

Private Document Pack

Leadership Gloucestershire

Tuesday 20 June 2023 at 10.00 am

Council Chamber – Shire Hall



AGENDA

1	WELCOME	Cllr Mark Hawthorne
2	ACTION NOTES (Pages 1 - 4)	Cllr Mark Hawthorne
3	INTERNATIONAL RESETTLEMENT IN GLOUCESTERSHIRE (Pages 5 - 12)	Siobhan Farmer Peter Tonge
4	ECONOMIC GROWTH UPDATE	
	a) LEVELLING UP, COUNTY DEALS AND INVESTMENT ZONES	Pete Bungard
	b) CITY REGION BOARD UPDATE	Gareth Edmundson
	c) WESTERN GATEWAY	Pete Bungard
5	SEVERN ESTUARY STEERING GROUP UPDATE	Pete Bungard
6	HEALTH UPDATE	
	a) ONE GLOUCESTERSHIRE - ICS (Pages 13 - 24)	Andy Seymour

7	NEXT MEETINGS 26 September 2023 at 2pm 5 December 2023 at 10am	
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Leadership Gloucestershire – 1 March 2023

Remote meeting via Microsoft Teams

1 Welcome, introduction and apologies

Name	Organisation	Apologies
Cllr Mark Hawthorne (Chair) Pete Bungard Siobhan Farmer Steve Mawson	Gloucestershire County Council	
Cllr Catherine Braun Kathy O'Leary	Stroud District Council	
Cllr Richard Cook Jon Topping	Gloucester City Council	
Cllr Tim Gwilliam Pete Williams	Forest of Dean District Council	
Cllr Mike Collins Gareth Edmundson	Cheltenham Borough Council	
Cllr Joe Harris Rob Weaver	Cotswold District Council	
Alistair Cunningham	Tewkesbury Borough Council	Cllr Rob Bird
Mary Hutton	NHS Gloucestershire	Dr Andy Seymour Gill Morgan
Ruth Dooley Dev Chakraborty	GFirst Local Enterprise Partnership (LEP)	
Emily Manser	Cities and Local Growth Unit	

2 ACTION NOTES

The notes of the meeting held on 13 December 2022 were noted and agreed subject to the following amendment:

It was suggested that a progress report be presented at the next meeting and this was noted. Action by – Pete Bungard. In relation to Investment Zones, two bids had been submitted by GCC although they did not have the support of Stroud District Council or Cheltenham Borough Council as required by Government. Although it appeared clear that the new government was unlikely to take this initiative forward, the autumn statement made reference to research based Investment Zones. No guidance yet existed, but the Golden Valley was thought to be a strong offer for a cyber based proposition. ”

3. ECONOMIC GROWTH UPDATE

3.1 Levelling-up, County Deals and Investment Zones

Pete Bungard provided the update outlining that nothing further had come from Investment zones. If anything was to develop in the future the Golden Valley and Cyber would put Gloucestershire in a strong position.

In relation to County Deals, Pete Bungard referred to the response that had been circulated in response to the Council's letter to the Secretary of State, Michael Gove, regarding devolution. The reply was essentially 'not yet' but there were positives that Gloucestershire could take from the response. It had been logged that Gloucestershire was an 'easy' coterminous bid and if there was a window of opportunity Gloucestershire would be ready.

3.2 Gloucestershire Economic Growth Joint Committee (GEGJC) and City Region Governance

Gareth Edmundson gave a brief update on the governance arrangement proposals for the Gloucestershire City Region Board and on the transition of responsibility and conclusion of the Joint Economic Growth Committee.

The proposal that had gone forward with engagement at the Joint Committee was to rationalise the committee and City Region Board into one body. This would continue to have primary membership from each authority. Regarding the position of Chair, the legislation was clear that the upper tier authority was in the lead role. Gloucestershire County Council would be the lead authority and a member of the Cabinet would have the Chair.

It was explained that there would be an extension to the committee for 6 months to get the final agreements in place and for a smooth transition. There would need to be an updated inter-authority agreement.

3.3 Western Gateway

- Pete Bungard gave an update on the Western Gateway Partnership. He explained that he had met with Jon Wilkinson in early February who was on a two year secondment, but was a long term Bristol based civil servant. He had been involved in the Government's longer term devolution plans.

A very positive meeting had been held with Rolls-Royce regarding the Berkeley and Oldbury sites and taking advantage of the opportunities of those sites.

The Gateway was keen to push Cyber as one of the “super sectors”, fully recognising the importance of the Golden Valley as well as other cyber opportunities across a single sector in the Gateway area.

