

**Coventry City Council**  
**Minutes of the Meeting of Coventry Health and Well-being Board held at 2.00 pm**  
**on Monday, 2 July 2018**

Present:

Board Members: Councillor Caan (Chair)  
Councillor Duggins  
Councillor Seaman  
Councillor Taylor  
Stephen Banbury, Voluntary Action Coventry  
Professor Guy Daly, Coventry University  
Rachael Danter, NHS England  
Pete Fahy, Director of Adult Services  
Liz Gaulton, Director of Public Health and Wellbeing  
Simon Gilby, Coventry and Warwickshire Partnership Trust  
Andy Hardy, University Hospitals Coventry and Warwickshire  
Ruth Light, Coventry Healthwatch  
John Mason, Coventry Healthwatch  
Mike O'Hara, West Midlands Police  
Dr Sarah Raistrick, Coventry and Rugby CCG

Employees (by Directorate):

Place: L Knight  
D Nuttall  
People: D Dawson

Apologies: Councillor Abbott  
Steve Banbury, Voluntary Action Coventry  
Andrea Green, Coventry and Rugby CCG  
Professor Caroline Meyer, Warwick University  
Gail Quinton, Deputy Chief Executive (People)

## **Public Business**

### **1. Declarations of Interest**

There were no declarations of interest.

### **2. Minutes of Previous Meeting**

The minutes of the meeting held on 9<sup>th</sup> April, 2018 were signed as a true record.  
There were no matters arising.

### **3. Appointment of the Deputy Chair of the Health and Wellbeing Board**

**RESOLVED that Dr Sarah Raistrick be appointed as Deputy Chair of the Health and Wellbeing Board for 2018/19.**

#### 4. **Chair's Update**

The Chair, Councillor Caan informed the Board that Rachael Danter, the new NHS England representative on the Board had recently taken on a second role as Programme Director for the Better Health, Better Care, Better Value programme. Rachael informed the Board about her ambitions for her two roles. Councillor Caan also congratulated Liz Gaulton on her recent appointment as Director of Public Health and Wellbeing. Liz's new job title had been extended to include wellbeing emphasising the importance placed by the Council on their responsibility to local people in this area.

Councillor Caan reported on the excellent news that the new Science and Health building at Coventry University had been named in memory of the late Councillor Alison Gingell as a fitting tribute to her tireless leadership on health and social care for more than 40 years. He placed on record his thanks to Professor Guy Daly for his support in enabling this to happen.

The Chair also informed that Coventry had been successful in its bid to become the European City of Sport 2019. He referred to the opportunities that this would bring to raise the profile of physical activity in the city and support activity in the lead up to the City of Culture 2021. He also mentioned the following successful launches which had taken place over the past few weeks: Coventry Healthy Living Service; MiFriendly Cities project; and the Domestic Abuse Strategy.

Members were reminded of their decision to hold quarterly Health and Wellbeing Board meetings with Place Forums in between which had been reflected in the timetable of meetings for the year.

#### 5. **Coventry City of Culture 2021: The Health and Wellbeing Board Contribution and Benefits to the Health and Wellbeing of Coventry Citizens**

The Board considered a report and presentation of Liz Gaulton, Director of Public Health and Wellbeing and David Nuttall, Head of Sports, Culture, Destination and Business Relationships on the opportunities provided by the City of Culture 2021, the European City of Sport 2019 and the Year of Wellbeing 2019 to improve health and wellbeing outcomes for the City and accelerate efforts to address the wider determinants of health, for example jobs and economic growth, community cohesions and a sense of place, raised aspirations and school attainment.

The report indicated that the City of Culture was part of a wider Coventry's Cultural Strategy for 2017-2027 which outlined the cultural aspirations for the city for the next ten years. The strategy outlined five goals, one of which was to improve health and wellbeing. Key commitments made as part of the City of Culture bid included reducing obesity and improving mental health.

The Board were informed that their collective leadership would be invaluable in order to maximise the opportunities associated with the City of Culture and to minimise potential risks. With opportunities across the health and wellbeing economy created by the Year of Wellbeing and the European City of Sport there was the option to work as a Board to ensure these acted as an accelerant to the City of Culture. There was also the opportunity to begin to develop a sense of place amongst Coventry citizens and Coventry's workforce. The Board would be

key to providing leadership around the Marmot agenda ensuring that the health inequalities agenda was at the centre of the health and wellbeing offer.

A key aim of the City of Culture year would be to ensure that the health and wellbeing workforce acknowledge, value and support the delivery of cultural opportunities as a means of improving health and wellbeing. As employers of a significant proportion of Coventry residents, engaging staff in the design and development of a City of Culture offer would contribute towards enhancing the pride in the city. The role of staff in supporting the engagement of communities would also be critical.

