

Coventry City Council
Minutes of the Meeting of Coventry Health and Well-being Board held at 2.00 pm
on Monday, 14 January 2019

Present:

Board Members: Councillor Caan (Chair)
Councillor Seaman
Councillor Taylor
Professor Guy Daly, Coventry University
Liz Gaulton, Director of Public Health and Wellbeing
Simon Gilby, Coventry and Warwickshire Partnership Trust
Andrea Green, Coventry and Rugby CCG
Andy Hardy, University Hospitals Coventry and Warwickshire
Ruth Light, Coventry Healthwatch
Professor Caroline Meyer, Warwick University
Gail Quinton, Deputy Chief Executive (People)
Dr Sarah Raistrick, Coventry and Rugby CCG

Other representatives: Matt Gilks, Coventry and Rugby CCG
Professor Sir Chris Ham, Better Health, Better Care, Better Value

Employees (by Directorate):

Place: L Knight

People: D Dawson
R Eaves
P Fahy
J Fowles
J Gregg
R Limb

Apologies: Councillor Abbott
Councillor Duggins
Steve Banbury, Voluntary Action Coventry
Rachael Danter, NHS England
Mike O'Hara, West Midlands Police
Martin Reeves, Coventry City Council
Richard Stanton, West Midlands Fire Service

Public Business

26. Professor Sir Chris Ham

The Chair, Councillor Caan, welcomed Professor Sir Chris Ham, the recently appointed Independent Chair for Better Health Better Care Better Value who was attending the meeting as an invited guest.

27. **John Mason**

Ruth Light informed the Board that John Mason's five year term of office as Chair of Coventry Healthwatch had now expired and the organisation was in the process of recruiting a new Chair. It was the intention that the new Chair would attend the next Board meeting.

The Chair, Councillor Caan, placed on record his appreciation of all the work undertaken by John during his time on the Board and for the support he has provided to the health economy of the city.

28. **Declarations of Interest**

There were no declarations of interest.

29. **Minutes of Previous Meeting**

The minutes of the meeting held on 8th October, 2018 were signed as a true record. There were no matters arising.

30. **Chair's Update**

The Chair, Councillor Caan, referred to the Coventry and Warwickshire Year of Wellbeing 2019 and to the fantastic opportunities that this presented. He encouraged members to find an opportunity to launch the Year within their own organisations.

Cllr Caan referred to the European City of Sport 2019 informing that on 9th December he had the privilege of officially receiving the European City of Sport nomination in the European Parliament on behalf of the Lord Mayor and Leader of the Council. The city had also secured the Europe Corporate Games 2019, Europe's largest corporate multi-sports festival. The Games were expected to generate more than £5 m for the local economy. He referred to the event the previous evening with Coventry Blaze which ended with over 250 people on the ice rink.

Reference was made to the successful Poverty Summit held on 12th November which was attended by Sir Michael Marmot and also included a presentation from the King's Fund. He also referred to his attendance at the West Midlands Wellbeing Board on 31st October. The agenda included WMCA plans to address childhood obesity in the West Midlands, 5G Health and Digital and updates on West Midlands on the Move and the Thrive programme.

Councillor Caan informed that Professor Chris Whitty, Chief Scientific Adviser for the Department of Health and Social Care, was visiting Coventry on 18th January 2019. A full day of briefings and visits had been planned for him to learn about how public health was being embedded across services and activities in the city, including meeting with a number of Board members.

The Deputy Chair, Dr Sarah Raistrick, informed of the Coventry and Warwickshire Clinical Transformation Programme, in particular her attendance at the Muir Gray event which concerned what population based healthcare would mean for the local

health organisations. She reported on the LGA Place Based Leadership for Health and Wellbeing in the West Midlands development network, on 14th December, on Integrated Care. She was given the opportunity to speak about integrated care and cross boundary working in Coventry and Warwickshire. Dr Raistrick also referred to the NHS long term plan published the previous week. Reference was made to the £4.5 b new service model where health bodies would come together to provide better, joined up care in partnership with local government.

