

AT A MEETING of the Health and Wellbeing Board of HAMPSHIRE COUNTY  
COUNCIL held at the castle, Winchester on Thursday, 7th October, 2021

Chairman:  
\* Councillor Liz Fairhurst

\* Councillor Roz Chadd

\*Present

**Co-opted Members**

Dr Barbara Rushton, Simon Bryant, Steve Crocker, Cllr Philip Raffaelli, Tricia Hughes, Julie Amies, Alex Whitfield, Jason Avery, Paul Archer, Councillor Michael Hope, Mary O'Brien and Luke Stubbs

**1. APOLOGIES FOR ABSENCE**

Apologies were received from:

- Graham Allen, Director of Adults Health and Care (Paul Archer, Deputy Director, attended as substitute)
- Donna Jones, Hampshire Police and Crime Commissioner (Cllr Luke Stubbs, Deputy PCC attended as substitute)
- Ann Smith, Healthwatch (substitute for Healthwatch a vacancy)
- Dr Nicola Decker
- Cllr Anne Crampton (Cllr Michael Hope attended as substitute)
- Ron Shields, Southern Health (apologies also from Paula Anderson the substitute)
- David Radbourne, NHS England (Mary O'Brien attended as substitute)

**2. DECLARATIONS OF INTEREST**

Members were mindful that where they believed they had a Disclosable Pecuniary Interest in any matter considered at the meeting they must declare that interest at the time of the relevant debate and, having regard to the circumstances described in Part 3, Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter was discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore Members were mindful that where they believed they had a Personal interest in a matter being considered at the meeting they considered whether such interest should be declared, and having regard to Part 5, Paragraph 5 of the Code, considered whether it was appropriate to leave the meeting whilst the matter was discussed, save for exercising any right to speak in accordance with the Code.

**3. MINUTES OF PREVIOUS MEETING**

The minutes of the last formal meeting held on 18 March 2021 were reviewed and agreed. It was noted that the meeting held on 1 July 2021 was informal so no minutes were taken.

#### 4. **DEPUTATIONS**

No deputations were received at this meeting.

#### 5. **ELECTION OF VICE CHAIRMAN**

Nominations for Vice Chairman of the Health and Wellbeing Board were invited. Cllr Fairhurst nominated Dr Barbara Rushton, this was seconded by Alex Whitfield.

RESOLVED:

Dr Barbara Rushton appointed Vice Chairman of the Health and Wellbeing Board for 2021/22.

#### 6. **CHAIRMAN'S ANNOUNCEMENTS**

The Chairman made a number of announcements:

##### Changes in membership

The Chairman welcomed new Members attending the Board for the first time: Cllr Luke Stubbs, Deputy Police & Crime Commissioner for Hampshire Jason Avery, representing Hampshire & Isle of Wight Fire and Rescue Service Cllr Michael Hope from Rushmoor Borough Council

##### Informal Meeting in July

It was reported that an Informal meeting of the Board was held on 1 July 2021. At this session the Director of Public Health gave an update on the Board Survey Response and Actions. Richard Samuel gave an update on the Hampshire and Isle of Wight Integrated Care System. Officers from Adults Health and Care gave an update under the Ageing Well Theme. The Director of Public Health gave updates regarding the refresh of the Joint Strategic Needs Assessment and the Pharmaceutical Needs Assessment, and consideration was given to forward planning topics for future meetings of the Board.

##### Public Health Consultation and Health Impact Assessment

The Chairman announced that following the consultation on public health services, consideration was being given to the responses and proposals would be made to an Executive Member decision day in November. An assessment of the health impact of the proposals would be part of the consideration for the decision.

##### Ethnic Minority Groups and COVID-19 Rapid Health Needs Assessment

It was highlighted that the needs assessment which had been previously circulated highlighted the key health and care needs of the ethnic minority population. The members of the board were asked to review the recommendations and implement in their own organisation. A key action was that we improve recording of ethnicity in patient and client records. The recommendations will be overseen by the Turning the Tide Board and the ICS Prevention and Inequalities board.

