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West Sussex Health and Wellbeing Board

A meeting of the Committee will be held at **10.30 am** on **Thursday, 25 April 2024** at **County Hall, Chichester, PO19 1RQ**.

The meeting will be available to watch live via the Internet at this address:

http://www.westsussex.public-i.tv/core/portal/home.

Tony Kershaw

Director of Law and Assurance

Agenda

10.30 am 1. Chairman's Welcome

10.40 am 2. **Declaration of Interests**

Members and officers must declare any pecuniary or personal interest in any business on the agenda. They should also make declarations at any stage such an interest becomes apparent during the meeting. Consideration should be given to leaving the meeting if the nature of the interest warrants it; if in doubt contact Democratic Services before the meeting.

3. Urgent Matters

Items not on the agenda that the Chairman of the Board is of the opinion should be considered as a matter of urgency by reason of special circumstances.

4. **Minutes** (Pages 5 - 16)

The Board is asked to confirm the minutes of the meeting of the Health and Wellbeing Board held on 25 January 2024.

10.45 am 5. Actions and Recommendations Tracker (Pages 17 - 22)

The Board is asked to monitor/note the responses to Recommendations and Actions made at the meeting on 25 January 2024.



17 April 2024

10.50 am 6. **Children First Board** (Pages 23 - 26)

The Children First Board, being accountable to the West Sussex Health and Wellbeing Board, as a sub-group of the Board, will provide a formal update at its quarterly public meetings.

11.05 am 7. **West Sussex Health and Wellbeing Board Development** (Pages 27 - 32)

Following the Health and Wellbeing Board's Developmental Workshop on Monday, 11 March, the Director of Public Health will present a summary report including recommendations and next steps.

11.30 am 8. **Public Health Update**

The Director of Public Health will provide a verbal update.

11.40 am9.West Sussex Strategic Housing Group Update (Pages 33 -
38)

The Chief Executive, Crawley Borough Council will provide an update.

11.50 am 10. Integrated Care System Update (Pages 39 - 48)

A report will be provided to the Board on the key changes to the proposed Terms of Reference of the Sussex Health and Care Assembly by the current Chairman of the Assembly.

12.05 pm 11. **Better Care Fund** (Pages 49 - 58)

This paper provides an update on Better Care Fund (BCF) Planning for 2023 -24 and summarises performance against the Better Care Fund national metrics for Quarter 3 2023-24.

12.15 pm 12. Health & Wellbeing Board Work Programme 2024-25 (Pages 59 - 60)

To note the draft work programme for 2024/25 as attached.

Members of the Board are requested to mention any items which they believe to be of relevance to the business of the Health and Wellbeing Board.

If any member puts forward an item the Board is asked to assess briefly whether to refer the matter to the Chairman to consider in detail for future inclusion.

12.20 pm 13. Date of next Meeting

The next meeting of the Board will be held at 10.30am on 11 July 2024.

To all members of the West Sussex Health and Wellbeing Board

Webcasting

Please note: this meeting is being filmed for live and subsequent broadcast via the County Council's website on the internet. The images and sound recording may be used for training purposes by the Council.

Generally the public gallery is not filmed. However, by entering the meeting room and using the public seating area you are consenting to being filmed and to the possible use of those images and sound recordings for webcasting and/or training purposes.

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West Sussex Health and Wellbeing Board

25 January 2024 – At a meeting of the West Sussex Health and Wellbeing Board held at 10.30 am at County Hall, Chichester, PO19 1RQ.

Present: Cllr Lanzer (Chairman),

Cllr Amanda Jupp, Cllr Jacquie Russell, Alan Sinclair, Alison Challenger, Emily King, Chris Clark, Pennie Ford, Catherine Howe, Helen Rice, Annie Callanan, Cllr Garry Wall, Dan Charlton, Roxanne Smith, Ian Duke, Kirstie Thomas, Laura Mallinson, Dr Amy Dissanayake, Katie Rabone and Zoey Harries

Apologies: Siobhan Melia, Jessica Sumner (sent representative), Dr Angela Stevenson and Lucy Butler (sent representative).

Also in attendance: Chris Robson (Independent Chairman WSSCP), Samantha Taplin (Public Health Consultant) and Nicola Rosenberg (Public Health Consultant)

Part I

13. Chairman's Welcome

13.1 The Chairman welcomed attendees to the meeting with particular mention of the Board's new Members; Ian Duke, Chief Executive Officer, Crawley Borough Council, Dan Charlton, Chief Communications Officer Sussex Partnership NHS Foundation Trust and Roxanne Smith, Chief Strategy Officer, University Hospitals Sussex NHS Foundation Trust. The third voluntary sector representative for this meeting was announced as Kirstie Thomas, Chief Executive Officer 4Sight Vision Support.

13.2 In his welcome, the Chairman highlighted the following key points:

- Following the Notice of Motion regarding defibrillators moved and backed by West Sussex County Councillors at the County Council meeting on Friday 26 May 2023, the Chairman was pleased to update that several actions had taken place since to increase county-wide coverage and accessibility of the devices, including; issuing a press release, writing to town and parish councils highlighting the opening of the grant application process for the Department of Health and Social Care's (DHSC's) £1 million Community Automated External Defibrillators (AEDs) Fund, writing to West Sussex schools encouraging the registration of devices on The Circuit, and moving defibrillators maintained by the Council's Facilities Management team to external locations (where possible), enabling 24 hour community access, and delivered internal staff communications to raise awareness.
- Building on communications messages over the last year, the Chairman informed that the council's Public Health and Communications teams had continued to develop the **County Council's all-age mental health communications campaign** which would run until March 2024, aiming to raise community

awareness of mental health, signpost to sources of information and support, and to challenge the persistent stigma of mental illness. As part of this approach, a dedicated campaign page <u>'Your mental</u> <u>health – West Sussex'</u> on the Council's website had been developed to enable residents to find the information they need to help their emotional wellbeing and mental health. Additionally, there would be regular social media messaging and residents' enewsletter articles, ongoing promotion of <u>Your Mind Matters</u>, <u>'Don't</u> <u>brush it under the carpet'</u> and the <u>'Warning Signs'</u> initiative.

 The Chairman announced that the new countywide West Sussex housing support service for those recovering from substance misuse was officially launched last Friday, 19 January. Keynote speakers Professor Dame Carol Black and Professor Michael Preston-Shoot headlined the event, which was hosted by the County Council and Alcohol Change UK.

14. Declaration of Interests

14.1 There were no declarations of interest.

15. Minutes

15.1 It was resolved that the minutes of the West Sussex Health and Wellbeing Board Meeting held on 29 July 2023 be approved as a correct record and be signed by the Chairman.

16. Actions and Recommendations Tracker

16.1 The Board considered the Actions and Recommendations Tracker (copy appended to the agenda available on the council's website) which had been updated from the last meeting on 20 July 2023. All items were noted as completed or in progress with no outstanding actions or recommendations.

17. West Sussex Safeguarding Children's Partnership Annual Report

17.1 Chris Robson, Independent Chairman of the West Sussex Safeguarding Children Partnership (WSSCP) presented the <u>West Sussex</u> <u>Safeguarding Children Partnership's (WSSCP) annual report</u>, April 2022 to March 2023 to the Board for noting. The following key points were made;

- Recognition and thanks were given to the strategic leaders and practitioners who work hard to deliver good outcomes for families and children in West Sussex.
- The annual report highlighted achievements as well as improvements and was aligned to the Joint Health and Wellbeing Strategy priority areas of improved mother and baby wellbeing, children growing in a safe and healthy home environment with supporting and nurturing parents and carers, good mental health for all children and children and young people leaving care are healthy and independent.

- The annual report preceded new legislation under Working Together to Safeguard Children 2023. The revised statutory guidance meant that the WSSCP would be required to report to the Department of Education by 30 September for the business year April 2023 to March 2024).
- The WSSCP continued to focus on neglect, exploitation, significant learning on suicide prevention, improving transitions from child to adult services as well as improving multi agency working.
- It was noted that lay membership was crucial to the success of the WSSCP and members of the community were currently being recruited as lay members on the partnership.

17.2 Councillor Jacquie Russell as Cabinet Member for Children, Young People and Learning thanked the WSSCP Independent Chairman for his report and echoed the sentiment of thanks to social workers, leaders and partners for all their hard work in going above and beyond for children and families in West Sussex. Whilst understanding that a continued striving for excellence was necessary, Councillor Russell emphasised that the council and its partners recognised the importance of capturing the voice of the child and had been working to put this at the centre of all processes. The Early Help Service had been redesigned and was now delivering better outcomes. This improvement had been reflected in the latest OFSTED report.

17.3 In receiving this report the Board;

- praised the multi-agency triage approach for children deemed to be at risk of self-harm/suicide as an exemplary piece of partnership work, acknowledging the award received from the HSJ Patient Safety Awards of 'Mental Health Initiative of the Year'.
- noted the WSSCP key achievements including the 'Dad Pad'/Co-Parent Pad aimed at first time parents to provide valuable advice and support. The WSSCP had been widely advertising this service and would be assessing impact but present feedback had been positive.
- recognised the challenge of needing to hear the voice of the child with the WSSCP relying heavily on the local authority and the voluntary sector. National learning reviews were also seen as important to continuous improvements.
- acknowledged Safeguarding in West Sussex is not perfect but it is a very important cultural aspect of West Sussex County Council that has the commitment and drive to strive for excellence.
- 17.4 The Health and Wellbeing Board resolved that;
 - i. the contents of this report be noted; and
 - ii. the forthcoming legislative changes, under revised statutory guidance Working Together to Safeguard Children 2023, (issued by the Department for Education in December 2023) be noted with acknowledgement that this means that the WSSCP will be required to report to the DfE by 30 September 2024 on the preceding business year (April 2023-March 2024) on several new criteria such as providing "evidence of how safeguarding

partners are ensuring the adequate representation and input of education at both the operational and strategic levels of the arrangements".

18. Public Health Update

18.1 The Director of Public Health provided verbal updates on current public health matters as follows;

- The West Sussex Health and Wellbeing Board had accepted an offer of support, to all Health and Wellbeing Boards, from the Local Government Association (LGA) to develop the board in the context of the emerging NHS Integrated Care System. It was noted that all Health and Wellbeing Board Members had an individual feedback session with LGA associates to help inform the Board's private development workshop on 11 March 2024. Board members were thanked for their valued engagement and helpful conversations. This had enabled the LGA to scope the support that the project needed to help the board embark on this work.
- It had been recognised that coastal health inequalities were producing serious health challenges with the risk of further poor health outcomes in coastal areas. It had been decided to assess coastal communities health needs separately using intelligence work and evidence. A draft framework had been formed to look at analysis and best practice and this would be published on the <u>West Sussex Joint Strategic Needs Assessment (JSNA) Website</u>. Any feedback on this matter would be required by 16 February 2024.
- On 19 January, the UK Health Security Agency (UKHSA) declared a national measles incident in England due to increases cases of Measles and a drop in vaccine uptake. All areas across the country have been placed on alert and are reminding residents to take up the offer of the MMR vaccine (if unvaccinated). The Director of Public Health confirmed that there had been no outbreak in West Sussex but the council was encouraging residents to receive two doses of MMR vaccine that will provide maximum cover.
- 18.2 The Chairman thanked the Director of Public Health for the updates.

