

Coventry City Council
Minutes of the Meeting of Coventry Health and Well-being Board held at 2.00 pm
on Monday, 28 November 2016

Present:

Board Members: Councillor Abbott
Councillor Caan (Chair)
Stephen Banbury, Voluntary Action Coventry
Simon Brake, Coventry and Rugby GP Federation
Dr Adrian Canale-Parola, Coventry and Rugby CCG (Deputy Chair)
Professor Guy Daly, Coventry University
Ben Diamond, West Midlands Fire Service
Simon Gilby, Coventry and Warwickshire Partnership Trust
Andrea Green, Coventry and Rugby CCG
Andy Hardy, University Hospitals Coventry and Warwickshire
Professor Sudhesh Kumar, Warwick University
Ruth Light, Coventry Healthwatch
Danny Long, West Midlands Police
John Mason, Coventry Healthwatch
Dr Jane Moore, Director of Public Health
Gail Quinton, Executive Director of People

Employees (by Directorate):

People: I Atiq
A Butler
S Frossell
L Gaulton
N Inglis

Resources: L Knight

Apologies: Councillors Ruane and Taylor
Martin Reeves, Coventry City Council
David Williams, NHS England

Public Business

86. Declarations of Interest

There were no declarations of interest.

87. Minutes of Previous Meeting

The minutes of the meeting held on 17th October, 2016 were signed as a true record.

With reference to Minute 78 headed 'Reducing Health and Wellbeing Inequalities – Update from the Marmot Steering Group', Ruth Light, Coventry Healthwatch suggested that press releases be issued to ensure that the public knew about the

Health and Wellbeing Strategy; understood the health and wellbeing priorities; and knew what it meant to be a Marmot City.

Further to Minute 78, the Chair, Councillor Caan referred to the issue of inviting representatives of the Local Enterprise Partnership (LEP) and the Coventry Chamber of Commerce to future meetings. He informed that Martin Yardley, Chief Executive of Coventry and Warwickshire LEP had agreed to work with the Board and attend a future Board meeting. He outlined his intention to invite Martin Yardley to the next Joint Health and Wellbeing Board Development Session on 16th January, 2017.

RESOLVED that press releases be issued on the Health and Wellbeing strategy, highlighting the three priorities and on what it meant for Coventry to be a Marmot City.

88. Sustainability and Transformation Plan Submission

Further to Minute 81, the Board received a brief update from Andy Hardy, University Hospitals Coventry and Warwickshire (UHCW) informing that the detailed Sustainability and Transformation Plan (STP) for Coventry and Warwickshire had been submitted to NHS England for assurance on 21st October, 2016. The Plan was to be released publicly on 6th December. This would form the start of the engagement process for discussion on the content and direction of the STP. Positive feedback had been received from NHS England and this had been discussed at the last meeting of the STP Programme Board.

89. Sustainability and Transformation Plan Engagement Workstream

The Board considered a report of Andrea Green, Coventry and Rugby Clinical Commissioning Group (CCG) on the draft engagement strategy for the Sustainability and Transformation Plan (STP), a copy of which was set out at an appendix to the report. The Board also received a presentation from Andrea Green on 'National Better Births Strategy and finding out what is important locally' as an example approach to one of the methods of engagement. The draft engagement strategy was also to be considered by the Health and Social Care Scrutiny Board (5) at their meeting on 7th December, 2016.

The report indicated that one element of the STP had been to consider how to engage the public, patients, carers and their representatives in the plan, once there was sufficient information to engage. A draft engagement strategy had been developed which had been informed by input from the joint Coventry and Warwickshire Health and Wellbeing Boards Development Day on 13th October. In particular the Boards had requested development of the overarching compelling case for change.

It was proposed to commence a 'Big Conversation' phase of pre-consultation engagement at the end of November for a period of eight weeks, starting with a conversation about maternity care. The engagement approach would then be revisited using any learning from the first phase.

The presentation provided an example approach for consulting on maternity care with the aim of finding out what was important locally. An outline of actions for

engagement with services users at a public workshop were detailed including the steps to be taken in the lead up to the workshop, the proposals for the event and the critical success factors. It was emphasised that this was to be the first stage in a much longer process.

Members of the Board raised a number of issues in response to the report and the presentation including:

- The requirement to ensure that there would be an awareness of the challenges to be faced when engaging with stakeholders
- In light of the multi-cultural community, clarification that all the different languages would be catered for
- The issue of deprivation and the importance of providing support to mothers and families in deprived areas
- The importance of partnership working
- The role of the Health and Social Care Scrutiny Board (5) in the process
- The role of the Health and Wellbeing Board in holding the STP to account
- The necessity of involving stakeholders with a broad range of experiences in the workshop
- The need to include Elected Members in the engagement strategy.

