

minutes

Meeting: Nottinghamshire Health and Wellbeing Board

Date: Wednesday 5 July 2023 (commencing at 2:00pm)

Membership:

Persons absent are marked with an 'Ap' (apologies given) or 'Ab' (where apologies had not been sent). Substitute members are marked with a 'S'.

Nottinghamshire County Councillors

John Doddy (Chair)

Sinead Anderson

Ap Scott Carlton

S Tom Smith

Sheila Place John Wilmott

District and Borough Councillors

Ap David Walters - Ashfield District Council
Lynne Schuller - Bassetlaw District Council
Colin Tideswell - Broxtowe Borough Council
Henry Wheeler - Gedling Borough Council
Angie Jackson - Mansfield District Council

Susan Crosby - Newark and Sherwood District Council

Jonathan Wheeler - Rushcliffe Borough Council

Nottinghamshire County Council Officers

Ap Colin Pettigrew - Corporate Director for Children and

Families Services

Ap Melanie Williams - Corporate Director for Adult Social Care

And Public Health

Ap Jonathan Gribbin - Director for Public Health

S Vivienne Robbins - Deputy Director for Public Health

NHS Partners

Ap Dr Dave Briggs - NHS Nottingham and Nottinghamshire

Integrated Care Board

S Dr Stephen Shortt - NHS Nottingham and Nottinghamshire

Integrated Care Board

Ab Dr Eric Kelly - Bassetlaw Place Based-Partnership

Victoria McGregor-Riley - Bassetlaw and Mid-Nottinghamshire Place-

Based Partnerships

Dr Thilan Bartholomeuz - Mid-Nottinghamshire Place-Based

(Vice Chair) Partnership

Ab Fiona Callaghan - South Nottinghamshire Place-Based

Partnership

Helen Smith - South Nottinghamshire Place-Based

Partnership

Ab Oliver Newbould - NHS England

Other Partners

Ap Sharon Caddell - Office of the Nottinghamshire Police and

Crime Commissioner

Sarah Collis - Healthwatch Nottingham and

Nottinghamshire

Substitute Members

Councillor Tom Smith for Councillor Scott Carlton Vivienne Robbins for Jonathan Gribbin Dr Stephen Shortt for Dr Dave Briggs

Officers and colleagues in attendance:

Kerrie Adams - Senior Public Health and Commissioning

Manager, Nottinghamshire County Council

Joanna Cooper - Assistant Director, NHS Nottingham and

Nottinghamshire Integrated Care System

Helena Cripps - Public Health and Commissioning Manager,

Nottinghamshire County Council

Councillor Caroline Ellis - Mansfield District Council

Lucy Hawkin - Public Health and Commissioning Manager,

Nottinghamshire County Council

Briony Jones - Public Health and Commissioning Manager,

Nottinghamshire County Council

Irene Kakoullis - Group Manager for Early Childhood

Services, Nottinghamshire County Council

Adrian Mann - Democratic Services Officer,

Nottinghamshire County Council

Naomi Robinson - Senior Joint Commissioning Manager, NHS

Nottingham and Nottinghamshire Integrated

Care Board

1. Apologies for Absence

Councillor Scott Carlton Councillor David Walters Colin Pettigrew Melanie Williams Jonathan Gribbin Dr Dave Briggs Sharon Caddell

2. Declarations of Interests

No declarations of interests were made.

3. Minutes of the Last Meeting

The minutes of the last meeting held on 24 May 2023, having been circulated to all Members, were taken as read and were confirmed and signed by the Chair.

