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HEALTH & WELLBEING BOARD

Minutes of a meeting of the Health & Wellbeing Board held on Thursday 28 November 2024 at 2.00 pm in Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

<u>Present:</u> Councillor A J Burford (Co-Chair), Councillor K Middleton, Councillor S J Reynolds, Councillor P Watling, J Britton, S Fogell, H Onions and C Parker

<u>In Attendance:</u> M Bennett (Service Delivery Manager: Hospital and Enablement), J Clarke (Senior Democracy Officer (Democracy)), F Mercer (Executive Director: Adult Social Care, Customer Services & Commercial) and H Potter (Insight Manager).

<u>Apologies:</u> Councillors S Whitehouse, K T Tomlinson, N Carr, P Davies, S Froud and Hancox

HWB44 <u>Declarations of Interest</u>

None.

HWB45 Minutes of the Previous Meeting

<u>RESOLVED</u> – that the minutes of the meeting held on 21 March 2024 be agreed.

HWB46 Public Speaking

None.

HWB47 Terms of Reference

At the AGM in May 2024, Full Council agreed that all Boards and Committees had delegated responsibility to agree their own terms of reference. There were no proposed changes to the terms of reference for this municipal year.

Members of the Board were asked to agree the terms of reference.

<u>RESOLVED</u> – that the Terms of Reference of the Health & Wellbeing Board for the 2024/2025 Municipal Year be approved.

HWB48 Health & Wellbeing Board Strategy Progress Report

The Service Delivery Manager in Public Health presented the Health & Wellbeing Strategy Delivery Progress between April and October 2024.

Key areas to highlight were the significant progress that had been made across the wide range of priorities. Reaching communities through outreach

activity had been enhanced through established relationships with trusted local leaders and volunteers. This approach, along with the use of data had proved effective in ensuring local resources were targeted to tackle inequalities and delivery of a broad range of high quality support services close to where people live. Partnership working remained strong, in particular joint working across council teams and interagency working with the community and voluntary sector.

Several programmes have benefitted from short term project funded providing opportunities to test out new innovative approaches and to collaborate with new partners. The continued budget pressures and short term funding across all partners remained one of the largest challenges across programmes. Looking forward it was important to maximise opportunities for prevention, place based working and integration with our system wide health partners. This approach has huge potential to deliver improved outcomes for local residents.

Key points to note were the significant amount of delivery that had taken place over the last few months including reaching out to communities with outreach activities and building trust with volunteers. Intelligence led data for an informed approach, tackling inequalities, strong partnership working, joint working with Council teams, agencies and the voluntary sector, new and innovative approaches and new partners. There would remain large challenges across the programmes but they would look to maximise prevention and delivery improved outcomes for local residents.

The community blood pressure project was one of a number of listed key deliverables in the HWB Strategy and detected high blood pressure at an early stage to help prevent heart attacks and strokes. It had the potential to reach lots of people and was a short-term funded programme with funding ending in March 2025. The work had been commissioned by the ICB, working across the agencies, with strong links to the voluntary sector in order to mobilise through scale. The scheme had undertaken 2,000 blood pressure checks and had demonstrated a 25% increase in engagement from the black and ethnic minority residents. It was intended to scale up the model and deliver a further 2,500 checks and introduce the national pilot within the workplace. This would ensure that availability was at the right place at the right time spreading the work through the community.

During the debate, it was welcomed that the preventative action was seeing results and that prevention was key for communities within the Borough. Funding streams would be utilised in order to prevent CVD, and this alongside work around priorities for diabetes and weight control would be continued. It was asked if the project could be widened to prostate checks as this was an essential measurement of health in men. Communication was key and it was asked if that literature on these preventative schemes could be produced in alternative languages to directly target these groups. It was also highlighted of the benefits of wrap around services to tackle health inequalities and ensure that there was the support to tackle wellbeing as a whole.

The delivery of progress made against the HWB Strategy priorities since the last update report in March 2024 was noted.

HWB49 JSNA Update

H Potter, Insight Manager, presented a brief JSNA update. A more detailed report would be brought back to the HWBB once the data had been released.

