BRIGHTON & HOVE CITY COUNCIL

HEALTH & WELLBEING BOARD

4.30pm 16 JULY 2024

COUNCIL CHAMBER, HOVE TOWN HALL

MINUTES

Present: Councillors De Oliveira (Chair), Burden (Deputy Chair), Grimshaw

Also in attendance: Stephen Lightfoot, Tanya Brown-Griffith (ICB), Dr Adam Fazakerley (Primary Collaborative), Peter Lane (UHSx), Dr Colin Hicks (SPFT), Steve Hook, Alistair Hill, Deb Auston (BHCC), Professor Robin Banerjee (University Of Sussex), Savid Kemp (ESFRS), Joanna Martindale, Tom Lambert (CVS), Alan Boyd (Healthwatch)

PART ONE

37 DECLARATIONS OF SUBSTITUTES AND INTERESTS AND EXCLUSIONS

1(a) Substitutes and Apologies

- Dr Colin Hicks was present as substitute for Dr Jane Padmore (SPFT). Jane sent apologies.
 David Kemp attended remotely for ESFR. Mark Matthews sent apologies.
- 1(b) Declarations of Interest
- 1.2 There were none.
- 1(c) Exclusion of Press & Public
- **1.4 Resolved –** that the press and public be not excluded from the meeting.
- 38 MINUTES
- **2.1 RESOLVED** The minutes of the 05 March 2024 meeting were agreed as a true record.

39 CHAIR'S COMMUNICATIONS

3.1 The Chair gave the following communications:

1

Physically Active Adults (Aged 19+)

We have recently received data on physical activity in the city. The latest data covers the period November 2022-2024. This period shows that 80.4% of adults aged 19 or over were undertaking 150 minutes of moderate intensity exercise per week over the previous 28 days when asked.

The value is statistically significantly higher (better) than the previous year's result (72.7%). It is indicative of a recovery in the city to pre-pandemic levels of physical activity.

The city's performance against this indicator is significantly better compared to England (67.1%) and significantly better than the Southeast region (70.2%).

Brighton & Hove ranks 2/152 of all County and Unitary Authorities in England (highest: Bath and North East Somerset, 80.5%).

Brighton & Hove ranks 1st compared to its 15 CIPFA nearest neighbours (2nd highest: Bristol, 75.9%)

Percentage of Physically Inactive adults (aged 19+)

Data is also available on the Percentage of Physically Inactive adults (aged 19+).

The latest results indicates that around 1 in 9 people (10.9%) in the city are "inactive". People are identified as inactive if they have done less than 30 minutes of moderate intensity physical activity in the past 28 days.

There has been a significant decrease (better) in the proportion of people are identified as "inactive" in the past 12months (2021-2022 = 18.3%) The city ranks 1/152 of all County and Unitary Authorities in England for this associated indicator.

At the Health and Wellbeing Board March 2024 we approved "Let's Get Moving", our new Sport and Physical Activity and Strategy. We agreed our vision is to make Brighton & Hove a city where everyone has the opportunity, the encouragement, and the environment to move more, live well and be active for life. Physical activity makes a positive contribution to our physical and mental health and wellbeing, addresses inequalities and improves social and economic outcomes in the city so it's great to see us doing so well on both of these newly published measures.

Health & Wellbeing Board: New Membership

We have recently changed the membership of the Board, rationalising the number of Cllr members, and offering additional places to our city universities, to Sussex police, to East Sussex Fire & Rescue Service, and to primary care providers. I'm also happy to welcome Stephen Lightfoot, the Sussex ICB Chair, to the HWB. I hope that all these changes will help the Board to work more strategically to improve the health and wellbeing of city residents and to reduce health inequalities.