Pete Bungard had joined the Severn Estuary Steering Committee. He would share updates at future meetings of Leadership Gloucestershire.

Ruth Dooley updated Leadership Gloucestershire that she had chaired a Western Gateway round table and that there was an exercise to map resources on Cyber Security. There would be a follow up meeting later in March where the proposal was being worked up.

4 HEALTH UPDATE

a) Covid and Flu Vaccine Programme Update

Providing an update on the Gloucestershire Covid and Flu Vaccine Programme, Siobhan Farmer provided the following detail:

- Winter campaign for flu and covid – 72.1% of those eligible for a covid booster had done so and there had been comparable uptake in the flu vaccine compared to last winter.
- Going forward, covid vaccination eligibility was likely to fall in line with the flu vaccine. It was recognised that there was a need for repeated covid vaccination boosters going forward and so it would likely become part of the winter programme.

- On Covid cases, there was high levels of population immunity. There were a couple of new variants but they were very similar to the b5.1 variant.
- So far, nothing new was emerging from China following the lifting of the “no covid” policy.
- Covid was becoming more of an endemic disease, with smaller shorter waves.
- Local reporting ceasing by 31 March

Following a request, information would be circulated on the impact of long covid on residents in Gloucestershire.

ACTION Siobhan Farmer/ Mary Hutton

In response to a question on preparations for any similar situation in the future it was explained that there was the Local Health Resilience Partnership. All plans were being reviewed including the pandemic and flu plan.

b) One Gloucestershire - Integrated Care System

Mary Hutton gave an update on the One Gloucestershire NHS Integrated Care System, including establishment of the Gloucestershire Health and Wellbeing Partnership.

The ICP strategy had been published and the team were working on the plans under that. There were funding Challenges with Gloucestershire losing £15m over the next two years due to changes to the formula.

Urgent care targets had been broadly delivered over the last 6 weeks.

Gloucestershire performance on dental access was poor and a group had been set up to understand how to improve that position.

5 FUTURE MEETINGS

Tuesday 20 June at 10am – This would be held at Shire Hall.

Tuesday 26 September at 2pm

Tuesday 5 December at 10am

International Resettlement in Gloucestershire

Peter Tonge, Director of Communities, Tewkesbury Borough Council

Siobhan Farmer, Director of Public Health, Gloucestershire County Council

Presentation to Leadership Gloucestershire, 20th June 2023

International resettlement - Oversight

Current main schemes in Gloucestershire (total is c.1700 people **not** including unaccompanied children)

- **Gloucestershire Refugee Resettlement Programme (GRRP)** for Syrian refugees (also called UK Resettlement Scheme, UKRS, as it was widened in 2001) c. 350 people
- **Afghan Relocations and Assistance Policy (ARAP) and Afghan Citizens Resettlement Scheme, (ACRS)** – 119 individuals in county as of April 2023 commitment to resettle 35 families, with 29 settled in Gloucestershire by October 2022
- **Homes for Ukraine (HfU)** – Over 1459 people have arrived in Gloucestershire. 642 have left the scheme for various reasons e.g. moved to private accommodation or left the country.
- **Ukraine Family Scheme** – accurate numbers unknown, estimated c. 1/3rd of HfU numbers
- **Hotels*** - circa 432 asylum seekers in 5 contingency settings in Gloucestershire. **Due to rise to 529**
- **Sudanese scheme** – UK & Irish national and those with HO permission to remain will have access to services including homelessness.

Gloucestershire Action for Refugees and Asylum Seekers (GARAS) provide critical support to refugees & asylum seekers living in Gloucestershire; currently funded through separate contracts via each scheme.
Unaccompanied asylum seeking children (c.50) – not all under above schemes, have separate funding.

*NB there are no Afghan Bridging hotels in Gloucestershire

Funding for the Schemes

- **ARAP/ACRS (paid to County, passed to Housing Partnership hosted by Gloucester City)**
 - £20,520 per person over three years for resettlement and integration costs
 - £4,500 per child for education requirements
 - £850 to cover language provision for adults
 - £2,600 to cover healthcare costs
- **HFU (paid to County, funding passed to districts and funds County based team)**
 - £10,500 per individual reducing to £5,900 additional local arrangements for support in place plus specific funding for education & childcare of between £3,000 to £8,755 (age dependent)
 - Recent announcement of additional £1,010,490 total, split between districts ringfenced for the prevention of homelessness, with a priority given to supporting Ukrainian guests
- **Asylum seekers (paid to districts)**
 - (Up to) £750 per person in some Home Office supported accommodation e.g. Contingency Hotels, Dispersal Accommodation

Local Authority Housing Fund (LAHF)

