

Health and Wellbeing Board

Wednesday, 15 June 2022 at 14:00

County Hall, West Bridgford, Nottingham, NG2 7QP

AGENDA

- | | | |
|----|--|---------|
| 1 | To note the appointment by Full Council on 12 May 2022 of Councillor Dr John Doddy as Chairman for the 2022-23 Municipal Year. | |
| 2 | Election of Vice Chairman | |
| 3 | Terms of Reference | 3 - 4 |
| 4 | Minutes of the last meeting held on 4 May 2022 | 5 - 12 |
| 5 | Apologies for Absence | |
| 6 | Declarations of Interests by Members and Officers:- (see note below)
(a) Disclosable Pecuniary Interests
(b) Private Interests (pecuniary and non-pecuniary) | |
| 7 | Chair's Report | 13 - 20 |
| 8 | Integration & Innovation Working Together to Improve Health & Social Care for All | 21 - 32 |
| 9 | Notts Joint Strategic Needs Assessment Work Programme 2022-23 | 33 - 40 |
| 10 | Monitoring & Evaluation Joint Health & Wellbeing Strategy 2022 - 2026 | 41 - 48 |

Notes

- (1) Councillors are advised to contact their Research Officer for details of any Group Meetings which are planned for this meeting.
- (2) Members of the public wishing to inspect "Background Papers" referred to in the reports on the agenda or Schedule 12A of the Local Government Act should contact:-

Customer Services Centre 0300 500 80 80

- (3) Persons making a declaration of interest should have regard to the Code of Conduct and the Council's Procedure Rules. Those declaring must indicate the nature of their interest and the reasons for the declaration.

Councillors or Officers requiring clarification on whether to make a declaration of interest are invited to contact Peter Barker (Tel. 0115 977 4416) or a colleague in Democratic Services prior to the meeting.

- (4) Councillors are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.
- (5) This agenda and its associated reports are available to view online via an online calendar - <http://www.nottinghamshire.gov.uk/dms/Meetings.aspx>

15 June 2022**Agenda Item: 3****REPORT OF THE SERVICE DIRECTOR, CUSTOMERS, GOVERNANCE AND
EMPLOYEES****TERMS OF REFERENCE****Purpose of the Report**

1. To be aware of the terms of reference of the Health and Wellbeing Board.

Information and Advice

2. The County Council on 31 March 2022 established the Health and Wellbeing Board with the following terms of reference:
 1. To prepare, publish and maintain a joint strategic needs assessment.
 2. To prepare, publish and maintain a Pharmaceutical Needs Assessment
 3. To prepare and publish a joint health and wellbeing strategy based on the needs identified in the joint strategic needs assessment and to oversee the implementation of the strategy.
 4. Discretion to give Nottinghamshire County Council an opinion on whether the Council is discharging its statutory duty to have due regard to the joint strategic needs assessment and the health and wellbeing strategy.
 5. To promote and encourage integrated working including joint commissioning in order to deliver cost effective services and appropriate choice. This includes providing assistance and advice and other support as appropriate, and joint working with services that impact on wider health determinants.
 6. To discuss all issues considered to be relevant to the overall responsibilities of the Health and Wellbeing Board, and to perform any specific duties allocated by the Department of Health.
 7. The Board will be responsible for its own projects and may establish steering groups to consider projects.

Other Options Considered

4. None.

Reason/s for Recommendation/s

5. To inform the committee of its terms of reference.

Statutory and Policy Implications

6. 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 services), the public sector equality duty, safeguarding of children and adults at risk, 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

That the Terms of Reference of the Health and Wellbeing Board are noted.

Marje Toward

Service Director, Customers, Governance and Employees

For any enquiries about this report please contact:

Pete Barker, Democratic Services Officer
E: peter.barker@nottscg.gov.uk
T: 0115 977 4416

Constitutional Comments

7. Health and Wellbeing Board is the appropriate body to consider the content of the report.

Financial Comments

8. There are no specific financial implications arising directly from this report..

Background Papers and Published Documents

9. Report to Full Council 12 May 2022 (published).

Electoral Division(s) and Member(s) Affected

10. All.

Meeting **HEALTH AND WELLBEING BOARD**

Date **Wednesday, 4 May 2022 (commencing at 2:00 pm)**

Membership

Persons absent are marked with an 'A'

COUNTY COUNCILLORS

John Doddy (Chair)
David Martin
Sheila Place
A Tom Smith
A Nigel Turner

DISTRICT COUNCILLORS

A	David Walters	-	Ashfield District Council
A	Susan Shaw	-	Bassetlaw District Council
A	Colin Tideswell	-	Broxtowe Borough Council
	Henry Wheeler	-	Gedling Borough Council
A	Abby Brennan	-	Rushcliffe Borough Council
A	Neill Mison	-	Newark and Sherwood District Council
	Marion Bradshaw	-	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	David Ainsworth	-	NHS Nottingham and Nottinghamshire Clinical Commissioning Group
A	Lucy Dadge	-	NHS Nottingham and Nottinghamshire Clinical Commissioning Group
A	Idris Griffiths	-	NHS Bassetlaw Clinical Commissioning Group
	Dr Thilan Bartholemeuz	-	NHS Nottingham and Nottinghamshire Clinical Commissioning Group
	Fiona Callaghan	-	NHS Nottingham & Nottinghamshire Clinical Commissioning Group
	Dr Jeremy Griffiths	-	NHS Nottingham and Nottinghamshire Clinical Commissioning Group (Vice-Chair)

LOCAL HEALTHWATCH

Sarah Collis - Healthwatch Nottingham & Nottinghamshire

OFFICE OF THE NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER

Sharon Cadell - Chief Executive, OPCC

OFFICERS IN ATTENDANCE

Sue Foley	-	Consultant in Public Health
Briony Jones	-	Public Health and Commissioning Manager
Laurence Jones	-	Service Director, Commissioning & Resources
Louise Lester	-	Consultant in Public Health
Pete Barker	-	Democratic Services Officer

MINUTES

The minutes of the last meeting held on 23 March 2022, having been circulated to all Members, were taken as read and were confirmed, subject to the following amendment, and were signed by the Chair:-

- Fiona Callaghan from the Nottingham and Nottinghamshire CCG was in attendance at the meeting on 23 March 2022.

APOLOGIES FOR ABSENCE

- Councillor Abby Brennan, Rushcliffe Borough Council
- Councillor Susan Shaw, Bassetlaw District Council
- Councillor Tom Smith, Nottinghamshire County Council
- Councillor Nigel Turner, Nottinghamshire County Council (Councillor Richard Butler deputises)
- Lucy Dadge, Nottingham and Nottinghamshire CCG

DECLARATIONS OF INTEREST BY BOARD MEMBERS AND OFFICERS

None.

CHAIR'S REPORT

The Chair introduced the report and spoke of the problems facing teachers having to deal with pupils starting school who lack basic skills, with the teachers having to parent the children as well as teach them.

The Chair referred to the high number of adolescent girls who do not do enough physical activity and spoke of the many benefits of exercise on people's physical and mental health. The Chairman praised Gedling Borough Council's initiative where eligible residents were given a swimming passport and informed members that studies had shown that the biggest barrier to people accessing facilities was the cost.

The Vice Chair emphasised the link between exercise and good health and spoke of the importance of place-based facilities. The Vice Chair also spoke of entering a new era where people's attention spans are going down at the same time as the use of social media is increasing and knowledge is expanding exponentially. This leads to the scenario where people, especially young people, cannot comprehend the volume of information available and as a result make decisions that are emotionally-based. The Vice Chair suggested that the Board does need to understand the basis on which young people make their decisions. The Chair stated that it was essential that the audience was understood if initiatives were not to fail.

Jonathan Gribbin referred to the wide range of partnership working that was being undertaken by the Authority and that in the past the government approach had been focussed on individual behaviour rather than shaping places. There is now the opportunity to address this.

Councillor Sheila Place spoke of the increasing number of young people suffering poor mental health and the difficulty in locating relevant services. The Chair referred to previous reports to the Board on the subject of teenage mental health which indicated that those with eating disorders were seen quickly but that the isolation stemming from the pandemic had had a significant effect on young people's mental health.

Councillor David Martin stated that many secondary schools have leisure centres that could be used by the public at night and at the weekends but that they had been closed as a result of the pandemic. Academy trusts could be contacted to encourage them to reopen their facilities to the public.

The Chair referred to the problem of alcohol and drugs and spoke about the 'Harm to Hope' strategy and the 10 year, £5.6m investment. Problems have increased because of Covid and there is a need to work closer with the criminal justice system as a result. In the last 2 years there has been an increase in opiate related deaths and accidental overdoses.

Jonathan Gribbin informed members that work was already underway with the Police & Crime Commissioner with the aim of providing consistent support in the City and the County. Mr Gribbin stated that it was welcomed that the monies made available could be spent on alcohol, as well as drug, problems as the greater burden is caused by the former in Nottinghamshire and nationwide.

RESOLVED: 2022/009

That the contents of the report be noted.

THE NOTTINGHAMSHIRE JOINT HEALTH AND WELLBEING STRATEGY FOR 2022-2026

The Chair introduced the report and praised the quality of the recent workshop. The Chair spoke of the importance of devising a strategy at a time when an integrated care service is being developed. The aim is to increase life expectancy in Nottinghamshire.