19. West Sussex Suicide Prevention Framework and Action Plan 2023-2027, and Sussex Suicide Prevention Strategy and Action Plan 2024-2027

19.1 The Board received the final West Sussex Suicide Prevention Framework and Action Plan 2023 – 2027 (including Year 1 action plan to April 2024), and the Sussex Suicide Prevention Strategy and Action Plan 2024 – 2027, following the progress update presented to the Health and Wellbeing Board on 27 April 2023.

19.2 In presenting this report, the Director of Public Health and WSCC Consultant in Public Health provided an update on the actions being taken

to reduce and prevent the risk of death by suicide across West Sussex. The following key points were highlighted;

- The Sussex Suicide Prevention Strategy and Action Plan 2024-2027 builds on local learning and aligns with the national strategy as a multi-agency partnership strategy. It was noted that all organisations represented on the West Sussex Health and Wellbeing Board had been involved in the strategy's development as a large piece of collaborative work.
- It was acknowledged that suicide is a serious public health problem. The strategy, informed by data and evidence, aimed to reduce the suicide rate over the next 5 years – with initial reductions observed within half this time or sooner, improve the support for people who have self-harmed, improve the support for people bereaved by suicide.
- It was noted that a more detailed action plan underpinned the public facing action plan with the aim of supporting early action across a range of settings to prevent people reaching crisis point. Board Members were informed that the Sussex Suicide Prevention Steering Group, a multi-agency partnership group, will oversee the delivery of the strategy and action plan.

19.3 In receiving this report, Board Members commented on both the West Sussex Suicide Prevention Framework and Action Plan 2023-2027. Board Members;

- welcomed this comprehensive strategy and action plan,
- stated the importance of the role of the GP and timely referrals at place level,
- emphasised the need for all partners to develop the skills, knowledge and confidence to provide necessary support and intervention,
- recognised the need for targeted prevention to vulnerable groups, especially those at higher risk such as children and young people, middle-aged men, people who have self-harmed, people with mental illness and the homeless, amongst others,
- suggested that employers are made aware of suicide prevention matters and how they can support their work force,
- acknowledged that targeted communications assisted outreach to vulnerable groups such as men and the homeless,
- noted the strategy and action plan's ethos that suicide is everybody's business with joint responsibility and accountability for delivery of action at a local level,
- commented that the governance surrounding the strategy and action plan should be robust to enable activity to take place in the right spaces such as food banks. The Health and Wellbeing Board would form part of the required governance looking at accountability and progress,
- discussed how the Integrated Care System (ICS) could build this thinking into the network of community teams, recognising the scope for involving a wider spread of partners such as local businesses, using district and borough connections, utilising communication teams,

- advised that Public Health were carrying out an all-age public Mental Health Needs Assessment, engaging stakeholders, to inform the Joint Strategic Needs Assessment,
- supported the view that it was critically important to improve system learning, considering several population groups that face an increased risk of suicide, such as loneliness and social isolation. The data and evidence gathered as part of the needs assessment will identify population need and services to meet that need, including preventative approaches,
- highlighted the LGBTQ+ community as a high risk of suicide in young people, advocating awareness around this, supporting education in schools, for GPs and using local community networks to link to the vulnerable,
- agreed the need to improve and strengthen signposting as a system approach, increasing awareness of where to go for support,
- were assured that links with the Safeguarding Adults Board would be enriched and welcomed the presentation on the West Sussex Suicide Prevention Framework and action plan 2023-27 at the next Safeguarding Adults Board meeting. It was agreed that the Independent Chairman of the Safeguarding Adults Board and the Public Health Consultant lead for mental health would engage on positive outcomes.

19.4 In turning to the report's recommendations, Councillor Amanda Jupp moved to make an amendment to add a fifth recommendation to reflect discussion. This was seconded by the Chairman and agreed by those present.

- 19.5 The Health and Wellbeing Board resolved that;
 - i. the West Sussex Suicide Prevention Framework and Action Plan 2023 – 2027 be approved;
 - the Sussex Suicide Prevention Strategy and Action Plan 2024 –
 2027 and its alignment with the West Sussex Suicide Prevention Framework and Action Plan 2023-2027 be noted;
 - the significant impact that implementation and delivery of both the framework, strategy and their action plans can have on reducing the risk of suicide in West Sussex and Sussex-wide is recognised;
 - iv. how the West Sussex Health and Wellbeing Board, as key systems leaders, can support this approach to reducing the risk of suicide across our local population, to maximise our collaboration and impact had been considered during this meeting; and
 - v. the West Sussex Suicide Prevention Framework and Action Plan 2023-2027, and Sussex Suicide Prevention Strategy and Action Plan 2024-2027 be presented to the Health and Wellbeing Board, on an annual basis, for review.

20. Developing a strategic approach to food and nutrition across West Sussex

20.1 The Board received a report and presentation (copy appended to the agenda available on the council's website) that set out the intention and need to develop a strategic approach to food and nutrition across West Sussex.

20.2 In presenting the report the following key points were made ;

- It was proposed that a West Sussex Food and Nutrition Strategic Framework for system wide action, be developed across all partners with an interim action plan to tackle the food environment and impact on population food consumption in the county.
- To assess population need a West Sussex Food and Nutrition Needs Assessment would be undertaken.
- The <u>NHS Eatwell Guide</u> was presented which detailed how to achieve a balanced diet as well as maintaining hydration.
- It was noted that the food people eat is an important aspect of health and wellbeing with diet being the leading cause of avoidable harm to health. In 2019, there had been 60,000k deaths in England attributed to poor diet. Malnutrition included those with undernutrition as well as overnutrition.
- low fruit and vegetable consumption had been found more likely in those living in the most deprived areas It was also informed that the UK population eats more highly processed foods than any other European country and UK children aged 11-18 consumed more than double the recommended limit of free (added) sugars in 2016-19.
- 20.3 In receiving this report and presentation Board Members;
 - recognised the impact of cost of living pressures as well as the critical issue in ensuring all residents have access to healthy food especially where deprivation exists. The importance of the quality of available food was referenced, for example, items provided in food banks,
 - agreed that reducing health inequalities would be at the heart of this strategic approach to food and nutrition,
 - referenced the environment and the need to rethink food waste,
 - noted the link between malnutrition and FALLS in the older population (as a possible contributory factor) and how healthy food would support FALLS prevention work,
 - acknowledged that those partners providing food were under pressure to supply healthy meals despite the cost of living impact on food prices,
 - suggested that a strategic approach could be used to influence the food landscape and behaviour for better outcomes; such as healthy eating to prevent loss of muscle mass,

- discussed the need to provide healthy messaging to Early Years environments where young parents/carers could be supported with how to cook healthy meals on a low budget and ensure children start with a healthy diet,
- advocated engaging with Farm Shops and other suppliers to make access to healthy, locally produced, food easier,
- acknowledged the complexity of support for parents/carers in their provision of freshly cooked meals when they may physically have low energy or be concerned about meeting the energy costs to pay for meal preparation,
- reminded of the quality standards that caterers and West Sussex County Council are required to meet in the provision of school catering,
- advised of the opportunities to engage with residents through community at place level such as libraries providing information on how to avoid food wastage and healthy eating, whilst strategically capturing the voice of all those who work with communities,
- considered other health inequalities including groups facing barriers to safely preparing food at home such as the needs of parents/carers who were homeless or living in insecure housing and those living with disabilities.

20.4 In concluding the item, the Chairman welcomed this important work that aimed to optimise the health benefits from food consumption in the population of West Sussex. It was recognised that the strategic approach to Food and Nutrition would need to incorporate a facilitating role. Board Members were informed that a progress update would be presented to the Health and Wellbeing Board at the next meeting on 25 April 2024.

20.5 The Health and Wellbeing Board resolved that;

- i. feedback had been provided on the proposed West Sussex Food and Nutrition Strategic Framework for implementing a whole systems approach across the county;
- ii. the proposed approach to address the complex food and nutrition landscape in West Sussex, including prioritising actions within an interim action plan to tackle the food environment and impact on population food consumption in the county, undertaking a West Sussex Food and Nutrition Needs Assessment to inform the development of the West Sussex Food and Nutrition Strategic Framework, and reviewing best practice evidence, be endorsed;
- iii. the intentions for this strategic approach be discussed by Board Members with their organisations to consider how to engage with the development of the interim action plan, needs assessment and strategic framework going forward to maximise this collaborative approach; and
- iv. the significant impact this proposed whole systems approach across West Sussex could have on improving the health of the local

population and reducing inequalities across the life course (all ages), be recognised.

21. Better Care Fund

21.1 Chris Clark, WSCC Assistant Director (Health Integration), and Joint Strategic Director of Commissioning (West Sussex) NHS Sussex Integrated Care Board presented the Better Care Fund report to the Board. The paper provided an update on Better Care Fund (BCF) Planning for 2023-25, the Q2 Quarterly Report for information, and summarised performance against the Better Care Fund national metrics for Quarter 2 2023-24. It was noted that the Quarter 3 Quarterly Report was not ready and would be presented with the papers at the next meeting on 25 April 2024.

21.2 In receiving this report, members were informed that in reviewing the second year there had been no substantial changes to the schemes that the BCF funds from the first year.

21.3 It was noted that National Planning Guidance had not yet been received. The report confirmed that West Sussex continued to meet national conditions as follows:

- Jointly agreed plan
- Implementing BCF Objective 1: Enabling people to stay well, safe and independent at home for longer
- Implementing BCF Objective 2: Providing the right care in the right place at the right time
- Maintaining NHS's contribution to adult social care and investment in NHS commissioned out of hospital services

It was also confirmed that the BCF Section 75 agreement had been approved by the council.

21.4 In turning to BCF performance Quarter 2 2023-24 the board were supplied with the 5 national metrics:

- **Metric 1**: Long term support needs of older people (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population.
- **Metric 2**: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services.
- **Metric 3**: Unplanned hospitalisation for chronic ambulatory care sensitive conditions.
- **Metric 4**: Discharge to usual place of residence.
- **Metric 5**: Emergency hospital admission due to falls (aged 65 and over)

21.5 It was advised that metrics 1, 3 and 4 had been achieved but 2 and 5 had not been achieved. It was pointed out that it was difficult to collect accurate data for metric 2 as this data related to residents not directly

cared for by WSCC. Board members were informed that discussion was taking place with other system users to see how this could be overcome.

