

## Health and Wellbeing Board

**Wednesday, 05 October 2016 at 14:00**

**County Hall, County Hall, West Bridgford, Nottingham, NG2 7QP**

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### **AGENDA**

- |   |  |         |
|---|--|---------|
| 1 | Minutes of the last meeting held on 7 Sept 2016  | 3 - 8   |
| 2 | Apologies for Absence  |         |
| 3 | Declarations of Interests by Members and Officers:- (see note below)<br>(a) Disclosable Pecuniary Interests<br>(b) Private Interests (pecuniary and non-pecuniary) |         |
| 4 | Update on Nottinghamshire and South Yorkshire and Bassetlaw Sustainability and Transformation Plans – Presentation by David Pearson                                |         |
| 5 | Timeline of Services for Children – Presentation by Colin Pettigrew  |         |
| 6 | Young People's Health Strategy for Nottinghamshire   | 9 - 14  |
| 7 | Chair's Report   | 15 - 26 |
| 8 | Work Programme   | 27 - 30 |

### **Notes**

- (1) Councillors are advised to contact their Research Officer for details of any Group Meetings which are planned for this meeting.

- (2) Members of the public wishing to inspect "Background Papers" referred to in the reports on the agenda or Schedule 12A of the Local Government Act should contact:-

Customer Services Centre 0300 500 80 80

- (3) Persons making a declaration of interest should have regard to the Code of Conduct and the Council's Procedure Rules. Those declaring must indicate the nature of their interest and the reasons for the declaration.

Councillors or Officers requiring clarification on whether to make a declaration of interest are invited to contact Paul Davies (Tel. 0115 977 3299) or a colleague in Democratic Services prior to the meeting.

- (4) Councillors are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.
- (5) This agenda and its associated reports are available to view online via an online calendar - <http://www.nottinghamshire.gov.uk/dms/Meetings.aspx>

Meeting **HEALTH AND WELLBEING BOARD**

Date **Wednesday, 7 September 2016 (commencing at 2.00 pm)**

**Membership**

Persons absent are marked with an 'A'

**COUNTY COUNCILLORS**

Joyce Bosnjak (Chair)  
Richard Butler  
Alice Grice  
Stuart Wallace  
Jacky Williams

**DISTRICT COUNCILLORS**

	Jim Aspinall	-	Ashfield District Council
	Susan Shaw	-	Bassetlaw District Council
	Dr John Doddy	-	Broxtowe Borough Council
	Henry Wheeler	-	Gedling Borough Council
A	Debbie Mason	-	Rushcliffe Borough Council
	Neill Mison	-	Newark and Sherwood District Council
	Andrew Tristram	-	Mansfield District Council

**OFFICERS**

David Pearson	-	Corporate Director, Adult Social Care, Health and Public Protection
Colin Pettigrew	-	Corporate Director, Children, Families and Cultural Services
Barbara Brady	-	Interim Director of Public Health

**CLINICAL COMMISSIONING GROUPS**

	Dr Jeremy Griffiths	-	Rushcliffe Clinical Commissioning Group (Vice-Chair)
A	Dr Mark Jefford	-	Newark & Sherwood Clinical Commissioning Group
A	Dr Gavin Lunn	-	Mansfield and Ashfield Clinical Commissioning Group
A	Dr Guy Mansford	-	Nottingham West Clinical Commissioning Group
	Phil Mettam	-	Bassetlaw Clinical Commissioning Group
A	Dr James Hopkinson	-	Nottingham North & East Clinical Commissioning Group

## **LOCAL HEALTHWATCH**

Michelle Livingston - Healthwatch Nottinghamshire

## **NHS ENGLAND**

A Oliver Newbould - North Midlands Area Team, NHS England

## **NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER**

Kevin Dennis

## **ALSO IN ATTENDANCE**

Suzanne Alvington	-	Rushcliffe CCG
Lyn Bacon	-	Nottingham CityCare
Helen Griffiths	-	Rushcliffe CCG
David Mitchell	-	Rushcliffe Borough Council
Kamaljeet Pentreath	-	Rushcliffe CCG
Beverley Smith	-	Mansfield District Council

## **OFFICERS IN ATTENDANCE**

Kate Allen	-	Public Health
Joanna Cooper	-	Programme Manager, Better Care Fund
Paul Davies	-	Democratic Services
Jenny Charles-Jones	-	Public Health

## **MINUTES**

The minutes of the last meeting held on 13 July 2016 having been previously circulated were confirmed and signed by the Chair.

## **MEMBERSHIP**

It was reported that Councillors Alice Grice, Richard Butler and Stuart Wallace had been appointed in place of Councillors Muriel Weisz, Kay Cutts and Reg Adair for this meeting only. Dr James Hopkinson had been appointed as the representative for Nottingham North and East CCG, but had given apologies for this meeting.

The Chair welcomed Kevin Dennis and Councillor Neill Mison to their first meeting of the Board.

## **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Debbie Mason, Dr Mark Jefford, Dr Gavin Lunn, Dr James Hopkinson and Oliver Newbould.

## **DECLARATIONS OF INTEREST BY BOARD MEMBERS AND OFFICERS**

None.

## **AGENDA ORDER**

The Chair agreed to change the order of items to fit the availability of speakers.

## **SUSTAINABILITY AND TRANSFORMATION PLAN UPDATE**

David Pearson gave a presentation to update the Board on the preparation of the Nottinghamshire Sustainability and Transformation Plan (STP). He referred to a sequence of workshops with stakeholders, including one for Board members, councillors and non-executive directors on 21 September 2016. Work continued to develop detailed implementation plans and governance structures, and to identify resources to support the Plan. The Nottinghamshire Digital Roadmap had been well received and had become a national exemplar. David praised those involved in its development.

