



**4.00pm 11 July 2017**  
**Council Chamber, Hove Town Hall, Norton Road, Hove, BN3 4AH**

### **Minutes**

**Present:** Councillors Yates (Chair), Barford, Taylor (Opposition Spokesperson) and Page (Group Spokesperson) Adam Doyle, Dr. George Mack; Dr. Manas Sikdar, Dr. David Supple, Clinical Commissioning Group.

**Other Members present:** David Liley Health Watch, Graham Bartlett, Pennie Ford, NHS England, Pinaki Ghoshal, Statutory Director of Children's Services Rob Persey, Statutory Director for Adult Care, Peter Wilkinson Acting Director of Public Health.

**Also in attendance:**

**Apologies:**

### **Part One**

#### **10 DECLARATIONS OF SUBSTITUTES AND INTERESTS AND EXCLUSIONS**

10.1 Councillor Miller declared that he was attending the meeting as a substitute for Councillor Barnett.

#### **11 MINUTES**

11.1 The minutes of the last meeting held on the 13<sup>th</sup> June, 2017 were agreed as a correct record and signed by the Chair.

#### **12 CHAIR'S COMMUNICATIONS**

#### **13 FORMAL PUBLIC INVOLVEMENT**

13.1 The Chair noted that there were no public items to be considered at the meeting.

#### **14 CARING TOGETHER - JULY UPDATE**

14.1 The Chair suggested that Items 14 and 15 should be taken together and invited Dr. Supple to update the Board and introduce the report listed under Item 15 on the agenda.

14.2 **RESOLVED:** That the information be noted.

#### **15 BRIGHTON & HOVE CARING TOGETHER: COMMUNICATION AND ENGAGEMENT STRATEGY**

15.1 Dr. Supple noted that a launch event for the STP engagement process had been held on the 4<sup>th</sup> July, which had gone well but was very much the beginning of the process. He stated that following feedback improvements would be made to the ongoing consultation process and he hoped that it would provide confidence in that process and a better understanding of what was being planned. There was a need to involve all colleagues across the Health & Social Care Sector and to be mindful that various communication methods would need to be employed as different models suited different people e.g. the need for evening events and roadshows at various locations across the city had been recognised. He noted that there was a level of tension around the city in relation to the process and he hoped this could be addressed by having an honest conversation.

15.2 The Executive Director for Health & Adult Social Care stated that it was intended to collate the information obtained and to report back to the Board in due course.

15.3 Councillor Page stated that there was a degree of frustration in regard to the level of financial information that was available from the CCG and the savings required. He also noted that another surgery was due to close later in the year and queried how it would affect the Better Care Fund.

15.4 The Executive Director for Health & Adult Social Care stated that the Better Care Fund criteria had to be agreed with Health colleagues and officers were in discussion about funding and savings target for the whole of Sussex as well as Brighton & Hove. It was hoped that further information would be available for the Board meeting in September.

15.5 Councillor Barford welcomed the engagement process and thanked those who were leading it and asked that consideration be given to how to engage with the Learning Disability Community and those who did not have English as a first language.

15.6 Councillor Taylor stated that he supported the idea of integration in principle and that everyone could learn from each other. He asked what was planned for engagement with the elderly population and noted that the report to the Policy, Resources & Growth Committee stated there were no financial implications in relation to the Caring Together engagement process, but questioned the cost of officer time and hire of venues.

- 15.7 The Executive Director for Health & Adult Social Care noted the comments and stated that the report to the PR&G Committee was a direction of travel report and that there would be an intensive period of work in regard to the integration process. He hoped that a further report could then be brought to the Board in the autumn. It was likely that there would be a shadow period prior to full implementation. He was also aware of the need to manage the engagement costs and to give consideration to how engage with various communities.
- 15.8 The Chair stated that everyone was learning together and the use of the consultation portal would be helpful as part of the engagement process. He therefore asked if the Board was happy to note the report and strategy.
- 15.9 **RESOLVED:**
- (1) That the strategy be noted; and
  - (2) That the Board should receive regular updates on the communications and engagement strategy, any updates and progress.
- 16 WORKING TOGETHER TO SUPPORT PARENTS WITH A LEARNING DISABILITY, LEARNING DIFFICULTY AND AUTISM**
- 16.1 The Service Manager for the Community Learning Disability team for Adults, Families, Children and Learning introduced the report, which provided an update on the development of joint work between Children and Adult Services to support parents in Brighton and Hove who have a learning disability. He noted that the report also addressed the points raised by the Fairness Commission in relation to the ability of Adults and Children Services to work together to provide a needs led service to families to help support them.
- 16.2 The Head of Service, Children's Safeguarding & Care stated that a joint protocol had been established and work was underway to develop practice guidance that would sit beneath the protocol and to have shared resources to meet the needs of those with learning disabilities. She also noted that a multi-agency audit was due in 2018/19 and a further report would then be brought to the Board.
- 16.3 Members of the Board welcomed the report and the actions that had been put in place and noted that options to work with the University of Sussex and the Norah Fry Centre in Bristol. They also noted the support from Impetus and that the concerns of the Chief Executive of Impetus regarding how commitments would be put in place to meet the needs of parents with learning difficulties had been addressed. The Members of the Board also welcomed the intention to bring a further report back in due course as it provided the opportunity to monitor the impact of the changes that had been and were being made to the service.
- 16.4 The Chair noted the comments and put the recommendations to the vote with an additional recommendation that a further report be brought to the Board after the Adult and Children's Safeguarding Review Boards review.