31. **Joint Strategic Needs Assessment Update and Health and Wellbeing Strategy Refresh**

The Board considered a report of Liz Gaulton, Director of Public Health and Wellbeing, which provided an update on progress with the place-based Joint Strategic Needs Assessment (JSNA) and informed about the process for development of a refreshed Joint Health and Wellbeing Strategy.

The report indicated that a new place-based JSNA was being developed in Coventry for the period 2019 to 2022 to help partners understand needs and assets at a local level. The refreshed Health and Wellbeing Strategy would translate the emerging JSNA findings into priorities for what the Board – through its members and wider partners - wanted to achieve over the next three years. It was being developed in the context of an emerging Integrated Care System for Coventry and Warwickshire and with reference to the Health and Wellbeing Concordat and system design.

The Board had previously agreed to take a place-based approach to the JSNA, based around the 8 family hub geographies, reflecting national policy direction and a sub-regional move in Warwickshire towards a place-based approach. The Board were informed that work was now underway to develop:

- a data profiler tool and citywide intelligence hub;
- a citywide JSNA profile; and
- two place-based profiles, initially Families for All (Foleshill); and The Moat (Moat House).

The two areas were selected because of existing activity and emergent place-based partnership working in the localities, where JSNA engagement would add value and help cement new ways of working across a range of initiatives. Reference was made to the successful engagement workshop held at the end of October with a wide range of partners and stakeholders interested in supporting the development of the JSNA, including representatives from the Foleshill and Moat House areas.

JSNA profiles for the remaining family hub areas of the city would be developed on a staged basis over two years, drawing on the learning from the initial place-based JSNA profiles.

The report informed that work was underway to refresh the Coventry Health and Wellbeing Strategy (HWBS). An officer steering group had been established, including representatives from the JSNA officer group, and the group met for the first time in December, 2018. The outline process and timeline for this work was detailed in the report.

The starting point in developing the revised HWBS would be to look at the impact of the three priorities in the existing Health and Wellbeing Strategy 2016-19:

- Working together as a Marmot City: reducing health and wellbeing inequalities
- Improving the health and wellbeing of individuals with multiple complex needs; and
- Developing an integrated health and care system that provides the right help and support to enable people to live their lives well

The King's Fund had recently published 'A vision for population health: Towards a healthier future', which outlined a framework for population health centred on four pillars. Their proposition was that an effective population health system needed to recognise and maximise the activity in the overlaps between the pillars, as well as develop activity in, and rebalance activity between, the four pillars themselves. The Board were informed that this could provide a helpful framework for exploring the potential future health and care priorities for Coventry. A workshop for Health and Wellbeing Board members and other senior partners was being planned for early March to test out the model and its relevance for Coventry as a way of reviewing the value of existing activity and identifying gaps and priorities.

It was intended that the consultation and engagement process for the HWBS would be an extension of the engagement activity that was integral to the JSNA approach.

An update on progress with the JSNA and the HWBS was to be submitted to the next Board meeting in April.

Members discussed how the household survey information would feed into the process and how the place based JSNA would help identify emerging issues for the city such as a rise in violence. This would help to provide opportunities for effective partnership preventative work. There was an acknowledgement of the importance of feeding back to communities/ organisations following engagement.

RESOLVED that:

(1) The progress made in the development of a place-based Joint Strategic Needs Assessment for Coventry be noted.

(2) The proposed approach to developing a refreshed Joint Health and Wellbeing Strategy be endorsed.

(3) Arrangements be put in place for a workshop for Health and Wellbeing Board members and other partners, potentially on the morning of 6th March, to consider the Kings Fund population health model as a framework for informing the Health and Wellbeing Strategy priorities.

32. Coventry and Warwickshire Place Forum and Year of Wellbeing

The Board considered a report of Liz Gaulton, Director of Public Health and Wellbeing which set out the outcomes of the Place Forum meeting on 7th November, 2018 and informed of the plan for the next meeting on 6th March, 2019. The report also provided an update on the programme for the Coventry and Warwickshire Year of Wellbeing 2019.

