' approach. It was acknowledged that the new Buckland Hospital could potentially have an impact on the provision of outpatient services at Deal Hospital.

There was concern expressed by members of the Board that the long term viability of Deal Hospital could be affected by a reduction in the range of outpatient services being offered. In response it was pointed out that out of the 35,000 people who accessed EKHUFT services in Deal, only 10,000 did so from Deal Hospital.

Ms K Benbow informed the Board that the CCG remained committed to Deal Hospital and was working to identify the outpatient clinic services required by GPs and assess the advantages and disadvantages of alternative forms of provision. It was noted that there was strong public concern over the transport links between Deal and Dover.

It was suggested that as part of the consultation process the role of the community and voluntary sector should not be forgotten.

It was agreed:

That the presentation be noted.

(Councillor P G Heath declared an interest by reason of his status as a governor of the East Kent University Hospitals Foundation Trust.)

29 CLINICAL COMISSIONING GROUP UPDATE

(a) <u>Authorisation Process</u>

Dr J Chaudhuri (South Kent Coast Clinical Commissioning Group) informed the Board that as part of the authorisation process a mock panel would be undertaken in December 2012 to identify areas of potential improvement prior to undergoing the actual panel.

Ms K Benbow advised that the CCG would be renting office space at the Dover District Council offices in 2013.

(b) Draft Five Year Commissioning Strategy

Ms K Benbow stated that the Strategy was almost ready for circulation and set out five key areas of focus. The Board discussed the link to the integrated commissioning plan and the need to seek convergence with the Kent wide strategy where appropriate.

Councillor R Gough informed the Board of the interest from the Communities and Local Government Select Committee in the working of Health and Wellbeing Boards in a two-tier local government setting. The Select Committee had been very positive about what it had seen during a visit to Maidstone and the consensus view amongst the Board was that this reflected well on the recognition between agencies over the last two years of the benefits of cross-agency collaborative working.

It was agreed:

- (a) That the update be noted.
- (b) That the Draft Five Year Commissioning Strategy item be brought back to the next meeting for update.

30 HEALTH AND WELLBEING BOARD WORK PROGRAMME

(a) South Kent Coast CCG Community Engagement Strategy

Ms K Benbow advised that the final draft of the Community Engagement Strategy would be circulated to Members of the Board. The benefit of alignment with partner's community engagement strategies was discussed and it was suggested that the Virtual Integrated Commissioning Team investigate opportunities for this.

The Leadership Support and Corporate Communications Manager informed the Board that although the Council had an engagement strategy in place it would seek to identify areas of commonality where the two strategies could potentially be linked.

It was agreed:

To note the update.

(b) Joint Integrated Commissioning Strategy and Plan

The Board received an update from Mr J Lampert on the Joint Integrated Commissioning Strategy and Plan. It was stated that further work needed to be

undertaken in respect of the integration of mental health services into the Strategy to avoid duplication of commissioning.

It was agreed:

That this item would be added to the agenda of the next meeting of the Board.

(c) Intermediate Care Services Update

The Board received an update from Mr J Lampert on proposed Intermediate Care Services at Buckland Hospital and the importance of this in informing the final design of the hospital.

It was agreed:

That an update would be provided to a future meeting of the Board.

- (d) <u>Public Health Projects Update</u>
 - (1) <u>Healthy Living Pharmacies</u>

Mr C Thompson informed the Board that there were 17 healthy living pharmacies in Kent, of which 4 were located within the South Kent Coast CCG area. A well attended meeting had been held for pharmacies in Shepway and a similar meeting was planned for Dover.

It was agreed:

That in the absence of Ms J Mookherjee a further update would be provided to the next meeting.

(2) <u>Winter Intervention Support Kent (WISK)</u>

The project offered support to vulnerable people at significant risk from the effects of cold weather on their health, particularly those over 70 years of age with underlying health conditions as cold temperatures caused physiological changes to the body.

The project involved Age UK and the Home Improvement Agency who helped to sign-post people in checking benefit support, suggesting energy efficiency measures, checking loft insulation, assisting with grocery shopping and arranging for transport to medical facilities. Although the service primarily provided advice and support there was a limited emergency fund to deal with things like repairs to broken windows.

It was suggested that the WISK project should liaise with East Kent Housing and Dover District Council to see where there were areas for potential partnership working in providing advice and support.

It was agreed:

To note the update.

(e) Patient Knows Best: Update on Pilots in South Kent Coast CCG Area

Dr J Chaudhuri advised the Board that the first patients would now be recruited onto the pilot in late December 2012 to allow for the completion of outstanding operational and training matters.

It was agreed:

To note the update.

(f) South Kent Coast Health and Wellbeing Board Sub-Groups

The Board was advised that a report would be submitted to a future meeting setting out the proposals for the sub-groups in greater detail.

In terms of the future membership of the Board, it was stated that CASE Kent would be consulting with its network to approve a new representative to the Board. A decision was expected in early 2013 on the tender for Healthwatch in Kent and the importance of avoiding the duplication of good work being undertaken in the community and voluntary sector was acknowledged.

It was agreed:

To note the update.

31 MATTERS RAISED BY MEMBERS OF THE BOARD

- (a) The Board received updates from Members on a number of matters including:
 - Long term care condition tariff;
 - A visit by Sir John Alden to meet with the CCG at the Oakland Surgery in Hythe to discuss long term health conditions.
 - The Department of Health's emphasis on increasing the roll out of telehealth facilities.
- (b) Building Health Partnerships

The Board was advised that South Kent Coast CCG in conjunction with CASE Kent were preparing to make a bid to participate in the Building Health Partnerships programme. The programme sought to strengthen links between CCG's and voluntary, community and social enterprise organisations.

It was agreed:

That the Board welcomed the news of the bid and expressed its support for it.

The meeting ended at 5.10 pm.