

Notes of the meeting of the **DOVER AND SHEPWAY SHADOW HEALTH AND WELLBEING BOARD** held at the Council Offices, Whitfield on 23 October 2012 at 3.30 pm.

Present:

Chairman: Councillor P A Watkins

Present: Ms K Benbow (Chief Operating Officer, NHS South Kent Coast Clinical Commissioning Group)
Councillor S S Chandler (Dover District Council)
Dr J Chaudhuri (South Kent Coast Clinical Commissioning Group)
Ms C Davies (Strategic Business Advisor, Kent County Council)
Councillor R Gough (Kent County Council)
Councillor P G Heath (Dover District Council)
Mr R Jackson (Policy and Performance Officer, Shepway District Council)
Mr J Lampert (Commissioning Manager, Kent County Council)
Mr M Lobban (Director of Strategic Commissioning, Kent County Council)
Mr C MacKenny (Clinical Commissioning Group)
Ms J Mookherjee (Assistant Director of Public Health at NHS Kent and Medway)
Mr B Porter (Head of Communities, Shepway District Council)

Officers: Chief Executive
Leadership Support and Corporate Communications Manager
Leadership Support Officer
Senior Infrastructure and Delivery Officer
Environmental Enforcement and Protection Manager
Team Leader – Democratic Support

16 APOLOGIES

Apologies for absence were received from Councillors P Carr and M Lyons (Shepway District Council), Dr H Armstrong (C4G Clinical Commissioning Group) and the Alternative Service Delivery Manager.

17 DECLARATIONS OF INTEREST

There were no declarations of interest from Members.

18 NOTES

It was agreed that the Notes of the Board meeting held on 4 September 2012 be approved as a correct record and signed by the Chairman.

19 UPDATE FROM THE CLINICAL COMMISSIONING GROUP (CCG) ON AUTHORISATION PROCESS

Ms K Benbow informed the Board that Dr Cocker had replaced Dr Chee Mah as the Clinical Chair of the Clinical Commissioning Group. The CCG would shortly be in a position to make its lay member appointment to its board.

It was expected that the commissioning document for the CCG would be signed off that week with a mock assessment in November 2012 prior to the real assessment in December 2012.

RESOLVED: That the update be noted.

20 KENT HEALTH COMMISSION UPDATE

(1) Review of Work Programme

The Leadership Support and Corporate Communications Manager advised that following the third facilitated session two additional items were added to the work programme. These were:

- To maintain awareness and input, if necessary and required, to the Canterbury C4 CCG work programme to ensure 'whole population' links; and
- Evidence base for intermediate care beds in Dover (with the potential to lead to a Full Business Case)

In addition, health inequalities would be added to the District/CCG action plan.

It was agreed:

That the Strategic Business Advisor (Kent County Council) and Leadership Support and Corporate Communications Manager (Dover District Council) would work to ensure that the work streams of for the Kent Health and Wellbeing Board and the Dover and Shepway Health and Wellbeing Board were co-ordinated wherever possible.

(2) Joint Integrated Commissioning Strategy and Plan

The Director of Strategic Commissioning (Kent County Council) informed the Board that a Virtual Integrated Commissioning Group had been established to develop a strategy, plan and toolkit for undertaking integrated commissioning. The Group comprised of the South Kent Coast CCG, Dover District Council, Kent County Council and Shepway District Council and had identified four key areas of commissioning activity which supported the delivery of the partners shared objectives. There were:

- (a) Preventative services;
- (b) Short term care (including a focus on local Intermediate Care and Enablement services);
- (c) Management of Long Term Conditions (including accommodation needs); and
- (d) End of life care

The recent facilitated meeting of the Board had had expressed support for the Commissioning Strategy being developed. The Board was advised that the plan was still in development and further work had to be undertaken to clarify the governance arrangements as the final commissioning decisions still rested with individual partner organisations, as well as the detail of how resources were to be allocated. As part of this work was being undertaken to understand how activity, spend and outcome in commissioning were linked.

The process would also be reported in Thanet and the C4G CCG group area so that sufficient information could be compiled to enable meaningful engagement with the acute health sector.

The Director of Strategic Commissioning informed the Board that less than £2 million out of £10 million countywide was being spent in East Kent on mental health services in response to a question from Councillor P A Watkins on the difficulty on finding out information on the level of mental health service expenditure in East Kent.

The problem of patients being charged to mental health services who actually had other issues such as pain management was raised as well as the importance of the strategy including dementia care needs. The majority of dementia care beds for Dover and Shepway residents were provided in either Thanet or Canterbury.

The need for close co-operation between the county council and district council's was identified in respect of the provision of extra care housing and the support that was needed to make it successful.

It was agreed:

- (a) That mental health services would be included within the plan.
- (b) That the focus of the Integrated Commissioning Plan, subject to the above amendment, be endorsed.

(3) Project Brief for Intermediate Care Services

The Board was advised that an East Kent Intermediate Care Review had been commissioned from NHS Kent and Medway by the CCG's covering Ashford, Canterbury, South Kent Coast and Thanet. In particular there was concern that Dover was under-served in regard to some community health and social care facilities. The initial findings of the report were expected by the end of October 2012.

Councillor P A Watkins reminded the Board that East Kent Hospitals was expected to make a decision on the business case for Buckland Hospital soon and of the strength of local feeling in respect of the provision of beds at Buckland.