4. Chair's Report

Councillor John Doddy, Chair of the Nottinghamshire Health and Wellbeing Board, presented a report on the current local and national health and wellbeing issues and their implications for the Joint Health and Wellbeing Strategy. The following points were discussed:

- a) When the NHS was established 75 years ago on 5 July 1948, a primary focus was on combatting infectious diseases. Now, a significant level of NHS activity is around health issues in relation to longevity, which has increased significantly since 1948.
- b) Online sexual health testing services across Nottinghamshire have been upgraded to increase testing capacity and accessibility. The new system includes improved screening questions so that users will receive the most appropriate test for their needs, and it offers increased connectivity with local sexual health clinics. Due to the rising number of cases of sexually transmitted diseases, it is important that good investment is maintained in this area.
- c) The Government has announced £45 million in funding for measures to help make England 'smoke free' by 2030. In Nottinghamshire, work is being undertaken by the Smoking and Tobacco Alliance to establish the detail behind why people smoke and understand local culture, to inform targeted support with a particular focus on people with a background of substance misuse.
- d) The use of e-cigarettes by smokers is an important tool in helping them to quit. However, it is vital to ensure that vaping is not taken up widely by people who do not smoke, as it still results in negative health impacts. This is particularly important in regards to children and young people, with the Royal College of Paediatrics and Child Health calling for a ban of all disposable vaping products to limit their availability. Enforcement action targeting the illicit sale of vaping products is being increased, with Trading Standards officers working to prevent underage sales. Direct engagement on vaping is also being carried out with children in as many secondary schools as possible, with a survey underway of the attitudes of Year 6 and Year 10 children to help inform a targeted communications campaign.
- e) A survey of the oral health of 5-year-old children has been published by the Office for Health Improvement and Disparities. The results showed that, overall, 23.7% of 5-year-olds in England had experience of obvious dentinal decay –

while there has been a significant decline in the number of children receiving routine check-ups at a dentist.

- f) Greater food insecurity could affect people's physical health and mental wellbeing, and it is estimated that malnutrition costs the NHS £19.6 billion per year. The national take-up of NHS healthy food vouchers (aimed at vulnerable parents of young children) is up slightly from 63% in the previous year, but below the goal of 75%. The Council's Public Health team is working to engage as closely as possible with the communities that are struggling most, and food insecurity will be considered as part of the Nottinghamshire Covid Impact Assessment.
- g) The Board considered that everything possible should be done to keep vaping products out of the reach of children and young people, including measures such as increasing regulation, enforcement and tax, and making e-cigarettes a prescription-only product.
- h) The Board noted that a great deal of work was required to focus on certain issues that had grown worse during the Coronavirus pandemic, such as addressing the root causes of domestic abuse, gambling and homelessness, where effective engagement at the local community level was vital. Members considered that it was important to expand the Best Start offer as much as possible as part of a communities-based way forward, with a proactive approach needed to ensuring food security and good oral health for children.
- i) The Board noted that the Rowlands Pharmacy in Mansfield has closed as a result of a successful consolidation application, and that the Peak Pharmacy in Huthwaite had changed its supplementary hours, creating a gap in pharmacy provision though alternative provision was now in place. Members considered that it was vital that the Pharmaceutical Needs Assessment was maintained and used effectively to ensure that everyone in Nottinghamshire had reasonable access to a suitably close community pharmacy.

Resolved (2023/015):

1) To note the Chair's Report and its implications for the Joint Health and Wellbeing Strategy for 2022-26.

5. The Nottinghamshire Covid Impact Assessment – Pregnancy, Childbirth and Early Years

Helena Cripps and Lucy Hawkin, Public Health and Commissioning Managers at Nottinghamshire County Council, presented a report on the impacts of the Covid-19 pandemic in the context of pregnancy, childbirth and early years. The following points were discussed:

a) The assessment focused on the impact of the Covid-19 pandemic on pregnancy, birth and children's early years (0-5), with a particular focus on the impact on parents' and carers' wellbeing, children's early development and early years health outcomes. The current work is being driven by the Best Start Partnership,

which has identified 18 recommendations and drawn up an associated action plan. Ultimately, the pandemic had an adverse health and wellbeing impact on pregnancy and early years – but the outcomes experienced were not universal and could differ widely across community groups and areas.

