

**Minutes of the meeting of the Coventry Health and Well-being Board held at 2.00  
p.m. on 7<sup>th</sup> April, 2014**

Present:

Board Members: Councillor Gingell (Chair)  
Councillor Taylor (substitute for Councillor Noonan)  
Jane Moore, Director of Public Health  
Brian Walsh, Executive Director, People  
Dr Steven Allen, Coventry and Rugby CCG  
Stephen Banbury, Voluntary Action Coventry  
Claire Bell, West Midlands Police  
Andy Hardy, University Hospitals Coventry and Warwickshire  
Professor Sudesh Kumar, Warwick University  
Ruth Light, Coventry Healthwatch  
John Mason, Coventry Healthwatch  
David Smithson, West Midlands Fire Service  
Josie Spencer, Coventry and Warwickshire Partnership Trust  
David Williams, NHS Local Area Team

Employees (by Directorate):

Chief Executive's: N Inglis and R Tennant

People: C Parker

Resources: L Knight

Apologies: Councillor Duggins  
Councillor Lucas  
Councillor Noonan  
Dr Adrian Canale-Parola, Coventry and Rugby CCG  
Rachel Newson, Coventry and Warwickshire Partnership Trust  
Sue Price, NHS Local Area Team  
Jon Waterman, West Midlands Fire Service

**Public business**

**37. Welcome**

The Chair, Councillor Gingell, welcomed members to the last formal meeting of the Board in the current municipal year.

**38. Declarations of Interest**

There were no declarations of interest.

**39. Minutes of Previous Meeting**

The minutes of the meeting held on 24<sup>th</sup> February, 2014 were agreed as a true record.

Further to Minute 30 headed 'Update on Better Care – Submission and Next

Steps', it was agreed that the following be deleted from the fourth paragraph of the minute: 'and also had the support of Healthwatch'.

A suggestion was made that future minutes from Board meetings contain more detail about the Board's discussions.

Further to Minute 35 headed 'Local Safeguarding Children's Annual Report', the Board were informed that a Local Safeguarding Children's Board away day had been arranged for 12<sup>th</sup> May, 2014. It was the intention to spend time discussing the governance arrangements and the links to the Health and Well-being Board for both children and adult safeguarding.

#### **40. Health Protection Strategy**

The Board received a report and presentation from Nadia Inglis, Consultant in Public Health, informing of the function of the Arden Health Protection Committee; detailing the governance arrangements; highlighting the current key issues being addressed and requesting endorsement of the Committee as a Sub-Committee of the Board.

The local authority, and the Director of Public Health acting on its behalf, had a pivotal place in protecting the health of its population. The local authority's role in health protection was one of a local leadership function rather than managerial.

The Health Protection Committee was established in April 2013, its purpose being 'To provide assurance on behalf of the population of Coventry and Warwickshire that there are safe and effective plans in place to protect population health, to include communicable disease control, infection prevention and control, emergency planning, sexual health, environmental health, and screening and immunisation programmes'.

The roles of Committee were set out. Appendices to the report set out the current terms of reference which were due to be reviewed along with the current Arden Health Protection Strategy for 2013-2015. The Board were informed that the Health Protection Committee was currently a formal Sub-Committee of the Warwickshire Health and Well-being Board.

Both the report and presentation provided detailed information on the current health protection challenges affecting Coventry and the key on-going actions of the Health Protection Committee partners.

The Board discussed a number of issues arising from the presentation including:

- The roles of the Health Overview Scrutiny Committee and the Health and Well-being Board
- Increasing the number of frontline healthcare and workers at Coventry and Warwickshire Partnership Trust and University Hospitals Coventry and Warwickshire to have the seasonal flu vaccination, with a particular concern about the lack of uptake from clinicians at the hospital
- Details about the priority to address the on-going high rates of TB diagnosis in the city and the issue of the transference of the TB nurses from University Hospital Coventry to the George Eliot Hospital
- The responsibility for communicating with the public regarding campaigns to

promote uptakes of vaccinations, particularly for dealing with emergency health protection outbreaks

- The difficulty of ensuring that the public are aware of who takes responsibility for what and the challenge to ensure that the new system will make a difference to people in the local communities
- Clarification about multiagency Memorandum of Understanding for service delivery during health protection incidents
- The frequency that reports from the Arden Health Protection Committee are to be submitted to the Health and Well-being Board
- How the work of the Health Protection Committee can be monitored by Board members.

**RESOLVED that:**

**(1) The remit of and the need for the Arden Health Protection Committee to exercise the responsibilities of the Directors of Public Health in Coventry and Warwickshire with regard to ensuring that there are plans in place to protect the health of the population be endorsed.**

**(2) Approval be given for the Arden Health Protection Committee to be a formal Sub-Committee of the Health and Well-being Board.**

**(3) The Arden Health Protection Strategy 2013-15 be endorsed.**

**(4) Biannual reports from the Arden Health and Protection Committee be submitted to future meetings of the Board and by exception reports on any items that are of particular concern to members.**

**(5) A report on the multiagency Memorandum of Understanding be circulated to the Board.**

**(6) A report on proposals to deal with the high rates of TB diagnosis; the highest prevalence of HIV in the West Midlands; and the increasing rates of sexually transmitted infections be submitted to a future meeting of the Board.**

**41. Health and Social Care Integration: Update on Better Care and the British Telecom Hot House Event and 5 Year Plan**

Dr Steve Allen, Coventry and Rugby Clinical Commissioning Group, reported on progress with the five year strategic plan and the 2 year operational plan for the CCG, drafts of which had been submitted to NHS England in February, 2014. Second submissions were subsequently sent off on 4<sup>th</sup> April. Reference was made to the current work with key stakeholders in developing plans for the use of the Better Care Fund over the next two years. The three schemes for Coventry were:

- (i) Short term support to maximise independence
- (ii) Long term care and support including joint packages
- (iii) Dementia including improvements in dementia pathways.