2

- 3.2 As the HWB membership had been revised the Chair thought it might be useful for each member to outline what they hoped the HWB could achieve. Board members all responded:
 - Chair: focus on reducing inequalities and fighting poverty
 - Cllr Grimshaw: reducing inequalities
 - Cllr Burden: advancing health equity
 - Stephen Lightfoot: reducing health inequalities across the whole population of Sussex. Align strategic planning across the Sussex health & care system.
 - Tanya Brown-Griffith: improve population outcomes and achieve better integration
 - Adam Fazakerley: bring clinical experience to the HWB we need multiple perspectives to solve problems
 - Alan Boyd: embedding patient voice at the heart of services
 - Colin Hicks: address the disparities in mortality experienced by people with mental health problems or learning disabilities
 - Robin Banerjee: better understand the challenges we face and seek to use the work of inter-disciplinary research teams at the university to help meet these challenges
 - Tom Lambert: shine a light on community & voluntary sector work in tackling health inequalities and developing new opportunities for partnership working
 - Deb Austin ensuring that the voices of children & young people are heard when making decisions
 - Alistair Hill proving advice and leadership to empower the Board to work effectively to reduce health inequalities and improve healthy life expectancy
 - Steve Hook focus on developing partnership working to meet challenges.

40 FORMAL PUBLIC INVOLVEMENT

4.1 There were no public engagement items.

41 FORMAL MEMBER INVOLVEMENT

5.1 There were no member engagement items.

42 BRIGHTON & HOVE SAFEGUARDING ADULTS BOARD ANNUAL UPDATE 2023-24

- 6.1 This item was presented by Seona Douglas, Brighton & Hove Independent Safeguarding Adults Board (SAB) Chair; and by Guy Jackson, SAB Business Manager.
- 6.2 Ms Douglas told the Board that she had been appointed in autumn 2023, replacing Annie Callanan. She thanked Ms Callanan for a positive handover. Priorities for SAM over the past year have included developing standardised safeguarding kpis; evaluating the impact that the SAB has had; conducting 2 safeguarding adult reviews; and focusing on better use of data.
- 6.3 Cllr Burden asked a question about the use of feedback. Ms Douglas responded, agreeing that feedback was key to improving services. There is work to me done on

ensuring a more systematic approach across partners to capturing and evaluating feedback.

- 6.4 In response to a question from Cllr Grimshaw on frontline staff training on trauma, Ms Douglas responded that partners are encouraged to include trauma in staff training. Steve Hook noted that trauma-informed practice is at the heart of work on multiple compound needs and is informing the development of Integrated Community Teams.
- 6.5 Stephen Lightfoot commented that the SAB annual report represented very important work. The case studies in particular make difficult reading but include information that services must learn from. It would be helpful to use this information to inform the Development of Integrated Community Teams. Ms Douglas welcomed this approach.
- 6.6 Professor Banerjee asked how we benchmark against comparators. Ms Dougles responded that benchmarking information can be very useful. However, it does need to be treated with some caution, particularly in terms of looking at regional comparators, as Brighton & Hove is dissimilar to our neighbours in a number of ways.
- 6.7 Ms Douglas agreed to respond outside the meeting on a question around a reduction in domestic assault referrals to SAB from University Hospitals Sussex NHS Foundation Trust.
- 6.8 **RESOLVED –** that the report be noted.

43 SUSSEX SHARED DELIVERY PLAN (SDP) YEAR 2 REFRESH AND BRIGHTON & HOVE SDP UPDATE

- 43.1 This item was presented by Amy Galea, NHS Sussex Chief Integration and Primary Care officer; and by Chas Walker, Joint Programme Director, Integrated Care Transformation.
- 43.2 Ms Galea explained to the Board that the Sussex Integrated Care Strategy builds on local Joint Health & Wellbeing Strategies and Joint Strategic Needs Assessments. There is particular focus on multiple compound needs, on the development of Integrated Care Teams, and on community mental health services.
- 43.3 Mr Walker told that Board that people with multiple compound needs (MCN) have multiple health or social condition that have a compounding impact on their health and wellbeing. Brighton & Hove has high levels of people with mental health issues, substance misuse problems or homelessness and hence high rates of MCN, with between 600 and 1000 people in the city at the top end of need. A CMN needs assessment in 2020 found that there was a lack of integration and consistent care coordination in services for people with MCN. Since 2022 local work on MCN has been aligned with the national 'Changes Futures' programme. At any one time around 60-80 people receive targeted support in a pilot programme which is due to be rolled out across Sussex in 2024-25.
- 43.4 Members were shown a short film about MCN.