The report indicated that at the November meeting the Forum had:

- Endorsed the vision and high-level plan for the Year of Wellbeing and supported the principle of making the branding freely available for use as widely as possible. Agreement had been given to circulate details and indicative costs of specific proposed activities to secure further commitment of resources from partners.
- Supported the high level approach outlined in the draft outcome framework and identified where further development was needed
- Recognised the value of sharing updates and learning in a system-wide approach, and the need for a greater focus on prevention and early prevention

A number of actions were also agreed as part of the Place Plan, a copy of which was set out at Appendix 1.

The outline agenda for the meeting on 6th March included Thrive at Work briefing, focusing on workforce wellbeing; an overview of community development and engagement programmes, including JSNA; the revised outcomes framework; and updates and briefings on key developments impacting on the Forum including the 10 year plan for the NHS.

The Year of Wellbeing 2019 was a key deliverable for the Place Forum and the current focus of proactive and preventative work in Coventry and Warwickshire. It was intended as the first year of a new approach, working collaboratively to raise the profile of prevention, early intervention and self-care. At the last Place Forum, work to date and proposals for the year were outlined and consideration was given to increasing the impact of the Year. Additional resource had been secured from partners, both staff support and finance, to enable the recruitment of project officer support on a fixed-term secondment basis to enhance capacity.

RESOLVED that:

(1) The outcomes of the Place Forum meeting held on 7th November, 2018 be noted.

(2) The outline agenda for the Place Forum on 6th March, 2019 be noted.

(3) The progress in delivering the Coventry and Warwickshire Year of Wellbeing 2019 be noted.

33. Health and Wellbeing Strategy Update: Multiple Complex Needs Programme Progress Update

The Board considered a report of Chief Superintendent Mike O'Hara, Chair of the Coventry Multiple Complex Needs Board, which provided an update on the progress made against the priority of the Coventry Health and Wellbeing Strategy (2016-2019) on Improving the health and wellbeing of individuals with multiple complex needs.

The Coventry Multiple Complex Needs Programme intended to respond to the Joint Health and Wellbeing Strategy priority to improve the health and wellbeing of

individuals with multiple complex needs by looking at ways services could be co-ordinated to deliver better results as well as value for money by reducing demand pressures on services. In particular the programme aimed to pilot new interventions and help bring about system change.

The programme currently consisted of six projects, which, with the exception of the evaluation, would be used to shape future work. The projects were likely to continue post April 2019, notwithstanding the outcome of the Health and Wellbeing Strategy refresh, as in the past 3 years the Multiple Complex Needs programme had made progress and the environment in which it was operating had changed. This provided the opportunity to mainstream the work the programme had delivered and offered the Housing First scheme, in particular, potentially an initial cohort. STEPS for Change provided the opportunity for the foundations of a partnership approach to supporting street homeless in the City Centre.

The report detailed the progress with the following projects:

- Housing First
- Steps for Change
- Experts by Experience
- Case Management Forum
- Making Every Adult Matter
- Evaluation.

The report also referred to the sustainability of the multiple complex needs work. Since 2016, when the issue was chosen as one of the Board's three priorities, there had been a significant increase in the number of people who were homeless, many of whom had increasingly complex needs. The City Council was currently in the process of refreshing their Housing and Homeless strategy. This revised strategy incorporated the need to provide better outcomes for those who were homeless and to provide more cost effective solutions. The Housing First pilot, funded by the West Midlands Combined Authority had also come online and the first amount of funding allocated to Coventry was to be drawn down in early 2019.

There was now the opportunity to embed the work and learning from the Multiple Complex Needs programme into these new structures and programmes, especially as there was strong correlation between those with Multiple Complex Needs and the Housing First cohort. The reporting structure for Multiple Complex Needs and Housing First into the City Council's housing governance structure was still under development to ensure partners, who were integral to this work, continued to have an opportunity to shape and deliver in this area of work.

