

# BLACKBURN WITH DARWEN HEALTH AND WELLBEING BOARD MINUTES OF A MEETING HELD ON TUESDAY, 20th June 2023

# PRESENT:

Councillors	Damian Talbot
Councilors	
	Mustafa Desai
	Derek Hardman
Integrated Care Board (ICB)	Claire Richardson
	Carl Ashworth
East Lancashire Hospitals NHS Trust	Emma McGuigan
Voluntary Sector	Dilwara Ali
	Vicky Shepherd
	Sarah Johns
	Angela Allen
Council	Abdul Razaq
	Mark Warren
	Michelle Holt
	Rabiya Gangreker
	Gill Kelly
	Catherine Taylor
	Shima Ahmed
	Tina Kuczer

# 1. Welcome and Apologies

The Chair welcomed everyone to the meeting. Apologies were received on behalf of Councillor Julie Gunn, Jo Siddle, Sam Proffitt and Katherine White.

# 2. <u>Declarations of Interest</u>

There were no Declarations of Interest received.

#### 3. Minutes of the Meeting held on Tuesday, 7th March 2023

The Minutes of the Meeting held on 7<sup>th</sup> March 2023 were submitted for approval.

**RESOLVED** – That the Minutes of the Meeting held on 7<sup>th</sup> March 2023 be agreed as a correct record.

# 4. Public Questions

The Chair informed the Board that no public questions had been received.

#### 5. Joint Strategic Needs Assessment

The Consultant in Public Health, Catherine Taylor, presented an overview of the JSNA Summary and delivered a supporting presentation.

The Board was asked to approve the 2023 JSNA Overview Documents as a key component of Blackburn with Darwen's Joint Strategic Needs Assessment.

The Board was informed that the 100 page document was not designed to be read cover to cover – but to be dipped into as and when required.

Subject to approval by the Health and Wellbeing Board, the JSNA Summary Review would be the main component of Blackburn with Darwen's JSNA 2023. It began with a profile of the Borough's population and local economy ('setting the scene') and was then arranged under the three themes reflected in the Borough's Joint Local Health and Wellbeing Strategy: 'Start Well', 'Live Well', and 'Age Well'. Whilst 'Dying Well' was not one of the major themes in the JSNA Overview, it would be reflected in a separate themed chapter. The Board was informed that further work on the 'Die Well' Strategy was required but that it was meeting ICB priorities The Board were advised that the Sexual Health Strategy would be shared in due course.

There was a discussion following Catherine Taylor's presentation regarding ethnic group indicators. The Board was advised that Thematic Chapters may be utilised going forward. The Board agreed that data should be translated into supporting BAE minority needs. Diversity within the borough was growing, longer standing settled communities need to be recognised more specifically.

The Chair, Cllr Damian Talbot and Director of Public Health, Abdul Razaq both thanked Catherine Taylor for her hard work in preparing the JSNA and agreed it was a great piece of work.

The Board was recommended to approve uploading of the Joint Strategic Needs Assessment 2022-2023 to the Website.

**RESOLVED –** That the Board approved the 2023 JSNA Overview documents as a key component of Blackburn with Darwen's Joint Strategic Needs Assessment.

# 6. Lancashire and South Cumbria Integrated Care Strategy 2023-2025

The Director of Health and Care Integration, Claire Richardson, presented the final version of the Lancashire and South Cumbria Integrated Care Strategy.

Claire Richardson asked the Board to endorse the final version of the Strategy and recognise the changes following feedback through content and layout of the strategy from all stakeholders ie. Sectors / organisations who are members of our integrated care system, residents board and engagement with partners. The final document was more visual than the draft document. It had a better summary of geography and places, with updates of vision and inclusion and would be a digital resource for all. The ICB endorsed the ICS on 17<sup>th</sup> April 2023. The ICP was in consultation with the JSNA to align with their Strategy.

In direct response to feedback from residents, a short summary of the Strategy had been produced. This aimed to identify the key points from the integrated care strategy in simple language.

There was a discussion following Claire Richardson's presentation. It was agreed that elements had been strengthened and it would be beneficial to consistently reflect the aims with strategic priorities. It was also agreed that the achievements were clear and in terms of aspirations going forward we know what we want to achieve over the next 12 months, 2 to 10 years and beyond. It was acknowledged that the ICP with Place Based Boards were key drivers in the joint partnership arrangements. A Live Well/Die Well board had yet to be set up.

Claire Richardson advised there was a further workshop planned in July 2023.

