

Health and Wellbeing Board

Tuesday 10 October 2020 at 4.00 p.m.

Virtual meeting via Microsoft Teams

Held in accordance with the Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020; and conducted according to the Council's Standing Orders for Remote Meetings and those set out in the Council's Constitution.

Present:

Councillor S. Craddock (Chair)
Dr. A. Rischie, Clinical Commissioning representative (Vice-Chair)
Councillor I. Robertson
Miss K. Allward, Interim Executive Director, Adult Social Care
Ms. S. Rowe, Executive Director Children's Services
Mr. S. Gunther, Director of Public Health
Ms. M. Poonia, Healthwatch Walsall
Chief Supt. A. Parsons, West Midlands Police
Ms. D. Lytton, One Walsall
Mr R. Beeken, Chief Executive, Walsall Healthcare NHS Trust
Ms. M. Foster, Black Country Healthcare NHS Foundation Trust
Ms. F. Shanahan, Housing Sector
Ms. J. Holt, Walsall College

In attendance: Mr. D. Fradgley, Walsall Healthcare NHS Trust

704/20 Welcome

At this point, the Chairman opened the meeting by welcoming everyone, and explaining the rules of procedure and legal context in which the meeting was being held. He also directed members of the public viewing the meeting to the papers which could be found on the Council's Committee Management Information system (CMIS) webpage.

705/20 Apologies

Apologies for non-attendance were submitted on behalf of Councillor T. Wilson and Mr. G. Griffiths-Dale.

706/20 Minutes

(a) **Health and Wellbeing Board**

Councillor Craddock moved approval of the minutes of the meeting on 23 June 2020 which was put to the vote by way of a roll-call of Board members.

The motion subsequently declared carried and it was:

Resolved

That the minutes of the meeting held on 23 June 2020 copies having been sent to each member of the Board be approved and signed as a correct record.

(b) **Local Outbreak Engagement Board Sub-Committee**

The minutes of the meeting of the Local Outbreak Engagement Sub-Committee on 16 July 2020 were submitted for information:

(see annexed)

Resolved

That the minutes be noted.

707/20At this point in the meeting, Councillor Craddock asked the Director of Public Health, Mr S. Gunther and the Interim Director of Communications, Mr J. Elsegood, to update the Board on the local position with regard to the Covid-19 Pandemic as the situation had moved on since last reported to the Outbreak Engagement Board.

Mr Gunther confirmed that, as with other areas nationally, Walsall had seen an increase in the number of cases with the rate now being 126 per 100,000 population and that this was largely due to community transmission through households. He commended activity providers, the hospitality sector and local businesses who were, on the whole, doing a good job. With regard to Care Homes, he said that the Council, working with its partners was providing enhanced support to homes and similarly with advice and support for schools and education settings.

Mr Elsegood updated on tiers and alert levels, with Walsall entering level 2 – high alert, because of its positivity rates. He briefly set out the rules around this in terms of local restrictions and advised that this information had been posted on the Council's website.

Councillor Craddock related some instances where there had been breaches in the rules which he said was unacceptable and stressed that the police would intervene and take action against the offenders.

In response to a question around young people gathering in the town centre without appropriate face coverings, Ms J. Holt, Walsall College, advised that whilst student behaviour in the college was excellent, there was some concern about students socialising without complying with restrictions outside college.

Councillor Craddock urged everyone to take care and follow the government guidance.

708/20 Declarations of interest

There were no declarations of interest

709/20 Local Government (Access to Information) Act, 1985

There were no items to be considered in private session.

710/20 Walsall Plan Priority 1 – Prevention of Violence

Chief Superintendent Parsons presented an update on the progress of measures to deliver the actions relating to this priority.

(see annexed)

Ch. Supt. Parsons highlighted the changes since the last meeting. He advised that the lead officer for this priority had moved on due to a promotion and that her replacement was still to be identified however interim arrangements had been put in place in the intervening period to ensure that work on this was maintained.

In presenting the report, Ch. Supt. Parsons cautioned that in reading the data, members need to be cognisant of the impact that the Covid-19 pandemic may have, for example in relation to Domestic Abuse. In this respect, he advised that rates of domestic abuse were higher nationally as well as locally and he was flexing staff to meet that challenge. In response to a question from Councillor Craddock regarding the delay to the establishment of the domestic abuse strategic group, Ch. Supt Parsons explained that due to the increased rates, this had been moved to a different workstream.

Ms. J. Holt, Walsall College, commented on the work of the Violence Reduction Unit and commended the engagement with the college which had had a marked impact on the young people, in particular, with the support and training provided to staff to support students with mental health needs. The Board noted that the work of the unit with the college on knife crime had also been successful and that the college was working with the Black Country Women's Aid to press awareness of Domestic Abuse and encourage students to come forward to enable them to receive the support they need. Ms. Shanahan, Housing Sector representative, also advised that she was involved in a strategic partnership meeting looking at ways of working together on domestic abuse matters.