The Board discussed the details of the Steps for Change programme, which provided a multi-agency weekly drop in advice and information shop to address problems of homelessness, begging and drug/ alcohol addiction in the city centre. The drop in was currently located in Hertford Street but a relocation to the City Arcade was likely to take place early in 2019. Work was underway to extend the service to three days a week. Concerns were raised about the increasing numbers of homeless in the city centre. The link between homelessness and mental health was highlighted.

It was agreed to circulate the housing strategy consultation paper to Board Members for their information.

With regard to 'Making Every Adult Matter, in November, 2017 Coventry had become one of 27 MEAM approach areas in the country. The approach helped local areas design and deliver better co-ordinated services for people with multiple needs. Coventry now had access to hands-on support from the MEAM partners and the network of other local areas. It was suggested that providing some detailed feedback to Board members would help to give assurance as to the approach that was being taken

RESOLVED that:

(1) The progress made to date to improve the health and wellbeing of individuals with Multiple Complex Needs be endorsed.

(2) Agreement be given in principle to mainstream support for Multiple Complex Needs, linking it with Housing First, through the City Council's Housing Governance Structure.

(3) An item on the partner approach to housing and homelessness in the city be considered at a future Board meeting.

34. Better Health, Better Care, Better Value Programme Update

Andy Hardy, University Hospitals Coventry and Warwickshire, introduced an update report on the Better Health, Better Care, Better Value programme and workstreams.

The report referred to the recent appointment of Sir Chris Ham as the Independent Chair for Better Health, Better Care, Better Value, who had just started in his new role.

The Board were informed that good progress had been made with the Integrated Care System roadmap and the latest stocktake with NHS England had taken place on 14th December. The Better Health, Better Care, Better Value Board had agreed to work towards 14 strategic objectives that would help drive change in Coventry and Warwickshire. One of those objectives was the development of a Provider Alliance operating model. The four NHS providers were currently working together to implement this.

The report set out progress with the following transformational and enabling programmes of work:

Transformational
Proactive and Preventative
Maternity and Paediatrics
Mental Health and Emotional Wellbeing
Planned Care
Productivity and Efficiency
Urgent and Emergency Care

Enabling
Estates

Digital Transformation Workforce

In respect of the Cancer work programme, the report informed that the West Midlands Cancer Alliance had awarded £688,144 transformation funding to Coventry and Warwickshire STP to ensure that best practice was followed with four key tumour sites (lung, colorectal, prostate and upper gastrointestinal) and for living with and beyond cancer.

The Alliance was funding £15.2m across the West Midlands, including Coventry and Warwickshire, for transforming cancer care. One of the largest programmes was the digitalisation of pathology, which had been allocated approximately £8m. This would involve pathologists capturing digital images of slides of tissue sections, which could then be shared immediately with experts across the region meaning faster diagnosis for patients and better information and collaboration for clinicians.

The Better Health, Better Care, Better Value partners were working together to improve take-up of cervical screening.

Regarding the proposals for the review of Stroke Services in Coventry and Warwickshire, residents from the area attended an options appraisal event on bedded rehabilitation last month. More than 40 people attended, including staff members who would be involved in delivering a future improved service. Feedback from the event would be utilised as part of an ongoing process to confirm the options for bedded rehabilitation before going out to public consultation.

Professor Daly, Coventry University, informed about the development of the system wide clinical strategy. A framework had been developed to support the delivery of the Better Health, Better Care, Better Value Plan. The strategy set out the current issues being faced across Coventry and Warwickshire's health and care system and identified priority areas where services could be improved. Three priority areas identified were frailty, mental health and musculoskeletal services.

Dr Sarah Raistrick reported back on the successful event held at Coventry Rugby Club on World Mental Health Day on 10th October. More than 100 service users, partners and other stakeholders were updated on the mental health and emotional wellbeing work programme, the progress made to date and the ways in which they could get involved. The event featured a market place showcasing local services and had breakout sessions to discuss specific elements such as crisis cafes and a Psychiatric Decision Unit.

