

THANET HEALTH AND WELLBEING BOARD

Minutes of the meeting held on 28 July 2014 at 5.00 pm in the Council Chamber, Council Offices, Cecil Street, Margate, Kent.

Present: Dr Tony Martin (Chairman); Councillors Ailsa Ogilvie (Thanet Clinical Commissioning Group), Esme Chilton (Thanet Children's Board), Councillor Gibbens (Kent County Council), E Green (Thanet District Council), Madeline Homer (Thanet District Council) and Andrew Scott-Clark (Kent County Council)

52. APOLOGIES FOR ABSENCE

Apologies for absence were received from Hazel Carpenter (*for whom Ailsa Ogilvie was substituting*), Dominic Carter, Councillor Johnston, Mark Lobban and Sue McGonigal (*for whom Madeline Homer was substituting*).

53. DECLARATIONS OF INTERESTS

There were no declarations of interests.

54. MINUTES OF PREVIOUS MEETING

The minutes of the meeting held on 8 May 2014 were approved and signed by the Chairman.

55. PUBLIC HEALTH COMMISSIONING INTENTIONS

Andrew Scott-Clark presented his report, making particular reference to the work streams as set out in the diagram at paragraph 4.10 of the report. He stressed that getting commissioning right at a local level was of fundamental importance.

He added that conversations and meetings were taking place with NHS England to ensure that Public Health was ready to inherit the Health Visiting Commissioning Programme on 1 October 2015.

In response to a query from Esme Chilton regarding certain aspects of children's and young people's services, Andrew Scott-Clark stated that Karen Sharp, Head of Public Health Commissioning, would be responsible for ensuring that those bits of work were carried out.

It was noted that he and Hazel Carpenter would be meeting with Patrick Leeson, Corporate Director of Education, Learning Skills, KCC in order to fully understand the nature of work carried out by other service providers, particularly Kent Integrated Family Support (KIFSS) and Kent Integrated Adolescent Support Services (KIASS), and to enable greater alignment and integration of services to take place.

The report was NOTED and WELCOMED.

56. ASPIRATIONS FOR THANET

Andrew Scott-Clark reported that the only direct comment that he had received since the last meeting had been from Esme Chilton. In accordance with her request, safeguarding of children had been added as an aspiration.

In answer to a query from Councillor Gibbens, Andrew Scott-Clark stated that he believed that the aspiration to achieve a 5% reduction in smoking in pregnancy over the next five years was realistic and deliverable. He referred to the success of the "Baby Clear" initiative at the QEQM hospital, aligned with the cessation of smoking service.

It was RESOLVED:

1. THAT the aspirations, as set out at Annex 1 to the report, be APPROVED;
2. THAT the Board be provided with periodic dashboard reports setting out milestones in relation to each of the aspirations and progress achieved.

Andrew Scott-Clark stated that plans (*similar to that for Alcohol on the agenda for this meeting*) would be brought to the Board meeting in November 2014 and that detailed work would be carried out in relation to the aspirations for long term conditions.

NOTED.

57. ALCOHOL STRATEGY FOR THANET

Linda Smith, Public Health Specialist, presented the report and a series of slides (*now published on the website*).

She described what the 6-month project to deliver an Alcohol Integrated Care Pathway (ICP) would involve, particularly in relation to the roll out of IBA's (Identification and Brief Advice). Identification and Brief Advice (IBA) or 'screening and brief advice', has been shown to lead to 1 in 8 people reducing their drinking; IBA is one of the most effective health interventions available to reduce alcohol related harm.

She outlined the other key elements of the project:

- a) Understand current gaps in preventing and managing alcohol harm and dependence services in Thanet and South Kent Coast CCGs;
- b) Outline clearer integrated pathway across current services and propose solutions to any gaps;
- c) Ensure the pathway and new services are evidence based and realistic.

She highlighted the 4 key streams of the Alcohol ICP – *set out in Slide No. 10* – (1) Prevention of harm; (2) Screening and early ID; (3) Support and Risk Management; (4) Specialist Treatment and explained how different levels of information on each of those elements would be accessible by the wider workforce via an online system and mass population screening via IBA scratchcards.

She also made reference to the ICP Stakeholder meeting which would take place in Sandwich on 7 August 2014. She encouraged all present at the meeting to attend and to circulate as appropriate.

Andrew Scott-Clark pointed out that another important element of the ICP was having designated alcohol nurses at the QEQM hospital and referred to the need to involve the Thanet Community Safety Partnership in the implementation of the ICP.

He also suggested that Public Health intelligence might be of assistance to Thanet Council in relation to licensing matters - welcomed by Madeline Homer.

It was RESOLVED:

THAT the Board supports the Alcohol ICP for Thanet, including the Stakeholder event on 7 August 2014 and the setting up of a Task and Finish Group (including Thanet Community safety Partnership), to create a local alcohol action plan for Thanet to act upon the six pledge elements and seven High Impact Steps of the Kent Alcohol Strategy (2014-16).

58. FUNDING FOR THE SPORTS AGENDA

On behalf of Councillor Johnston, Madeline Homer asked if there were any pots of money available for activities associated with the sports agenda.

Andrew Scott-Clark stated that he would be willing to have discussions on funding for targeting inactive or obese children, families and adults. However, money would not be available for promoting sports activities for children who were already active and healthy.

He outlined the elements of funding in the KCC's model of care, as follows:

Tier 1 – preventative

Comprising:

- i. Health Walks: very popular, providing not only exercise, but also social benefits;
- ii. Community Chef: helping communities to understand the science around food; how to shop for fresh food etc;
- iii. Campaign around "Kent Moving"

Tier 2 – Support for obese children and adults

Encouraging people to change their lifestyle.

Tier 3 – Helping the morbidly obese

Trying to prevent the need for bariatric surgery.

Madeline Homer thanked Andrew Scott-Clark for this feedback.

In answer to a query from Dr Martin, Andrew explained that the objectives of geriatric gyms were the promotion of postural stability and the prevention of falls.

59. FEEDBACK ON "OUR CHILDREN, OUR FUTURE" WORKSHOP

As well as outlining the points covered in the report, Esme Chilton reported that:

1. Suitable persons had now been identified for appointment to the new Children's Board;
2. It was intended to hold Children's Board meetings four times a year and also to have sub task and finish groups; the inaugural meeting of the Children's Board was likely to take place either late September or early October.
3. It was proposed to align meetings of Children's Board with those of the Health & Wellbeing Board meeting, although it was still unclear whether to hold these in the lead-up to the parent meetings or as a follow-up.

The report and verbal update were NOTED.

60. UPDATE ON THE MENTAL HEALTH SUMMIT

Dr Andrew Walton referred to the successfulness of the summit, particularly in terms of bringing so many different stakeholders together. He said that he hoped that the CCG could find innovative ways to go forward.

During an ensuing discussion, it was noted that the integration of providers of mental health services, with each having an understanding of its “bit of the pathway”, was of primary importance.

It was further noted that, following the transfer of services from the NHS, Public Health had invested separately in mental health, recognising it as one of its key priorities.

In answer to a query from Councillor Elizabeth Green, Andrew Scott-Clark agreed that the “Task Force” for Margate should be rolled out across the district, particularly to encompass Ramsgate (Central Harbour; Eastcliff and Newington), the Villages and Birchington.

The report was NOTED.

61. UPDATE ON THE OVER 75S SUMMIT

Ailsa Ogilvie presented the report on behalf of Dr John Neden, who had sent his apologies for absence, commenting on the enthusiastic participation of attendees.

She referred to out of hospital work, which was currently on-going.

The report was NOTED.

62. AGENDA ITEM FOR NEXT MEETING - THURSDAY, 4 SEPTEMBER 2014, AT 9.45 AM

Dr Tony Martin outlined the purpose of this meeting – to provide reassurances in relation to the various plans, intentions and work streams.

It was AGREED that an alternative venue should be considered for this meeting.

Meeting concluded : 6.20 pm