Briony Jones then delivered a presentation on the strategy and highlighted the following:

- A refresh of the strategy was begun in September 2021. A period of engagement followed from October – January 2022, though this was interrupted by Covid. A draft of the strategy was circulated in March 2022 for comment and approval. From July 2022 the strategy can be implemented.

- Preparations for delivery include developing delivery structures and a monitoring framework as well as reviewing the membership of the Board.
- A Framework for Action will contain details of key proposals, both nationally and locally, which partners can take on board.
- An Aide Memoire will be drafted which is a short handbook summarising the Framework for Action and which will be a useful tool for monitoring purposes.
- Four Programme Groups will be established – one for each ambition.
- A new HWB website will be developed which will promote the work of the Board and increase its visibility. The website will contain details of the strategy and encourage residents to engage in the process.
- Following the Workshop a Task and Finish group was established that will look at the feedback gathered from the Workshop and put forward a monitoring framework for the Board to approve at its June meeting. This will link to the ICS Outcomes Framework and the Nottinghamshire Plan.

The Vice Chair stated that it was important for the strategy to be visible to the public and for it not just to exist in isolation but to be dynamic. There was a need to understand the flows into the system and it was important that blocks to accessing the system were overcome.

In response to the Vice Chair asking how often the Board would be updated with progress on the strategy, Mr Gribbin stated that it would be unusual if there were a meeting where the Board was not updated on some aspect of the strategy. Performance management systems will not be duplicated but a framework will be designed and a timetable drawn up so that the Board can monitor progress alongside place-based partnerships and the district and borough councils.

Sharon Caddell also praised the excellence of the workshop and spoke of the importance of developing system leadership programmes as a way of understanding barriers to access.

The Vice Chair spoke of the need to know that partners in the various sectors are not working separately. The Chair commented that the energy and enthusiasm is there, that people have been waiting to feel part of a whole and that now there was a real opportunity for people to work together.

Dr Thilan Bartholomeuz stated that the timing was perfect and asked how the strategy would link to partners' objectives and how can place-based organisations report back to the Board. The Chair emphasised the importance of the membership of the Board in this context.

RESOLVED: 2022/010

That the Health and Wellbeing Board endorses the proposals for the delivery and monitoring of the new Nottinghamshire Joint Health and Wellbeing Board Strategy for 2022-2026 as outlined in the report.

MEMBERSHIP OF THE HEALTH AND WELLBEING BOARD

The Chair introduced the report which detailed the recommended additional membership to the Board. The Chair informed members that initially the government mandated the membership but that the degree of integration that had occurred since could not have been anticipated. For the Board to be able to implement its strategy the membership must be made up of people who can lead change in their organisations and drive the success of the strategy. There was now the opportunity to deliver the strategy through the membership in a way that had not been available before.

Briony Jones informed members that the statutory membership of the Board was required to change as part of the requirements of the Health and Social Care Bill and the report was requesting approval for the addition of Bassetlaw, Mid-Nottinghamshire and South Nottinghamshire Place Based partnerships to the membership of the Board. The membership of other Boards was examined to arrive at the best structure for Nottinghamshire.

Fiona Callaghan stated that the membership of the Board had always had place representation through locality directors and clinical leads.

Mr Gribbin spoke of the need for the Board to be of a manageable size and that follow up conversations outside the meeting would take place around the make-up of the board membership, including representation from the third sector and NHS England.

The Chair and Mr Gribbin both paid tribute to the dedication and commitment of all Board members who had supported its work in the past.

Sarah Collis spoke of the government-funded work being undertaken by Healthwatch into how the alliance of voluntary sector organisations would interact with the new structure and the Chair asked for the Board to be updated on this work in due course.

RESOLVED: 2022/011

That the addition to the membership of the Health and Wellbeing Board of the Bassetlaw Place Based Partnership, the Mid Nottinghamshire Place Based Partnership and the South Nottinghamshire Place Based partnership be approved.

ANNUAL PROGRESS REPORT - BEST START STRATEGY 2021-2025

Louise Lester introduced the report and delivered a presentation that highlighted the following:

- The fundamental importance of a good start in life to the future health and wellbeing of individuals.
- The Best Start Strategy has 10 ambitions with an action plan for each to be delivered by the relevant subgroup or partnership.
- To date there have been 6 well attended meetings which focus on each of the ambitions in turn.
- Much progress has been made including the establishment of new antenatal parent groups; additional training for midwives and health visitors with pathways to mental health support strengthened; additional resources supplied to parents during lockdown; targeted offers to improve the quality of parent/child relationships; increased engagement in tobacco support with the focus on reducing smoking during pregnancy
- There is more detail in the report, progress has been made but there is still much to do.

The Chair asked about the problem of parents refusing to let their children have the covid vaccination. Ms Lester replied that work is ongoing to establish the reasons for this but in Nottinghamshire the take up has been generally good.

Laurence Jones spoke of the pre-birth period and the importance of convincing people to trust professionals and officials early on. The structure of the family hubs was designed to increase liaison, with a network of professionals based in the hubs, not just a single service being delivered. The plan is to roll this model out across the County.

Dr Bartholomeuz spoke of the primary care challenges – in Nottinghamshire there are 140 practices, all with their own procedures. The PCN footprint needs looking at, members of a family could be registered at 4 practices but only one PCN. The landscape is changing and new ways of working are required.

RESOLVED: 2022/012

1. That the progress made so far in delivering the Best Start Strategy be acknowledged.
2. That the suggested steps for the effective delivery of the Best Start Strategy and improvement of outcomes for children and families be approved.

WORK PROGRAMME

The implications of the new Health and Social Care Bill will be considered at the June meeting.

The Workshop in July will focus on tobacco.

RESOLVED: 2022/013

That the contents of the report be noted.

The meeting closed at 3:39pm

CHAIR

15 June 2022**Agenda Item: 7**

REPORT OF THE CHAIR OF THE HEALTH AND WELLBEING BOARD

CHAIR'S REPORT

Purpose of the Report

1. The report provides an update by the Chair on local and national issues for consideration by Health & Wellbeing Board members to determine implications for the Joint Health and Wellbeing Strategy for 2022 – 2026.

Information

LOCAL

2. A new website has been developed to promote the Nottinghamshire Health and Wellbeing Board and its Joint Health and Wellbeing Strategy. The website will feature information on the board's strategic ambitions and provide updates on progress. It forms part of a wider communications plan to launch the new Joint Health and Wellbeing Strategy for 2022 - 2025. The new website is accessible at www.healthynottinghamshire.gov.uk.

Give Every Child the Best Chance of Maximising their Potential

[The One Youth Project in Bassetlaw](#)

3. Thanks to £22,800 from the Office of the Nottinghamshire Police and Crime Commissioner (OPCC), Mansfield Community Partnership, led by Mansfield District Council, worked with Nottingham-based organisation Switch Up to support 9 to 17-year-olds. The One Youth project will continue until the end of June 2022, providing one-to-one mentoring, tailored to each individual's needs and most also received boxing tuition. The aim of this unique combination of activities was to improve the young people's physical and mental health, steer them away from crime and antisocial behaviour into more positive activities and move towards education, employment or training.

Create Healthy and Sustainable Places

[Clean Air Day on 16 June 2022](#)

4. The theme of Clean Air Day this year is 'Air Pollution dirties every organ in your body'. In its sixth year, Clean Air Day helps to drive a positive shift in public knowledge and action; is a chance to find out more about air pollution, share information, and make the air cleaner and healthier for everyone. Air pollution can harm every organ in the body and shorten lives, contribute towards chronic illness and put people more at risk from COVID-19. When polluted

air is breathed, it can inflame the lining of the lungs and move into our bloodstream, affecting every organ in the body. This can lead to lung disease, heart disease, dementia and strokes.

[Bassetlaw District Council helps homes be 'Four Seasons' Ready](#)

5. Bassetlaw District Council and Four Seasons Energy are bringing energy efficiency improvements to eligible homes in Bassetlaw, to ensure that they are equipped to be comfortable all year round. Four Seasons Energy is pleased to offer eligible residents' installation of cavity wall and loft insulation, as part of the 'Energy Company Obligation (ECO): Help to Heat Flexible Eligibility Scheme'. This Government scheme aims to help households cut their energy bills and reduce carbon emissions through the installation of energy saving measures.

[Healthy, cost-effective travel as walking and cycling projects get the green light](#)

6. On 14 May 2022, national government announced £200 million of funding for new walking and cycling schemes. The government's new executive agency Active Travel England will oversee the delivery of 134 projects which include new footways, cycle lanes and pedestrian crossings. As part of this, 19 authorities – including in Nottinghamshire – will also receive a share of £1.5 million for “mini-Holland” feasibility studies, to assess how the areas could be as pedestrian and cycle-friendly as their Dutch city equivalents. Within Nottinghamshire, £79,000 of funding has been allocated to explore a potential Mini-Holland scheme in Stapleford. The Council will work with the local community to identify the potential infrastructure improvements, before submitting the plans back to the Government for a further competitive process before it is given the green light to progress.

[Food Projects in Rushcliffe](#)

7. Supported by Rushcliffe Borough Council, the Ruddington Pantry recently began their Coop Community Fridge project, redistributing food from the Coop and local businesses/allotments to local Rushcliffe residents twice per week. The food is free to residents and in April 230kg of food was redistributed to families, supporting 103 households and 346 people.

