

7 October 2015

Agenda Item: 9

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

1. To provide members with information on issues relevant to the Health and Wellbeing Board.

Information and Advice**2. Nottinghamshire County 'Well-being@Work' Workplace Award Scheme.**

The Wellbeing@work workplace award scheme aims to work across key partners such as statutory, private, voluntary and community businesses to effectively reduce absenteeism and presenteeism across our workplaces. It is in line with the national 'Change for Life' programme to engage a key sector of the adult working age population, using the workplace as a setting to promote healthy lifestyle adoption and a sustainable health working culture and environment.

Progress to date includes:

- Stakeholders engaged
- Strategic Framework developed to include live action plan & toolkit revised
- Provider arm contracts aligned to ensure support for the workplace health scheme
- 3 meetings of the Strategy group held
- Continued support and taking forward the existing Bassetlaw model (14 organisations, two of which have just received their 'Platinum Award status')
- 73 champions signed up to the county model and trained in the RSPH (Royal Society of Public Health) level 2 accredited Health trainer training, with three further courses taking place during September/October
- 30 trained in 'Motivational Interviewing' training
- 20 trained in 'Mindfulness' techniques to help build resilience and share skills with others
- Community Mental Health First Responder Training scheduled for September, October & November 2015
- 15 new organisations signed up to the county model with 5 of these already achieving 'Bronze' accreditation
- **By the end of 2015 to workplace health scheme will be reaching over 30,000 of Nottinghamshire County working age population and since the launch of the original scheme in Bassetlaw (2010) over 360 workplace health champions have been trained as health trainers.**

Support for implementation has been gained through existing public health related contracts, and through voluntary sector support to more effectively utilise existing resources and to support providers to meet their targets through accessing the working age population in a workplace setting. Support also comes from our workplace health network, where we work together where applicable to share resources such as venues for training and event planning. 'Everyone Health' (provider for Healthy Weight Healthy Lives) now has a target to commence working with district leads to sign up 50 organisations in year one.

Other agencies are also interested in signing up including Nottingham Partnership Trust, Nottingham Police, Mansfield & Ashfield CCG's, Portland and Priory Schools and Laing O Rourke.

For more information contact Cheryl George, Senior Public Health Manager: cheryl.george@nottscg.gov.uk tel: 07584011613

3. The Mid-Nottinghamshire Self Care Hub

The Mid-Nottinghamshire Self-Care Hub service is a FREE 'one-stop-shop' for public and professionals and is designed to connect local services to help you access self-care support.

The self-care team can provide details about voluntary and community support as well as services/ activities/groups. Hub services are available to anyone over the age of 18 who is living or working in Mid-Nottinghamshire.

For more information contact Laura Chambers, Strategic Commissioning Manager laura.chambers@nottscg.gov.uk tel: 0115 9932563

Progress from previous meetings

4. Future in Mind/CAMHS Pathway Review Update

A report was presented to the December 2014 Health and Wellbeing Board which provided an overview of the findings of the CAMHS Pathway Review and proposed a new model to improve services to children and young people. Since the meeting, the government has published a taskforce report into improving children and young people's mental health and wellbeing, and set out a five year plan called Future in Mind, outlining improvements to be made in the following areas:

- Promoting resilience, prevention and early intervention;
- Improving access to effective support – a system without tiers;
- Care for the most vulnerable;
- Accountability and transparency; and
- Developing the workforce.

NHS England has now issued guidance to local areas at a health and wellbeing board unit of planning level, requiring them to develop transformation plans setting out how they will achieve the required improvements. The deadline for submission to NHS England is 16 October 2015. Once plans have been assured by NHS England, this will trigger the release of additional funding to be distributed via CCGs, to enable the transformation plans to be achieved. Because of time lines the Corporate Director for

Adult Social Care, Health and Public Protection/Deputy Chief Executive, will sign off the plans in consultation with me as Chair of the Board for submission on 16th and the Board will see the report at a future meeting. CCGs will also sign the plan off also since they are responsible commissioners and ultimately accountable for the use of funding. The local plan is being developed in line with the recommendations of the Pathway Review completed in 2014.

