Minutes of the meeting of the **SOUTH KENT COAST HEALTH AND WELLBEING BOARD** held at the Council Offices, Whitfield on Tuesday, 17 May 2016 at 3.00 pm.

Present:

Chairman: Dr J Chaudhuri

Board: Councillor P M Beresford

Ms K Benbow

Councillor S S Chandler Councillor J Hollingsbee Councillor M Lyons Councillor G Lymer Ms J Mookherjee

Also Present: Mr M Lemon (Kent County Council)

Ms S Martin (South Kent Coast Clinical Commissioning Group)

Officers: Head of Leadership Support

Team Leader – Democratic Support

1 ELECTION OF A CHAIRMAN

The Team Leader – Democratic Support called for nominations for a Chairman for the ensuing municipal year 2016/17.

It was moved by Councillor J Hollingsbee, duly seconded and in the absence of any other nominations it was

RESOLVED: That Councillor P A Watkins be elected as Chairman of the South

Kent Coast Health and Wellbeing Board for the ensuing municipal

year 2016/17.

2 APPOINTMENT OF A VICE-CHAIRMAN

The Team Leader – Democratic Support called for nominations for a Vice-Chairman for the ensuing municipal year 2016/17.

It was moved by Councillor M Lyons, duly seconded and in the absence of any other nominations it was

RESOLVED: That Dr J Chaudhuri be elected as Chairman of the South Kent

Coast Health and Wellbeing Board for the ensuing municipal year

2016/17.

(In the absence of the Chairman, the Vice-Chairman took the Chair for the remainder of the meeting.)

3 APOLOGIES

Apologies for absence were received from Ms J Duff (Kent County Council), Ms C Fox (Red Zebra), Mr S Inett (Healthwatch Kent), Mr M Lobban (Kent County Council) and Councillor P A Watkins (Dover District Council).

4 APPOINTMENT OF SUBSTITUTE MEMBERS

In accordance with the agreed Terms of Reference, it was noted that Ms J Duff had been appointed as substitute for Mr M Lobban.

5 DECLARATIONS OF INTEREST

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

6 MINUTES

It was agreed that the Minutes of the Board meeting held on 26 January 2016 be approved as a correct record and signed by the Chairman.

7 MATTERS RAISED ON NOTICE BY MEMBERS OF THE BOARD

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

8 SOUTH KENT COAST HEALTH AND WELLBEING BOARD DEVELOPMENT DAY UPDATE

The Board received an update from M Farrow, (Head of Leadership Support, Dover District Council) on the outcomes of the recent development day concerning proposals for the future of the Health and Wellbeing Board as a commissioning body.

Members were advised that the development day identified issues of accountability, governance and the financial implications for partner organisations that needed further clarification. A report would be submitted to a future meeting of the Board on these matters and the best way to deliver integrated commissioning.

The consensus of opinion amongst those present at the development day was supportive of principle of integrated commissioning subject to clarification over the issues identified.

It was agreed that the current Health and Wellbeing Board arrangements should continue until the new arrangements had been agreed and that the target for the commencement of the new arrangements was in 2017.

RESOLVED: That the update be noted and the current South Kent Coast Health and Wellbeing Board arrangements be continued with until the new arrangements for a commissioning board were agreed.

9 LOCAL CHILDREN'S PARTNERSHIP GROUP UPDATE

Councillor S S Chandler (Dover District Council) and Councillor J Hollingsbee (Shepway District Council) provided an update to the Board on the Local Children's Partnership Group.

The Board was advised that the South Kent Coast Local Children's Partnership Group was the only one in Kent not based on district boundaries as it covered the areas of both Dover District Council and Shepway District Council.

The Group was focused on delivering measurable improvements in the priority outcomes set out in the Children and Young People's Plan (CYPP) as followed:

- Grow up in safe families and communities
- Have good physical, mental and emotional health
- Learn and have opportunities to achieve throughout their lives
- Make safe and positive decisions

It was noted that the second priority outcome (good physical and mental health) was of particular relevance to the activities of the Board.

For the Shepway District Council area, the following five priorities aligned to the CYPP outcomes had been identified:

- To reduce obesity in 0-25
- To improve dental health in under 5's
- To increase breast-feeding rates
- To improve perinatal mental health
- To reduce the rates of smoking in pregnancy

For the Dover District Council area there were concerns over the level of hospital admissions for self-harm which were the worst in Kent, although this needed further study to confirm if this was an on-going trend.