21.6 The Board was asked to stay sighted on emergency hospital admissions due to falls. It was reminded that preventing falls was a multi-agency challenge and an important issue for the Health and Wellbeing Board to remain sighted on.

21.7 Board members discussed the issue of falls and welcomed coordination across partners. It was acknowledged that Age UK had a five year falls strategy and was in a position to collect data to help provide an evidence base for targeted work. This was welcomed by Chris Clark, the WSCC Assistant Director (Health Integration), and Joint Strategic Director of Commissioning (West Sussex) NHS Sussex. It was asked if falls data could be split between those falling inside and those falling outside of the home. It was confirmed that this request would be explored to see if data could be presented in this way.

21.8 The Health and Wellbeing Board resolved that the Better Care Fund (BCF) Planning for 2023-25, the Q2 Quarterly Report and the summarised performance against the Better Care Fund national metrics for Quarter 2 2023-24, be noted.

22. Sussex Integrated Care System Verbal Update

22.1 Pennie Ford, Executive Managing Director West Sussex NHS Sussex, verbally updated the board on the Integrated Care System, for information.

22.2 Board members were reminded that last year following the establishment of the Sussex Integrated Care System (ICS), partners agreed the Sussex Health and Care Strategy 'Improving Lives Together' and the Shared Delivery Plan (SDP). Further to that NHS Sussex Integrated Care Board (ICB) has developed a "target operating model" and established an organisational change programme in order to redesign the structure around delivery of the SDP. It was informed that in addition there is a national requirement to reduce the administrative running costs of the ICB by 30%. As a result, a process of change was underway to deliver the Strategy whilst reducing running costs.

22.3 It was noted that organisational change had commenced with the Executive Team in December 2023 and had currently moved to the Senior Leadership Team. The number of senior leads would be significantly reduced. The restructure would be completed with a staffing review of the rest of the organisation from February to April 2024.

22.4 It was informed that, as part of overall change, the programme would focus on positive health outcomes, making decisions based on data and intelligence and this would shape how the NHS continued to work with system partners.

22.5 Board members were advised that NHS England had not yet issued planning guidance for 2024-25 although a letter had been sent to

Integrated Care Boards setting out expectations. A work programme was in place, driven by the Improving Lives Together Strategy, which would target population health needs especially in areas with health inequalities.

22.6 It was recognised that there were a number of areas that required improvement and prioritisation would be set around the areas where performance targets were not being met. This could mean difficult choices would need to be made to provide the best population health outcomes within the resources available.

22.7 The Sussex Health and Care Assembly, a statutory joint committee between the NHS and local government, made up of three councils (*West Sussex County Council, East Sussex County Council and Brighton and Hove Council*) had met five times since its establishment in 2022. As initially requested by the committee, a review of the Assembly's effectiveness, at the end of its first year, was being undertaken. As a member of the Sussex Health and Care Assembly the Chairman of the Health and Wellbeing Board, Cllr Bob Lanzer, stated that the assembly membership would be slightly reduced and once the new structure had been finalised Health and Wellbeing Board members would be informed.

22.8 In discussing this verbal update, it was recognised that partners, represented at the Health and Wellbeing Board, were working in a constrained financial environment and needed to have open conversations to coordinate financial planning and collectively make the right decisions to avoid unintentional impacts on partners. It was suggested that the Health and Adults Social Care Scrutiny Committee may wish to take an interest.

22.9 The Chairman thanked Pennie Ford, the Executive Managing Director West Sussex NHS Sussex for this update.

23. Health & Wellbeing Board Work Programme 2023-24

23.1 The Chairman presented the Health and Wellbeing Board Work Programme 2023 -2024 which was noted as in draft.

23.2 The item proposed, during this meeting, to update on the progress of developing the strategic approach to Food and Nutrition across West Sussex at the next meeting on 25 April 2024 was added to the work programme.

23.3 Resolved – that the Health and Wellbeing Board draft Work Programme 2023-2024 be noted.

24. Date of next Meeting

24.1 The date of the next meeting of the Board was confirmed as 10.30am on 25 April 2024.

Agenda Item 4

The meeting ended at 12.32pm.

Chairman

West Sussex Health and Wellbeing Board (HWB) Action and Recommendations tracker

The action and recommendations tracker allows the HWB to monitor responses, actions and outcomes against their recommendations or requests for further action. The tracker is updated following each meeting and circulated to Board Members electronically. Once an action/recommendation has been completed, it will be removed from the tracker.

Recommendation/ Action Topic	Meeting (date raised)	Recommendation/ Action	Responsible Officer/ Member	Follow up	Response/ Progress/ Deadlines	Status
Sussex Integrated Care System	25.1.24	Action: In discussing this verbal update, it was recognised that partners, represented at the Health and Wellbeing Board, were working in a constrained financial environment and needed to have open conversations to coordinate financial planning and collectively make the right decisions to avoid unintentional impacts on partners. It was suggested that the Health and Adults Social Care Scrutiny Committee (HASC) may wish to take an interest.	Cllr Garry Wall/Rachel Allan (Senior Advisor to HASC)	With HASC	HASC to be alerted at their Business Planning meeting on 1 May and HWB will be updated.	Completed
Better Care Fund	25.1.24	The Health and Wellbeing Board resolved that the Better Care Fund (BCF) Planning for 2023-25, the Q2 Quarterly Report and the summarised performance against the Better Care Fund national	Chris Clark	N/a	N/a	Completed

Recommendation/ Action Topic	Meeting (date raised)	Recommendation/ Action	Responsible Officer/ Member	Follow up	Response/ Progress/ Deadlines	Status
		metrics for Quarter 2 2023-24, be noted.				
Developing a strategic approach to food and nutrition across West Sussex	25.1.24	 (1) feedback had been provided on the proposed West Sussex Food and Nutrition Strategic Framework for implementing a whole systems approach across the county; (2) the proposed approach to address the complex food and nutrition landscape in West Sussex, including prioritising actions within an interim action plan to tackle the food environment and impact on population food consumption in the county, undertaking a West Sussex Food and Nutrition Needs Assessment to inform the development of the West Sussex Food and Nutrition Strategic Framework, and reviewing best practice evidence, be endorsed; (3) the intentions for this strategic approach be discussed by Board 			Update on progress item added to Agenda for 25.4.24 meeting.	Completed
		Members with their				

Recommendation/ Action Topic	Meeting (date raised)	Recommendation/ Action	Responsible Officer/ Member	Follow up	Response/ Progress/ Deadlines	Status
		organisations to consider how to engage with the development of the interim action plan, needs assessment and strategic framework going forward to maximise this collaborative approach; and				
		(4) the significant impact this proposed whole systems approach across West Sussex could have on improving the health of the local population and reducing inequalities across the life course (all ages), be recognised.				
		Action – update the HWB on progress at the next meeting on 25.4.24				
West Sussex Suicide Prevention Framework and Action Plan 2023- 2027, and Sussex Suicida Prevention	25.1.24	 (1) the West Sussex Suicide Prevention Framework and Action Plan 2023 – 2027 be approved; 	Alison Challenger, Director of Public Health	N/a	N/a	Completed
Suicide Prevention Strategy and Action Plan 2024-2027		(2) the Sussex Suicide Prevention Strategy and Action Plan 2024 – 2027 and its alignment with the West Sussex Suicide Prevention Framework				

Recommendation/ Action Topic	Meeting (date raised)	Recommendation/ Action	Responsible Officer/ Member	Follow up	Response/ Progress/ Deadlines	Status
		 and Action Plan 2023- 2027 be noted; (3) the significant impact that implementation and delivery of both the framework, strategy and their action plans can have on reducing the risk of suicide in West Sussex and Sussex-wide is recognised; (4) how the West Sussex Health and Wellbeing Board, as key systems leaders, can support this approach to reducing the risk of suicide across our local population, to maximise our collaboration and impact had been considered during this meeting; and (5) the West Sussex Suicide Prevention Framework and Action Plan 2023-2027, and Sussex Suicide Prevention Strategy and Action Plan 2024-2027 be presented to the Health and 				
		Wellbeing Board, on an annual basis, for review.				

Recommendation/ Action Topic	Meeting (date raised)	Recommendation/ Action	Responsible Officer/ Member	Follow up	Response/ Progress/ Deadlines	Status
West Sussex Safeguarding Children's Partnership Annual Report	25.1.24	 (1) the contents of this report be noted; and (2) the forthcoming legislative changes, under revised statutory guidance – Working Together to Safeguard Children 2023, (issued by the Department for Education in December 2023) be noted with acknowledgement that this means that the WSSCP will be required to report to the DfE by 30 September 2024 on the preceding business year (April 2023-March 2024) on several new criteria such as providing "evidence of how safeguarding partners are ensuring the adequate representation and input of education at both the operational and strategic levels of the arrangements. 	Chris Robson, Independent Chairman of the West Sussex Safeguarding Children Partnership (WSSCP)	N/a	N/a	Completed

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Report to West Sussex Health and Wellbeing Board

Date: 25 April 2024

Report title: Update on the Children First Board (a sub-group of the Health and Wellbeing Board)

Report by: Lucy Butler, Director of Children Services

Summary

This report provides a summary of the work of the Children First Board.

Recommendation to the Board

The Health and Wellbeing Board is asked to;

(1) Note the contents of this report.

Relevance to Joint Health and Wellbeing Strategy

- 1. Starting Well
- 2. Living Well
- 3. Working Well

1. Background and context

- 1.1 The purpose of the Children First Board is to provide the leadership, governance and engagement opportunity for the strategic planning and delivery of services for children and families within West Sussex. Meetings are held four times a year and the inaugural meeting was held on the 8 October 2020.
- 1.2 The Board is made up of a wide range of West Sussex organisations and groups. It includes representatives from a wide range of stakeholders and specifically from young people, parents and carers. It also includes staff and senior managers from the County Council; people elected to represent the views of the people of West Sussex, Districts and Boroughs, schools, colleges, police, health partners, and representatives from the voluntary and community sector.

2. Governance Arrangements

- 2.1 The Board has successfully recruited an Independent Chair whose appointment will be confirmed to Board members prior to the next meeting on Tuesday 23 July.
- 2.2 Cllr Jacquie Russell, Cabinet Member for Children, Young People and Learning as current chair of the Board will now step down from this role and take on a new position as Board's "Sponsor".
- 2.3 WSCC has also recruited to the post of Stakeholder, Partnership and Engagement Manager who will be responsible for building and maintaining strong relationships with key stakeholders to ensure effective delivery of the priorities set out in the Children and Young People's Plan.

