

28 June 2017

Agenda Item: 11

## **REPORT OF THE CHAIR OF THE HEALTH AND WELLBEING BOARD**

### **CHAIR'S REPORT**

#### **Purpose of the Report**

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

#### **Information and Advice**

##### **2. Sexual health – Notts academic posters at national conference**

I am pleased to report that Sally Handley who works in the Public Health Division is the lead author for two academic e-posters accepted for the BASHH Conference 2017 (British Association for Sexual Health and HIV).

The first poster relates to [Chlamydia Screening](#) and sets out how Nottinghamshire piloted a National Chlamydia Screening Programme Chlamydia Care Pathway (NCSP CCP) tool to support strategic multi-agency understanding of chlamydia screening and detection rates, looking in detail at each of the seven stages of the pathway. It was particularly important for Nottinghamshire County and has informed actions that are set out in a chlamydia screening action plan to improve the chlamydia detection rate which has been falling year on year below the national detection rate. The poster sets out the importance of effective collaboration between commissioners and providers and how the pathway tool was applied as a system enabler to support a planned approach to improve outcomes.

The second poster is a summary of a research project undertaken as part of Masters in Public Health (International Health) in 2015 titled: [Teens and Sexting: a public health concern?](#) The research looked at sexual messaging (sexting) which has become the norm of peer-to-peer communication among young people. At the time of the study little was known about the nature of public health messages provided on sexting. There were concerns as to the negative impact sexting has on young people's health and wellbeing. The study sought to understand the nature of information and advice on sexting available online for children, young people and adults.

A document analysis looked at online resources from national agencies involved in promoting the welfare of children and young people.

The research found that there was a wealth of information and advice available and the nature of information and advice was consistent across agencies. The study found that harm reduction could be strengthened, through a multi-agency commitment to promote inclusive, cross curricular on line safety and healthy peer relationship messages.

For more information contact Sally Handley, Senior Public Health and Commissioning Manager e: [sally1.Handley@nottscc.gov.uk](mailto:sally1.Handley@nottscc.gov.uk) t: 0115 9772445.

### 3. **Healthwatch Nottinghamshire update - April 2017**

The Healthwatch service for Nottinghamshire is changing, aiming to build capability and become a more influential and effective collective voice of the public, facilitating targeted improvements in health and social care design and provision. The future strategy targets five key areas of improvement:

- Using innovative engagement approaches to be more representative of all of local communities with more of a focus on the voice of the 'seldom heard'
- Building a profile and influence through a clear and understood purpose that adds value by developing more effective partnerships and a Network of Networks
- Building capability and maximising resources, including a increasing volunteer base, to release greater capacity to deliver core functions as well as priority projects
- Collecting and using data more systematically, including Identifying and demonstrating the impact of activity in ways that are more meaningful to stakeholders
- Augmenting expertise and reach by growing contracted income and using that to reinvest in sustainability

Healthwatch Nottinghamshire and Healthwatch Nottingham have entered discussions with a view to becoming a single merged organisation by April 2018. Since Healthwatch was established there have been a number of posts shared between the county and city organisations. It is planned that the merger of the organisations will deliver further economies of scale, enabling more efficient use of resources, allowing Healthwatch to have a greater impact and reflecting the emerging changes in service delivery across the county and city.

### 4. **Carers Update**

#### **Health and Wellbeing Workshops for Carers**

A total of 7 Health and Wellbeing Workshops for Carers, provided by Inspire, took place in libraries across the county, one in each district, during March and April 2017.

These workshops were organised as an initial pilot, as part of an initiative to support unpaid carers with their mental health and wellbeing and covered topics including the caring role, healthy lifestyle, wellbeing and mindfulness.

Participants are asked to complete a questionnaire to measure their wellbeing at the start of workshop course, and again 2 weeks later, to measure improvements to their wellbeing. The scores from the questionnaires returned showed that carers felt some improvement in their wellbeing.

Feedback comments from participants gathered by Inspire were very positive and included:

- "given me hope"
- "made me more positive about myself"
- "made me think more about the positives of being a carer and coping strategies"

In addition to Health and Wellbeing workshops, Inspire also provided four 'taster' sessions of their community learning courses linked to health and wellbeing for carers. Most of those attending the taster sessions have since booked onto the full community learning course.

As a result of the success of these events more workshops and other carer learning are being planned for later this year.

### **Carer Information Booklet**

A new booklet has been produced to provide information to carers. The booklet is a revision of the previous carers information 'pack', and has been developed with the CCGs. The booklet contains all relevant information for carers, including details of how to get a carer's assessment, and other support available.