### Upcoming Planning Item

The Chairman noted that with the upcoming White Paper on Planning, the December Health and Wellbeing Board agenda would include a very timely conversation around building health into place. Please could Board Members share their views around policy priorities via email so they could be considered and drive the presentation and discussion.

### Board Logo

The Chairman reminded Board Members that they would have received an email from the Board Manager on the 1st of October with mock ups of potential Logos for the Health and Wellbeing Board. Board members were encouraged to give their feedback. The Logo was intended to help increase visibility of the Board.

## 7. **STRATEGIC LEADERSHIP: ICS UPDATE**

The Board considered a report and supporting presentation from representatives of the Hampshire Southampton & Isle of Wight Clinical Commissioning Group and the Frimley Clinical Commissioning Group, providing an update on development of Integrated Care Systems (ICS) for the Hampshire area (see Item 11 in the Minute Book).

The Board heard:

- Recruitment of Chair and Chief Executive for the ICSs were underway
- that the Frimley ICS was the smallest in the country and one of only two that were not co-terminus with the upper tier local authority
- ICS was helping to formalise integration and give higher priority to population level issues like health inequalities and wider determinants of health
- The structures supporting the ICS would not be finalised by April 2022, there would be ongoing work to develop the system

Board members commented:

- The Director of Public Health indicated the Joint Strategic Needs Assessment should be used to inform the ICS work
- The Voluntary Sector representative queried the extent to which the voluntary sector were represented in emerging ICS governance
- The District Councillor representative noted that there had been good involvement of councillors with the Fareham and Gosport Clinical Commissioning Group, but it was proving harder with the larger geography of the ICS
- With some Hampshire residents accessing care from the Frimley ICS, this introduced some complexity and risk around data as the resident cohort may not be the same as the cohort of registered patients

RESOLVED:

That the Hampshire Health and Wellbeing Board:

Receive the report and note the direction of travel and anticipated development work planned for 2021/22.

Work with other key partners to ensure the role of the Health & Wellbeing Board is clearly defined in the emerging governance framework.

## 8. **DYING WELL: THEME DEEP DIVE**

The Board received a report and supporting presentation from representatives of Frimley Integrated Care System (ICS) and Hampshire and Isle of Wight ICS regarding work being undertaken in support of the Joint Health and Wellbeing Strategy Theme 'Dying Well' (see Item 7 in the Minute Book).

The Board heard:

- A Palliative and End of Life Care Group was in place for both the Frimley ICS and the Hampshire & Isle of Wight ICS and links between the two had been established to share learning
- A number of key pieces of work were under development, with a number of initiatives implemented, as detailed within the presentation
- Hospice Collaboratives had been established in both areas, at the early stages of development.
- Frimley had held 'death fairs' which received positive feedback and increased the confidence of attendees in talking about death. H&IOW ICS have sought learning from this process and have developed a BAME pilot model within the PSEH patch with plans to develop a broader programme of death fairs across the ICS
- It was important to encourage conversations at the early stages about death and to ensure these discussions were held more broadly to include the patient, carers, family members etc.

Board Members commented:

- The H&IOW Fire and Rescue Service representative queried the role of employers in supporting employees who had a terminal diagnosis
- The Director of Public Health highlighted support to those that are bereaved especially regarding mental health, and that inequality may influence who isn't 'dying well'
- That a new Board sponsor was needed for this theme
- Ways to measure improvements were recognised as under development pending the work with the SE Regional team around an PEOLC Dashboard e.g. increasing the number of people on an End of Life care pathway
- The Acute Trusts representative highlighted that the Winchester Hospice was now open, and that it would be helpful to see a map of service provision such as hospices to help identify where there may be gaps in coverage. This links with the existing mapping work being completed by the Hospice Collaboratives.
- The Vice Chairman suggested encouraging 'anticipatory care plans' when frailty was identified, so this took place earlier than at the point of a hospital admission

## RESOLVED:

The Health and Wellbeing Board:

1. Support the current approach and ongoing development of ICS wide End of Life Care Board/Steering Group, enabling end of life care specialists to come together across the patch to drive, develop and enhance end of life care locally. To enable appropriate representation from health, social care and voluntary organisations.
2. Support the developing partnership between Frimley ICS and HIOW ICS as we work together to share learning in the development of end of life care locally.
3. Acknowledge and agree the ICS priorities and deliverables that have been identified to date around end of life care, noting that the deliverables will be subject to regular review.
4. Agree the outlined approach specifically related to the following workstreams:
  - End of Life Interoperability  
To support the multiple approaches taken across ICS to tackle interoperability, noting due to the complexity of the challenge that successful and effective engagement and delivery requires sufficient planning and development.
  - End of Life Care Dashboard  
To support plans to engage with the South East Regional work underway to review and develop an end of life care dashboard. Noting that whilst this will result in delays in visibility of ICS wide data, a regional approach will ensure consistency and support to tackle complex issues.  
To support discussions with commissioning bodies to outline expectations, supported by Public Health data expertise.

## 9. **STRATEGIC LEADERSHIP: JSNA PROGRAMME UPDATE AND HIA FINDINGS SUMMARY**

The Board received a report and supporting presentation from the Director of Public Health providing an update on the Joint Strategic Needs Assessment (JSNA) work programme, including a summary of the Hampshire COVID-19 Health Impact Assessment report (see Item 8 in the Minute Book).

The Board heard:

- The Covid 19 Health Impact Assessment had identified that working age women were more likely to be impacted by long covid, and Rushmoor and Basingstoke had a higher impact from the pandemic than other parts of Hampshire. The pandemic had also exacerbated inequality, impacting existing vulnerable groups more
- The Director of Public Health intended to write to Board Members to ask them to confirm how their organisation takes account of the JSNA findings

Board Members commented:

- That further detail unpacking the findings of the JSNA would be appreciated

- That time spent in good health was decreasing even before the pandemic, and this was something as system leaders the Board should be looking at

RESOLVED:

That the Hampshire Health and Wellbeing Board consider and take forward the report findings and recommend areas for organisational and system wide analysis.

That a representative from each organisation represented on the Board be nominated to work together on the JSNA in more detail, to then bring the topic back to a future meeting of the Board for a longer slot.

#### 10. **STRATEGIC LEADERSHIP: UPDATED BUSINESS PLAN**

The Board received a report and presentation from the Director of Public Health regarding the current priority areas for each of the themes within the Health and Wellbeing Board Business Plan (see Item 9 in the Minute Book).

RESOLVED:

That the Hampshire Health and Wellbeing Board agree to take forward actions outlined in each of the theme areas in the presentation.

#### 11. **STARTING, LIVING, AND AGEING WELL: PHYSICAL ACTIVITY STRATEGY**

The Board received a report from the Chief Executive of the charity 'Energise Me' regarding the recently published "We Can Be Active Physical Activity Strategy" (see Item 10 in the Minute Book).

The Board heard:

- That there were opportunities at every contact to raise peoples awareness of the benefits of physical activity
- The development of the strategy had included reaching out to people who were inactive to understand what the barriers are
- Examples were provided on the Energise Me website of people who had been inactive who had become active
- The strategy was simplified compared to previous similar documents. The Board now needed to consider how to link the strategy to other work streams

Board Members commented:

- The Director of Public Health offered to work with the Voluntary Sector representative on a delivery plan and bring it back to the Board
- It was important to make being physically active easy to do, and therefore to build in physical activity to planning and infrastructure

RESOLVED:

That the Hampshire Health and Wellbeing Board:

Adopts the We Can Be Active Physical Activity Strategy for inclusion in the Health and Wellbeing Strategy.

Led by the project sponsors, facilitate action planning sessions with relevant people and organisations for the starting well, living well and ageing well chapters of the health and wellbeing strategy. These actions to be integrated into the Board's business plan.

12. **FORWARD PLAN FOR FUTURE MEETINGS**

The Board considered the Forward Plan for future items to be considered by the Board (see Item 12 in the Minute Book).

RESOLVED:

The Forward Plan was noted.

---

Chairman,