The report highlighted the developments made to the Telford & Wrekin Insight Website which now contained a wealth of population data which was accessible to everyone, including population headlines and a set of estimates from the ONS. It also highlighted the population growth in the Borough with population now being estimated to be 191,915 in the 12 months 2022-2023 which was 3,000 additional people.

This growth was faster than both the national and regional figures. During this 12 month period, Telford & Wrekin had become the ninth largest of all 151 Councils. The population of older people 65 and over had the highest growth of all other Local Authorities.

The components of change were made up of natural shrinking of the birth rate and the death rate and these were similar to each other. A substantive part of change was through migration both internal and international migration with a net increase of people moving in from outside of the country.

A more in-depth profile of preventable early death indicated that this was significantly worse than average in areas such as heart disease, stroke and cancer and preventative work would be strengthened. There were also high rates overall in poverty and the challenges that brought to the community.

In order for the Integrated Care Partnership (ICP) to understand performance, a dashboard had been developed. This enabled information from lots of different boards to feed into the system.

The report highlighted the all-person metrics and the HWB were asked to look at this and add or amend as required. The focus would be on prevention, intervention and equalities.

Councillor P Watling, Cabinet Member: Adult Social Care & Health Systems reported that HWBB were looking clearly at what the statistics were showing and this was important for health needs in the future. The ageing population was growing faster than in other areas and preventative work needed to be undertaken with local communities in order to keep people in the own homes as long as possible and working along healthcare partners this could be achieved. It was important to consider the Telford plan in relation to health, money, social care and ensure that the JSNA gave a clear indication around that.

C Parker, Shropshire, Telford & Wrekin ICB indicated that the report set out a basis for a population health approach in order to address health inequalities

and using the data to fund preventative measures to get the best success for Telford and individual communities. It had never been more important to take a population health approach and she looked forward to receiving the data.

The report was noted.

HWB50 Primary Care Access: Healthwatch GP Survey Report and Access Recovery Progress Update

S Fogel, Healthwatch Telford & Wrekin, presented the Primary Care Access: Healthwatch GP Survey Report and Access Recovery Progress Update.

The background to the report was from an independent survey which identified frustration and negative comments around getting a GP appointment. The annual GP survey which had been published at the same time told a different picture to here locally in Telford & Wrekin. Healthwatch Telford & Wrekin wanted to explore patient satisfaction at a GP practice level in order to gain more detail and to share how they would move forward to ensure access to GP appointments.

The survey was taken in and around communities and within GP practices where they spoke to patients and staff and supported then promoted the survey through communication channels with some 9,000 responding to the 21 questions.

The results showed that there was no correlation to areas of high depravation and there was no particular theme for those areas that had high dissatisfaction rates with some GP surgeries being good.

An overview of the findings detailed that half of the respondents had given a fairly poor or very poor rating with the main concern being barriers to access a GP appointment via the booking system via call centres or reception staff. It was important to stress that once patients had been seen by a health professional, they had received a reasonable service. Other concerns raised where appointments could be miles from their home location and the continuity of care from the traditional doctor surgery.

Areas identified as negatively impacting people's experiences such as interactions with non-clinical staff who were not appropriately medically trained, inflexibility in the systems due to full time working and confidence care professionals. Other concerns raised were service capacity, level of patient care, difficulties with the telephone systems, being told to contact 111 or A&E and the perception of unwillingness to see patients and the perceived lack of change. Improvements had taken place with telephone systems and booking appointments for long-term conditions and work undertaken with reception staff in relation to general interactions and building trust.

Going forward a piece of work would be undertaken to publish a report based on surgery findings for each GP practice and to look for suitable solutions. It

was hoped to work with patient participation groups and once complete to help to embed the changes.