**RESOLVED –** That the board noted and endorsed the Lancashire and South Cumbria Integrated Care Strategy 2023-2025.

# 7-8. <u>Lancashire and South Cumbria Integrated Care Board – Development of a Joint Forward Plan for 2023-2028</u>

The Director of Planning - LSC ICB, Carl Ashworth, presented the Joint Forward Plan for 2023-2028 (version 7). The Board were asked to consider and comment upon the Draft Version of the Joint Forward Plan, particularly whether it took proper account of the Blackburn with Darwen Health and Wellbeing Strategy.

There was a discussion following Carl Ashworth's presentation - Topics included: **Smoking Cessation**; Colleagues felt the document should reflect the partnership. **Workforce Gap**; There has been a significant piece of work re Workforce strategy and how to retain staff. Development within the National Workforce Strategy should be a priority. Recruitment is being outstripped by retention of staff, strengthening would be welcome. **Healthy Life Expectancy**; figures for the Borough were concerning (46.5yrs healthy years before decline). Residents were living longer but not living well. Place is going to be important to help focus / target our vulnerable communities.

**re:fresh offer;** The value of free / reduced cost leisure to improve Health and Wellbeing. The complexities of linking strategies; working within individual providers rather than integrated / collaborative means across health and care sectors. The board recognised it is a key gap that needs further exploration. The aim should be to provide a clear link between ICBMs and strategic policies / health and wellbeing processes. Conversations need to be had with local trust boards who have their own strategies.

**Lack of public engagement;** interaction is limited amongst local residents. The Board agreed residents need to be reminded of the basic key themes / aims as this seems to have become very complex over the past 12 months.

**Mental Health**; Request that the report be more ambitious in regards to Mental Health Services. Concerns that Mental Health had been kept separate and should be considered as integrated with other services. Children's Mental Health had not been highlighted. Mental Health and links to physical health / wider determinants need to be considered and this support could be within the gift of other partners / housing / planning – updates are needed within the place based partnership board.

Carl Ashworth advised there would be additional narrative available regarding Mental Health and Integration. He recognised the challenges within the document and reported the systems consume more finances than received. There is high demand with reduced capacity. One of the many challenges is inconsistent outcomes for the population of Blackburn with Darwen. This will not be a one off process – the intention is to revisit the plan every year; focussing on delivering financial sustainability, prevention with delivery and greater efficiencies. The intention is to close the loop from the ICP feeding back into development plans. Carl Ashworth advised the report will be more robust in the next iteration but you can already see the direction of travel.

The Board agreed that there was already lots of work in the document in less than 12 months and it would have been difficult to produce a really robust document. The Board agreed an Annual refresher / review would be a welcome idea. Investing in prevention was the way forward as National Statistics indicate we are not in a good place, particularly when resources are tight. Looking back to ICP consultations they were limited due to timescales.

The Board was recommended to acknowledge the Joint Forward Plan for 2023-2028 (V.7)

**RESOLVED** – That the Board recommended comments be taken into account in the Final Version of the Plan – to be signed off by the Integrated Care Board at their meeting on 5<sup>th</sup> July 2023.

# 9. <u>Better Care Fund 2022/23 Quarter 4 End of Year position and Quarter 1 2023-24</u> Budget Update

Strategic Director of Adults and Health, Mark Warren, presented the Better Care Fund 2022/23 Quarter 4 End of Year position and Quarter 1 2023-24 Budget Update.

Mark Warren advised the service was currently looking to identify where money has been invested but not yet delivered properly on, particularly in respect of the Intermediate Care facility at Albion Mill. There were 31 beds and 4 flats that needed to be brought on line. As the industry in itself was providing the metrics, if projects are not delivered funding will stop. The complexity of people being discharged is increasing – Albion Mill can be step up and step down facility.

There are also plans to transfer 3500 residents using Better Care / Telecare from to a digital framework.

As outlined in previous reports the Health and Wellbeing Board is accountable for the delivery of the Better Care Fund Plan and managing performance against the required metrics and schedule of mandatory reporting. The management of the plan is undertaken through Blackburn with Darwen's joint commissioning arrangements and governance structures.

The report provided an account of the progress made against each of the performance metrics, scheme priorities and financial expenditure throughout the year.

All of the statutory planning and reporting requirements had been met through 2022/23.

The formal Section 75 Agreement detailed the pooled budget arrangements between the Local Authority and CCG (now ICB) and was updated for 2022/23. No substantial changes were made to the agreement.

The Better Care Fund Policy Framework and Planning Requirements for 2023/25 had been published with a submission deadline of 28<sup>th</sup> June 2023. This was a 2 year plan. As part of the review process a workshop was undertaken on 25<sup>th</sup> Ma 2023 which was well attended by colleagues from across the partnership. The Outputs from the workshop would support priority setting and the development of the scheme going forward.

