



PARTNERSHIPS SCRUTINY COMMITTEE

**MINUTES OF THE MEETING HELD AT PENALLTA HOUSE, YSTRAD MYNACH
ON THURSDAY, 11TH JULY 2019 AT 5.30 P.M.**

PRESENT:

Councillor J. Pritchard – Chair
Councillor G. Kirby – Vice-Chair

Councillors:

M. Adams, Mrs C. Forehead, L. Harding, G. Johnston, C. Mann, B. Miles, J. Ridgewell and L.G. Whittle.

Outside Bodies:

Mrs S. Miller (Primary Care, Community and Mental Health, Mrs A. Gough (Head of Services of Caerphilly Locality, Palliative Care & Primary Diabetes), Mrs M. Bowley (Deputy Director of Public Health), Mrs T. Deacon (Principal Public Health Specialist – PSB Lead), J. White (Office of Gwent Police and Crime Commissioner) and Ms L.C. Jones (Menter Iaith Sir Caerffili).

Together with:

K. Peters (Policy Manager), V. Doyle (Policy Officer), C. Forbes-Thompson (Scrutiny Manager), M. Jacques (Scrutiny Officer) E. Sullivan (Senior Committee Services Officer)

Also present:

1. APOLOGIES

Apologies for absence were received from Councillors Mrs E.M. Aldworth, K. Etheridge, Mrs E. Forehead, Mrs M.E. Sargent, R. Saralis, J. Taylor together with A. Hussey (South Wales Fire and Rescue Authority), H. Fletcher (Natural Resources Wales) and S. Tiley (GAVO).

2. DECLARATIONS OF INTEREST

There were no declarations of interest received at the beginning or during the course of the meeting.

3. MINUTES – 17TH JANUARY 2019

RESOLVED that the minutes of the Partnerships Scrutiny Committee meeting held on 17th January 2019 be approved as a correct record and signed by the Chair.

REPORTS OF OFFICERS

Consideration was given to the following reports.

4. PARTNERSHIPS SCRUTINY COMMITTEE FORWARD WORK PROGRAMME

Consideration was given to the report which detailed the Forward Work Programme for the Partnership Scrutiny Committee from January 2020 to July 2020.

Following discussion it was agreed that Action Area AA5 - Protecting and Enhancing the Natural Environment be added to the January 2020 meeting and Action Area AA2a - Volunteering and Action Area AA2b - Apprenticeships be added to the July 2020 meeting and subject to those additions the forward work programme be approved and published and by a show of hands this was unanimously agreed: -

RESOLVED that subject to the additions specified above the Forward Work Programme for the Partnerships Scrutiny Committee be approved and published.

5. THE CAERPHILLY PUBLIC SERVICES BOARD ANNUAL REPORT 2018-19 (DIGITAL PRESENTATION)

Members noted that this years Annual Report had been developed using the Microsoft Sway platform, it was explained that this software would allow the digital content of the report to be more interactive and allow various audio and video contributions to be showcased in an effective and user friendly way.

The Policy Officer launched the digital report and highlighted the various functions, links, menus, views and videos that could be accessed. It was noted that as part of the process videos had been commissioned in relation to the delivery of the Wellbeing Plan and these were played. Members were advised that the digital version would also be available in Welsh and a pdf version would be made available for those that preferred a hardcopy and although this version would not have the videos did contain a lot of photographs.

The Officer confirmed that a lot of positive feedback had been received on the new format.

Members sought clarification in relation to the Greenspaces Core Group and the Policy Manager confirmed that she would contact the Group Lead and facilitate a link for the Scrutiny Committee Members interested in attending.

Members congratulated Officers on the format and user friendly nature of the digital platform and in particular the videos which were very effective and asked how the Annual Report would be more widely communicated. Officers confirmed that arrangements had been made to utilise Facebook and Twitter to promote the launch of the Annual Report.

The Partnership Scrutiny Committee noted the new format of the Caerphilly Public Services Board Annual Report 2018-19.

6. GOOD HEALTH AND WELLBEING ACTION PLAN (PRESENTATION)

Mrs M. Bowley, Mrs A. Gough, Mrs T. Deacon and Mrs S. Miller presented Action Area 3 – Good Health and Wellbeing.

