

Meeting:	Nottinghamshire Health and Wellbeing Board
Date:	Wednesday 8 March 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  
Scott Carlton  
Sheila Place  
John Wilmott

**District and Borough Councillors**

	David Walters	-	Ashfield District Council
Ap	Susan Shaw	-	Bassetlaw District Council
	Colin Tideswell	-	Broxtowe Borough Council
	Henry Wheeler	-	Gedling Borough Council
Ap	Marion Bradshaw	-	Mansfield District Council
	Tim Wildgust	-	Newark and Sherwood District Council
Ab	Abby Brennan	-	Rushcliffe Borough Council

**Nottinghamshire County Council Officers**

	Colin Pettigrew	-	Corporate Director for Children and Families Services
	Melanie Williams	-	Corporate Director for Adult Social Care And Health
	Jonathan Gribbin	-	Director for Public Health

**NHS Partners**

Ap	Dr Dave Briggs	-	NHS Nottingham and Nottinghamshire Integrated Care Board
S	Dr Manik Arora	-	NHS Nottingham and Nottinghamshire Integrated Care Board
Ab	Dr Eric Kelly	-	Bassetlaw Place Based-Partnership
	Dr Thilan Bartholomeuz	-	Mid-Nottinghamshire Place-Based Partnership
	Victoria McGregor-Riley	-	Bassetlaw and Mid-Nottinghamshire Place-Based Partnerships
Ap	Fiona Callaghan	-	South Nottinghamshire Place-Based

	Helen Smith	-	Partnership South Nottinghamshire Place-Based Partnership
Ab	Oliver Newbould	-	NHS England

### **Healthwatch Nottingham and Nottinghamshire**

	Sarah Collis	-	Chair
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### **Nottinghamshire Office of the Police and Crime Commissioner**

Ap	Sharon Caddell	-	Chief Executive
S	Dan Howitt	-	Head of Strategy, Research, Information and Assurance

### **Substitute Members**

Dr Manik Arora for Dr Dave Briggs  
Dan Howitt for Sharon Caddell

### **Officers and colleagues in attendance:**

Dr Safia Ahmed	-	Public Health Registrar, Nottinghamshire County Council
Katharine Browne	-	Senior Public Health and Commissioning Manager, Nottinghamshire County Council
Sue Foley	-	Public Health Consultant, Nottinghamshire County Council
Briony Jones	-	Public Health and Commissioning Manager, Nottinghamshire County Council
Chris Jones	-	Special Educational Needs and Disability Strategic Lead, Nottinghamshire County Council
Adrian Mann	-	Democratic Services Officer, Nottinghamshire County Council
Catherine Pritchard	-	Public Health Consultant, Nottinghamshire County Council
Vivienne Robbins	-	Deputy Director for Public Health, Nottinghamshire County Council

### **1. Apologies for Absence**

Councillor Marion Bradshaw  
Dr Dave Briggs  
Sharon Caddell  
Fiona Callaghan  
Councillor Susan Shaw

### **2. Declarations of Interests**

No declarations of interests were made.

### **3. Minutes of the Last Meeting**

The minutes of the last meeting held on 1 February 2023, having been circulated to all Members, were taken as read and were confirmed and signed by the Chair. The following points were discussed:

- a) A Health Inequalities and Innovation Investment Fund has now been established with £4.5 million available to be spent locally within the system. Over 100 bids have been received and are currently being reviewed on how to tackle health inequalities in Nottinghamshire.
- b) The published Health Index for England provides a high-level snapshot that is helpful in indicating where health and wellbeing issues might be, themed under healthy people, healthy lives and healthy places. Detailed data for the local level is now available to be shared with the individual District and Borough Councils and Place-Based Partnerships by the Public Health Intelligence Team.