16.5 Councillor Barford formally seconded the additional recommendation moved by the Chair.

16.6 **RESOLVED:**

- (1) That the report be noted and it be agreed that the content fulfils the response to the Fairness Commission;
- (2) That it be noted that the joint protocol (appendix 1 to the report), had been established between Children and Adult's Services with regards to services to parents with learning disabilities. It was also noted that the Protocol was awaiting feedback from a key stakeholder and it was planned to go live as of the week ending 14<sup>th</sup> July;
- (3) That the services and support provided to parents who have learning disabilities to enable their parenting be noted; and
- (4) That a further report be brought to the Board in 2018/19 following a review by the Children and Adult Safeguarding Boards.

17 **FOOD POVERTY ACTION PLAN PROGRESS UPDATE**

- 17.1 The Chair referred to the extract from the Neighbourhoods, Communities & Equalities Committee which raised the need to consider the impact of community meals in terms of improving people's care packages. He was aware that a report was due to come to the Board in the autumn and proposed that the report be noted.
- 17.2 The Executive Director for Health & Adult Social Care noted that concern had been raised about people having their hydration and nutrition needs met and stated that this was taken into account as part of the assessment process.
- 17.3 Councillor Miller queried how food poverty in schools was taken into account by the food poverty action plan.
- 17.4 The Executive Director for Families, Children & Learning stated that the Fairness Commission had made a number of recommendations in relation to the School day and two schools were already looking at how those recommendations could be taken into account. He anticipated that schools would be looking at this and further information could be included in the report for the Board in the autumn.
- 17.5 Councillor Page referred to the Annual Report of the Director of Public Health and the recommendations of the Fairness Commission, and queried whether community meals for and needs of vulnerable citizens were included in social care assessments.
- 17.6 The Executive Director for Health & Adult Social Care stated that an assessment would take into account hydration and nutrition needs.

- 17.7 Councillor Barford suggested that those people who paid for care did not generally present for assessment, and there was a need to look at how this could be addressed. She was aware that the council was working with the Food Partnership to promote healthy eating but suggested that more could be done.
- 17.8 Mr. Liley noted Healthwatch were working with the Food Partnership to set up a Special Interest Group to look at how healthy eating could be promoted, especially in relation to hospital discharge. He would update the Board on the progress at a future meeting.
- 17.9 **RESOLVED:** That the extract from the Neighbourhoods, Communities & Equalities Committee be noted.

## 18 JOINT STRATEGIC NEEDS ASSESSMENT REVIEW

- 18.1 The Consultant in Public Health, Brighton & Hove City Council introduced the report which detailed a review of the Joint Strategic Needs Assessment which had been considered by the Board in 2016. The report set out a proposed programme of in-depth needs assessments for 2017 and sought approval from the Board.
- 18.2 Members of the Board welcomed the report and noted that air quality was a factor with respiratory deaths being the 3<sup>rd</sup> highest group in the city. The need to provide a greater level of support to those who live alone was also raised, as this amounted to 41% in the city compared to 30% nationally.
- 18.3 Dr Sikdar noted that the report detailed the social insight profile and had a comparator with GP clusters national average and asked if in future similar information could be provided for GP clusters on a local level.
- 18.4 The Executive Director for Health & Adult Social Care noted that the purpose of the JNSA was to look at how services were commissioned to meet needs that had been identified. He noted that significant work was being undertaken with the voluntary sector around social isolation and a policy was being developed for that.
- 18.5 The Chair noted the comments and moved that the recommendations be agreed.
- 18.6 **RESOLVED:**
- (1) That the 2017 JSNA summary be approved for publication, as set out in section 4.3 and provided in Appendix 1;
  - (2) That the priorities for in-depth needs assessments in 2017/18 as set out in section 4.4.1 of the report be approved;
  - (3) That the development programme for the JSNA over the next three years, building on the feedback from the consultation, as set out in section 4.5.7 of the report be approved; and

- (4) That officers be requested to continue to develop the JSNA to support the overall approach and whole system development of health and care services, including informing policy and resource allocation.