Simon Gilby, Coventry and Warwickshire Partnership Trust, drew attention to the expansion of the Coventry Street Triage Service, where mental health nurses accompanied police officers to incidents where police thought people needed immediate mental health support. The service was to be piloted in Warwickshire.

Members also discussed dementia training for GPs.

RESOLVED that the content of the report be noted.

35. **Prevention Concordat for Better Mental Health**

The Board considered a report of Liz Gaulton, Director of Public Health and Wellbeing, which sought approval to take forward a local Prevention Concordat for Better Mental Health in support of the national programme.

The report indicated that the Five Year Forward View for Mental Health recommended that Public Health England (PHE) established a national Prevention Concordat for Better Mental Health programme to support local Health and Wellbeing Boards. The aims of the national programme were to facilitate national and local actions around preventing mental health problems. The national programme had been established and was responsible for supporting the establishment of local prevention concordats. A Consensus Statement described the shared commitment of the organisations that had endorsed the Concordat, a copy of which was set out at Appendix 1 to the report.

There were four qualifying criteria required to declare a local Prevention Concordat for Better Mental Health:

- An Elected Member (or Senior Officer) signed up as a Mental Health Champion
- A current suicide prevention action plan, supported by a multi-agency partnership
- An established Joint Strategic Needs Assessment (JSNA) describing local system mental health need (or commitment to start one within 3 months of declaring a concordat).
- Sector wide commitment to sign up to a shared concordat statement, usually signed off by the local Health and Wellbeing Board.

Public Health England (PHE) were asking that organisations interested in signing up to the Concordat complete and submit a short commitment action plan template, capturing key areas of work ongoing, a commitment pledge for the future year and a named signatory. A proposed template was set out at a second appendix to the report. Submission of the template was required by 1st March, 2019. The Board were informed that Warwickshire Health and Wellbeing Board and County Council had already signed up to the Prevention Concordat.

Coventry's current position against the four qualifying criteria was positive. The city had a current Suicide Prevention Strategy action plan and multiagency partnership. The JSNA included mental health indicators and the Place Based JSNA approach was currently being implemented and would feature Mental Health and Wellbeing as a central theme. Dedicated CAMHS Needs Assessments had been completed and there was a range of resources describing mental health needs supporting the work of the BHBCBV Mental Health workstream.

The report requested Members nominated a Mental Health Champion who would be asked to support the ongoing campaign and engagement work and maintain links with the Board.

The report set out the key options to be considered when deciding to declare a concordat and how the concordat could be used to support ongoing work around mental wellbeing. It was recommended that the Prevention Concordat for Better

Mental Health was progressed as a development and engagement campaign/project that amplified and added value to existing programmes of work including local Mental Health transformation and the Year of Wellbeing. A local Prevention Concordat for Better Mental Health would support population wide approaches to the promotion of public mental health and wellbeing, for children, young people, adults and communities across Coventry.

The Board discussed the added value to be gained by declaring the Concordat and the officer resource to support the work. Professors Meyer and Daly offered the support of both local universities to assist by drawing on research evidence to inform the focus of activity. The importance of using plain English to help the public's understanding was highlighted. Councillor Caan was put forward as the Mental Health Champion.

RESOLVED that:

(1) The plans to take forward the National Prevention Concordat for Better Mental Health programme be endorsed and agreement be given to supporting the Consensus Statement set out at Appendix 1.

(2) Councillor Caan be nominated as the Health and Wellbeing Board level Mental Health Champion.

(3) Agreement be given to declaring a local Prevention Concordat for Better Mental Health for Coventry and over overseeing local delivery.

(4) The proposed wording for a Coventry Health and Wellbeing Board commitment pledge be endorsed.

36. CAMHS Local Transformation Plan: Year 3 Refresh

The Board considered a report of Matt Gilks, Coventry and Rugby CCG which sought endorsement for the refreshed Child and Adolescent Mental Health Services (CAMHS) Transformation Plan. John Gregg, Director of Children's Services, attended the meeting for the consideration of this item. A copy of the updated plan was set out at an appendix to the report.

