

minutes

Meeting HEALTH AND WELLBEING BOARD

Date Wednesday, 6 November 2019 (commencing at 2.00 pm)

Membership

Persons absent are marked with an 'A'

COUNTY COUNCILLORS

Steve Vickers (Chair)
Joyce Bosnjak
Glynn Gilfoyle
Francis Purdue-Horan
Martin Wright

DISTRICT COUNCILLORS

David Walters - Ashfield District Council
Susan Shaw - Bassetlaw District Council
Colin Tideswell - Broxtowe Borough Council
Henry Wheeler - Gedling Borough Council
Debbie Mason - Rushcliffe Borough Council

A Neill Mison - Newark and Sherwood District Council

Amanda Fisher - Mansfield District Council

OFFICERS

Melanie Brooks - Corporate Director, Adult Social Care and Health

Colin Pettigrew - Corporate Director, Children and Families Services

Jonathan Gribbin - Director of Public Health

CLINICAL COMMISSIONING GROUPS

A Dr Nicole Atkinson - Nottingham West Clinical Commissioning Group

A Dr Thilan Bartholomeuz - Newark and Sherwood Clinical

Commissioning Group

A Nicole Chavaudra - Bassetlaw Clinical Commissioning Group

A Nina Ennis - NHS Greater Nottingham Clinical

Commissioning Group

Idris Griffiths - Bassetlaw Clinical Commissioning Group

Dr Jeremy Griffiths - Rushcliffe Clinical Commissioning Group

(Vice-Chair)

A Dr James Hopkinson - Nottingham North and East Clinical

Commissioning Group

A Dr Hilary Lovelock - Mansfield and Ashfield Clinical

Commissioning Group

LOCAL HEALTHWATCH

A Sarah Collis - Healthwatch Nottingham & Nottinghamshire

NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER

A Kevin Dennis

OFFICERS IN ATTENDANCE

Paul Johnson - Service Director – Strategic Commissioning and Integration

Irene Kakoullis - Group Manager for Early Childhood Services

Geoff Hamilton - Public Health
Nicola Lane - Public Health
Nick Romilly - Public Health
Edward Shaw - Public Health

Martin Gately - Democratic Services

OTHER ATTENDEES

Dr Ajanta Biswas - Healthwatch

Dr Vivienne Weston - Nottingham University Hospitals

MINUTES

The minutes of the last meeting held on 4 September 2019 having been previously circulated were confirmed and signed by the Chairman.

<u>APOLOGIES FOR ABSENCE</u>

Dr Ajanta Biswas of Healthwatch replaced Sarah Collis for this meeting only. Permanent changes of membership – Dr Hilary Lovelock replaced Dr Gavin Lunn, NHS Mansfield and Ashfield CCG, and Nina Ennis Associate Director of Joint Commissioning and Planned Care NHS Greater Nottingham CCG replaced Andrea Brown.

DECLARATIONS OF INTEREST BY BOARD MEMBERS AND OFFICERS

None.

CHAIRS' REPORT

The Chairman highlighted that arrangements are in place with partner organisations to support the uptake of the flu vaccination. A good response is anticipated from partner organisations, and some of these have considerable workforces.

The Chairman indicated that an inclusive employment event had taken place in Bassetlaw on 18th October 2019. The event was sponsored by Cerealto, which is a large employer in Worksop.

A Manifesto for Children - the Children's Commissioner has called on Britain's political parties to include a six-point plan in their manifestoes to transform the lives of children.

Members requested that the Public Health England Strategy be supplied to them.

RESOLVED: 2019/028

That:

1) The contents of the report be noted, and any actions required by the Board in relation to the issues raised be considered.

ANTIMICROBIAL RESISTANCE

Dr Vivienne Weston, Consultant Microbiologist and Community Infection Doctor at Nottingham University Hospitals NHS Trust, introduced the report, the purpose of which was to raise awareness of the issues associated with anti-microbial resistance, highlight national and local action that has taken place to help address antimicrobial resistance, as well as identifying how Health and Wellbeing Board Members can support the antimicrobial resistance agenda.

Antimicrobial resistance is a natural biological phenomenon but is increased by various factors such as inappropriate use of antimicrobial medicines, poor infection control practices and global spread through trade and travel. Failure to manage this risk could see increases in hospital admissions and lengths of stay, costs of treatment and premature mortality.

Dr Weston stated that there was increasing inappropriate use of antibiotics, particularly against self-limiting and viral infections. Antibiotics have previously been used in farming to promote growth, but this has now been addressed in this country. Sepsis is the commonest type of gram-negative infections.

In addition, Nottingham University Hospitals (NUH) has won a national award around the treatment and diagnosis of UTIs (urinary tract infections). Posters and other resources have also been developed around an promoting an antibiotic amnesty (returning unused antibiotics to pharmacists) and challenging inappropriate use of antibiotics. At the moment, no Trusts have electronic prescribing, which would make it much easier to account for how many antibiotics are prescribed and intervene in a timely manner.

The key thing is to prevent infection in the first place, much liaison with domiciliary and residential care workers has taken place – although this needs to be strengthened. The goal is to encourage everyone to be antibiotic guardians.

In response to a question from Councillor Bosnjak, Dr Weston stated that there are point of care diagnostic tests to see if infections require antibiotics, and these are being trialled in Sheffield. However, the cost of tests is more expensive than issuing antibiotics, hence the need for a national strategy. Sherwood Forest Hospitals are working with NUH to address the issue of electronic prescribing.

Dr Griffiths raised concerns about the nursing home population and emphasised that communication with clinicians needs to be about influence and incentivisation.

Jonathan Gribbin raised questions regarding the funding of point of care diagnostic testing and how this has been addressed in Sheffield. He highlighted that the Joint Strategic Needs Assessment (JSNA) is an opportunity to do work of joint interest and strategic importance, and that commissioners have to be mindful of JSNA chapters.

Members requested copies of the antimicrobial resistance leaflet for their own use. Mr Gribbin undertook to ensure the Board received this by Monday 18 November (European Antibiotic Awareness Day 2019, and the start of World Antibiotic Awareness Week 2019).

The Chairman stated that antimicrobial resistance was a clear and present danger. Pharmacies have an obligation to take back unused and old medicines.

The Board thanked Dr Weston for her valuable work.

RESOLVED: 2019/029

That:

1) Awareness of antimicrobial resistance and infection be promoted to employees and service users, using resources from the Antimicrobial Stewardship Group.

2) Advice and support be provided to the Antimicrobial Stewardship Group with the delivery of antimicrobial resistance and infection prevention messages across Health and Wellbeing Board partners and their networks, specifically to under served populations such as the homeless, Gypsy, Roma and Travellers, and those where English is not the first language.

APPROVAL OF JSNA CHAPTER: HEALTH AND HOMELESSNESS

Nick Romilly, Senior Public Health and Commissioning Manager, Public Health introduced the report, the purpose of which was to approve the Health and Homelessness Joint Strategic Needs Assessment (JSNA) chapter.

Whilst approaches to address housing supply are critically important to securing positive outcomes, these are covered within the Homelessness Strategies produced by local housing authorities. The recommendations of this JSNA therefore focus on the non-housing risk factors leading to homelessness and how these wider needs can be met.

Mr Romilly explained that Shelter's homelessness definition is quite broad – the most visible, and acute, end of the spectrum are rough sleepers, who are predominantly male. Data indicates that there are 48 people sleeping rough each night in Nottinghamshire, but these numbers need to be monitored over time. There is a requirement for a shift from reactive measures, and no one should be leaving prison or hospital and becoming homeless.

Councillor Shaw stated that in Bassetlaw some social housing had been allocated to the homeless. The Authority was always looking for more funding since it is not sustainable in some of the projects with excellent outcomes.

Idris Griffiths stated that in Bassetlaw there are individuals with multiple causes of homelessness. The solution is for the whole system to come together. People who are homeless experience worse health outcomes than the general population. The life expectancy for someone who is homeless is only 47, and homeless people are nine times more likely to commit suicide.

Dr Jeremy Griffiths said that system design should be carefully considered. Homeless people may change locality during the course of the week, making it difficult to determine which organisation should be providing services to them.

Colin Pettigrew emphasised that it is to our shame that 2% of the homeless are care leavers – no one should be leaving care and becoming homeless. Mr Pettigrew undertook to look into this. He wondered to what extent there was evidence that an aggressive stance against homelessness displaced it into other localities (e.g. crossing the bridge to be homeless in Rushcliffe).

Councillor Henry Wheeler stated that Gedling Borough Council's housing stock was all sold off in 2008, and there was therefore not enough local authority housing in the

borough. Gedling Homes is run by a Manchester company and is not properly accountable locally. Gedling Borough Council can now build 200 houses, but there is still a crisis – private landlords are asking for rents that benefits don't cover.

RESOLVED: 2019/030

That:

1) The Health and Homelessness Joint Strategic Needs Assessment be approved.

APPROVAL OF THE JSNA CHAPTER: EARLY YEARS AND SCHOOL READINESS

Irene Kakoullis, Group Manager for Early Childhood Services introduced the report, the purpose of which was to request the Board's approval of the JSNA Chapter – Early Years and School Readiness. This complements the JSNA chapter for 1,001 days, conception to age 2, which was approved by the Health & Wellbeing Board on 4 September 2019.

School readiness is measured by the level of development of a child when they reach Foundation Stage at school. It is related to the good start in life ambition of Nottinghamshire's Joint Health & Wellbeing Strategy.

21 priorities are included in the report. It is proposed the new Best Start Group should oversee the implementation of the recommendations, working in partnership with commissioners and providers of educational, health and wellbeing services for preschool children and their families.

Members were urged to attend the 5th February workshop, which would focus on the 'good start in life' ambition and school readiness.

Members heard that not enough children were starting school with the range of skills they need to succeed. Educational attainment is one of the main markers for wellbeing through the life course. However, the resources to support children are not always available (e.g. for one to one care).

Councillor Tideswell commented that he had recently attended his local Surestart and was impressed by their work and enthusiasm.

Members requested that a breakdown on free childcare figures be presented at the workshop.

RESOLVED: 2019/031

That:

1. The new Early Years & School Readiness Joint Strategic Needs Assessment chapter be approved.

RETROSPECTIVE APPROVAL OF THE 2019-20 BETTER CARE FUND (BCF) PLANNING TEMPLATE SUBMISSION

Paul Johnson, Service Director, Strategic Commissioning and Integration, introduced the report, the purpose of which was to gain approval for the Nottinghamshire 2019-20 Better Care Fund planning template that was submitted to NHS England 27 September 2019.

RESOLVED: 2019/032

That:

1) The Nottinghamshire 2019-20 Better Care Fund planning template that was submitted to NHS England on 27 September 2019 be approved.

OUTSIDE BODIES

RESOLVED: 2019/033

That:

- 1) The list of outside bodies relevant to the remit of the Health and Wellbeing Board and the agreed approach for requesting updates in the future be considered.
- 2) No updates were currently required from either of the outside bodies.

WORK PROGRAMME

Members were further reminded that the 4th December meeting is now a Board meeting rather than a workshop.

Dr Griffiths requested that integrated wellbeing be added to the work programme, and emphasised that this would require a reasonable amount of detail.

RESOLVED 2019/0034

That:

1) the report be noted.

The meeting closed at 15:53

CHAIR