Phil Mettam updated the Board on the South Yorkshire and Bassetlaw STP. The draft Plan had been broadly well received, although with requests to provide more information on how financial challenges would be met and more detail about changes to acute hospitals in South Yorkshire. There was work to reconcile the Bassetlaw element of the Plan with the Nottinghamshire STP. Phil informed the Board that he would soon be taking up a secondment with a CCG in Yorkshire.

### **RESOLVED: 2016/051**

That the updates on the Nottinghamshire and South Yorkshire and Bassetlaw Sustainability and Transformation Plans be noted.

## **RUSHCLIFFE NEW CARE MODEL FOR HEALTH**

Dr Jeremy Griffiths and Kamaljeet Pentreath gave a presentation on the Rushcliffe CCG vanguard for integrating health and social care. The model was intended to simplify pathways and reduce avoidable hospital admissions and long term care placements through a single point of access and elimination of duplicated effort. Scoping of requirements would take place over the coming months, with a view to the model operating in shadow form in April 2017 and in full a year later. The CCG was seeking officer and councillor support from the local authority. Dr Griffiths referred also to the immediate and longer term financial challenges facing Nottinghamshire CCGs.

Among points made during discussion on the presentation was the relationship between the vanguards and the STPs. It was explained that the vanguards formed a strand of the STP. As the vanguards developed at different paces to meet local circumstances, some were already operating models of integrated working, while in other areas, equivalent models were in development. Dr Griffiths indicated that the community hub in Rushcliffe would operate on a virtual rather than physical basis initially. There was no wish to break up systems which worked well, but to consider the relationships and interfaces between services. Where a councillor was to be involved in the vanguard, Board members referred to the value of this being a councillor who had relevant connections to draw on. Dr Griffiths assured the Board that the scoping exercise in Rushcliffe would look at existing models both locally and nationally. He emphasised the need to shift from acute care to prevention.

A summary of the various vanguards in the region would be circulated to Board members.

**RESOLVED: 2016/052**

That the presentation be received, and progress with developing a new care model by the Rushcliffe vanguard be noted.

**DEVELOPMENT OF INTEGRATED WORKFORCE DEVELOPMENT STRATEGY AND PLAN**

Lyn Bacon introduced the report which updated the Board on the development of an integrated workforce development strategy for Nottinghamshire. The task had been shaped by the joint workshop in November 2015 for the City and County Health and Wellbeing Boards, and formed a key strand of work to support the STP. Lyn was co-chair of the Local Workforce Action Board, which had replaced the Local Education and Training Council. She outlined the various workstreams, and referred to the challenge of meeting the STP requirement for a five year, costed workforce plan. Lyn was congratulated on achievements so far.

**RESOLVED: 2016/053**

- 1) That the progress be noted on establishing the Nottinghamshire-wide mandate/strategy aligned to the Nottinghamshire STP objectives and aspirations and the governance arrangements now in place to ensure delivery of and integrated workforce development and re-design strategy and plan.
- 2) That the alignment of the planned programme of work with the outcomes of the joint Health and Wellbeing Boards workshop in November 2015 be noted, and the Board be assured that the planned programme of work will deliver those recommendations.

**CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH AND WELLBEING TRANSFORMATION PLAN**

Barbara Brady and Kate Allen introduced the report to update the Board on implementation of the Children and Young People's Mental Health and Wellbeing Transformation Plan, including key achievements, current priorities and future developments. They responded to questions and comments.

- It was observed that the service provider, Nottinghamshire Healthcare NHS Trust did not make clear who commissioned and paid for services. - The commissioners were encouraging the Trust to update the information on its website. In addition, it was pointed out that the Trust was scrutinised by the Joint Health Scrutiny Committee, which might be able to follow this up. The Trust and Commissioning Hub were due to attend the Joint Committee in October.
- How were delays in the eating disorder service being addressed? - It was explained that this would be by raising awareness of the service among young people and relevant organisations.

- Where did young offenders and young victims of crime feature in the strategy, other than in relation to child sexual exploitation? - It was indicated that one priority in the strategy was the care of the most vulnerable young people, which included young offenders and victims of crime. The Youth Offending Service had been involved in this work.
- In his visits to secondary schools in Ashfield, Councillor Aspinall had found all the schools mentioned difficulties with access to Child and Adolescent Mental Health Services (CAMHS). Schools were also missing visits from the Police.
- Anxiety was a natural emotion, so it was important to build resilience in young people. How were schools supported in this work? - Experience had shown that schools were open to discussion about this. Schools were mindful that Ofsted took account of how schools supported students' health and wellbeing. Councillor Wheeler circulated information about the new service which enabled young people to text school nurses.
- How did the strategy address needs while young people were on the waiting list for services? – It was explained that families could have advice on how to deal with the problem during the short term.
- How were services dealing with the long waiting time for children in hospital to see a clinical psychologist? - The Commissioning Hub was considering how the Psychiatric Liaison Service was deployed across the county.

#### **RESOLVED: 2016/054**

That the progress in implementing the Children and Young People's Mental Health Transformation Plan be noted.

#### **BETTER CARE FUND PERFORMANCE, 2016/17 PLAN AND UPDATE**

David Pearson and Joanna Cooper introduced the report of Better Care Fund performance and amendments to the BCF plan. The report also sought approval for proposals in relation to the Disabled Facilities Grant (DFG) and updated terms of reference for the BCF Programme Steering Group (formerly the Programme Board). Asked about whether performance varied across the county, they indicated that there were higher levels of delayed transfers of care at Nottingham University Hospitals. They offered to bring more detailed data to a future meeting.

Bev Smith introduced the recommendations in relation to the Disabled Facilities Grant. She clarified that the recommendation for funding the Handyperson Adaptation Service was for 2016/17. She also proposed an additional recommendation that in order to speed the process up, authority be delegated to the BCF Programme Steering Group to approve any allocations from DFG underspendings. District Councils were praised for the way they had approached discussions about allocating the DFG.

