

## THANET HEALTH AND WELLBEING BOARD

Minutes of the meeting held on 20 March 2014 at 10.00 am in the Council Chamber,  
Council Offices, Cecil Street, Margate, Kent.

**Present:** Dr Tony Martin, Clinical Chair, Thanet Clinical Commissioning Group (Chairman)  
Councillor Clive Hart, Leader of Thanet District Council (Vice-Chairman)  
Hazel Carpenter, Accountable Officer, Thanet Clinical Commissioning Group (Thanet CCG)  
Esme Chilton, Independent Chair of the Thanet's Children's Committee  
Councillor Iris Johnston, Cabinet Member for Community Services, Thanet District Council (TDC)  
Mark Lobban, Director of Strategic Commissioning, Kent County Council (KCC)  
Councillor Geoff Lymer, Kent County Council (*as substitute for Councillor Graham Gibbens*)  
Dr Sue McGonigal, Chief Executive, Thanet District Council  
Andrew Scott-Clark, Acting Director of Public Health, Kent County Council

**In Attendance:** Martyn Cassell, Community Safety & Leisure Manager, TDC  
Adrian Grant, Head of Integrated Commissioning, Thanet CCG  
Michelle Hagger, Associate / Vulnerable Children, Kent & Medway Commissioning Support (KMCS)  
Steve Inett, Chief Executive, Healthwatch Kent  
Mark Lemon, Strategic Business Advisor, KCC  
Margaret Mogentale, Commissioning Programme Manager, Thanet CCG  
Ailsa Ogilvie, Chief Operating Officer, Thanet CCG

### 34. APOLOGIES FOR ABSENCE

An apology was received from Councillor Gibbens, for whom Councillor Lymer was present as substitute.

### 35. MINUTES OF THE PREVIOUS MEETING

The minutes of the Board meeting held on 23 January 2014 were approved and signed by the Chairman, subject to the following changes:

- a) updating of titles of officers at Minute no. 23 [page 1]: as follows:
  - *Margaret Mogentale, Commissioning Programme Manager – TCCG*
  - *Gerald Bassett, Head of Commissioning Delivery - TCCG*
- b) replacing the 2<sup>nd</sup> and 3<sup>rd</sup> sentences of Minute no. 27 [page 1] with the following wording:

*"It was agreed that the current Chairman of the Local Children's Trust Board be appointed to the Thanet Health and Wellbeing Board and as Chairman of its Children's Sub-Committee."*

- c) Replacing the word, “Noted” at the end of Minute No. 29 [page 6, relating to, “Aspirations for Thanet”]

*“It was AGREED that a report would be brought to a future meeting of the Board”.*

Andrew Scott-Clark stated that a report on Aspirations for Thanet would be brought to the next Board meeting.

**36. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**37. TERMS OF REFERENCE FOR THE NEW CHILDREN'S SUB-COMMITTEE - UPDATE**

Esme Chilton said that she welcomed the opportunity of working with the Board as part of its new Children’s Sub-Committee. She believed that the Committee would receive the steer and remit it required from the Board and thereby make a positive impact on the health and wellbeing of the children of Thanet. At the present time, she was working with Hazel Carpenter, Accountable Officer, NHS Thanet Clinical Commissioning Group (CCG) and Andrew Scott-Clark, Director of Public Health Improvement, Kent County Council (KCC) with a view to putting together a strategic group of people to form the new Committee, which, it was envisaged, would meet around six times a year.

Discussion then took place, during which comments were made and information provided in response to questions, as follows:

- a) There was indeed great potential for the new committee to become the “local commissioning board” for children’s services in Thanet. Providing the correct governance arrangements were put in place, there was no reason why children’s services and teams of commissioners could not come together in an integrated manner to achieve integrated solutions wrapped around children in Thanet.
- b) However, there was a lot of work to be done, given how fragmented children’s services were at the present time, and it was important that the committee was set in the right direction from the outset.
- c) The Committee should be empowered to take decisions. KCC had provided steer as to which organisations should be represented and these included the schools, the CCG, various departments of KCC, the voluntary sector, housing and the district council. Proposals on who should be appointed were now being considered.
- d) The Committee should be ambitious and its membership dynamic, subject to review if, at any time in the future, the Committee decided to change direction.
- e) Thanet CCG would consider staffing to support the children’s agenda as part of their current wider staffing review, and discussions would take place between the CCG and KCC.
- f) The aspirations for children, as listed in previous Minute No. 29 of the Board, could clearly not be delivered by one organisation alone. However, the new Committee should be able to effectively oversee delivery.
- g) Engagement should also take place with Kent Healthwatch, the Chief Executive (*Steve Inett*) of which was in attendance at this meeting.