Everyone can access the right support to improve their health

[Pharmaceutical Needs Assessment: Supplementary Statement](#)

8. As approved by the Health and Wellbeing Board on 6 January 2021, supplementary statements produced quarterly, are shared with the Health and Wellbeing Board in the form of an update in the Chairs Report. The Supplementary Statement for the last quarter, summarising changes to pharmaceutical services from January 2022 to March 2022 is available on [Nottinghamshire Insight](#). There were no significant changes in Nottinghamshire pharmaceutical services to report within this quarter.

[GP Surgery provides extra face to face appointments](#)

9. A GP branch surgery in Mansfield expanded its services to ease winter pressures in one of the country's most deprived areas. The Oak Tree Lane Surgery provided an average 250 extra face to face appointments with GPs and health professionals each week – 3,000 more since the launch of the Government's Winter Access Fund Scheme.

[Bassetlaw Partners supporting local third sector groups](#)

10. Bassetlaw Clinical Commissioning Group has awarded £35,000 to Oasis Community Church, Centre and Gardens. The centre works on the estate area of Kilton in Worksop and offers social and community events. IT hosts projects such as a drop in café for men who are lonely or in crisis, another project with social prescribers offering mental health support and a café for dementia and Alzheimer's and carers. The CCG has also announced a series of grants to other local groups including: APTCOO, Aurora, Bassetlaw Action Centre, Barnsley Premier Leisure, Citizen's Advice Bureau, Children's Bereavement Centre, MIND, FREED Beeches, Royal Voluntary Society, The Sleep Charity, Talkzone and Harmless.

[Women's social and support group receives vital Reach Rushcliffe funding.](#)

11. A social and support group that organises meetups for women who are widowed or live alone and are at risk of social isolation and loneliness have received vital funding from Reach Rushcliffe to continue their meetings. The 'Places of Welcome' group have received the funds from Rushcliffe Borough Council's project that will assist with the cost of hiring venues, purchasing equipment to help attendees stay in touch digitally and promotion to encourage more to attend.

[Projects in Rushcliffe supporting better mental health](#)

12. Following receiving funding from Nottinghamshire County Council via the Social Recovery Fund, the Rushcliffe Social Prescribing team in partnership with Rushcliffe Borough Council will be beginning their series of monthly activities to support younger adults with their mental health. Each month a group of patients will take part in an activity designed to connect them with others and to provide them with a pathway for them to continue taking part in that particular activity. The first four events are set to begin in June, and include Shelter building at Rushcliffe Country Park, a mindfulness open water dip at Colwick Country Park, an 'allotmenteeing' masterclass session at Paradise Allotments in Ruddington, and a nature-based arts and craft session at FarmEco.
13. Two projects designed to target loneliness and isolation have also recently received Reach Rushcliffe funding. These include Ruddington Pantry who will be continuing their coffee club enabling residents to meet and connect with others each week, and Heat & Eat, a project offering a hot meal and a warm social space in which to meet others once a fortnight, bringing together people from Rushcliffe.

[Nottinghamshire to receive £5.6m investment for Drug Strategy](#)

14. Nottinghamshire is set to receive a £5.6m funding boost over the next three years to implement the government's [10 year Drugs Strategy: From Harm to Hope](#) and procure inpatient detoxification beds. As part of the Strategy, upper tier local authorities are required to provide additional detoxification places and increase the number and quality of places within substance misuse treatment services for young people, adults, children affected by parent substance misuse and those who are in the criminal justice system.
15. The County Council is currently working alongside its All Age Treatment and Recovery Service, Change Grow Live (CGL), and other partners to determine the level of services that will be

required in Nottinghamshire. Estimates indicate that at least 172,725 Nottinghamshire residents could benefit from a substance misuse intervention. Locally, there are around 4,436 people who are dependent on opiates and/or crack with 131,011 adults drinking at harmful levels and around 21,632 who are alcohol- dependent. Alcohol represents the greatest need.

16. In addition to the new funding, Nottinghamshire County Council already invests £8.9m a year in its All Age Treatment and Recovery Service. CGL have approximately 4,500 people in treatment at any one time, 20% of which successfully leave the service drug and or alcohol free, which is in line with the national average and local authority neighbours. These people report improvements in mental wellbeing, employment opportunities, improved housing situations and overall quality of life (2020/2021 data).

Keep Our Communities Safe and Healthy

Newark and Sherwood achieves greatest reduction in Crime Rate

17. A recent performance report has shown crime in Newark and Sherwood has reduced by 15% during 2021 and 2022, which is the greatest reduction rate across Nottinghamshire. The report, prepared by Bassetlaw, Newark and Sherwood Community Safety Partnership (BNSCSP), detailed the key crimes where rates have decreased including burglary by 41%, robbery by 62% and theft down by 26%. The District Council has implemented a number of initiatives to combat crime including partnership working with local agencies as part of the Newark Safer Streets project.

NATIONAL

Mental Health

Increased mental health support for children and young people

18. Thousands of young people will benefit from additional mental health support in their schools, colleges and universities. To mark Mental Health Awareness Week in May, the Department for Education announced a further £7 million for schools and colleges to train a senior mental health lead, bringing the total amount of funding for 2022/23 to £10 million.
19. Within Nottinghamshire schools are being encouraged to apply for this training, as part of the whole school approaches to mental health being promoted by the new Nott Alone Consortium. This would be in addition to the ongoing work of the Local Transformation Plan for Children and Young People's Emotional and Mental Health that includes funding eight Mental Health Support Teams covering all localities and supporting approximately 150 schools in Nottinghamshire until 2024/25.

Food Insecurity & Nutrition

Over 7m adults deemed food-insecure

20. The latest survey of the nation's food intake shows over 2m adults in the UK have gone without food for a whole day over the past month due to the "catastrophic" impact of the cost-of-living crisis. Research by the Food Foundation thinktank found a 57% jump in the proportion of households cutting back on food or skipping meals over the first three months of this year. This

means one in seven adults (7.3m) are now estimated to be food-insecure, up from 4.7m in January.

[Restrictions on multibuy deals and advertising foods high in fat, salt or sugar to be delayed for a year.](#)

21. Restrictions will be delayed in light of the global economic situation and in order to give industry more time to prepare for the restrictions on advertising. Rules banning multibuy deals on foods and drinks high in fat, salt, or sugar (HFSS) – including buy one get one free (BOGOF), ‘3 for 2’, and restrictions on free refills for soft drinks – will be delayed for a year. The restrictions banning HFSS adverts on TV before 9pm and paid-for adverts online will also be paused for a year, meaning they come into force January 2024.
22. Tesco and Sainsburys have indicated that they will continue to implement these restrictions despite the delay. Restrictions on the placement of less healthy products, a key part of the government’s commitment to reduce obesity, will still come into force in October 2022 as planned. This will mean less healthy products are no longer promoted in key locations, such as checkouts, store entrances, aisle ends and their online equivalents.

[New calorie labelling rules to improve people’s health](#)

23. New rules requiring calorie information to be displayed on menus and food labels came into force on 6 April 2022. It is now a legal requirement for large businesses with more than 250 employees, including cafes, restaurants and takeaways, to display calorie information of non-prepacked food and soft drinks. The government is also encouraging smaller businesses to adopt calorie labelling as part of its drive to improve the nation’s health and tackle obesity levels. Calorie information will need to be displayed on menus, online menus, third party apps, food delivery platforms and food labels at the point a customer is making their food and drink choices. As well as listing the calories for each food item, menus and labels will also need to include daily recommended calorie needs.
24. The legislation, which forms part of the government’s strategy to tackle obesity, aims to ensure people can make more informed, healthier choices when it comes to eating food out or ordering takeaways. It is estimated that overweight and obesity related conditions across the UK cost the NHS £6.1 billion each year. Almost two-thirds (63%) of adults in England are overweight or living with obesity and 40% of children leave primary school overweight or obese. Obesity is also the second biggest cause of preventable cancer across the UK.

Healthy Weight

[WHO European regional obesity report 2022](#)

25. Overweight and obesity affect almost 60 per cent of adults and nearly one in three children in the WHO European Region. Recent estimates suggest that overweight and obesity is the fourth most common risk factor for noncommunicable diseases in the Region, after high blood pressure, dietary risks and tobacco. This report examines the growing challenge and impact of obesity in the Region and focuses on managing obesity throughout the life course and tackling obesogenic environments. It also considers more recent challenges, including problematic digital marketing to children and the impact of the Covid-19 pandemic on obesity prevalence.

[A new WHO tool to empower organized sports clubs to promote health.](#)

26. There are many opportunities for sports clubs to contribute to overall health improvements in the community that have not yet fully been harnessed. WHO's new Health-Promoting Sports Clubs – National Audit Tool will help to develop this potential while increasing physical activity levels, improving health literacy and promoting healthier choices.

Tobacco

[Smoking and social housing: supporting residents, addressing inequalities](#)

27. This report is a collaboration between Action on Smoking and Health (ASH) and the Housing Learning and Improvement Network (LIN). It outlines the case for reducing rates of smoking in the social housing sector as part of social landlords' health and wellbeing activities and the action needed to achieve this.

Alcohol

[Addressing alcohol consumption and socioeconomic inequalities: how a health promotion approach can help.](#)

28. Alcohol consumption accounts for about 5% of the global burden of diseases but is unequally distributed across socioeconomic groups. Socioeconomic status has repeatedly been associated with an elevated risk of mortality. For alcohol consumption, the inequalities in morbidity and mortality are especially stark. Nevertheless, substantial evidence indicates that alcohol control policies can play an essential role in reducing socioeconomic disparities.

Health Inequalities

[The State of Ageing 2022](#)

29. This report published by the Centre for Ageing Better, captures a snapshot of how people in the UK are ageing today. It has five chapters: health, homes, work, communities and a chapter setting out the context in which we are ageing. The report suggests that England is becoming an increasingly challenging country to grow old in, with rising pensioner poverty and poor health.

[Grant fund launched to support women's reproductive wellbeing at work](#)

30. Women experiencing the menopause, fertility problems, miscarriage and pregnancy loss, menstrual health and gynaecological conditions in the workplace will be supported to remain in or return to the workplace by a multi-million pound funding boost to voluntary, community and social enterprise (VCSE) organisations. National government has announced new fund to level up health disparities and recognise the need to better support women's health in the workplace. Grants of between £200,000 to £600,000 per applicant will be available over the next three years to expand and develop projects or programmes in these areas. It aims to build on the [Women's Health Vision](#) to help women in the workplace to reach their full potential to ensure women feel supported in the workplace, taboos are broken down through open conversation and employers feel well equipped to support women in managing their health within the workplace.

Papers to other local committees

31. [Modern Slavery and Human Trafficking](#)
Communities Committee
20 April 2022
32. [Tackling Emerging Threats to Children](#)
Children and Young People Committee
25 April 2022
33. [Day Opportunities Strategy 2022 – 2027](#)
Adult Social Care and Public Health
25 April 2022
34. [Substance Misuse – 10 Year Drug Strategy](#)
Adult Social Care and Public Health
25 April 2022
35. [Living Safely with Covid-19 in Nottinghamshire](#)
Adult Social Care and Public Health
25 April 2022

Integrated Care Systems / Integrated Care Partnerships

36. [Board papers](#)
Nottingham & Nottinghamshire Integrated Care System
5 May 2022

Other Options Considered

37. None

Reasons for Recommendation

38. To identify potential opportunities to improve health and wellbeing in Nottinghamshire.

Statutory and Policy Implications

39. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public-sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

40. There are no financial implications arising from this report.

RECOMMENDATION

The Health and Wellbeing Board is asked-

- 1) To consider the update, determine implications for the Joint Health and Wellbeing Strategy 2022 – 2026 and consider whether there are any actions required by the Health & Wellbeing Board in relation to the various issues outlined.

Councillor Dr John Doddy
Chairman of the Health & Wellbeing Board
Nottinghamshire County Council

For any enquiries about this report please contact:

Briony Jones
Public Health & Commissioning Manager
T: 0115 8042766
E: Briony.Jones@nottscc.gov.uk

Constitutional Comments (LW 23/05/2022)

41. The Health & Wellbeing Board is the appropriate body to consider the content of the report.

Financial Comments (DG 24/05/2022)

42. There are no direct financial implications arising from this report.

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

15 June 2022**Agenda Item: 8****REPORT OF THE CORPORATE DIRECTOR OF ADULT SOCIAL CARE AND
PUBLIC HEALTH AND CHIEF COMMISSIONING OFFICER OF NOTTINGHAM
AND NOTTINGHAMSHIRE CLINICAL COMMISSIONING GROUP****INTEGRATION AND INNOVATION: WORKING TOGETHER TO IMPROVE
HEALTH AND SOCIAL CARE FOR ALL****Purpose of the Report**

1. To consider the implications of the Health and Social Care Act 2022 for the Nottinghamshire Health and Wellbeing Board and the wider health system in Nottinghamshire.

Information**Statutory Context**

2. On 6 July 2021, a white paper 'Integration and Innovation: working together to improve health and social care for all', proposed a new health and care bill to encourage integration and collaboration across the health and care system. The bill intended to strengthen action on reducing health inequalities, which are growing across England and exacerbated by the covid-19 pandemic.
3. Improvements in life expectancy in England have slowed more than in any other European country since 2010, and the gap in the number of years people can expect to live in good health has widened between different communities. Similar to the average for England, in Nottinghamshire the average length of life in which people enjoy good health (healthy life expectancy) is 62 years for women and 63 years for men. These averages obscures stark variations, with residents living in the least advantaged areas spending an additional 14 years in ill-health and dying 7.5 years earlier compared to those living in the most advantaged areas of the County.
4. The bill planned to address this via a set of changes to NHS rules and structures in England, to promote greater collaboration in the health system and action on reducing health inequalities. The health and care bill was ratified and received royal assent on 28 April 2022, with the new Health and Care Act 2022 coming into effect from 1 July 2022.
5. The key measures of the Health and Care Act 2022 are outlined in **Appendix 1**, with this report outlining the implications for the Nottinghamshire Health and Wellbeing Board.

Implications for the Nottinghamshire Health and Wellbeing Board

6. Health & Wellbeing Boards were established under the [Health and Social Care Act 2012](#) with the duties to:
 - a. To improve the health and wellbeing of the people of Nottinghamshire
 - b. To reduce health inequalities
 - c. To promote the integration of services and integrated working
 - d. To produce a Joint Strategic Needs Assessment (JSNA), identifying current and future health needs
 - e. To develop a health and wellbeing strategy which addresses the health needs identified in the Joint Strategic Needs Assessment.
7. The new legislation does not change the role or duties of Health and Wellbeing Board, nor does it change local authority structures or commissioning arrangements.
8. It does require the establishment of an Integrated Care Board (ICB) and Integrated Care Partnership (ICP), as part of the Integrated Care System (ICS). Integrated Care systems are partnerships of health and care organisations that plan and deliver joined up services and have 4 main duties to:
 - a. Improve outcomes in population health and healthcare
 - b. Tackle inequalities in outcomes, experience and access
 - c. Enhance productivity and value for money
 - d. Help NHS support broader social and economic development
9. Nottingham and Nottinghamshire Integrated Care System had been previously established, but will now be led by an NHS Integrated Care Board, an organisation with responsibility for NHS functions and budgets, and an Integrated Care Partnership, a statutory committee that brings together all system partners to produce a health and care strategy to meet wider health and care needs (please see **Appendix 2**).
10. The act also introduces the district of Bassetlaw to the Nottingham and Nottinghamshire ICS boundary in July 2022 (Bassetlaw had previously been served by the South Yorkshire and Bassetlaw ICS). The inclusion of Bassetlaw in the ICS boundary will develop stronger connections between Nottinghamshire County Council and the NHS in the planning of health and care services for people in Bassetlaw. Residents can be assured that they will continue to access primary and secondary care services local to their populations, and also benefit from opportunities for further integration; by delegation of functions previously undertaken by NHSE, in a way that compliments local patterns of service provision (e.g. pharmacy, optometry, dentistry, screening and immunisations).

Addition of The NHS Integrated Care Board to the Membership of the Nottinghamshire Health and Wellbeing Board

11. From 1 July 2022, there will be a statutory requirement for a representative of the NHS Integrated Care Board for Nottinghamshire to become a member of the Health and Wellbeing

Board.¹ The NHS Integrated Care Board will inherit the statutory duties previously held by the Clinical Commissioning Groups that include membership to the Health and Wellbeing Board, and the preparation and publication of the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy.

12. In addition, the Health and Social Act 2022 mandates that the NHS Integrated Care Board has a duty to promote integration and reduce health inequalities and must also work and consult with the Nottinghamshire Health and Wellbeing Board in a number of key ways:
- a. **Joint Forward Plan** – It must involve the Health and Wellbeing Board in preparing or revising the plan and consult the Board on whether the draft takes proper account of the joint local health and wellbeing strategy.
 - b. **Joint Capital Resource Use Plan** - Before the start of each financial year, it must prepare a plan setting out their planned capital resource use and share a copy with the Health and Wellbeing Board.
 - c. **Annual Report** - An integrated care board must, in each financial year, prepare a report on how it has discharged its functions in the previous financial year. It must in particular review any steps that the board has taken to implement the joint local health and wellbeing strategy to which it was required to have regard. In undertaking the review, the integrated care board must consult the Health and Wellbeing Board.
 - d. **Performance Assessment of Integrated Care Board** - NHS England must conduct a performance assessment of each integrated care board in respect of each financial year, on how well the integrated care board has discharged its functions during that year. In conducting a performance assessment, NHS England must consult the Health and Wellbeing Board as to its views on any steps that the board has taken to implement the joint local health and wellbeing strategy.

Relationship of the Integrated Care Partnership with the Nottinghamshire Health and Wellbeing Board

13. The ICP will be established by Nottingham City Council, Nottinghamshire County Council and the Nottingham and Nottinghamshire NHS ICB. It will take the form of a joint committee between these three statutory bodies. It is for these organisations to determine wider membership and this may change overtime as the ICP matures and to take account of the areas of priority focus.
14. The ICP will facilitate joint action to improve and integrate health and care services, influence the wider determinants of health, and target collective action and resources at the areas which will have the greatest impact on health inequalities. The ICP will complement the work of the Health and Wellbeing Board, providing an opportunity to strengthen overall alignment of the ICS with the City and County Health and Wellbeing Boards.
15. For example the ICP will produce an integrated care strategy based on evidence from local assessments of needs and assets identified at place level, as well as the Joint Strategic Needs Assessments (JSNAs) developed by the Health and Wellbeing Boards. The ICP will play a role in bringing together the JSNAs, population health management and citizen insights, and

¹ From 1 July 2022, Membership and the statutory responsibilities of Clinical Commissioning Groups to the Health and Wellbeing Board will be replaced by the Integrated Care Board as part of the [Health and Care Act](#) and will t(amendments 183 & 184 to the Health and Social Care Act, p.186)

synthesising both the City and County Joint Health and Wellbeing Strategies into a Nottingham and Nottinghamshire integrated care strategy. The ICB will then pay due regard to this integrated care strategy in commissioning services including from Providers Collaboratives, Place Based Partnerships and Primary Care Networks in the future.