In reply to a question about the Steering Group's technical expertise in information sharing, it was explained that Andy Evans from Connected Notts frequently attended Steering Group meetings, and Vicky Bailey (lead officer for the project) was a Steering Group member.

**RESOLVED: 2016/055**

- 1) That the Quarter 1 2016/17 national quarterly performance report be approved.
- 2) That the amendments to the 2016/17 Better Care Fund Plan be noted.
- 3) That the following Disabled Facilities Grant proposals from the BCF Programme Board be approved:
  - a) That the budgets proposed in the report by the seven District Councils for mandatory and discretionary Disabled Facilities Grants be approved.
  - b) That the funding for the county Handyperson Adaptation Service for 2016/17 be partially met from the county BCF Disabled Facilities Grant allocation; the amount of each district's contribution to be based on their percentage of the overall fund.
  - c) That the supplementary DFG schemes outlined in the report be approved.
  - d) That on order to speed the process up, authority be delegated to the BCF Steering Group to approve any allocations from underspending.
- 4) That the terms of reference for the BCF Programme Steering Group be approved.

**CHAIR'S REPORT**

Particular attention was drawn to the Care Quality Commission's report "Building Bridges, Breaking Barriers – Integrating Care for Older People" and to Public Health England's Childhood Obesity Plan, which was recommended as an item for the Board's work programme.

**RESOLVED: 2016/056**

That the Chair's report be noted.

**WORK PROGRAMME****RESOLVED: 2016/057**

That the work programme be noted.

The meeting closed at 4.55 pm.

**CHAIR**



**05 October 2016****Agenda Item: 6****REPORT OF THE DIRECTOR OF PUBLIC HEALTH****THE YOUNG PEOPLE'S HEALTH STRATEGY FOR NOTTINGHAMSHIRE****Purpose of the Report**

1. To update the Health and Wellbeing Board regarding the implementation of the Young People's Health Strategy for Nottinghamshire.

**Information and Advice****Background**

2. Following publication of the Chief Medical Officer's report, 'Our children deserve better, prevention pays' (2013), the Health and Wellbeing Board requested that a young person's health strategy for Nottinghamshire was developed.
3. A wealth of engagement work with young people and stakeholders was carried out to inform development of the strategy and there was an overwhelming response from young people. The findings from the engagement alongside an early draft strategy were presented to the Health and Wellbeing Board in October 2015.
4. The strategy aims to ensure that young people's health is visible and recognised as a local priority. It does not replace existing commitments to reduce teenage pregnancy, improve child and adolescent mental health or reduce obesity, for example, but it is intended to complement these efforts and articulate a clear vision for what we want to achieve.
5. The strategy is now finalised and sets out the vision for how we will raise the profile of young people's health, including answering the clear call from young people for improved information and education around engaging with health services.

**Young People's Health Strategy**

6. Young people's views are at the heart of the strategy, and its overarching principles are as follows:
  - That young people are always valued, listened to, respected and treated with dignity by health services in Nottinghamshire, and are never seen as less important than young children or older adults.

- That the central importance of the adolescent period in developing positive physical, mental and emotional wellbeing be recognised by all health and allied professionals.
  - That the views, voices and needs of young people are proactively sought and considered whenever health services or systems are being designed or evaluated in Nottinghamshire.
  - That health services in Nottinghamshire are always inclusive and specifically consider the needs and concerns of LGBT (lesbian, gay, bisexual and transgender) young people, as well as young people of different cultures, ethnicities or who have different religious beliefs.
  - That professionals in Nottinghamshire prioritise the safety of young people, understand the importance of child protection in their role, and are aware that no young person who is a victim of exploitation or abuse can be considered to consent to their own mistreatment.
  - That health services in Nottinghamshire understand the central importance of emotional and mental wellbeing for young people's health.
7. The recommendations within the strategy, identified by young people, cover a range of topics:
- Emotional health and wellbeing
  - Young people friendly health services
  - Confidentiality
  - Safeguarding
  - Staff development
  - Digital engagement
  - Health promotion
  - Sexual health
  - Substance misuse
  - Ongoing participation and engagement
8. An action plan drives implementation of the strategy and is monitored by a multi-agency steering group.
9. The strategy aims to create a culture where professionals have an in depth understanding of young people and their unique approach to health and wellbeing. Progress has been made across a number projects that focus on young people's health and wellbeing, including:
- The ongoing transformation of services for children and young people with emotional health and wellbeing needs, aiming to ensure more young people to have good mental health, including those in vulnerable groups such as children looked after, children subject to child protection plans, children with disabilities and young offenders, as part of a five year transformation programme. This includes:
    - Mobilisation of an integrated Community Child and Adolescent Mental Health Services (CAMHS) model, including a Single Point of Access, to ensure the right level of support is provided at the right time

- Implementation of a Primary Mental Health Worker function which will provide support, training and consultation to a range of professionals, enabling them to better support children and young people
- Expansion of the academic resilience offer to schools, aiming to build resilience in children and young people Procurement of online counselling service for young people, enabling improved access to early advice and support
- The development of a transitions protocol for Nottinghamshire. This implements a multi-agency approach to planning for transition to adulthood, ensuring the process provides a consistent person centred experience for young people and their families
- The ongoing success of C-Card, improving access to condoms and advice around sexual health and relationships in a range of accessible settings, including targeted support in the teenage pregnancy hotspot wards, contributing towards a year-on-year reduction in teenage conceptions across Nottinghamshire
- The redesign of school nursing within an integrated healthy child and public health nursing programme for 0 -19's, with an increased focus on early intervention, prevention and improving the health and wellbeing of children and young people, which will be operational from April 2017
- The implementation of ChatHealth, from September 2016, which provides young people with the facility to text school nurses, improving their access to accurate advice and support
- Service user feedback is routinely embedded in performance monitoring and commissioning cycles
- Locality visits to some schools to publicise the strategy and encourage engagement