3. The Children and Young People's Plan update

- 3.1 The final version of the Children and Young People Plan was published in an electronic format on 7 December 2022. The plan can be found here: Children and Young People's Plan | Your Voice West Sussex
- 3.2 A short animation of the plan was published in December 23 and promoted as part of a three-week social media campaign. Feedback form the animation was well received and wholly positive. A link to the animation can be found <u>here</u>.
- 3.3 A scorecard has been developed, covering the five high level priority areas from within the Children and Young People's Plan. The scorecard requires data from a range of organisations within the Children First board and work is on-going to ensure consistent reporting, metrics and timelines are in place. This work is important to enable the Board to have an overview of the performance of the plan. It is a complex piece of work due to the different ways in which different organisations manage and report on their data. The scorecard will be ratified at the July Board meeting.

4. Childrens First Board Update

4.1 The last meeting of the Childrens First Board was held on 6 February 2024. Aside from an update on progress on the Childrens and Young People's Plan and governance arrangements, four further reports were received:

4.2 Part 1 - Update on the Pan- Sussex Childrens Board – Standing Item

- Pan Sussex Childrens Board is currently chaired by the East Sussex County Council Director of Childrens Services and meets quarterly and has now agreed the Pan Sussex Children and Young Peoples priorities.
- These priorities are based around five CYP pillars: Best Start; Mental Health; Physical Health; SEND; and Vulnerable Groups.

• A system wide data dashboard has been developed which covers high level indicators across the five pillars and was scheduled to be presented at the 14 March Board meeting.

4.1 Update from Working Groups

4.1.1 Emotional Wellbeing and Mental Health Working Group

- The Group is conducting a reset and revised Terms of Reference have been circulated which will be tabled at the April CFB meeting; a Forward Plan; and governance reporting.
- The Board received a presentation on the Sussex Suicide Prevention Strategy and introduced to the needs assessment that is currently underway.

4.1.2 Special Education Needs and Disabilities

- The Board received an update on the comprehensive multiple agency improvement plan that that is supported by six partner working groups.
- As the SEND inspection Report was still embargoed this will be tabled at the April Meeting.

4.1.3 Education and Learning

- The Board received a presentation on the new Early Years & Childcare Strategy: Right form the Start which was scheduled to be presented to WSCC Cabinet in March.
- A request for a working group jointly led by Early Years and Health to oversee outcomes reporting back to the CFB was supported.

4.2 Part 2 - Engagement Session with Young People

- A number of Young People engaged with Board in a thematic session Special Education Needs and disabilities. The outcomes were summarised into 2 problem statements:
 - Timeliness of neurodiversity assessments and how it may affect a young person's wellbeing.
 - Sharing resources which make young people more aware of how to speed up diagnosis deadlines as a tangible action.
 - Solutions around these statements will be taken forward for consideration as part of the SEND engagement activity and will be reported in future reports.

Contact:

Sam Boulton, Stakeholder, Partnership and Engagement Manager Sam.boulton@westsussex.gov.uk

Background papers

Link to Children and Young People's Plan: <u>Children and Young People's Plan</u> <u>Your Voice West Sussex</u>

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Report to West Sussex Health and Wellbeing Board

25 April 2024

West Sussex Health and Wellbeing Board Developmental Workshop, 11 March 2024

Report by Alison Challenger, Director of Public Health

Summary

This report provides a summary of the West Sussex Health and Wellbeing Board's (HWB's) Developmental Workshop on Monday, 11 March 2024. It highlights key themes and outcomes, and sets out a proposed direction of travel, as the Board prepares to move into Phase 2 of its development process, with the establishment of a HWB Development Task and Finish Group (TFG) to progress this work on their behalf. Supported by the Local Government Association (LGA), this approach is focused on developing the Board within the context of the new NHS health and care system in Sussex and includes helpful reflection on its role in supporting the local place of West Sussex within this.

Recommendation(s) to the Board

The Health and Wellbeing Board is asked to;

Approve the Health and Wellbeing Board Development Task and Finish Group (TFG) to progress Phase 2 of the Board's development process on behalf of the Board in the following areas:

- (1) Governance develop ways of working within the context of the new NHS health and care system in Sussex, including reviewing membership and terms of reference, action tracker, meeting venues (plan for future quarterly Board meetings and locations).
- (2) Identify further areas where LGA support is required for Phase 2 and work with the LGA to scope this.
- (3) Consider HWB seminars to progress topic/work areas, if required for example, developing the new Joint Local Health and Wellbeing Strategy (JLHWS).
- (4) Report to the Board in July 2024 providing an update on Phase 2 of the project and Recommendations for the future.

Relevance to Joint Health and Wellbeing Strategy

The development of the West Sussex Health and Wellbeing Board will provide the foundations to create the new Joint Local Health and Wellbeing Strategy (JLHWS) to be published in 2024, following the completion of the period of the existing strategy (2019-2024).

1 Background and context

Health and Wellbeing Boards

- 1.1 HWBs are central to the objective of an integrated approach to health and social care, bringing together local healthcare leaders from the NHS, public health, adult social care, children's services, the voluntary and community sector, district and borough councils, and local Healthwatch.
- 1.2 Boards have a statutory role to plan how best to meet the health and wellbeing needs of their local population and tackle health inequalities and are required to assess the health and wellbeing needs of local residents through carrying out a Joint Strategic Needs Assessment (JSNA), developing a Joint Local Health and Wellbeing Strategy (JLHWS) to meet the health and wellbeing needs identified in the JSNA, and to undertake a Pharmaceutical Needs Assessment (PNA).

Local Government Association's support offer to HWBs

- 1.3 At its meeting on <u>20 July 2023</u>, the Board agreed to accept and progress the LGA's support offer to Health and Wellbeing Board's (HWBs) within the new NHS health and care system architecture (Integrated Care System (ICS)).
- 1.4 Focusing on the implications for local government and HWBs of ICSs, the LGA revised its <u>support offer</u> to HWB chairs and other lead members, providing an opportunity to refocus the purpose of the HWB, operate effectively in the new context, and strengthen its role in the new system. This free, tailored, and flexible support is available to all HWB's in the country.

NHS health and care system governance landscape

- 1.5 HWBs have an important role within the new NHS health and care system governance landscape, holding systems to account on progression towards improving integration across local health and care organisations, and setting strategic direction to improve the health and wellbeing of their local population and reducing inequalities.
- 1.6 As part of the approach to improve more integrated working locally, the new NHS health and care system in Sussex is currently developing NHS Integrated Community Teams (ICTs) at district and borough council (neighbourhood) level, as outlined in the Sussex Shared Delivery Plan (SDP) <u>`Our plan for our population.'</u>
- 1.7 ICTs will comprise professionals working together across different organisations with local communities, individuals, and their carers; including primary care, community, mental health, local authority partners, voluntary, community and social enterprise organisations and other partners.

2 Joint Local Health and Wellbeing Strategy

2.1 Development of the new Joint Local Health and Wellbeing Strategy (JLHWS) (statutory requirement) for the next period, will take place during 2024. With the current <u>strategy</u> ending in 2024, the development work with the Board will

provide the foundations to create the strategy, with a view to publishing towards the end of 2024.

HWB Developmental Process – Phase 1

- 2.2 Led by the Director of Public Health (DPH), the HWB Lead Officer, and supported by the Public Health Strategy Manager, the authority engaged with the LGA during summer/early autumn 2023 to progress the development process. Three LGA Associates (peers) were assigned to support this process. Between them they have local government, NHS (including Integrated Care Board (ICB)), and voluntary and community sector experience.
- 2.3 The Board's development process was highlighted in the Full Council Question Time <u>report</u> of 13 October 2023, in the Cabinet Member for Public Health and Wellbeing's portfolio.
- 2.4 To ensure Board members were kept informed throughout the process, the Chairman and the DPH provided a joint update to HWB members (via email) in November 2023, providing an overview of the process, the scoping stage, and outline timelines, emphasising the value of their input, and encouraging them to feed in their thoughts and ideas. The DPH provided a further verbal update to the HWB at their formal meeting on 25 January 2024 on progress to date.
- 2.5 Table 1 provides an overview of the key stages of Phase 1 for the development process.

Date	Task/Action
November 2023-early February 2024	 Scoping stage LGA Associates undertook 1:1 calls (via Microsoft Teams) with HWB members, and a small number of others with a link to the Board. Purpose: to scope the support that the project needs through a consultative and co-production approach. DPH updated formal HWB meeting (25 January 2024) on progress to date and outline timeline.
February 2024	 Following 1:1s: LGA associates identified support required to develop the Board following input during scoping stage Agenda developed for HWB Developmental Workshop (11 March 2024)
March 2024	 HWB Developmental Workshop (11 March 2024) Chair – Cllr Lanzer Lead Officer: Alison Challenger Facilitators – LGA Associates
April 2024	DPH report to formal HWB (25 April) meeting following completion of phase 1 developmental process including Recommendations for the future.

Table 1 Development of the West Sussex Health and Wellbeing Board – Phase 1 Key Stages

HWB Developmental Workshop

- 2.6 The Health and Wellbeing Board Developmental Workshop took place on 11 March 2024, 09:00 to 13:00 in Committee Room 3, County Hall, Chichester. This followed the completion of the scoping stage of the project, where LGA Associates undertook 1:1 calls (via Microsoft Teams) with HWB members, and a small number of others with a link to the Board. The purpose of this was to scope the support that the project needed through a consultative and coproduction approach.
- 2.7 The Leader of the Council and Director of Adults Services (DASS), on behalf of the Council's Chief Executive, welcomed people to the event, with over 25 people in total in attendance. They emphasised that the Workshop was the next stage of the Board's development process and an opportunity to pause, reflect and adapt to the ever-changing external environment, focusing on how to collectively increase the Board's impact across West Sussex.
- 2.8 Facilitated by the LGA Associates, the agenda centred on moving from the scoping stage of identifying the support needed for the project, to 'the doing,' reflecting on key themes so far, the context of the new NHS health and care system in Sussex, in which the Board has a key role within, and areas in which further input by Board members was required.
- 2.9 In recognising the Board's continued ambition to progress towards improving integrated working locally across health and social care, discussions focused on how to achieve this and outlining next steps. The event concluded with final remarks from the Chairman of the West Sussex HWB and Cabinet Member for Public Health and Wellbeing.