16. The expectation is for the integrated care partnership strategy to be focused on improving health and care outcomes, reducing inequalities and addressing the consequences of the pandemic for communities. The ICP will champion inclusion and transparency and will challenge all partners to demonstrate progress in reducing inequalities and improving outcomes. It should support place and neighbourhood level engagement, ensuring the system is connected to the needs of every community it includes.
17. The existing Integrated Care System Board has agreed a set of Members which includes representatives from each of the three Statutory Partners (NHS ICB, Nottinghamshire County Council, Nottingham City Council), but also Membership from each of the four Place Based Partnerships (Bassetlaw, Mid Notts, City and South Notts PBP) and Healthwatch.

Addition of Place Based Partnerships to the Membership of Nottinghamshire Health and Wellbeing Board

18. Place Based Partnerships (PBPs) will bring together statutory and voluntary organisations to serve a local population, delivering locally determined objectives and priorities linked to specific population requirements. There will be a Bassetlaw Place Based Partnership, Mid Nottinghamshire Place Based Partnership, South Nottinghamshire Place Based Partnership and a Nottingham City Place Based Partnership. Each PBP will be responsible for developing community facing integrated care, joining up community services across sectors and tailoring care for local needs.
19. The PBPs will also deliver some specific delegated ICB functions and support the local delivery of ICS and HWB priorities. PBPs will work closely with the City and County Health and Wellbeing Boards, with its own delivery plans based on the JSNAs and the Joint Health and Wellbeing Strategies, alongside the Integrated Care Partnership Strategy for the system as a whole.
20. In approving the new Joint Health and Wellbeing Strategy for 2022 – 2026, the importance of integrated and place based working was highlighted as vital for the effective delivery of the strategy. At its May 2022 meeting, the Nottinghamshire Health and Wellbeing Board agreed to include Bassetlaw, Mid Nottinghamshire and South Nottinghamshire Place Based Partnerships to its membership. This is not mandated by the new legislation, but a proposal that all viewed would benefit the delivery of the new Joint Health and Wellbeing Strategy and support greater partnership and integrated working in Nottinghamshire.

Conclusion

21. The changes outlined in the new legislation will come into effect from 1 July onwards. Work has been undertaken in the months prior to this to establish these new structures in shadow form and understand the implications for service delivery from July onwards.
22. The delivery structures for the new joint health and wellbeing strategy will take into account the changes to the local health and care system, with the Health and Wellbeing Board

continuing to play a key role in promoting integrated working, reducing health inequalities and improving health and wellbeing of residents living and working in Nottinghamshire.

Other Options Considered

23. There was an option to not update the Health and Wellbeing Board on the implications of the Health and Care Act 2022. This was discounted as the contents of the report support the Board's statutory duty to improve the health and wellbeing of residents in Nottinghamshire and reduce health inequalities.

Reason/s for Recommendation/s

24. Health & Wellbeing Boards were established under the Health and Social Care Act 2012 with a responsibility for the reduction of health inequalities and improvement of health outcomes for residents in Nottinghamshire. This aligns with the aims of the Integrated Care System and as such there will be shared priorities across strategies and structures.

Statutory and Policy Implications

25. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

26. There are no direct financial implications arising from this report.

RECOMMENDATION/S

The Health and Wellbeing Board is asked:

1) To consider whether there are any actions required by the Health & Wellbeing Board in relation to the various issues outlined in the report.

Melanie Brooks

**Corporate Director of Adult Social Care and Public Health
Nottinghamshire County Council**

Lucy Dadge

**Chief Commissioning Officer
Nottingham and Nottinghamshire Clinical Commissioning Group**

For any enquiries about this report please contact:

Briony Jones

Public Health and Commissioning Manager
Nottinghamshire County Council
E: briony.jones@nottscc.gov.uk

Constitutional Comments (LW 24.05.2022)

27. The Health and Wellbeing Board is the appropriate body to consider the content of the report.

Financial Comments (DG 24.05.2022)

28. There are no direct financial implications arising from this report.

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

APPENDIX 1. Summary on Health and Care Act 2022
(National Government, '[Health and Care Bill granted Royal Assent in milestone for healthcare recovery and reform](#)', 28 April 2022)

The act introduces measures to tackle the COVID-19 backlogs and rebuild health and social care services from the pandemic, backed by £36 billion over the next 3 years through the [Health and Care Levy](#). It will also contain measures to tackle health disparities and create safer, more joined-up services that will put the health and care system on a more sustainable footing.

The Health and Care Act builds on the proposals for legislative change set out by NHS England in its [Long Term Plan](#), while also incorporating valuable lessons learnt from the pandemic to benefit both staff and patients. It marks an important step in the government's ambitious health and care agenda, setting up systems and structures to reform how health and adult social care work together, tackle long waiting lists built up during the pandemic, and address some of the long-term challenges faced by the country including a growing and ageing population, chronic conditions and inequalities in health outcomes.

The [health and social care integration white paper](#) published in February will build on the act to ensure people receive the right care for them in the right place at the right time. It follows the [People at the Heart of Care white paper](#) which set out a 10 year vision for social care funded through the Health and Care Levy, and the COVID-19 Backlog Recovery Plan outlining NHS targets to tackle waiting lists. Dedicated plans to tackle health disparities are set to be published in due course.

The act also introduces measures that will:

- level-up health disparities in oral health and obesity through making it simpler to fluoride to water in more areas across England, and regulating unhealthy food and drink advertising
- make services safer by establishing the Health Services Safety Investigations Body, an independent public body which will investigate incidents that have implications for patient safety and help improve systems and practices
- crack down on the use of goods and services in the NHS tainted by modern slavery and human trafficking with a view to ensuring that the NHS is not buying or using goods or services produced by or involving any kind of slave labour
- ensure our health and social care workforce have the right skills and knowledge to provide informed care to autistic people and people with a learning disability by making specialised training mandatory by law
- support victims of abuse and respond to recent child safeguarding tragedies by committing to looking at information sharing in relation to the safeguarding of children, and requiring Integrated Care Boards to set out any proposed steps to address the particular needs of victims of abuse
- safeguarding women and girls by banning the harmful practices of virginity testing and hymenoplasty
- introduce regulation of non-surgical cosmetic procedures and improve the way we regulate medical professions

- address the barriers to joined-up working, by supporting data sharing between health and social care and removing barriers in the hospital discharge process, reducing unnecessary delays for patients
- remove needless bureaucracy in the system, allowing staff to get on with their jobs providing the best possible treatment and care for their local populations. It also ensures that the NHS is fully accountable to parliament and the public, while maintaining the NHS's clinical and day-to-day operational independence
- explicitly set out the parity of mental health and physical health and ensure transparency around the spending allocated to mental health support
- support the government's ambitious adult social care reforms, by creating the right framework for assuring, funding and sharing data on social care, to enable individuals to maintain their independence for longer

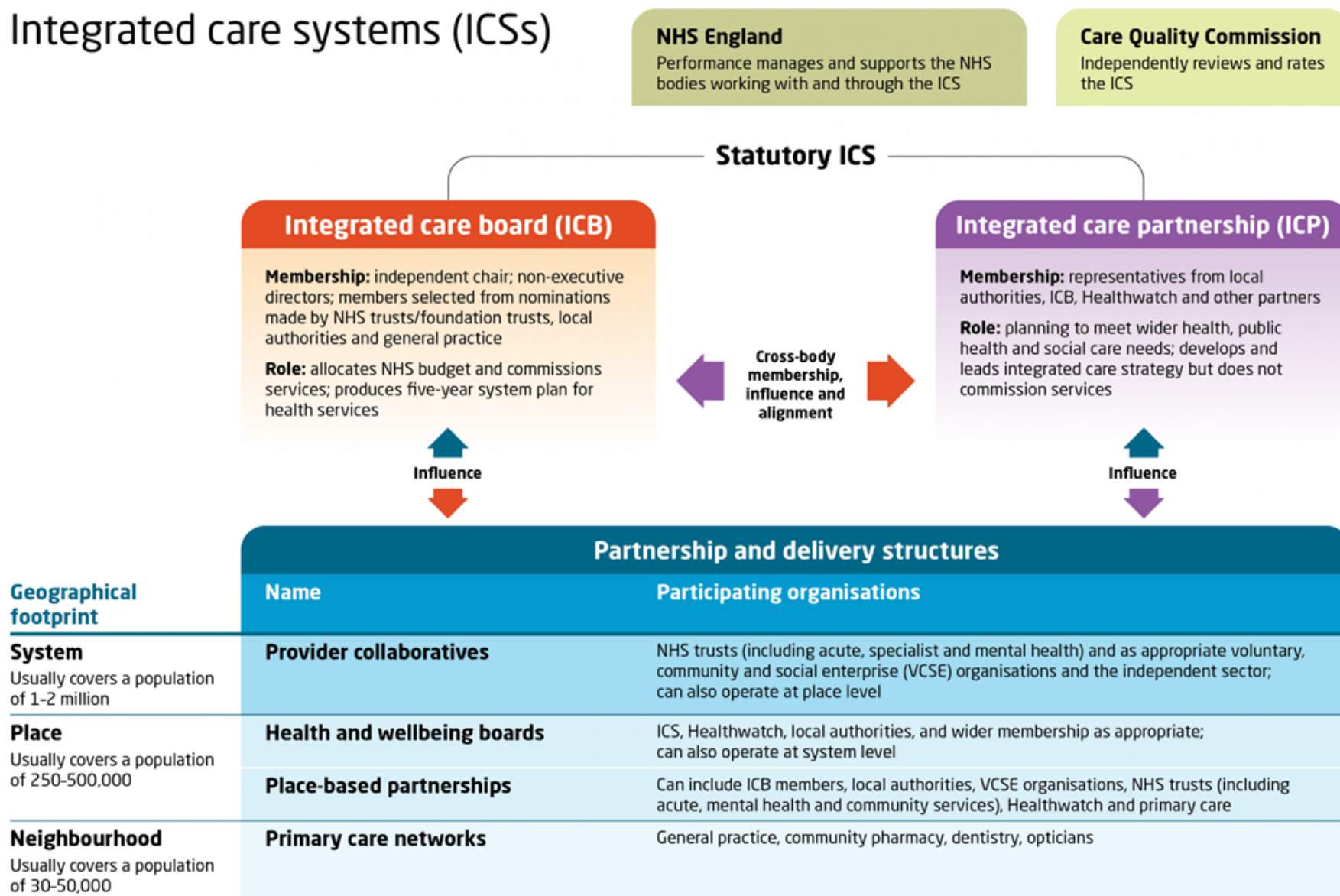
Kathy McLean, integrated care board (ICB) Chair Designate Nottinghamshire said:

'The Health and Care Bill is a key moment for health and social care services across the country. In Nottingham and Nottinghamshire we are proud to be part of one of the biggest and most exciting changes the NHS has seen in recent times that firmly puts collaboration at the heart of delivering joined up care.'

We welcome the bill which supports our focus to tackle health inequalities and ensure better ways for people to access health and care services. By building on lessons learnt during the pandemic we will support our staff to make the impactful changes needed set out in the Long Term Plan. This bill ensures we can work together as a system to rebuild from the pandemic and tackle backlogs all while supporting each other for the benefit of our public.'

APPENDIX 2. Structure of Integrated Care Systems (The Kings Fund)

Integrated care systems (ICSs)



REPORT OF THE DIRECTOR OF PUBLIC HEALTH

NOTTINGHAMSHIRE JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) WORK PROGRAMME 2022-2023

Purpose of the Report

1. To seek approval of the 2022/23 JSNA work programme and proposed products, developed through the JSNA prioritisation process.

Information

Background

2. The JSNA is a statutory responsibility of the Health and Wellbeing Board, including its development, application, access and use by wider partners. It is the process of assessing the current and future health and wellbeing needs of people in Nottinghamshire, and the evidence base about what works to address these needs. The JSNA for Nottinghamshire County currently comprises 38 topic chapters and other supporting information which is published on [Nottinghamshire Insight](#).
3. Nottinghamshire's first JSNA was published in 2008. The Health & Social Care Act 2013, the emergence of the Nottingham and Nottinghamshire Integrated Care System (which is soon to welcome Bassetlaw Place Based Partnership into their scope), and other changes to local NHS commissioning represent important changes to the context in which the JSNA is used. The JSNA process needs to adapt to properly address these arrangements.
4. Historically, the Nottinghamshire Health and Wellbeing Board has secured insufficiently clear and timely steer from partners about topics of joint interest and strategic importance. In order to develop the JSNA work programme it was agreed that an annual prioritisation would take place, overseen by the JSNA Steering Group. The Health and Wellbeing Board were invited to support the development of this more senior and strategic steer through proposing JSNA chapters that reflect emerging issues of joint interest and strategic importance across Nottinghamshire. The deadline for topic submissions into the prioritisation was the 28th February 2022.
5. Alongside the Health and Wellbeing Board, other key partners that were directly consulted with and encouraged to submit appropriate topic suggestions were the NHS Nottingham and

Nottinghamshire Clinical Commissioning Group (CCG), Bassetlaw CCG, Nottinghamshire County Council's Adult Social Care, Public Health, Children's and Place departments and Healthwatch.

Outcomes from the prioritisation process to determine the 2022/23 JSNA work programme

6. A total of nine formal topic submissions were received. The prioritisation matrix, previously shared with the Health and Wellbeing Board in February 2022, was used to formally assess these topic proposals based upon various factors such as upcoming commissioning intentions, changes in national strategies, emerging issues, local priorities and areas of increasing need. All submissions were scored and ranked initially by Public Health and CCG colleagues, and subsequently reviewed by the JSNA Steering Group in April 2022 to ensure a thorough approach to scoring.
7. Topic suggestions submitted highlighted important areas with substantial impacts on health and wellbeing. However, it was agreed that full JSNA chapters as they currently exist in Nottinghamshire were not the most appropriate product for all topics. In order to achieve maximum effectiveness, there is a need to ensure JSNA chapters do not replicate existing work already happening within Nottinghamshire and that resources are allocated to producing JSNA chapters that will have the greatest impact within the system (e.g. directly informing an upcoming commissioning review). Discussions took place around what products could be developed where a full JSNA chapter is not deemed to be the most appropriate product at the current time, but where greater insight and understanding into that topic area would be beneficial. The JSNA Steering Group proposes that different products are produced depending on the required need and we trial the effectiveness of this approach.
8. Below is the work programme, summarising the topic areas in order of priority determined through the scoring process and the proposed products for each. Most of the topics prioritised align with priorities identified within the [Nottinghamshire County Council's The Nottinghamshire Plan 2021-31](#), [the Nottingham and Nottinghamshire Integrated Care System's \(ICS\) Health Inequalities Strategy](#) and the [Nottinghamshire Joint Health and Wellbeing Strategy \(JHWS\) 2022-2026](#).

Topic	Submitted on behalf of	Rationale	Proposed JSNA Product
Demography (The People of Nottinghamshire)	Public Health, Nottinghamshire County Council	This continues to be our most downloaded JSNA. The update will incorporate the 2021 census data which will be helpful for a range of partners and support any local commissioning reviews.	Full JSNA chapter + summary of key points document. This will be a phased approach with sections of the chapter updated as data becomes available.
Substance Misuse	Public Health, Nottinghamshire County Council	Requirement for a JSNA to support implementation of the Harm to Hope national	Full JSNA chapter.

		strategy and upcoming commissioning.	
Housing	Mansfield District Council	Topic of joint interest and strategic importance with significant health and social care implications for our population.	Given the cross-cutting nature of this agenda we need to avoid replicating existing work so plan to conduct an initial scoping exercise to determine gaps in knowledge and consider what (if any) JSNA product could be beneficial.
Health Impacts of Climate Change for Nottinghamshire	Public Health, Nottinghamshire County Council	Topic of increasing importance and prioritisation for a range of partners with impacts on the entire population. Could provide a valuable context and foundation for broader partnership work.	Due to this not aligning with the current JSNA template and uncertainty around what data and information will be available locally a short rapid review of likely health impacts of climate change is proposed.
Diet & Nutrition	Public Health, Nottinghamshire County Council	Healthy weight, food insecurity & nutrition are priorities within several key strategies across the local system and illustrated by the development and endorsement of a local food charter. Greater consideration is required around the food system and food poverty.	JSNA profile pack – this will be a trial of a new JSNA product which will cover very similar content as our existing chapters, but a shorter succinct summary presented in a more visual format.
Physical Activity	Public Health, Nottinghamshire County Council	A priority area for a range of partners with inequalities evident but with local insight already available or underway.	Update the Nottinghamshire insight theme page.

Nottinghamshire COVID impact assessment work: Health and Wellbeing and Inequalities

9. Work is underway to assess the impact of the COVID-19 pandemic on key aspects of health and wellbeing with particular regard to health inequalities. It is hoped this will help to inform public health and partner's strategies, plans and commissioning. A phased approach to this

work has been undertaken with eight phases, each focusing on a particular area. These are as follows:

- a) Direct Impact of COVID
- b) Domestic Violence
- c) Mental Health and Wellbeing - including social isolation and loneliness
- d) Behavioural risk factors
- e) Life Expectancy and Healthy Life Expectancy
- f) Pregnancy and childbirth- including Early Years
- g) Social determinants of health
- h) Healthy and Sustainable Places - including air quality and food insecurity

10. There will be a report produced for each phase with a range of recommendations based upon the findings. It is hoped that all the eight phases will be complete by the end of March 2023 with a subsequent update in September 2023.

Other Options Considered

11. The proposal is based on the requirement to develop the current JSNA process to ensure all JSNA products are aligned to joint strategic commissioning intentions, strategies or a framework for action in order to fulfil the statutory duty.

Reason/s for Recommendation/s

12. To seek Board members approval of the 2022/23 JSNA work programme and agreement of the proposed products.

Statutory and Policy Implications

13. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

14. There are no direct financial implications arising from this report.

RECOMMENDATION/S

- 1) That the Health and Wellbeing Board members approve the 2022/23 JSNA work programme and proposed products, developed through the JSNA prioritisation process.

Jonathan Gribbin
Director of Public Health
Nottinghamshire County Council

For any enquiries about this report please contact:

Sue Foley
Public Health Consultant
Telephone: 0115 804 3040
Email: sue.foley@nottscc.gov.uk
Lucy Hawkin
Public Health & Commissioning Manager
Telephone: 0115 804 2899
Email: lucy.hawkin@nottscc.gov.uk

Constitutional Comments (CEH 23.05.2022)

14. The report and recommendation fall within the remit of the Health and Wellbeing Board.

Financial Comments (DG 24.05.2022)

15. There are no direct financial implications arising from this report.

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.

[Guidance For the Approval of Joint Strategic Needs Assessment \(JSNA\) Chapters](#)
Report to Nottinghamshire Health and Wellbeing Board (September 2018)

[Joint Strategic Needs Assessment - Progress & Development](#)
[Appendix 1. JSNA Matrix](#)
Report to Nottinghamshire Health and Wellbeing Board (February 2022)

Electoral Division(s) and Member(s) Affected

- All

APPENDIX 1. Joint Strategic Needs Chapter Template

You can find all the Nottinghamshire JSNA chapters here on Nottinghamshire insight:
www.nottinghamshireinsight.org.uk/research-areas/jsna

Chapter template:

What do we know?

- 1) Who is at risk and why?
- 2) Size of the issue locally
- 3) Targets and performance
- 4) Current activity, service provision and assets
- 5) Local views
- 6) What is on the horizon?
- 7) Evidence of what works

What does this tell us?

- 8) Unmet needs and service gaps
- 9) Knowledge gaps

What should we do next?

- 10) Recommendations for consideration

15 June 2022**Agenda Item: 10****REPORT OF THE CHAIR OF THE HEALTH AND WELLBEING BOARD****MONITORING & EVALUATION: JOINT HEALTH AND WELLBEING
STRATEGY FOR 2022 - 2026****Purpose of the Report**

1. To discuss and seek endorsement on proposals for the monitoring and evaluation of the new Joint Health and Wellbeing Strategy for 2022 – 2026.

Information**Background**

2. As part of the delivery on the new Joint Health and Wellbeing Strategy 2022 – 2026 (JHWS), a robust framework for its monitoring and evaluation is essential to ensure oversight on its progress. It will also be used to identify what's working, what is not working, and provide information about why so that the delivery of the strategy can be modified and continual opportunities for improvement throughout the next four years. The guiding questions that underpin the monitoring and evaluation framework are:
 - a. What benefits/effect do we want to achieve via the JHWS?
 - b. What actions need to be taken, and how will we know if they are having the desired outcome?
 - c. What is the scale of impact of the actions and how will we know if there are any unforeseen consequences?
 - d. Do we need to change what we are doing?
 - e. Has the delivery of the strategy moved us closer to achieving our vision and fulfilling our ambitions?

Our Approach

3. The approach will be a multi-level (from system to place based partnerships) and mixed methods (both quantitative and qualitative) in order to gain a more complete picture of the effect delivery of the strategy is having on health and wellbeing, in particular health inequalities. There may not be a definitive answer as to if the strategy has been a success, however this proposal allows an understanding of the 'direction of travel', and with consistent and regular monitoring of the strategy, visibility to its progress in real time.
4. It is proposed to undertake an innovative approach to monitoring and evaluation, incorporating feedback from the Health and Wellbeing Board's workshop in March 2022 and using a variety

of tools to ensure monitoring of the strategy is adapted to allow change and learning, as well as an evaluation of the whole system that is complex and constantly evolving.

5. Some key takeaways from the workshop included the important role of the Test, Learn Build approach for programme delivery, a requirement for a clearer focus on health inequalities and reference to the delivery of the new strategy in all reports, and a presence of residents' voice in all our work.
6. Guidance for Health and Wellbeing Board partner organisations involved in the monitoring and evaluation of the Joint Health and Wellbeing Strategy 2022 – 2026 has been developed that describes the approach, templates, accountability and measures (quantitative and qualitative) in more detail. These include a range of approaches suitable for assessing impacts and supporting continuous improvement in complex systems, where equity of outcomes and experience for people in Nottinghamshire is a central organising principle.
7. The plan on a page for the monitoring and evaluation of the Joint Health and wellbeing Strategy for 2022 - 2026 is provided in **Appendix 1**.
8. The monitoring and evaluation framework proposed, and wider guidance, has been informed and based on the recommendations of the Task and Finish Group established in March 2022. It has met 4 times and will continue to meet, with membership including representatives from Public Health (including Public Health Intelligence), Place Based Partnerships and the Nottingham and Nottinghamshire integrated Care System (Health Inequalities Strategy).
9. It is the intention that this proposal promotes a shared understanding and ways of monitoring and evaluation that promotes innovation, challenge and co-production.

Next Steps

10. There is a recognition of the imperative to enable people in Nottinghamshire to co-produce arrangements to improve health and wellbeing and reduce inequalities. The Nottingham and Nottinghamshire Integrated Care System is developing a co-production strategy which will help inform how partner organisations can make this a reality. A strategy for co-production is already in place in Nottinghamshire County Council's Adult Social Care and Health Department.
11. During the summer some further work will be undertaken to establish and/or confirm the groups through which the JHWS will be delivered, with an expectation that monitoring and evaluation of the JHWS will commence from winter 2022/23.

Reason/s for Recommendation/s

12. The Health and Wellbeing Board has a statutory duty to produce a Joint Health and Wellbeing Strategy.

Statutory and Policy Implications

13. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public-sector equality duty,

safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

14. There are no direct financial implications arising from this report.

RECOMMENDATION/S

The Health and Wellbeing Board are asked-

- 1) To endorse the proposals for the monitoring and evaluation of the new Nottinghamshire Joint Health and Wellbeing Board Strategy for 2022-2026 outlined in this report.

Cllr John Doddy

Chair of the Nottinghamshire Health and Wellbeing Board

For any enquiries about this report please contact:

Sue Foley
Public Health Consultant
Nottinghamshire County Council
E: Sue.Foley@nottscc.gov.uk

Briony Jones
Public Health and Commissioning Manager
Nottinghamshire County Council
E: briony.jones@nottscc.gov.uk

Constitutional Comments (CEH 23.05.2022)

15. The report and recommendation fall within the remit of the Health and Wellbeing Board.

Financial Comments (DG 24.05.2022)

16. There are no direct financial implications arising from this report.

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.

[Second Nottinghamshire Joint Health and Wellbeing Strategy \(6 December 2017\)](#)
Report to the Nottinghamshire Health and Wellbeing Board

[The Refresh of the Nottinghamshire Joint Health and Wellbeing Strategy for 2022 – 2026 \(1 September 2021\)](#)

Report to the Nottinghamshire Health and Wellbeing Board

[The Joint Health and Wellbeing Strategy for 2022 – 2026 \(23 March 2022\)](#)

Report to the Nottinghamshire Health and Wellbeing Board

[The Nottinghamshire Joint Health and Wellbeing Strategy 2022 – 2026 \(5 May 2022\)](#)

Report to the Health and Wellbeing Board

Electoral Division(s) and Member(s) Affected

All

APPENDIX 1. Summary - Monitoring & Evaluation of the Joint Health and Wellbeing Strategy 2022 – 2026

Monitoring & Evaluation Focus	System / Strategic vision <i>We will work together to enable everyone in Nottinghamshire to live healthier and happier lives, to prosper in their communities and remain independent in later life.</i>	Ambitions <i>1. Give every child the best chance of maximising their potential. 2. Create Healthy and Sustainable Places. 3. Everyone can access the right support to improve their health. 4. Keep our communities safe and healthy.</i>	Priorities <i>Best Start, Mental Health, Food Insecurity & Nutrition, Homelessness, Tobacco, Alcohol, Domestic Abuse, Healthy Weight, Air Quality</i>
	CONSIDERATION OF CROSS CUTTING THEMES: Equity & Fairness, Prevention, Environmental Sustainability		
Method	Annual Report	Quarterly Report	Quarterly / Ad hoc Report
Owner (From)	JHWS Lead (PH Consultant)	Ambition Groups (4x)	Relevant groups, partnerships or officers
Recipient (To)	Nottinghamshire Health and Wellbeing Board	Nottinghamshire Health and Wellbeing Board	Ambition Groups (HWB subgroups) <i>with escalation to Board as required</i>
Content	<p><i>How is the system improving Health and Wellbeing in Nottinghamshire?</i></p> <ul style="list-style-type: none"> Update on collective actions on reducing inequalities. Life Expectancy & Healthy Life Expectancy Select related measures: <ul style="list-style-type: none"> ➤ Public Health Outcomes Framework ➤ Nottinghamshire Integrated Care System Outcomes Framework Qualitative Data: stories, case studies, lived experience Progress on co-production Partnership working / related strategies: <ul style="list-style-type: none"> ➤ ICS HI Strategy and/or Integrated Care Strategy ➤ Police and Crime Plan ➤ Nottingham City JHWS 	<p><i>What progress has been made to deliver the Joint Health and Wellbeing Strategy for 2022 – 2026?</i></p> <ul style="list-style-type: none"> Progress on the objectives outlined in the Joint Health and Wellbeing Strategy 2022 – 2026. Any specific updates from Place Based Partnerships. Dependent on work status, each quarter will have a focus on a particular JHWS ambition, alongside high level progress reporting on the strategy. 	<p><i>What action has been undertaken or required for these specific needs?</i></p> <p>Ambitions groups to review progress on specific priorities and receive/request reports if or when required.</p>
Feedback loop	The Health and Wellbeing Board can request further action as required.	The ambition groups can escalate actions to Board as required and can submit updates via the Chair's Report if full report not required.	Topic focussed reports can be produced (e.g. homelessness) as and when these are needed to drive partnership action.

15 June 2022**Agenda Item: 11****REPORT OF THE SERVICE DIRECTOR: CUSTOMERS, GOVERNANCE AND
EMPLOYEES****WORK PROGRAMME****Purpose of the Report**

1. To consider the Health & Wellbeing Board's work programme for 2022-23.

Information

2. The County Council requires each committee, including the Health & Wellbeing Board, to maintain a work programme. The work programme will assist the management of the Board's agenda, the scheduling of the Board's business, and forward planning. The work programme will be updated and reviewed at each pre-agenda meeting and Board meeting. Any member of the Board is able to suggest items for possible inclusion.
3. The attached draft work programme has been drawn up in consultation with the Chair, and includes items which can be anticipated at the present time. Other items will be added to the programme as they are identified.

Other Options Considered

4. None.

Reasons for Recommendation

5. To assist the Health & Wellbeing Board in preparing its work programme.

Statutory and Policy Implications

6. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION

- 1) That the Health & Wellbeing Board's work programme be noted, and consideration be given to any changes which the Board wishes to make.

Marjorie Toward

Service Director: Customers, Governance and Employees

For any enquiries about this report please contact:

Briony Jones
Public Health & Commissioning Manager
Nottinghamshire County Council
E: briony.jones@nottsc.gov.uk

Martin Gately
Democratic Services Officer
Nottinghamshire County Council
E: martin.gately@nottsc.gov.uk

Constitutional Comments (HD)

7. The Board has authority to consider the matters set out in this report by virtue of its terms of reference.

Financial Comments (NS)

8. There are no direct financial implications arising from the contents of this report. Any future reports to the Board will contain relevant financial information and comments.

Background Papers

- None

Electoral Division(s) and Member(s) Affected

- All

WORK PROGRAMME: 2022-2023

Please see Nottinghamshire County Council's [website](#) for the board papers, the Healthy Nottinghamshire [website](#) for information on the Health & Wellbeing Board and its Joint Health and Wellbeing Strategy (JHWS) and Joint Strategic Needs Assessment (JSNA) chapters are available on [Nottinghamshire Insight](#).

Report title	Purpose	Lead officer	Report author(s)	Notes
Q3 WORKSHOP: Wednesday 27 July 2022 (2pm) - TBC				
Tobacco	A workshop to discuss and identify partnership actions to contribute to the delivery of the JHWS priority on Tobacco.	Cllr Doddy	Cath Pritchard Jane Roberts Jo Marshall	
Q3 MEETING: Wednesday 7 September 2022 (2pm) - TBC				
Chair's Report (Standing Item)	An update by the Chair on local and national issues for consideration by Health & Wellbeing Board members to determine implications for the Joint Health and Wellbeing Strategy for 2022 – 2026.	Cllr Doddy	Briony Jones	
Pharmaceutical Needs Assessment	To update on the consultation undertaken and approve the new Pharmaceutical Needs Assessment for 2022 – 2025, that will be published on Nottinghamshire Insight in October 2022.	Jonathan Gribbin	Sue Foley Lucy Hawkin	
Tobacco	To discuss the outcomes of the workshop and agree a set of recommendations for board members to undertake on Tobacco control.	Cllr Doddy	Cath Pritchard Jo Marshall	
Lung Health Checks	To provide an update on the progress of the Lung Health Check Programme that was launched in Mansfield and Ashfield in March 2021.	Thilan Bartholomeuz	Simon Castle Katie Lee	
JSNA Chapter: Substance Misuse	To consider and approve the JSNA chapter on substance misuse for publication on Nottinghamshire Insight.	Jonathan Gribbin	Sarah Quilty Tris Poole	

Report title	Purpose	Lead officer	Report author(s)	Notes
The Better Care Fund End of Year Template 2021 - 2022	To seek retrospective approval of the Nottinghamshire 2021-22 Better Care Fund Year End reporting template.	Melanie Brooks	Kash Ahmed Naomi Robinson Clare Gilbert	
Q4 WORKSHOP: Wednesday 12 October 2022 (2pm) - TBC				
Homelessness	A workshop to discuss and identify partnership actions to contribute to the delivery of the JHWS priority on homelessness.	Cllr Doddy	Dawn Jenkin	To be confirmed
Q4 MEETING: Wednesday 7 December 2022 (2pm) - TBC				
Chair's Report (Standing Item)	An update by the Chair on local and national issues for consideration by Health & Wellbeing Board members to determine implications for the Joint Health and Wellbeing Strategy for 2022 – 2026.	Cllr Doddy	Briony Jones	
JHWS Quarterly Report	To present a quarterly report on progress of the delivery of the joint health and wellbeing strategy for 2022 – 2026 as part of its monitoring framework.	Cllr Doddy	Sue Foley	
Homelessness	To discuss the outcomes of the workshop and agree a set of recommendations for board members to undertake on Homelessness.	Cllr Doddy	Dawn Jenkin	To be confirmed
JSNA Chapter: Special Educational Needs and Disabilities	To consider and approve the JSNA chapter on special educational needs and disabilities for publication on Nottinghamshire Insight.	Cllr Doddy	Lucy Hawkin	
Integrated Care Strategy	To present and discuss the Integrated Care Partnership's new Integrated Care Strategy.	Melanie Brooks		To be confirmed
Approval of the 2022/23 Better Care Fund Planning Template	To approve the 2022/23 Better Care Fund Planning Template and Better Care Fund Narrative plan.	Melanie Brooks	Kash Ahmed Naomi Robinson Clare Gilbert	To be confirmed

Report title	Purpose	Lead officer	Report author(s)	Notes
Q1 WORKSHOP: Wednesday 1 February 2023 (2pm) - TBC				
Q1 MEETING: Wednesday 8 March 2023 (2pm) - TBC				
Chair's Report (Standing Item)	An update by the Chair on local and national issues for consideration by Health & Wellbeing Board members to determine implications for the Joint Health and Wellbeing Strategy for 2022 – 2026.	Cllr Doddy	Briony Jones	
JHWS Quarterly Report	To present a quarterly report on progress of the delivery of the joint health and wellbeing strategy for 2022 – 2026 as part of its monitoring framework.	Cllr Doddy	Sue Foley	
Covid-19 Impact Assessment	Assessment of the COVID-19 pandemic on key aspects of health and wellbeing with particular regard to health inequalities to help inform public health and partner's strategies, plans and commissioning.	Jonathan Gribbin	Sue Foley	
Best Start Strategy Annual Progress Report	To review progress of the delivery of the Nottinghamshire Best Start Strategy 2021 – 2025, since the Board's endorsement in January 2021.	Colin Pettigrew Jonathan Gribbin	Laurence Jones Louise Lester	
JSNA Chapter: Looked After Children and Care Leavers	To consider and approve the JSNA chapter on looked after children and care leavers for publication on Nottinghamshire Insight.	Cllr Doddy	Lucy Hawkin	
Q2 WORKSHOP: Wednesday 19 April 2023 (2pm) - TBC				

Report title	Purpose	Lead officer	Report author(s)	Notes
Q2 MEETING: Wednesday 24 May 2023 (2pm) - TBC				
Chair's Report (Standing Item)	An update by the Chair on local and national issues for consideration by Health & Wellbeing Board members to determine implications for the Joint Health and Wellbeing Strategy for 2022 – 2026.	Cllr Doddy	Briony Jones	
JHWS Quarterly Report	To present a quarterly report on progress of the delivery of the joint health and wellbeing strategy for 2022 – 2026 as part of its monitoring framework.	Cllr Doddy	Sue Foley	
JSNA Annual Work Programme for 2023-2024	A report to present the results from the prioritisation process undertaken January – February 2023 and to seek approval of the JSNA work programme for 2023/2024.	Jonathan Gribbin	Sue Foley Lucy Hawkin	
JSNA Chapter: Carers	To consider and approve the JSNA chapter on carers for publication on Nottinghamshire Insight.	Cllr Doddy	Lucy Hawkin	
The Better Care Fund End of Year Template 2022 - 2023	To seek approval of the Nottinghamshire 2022-23 Better Care Fund Year End reporting template.	Melanie Brooks	Kash Ahmed Naomi Robinson Clare Gilbert	To be confirmed
Q3 WORKSHOP: Wednesday 12 July 2023 (2pm) - TBC				

Business Cycle

Quarter 1		
JAN	FEB	MARCH
	WORKSHOP	MEETING

Quarter 2		
APRIL	MAY	JUNE
WORKSHOP	MEETING	

Quarter 3		
JULY	AUG	SEP
WORKSHOP		MEETING

Quarter 4		
OCT	NOV	DEC
WORKSHOP		MEETING

2022 / 2023 (TBC)

Wednesday 27 July 2022 (2pm)
 Wednesday 7 September 2022 (2pm)
 Wednesday 12 October 2022 (2pm)
 Wednesday 7 December 2022 (2pm)
 Wednesday 1 February 2023 (2pm)
 Wednesday 8 March 2023 (2pm)
 Wednesday 19 April 2023 (2pm)
 Wednesday 24 May 2023 (2pm)
 Wednesday 12 July 2023 (2pm)

Contact

For queries or requests for the Nottinghamshire Health and Wellbeing Board's work programme, please email briony.jones@nottscg.gov.uk

