

## **Minutes of the Dudley Health and Wellbeing Board**

Wednesday 27<sup>th</sup> June, 2018 at 4.00 pm  
in Committee Room 2, the Council House, Dudley

### **Present:**

Councillors N Barlow, C Bayton, R Buttery and A Lees;  
S Brookes (Communications and Public Affairs Officer – CAPA), P Bradbury (Chair of Healthwatch Dudley), N Bucktin (Director of Commissioning – CCG), A Gray (Dudley CVS CEO), D Harkins (Chief Officer Health and Wellbeing), S Hayward (Head of Community Safety) and M Samuels (Strategic Director People) and L Jury (Democratic Services).

### **Also in attendance:**

J Pritchard (Public Health Manager – Healthy Communities) for agenda item no. 7 (b)  
S Dulai (Head of Dudley Disability Service) for agenda item no. 7 (c)

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#### 1. **Election of the Chair**

##### **Resolved**

That Councillor R Buttery be elected Chair of the Board for the 2018/19 Municipal Year.

(Councillor R Buttery in the Chair)

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#### 2. **Election of Vice Chair**

##### **Resolved**

That the appointment of Vice Chair be deferred to the next meeting of this Committee to enable the Chief Officer Health and Wellbeing to liaise with the NHS to establish the nomination of a GP to elect as Vice Chair.

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#### 3. **Apologies for Absence**

Apologies for absence from the meeting were submitted on behalf of D Boucher, M Bowsher, Ch. Supt Fisher, K Jackson, P Maubach, M Rodgers and J Simmonds.

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#### 4. **Declarations of Interest**

No Member made a declaration of interest in accordance with the Member's Code of Conduct.

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5. **Minutes**

**Resolved**

That the minutes of the meeting of the Board held on 22<sup>nd</sup> March, 2018, be approved as a correct record and signed.

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6. **Strategic Issues**

(a) Dudley Borough Vision 2030.

A report of the Chief Officer Health and Wellbeing was submitted updating the Board on the proposed Borough Vision and the consultation process and giving Board Members the opportunity to contribute and comment on the Vision.

In presenting the report, the Chief Officer Health and Wellbeing summarised the work being undertaken to develop the Vision for the Borough. It was noted that, partners had been working together, through the Dudley Leaders Group, for almost a year on developing a vision for the Borough which set out the Borough's current position and the Borough's future aspirations. It was reported that a broad programme of engagement had taken place with stakeholders through a number of group discussions facilitated by an organisation called 'Shared Intelligence' who are assisting us with this work. Engagement had also taken place with young people to develop an emerging vision which would be refined on an ongoing basis.

A key point noted, was that the vision belonged to partners and not Dudley Council. The vision was about the whole of the Borough and not just the Dudley part of the Borough. In developing the vision, one of the issues partners and stakeholders raised was the importance of how the vision was taken forward in the future. Once a vision has been developed, it will be essential to identify how we can work together to achieve it.

It was noted that a lot of interest had been shown and feedback would be reported at a meeting tomorrow. A lot of activity had also been shown on social media. Shared Intelligence have been analysing the information and would put together a report and it was noted that a meeting of the Dudley Leaders Group would take place in early July where the information the public have supplied would be reviewed to establish what it will mean for the vision itself.

The Chief Officer Health and Wellbeing then presented the seven themes in the latest version of the vision, as set out in 3.3 of the report, and stated that the strapline for the vision was identified as 'forging a future for all'. The vision would be available interactively where the user would be asked to click on each theme, then three bullet points would be seen which would explain our current position and where we would like to be in 2030. Theme Leads were currently working with young people, different faith groups, elected Members, ect, to establish what the bullet points should say, ready for the next level of engagement.

It was noted that two groups would then be established to take the vision forward. The first group comprising of a diverse range of stakeholders from across the borough, will meet once or twice a year to discuss success in achieving the vision and an Executive Group, a much smaller group made up of officers including the Leads for each of the themes and other stakeholders and partners, would meet more frequently to work on the vision itself.

