

NOTTINGHAM CITY COUNCIL

HEALTH AND WELLBEING BOARD

MINUTES of the meeting held at NHS Nottingham City Clinical Commissioning Group, 1 Standard Court, Park Row, Nottingham, NG1 6GN on 26 July 2017 from 2.04 pm - 3.43 pm

Membership

Voting Members

Councillor Nick McDonald (Chair)
Dr Marcus Bicknell (Vice Chair)
Councillor Steve Battlemuch
Alison Challenger
Martin Gawith
Helen Jones
Councillor David Mellen (minutes 1 – 10 inclusive)
Dr Hugh Porter
Dawn Smith
Councillor Marcia Watson

Absent

Alison Michalska
Samantha Travis

Non-Voting Members

Ted Antill
Bryn Coleman (as substitute for Wayne Bowcock)
Leslie McDonald
Gill Moy
Tracy Tyrell (as substitute for Lyn Bacon)
Maria Ward

Absent

Chris Packham
Michelle Simpson
Peter Homa

Colleagues, partners and others in attendance:

Katy Ball - Director of Commissioning and Procurement - NCC
James Blount - Communications - NCC
Marie Cann-Livingstone - Teenage Pregnancy Specialist – NCC
Helene Deness - Public Health Consultant - NCC
Jane Garrard - Senior Governance Officer – NCC
Ruth Hawley - Nottingham City Libraries - NCC
Jane Laughton - CCG
Jennie Maybury - Principle Transport Planner – NCC
Kate Morris - Governance Officer – NCC
Christine Oliver - Head of Commissioning – NCC
Helen Ross - Insight Specialist, Public Health – NCC
Richard Taylor - Environmental Health and Safer Places Manager - NCC
Steve Thorne - CCG

1 MEMBERSHIP CHANGE

RESOLVED to note

- (1) Councillors Nick McDonald and Marcia Watson had replaced Councillors Alex Norris and Neghat Khan as Nottingham City Council representatives; and**
- (2) Samantha Travis had replaced Jonathan Rycroft as the NHS England Representative.**

2 APOLOGIES FOR ABSENCE

Samantha Travis
Chris Packham
Alison Michalska
Peter Homa
Andy Winter

3 DECLARATIONS OF INTEREST

Dr Hugh Porter, NHS Nottingham City Clinical Commissioning Group representative declared an interest in item 7, Reducing unplanned teenage pregnancy in Nottingham – an annual report, as practitioner in a prominent provider of sexual health services. This did not preclude him speaking on the matter.

4 MINUTES

The minutes of the meeting held on 29 March 2017 were agreed as a true record and signed by the Chair.

5 APPOINTMENT OF VICE CHAIR

RESOLVED to appoint Dr Marcus Bicknall, NHS Nottingham City Clinical Commissioning Group Representative as Vice-Chair for the municipal year 2017/18.

6 HEALTH AND WELLBEING STRATEGY 2016-2010 OUTCOME 4: HEALTH AND ENVIRONMENT INTERIM REPORT

Alison Challenger, City Council Director of Public Health, introduced the report updating the Committee on the Health and Wellbeing Strategy 2016-2020 Outcome 4: Health and Environment interim report to the Board. She highlighted the following points:

- (a) There are 4 main themes within this Outcome:
 - Transport & Air Quality
 - Parks, Green Spaces
 - Housing
 - Built Environment

- (b) Nottingham has been successful in attracting a number of transport and air quality grants to the city with a combined total of £7.8million. These include Go Ultra Low, DEFRA Air Quality grant and DfT Access Fund;
- (c) to date Nottingham has been awarded Go Ultra Low status and is working towards becoming a Clean Air Zone;
- (d) National Clean Air Day took place on 15 June 2017 which aimed to highlight what citizens can do to improve the quality of the air and this will be repeated next year with more focus on publicity;
- (e) green spaces were recently mapped against health within the City. Whilst facilities vary from area to area there are some areas with high health need and low use of green space. Work will be taking place with the Council's Leisure Team to develop facilities and use in areas of high need;
- (f) there is an environment themed steering group which is currently recruiting new members;
- (g) the Hospital to Home project has been successful in generating savings for the NHS, Social Care and Housing as well as benefits for citizens including reduced waiting times for housing and increased social connections;
- (h) the housing workforce has dedicated workers who focus on health issues for residents. They address physical health as well as mental health and offer specialist advice around health linked to indebtedness;
- (i) Nottingham City Homes has done much work on increasing energy efficiency of their properties;
- (j) there is a current focus on the number of hot food outlets around secondary schools and how this is affecting health of children and young people. Work is underway to look at how the number of these outlets can be limited or reduced in and around the area close to schools;
- (k) Board Members were encouraged to nominate a member of their organisation to join one of the steering groups associated with this Outcome theme.

Following discussion and questions from Board members the following information was highlighted:

- (l) Air quality is more often than not measured in high traffic areas, such as city centres and on ring roads. It was suggested that a study of air quality in the areas where schools experience a high level of idling engines may produce results that would encourage citizens to change habits;
- (m) colleagues within Nottingham City Council are engaged with colleagues from Nottinghamshire County Council and working together to encourage behaviour change;

- (n) better publicity is needed for the smaller groups who provide activities within green spaces in Nottingham City. There are activities available for all abilities and ages but it is important that they are advertised so that people can take advantage of them;
- (o) the City has a high number of green flag parks and had ensured that, despite budget cuts, green space is retained for public use. Increasingly these green spaces are supported by groups of volunteers;
- (p) there are many people within Nottingham who rent substandard properties through private landlords. Collecting data around evictions for this group will be difficult as they very often go on to further private rented accommodation rather than being rehoused through Nottingham City Homes;
- (q) a British Research Establishment report looking at privately rented accommodation showed that 19% of privately rented properties had hazards that were harmful to health. Environmental Health are working with landlords to intervene/take over management of property when standards are not raised;
- (r) homelessness has gone up dramatically over the last few years. There are now over 600 households in temporary accommodation in Nottingham. The wider roll out of Universal Credit will increase the number of people struggling to cover all of their costs of living;
- (s) it was suggested that if the number of hot food outlets cannot be reduced then they should have a requirement to provide a certain percentage of healthy, nutritious meals in order to help reduce obesity/encourage a healthier lifestyle;
- (t) there has historically been a focus on filling vacant shops and there has not always been a focus on the types of tenants within the properties, for example hot food takeaway outlets.

RESOLVED to

- (1) note the content of the report, and;**
- (2) request a future report come to the Board bringing together data on people at risk of losing their accommodation and the link to health and wellbeing.**

7 REDUCING UNPLANNED TEENAGE PREGNANCY IN NOTTINGHAM - AN ANNUAL REPORT

Helene Denness, Public Health Consultant, introduced to the Board the annual report on reducing unplanned teenage pregnancy in Nottingham. She outlined known risk factors and highlighted the following information:

- (a) Outcomes for infants of teenage mothers are less favourable than those who are not. Children of teenage mothers are more likely to die in infancy, more likely to live in poverty, be hospitalised due to gastroenteritis or accidental

- injury, and be behind developmentally in terms of spatial, verbal and non-verbal ability;
- (b) outcomes for teenage mothers are also less favourable. They are more likely to be living in poverty at age 30, smoke throughout pregnancy, experience postnatal depression and experience relationship breakdown. They are also less likely to breastfeed or be in training, education or employment;
 - (c) Nottingham City has reduced the rate of teenage pregnancy significantly although it is still higher than the national average and higher than the average for other Core Cities;
 - (d) there are a number of prevention services, including the Sex and Relationship Education (SRE) Charter which is tailored to a school's needs, school nurses, young person friendly sexual health services, and C-Card Scheme and intensive support services for teenage mothers to prevent a second teenage pregnancy. Work is also being done on raising aspirations of communities, although this is slower work and takes time to become embedded and show results;
 - (e) there are a number of challenges:
 - Each school makes its own decision about delivery of SRE and they are not obliged to sign up to the SRE charter and so not all pupils have the same quality or quantity of SRE;
 - The city is becoming more diverse and has new and emerging populations. There is significantly less data on these populations and how sexual health services can be adapted to allow equal access
 - Under 16 pregnancy rate is not falling as fast as the under 18 pregnancy rate
 - There is an increasing number of young people presenting for termination of pregnancy who are choosing not to take up long term reversible contraception
 - (f) there is a new task force that will be focusing on those schools who choose not to take up the SRE offer within the city and what can be done to encourage further engagement.