There was a discussion following Mark Warren's presentation regarding the sustainability of DFG and the criteria for access. Mark Warren advised that grants can be discretionary but there is no direct criteria for access / eligibility. Considerations need to be made regarding the suitability of properties for adaptation and the longevity of the service users needs. No two applications are the same and this is a difficult discussion to be had with applicants.

Questions were asked regarding Intermediate Care and BwD residents being discharged and / or displaced to other areas of the UK. It was agreed that residents should not be sent direct from hospital to Care Home facilities as progress is difficult to monitor. Most residents are able to relocate to local Residential Care or their home of choice.

**RESOLVED** – That the Board acknowledged the Better Care Fund 2022/23 Quarter 4 End of Year position and Quarter 1 2023-24 Budget Update as recommended

## 10. Health Watch Update

The Chief Executive Officer of Health Watch BwD, Sarah Johns, shared a presentation and update of the Health Watch Service 2023/2024 Work Plan.

Slides included:

Start Well -

- · Youth Healthwatch engagement across the year with a focus on:-
- mental health
- supporting Public Health in the development of the Child Poverty
- and delivering level 2 Royal Society of Public Health Young Health Champions accreditation in schools and youth settings

Live Well -

- Engagement to understand people's experiences of accessing support for substance misuse, covering all age groups and with a focus on vulnerable/seldom heard groups
- Engagement to understand how adults with learning disabilities can best be supported through the use of hospital passports, annual health checks and pilot programmes such

as the red bag scheme and Bubble app to engage with health services as independently as possible and manage their own health better.

#### Age Well -

- Engagement to understand residents' experiences of support in the community for dementia, particularly in the early stages both individuals and families/carers.
- Monthly Enter and View visits into residential care homes and working closely with the Council's Quality Assurance team to support a multi-disciplinary team approach to action planning for homes

#### All Age -

- Enter and View visits into GP practices and pharmacies
- Information and signposting in community venues and via telephone and email
- Supporting Public Participation Panel at ELHT and lived experience roles within the Pennine Health Equity Alliance
- Volunteering opportunities with Healthwatch BwD

There was a discussion following Sarah Johns' presentation. The Board agreed there was a need for understanding residents' expectations of GP services and the role of Receptionists as a triage service, not a blocker to accessing the GP. There is work to do around Communication and informing people of the new roles and how they can give better care than the GP. Communication needs to be a regular driver as it is very hit and miss, with little continuity. This lack of communication is driving people to A&E, if we can get the understanding out there it may help us with A&E targets. Telephone consultations need promoting as there is a collective push back to have a triaged call. Negative narrative has built up. As a board we should be smarter in combining and building on what people want to hear and use to support their H&WB and their priorities using strategies and plans.

Questions were asked regarding the Primary Care Model. There are half million new GP appointments than pre-covid but due to workforce challenges, access is still an issue. Communication and expectation needs to be turned into a strategic conversation. What are we going to be telling our residents? Are we still wedded to the old model? Do we need to move the conversation forward?

Joined up working needs to be done in regards to resident's care home experience. Quality needs to be driven up and resident experiences need to be pushed upwards. One place strategy would help improve and drive standards.

Further discussions took place regarding Lancashire Health Watch and external services. Questions were asked about how residents' feedback can be incorporated when being supported by external services. It was agreed that families and residents would welcome closer scrutiny. The board were informed that each Health Watch area does things differently. When placed out of borough it is difficult to manage quality for our residents. For those placed within BwD from outside the borough they are far away from their usual support networks. Many external services do not have a quality and assurance scheme to protect residents and all this comes back to good commissioning services.

Chair Cllr Damien Talbot advised that a full report is due to be received by the Board at the end of 2023.

**RESOLVED** – That the Board noted the Health Watch Work Plan Presentation as recommended.

#### 11. Health Protection Annual Assurance Report

Public Health Development Manager, Rabiya Gangreker, presented the Health Protection Annual Assurance Report. The Health and Wellbeing Board were provided with an update on health protection assurance arrangements in Blackburn with Darwen and health protection activities undertaken during 2022.

#### In 2022 the Priority Objectives were:

- Manage outbreaks of communicable disease, including respiratory & new and emerging infections
- Maintain and progress with an IPC audit programme of settings
- Increase uptake of flu vaccinations amongst all priority groups and manage outbreaks effectively
- Provide support to prevent and reduce risks associated with HCAI and AMR
- Increase uptake and reduce inequalities in uptake across all immunisation programmes

#### During 2022, the Board also considered:

- Covid vaccinations and booster programmes, supporting the uptake of vaccinations in the borough and increasing engagement activities to increase uptake in the borough which was supported by the community champions' programme.
- Climate and Health needs assessment which has supported the Climate Emergency action plan.
- Regular updates on food borne infections in the borough as part of the quarterly IPC update
- Actions to reduce winter pressures on Council and partner services
- Discussion on local actions to reduce damp housing conditions in the borough