Outcomes of the Workshop

- 2.10 A thematic analysis of the event will be shared with members of the HWB and attendees of the event. Several themes emerged, including seven key themes:
 - Deeper and more collaborative working
 - Governance developing ways of working including reviewing membership and terms of reference, action tracker, meeting venues
 - Clarity over relationship and alignment with ICS Assembly and Health and Care Partnership
 - Communications and communication style two-way options between meetings, for example seminars
 - Delivery vehicles task and finish groups and concordats to support collaboration and co-production
 - Local working
 - Joint Local Health and Wellbeing Strategy (JLHWS) prioritisation

Health and Wellbeing Board Development Task and Finish Group

- 2.11 Following the workshop, a Health and Wellbeing Board Development Task and Finish Group (TFG) was established to progress workshop outcomes and to scope Phase 2 of the project on behalf of the Board. Membership of the first meeting of the TFG is shown in Table 2. Moving forwards, the Chair will review membership to ensure representation of all key partners within the HWB with the addition of NHS, district and borough councils, voluntary and community sector representatives, and will reduce the number of County Council representatives. Terms of Reference will be developed.
- 2.12 The TFG recognised and valued the overall desire to be a vibrant HWB, with energetic and interesting meetings focused on delivering the priorities of the JLHWS, collectively improving the health of our local population, and reducing inequalities.
- 2.13 It was acknowledged that the Board does not have a scrutiny function, and therefore it is important to ensure collective understanding of this for agenda setting, reports and meetings, to avoid unintentionally moving into this space.
- 2.14 Reflecting on the workshop, TFG discussions focused on key themes and next steps to move into Phase 2 of the HWB's development process. These are detailed in the Recommendations to the Board in this report, and include:
 - Progressing the discussion of Board membership
 - Identifying further areas where LGA support is required
 - Planning locations for future HWB meetings (held quarterly in public)
 - Consideration of HWB seminars to progress topic/work areas, if required for example, developing the new JLHWS.

Role	Title
Cabinet Members	Chairman of West Sussex Health and Wellbeing Board and Cabinet Member for Public Health and Wellbeing
	Cabinet Member for Adults Services
Officers	Chief Executive, WSCC
	Director of Public Health (DPH) and Health and Wellbeing Board Lead Officer, WSCC (Chair)
	Director of Adults Services (DASS), WSCC
	Assistant Director – Early Help and Children's Social Care, WSCC (Deputising for: Director of Children Young People and Learning (DCS))
	Senior Advisor, Democratic Services, WSCC
	Public Health Strategy Manager, WSCC

Table 2 Membership of first meeting of the Health and Wellbeing Board Development Task and Finish Group (TFG)

3 Proposal details

3.1 The purpose of this paper is to provide a summary of the HWB's Developmental Workshop on Monday, 11 March 2024, and to set out a proposed direction of travel as the Board prepares to move into Phase 2 of its development process. The proposals for this work are detailed in the Recommendations of this report.

4 Consultation, engagement and advice

- 4.1 The development of the HWB will provide the foundations to create the new JLHWS to be published in 2024, following the completion of the period of the existing strategy (2019-2024).
- 4.2 The JLHWS must be developed in consultation and collaboration with all members of the Board, local residents and communities, people who use services, professionals and partners. The strategy will draw on the evidence of the local population's health and wellbeing needs from the <u>West Sussex Joint Strategic Needs Assessment (JSNA)</u>.

Contact:

Alison Thomson, Public Health Strategy Manager Tel. 0330 222 4132 Email: <u>alison.thomson@westsussex.gov.uk</u>

Appendices: None

Background papers:

<u>West Sussex Joint Health and Wellbeing Strategy 2019 - 2024 - West Sussex JSNA</u> <u>Website</u>

Report to West Sussex Health and Wellbeing Board

Date	25 April 2024
Report title	West Sussex Strategic Housing Group Update
Report by	Ian Duke, Chief Executive Crawley Borough Council and Chair of the West Sussex Strategic Housing Group

Summary

This is an update report from the West Sussex Strategic Housing Group setting out national housing pressures, county-wide responses, and potential areas for support.

Recommendations to the Board

The Health and Wellbeing Board is asked to;

- (1) Note the report
- (2) Discuss potential areas of support from Health & Wellbeing Board partners.

Relevance to Joint Health and Wellbeing Strategy

1 Background and context

- 1.1 The West Sussex Health & Wellbeing Board (HWB) has requested an update from the West Sussex Strategy Housing Group, specifically to cover:
 - Steer on National Pressures
 - What actions the Housing Group is taking with respect to the Housing Crisis
 - What strategic priorities is the Housing Group progressing and how can the HWB partners support?
- 1.2 This paper sets out a high level briefing on the areas requested and proposes potential areas of support for further discussion at the Board.

2 National Pressures

2.1 Over the past year, the scale of homelessness pressures upon local authorities has gained a much higher profile. Homelessness now sits alongside Adult Social Care, Children's Services, and Special Educational Needs & Disabilities

(particularly school transport) as statutory duties that threaten local government finances.

- 2.2 Structurally, the situation is driven by:
 - The unaffordability of home ownership for an increasing number of people.
 - A shrinking private rented sector with soaring rents that also makes this option for housing increasingly unaffordable.
 - Shortage of council and other social housing to meet demand.
- 2.3 This has driven a sharp acceleration of demand post-pandemic, a trend that currently shows no sign of slowing. Nationally, between 2022 and 2023 (latest figures), there was a 13% increase in the number of households in temporary accommodation. Those households with children increased by 19%. The increase in lower tier authorities was higher again at 16.4% and 23.9% respectively.
- 2.4 Whilst homelessness has been an issue for many years, outside of metropolitan areas it has not been at scale. This has changed rapidly over the past few years. Between January and June 2023 (latest national figures available) 153,000 households were owed homelessness relief or prevention duty, of which 44,618 (29.1%) were owed by a lower tier authority.
- 2.5 Unlike larger unitary councils, lower tier authorities do not have the scale to absorb these costs. The District Council Network (DCN) undertook a survey earlier this calendar year. It found that in some cases the cost of temporary accommodation was between 20% and 50% of that Council's total net revenue budget. The DCN also found that it is not uncommon for council spending on temporary accommodation to have increased tenfold or more since 2012.
- 2.6 Whilst these strains are being felt widely, there are variations across places. When looking at costs as a percentage of net revenue budget, the southeast is particularly badly affected. For this reason, a network of outlier (in terms of impact) authorities across Kent and Sussex are working together to share practice and to lobby on this issue. Convened by Crawley, the other authorities are Hastings, Eastbourne-Lewes, Rother, Swale, Dartford, Adur & Worthing and Arun.
- 2.7 This grouping has been highly effective in shaping the national narrative. Eastbourne has taken the lead in working with the DCN to raise the profile of the scale of homelessness among lower tier authorities. It was through the Kent and Sussex authorities that developed the key asks of Government that was subsequently signed up to by 119 Councils across the country <u>Chancellor urged</u> <u>by 119 councils to avert homelessness crisis | District Councils' Network</u>. Two of the authorities (Crawley and Eastbourne) have subsequently declared a housing emergency an action actively being considered by others.
- 2.8 Whilst the context varies across places, the experience of these authorities shows a reasonably consistent picture about the driver behind increasing costs. The increase in demand has already been spoken to above. Authorities are also finding that the cost of temporary and emergency accommodation has also increased. Where there is housing stress there is invariably competition for

accommodation pushing the marginal rate of accommodation higher. The freeze on the Housing Benefit Subsidy at 2011 Local Housing Allowance rates means that all authorities recoup less from the Government than they had previously.

2.9 The shortage of properties is also affecting discharges out of emergency and temporary accommodation. Whilst this has clear cost implications, more worrying is the impact it is having on households. For instance, in Crawley the average stay in temporary accommodation is now 470 days and is likely to increase.

3 West Sussex Strategic Housing Group (WSSHG) Response

3.1 The activity of WSSHG broadly covers three areas:

A. Sharing of information around strategic matters and practice

This space provides a forum for members to discuss relevant topics to help shape future activity. As would be expected there has been input into the regional and national discussions. Agreement has been reached to develop a core set of data around homelessness so that, at a county level, there is easy sight of the pressures being faced. The group also shares information about work and best practice being undertaken by individual authorities, for example the future focus within Crawley's Local Community Network on the wellbeing needs of those in Temporary Accommodation. The WSSHG is also reaching out and making links to its East Sussex and Kent counterparts. An initial view is that there is best practice which could accelerate progress in West Sussex, but also potential areas of joint work where this might increase the impact of the work.

B. Undertaking of strategic projects

Each district and borough contribute to a small project team to take forward agreed work. Two current projects are focused on the issues of moving people out of emergency and temporary accommodation:

a. Private Rented Sector

In the short term, given wider constraints on social housing (see below), the best discharge option remains the private rented sector despite the challenges set out above. This project worked with each of the districts and boroughs to identify current practice and challenges, as well as good practice from elsewhere, and is shortly to report its findings.

b. Registered Providers

67% of social housing stock in West Sussex is owned and managed by Registered Providers (Housing Associations), and therefore not in direct control of local authorities. There is growing evidence that the current environment within social housing, plus the business models of the Registered Providers, is both preventing new units from coming forward, and crucially acting as a block to those in greatest need. This leads to the most vulnerable households spending long periods in unsuitable housing or temporary accommodation with potentially adverse effects on children within those households. It is also affecting discharge from clinical settings. This project seeks to fully understand the position, to engage with key Registered Providers and seek to address issues where these are identified.

C. Responding to System Demand for Housing

There are two broad categories of demand emerging from our health and care systems. The first relates to the strategic planning of housing to meet future population needs. The second is housing pathways for those being discharged from clinical settings or leaving care. These demands are effectively competing with other potential uses for the available housing stock both current and future. Current work in relation to these demands include:

a. Care Leavers Protocol

Responding to an ask emerging from the Children's Improvement Board, this work seeks to develop a joint protocol between Children's Services and all of the districts and boroughs within West Sussex to provide housing options for young people leaving care. Significant progress has been made and final comments are currently being worked through, with none being seen as a block to arriving at a version all parties can sign off.

b. Extra Care Housing

Adults and Health Commissioning Services have finalised the market position statement for the future development of Extra Care Housing in the county. The County Council wants this work to be a partnership with key strategic partners and in particular the district & borough councils. Districts and boroughs have all fully supported this approach to the future development of Extra Care Housing. Local extra care working groups are being established with each local authority to identify assets and land sites, capital investment opportunities, development partners and joint funding bid opportunities.

3.2 The WSSHG is currently mapping the various points within the health and care governance structures where there is a touch point or ask regarding housing. Whilst not yet complete it presents a complex and fragmented picture, with multiple but disparate small and responsive asks coming through to individual parties. This is not sustainable or deliverable within the current context.

4 Potential Areas of Support from Health & Wellbeing Board Partners

- 4.1 On 23 February 2023 a Health & Wellbeing Board Seminar was held on issues relating to Housing, Homelessness Covid & Health. This set out how the compounding issues of post-pandemic trends, cost of living, the emerging housing crisis, and the links across to health and care were creating the 'perfect storm'. It set out the complexity of the system, but also the complex needs of many of those who were homeless.
- 4.2 The key objective of the seminar was 'how can the Board collectively focus on the wider housing agenda to help improve the health and wellbeing of our residents?' The session set two specific questions:
 - What actions can the Health & Wellbeing Board take to ensure partners are more collaborative in their efforts in tackling this issue in line with the Memorandum of Understanding and sustain the progress that has been made?