The Local Authority Housing Fund (LAHF) was launched on 14 December 2022 by DLUHC. The LAHF is a **£500m capital grant fund** to support local authorities in England to provide sustainable housing for those unable to secure their own accommodation in order to alleviate increased housing pressures on LAs (focus on ACRS, ARAP, HfU and Ukraine Family Scheme)

Local Authority	Requirement	DLUHC Grant £m	Additional funding £m *	Timescale
Cheltenham	21	2.36	TBC	Nov
Stroud	15	1.8	2.2	TBC
Tewkesbury	12	1.7	4.04	Sept
Cotswolds	14	2.05	TBC	TBC
Forest of Dean	NA			
Gloucester	13	1.33	0.4	TBC

Round 2 was announced (**£250m capital grant**) in March 2023, aimed at supporting Afghan resettlement.

* Additional funding met from variety of sources including partnership funding, reserves, prudential borrowing, S.106.

Dispersal Accommodation

- Clear direction from HM Government of need to move all asylum seekers & Afghan refugees out of hotels into dispersal accommodation as part of National Dispersal Plan.
- Regional plan has been agreed between Home Office and South West Migration Partnership
- The South West needs to increase by 3,720 bed spaces in order to fulfil the regional plan (28% achieved)
- In April '22 Gloucestershire needed 431 more bed spaces. We have increased by 7, leaving 424 required
- Clearsprings Ready Homes (CRH) are managing this process and currently seeking large scale and small accommodation within the county including exploring potential for modular builds

Local Authority	Expected	Current
Cheltenham	109	34
Stroud	81	0
Tewkesbury	63	0
Cotswolds	61	0
Forest of Dean	58	0
Gloucester	255	169
Total	627	203

Dispersal Funding – Complex!

Hotel and Temporary Accommodation Wraparound support funding:

- homelessness (**£9,150 per household**)
- hotel wraparound (**£28 per person per day**)
- caseworker funding (**£2.5 million**)

Flexible housing funding:

- Per person (**£7,100**)
- Integration tariff (**£20,520 per person over 3 years**).

Other **separate funding** streams for:

- Education – amount dependent on age of child
- Access to ESOL
- ESOL childcare funding
- Community Sponsorship Reimbursement
- Property adaptations

Issues and challenges

- **Safeguarding** – unaccompanied migrants, hotel concerns, host / guest safeguarding for HfU or employment exploitation; mitigated/managed but additional pressures on local services
- **Finances** – complex/multiple arrangements/differing criteria; consider opportunities for pooled budgets
- **Commissioning** – multiple contracts with same provider (GARAS), much of which is one off or short term; consider longer term sustainability, joint commissioning/contract arrangements
- **Equality** - multiple schemes operating, risk of inequality across resettlement provision is high (as well as with non-resettlement housing provision); consider county wide position on this
- **Hotels** – minimal funding, unpaid work by local organisations; opportunities to improve day-to-day wellbeing, better nutrition etc
- **Education** - access to ESOL classes; consider joining up funding streams
- **Community cohesion** – community concerns regarding hotels, equity arguments, media coverage
- **Longer term accommodation** – challenging in county, market prices are higher than average in many places, shortage in private rental sector

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Integrated Care Strategy & Dental, Pharmacy and Optometry Leadership Gloucestershire



Integrated Care Strategy Update



The role of Integrated Care Partnerships (ICPs)

- **Health and Care Act 2022**, section 26 resulted in the formation of the statutory Integrated Care System to include two equally important and complementary components:
 - ICS NHS Body (Integrated Care Board - ICB)
 - Integrated Care Partnership (ICP)
- **The ICP brings together public, voluntary and community sector partners** to work collaboratively to:
 - achieve better health and wellbeing outcomes for their populations
 - support place-based partnerships and coalitions with community partners
 - develop an integrated care strategy to address the broad health and social care needs
 - share good practice across places and systems to improve health and care services
- **Gloucestershire Health and Wellbeing Partnership** is our ICP, it is:
 - an aligned model with Health and Wellbeing Board
 - a critical component of the Integrated Care System
 - a statutory committee
 - built on existing partnerships and collaboration