In conclusion, the Chief Officer Health and Wellbeing reported that she was currently working on the terms of reference and holding conversations with potential Theme Leads to identify who would be leading on each theme.

In response to a question raised by the Chair in relation to how the web base would be measured incrementally, it was noted that the Executive Group would need to identify measures and how they could be achieved. The terms of reference being drafted, would establish indicators to measure achievement.

The Strategic Director People commented that it was important to establish a clear vision that was achievable. The Executive Group would need to balance the number of indicators whilst also establishing a philosophy whereby people undertaking their daily activities, do so in line with the vision.

The Chief Officer Health and Wellbeing reported that it was proposed to hold a high profile launch. The Leaders Group propose to launch the vision at the Black Country Festival the end of July and would discuss in their meetings, how to keep the vision on future agendas. Between July and December, it is proposed to establish examples of how the public in communities are contributing into the vision, possibly presenting awards/recognition to people who are contributing.

A discussion ensued in which Members raised questions and comments in relation to: the need to tap-in to community groups, such as friends groups, tenants associations to build on engagement with communities and raise the profile of the Vision and encourage ownership; the need to achieve better connected transport; to encourage ownership by celebrating success and demonstrating the impact on individuals; to encourage individuals to be proud of the area they live in and who they are; to tap-in to the Black Country month, linking into the brand and recording what communities are doing.

**Resolved**

- (1) That, the report submitted updating the Board on the proposed Borough Vision 2030 and the consultation process and comments made by Members, be noted.
  - (2) That, the Board support the engagement process by disseminating within their organisations, through social media and public involvement networks.
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### **(b) Strengthening Community Resilience**

The Board considered a report of the Public Health Manager (Healthy Communities) which advised them on the progress that had been made since its last meeting in relation to growing strong, connected and resilient communities. In doing so, reference was made to a partnership session held in April, which highlighted a need for a shared understanding and narrative of what is meant by community resilience and a lack of awareness of the full range of work going on in the borough to increase community resilience. In addition to this work, a report had been received on some recent work commissioned on behalf of the Adults Alliance which used a story telling approach to reach into the heart of local communities and find out what people value and what keeps them well. It was noted that this had provided some important insight around community resilience.

Reference was then made to the three themes that had been identified as a result of the storytelling work, as set out in the report submitted.

It was noted that work was well undertaken to develop and expand the Dudley Community Information Directory as a single point of information and contacts for residents, volunteers and paid staff. This will include more information on community assets and informal activities in addition to the services and groups currently listed. The aim is that the system will become more interactive in the future to allow people to make connections for themselves as well as being signposted by staff.

The Public Health Manager (Healthy Communities) made reference to the new approach to commissioning for community resilience outcomes that had been piloted through the Dudley Council Voluntary Sector Innovation Fund and it was proposed to share the approach and learning from the programme with other partners, and colleagues in other organisations, to inform future practice. Specific reference was then made to the work commissioned on behalf of the Health and Wellbeing Board in 2015 relating to community resilience in the St James's ward which had culminated in a community resilience toolkit, as set out in the diagram on page 5 of the report, which would be revisited to see if it could help to articulate a shared understanding and narrative for community resilience. The lack of awareness of work being undertaken across the borough was acknowledged and it was proposed that the Health and Wellbeing Board website be used to increase people's awareness of the work being undertaken in the borough and include some case stories.

Concluding, reference was made to the October conference and the opportunity it provided to focus on how to increase community resilience across the system through all organisations.

Arising from the presentation, the Strategic Director People commented on the excellent work that been undertaken by staff and as a result the shift in mind-set needed away from us being seen as a body who just delivers services, to seeing our role as facilitating the people of Dudley having the best possible health and living the best possible lives. A cultural change was needed for us to think in everything we do, how this could contribute to making the people in Dudley feel valued and in control of their lives, changing what the people in Dudley expect from us and what their roles and responsibilities are.

A discussion ensued in which Members commented that they were pleased to see the work that was being undertaken and referred to the need for us to promote the things that are already happening in the borough more effectively and provide more effective signposting. It was acknowledged that we need to be really clear about the outcomes and how they can be measured and it was requested that a copy of the St James's ward research, as referred to in the report presented, be sent to Board members.