• Where can housing intervene earlier with the health sector? E.g. discharge quicker back home or into communities? E.g. Hotels, serviced apartments, disabled facility grants, who should be represented in these conversations and why?

There is a need to revisit the outcome of that workshop and to assess what progress has been made.

- 4.3 The potential areas of support for discussion are set out below, but these are not exclusive, and others may emerge from the discussion:
 - Recognition from all partners of the substantial pressures within housing and the wider impact of this on wider agendas.
 - Offer to bring the weight of the Health & Wellbeing Board behind influencing and campaign work targeted at improving the situation where the impacts on health and wellbeing are established.
 - Support greater collaborative and longer-term planning around housing needs from the health and care sectors.
 - Commitment to consider how the health and care system can better support needs within the housing sector to prevent worsening outcomes.
- Contact: Ian Duke Chief Executive Crawley Borough Council ian.duke@crawley.gov.uk

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Report to West Sussex Health and Wellbeing Board

25 April 2024

Updated Terms of Reference for Sussex Health & Care Assembly

Report by: Stephen Lightfoot, Chair of NHS Sussex

Summary

This report summarises the proposed changes to the Terms of Reference and membership of the Sussex Health & Care Assembly, including the appointment of an Independent Chair, after the first annual review of its governance arrangements since establishment in 2022. West Sussex County Council needs to formally approve these Terms of Reference as one of the four statutory members of this Joint Committee and this report has been provided to keep the West Sussex Health & Wellbeing Board informed of the proposed changes.

Recommendation to the Board

The Health and Wellbeing Board is asked to;

(1) Note the updated Terms of Reference for the Sussex Health & Care Assembly.

Relevance to Joint Health and Wellbeing Strategy

The West Sussex Joint Health and Wellbeing Strategy is an important building block in the development of the Sussex Integrated Care Strategy, *Improving Lives Together*, which is approved and overseen by the Sussex Health & Care Assembly.

1 Background and context

- 1.1 The Sussex Health & Care Assembly is the statutory Joint Committee of Brighton & Hove City Council, East Sussex County Council, West Sussex County Council and the NHS Sussex Integrated Care Board, which was set up to meet the Health & Care Act 2022 requirement for each health and care system in England to establish an Integrated Care Partnership.
- 1.2 On its establishment in autumn 2022, the four statutory partners of the Assembly agreed that Stephen Lightfoot, Chair of NHS Sussex, would chair the Assembly and he made a commitment to review the effectiveness and governance arrangements of the Assembly at the end of its first year. This led to the Assembly members holding a workshop on 11 October 2023 and a series of virtual calls between October 2023 and January 2024 to develop and reach consensus on how the effectiveness of the Assembly could be further strengthened to achieve its core purpose.

- 1.3 There was considerable support from the Assembly for retaining a wide range of members from different sectors to reinforce that our system involves more than the NHS and social care partners. It was also recognised that the Assembly has strengthened partnership working across our system and had a fundamental role in approving the *Improving Lives Together* integrated care strategy.
- 1.4 There was an acknowledgement that the Assembly could be perceived as an 'NHS committee' rather than a broader 'system-wide committee' because it is currently chaired by the NHS Sussex Chair, has a large proportion of NHS members and most agenda items are led by NHS leaders (albeit with the support of other Assembly members).
- 1.5 There was an ambition to ensure that the Assembly has a clear ongoing role which is greater than the sum of its component parts and does not duplicate the responsibilities of its statutory partners or their existing governance arrangements.
- 1.6 There was a strong consensus that an Independent Chair should be appointed to chair the Assembly, provided they are well supported and resourced to do the job effectively. This approach is fully supported by the existing Chair of the Assembly.
- 1.7 An analysis of the five other integrated care systems in England which have 3 upper tier and/or combined local authorities like Sussex found that there was no common or consistent approach to the membership of their Integrated Care Partnerships (ICP). In fact, the total memberships ranged from 18 in the Leicester, Leicestershire & Rutland ICP to 51 in the Mid & South Essex ICP. It should also be noted that the Dorset ICP has an Independent Chair.

2 Proposal details

2.1 The purpose of the Assembly remains unchanged in the Terms of Reference:

'To support and promote greater integration and collaboration across health and social care at a strategic, Sussex-wide level. It will build upon the local Health and Wellbeing Strategies and co-ordinate the strategic direction for meeting the broader health, public health and social care needs of the population of Sussex to settle an Integrated Care Strategy for Sussex. It will undertake any other activities agreed by NHS Sussex and the three Local Authorities to help address the wider determinants of health and wellbeing and greater health equality at a strategic level. Its work will build upon and be informed by work at place level in Brighton & Hove, East Sussex and West Sussex, including through the local Joint Strategic Needs Assessments.'

2.2 An Independent Chair and secretariat will be appointed by the four statutory partners (i.e. Brighton & Hove City Council, East Sussex County Council, West Sussex County Council and NHS Sussex). A competitive process will be used to, recruit and select, with unanimous support, an Independent Chair. The Independent Chair will be employed by East Sussex County Council in this specific role on behalf of the Assembly. The four statutory partners will make equal contributions towards the cost of the Chair and the Assembly on a full cost recovery basis and managed through a Service Level Agreement. The Independent Chair will be responsible for agreeing the Assembly dates, venues and agendas with the four statutory partners in advance of the meetings.

2.3 The Assembly membership will be reduced from 24 to 18 Members and will be rebalanced to reflect the wider core determinants of health as follows:

Sector	Proposed Assembly Membership	Comment		
Independent Chair	Independent Chair	New Chair		
Statutory Partners	Chair of Brighton & Hove Health & Wellbeing Board	Existing Member		
	Chair of East Sussex Health & Wellbeing Board	Existing Member		
	Chair of West Sussex Health & Wellbeing Board	Existing Member		
	Chair of NHS Sussex Integrated Care Board	Existing Member		
Education	Further Education	Existing Member		
	Higher Education	Reduce from 3 to 1 Member		
Employment	Sussex Chamber of Commerce	Existing Member		
Built Environment	Housing	Existing Member		
Physical Activity	Sport and Leisure Provider	New Member		
Healthcare	Chief Delivery & Strategy Officer of NHS Sussex	Existing Member		
VCSE	General Practitioner Member Brighton & Hove VCSE Alliance Representative	Existing Member Existing Member		
	East Sussex VCSE Alliance Representative West Sussex VCSE Alliance Representative	Existing Member Existing Member		
Voice of the	Healthwatch Brighton & Hove	Existing Member		
Public	Healthwatch East Sussex Healthwatch West Sussex	Existing Member Existing Member		

- 2.4 This means that two new members of the Assembly will be appointed (i.e. the Independent Chair and a Leisure Provider), whilst six of the existing NHS Sussex Members will stand down from the Assembly (i.e. Chief Executive Officer, Chief Medical Officer, Chief Nursing Officer and 3 Executive Managing Directors) and the number of Higher Education Members will be reduced from three to one (with 3 University Vice Chancellors rotating their attendance at each meeting).
- 2.5 Subject matter experts will continue to be invited to attend and participate in specific agenda items at Assembly meetings, with the agreement of the Independent Chair and the four statutory partners.

- 2.6 The number of Assembly meetings held in Public will remain at three per year and the frequency will be kept under review to ensure that the Assembly meets often enough to achieve its purpose.
- 2.7 NHS Sussex will continue to publish the agendas, papers and recordings of Assembly meetings on the Sussex Health & Care website.

3 Consultation, engagement and advice

- 3.1 These updated Terms of Reference now need to be approved by each of the four statutory partners before they can be implemented. The Leader and Lead Member for Strategic Management & Economic Development of East Sussex County Council approved them on 16 February 2024 and the NHS Sussex Integrated Care Board approved them at its Board Meeting held in Public on 27 March 2024. Brighton & Hove City Council will be making its decision at a Full Council Meeting on 16 May 2024.
- 3.2 The Sussex Health & Care Assembly also endorsed these updated Terms of Reference at its meeting in public on 10 April 2024.
- 3.3 Councillor Lanzer has confirmed that he can approve these updated Terms of Reference as a Cabinet Member for West Sussex County Council and this paper has been written to keep the West Sussex Health & Wellbeing Board informed on the development of the Sussex Health & Care Assembly.

Contact: Stephen Lightfoot, Chair of NHS Sussex, Email stephenlightfoot@nhs.net

Appendices

Appendix 1: Updated Terms of Reference of Sussex Health & Care Assembly



Sussex Health and Care Assembly (Sussex Integrated Care Partnership) Terms of Reference

Governance

 The Sussex Health and Care Assembly (the Assembly) is a formal partnership forum jointly established by NHS Sussex, Brighton & Hove City Council, East Sussex County Council and West Sussex County Council (the three Local Authorities) in accordance with the Constitutions of each body. The Assembly is the Integrated Care Partnership for Sussex, established under the Health and Care Act 2022 and these Terms of Reference have been agreed by each of these bodies.

Purpose

2. The purpose of the Assembly is to support and promote greater integration and collaboration across health and social care at a strategic, Sussex-wide level. It will build upon the local Health and Wellbeing Strategies and co-ordinate the strategic direction for meeting the broader health, public health and social care needs of the population of Sussex to settle an Integrated Care Strategy for Sussex. It will undertake any other activities agreed by NHS Sussex and the three Local Authorities to help address the wider determinants of health and wellbeing and greater health equality at a strategic level. Its work will build upon and be informed by work at place level in Brighton & Hove, East Sussex and West Sussex, including through the local Joint Strategic Needs Assessments.

Responsibilities

The Assembly will:

- Develop, approve and publish an Integrated Care Strategy for the whole population of Sussex, using best available evidence and data, covering health and social care and addressing the wider determinants of health and wellbeing. This will be built from local assessments of needs and assets identified at place level, based on Joint Strategic Needs Assessments.
- Complement existing governance arrangements including Health and Wellbeing Boards (HWBs) and other place-based partnerships, and ensure governance and decision-making are proportionate, support subsidiarity and avoid duplication across the Sussex Health and Care System.
- 5. Promote and enhance integrated approaches, partnership working and collaboration within the Sussex health and care system, where these can improve planning, outcomes and service delivery.
- 6. Complement place-based working and partnerships, developing relationships on a pan-Sussex basis.

