

GLOUCESTERSHIRE HEALTH & WELLBEING BOARD

MINUTES of a meeting of the Gloucestershire Health & Wellbeing Board held on Tuesday 16 March 2021 at the Virtual Meeting - Web ex meeting.

PRESENT:

Cllr Carole Allaway-Martin (Chair)	Dr Teresa Pietroni Angela Potter
Cllr Richard Boyles	Nikki Richardson
DPCC Chris Brierley	Sarah Scott
Anne Brinkhoff	Dr Andy Seymour (Vice-Chair)
Cllr Tim Harman	Chris Spencer
Mary Hutton	Peter Tonge
Darren Knight	Rob Weaver
Deborah Lee	Peter Williams
David Owen	

Substitutes: Emma Keating Clark (In place of Keith Gerrard)
Donna Potts (In place of Mark Astle)

Officers in attendance: Sue Weaver - Head of Commissioning (Health Improvement)

Apologies: ACC Rhiannon Kirk and Cllr Kathy Williams

1. DECLARATIONS OF INTEREST

No declarations of interest were received.

2. MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on Tuesday 22 September 2021 were agreed as a correct record.

3. PUBLIC QUESTIONS

Two public questions had been received. The following supplementary questions were asked:

Question 1 – Bren McInerney thanked the Board for the response to his question. He did however feel that there was still more to be done on the measures and was concerned that there was not a reference to risk management.

Cllr Allaway Martin, Chair, acknowledged Mr McInerney's concerns agreeing that more needed to be done and that the Board would look at this matter in detail, including the risk management aspects.

Question 2 – Cllr David Willingham (Cheltenham Borough Council) thanked the Board for the response to his question. He thought it important to take a holistic approach. Cheltenham Borough Council could pick up the litter and design out the crime, but this just moved the anti social behaviour elsewhere.

Cllr Allaway Martin acknowledged these concerns and stated that this was an issue that the Board took seriously. (Post meeting note: Cllr Willingham was provided with the contact details for cgl (Change, Grow, Live).)

4. MEMBERS' QUESTIONS

No member questions were received.

5. WHITE PAPER: INTEGRATION AND INNOVATION: WORKING TOGETHER TO IMPROVE HEALTH AND SOCIAL CARE FOR ALL

- 5.1 Mary Hutton, Accountable Officer Gloucestershire Clinical Commissioning Group (GCCG), gave a detailed presentation on the proposals contained in the White Paper: Integration and Innovation: working together to improve health and social care for all. (For information - The presentation slides were uploaded to the council's website and included in the minute book.)
- 5.2 The Board was informed that the aims of the White Paper fitted with the approach and aims already in development in Gloucestershire. It would be important to understand what this would mean for the South West Region as each area has different approaches/outcomes. It was hoped that the legislation would be as permissive as possible with regard to rules and would allow room for local decision making. It would be important not to lose the trusted relationships that have developed across Gloucestershire. A significant issue would be how to operate with regard to specialised commissioning. Gloucestershire was in a good position as it was a test area and was able to input into the guidance as it developed.
- 5.3 In response to a question regarding working with the Welsh NHS it was explained that this was a particular challenge. The GCCG constantly worked with residents in Gloucestershire who were registered with a Welsh GP on issues, and expected that this would continue; it was however important to note that it was not anticipated that there would be a change in the funding formula.
- 5.4 It was also explained that NHS England has been leading on public engagement aspects. Once the legislation had been worked through there would be a wide consultation exercise.
- 5.5 It was noted that the implementation date was April 2022. This was a tight timescale to work to particularly as all the detail was not yet clear.
- #### **6. DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT: BEYOND COVID - RACE HEALTH AND INEQUALITY IN GLOUCESTERSHIRE**
- 6.1 The Executive Director Adult Social Care and Public Health gave a detailed presentation of the report. The Director informed the Board that this report had been written in collaboration with the council's Black Workers Network (BWN). (For information - The presentation slides were uploaded to the council's website and included in the minute book.)
- 6.3 The Covid-19 pandemic had shone a light on the disparities in health outcomes on the black and Asian population. It was anticipated that the data on the disproportionate effect on black and minority ethnic groups would be available in April 2021; it was already clear that there was a high risk of death from Covid-19 compared to the white population. It would be important to understand how communities heard/understood the information communicated about Covid-19.
- 6.4 There was a vibrant community sector in Gloucestershire, utilising a bottom up strengths based approach. It was, however, important to note that these were unpaid volunteers and resources were not available to enable bidding for funds. It would be important to address this issue, and look at how these organisations could continue to be supported.

