

Bristol City Council

Minutes of the Health and Wellbeing Board

21 February 2018 at 2.30 pm



Board Members Present: Mayor Marvin Rees, Dr Martin Jones, Justine Rawlings, Julia Ross, Asher Craig, Helen Godwin, Vicki Morris, Elaine Flint, Keith Sinclair and Dr J Jensen

Officers in Attendance:-

Claudette Campbell (Democratic Services Officer)

1. Welcome, Introductions and Safety Information

The Mayor, took the Chair and welcomed all present and led introductions.

2. Apologies for Absence and Substitutions

The following apologies were given:

- Cllr Helen Holland
- Justine Mansfield
- Steve Davies
- Dr P Stables
- Alison Comley

3. Declarations of Interest

None

4. Minutes of Previous Meeting

The Board were asked to agree the minutes of the previous meeting.

Resolved: That the minutes of the meeting on the 25th October 2017 was confirmed as the correct record.



5. Public Forum

None

6. New Board, Framework and City Plan Discussion

Mayor Rees, welcomed the new board members and extended thanks to the outgoing members for their participation and valued contribution to the outcomes of the Board. He shared that he viewed the newly formatted board as a forum that will allow partners engaged in supporting the wellbeing of Bristol residents and those dealing with acute services to come together. That there currently existed many measures and boards across all partner organisations but in order for them to serve the City in a coherent manner a City Governance plan was needed. The One City Plan will provide this governance.

Sam Mongon, Programme Manager (Bristol Community Health CIC) was invited to give an overview of the 'HWB Review & draft Governance Framework'.

- Clarity was sought on the replacement of the GP's with a new primary care representative.

Assurances were given that at the conclusion of the CCG review that someone would be proposed.

Victoria Bleazard, Bristol Public Health & City Office, Programme Manager provided an overview of the objectives of the City Plan highlighting the work to be done on the 19th March 2018. The One City Plan is intentional in its aspiration to define how the City should be described. The plan would direct others, other authorities or bodies or developers, how they should view the City's aspiration.

New Board members shared their organisation future plans, visions & aspirations. In addition input was welcomed on the key priorities of the City Plan that aligned with the Boards.

The following was noted from the discussion that followed:

- a. Cllr Godwin welcomed the new members acknowledging the enhanced added value to the Board's influence that will result from partnership working. The work that is required for the City wellbeing is best done by all partner agencies together with the City Council.
- b. Jacqui Jenson drew member's attention to the plight of children living in deprivation and the impact that this had on their lives as older children and then adults. Proposing that this should be an issue that crossed all agencies service provision and should be a priority of the One City Plan.
- c. Julia Ross considered the uniqueness of the Board in focussing on health of people and their wellbeing impacting the wider determinants of health; consideration to be given to the whole area of prevention and supporting a healthy City; and to family and children in those family's growing up healthy and well; the issue of older people and social isolation; vulnerable people and how we delivery to support and encourage people to be less dependent; proposed that the police authority should have a representative on the Board; the health of our population should be the focus.
- d. Mayor Rees, supported the above suggesting that the health and wellbeing of partner agencies workforce should be included.



- e. Cllr Craig was encouraged by the opportunity for all partners to meet to consider our joint responsibility for a healthier population.
- f. Vicki Morris welcomed the new format. Drew everyone's attention to the plight of young people and the opportunity to adopt a sustainable and targeted approach to their wellbeing.

Resolved to agree the Recommendation

- i. That the following would join the Board.
 - Chief Officer of Avon & Wiltshire Partnership NHS Trust
 - Chief Officer of Bristol Community Health CIC
 - Chief Officer of North Bristol NHS Foundation Trust
 - Chief Officer of University Hospitals Bristol NHS Foundation Trust
 - Representative GP of CCG
- ii. The following would be stood down, with thanks for their contribution.
 - Representative of GP Consortia Inner City & East
 - Representative of GP Consortia North and West
 - Representative of GP Consortia South
- iii. That the Board would adopt the Governance Framework.
- iv. That the Board would seek to establish new ways of working.