- b) The pandemic had a significant impact on the early experiences and wellbeing of parents and carers, who could often be affected by isolation and loneliness due to a lack of in-person peer support networks. However, in some cases, there was more time and opportunity for adults to bond with their children. A national survey is underway into the potential impact of the pandemic on the numbers of maternal deaths, but no findings have been released currently. Ultimately, more early support is recommended for parents and carers, with stronger perinatal mental health pathways and more antenatal and 'preparation for parenthood' programmes.
- c) There is evidence that the pandemic had an adverse impact on children's early development, particularly in terms of communication, language, and social and emotional development. Although there has been some recovery, there is now an increased demand for specialist speech and language support, in addition to support for healthy social and emotional development, that has emerged in the cohort of children aged 2 and over who were most affected by the restrictions of the Covid-19 pandemic. Action is required swiftly as these children will soon be approaching starting school. Funding is in place for targeted speech and language therapy, with focused interventions being carried out in early years settings. Work is also underway with schools to help them recognise and support the needs of this particular cohort of children as they prepare to start school.
- d) In terms of early years health outcomes, the prevalence of breastfeeding remained relatively constant during the pandemic, but there were some localised impacts and problems in accessing services – though usage levels are now recovering. There has been a sharp decline in under 5s being able to access a dentist, which also reflects a wider national issue. Generally, the vaccination rates for young children have remained stable, which is represents a positive position.
- e) The Board considered that, in addressing the recommendations as set out in the report, the first '1001 days' in the life of a child were a crucial period were delivering effective services within communities through the Family Hubs would be vital. Members noted that community resilience was often far lower in areas of greater social deprivation, so an effective approach to addressing health inequality was very important.

Resolved (2023/016):

1) To note the Nottinghamshire Covid Impact Assessment for Pregnancy, Childbirth and Early Years.

6. Best Start Strategy Annual Progress Report 2022-23

Kerrie Adams and Irene Kakoullis, Senior Public Health and Commissioning Manager and Group Manager for Early Childhood Services at Nottinghamshire County Council, presented the annual report on the progress made towards the delivery of the Nottinghamshire Best Start Strategy. The following points were discussed:

- a) The Best Start Strategy represents an early help approach to improving outcomes for young children and their families. It was implemented on 1 April 2021 has been integrated within the wider Joint Health and Wellbeing Strategy, Integrated Care Strategy and Place-Based Plans.
- b) The Best Start Partnership acts as the responsible body for the development, delivery and performance management of the Strategy, working with existing partnership groups to agree actions, develop and deliver successful initiatives, and review progress. Where required, sub-groups have also been created to help lead on one or more of the ambitions of the Strategy. A great deal of work has been put in place, but there is still much more to be done with a particular focus on improving the capture of data to inform effective service delivery, and on responding to the impacts of the Coronavirus pandemic.
- c) Steps are underway to ensure that 'every contact counts' in the context of place-based working. The Nottinghamshire Place-Based Partnerships (PBPs) are represented directly within the Best Start Partnership and work is taking place to explore how they can take a leading role within the existing governance arrangements. Best practice is also being developed for achieving effective co-production with service users, particularly though the Family Hubs. It is vital for the Council to hear the voice of families in developing service and there is the potential to develop further in this area through wider partnership working, such as with Healthwatch.
- d) A successful pilot project has been introduced to help pregnant women to quit smoking including the provision of cessation support to other people within their household. A targeted parent-infant relationship service is in place to help and support early bonding between parents and their children. Emotional Health and Wellbeing Groups are being delivered through Children's Centres. There has been a 67% sign-up rate for the Healthy Start scheme, which works to invest in funding vitamins through pregnancy for everyone, though uptake has been higher in some areas of Nottinghamshire than others. Regular communication are underway to encourage further take-up.
- e) Family Hubs form a vital part of direct community support, and their establishment is being focused on priority neighbourhoods. It is intended to ensure a range of means of access, with facilities in central locations (including all existing Sure Start buildings) supported by both satellite sites and virtual delivery. Virtual provision has improved service access amongst certain groups, such as increasing engagement by fathers, and work is underway with both the PBPs, District and Borough Councils, and the community and voluntary sector to seek to achieve full equality of access for everyone.

- f) Funding is in place to support speech, language and communication skills in children older than two-and-a-half years in advance of starting school, and also to help address the current waiting lists for autism assessments.
- g) The Board considered that it was vital to establish 'one-stop shop' Family Hub provision within communities particularly for those experiencing the highest levels of social deprivation. Members noted that it was important to ensure that all services were properly joined up and had clear signposting so that issues such as infant tongue-tie could be addressed easily through the breastfeeding support services, for example.
- h) The Board noted that, ultimately, regular reporting would be needed on the implementation progress of the wide range of strategies now coming into effect.

Resolved (2023/017):

- 1) To note the progress made in the delivery of the Nottinghamshire Best Start Strategy.
- 2) To approve the next steps for the effective delivery of the Strategy for the improvement of outcomes for children and families.

7. Progress Report – Joint Health and Wellbeing Strategy for 2022-26

Briony Jones, Public Health and Commissioning Manager at Nottinghamshire County Council, presented a report on the progress made towards the delivery of the new Joint Health and Wellbeing Strategy (JHWS). The following points were discussed:

- a) A formal steering group has been established to support the delivery of the JHWS, coordinating between the key partners to develop joint working and joint bidding processes. A new outcomes dashboard is being generated to focus on the measurable outcomes, performance and trends of the established key delivery indicators down to a local level, to maximise partnership oversight and support the identification of priority areas and effective means of delivery. The key indicators will reflect those established within the wider Integrated Care Strategy.
- b) It is important that the right reporting structure is in place so that the progress of the delivery of the JHWS in the targeted areas can be properly understood. There are a large number of work areas within the JHWS and these need to be brought together in a thematic way for effective oversight and discussion by the Board, both in its public meetings and more informal workshops.
- c) The Board considered that a close focus on measurable, targeted priorities was important as part of a focus on investing effectively in prevention in partnership with the wider sector, including community and voluntary groups.

Resolved (2023/018):

- 1) To note the Joint Health and Wellbeing Strategy 2022-26 progress report.
- 2) To receive a presentation on the progress made in delivering the strategic ambition to give every child the best chance of maximising their potential at a future meeting of the Board.

8. Nottingham and Nottinghamshire NHS Joint Forward Plan

Joanna Cooper, Assistant Director of the NHS Nottingham and Nottinghamshire Integrated Care System, presented a report on the development of the Nottingham and Nottinghamshire NHS Joint Forward Plan (JFP). The following points were discussed:

- a) The production of the JFP is now approaching completion, with the final draft published on 30 June. Formal feedback on the draft JFP was received from around 800 consultees, including from local people and community groups. The Integrated Care Partnership will meet on 13 July to finalise the JFP for launch at the end of July.
- b) As part of the drafting process, a development session was held with Board members to seek to ensure that the JFP reflects the Joint Health and Wellbeing Strategy and the Integrated Care Strategy priorities. Ultimately, a concerted attempt has been made to join up forward planning across all partners as part of a fully integrated and collaborative system-wide approach.
- c) The Board thanked the NHS Nottingham and Nottinghamshire Integrated Care Board the consultative approach taken to the development of the JFP. It recommended that, ultimately, careful planning will be required as to how assurance on the delivery and impact of the JFP will be provided, and how reporting across the system will be linked together to achieve a clear overview of both progress and where further support is needed.

Resolved (2023/019):

- 1) To endorse the draft Nottingham and Nottinghamshire NHS Joint Forward Plan.
- 2) To approve the Board's statement of opinion, as set out in paragraph 10 to the report, for inclusion in the Joint Forward Plan.