In relation to Area Action 3 – Good Health and Wellbeing, Members were advised that there had been huge improvements in life expectancy but there had also been increases in

avoidable conditions for example some cancers, diabetes and poor mental health wellbeing. Unfortunately over the last ten years there had been little impact on health inequalities in terms of the life expectancy between the most and least deprived areas of the county borough. However there had been a drop in the number of people smoking but an increase in adult obesity numbers with 2 out of 3 adults self-reporting as overweight or obese.

In terms of serving the population Members were referred to the locality map and were advised that there were currently 23 GP practices, 22 dental practices, 19 community optometry premises and 43 community pharmacies. It was noted that the PSB still had work to do in relation to health and wellbeing, community services and primary care however Social Services and Primary Care Services were developing approaches together in order to better respond to people's needs.

Clinical Futures Level 1 Strategy was outlined which would concentrate on bringing care closer to home. Led by the Greater Gwent Regional Partnership Board and supported by local Integrated Service Partnership Board to make sure the right care is received at the right time and by the right person. The Health Board's Strategic Plan would concentrate on developing work that takes place across services to support transformational change to deliver a sustainable health and wellbeing system. The key component of this being The Grange University Hospital which would treat the sickest patients and would separate Emergency and Specialist Care from more Routine Care.

Reference was made to the 'Transformation Model' which was the primary care plan for Wales, which strove to streamline services bringing them together in an integrated way; ensuring that there was the right mix of knowledge within teams, connecting to communities to provide successful outcomes.

It was explained that strong and robust partnership working would be vital going forward and new and exciting relationships were being developed with a wider audience and existing relationships have been strengthened. Engagement events have been well attended and have been used to gain consensus on priority local actions and outcomes from these events will be fed into the Action Area Delivery Plan.

With regard to new model delivery, the implementation of Health and Wellbeing Hubs would be a primary initiative going forward and provide the foundation for change. These locally based centres would bring services together in a community focal point. Offering a 'one front door' approach with skilled staff to triage people to appropriate professionals based on their needs. It is envisaged that each Hub would contain an Integrated Services Team made up of therapists, nurses, social workers and care support staff. Greater emphasis will be placed on integrated working as part of a unified team to ensure greater continuity of care. It was noted that Hub proposals have been devised but more work was required in order to ensure that they are in the right place.

The presentation moved on to Priority 3.1 and its aim to improve joint working with an emphasis on prevention to address current and future health challenges. This included the utilisation of local media to promote flu immunisations and 'Choose Pharmacy', screening training for voluntary partners, and promoting the uptake of cervical screening.

It was noted that childhood immunisation was consistent within the first year with 95% vaccinated via the GP. Measles was a concern following European outbreaks and was a clear indicator of the importance of keeping uptake levels up. 95% had completed a full MMR course, which is provided in 2 doses, however there had been a drop in terms of the completion of the second dose and this is now being promoted. In relation to MMR a secondary and primary school programme has been rolled out across Gwent in order to identify those under vaccinated and this will be offered on an annual basis going forward.

In relation to smoking cessation environments, smoke free grounds have been extended around hospitals and new legislation will incorporate children's parks and playgrounds as no

smoking zones. In terms of prevention, existing programmes will continue including the peer initiative in secondary schools. Seven schools are currently participating in the scheme which also encourages the appointment of 'Smoke Free Ambassadors'. Members were advised that support to give up smoking is being provided via 28 pharmacies throughout the borough and have assisted 500 smokers to quit.

Moving on to young people's wellbeing, an on-line package had been developed covering a range of lifestyle topics and key health messages, this format made information easier to maintain and keep up to date. The work of the Healthy Schools Team was acknowledged and their role outlined.

With regard to increasing screening awareness, the Committee were updated on the roll out of a Screening Champions training programme. Individuals have come forward to become Screening Champions and share their learning with friends, family, work colleagues and the local community and promote breast, bowel and cervical screening. Reference was made to a Women's Day event held at Lansbury Park which received very positive feedback and new Champions would be welcomed. It was noted that the age range for bowel cancer screening was being expanded as early identification would lead to better outcomes in terms of diagnosis and treatment.

Investing in the wellbeing of staff is being promoted via the 10 Days to Wellbeing programme, initiatives to encourage flu immunisations for frontline staff across all organisations and changing the content of vending machines in all Health Board premises to healthier choices. Reference was made to the Tir-y-berth project and the positive impact it was having.

With regard to Priority 3.3, providing an integrated system of health, social care and wellbeing closer to home through Neighbourhood Care Networks an update was provided on progress between Health, Local Authorities and the Voluntary Sector. Initiatives included a Small Grants Scheme, Hub Development at Rhymney Integrated Health and Social Care Centre and Bryntirion and future Hub Developments at Aber Valley and Lansbury Park.

Members were advised that the Hub at Rhymney included an 11 bed unit, GP, Dentist, Optician and was viewed as a model of best practice that provided wrap around services around a practice population. Rhymney was noted to be one of most deprived area in the County Borough with a reliance on foodbanks and resident's financial and age restrictions meant they were unable to travel to the wider county borough in order to access services. It was noted that along with health and wellbeing services, housing, debt advice, employment and CAB also provided support from the Hub. Diabetes, weight management, audiology, mental health provision and support for elderly residents have proven to be beneficial and have reduced referrals to secondary services. Feedback from the community has been very positive with opportunities from other partners to come on board.

Moving on to Priority 3.4 to ensure that frontline staff have the necessary skills and expertise to provide joined up services that meet the need of residents. Make Every Contact Count (MECC) was outlined and it was noted that 10% of staff had received MECC skills training. A workshop had been held with partners to raise awareness of what services are available across the locality that residents can access.

In terms of Priorities 3.5 and 3.6 and collaboration with the Regional Partnership Board, Members were advised that Transformation monies had been awarded to improve services in deprived areas. The whole systems approach of Compassionate Communities was outlined and the work being done to create a supportive environment to enable residents to manage their physical, mental and wellbeing needs was confirmed. Work done with Foodwise, Specialist Mental Health Practitioners, Living Well Living Longer and Integrated Wellbeing Networks was detailed.

The Chair expressed his thanks on behalf of the Committee for the comprehensive and

informative presentation and Members questions were welcomed.

Clarification was sought in relation to lifestyle changes and how much impact the initiatives had in this regard given that there had been an increase in obesity levels. The investment required in order to make a behavioural change in relation to food was explained and noted that individual ownership, motivation and commitment played an enormous part in successes but the Health Board were looking at smoking cessation programmes and what could be learned from them and transferred to tackle obesity. However unlike smoking, obesity is much more difficult to tackle as food is an essential part of life.

Members noted the impact of deprivation on health and the direct correlation between income and health wellbeing and mental wellbeing was summarised. It was the intention of integrated approaches to ascertain what connects or motivates the individual and their lifestyle challenges and how the wellbeing networks can make a connection and change that mind set. Reference was made to 'Routes to Wellbeing' these free courses run by Mental Health Services are just one of the programmes working towards change and entry onto these courses did not require a professional referral.

With regard to Clinical Futures, clarification was sought in relation to the new hospital specifically in terms of transportation links. Members were advised that further information on proposed transport links could be circulated following the meeting but were assured that the Health Board were looking at routes in, highways and traffic issues.

Clarification was then sought in relation to the development of Hubs for the Aber Valley and Lansbury areas. Members were advised that plans were to develop 8 models going forward and Lansbury and Aber Valley would definitely be included. At the moment sites were being looked at as the Lansbury Hub could not be progressed until the Aber Valley has been actioned due to essential links between the two. It was explained that Hubs must fit in with existing GP catchment areas. No timescales can be estimated at this time but a business case must be submitted by the end of the year after which suitable premises would need to be identified.

The Scrutiny Committee agreed that transportation links to Hubs and Primary Care sites was vital and expressed concerns that existing transportation provision to the new hospital location was a very complicated route and this must be addressed.

Clarification was sought in relation to the possibility of having a metro stop at the new hospital and Members were assured that this was possible and that their comments would be passed on.

In noting the presentation Members unanimously agreed that the concerns of the Partnership Scrutiny Committee in relation to transport links to the Grange University Hospital should be communicated to the Public Services Board.

7. HALF YEAR PROGRESS UPDATE – THE CAERPHILLY WE WANT WELL-BEING PLAN 2018-2023 (OCTOBER 2018 TO MARCH 2019).

Consideration was given to the report which detailed the half year performance updates as presented to the Caerphilly Public Services Board on the 5th March 2019 and the 4th June 2019.