Dr Allen also informed of the success of the British Telecom Hot House Event which was held over three days in March, 2014 and involved four mixed teams of front line staff and managers from all agencies competing to design the best integrated service

model for older vulnerable people. The event was facilitated by British Telecom and the winning team were awarded an away day to London with a meal at the BT tower. Local patients and carers joined the teams and technical advice was available. The work was to form part of the implementation of the local Better Care fund plans and would help to manage the demand on services. A comparison with previous ways of working was provided.

The winning 'yellow' team had 90 days to instigate their plan, with their first meeting was taking place the following day. Reference was made to the importance of the communication plan to ensure that the current momentum was not lost. All partners had committed to release their team members to enable the pilot to start which was to operate from the Forum Health Centre.

A second Hot House Event was to take place on the 3<sup>rd</sup> to 5<sup>th</sup> June, 2014 to consider Urgent Care.

The Board discussed a number of issues arising from the presentation including:

- The involvement of the voluntary sector in the event and the team's work over the next 90 days
- How to capture the learning ideas from the other three teams
- The contribution made by British Telecom
- The funding implications of investing in community services to support long term care
- The importance of partnership working
- If the pilot failed to deliver, would the project be quickly shut down
- The communication strategy and how to ensure partners such as Healthwatch were kept updated and involved
- The structure for supporting the Better Care Fund

Dr Allen reported that an additional quality premium had recently been announced for medicine safety and further information would be provided in due course.

**RESOLVED that a report on the progress of the pilot project be submitted to the next meeting of the Board.**

#### **42. 2014/15 Work Programme for the Board**

The Board considered the draft work programme for the coming municipal year. The programme had been developed following previous discussions with the Board including the Informal Board development session held on 27<sup>th</sup> January, 2014.

The work programme had been established to reflect the following principles:

- (i) Responsibility for delivering the key elements of the Health and Well-being Strategy rested with the responsible partnership or group and regular updates on progress would be submitted to future meetings.
- (ii) Informal Board development sessions would be scheduled alongside formal Board meetings including joint sessions with Warwickshire's Health and Well-being Board.

A summary of the key groups and their relationship with the Board was set out at an appendix attached to the report.

The work programme was a live document and would be continually updated as new work areas developed and additional reports needed to be considered by the Board.

Members raised a number of issues including whether it was appropriate for the Board to receive a presentation on the new pilot scheme at the Criminal Justice Liaison Service which aimed to improve the mental health of people in the service; the Board's responsibility for safeguarding and how the different Boards interrelate with this vital issue; and the potential for having themed meetings, possibly by taking themes from the Health and Well-being Strategy.

**RESOLVED that:**

**(1) The draft Work Programme for 2014/15 be endorsed.**

**(2) The Board ensures that additional items for the work programme are added to this plan as the year progresses and the work of the Board evolves.**

**(3) A presentation from Coventry and Warwickshire Partnership Trust on the pilot scheme at the Criminal Justice Liaison Service be submitted to a future Board meeting.**

**36. Any Other Items of Public Business – Joint Seminar with Warwickshire**

Ruth Tennant, Deputy Director Public Health informed that arrangements had been made for a joint seminar for both Coventry and Warwickshire's Health and Well-being Boards to be held at 2.00 p.m. on Monday, 28<sup>th</sup> April, 2014 at the Techno Centre to sign off the five year strategic plan. It was also an opportunity to discuss other significant areas for joint working.

**37. Any Other Items of Public Business – Visit by Duncan Selbie**

Jane Moore, Director of Public Health reported that Duncan Selbie, Chief Executive of Public Health England visited Coventry on 21<sup>st</sup> March, 2014 and met the Leader, Councillor Lucas and the Chair, Councillor Gingell as well as local residents. Discussions centred on how to improve peoples' health and he was very impressed with the current partnership working in the city. There was recognition for the city, as Coventry was mentioned in his weekly Friday bulletin.

**38. Any Other Items of Public Business – University Hospitals Coventry and Warwickshire**

Andy Hardy, Chief Executive informed of the successful Thought Leadership Conference which took place on 4<sup>th</sup> April, 2014 concerning seven day working in the NHS which involved 150 participants. He highlighted the commitment to take this matter forward. He also reported the NICE (National Institute for Health and Care Excellence) were planning to hold their Annual Meeting at the hospital on 19<sup>th</sup> November, 2014. This would be a public meeting with an opportunity for questions.

(Meeting closed at: 3.30 p.m.)