In relation to measuring outcomes, the Chief Officer Health and Wellbeing commented that the outcomes from the storytelling work and those mentioned in the diagram set out in the report, were measurable and reference was made to the work being undertaken by the intelligence team in the Council's Commissioning Hub in relation to the Joint Strategic Needs Assessment which would measure these outcomes. It was also noted that work was being undertaken in relation to social value.

It was suggested that the Alliance report be circulated to Members of the Board and referring to the storytelling mentioned earlier in the report, the Chief Officer Health and Wellbeing commented on the issues raised by the community in relation to social connectedness. The importance of having friends that you could turn to when needed was reported and when friends were not available, they stressed the importance of getting out of the house. It was noted that being very conscious that all of the work being undertaken on loneliness and isolation focused on visiting people in their own homes, the service needed to think differently about how these services were delivered in the future. Reference was also made to the Queens Cross Network and the positive feedback from service users which also challenged our way of thinking around delivering services.

In relation to a comment made regarding the web-site and its availability to people who do not have access to computers at home, the Public Health Manager (Healthy Communities) reported that the system would be accessible from local offices, libraries, GP surgeries, etc and training would be made available to staff to assist them in going out into the community and having connecting conversations. Training would also be made available on-line for anybody interested in going out into their community and raising awareness of the services available and this would be done alongside developing the work of the Community Champions.

The Chief Officer Health and Wellbeing commented that at previous meetings it had been agreed that the two themes that would be the focus of the October conference would be community resilience and resilience to adverse childhood experiences and it would seem the ideal opportunity for each organisation and the whole system to be challenged at the conference as to how this was being or could be achieved.

### **Resolved**

1. That, the report submitted on the progress made on Strengthening Community Resilience and the comments made at the meeting, be noted.
2. That, a copy of the research undertaken in the St James Ward, and the report from the storytelling work, be sent to Board Members.

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### **(c) Dudley Disability Service**

A report of the of the Head of Dudley Disability Service was submitted, providing information on the overview and progress update on the development of the Dudley Disability Service for people of all ages with disabilities and special educational needs.

In presenting the report, the Head of Dudley Disability Service referred to the rationale for creating the service which went live on 17<sup>th</sup> April 2018 and although work was on-going, some positive outcomes had already been seen. Reference was then made to the outcomes of extensive consultation with customers and their families which have resulted in the service needing to improve the simplicity of their processes, timeliness and accessibility of the response, reduce repetition and be more responsive to a range of needs. This feedback has also helped to provide a vision which the service would take forward.

It was reported that although Phase One of the project had now been completed, work was still ongoing to identify a property which would bring all staff together under one high street hub. Phase Two was now underway and would identify exactly what needs to be done and identify which areas need to be tackled to ensure integrated processes, pathways and policies. The aim of the integration was to reduce the bureaucracy customers were currently enduring and streamline processes.

It was noted that twenty-three task and finish groups had been set up as part of Phase Two and fundamental to the success of the service, would be establishing a cultural change, changing the way customer and clients think in terms of their expectations and a cultural change in staff working as referred to previously in the meeting.

Managers and staff had received a lot of support to ensure the success of the service in terms of working with families to make sure that they fully understood statutory responsibilities, what outcomes could be produced working together and the future expectations of the service. Reference was made to the staff already established and proposed staffing arrangements within the Multi-disciplinary teams (MDTs) as set out in the report submitted, and the interim structure as set out in Appendix A. It was also noted that quick decisions and ways of working were now being achieved and that all children had been allocated with no child outstanding.

Arising from the presentation, a short discussion ensued in relation to the need to established links with the NHS, Council and Education to provide support to families from the initial diagnosis, through to when the child enters education and then exits the education system. In reply, the Head of Dudley Disability Service stated that he had already received a very positive response from CCG colleagues and the aim now was to increase integration and establish teams around health areas and build on the relationships with partners to ensure that things would be achieved.