The remit of the Group included:

- To support the development and delivery of the Kent Wide Children and Young
- People's Plan and establish local outcomes and indicators
- Drive local activity focused on meeting the local outcomes and indicators
- Use local data and intelligence to support the SKC HWBB and the Countywide 0-25 Children's HWBB
- Provide a vehicle for identifying and addressing local needs and gaps in service provision
- Establish sub-groups where appropriate for task and finish projects to support the outcomes
- Facilitate and pool resources to meet the needs of local children and families

The Group had established a number of sub-groups:

- Service and Contract Review: Acute and Community Services Commissioners
- looking at co-dependencies and where services were best placed and what was already being commissioned.
- Children and Young People's Integration with Primary Care
- Early Years Task and Finish Group
- Town and Pier Healthy Weight Sub-Group

The Group had also awarded a number of grants for projects in Dover and Shepway.

There would be 6 meetings per year of the Group and the 'dashboard' of data would be updated in advance of each meeting, although it was noted that some data would only be updated quarterly,

The importance of measuring outcomes was discussed and the award of grants to projects dealing with children and young people's mental health was welcomed.

RESOLVED: That the report be noted.

10 DRAFT KENT HEALTHY WEIGHT STRATEGY

The Draft Kent Healthy Weight Strategy was presented by Ms J Mookherjee (Consultant in Public Health, Kent County Council).

The Board was advised that it was a 3 year strategy and that the draft action plan had been developed in conjunction with the South Kent Coast Clinical Commissioning Group, Dover and Shepway District Councils and Kent Public Health and it reflected existing and planned actions.

The cost of obesity to the South Kent Coast area was £13.4 million per year and the strategy hoped to raise awareness of being overweight as a medical issue that needed to be addressed through a multi-agency whole system strategy.

The four themes of the strategy were:

- Environmental and Social
- Children (which linked to the Children and Young People's Plan)
- Increasing the skills of the workforces to be able to have conversations about weight
- Interventions

The Board discussed the importance of promoting a consistent message to the public in respect of healthy eating and the need to engage with children and young people to foster healthy behaviour at a young age. It was recognised people could be aware that they were overweight but be unsure of how to tackle the problem.

RESOLVED: That the Draft Kent Healthy Weight Strategy be noted.

11 <u>DRAFT SOUTH KENT COAST CLINICAL COMMISSIONING GROUP ANNUAL</u> REPORT AND ACCOUNTS 2015-16

The Board received a presentation from Ms S Martin (South Kent Coast Clinical Commissioning Group) on the Draft Annual Report and Accounts 2015/16 for the South Kent Coast Clinical Commissioning Group.

Members congratulated Ms Martin on the Annual Report and Accounts for being a relatively easy to read despite the complexity of the subject matter and it was noted that a more concise version would be produced for the public.

RESOLVED: That the Annual Report and Accounts 2015/16 be noted.

12 <u>SOUTH KENT COAST CLINICAL COMMISSIONING GROUP OPERATING PLAN</u> 2016-17

Ms K Benbow (Chief Operating Officer, South Kent Coast Clinical Commissioning Group) presented the CCG Operating Plan 2016-17 to the Board.

The Board was advised that the key objectives for 2016-17 were:

- To develop a high quality Sustainability and Transformation Plan (STP) with partner organisations within the Kent and Medway STP footprint;
- To continue to maintain financial balance, including planned contributions to efficiency savings;
- To continue to implement plans to address the sustainability and quality of general practice;
- To recover and maintain the access standards for A&E and ambulance pathways;
- To recover and maintain the NHS Constitution standards for referral to treatment;
- To recover the NHS Constitution 62-day cancer waiting standard, maintain all other cancer waiting standards, and improve upon the 2015/16 position;
- To achieve and maintain the two new mental health access standards;
- To continue to deliver actions set out in local plans to transform care for people with learning disabilities; and
- To continue to implement plans to improve the quality and safety of services for patients.

The Board was advised that the CCG was working with East Kent Hospitals University NHS Foundation Trust in respect of A&E targets.

In respect of General Practice, a number of practices were struggling to recruit new staff in keeping with the national situation. Members of the Board requested an update for a future meeting, noting that activity was taking place at a Kent Health and Wellbeing Board level on this matter.

The Board was advised that Dr Jonathan Bryant had recently been appointed as the CCG's new Clinical Chair.

RESOLVED: (a) That the South Kent Coast Clinical Commissioning Group Operating Plan 2016-17 be noted.

(b) That an update be provided to a future meeting of the Board in respect of the situation in respect of recruiting staff for General Practice.

13 URGENT BUSINESS ITEMS

There were no items of urgent business items.

The meeting ended at 4.47 pm.