- h) The increased frequency of the meetings, as compared with those of the Local Children's Board, was to be welcomed, as impetus was invariably lost in between irregularly held meetings.
- i) An option might be to have a core strategic committee with broader-based sub-group(s) of persons / practitioners "working on the ground" reporting to the committee.
- j) In the USA, a "Dual Generation Strategy" was in place; this was orientated towards the welfare needs of young mothers, as well as the needs of children.

**38. BETTER CARE FUND (BCF) AND SECTION 256 UPDATE (KCC AND CCG)**

Adrian Grant, Head of Integrated Commissioning, NHS Thanet Clinical Commissioning Group, updated the Board on the position of the CCG's BCF Plan, which formed an integral part of the CCG's 5-year strategic and 2-year operational plans, as follows:

- a) The final BCF Plan had to be submitted by 4 April 2014.
- b) At a recent meeting of the Kent Health & Wellbeing Board, representatives of the various area CCGs in the county had spoken on their ambitions. Their draft submissions had now been collated to form part of the draft Kent submission;
- c) All of the latest draft Plans could be viewed on the KCC website.
- d) Feedback on the Kent Plan had been encouraging, with the Plan being recognised as one of the best in England;
- e) Although detailed work would be required during 2014/15 before the Plan could be properly rolled out in 2015/16, the Plan in its current form provided a good road map on where the CCG wanted to go;
- f) The Integrated Commissioning Group (ICG) for Thanet had now been re-established. At a recent meeting of the Group, it had been suggested that its membership should include a member of the Thanet Health & Wellbeing Board.

Mark Lobban, Director of Strategic Commissioning, Kent County Council provided the following update from a Kent-wide perspective:

- A. The draft Kent Plan was currently rated amber / nearly green;
- B. There were some gaps around public health and some metrics had still to be completed;
- C. The Plan was required to demonstrate how Section 256 funding (*from NHS England to local authorities for social care services*) would be protected and how it would "add value";
- D. All current S. 256 funding had been committed, and an extra allocation of £4m for the county would most likely be earmarked for new, innovative services.
- E. The Plan was required to be signed off by both NHS England and the Local Government Association.

Discussion took place on the issues referred to by Adrian Grant and Mark Lobban and also in relation to social care issues generally, with the following points being made:

- i. Discussions on Thanet ICG's suggestion regarding Thanet Health & Well Being Board representation could take place outside of the meeting;
- ii. It was difficult to see what aspirations were behind the jointly-owned plans for S.256 monies or what health benefits would arise from their spend;
- iii. Councillor Johnston said that although she was very grateful for the advice received from the Thanet CCG, resulting in an FOI request in relation to the level of care provided by a local care home, and also for the CCG's help in following up matters relating to maternity services, she was concerned that many families would have no recourse when faced with similar situations to those faced by the residents she and Councillor King had represented.
- iv. [In response to (iii) above] Hazel Carpenter referred to the programme of visits being undertaken by the Care Quality Commission.

### **39. CCG STRATEGIC PLAN (CCG)**

Ailsa Ogilvie, recently appointed Chief Operating Officer, Thanet Clinical Commissioning Group, presented a draft Strategic Plan for the CCG for 2014 to 2019, the emphasis of which, she said, was on collaboration, integration and the shifting from hospital to out-of-hospital solutions.

The following points were then raised by Board members:

- a) Was the ambition of sharing patients' medical records across the NHS now facing challenge?

Dr Tony Martin responded by stating that public concerns seemed to be more around the selling off of aggregated personal medical data for research purposes. However, the whole issue of data sharing had to be handled very carefully, and there was now a pioneer group at county level to review this.

- b) The Strategic Plan seemed to focus on "health" issues to the exclusion of "wellbeing" and "prevention", particularly for children.
- c) How would the Plan reflect reduction in health inequalities, a statutory responsibility of the CCG and local government?

Hazel Carpenter pointed out that what was being presented was the health element of the plan. The other issues referred to would become part of the delivery of the Plan.

### **40. UPDATE ON MENTAL HEALTH SUMMIT (CCG)**

Ailsa Ogilvie, Chief Operating Officer, apologised that the date for this event had changed.

She stated that the new date was

WEDNESDAY, 21 MAY 2014 (afternoon).

### **41. UPDATE ON FRAIL ELDERLY SUMMIT (CCG)**

Ailsa Ogilvie stated that this Summit would be held on

THURSDAY, 26 JUNE 2014.

42. **AGENDA ITEMS FOR NEXT MEETING - ON 8 MAY 2014**

It was NOTED that, apart revisiting any matters on this agenda, the next agenda would include:

1. **Aspirations for Thanet** - Andrew Scott-Clark (Minute No. 35 above refers)
2. **Funding for the sports agenda** (*suggested by Councillor Johnston*)
3. **Public Health: Programme and Performance and PH Commissioning Intentions** – Andrew Scott-Clark

Meeting concluded : 11.15 am