## **Website development**

10. Young people told us they need access to better online information with high quality content that empowers them engage with health services, manage their health and wellbeing, and supports them to access to local health services.
11. A young people's health website is being developed. This will act as a portal, providing young people with simple information about health and wellbeing and clearly directing them to the most appropriate local services and sources of support. The website will also link young people to websites that contain more detailed information about specific health and wellbeing issues, enabling commissioners to recommend websites that are accurate, good quality and suitable for young people.
12. The website will be independent to Nottinghamshire County Council (NCC) and NHS websites as young people told us this would be a barrier to their access. It will however link to all appropriate NCC and partner webpages and be widely promoted by the School Nurses and the new Schools Health Hub. A communications plan will be developed.
13. The Department of Health has endorsed a website which can be adapted for local use, and work has begun to collate a database of content and web sources that the portal will link to. In

partnership with the Nottinghamshire Children's Safeguarding Board and young people, a 'What's not okay?' section is being developed. The aim is to have the website ready to test with young people at a Health and Wellbeing Board event in December 2016.

14. Young people will be involved in this project on an ongoing basis, and the Young People's Board will consider how best to achieve this. This could include asking young people to review and comment on the external webpages we link to, and to support our local providers to develop or improve young people friendly web-pages, or could involve their development of specific content for the site.

### **Young people's health friendly services**

15. A key recommendation was that health services are 'young people friendly', that they are easy to access, confidential, supportive, non-judgemental environments that welcome young people and their specific needs, encouraging a positive life-long relationship with health services.
16. The Department of Health has developed a young people friendly quality criteria to support local implementation of young people friendly services.
17. Young people asked for services to be clearly branded as young people friendly, with an appropriate logo that is easily identifiable and approved by local young people, and linked to the young people's health website, creating a clear brand identity.
18. A task and finish group will be established to develop and drive the implementation of young people friendly health services by developing an accreditation process and resource library. There are a number of options as to how this is best implemented with limited resource.
19. Young people will be central to this project and we will request the support of the Young People's Board in this.

### **Health and Wellbeing Board young people's health event**

20. The engagement event around this project held in 2015 was a success and directly shaped delivery of this project. To celebrate the strategy, test the website, and share progress to date, a follow up Health and Wellbeing Board engagement workshop with young people is planned for December 2016.

### **Financial Implications**

21. There are no immediate financial implications. A small non recurrent budget has been identified within the public health budget to support implementation of this strategy.

### **Statutory and Policy Implications**

22. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, sustainability and the environment and ways of working and where such implications

are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **RECOMMENDATIONS**

That the Board:

- 1) Notes the progress made in relation to the implementation of the Young People's Health Strategy
- 2) Supports a Health and Wellbeing Board engagement event focused on the Young People's Health Strategy.

**For any enquiries about this report please contact:**

Dr Kate Allen  
Consultant in Public Health  
Telephone: 0115 977 2861  
[Kate.allen@nottscg.gov.uk](mailto:Kate.allen@nottscg.gov.uk)

### **Constitutional Comments (SLB 16/09/2016)**

23. Health and Wellbeing Board is the appropriate body to consider the content of this report.

### **Financial Comments (KAS 27/09/16)**

24. The financial implications are contained within paragraph 21 of the report.

### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- Young People's Health Strategy for Nottinghamshire, Health and Wellbeing Report, October 2015  
<http://www.nottinghamshire.gov.uk/dms/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/3628/Committee/505/Default.aspx>
- Nottinghamshire Young People's Health Strategy  
<http://www.nottinghamshire.gov.uk/care/health-and-wellbeing/childrens-commissioning>

### **Electoral Divisions and Members Affected**

- All.

5 October 2016

Agenda Item: 7

**REPORT OF THE CHAIR OF THE HEALTH AND WELLBEING BOARD****CHAIR'S REPORT****Purpose of the Report**

1. An update by Councillor Joyce Bosnjak, Chair of the Health and Wellbeing Board on relevant local and national issues.

**Information and Advice****1. Proposed merger of Nottingham University and Sherwood Forest Hospitals**

It has been confirmed that the proposed merger of the two hospital trusts will be in 2017. It had been hoped that it would be completed before the busy winter period but that has not been possible. Peter Homa has issued [a statement](#) explaining the reasons behind the decision and giving more information about the transition period.

More information about the merger is available on a dedicated website:  
[www.futuretogethernotts.nhs.uk](http://www.futuretogethernotts.nhs.uk)

 **smokefreelife**  
Nottinghamshire**2. Launch of Smokefreelife Nottinghamshire**

On 17 September 2016 I attended the launch of Smokefreelife Nottinghamshire in Mansfield. Smoking is one of the priorities within the Health and Wellbeing Strategy and we have all committed to support this agenda.

Smokefreelife Notts is a new service which will provide up to 6 weeks support for people who want to give up smoking through one-to-one counselling, telephone support, group sessions, in a variety of places. With the right support people are 4 times more likely to quit so this programme is well placed to help people in Nottinghamshire who want to stop smoking.

The programme also has an element which focussed on stopping young people taking up smoking.

For more information please contact Martin Lever, Public Health and Commissioning Manager e: [martin.Lever@nottsgov.uk](mailto:martin.Lever@nottsgov.uk) or t: 0115 977 3925.

### **3. Stakeholder network event – Caring for Carers 12 October 2016**

The next Health and Wellbeing Board Stakeholder Network event will be held on 12 October 2016 between 1.30 and 4.30pm at Edwinstowe House.

The event will cover support for young carers, developing carer friendly communities, reviewing carers' services and sustaining future support for carers.

An invitation and an outline of the programme for the event is available on the [Nottinghamshire Health and Wellbeing Board webpage](#).

## **PROGRESS FROM PREVIOUS MEETINGS**

### **4. The role of Nottinghamshire Fire and Rescue in improving health and wellbeing**

In 2014 the Nottingham City and Nottinghamshire Health and Wellbeing Boards both welcomed an offer from Chief Fire Officer John Buckley to utilise capacity with the Fire and Rescue Service to improve health and wellbeing in Nottinghamshire.

Following a joint Summit in April a scoping meeting took place in September 2016 with representatives of the Service, public health, local government and the CCGs for both the County and City to discuss how the ideas generated at the Summit could be taken forward.

At the meeting it was agreed that the STP provides an ideal opportunity to integrate the Service into health and wellbeing across the County and the City. Many of the areas for collaboration identified at the Summit – housing, mental health and drugs and alcohol are key themes within the STP and there is a developing infrastructure which will drive implementation when the final Plan is agreed. The Fire and Rescue Service will be a key partner within the implementation plans.

Wayne Bowcock, Deputy Chief Fire Officer will make sure that the Service is linked in to the prevention, housing, mental health and drugs and alcohol work streams. He will also contact Andy Evans at Connected Notts to see whether there are opportunities within that project.

While the STP is finalised the Service will continue with work that's already started to develop Safe and Well Checks and also working with environmental health officers in the City with a view to local pilots to inform potential roll out across the county.

Wayne will also make links into the Bassetlaw and South Yorkshire STP to support the emerging priorities within their Plan.

It was proposed that the STP offered the most appropriate governance infrastructure to support future collaborations and monitoring and reporting would be within that programme.

For more information please contact Bryn Coleman, Head of Prevention Nottinghamshire Fire and Rescue Service t: 07779 585870 e: [bryn.Coleman@notts-fire.gov.uk](mailto:bryn.Coleman@notts-fire.gov.uk)

### **5. The Nottinghamshire Falls Pathway**

The Falls Pathway was approved at the April Health and Wellbeing Board. Since April work has taken place across health and social care to embed the new pathway, to identify gaps in service and to develop the Healthy Ageing work stream.



The aim of the Healthy Ageing work stream is to promote older people's independence by encouraging physical activity and a healthy lifestyle. Funding has been agreed from the Care Act element of the BCF for support to implement this including:

- Ensuring consistent messages across health and social care and other agencies
- Implementing a non-clinical falls pathway which has already been piloted in Bassetlaw
- Using different media to promote physical activity to reduce falls focusing on groups at risk

The gap in relation to Fracture Liaison has been included in the STP under **Early Identification and management of disease**. In addition, Nottingham West and Nottingham North and East CCGs are joining Rushcliffe to have a South wide service, initially for a year.

Mid-Notts Better Together Alliance held a two-day Falls Development Action Learning Set in September at Sherwood Forest which aims to improve whole system understanding and relationships across managers, clinicians, third sector, primary and secondary care and foster further development.

For more information on falls please contact [gill.oliver@nottscg.gov.uk](mailto:gill.oliver@nottscg.gov.uk).

## PAPERS TO OTHER LOCAL COMMITTEES

6. [Police and Crime Plan Annual Report](#)
7. [Refreshed Police and Crime Delivery Plan \(2016-18\)](#)  
Report to Nottinghamshire Police and Crime Panel  
5 September 2016
8. [Care Act 2014 - Implementation Update](#)
9. [Adult Social Care and Health - Overview of Developments](#)
10. [Integrated Carers Strategy Update](#)
11. [Performance Update for Adult Social Care and Health](#)  
Reports to Adult Social Care and Health Committee  
12 September 2016
12. [Better care fund – mass marketing scams prevention work](#)
13. [Community empowerment and resilience programme](#)  
Reports to Community Safety Committee  
27 September 2016
14. [Implementation of a Schools Health Hub](#)
15. [Integrated Healthy Child and Public Health Nursing Programme 0-19 Years - Tender Outcome](#)
16. [NHS Health Check Procurement Update](#)
17. [Establishment of Health and Housing Coordinator](#)  
Reports to Public Health Committee  
29 September 2016

## A GOOD START

### 18. [Gender and children and young people's emotional and mental health: manifestations and responses](#)

The National Children's Bureau

This review provides evidence of gender differences in children and young people's emotional and mental health. It looks at the general picture of emotional and mental health; the prevalence of specific issues; coping strategies; responses from parents and carers; and service responses to children and young people's needs.

### 19. [Childhood obesity: a plan for action](#)

Public Health England

This document outlines the government's plan for action to reduce childhood obesity by supporting healthier choices. These include encouraging industry to cut the amount of sugar in food and drinks and supporting primary school children to eat more healthily and stay active.

In relation to this report, the government has also published [Soft Drinks Industry Levy: 12 things you should know](#).

### 20. [Government response to the House of Commons Health Select Committee report on childhood obesity: brave and bold action, first Report of session 2015-16](#)

The Department of Health

The government's Childhood obesity: a plan for action aims to reduce levels of childhood obesity, improve the health and wellbeing of children, and contribute towards reducing future pressures on the NHS and society.

### 21. [Lightning Review: Children's access to school nurses to improve wellbeing and protect them from harm](#)

The Children's Commissioner for England

This report follows research that finds that school nurses spend twice as much time on paperwork than on direct work with children in schools. This could be reducing their ability to identify children at risk of neglect or abuse. There was also evidence that time pressures meant their role in supporting and promoting children's health and wellbeing, their mental health, healthy relationships and sex education was being compromised.

Additional link: [BBC News report](#)

### 22. [Mental health and wellbeing of looked-after children: Government response to the Committee's Fourth Report of Session 2015-16](#)

Department of Health and Department of Education

This government response to the Education Committee report on the mental health and wellbeing of looked-after children addresses the committee's recommendations and conclusions.

### 23. [Funding to expanding the mental health workforce for children and young people](#)

Health Education England (HEE) has received funding from the Department of Health to support NHS England in meeting national targets to [expand the workforce providing children and young people's mental health services](#). HEE has published information for service providers within and outside the NHS in England who wish to express their interest in accessing a fully-funded scheme to employ and train new staff to provide evidence-based treatment for children and young people.