Copies have already been distributed to adult care teams across the county, GP practices, libraries and various voluntary sector organisations. There is also an electronic version of the booklet which is accessible from the [Nottinghamshire Help Yourself](#) and [county council's](#) websites.

For more information about carer's contact Dan Godley e: [dan.godley@nottscg.gov.uk](mailto:dan.godley@nottscg.gov.uk) t: 0115 977 4596

### **5. Recognition of innovation in commissioning**

In January we heard about the innovative work undertaken by the Children's Integrated Commissioning Hub (CICH) being part of a winning entry for an award for collaborative commissioning from the Health Care Supply Association (HCSA).

I am pleased to share that the community services procurement project that the CICH work was part of was recently shortlisted for another award – the Improving Value Through Innovative Financial Management or Procurement category of the Health Service Journal (HSJ) Value in Healthcare Awards on 24/05/17. The entry didn't win but it was a great achievement to be shortlisted as it was a big event with a very high standard of entries. The shortlist and winners can be viewed here: <https://value.hsj.co.uk/resources/shortlist-2017>

The award submission reflected the approach adopted by the CICH to both commissioning for outcomes and co-production for the development and procurement of the Integrated Community Children and Young People's Healthcare (ICCYPH) service and Children in Care Nursing service. Children's services represented around 30% of the value within the £247.38m community services project which achieved savings to the Nottinghamshire Clinical Commissioning Groups of £12.04m across the 10 community lots.

### **6. Healthwatch Insight report – LGBT experience of health and care**

Healthwatch Nottingham and Nottinghamshire have published a report looking at the experience of health and care services from the LGBT community (Lesbian, Gay, Bisexual, Trans).

The report, which is made up of 76 responses from people across Nottinghamshire, highlights that there is more to be done to ensure everyone in Nottinghamshire receives respectful care, with over a third of people commenting that their experiences of health care services had been affected by sexual orientation and/or gender reassignment.

As part of the project people were asked to share with what impact their experiences of health care services had on them. Of the 31 negative experiences, almost 2 in 5 people felt that it had a negative impact on them with 26% identifying specifically how this impacted on their emotional health, with many left feeling anger and despair.

Healthwatch will be working with providers and commissioners to ensure that the experience which have been shared as part of this project are noted and addressed.

For more information contact Nathan Hutchinson e: [nathan.hutchinson@healthwatchnottinghamshire.co.uk](mailto:nathan.hutchinson@healthwatchnottinghamshire.co.uk)

## 7. **Integrated Personal Commissioning (IPC)**

IPC is a partnership programme between NHSE and the Local Government Association. The overall goals of the programme are that:

- People with complex needs and their carers have better quality of life
- Prevention of crises in people's lives that lead to unplanned hospital and institutional care
- Better integration and quality of care

Nottinghamshire are early adopters of IPC and have signed a Memorandum of Understanding with NHSE for 2017/18 to embed the IPC operating model.

The IPC operating model is characterised by five key shifts in the model of care, underpinned by a number of specific service components. These include: a proactive co-ordination of care; building community capacity and peer support; care and support planning; increasing choice and control through personal or integrated budgets and personalised commissioning, moving away from 'one size fits all'. Together these drive improved outcomes for citizens, the system and the tax payer.

In Nottinghamshire the first group of people being offered IPC is children and adults with complex needs who are joint funded by health and social care to meet their needs, with a focus on young people preparing for adulthood. Early learning is that when more resource is put into joint support planning, people gain control over their lives, achieve better outcomes at reduced cost.

There is a [YouTube video](#) which show's Mark's Story and a [presentation](#) available to share with colleagues who might be interested. You can also find more information about IPC through [NHS England](#).

For more information contact Debbie Draper e: [debbie.draper@rushcliffeccg.nhs.uk](mailto:debbie.draper@rushcliffeccg.nhs.uk)

## **PROGRESS FROM PREVIOUS MEETINGS**

### 8. **Healthy Family Teams**

A new service has been introduced for children, young people and families bringing together care provided by health visitors, school nurses, the Family Nurse Partnership Programme (for first time teenage mums) and the National Childhood Measurement Programme.

There are 20 new locally based 'Healthy Family Teams' formed across the County offering children, young people and families the care they need from before birth to their late teens when they need it, regardless of where they live in Nottinghamshire. Each Healthy Family Team contains a mix of public health practitioners and support staff with a range of skills who work together to support children and young people in line with the Department of Health's Healthy Child Programme.

A [stakeholder briefing](#) is available as well as a [leaflet for children and families](#). Contacts for district service leads are included in the stakeholder briefing.

