

# Minutes of the Staffordshire Health and Wellbeing Board Meeting held on 7 March 2024

Present: Mark Sutton (Chair)

Attendance	
Mike Wilcox (Vice-Chair)	Rita Heseltine
Dr Richard Harling	Baz Tameez
Chris Bird	Emily Clarke
Dr Rachel Gallyot	Ian Read
Phil Pusey	Andy O'Brien (Substitute)
Garry Jones	Nisha Gupta (Substitute)
Gill Heesom	

**Also in attendance:** Tilly Flanagan, Vicky Rowley, Dr Sukhdip Johal, Dave Bassett, Claire McIver, Jon Topham, Liam Archer, Jennifer Norman.

**Apologies:** Neelam Bhardwaja and Tim Clegg

## Part One

- a. Declarations of Interest

There were no declarations of interest received on this occasion.

- b. Minutes of Previous Meeting

**Resolved** – That the minutes of meeting held on 7 December 2023 be agreed and signed by the Chair.

- c. Questions from the Public

None received.

## 29. Healthy Ageing Priority Progress Update

The Board received a report from the Lead Commissioner for Supportive Communities and Commissioning Manager providing an update on the Healthy Ageing priority as part of the Health and Wellbeing Board Strategy.

Healthy ageing is a strategic priority for both the Staffordshire Health and Wellbeing Board and the Staffordshire & Stoke on Trent Integrated Care System, driven by an ageing population and a decline in healthy life expectancy.

Over the last 12 months, a Healthy Ageing Partnership developed from two stakeholder events and involving representatives from the Council, MPFT, the Integrated Care Board (ICB) and the voluntary sector have led the development of a draft Healthy Ageing Plan for Staffordshire. The Plan includes four outcomes (Enjoying Independence, Feeling Connected, Maintaining a Healthy Lifestyle and Planning for the Future) and key performance indicators to measure progress. The data suggested that Staffordshire performed similar to the England average on several indicators and worst for hospital admissions.

The Healthy Ageing Partnership had considered which elements may benefit from partners working together to improve outcomes. The Board were asked to consider a set of priorities which had been identified to deliver the Plan's outcomes. These were improving early diagnosis and management of dementia, community-based strength and balance exercise to prevent falls, and finance and care planning for the future.

Next steps included the Staffordshire Healthy Ageing Partnership leading and providing oversight the delivery of the plan, whilst putting specific actions in place to achieve the outcomes. Data about healthy ageing within the new Joint Strategy Needs Assessment would be used to inform delivery of the Plan.

Baz Tameez reported Healthwatch surveys and patient feedback had found falls often had the most impact on residents and would share these findings.

Claire McIver asked whether the partnership had the membership required to deliver the strategy and the Board noted this may need strengthening in the future. South Staffordshire had directly approached the partnership to ask to be involved and it was suggested it may be beneficial to involve other district, borough and parish councils within the county to take a three-tiered approach to addressing local needs.

Garry Jones asked about falls in private residential care. Dr Richard Harling explained the County Council only has relationships with contracted care homes and through safeguarding and reported practice is variable and seeks to find a balance to avoid compromising quality of life by being overly constricting.

Chris Bird asked how the Plan would address the rate of hospitalisation for people with dementia. This had been identified in the Plan as an area where working together across the partnership on prevention and early intervention could be beneficial.

Ian Read updated the Board on the Staffordshire Fire and Rescue's Fall Response Service which had been operating for over 12 months providing

a response to non-injury falls. The Service referred these incidents as 'near misses' to falls prevention services but had found provision was inconsistent across the county.

Dave Bassett reported falls had been the fourth highest reason for calls to the West Midlands Ambulance Service in the last week and shared patient feedback from the recent Healthwatch survey regarding ambulance response times for falls.

Following the announcement that Councillor Jessel had stepped down as the Cabinet Member for Health and Care at the County Council, Councillor Mark Sutton recorded thanks to Councillor Julia Jessel for her support to the Board as the former Cabinet Member for Health and Care.

**Resolved** – That the Board (a) Approve the Healthy Ageing Plan; and  
(b) Commit to supporting delivery of the priorities.

### **30. Director of Public Health Report**

This item was deferred to a future meeting.

### **31. Staffordshire All Age Carers Strategy 2024-2029**

The Board received a report from Jackie Averill and Julie Sadler-Wright, Commissioning Officers from the County Council, on the Staffordshire All Age Carers Strategy 2024-2029.

It was noted that the Council and the Integrated Care Board (ICB) jointly developed a final draft of a new All-Age Carers Strategy (2024-2029). An extensive period of co-production took place between August and November 2023, involving a range of stakeholders.

