Contact Officer: Jenny Bryce-Chan

KIRKLEES COUNCIL

HEALTH AND WELLBEING BOARD

Thursday 26th September 2019

Present:	Councillor Viv Kendrick (Chair) Councillor Musarrat Khan Councillor Carole Pattison Councillor Mark Thompson Dr David Kelly Mel Meggs Carol McKenna Dr Steve Ollerton Richard Parry Rachel Spencer-Henshall Helen Hunter
In attendance:	Jane O'Donnell, Head of Health Protection Rachael Loftus, Head of Regional Health Partnerships Catherine Wormstone, Head of Primary Care Strategy and Commissioning Phil Longworth, Senior Manager Integrated Support
Observers:	Councillor Habiban Zaman, Leader Member of the Health and Adults Social Care Scrutiny Panel Lisa Williams, Calderdale and Huddersfield NHS Tim Breedon, South West Yorkshire NhS Foundation Trust Dawn Parkes, Mid Yorkshire NHS Trust
Apologies:	Councillor Kath Pinnock Karen Jackson Jacqui Gedman

21 Membership of the Board/Apologies Apologies were received from the following Board members: Cllr Kath Pinnock, Karen Jackson and Jacqui Gedman.

Mike Crowther attended as substitute for Karen Jackson.

22 Minutes of previous meeting

That the minutes of the meetings of the Board held on 13 June 2019 and 25 July 2019 be approved as a correct record.

23 Interests

No Interests were declared.

24 Admission of the Public

That all agenda items be considered in public session.

25 Deputations/Petitions No deputations or petitions were received.

26 Public Question Time

No questions were asked.

27 Health Protection Board Update

The Board received an update on the current health protection activities within Kirklees which highlighted key achievements and areas for further improvement. The Board was informed that the Health Protection Board (HPB) takes a system wide overview of stakeholders contributing to ensuring that local health protection arrangements are effective to minimise risk and threats to local health.

In summary, the Board were informed that:

- The Screening and Immunisation Team continues to work closely with Public Health and the Clinical Commissioning Groups (CCGs) to improve the uptake of NHS Screening and Immunisation programmes.
- Cervical Screening Public Health has been working in partnership with NHS England to gain approval from the GP Federations (Curo and My Health Huddersfield) for cervical screening to be built into the extended access hubs. Primary Care Networks and GP Federations aim to provide more choice and appointments outside of working hours, with the intention of improving uptake. The federations have agreed to this and work is ongoing to establish a model for the clinics for each CCG.
- Public Health has been working with the CCGs to gain approval for costings to cover a text message which is triggered by the third reminder letter sent by GPs. This has been approved and all practices have been sent instructions on how to set this up.
- Issues with staffing and an increase in the number of samples received has meant that the laboratories in the region have been unable to meet the national target of 14 days to turnaround samples. From the 30 September 2019, the Cervical Screening turn-around time will be back to 14 days and communications have gone out to GP practices.
- Public Health has been working in partnership with NHS England to engage with South Asian Community centres to try and understand the cultural and religious issues and barriers to screening. This work has generated national interest.
- Measles in light of the recent outbreak in neighbouring local authority areas, the Calderdale, Kirklees and Wakefield Immunisation Operational Group have created a separate MMR task and finish group. The purpose of the group is to understand MMR coverage and uptake and an action plan has

been developed to monitor and provide targeted initiatives. Uptake of the MMR vaccine first dose in five year old is 97%.

- Influenza Vaccination Programme due to the numbers of reported influenza like illnesses in residents in care homes, and the low uptake of the vaccination in frontline workers, Locala and Employee Healthcare were commissioned to attend and co-ordinate flu vaccination clinics in care homes in 2018/19.
- Human Papillomavirus Vaccine (HPV) vaccination uptake is low in a number of schools, particularly faith schools. Gaining access to these schools has been difficult. Public Health has been working in partnership with Locala Community Partnership and NHS England to increase the uptake of the HPV vaccination. The partnership developed a survey and distributed this to parents who had refused the HPV vaccination for their child to try and understand the reasons behind their decision. The main concern identified, was the age in which the vaccine is offered.
- Kirklees has declared a climate emergency. Measures to improve air quality are a key strand of this work and a number of activities have gained system wide support in Kirklees, to reduce carbon and other harmful emissions.
- Tuberculosis (TB) Kirklees has been successful in increasing percentage uptake of screening for Latent TB Infection (LTBI). The three year average number of reported cases in Kirklees is now 13.3 per 100,000 population from a peak of 29 per 100,000 population in 2011.

The Board asked what the uptake of cervical screening was in hard to reach groups. In response, the Board was informed that it has not been possible to acquire the data to do an in-depth analysis. However, it may be possible for the CCGs to obtain this information.

The Board enquired at what point the impact of the HPV vaccine on cervical cancer will be available. In response, the Board was informed that the vaccine was introduced in 2008, and once vaccinated girls reach the age of 25 and beyond it should be possible to get an accurate picture of the impact of the HPV vaccination on cervical cancer rates.

The Board was informed that there is ongoing national discussions regarding age reduction for bowel cancer screening. The present age cohort is 60-74.

RESOLVED - That the Board note the information presented in the Health Protection Board update report.

28 Update on the Implementation of the Kirklees Health and Well Being Plan

The Board received an update on progress with implementing the Kirklees Health and Wellbeing Plan and proposed steps for reviewing the implementation of the plan. The refreshed Plan was signed off by the Board in September 2018. The Board was informed that the Plan provides an overview of work across Kirklees to deliver improvements in the health and wellbeing of the population. In order to better communicate the outcomes and priorities that the Plan is seeking to deliver, a one page summary was also developed and approved by the Board in January 2019. The summary supports the work by ensuring that individual organisational plans are clearer about how they are contributing to the delivery of the Health and Wellbeing Plan.

The Board was informed that it is important to determine how we are measuring progress is being measured against to Kirklees Outcomes. To enable this, a suite of high level indicators have been developed. To support the headline data, detailed work has also been undertaken to highlight how the local picture has changes over time and key inequalities.

The Board stated that it was important to emphasise in the Plan what is going to be achieved and by when, showing one or two clear outcomes. In addition, the Board further commented that it was also important to capture how the local system has already changed and in response was informed information that shows the journey will be included as part of the peer review.

The Board was informed that the next steps will be to review the Integrated Commissioning Strategy, streamline reporting mechanisms, and to hold a discussion at the next Board development session. The revised approach will then be presented to the formal meeting of the Board in January 2020.

As part of West Yorkshire and Harrogate Partnership's commitment to promote a sector led approach to improvement across all place based health and social care systems, a peer review process was piloted in Wakefield last year. All areas in West Yorkshire have committed to undertaking a review and Kirklees has agreed to go next. The date the review will take place is the 25th – 27th November 2019. Work is being undertaken to pull together the programme for the review and board members are invited to be involved in that.

RESOLVED - That the Board:

- (a) Note the progress with implementing the Kirklees Health and Wellbeing Plan
- (b) Approve the need to update the Integrated Commissioning Strategy and the
- Integrated Provider Board work programme and 'Plan on a Page

29 Development of the West Yorkshire and Harrogate 5 Year Strategy for Health and Care

The Board received an update on the development of a draft narrative of the West Yorkshire and Harrogate 5 Year Strategy for Health and Care, and the process for further developing and refining it. The system narrative aims to describe how the system will deliver the required transformation activities to enable the necessary improvements for patients and communities as set out in the NHS Long Term Plan (LTP). There is good alignment between the LTP and regional ambitions as set out in the 'Next Steps' document.

The Board was informed that the existing programmes have been working to refresh their objectives and it was agreed to develop a new West Yorkshire and Harrogate programme on Children, Young People and Families and expand the existing prevention programme into a new Improving Population Health programme.

The Board was informed that it was important to recognise that there are things in the document that are vitally important to Kirklees and consideration will need to be given to what are the few things to have a dialogue with the public about.

The Board commented that there is a need to be bold about the issues to be tackled and provided comment and feedback as follows:-

- Partners should be collectively raising issues with regard to children's health for example childhood obesity – its causes, impact and what can be done to tackle it
- Developing a work stream on end of life care
- Publishing mental health waiting times
- Strengthening the patients story
- Include case studies that provide a good reflective balance across issues and the places in West Yorkshire
- Given the length of the full document, an executive summary would be useful

The current timeline for the draft document is:

- 27 September 2019 submitted to NHS England for an assurance check
- 15 November 2019 system plans agreed with system leads and regional teams
- 3 December 2019 Partnership Board for sign off the draft and agree publication date

The Board was informed that there will be further opportunity to submit any additional comment which will be used to inform the second draft of the document.

RESOLVED - That the Board:

- (a) Provide comment and feedback on the draft 5 Year Strategy
- (b) Note the timescale and process for the further refinement and sign-off the strategy

30 Update on the Development of the Primary Care Networks

The Board was provided with an update on the development of the Primary Care Networks (PCN) in Kirklees. The Board was reminded that by May 2019, each Network had to provide registration information. Following the initial PCN registration stage, the Clinical Commissioning Groups and the PCNs were required to comply with a series of further national requirements. All additional registration information was submitted and nine Kirklees PCNs was considered and approved with the aim of being operational from the 1st June 2019.

The Board was advised that as part of changes included in plans for GP contract reform, extended hours appointments which were previously provided on an

optional basis at individual practice level would now need to include 100% of the population covered by the collective practices within a PCN. Networks have provided assurance that they are delivering the required level of extended hours' service.

In January 2019, the West Yorkshire and Harrogate Health and Care Partnership requested CCGs undertake a further assessment against Primary Care Network Maturity Matrix. This suggested that although the majority of Networks were at the early stages of development approximately three networks were beginning to move through the maturity matrix at pace.

RESOLVED - That the Board:

- (a) Notes the achievement of key national milestones to register and establish nine Primary Care Networks for Kirklees
- (b) Requests that a further update be provided in the new year

31 Journey to Outstanding

The Board received a presentation on the outcome of the recent Ofsted inspection of Children's Services. The Board was reminded that in 2016 the service was rated as 'Inadequate' and since then the service has been on an improvement journey with an aspiration to be rated 'Outstanding'.

In June 2019, Ofsted attended to re-inspect the service and outlined a number of areas for development. The outcome of the inspection was the service 'Requires Improvement to be Good'.

The Board was informed that the journey to outstanding will include focus on:-

- Practice, Learning, SEND, social care
- Developing a stable workforce
- Medium Term Financial Planning which invests in evidence interventions
- Place Based Approaches
- Scrutiny support and challenge

RESOLVED - The Board notes the information in the presentation

32 Changes to Pharmaceutical Services in Kirklees since 28/03/2018 and Publication of a Supplementary Statement to the Pharmaceutical Needs Assessment 2018-2021

The Board considered and noted a report which outlined information received from NHS England with regard to any changes to pharmaceutical services in Kirklees which necessitate the publication of a Supplementary Statement.

Concerns were raised with regard to information which suggests that some pharmacies are now charging for delivering prescription medication and the impact this would have particularly on the elderly and disabled people. The Board felt that this required further investigation.

RESOLVED - The Board notes the information in the report