RESOLVED that the issues outlined above be taken into account in the draft strategy and approach to engagement to enhance the engagement with the public, patients, carers and specific communities of interest.

90. **Sustainability and Transformation Plan Pro-active/Prevention Workstream**

The Board received a presentation from Gail Quinton, Executive Director of People which provided an update Sustainability and Transformation (STP) Plan Proactive and Prevention work stream. In addition, a briefing note of Gail Quinton with the timeline for sharing the STP with the Health and Wellbeing Board and the Elected Members of the City Council through their formal meeting cycle was tabled at the meeting.

The presentation referred to the original focus of the proactive and prevention work stream emphasising the need to be clear on why there was a focus on prevention; the requirement to refine the content of the programme mixing existing and new works; and how this was to work which required serious system wide thinking.

The headline approach was that 'prevention is the fundamental and underpinning element to the whole STP'. There were two parallel strands of work:

- i) Capitalising on the existing 'Support Where You Live' programme which was to deliver the first phase of an accountable care system
- ii) Building readiness in the wider system by:
 - Influencing the work of Public Health to upscale preventative work
 - Complementing this with parallel, system led work on understanding place based need and building community capacity
 - Galvanising effort across the wider sector, focusing on a universal offer of care
 - Embedding a health impact assessment in all policies across organisations

- Connecting the STP to Health and Wellbeing Board led wellbeing activity.

Further information was provided on the Support Where You Live programme, disease prevention and place-based working. The next step was for scoping in each of these three areas.

The presentation concluded with considerations for the Board including that it had to be a strategic system wide push with effective design being critical; prevention needed to feature in every element of the STP; metrics and savings were not easily attributable; and that proactive and prevention works offered the major interface with the Health and Wellbeing Board and local authority led services.

Members of the Board raised a number of issues in response to the presentation including:

- The requirement for all partners to consider and support what the system could do to promote home based care
- The benefits of making public health everyone's business
- How could the Board support the required changes to the system
- An acknowledgement that the ambition was there for the programme however it was not without risks
- An acknowledgement of the complexities of having a partnership of different organisations and the importance of having the perspectives of the Board
- The involvement of the voluntary sector who would look at tangible and practical things that could be achieved.

91. **West Midlands Police Force Changes**

The Board received a presentation from Chief Inspector Danny Long, West Midlands Police on WMP 2020, which was an intensive four year change programme that would change the face of policing across the West Midlands. Extensive public consultation had shaped the proposals, which had a focus on crime prevention. There were over 30 core projects, all of which had people and technology at their heart. The programme was designed to help the police stay one step ahead of criminals, making the force fit for future challenges.

The presentation informed that the change programme was based on the following four pillars:

- We are geared to prevent crime
- We are prepared to respond at pace
- We are ready to learn and adapt
- We listen and reassure.

The Board were reminded of the challenges and requirements for change with West Midlands Police seeing a 22% cut in budget, some £125m, over the previous six years which had led to a smaller and more agile workforce with 3,000 fewer people. There was also the increasing challenge to prevent terrorism and cybercrime as well as reducing vulnerability. The Board noted that despite the challenges, the force had managed to lower re-offending rates; there was a rise in public confidence and victim satisfaction; crime had been driven down faster than

any other force in the country, and West Midlands Police was now in the top five force index.

The presentation drew attention to the ambition for neighbourhood policing as set out by Chief Constable Dave Thompson: 'The new neighbouring policing model continues the values of the past but with a focused and determined approach to prevent crime, disorder and demand; we must create a depth of partnership unseen in this region; we must find ways to work collaboratively with partners and communities to understand and provide interventions to prevent young people especially from becoming victims and the people who commit crime'.

The purpose of neighbourhood policing was set out as follows:

- Prevent harm at the earliest opportunity
- Reduce the demand on the force by problem solving measures
- Prevent criminals reoffending
- Work more effectively with partners, especially around early intervention
- Increase public confidence in the police by understanding and responding to their needs
- Activate citizens and mobilise partners to tackle local concerns.

The Board were informed how the neighbourhood policing units would be made up of specialist capabilities, with neighbouring policing remaining at the heart of the new model. Further information was provided on the other units which made up WMP. The Board noted that the new approach saw neighbourhood teams being supported by a host of other specialist departments, local organisations and national bodies.