During the Spring and Summer of this year, Nottinghamshire CCGs (except Bassetlaw) all agreed to increase funding for CAMH Services for the next three years, in order to implement and allow time to evaluate the agreed new model. The national funding allocated is NOT adequate to meet the full amount required locally and in addition, we need resources to ensure we develop effective strategies to promote resilience, prevent children and young people developing emotional and mental health problems and ensure appropriate early intervention. We as a Board have had many discussions about the lack/gaps in this area and all recognise that if we shift our focus here, this would be better for children and young people and we can also reduce need for more costly services.

For further information, please contact Lucy Peel, Programme Lead, Children and Young People's Mental Health and Wellbeing Lucy.peel@nottscc.gov.uk.

5. Update on the progress of the Nottinghamshire County and Nottingham City Declaration on Tobacco Control.

On 1 October 2014 the Health and Wellbeing Board officially endorsed the Nottinghamshire County and Nottingham City Declaration on Tobacco Control, committing member organisations to sign the Declaration and to develop action plans in order to tackle tobacco use in Nottinghamshire.

To date all CCGs and Local Authorities have signed the Declaration and the local NHS Trusts have either agreed to sign or have actually signed the Declaration in the case of Sherwood Forest Hospitals Foundation Trust and Doncaster and Bassetlaw Hospitals Foundation Trust.

Nottinghamshire Fire and Rescue Service have signed up along with others who are considering sign up such as Nottinghamshire Police, Nottingham University, Children's Centres and North Notts College. Some private organisations for example, Eaton Production International, have also signed the Declaration as this is now a prerequisite for the Nottinghamshire Wellbeing@Work Scheme.

Organisations that have signed up have in place either a draft or finalised action plan and some actions are already being implemented, for example the review of smokefree policies and the introduction of smokefree play areas in some Local Authority areas.

A full report is planned for the December Health and Wellbeing Board Meeting.

For more information contact Lucy Elliott, Public Health Manager lucy.elliott@nottscc.gov.uk tel: 0115 9773489.

6. HWB Workshop – workforce

As part of its system leadership role overseeing the Better Care Fund, the Health & Wellbeing Board is seeking to understand local workforce issues in more detail and explore possible local joint solutions. As the issues are not unique to Nottinghamshire County, the Board has proposed to extend the discussions to cover the whole of Nottinghamshire including Nottingham City.

The Boards will jointly host a closed workshop in place of the County Board meeting on 4 November 2015.

The session will include the Health & Wellbeing Board and invited partners across health, local government, public, academic and third sector, with an interest in workforce.

The session is designed to give participants the opportunity to share experiences and discuss local strategies to address workforce issues, such as 7 day working, integrating workforce, skills and retention, the use of agency staff, new models and implications of the living wage.

The aims of the session are:

- To consider workforce needs, requirements and gaps over the next 3-5 years
- To explore to what extent current organisational workforce strategies address the future workforce needs
- To explore integrated solutions to workforce planning

Further information and a draft agenda will be circulated shortly.

7. Stakeholder network event September 2015

The latest Stakeholder Network event took place on 22 September 2015 and was attended by 79 people from a range of voluntary and community organisations, the county and district councils and health services.

The event focussed on how the Health & Wellbeing Board can work with voluntary and community sector to improve health and wellbeing. The scene was set with an overview of the Boards work, how we can work together to improve the JSNA and the role of the voluntary sector consortium, which is being developed in Nottinghamshire. There was also an opportunity to 'speed date' to hear about a number of really exciting projects in Nottinghamshire and share good practice.

Documents from the meeting will be available on the [Stakeholder Network webpage](#).

Thanks to Councillor Suthers, Councillor Aspinall and Joe Pidgeon who attended to represent the Board.

The next event will be between 6.30 and 8.30pm on 24 November 2015 and will focus on dementia. Your support at the event would be much appreciated.