In response to a comment raised in relation to the need for families to be signposted immediately on diagnosis to support services or other families that have experienced similar situations for emotional support, it was noted that the model had been set up to deliver the right intervention to families/individuals at the right time and work was being undertaken to ensure that signposting was as effective as it could be.

Members commented on the progress that had made so far but raised concerns in relation to the locality of the MDTs and it was requested that the best possible locations be identified so that all residents had easy access to the services and were made to feel isolated. In reply, the Head of Dudley Disability Service stated that the aim of the services was to have staff working with individuals within their living area, building links with their community.

In response to a question raised regarding services available for families with lower level needs, it was noted that information, advice and guidance would be provided to all families to ensure that the child's needs come first and the family were well supported.

Arising from a short discussion in relation to the structures, dates and times for implementation, it was agreed that a report be presented to the meeting of this Board scheduled for December.

The Chief Officer Health and Wellbeing commented on the role of the Health and Wellbeing Board and requested that Board Members consider what the Board could do to build on the opportunity to join up services, when this issue is revisited at the December meeting.

### **Resolved**

1. That the contents of the report submitted in relation to the Dudley Disability Service and the comments made at the meeting, be noted.
2. That, a progress report, to include dates and times for implementation, be submitted to the meeting scheduled for 5<sup>th</sup> December 2018 for consideration.

## 7. **Governance**

### **(a) Integration and Better Care Fund Plan 2017/19**

A joint report of the Chief Officer Adult Social Care and the Director of Commissioning Dudley CCG was submitted providing an update on the status and performance of the Dudley Integration and Better Care Fund Plan 2017-19.

In presenting the report, the Director of Commissioning Dudley CCG stated that the report focused primarily on the outturn of the last financial year. It was reported that a sustained improvement on performance had been made on last year, particularly in terms of emergency admissions to Russell's Hall Hospital and Delayed Transfers of Care which had been sustained over the last two quarters, primarily attributed to the changes that had been made due to the availability of the IBCF and the schemes that had been put in place to prevent unnecessary admissions to hospital and to speed-up the discharge process. These schemes were now being reviewed to ascertain how they could be retained in the future and in addition, the A&E Delivery Board had just completed a comprehensive review of the urgent care systems to establish work streams to maintain the flow between admissions and discharge.

The hard work undertaken by all hospital and CCG staff which had resulted in the significant improvements reported, was acknowledged by Members.

The Strategic Director People echoed the comments made by the Board on the extremely good work undertaken by the NHS and Council working together and he commented that there were very few places in the region where the work that had been undertaken had been so effective and the key issues now relate to delays in hospitals outside the Borough. It was reported

that new national guidance on the BCF were due imminently and had yet to be agreed by Local Government. It was understood that delayed transfer targets are to be refreshed, noting that the numbers would not be published until next week, but the targets would need to be met this September, and with the expectation that the performance would be maintained throughout the winter. It was also noted that national targets would be set for reducing long-stay patients in hospitals. A national debate was underway in relation to whether the NHS would impose targets on Councils or whether targets could be left to local determination.

In response to a question raised in relation to the patient experience and whether Healthwatch had undertaken any work to capture this, the Chair Healthwatch Dudley stated that although no significant work had been undertaken, a significant reduction in complaints from patients to-date had been noted. In this regard, the Chair suggested that readmission rates be assessed as these could be used as key indicator as to whether patients had been sent home too early.

### **Resolved**

- (1) That, the report submitted on the status and performance of the Dudley Integration and Better Care Fund Plan 2017-19 and the comments made, be noted.

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### **(b) Understanding and Influencing our External Environment – Board Development Outcomes**

A report of the Head of Healthy Communities and Place, was submitted updating Board members on the outcomes from the Board development session and agree the next steps to be taken.

In presenting the report, for the purpose of new Members to the Board, the Chief Officer Health and Wellbeing made reference to the Board Development Session that had taken place in April 2018 which had looked at the Combined Authority and the STP. The report summarised the outcomes of the session and particularly reference was made to section 9 of the report which summarised the next steps to be taken, focusing on how to achieve best value out of the Combined Authority and STP for the people of Dudley and equally, how the Board could support the Combined Authority and STP.

