

# Bristol City Council

## Minutes of the Health and Wellbeing Board

25 October 2017 at 2.30 pm



**Board Members Present:** Marvin Rees, Dr Martin Jones (Chair), Alison Comley, John Readman, Asher Craig, Helen Holland, Elaine Flint, Steve Davies and Pippa Stables

**Officers in Attendance:-**

Claudette Campbell (Democratic Services Officer) and Nancy Rollason (Service Manager Legal)

### 1. Welcome, Introductions and Safety Information

Dr Martin Jones took the Chair and welcomed those present.

### 2. Apologies for Absence and Substitutions

Apologies were noted from;

- Keith Sinclair
- Cllr Helen Godwin
- Vicki Morris Substitute Morgan Daly
- Julia Ross Substitute Justine Rawlings
- Cllr Claire Hiscott

### 3. Declarations of Interest

None

### 4. Minutes of Previous Meeting

That the minutes of the meetings held on the 16<sup>th</sup> August and 14<sup>th</sup> September 2017 be confirmed as a correct record and signed by the Chair.

### 5. Public Forum



Cllr Brenda Massey spoke on behalf of the Bristol Members of the Joint Health Overview and Scrutiny Committee. The Statement was noted by the Board.

## **6. Key Decision - Healthy Weight Strategic Plan - Wendy Parker**

This item was withdrawn from the agenda

## **7. Welcoming Refugees and Asylum Seekers Strategy and Needs Assessment - Anne James, Commissioning Manager Refugees**

The Board received a report on Bristol A City of Sanctuary and the draft strategy to welcomes asylum seekers and refugees.

Anne James, Commissioning Manager –Refugees addressed the Board highlighting:

The Strategy 4 priorities as stated in the report:

- Making Bristol a safe place for people seeking sanctuary, and to create an environment in which they can feel welcomed and are able to integrate
- Ensure a wide range of city partners (businesses, voluntary sector groups, universities, health and other agencies) work together to make Bristol a City of Sanctuary.
- Promote mutual understanding between Bristolians and support an inclusive culture in which longer-standing communities feel able to understand and welcome refugees
- Strengthen the capacity of refugees and asylum seekers to develop the skills and access opportunities to support themselves and their families to lead fulfilling lives which contribute to the social and economic wealth of the city.

The following was noted from the discussion that followed:

- a. Dr Martin Jones welcomed the report and the opportunity it provided for all partners to look to an authority to lead on co-ordinating the many approaches taken by partners across the sector.
- b. John Readman noted that the structure described the governing body as a board suggesting that the term should be 'steering' The Refugee and Asylum Seeker Partnership Steering Group. He suggested the membership of the steering group should include representatives from as many as possible of the leading partnership Boards that operate across the city.
- c. Steve Davies shared that the improvements made in patient registration for primary care now enabled refugees and asylum seekers to obtain support locally and this had had a positive impact on A&E departments.
- d. Members agreed that the issue covered the wider sector and not just those who deliver services to refugees. The coordination of approaches would allow for the sharing of lesson learnt and best practices to be adopted going forward. The city wide Boards should be consulted on the contribution they are able to provide.

Resolved:



To Note the report and the information set out above.

## **8. Thrive Bristol - Victoria Bleazard, Mental Health and Social Inclusion Programme Manager**

The Board received the Report and a presentation from Victoria Bleazard, Mental Health and Social Inclusion Programme Manager.

The Board were asked to note the revised 10 year programme to improve the Mental Health and Wellbeing of Bristol residents with the focus on those with the greatest needs. The report outlined the proposed activities for year one 2018.

The following was noted from the discussion that followed:

- a. The Mayor suggested that the steering group must be driven by an authority able to influence and that should include AWP and others.
- b. John Readman reminded all that with shrinking funding the Board should enable services and programmes to connect. The focus of the communication about this programme should be the sharing of ideas and branding across all areas encouraging all to adopt the principles of the Thrive brand. Every effort should be made to ensure the steering group properly represents members of authorities/services that can absorb the Thrive programme.
- c. Elaine Flint, reminded all about the work already progressed by the Bristol Anti Stigma Alliance who had made great strides in this area.
- d. The Thrive programme was seen as an opportunity to align the different strands of work presently undertaken using the model to ensure all deliver parallel services.
- e. Morgan Daly, shared that Healthwatch were currently focusing on the mental health of University Students and would report outcomes of their activities to Victoria Bleazard.
- f. Dr Stables, advised that GP's were aware of the needs in this area, had already noted the gaps that service user's encounter. Work would continue with AWP and with this programme.

Resolved:

- i. To note the report and the information set out above.

## **9. Health Protection Annual Report - Thara Raj Consultant in Public Health**

The Board received the annual report from Thara Raj, Consultant in Public Health. The following was highlighted to the Board:

- The impact of diseases on the most vulnerable groups in the community who are often subject to multiple infections.
- The progress in the work with the homeless whose lifestyle results in an increase in infections; TB, hepatitis and those co-infected with HIV.



- Shared that a comprehensive audit was proposed with the aim of understanding the many communities in the city. How these communities are constituted; what support they are currently receiving; what would be the right support; to consider the support required to halt the progress of infection; then to move into considering and implementing actions.

The following comments were noted from the discussion;

- a. Dr Martin Jones confirmed that the report is presented to the governing body and used to inform actions and outputs.
- b. Dr Stables welcomed the opportunity to receive guidance on how to encourage those who refuse the flu jab.
- c. All were encouraged to contribute to the report by providing individual case studies to form a body of evidence for review and to aid progression of improved outcomes for service users.
- d. Elaine Flint, commented that support was required by health visitors, who continue to press the message about the benefits of child immunisation. This is an opportunity to share information practices and messages that work.

Resolved:

- i. To note the report and the information set out above.

## **10 Better Lives, Adult Social Care Transformation Programme**

The Board received a report of Stephen Best, Head of Service providing an introduction to the Better Lives programme. Due to time pressure an outline was provided and comments were limited.

- The programme has been developed to bring together the work in adult social care and partners across the wider health and social care system to achieve the following vision:
  - People can get the right level and type of support, at the right time to help prevent, reduce or delay the need for ongoing support, and to maximise people's independence.

The following comments were noted:

- a. Dr Stables requested details of the commencement of the pilot as the general view was that the current links were not working effectively.
- b. Justine Rawlings, requested that information was shared on the development on establishing the right alignments into the programme as it progresses.

Meeting ended at Time Not Specified

**CHAIR** \_\_\_\_\_