## LIVING WELL

### 24. [UK Chief Medical Officer's low risk drinking guidelines](#)

UK Chief Medical Officer

The guidelines provide the most up to date scientific information to help people make informed decisions about their own drinking. The intention is to help people understand the risks alcohol may pose to their health and to make decisions about their consumption in the light of those risks, but not to prevent those who want to drink alcohol from doing so.

Additional link: [Government response to the public consultation](#)

### 25. [Government dietary recommendations: government recommendations for food energy and nutrients for males and females aged 1-18 years and 19+ years](#)

Public Health England

As part of the Eatwell Guide policy tool, this document provides the government's recommendations for food energy and nutrients for the general population. Anyone with a medical condition should consult their GP or a registered dietitian for dietary advice.

### 26. [Health food procurement](#)

Local Government Association

This document provides details of the health challenge around obesity, the importance of diet, dietary advice and includes case studies covering local authority initiatives on healthier vending, ensuring healthier food and snacks are available in NHS organisations, healthier catering and making school foods healthier.

### 27. [Lack of public knowledge of the link between obesity and cancer](#)

Cancer Research UK has published details of a survey which shows that three out of four (75 per cent) people in the UK are unaware of the link between obesity and cancer. The survey found that people from lower socioeconomic backgrounds are less likely to know about the link, with men less likely than women to be aware of the increased risk.

Additional link: [BBC News report](#)

### 28. [National Diet and Nutrition Survey Results from Years 5 and 6 \(combined\) of the Rolling Programme \(2012/2013–2013/2014\).](#)

Public Health England and the Food Standards Agency

The survey is designed to collect detailed, quantitative information on food consumption, nutrient intake and nutritional status of the general population aged 1.5 years and over in the UK. The latest survey highlights that children aged 4 to 10 years are consuming more than double the recommended amount of sugar, although consumption of sugary drinks has fallen compared to 6 years ago. The survey also confirms that the UK population continues to consume too much saturated fat and not enough fruit, vegetables and fibre.

Additional link: [PHE press release](#)

### 29. [State of UK public parks 2016](#)

Heritage Lottery Fund

This is the second in a series of annual reports and shows that there is a growing deficit between the rising use of parks and the declining resources available to manage them. Based on four surveys of park managers, independent park trusts, park friends and user groups, and the general public, the findings show that while parks are highly valued by the public and usage is increasing, park maintenance budgets and staffing levels are being cut. The research calls for collaborative action to deliver new ways of funding and managing public parks to avert a crisis.

**30. [Health matters: tobacco standard packs](#)**

Public Health England

This edition sets out the evidence on standardised packaging and calls on local authorities and health professionals to play their part in ensuring that all smokers have access to the support they need. The publication brings together local and national level data, as well as campaigning and social marketing resources.

Additional link: [PHE press release](#)

**31. [Stoptober campaign](#)**

Public Health England (PHE) has launched its fifth Stoptober campaign to encourage smokers to quit smoking this October. Last year, 500,000 people successfully quit smoking during the campaign. PHE's press release shows that the smoking rate in England has now fallen to below 17% for the first time and that the number of cigarettes sold in England and Wales has dropped by 20% in the last 2 years.

Additional link: [Stoptober website](#)

**COPING WELL**

**32. [Poverty and mental health: a review to inform the Joseph Rowntree Foundation's anti-poverty strategy](#)**

The Mental Health Foundation

This paper presents a conceptual framework for understanding the relationship between poverty and mental health and offers recommendations to improve the situation across the life course.

**33. [Developing mental health services for veterans in England engagement report](#)**

NHS England

This report sets out key findings from an engagement to find people's views of NHS veterans' mental health services. The results highlight the need to improve awareness of where veterans should go for help, raise the profile of NHS veterans' mental health services and increase understanding amongst health professionals of the unique issues faced by those from an armed forces background.

**34. [Support from the start: Commissioning early intervention services for mental ill health](#)**

NHS Clinical Commissioners Mental Health Commissioners Network

This publication showcases projects that promote early intervention in mental health and draws out tips from the commissioners and practitioners involved in their development and delivery. The report aims to share learning and good practice from these projects to help support the implementation of more high-quality early intervention services.

**35. [Who knows best? Older people's contribution to understanding and preventing avoidable hospital admissions](#)**

The University of Birmingham

With estimates of over two million unplanned hospital admissions per year of people aged over 65, questions are often asked such as: 'Do they really need to be there? Is there nowhere more suitable for them to go? The findings of this study confirm the belief that older people have an important role to play in helping understand the nature of emergency admissions and to devise appropriate responses to their rising numbers. Ignoring this expertise could be detrimental to ensuring older people get the appropriate care they need.

**36. [Social care for older people – home truths](#)**

Kings Fund/Nuffield Trust

This report, looks at the current state of social care services for older people in England, through a combination of national data and interviews with local authorities, NHS and private providers, Healthwatch and other groups. It considers the impact of cuts in local authority spending on social care providers and on older people, their families and carers.

**37. [Making a difference in dementia: nursing vision and strategy: refreshed edition](#)**

Department of Health

This strategy sets out how nurses can provide high quality compassionate care and support for people with dementia, so they can live well within all care settings, including a person's own home. It aims to support nurses to be responsive to the needs of people with dementia, continue to develop their skills and expertise, and achieve the best outcomes for people with dementia, their carers and families.

**38. [Housing and technology fund for people with learning disabilities](#)**

Local authorities are being invited to apply for a share of the £25 million fund. The funding will allow the creation of a range of housing and technology options which could include floor sensors to monitor for falls or finger-print technology to make access as easy as possible for residents. This £25 million fund builds on £20 million already earmarked by NHS England as part of its transforming Care programme.