The Board were informed of the importance of understanding the health impact of the City of Culture activities to be able to maximise opportunities. Public Health were committing capacity and expertise to complete a formal Health Impact Assessment. There were also considerable risks that would need to be managed and minimised which involved support from partner organisations.

The cultural strategy and sports strategy outlined a ten year vision for the city, moving beyond 2021. Maintaining momentum and raising aspirations would be a key challenge.

The presentation highlighted how arts and culture improved health and wellbeing and set out the vision for the City by 2027. The five key goals of the cultural strategy, including health and wellbeing, were set out along with outline targets. Attention was drawn to the views of Professor Sir Michael Marmot on culture and to the opportunities for Coventry as a Marmot City and the Year of Wellbeing 2019. Additional information was provided on health and wellbeing benefits. The presentation referred to the learning from Hull in respect of health and wellbeing and culture, including the outcomes achieved. The key learning for Coventry was also discussed. There was a focus on the opportunities for the Health and Wellbeing Board to provide leadership in a number of areas and to the collective opportunity that the Board could bring to the City of Culture.

Members discussed a number of issues in response to the report and presentation, matters raised included:

- The significant opportunities available for the partner organisations to become involved with the City of Culture, the Year of Wellbeing and the European City of Sport
- The importance of being able to engage with all communities in the city
- The options to involve the students from both Coventry and Warwick Universities
- A concern about the significant number of objectives to be achieved and the significant level of support that would be required to achieve success in all areas
- What monitoring arrangements had been put in place to ensure delivery
- What would the expected legacy of the three events be, what difference would there be for Coventry residents in ten years?
- A concern about being able to involve the whole city in the different events, particularly the hard to engage communities
- An acknowledgement of the important volunteer role to be played by the Coventry ambassadors.

**RESOLVED that:**

- (1) The content of the report and presentation be noted.**
- (2) The opportunities and challenges the City of Culture presents to health and wellbeing of Coventry citizens be acknowledged.**
- (3) The opportunities and challenges the City of Culture presents to organisations within Coventry's health and wellbeing economy be acknowledged.**
- (4) The role of the Board in providing strategic leadership around the health and wellbeing agenda of the City of Culture be endorsed.**

**6. Coventry and Warwickshire Place Forum**

The Board considered a joint report of Liz Gaulton, Director of Public Health and Wellbeing and Dr John Linnane, Director of Public Health and Head of Strategic Commissioning, Warwickshire County Council concerning the forthcoming meeting of the Coventry and Warwickshire Place Forum on 16<sup>th</sup> July, providing members with the opportunity to consider the key documents for discussion. The report was also to be shared virtually with the members of the Warwickshire Health and Wellbeing Board.

The report indicated that the meeting on 16<sup>th</sup> July was to be facilitated by John Bewick from the Local Government Association who was supporting the work on Upscaling Prevention. The proposed agenda would include an opportunity to understand more about the developing Integrated Care Systems and the implications for the local health and care system, and an update on progress across the Better Health, Better Care, Better Value programme. It was also intended to circulate the Concordat and Place Design for endorsement as well as providing the opportunity for partners to learn more about and pledge their support towards the plan for delivery of the Year of Wellbeing.

The report indicated that at the first meeting of the Place Forum on 7<sup>th</sup> March 2018 a revised Concordat and the draft Place Design were shared with members and it was agreed that these would be further developed taking on Board the feedback on the day, with a view to signing them off at the next Place Forum. The updated documents had been shared with members through the Proactive and Preventative workstream. The updated documents were set out at appendices to the report.

At the March Place Forum meeting it was agreed that consideration be given as to how members could keep each other informed and involved between meetings. The Coventry and Warwickshire Place Forum Update had been circulated to members by e-mail to address this issue. A copy was set out at a second appendix to the report and feedback was requested.

Members discussed the draft documents and it was suggested that the draft Place Design should include reference to carers and further consideration needed to be given to early intervention since work was still ongoing in this area. A further

comment was made highlighting that the Concordat needed to be in plain English so it could be fully understood by everyone.