Papers to other local committees

8. [Establishment of a Health and Wellbeing Board Support Team](#)
Report to the Public Health Committee 2 July 2015
9. [Child Sexual Exploitation \(CSE\) and Children Missing from Home and Care: Annual Report 2014-15](#)
Report to Children and Young People's Committee 13 July 2015
10. [Transforming Care \(Winterbourne\) Update Report](#)
Report to the Adult Health and Public Protection Committee 7 September 2015

Update on policy and guidance

There have been a number of policies and guidance documents issued which are aimed at health and wellbeing boards. The following is a summary of those which may be of interest to Board members:

Starting well

11. [Food for Thought: promoting healthy diets among children and young people.](#)

BMA

This report sets out the measures needed to help promote healthier diets among children and young people. It recommends a range of interventions focused on improving attitudes and knowledge; limiting unhealthy cues and irresponsible retailing practices; and creating a healthy food environment. Some of the measures aim to directly protect children and young people, while others are to help parents and carers in making the right choices.

Additional links: [BBC news report](#) [Royal College of Physicians press release](#)

12. [Children and young people's survey on health care](#)

Care Quality Commission

Nearly 19,000 children and young people have been given the chance to provide feedback on their hospital experiences. The survey was carried out by the CQC and will supply NHS England and the Department of Health with data to assess performance against national targets on patient experience. Nationally, 137 acute NHS trusts took part in the survey which was broken down into three age-appropriate questionnaires, specially developed to give children and young people a voice on health care.

13. [Smoking in vehicles](#)

The Department of Health has released a short animation film about the change in the law on smoking in vehicles in England and Wales. From 1 October 2015 it will be illegal to smoke in a car (or other vehicles) with anyone under 18 present. The law is changing to protect children and young people from the dangers of secondhand smoke.

14. [New programme to improve young people's mental health services](#)

NHS England has distributed £30m of funding to local areas for eating disorder services as part of the first stage of a new programme to improve children and young people's mental health and wellbeing. The money is to develop community-based eating disorder

services with a new standard so patients are seen within four weeks or one week for urgent cases by 2020.

LIVING WELL

15. [The international evidence on the prevention of drug and alcohol use Summary and examples of implementation in England](#)

Public Health England

This document provides a summary of the United Nations Office of Drug Control's International Standards on Drug Use Prevention highlighting examples of relevant guidelines, programmes and interventions currently available in International standards on drug use prevention in England. These examples aim to help those who commission, develop and implement prevention strategies and interventions to translate the standards into the English operating landscape. It also aims to help local authority commissioners to develop their prevention strategies and implement them in line with evidence.

16. [Alcohol's harm to others](#)

Institute of Alcohol Studies with the University of Sheffield School of Health and Related Research

This report examines the extent to which consuming alcohol can impact on people other than the drinker. It combines a review of the evidence on alcohol's harm to others and data from two surveys in which over 2,000 adults were asked about the harms experienced from others' alcohol consumption.

Additional link: [RCGP press release](#)

17. [New rules about tobacco, e-cigarettes and smoking](#)

The Department of Health

This guidance explains changes to the laws on tobacco, e-cigarettes and smoking that come into force on 1 October 2015. In particular, it explains the rules about smoking in private vehicles, including when the rules do and don't apply. (See also [item 12](#))

18. [Stopping Smoking by using other sources of nicotine](#)

The Royal Society for Public Health

This position paper is calling for public confusion over nicotine to be addressed as a way of encouraging smokers to use safer forms of the substance. Tobacco contains nicotine along with many other chemicals, but nicotine by itself is fairly harmless. Electronic cigarettes and Nicotine Replacement Therapy (gum, lozenges, and patches) contain nicotine but don't contain the harmful substances found in cigarettes. The Royal Society is now calling for measures to promote safer forms of nicotine products to smokers and make it harder to use tobacco.

Additional link: [BBC News report](#)

19. [E-cigarettes: an evidence update](#)

Public Health England

An expert independent evidence review concludes that e-cigarettes are significantly less harmful to health than tobacco and have the potential to help smokers quit smoking. The review suggests that e-cigarettes may be contributing to falling smoking rates among adults and young people. Following the review Public Health England has published a paper on the implications of the evidence for policy and practice.

