

HEALTH AND WELLBEING BOARD

At a meeting of the Health and Wellbeing Board on Wednesday, 8 July 2015 at Karalius Suite, Stobart Stadium, Widnes

Present: Councillors Polhill (Chairman), Philbin, Woolfall and Wright and S. Banks, P. Cooke, L. Crane, M. Creed, L. Derbyshire, A. Marr, E. O'Meara, D. Parr, N. Rowe, C. Scales, M. Shaw, R. Strachan, T. Tierney, A. Waller, J Williams, S. Wallace-Bonner and S. Wright

Apologies for Absence: A. McIntyre and S. Yeoman

Absence declared on Council business: None

ITEM DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

Action

HWB1 MINUTES OF LAST MEETING

The Minutes of the meeting held on 13 May 2015 having been circulated were signed as a correct record subject to A. Scales in the attendance list being recorded as C. Scales.

HWB2 HEALTHY LIVING PHARMACIES

The Board considered a report of the Director of Public Health, which provided Members with a briefing on the Healthy Living Pharmacies (HLP) proposal including health benefits for the local population and opportunities for joint working between pharmacies and other health and wellbeing organisations.

The Board was advised that the Healthy Living Pharmacy was a nationally agreed accreditation or 'kite mark' for community pharmacies which delivered proactive health and wellbeing advice as part of their day to day role. It was a tiered commissioning framework aimed at achieving consistent delivery of a broad range of high quality services through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities.

The Board was further advised that in 2011/2012 the HLP programme had been rolled out across a number of other areas as part of an HLP pathfinder programme supported by the Department of Health. The Board noted the key findings from the evaluation of the HLP pathfinder sites in April 2013.

It was reported that many community pharmacies within Halton provided additional services commissioned by NHS Halton CCG or by Halton Local Authority Public Health as follows:-

- Care at the Chemist Minor Ailments Service (CATC);
- On Demand Access to Palliative Care Drugs;
- Smoking Cessation;
- Substance Misuse; and
- Sexual Health.

The Board noted the benefits of HLP in Halton, the current commissioning arrangements and the opportunities for future commissioning as follows:-

- Chlamydia screening;
- Blood pressure checks;
- Dementia screening;
- Healthy weight advice;
- Alcohol harm reduction advice;
- Support for people with long term conditions;
- Support for clients with respiratory conditions; and
- Minor ailment clinics.

The Board discussed the benefits of the proposal and agreed that it was an excellent initiative. It was also agreed that an extensive communication strategy be established; with an early launch of the initiative to members of the public to ensure that they were aware of the new facilities available at Healthy Living Pharmacies in the Borough.

RESOLVED: That

- (1) Healthy Living Pharmacies (HLP) be introduced throughout the Borough via a phased roll out;
- (2) the introduction of HLP will be a partnership approach led by Halton Council and NHS Halton Clinical Commissioning Group (CCG), supported and facilitated by the Local Pharmaceutical Committee (LPC); and

- (3) the accountability for HLP will be through Halton Council's Senior Public Health Team and NHS Halton CCG Medicines Management Working Group, which will report jointly by exception to this Board.

HWB3 JOINT STRATEGIC NEEDS ASSESSMENT SUMMARY UPDATE

The Board considered a report of the Director of Public Health, which provided Members with an update on the Joint Strategic Needs Assessment (JSNA).

The Board was advised that the JSNA continued to be hosted on the Halton Borough Council website. The JSNA had been developed as a series of chapters, on a rolling programme, with an annual dataset, annual summary and local health profiles, keeping the data updated.

The Board was further advised that the JSNA summary document outlined the data across five key life stages as follows:-

- Pregnancy and infancy (under 1 year);
- Children (1-15);
- Young adulthood (16- 24);
- Healthy adulthood (25-64); and
- Older People (65 and over).

In addition, it also included a set of data on wider determinants of health in respect of economic; community safety; housing; transport and social care and vulnerable people. The summary document was attached as Appendix 1 to the report.

The Board noted the in depth assessments that had taken place during 2014/15 and the key changes that had taken place since the last report. The Board also noted the information relating to the findings for the JSNA long term conditions chapters and the developments for the JSNA during 2015.

It was reported that a lot of work was also being undertaken to address hypertension in the Borough. Halton were the regional lead in this matter for Cheshire and Merseyside and had put forward an interest to be part of the national pilot for addressing hypertension.

The Board discussed the way a brief snapshot of JSNA

issues across the life course (Halton In Pictures) had been portrayed and it was agreed that they be produced in poster format and be distributed in public locations throughout the Borough.

The Board also noted that Bridgewater NHS Foundation Trust had established a Health Bus and it was reported that discussions could take place to make the Bus available to Halton to undertake targeted health care work in the Borough during some weekends.

RESOLVED: That the report be noted.

HWB4 HEALTH AND WELLBEING STRATEGY ACTION PLAN UPDATE 2015

The Board considered a report of the Director of Public Health, which provided Members with an update on progress with the Health and Wellbeing Strategy action plans.

The Board was advised that Halton's Health and Wellbeing Strategy had been in place for just over two years. The strategy was accompanied by a set of action plans for each of the five priorities which were linked to relevant targets and outcomes.

It was reported that Appendix 1 to the report provided an update for each of the action plans including RAG ratings. During 2015/16 a review of action plans would also take place to ensure they were still fit for purpose.

Furthermore, it was reported that overall the action plans highlighted that Halton were achieving very good results.

The Board acknowledged the excellent work that had been undertaken to address alcohol issues in the Borough. Members had a discussion on whether young people were changing their choice of alcohol to more accessible substances, including legal highs, that may be cheaper to purchase. It was agreed that work would be undertaken on this matter and that this be monitored to ensure that young people in the Borough remained safe.

RESOLVED: That the report be noted.

HWB5 WINTERBOURNE REVIEW - UPDATE

The Board considered a report of the Strategic

Director, Communities, which highlighted to Members Winterbourne View Two Years On, Transforming Care: Next Steps January 2015 and Winterbourne View – Time for Change report, November 2014.

The Board was advised that Winterbourne View – Time for Change (November 2014), was a report detailing 11 recommendations to act as a driver for change to make a reality of the Winterbourne pledge which was set out in Appendix 1 to the report.

The Board was further advised that the Winterbourne View Two Years On set out a collective account from partners across the health and care system of the progress to date. Transforming Care: Next Steps set out the plans for the next stage of this work. All partners involved in Transforming Care had agreed the need for a single programme with a single plan, building on the recommendations of Winterbourne View – A Time for Change. From the original Action Plan and Concordat, any outstanding actions would be carried forward into the Transforming Care new programme.

It was reported that The Winterbourne View Strategic Group co-ordinated Halton Council and Halton's CCG's response to the Winterbourne View concordant action plan, ensuring submissions were completed. The Strategic group also monitored the Learning Disability Inpatient Bed usage and Out of Borough placements in order to repatriate as many individuals back into Halton.

The Board noted the information in the report relating to impatient usage learning disability and secure impatient usage. The Board also noted that work was continuing to identify service users to repatriate to Halton, ensuring a multi-agency approach to each case, linking into commissioning and development of new services to provide bespoke packages of support.

RESOLVED: That the report be noted.

HWB6 HALTON CHILD AND MATERNAL HEALTH PROFILE 2015

The Board considered a report of the Director of Public Health, which informed Members that The Child and Maternal Health Profile (CHIMAT) was released every year by Public Health England and provided a summary of the health and wellbeing of children and young people in Halton. The data that was included was available at a national level and enabled Halton to benchmark its health

outcomes against England average values.

The Board was advised that health outcomes were very closely related to levels of deprivation; the more deprivation in an area resulted in expected poorer health outcomes. Overall the health and wellbeing of children in Halton was generally worse than the England average, as were the levels of child poverty. Halton was the 27th most deprived Borough in England (out of 326 Boroughs) and as such would be expected to have lower than average health outcomes. The infant and child mortality rates had both improved and were now similar to the England average.

The Board was further advised that Halton had been successful in improving rates in the following areas:-

- Infant and child mortality rates;
- Immunisations;
- Child development at the end of reception;
- The number of children and young people who are Not in Education, Employment or Training (NEET);
- First time entrants to the youth justice system;
- The percentage of children living in poverty;
- Statutory family homelessness;
- Children killed or seriously injured in road traffic accidents;
- The number of low birth weight babies;
- The percentage of obese children in Year 6 (age 10-11);
- The teenage conception rate; and
- A reduction in the rate and number of 0-18 year olds being admitted to hospital for alcohol specific conditions.

The Board noted that the new Urgent Care Centre's (UCCs) would help to address some of the challenges in relation to hospital admissions.

RESOLVED: That the contents of the 2015 Child Health Profile, the progress that has been made against a challenging baseline and programmes established to address areas of concern, be noted.

HWB7 HALTON HEALTH PROFILE 2015

The Board considered a report of the Director of Public Health, which provided information relating to Halton's Health Profile 2015 and an analysis regarding the findings from a local perspective.

The Board was advised that the data for Halton showed that if a comparison was made between the 2015 profile and the 2014 profile very good progress had been made in the Health and Wellbeing Board priority areas connected to reducing harmful levels of drinking; child development; cancer and mental health. This had been reflected in the drop in alcohol specific stays (under 18s), obese children (Year 6), under 18 conceptions, infant mortality, smoking prevalence and long term unemployment.

The Board was further advised that Halton continued to be challenged in a range of areas. This year's profile indicated that Halton were lagging behind the national average in the breastfeeding initiation, adult obesity, adult alcohol related harm and hospital stays for self-harm and falls. The Board noted that these challenges were being addressed in a comprehensive manner.

The Board discussed Halton's data in comparison to England's average data and it was noted that further information could be obtained from the Director of Public Health or from the link at the bottom of Appendix 1 to the report.

RESOLVED: That the progress in health outcomes and programmes established to address areas of concern be noted.

HWB8 REDUCTION IN PUBLIC HEALTH FUNDING

The Board considered a report of the Director of Public Health, which provided Members with information regarding the proposed cuts to Public Health funding and requested that the Board advocate against these cuts in year to the ring fenced budget.

The Board was advised that Halton Borough Council had successfully set a balanced budget for 2015/16, including full allocation of the public health grant, based on the information provided by the Government in the local government finance settlements, and reiterated by the Chancellor in March's Budget.

The Board was further advised that on 5 June 2015, the Government announced new cuts for this financial year which included the reduction of the ring fenced public health grants to local authorities by £200 million – equivalent to approximately £630,000 for Halton.

It was reported that the cuts would particularly impact

on the health of people in deprived areas, such as Halton, that disproportionately suffered from lower life expectancy, long term conditions, cancer and heart disease. It was therefore a potential disaster for the NHS, whose future depended on the preventative approach as outlined by the Chief Executive of NHS England in the Five Year Forward Plan.

Furthermore, it was reported that the public health grant commissioned a wide range of services from the NHS, including sexual health services such as STD clinics, HIV services and family planning, infection control and children's public health nursing including health visitors and school nurses. The grant also commissioned services from a wide range of providers including alcohol and drug services, weight management, mental health services, older people's health promotion and falls prevention, healthy schools, early years services and infant feeding.

The Board noted the significant impact the proposed budget cuts could have on Halton residents in the future.

RESOLVED: That the Board

- (1) recognises the importance of Public Health interventions to deliver on key priorities and improve the overall health and wellbeing of the Halton population;
- (2) advocates that the Government honour its previous commitments to public health funding as set out in the Local Government Finance Settlement in March 2015; and
- (3) asks that if the Public Health grant cuts proceed, they are assessed based on local need and levels of deprivation.

HWB9 CCG QUALITY PREMIUM - MEASURES FOR INCLUSION IN 2015/16

The Board considered a report of the Chief Officer, NHS Halton CCG, which provided Members with the 2015/16 CCG Quality Premium measure selection.

The Board was advised that the 2015/16 CCG Quality premium selection had been split into five sections by NHS England and that where the CCG had an element of choice, this had been done via consultation with commissioners, clinicians and individuals from the Local Authority and Public

Health with CCG approval done via the Executive Management Team.

The Board noted Table 1 in the report which showed the indicator; the amount of quality premium award attached to the success target and Table 2 which showed the NHS template with accompanying rationale for measures and target selection.

The Board noted that two RTT's set out in the report, would no longer be measured and that the CCG were awaiting for further guidance from NHS England on this matter.

RESOLVED: That the Board note the measures selected and approve the list for 2015.

HWB10 BETTER CARE FUND - CHANGE IN NON-ELECTIVE ACTIVITY TARGET FOR 2015

The Board considered a report of the Chief Officer, NHS Halton CCG, which informed Members of a necessary change to the original targeted reduction in 2015 Non-elective activity as submitted in the Halton Better Care Fund (BCF) Plan.

The Board noted the changes to the 2015 Better Care Fund Non-Elective Activity planned reduction.

RESOLVED: That the Board note the required changes and approve the amended Non Elective activity target in the BCF.

HWB11 CCG FORWARD VIEW AND 2015/16 OPERATIONAL PLAN

The Board considered a report of the Chief Officer, NHS Halton CCG, which informed Members of the NHS Halton CCG forward view and 2015/16 operational plan.

The Board noted the NHS Halton CCG Forward View and 2015/16 Operational Plan summary set out in the report.

RESOLVED: That the Forward View and 2015/16 Operational Plan be approved as demonstrating the strategic direction of the CCG in relation to the wider health economy in Halton.

Meeting ended at 3.30 p.m.