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- 7. Highlight where coordination is needed on health and care issues and, through the development, promotion and oversight of the Integrated Care Strategy, challenge partners to deliver the action required. This includes, but is not limited to:
 - helping people live more independent, healthier lives for longer;
 - taking a holistic view of people's interactions with services across the system and the different pathways within it;
 - addressing inequalities in health and wellbeing outcomes, experiences and access to health and care services;
 - improving the wider social determinants that drive these inequalities, including employment, housing, education, environment, and reducing offending;
 - improving the life chances and health outcomes of babies, children and young people;
 - improving people's overall wellbeing and preventing ill-health.
- 8. In preparing the Integrated Care Strategy:
 - consider the extent to which the needs could be met more effectively by the making of arrangements under section 75 of the National Health Service Act 2006 (rather than in any other way);
 - have regard to—

 (a) the mandate published by the Secretary of State under section 13A of the National Health Service Act 2006, and
 (b) any guidance issued by the Secretary of State;
 - involve the Local Healthwatch organisations for Sussex and involve the people who live or work in Sussex; and
 - may include a statement of its views on how arrangements for the provision of health-related services in the area could be more closely integrated with arrangements for the provision of health services and social care services.
- 9. Each time the Assembly receives an assessment of relevant needs it will:
 - (a) consider whether the current Integrated Care Strategy should be revised, and
 - (b) if so, prepare a revised Integrated Care Strategy.
- 10. Report to NHS Sussex and the Health and Wellbeing Board of each of the three Local Authorities after each meeting of the Assembly, highlighting issues that require action.

Members

- 11. As set out in the Health and Care Act 2022, the core membership of the Assembly (as the Integrated Care Partnership) is NHS Sussex and the three local authorities. The composed Assembly may then appoint others. The three Local Authorities and NHS Sussex will each appoint their members to the Assembly in accordance with their respective Constitutions. Members are bound by the Standing Orders and Codes of Conduct of their respective appointing bodies, including those relating to equalities, confidentiality and information governance.
- 12. The Assembly will consist of the following members representing the four statutory partners:

NHS Sussex [the Integrated Care Board] (1)

• Chair of NHS Sussex (or their nominated substitute)

Brighton & Hove City Council (1)

• Health and Wellbeing Board Chair (or their nominated substitute)

East Sussex County Council (1)

• Health and Wellbeing Board Chair (or their nominated substitute)

West Sussex County Council (1)

• Health and Wellbeing Board Chair (or their nominated substitute)

One officer from each of the local authorities and NHS Sussex will also be permitted to attend to contribute towards the work of the Assembly and/or assist and advise the Health and Wellbeing Board Chairs or NHS Sussex Chair as appropriate.

In addition to the membership from the statutory partners, the following members will also be appointed to support the work of the Assembly:

- Independent Chair, appointed by the four statutory partners
- 2 x Education Members, one from Further Education and one from Higher Education in Sussex
- 1 x Employment Member, from the Sussex Chamber of Commerce or equivalent organisation in Sussex
- 1 x Housing Member, with experience of housing and the built-environment in Sussex
- 1 x Physical Activity Member, with experience of providing sport and leisure services in Sussex
- 2 x Healthcare Members, including the Chief Delivery & Strategy Officer of NHS Sussex and a General Practitioner in Sussex
- 3 x Voluntary, Community & Social Enterprise Members, one from each place in Sussex
- 3 x Independent Health and Social Care Champion Members, one from each Healthwatch in Sussex

The Assembly will appoint further members or observers as it considers appropriate in line with its agreed work programme.

Subject matter experts, research specialists, people with lived experience of each stage of the life course and representatives from seldom-heard communities can also be invited to attend and participate in specific agenda items at Assembly Meetings, with the agreement of the Independent Chair and the four statutory partners.

Procedure

Chairmanship

13. An Independent Chair and secretariat will be appointed by the four statutory partners. The Chair should be a resident in or have a close association with Sussex and must not be currently employed by or have any affiliation with any of the members of the Assembly to demonstrate their neutrality and transparency. A competitive process will be used to, recruit and select, with unanimous support, an Independent Chair. The Independent Chair will be employed by one of the four statutory partners in just this specific role. Any disciplinary and dismissal processes in respect of the Independent Chair will be undertaken in line with the employing partner's policies and procedures but can be triggered by any one of the Assembly Members from the four statutory partners.

Meeting proceedings and quorum

- 14. The Assembly will meet formally, in public, at least twice per year, unless the Assembly resolves to meet in private in accordance with reasons permitted by the legislation relevant to the meetings of public bodies. Additional meetings may take place as required, with the agreement of the Chair and the four statutory partners.
- 15. Meetings held in person will be at venues providing accessibility to the public. Members of the Assembly may attend remotely with the agreement of the Chair. Any formal public meetings held entirely virtually will be recorded to provide openness and transparency to the public.
- 16. The Assembly is quorate when there are four members of the Assembly present including at least one representative from NHS Sussex and each of the three Local Authorities. If the quorum has not been reached, the meeting may proceed if those attending agree, but no decisions may be taken. Members attending meetings virtually will be counted towards the quorum.
- 17. In any circumstance where a decision is required the Chair shall strive to ensure a consensus is achieved. If a vote has to be taken, in the event of an equality of votes, the Chair shall have a second or casting vote. Each core (NHS Sussex and local authority) member of the Assembly will be entitled to a single vote. The voting rights of any other members appointed by the Assembly will be determined by the Assembly.

Attendance

18. Where a member cannot attend a meeting of the Assembly, they may send a nominated substitute, with agreement of the Chair, who will have equivalent voting rights.

Engagement

19. Where relevant to its responsibilities, the Assembly may engage and consult with partner organisations to promote strategic integration and collaboration across the health and social care sector in Sussex. This should not duplicate existing engagement/consultation arrangements, such as carried out at place level by Health

and Wellbeing Boards. Key consultees of the Assembly will include:

- Healthwatch Brighton & Hove, East Sussex and West Sussex
- Patient Forums for each area of Sussex
- Place-based partnerships
- NHS and social care providers
- Voluntary, Community and Social Enterprise organisations
- Higher and Further Education providers
- Housing specialists
- Local Enterprise representatives
- Other subject matter experts as required.

Administration and access to agenda and reports

- 20. Organisation and administration for the Assembly will be overseen by the Independent Chair but is a shared responsibility between the four statutory partners, who also need to agree the funding and timing. Support will be provided by one of the four statutory partners on a full cost recovery basis and managed through a Service Level Agreement. NHS Sussex will continue to publish the agendas, papers and recordings of Assembly meetings on the Sussex Health & Care website.
- 21. The four statutory partners will make equal contributions towards the cost of the Assembly.
- 22. Each statutory partner will also provide a venue and refreshments free of charge for one of the Assembly Meetings each year in rotation.
- 23. The Independent Chair will be responsible for agreeing the Assembly dates and venues with the four statutory partners for the year in advance. The Independent Chair will then need to agree the agendas, papers and presentations with the four statutory partners at least two months before each Assembly meeting.
- 24. Copies of the agenda and reports for meetings of the Assembly will be provided to Members (via e-mail) and published on the NHS Sussex website (for public access) at least five clear working days before the meeting. Assembly papers will be available online for a period of six years, after which time they will be archived.
- 25. The Assembly meetings will be recorded professionally so that a video of each meeting can be published on the Sussex Health & Care website within 48 hours of the meeting.
- 26. Minutes of meetings shall be recorded by the secretary and submitted in draft form to the NHS Sussex Board, and the Health and Wellbeing Board of each of the three Local Authorities. The draft minutes will also be published on the NHS Sussex website once approved by the Chair. Minutes will be subject to final agreement by the Assembly.
- 27. The secretary will support the Chair of each Health and Wellbeing Board to prepare and deliver reports to the three Local Authorities' Health and Wellbeing Boards and the NHS Sussex Chair to deliver reports to the NHS Sussex Board.

Terms of Reference publication and review

28. These Terms of Reference will be published on the websites of NHS Sussex and the three Local Authorities.

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29. As a partnership forum, it will be important to ensure there is a robust review process for the Assembly. Its Terms of Reference will be reviewed by the Assembly on an annual basis. Any proposed changes will require the approval of NHS Sussex and each of the three Local Authorities.

Document Control

Document Reference	SHCA ToR
Version	DRAFT V.3
Approval	Sussex Health and Care Assembly
Issued on	TBC
To be reviewed by	TBC

Change Record

Date	Change	Comments
26/01/24	Independent Chair, revised membership and updated working arrangements	Based on a governance and effectiveness review by the Assembly Members and the Statutory Members between October 2023 and January 2024.

Report to West Sussex Health and Wellbeing Board

25 April 2024

Better Care Fund Monitoring Q3 2023-24

Report by Chris Clark, Joint Strategic Director of Commissioning, West Sussex Clinical Commissioning Group and West Sussex County Council

Summary

This paper provides an update on Better Care Fund (BCF) Planning for 2023-25, and summarises performance against the Better Care Fund national metrics for Quarter 3 2023-24.

Recommendations to the Board

The Health and Wellbeing Board is asked to:

- 1. Note the update on the West Sussex Better Care Fund Plan 2023-25.
- 2. Note the West Sussex performance against the national BCF metrics at Q3 2023-24.

1. Relevance to <u>Joint Health and Wellbeing Strategy</u>

1.1 The Better Care Fund supports partnership working across the West Sussex Health and Social Care system. The funded schemes include multi-disciplinary teams delivering proactive community-based care, services for carers, social prescribing, and a broad range of adult social care services.

2. Background

- 2.1 The Better Care Fund (BCF) is one of the government's national vehicles for driving health and social care integration. It requires integrated care boards (ICBs) and local government to agree a joint plan, owned by the health and wellbeing board (HWB). These are joint plans for using pooled budgets to support integration, governed by an agreement under section 75 of the NHS Act (2006).
- 2.2 The programme supports local systems to successfully deliver the integration of health and social care in a way that supports person-centred care, sustainability and better outcomes for people and carers.

3. West Sussex Better Care Fund Plan 2023-25

3.1 Health and Wellbeing Boards (HWB) are required to update their BCF plans for 2024-25 following publication of the Addendum to the 2023 to 2025 Better Care Fund Policy Framework and Planning Requirements.

- 3.2 The addendum confirms:
 - Allocations for all mandatory funding contributions.
 - BCF metrics for 2024 to 2025, including the process for setting metric ambitions.
 - Requirements for intermediate care capacity and demand planning.
 - Requirements for updating BCF plans and the assurance process.
- 3.3 The previously published Policy Framework and Planning Requirements remain the primary documents. Further information on the approach to utilising the Discharge Fund is expected.
- 3.4 Updates to plans:
 - Final Discharge Fund plans, ambitions for metrics, and intermediate care capacity and demand plans are required for 2024 to 2025.
 - Where wider updates to existing 2-year plans are made, this must remain in line with the existing BCF policy framework and planning requirements and the addendum. Expenditure must be agreed for all funding sources and be in line with any conditions attached to that source.
 - Updates of the required elements for 2024 to 2025 must be agreed by the ICB (in accordance with ICB governance rules) and the local authority chief executive, prior to being signed off by the HWB.
 - Local areas must review their Discharge Fund spend plans ahead of 2024 to 2025.
 - For all expenditure, the planning template, allows areas to identify where spending lines have stayed the same and where they have changed.
- 3.5 National assurance timetable:
 - 10 June BCF 2024-25 plans submitted
 - 10 June to 15 July Scrutiny of BCF plans by regional assurers, assurance panel meetings, and regional moderation.
 - 15 July Regionally moderated assurance outcomes sent to national BCF team.
 - Mid-July (date TBC) Cross regional calibration.
 - 31 July Commence issuing of approvals giving formal permission to spend (NHS minimum).
 - 30 September All section 75 agreements to be signed and in place.
- 3.6 Better Care Fund plans may be submitted pending Health and Wellbeing Board Approval as meeting dates vary across the country. Approval of the West Sussex BCF Plan update will be sought at the meeting of this board on 11 July.
- 3.7 Within a similar timeframe, production of the end of year BCF Quarterly Return is required, although at the time of writing, timelines and guidance gave not been published.

