

Meeting **HEALTH AND WELLBEING BOARD**

Date **Wednesday, 8 January 2020 (commencing at 2.00 pm)**

Membership

Persons absent are marked with an 'A'

COUNTY COUNCILLORS

Steve Vickers (Chair)
Joyce Bosnjak
A Glynn Gilfoyle
Francis Purdue-Horan
Martin Wright

SUBSTITUTE MEMBERS (COUNTY COUNCILLORS)

Jim Creamer for Glynn Gilfoyle

DISTRICT COUNCILLORS

A	David Walters	-	Ashfield District Council
	Susan Shaw	-	Bassetlaw District Council
	Colin Tideswell	-	Broxtowe Borough Council
	Henry Wheeler	-	Gedling Borough Council
A	Debbie Mason	-	Rushcliffe Borough Council
	Neill Mison	-	Newark and Sherwood District Council
	Amanda Fisher	-	Mansfield District Council

SUBSTITUTE MEMBERS (DISTRICT COUNCILLORS)

John Wilmott for David Walters

OFFICERS

	Melanie Brooks	-	Corporate Director, Adult Social Care and Health
A	Colin Pettigrew	-	Corporate Director, Children and Families Services
	Jonathan Gribbin	-	Director of Public Health

CLINICAL COMMISSIONING GROUPS

	David Ainsworth		Nottinghamshire CCGs
A	Idris Griffiths	-	Bassetlaw Clinical Commissioning Group
	Dr Jeremy Griffiths	-	Rushcliffe Clinical Commissioning Group (Vice-Chair)

LOCAL HEALTHWATCH

	Sarah Collis	-	Healthwatch Nottingham & Nottinghamshire
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NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER

Kevin Dennis

OFFICERS IN ATTENDANCE

Geoff Hamilton	-	Senior Public Health and Commissioning Manager
Lucy Hawkin	-	Public Health and Commissioning Manager
Louise Lester	-	Consultant in Public Health
Jo Marshall	-	Public Health and Commissioning Manager
Kay Massingham	-	Public Health and Commissioning Manager
Catherine Pritchard	-	Consultant in Public Health
Edward Shaw	-	Public Health and Commissioning Manager
Martin Gately	-	Democratic Services Officer

OTHER ATTENDEES

Dr Agnes Belencsak	-	Screening and Immunisation, Public Health England
Allan Reid	-	Oral Health Consultant, Public Health England
Leanne Riley	-	Screening and Immunisation, Public Health England
Oliver Glover	-	F2 Doctor
Kate Whittaker	-	Public Health Support Officer
Andy White	-	Public Health Support Officer

MINUTES

The minutes of the last meeting held on 4 December 2019 having been previously circulated were confirmed and signed by the Chairman.

APOLOGIES FOR ABSENCE

The following apologies had been received: Colin Pettigrew, Corporate Director, Councillor Glynn Gilfoyle, (other reasons) Councillor David Walters, Ashfield District Council (medical) and Idris Griffiths, Bassetlaw CCG.

DECLARATIONS OF INTEREST BY BOARD MEMBERS AND OFFICERS

None.

CHAIRS' REPORT

The Chairman highlighted the following topics from his report:

The NHS Targeted Lung Health Checks Programme in Mansfield and Ashfield, which involves Primary care identifying smokers and ex-smokers for lung cancer risk assessment and smoking cessation. The programme may detect other respiratory diseases, and those not registered with a GP will miss out on the programme. In other areas of the countries similar schemes have been proven to improve longer term outcomes.

Jonathan Gribbin undertook to bring to a future meeting information on the food environment. Mr Gribbin confirmed that while information on hygiene status was generally available, information on the content of food was more variable.

RESOLVED: 2020/001

That:

- 1) The contents of the report be noted, and any actions required by the Board in relation to the issues raised be considered.