7. Bristol Safeguarding Adults Board Annual Report 2016-17

Louise Lawton, Independent Chair of the Bristol Safeguarding Adults Board addressed the Board referencing the report but particularly directing members to consider the asks listed in the Recommendations and for those recommendations to be endorsed and actioned.

All were reminded that the report was published in the Summer of 2017 and now presented to the new formatted Board for maximum input.

Recommendations:

1. HWB responds to issues raised by the BSAB Chair following the 2015-2016 Annual Report that mental health consultation support for accommodation and care providers should be commissioned as this is yet to be resolved
2. HWB establishes a shared data dashboard with BSAB about the effectiveness of provision of mental health services to improve scrutiny, consistency and shared drive
3. HWB reports to the BSAB on their plans to improve safeguarding within mental health services in the city
4. HWB JSNA to include scrutiny of the impact of neglect and acts of omission for adults with care and support needs



5. HWB to work with the other city partnerships through the partnership chairs group to develop clearer escalation and governance processes at this time of change

Following were noted from the discussion:

Recommendation 1

- a. That there had been a total of 4 murders of vulnerable people in shared accommodation
- b. Cllr Craig confirmed that the city were aware and work was almost concluded on a number of strategies that would be shared shortly.
- c. Julia Ross noted this as a co-commissioning issue and that conversations would happen with partners.
- d. ACTION: Jacqui Jensen confirmed that Terry Dafter would action this recommendation.

Recommendation 2

- e. The Chair expressed concern over the length of time it had taken for a mental health pathway review to be completed and believed that a shared Dashboard would support, the progression of actions and give pace to all areas of work.
- f. Julia Ross, agreed that all services should be held to account; questioned whether the HWB was the correct forum for some information sharing; accepted the challenge by the BSAB on actions outstanding from the CCG on a specific piece of work around s136 duty; confirmed that the work was nearing completion. Provided reassurance that a response was pending.
- g. A question was asked on the makeup of the Board as to whether membership representation was correct.
- h. The Chair confirmed that there were no gaps in the board membership and a public register of attendance was kept and shared. That those who failed to attend/participate were noted and follow up action taken when necessary. ACTION: Information can be shared on request to the HWB.

Recommendation 3

- i. The HWB had now adopted Mental Health has one of its key priorities.

Recommendation 4

- j. The Board agreed that it would continue work on this area.

Recommendation 5

- k. The BSAB was keen to work together with all partners at a time, had the awareness that all services areas were working with constrained budgets. The 'ask' from BSAB to HWB was for a 'safeguarding lens' to be applied to all areas of HWB's remit, which in turn would positively impact the safety of the people of Bristol.



Mayor Rees, thanked the Chair for the work of the BSAB and confirm work would continue to ensure that strategic plans dovetailed with the work of the BSAB. He propose that BSAB provide the Board with their 3 year plan to enable partners to identify the 'ask' from their individual sectors.

Resolved:

- I. To endorse the BSAB annual report**
- II. To adopt the 5 recommendations**

8. Bristol Safeguarding Children Board Annual Report 2016-17

Sally Lewis, Independent Chair of the Bristol Safeguarding Children Board addressed the Board on the Annual report for 2016-17.

The Board were reminded:

- That the LA key responsibilities to this area was about to change
- That the requirement for the BSCB in its current format, would be abolished
- The duty to safeguard children is to be shared jointly with the CCG; Police; Local Authority
- That the three authorities must now decide how this area would be managed
- The timeline for adoption of this duty, was 15 months from May 2018; to include 12 months to plan and 3 months to implement
- That the report listed the 'ask' of the Board along the lines of the recommendation as outlined by BSAB Chair.

Mayor Rees, thanked the Chair for the report and bringing the above changes to its attention. Proposed, that the Chair identified the actions required from the Board to support delivery of these changes.

Elaine Flint requested that BSCB share information with VOSCUR to aid understanding and to allow positive contribution.

Mayor Rees, proposed that the Recommendations be adopted by the Board:

Resolved:

- The Board agreed to adopt the 5 recommendations

9. Bristol Pharmaceutical Needs Assessment 2018

Barbara Coleman, Programme Manager Public Health, Bristol City Council presented to the Board the Bristol Pharmaceutical Needs Assessment for approval.