Councillor Craddock thanked Ch. Supt. Parsons for his report.

711/20 Walsall Together update on progress and engagement

Mr D. Fradgley, Walsall Together lead, presented a report which provided an update on the development of Walsall Together:

(see annexed)

In presenting the report, Mr Fradgley highlighted the significant effort during the current Covid-19 pandemic to support care homes, the intermediate care system and the provision of a stroke rehabilitation system at short notice. He also gave feedback from the recent Care Quality Commission review which had recognised that joint working relationships in Walsall were mature and effective and that decisions were taken quickly which had resulted in strong PPE management and had enabled care to be directed and provided to the vulnerable first. In addition, the review found that Walsall Together was recognised as established and would be reported nationally; no evidence of barriers had been found; planning of patient's care needs had been impressive; and there had been excellent communication systems during this challenging time.

Councillor Craddock said that he was overwhelmed by the positive feedback from the CQC and added that the review had identified that only Walsall had arrangements in place under s.75 of the Care Act and that other authorities were looking to replicate this model.

In response to a question from Councillor Craddock on the success or otherwise of the transformation regarding the implementation of the new patient records arrangements, Mr R. Beeken, Chief Executive NHS Foundation Trust, said that considered the implementation of the patient administration model involving the transfer of millions of items of data without a major hitch had been the best technical transformation and implementation of a new system in his career. He said that whilst the functionality of the system was being fully utilised yet, work was ongoing to progress this.

Other comments made during the discussion included:

Provision of Hollybank House Stroke Rehabilitation Unit – it was suggested that members of the board should have sight of the outcome of the audit of success referred to in the report.

Social Prescribing – It was noted that Walsall Housing Group, the Primary Care Network, Making Connections Walsall, and others, were all social prescribing bodies and work was being done to bring those models together to understand where there may be some congestion in accessing the services. Volunteering through One Walsall's portal had been good.

Support to the vulnerable – Walsall Housing Group had secured £100,000 from Barclays bank to provide support bags to customers and these would be given as “kindness bags” to those who were particularly vulnerable.

The Chairman thanked Mr Fradgley and Ms. Allward, Interim Executive Director Adult Social Care, for their work on this. Mr Fradgley took the thanks on behalf of all the teams involved.

At this point, Mr R Beeken left the meeting. Ms M Foster, Black Country Healthcare NHS Trust attended.

712/20 Future Commissioning in the Black Country and West Birmingham

The Vice-Chair, Dr A. Rischie gave a presentation which formally advised the Board on the merger of the four local NHS Clinical Commissioning Groups (CCGs) i.e. Walsall, Dudley, Sandwell & West Birmingham and Wolverhampton in order to bring a single commissioning vehicle to the region.

(see presentation annexed)

In presenting the new arrangements, Dr. Rischie pointed out that notwithstanding this merger, there would still be five designated local place-based leads. He confirmed that the current managing Director of Walsall CCG, Mr G. Griffiths-Dale, also a member Walsall’s Health and Wellbeing Board, would be Walsall’s place based lead. Dr Rischie emphasised that these new regional arrangements were not to realign services but related solely to commissioning of services.

In response to questions, Dr. Rischie explained that in terms of decision making, the new arrangements would provide a better bargaining influence with major stakeholders and would enable more resilience working together for a better commissioning model. He added that the new regional CCG would be held to account through the assurance framework required by NHS England. With regard to the patient voice, he said that patient groups had been involved in the design and that each local place lead would continue to work with patient groups and local Healthwatch about any local changes which affect local services.

The Interim Executive Director, Adult Social Care, Mrs K. Allward said that as a social care commissioner she supported this move for people of Walsall which would on the whole be good however, she sought assurance that decisions for local people in relation to place based services would remain “at place”; and that there would still be opportunities for the local place to influence decisions taken at a regional level. Dr. Rischie confirmed that this

would be via the local clinicians connection and by participating attendance from local partnerships. He also confirmed that the new constitution for decision making was being prepared and that the draft would be circulated to stakeholders before final approval.

Dr Rischie recognised that the presentation was late to the Board and that the deadline for comments had passed however, comments about governance could continue to be made via the address identified on the presentation and would be fed into ongoing dialogue.

Councillor Craddock thanked Dr. Rischie for the presentation.

713/20 **Work programme**

The work programme was submitted:

(see annexed)

Mr Gunther gave brief feedback from the recent Board development session which had focussed on the work of the Board, its priorities and the potential to link priorities across partner organisations.

Ms. Allward commented that it was important to note that the needs of the population in Walsall had changed significantly during the current pandemic and some things we already knew about the population had come more starkly into view, particularly in relation to health inequalities. She considered that the Health and Wellbeing Board was well placed to ensure that there was a collective system response to this.

Resolved(by assent)

That the work programme be noted.

The meeting terminated at 5.30 p.m.

Chair:

Date: