

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

Present:

Board Members: Councillor Blundell  
Councillor Caan (Chair)  
Councillor Duggins  
Councillor M Mutton  
Councillor Seaman  
Liz Gaulton, Director of Public Health and Wellbeing  
John Gregg, Director of Children's Services  
Andy Hardy, University Hospitals Coventry and Warwickshire  
Professor Rob James, Coventry University  
Ruth Light, Coventry Healthwatch  
Stuart Linnell, Coventry Healthwatch  
Sue Ogle, Voluntary Action Coventry  
Chief Superintendent Mike O'Hara, West Midlands Police  
Gail Quinton, Deputy Chief Executive (People)  
Dr Sarah Raistrick, Coventry and Rugby CCG (Deputy Chair)

Other representatives: Councillor Clifford, Chair of the Health and Social Care Scrutiny Board (5)  
Professor Sir Chris Ham, Coventry and Warwickshire Health and Care Partnership

Employees (by Directorate):

Place: E Dewar  
L Knight

People: R Eaves  
A Errington  
R Nawaz  
C Sacco

Apologies: Professor Guy Daly, Coventry University  
Chris Dempsey, NHS England  
Pete Fahy, Director of Adult Services  
Simon Gilby, Coventry and Warwickshire Partnership Trust  
Professor Caroline Meyer, Warwick University  
Richard Stanton, West Midlands Fire Service

## **Public Business**

### **13. Declarations of Interest**

There were no declarations of interest.

### **14. Minutes of Previous Meeting**

The minutes of the meeting held on 8<sup>th</sup> July 2019 were agreed and signed as a true record. There were no matters arising.

15. **Andrea Green**

The Chair, Councillor Caan, placed on record his thanks to Andrea Green for all the work she had undertaken over a number of years whilst a member of the Board including her support for the Year of Wellbeing. Andrea had now left Coventry and Rugby CCG and Adrian Stokes was the new Interim Accountable Officer.

He welcomed Dame Stella Manzie, DBE, the new Chair of University Hospitals Coventry and Warwickshire (UHCW) Trust who was observing the meeting.

16. **Chair's Update**

The Chair, Councillor Caan, reported that the Wave waterpark was due to open to the public on 21<sup>st</sup> October. The Wave was part of the legacy of the European City of Sport and represented a big investment in sport and physical activity by the City Council. Board members were invited to the VIP Opening event on 19<sup>th</sup> October.

Councillor Caan reported on recent activities concerning European City of Sport 2019 which included the European Corporate Games which took place between 1<sup>st</sup> and 4<sup>th</sup> August when Coventry Council finished 7<sup>th</sup> out of 51 organisations; Lets Ride Coventry on 8<sup>th</sup> September when families cycled round the ring road and enjoyed a range of activities; the launch of phase 2 of Coventry on the Move at Edgwick Park where new gym equipment had been installed; and over 2,000 school children from 20 Coventry schools participating in the CWS School Games over the summer.

From today, inspectors from Ofsted and the Care Quality Commission were undertaking an inspection of the Council's services for Children with Special Educational Needs and Disability (SEND) as part of a national programme of send inspections. As part of this, the CQC would be looking at how the Council and partners in health contributed and supported outcomes for vulnerable children and young people.

The Board were informed that a Year of Wellbeing celebratory event would be taking place on 4<sup>th</sup> December.

Councillor Caan reported that the West Midlands Wellbeing Board met on the 19th July. Coventry had been involved with the development and launch of Include Me West Midlands. This was a pioneering pledge to deliver a more customer centred and inclusive approach to sport and physical activity especially for disabled people. To date, 50 organisations had signed up to the pledge and over 125 people working in the sport and physical activity sector were trained in and aware of inclusivity and mental health awareness.

The Deputy Chair, Dr Raistrick reported on plans to mark World Diabetes Day with a Diabetes Awareness Event for the local community on Sunday 10th November at the Gurudwara Sikh Temple on Harnall Lane.

## 17. **Draft Coventry Health and Wellbeing Strategy 2019-23**

Further to Minute 7/19, the Board considered a report of Liz Gaulton, Director of Public Health and Wellbeing which sought approval of the draft Coventry and Health and Wellbeing Strategy 2019-2023, a copy of which was set out at an appendix to the report. The report also set out the initial work to be undertaken to mobilise the Strategy.

The report indicated that the Council and the Clinical Commissioning Group had a statutory duty, through the Health and Wellbeing Board, to develop a Health and Wellbeing Strategy that set out how they would address the health and well-being needs of local residents, as identified in the Joint Strategic Needs Assessment.