- 43.5 Stephen Lightfoot noted that there was excellent work on MCN happening in the city. However, unlike West or East Sussex, Brighton & Hove does not currently have a housing plan that identifies and supports health needs. Mr Walker agreed that housing is integral, but noted that the city council is currently developing a Housing Strategy that will address these issues. Steve Hook added that the city council had recently moved housing and adult social care into a single directorate, and also revising the Housing Allocations policy, which would help integration of care and housing services.
- 43.6 Cllr Grimshaw welcomed the report and asked to meet in person to learn more. Mr Walker responded that he would be happy to arrange this.
- 43.7 Alistair Hill welcomed the paper. However, he noted that smoking was not really mentioned. This is a city priority, and although smoking rates are falling, we could move further and faster to address this issue.
- 43.8 Alan Boyd welcomed the emphasis on patient voice in this work and asked whether locality learning was shared across Sussex. Ms Galea confirmed that it was, adding that there is also a drive to learn by doing rather than by developing abstract models.
- 43.9 In response to a question from Mr Boyd about health inequalities, Ms Galea told the Board that work is ongoing to develop plans to target health inequalities more effectively. Mr Walker added that the CHIP programme has worked with the most deprived communities, and learning from this work is informing the development of the Integrated Care Teams. Tanya Brown-Griffith stressed the importance of the Voluntary & Community Sector in all of this work.
- **43.10 RESOLVED –** that the report be noted.

44 BETTER CARE FUND END OF YEAR REPORT 2023-24 AND REFRESH OF PLANS FOR 2024-25

- 44.1 This item was introduced by Tanya Brown-Griffith, NHS Sussex, and by Steve Hook, BHCC. Ms Brown-Griffith outlined the purpose of the Better Care Fund (BCF), explained where funding was focused locally, and informed members of performance against targets.
- 44.2 Cllr Burden asked why the BCF target on reablement had not been met. Steve Hook responded that collecting accurate data on reablement is challenging. However, we do know that reablement services have good outcomes, particularly in terms of post hospital discharge.
- 44.3 Stephen Lightfoot noted that the city council and NHS services work really closely together in Brighton & Hove to deliver BCF priorities, with particular effective work supporting high intensity service users and on social prescribing. It would be helpful to develop some local BCF success measures and for these to be regularly reported to the

Board. There is a significant NHS investment in BCF and it is important that this provides value for money. Local success measures should include, but not be solely focused on hospital discharge. Mr Hook supported the idea of developing local success measures, and the Chair agreed that the Board would schedule regular BCF reports.

- 44.4 Cllr Grimshaw asked a question about residential care admissions. Mr Hook responded that the ultimate target is to reduce long term admissions to residential care. The number of long-term beds commissioned has been reduced and the management of extra care beds has been moved from Housing to adult social care.
- 44.5 Tom Lambert asked a question about the involvement of the community sector in BCF. Ms Brown-Griffith replied that the sector will be fully involved in the co-production of this year's planning.

44.6 **RESOLVED -** that the Board:

- Notes performance against the Better Care Fund plan for 2023-24
- Notes the Better Care Fund requirements for 2024-25.
- Approves the revised Brighton & Hove Better Care Fund Plan for 2024-25 recognising these represent a refresh of the 2023-25 plans approved by the Board in July 2023.
- Agress a recommendation that the Better Care Fund is reported to the Board every six months

The meeting concluded at 6pm

Signed

Chair

Dated this

day of