20. Smoking and quitting in England

Public Health England

This document provides information on the prevalence of smoking and evidence for what is known to work in promoting cessation at local and national level. It includes information on who smokes the most effective interventions to quit smoking and advice for those responsible for reducing tobacco use. This is the first of a planned series of resources.

Additional link: [PHE press release](#)

21. Joint statement on e-cigarettes

Public Health England and other UK public health organisations

All organisations agree that e-cigarettes are significantly less harmful than smoking, and that the evidence suggests that the health risks posed by e-cigarettes are relatively small by comparison but studies must continue into the long term effects. The organisations acknowledge that e-cigarettes are the most popular way in which smokers try to quit smoking, rather than using stop smoking services, but that these services remain the most effective way for smokers to quit the habit and remain stopped.

Additional link: [Royal Society for public health press release](#)

COPING WELL

22. Transforming Care for People with Learning Disabilities – Next Steps

Transforming Care Delivery Board (TCDB)

The TCDB has published a progress report on its joint work programme to transform services for people with learning disabilities and/ or autism. The programme is being delivered by NHS England, Local Government Association, Association of Directors of Adult Social Services, Care Quality Commission, Health Education England and the Department of Health, to change how we commission and deliver services, to enable more people with learning disabilities to live within their community and close to home.

Additional link: [NHS England](#)

23. New draft guidelines to help transform care for people with learning disabilities

NHS England, the Local Government Association (LGA), and the Association of Directors of Adult Social Services (ADASS)

This new draft national framework is designed to improve care for people with learning disabilities, shifting services away from hospital care and towards community-based settings. The current version of the Service Model has been co-produced with providers, commissioners, health and care professionals and people with learning disabilities and their families, but will be a living document.

24. Reasons why people with dementia are admitted to hospital in an emergency

Public Health England's Dementia intelligence network

This document shows key national data related to people with dementia and their use of inpatient general hospital services during the financial year 2012/13. It includes information about why people are admitted, short stay emergency admissions, increases in hospital admissions and preventing avoidable emergency admissions. The dataset shows the clinical commissioning group and local authority data used in the report.

Additional link: [Public Health England press release](#)

25. [Use of police cells for those in mental health crisis halved](#)

Since it was launched in February 2014, the [Crisis Care Concordat](#), a programme to improve standards in mental health crisis care across the country, has reduced the use of police cells as a 'place of safety' by more than 50 percent for people experiencing a mental health crisis. The Programme has also led to almost 10,000 people receiving emergency attention from mental health nurses working alongside police officers. These are known as street triage schemes.

26. [The Five Year Forward View Mental Health Taskforce: public engagement findings.](#)

The Mental Health Taskforce

This document summarises the findings and content received by the Taskforce since April 2015. Three clear themes have emerged: prevention, access and quality. The importance of integrating care and support was also identified as a critical factor to the successful delivery of equitable access and improved outcomes. The need to prioritise equality also came out strongly across each of these themes. These findings will inform the full report which will be published in the autumn.

Additional links: [Mental Health Taskforce website](#) [NHS England press release](#)

27. [Self-Care Week](#)

NHS staff, patients and carers are being urged to support and help raise awareness of Self-Care Week next month. The theme for the week, running from 16 to 22 November 2015, is 'Self-Care for Life' and aims to help people understand what they can do to better look after their own health and that of their family, as well as living as healthily as possible. For more information visit the [Self-Care Forum website](#) or email libby.whittaker@selfcareforum.org.

WORKING TOGETHER

28. [Aligning public services: strategies for local integration](#)

Chartered Institute of Public Finance and Accountancy (CIPFA) and Public Finance

This briefing explores the strategies needed to align and integrate local public services across traditional organisation boundaries. It features an article by Chris Ham which argues that health payment systems are not fit for the purpose of providing integrated, patient-centred care.

