# HEALTH AND WELLBEING BOARD MINUTES OF THE MEETING HELD ON 3 DECEMBER 2014

#### <u>Present:</u> Councillors Baillie, Lewzey, Shields (Chair), Jeffery and Chamberlain Andrew Mortimore, Dr Steve Townsend (Vice-Chair), Dr Stuart Ward and Rob Kurn

Apologies: Alison Elliott

<u>Also in attendance:</u> Sue Leamon, Vice-Chair-Southampton Connect, Councillor Stevens, Chair of Health Overview and Scrutiny Panel, Stephanie Ramsey, Director of Quality and Integration

#### 22. DISCLOSURE OF PERSONAL AND PECUNIARY INTERESTS

Councillor Shields declared a personal interest in that he was a Council appointed representative of Solent NHS Trust and remained in the meeting and took part in the consideration and determination of items on the agenda.

Councillor Lewzey declared a personal interest in that he was a Council appointed representative of Southern Health NHS Foundation Trust and remained in the meeting and took part in the consideration and determination of items on the agenda.

#### 23. MINUTES OF THE PREVIOUS MEETING (INCLUDING MATTERS ARISING)

**<u>RESOLVED</u>** that the Minutes of the Meeting held on 1 October 2014 be approved and signed as a correct record.

#### 24. <u>HEALTH OVERVIEW AND SCRUTINY PANEL INQUIRY REPORT: THE IMPACT OF</u> <u>HOUSING AND HOMELESSNESS ON THE HEALTH OF SINGLE PEOPLE</u>

The Board considered the report of the Director of Public Health providing details of the Health Overview and Scrutiny Panel (HOSP) Inquiry into the "Impact of Homelessness on the Health of Single People".

Councillor Stevens, Chair of the Health Overview and Scrutiny Panel was present and with the consent of the Chair, addressed the meeting.

It was acknowledged that the impact of housing and homelessness had a direct link on the health of single people and that the following issues should be considered a priority for long-term, sustainable improvements for single homeless people in the City:-

- the quality and availability of single units and shared accommodation for single people in the system should be maximised through the Housing Strategy as well as working with landlords of private housing;
- continued transformation through early help and improved outcomes for children who were looked after;
- Mental Health Support and Services be reviewed to ensure early intervention and smooth transition into adult services;

- consideration of "invest to save" opportunities including a "dry" hostel option and a "Housing First" model; and
- increased awareness of homelessness and expansion of the Homelessness Partnership.

The Board noted that further information and feedback would be provided by officers in relation to the following recommendations:-

<u>Recommendation 10</u>

consideration of the outcomes from the Southampton Healthwatch Review of General Practitioner (GP) Registration with specific emphasis on working with GP's to improve access and integration to support homeless clients to move away from Homeless Health Care to Primary Care Services; <u>Recommendation 15</u>

Commissioners of Homelessness Services should consider the option of providing a "dry" environment within the Homelessness Prevention Model in the City, to support those who wanted to become sober or stay sober; and

• Recommendation 25

Homelessness Commissioners should undertake a City-wide review of services which might come under threat due to lack of funding, with immediate consideration being given to determining the value of these services to the City's Homelessness Model and health outcomes for individuals at The Two Saints Day Centre, the Breathing Space Project and the Vulnerable Adult Support Team in the University Hospital Southampton NHS Trust's Emergency Department.

# RESOLVED:-

- (i) that the Health Overview and Scrutiny Inquiry Report on "The Impact of Housing and Homelessness on the Health of Single People" be noted; and
- (ii) that officers be requested to provide further feedback to the Executive, prior to the 16<sup>th</sup> December 2014 Cabinet Meeting on Recommendations 10, 15 and 25 in Appendix 2 to the Report.

### 25. HEALTH INEQUALITIES IN SOUTHAMPTON

The Board considered the report and received a presentation from the Director of Public Health providing details of the health inequalities that existed in the City.

The Board noted:-

- that the Marmot Review highlighted the fact that social and economic status affected people's health;
- that people in deprived areas were twice as likely to die before reaching 75 years old, twice as likely to die from heart disease or a stroke and early deaths from cancer and lung disease were also more prevalent; and these inequalities were not being reduced;
- that smoking was the primary reason for the difference in life expectancy between the different classes in Southampton, followed by obesity and alcohol;
- that early intervention with children at a very young age was key to the problem; and

- that an engagement exercise should be undertaken to identify the challenges and key strands that would have the most impact covering the following:
  - understanding the levels and the consequences of health inequalities;
  - how the plans and strategies of other Partnerships and Agencies could be linked with the work of the Health and Wellbeing Board to reduce health inequalities within the City and the City region;
  - how the Health and Wellbeing Board could effectively engage with other sectors and communities not represented on the Board to discuss health inequalities; and
  - what additional support was required from the Health and Care Community to address these issues;

# RESOLVED:-

- (i) that health inequalities could be addressed by engagement with a wider range of organisations; and
- (ii) that a working party to identify and investigate specific health inequality issues be established and its findings be reported back to the Health and Wellbeing Board at a future meeting.

# 26. **BETTER CARE SOUTHAMPTON UPDATE**

The Board considered the report of the Director of Quality and Integration, Integrated Commissioning Unit providing an update on the progress towards the implementation of Better Care Southampton.

The Board noted the following:-

- that on 29<sup>th</sup> October 2014 NHS England had confirmed that the Southampton Better Care Fund (BCF) local plan had been "Approved with Support";
- that work was currently underway to develop a Section 75 Pooled Fund Agreement with the legal and financial expertise of both the Local Authority and Health, which was being overseen by the Integrated Commissioning Board;
- that a joint meeting of General Practitioners was scheduled to be arranged to discuss the details of the Better Care Fund, to which members of the Health and Wellbeing Board and the Health Overview and Scrutiny Panel would be invited; and
- that when received, feedback from the Cabinet Office, analysing Southampton's progress on Southampton's Better Care Plan would be circulated to Board Members.

### RESOLVED:-

- (i) that approval of Southampton's Better Care Plan, following the Nationally Consistent Assurance Review (NCAR) process be noted;
- (ii) that the progress made towards the implementation of Better Care Southampton be noted; and
- (iii) that following the Cabinet decision on 20<sup>th</sup> January 2015 to approve Southampton's Local Plan for the Better Care Fund, the Section 75 Pooled Fund Agreement, which required to be in place by 1 April 2015 be endorsed

by the Health and Wellbeing Board at the meeting scheduled for 28<sup>th</sup> January 2015.

## 27. CARE ACT 2014

The Board received a presentation from the Director of Quality and Integration, Integrated Commissioning Unit providing details of the 2014 Care Act.

The Board noted the following:-

- that the majority of provisions of the 2014 Care Act would come into force in April 2015, with those relating to funding reform from April 2016 and this would have a major impact on Local Authorities in relation to Adult Social Care responsibilities;
- that there would be implications for the whole Care System and the specific duties and responsibilities that would impact on Southampton City Council from April 2015 were:
  - a new power to delegate assessment and other functions to external organisations;
  - a new eligibility framework for carers and a duty to support carers with eligible needs;
  - > a new integrated charging system;
  - > the extension of the Universal Deferred Payment Scheme; and
  - a requirement to provide an Information and Advice Service ensuring that independent financial advice was available and that independent advocates were provided where appropriate.
- that the presentation on the 2014 Care Act would be circulated electronically to Board Members; and
- that all Councillors would be invited to attend a briefing on the 2014 Care Act in the near future.