## 19 WEIGHT MANAGEMENT TIER 2 PROCUREMENT

- 19.1 The Public Health Specialist introduced the report which set out the plans for the procurement and award of a new contract for weight management services for delivery in Brighton & Hove.
- 19.2 Councillor Miller noted that the report had been to the Procurement Board and that significant savings had been identified which could be achieved through integration of services.
- 19.3 The Executive Director for Health & Adult Social Care stated that the aim was to achieve more efficient provision of services and to tackle the issue of obesity.
- 19.4 Members of the Board noted the information and queried whether referrals could be made from a number of sources and not just GP practices. The need to monitor the performance of contractors was also raised, given that the expectation was that obesity levels would increase initially.
- 19.5 The Public Health Consultant confirmed that referrals could be made from various sources and noted that the number of children starting and leaving school who were over-weight was levelling-off in the city whereas it was increasing nationally.
- 19.6 The Chair noted that there was still a lot of work to do and suggested that it would be helpful to include the detail of what was being measured against in future reports. He then put the recommendations to the vote.
- 19.7 **RESOLVED:**
- (1) That the Executive Director for Health & Adult Social Care be granted delegated authority to carry out the procurement and award of a contract for Tier 2 weight management services with a term of three years; and
- (2) That the Executive Director of Health & Adult Social Care be granted delegated authority to extend the contract at the end of the three year term with the potential to extend the contract a further two years if he deems appropriate and subject to budget being available.

Note:

- 19.8 The Chair then adjourned the meeting for a five minute comfort break at 5.40pm.
- 19.9 The Chair reconvened the meeting at 5.45pm.

## 20 ANNUAL REPORT OF THE DIRECTOR OF PUBLIC HEALTH 2016/17

- 20.1 The Acting Director for Public Health introduced the Annual Report and gave a short presentation on the report. He noted that the report entitled, 'Living well in a healthy city' focussed on prevention and covered the period 2016/17.
- 20.2 Members of the Board welcomed the report and stated that it was informative and encouraged people to improve their lifestyle and to take all aspects of life into account. There was still a need to do better and areas of concern such as the level of young people trying cannabis and alcohol misuse in the city. However, overall the report was excellent and should be promoted as widely as possible and the key messages repeated with the option to take elements of the report to target audiences.
- 20.3 The Chair thanked the Assistant Director of Public Health for the report and moved that it be noted.
- 20.4 **RESOLVED:** That the report be noted.

## 21 BON ACCORD NURSING HOME

- 21.1 The Head of Adult Social Care Commissioning introduced the report which provided an update on the position with Bon Accord Nursing Home following the recently published Care Quality Commission (CQC) inspection report. He noted that following the home being classified as inadequate, officers worked with the provider to support and maintain services.
- 21.2 The Independent Chair of the Adult Safeguarding Board informed the Board that the matter had been discussed at the Safeguarding Board and that it had been noted quality issues relating to the home sat with the Care Quality Group.
- 21.3 Members of the Board expressed concerns over the findings and welcomed the actions that had been put in place to support the residents and their families. It was noted that in terms of places for people with dementia and nursing needs, it was a fragile market and consideration needed to be given in regard to how that was managed.
- 21.4 The Executive Director for Health & Adult Social Care stated that the concerns raised related to a specific care home and officers had made clear the expectations for the provider and staff at the home. In terms of provision across the city, Brighton & Hove was doing well in comparison to the situation across the country. He also noted that an action plan had been agreed which the CQC had to approve and would then review in six months to see if an improvement had been made or could then take further steps.
- 21.5 Mr. Liley stated that he wished to reassure the Board that the CQC worked closely with Healthwatch England and that locally the CQC had three teams dealing with primary care, hospitals and adult social care including care homes. Healthwatch met with the teams regularly and was keen to work in partnership with them and the council to monitor service delivery and agree a plan of activity such as visiting care homes.

- 21.6 The Chair noted the comments and the action taken to address the difficulties identified at the home in question. He then moved that the report be noted.
- 21.7 **RESOLVED:** That the report be noted.

The meeting concluded at 6.45pm

Signed

Chair

Dated this

day of

2017