### **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) An evaluation of the impact of minimum unit pricing (MUP) on sales-based alcohol consumption in Scotland is underway. The MUP came into effect in 2018 and, within the first three years, it has been effective in reducing alcohol consumption in Scotland, while alcohol sales have increased in England and Wales. As such, a MUP on alcohol may achieve health benefits if also applied beyond Scotland.
- b) 8 March 2023 is National No Smoking Day, which is an annual health awareness event intended to help smokers who want to quit smoking. A great deal of work is underway to achieve a 'smoke free' Nottinghamshire by 2035 (where less than 5% of the population are smokers) and the Nottingham and Nottinghamshire Strategic Smoking and Tobacco Alliance will be publishing its vision and delivery plan in March 2023. Levels of smoking are falling, with 13.3% of people in the county as a whole being smokers. However, there can be significant variation in levels of smoking by district, with only 5.9% of people in Rushcliffe being smokers, bringing it close to the 2035 target. Overall, a downward trend in smoking is being achieved amongst most groups.
- c) Ultimately, smoking products can lead to a range of health problems and contribute to the premature death of 50% of their users. Support services are focusing strongly on prevention and smoking cessation, with an aim to 'make every contact count'. Appointments are also available to help smokers discuss their addiction without judgement and work to achieve behavioural change. There is a strong focus on targeting support to the most vulnerable groups of people with the greatest needs, including the offering of vaping products as a specific tool for helping to quit smoking. Free support is available for Nottinghamshire

residents who want to quit smoking or achieve a healthy weight via the 'Your Health Your Way' website.

- d) Direct engagement is underway with young people to seek to discourage them from taking up recreational vaping when they have never been smokers. Overall, 47% of underage purchasing of vaping products is from shops, so funding from the Public Health is being used to support the County Council's Trading Standards team in carrying out focused enforcement in this area. The purchase and use of illegal tobacco products remains a concern, so engagement is also underway with the Police on combatting the supply of illegal tobacco by organised crime.
- e) The Board raised concerns that although smoking was not permitted inside hospital buildings, it could take place outside on hospital sites where it was often concentrated around building entrances and exits, impacting negatively on other patients using the hospital. Members queried what formal policies the NHS had in place regarding smoking on hospital sites and noted that people smoking there were likely to be addicted to tobacco and vulnerable, so constituted a priority group that hospitals should seek to engage with on smoking cessation wherever possible.
- f) The Board considered that, when national funding is channelled into Nottinghamshire, it is vital that this results in effective local delivery to address identified needs, and that the results of the investment can be quantified and reported upon. Members were given assurance that a great deal of work is being carried out by partners and Public Health officers to ensure that the Joint Health and Wellbeing Strategy is being implemented effectively, and that individual case studies will be produced to illustrate the impact at the local level.

**Resolved (2023/006):**

- 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 - Behavioural Risk Factors**

Dr Safia Ahmed, Public Health Registrar at Nottinghamshire County Council, and Sue Foley, Public Health Consultant at Nottinghamshire County Council, presented a report on the impact of the Coronavirus pandemic on the health and wellbeing of the population of Nottinghamshire in the context of behavioural risk factors. The following points were discussed:

- a) Behavioural factors have a significant impact on non-communicable diseases, which account for 88% of overall disease in the UK. To seek to address this, the Joint Health and Wellbeing Strategy has a focus on alcohol, tobacco and maintaining a healthy weight, as the current behavioural factors that have the greatest impact on health across the population.
- b) Alcohol consumption increased during the pandemic in certain groups and there has been an increased demand for alcohol support services. The impact of

alcohol consumption has been polarised, as those who were lighter drinkers before the pandemic often drank less during it, while those who were heavier drinkers before the pandemic often drank more during it. As higher levels of alcohol consumption can be more prevalent in communities impacted by higher levels of deprivation, health inequalities have increased as a result of the pandemic. Alcohol consumption has also risen in some high income groups, while there are increasing trends of unsafe drinking habits amongst young people.

- c) It is important, therefore, that services are matched effectively to the need, and that focused work is carried out to identify and refer alcohol-related issues quickly and sensitively – particularly amongst those most at risk. There is a particular concern that, although the data suggests that there has been an increase in alcohol consumption amongst women relative to men as a result of the pandemic, this has not resulted in an increase in women accessing support services, so there could be significant number of women who have not yet come forward with alcohol-related service needs.
- d) The pandemic has had a mixed impact on smoking as, although it provided a motivation that helped some people to quit, it is likely that the pre-existing health inequalities attributed to smoking have worsened. It is important that the flexible and remote means of access to services developed during the pandemic are retained, and that engagement with the most vulnerable people is used to ensure that they are aware of the substantial risks of smoking and where help is available.
- e) The pandemic is also likely to have had an impact on behaviour in relation to vaping, but the associated data is not yet sufficiently detailed to establish the emerging trends with full clarity. Annual surveys are being carried out to collect information on the prevalence of vaping, including on recreational vaping by young people who have not smoked before, in order to grow a clear picture and identify the service requirements at the local level.
- f) Following the pandemic, physical activity has decreased in certain groups, particularly for those with a disability and within communities experiencing greater levels of deprivation. Physical inactivity also increased amongst people who moved to working from home on a more regular basis. As a result, there is a need to improve local environments as much as possible, to encourage physical activity wherever people live and work.
- g) The pre-existing inequalities in relation to sexual health present before the pandemic have continued to persist. The rate of testing for sexually transmitted infections has declined in some groups, so it is important that the flexible and remote means of access to services developed during the pandemic are retained, and that testing is increased within at-risk groups. There was a loss of outreach care during the pandemic, so it is important that this engagement is re-established – particularly in the context of the most difficult to reach groups.
- h) Gambling can have a significant impact on both individuals and their wider families. There was a shift towards online forms of gambling during the pandemic

and certain health inequalities have accelerated as a result. Men have experienced the greatest health impacts in relation to gambling, while people also affected by mental health or substance misuse issues are at particular risk. The East Midlands NHS Gambling Harms Service has been commissioned and is due to start in April 2023 to provide help to people with gambling addiction, and Public Health officers will engage with the District and Borough Councils in the near future to start to understand the particular local needs.

- i) The Board considered that care is required to ensure that the need to engage with vulnerable and at-risk groups is expressed as sensitively and non-judgementally as possible. Members advised that consideration is needed to ensure that services are adapted to engage with specific vulnerable groups as effectively as possible, and that work is carried out to understand why certain vulnerable groups do not feel confident, or are unable, to access the services that they need.
- j) The Board noted that, fundamentally, an overall outcome of the Coronavirus impact assessments will be to work to assess to what extent behaviours will revert to their pre-pandemic norms naturally, and to what extent active support will be required to seek to close the gaps in health inequality that widened as a result of the pandemic.

**Resolved (2023/007):**

- 1) To note the issues outlined in the Nottinghamshire Covid Impact Assessment on Behavioural Risk Factors, and to encourage members to act on them as appropriate.

**6. Joint Strategic Needs Assessment Chapter - Special Educational Needs and Disability**

Katharine Browne, Senior Public Health and Commissioning Manager at Nottinghamshire County Council, and Chris Jones, Special Educational Needs and Disability Strategic Lead at Nottinghamshire County Council, presented a report on a new chapter within the Joint Strategic Needs Assessment (JSNA) in relation to children and young people aged 0-25 years with special educational needs and disabilities (SEND). The following points were discussed:

- a) The Government published its SEND Review in March 2022, which identified requirements to improve the outcomes for children and young people with SEND needs, including improving ease of access to and navigation of the SEND system, and delivering better value for money for children, young people and their families. The Government has now published an associated implementation plan. An inspection of the County Council's arrangements for children and young people with SEND needs was carried out jointly by Ofsted and the Care Quality Commission to the new inspection framework in January, with the final report to be published shortly.
- b) The new chapter represents the first to address SEND directly within the JSNA, and it has been a priority for inclusion for some time – though its production was

delayed due to the Coronavirus pandemic. It is vital that SEND is a high priority across all levels of the system, so the chapter has been produced as part of a partnership approach, with the membership of the steering group managing its development evolving as the work progressed. The chapter has sought to provide a comprehensive overview of SEND to ensure that information is provided to support partners in progressing work to enable an improved quality of life for children and young people with SEND needs. The recommendations in the JSNA will be implemented and monitored through the SEND Accountability Board.

- c) The number of children with Education Health and Care Plans (EHCPs) in Nottinghamshire is significantly lower than the national average, but it is projected that there will be growing service requirements (including mental health needs) that must be planned for effectively. There will be a focus on supporting neurodiverse children, particularly those with autism. Overall, more males have SEND needs than females in Nottinghamshire, and children growing up in higher levels of deprivation are more likely to have SEND needs. Young people with SEND needs are also overrepresented in the Youth Justice System, so it is vital that there is effective working in place between all partners to understand what can be done differently to better support the young people within this context.
- d) An important aim of the new JSNA chapter is to help identify unmet SEND needs as part of informing the development of the effective joint commissioning of services between local authorities, the NHS and schools, including more co-production in deploying specialised SEND provision. There is a requirement for further improvements to be made in the quality of preparation for adulthood for children and young people with SEND through the development of an all-age approach, to help develop independence and ensure full access to opportunities. It is also important to work to reduce delays in accessing support in a timely way, including reducing the time taken for EHCP Assessments to be carried out.
- e) Parents and carers of children with SEND needs were consulted as part of the production of the new JSNA chapter, to help understand the lived experience and identify support requirements and skills gaps – particularly in the context of children with multiple and complex needs. Regular engagement takes place with the Notts Parent Carer Forum and surveys are also carried out both with educational settings and directly with the children and young people themselves on their life experiences with SEND.
- f) Most children with special educational needs have these met within mainstream education and receive additional support there. As such, children with special educational needs do not always require a EHCP to be in place for them to receive an effective education. Often, needs do not present until between the ages of 11 and 15 because they may only become apparent when the child moves from primary education to the very different secondary school context, with its multiple classes, teachers and environments. Although it is difficult for national funding to keep up with the local need, the County Council has managed its high needs fund within budget to support children with special educational needs both in mainstream schools and the county's eleven special needs schools, ten of which are rated as either 'good' or 'outstanding' by Ofsted.

- g) The Board considered that it is important for JSNA chapters to be as clear as possible in expressing how effective co-production has been used in their development, and how service improvement has been approached by using the knowledge and lived experience of service users. Members commented that a fully holistic view is required when working with children and young people with SEND needs in the broader context of health inequality, as they may benefit from support across a wide range of areas.
- h) The Board observed that the funding at the national level appears to fall short of the known need. Members considered that it is vital for the right level of investment to be made into families and early years services to ensure that as much 'one stop shop' provision is available as possible, particularly in the areas of greatest deprivation, and noted that it could be beneficial for a report on the roll-out of the Nottinghamshire Family Hubs to be brought to a future meeting of the Board for discussion.

**Resolved (2023/008):**

- 1) To approve the new Joint Strategic Needs Assessment (JSNA) chapter on Special Educational Needs and Disability (SEND).
- 2) To receive an update from the SEND Accountability Board regarding the implementation of the JSNA recommendations, following the publication of the outcomes of the inspection of the County Council's arrangements for children and young people with SEND needs undertaken jointly by the Care Quality Commission and Ofsted during February 2023.

**7. Work Programme**

The Chair presented the Board's current Work Programme.

**Resolved (2023/009):**

- 1) To note the Work Programme.

There being no further business, the Chair closed the meeting at 3:35pm.

**Chair:**