Feedback was obtained through an online and paper survey. In total, 412 unpaid carers contributed their views. A draft of the strategy was presented to the Learning Disability and Autism Spectrum Condition Carers Forum on the 15<sup>th</sup> January 2024.

The strategy itself reflected national policy and legislative requirements as well as local strategies and plans. Seven main priorities were set out in the Strategy and the approach to achieving the outcomes noted by the Board.

It was noted that the Strategy would go to the Health and Care Overview and Scrutiny Committee and County Council's Cabinet meeting in March 2024 with a recommendation to approve on behalf of the Council. Once approved, the Strategy would commence from April 2024 and an action

plan would be co-produced to support implementation.

The Carers Partnership Board would oversee the implementation of the Strategy, reporting into the Disability and Neurodiversity Partnership Board, who in turn would be responsible for reporting progress annually to the Health and Wellbeing Board.

Garry Jones expressed frustration with the lack of progress from previous strategies and commented on the small percentage of carers responding to the most recent survey. The Commissioning Officers were confident the responses were representative as the feedback was consistent with feedback from carers from previous engagement exercises and was reflected nationally. Councillor Mike Wilcox stressed the importance of developing a robust action plan to ensure the strategy delivers improvements and reaches more people to ensure carers are supported and feel recognised and valued.

Phil Pusey suggested a way of communicating the outcomes of the survey to young people to acknowledge their feedback and manage expectations. Communication is something which is under consideration for all contributors but will need to carefully factor in the disparities found in how young carers and their other family members perceived their caring responsibilities.

Dave Bassett asked about the provision for out of hours support for carers in light of feedback received by Healthwatch. It was confirmed this would be incorporated into advice and guidance for carers.

**Resolved** – That the Board (a) endorse Staffordshire’s Joint All Age Carers Strategy 2024-2029; and

(b) Approve the recommendation that the Board has oversight of strategy implementation through an annual report from the Carers Partnership Board via the Disability and Neurodiversity Partnership Board to this Board.

## **32. Staffordshire Better Care Fund**

The Board received a report from Rosanne Cororan, Senior Commissioning Manager, on the Staffordshire Better Care Fund (BCF).

The Board noted the previous discussions held in March and September 2023 regarding the BCF, and were advised that in October 2023, an additional Disabled Facilities Grant (DFG) allocation of £873,069 had been received. South Staffordshire and Lichfield had received their additional funding, and Staffordshire Moorlands had declined due to a cumulative underspend. There was limited information available about the activity

and expenditure of DFGs but this would be raised at the Leaders Board and an update provided to the Board at a future meeting.

The requirement to submit quarterly returns had recommenced for 2023/24 following a break during the covid pandemic. The quarter 3 report had been submitted 9<sup>th</sup> February 2024 and the Health and Wellbeing Board Chair had signed this off. The Cabinet Member for Health and Care had also been briefed.

The Joint Commissioning Board had agreed for the Integrated Care Board (ICB) to utilise the Regional BCF support offer for demand and capacity modelling for Staffordshire and Stoke. The ICB were progressing this offer with the regional lead and an update would be provided to a future Board meeting.

The 2023-2025 BCF Section 75 and associated schedules had been drafted and were awaiting sign off. The draft covered 2 years and included additional schedules to incorporate existing joint schemes to streamline contract and performance monitoring arrangements.

The County Council had requested a review of the ICB's Adult Social Care (ASC) discharge grant to consider apportioning funding based on the adult population rather than the whole population. The current allocation would create a shortfall for Staffordshire of £899,000 over 2 years.

Staffordshire had been allocated an additional £1.6m to support and strengthen urgent and emergency care resilience and performance across the winter.

Chris Bird informed the Board that discussions were ongoing with Stoke regarding the apportionment of the ASC grant and a detailed review of BCF expenditure was underway. There was no nationally set apportionment methodology guidance for the ASC grant but it should be agreed with the relevant parties.

**Resolved** – That the Board (a) note the additional DFG allocation received for 2023-24 of £873,069;

(b) Note the quarter three BCF return has been submitted.

(c) Note that Staffordshire will be utilising a BCF support offer for demand and capacity modelling.

(d) Note that the Staffordshire 2023-2025 BCF Section s75 and associated schedules has now been drafted.

(e) Note that the Council have requested an update on how discussions

with Stoke have progressed to review the ICB's ASC discharge grant allocation in 2024/25 and redress the imbalance for Staffordshire and Stoke's allocation.

