

## **Minutes of the Health and Wellbeing Board**

**17 July 2013**

**-: Present :-**

Councillor Chris Lewis (Chairman)

Debbie Stark, Richard Williams, Councillor Ken Pritchard, Councillor Bobbie Davies,  
Councillor Mike Morey, Pat Harris, Julie Foster and Steve Wallwork

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### **18. Apologies**

Apologies for absence were received from Councillor Scouler, Steve Moore (NHS England), Caroline Taylor who was represented by Julie Foster, and Sam Barrell who was represented by Steve Wallwork.

### **19. Minutes**

The Minutes of the meeting of the Health and Wellbeing Board held on 23 May 2013 were confirmed as a correct record subject to Councillor Davies attendance being recorded.

### **20. Urgent items**

The Board considered the item in Minute 29, and not included on the agenda, the Chairman being of the opinion that the item was urgent by reason of special circumstances i.e. the matter having arisen since the agenda was prepared and it was unreasonable to delay a decision until the next meeting.

### **21. Update Report - Adult Social Services**

The Board noted the update on Adult Services.

### **22. Update Report - Clinical Commissioning Group**

Members noted the update from the Clinical Commissioning Group and were advised that the project to connect clinicians with e-Prescribing had received funding in the region of £3.1 million. Work on the project was already underway and would be concluded in two years.

**23. Update Report - Public Health**

The Board noted the update on Public Health and were advised that following the consideration of the Joint Health and Wellbeing Strategy – Priority 15 Improve Care for People Living with Dementia and their Carers an application was made to Public Health England for support from their System Leadership – Local Vision Programme in order to progress work around a ‘Dementia Aware Torbay’. Over the summer officers will be working with Public Health England, Clinical Commissioning Group, Torbay Healthwatch and local people to develop a project plan.

**24. Update Report - Healthwatch**

Members noted the update from Healthwatch. Members attention was drawn to the need for better communication between partners as there was already evidence of duplication between stakeholders.

By consensus, Members agreed for Debbie Stark to raise with the Senior Leadership Team the issue of communication and duplication with stakeholders.

**25. Update Report - Children's Services**

The Board noted the update on Children’s Services and the spike in referral activity. Members were advised that Torbay was not alone in an increase of referral activity with partners experiencing a similar issue.

Members were informed of work that had been undertaken to refocus and restructure the Children’s Partnership Improvement Plan with emphasis being removed from early intervention to a more targeted approach.

**26. The Preventative Community Project (Community HUB)**

Members received an overview of the activities being undertaken by the Preventative Project/Community HUB pilot in the Hele and Watcombe communities. Members were advised that the original vision of Preventative Community Project was based upon the idea of a community preventative multi-agency team.

With the planned increase in health visiting numbers in Torbay the opportunity had arisen to develop a preventative community model in partnership with Children’s Services that helps increase community capacity and social capital to ensure sustainable support from the community.

**Resolved:**

That the activities being undertaken by the Preventative Community Project/Community HUB pilot in the Hele and Watcombe communities be noted.

**27. Adult Learning Disability Services (including Winterbourne View Action Plan)**

The Board were provided with an update in respect of the implementation of the Winterbourne Action Plan. Following the Winterbourne View Hospital Serious Case Review the Department of Health published 'Concordat: Programme for Action'. The document was signed by many Health and Social Care agencies, committing to a programme of change to transform health and care services and to improve the quality of care offered to children, young people and adults with learning disabilities or autism, to ensure better outcomes for them.

Members were advised that the local Winterbourne View task and finish group met on 12 April 2013 following the publication of the Concordat, the group discussed the existing Winterbourne View action plan which was based upon interpretation of the Serious Case Review when it was first published, the action plan was refreshed to ensure that there was a real focus on the major issues outlined in the Concordat.

The Board noted that all Torbay clients currently placed in in-patient facilities have had their personalised care plan reviewed.

**Resolved:**

- (i) That the report and recommendations for on-going monitoring and review be noted; and
- (ii) that a further report regarding the assessment as to whether pooled budgets would support the pace of progress be presented to the Health and Wellbeing Board on 19 September 2013.

**28. Joint Health and Wellbeing Strategy Priority 8 - Reduce Alcohol Consumption**

As part of its agreed approach, the Board gave consideration to one of its priorities within the Joint Health and Wellbeing Strategy, namely Priority 8: Reduce Alcohol Consumption. Representatives from the Public Health Team and Healthwatch presented statistical analysis, research and details of work that was currently underway to address alcohol misuse.

Members of the Board then discussed how the Health and Wellbeing Board could "broaden and lengthen" the whole-community approach to the reduction of alcohol consumption. In particular, members were asked to pay particular attention to whether the actions within the Joint Health and Wellbeing Strategy were the right ones, what needed to change locally to meet the outcomes required by the Board, and what could the Board do to promote integrated working to support this priority.

Members were advised that there was an upward trend for alcohol consumption with alcohol being cheaper to purchase than in 1980 and the location of consumption of alcohol changing from licensed premises to people's homes. It is believed that the shift from consumption of alcohol in licensed premises to the home is the likely driver of the marked increase in alcohol morbidity and mortality amongst 'sensible' drinkers.

The measurement for alcohol reliance is subjective therefore statistical data is reliant upon hospital admittance. Over a period of three years Torbay registered 3,800 alcohol related admissions, 1,200 of these were alcohol specific admissions with 2,600 being alcohol related admissions such as trips and falls. Irresponsible drinkers are stereotypically portrayed as young people however analysis has shown that middle aged professionals who think they drink responsibly are the most irresponsible drinkers.

Members were advised that the Clinical Commissioning Group had developed a screening programme of healthchecks. A number of different organisations were trained to undertake the healthchecks including street wardens, street pastors and Job Centre Plus. Members suggested that the healthchecks target two particular wards, a deprived ward and an affluent ward to see if there is a correlation between alcohol consumption and deprivation.

Doug Anderson, ambassador for Healthwatch informed members of a new group called 'Torbay Recovery Information Project' (TRIP). TRIP was established by people in recovery who want to help others. Debbie Stark offered assistance and support from the Public Health Team.

The Board were advised that Health and Wellbeing Boards across the peninsula had the reduction of alcohol consumption as one of their priorities. Therefore it was suggested that a peninsula alliance be formed that would share work to address alcohol consumption across the peninsula. Members were requested to involve service users whenever possible.

#### **29. Section 256 Social Care Funding for Health Benefit - Allocation and Monitoring**

Members considered a report that sought the approval of the Health and Wellbeing Board on the allocation of Section 256 funding for projects within the financial year 2013/14.

Members were advised that under Section 256 of the NHS Act 2006, the Department of Health makes available, through NHS England, funding to support adult social care which also has a health benefit. NHS England provides flexibility for local areas to determine how this investment in social care services is best used.

#### **Resolved:**

That, taking account of Torbay's Joint Strategic Needs Assessment, the funding allocations, outcomes and monitoring arrangements in relation to Section 256 monies be agreed.

#### **30. Information Pack**

The information pack was noted.