The report indicated that there was a requirement from NHS England (NHSE) for Clinical Commissioning Groups (CCGs) to develop a CAMHS Transformation Plan, working with their local partners to set out a strategic vision for delivering improvements in children and young people's mental health, and wellbeing over a five-year period from 2015 to 2020. The CAMHS Transformation Plan was submitted to NHSE in 2015, and CCGs were required to refresh the plan annually, to demonstrate progress and outline priorities for the forthcoming year.

This was the third year of the CAMHS Transformation Plan refresh, highlighting progress against the priorities for 2017/18, and further progress planned for 2018/19. The refresh process was led by Coventry and Rugby CCG, and refreshed plans were signed off by NHSE. Final sign off was now awaited from NHSE. The refresh process was managed through the multi-agency CAMHS Transformation Board.

An additional appendix to the report outlined the key progress against the Transformation Plan for 2017/18, and identified priorities for 2018/19. The CAMHS Transformation Board had rolled forward the priorities from 2017/18, on the basis that there was further progress to be made against these. Accompanying the priorities for 2018/19 was an action plan. The action plan set out the strategic work required alongside deadlines and named individuals to ensure accountability. The plan would be monitored monthly by the Transformation Operational Group. The key priorities were:

- Mapping tiers of provision with funding associated within each tier
- Review the early intervention offer including remodelling tier 2 provision
- Tier 3.5 service – CRISIS / Ward 14
- Strengthening governance structures
- Data analysis
- Digital solutions (such as Dimensions Tool)
- ASD Pathway / Transforming Care

The report detailed the governance structure to provide accountability to ensure the delivery of the actions to meet the priorities.

John Gregg reported on the Children and Young People's Partnership Board's consideration of the CAMHS Local Transformation Plan. The challenge from the Board was to understand the impact of the Plan on outcomes for individual children. There was a willingness amongst partners to come together to address challenges in the system and a view that the potential of early help hubs to intervene at an earlier stage should be maximised.

Members discussed the barriers to making improvements in the system, with workforce and funding identified as key barriers.

There were a high number of children escalating to specialist services in Coventry and Warwickshire and the reasons for this were being actively investigated as part of the clinical risk review. Professor Meyer offered support from Warwick University in relation to research undertaken around early intervention and predictors of emotional wellbeing issues in young people.

RESOLVED that the Coventry and Warwickshire Children and Adolescent Mental Health Services Local Transformation Plan refresh for year three be endorsed.

37. 2017/18 Annual Reports of the Coventry Safeguarding Children and Adults Boards

The Board received reports of Rebekah Eaves, Safeguarding Boards Business Manager, concerning the 2017/18 Annual Reports of the Coventry Safeguarding Children and Adults Boards, copies of which were set out at appendices to the two reports. Areas of overlap with the work of the Health and Wellbeing Board were noted.

The report concerning the Adults Board Annual Report highlighted the priorities and progress set out in the report. Much had been done in the last year to improve awareness of safeguarding issues, particularly those which were more complex.

Many agencies had introduced new measures to ensure that staff were not just trained but were able to access ongoing support to improve their safeguarding knowledge and skills. However, not enough of our staff had up to date safeguarding awareness training and the Board remained committed to challenging and supporting agencies to improve this.

Much progress had been made in respect of community and engagement but there was still more to do. It was the intention to work more closely with the community to more fully understand the needs of people with care and support needs in Coventry and ensure that their views influenced strategic decision making. Regarding making safeguarding personal, the Board were now confident that professionals understood and could apply the appropriate principles. There were times when this was difficult and the introduction of initiatives such as Risk Enablement Panels and Family Group Conferencing would be key to ongoing success in this area.

The Board noted that over the last year, huge progress had been made in respect of learning and development, with the Workforce Development Strategy setting the direction and standard for all future training.