The recommendations agreed, as set out in section 9 of the report, were presented and it was noted that the STP/WMCA would be invited to attend the whole system conference on 19<sup>th</sup> October 2018. Concluding, the Chief Officer Health and Wellbeing requested that Board Members support the key actions identified so that the work could continue.

The Strategic Director People then commented that the top teams of the Combined Authority would be attending Wider Corporate Board on 10<sup>th</sup> July to discuss some of the points raised and it was also noted that he would be attending a meeting on 29<sup>th</sup> June with combined authority colleagues looking at integration between social care and the combined authority and how the combined authority could build links with individual councils.

Referring to bullet point 4 in section 9 of the report, in relation to best practice/ scalable projects that had been identified, the Chair questioned whether this would include drug addiction and in reply, the Chief Officer confirmed that the list referred to only a few examples of innovative practices being undertaken in Dudley and suggested that the Executive Board identify a more comprehensive list of good practice.

### **Resolved**

That, the report submitted in relation to the outcomes from the Board development session held on 19<sup>th</sup> April, 2018, be noted and that the key actions identified be approved.

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### **(c) Conference September, 2018**

The Board considered a report of the Chief Officer Health and Wellbeing updating Board members on the planning of the whole system conference and giving them the opportunity to comment on the proposed content and format of the conference.

In presenting the report, the Chief Officer Health and Wellbeing reported that at the last meeting of the Board, it was agreed to hold a whole system conference which would include: the Health and Wellbeing Executive Board, the Health and Wellbeing Board; the members of the three alliances; key members from the Alliance's Priory Group, the Combined Authority and STP stakeholders. It was noted that the conference would take place on 19<sup>th</sup> October 2018 and would focus on the two themes that were agreed being; Adverse Childhood Experiences and Connected, Resilient Communities and the report set out the suggested input and group work to be included in the conference.

The Chief Officer Health and Wellbeing commented on a session she had recently attended with some other Board members, around County lines and criminal exploitation and as a result of the session, it was proposed that some of the case studies to be reviewed at the conference would be related to criminal exploitation due to the overlap with criminal exploitation and adverse childhood experiences.

Referring to the suggested input in relation to the Connected, resilient communities, the Chair suggested that, as a result of the discussions that had taken place early in the meeting relating to the Dudley Disability Service, the service be include in the conference.

The Chief Officer Health and Wellbeing requested that Board members email Julia Simmonds with any further suggestions of items to be include in the conference or any suggestions in relation to presenters.

### **Resolved**

That, the report submitted regarding the proposed content and format for the Annual Health and Wellbeing System Conference and Members comments, be noted. and Board Members email

That, Members email any additional items to be included in the conference, in relation to the two themes identified, and any suggested presenters, to Julia Simmonds.

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### **(d) Health and Wellbeing Executive Board – update**

The Board received a report on a number of items that had been approved by the Health and Wellbeing Executive Board since the last meeting of the Health and Wellbeing Board.

The Chief Officer Health and Wellbeing reported that the following items had been approved and copies would be circulated to Board members and publicised on the Health and Wellbeing Board website when available:

- The Final Version of the Pharmaceutical Needs Assessment (PNA);
- The Dudley Borough Suicide Prevention Plan;
- The Lets Get Dudley Active Plan

Referring the PNA, the Board were asked to delegate authority to the Executive Board to approve any further supplementary statements of this document with agreement that issues will be submitted to this Board for consideration when necessary.

### **Resolved**

1. That, the report submitted in relation to the items that have been approved by the Health and Wellbeing Executive Board, be noted.
2. That, the Health and Wellbeing Executive Board be given delegated authority to approve any further supplementary statements of this document with agreement that issues be submitted to this Board for consideration when necessary.

### **8. Questions from the Public**

No issues were raised.

9. **Questions from Members**

No issues were raised.

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10. **Dates of Future Meetings**

Thursday 20<sup>th</sup> September, 2018

Wednesday 5<sup>th</sup> December, 2018

Thursday 21<sup>st</sup> March, 2019 all commencing at 4.00pm at Dudley Archives.

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The meeting ended at 5.40pm

CHAIR