29. [Safely home: what happens when people leave hospital and care settings.](#)

Healthwatch England

This report highlights the importance of transfers of care across all settings acute, mental health, community and ambulance and to and from social care and care home settings. The information comes from patients and service users with direct experience of when transfers or discharge from care has gone wrong.

Additional link: [BBC news report](#)

30. [Health at work](#)

Public Health England

PHE has published two in a series of four topic overviews exploring priority issues around health, work and unemployment.

[The impact of physical environments on employee wellbeing: topic overview](#): provides an overview of the literature on the impact of particular elements of the physical work environment on employee wellbeing. It specifically examines the office layout, office furniture, workplace lighting and temperature, and employee control over their work environment.

[Measuring employee productivity: topic overview](#) – provides an overview of the literature on employee productivity and the different ways to measure it. It includes information on measuring productivity, presenteeism (attending work whilst sick), and productivity and wellbeing.

31. [New partnership between NHS England and the Fire and Rescue Services](#)

A new partnership has been established between NHS England and the Fire and Rescue Services to carry out health checks on elderly people and patients with complex conditions. Working together with Public Health England, the Local Government Association and Age UK, the group has established a new working relationship aimed at improving the quality of life for people who would benefit from regular checks on their health and wellbeing, and better coordinated public services.

HEALTH INEQUALITIES

32. [Inequalities in life expectancy: changes over time and implications for policy](#)

The Kings Fund

This report assesses how the Marmot curve has changed over time and what that tells us about the success or otherwise of government policy on inequalities in health over the period 1999–2003 to 2006–10. This study brings together, for the first time at a small area level, data on a wide array of variables for 6,700 areas of England on wider determinants, lifestyles, demographics and public service variables widely thought to be significant in determining health and health inequalities.

33. Changes in health in England

A Public Health England-led study published in The Lancet shows health in England is improving although substantial opportunities exist for further reductions in the burden of preventable disease. [Changes in health in England, with analysis by English regions and areas of deprivation, 1990–2013](#) indicates the gap in mortality rates between men and women has reduced, but marked health inequalities between the least deprived and most deprived areas remain. Declines in mortality have not been matched by similar declines in morbidity, resulting in people living longer with diseases. Health policies must therefore address the causes of ill health as well as those of premature mortality.

34. Reducing health inequalities

Public Health England

PHE has published two guides aimed at support staff working with people to reduced health inequalities:

- [Promoting good quality jobs to reduce health inequalities](#) - this practice resource and summary explain how working conditions affect public health and suggests how local bodies can help create jobs.
- [Reducing social isolation across the lifecourse](#) - this resource and summary explain how social isolation affects public health and outline ideas for reducing the problem

Consultations

35. Health and wellbeing consultations

Nottinghamshire County Council have the following consultations relating to health and wellbeing:

- [Review of Children's Centres service delivery](#) ends 30 October 2015
- [Sexual health integrated service model "You said, We did" feedback](#) ends 9 October 2015
- [20 mph speed limits outside schools](#) ends March 2016

National Consultations

36. Consultations into voluntary sector role in health and care

[Two consultations have been published](#) to help to determine the future of voluntary sector involvement in health and care. As part of the Voluntary, Community and Social Enterprise (VCSE) review, respondents from the voluntary and health and social care sectors can give their views on partnership working, and how closer collaboration could be fostered. The second consultation will also seek views on the role and effectiveness of the government's current 'voluntary sector investment partnership' suite of grants. Consultations close on Friday 6 November.

Other options considered

37. Report to be noted only.

Reason for recommendation

38. Report to be noted only.

Statutory and Policy Implications

39. 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) That the report be noted.

Councillor Joyce Bosnjak
Chairman of Health and Wellbeing Board

For any enquiries about this report please contact:

Nicola Lane, Public Health Manager. Email: nicola.lane@nottsc.gov.uk Tel: 0115 977 2130.

Constitutional Comments

14. This report is for noting only.

Financial Comments

15. There are no 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 Divisions and Members Affected

- All