9. The 2022-23 Better Care Fund Year End Reporting Template

Naomi Robinson, Senior Joint Commissioning Manager at the NHS Nottingham and Nottinghamshire Integrated Care Board, presented a report on the completion of the 2022-23 Better Care Fund (BCF) Year End Reporting Template. The following points were discussed:

a) The BCF year-end template confirms the continued compliance against the requirements of the fund (including the final spend position) and provides

information about the challenges, achievements and support needs in progressing delivery. The forward planning term is now for the next two financial years. Further steps are underway to develop strategic partnership working for collaborative planning and joint commissioning, with transformation processes linked to the to the BCF objectives. It is important that the BCF outcomes are reflected effectively with clear and collective oversight in place.

- b) The template reports the progress against four metrics, all of which were slightly below target at the year-end point. The challenges in meeting the targets set have been identified and mitigating actions have been put in place. These include carrying out more work to make the best use of community services to seek to avoid unplanned and unnecessary admissions to hospital from social care, addressing the higher than anticipated demand for residential care, and facilitating appropriate hospital discharge to residential care. A review is planned where the commissioning partners will be able to come together to discuss how the BCF can be taken forward in a fully joined-up way.
- c) Additional resources were received from the Adult Social Care Discharge Fund to support activity in this area during both 2022/23 and 2023/24. A narrative section on prevention work delivered through the BCF is being produced for future reporting templates, and high-level metrics are being developed for reporting on prevention activity.
- d) The Board considered that it was important for a proactive approach to be taken to prevention to reduce the number of unplanned hospital admissions, developed as part of a wider, person-centred approach in step with the Place-Based Plans to ensure that a full scheme of services from prevention to acute care is in place. Members advised that making the best use of community services was vital, in addition to further investment in preventative technology and remote monitoring.
- e) The Board recommended that a workshop should take place to enable members to discuss how the BCF can be best deployed in a strategic way. Members noted that, currently, only a small amount of the BCF is spent to support palliative care, so there was potential to consider how the services being provided by individual Place-Based Partnerships could be established across the whole system with support from the BCF.

Resolved (2023/020):

1) To ratify the Nottinghamshire 2022-23 Better Care Fund Year End Reporting Template that was submitted to NHS England on 23 May 2023 under delegated powers.

10. Review of the Health and Wellbeing Board

Briony Jones, Public Health and Commissioning Manager at Nottinghamshire County Council, presented a report on the proposed carrying out of a review process of the Nottinghamshire Health and Wellbeing Board to explore how it can best support the delivery of the Joint Health and Wellbeing Strategy. The following points were discussed:

- a) The last review of the work of the Board was carried out in 2015. As there have been substantial changes to the local health and care system since, a new review is important to help to identify opportunities to develop the Board, support and improve the delivery of its statutory duties and strategic priorities, ensure that the Board is effectively managing everything that it should, promote integrated working, and improve the health and wellbeing of residents of Nottinghamshire.
- b) The Government has updated its guidance in the context of the latest system changes to say that Health and Wellbeing Boards (HWBs) should continue to lead action at a place level to improve people's lives and remain responsible for promoting greater integration and partnership between the NHS, Public Health and Local Government. This involves working effectively with the local Place-Based Partnerships. Following the establishment of the Integrated Care Boards and Integrated Care Partnerships and their associated functions and duties, HWBs need to be clear on what they do within this context to respond to change dynamically and bring added value, and should ensure that their membership still best reflects the local circumstances and priorities.
- c) It is proposed to carry out the process with the Local Government Association as an independent partner, with the review to take place throughout the rest of 2023 and the findings and recommendations to be brought back to the Board for the New Year.

Resolved (2023/021):

 To approve the undertaking of a review into how the Nottinghamshire Health and Wellbeing Board can deliver its responsibilities most effectively in the current health and care context, and to establish the opportunities for developing the Board's role.

11. Work Programme

Briony Jones, Public Health and Commissioning Manager at Nottinghamshire County Council, presented the Nottinghamshire Health and Wellbeing Board's current Work Programme. The following points were discussed:

a) A thematic approach is being taken to the structuring of the Board's work programme, with the September meeting to focus on the theme of healthy and safe communities.

Resolved (2023/022):

1) To note the Work Programme.

There being no further business, the Chair closed the meeting at 4:16pm.

Chair: