

Meeting **HEALTH AND WELLBEING BOARD**

Date **Wednesday, 6 December 2017 (commencing at 2.00 pm)**

Membership

Persons absent are marked with an 'A'

COUNTY COUNCILLORS

Dr John Doddy (Chair)
Glynn Gilfoyle
Martin Wright

Muriel Weisz

DISTRICT COUNCILLORS

A	Amanda Brown	-	Ashfield District Council
	Jim Anderson	-	Bassetlaw District Council
	Lydia Ball	-	Broxtowe Borough Council
	Debbie Mason	-	Rushcliffe Borough Council
A	Neill Mison	-	Newark and Sherwood District Council
	Andrew Tristram	-	Mansfield District Council

OFFICERS

A	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
	Paul McKay	-	Deputy Director, Adult Social Care and Public Health

CLINICAL COMMISSIONING GROUPS

	Dr Nicole Atkinson	-	Nottingham West Clinical Commissioning Group
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A	Dr Thilan Bartholomeuz		Newark and Sherwood Clinical Commissioning Group
	Idris Griffiths	-	Bassetlaw Clinical Commissioning Group
	Dr Jeremy Griffiths	-	Rushcliffe Clinical Commissioning Group (Vice-Chair)

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| A | Dr James Hopkinson | - | Nottingham North and East Clinical Commissioning Group |
| A | Dr Gavin Lunn | - | Mansfield and Ashfield Clinical Commissioning Group |

LOCAL HEALTHWATCH

Michelle Livingston - Healthwatch Nottinghamshire

NHS ENGLAND

A Oliver Newbould - North Midlands Area Team, NHS England
Dr Agnes Belensczak NHS England

NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER

A Kevin Dennis

OFFICERS IN ATTENDANCE

Martin Gately	-	Democratic Services
Nicola Lane	-	Public Health
Sue Coleman	-	Public Health
Jonathan Gribbin	-	Public Health
Jo Marshall	-	Public Health

OTHER ATTENDEES

Vanessa McGregor – Public Health England
Charlotte Bee - Public Health England
John Kemp - Alzheimer's Society

MINUTES

The minutes of the last meeting held on 4 October 2017 having been previously circulated were confirmed and signed by the Chairman.

APOLOGIES FOR ABSENCE

Apologies for absence were received from Kevin Dennis, Chief Executive, Police and Crime Commissioner's Office and Dr James Hopkinson, Nottingham North and East CCG. In addition, Councillor Weisz replaced Councillor Bosnjak for this meeting only.

DECLARATIONS OF INTEREST BY BOARD MEMBERS AND OFFICERS

None.

NOTTINGHAMSHIRE SAFEGUARDING CHILDREN BOARD ANNUAL REPORT

Colin Pettigrew presented the report. Mr Pettigrew explained that as of April 2019 there would be a requirement to make arrangements on a different footprint. Because of the tendency for Bassetlaw residents to look towards Sheffield for services, Bassetlaw children will need to be removed from the data. There will also need to be an examination of pathways (e.g. into the QMC).

- Further to the recent publicity on stillbirths, Members heard that a new board would be set up to address this issue.
- The number of reviews stands at 58 because not all reviews are necessarily completed the same year as the child's death.
- The Nottinghamshire Safeguarding Children Board has been judged to be good of OFSTED – although it is difficult for OFSTED to inspect a partnership.
- It would be beneficial for the independent chairing of the Board to continue.
- It had not yet been determined if clinical pathways in Bassetlaw would be examined.

RESOLVED: 2017/041

That the content of the Nottinghamshire Safeguarding Children Board's Annual Report 2016/17 be endorsed.

Health Protection Update

Jonathan Gribbin, Consultant in Public Health, Dr Vanessa McGregor and Dr Agnes Belenczak, NHS England presented the Health Protection Update. Health Protection relies on close working between a number of organisations, and includes some of the highest impact interventions, but does not have a high profile. Dr Belenczak explained that while the Cervical Screening service's performance is good, the 14 day target is not being met due to a shortage of screeners. There is a need to make sure that the resulting delay does not put patients at risk. Dr McGregor explained that arrangements are in place for additional staff to assist in the response to a disease outbreak, and a Health Protection Response Group has been set up. There is variation in the uptake of immunisation, particularly the second MMR dose, as well as the pre-school booster.

