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18 November 2014

Dear Councillor

I am now able to enclose, for consideration at the meeting of the **SOUTH KENT COAST HEALTH AND WELLBEING BOARD** on Tuesday 25 November 2014 at 3.00 pm, the following reports that were unavailable when the agenda was printed.

4 **MINUTES** (Pages 2 - 5)

To confirm the Minutes of the meeting of the Board held on 16 September 2014.

Yours sincerely

A handwritten signature in black ink, appearing to read "Nicky", written over a white, wave-like shape that matches the Dover District Council logo.

Chief Executive

Minutes of the meeting of the **SOUTH KENT COAST HEALTH AND WELLBEING BOARD** held at the Council Offices, Whitfield on Tuesday, 16 September 2014 at 3.00 pm.

Present:

Chairman: Councillor P A Watkins

Board: Dr J Chaudhuri
Ms K Benbow
S S Chandler
P G Heath
Councillor J Hollingsbee
G Lymer
Councillor M Lyons
Ms J Mookherjee
P Parker (as substitute for Councillor Mr M Lobban)
Ms J Perfect
Mr D Reid (as substitute for Councillor Mr S Inett)

Also Present: Councillor PM Beresford (Dover District Council)
Councillor B W Bano (Dover District Council)
Ms G O'Grady (Local Project Delivery Manager Shepway, Troubled Families)
Ms R Jennings (Turning Point)
Mr S Taylor (Shepway District Council)
Ms M McManus (Shepway District Council)
Mr I Swallow (Kent Police)
Mr A Upton (Public Health)

Officers: Head of Community Safety, CCTV and Parking
Head of Strategic Housing
Head of Leadership Support
Licensing Team Leader
Leadership Support Officer
Team Leader – Democratic Support

14 APOLOGIES

Apologies for absence were received from Mr S Inett (Healthwatch Kent) and Mr M Lobban (Kent County Council).

15 APPOINTMENT OF SUBSTITUTE MEMBERS

In accordance with the agreed Terms of Reference, it was noted that Mr D Reid and Ms P Parker been appointed as substitutes for Mr S Inett and Mr M Lobban respectively.

16 DECLARATIONS OF INTEREST

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

17 MINUTES

It was agreed that the Minutes of the Board meeting held on 24 June 2014 be approved as a correct record and signed by the Chairman.

18 MATTERS RAISED ON NOTICE BY MEMBERS OF THE BOARD

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

However, with the consent of the Chairman, Councillor J Hollingsbee requested an update on staffing levels in respect of Child and Adolescent Mental Health Services (Minute No, 10).

19 REVISED BETTER CARE FUND PLAN

Ms K Benbow (Chief Operating Officer, South Kent Coast Clinical Commissioning Group) presented the report on the Revised Better Care Fund Plan.

The indicator for reducing unplanned hospital admissions was highlighted as a key indicator as it was linked to funding distribution. However, even if the number of unplanned admissions was reduced, South Kent Coast Clinical Commissioning Group would need to show a link between this and schemes it had in place.

The importance of the GP referral system and early diagnosis was discussed as part of the framework of system changes required to reduce unplanned admissions.

The Board was informed that the report would be considered by the Kent Health and Wellbeing Board at its meeting on 19 September 2014. Ms P Parker stated that Kent County Council had worked with all Clinical Commissioning Groups in Kent in the development of their Better Care Fund Plans.

RESOLVED: That the Revised Better Care Fund Plan be noted.

20 SOUTH KENT COAST HEALTH AND WELLBEING BOARD WORK PROGRAMME: THE WAY FORWARD

The Head of Leadership Support introduced the Board's proposed Work Programme. It was stated that the work programme was a living document.

RESOLVED: (a) That the proposed work programme be approved.

(b) That a communication and Engagement Plan be developed.

21 EAST KENT HOMELESSNESS PREVENTION STRATEGY

The Board was informed that this item had been withdrawn from the agenda.

22 SHELTERED HOUSING SERVICE REVIEW

The Board received a presentation from Mr K Cane and Ms J Hatcher (East Kent Housing) on the recent Sheltered Housing Service Review undertaken.

The key points of the review were:

- The rebranding of sheltered housing as independent living with an increased emphasis on promoting choices, personal independence and health and wellbeing;

- More tailored as opposed to generic support services;
- More effective and integrated working with health and social care agencies;
- The creation of a new Health and Wellbeing Co-Ordinator post (subject to funding);
- A new support planning process with better and more predictable access to support and advice. As part of this there would be more planned face-to-face meetings with tenants with greater support needs and regular drop-in sessions for all tenants; and
- New arrangements for laundry facilities.

The Board was advised that the proposals had been overwhelmingly supported by those residents who had responded to the consultation.

The Head of Strategic Housing (Dover District Council) stated that measures were being taken to review current sheltered housing provision and anticipate future demands. As part of this, the service was seeking to link with the Kent County Council Accommodation Strategy over the provision of extra care accommodation.

The Board was advised that the report had been to Dover District Council's Cabinet in September 2014 and would be going to Shepway District Council's Cabinet in October 2014.

RESOLVED: That the report be noted.

23 KENT ALCOHOL STRATEGY

The Board received a presentation from Ms J Mookherjee (Public Health Kent, Kent County Council) on the Kent Alcohol Strategy.

The Board was informed that the excessive consumption of alcohol was a growing problem in Kent and the fifth largest cause of death in England. In the South Kent Coast Clinical Commissioning Group area, Dover had the highest rate of male mortality in the locality and Shepway the highest rate of female mortality in the locality.

The key aims of the Alcohol Strategy for Kent 2014-16 were:

- (a) To reduce alcohol-related specific deaths.
- (b) To continue to reduce alcohol-related disorder and violence year-on-year.
- (c) To raise awareness of alcohol-related harm in the population.
- (d) To increase pro-active identification and brief advice at primary care.
- (e) To increase the numbers referred into treatment providers as appropriate.

The Strategy also had six pledges for its delivery as followed:

- (a) Prevention and Identification
- (b) Quality of Treatment
- (c) Co-ordination of Enforcement and Responsibility
- (d) Local Action
- (e) Vulnerable Groups and Inequalities
- (f) Protection of Children and Young People

The development of the Strategy had commenced in 2013 and a number of measures were already underway.

The Board was advised that alcohol-related issues were not just a health matter but also a crime and disorder matter and would involve a multi-agency approach to achieve the strategies objectives.

RESOLVED: (a) That the report be noted.

(b) That a Local Alcohol Action Plan be developed to implement the Kent Alcohol Strategy.

(c) That the Healthier South Kent Coast Group be given responsibility for addressing the 6 pledge areas of the Kent Alcohol Strategy.

24 CQC INSPECTION REPORT - EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST

Ms K Benbow (Chief Operating Officer, South Kent Coast Clinical Commissioning Group) presented the Care Quality Commission's (CQC) report on the East Kent Hospital University NHS Foundation Trust.

The Board was advised that the next step was for the development of an improvement plan which the Clinical Commissioning Group would a role in supporting.

RESOLVED: That the update be noted.

(Councillor P G Heath declared a Voluntary Announcement of Other Interest (VAOI) by reason of his membership of the Council of Governors of the East Kent Hospital University NHS Foundation Trust.)

25 CHILDREN'S OPERATIONAL GROUP UPDATE

Councillor S S Chandler provided an update to the Board on the Children's Operational Group. It was stated that the first meeting had been held in July 2014 with the next meeting scheduled for October 2014.

RESOLVED: That the update be noted.

26 CONSULTATION AND NEWS UPDATE

RESOLVED: That the update be noted.

27 URGENT BUSINESS ITEMS

There were no items of urgent business.

The meeting ended at 5.37 pm.