POPULATION SCREENING PROGRAMMES IN NOTTINGHAMSHIRE

Louise Lester, Consultant in Public Health, Dr Agnes Belencsak, Screening and Immunisation Lead, Derbyshire and Nottinghamshire, Public Health England and Leanne Riley, Screening and Immunisation Manager, South Yorkshire & Bassetlaw, Public Health England introduced the report and made a detailed presentation regarding screening. Members heard that screening was a way of detecting the early signs of disease in people without any symptoms. The primary purpose being to reduce the risk of poor health outcomes. Screening results are presumptive and do not give a diagnosis.

Although service performance in Nottinghamshire is good, there is a variation in uptake and coverage within the county generally associated with more deprived communities and underserved populations.

Sarah Collis from Healthwatch queried how communities who don't take up screening are engaged with, and gave the example of support to deaf people with cancer – who may have low levels of health literacy. Louise Lester confirmed that while pictographic and video information was available it was not locally available in British Sign Language.

Councillor Sue Shaw raised the issue of low uptake of bowel cancer screening, possibly due to some people finding the nature of the test abhorrent. It was important the new Faecal Immunochemical Test (FIT) is made available to all as this is simpler and more accurate than the older Faecal Occult Blood test.

Ms Collis indicated that, before funding cuts, Healthwatch had used a publicly displayed 'giant bowel' to promote bowel cancer screening. Dr Belencsak undertook to feed back the concerns raised by Board Members to NHS England & Improvement. Ms Collis requested that further work be carried out on understanding why people do not attend screening (e.g. language barriers) and what can be done about it. What does good practice look like? Ms Collis was keen for the voluntary sector to be engaged in increasing uptake.

Councillor Amanda Fisher asked if any further communication takes place with people who do not respond to an offer of screening. Is the reason for not accepting the offer of screening recorded? Councillor Fisher suggested that pharmacies could also have a useful role to play in encouraging people to undertake screening.

Councillor Joyce Bosnjak enquired if there is a correlation between low uptake of screening and low uptake of healthchecks. Ms Lester agreed to investigate how Clinical Commissioning Groups in South Yorkshire & Bassetlaw are incentivised to improve uptake.

David Ainsworth suggested using the principle of 'Making Every Contact Count' in promoting uptake (e.g. use of Primary Care Networks, the Department of Work & Pensions). Dr Jeremy Griffiths requested a strategy to address inequalities in uptake.

RESOLVED: 2020/002

That:

- 1) The arrangements, achievements and challenges relating to the local screening programmes in Nottinghamshire be considered.
- 2) The following additional actions were identified: better working with communities who don't take up screening via a coherent strategy; improved access to information for groups with low levels of health literacy e.g. information in British Sign Language for the deaf community; the delivery of screening in alternative settings.
- 3) Health and Wellbeing Board Members will promote local and national screening messages to their staff and service users, especially those from under-served

communities, and to engage with future initiatives to increase uptake and address inequalities.

APPROVAL OF JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) CHAPTER: TOBACCO CONTROL

Catherine Pritchard, Consultant in Public Health, and Jo Marshall, Public Health and Commissioning Manager introduced the report. Members heard that smoking during pregnancy was still a major health inequality. In addition, half of regular smokers will be killed by their addiction due to a smoking related illness.

Members raised concerns regarding illegal tobacco being sold at 'pocket money' prices and the high prevalence of young people smoking e-cigarettes (e.g. in Mansfield) which are a public health risk since they cause conditions such as 'popcorn lung,' as well as using tobacco as a means of smoking marijuana. In addition, concerns were raised regarding reductions in funding for smoking cessation services.

Jonathan Gribbin recognised that the smoking cessation service had not performed at the required level and knew that many residents had received an unsatisfactory service. The current smoking cessation service is being replaced by a new Integrated Wellbeing Service. This will include stop smoking services in addition to weight management services, healthy eating support, physical activity, and Alcohol Identification & Brief Advice.