It was agreed:

- (a) That the Board would await the outcome of the East Kent Review of Intermediate Care report prior to progressing further with new local work on the matter.
- (b) That the Virtual Integrated Commissioning Group be requested to analyse the East Kent Review of Intermediate Care in respect of how it related to local need with a view to producing a business case and options appraisal for intermediate care/enablement services for the South Kent Coast Area.

(4) South Kent Coast CCG Community Engagement Strategy

The Chief Operating Officer (NHS South Kent Coast CCG) advised that the Community Engagement Strategy under development would link to the activity of the Dover and Shepway Health and Wellbeing Board. The CCG's would still have the same consultation responsibilities as the current Primary Care Trusts.

It was suggested that Dover and Shepway District Council's and Kent County Council's experience in community engagement could be fed into the CCG work under development.

It was agreed:

That the South Kent Coast CCG Community Engagement Strategy be added to the agenda for the December 2012 meeting of the Board.

(5) Public Health Projects Update

The Assistant Director of Public Health (NHS Kent and Medway) advised that the steering group for the Healthy Living Pharmacy Project had met twice and had reported very positive engagement with local pharmacies.

The 'World Cafe' event on 30 October 2012 was the next step in the project where pharmacies would come together to discuss the project. It was planned that the eight pharmacies elsewhere in Kent already certified as Healthy Living Pharmacies would mentor local pharmacies participating in the project.

Councillor S S Chandler advised that once a venue had been found a youth nutrition project would be launched.

It was agreed:

That an update be given to the next meeting of the Board on the project.

(6) Patient Knows Best – Update on pilots in South Coast Kent CCG Area

Dr J Chaudhuri presented a paper on the roll out of the 'Patient Knows Best' (PKB) pilots. It was expected that the pilots would commence at the end of November 2012 and a training plan had been agreed with health and social care providers to ensure sufficient capacity existed in time for the start of the pilots. The Proactive Care cohorts of patients would be the first group to participate in PKB as these were patients already identified as actively wishing to be involved in the management of their Long Term Conditions.

It was agreed:

That the update be noted.

21 ACTION POINTS FOR GOING LIVE

The Leadership Support and Corporate Communications Manager advised that majority of the action points identified in the agenda would be dealt with by the governance arrangements for the Board and Integrated Commissioning.

Councillor P A Watkins proposed that awarding the members of the Health and Wellbeing Board observer status at the CCG Boards would assist in building a strong relationship between the work of the two groups.

The nature of the relationship between the Board and the local Children's Trusts and schools was considered in relation to health inequalities.

It was agreed:

- (a) That the update be noted.
- (b) That the possibility of awarding observer status to Health and Wellbeing Board members on the CCG Board be investigated.

22 DRAFT PARKS AND OPEN SPACES STRATEGY

The Senior Infrastructure and Delivery Officer presented a summary of the draft Dover District Council Parks and Open Spaces Strategy report to the Committee for its consideration.

The Board was advised that the district was well provided for in respect of most types of open space and particularly for natural and semi-natural open space that was accessible to the public. It was acknowledged that there was only one 'Green Flag' amenity in the district which was lower than that of neighbouring authorities and that with the high growth agenda contained within the Local Plan there would be increased pressure on the district's parks and open spaces. Dover District Council was in the process of bidding for lottery funding to improve Kearsney Abbey to Green Flag status.

In order to assess current and future need an audit had been conducted and standards for provision were to be proposed for the following categories:

- Accessible green space;
- Outdoor sports facilities;
- Children's play space; and
- Community gardens and allotments.

The audit found that parks and open spaces were Dover District Council's second most accessed service after car parking, with walking/dog walking the most popular reason for using the parks and open spaces and that two-thirds of all visits to parks and open spaces occurred within 2 miles of home.

The Assistant Director of Public Health (NHS Kent and Medway) suggested that a joint bid between the NHS and Dover District Council for funding under the Kent Military Covenant to promote the 'green gym' concept to military leavers would be feasible given the high number in both Dover and Shepway Districts. The Head of Communities (Shepway District Council) advised that a green gym currently operated at the Warren in Folkestone.

Dr J Chaudhuri suggested that Health Maps could link into the Parks and Open Spaces Strategy and would support the work being undertaken in respect of health inequalities.

It was agreed:

- (a) That the presentation be noted.
- (b) That Mr B Porter be requested to investigate if the Shepway District Council Parks and Open Spaces Strategy could be brought to a future meeting of the Board.
- (c) That the Assistant Director of Public Health (NHS Kent and Medway) be requested to explore the matter as a possible extension to the work programme.

23 MATTERS RAISED BY MEMBERS OF THE BOARD

Dr J Chaudhuri informed the Board that he had attended a meeting of a Pensioners Forum in Shepway where he had given a presentation on CCG's. The meeting was well attended and a 'Question and Answer' session was held afterwards. A further presentation was to be given to members of the Ghurkha community and the need to take such groups into consideration when developing CCG plans was discussed.

It was proposed by Dr J Chaudhuri, and duly seconded, that the name of the Board be changed to reflect the name of the CCG that it was co-terminus with.

It was agreed:

That the Board be renamed the South Kent Coast Health and Wellbeing Board with effect from its next meeting.

The meeting ended at 5.13 pm.