

PUBLIC Minutes of the meeting of the Health and Wellbeing Board held 7th January 2016 at 2.00 pm

Present: Councillors Barbara Rice (Chair), Brian Little, Bukky Okunade and Joy Redsell

Mandy Ansell, Acting Interim Accountable Officer Thurrock CCG
Lesley Buckland, Lay Member, Thurrock CCG
Graham Carey, Chair of Thurrock Adults Safeguarding Board
Jane Foster- Taylor, Executive Nurse NHS CCG
Roger Harris, Director of Adults, Health and Commissioning
Kristina Jackson, Chief Executive, Thurrock CVS
Kim James, Chief Operating Officer, Thurrock Healthwatch
Carmel Littleton, Director of Children's Services
Malcolm McCann, South Essex Partnership Foundation Trust
David Peplow, Chair of Local Safeguarding Children's Board
Tania Sitch, Integrated Care Director Thurrock, NELFT

Apologies: Councillor John Kent, Leader of the Council
Dr Anjan Bose, Clinical Representative, Thurrock CCG
Chief Superintendent Sean O'Callahan, Chair of Thurrock Community Safety Partnership
Clare Panniker, Chief Executive, Basildon & Thurrock University Hospital
Andrew Pike, Director of Commissioning Operations, NHS England Essex and East Anglia
Ian Wake, Director of Public Health

In attendance: Ceri Armstrong, Strategy Officer
Louisa Moss, Housing Enforcement Manager (Item 6)
Tim Rignall, Economic Development Manager (Item 5)
Catherine Wilson, Strategic Lead (Item 7)

Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

2. Minutes

The minutes of the Health and Wellbeing Board, held on 12th November 2015, were approved as a correct record, with an amendment to Page 9 to add that Kristina Jackson stated that Healthwatch had collated the data about unmet need, which Ian Wake confirmed could be added to the data portal.

3. Declaration of Interests

There were no declarations of interests stated.

4. ITEM IN FOCUS – Health & Wellbeing Strategy 2016- 2019

The Board conducted a workshop on the Health and Wellbeing Strategy and Strategy Outcomes Framework. Members of the Health and Wellbeing Strategy Steering Group were also in attendance.

The results of the workshop would be made available to those who attended and would help to develop further iterations of the Strategy and Outcomes Framework.

5. Economic Development Strategy Refresh

Tim Rignall, Economic Development Manager outlined the rationale for the refresh of the Economic Development Strategy.

Tim stated that in November 2008 Thurrock Council had adopted the Thurrock Economic Development Strategy as the key guidance document for economic growth and jobs-led regeneration in Thurrock which included the creation of 26,000 jobs by 2021. Jobs created would cover a variety of different sectors to broaden the economic base in Thurrock to make the Borough more resilient through downturns in the economy.

Tim stated that much had happened since 2008 – for example London Gateway and Thames Enterprise Park. Now was the right time to take stock and refresh and refocus the Economic Development Strategy. Tim highlighted that in the last 5 years considerable achievements have been made in educational attainment and even through the downturn 5,000 additional jobs were created. The rate of business growth in Thurrock is growing faster than anywhere else in the Country including London.

Tim stated that even though achievements have been made there are still challenges that remain due to investments that have not come to fruition as of yet such as Lakeside. There are still some challenges around skills and education with the adult population who have none or a limited number of qualifications.

The Economic Development Strategy will be presented at the Cabinet Meeting on the 10th February.

The Chair stated that the improvement in Thurrock has been phenomenal with regard to the growth in jobs but on that Thurrock was still at a low base in relation to the living wage and skill base required to access the new jobs. Cllr Rice stated that Government schemes for training and development are available but that people needed to be made aware of their existence.

Cllr Rice congratulated Carmel Littleton on the success of educational attainment in Thurrock with it being the fastest rate of improvement in the Country. Carmel was thanked for her commitment to the Health and Wellbeing Board as this was her last meeting.