Information was provided on the proposals for digital experience for citizens which included online incident reporting, online case tracking, advanced signposting and self-service options and an interactive statement generator.

The presentation concluded with information about what the changes meant for Coventry including the make-up of the individual neighbouring policing units and the senior officers in the city centre, north east and south and north-west sectors.

The Chair, Councillor Caan thanked Chief Inspector Long for the informative presentation.

92. **Draft Coventry and Warwickshire Health Protection Strategy 2017-2021**

The Board received a presentation and considered a report of the Director of Public Health which sought approval of the draft Health Protection Strategy for 2017-2021 which set out the partnership approach, the specific aims and the seven priorities for Health Protection across Coventry and Warwickshire. This strategy supported the local authority statutory duty to 'ensure there are plans in place to protect the health of the population' as defined in the Health and Social Care Act 2012. A copy of the draft Strategy was set out at an appendix to the report.

The report indicated that the Strategy outlined the progress made in a number of areas identified in the Health Protection Strategy for 2013-2015 with details being included in an action plan. The joint ambitions for the new Strategy were set out in the 'Strategy on a Page'. The seven priorities were air quality; TB; Viral Hepatitis

(B, C); screening and immunisations; infection control; emergency planning; and excess winter deaths. The presentation provided information on each of these priorities.

The Board were asked to support the following objectives:

- Increasing uptake of flu vaccinations for health and social care staff who provide direct personal care, alongside promoting the role of frontline staff as important advocates for the vaccination programme for their own patients/service users
- Ensuring all frontline staff were aware of and referring vulnerable individuals to commissioned support and advice services related to affordable heating
- Working to improve air quality through championing active/ sustainable travel strategies and programmes for their own organisations
- Supporting the development of a Coventry and Warwickshire-wide Anti-Microbial Resistance strategy, building on the good work that was already being undertaken.

Progress against the Strategy would be monitored by the Health Protection Committee with an annual report being submitted to the Board.

Members requested additional information about the uptake of the seasonal flu vaccinations amongst staff at the partner organisations.

RESOLVED that:

(1) The Strategy be approved and adopted by the Board.

(2) The objectives highlighted above be supported strategically by the Board and be adopted formally by their respective organisations.

(3) The additional information about the uptake of the seasonal flu vaccinations by staff at the partner organisations be e-mailed to members.

93. **Coventry Suicide Prevention Strategy 2016-19**

The Board considered a report of Dr Jane Moore, Director of Public Health, which sought endorsement for 'One Suicide/ One too Many – A Suicide Prevention Strategy for Coventry 2016-2019', a copy of which was attached at an appendix to the report. Suicide prevention became a local authority responsibility in 2013 and this strategy aimed to set out the scale of the issue and suggest what action Coventry could take to address it.

The report indicated that suicide was the leading cause of death for adults under the age of 50 and action was required to avoid these unnecessary deaths. Recent guidance from Public Health England recommended that every local authority should develop a suicide prevention action plan, access data on local suicide characteristics and develop a multi-sector agency approach to reducing suicides. Suicide prevention had also been identified as an area of focus for the West Midlands Combined Authority.

An initial draft strategy for suicide prevention was developed by Terry Rigby from the suicide prevention Social Enterprise Forward for Life in 2015. This was then updated to reflect the national recommendations and the progress made locally, with a particular focus on the strategy work completed by Warwickshire. The document now reflected the joint strategic vision across the Sustainability and Transformation Plan (STP).

The Board were informed that the vision was to realise a city that had zero suicides. In working towards this vision the strategy set out the following three core aims:

- Raise the level of understanding and awareness across Coventry of suicidal ideation, behaviours, acts and the impact of suicide acts across our communities
- To highlight key areas of service development and demonstrate ways forward to assist services in supporting Coventry to be 'Suicide Safer'
- To set out a clear action plan to mobilise all sectors to reduce suicidal behaviour across the city.

In working towards this vision, it was planned to adopt a close working relationship with Warwickshire, with action being shared across the region. Both strategies had actions set against the following seven priority areas:

- Reducing the risk of suicide in key high risk groups
- Tailoring approaches to improve mental health in specific groups
- Reducing access to the means of suicide
- Reducing the impact of suicide
- Supporting the media in delivering sensitive approaches to suicide and suicidal behaviour
- Improving data and evidence
- Working together

Following approval of the strategy, the next step would be to bring together a variety of partners in a Task and Finish Group to discuss and take forward practical action to address suicidal behaviour and the reasons underlying it with a safer suicide community approach.

