

# Health and Wellbeing Board

Minutes - 11 April 2018

## Attendance

### Members of the Health and Wellbeing Board

Councillor Roger Lawrence	Leader of the Council
Councillor Sandra Samuels OBE	Cabinet Member for Adults
Councillor Paul Sweet	Cabinet Member for Children and Young People
Brendan Clifford	Service Director - City Health
John Denley	Director of Public Health
Steven Marshall	Director of Strategy & Information, Wolverhampton CCG
Chief Supt Jayne Meir	West Midlands Police
Mark Taylor	Strategic Director - People
Jeremy Vanes	Royal Wolverhampton Hospital NHS Trust
Craig Alford	Third Sector Partnership
Sheila Gill	Healthwatch Wolverhampton
Dr Ranjit Khutan	University of Wolverhampton

### Employees

Neeraj Malhotra	Consultant for Public Health
Helen Tambini	Democratic Services Officer
Shelley Humphries	Democratic Services Officer

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## Part 1 – items open to the press and public

*Item No.*      *Title*

- 1 Apologies for absence**  
Apologies for absence were received from Councillor Val Gibson, Councillor Paul Singh, Jo-Anne Alner, David Baker, Emma Bennett, Helen Child, Dr Helen Hibbs, Dr Alexandra Hopkins, Elizabeth Learoyd, David Loughton CBE, Linda Sanders, Sarah Smith, David Watts and Lesley Writtle.
- 2 Notification of substitute members**  
Dr Ranjit Khutan attended on behalf of Dr Alexandra Hopkins, Sheila Gill attended on behalf of Elizabeth Learoyd, Steven Marshall Attended on behalf of Dr Helen Hibbs and Craig Alford attended on behalf of Helen Child.
- 3 Declarations of interest**  
There were no declarations of interest made.

4 **Minutes of the previous meeting - 10 January 2018**

Resolved:

That the minutes of the meeting held on 10 January 2018 be confirmed as a correct record and signed by the Chair.

5 **Matters arising**

There were no matters arising from the minutes of the previous meeting.

6 **Health and Wellbeing Board Forward Plan 2017/18**

The key points from the Forward Plan were identified as:

- Overview of Primary Care
- Estates Strategy Update
- West Park
- BC Fund Update

With regards to the Estates Strategy Update item, the Chair noted that it was important that significant savings be made and that close working with other bodies, such as West Midlands Police, be encouraged going forward.

Before proceeding, it was noted by Councillor Samuels OBE that the Mental Health Strategy report had been deferred. The report was driven by other services which were specialist in nature and further work was required. All CCGs would need to modify the original strategies which had caused a delay.

Resolved:

1. That the Mental Health Strategy be presented at the July meeting.
2. That it be noted that a review of work would be held on 17 April 2018.

7 **City of Wolverhampton Vision for Public Health 2030**

It was agreed to consider agenda item 8 first. John Denley, Director of Public Health, presented the City of Wolverhampton Vision for Public Health 2030. The key element of the public health vision was to identify what was unique in Wolverhampton, what made a difference in people's lives and what would make people aspire to stay and invest in the City. The aim of the document was to improve public health at a population level and the principle behind the document was that various areas made a difference in healthcare, such as education, home environment, job stability and a thriving community.

John Denley explained that the vision was to shift the focus from simply improving life expectancy to improving quality of life, as well as enabling people to improve themselves by making better choices.

Councillor Paul Sweet noted that the project had been brought forward despite recent financial challenges. The Chair added that it was necessary to influence better life choices; it had been identified that 80% of people were willing to improve things for themselves, they required the correct tools.

Sheila Gill supported the idea in that the introduction of 'self-service' simplified things, however there was a danger in people doing things for themselves as

services would no longer be available at GP level. More work needed to be carried out to educate people further.

John Denley referred to the Wolverhampton Lifestyle Survey which identified that people preferred self-service. Using the Stop Smoking Service as an example, findings showed that out of 20,000 service users 8% of people quit smoking longer term using self-service. This illustrated that people preferred to make the decision themselves but needed the resources to help them achieve their goal. Tools suggested included social media content, contact with GP or Associated Trust for service users to gain information for themselves.

Resolved:

That the City of Wolverhampton Vision for Public Health 2030 be endorsed.

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### **City of Wolverhampton Public Health Annual Report 2017-2018**

John Denley, Director of Public Health presented the City of Wolverhampton Public Health Annual Report 2017 – 2018. The report fulfilled the statutory obligation and the intention was to open a debate by concentrating on numbers and providing comparisons with priority areas and key themes.

Much of the document consisted of a ward-by-ward breakdown of statistics. For example, with regard to population, a 'pyramid' shaped table represented a young, mobile population whereas a table with a 'bulge' indicated a more stable population that may have other health requirements. The aim going forward was to improve on current statistics and to ensure that Wolverhampton's deliverable services were amongst the top quartile in the country.

At the recommendation of Councillor Samuels OBE, it was agreed that all figures were to be checked for errors. In response to a question, John Denley confirmed that the goal would be to reach the top quartile within 18 months.

In answer to a question on how the widening gap in health equalities would be addressed, John Denley advised that the Black Report focused mainly on one issue and one service whereas the intention going forward would be to involve other issues. A partnership with various other services, such as the NHS Trust Partnership and CCG, would provide a cradle-to-grave service.

In response to a question regarding the current performance levels, Steven Marshall from the CCG informed the Board that the Variable Distribution Update for Wolverhampton identified that some small practices had found that there was an imbalance in staff and service users with an anticipated use of 110% but an actual uptake of 90%, which may have been a contributing factor.

John Denley confirmed that the report would need to be signed off by the Board and would then be promoted with the aim of initiating a conversation about public health. A copy would be sent out to each ward and partnerships and, once available to local residents, any technical information would be explained.