Cllr Okunade stated that creating 26,000 jobs was positive, but queried whether we have identified the sectors to prepare our children in schools with the knowledge and skills to be able to have the right qualifications to be able to capitalise on the jobs being created. Tim responded stating that the skills base is a big issue at the moment, especially in the social care sector but generally the biggest issue that businesses are facing is not about skills but about the number of people in Thurrock that take up the jobs being created.

Tim Rignall stated that there are two issues being faced. The first one being the talent pool that we have at our disposal now with people who are under-employed or unemployed and what we can do to train and up-skill those people to capitalise on the opportunities that are being created. The second one is the longer term issue in what we can do with the children and young people coming through the education system today to enable them to have the variety of skills needed for employment in the future.

Malcolm McCann stated that the report makes reference to the significant development of new homes and wondered how that was progressing and asked what percentage of those homes are classed as social housing. The problem facing our locality is recruitment and retention and affordable housing. Tim stated that he will provide the exact percentage of social housing after the meeting to Ceri Armstrong to feedback to the Board.

Cllr Redsell posed the question of whether we are looking at alternative methods for building houses, with new materials and designs. Roger Harris responded stating that initiatives are in place such as HAPPI Homes with designs that are future-proofed for our elderly residents.

It was agreed that the views of the Board would be fed in to the development of the final Economic Growth Strategy and that any further comments on the Strategy should be given to Ceri Armstrong.

RESOLVED:

- 1.1 The Health & Wellbeing Board note this report**
- 1.2 The views of the Health & Wellbeing Board are taken forward in the Economic Development Strategy.**

6. Well Homes Project

Louisa Moss, Housing Enforcement Manager updated the board on the Well Homes Project.

The Well Homes Project is a prevention project that targets homes likely to be vulnerable to identify and reduce hazards in the home and improving access to health services. In December a survey was conducted and 83% of clients who have had a Well Homes assessment stated they feel healthier and safer at home as a result. This project puts Thurrock in a good position as the Care Act states that the suitability of someone's living accommodation is one aspect of the wellbeing duty. Louisa Moss provided the Board with a case study regarding a client of the Well Homes Project to demonstrate the Project's impact. The client stated that he felt secure and safe in his own home and that the Well Homes advisor was very patient and talked through his health problems.

Louisa stated that this project is very small with one Well Homes Advisor who has working relationships with many other partners such as Public Health, Home Improvement Agency, Essex Fire service, Thurrock Lifestyle solutions and local energy providers, contractors, electricians and builders.

To date the Well Homes Project has reached 1739 people and carried out 653 Well Homes assessments. The assessments are targeted to ensure maximum impact – e.g. homes with people who are most likely to be at risk.

The Chair posed a few questions asking where the project sits in relation to Local Area Coordination and whether there is any overlap. Louisa responded stating that there is interaction with the LACs with shared learning and with the Well Homes Advisor attending the regular LAC team meetings where they cross reference with one another. This project has seen an equal spread of referrals to both services.

Graham Carey commented on their only being one advisor carrying out assessments to over 650 homes. The residents that are shown are probably people living on their own and it may be worth picking up issues in relation to isolation and loneliness and whether any referrals have been made to adult safeguarding. Louisa stated that the Well Homes Advisor has been trained in relation to adult safeguarding. Louisa further stated that even though the Well Homes index was refreshed to support the group of the population aged 65 and over, the predominant age of people seen is between 19-59.

Malcolm McCann stated that he feels this project is excellent but given the challenges of funding and the expansion of the project could the visits that are being undertaken be conducted by a trained volunteer or do they require a level of expertise. Louisa stated that it was possible the role could be undertaken by a trained volunteer and will consider this for the future.

Cllr Redsell echoed Malcolm's suggestion and posed the question whether school children could be a part of this process. Louisa stated that there has not been a great deal of involvement with schools to date and with one

advisor this has not been possible, but with future plans this could be looked at.