The Integrated Care Strategy

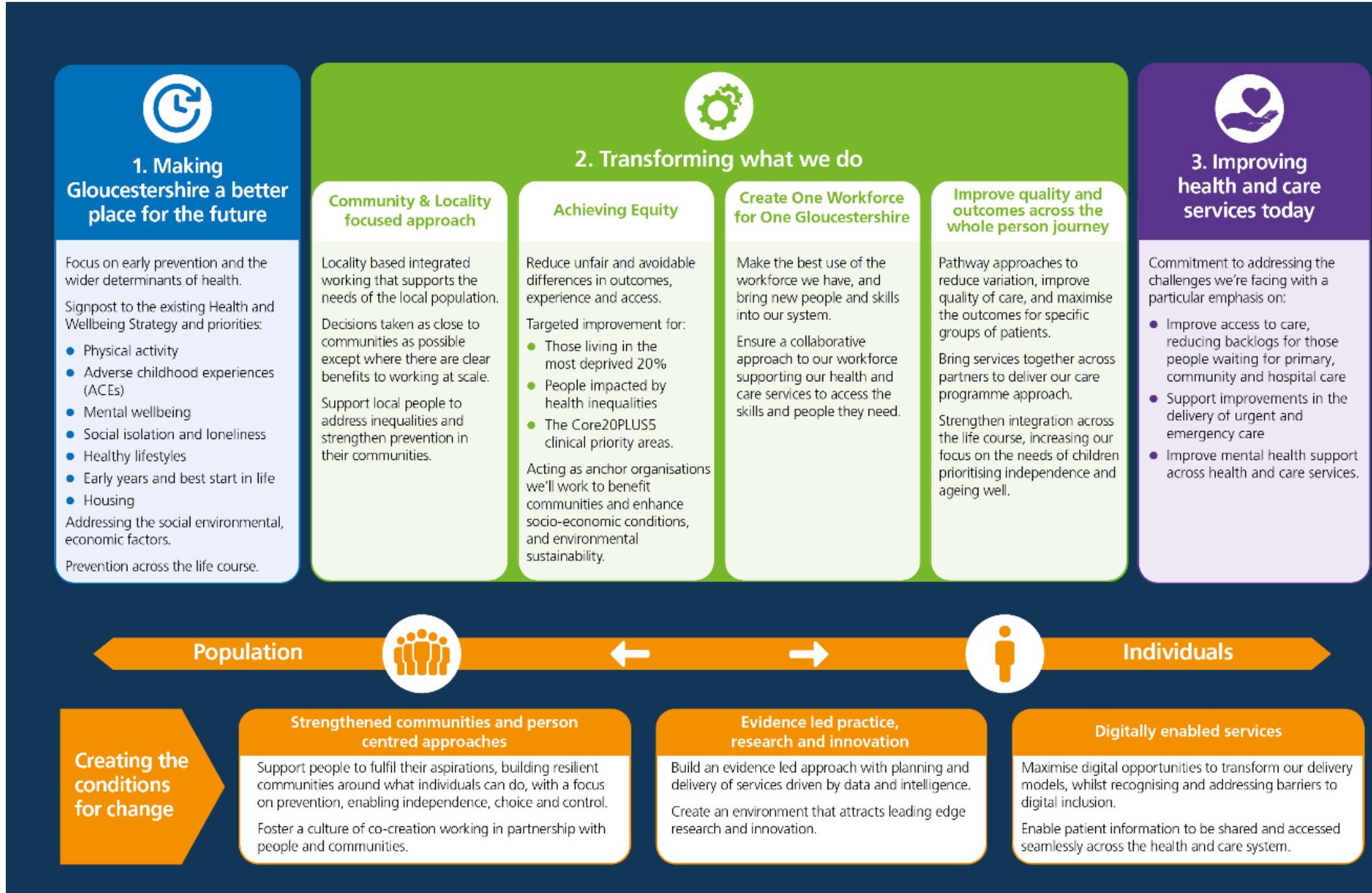
- **The purpose** of the Integrated Care Strategy is to develop evidence based system wide priorities that will improve the public's health and wellbeing and reduce disparities.
- **Guidance** on developing the Integrated Care Strategy was published by Department of Health and Social Care on 29th July 2022, (guidance available [here](#)).
- **The Content** of the strategy builds on existing work to tackle challenges such as:
 1. reducing disparities in Health and Social care
 2. improving quality and performance
 3. preventing mental and physical ill health
 4. maximising independence and preventing care needs by promoting control, choice and flexibility
- **The ICP own the strategy** and are therefore responsible for driving it forward:
 - Based on evidence and underpinned by the JSNA (joint strategic needs assessment)
 - Involve people and organisations in the production

Our Integrated Care Strategy

- Published December 2022
- Describes **what** our ambitions are for Gloucestershire
- Now focus on **how** we work together to deliver these ambitions
- Three exemplar themes included as a call to action to support the development of our partnership working.
- Exploring how we can work differently across unifying themes is part of our delivery of the Interim Integrated Care Strategy



Strategy on a Page



Three Exemplar Themes

Theme 1: Employment

- In Gloucestershire, 8,550 people aged 16 to 64 are currently unemployed.
- 79% of people claiming Employment Support Allowance have been claiming for over 5 years
- 13,254 people are claiming Universal Credit with no work requirement this is more than double the figure in February 2020 (6,020) with significant increases in all age groups 20+
- 444 young people aged 16-18 are not in education, employment or training (NEET)
- Disabled people are twice as likely to be unemployed.