## PAPERS TO OTHER LOCAL COMMITTEES

9. [System Working to Improve Emergency Care](#)
10. [Integrated Community Children and Young People Health Service Programme](#)
11. [Workforce Challenges - Improving Recruitment of the Medical Workforce to the East Midlands](#)  
Reports to Joint City/County Health Scrutiny Committee  
18 April 2017
12. [Integrated Commissioning Carers Strategy Update](#)
13. [Evaluation of Hospital Winter Discharge Arrangements and Planning for 2017/18](#)  
Papers to Adult Social Care and Health Committee  
18 April 2017
14. [Police and Crime Plan Theme 3 - Focus on Priority Crime Types and those local areas most affected by Crime and Anti-Social Behaviour](#)  
Paper to Nottinghamshire Police and Crime Panel  
24 April 2017
15. [Integration of Health and Social Care in South Nottinghamshire - Transformation Programme Update](#)
16. [Performance Update for Adult Social Care and Health](#)  
Papers to Adult Social Care and Public Health Committee  
12 June 2017
17. [Introduction to Health Inequalities](#)  
Paper to Health Scrutiny Committee  
13 June 2017
18. [County CAMHS Looked After and Adoption Team - service provision and developments 2016-17](#)  
Paper to Children and Young People's Committee  
19 June 2017

## A GOOD START

19. [Childhood obesity: follow up](#)  
This follow-up report on childhood obesity in the UK argues that the government needs to take more robust action to tackle the impact of deep discounting and price promotions on the sales of unhealthy food and drink. In relation to the child obesity plan, the committee welcomes the measures announced on sweetened beverages but highlights that greater action on several key areas could make the strategy more effective overall. The committee will continue to follow up how the money from the sweetened drinks levy is distributed.
20. [Sugar reduction: achieving the 20%](#)

This report sets out guidelines for all sectors of the food industry on how to achieve a 20 per cent sugar reduction across the top nine categories of food that contribute most to intakes of children up to the age of 18 years.

21. **[The Best Start: the future of children's health: valuing school nurses and health visitors in England](#)**

RCN

This report shows that there has been a decline in the number of school nurses and an emerging trend of reductions in the health visiting workforce. It outlines the context to the changes being made to these services, and to the workforce.

22. **[The State of Child Health: STP](#)**

The Royal College of Paediatrics and Child Health

The RCPCH has undertaken a review of Sustainability and Transformation Plans from a child health perspective.

23. **[Vaccine uptake in under 19s: Quality Standards](#)**

NICE

This quality standard covers increasing vaccine uptake among children and young people aged under 19 in groups and settings that have low immunisation coverage. It describes high-quality care in priority areas for improvement.

24. **[Poverty and child health: views from the frontline](#)**

RCPCH

This report is based on a survey of more than 250 paediatricians and provides an insight into the reality of life for UK children living in poverty. The report looks at a number of areas including food insecurity; poor housing; and worry, stress and stigma and their effect on the health of children. [Read a summary here.](#)

25. **[Hungry holidays: a report on hunger amongst children during school holidays](#)**

All Party Parliamentary Group on Hunger and Food Poverty

This report presents the results of a short inquiry conducted between February and April. It explores the extent and causes of hunger amongst children during school holidays.

26. **[Adolescent obesity and related behaviours: trends and inequalities in the WHO European Region, 2002-2014](#)**

World Health Organisation

This report presents the latest trends in obesity, eating behaviours, physical activity and sedentary behaviour from the health behaviour in school-aged children (HBSC) study, and highlights gender and socioeconomic inequalities across the WHO European Region.

27. **[Focus on: emergency hospital care for children and young people](#)**

Quality Watch

This report draws on emergency hospital admissions data and finds that the number of babies and young children admitted to hospital in an emergency has grown by almost a third over the past decade. The analysis reveals that many children are being admitted to hospital for conditions like asthma and tonsillitis – admissions that could potentially have been avoided with better care and support out of hospital. The report raises questions about where children and young people can access high quality treatment outside of the hospital emergency care setting.

**28. Children and young people's mental health: the role of education.**

The House of Commons Education and Health Committees

The Committees found that financial pressures are restricting the provision of mental health services in schools and colleges. It calls on the Government to commit sufficient resource to ensure effective services are established in all parts of the country. It also calls for strong partnerships between the education sector and mental health services.

**29. #StatusOfMind**

Royal Society of Public Health and the Young Health Movement

The report examines the positive and negative effects of social media on young people's health and includes a league table of social media platforms according to their impact on young people's mental health. YouTube tops the table as the most positive with Instagram and Snapchat coming out as the most detrimental to young people's mental health and wellbeing.