Roger Harris added that Public Health will be funding the project for a further year (16/17) but we will need to look in future years about how it works with the Local Area Coordinators and other options with volunteers without losing the housing expertise that this post has given a focus to - which has given a different dimension to that of the LAC service.

RESOLVED:

- 1.1 The Health & Wellbeing Board note the ongoing progress made by the Well Homes Project.**
- 1.2 The Health & Wellbeing Board agree for the Well Homes Project to explore ways of finding ways of sustaining the project beyond the funding period (15-17) and to be an integral part of any new social care 'prevention' delivery programmes and exploring alternative ways of working.**

7. Learning Disability Services: Transforming Care Partnerships

Catherine Wilson, Strategic Lead for Commissioning and Procurement updated the Board on the Transforming Care Programme and the partnership that was established.

In February 2015, NHS England alongside the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS) committed to a national programme of change for Learning Disability services – for both health and social care. This announcement forms the continued response to the abuse that took place at Winterbourne View.

The latest document published by ADASS and NHSE called Building the Right to Support sets out the expected outcomes and changes to be implemented and delivered nationally and regionally. The overarching outcomes that the transformation is expected to achieve are:

- Reduced reliance on inpatient services (closing hospital services and strengthening support in the community);
- Improved quality of life for people in inpatient and community settings; and
- Improved quality of care for people in inpatient and community settings.

Catherine stated that the document sets out helpful guidance for both CCGs and Local Authorities about how services can be better commissioned and how processes can be better aligned to inpatient and community learning disability services. It also gives insight into not just specialist services but

being able to make reasonable adjustments to mainstream services to deliver health and social care for people with learning disabilities.

Catherine stated that work had already begun across Essex, Thurrock and Southend and the 7 CCGs and 3 Local Authorities have formed a board to work together on how services for people with disabilities might be commissioned differently.

The document itself gives an outline about how to create a Transforming Care Partnership and it describes what those partnerships will be throughout the Country. The partnership was established on the 15th December 2015.

The next strand of work will be to review commissioning and contracting processes within the local authorities and CCGs. The document has set the task of producing an implementation plan about how services might be better commissioned and how we will work together more productively to support people in the community to reduce the need for inpatient assessment and treatment. The plan needs to be in first draft by the 8th February 2016.

Kim James posed questions on behalf of the voluntary sector. Kim stated that as this is an Essex wide piece, it would be important to ensure that Thurrock work already carried out is not lost.

Kim stated that the Disability Partnership Board was disappointed that this piece of work had not been presented to them and queried when they will have sight of it.

Kristina Jackson stated that on page 92 of the report it mentions charity bonds which raised £11m and queried whether this is what is going to be expected for homes in Thurrock. The Government are only offering £15m capital over three years which is not much and wondered how this will work for local residents in Thurrock. Roger Harris stated that the funding will be a challenge at there is a lot of pressure to address the immediate issues of moving people out of the hospital with conversations taking place with the CCG of the best method to that.

Catherine stated that she acknowledges the issue regarding the disability partnership board not having had sight of this piece of work. The plan is to have a number of workshops and to be very inclusive of all people and groups.

RESOLVED:

- 1.1 The Health & Wellbeing Board note the Transformation Care Programme and the local response.**
- 1.2 The Health & Wellbeing Board is aware that the Transforming Care partnership was established on the 15th December 2015.**

- 1.3 The Health & Wellbeing Board receives back the full implementation plan.**
- 1.4 The Transforming Care Partnership piece to be presented to the Disability Partnership Board.**

8. Work Programme

Roger Harris reminded board members about the Special Health and Wellbeing Board scheduled for the 11th February to sign off the Better care Fund Section 75 agreement and to final Health and Wellbeing Board Strategy.

The Chair stated that the March Health and Wellbeing Board will focus on planning for the future year and receive input from Board members on what the Board's forward plan should consist of and how it should operate.

The meeting finished at 4.03 pm.

Approved as a true and correct record

CHAIR

DATE

**Any queries regarding these Minutes, please contact
Democratic Services at**