# In 2023 the Planned Activities are:

- Continue to work with UK Health Security Agency (UKHSA) to monitor risks and respond to outbreaks in local settings
- IPC Team will be offering IPC audits to all Council-run and maintained nurseries and will continue with the rolling programme of care home IPC audits
- Task and finish groups to meet prior to the start of the next flu season to address learning shared at the regional flu evaluation
- Bwd Seasonal Flu group will meet during the 22/23 flu season to promote uptake and circulate comms messages as wide as possible
- To continue to deliver regular IPC forums and promote attendance. To continue to work in collaboration with the Integrated Care Board to reduce risk and prevent HCAIs

The Director of Public Health, Abdul Razaq thanked Rabiya for the report – noting previous work by Laura. A discussion took place regarding the Hydration Heroes pilot and the positive effect it was having on Care Home residents with a reduction of UTIs in vulnerable groups. The board were advised there are plans to extend the pilot to Day Centres. It was agreed that the project could have a huge impact on hospital attendances.

Antibiotic resistance was flagged as a concern in the local population. Work is ongoing between the IPCT and pharmacies in regards to this.

The Board was recommended to:

**RESOLVED** – That the Board noted the information within this report as recommended and that the report provided assurance that effective processes are in place to protect population health.

#### 12. OHI Strategy One Year On

Public Health Development Manager, Gill Kelly, shared a presentation on the Oral Health Improvement Strategy.

The Board was recommended to acknowledge and approve the presentation, key highlights of which are presented below;

#### Achievements to Date:

- Reduce rate of DMFT- Now 40% down from 51% and ranked 5<sup>th</sup> from 1<sup>st</sup> (worst)
- Launch event at Ewood Park May 2022
- Oral Health Improvement Service commissioned
- GULP (Give Up Loving Pop)
- Madrassah pilot
- Kind to Teeth Parent Champions
- Max's Not So Sweet Dream book reading and dental nurse assemblies
- · Oral health communications campaign
- · Lift the Lip in primary care
- Start, Live and Age Well training

#### Other OHI Work:

- Linking with Baby Friendly Team
- Supporting other food and nutrition agendas
- Strong leadership and governance at BwD Oral Health Strategy Group
- Re-established stronger L&SC OHI group
- New L&SC Dental Public Health Consultant
- New DMFT data released 23<sup>rd</sup> March (full census (different MO) reduced DMFT by 10%)

#### Priorities for 2023/2024

- Exec Board paper (update on 15 approved recommendations; risks etc.)
  - SLT 13/03/23
  - Exec Board 13/04/23
  - H&WBB 06/06/23
- Looked After Children's oral health (Start Well)
- Homeless people's oral health (Live Well)
- Oral Health Champions in care homes and care services (Age Well)

A discussion took place following the presentation. Topics discussed were as follows: **Hydration and dental care needs to be supported**; priority for SLCC was a priority at a local level.

The positive impact in schools; one reception class within the pilot reported no one has had time off due to toothache.

**Capacity**; Was still an issue - There is no registration process to access a dentist and they are only commissioned for 60% of the population. This has always been the case – a lot of NHS dentists have transferred to private practice. It is a difficult and challenging situation but there is an active piece of work being led by the ICB.

**Care homes and access to mouth care**; Staff found it very difficult to get people to a dentist. Poor dental health links strongly to poor nutrition. A Toolkit was sent out to all care homes. The ICB can occasionally fund dentists to attend particular projects.

Historically, PCTs and CCGs had a GP with a special interest in care homes incl. dental health. Funding hadn't increased in the last 15yrs and the whole system required reform. The older age groups are a focus for the next year.

Gill Kelly was thanked for her hard work and excellent report.

The Board was recommended to acknowledge and approve the presentation.

**RESOLVED** – That the Board approved the presentation.

## 13. Any Other Business

There was no other business.

**NOTED:** 24hrs notice must be given for any other business to be included as an item in the Health and Wellbeing Board Agenda.

**NOTED:** Facilitates staff to be present at the back entrance reception desk 15 minutes before and 15 minutes after a meeting has commenced where external partners are expected to attend a particular meeting – to be reported to the appropriate Manager.

#### 13. Proposed Items for Next Meeting

The proposed items for the next meeting to include:

- Start Well Annual Update
- Climate Emergency Action Plan Update
- Place Based Partnership Update
- Live Well Board monitoring and reporting
- Health and Wellbeing Strategy

#### 14. Date and Time of Next Meeting

The next meeting was scheduled to take place on 5th September 2023 at 6pm.

Signed
Chair of the meeting at which the Minutes were signed
Date