C Parker, Shropshire, Telford & Wrekin ICB, confirmed that during the last year that there had been an increase in demand for appointments with a reduction in the GP workforce. The NHS had been working on increasing the other roles in GP practices and promoting that a doctor may not be the right contact for a person to see and a more appropriate appointment might be with a physio, health practitioner or a via a mental health provision. It was important to communicate and give an understanding of the different roles and the care navigator would point them to the right care are the right time. There were some known challenges as some practices followed different models and there was variation between GP surgeries. It was a TWIPP priority that support would be given to general practice and a deep dive would be undertaken to see how access to GP appointments could be managed and communicated to the public and a report would be brought back to HWBB.

During the debate, Members thanked Healthwatch for their comprehensive summary and for highlighting the ongoing ussies. The report looked to the future and identifying best practice and learning from successes. It was felt necessary that appointments were kept back for working people in order they can access a GP appointment. There was huge potential to make use of the NHS app, online systems and live channels.

RESOLVED - that:

- a) the report and the 15 recommendations made by Healthwatch Telford and Wrekin to improve people's access to GP services be approved;
- b) Shropshire, Telford and Wrekin Integrated Care Board, Telford and Wrekin Council and Healthwatch Telford and Wrekin to continue to work together to improve peoples access to GP services within Telford and Wrekin be continued; and
- c) updates to be presented at six monthly intervals with details of progress to improve access be required.

HWB51 Telford & Wrekin Integrated Place Partnership (TWIPP)

F Mercer, Executive Director Adult Social Care, Housing and Customer Services gave a brief update on the evolution of the Telford & Wrekin Integrated Place Partnership (TWIPP) into a formal committee of the Shropshire, Telford & Wrekin Integrated Care Board (ICB). The report also provided information on the emerging priority areas and alignment to the Joint Forward Plan. The Terms of Reference had now been updated and was now chaired by the Chief Executive. There was a less is more approach in order to drive delivery with the focus on three key priorities:

Healthy aging and delaying frailty

- All age mental health provision
- Supporting general practice to reduce demand on GP appointments

The Chair was pleased to see that the TWIPP status had been formalised and was reporting directly to the ICB.

RESOLVED – that

- a) the Terms of Reference for Telford & Wrekin Integrated Place Partnership acknowledging further developments are underway as part of the Good Governance Institute Committee Review be approved;
- b) the new priorities for Telford & Wrekin Integrated Place Partnership and its approach to developing a new strategic plan be noted;
- c) the new Strategic Plan for Telford & Wrekin Integrated Place Partnership for approval in Quarter 1 of 2025/26 be agreed; and
- d) the Telford and Wrekin Ageing Well Partnership review of membership and engages in its priorities be supported.

HWB52 HWB Partner Governance & Structure Updates

C Parker, ICS and the F Mercer, Executive Director Adult Social Care, Housing and Customer Services gave a presentation on the HWB Partner Governance and structure changes.

The presentation gave details on the changes to the governance structure, assurance on finance and quality. TWIPP was now a Sub-Committee of the ICB and reported to their respective HWBB. The System Transformation Group provided assurance, oversight and support the development of the STW ICS Transformation Programmes and remained in alignment with the Joint Forward Plan to ensure allocation of resources. There had been a change in processes and this had been aligned to the governance structure enabling reporting mechanisms to be clearer. Work would be undertaken to review the Committee over the next 6-12 months.

There had also been a change of Leader in Telford & Wrekin from Councillor Shaun Davies with Councillor Lee Carter now being Leader of the Council.

HWB53 Better Care Fund

The Service Delivery Manager: Hospital and Enablement, Telford & Wrekin Council, gave a presentation on the Better Care Fund in order to highlight the work that had taken place during the previous two years.

It was requested that delegated authority be granted to the Chair to sign the Better Care Fund.

The Better Care Fund had national priorities that were updated annually or every two years and looked at wider integrated working. Key themes were capacity and demand, place, prevention and urgent care.

Each quarter had been assessed on a different set of questions with quarter four marking year end. It highlighted progress, success and the challenges faced.

The updated plan for the coming year had undergone some remodelling but it was still focussed on admissions to hospital and discharges, how money was handed and place and prevention. It also highlighted a Discharge Fund.

Other areas of work had included resilience, support for carers, safeguarding and independent advocacy and linked in with prevention and place schemes.