The Board acknowledged the importance of the work of the West Midlands Combined Authority Mental Health Commission which aimed to make a huge difference to people with mental health problems in the region as well as reducing the numbers of people that take their own lives.

RESOLVED that:

(1) The Coventry Suicide Prevention Strategy 2016-19 be endorsed.

(2) Individual organisations be requested to consider how they could make a contribution to reducing suicides in Coventry.

(3) Agreement be given that a multiagency Task and Finish Group be set up to develop the plan and integrate the actions into the relevant Boards and Agencies represented in the Health and Wellbeing board and beyond.

(4) Progress against the action plan be monitored on an annual basis.

(5) The Coventry Suicide Prevention Strategy to be revisited at the next Board meeting on 6th February, 2017 alongside the West Midlands Combined Authority Mental Health Commission.

94. Children and Adolescent Mental Health Services (CAHMS) Transformation Plan - Year 1 Refresh

The Board considered a report of Matt Gilks, Coventry and Rugby Clinical Commissioning Group (CCG) and Chair of the Children and Adolescent Mental Health Services (CAMHS) Transformation Board which sought endorsement for the refreshed CAMHS Transformation Plan. A copy of the plan had been circulated to members in advance of the meeting.

The report indicated that Coventry and Warwickshire's joint Transformation Plan had been submitted in October, 2015 and was subsequently assured by NHS England which had secured the release of £878,000 funding annually for Coventry and Rugby for the next five years. Plans had now been in place for a year and each local area was required to refresh their Transformation Plan to demonstrate to NHS England the progress being made, that funding was being spent as intended and provide evidence on how services were being transformed. The refreshed Coventry and Warwickshire Plan had been submitted to NHS England on 7th November, 2016.

The report set out the seven key strategic priority themes and highlighted the challenges to be addressed which included:

- Increasing number of referrals
- High rates of ASD presentation
- Higher than average rates of hospital admission for self-harm
- Recruitment of additional staff despite a limited pool of professionals in this area.

Progress during the first year included sustaining referral to treatment waiting times within 1 week for urgent cases and 18 weeks maximum for routine cases; a commitment to ensure that 95% of young people received a follow up appointment within 12 weeks; embedding the Acute Liaison Service at the hospital to support young people presenting at hospital in crises; approving a new Eating Disorder service model and recruiting professionals to deliver the service; and approving a new service model for supporting Looked After Children and care leavers and recruiting the necessary professionals.

The next steps included launching the new service for Looked After Children and care leavers and the new Eating Disorder Service; implementing a revised ASD pathway; the rollout of a strengthened training and support package for teachers and professionals; and developing collaborative pathways for young people who could require specialist beds as a priority, with the aim of supporting more young people in the community.

RESOLVED that:

(1) The end of Year 1 refreshed CAMHS Transformation Plan be endorsed.

(2) The Year 2 refreshed Plan be submitted to the Board meeting in October, 2017.

95. **Joint Coventry and Warwickshire Health and Wellbeing Boards Development Day**

Further to Minute 82, the Board considered a report of Liz Gaulton, Deputy Director of Public Health which detailed feedback from the joint development workshop with Coventry and Warwickshire Health and Wellbeing Boards on 13th October, 2016 and sought agreement for the focus of a second joint development session on the afternoon of 16th January, 2017 to be held at the Ricoh Arena.

The report indicated that at the first development workshop the two Boards had looked at how the Coventry and Warwickshire Health and Wellbeing Alliance Concordat could be put into practice and had identified ways of working together in the future. An appendix to the report set out the feedback from the day.

Following on from the discussions at the first session, it was proposed that the second development day would focus on the Sustainability and Transformation Plan (STP). The STP would be published in December and work streams were now being developed. This would provide the opportunity for both Boards to have a shared discussion on the STP and to shape and influence the work streams.

The Chair, Councillor Caan referred to the proactive and prevention approach for Health and Wellbeing, highlighting the support and expertise that was available from both Coventry and Warwick Universities. He outlined his intention for both universities to have a slot at the next session. He asked all members to think about their ideas for this workshop.

RESOLVED that:

(1) Approval be given to the STP being the focus for the second development day.

(2) Liz Gaulton to liaise with Professors Daly and Kumar regarding their involvement with the development day.

(3) Members to feedback to the Chair, Councillor Caan and Liz Gaulton any ideas for the next away day.

96. **Any other items of public business**

There were no additional items of public business.

(Meeting closed at 3.55 pm)