The report concerning the Children's Board Annual Report also detailed the priorities and progress. A key priority was that looked after children and young people had equal opportunities to other children and young people. The Board now had a much better understanding of the outcomes for looked after children. Over the coming year there were plans in place to develop improved opportunities, particularly through the provision of apprenticeships. There was also ongoing work to further improve the health of looked after children.

Regarding early help services, including mental health support, being available to children and young people, these were resulting in positive outcomes. The redesign of the delivery of Early Help was encouraging, as it would allow for a more seamless provision of support to families, across the continuum of need.

Good work had continued in respect of missing children and young people, and those at risk of child sexual exploitation, being protected by effective multi-agency arrangements. Professionals were increasingly aware of and responding to CSE risk. However, more needed to be done to consider the needs of victims as they transitioned into requiring adult support services.

Significant steps had been taken in raising the profile of understanding of emotional abuse and neglect, including domestic abuse and that abuse was identified as early as possible, and that appropriate interventions were provided to prevent further abuse and harm. This included setting the direction for effective partnership working with the launch of strategies in relation to both neglect and domestic abuse and the roll out of Signs of Safety.

RESOLVED that:

(1) The contents of the Coventry Safeguarding Adults Board Annual Report 2017/18 be noted.

(2) The contents of the Coventry Safeguarding Children Board Annual Report 2017/18 be noted.

38. Care Quality Commission (CQC) Local System Review - Improvement Plan Progress

The Board considered a report of Pete Fahy, Director of Adult Services which summarised progress against the improvement plan arising from the Care Quality Commission System Review undertaken between December 2017 and March 2018. The improvement plan was owned by the Board hence the submission of routine monitoring reports on progress against the plan until its completion in March 2019. A copy of plan was set out at an appendix to the report.

The report indicated that on 10th October, local system leaders were advised by the Care Quality Commission that – at the request of the Secretaries of State for Health and Social Care and Housing, Communities and Local Government – they would be monitoring the improvement made in the local area since the local system review. This was not a further review and did not involve a site visit to the area. All of the 12 systems subject to a review in the first phase of the review programme were subject to this follow up action. Three systems received an on-site visit and the remaining nine, of which Coventry was one, were subject to a light touch review.

Reviewers advised that they would assess progress against the action plan, and hold telephone interviews with key people responsible for overseeing progress, as well as looking at the most recent available performance data for a number of indicators.

The Coventry call took place on 10th December involving Pete Fahy, Coventry Council, Andrea Green, Coventry and Rugby CCG and Councillor Faye Abbott, Cabinet Member for Adult Services. Subsequently, a draft slide deck summarising key areas of progress since the local system review had been received. This feedback highlighted the achievements and progress since the review in January, 2018 and reflected positively on the direction of travel, whilst acknowledging the further work required in particular around clinical pathways and local workforce strategy.

Once finalised, the CQC had advised that they would share their findings with local system leaders and report them to the Department of Health and Social Care. However, the finalised slide deck would not be published.

The report informed that progress against each of the actions had been reviewed, and a progress update was provided in the plan set out in the appendix. The Board noted that good progress continued to be made on many of the actions, however some actions had slipped in order to ensure effective stakeholder engagement. By March 2019, however, the work should be mainly complete and embedded into system improvements in programmes and activities thereafter.

The report set out a brief summary of progress and achievements to date against the following themes: vision and strategy; engagement and involvement; performance, pace and drive; flow and use of capacity; market development; workforce; and information sharing and system navigation.

Discussion centred on whether it had been an appreciative approach as opposed to inspection and there was an acknowledgement that the indicators identified by the CQC to review progress had a hospital bias rather than a whole system approach.

RESOLVED that:

(1) The progress made and areas still to be addressed against the actions in the improvement plan arising from the CQC local system review be noted.

(2) The Board continues to maintain oversight of progress against the improvement plan at future meetings.

39. Any other items of public business

There were no additional items of public business.

(Meeting closed at 3.50 pm)