Ambition: Create additional employment and skills development opportunities

Theme 2: Smoking

- Smoking is the single biggest cause of inequality in premature death rates and the leading cause of preventable disease and disability
- 50% of long-term smokers will die prematurely - many more live with debilitating illnesses
- Higher smoking prevalence is associated with almost every indicator of deprivation or marginalisation. In Gloucestershire:
 - Smoking prevalence in adults: 11.6%
 - Routine and manual workers: 26%
 - Smoking prevalence in adults with a serious mental illness: 38%
 - Smoking status at time of delivery: 11%

Ambition: Identify greater numbers of smokers and signpost to appropriate smoking cessation support

Theme 3: Blood pressure

- High blood pressure rarely has symptoms and so detection is opportunistic.
- Around a third of adults in the UK have high blood pressure, although many don't know. In Gloucestershire we have identified 60.9% of the anticipated cases.
- Hypertension and the effects are a major cause of disability adjusted life years in the UK.
- Effective treatment of hypertension reduces the risk of heart attacks, stroke, heart failure and death.

Ambition: Increase prevention and early identification of high blood pressure and support those with a diagnosis to manage their blood pressure

Focus on Implementation

- Partners are using **the strategy as a roadmap** to coalesce around and work together to achieve the ambitions
- ICP meetings **focus on particular aspects** of the strategy to:
 - Understand what is happening across system on that area
 - Identify key opportunities that would support us to achieve our collective ambitions
 - Identify how the partnership can support these opportunities
 - Implement a plan to progress the agreed opportunities
- **Next ICP meeting 25th July 2023** focusses on:
 - Transforming what we do: create one workforce for One Gloucestershire
 - Progress on the blood pressure exemplar theme

Dental, Pharmacy and Optometry Update



Gloucestershire Dental Strategy

- Established a Dental Strategy Group in January 2023 in response to delegated commissioning of primary, community and acute dental services from April 2023.
- Membership includes: Healthwatch, 2 patient representatives, Gloucestershire Local Dental Committee (LDC), NHSE, Gloucestershire Health and Care NHS Foundation Trust (GHC) Gloucestershire Hospitals NHS Foundation Trust (GHFT), South West Dental Network, Gloucestershire County Council Public Health team and ICB.
- Build on the NHS SW roadmap and GCC's statutory responsibility for improving the oral health of the population and take the opportunity to develop local partnerships to address the key areas of **access, workforce** and **oral health improvement**. Plans in all three areas in development currently.

Community Pharmacy update – ICS SMT

Gloucestershire has 104 Community Pharmacies supporting our local population access prevention advice and effective treatments for many health conditions.

NHSE 'Delivery plan for recovering access to primary care' affirms the future value that Community Pharmacy can deliver as the service model changes from a dispensing to a more clinical focus.

Work on local implementation is underway since taking delegated management in ICB from April 2023.



Current challenges

- Workforce
- Funding
- Closures

Work programmes

- Community Pharmacy Strategy Group
- Community Pharmacy Clinical Lead
- Workforce Plan

Eye Health Clinical Programme Group

- Delegation of optical services from April 2023 will build on the already integrated work in place.
- The Gloucestershire Eye Health Strategy was refreshed during 2021 and includes the following developments to reduce the instances of avoidable sight loss and ameliorate the consequences of sight loss,
 - **Community Urgent Eye Services (CUES)** - provides urgent assessment, treatment or referral for sudden onset eye problems such as flashes, floaters, vision loss or minor eye injuries via high street opticians.
 - **Homeless Eye Care Project** – Providing free sight tests and spectacles to homeless and other vulnerable people regardless of whether they meet the criteria for free care. Over 100 spectacles have been dispensed in 9 months.
 - **Community Ophthalmic Link** – Gloucestershire is the first in the country to provide community optometrists with access to the hospital eye service data, images and referral information. Benefits are being realised for a reduction in referrals for patients with stable conditions and optometrists better able to support the patient with their eye condition in the community.
 - **Higher Education Opportunities** – Utilising Health Education England funding to support community optometrists to access higher education so that in the future we can look for more shared care opportunities and more eye care on the high street.