(f) Note the additional £1.6m allocated to Staffordshire to support and strengthen urgent and emergency care resilience and performance across the winter.

### **33. Integrated Care Board Joint Forward Plan**

The Board received a report and presentation from Chris Bird on the Integrated Care Board Joint Forward Plan.

The ICB is required to produce an annual refresh of the Joint Forward Plan to support the delivery of the Integrated Care Partnership (ICP) Strategy and to seek supporting statements from the Health and Wellbeing Boards.

National guidance published during December 2023 and January 2024 had not required any material changes to the proposals presented at the last board meeting in December.

A 'strawman' outlining the addendum to the Forward Plan was presented to show how the national guidance had been interpreted locally and demonstrated compliance whilst being derived from local content and adding value.

The first draft had been shared with a range of partners. Feedback had included quantifying ambitions through the inclusion of metrics, strengthening links to programmes of change and articulating links to wider determinants.

The final draft was due to be presented to the ICB Board on 21<sup>st</sup> March, with the national requirement to publish by the end of March.

**Resolved** – That the Board (a) note the JFP guidance that was published on the 22<sup>nd</sup> December 2023 and the 17<sup>th</sup> January 2024.

(b) Receive and endorse the outline / strawman of the Addendum to the Joint Forward Plan;

(c) Agree to receiving the draft Addendum to the Joint Forward Plan virtually; and

(d) to formally approve the decision to delegate to the Chair the sign off of the JFP for the Health and Wellbeing Board to meet the NHSE timeframes of the beginning of the next financial year.

### **34. Healthwatch Update**

The Board received a report and presentation from Baz Tameez on the Healthwatch Staffordshire progress and update on current key insights and three deep dives.

The presentation provided details of current key highlights which Healthwatch was working with partners to address:

- Continuing Health Care – the effectiveness and patient experiences
- Potential to access cross border Mental Health services to reduce travel time
- West Midlands Ambulance Services – reduced number of calls dealt with per shift due to demand and handover times
- Non-Urgent Patient Transport – negative patient experiences for waiting and journey times
- Stoke and Staffordshire neonatal mortality rate

Deep dives planned for 2024-2025 had been identified as:

- 999 Ambulance Service
- Admissions Avoidance Schemes
- Hospital Discharges

Dave Bassett provided an update on the 999 Ambulance Service deep dive which had begun in January. Healthwatch had been working with West Midlands Ambulance Service (WMAS) to collaborate on this. The deep dive stemmed from ICB's key metric for 23/24 was to reduce category 2 and 3 ambulance calls.

A Healthwatch patient experience survey had been initiated across the county to gather patient experiences on the service. This had received over 320 responses so far, with the highest response rates from the Moorlands and East Staffordshire. Patients were generally complimentary about the paramedics but anxious about wait times. Falls were reported to have the longest waits.

A list of the top reasons for calls to ambulances in the last week was provided, with falls being the fourth most common, followed by mental health and trauma. Data from January and February showed a direct correlation between the amount of time ambulances waited at hospitals and the time taken to respond to calls. WMAS had said referrals to alternatives to hospital admission are made when clinically safe to do so and reported they only transported 48.5% of the patients to hospital.

Councillor Sutton asked whether this issue was something which would benefit from an ICB whole system approach. Chris Bird responded to

confirm the ICBs work with the NHS to review urgent care performance. Winter pressures at hospitals can contribute to longer ambulance handover times, but there had also been times when there were no ambulance queues and WMAS still had increased category 2 wait times as it was a multifaceted issue. There were now regional protocols in place to initiate a set of actions if a patient had been waiting for 7 hours. If the wait reached 8 hours it was escalated to the NHS gold command to provide executive focus on these issues.

Ian Read informed the Board that the Fire Service had a response time of under 40 minutes for non-injury falls but challenges remained in channelling these calls through the system. The Fire Service had also recently started a hospital 'discharge and settle in' service from the Royal Stoke hospital and had undertaken over 300 since the service began in December.

**Resolved** – That the Board (a) comment on the key highlights and current themes being picked up by Healthwatch;

(b) consider and comment on the progress made by Healthwatch Staffordshire on the three deep dives.

### **35. Forward Plan**

The Board received the Forward Plan for 2024/25 and noted the following items scheduled for discussion at the 12 June 2024 meeting:

Director of Public Health Annual Report

- Healthy Weight Priority Progress Update
- Integrated Care System / Integrated Care Board Status Update
- Joint Strategic Needs Assessment Review
- Children's Safeguarding Board Annual Report
- Right Care, Right Person

**Chair**