**39. [The economics of housing and health: the role of housing associations](#)**

The King's Fund

This report looks at the economic case for closer working between the housing and health sectors. It shows how housing associations provide a wide range of services that produce health benefits, which can reduce demand on the NHS and create social value. A number of case studies are included in the report.

**40. [Improving access to mental health services](#)**

The House of Commons Committee of Public Accounts has published [Improving access to mental health services: Sixteenth Report of Session 2016–17](#). The Committee concludes that while the Government has a "laudable ambition" to improve mental health services, the Committee is sceptical as to whether it is affordable or achievable without compromising other services. Achieving parity of esteem depends on having the right staff, with the right skills in the right places but there is no clear plan to develop the required workforce. It also finds commissioners and providers are not sufficiently incentivised to deliver high-quality mental health services for those who need them.

## **WORKING TOGETHER**

**41. [Specialist Pharmacy Service](#)**

At the beginning of August, the [Specialist Pharmacy Service \(SPS\) launched a new website](#). The Specialist Pharmacy Service supports medicine optimisation across the NHS with the aim to 'improve the use of medicines so people live longer, fuller lives'. The site contains information about medicines, services and networks and is intended for pharmacists, GPs and clinicians.

**42. [STPs explained](#)**

The Kings Fund

Sustainability and transformation plans (STPs) were announced in the NHS planning guidance published in December 2015. But what are STPs and what do they mean for the NHS?

**43. Sustainability and Transformation Plans: what we know so far**

The Nuffield Trust

This discussion paper draws together insights from a workshop for Sustainability and Transformation Plan (STP) leaders which aimed to help those involved in STPs to develop their plans. It also draws on insights from members of the Nuffield Trust learning networks, conversations with other STP leads and reviews some draft plans. The paper identifies important trends, ideas for exploration and issues which must be resolved to ensure success.

**44. Moving from the margins: the challenges of building integrated local services.**

Turning Point and Collaborate

This discussion paper looks at the challenges of building integrated local services. Aimed at policymakers, commissioners and providers of public services, the paper argues that local integrated services should be at the heart of social and public reforms in the NHS, local government and criminal justice system.

Additional link: [Turning point press release](#)

## **HEALTH INEQUALITIES**

**45. Health in all policies: health, austerity and welfare reform**

BMA

This briefing aims to support this advocacy role of doctors by providing an overview of the evidence on the relationships between austerity, welfare reform and health, and how these link to the social determinants of health. It also considers what action is needed to protect and promote health during and after periods of financial crisis.

## **GENERAL**

**46. Health in a hurry: the impact of rush hour community on our health and wellbeing.**

Royal Society for Public Health

This report examines the impact of travelling to and from work on the public's health and wellbeing. It identifies the top 5 aspects of community that impact on the public's health and makes recommendations for how to improve.

**47. Health Profiles 2016**

Health Profiles are now available online for every Local Authority in England. These provide a snapshot of health and wellbeing for each local authority in England using a range of charts and text. They pull together existing information in one place and contain data on a range of indicators for local populations.

**48. Person and community-centred approaches to health and wellbeing**

The Health Foundation in partnership with the innovation charity Nesta has published two reports in their realising value series which aims to strengthen the case for people taking an active role in their health and care.

- [Spreading change: a guide to enabling the spread of person- and community-centred approaches for health and wellbeing](#): outlines how behavioural science can help spread the take-up of person- and community-centred approaches to health and wellbeing. It is aimed at people who champion these approaches in health and social care, in other statutory bodies and in community-based organisations.
- [Supporting self-management: A guide to enabling behaviour change for health and wellbeing using person- and community-centred](#): This guide offers two things: a framework for understanding and changing behaviour, and real-world examples of how these changes happen in practice.



#### **49. Public health post - 2013**

This report is the result of a short inquiry on the impact of the Health and Social Care Act reforms on the public health landscape. It warns of risks of widening health inequalities and a false economy due to cuts in local authority and public health budgets. It calls for a Cabinet Officer minister to be given specific responsibility for embedding health across all areas of government policy at a national level and for greater and bolder action to tackle public health issues such as childhood obesity.

#### **Other Options Considered**

2. To note only

#### **Reason/s for Recommendation/s**

3. N/A

#### **Statutory and Policy Implications**

4. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

#### **RECOMMENDATION/S**

- 1) To note the contents of this report.

**Councillor Joyce Bosnjak**  
**Chair of Health and Wellbeing Board**

**For any enquiries about this report please contact:**

Nicola Lane  
Public Health Manager  
T: 0115 977 2130  
[nicola.lane@nottsc.gov.uk](mailto:nicola.lane@nottsc.gov.uk)

#### **Constitutional Comments**

5. As this report is for noting, no constitutional comments are required.

#### **Financial Comments (KS 27/09/2016)**

There are no direct financial implications contained within the report.

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

None

## **Electoral Division(s) and Member(s) Affected**

All



### **The role of Nottinghamshire Fire & Rescue in improving health & wellbeing**

In 2014 the Nottingham City & Nottinghamshire Health & Wellbeing Boards both welcomed an offer from Chief Fire Officer John Buckley to utilise capacity with the Fire & Rescue Service to improve health & wellbeing in Nottinghamshire.

Following a joint Summit in April a scoping meeting took place in September 2016 with representatives of the Service, public health, local government & the CCGs for both the County & City to discuss how the ideas generated at the Summit could be taken forward.

At the meeting it was agreed that the STP provides an ideal opportunity to integrate the Service into health & wellbeing across the County & the City. Many of the areas for collaboration identified at the Summit – housing, mental health & drugs & alcohol are key themes within the STP & there is a developing infrastructure which will drive implementation when the final Plan is agreed. The Fire & Rescue Service will be a key partner within the implementation plans.

Wayne Bowcock, Deputy Chief Fire Officer will make sure that the Service is linked in to the prevention, housing, mental health & drugs & alcohol work streams. He will also contact Andy Evans at Connected Notts to see whether there are opportunities within that project.