Minutes subject to their acceptance as a correct record at the next meeting

- 6.5 Board members were aware that there was a debate about whether the term BAME (Black and Minority Ethnic Groups) remained appropriate. It was agreed that it was important to listen to communities to understand how they wished to be referred to. Going forward it would be important to ensure that there was consistency in terminology across partnerships; and that there was collective leadership on this matter.
- 6.6 It was acknowledged that equality impact assessments had had very little impact, and created very little change.
- 6.7 Board members agreed that it was important that organisations reflected the diversity of the community. Members acknowledged that the Board itself was all white, as were many of the senior leadership teams of the organisations on the Board. It would be important to look at how this should be addressed.
- 6.8 The Board welcomed the report and its recommendations. In response to a question it was explained that at present the recommendations sat within the purview of the Executive Director Adult Social Care and Public Health, but that the intention was to embed them within the proposed Race Equality Panel.
- 6.9 It was agreed that an update on progress against the recommendations be received at the next meeting of the Board.
ACTION: Sarah Scott

7. HEALTH INEQUALITIES IN GLOUCESTERSHIRE - COVID-19 AND BEYOND

- 7.1 The Head of Commissioning (Health Improvement) gave a detailed presentation of their report which took stock of where we were in tackling health inequalities in Gloucestershire and updated the Board on progress against key areas of work. Potential gaps were identified and a way forward to address these gaps was proposed. The Board was informed that while some work-streams had been unable to progress as planned during the COVID-19 pandemic, there were many examples of good practice being taken forward. The paper also highlighted the opportunity and necessity to bring these strands together into a more coherent approach and made recommendations as to how this could be moved forward.
- 7.2 The recommendations to the Board included the establishment of Health Inequalities Panel to steer this agenda, supported by the Contain Outbreak Management Fund (COMF) health inequalities posts; the Board was informed that the long term aim of the Panel would be to make itself redundant.
- 7.3 Panel members agreed that the most effective way to address health inequalities was from a prevention approach; an understanding of the root causes of factors involved in the decisions made by people that affected their health and wellbeing. Having the right support in place at the right time would make a significant difference to health outcomes.
- 7.4 In response to a question the Board was assured that although not explicitly stated in the report children and young people were included within this work. It was also noted that the ICS (Integrated Care System) included children and young people. It was agreed that it might be helpful for the work around this group be made more explicit in future communications.
- 7.5 The Board was informed that although a priority for the Board there was currently no funding/resource available to progress the healthy weight programme.

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7.6 The Board agreed to support the recommendation to convene a Health Inequalities Panel to steer this agenda, supported by the Contain Outbreak Management Fund (COMF) health inequalities posts.

8. FUNDING UPDATE

8.1 The Executive Director Adult Social Care and Public Health reminded the Board that the funding challenges for the Board had been presented at the Board meeting on 22 September 2020.

8.2 These challenges remained and the Board would need to look at what funding opportunities were available whereby a bid could be submitted.

8.3 This was an issue that would need to be pursued in the new council.

9. KINGS FUND HEALTHIER COMMUNITIES

9.1 Mary Hutton, Accountable Officer Gloucestershire Clinical Commissioning Group, presented the detail of the successful bid by the Gloucestershire Enabling Active Communities programme to the National Lottery Funding for Healthy Communities Together Programme. (For information - The presentation slides were uploaded to the council's website and included in the minute book.)

9.2 The Board congratulated the team for achieving this outcome, and looked forward to following the progress of this work.

CHAIRMAN

Meeting concluded at 11.55 am