As agreed with the Scrutiny Committee the reports had been pre-circulated so that representation from the areas identified can attend or respond in writing. Apologies were presented on behalf of Natural Resources Wales who had unfortunately been unable to attend but they would ensure that alternative Officers would be available to attend going forward.

The Scrutiny Committee welcomed Chief Inspector Jason White to the meeting and thanked him for attending.

The responses from Natural Resources Wales in relation to Members questions on Action Area 5 – Protection and Enhance the Natural Environment were tabled. With regard to the Core Spaces Core Group the Policy Manager agreed to facilitate contact with the group regarding representation for elected members and forward details of meeting dates and times through Democratic Services.

In relation to Action Area AA4 – Safer Communities, Members noted a red indicator against the objective to reduce the number of people entering the Criminal Justice System and sought clarification in this regard. DI White confirmed that this was an administrative error and the indicator should be green and advised that a new process had been put in place securing community resolutions and as a result the last 3 quarters had seen a 38% reduction and the expectation was that it would remain consistently at this level.

Clarification was sought in relation to ownership of PSB Communication as there seem to be a lack of public awareness of the Board. The Policy Manager advised that there wasn't a single communication and engagement team but a collaborative responsibility. This was recognised as a challenge but it was felt that there had been a lot of success establishing the PSB brand identity and the Wellbeing Plan particularly as only now tangible changes were being seen. Now that there are tangibles that can be communicated, work will be done to look at raising the profile of the projects being delivered.

In relation to the survey questionnaire, it was noted that this first round had been seen very much as establishing the bench mark on peoples' understanding and awareness of the PSB, this starting point would be tracked over the 5 years of the Wellbeing Plan in order to identify increases in awareness over time. The Officer confirmed that the PSB had not seen a draft of the survey before its distribution as its composition had been an Officer function.

Members were assured that the PSB were keen to involve communities and this had been one of the drivers behind the interactivity of the Annual Report format and it was confirmed that September's meeting would be open to the public. The Scrutiny Committee welcomed public attendance at the meeting but queried how the public would find out about this. The Officer confirmed that social media including Facebook would be utilised. Reference was made to a previous social media campaign which invited Questions for the PSB. Members were advised that unfortunately none had been received and so this had been repackaged with the PSB posting 'what information do you want to communicate to the public'. It was noted that the most effective strands were on the Annual Report.

Councillor John Ridgewell advised that in his role as Chair of Community Council Liaison Sub Committee he welcomed the invitation from the PSB for representatives from Community Councils to present at the next meeting and confirmed that their permanent inclusion on the PSB had been fully supported by the Liaison Sub Committee. The Officer confirmed that membership was a decision for the PSB and explained its current composition.

DI White provided an update on the Community Safety Hub and confirmed that it been very successful with fortnightly partnership tasking taking place in order to identify areas of demand and vulnerability so that Officers could effectively respond. He confirmed that a WASPIE information sharing protocol had been put in place and this had allowed problem solving on a collaborative basis. Members were advised that Torfaen were looking to duplicate this operational model.

The Community and Neighbourhood Operations (CANDO) event that was held in Phillipstown in March had been very successful and was an excellent example of how barriers can be broken down in the hard to reach communities. As a result of this consultation a week of action took place where partners carried out a variety of activities in the area and an action plan had also been developed to prioritise future work.

Gwent Police use of Twitter was discussed and DI White outlined the most successful trends.

Members queried why Facebook wasn't more widely used and were advised that this had been looked at but did not provide the right platform for the intended use. However Facebook had been successfully piloted by 2 Community Safety Officer's in Lansbury Park.

In terms of contacting Gwent Police via social media it was noted that there was a Social Media Desk within the Force Control Room which was resourced 24/7 and Members were assured that they would get a reply within shift.

Having fully considered the Half Yearly Progress Update it was moved and seconded that the report be noted and by a show of hands this was unanimously agreed.

RESOLVED that the report be noted.

The meeting closed at 8:00p.m.

Approved as a correct record and subject to any amendments or corrections agreed and recorded in the minutes of the meeting held on 30th January 2020, they were signed by the Chair.

CHAIR