**RESOLVED that:**

**(1) The proposed agenda items for the Place Forum on 16<sup>th</sup> July be noted.**

**(2) Consideration to be given to the comments detailed above for inclusion in the revised Concordat and Place Design prior to their submission to the Place Forum on 16th July for endorsement.**

**(3) The Coventry and Warwickshire Place Forum Update that has been developed to improve information and communication between meetings be noted.**

**7. Health and Wellbeing Strategy Update: Coventry Multiple Complex Needs Programme Progress Update**

The Board considered a report and presentation of Chief Superintendent Mike O'Hara, West Midlands Police and Chair of the Coventry Multiple Complex Needs Board which set out the progress made by the Multiple Complex Needs Programme to improve the outcomes of people experiencing multiple complex needs in Coventry. Copies of the programme's 'plan-on-a-page', the project initiation document; and the evaluation framework were attached at appendices to the report.

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 report indicated that the programme initiation document had been substantially revised with the primary objective now being to pilot and evaluate new interventions that would lead to cultural and systematic change, rather than developing a new service. There were now three stages to the programme as follows:

- 1 – Determine current needs and service provision
- 2 – Pilot new interventions for people facing multiple complex needs
- 3 – Evaluate interventions and make recommendations for system change.

The appropriate timescales for delivery were highlighted.

The report informed that in the past year the programme had made significant progress. In November, 2017 the city became one of 25 'Making Every Adult Matter' approach areas across the country. (A copy of the Make Every Adult Matter First Quarter Progress report was set out at a further appendix to the report). In February, 2018 the programme began case-managing a small cohort of people experiencing severe and multiple disadvantage in co-ordination with the city's Harm Reduction and Vulnerable Persons Forum. Then in April, 2018 the programme established a working relationship with people with lived experience of homelessness, substance misuse and offending management as 'experts by

experience' to co-design service transformation. There was by-in to the programme from partners across the public and voluntary sector in the city, as well as co-ordination and support with the West Midlands Combined Authority public sector reform programme.

A multi-agency weekly drop in advice and information shop to address problems of homelessness, begging and drug/alcohol addiction in the city centre had been established. This 'Steps for Change' had been adopted as one of the projects of the programme. The programme would also be supporting the pilot implementation of Housing First in Coventry. This was designed to provide long term, open ended support for tenants' on-going needs.

The presentation set out the three stages of the programme, highlighted the accountability structure; informed of the arrangements for monitoring progress and performance; and referred to the evaluation process for making recommendations for system change which would be supported by experts from Coventry University.

Attention was drawn to the programme 'Plan-on-a-Page' with a summary being provided of the progress to date. The presentation concluded with the next steps for the programme.

The Chair, Councillor Caan expressed appreciation for the work undertaken to date. Clarification was sought as to how people were referred to the programme and it was explained that the work used existing funds to work with a small cohort who were already known to the system. Referrals were not being sought.

**RESOLVED that:**

**(1) The significant progress made on the Coventry Multiple Complex Needs programme be acknowledged.**

**(2) Consideration to be given as to how approaches being tested and piloted in the Multiple Complex Needs programme may be adopted.**

**(3) The 'Making Every Adult Matter' approach be embedded and mainstreamed across all partners – a priority for the Health and Wellbeing Board**

**(4) It be ensured that Multiple Complex Needs continues to be a Health and Wellbeing Strategy priority post 2019, in line with the city's agreement as a Making Every Adult Matter approach area from 2018-2022.**

**8. Coventry Joint Strategic Needs Assessment Progress Update**

Further to Minute 48/17, the Board considered a report of Liz Gaulton, Director of Public Health and Wellbeing which set out the recent progress that had been made towards the refresh of the Joint Strategic Needs Assessment (JSNA).

The report indicated that at their last meeting in April, 2018 the Board had agreed to work towards a place-based JSNA to inform the next update of the Joint Health and Wellbeing Strategy and to identify local sponsors and lead officers in each geographical area so that areas for development identified through the JSNA

could be developed into local priorities and action plans. The refreshed JSNA would cover the 2019-2022 period. The move towards a place-based approach would offer populations a much more complete and less fragmented service.

Recently a JSNA roadshow presentation setting out the latest 2018 refresh of the JSNA was held with all services that requested one, with services being given the opportunity to be involved with the production of the new JSNA. An initial Working Group had been set up to develop a project plan and a plan-on-a-page, copies of which were set out at appendices to the report.

Health and Wellbeing Board members had been invited to join, or to make a nomination, to attend the Executive Steering Group and make decisions on behalf of the Board and to nominate an analyst/ officer to represent them on the Working Group.

The Board were informed that initial scoping work had taken place to determine the boundaries for each of the place-based JSNA and this was to be shared at the first meeting of the Executive Steering Group which was taking place at the conclusion of the Board meeting. There was an acknowledgement of the partner organisations working to different geographical boundaries and it was suggested that any boundaries needed to feel right for local communities.

**RESOLVED that the progress made, including the development of a plan – on-a-page, the project initiation document, the project initiation document, the call for membership of the Executive Strategic Group and Working Group and the progress in identifying suitable boundaries, be noted.**

#### 9. **Better Health, Better Care and Better Value Programme Update**

The Board considered a report of Andy Hardy, University Hospitals Coventry and Warwickshire (UHCW) which provided an update on the Better Health, Better Care, Better Value programme and workstreams.

The report indicated that the STP and NHS England recognised that additional support was required to deliver the transformation of the Coventry and Warwickshire system to a Shadow Integrated Care System by 2019. NHS England had invested in a large system-wide capabilities development programme for senior leaders and their teams across the next 15 months. A twelve week programme aimed to develop the leadership capability of senior teams using the following learning streams: building a whole system strategy and plan; system level financial planning; integrated governance; and execution and implementation. Following the intensive 12 week development programme, a plan was to be produced highlighting the actions required with relevant timescales to reach Shadow Integrated Care System by April, 2019.

Reference was made to the support provided by NHS England which included Rachael Danter, Locality Director for NHS England also taking up the role of Programme Director for Better Health, Better Care, Better Value.

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

The Board were provided with an update on the review of Stroke Services in Coventry and Warwickshire. A Regional Assurance Panel of the 'Pre Consultation Business Case' (PCBC) took place on 24<sup>th</sup> May. The case was well received, however, the Panel identified a number of areas where further evidence was required to ensure all the NHS requirements for service reconfiguration had been met. Work was underway to address the points raised and gather the required information prior to submission to a Formal Review Panel.

The Board discussed the importance of engagement with employees so they were aware of what was to be progressed and also keeping local residents informed so the community knew about new proposals. Work was to be undertaken to produce a brief information document on the different work streams and where decisions would be made and members expressed support for this approach.

Members were informed about the work of the Clinical Design Authority and development of a clinical strategy including joint working and outcomes for patients. Further information was to be submitted to the Board in due course.

**RESOLVED that the content of the report be noted.**

#### 10. **Care Quality Commission (CQC) Local System Review - Improved Plan Progress**

Further to Minute 52/17, the Board considered a report of Pete Fahy, Director of Adult Services which summarised the progress to date against the improvement plan arising from the Care Quality Commission (CQC) System Review as agreed by the Board at their last meeting on 9<sup>th</sup> April, 2018.

The report indicated that following approval of the improvement plan by the Board, the plan was submitted to the CQC and the Department of Health and Social Care (DHSC) on 10<sup>th</sup> April, 2018. Progress against the plan was being monitored by the DHSC through monthly telephone calls.

The action plan contained seven sections which grouped together the areas for improvement arising from the CQC review and the report set out the key progress under these following sections:

Vision and Strategy  
Engagement and Involvement



Performance, Pace and Drive  
Flow and Use of Capacity  
Market Development  
Workforce  
Information Sharing and System Navigation.

Under the performance, pace and drive section, the Coventry and Rugby Accident and Emergency Delivery Group had developed a draft Urgent and Emergency Care dashboard, a copy of which was set out at an appendix to the report. This contained key elements of activity and flow across the system and would be used by the Group to monitor and manage performance. It could also be used to provide information to the Board.

The Board were informed that two monitoring phone calls had taken place with the DHSC to date and it was clear that there remained ministerial interest in the ongoing impact of the reviews. The DHSC had offered to undertake a follow up summit in the autumn as an opportunity for the Board to showcase progress and for the DHSC to discuss policy and the connectivity of different initiatives with the Board.

It was the intention to complete the work on the improvement plan by March 2019 and ensure this focus was embedded in programmes and activities across the system beyond this date.

Members sought clarification about the information contained within the dashboard, requesting the inclusion of additional data. It was acknowledged that this was developed to enable monitoring and managing by the Accident and Emergency Delivery Group. Different dash board indicators could be used to show system progress for the Board and this would be raised at the next Place Forum on 16<sup>th</sup> July.

**RESOLVED that:**

**(1) The Board note the progress made and support the ambition to conclude the work on the action plan by March 2019.**

**(2) The Board invite the Department of Health and Social Care to provide a follow up seminar in autumn 2018 to summarise progress and challenges and support in understanding the linkages of different policy initiatives and programmes.**

**(3) The Board received monitoring reports on progress against the improvement plan at future Board meetings.**

**11. Any other items of public business - Cabinet Member Portfolio Change**

The Chair, Councillor Caan, informed the Board that for the new municipal year, poverty had been included in his Cabinet Member for Public Health and Sport portfolio. He outlined his intention to work to tackle this issue and was planning to hold a seminar on the subject.

(Meeting closed at 3.30 pm)