The BCF linked into strategies across the council and partners, with the themes of most plans being person centred.

The Service Delivery Manager: Hospital and Enablement presented case studies as illustrative examples of the work being undertaken and spoke about the use of technology that could be used to maximise independent without the need for care.

There had been an increase in demand in quarter two but generally performance was on track, although slightly outside on the normal place of residence and it was expected that not all the data catching was completely accurate. The recovery unit was a step down from hospital and the normal place of residence figures were being affected. This area of work needed to be linked in order to get a better picture.

In relation to finance, they were generally in line with where it was expected to be but there had been some cost pressures in enablement and they were currently investigating how costs could be mitigated. Work was currently being undertaken to see if extra care beds could be used in a more formal setting and if it was successful, she how this work for the next year end.

In conclusion, work was to continue on stabilising demand and cost, reducing domiciliary care from 40 day in bed to 35 days, confirm funding for additional therapists, develop the care transfer hub, look at the supporting the flow process from discharge from hospitals and support the pathways in relation to going home from hospital.

During the debate, it was felt that more was being spent on acute care rather than preventative care and that the BCF should be used to move to a different model.

The Service Delivery Manager: Hospital and Enablement, Telford & Wrekin Council responded that areas of recent work had been looking at areas of spend, overall enablement and the use of beds. It also looked at where the

national teams Better Care Fund could be built to enable a Care Transfer Fund and how costs could be moved in order to be more financially viable and how length of stay was taken forward.

The second area that had been investigated was how all funding could be used differently by changing pathways and how funding could be split into different areas. He also confirmed that this was a similar discussion that was taking place in acute hospitals.

Upon being put to the vote it was:

RESOLVED: that

- a) the progress to date be supported;
- b) the BCF submissions be approved; and
- c) delegated authority be granted for the Chair to sign the Better Care Fund.

HWB54 Any Other Business

Councillor P Watling, Cabinet Member: Adult Social Care & Health Systems announced that Telford & Wrekin Adult Social Care had been amongst one of the first Councils to be assessed through the new LA Assessment process. Following the assessment by external assessors, the Council had been rated Good across nine areas which was a positive outcome. The Council would now focus on building on the strong foundations in order to continuously improve on what had been achieved.

The Executive Director: Adult Social Care, Housing and Customer Services commented that the Council delighted to have achieved a good rating and that currently no Council had received an Outstanding assessment. The Council were not complacent and would always strive to be better, learn and move forward.

HWB55 For Information Only

The Director of Partnerships and Place, Shropshire, Telford & Wrekin Integrated Care Board (STW ICB) reported that a consultation exercise by the NHS opened in September 2024 and would run to early Spring. The ICB would submit comments prior to the deadline. Organisations, individuals and staff members were asked to contribute to the consultation as it was a real opportunity to identify where the issues were. It was suggested that the Telford & Wrekin Health and Wellbeing Board put in a submission and work alongside Shropshire Health & Wellbeing Board to submit comments on what requirements were needed and wanted.

A question arose as to the deadline and it was confirmed that the deadline for the ICB would be the following week, but that other organisations had a little bit longer to reply.

The Director: Health & Wellbeing confirmed that Telford & Wrekin Council would be submitting an organisation response to the consultation and that she was happy to collaborate and she confirmed that the deadline was 2 December 2024.

The Director: Health & Wellbeing was pulling together an overarching Children and Young People Strategy in relation to the best start in life and reported that they would undertake starting well projects and strategy work. This would join together Education and Safeguarding and engagement had been undertaken. A report into children's mental health would be reported to the March 2025 meeting and a consultation process in relating to the overarching plan would take place in the meantime.

The Executive Director: Childrens Services reported this was an opportunity to bring everything together and the Strategy would come before the HWB for consideration.

The Chair highlighted the reports in the pack which gave set out the Safeguarding Adult Board Annual Report and Community Safety Partnership Annual Report.

Chairman:		
.	TI 00.14 00.05	
Date:	Thursday 20 March 2025	

The meeting ended at 3.58 pm