Additional link: [BBC news report](#)

**30. Mental Health in schools**

From September 2017, a new [Wellbeing Award for Schools](#), presented by the National Children's Bureau (NCB) and Optimus Education Ltd, will recognise outstanding work being done to promote mental health and wellbeing within school communities across England.

**31. Teenage drinking and the role of parents and guardians: findings from Drinkaware Monitor 2016.**

Drinkaware

This survey of young people aged 13-17 provides a picture of young people's drinking behaviour, parents/guardians' awareness of their children's drinking, and the effects of parents/guardians' drinking behaviour and attitudes on those of their children.

**LIVING WELL**

**12. Health matters: obesity and the food environment**

Public Health England

The latest edition of Health Matters which looks at how councils and partners can help small food outlets and schools offer healthier food to reduce obesity levels.

The increasing consumption of out-of-home meals - that are often cheap and readily available - has been identified as an important factor contributing to rising levels of obesity.

Linked to this document are 2 case studies:

**Box Chicken – providing healthy competition to fast food outlets**

A pilot fast food takeaway project, providing a healthy alternative to fried chicken, for schools and the local community.

**Gateshead: planning document to limit the proliferation of takeaways**

In Gateshead, a Supplementary Planning Document (SPD), supported by an integrated public health policy, has been used successfully to control the proliferation of takeaways in areas with high levels of child obesity.

**32. Reducing the sales of sugary drinks in hospital shops**

The NHS is stepping up its campaign against obesity, diabetes and tooth decay by announcing that sugary drinks will be banned in hospital shops beginning from next year

unless suppliers voluntarily take action to cut their sales over the next twelve months. WH Smith, Marks & Spencer, Greggs, the SUBWAY(r) brand, Medirest, ISS and the Royal Voluntary Service are the leading suppliers who have pledged to cut sales. Remaining retailers are now being urged to join them.

Additional link: [BBC News report](#)

**33. [Five-a-day](#)**

A new survey commissioned by Diabetes UK to promote its 'Food you love' healthy eating campaign in Diabetes Week (11 June to 17 June) has found that 66% of adults eat [three or fewer portions of fruit and/or vegetables a day](#), well below the recommended five portions and 46% won't eat any fruit at least three days a week. The survey also found that three quarters of the public don't know what constitutes a recommended portion of vegetables, and two thirds of people weren't able to identify a portion of fruit.

**34. [Physical inactivity and sedentary behaviour report 2017](#)**

This report finds that more than 20 million adults in the UK are physically inactive and estimates that this increase risk of heart disease may cost the NHS £1.2 billion annually. The report provides an overview of the levels of physical inactivity and sedentary behaviour in adults across the UK.

**35. [Exercise interventions for cognitive function in adults older than 50: a systematic review with meta-analysis](#)**

British Journal of Sports Medicine

This paper examines whether physical exercise is effective in improving cognitive function in people over 50. It concludes that people should be encouraged to undertake some form of exercise which includes both aerobic and resistance exercise of at least moderate intensity on as many days of the week as feasible, in line with current exercise guidelines.

**36. [Urban green space interventions and health: a review of impacts and effectiveness](#)**

World Health Organisation

This report aims to fill the knowledge gap on the benefits of urban green spaces. It outlines the results of an evidence review and an assessment of local case studies on urban green space interventions, and finds that increasing or improving urban green space can deliver positive health, social and environmental outcomes for all population groups, particularly among lower socioeconomic status groups. It highlights the need to include health and equity outcomes more fully in studies on green space interventions in future.

**37. [Sexually transmitted infections: condom distribution schemes](#)**

This guidance recommends that condoms should be more widely available to reduce the rates of sexually transmitted infections and that local authorities should consider providing free condoms through pharmacies, sexual health charities and universities.

**38. [The "BabyClear" programme helped pregnant women stop smoking in North East England](#)**

NATIONAL INSTITUTE FOR HEALTH RESEARCH Signal

This is an expert commentary of a study evaluating carbon monoxide measurement undertaken by midwives for all pregnant women at booking. It was designed to help implement NICE guidance and improve identification of pregnant smokers with the aim of helping them quit.

**39. NHS Health Check Programme Rapid Evidence Synthesis**

RAND

This evidence synthesis focused on the delivery, experience, uptake, attendance and health outcomes of NHS Health Check programme. It produced a descriptive quantitative synthesis and a thematic qualitative synthesis of the data.

**40. The cost-effectiveness of population Health Checks: have the NHS Health Checks been unfairly maligned**

Journal of Public Health

This study is the first to use observed data on the effectiveness of the Checks to consider whether they represent a cost-effective use of limited NHS resources. The analysis suggests that the significant health and cost-saving benefits from even a modest reduction in mean BMI, coupled with the low costs of the Checks, combine to result in a potentially highly cost-effective policy.

**41. A supported web-based programme helps people lose weight in the short term**

National Institute for Health Research Signal

The NHS needs low-cost weight loss programmes to tackle the burden of obesity-related disease. This NIHR research showed that the web programme, with phone or email support from nurses, had a modest benefit and was probably cost-effective. It represents one option that could be offered to patients.

**42. Modelling the implications of reducing smoking prevalence: the public health and economic benefits**

Tobacco Control

This study predicted that achieving a smoking prevalence of 5% by 2035 would result in the avoidance of 100,00 new cases of smoking-related diseases over 20 years, which includes 35,9000 cases of cancer compared to current trends of smoking prevalence. Furthermore, this could save the NHS £67million in 2035 alone.

**43. Counselling services help expectant mothers quit smoking**

National Institute For Health Research Signal

This high quality Cochrane review included 102 relevant trials in which the researchers had high confidence. It suggests that psychosocial interventions can help pregnant women quit, but that health education alone is not sufficient.

**44. Use of e-cigarettes**

Action on smoking and health (ASH)

This data is taken from its annual Smokefree GB survey which finds that an estimated 2.9 million adults in Great Britain currently use electronic cigarettes. Approximately 1.5 million vapers are ex-smokers whilst 1.3 million continue to use tobacco alongside their e-cigarette use. The most common reasons given by e-cigarette users for switching from tobacco were to help them stop smoking entirely and to save money.

**45. Smoking and tobacco: applying All Our Health**

PHE

Evidence and guidance to inform healthcare professionals and maximise their contribution to reducing harm from smoking and tobacco.

**46. Tobacco packaging design for reducing tobacco use**

Cochrane database of systematic reviews

This review found from the available evidence that standardised packaging may reduce smoking prevalence but did not find any evidence suggesting standardised packaging may increase tobacco use.

**[47. How the tobacco industry responded to an influential study of the health effects of secondhand smoke](#)**

BMJ

This article documents the tobacco industry's attempts to refute the Hirayama study which showed an association between passive smoking and lung cancer, by producing a credible alternative study.

**[48. Mapping patterns and trends in the spatial availability of alcohol using low-level geographic data: a case study in England 2003–2013](#)**

University of Sheffield

A new study published in the International Journal of Environmental Research and Public Health has found that alcohol is more easily available to buy in the most deprived areas compared to less deprived postcodes. Mapping patterns and trends in the spatial availability of alcohol using low-level geographic data: a case study in England 2003–2013 raises concerns about the availability of alcohol, especially in deprived areas which are more affected more by alcohol-related health problems.

**[49. Anytime, any place, anywhere? Addressing physical availability of alcohol in Australia and the UK](#)**

Institute of alcohol studies

Shorter hours of sale for alcohol could ease the pressure on ambulances, emergency departments, hospitals and the police, suggests a study of licensing laws in Australia and the UK. This is the key finding from a new report published today by the Institute of Alcohol Studies (UK) and the Foundation for Alcohol Research and Education FARE (Australia). Anytime, Anyplace, Anywhere? compares and assesses alcohol licensing policies in Australia and the UK and offers a series of recommendations on how to reduce and prevent alcohol-related harm based on shared learnings. This is the first comparative study of alcohol availability policies in these two countries, which share similar drinking cultures.

**[50. Drug safety testing at festivals](#)**

The Royal Society for Public Health (RSPH) is calling on festivals where drug use is common to provide testing facilities as standard, where festival-goers can take any substances of concern in their possession to establish their content and strength. RSPH believes the move will help minimise the risk of serious health harm as a result of recreational drug use.

**[51. European Drug Report 2017: Trends and Developments](#)**

European Monitoring Centre for drugs and drug addiction

This report presents a top-level overview of the drug phenomenon in Europe, covering drug supply, use and public health problems as well as drug policy and responses. Together with the online Statistical Bulletin, Country Drug Reports and Perspectives on Drugs, it makes up the 2017 European Drug Report package.

**[52. Contribution of risk factors to excess mortality in isolated and lonely individuals: an analysis of data from the UK Biobank cohort study](#)**

Lancet Public Health

Data from the UK Biobank suggest that social isolation is associated with overall excess mortality and death attributable to neoplasms and circulatory diseases. Most of the excess mortality among socially isolated and lonely people could be attributed to adverse socioeconomic conditions, an unhealthy lifestyle, and lower mental wellbeing. Public health policies addressing these issues might reduce this excess.

## **COPING WELL**

### **53. [Mental health patients set to benefit from pioneering new digital services](#)**

NHS England announced new funding that will allow seven mental health trusts to pioneer world-class digital services to improve care for patients experiencing mental health issues. This will include, for the first time, all key professionals involved in a patient's care having access to real-time records; from triage and initial assessment, through to admissions or referrals, as well as transfer between services and follow up care. The trusts will also develop remote, mobile and assistive technologies to empower patients to manage their conditions and enable family and carers to provide the best possible support.

### **54. [Dementia-friendly housing charter](#)**

This charter aims to help housing professions better understand dementia and how housing, its design and supporting services can help improve and maintain the wellbeing of people affected. Free registration is required in order to access the charter.

### **55. [Turning Up the Volume: unheard voices of people with dementia](#)**

The Alzheimer's Society

This report brings together views of more than 3,500 people with dementia, carers and the public on what it is like to live with dementia. The information is taken from a series of in-depth interviews and face-to-face and online surveys. It provides an insight into the gap between the things that people living with dementia need to live well and their day-to-day reality.

### **56. [The impact on housing problems on mental health](#)**

Shelter

This report reveals that over the last five years, one in five adults suffer mental health problems due to housing pressures. The research also surveyed the experiences of 20 GPs who highlighted the number of patients diagnosed with anxiety or depression directly due to housing issues and that GPs required greater help to support patients with housing problems.

### **57. [Surviving or Thriving? The state of the UK's mental health](#)**

Mental Health Foundation

The document presents the results of a survey amongst its panel members in England, Scotland and Wales which aimed to understand the prevalence of self-reported mental health problems. It concluded that current levels of good mental health are low; collective mental health is deteriorating; and the experience of poor mental health, while touching every age and demographic, is not evenly distributed.

### **58. [Mental health and community providers - lessons for integrated care](#)**

NHS Confederation

This briefing looks at how mental health and community provider organisations are exploring the multi-speciality provider model and how it can drive the delivery of integrated mental and physical healthcare.

59. [\*\*Mental health and new models of care: lessons from the vanguards\*\*](#)

This report draws on recent research from vanguard sites in England, conducted in partnership with the Royal College of Psychiatrists. It finds that where new models of care have been used to remove the barriers between mental health and other parts of the health system, local professionals see this as being highly valuable in improving care for patients and service users. It concludes that there remains much to be done to fully embed mental health in integrated care teams, primary care, urgent and emergency care pathways, and population health.

60. [\*\*Social care and mental health forward view: ending out of area placements.\*\*](#)

Centre for Mental Health

This is the first of a new series of briefings in the 'We need to talk about social care' series. It highlights how Bradford Metropolitan District Council has reduced out of area placements and use of local private sector hospitals down to zero over the past two years.

61. [\*\*Guidance for commissioners of primary care mental health services for deaf people\*\*](#)

Joint Commissioning Panel for Mental Health in partnership with SignHealth

This guidance sets out key messages commissioner's need to embrace when commissioning mental health services in order to improve deaf people's access to these services. This guide should be of value to: CCGs and local authorities; health and wellbeing boards and service providers across secondary and tertiary services.

62. [\*\*Preventing violence, promoting peace: a toolkit for preventing interpersonal, collective and extremist violence\*\*](#)

King's Fund

This toolkit brings together evidence on the prevention of all types of violence including interpersonal violence (child maltreatment, intimate partner violence, sexual violence, elder abuse and youth violence), collective violence (including war and gang violence) and violent extremism. It focuses largely on how to prevent individuals and groups from developing violent behaviours rather than the costly process of dealing with violence and its consequences.

## **WORKING TOGETHER**

63. [\*\*The power of place – Health and Wellbeing Boards in 2017\*\*](#)

Shared Intelligence/Local Government Association

This is the fourth report for the Local Government Association reviewing the history of health and wellbeing boards and their effectiveness. The most important trend identified from this year's research was a focus of a number of boards on the wider determinants of health and the emergence of a place leadership role for some Boards.

64. [\*\*What is social care and how does it work?\*\*](#)

The Kings Fund

A range of content, including a series of short videos on what social care is, how it's provided and paid for, and how it works with the NHS and other services.

65. [\*\*Bite-sized social care: Social care, the NHS and other services\*\*](#)

King's Fund

This short video explains the importance of different services working together to provide care.

66. [Integration and Better Care Fund policy framework 2017 to 2019](#)

This document sets out how health, social care and other public services will integrate and provides an overview of related policy initiatives and legislation. It includes the policy framework for the implementation of the statutory Better Care Fund in 2017 to 2019 and also sets out our proposals for going beyond the Fund towards further integration by 2020.

67. [Next steps on the NHS five year forward view](#)

This document reviews the progress made since the launch of the NHS Five Year Forward View in October 2014 and sets out a series of practical and realistic steps for the NHS to deliver a better, more joined-up and more responsive NHS in England.

68. [Integration 2020: scoping research](#)

This research was commissioned by the Department of Health to inform the development of the integration standard and the next phase of plans to integrated health and social care. The integration standard would enable the collection of qualitative and quantitative data to measure the progress and performance within local areas. This report presents the findings of scoping research and engagement to better understand what integrated health should look like by 2020; testing out the integration standard and how feedback and support should be used to develop the standard.

69. [Health and housing: building the evidence base](#)

This paper for Kent Surrey Sussex Academic Health Science Network concludes that housing and related services can promote integrated care, save the NHS money and improve the patient experience. It suggests that closer working between the NHS and the housing sector can help reduce hospital admissions and emergency department visits, speed up the discharge of older patients, and maintain the independence of older people.

70. [Living better for less with technology enabled housing](#)

Housing LIN

The web resource, developed by ADASS' Housing Policy Network and supported by the Local Government Association (LGA) and Housing Learning and Improvement Network (LIN), explains how commissioners can help those needing care live better lives at home by utilising new technology.

71. [A shared understanding: Localising the integration of housing and health in Nottingham through a Memorandum of Understanding](#)

Housing LIN

This case study looks at how Nottingham City attempted to embed housing as the third vertex of local health and social care integration through the development of a local memorandum of understanding.

72. [Fuel Poverty Assessment Tool](#)

Joseph Rowntree Foundation

This fuel poverty assessment tool is designed to help front-line home energy efficiency assessors and fuel poverty programme workers to calculate whether a resident is living in fuel poverty. Based on the information you input about the household circumstances and

property details, it calculates the impact of different interventions on the level of fuel poverty to help assessors understand which could be the most cost-effective measures.

73. [Integration and the development of the workforce](#)

This working paper reveals how integration of the fields of health and social care will require organisations to break down traditional barriers in how care is provided. It details how workforce development plays a crucial role in successful integration. Please note that free registration is required in order to download this publication.

74. [Up to six million people set to benefit from more clinical pharmacists in GP surgeries](#)

Patients across England are set to benefit from more convenient trips to the GP with the announcement by NHS England of new, surgery-based clinical pharmacists to help with routine medication and treatment, and provide quicker clinical advice for patients.

75. [NHS and social care funding – three unavoidable challenges](#)

The Health Foundation

This briefing on NHS and social care finances explores the funding issues currently facing health and social care. It summarises the evidence and offers commentary on the options that need to be considered so these services can meet the public's future needs.

76. [Implementing shared decision making in the NHS: lessons from the MAGIC programme](#)

BMJ

This review summarises the MAGIC programme for adopting shared decision making, and details the common challenges associated with implementation. Key messages include the fact that skills and attitudes are more valuable than specific tools, and that organisation support is vital.

77. [Social value in procurement](#)

New Local Government Network

The Public Services (Social Value) Act 2012 requires commissioners in public authorities to have regard to economic, social and environmental well-being when buying public services. Public bodies are now encouraged to make social value a consideration and look for providers who can also deliver value to the local community for minimal or no additional cost. This report summarises the discussions hosted by NLGN which explored the challenges posed by the Social Value Act.

78. [Leading across the health and care system](#)

King's Fund

This paper offers those who are leading new systems of care guidance on how to address the challenges they face. It draws on the Fund's work on new care models, sustainability and transformation plans, and accountable care organisations. It is also informed by the experience of people who have occupied system leadership roles and draws on case studies from research and organisational development work.

79. [Access to general practice: progress review](#)

House of Commons Committee of Public Accounts

This report looks at patient access to general practice services during core hours. It expresses concerns over rolling out extended access without a full understanding of issues in the variation in patient experience in accessing services. The report also raises concerns

surrounding the workforce supply in general practice and how this will impact on plans to roll out extended hours.

**80. Integrating health and social care**

House of Commons Committee of Public Accounts

This report investigates the Better Care Fund and concludes that it has missed its objectives to reducing emergency admissions and delayed transfers of care. The report strongly criticises the implementation of the Better Care Fund and argues that the focus on integration should be shifted towards the STP process.

**81. Celebrating good care, championing outstanding care**

CQC

This report shares a collection of short case studies of good practice shown by care providers that are rated good or outstanding overall. It also features the views of some people responsible for care quality and what they do to drive improvement.

**82. Proposals for a health-creating economy**

UK Health Forum

This report sets out the Forum's view that the UK must continue to be an international leader on global non-communicable diseases prevention through engagement at home and abroad with global institutions, governments, the public sector, civil society and commercial operators. This position will in turn lead to savings to the NHS through reduced avoidable demand on services.

**83. Social prescribing: less rhetoric and more reality: a systematic review of the evidence**

University of York Centre for Reviews and Dissemination

This systematic review assesses the effectiveness of social prescribing programmes relevant to the NHS setting. It concludes that although social prescribing is being advocated as method of linking patients in primary care with sources of support within the community to help improve their health and well-being, current evidence fails to provide sufficient detail to judge either success or value for money.

**84. Integrating health and social care**

House of Commons Committee of Public Accounts

This report finds the Better Care Fund and failed to achieve its objectives of saving money, reducing emergency admissions to hospitals and reducing the number of days people remain in hospital unnecessarily. The Committee found the Fund was "little more than a ruse to transfer money from health to local government to paper over the funding pressures on adult social care".

**85. Health and social Care integration.**

New Local Government Network

This report summarises the discussions from two roundtable events held in January and March 2017 with officers, practitioners, elected members and thought leaders from local government and health. The discussions focused on the challenges of implementing an integrated approach to health and social care.

**86. The return of investment for preventive healthcare programmes**

RAND Corporation

This report outlines the divers of successful workplace health promotion programmes, provides an overview of health and wellbeing interventions offered by pharmaceutical companies, and develops a framework to analyse the return on investment of such projects, applying it to GSK's P4P programme

**87. [Social prescribing: from rhetoric to reality.](#)**

King's Fund

The Kings Fund has published presentations from an event which explored the range of benefits of social prescribing, as well as how best to measure and evaluate the impact and outcomes. Pioneering local areas shared their approach, challenges and achievements, and provided practical resources for commissioners and practitioners to develop schemes in their own locality.

**88. [Health and work infographics](#)**

Public Health England in partnership with The Work Foundation

The thirteen infographics are intended to help public health practitioners, local authorities and policy makers to make the case and inform planning on embedding health, work and worklessness within and across these issues.

**HEALTH INEQUALITIES**

**89. [Public Health England business plan](#)**

Public Health England (PHE) has published its [Annual business plan 2017 to 2018](#). The plan outlines the main steps and actions PHE will be focusing on over the next year to protect and improve the public's health and reduce health inequalities. It also describes how PHE will deliver the second year of the strategic plan 'Better outcomes by 2020'.

**90. [Health inequalities assessment toolkit](#)**

National Institute for Health Research

This toolkit has been designed by the Collaboration for Leadership in Applied Health Research and Care North West Coast to help projects ensure that all activities contribute to reducing health inequalities.

**GENERAL**

**91. [The long-term sustainability of the NHS and adult social care](#)**

Select Committee on the long term sustainability of the NHS

This report into the sustainability of the health and care system in England heavily criticises the failure of successive governments in effectively planning for the long-term future of the system. The committee argues that a new political consensus on the future of the health and care system is needed and that this should emerge as a result of government-initiated cross-party talks. It also recommends that budgetary responsibility should be held at a national level by the Department of Health and that the recommendations of the Dilnot Commission should be implemented. The report also raises concerns on public health budget cuts and the lack of long-term workforce planning within the system.

**92. [Using Brexit to tackle non-communicable diseases and improve the health of the public](#)**

UK Health Forum

This briefing provides an overview of the public health challenges and opportunities in relation to non-communicable diseases post Brexit. It examines EU laws, regulations and policies to determine their impact on health and highlights potential risks to health and potential improvement which can be made as a result of Brexit for protecting and improving the health and wellbeing of the public.

**93. Healthier, fairer, safer: the global health journey 2007-2017**

World Health Organisation

This independent report reflects on the trends, achievements and challenges in global health over the past decade. It discusses the role of WHO in dealing with such issues as the rise of non communicable diseases, leaps in life expectancy, and emerging threats like climate change and antimicrobial resistance.

Update on national policy and guidance prepared by the Library and Knowledge Service  
Sherwood Forest Hospitals NHS Foundation Trust.

**CONSULTATIONS**

**Other Options Considered**

94. To note only

**Reason/s for Recommendation/s**

95. N/A

**Statutory and Policy Implications**

96. 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 John Doddy**  
**Chair of Health and Wellbeing Board**

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

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**Constitutional Comments (LMcC 13.6.17)**

97. The report is for noting only.

**Financial Comments (DG 15.06.2017)**

98. There are no financial implications as per paragraph 12.

**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