The aim of the Health and Wellbeing Strategy was to develop a set of shared, evidence-based priorities for commissioning local services which would improve the public's health and reduce inequalities. The outcomes of the work would help to determine what actions the Council, the NHS and other partners needed to take to meet health and social care needs, and to address the wider determinants that impacted on health and wellbeing. The current Strategy covered the period 2016-2019, and a new Strategy for 2019-2023 had been developed for approval and adoption. The report detailed the consultation process that had been undertaken as the Strategy was developed. The Strategy provided Coventry with a picture of what the Health and Wellbeing Board would deliver over the next three years and how partners would work together to achieve this. The Health and Wellbeing Strategy set out three strategic ambitions as follows:

- People are healthier and independent for longer
- Children and young people fulfil their potential
- People live in connected, safe and sustainable communities

As part of the development of the Strategy, the Board had adopted a population health approach to addressing the issues affecting local residents. This meant taking action on:

- The wider determinants of health
- Our health behaviours and lifestyles
- The places and communities we live in and with
- An integrated health and care system

The Board noted the following short term priorities to be progressed over the next 12-18 months by partnership working: loneliness and social isolation; young people's mental health and wellbeing; and working differently with our communities. The report set out the initial work in these areas which included identifying Board champions to lead on the work.

Members were informed that the strategy was to be submitted for approval to the City Council's Cabinet on 29<sup>th</sup> October 2019 and Coventry and Rugby CCG's Governing Body on 20<sup>th</sup> November 2019.

**RESOLVED that:**

**(1) The draft Coventry Health and Wellbeing Strategy 2019-23 be endorsed.**

## **(2) The progress to date on mobilising the Strategy be noted.**

### **18. Draft Youth Violence Prevention Strategy**

Chief Superintendent Mike O'Hara, West Midlands Police introduced the report of Liz Gaulton, Director of Public Health and Wellbeing, which informed of the work of the Coventry Youth Prevention Partnership Board, the development of a strategy, the work already in place across the city and putting an action plan in place to use a public health approach to tackle rising levels of youth violence.

The report indicated that the West Midlands Region had seen a steep increase in knife crime offences. Government research indicated knife crime was heavily linked to gang activity. Knife crime has risen nationally by 20% between 2016 and 2017 and, although Coventry mirrored this national trend, the number of young people becoming victims and/or perpetrators of violent crime was of particular concern. In response, Coventry's senior leaders agreed that violence in the City should be addressed via a public health approach, acting on its root causes as well as providing an effective response. The Violence Summit held in January this year led to a commitment to tackling this issue together across the whole system.

During the summer the Coventry Youth Violence Prevention Partnership Board (CYVPPB) was established which was supported by a Project Board and an Operational Group. The Project Board oversaw the delivery of three projects while the Operational Group would develop and deliver the action plan on behalf of the board.

At their meeting on 17<sup>th</sup> June, 2019 the Board had agreed to draft a multi-agency strategy using a public health approach to address the issue of youth violence in the City. The draft strategy had been developed using an outline framework adopted by the West Midlands Regional Violence Reduction Unit as well as learning from public health approaches used across Scotland. The draft strategy sets out six key strategic objectives (based on the public health approach). Key to the success of the strategy would be the 'plan, do, review' process. There would be a 12-month delivery plan to support each key objective. These short-term plans would be reviewed annually for their effectiveness and adapted if needed. The report set out the approach and progress against these six key objectives: building strong foundations; primary prevention; secondary prevention; tertiary prevention; enforcement and criminal justice; and attitudinal change using effective communication.

Since the first meeting of the Board in July, much work has been undertaken to mobilise the Strategy and to progress the short-term priorities identified. This included:

Mobilising three projects within the City including one funded by the Police and Crime Commissioner which was working with young people admitted to hospital with traumatic injuries as a result of violence.

Establishing joint, co-located police and children's services team focussed on youth violence within the Horizon Team.

Securing substantial funding for the City (approx. £1million) from various sources including the Police and Crime Commissioner and Central Government.

Focussed operational policing towards violence and gang suppression activity

Establishing schools interventions – Mentoring Violence Prevention Work  
Setting up schools panels (schools and police partnership) at both primary and secondary level.  
Created Summer diversionary activities

A significant piece of work, which was yet to take place, was the effective mapping of the systems, assets, ways of working and resources already in place across the City. This would be a key focus for the newly appointed programme manager over the coming weeks. The report set out the governance arrangements for the Partnership Board.

Members referred to the One Coventry approach which was highlighted by the partnership working and asked about the involvement of the Youth Offending Service. Attention was drawn to a second Violence Summit that was planned for January 2020.

**RESOLVED that:**

**(1) The Draft Coventry Youth Violence Prevention Strategy 2019-29 be endorsed.**

**(2) The progress to date on the draft strategy and the work already taken place on youth violence across the city be noted.**

19. **Draft Coventry and Warwickshire Strategic Five Year Health and Care Plan 2019/20 - 2023/24**

Professor Sir Chris Ham, Coventry and Warwickshire Health and Care Partnership presented the joint report on the draft Coventry and Warwickshire Strategic Five Year Health and Care Plan 2019/20 - 2023/24, a copy of which was set out at the appendix to the report. The draft Plan was submitted to the Board as part of the current engagement process.

The report indicated that Sustainability and Transformation Partnerships (STPs) and Integrated Care Systems (ICSs) were required to create five-year strategic plans covering the period 2019/20 – 2023/24, setting out how systems would deliver the commitments in the NHS Long Term Plan. The NHS Long Term Plan Implementation Framework sets out an expectation that STPs/ICSs would bring together member organisations and wider partners as they developed and delivered the plans. A key principle was that the plans should be locally owned. Local systems were required to share a draft of their plans with NHS England / NHS Improvement regional teams by 27 September 2019. The regional team had since provided feedback on this submission. There was now the opportunity for local engagement prior to submission of the final plan, by 15th November 2019.

The draft plan was informed by a focused engagement exercise undertaken with staff groups across the system (an on-line staff survey), as well as targeted engagement with patients and carers undertaken by Healthwatch. It also drew on engagement activity with a range of public and community groups conducted by the CCGs and local authorities. The understanding of population needs outlined in the draft plan was drawn directly from the local joint strategic needs assessments. The plan had been developed by the senior responsible officers for each of the

workstreams, with involvement from stakeholders across the system. Clinicians had been fully engaged in developing the plan and the supporting clinical planning templates.

The report referred to the current period of engagement on the draft Plan which commenced on 27 September and set out details of the engagement plan in place, which included opportunities for the plan to be considered and approved through formal governance arrangements within the NHS; formal and informal engagement with local authorities; and informal opportunities for awareness-raising and engagement on the content of the plan with key stakeholders, such as Healthwatch Coventry.

The Board noted the summary of the draft plan priorities as follows:

Prevention – Through a strategic and targeted approach to earlier intervention, we will make it easier for people to lead healthy lives and stay well for longer.

Population health – Focus on education, affordable and appropriate housing, stable employment, leisure opportunities and a healthy environment.

Primary care networks – Building on our ‘Out of Hospital’ programme by focussing on preventing ill health, supporting people to stay well and providing high quality care and treatment in the home.

Urgent and emergency care – Simplify our offer and deliver a fully integrated response so that the most appropriate care can be given as quickly as possible.

Mental health – Deliver a step change by focussing on prevention, early intervention, self-care, wellbeing and recovery. Services for children and young people are a particular priority.

Cancer – Identify more people at risk of cancer earlier and undertake more community-based screening. Treat patients more quickly.

Maternity and Children – Respond to the changing needs of women, babies, children and young people. Consider how to most effectively deliver better health outcomes, quality, and patient experience in the context of existing health inequalities.

Stroke – Implement a new agreed model of stroke care, ensuring best possible outcomes and patient experience.

Service improvement – Implement a number of system-wide schemes to remove waste and avoid duplication.

The Board noted that a number of NHS organisations represented on the Board were required to sign off the plan whilst other partners would be involved in its development and delivery. In order to give the Board an opportunity to formally comment on the plan, the Chair, Councillor Caan was requested to respond to the draft plan prior to the end of the engagement period.

Board Members raised a number of issues which included the role of NHS England in the process; how the productivity and efficiency savings would be achieved; the learning from local voluntary organisations who worked with disadvantaged residents; the importance of partnership working across the health and care sector including the involvement of local Ward Councillors; and an acknowledgment of the strong emphasis on prevention in the plan, which was a testament to the joined up work led by the Board.

Councillor Clifford, Chair of the Council's Health and Social Care Scrutiny Board (5) reported on his attendance that morning at the Coventry and Warwickshire Joint Health and Overview Scrutiny Committee who had also considered the draft Coventry and Warwickshire Strategic Five Year Health and Care Plan 2019/20 - 2023/24.

**RESOLVED that, having reviewed and commented on the draft Plan from the perspective of the wider health and wellbeing system:**

**(1) The process for developing and engaging on the draft Plan be noted.**

**(2) The Chair, Councillor Caan, to respond to the draft plan prior to the final submission.**

20. **Better Care Fund Plan 2019-2020**

The Board considered a report of Pete Fahy, Director of Adult Services, which sought approval for the Better Care Plan 2019/2020, which was a one year plan and an extension to the previous two year plan. It was a joint plan of the City Council and Coventry and Rugby Clinical Commissioning Group (CCG). A copy of the plan had been circulated to the Board.

The report indicated that the Better Care Fund (BCF) provided support to councils and NHS organisations to jointly plan and deliver local services. It had been in place since 2015, with the previous Coventry BCF Plan covering the period 2017-2019. Financially the Fund was managed via a Section 75 agreement between the City Council and Coventry and Rugby CCG and was hosted by the City Council. A key purpose of the fund was to maximise community services, to prevent older people from going into hospital and helping them move on quickly and safely following hospital admission, thus reducing cost and improving outcomes within the overall system.

The report provided a breakdown of the £107,175,924 total budget for 2019/20 which was all committed to existing areas of activity including City Councils older people community purchasing and the CCGs Out of Hospital contract. The resources also included the £13.8m iBCF grant resources that had previously only being confirmed until the end of 2019/20 and had now been confirmed for the following year. The Board noted that this represented a significant amount of existing Adult Social Care resources that remained at future risk, and if it the grant did not continue could lead to significant service reductions.

Reference was made to the national context with the NHS Long Term Plan being published by NHS England on 7 January 2019 which set out priorities for healthcare over the next 10 years and showed how the NHS funding settlement would be used. Integrated care systems were to be created across England by 2021, and Clinical Commissioning Groups were to be merged. Prevention was a key focus of the plan. From a social care perspective, the city council was an important part of the local health and social care economy and the changes in the local system would inevitably influence how the city council developed its services to support the people of the City.

The Better Care Fund had been extended a further year, 2019/2020 with a requirement to submit updated and extended plans for this year. As the guidance and policy was issued part way through the year, a much reduced plan was required based on completion of the standard template. Earlier years had required more significant plans. Plans would be subject to a national assurance process which would take place week commencing 18th November 2019. This timescale meant that the plan would only in theory be approved 4 months before it expired.

A requirement of the Plan was that it would be jointly developed and approved by the City Council and the CCG and the Coventry Health and Wellbeing Board. Approvals were received by the council and the CCG prior to submission to NHS England on 27 September 2019. The Board noted that good working relationships continued in Coventry, and so the organisations were on target to deliver the plan.

The Board acknowledged the difficulties associated with working with short term funding as opposed to being able to plan long term

**RESOLVED that, as per a condition of the Better Care Fund Plan, approval be given to the plan post submission to NHS England on 27<sup>th</sup> September 2019.**

## 21. **2019 Director of Public Health's Annual Report**

The Board considered a report and received a presentation of the Director of Public Health and Wellbeing concerning her Annual Report for 2019 'Bridging the Gap: Tackling Health Inequalities in Coventry, a Marmot City', a copy of which was set out at an appendix to the report. The report included recommendations for health and wellbeing partners across Coventry. The report was a statutory report produced each year. This year the report focused on health inequalities in Coventry; the determinants that contributed to these inequalities and the work being carried out to address them.

The report indicated that health inequalities were important because they had a significant impact on how long a person would live and the number of years they would live in good health. People in more affluent areas would live a longer life, with more years of good health, than people living in more deprived areas. In Coventry, this gap between groups could result in men in some areas of the city living on average 10.9 years less than people in better off areas. For women, the gap was 10 years. The gap in the number of years lived in good health was even bigger, with men in the most affluent areas experiencing 17 more years in good health than men in less affluent areas, and for women, the gap was 18 years. The Annual Report set out the reasons that these differences existed and how Coventry was working in a partnership approach, bringing together individuals, communities, organisations, businesses and universities, to reduce inequalities and improve health and wellbeing for all citizens.

The report highlighted Coventry's commitment to being a Marmot City since 2013, working in partnership with local organisations as well as the Institute of Health Equity and Public Health England to address health inequalities in the city. This approach had recently been evaluated and the key findings of the evaluation were detailed. The Marmot Steering Group members would be reviewing progress to



date and agreeing the future of the membership and how to progress action on the Marmot Review recommendations in October 2019.

The recommendations of the Annual Report were to:

1 - Review and revise the Marmot Action Plan taking account of the findings in the evaluation and considering how a One Coventry approach can help to embed partnership working and promote ownership of initiatives throughout organisations and community groups, and how using a place-based strategy as set out by Public Health England can facilitate effective action through civic, service and community interventions.

2 - Improve partnership-working with Place Directorate within Coventry City Council to ensure that public realm works and developments in the city take account of their potential impacts on health inequalities and use initiatives in a proactive way to reduce inequalities.

3 - Utilise community asset based approaches to improve health and wellbeing, maximising the legacy of City of Culture 2021.

4 - Ensure there are strong links with the Skills Board and Local Enterprise Partnership to promote skills development to enable Coventry citizens gain the necessary qualifications and skills to fill local jobs.

5 - Recognise and respond to barriers and challenges which may prevent people in some groups within Coventry from engaging with services which promote healthy lifestyles such as the 'Coventry on the Move' programme.

6 - Council and partners to embed an integrated early help offer which improves life chances for more vulnerable families.

7 - Evaluate the impact of the Year of Wellbeing and examine ways in which the Health and Wellbeing partnerships have raised the profile of health and wellbeing and maximise the legacy that can be achieved.

8 - Maximise the opportunities available with the NHS as a key partner, through implementation of the NHS Plan around prevention and health inequalities and the Coventry and Warwickshire Health and Care partnership.

9 - Mobilise the 2019-2023 Health and Wellbeing Strategy to ensure that the priorities are addressed, utilising the population health framework to underpin change.

The presentation provided an overview of the report highlighting how the report had looked at the impact of a range of environmental, societal, and life style factors, and explored what Coventry was doing to tackle health inequalities, looking at current and future opportunities. The presentation concluded with the recommendations, from this year's report. Members viewed a video produced in support of the Annual Report which provided examples of the project work currently being undertaken in the city in local communities to address inequality issues faced by local residents.

The Board discussed the importance of evaluation, including the evaluation of the European City of Sport and the Year of Wellbeing. Reference was made to the importance of having a joined-up approach to evaluation with clear aims and outcomes.

**RESOLVED that:**

**(1) The content and recommendations of the 2019 Director of Public Health's Annual Report be noted.**

**(2) The dissemination of the report be supported.**

**(3) The actions proposed be endorsed.**

**22. Coventry Safeguarding Adults Board Annual Report**

The Board considered a report of Rebekah Eaves, Safeguarding Board Manager, concerning the Coventry Safeguarding Adults Board Annual Report for 2018/19, a copy of which was set out at an appendix to the report. The Annual Report had also been submitted to the meeting of the Health and Social Care Scrutiny Board (5) on 11<sup>th</sup> September, 2019.

The Coventry Safeguarding Adults Board was a multi-agency partnership made up of a range of organisations that contributing towards safeguarding in Coventry. The Board was required to publish an annual report and business plan. The report summarised the key messages for the year and included the business plan which enabled the Board to plan upcoming work. The annual report was a key way of raising awareness of the issue of safeguarding adults.

The report indicated that each year the Council carried out approximately 300 safeguarding enquiries as a result of concerns. Concerns came from a variety of sources including professionals, the person themselves, and from family and friends of those who may be in need of care and support to keep themselves well and safe.

The 2018/19 referral rate showed no statistically significant peaks and troughs throughout the year but was, overall, slightly higher than the previous year. Roughly 15% of received referrals went on to become enquiries, slightly down from 17% in 2017. Approximately 83% of referrals across the year were processed within 2 days, meaning the majority of adults with care and support needs received a timely response to the referral. The main category of abuse for adults in Coventry was neglect, with physical and financial abuse the second and third most prevalent categories. Throughout the year, 10% of referrals were individuals already known to the Council. In 91% of the cases, the risk to the individual was either reduced or completely removed by the end of their safeguarding enquiry. In 7% of cases the risk was judged to remain and this related to adults with capacity making decisions that were risky for them but within their remit to make. Making safeguarding personal had been a key focus for Coventry partners across the year and formed the basis of the Adult Board's development day in March 2019. During 2018/19, the wishes of service users were either achieved or partially achieved in the majority of cases.

In conclusion, work with adults with care and support needs across Coventry in 2018/19 had been person centred and high achieving, as evidenced by the number of users who stated that their desired outcomes from the safeguarding process were met.

**RESOLVED that, having considered the content of the Coventry Safeguarding Adults Board Annual Report, the report be noted.**

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

There were no additional items of public business.

(Meeting closed at 3.30 pm)