While the STP is finalised the Service will continue with work that's already started to develop Safe & Well Checks & also working with environmental health officers in the City with a view to local pilots to inform potential roll out across the county.

Wayne will also make links into the Bassetlaw & South Yorkshire STP to support the emerging priorities within their Plan.

It was proposed that the STP offered the most appropriate governance infrastructure to support future collaborations & monitoring & reporting would be within that programme.

For more information please contact Bryn Coleman, Head of Prevention Nottinghamshire Fire & Rescue Service t: 07779 585870 e: [bryn.Coleman@notts-fire.gov.uk](mailto:bryn.Coleman@notts-fire.gov.uk)



**5 October 2016****Agenda Item: 8**

## **REPORT OF CORPORATE DIRECTOR, RESOURCES WORK PROGRAMME**

### **Purpose of the Report**

1. To consider the Board's work programme for 2016/17.

### **Information and Advice**

2. The County Council requires each committee, including the Health and Wellbeing Board to maintain a work programme. The work programme will assist the management of the committee's agenda, the scheduling of the Board's business and forward planning. The work programme will be updated and reviewed at each pre-agenda meeting and Board meeting. Any member of the Board is able to suggest items for possible inclusion.
3. The attached work programme has been drafted in consultation with the Chair and Vice-Chair, and includes items which can be anticipated at the present time. Other items will be added to the programme as they are identified.

### **Other Options Considered**

4. None.

### **Reason/s for Recommendation/s**

5. To assist the Board in preparing its work programme.

### **Statutory and Policy Implications**

6. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **RECOMMENDATION/S**

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

**Jayne Francis-Ward**  
**Corporate Director, Resources**

**For any enquiries about this report please contact: Paul Davies, x 73299**

**Constitutional Comments (HD)**

1. The Board has authority to consider the matters set out in this report by virtue of its terms of reference.

**Financial Comments (NS)**

2. There are no direct financial implications arising from the contents of this report. Any future reports to the Board will contain relevant financial information and comments.

**Background Papers**

None.

**Electoral Division(s) and Member(s) Affected**

All

## Health and Wellbeing Board & Workshop Work Programme

	Health & Wellbeing Board (HWB)
9 November 2016	<p><b>Update on merger of Sherwood Forest &amp; Nottingham University Hospitals</b> (Peter Homa/Peter Herring)</p> <p><b>Update on Nottinghamshire &amp; SYB STPs</b> (David Pearson/Joanna Cooper/ Phil Mettam)</p> <p><b>Learning disability &amp; autism self-assessments including proposal to develop pathway for support to adults with Aspergers &amp; ADHD</b> (Cath Cameron-Jones/Laura Chambers)TBC</p> <p><b>Update report from Health &amp; Wellbeing Implementation Group</b> (David Pearson/Jenny Charles Jones)</p> <p><b>Nottinghamshire Safeguarding Children Board Annual report</b> (Steve Baumber/Chris Few)</p> <p><b>Nottinghamshire Health &amp; Wellbeing Strategy update</b> (Nicola Lane/David Pearson)</p> <p><b>Chair's report:</b></p> <ul style="list-style-type: none"> <li>• <b>Update on dementia framework for Action requested at May 2016 meeting (Gill Oliver)</b></li> </ul>
7 December 2016	<p><b>Strategic Action 2 Child Sexual Exploitation update</b> (Steve Edwards/Terri Johnson)</p> <p><b>The role of community pharmacy</b> (Nick Hunter LPC)</p> <p><b>Update Strategic action 7 and Priority action 18 – housing(Rob Main/Jill Finnessey)</b>  <b>&amp; Excess Winter Deaths among Older People in Nottinghamshire update (Joanna Cooper)</b></p> <p><b>BCF Q2 quarterly report</b> (Joanna Cooper)</p> <p><b>Update on the Crisis Care Concordat (Susan March/Shelagh Cunningham)</b></p> <p><b>Chair's report:</b>  Inspire (Fiona Anderson)</p>

## Health and Wellbeing Board & Workshop Work Programme

<b>4 January 2017</b>	<p><b>Wellbeing@Work update (Lindsay Price)</b></p> <p><b>Substance misuse services (John Tomlinson//Lindsay Price/Tristan Poole)</b></p> <p><b>Obesity &amp; active transport (Anne Pridgeon)</b></p> <p><b>Update Bassetlaw Accountable Care &amp; Strategic Plans ( Phil Mettam)</b></p> <p><i><b>Update on Nottinghamshire &amp; SYB STPs (David Pearson/Joanna Cooper/ Phil Mettam)</b></i></p> <p><b>Director of Public Health Annual Report (Kay Massingham/Barbara Brady)</b></p> <p><b>Chair's report:</b></p>
<b>1 February 2017</b>	<p><b>Safeguarding Adults Annual Report (Stuart Sale/Allan Breeton)</b></p> <p><b>Update on spacial planning <i>requested at May 2016 meeting</i> (Anne Pridgeon)</b></p>
<b>1 March</b>	<p><i><b>Update on Nottinghamshire &amp; SYB STPs (David Pearson/Joanna Cooper/ Phil Mettam)</b></i></p> <p><b>BCF Q3 quarterly report (Joanna Cooper)</b></p>
<b>29 March</b>	<b>Approval of BCF Plan for 2017/18 (Joanna Cooper)</b>
<b>26 April</b>	<i><b>Update on Nottinghamshire &amp; SYB STPs (David Pearson/Joanna Cooper/ Phil Mettam)</b></i>
<b>June</b>	<p><b>Tobacco Declaration Annual update ( John Tomlinson)</b></p> <p><b>BCF Q4 quarterly report (Joanna Cooper)</b></p>
<b>July</b>	<i><b>Update on Nottinghamshire &amp; SYB STPs (David Pearson/Joanna Cooper/ Phil Mettam)</b></i>