4. Better Care Fund Performance Q3 2023-24

- 4.1 Appendix 3 shows performance at Q3 2023-24 for the following metrics:
 - Metric 1: Long term support needs of older people (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population.
 - Metric 2: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services.
 - Metric 3: Unplanned hospitalisation for chronic ambulatory care sensitive conditions.
 - Metric 4: Discharge to usual place of residence.
 - Metric 5: Emergency hospital admission due to falls (aged 65 and over)

Contact: Paul Keough, Better Care Fund Manager, NHS Sussex Integrated Care Board and West Sussex County Council, 07920 817577, <u>paul.keough@nhs.net</u>

Appendices Presentation Papers

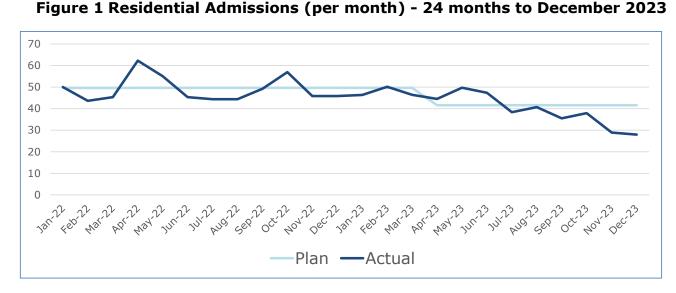
Appendix 1: Appendix 1: Better Care Fund Metrics Report Q3 2023-24

Background Papers

https://www.gov.uk/government/publications/better-care-fund-policyframework-2023-to-2025

https://www.gov.uk/government/publications/better-care-fund-policyframework-2023-to-2025/addendum-to-the-2023-to-2025-better-care-fundpolicy-framework-and-planning-requirements This page is intentionally left blank

HWB Better Care Monitoring 2023-24: Appendix 1: Better Care Fund Metrics Report Q3 2023-24



Permanent Admissions to Nursing and Residential Homes

2023-24 plan: Lower than 41.6 per month (average of annual target of 499.6.)

December 2023 actual: 28.0 (See note about data collection below.)

December 2022 comparison: 45.9.

Adult Social Care (ASC) is continuing to work towards reducing new admissions to residential settings, while increasing non-residential options. This has been effective and the percentage of res to non-res customers has been moving in the right direction, however the average cost of placements is increasing, due to market pressures and complexity of customer need.

Due to increased demand and reduced market capacity, ASC is experiencing significant wait times in all areas of the business. This means the current performance may be impacted by individuals having to wait longer before a placement can be identified, which shows as an over estimated reduction in new admissions.

Please note that data for this metric is collected over an extended period. Hence, the most recent months will always show low figures pending full data collection.

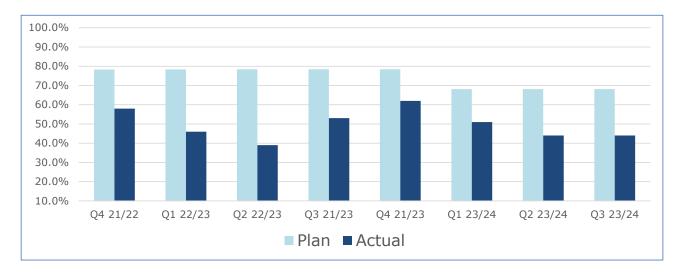


Figure 2 Reablement (% 65+ at home 91+ days post-discharge) - 24 months to Q3 2023-24

2023-24 plan: Higher than 68.2 percent per month (annual target of 68.2 percent.)

Q3 2023-24 actual: 44.0 percent.

Q3 2022-23 comparison: 53.0 percent.

There has been an increase to the level of dependence and complexity of people referred to the reablement service over the last 12 months. This is due to an increase in dependency in the relevant population, particularly those being discharged from hospital, and also an increased focus on ensuring as many people as possible benefit from referral to a reablement service, so a wider application of the criteria for the service.

Unplanned Hospitalisation for Chronic Ambulatory Care Sensitive Conditions

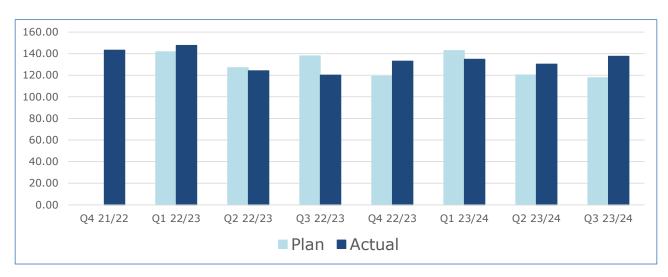


Figure 3 Ambulatory Case Sensitive Conditions - 24 months to Q3 2023-24

Q3 2023-24 plan: Lower than 117.8 – Indirectly standardised rate of admissions per 100,000 population.

Q3 2023-24 actual: 137.6.

Q3 2022-23 comparison: 120.2 percent.

This metric is a measure of emergency admissions with a primary diagnosis of an ambulatory care sensitive condition such as: acute bronchitis, angina, ischaemic heart disease, heart failure, dementia, emphysema, epilepsy, hypertension, diabetes, COPD, pulmonary oedema.

At Q3 2023/24 the avoidable admission rate is 16.4% above the planned figure of 120.3 although there is not a discernible trend in the figures available to date.

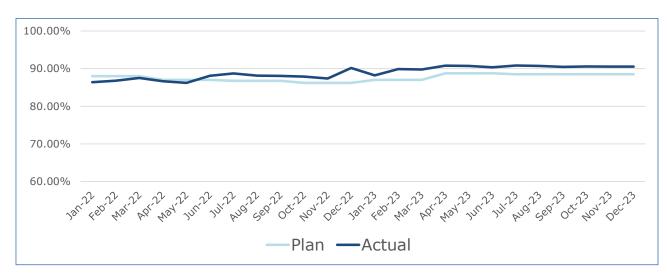


Figure 4 Discharge to Usual Place of Residence - 24 months to December 2023

Q3 2023-24 plan: Higher than 88.5 percent.

December 2023 actual: 90.5 percent.

December 2022 comparison: 90.2 percent.

This measure for discharge to usual place of residence has been constructed by the national Better Care Fund team around the 95% expectation in the discharge policy for Pathways 0 and 1. However it should be noted that the policy was not intended as setting a hard target for these pathways.

This metric continues to perform above plan.

Emergency Admissions due to Falls

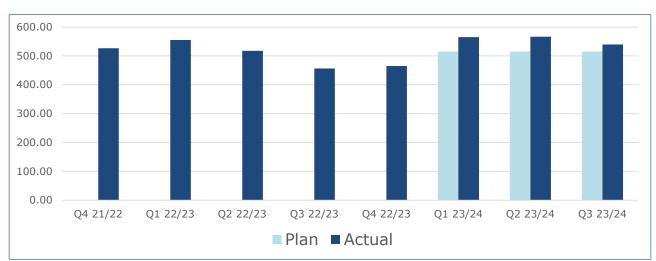


Figure 5 Emergency Admissions due to Falls - 24 months to Q3 2023-24

Q3 2023-24 plan: Lower than 514.5 percent.

Q3 2023-24 actual: 539.8 percent.

Q3 2022-23 comparison: 456.7 percent.

Falls are the largest cause of emergency hospital admissions for older people, and significantly impact on long term outcomes.

This indicator is an important measure around joint working between adult social care and health partners (e.g., urgent community response services) to prevent hospital admissions and reduce falls which will improve outcomes for older people and support independence.

At Q3 2023/24 the Falls rate is above the planned figure of 514.5 by 4.9%, and above a 2-year average of 524.0. However, it the lowest quarterly figure for the year to date.

Contact: Paul Keough, Better Care Fund Manager, NHS Sussex Integrated Care Board and West Sussex County Council, 07920 817577, <u>paul.keough@nhs.net</u>

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Health and Wellbeing Board (HW) Meeting Date	25-Apr-24	11-Jul-24	07-Nov-24	23-Jan-25	
Items	Lead Contact				
Progress update from West Sussex	Alison				
Housing Group on housing and	Challenger/	2/			
homelessness	Natalie Brahma	V			
	Pearl				
Community Health Survey	Alison		\checkmark		
	Challenger		v		
HWB Development	Alison	,			
	Challenger	\checkmark			
Joint Local Health and Wellbeing	Alison		\checkmark		
Strategy	Challenger		v		
Developing a draft Alcohol Strategy	Alison			,	
for West Sussex	Challenger			\checkmark	
Annual Reports/Actions					
Terms of Reference Review	Erica Keegan				
			\checkmark		
Safeguarding Adults Annual Report	Julie				
	Phillips/Annie		\checkmark		
	Callanan		v		
Safegaurding Childrens Annual	Chis Robson,				
Report	Independent				
	Chair/Julia				
HealthWatch Annual Report (Timing	Zoey Harries				
TBC)					
Pharmaceutical Needs Assessment	Jacqueline Clay				
(formal revision due 2025)	,				
Joint Strategic Needs Assessment	Alison		,		
(annual summary)	Challenger		\checkmark		
Health Protection Assurance Annual	Alison		,		
Report	Challenger/		\checkmark		
	Matthew Ollev				
Joint Health and Wellbeing Strategy -			\checkmark		
term ends March 2024	Challenger				

Health and Wellbeing Board (HWB) Work Programme 2024/2025					
Meeting Date	25-Apr-24	11-Jul-24	07-Nov-24	23-Jan-25	
Items	Lead Contact				
Standing Items					
On standby HWB - Local Outbreak Engagement Board	Alison Challenger				
HWB - Children First Board	Lucy Butler	\checkmark	\checkmark	\checkmark	\checkmark
Better Care Fund Monitoring	Paul Keogh/Chris	\checkmark	\checkmark	\checkmark	\checkmark
Public Health Update	Alison Challenger	\checkmark	\checkmark	\checkmark	\checkmark
Recommendation and Action Tracker	Alison Challenger	\checkmark	\checkmark	\checkmark	\checkmark
Integrated Care System (ICS) (Incorporating Health Inequalities)	NHS Leads Pennie Ford/Chris Clark/	\checkmark	\checkmark	\checkmark	\checkmark