The Health & Wellbeing Board has a legal obligation to produce a Pharmaceutical Needs Assessment (PNA) at intervals of no less than every 3 years. It must produce a revised assessment or supplementary



statement after notification of significant changes to the availability of pharmaceutical services since the publication of its PNA. The PNA must be published no later than 1st April 2018

The Bristol PNA Steering Group did not perceive there were any gaps in services, however they did come up with a number of recommendations to address some of the concerns raised. These were:-

- **Increase awareness of how to find out about opening hours.** All local healthcare commissioners and providers are asked to help publicise and use sources of information on 'where to find information on your nearest pharmacy and opening hours' e.g. through NHS Choices and the 111 service. This includes asking frontline healthcare staff to advise patients needing immediate access to a dispensing service out of hours.
- **Make reasonable adjustments to address specific needs.** Avon Local Pharmaceutical Committee is asked to publicise the findings of this PNA to local pharmacists, specifically the need for information to be provided in formats that are useful for people with hearing impairments and people with language barriers. The use of hearing loops for example might be appropriate.

The Mayor on behalf of the Board thanked the team for the completion of this work and moved for approval of the PNA.

Resolved that:

- I. **That the PNA was Approved for publication.**

10 Joint Strategic Needs Assessment (JSNA) Equalities Data

Mark Wakefield, Bristol City Council Service Manager: Performance & Information & Intelligence presented the report on the Joint Strategic Needs Assessment (JSNA) Equalities Data sub group. The sub group were tasked with delivering improved availability and use of equalities data for use in the JSNA and planning and commissioning decisions.

A data audit conducted by this working group identified and classified data and products as follows:

- where data on personal characteristics is available and should be analysed as a matter of course in future JSNA data products
- where service breakdowns and equalities reports already exist and should be appropriately included in the JSNA
- where data is not available, either through lack of recording mechanisms in IT systems, or through missed opportunities to capture it at contact points with citizens

Whilst the first two can progress within the data community to establish standard definitions and formats, the third, focussing on fundamental data problems will need further guidance from the HWB and constituent organisations.



The following was noted from the discussion that followed:

- a. Clarification was sought on the principles of the Diamond Cluster; which is a set of recommendations on categorisation of equalities data which were proposed as a possible driver of better recording practice for partners.
- b. Cllr Craig supported this work commenting that there was a need for consistency across partners on the data collected which in turn would benefit the delivery of services.
- c. A question was raised on the quality of disability data collected and how this was to be improved.
- d. Elaine Flint, had noted in her work with the Bristol Mental health sub group the need to have data to properly identify service users and the necessity for this data to be as comprehensive as possible to enable sharing of outcomes from the work.
- e. Julia Clark shared that there exists the intent to collect data on protected characteristics but often front line staff found it hard to collect this data from service users due to pressure of work and/or whether it is appropriate to approach. Suggested collective thought to be given to determine at what point during the contact data should be collected and to avoid missed opportunities.
- f. Vicki Morris noted that the improvement in the use of digital technology could facilitate capturing data from service users.
- g. Robert Woolley confirmed that Healthier Together transformation programme included work on the use of the digital platform to capture data. As an action he would take this away and ensure that this team link into this JSNA work. **Action: Mark Wakefield to be provided with details of the programme lead.**
- h. Mayor Rees, supported the aspiration to ensure that there was a single source of truth stating that JSNA work was useful to all partners. **Action: He proposed that all partners agree that the identified key personal working in their team meet together with the programme team from Healthier Together with Mark Wakefield as Lead.**
- i. The Board agreed this as a way forward requesting that information on the principles of Diamond Cluster was shared with the Board members. **Action: Mark Wakefield.**
- j. Mayor further requested that the work was brought back to the next meeting.

Resolved:

- i. **That the Board would endorse the work done.**
- ii. **That the outcomes of the work from the agreed actions return to the Board for further consideration.**

Meeting ended at 4.30 pm

CHAIR _____



