

18<sup>th</sup> April 2016

Agenda Item: 10

# REPORT OF CORPORATE DIRECTOR, ADULT SOCIAL CARE, HEALTH AND PUBLIC PROTECTION

# UPDATE ON WORK OF THE HEALTH AND WELLBEING BOARD

## **Purpose of the Report**

1. The report updates the Committee on the key issues covered by the Health and Wellbeing Board over the last six months.

# Information and Advice

- 2. The Health and Wellbeing Board is the vehicle by which councils are expected to exercise their lead role in integrating the commissioning of health, social care and public health services to better meet the needs of individuals and families using the services. Joint Strategic Needs Assessments (JSNA) and Health and Wellbeing Strategies are key to this process. The Board is chaired by Councillor Joyce Bosnjak.
- 3. The Committee received a report in October 2015 on the work and priorities of the Board over the previous six months. This update covers the period from September 2015 to March 2016. During that period there have been six meetings. There have also been a number of Health and Wellbeing Stakeholder network events, between August 2015 and February 2016.

## September to December 2015

- 4. In September 2015, there were presentations on the vanguard sites in mid-Nottinghamshire and Rushcliffe. There was also a report on the annual Healthwatch report for 2014/15, which referenced achievements such as the launch of the new website and a number of events held with the public including a carers' conference.
- 5. There was a report on the implementation of the findings from the peer challenge of the Health and Wellbeing Board which took place in February 2015. The three main themes from the feedback had been: to improve the strategic leadership of the Board through a clear vision and refined Strategy; to streamline and strengthen governance and support arrangements to assist the Board and Chair in their leadership task and link the Board to complementary work streams and leadership structures; and to build better communication and engagement with key partners, especially local acute providers and the Voluntary and Community Sector. The report focused on the considerable work undertaken to date to respond to the findings which were followed up at a workshop following the peer challenge.

- 6. Also presented was a report on the current state of health inequalities in Nottinghamshire. This included reference to healthy life expectancy (HLE) the average number of years a person can expect to live in good health. This is an indicator which had not been reported previously in the County so it represented a baseline for future activity. The report showed that Nottinghamshire had a worse HLE than the national average for men, and may have a worse HLE than the regional and national average for men and women together. The report set out the need to develop multi-agency plans to address the leading causes of health inequalities.
- 7. At the Board meeting in October 2015, there was a report on the role of the Nottinghamshire Fire and Rescue Service in health and wellbeing, and the potential to improve this. The service had expressed a desire to work with wider public sector partners to make the most of their workforce and their skills and knowledge in relation to prevention.
- 8. The Board also received a report with a draft young people's health strategy and the results of the young people's health survey, which attracted over 1,000 responses. The survey illustrated the importance of emotional and mental wellbeing to the young people that had responded.
- 9. There was an update report on progress against Nottinghamshire's Better Care Fund plan and the impact of recent policy changes. The update included progress in relation to seven day services. There was also a report highlighting the impact of excess winter deaths and the prevalence of fuel poverty in the County. This report looked at the work undertaken to date in the County to address preventable deaths and recommended refreshing the Affordable Warmth Strategy for the County (from 2011) to bring it into line with the current Health and Wellbeing Strategy and NICE guidance, in order to address the needs of people at risk.
- 10. In December 2015 the Board received an overview of progress on the Joint Strategic Needs Assessment (JSNA), which now has 33 chapters. The Board heard that information in the JSNA is widely used; Trading Standards, voluntary sector organisations and commissioners have all referred to it when reviewing services. There is a programme of work to continue to develop the JSNA, in particular to improve how the voluntary sector can contribute to the evidence.
- 11. Chris Few, Chair of the Nottinghamshire Safeguarding Children Board, attended the meeting to present the annual report. He assured members that safeguarding arrangements in Nottinghamshire had been audited and rated as 'good'. The Safeguarding Board continues to deal with cases of historic sexual abuse. Chris was keen to assure the Board that services had changed and are being continuously improved to avoid such cases happening in the future. The Safeguarding Board is also encouraging a Think Family approach to support services to think about families when dealing with issues, rather than focusing on individuals in isolation.
- 12. The Board received an update on the community empowerment and resilience programme, which is being developed to support community development in Nottinghamshire. It is based on two themes: to universally support the voluntary sector so it can maintain and improve its support to communities, and a focus on particular areas or topics like loneliness. The programme aims to bring together strands of similar

work which are already happening in health, local government and through other partners like the Police. The Board agreed that voluntary sector organisations play a vital role in improving health and wellbeing and welcomed the opportunity to support them and develop their services.

- 13. Other items included confirmation that 21 partners had agreed to sign up to the tobacco control declaration in Nottinghamshire. These included Nottinghamshire Police, Nottingham University Hospitals and East Midlands Ambulance Service. John Tomlinson set out the plan for the tobacco team over the next 12 months, including continued support to the organisations who have already signed up and aims to get more employers on board.
- 14. Health and Wellbeing Board members asked for regular reports from the Better Care Fund, the Health and Wellbeing Implementation Group and the three transformation boards in Nottinghamshire to be added to the work programme.

#### January 2016

- 15. At the meeting on 6 January 2016, members of the Board welcomed Dr Jeremy Griffiths from Rushcliffe Clinical Commissioning Group as the new Vice Chair to the Health and Wellbeing Board following the resignation of Dr Stephen Kell.
- 16. Jane North, Transformation Programme Director in Adult Social Care, Health and Public Protection, introduced an item on the considerable progress with the implementation of the Care Act by showing films made by the Council about changes to social care resulting from the legislation. Members agreed to share the films with colleagues, service users, patients and the public.
- 17. Cheryl George, Senior Public Health Manager, updated the Board on the progress of the Wellbeing@Work Work-Place Health Award Scheme. The scheme brings together a network of interested businesses and gives information and training for staff on the importance of health and wellbeing. Employees receive nationally accredited Royal Society of Public Health training so they can act as a health trainer in their workplace. The award scheme comprises five award levels from bronze to platinum across five themes including substance use/misuse, emotional and mental health and wellbeing, healthy weight, and safety at work.
- 18. The Board heard that 38 workplaces have signed up and 360 champions have been trained as accredited health trainers. Two workplaces EATONS Manufacturing and EDF Energy were awarded their platinum awards in 2015. Board members were encouraged to promote sign up of their own organisations.
- 19. Cathy Quinn, Associate Director of Public Health, and Lynn Bacon, Chief Executive of Nottingham CityCare Partnership and Chair of the Local Education and Training Council (LETC) for Nottinghamshire, presented a report on the joint Health and Wellbeing Board workshop on workforce designed to address workforce issues across the city and county. The workshop had focused on seven themed discussions covering areas such as seven day services and Hybrid workers a multi-skilled worker model. The workshop had identified a number of common issues and approaches with more work required around flexible working, job satisfaction and opportunities for joint working. A workforce

development plan was to be developed and would be supported by the LETC, with a focus on avoiding duplication and having a consistent approach across the transformation programmes and the Health and Wellbeing Boards.

20. David Pearson, Corporate Director, Adult Social Care, Health and Public Protection, gave an update on the impact of the devolution bid made for Derbyshire and Nottinghamshire. He explained that the bid focussed on the economic development for the region covering areas such as jobs, transport and housing, but included the potential to develop a proposal for health and social care. Following the submission of the bid a workshop was held to consider the impact of devolution on health and social care.

## February 2016

- 21. In February 2016 the Board meeting was held at Beeston Town Hall, where it received a presentation and report on child sexual exploitation (CSE). Steve Edwards, Service Director, Children's Social Care, gave an overview of CSE in Nottinghamshire. The safety of children using the internet is now a huge concern both locally and nationally. There has been local action jointly with Barnardo's, Childline and NSPCC through schools and with parents using e-learning and other face to face training, but there is more work to do. Many of the characteristics of child sexual exploitation are also common to other issues such as radicalisation, cyber bullying and sexting.
- 22. It was acknowledged that the most powerful way to identify children at risk is through their friends so there is work going on in schools to educate children and give them the confidence to raise concerns with adults. Board members welcomed the report but raised concerns about how professionals and other adults were supported when they had to deal with cases of CSE. Board members were encouraged to undertake the PACE (Parents Against Child Sexual Exploitation) on-line training.
- 23. This meeting also included an update from Jez Alcock, Chief Executive Officer of Healthwatch Nottinghamshire, with an overview of their recent work which is focused on gathering evidence and insight from local people. This is then presented to a prioritisation panel to identify current issues. There is currently a project looking at dementia care and another one will start soon focusing on services for autism. Board members welcomed the update and commented on the work looking at opticians' services and transport for renal patients. They were keen to see Healthwatch utilise the networks already in place, like the Clinical Commissioning Group (CCG) patient networks and appointments data and the experience of professionals as well as the public. The Board also suggested that Healthwatch would be well placed to look at how successful the integration of health and social care services had been and asked that the prioritisation panel consider this as part of future work.
- 24. There was an item on Connected Nottinghamshire, which was set up in 2013 as part of Productive Notts and has focused on information sharing across health and social care to improve the patient experience of services. The programme has three priorities the comprehensive geriatric assessment, end of life care and urgent and emergency care. It has also been working with health and social care to ensure that patient records use the NHS number as a unique identifier for everyone.

- 25. Andy Evans, Programme Director, described the progress made so far which means that Nottinghamshire is well ahead of similar areas across the country. He described the digital roadmap that is being prepared for submission to the Department of Health in June 2016 to demonstrate how information sharing is being achieved. The roadmap is also being aligned with the transformation plans in south and mid-Nottinghamshire. Andy assured the Board that Nottinghamshire was on track to deliver the national requirement for the NHS to be 'digital by default' by 2018. Board members were pleased with the progress made so far but interested to know how awareness of the NHS number system would be publicised and are keen to continue to improve information sharing between GPs, hospital departments and other partners.
- 26. Karon Glynn, Assistant Director, Mental Health and Learning Disabilities, Newark and Sherwood CCG, gave an update on how the Mental Health Crisis Care Concordat is being implemented in Nottinghamshire. The Concordat is a national initiative to improve the support people get during a mental health crisis. A Nottinghamshire Board, chaired by the Police and Crime Commissioner, has developed an action plan to implement the Concordat. So far this has delivered a street triage service, better response to mental health issues through 111 and better crisis liaison in south Nottinghamshire. As a result more services are aware of mental health issues, there is a better response for people who do reach crisis and there have been fewer detentions under Section 136 of the Mental Health Act, resulting in no children detained in police custody last year.
- 27. More work is planned to improve crisis support in mid-Nottinghamshire and Bassetlaw, and support with housing issues resulting from changes to benefits will be improved. The Board was pleased with progress, particularly as mental health has been part of the urgent care vanguard in Greater Nottingham. It was acknowledged that there had been some problems at the end of 2015 but the local peak in demand for services reflected a similar problem across the country. Board members also welcomed the on-going work to manage the transition from children's to adults' services.
- 28. The Board also received a report on health protection in Nottinghamshire. Generally arrangements in the County are good but there are still areas for improvement. For example, cancer screening rates for the County as a whole are good but there are small areas where the uptake of screening is poor. There are plans to address areas of local risk, including a Nottinghamshire plan to address anti-microbial resistance, which will include antibiotic guardians, updating pandemic 'flu plans, updating the Nottinghamshire Air Quality Strategy, looking at immunisation rates and also the management of small outbreaks of disease which have occasionally been difficult to deal with.
- 29. Board members supported the work which has been undertaken by Public Health but concerns were expressed about the effectiveness of annual 'flu campaigns and fewer people being vaccinated. There was also concern expressed about the implications of funding changes on the work of Public Health.

#### March 2016

30. At the Health and Wellbeing Board in March the Chair of the Nottinghamshire Safeguarding Adults Board (NSAB), Allan Breeton, presented the Board's annual report. Much of the work of the Board had been to ensure it was fit for purpose in relation to the new responsibilities introduced in the Care Act – from April 1<sup>st</sup> 2015 adult safeguarding

has been on a statutory footing. It was noted that the Board had worked closely with the Learning Disability and Autism Partnership Board to design and co-deliver training opportunities. The report also noted the upward trend in safeguarding referrals, with 5,183 received in 2014/15 – an increase of 432 referrals from 2013/14.

- 31. There were presentations on the new models of care, vanguards and transformation taking place in mid and south Nottinghamshire, as well as an update report on the current performance of the Better Care Fund and progress with planning for 2016/17. The report included reference to the Sustainability and Transformation Plans required for each regional area by 2017, to ensure the integration of health and social care by 2020.
- 32. Also at the March Board meeting there was a report on Dementia Care in Nottinghamshire. In February 2015, the Prime Minister's new dementia challenge 2020, with an agenda for the next five years, was published. A dementia stakeholder event was organised for November 2015 with the intention of developing a response to the Prime Minister's challenge. The countywide framework for action to improve services for people with dementia and their carers, in line with NHS England's Well Pathway and associated metrics in the Public Health Outcomes Framework Dementia Profile, will be presented to the Health and Wellbeing Board in May 2016.
- 33. The Health and Wellbeing Board stakeholder network events conducted during this period were:
  - Young People's health event, 13<sup>th</sup> August 2015
  - Voluntary sector We're in it together, 22<sup>nd</sup> September 2015
  - <u>Dementia event</u>, 24<sup>th</sup> November 2015
  - Working together to secure a tobacco-free generation, 23<sup>rd</sup> February 2016.

## **Other Options Considered**

34. The report is for information only.

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

35. The update on the recent work of the Health and Wellbeing Board is for noting only.

# **Statutory and Policy Implications**

36. 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.

## **Financial Implications**

37. There are no financial implications arising from the report.

## Implications for Service Users

38. The summary of reports and issues covered by the Health and Wellbeing Board over the last six months indicates a wide range of work and developments that are focused on improving the health and wellbeing of the public in Nottinghamshire, prevention of ill-health and reduction of health inequalities.

# **RECOMMENDATION/S**

1) That the Committee notes the update on the key issues covered by the Health and Wellbeing Board from September 2015 to March 2016.

## David Pearson Corporate Director, Adult Social Care, Health and Public Protection

## For any enquiries about this report please contact:

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#### Constitutional Comments (SLB 24/03/16)

39. Adult Social Care and Health Committee is the appropriate body to consider the content of this report.

## Financial Comments (KAS 29/03/16)

40. 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.

Adult Social Care and Health – Overview of Developments – report to Adult Social Care and Health Committee on 5 October 2015

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

All.

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