Following comments, John Denley agreed that one of the aims of the report would be to help support or stabilise the Third Sector and to determine the possibility of an outreach team to support communities in isolation.

Jeremy Vanes expressed concerns about the achievability of the goals following recent years of austerity and on-going service cuts. He confirmed that the Royal

Wolverhampton NHS Trust would support the work and that the strategy would be to bridge the gap.

John Denley stated that he would aim to make more use of the Joint Strategic Needs Assessment (JSNA) and that it would be important for the Board to look at population mobility. The Health and Wellbeing Board could be used as a platform for more in-depth work on whether Wolverhampton had fared better or worse across the City.

Jayne Meir expressed concern that violence and its impact were not included. John Denley agreed that joint working with West Midlands Police going forward could help to create a safe environment.

Jayne Meir stated that the issue was not only place-based violence, but domestic crimes and drugs / alcohol misuse were also increasing issues. The Chair agreed that this be discussed at a separate occasion and that the Public Health Annual Report needed to be integrated with the Partnership Programme.

Councillor Samuels OBE stated that there had been a reduction in infant mortality and smoking in pregnancy over the last 10 years. A seven - year life expectancy age gap existed between wards and there was an opportunity for strategies to address how that could be reduced.

Resolved:

1. That the report on City of Wolverhampton Public Health Annual Report 2017 – 2018 be noted.
2. That the report on City of Wolverhampton Public Health Annual Report 2017 – 2018 be published subject to the figures and statistics being checked.

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### **Health and Wellbeing Board Development Event - Issues Update**

Brendan Clifford, Service Director – City Health, presented the Health & Wellbeing Board Development Event – Issues Update report.

Workforce supply had been identified as an at-risk area within the Royal Wolverhampton Trust (RWT). Jeremy Vanes stated that the RWT was running 8 – 10% short on nurses. The system in place was a bank of nurses working on internal overtime and this was becoming unsustainable. The hope would be to employ people properly and recruit, however the overseas top-up immigration quotas had impaired this. The current plan was to persist and lobby the Government to raise awareness to improve the situation; some improvements had been achieved, but the winter of 2017 had had a huge impact on retention and a solution had not yet been found.

Regarding Estates, Brendan Clifford confirmed that Julia Nock had provided an update of flows of people to services. The West Midlands Combined Authority [WMCA] were to summarise current trends and work with the Chair and Councillor Sweet.

Councillor Sweet agreed that this work should be continued as there would be additional benefits to the public. Councillor Samuels OBE expressed an interest in the retention of 'growing our own' staff by utilising reserves of local people before looking elsewhere. Jeremy Vanes agreed that it was important to take on qualified staff and that all local staff were utilised before looking elsewhere. In addition, the

length of training for medical staff and lack of bursaries available were identified as potential issues for those wanting to train.

Resolved:

That a summary of issues raised at Strategy Day be presented at the next meeting.

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**City of Wolverhampton Partnership Response to People with No Recourse to Public Funds (NRPF)**

Neeraj Malhotra, Public Health Consultant, presented the City of Wolverhampton Partnership response to People with No Recourse to Public Funds (NRPF). The aim of the work was to bring four main areas together:

1. The City of Wolverhampton Council's Policy on NRPF set out both the rates that the Council would pay the roles and responsibilities of the Council. The policy would be presented to the Cabinet in April 2018 for approval.
2. The NRPF Pilot was intended to expedite the resolution of people's immigration status, reducing the number of people left in 'limbo' awaiting the outcome of their case. The funding available would be brought to the Board as part of an update at the October meeting.
3. The multi-agency NRPF Forum had a wide range of members. Previous meetings of the Forum had provided the chance to gain a perspective from a service point of view and input from the West Midlands Police to open an ongoing dialogue. There was no confirmation in terms of volume and scale of issues faced and the strategy would enable agencies to gain a further understanding of challenges.
4. The multi-agency protocol had been put in place to work with Council policy in order to avoid working in isolation but without simply duplicating the content of it. The intent was to achieve a consistent and co-ordinated way of working across the City. This had been created following a serious case review involving the death of a child from a NRPF family. In that instance, the family had been moved from a London borough and no inter-council dialogue had been addressed therefore illustrating the need to strengthen communication.

The Chair advised that the London boroughs had been contacted following this incident to request that a checklist of various items be actioned when moving people from one borough to another. This had been agreed between around 50% of councils but the importance of strong communication was still necessary. The Chair stated that the Partnership scheme was an excellent piece of work in progress and the report following the pilot would prove useful. It was agreed that the findings of the pilot be reported to the Board in October.

Resolved:

That an update on the NRPF Pilot be provided at October meeting.

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### **Strengthening Governance and System Leadership**

Brendan Clifford, Service Director - City Health, presented the City of Wolverhampton Health and Wellbeing Board Internal Review. The review outlined the purpose and responsibilities of the Board and the intentions for the future. Several 'Key Shifts' in the Board's operation were identified and the outlined proposal included a rebranding of the Board itself to highlight changes. The board was invited to provide comments on the review by the end of May, which would then be collated and presented to the Board at the July meeting.

Councillor Samuels OBE stated the importance of ensuring full involvement in meetings to openly discuss how to move forward. Councillor Sweet praised how inclusive the Board was and how its link to the public set it apart. He encouraged the group to provide feedback.

The Chair emphasised the need to improve outcomes and to continue to be anchored with other services in the City. A strategy needed to be approved and understood by the Board and consultations would include all groups. There was a need to confirm how the Voluntary Sector worked with the Board and it was agreed that a Peer Review would be beneficial for the Board going forward.

#### **Resolved:**

That Members of the Board provide any comments in writing by the end of May and that these be collated to be presented to the Board for the July meeting.