- The Chairman pointed out that some aspects of antibiotic resistance are outside our control, for instance, in Greece antibiotics are available over the counter.
- The attendees agreed that a structured involvement of Patient Participation Groups would be a good way of spreading health protection messages, and particularly dispelling myths about antibiotics.
- Although flu vaccination uptake for vulnerable groups is at 45%, Members wondered if there might be benefits from an even earlier commencement of planning. Members were reassured that NHS England will be working all year round on flu vaccinations – when they have intelligence they set to work.

- Dr Griffiths suggested that a strategic review of communications policy should take place, particularly in light of the large number of myths that people still believe about flu.
- Members were informed that the take-up of flu vaccine by essential staff in Bassetlaw was high – 85%.
- Dr Bartolomeuz raised the issue of social deprivation, cancer screening and the links to HPV vaccination – reminder letters should be sent out to the defaulters in the same way that they are for chlamydia screening. Attendees agreed that this would be a suitable subject for a pilot project.
- While sexual health was outside of the scope of this report, chlamydia was a red outlier, and should be placed on the future work programme for the board.

RESOLVED: 2017/042

That the outcomes and arrangements (including the matters highlighted in the February 2016 Board report) for protecting the health of the local population against communicable disease and environmental threats be considered and other required actions* identified.

- 1) Structured involvement of Patient Participation Groups in the dissemination of public health messages
- 2) A strategic review of communications relating to the promotion of flu vaccine uptake
- 3) A pilot project on social deprivation and cancer screening
- 4) The inclusion of sexual health issues (particularly Chlamydia) on the future work programme of the Board.
- 5) Health Protection update to feature regularly on the Board's agenda.

SECOND NOTTINGHAMSHIRE JOINT HEALTH AND WELLBEING STRATEGY

The Chairman introduced the Nottinghamshire Joint Health and Wellbeing Strategy 2018-2022. The vision for which is to work together to enable the people of Nottinghamshire, from the youngest to the oldest, to live happier and healthier lives in their communities, particularly where the need is greatest. The strategic ambitions are to give everyone a good start in life, to have healthy and sustainable places, to enable healthier decision-making, and working together to improve health and care services. The strategy goes before Policy Committee on 20th December.

- Dr Griffiths indicated that there was an argument for considering how the strategy penetrates the school population, the voluntary sector and significant employees

RESOLVED: 2017/043

That:

- 1) The second Nottinghamshire Joint Health and Wellbeing Strategy be supported by Health and Wellbeing Board members and recommended to Policy Committee for approval
- 2) The publication alongside the strategy of the report which summarises the consultation findings and the changes taken in response be agreed.

BETTER CARE FUND PERFORMANCE AND UPDATE ON THE IMPROVED BETTER CARE FUND

Joanna Cooper introduced the report on the Better Care Fund. The Board heard that the delayed transfer of care target (DTC) is being missed by 20-60 days per month, but significant improvements have been made on last year's figures. Paul McKay stated that DTC performance needs to be seen as a system – and we are the seventh best within the system. While performance is better than anticipated, coding is key, and people should not be waiting in an acute setting if they are medically fit to be transferred.

- Councillor Shaw requested further details on the accessibility the Falls Co-ordinator project. Paul McKay to provide.
- Councillor Weisz gave an example regarding a resident who had been improperly housed following a double-amputation and, was effectively trapped in his house. Paul McKay asked for the specifics regarding this incident to be passed to him outside of this Board meeting.

RESOLVED: 2017/044

That:

1. The Q2 2017/18 national quarterly performance report be approved.
2. The process for the in-year use of Improved Better Care Fund temporary funding be noted.

CHAIR'S REPORT

The Chairman introduced his report, and drew the Board's attention to the award winning work on Nottinghamshire Warm Homes on Prescription.

- Michelle Livingston, Healthwatch indicated that Healthwatch's new national director was moving the organisation into a statutory framework. In addition, the new national director would be attending this region's meeting next week. Further updates will follow.

RESOLVED: 2017/045

That the contents of the report be noted.

WORK PROGRAMME

RESOLVED: 2017/046

Dr Griffiths suggested that the work programme address where the need is greatest on health inequalities.

The meeting closed at 3.52 pm.

CHAIR