

# GLOUCESTERSHIRE HEALTH & WELLBEING BOARD

MINUTES of the meeting of the Gloucestershire Health & Wellbeing Board held on Tuesday 21 January 2020 commencing at 10.00 am at the Cabinet Suite - Shire Hall, Gloucester.

## PRESENT MEMBERSHIP:

Nigel Adams	Dr Hein Le Roux
Chris Brierley	Sarah Scott
Cllr Tim Harman	Dr Andy Seymour (Vice-Chairman)
Mary Hutton	Chris Spencer
Darren Knight	Rob Weaver
Deborah Lee	Margaret Willcox OBE
Bob Lloyd-Smith	Peter Williams
David Owen	

**Substitutes:** John Campbell (In place of Angela Potter)  
Gavin Roberts (In place of Wayne Bowcock)

**Apologies:** Cllr Richard Boyles, Anne Brinkhoff, Wayne Bowcock and ACC Craig Holden

**Also in attendance:** Dame Janet Trotter  
Andy Dempsey - Director of Partnerships & Strategy  
John James - Strategic Intelligence Manager

### 1. TRIBUTE TO CLLR ROGER WILSON

The Vice Chair led the Board in a tribute to Cllr Roger Wilson who had chaired the Health and Wellbeing Board from 13 July 2017 until his death on Sunday 8 December 2019. Members of the Board held a minute silence to reflect on their personal memories of Roger.

### 2. DECLARATIONS OF INTEREST

No declarations of interest were received.

### 3. MINUTES OF THE PREVIOUS MEETING

No public questions were received.

### 4. PUBLIC QUESTIONS

No public questions were received.

### 5. MEMBERS' QUESTIONS

No members' questions were received.

### 6. HEALTH AND WELLBEING BOARD MEMBERSHIP

6.1 The Vice Chair informed the Board that the Primary Care Network representative would be Dr Hein le Roux. Primary Care Networks were evolving and once more established the representative on the Board could be reconsidered.

6.2 The Board agreed to note the changes in membership; and that the changes be submitted to the county council's Constitution Committee in order to update the council Constitution.

## **7. LONG TERM PLAN UPDATE**

- 7.1 The Accountable Officer, Gloucestershire Clinical Commissioning Group (GCCG), presented an update on the progress of development of the Long Term Plan – One Gloucestershire Approach. (For information the presentation slides were uploaded to the council website and included in the minute book.)
- 7.2 The Board welcomed the update and that the plan included reducing inequalities, and an increased prominence of children and young people's needs. Members agreed that this represented a robust approach to planning, and that it reflected an understanding of the level of need in the county and how to respond. It was also good to be able to see the synergy with the Joint Health and Wellbeing Strategy.
- 7.3 There were concerns as to the affordability of the plan and recognised that there would be difficult decisions to be made going forward. It would be important for the Board to have a role in deciding what the overarching ambitions would be. It was acknowledged that all partners would need to make the most effective use of the resources available to them.
- 7.4 The Board noted the update and would consider whether to receive the delivery plans at future meetings.

## **8. REPORT FROM THE GLOUCESTERSHIRE HEALTH AND WELLBEING BOARD AND SAFER GLOUCESTERSHIRE DEVELOPMENT SESSION ON 5 NOVEMBER 2019**

- 8.1 Board members who had attended the joint development session agreed that it had been a worthwhile exercise, and agreed to hold another joint session at the end of the year.
- 8.2 The Board agreed to the recommendations in the report, in particular the need to rationalise the number of sub groups in operation. The Board asked that the Director of Public Health and the Deputy Police and Crime Commissioner take these points away and submit an update report to the next meeting of the Board on 17 March 2020.

## **9. FINALISATION OF THE GLOUCESTERSHIRE HEALTH AND WELLBEING STRATEGY**

- 9.1 In response to questions and mindful of the new Board members present the Director of Public Health (DPH) informed the Board of the process undertaken to develop this strategy and the number of iterations that the strategy had been through; they also assured Board members that the focus of the strategy was about where the Board could add value.
- 9.2 Whilst acknowledging the work that had gone into the development of the strategy there was a view that, given the declared climate change crisis and its impact on health and wellbeing, consideration should be given to referencing this in the strategy. The Board was informed that Leadership Gloucestershire had received a paper on climate change at its last meeting (19 December 2019). The Accountable Officer (GCCG) stated that it would be helpful for Leadership Gloucestershire to consider the role of the Board in its discussions on this matter.
- 9.3 The DPH informed members that the Air Quality Group reported into the Board with an update due on 17 March 2020. The scope of this report could be expanded to include information on the system wide approach to climate change in order to gain a detailed understanding of what the current position is with regard to planned activity and where the Board could add value.

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

- 9.4 It was commented that rather than just see the NHS as the 'anchor institution' for health inequalities that all organisations should consider their role in this regard. It was agreed that this issue needed further exploration and was one that the Board could look at in depth at a future development meeting.
- 9.5 It was suggested that the Health members of the Board identify a lead for the mental wellbeing element of the strategy.
- 9.6 In response to a question it was explained that the data in the strategy was current, but that ahead of the publication of the final version officers would do a final check to ensure that the most up to date information was included in the strategy document.
- 9.7 It was agreed that the Board should consider its role in the climate change agenda and that the strategy would not be signed off until there has been the opportunity to do this. It was agreed that the strategy would come back to the meeting on 17 March 2020.

## **10. CHILDREN'S HEALTH AND WELLBEING STRATEGY AND CHILD FRIENDLY GLOUCESTERSHIRE**

- 10.1 Board members were in full support of this programme of work and agreed that it was important to ensure that there was sufficient focus on outcomes for children and young people.
- 10.2 The Board acknowledged that this work needed to be dynamic and ensure that young people were active participants in its development. Children could not wait for this work to happen – a year was a long time in the life of a child/young person; the work needed robust timelines to drive it forward.
- 10.3 In response to questions and comments it was made clear that no one was saying that there was not a lot of work already in place; the difference here was the specific focus on outcomes and the need to be clear about where high impact changes could be achieved. Nothing could start until there was a coherent vision statement.
- 10.4 The Board therefore agreed:
- To the convening of a working group of sector and agency leads to develop a draft strategy for approval in principle by the Gloucestershire Health and Wellbeing Board prior to a wider consultation and engagement exercise over the early summer 2020. The aim being to bring back a draft document to the next meeting of the health and Wellbeing Board
  - To continue to work with Child Friendly Gloucestershire to explore how the lived experience of children and young people can inform the development of any vision/plan and in its delivery over time.

## **11. JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) REFRESH**

- 11.1 The Board agreed that good intelligence was an essential building block for local health planning, and would have a significant role in the development of the One Gloucestershire Way. How to share this data in an open and accessible manner was an important factor.
- 11.2 The Board therefore agreed to delegate the authority for developing this approach to the JSNA working group to develop the new JSNA.

**CHAIRPERSON**

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Meeting concluded at 11.37 am