RESOLVED: 2020/003

That:

- 1) The Tobacco Control Joint Strategic Needs Assessment (JSNA) chapter be approved.
- 2) The identified themes in appendix 2 that emerged from Tobacco CLear workshop held on 3 December 2019 be considered, and further information be presented to the Health and Wellbeing Board on Wednesday 4 March 2020.

APPROVAL OF JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) CHAPTER: ORAL HEALTH

Kay Massingham, Public Health and Commissioning Manager and Allan Reid, Oral Health Consultant Public Health England introduced the report. Members heard that although oral health of the population has improved over time, there is still a socio-economic gradient in oral health for children and adults. Only 29% of children receiving free school meals had good oral health, compared to 40% of those not eligible. Certain groups of adults were also identified as having particularly poor oral health.

Interventions to improve oral health included improved oral hygiene, improved diet, access to fluoride and regular attendance at the dentist.

Councillor Fisher queried which schools participated in the supervised toothbrushing scheme that was part of the Oral Health Promotion service, run via Nottinghamshire Healthcare NHS Foundation Trust. Ms Massingham explained that the intervention took place in schools targeted on the basis of oral health need in local children. She undertook to provide information on the participating schools.

Sarah Collis raised concerns regarding dental care in residential homes, such as difficulties with taking elderly people with dementia to the dentist. Mr Reid confirmed that oral health was not always high on the agenda of residential care homes.

Members highlighted the importance of the early introduction of children to the dentist as a friend and the need for oral health to be embedded in Primary Care Networks. The need for GP training was also recognised.

RESOLVED 2020/004

That:

- 1) The new Oral Health Joint Strategic Needs Assessment (JSNA) chapter be approved.

JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) CHAPTER: CANCER, SUPPLEMENTARY APPENDIX FOR BASSETLAW

Geoff Hamilton, Senior Public Health and Commissioning Manager introduced the report. Members were reminded that in January 2019, the Health and Wellbeing Board approved a JSNA chapter on cancer. This outlined the current position in relation to cancer across Nottinghamshire, including local incidence, mortality and survival. A list of cancer services in Bassetlaw, and the views of service users, is now available as a supplementary appendix. The document has been endorsed by the Doncaster and Bassetlaw Cancer Programme Board.

RESOLVED: 2020/005

That:

- 1) The Nottinghamshire Cancer Joint Strategic Needs Assessment (JSNA) Chapter supplementary appendix for Bassetlaw be approved.

UPDATE ON THE NOTTINGHAMSHIRE PHARMACEUTICAL NEEDS ASSESSMENT 2018-21 AND OUTLINE OF INITIAL PLANS FOR THE 2021-24 REFRESH

Lucy Hawkin, Public Health and Commissioning Manager introduced the report. Members heard that the Pharmaceutical Needs Assessment (PNA) describes the availability of pharmaceutical services in Nottinghamshire and assesses whether these services meet the needs of the population. It provides NHS England with information to support decisions about new and altered pharmaceutical services.

Periodic supplementary statements are prepared where there are changes to pharmaceutical services that do not need a complete review of the PNA. The next full review of the PNA is due to be published by April 2021. A multi-agency steering group will support the development of this work.

RESOLVED: 2020/006

That:

- 1) The Supplementary Settlement to the Pharmaceutical Needs Assessment 2018-2021 for the period April 2019 until September 2019 be approved.
- 2) The next supplementary statement for the period October 2019 to March 2020 be presented to the Health and Wellbeing Board for approval in July 2020.
- 3) The planned approach to the 2021-24 Pharmaceutical Needs Assessment refresh be approved with a more detailed paper outlining a project plan being presented to the Board in mid 2020.

WORK PROGRAMME

Melanie Brooks requested that a workshop on employment and health & wellbeing be held later in the year.

Dr Jeremy Griffiths suggested a future workshop on health inequalities.

RESOLVED: 2020/007

That:

- 1) The Board's work programme be noted, and consideration be given to any changes which the Board wishes to make.

The meeting closed at 15:58

CHAIR