Following questions from Board members and discussion the following information was highlighted:

- (g) Smaller, voluntary sector organisations are also able to administer the C-Card scheme and have the potential to reach more young people;
- (h) the available statistics are currently 18 months old and at present there is no information on whether or not there has been a rise in the number of sexually transmitted infections as a result of the increased use of long term reversible contraception;
- (i) SRE is being made statutory although this requirement is not as comprehensive as it could have been. There has been some good work in

recent months with the Catholic Schools and the Diocese are offering their support on the introduction of tailored SRE;

- (j) statistics show that there is still a significant gap between the national average and Nottingham City teenage pregnancy rates, although historically this has been reduced, the gap remains significant and further analysis needs to be done to determine what additional steps can be taken to reduce the gap further.

RESOLVED to:

- (1) note the content of the report; and**
- (2) invite a Public Health colleague back to the January 2018 meeting with a review of how teenage pregnancy rates will be reduced further.**

8 IMPACT OF THE COMMISSIONING REVIEWS 2016-17

Katy Ball, Director of Commissioning and Procurement, Nottingham City Council, introduced the report on the Impact of Commissioning Reviews 2016-17 to the Board. She advised the Board that the information contained within appendices circulated with the agenda was headline information designed to give an overview and went on to highlight the following information:

- (a) The majority of the commissioning work is taken to the Health and Wellbeing Commissioning Executive Group, a subgroup of this Committee;
- (b) joint commissioning includes Nottingham City Council, Nottingham City Clinical Commissioning Group, Crime and Drugs Partnership and Public Health and works with key stakeholders to assess change in need, outcomes, budgets, and changes in policy to commission services for citizens;
- (c) when reviewing commissioning the workgroup looks at systems rather than individual services to assess integration and outcomes for citizens.

During discussion and following questions the following points were made:

- (d) An overview of the work will be brought to the Board and will focus on the priorities set by the Board.
- (e) there are significant financial pressures on key stakeholders and as such it is necessary to focus on integration and streamlining systems rather than focus in on each individual service. The aim is to reduce cost but retain service provision;
- (f) a particular focus on performance and contract management is needed to ensure value for money is delivered on every service commissioned.

RESOLVED to note the impact of the Commissioning Reviews 2016-17 in terms of improved outcomes for citizens, improved service delivery and system change.

9 COMMISSIONING INTENTIONS 2017-18

Katy Ball, Director of Commissioning and Procurement, Nottingham City Council introduced the report on Commissioning Intentions 2017-18 to the Board. She advised the Board that the document circulated with the agenda outlined commissioning activity to be undertaken in the upcoming year, some of which has already been started. Following questions and discussion with the Board the following information was highlighted:

- (a) Early discussions with this Board would be beneficial on issues that may be controversial as would bringing attention to any major recommissioning work being undertaken where strategic partners are unable to bid and where impact on the private sector is expected;
- (b) there is significant pressures on all stakeholders' budgets and this has the potential to impact on services which in turn will impact on citizens.

RESOLVED to note the main areas of activity identified within the Nottingham City Council Commissioning Priorities Plan and the Nottingham City Council and NHS Nottingham City Clinical Commissioning Group Joint Commissioning Plan.

10 SUSTAINABILITY AND TRANSFORMATION PLAN UPDATE

Dawn Smith, Nottingham City Clinical Commissioning Group introduced the report presenting the Feedback Report on the Sustainability and Transformation Plan (STP).

Jane Laughton gave a presentation on the STP feedback report detailing public feedback following a number of consultation events across the City. She highlighted the following points:

- (a) Almost 400 people attended consultation events across Nottingham representing the public, voluntary organisations and community groups;
- (b) feedback captured at the event that took place at Nottingham Forest Football Ground showed that the public wanted to engage with the processes, that they understood the funding issues and wanted to be involved in taking the plan forward;
- (c) the feedback from this public event generally endorsed the STP and felt that it was going in the right direction;
- (d) key gaps that were identified during public consultation were mental health, including dementia care, children's health and young carers;
- (e) people at the consultation events agreed that more should be done to encourage people to look after their own health;

- (f) a number of concerns were raised:
 - Workforce – the right people being trained in the right way for the right roles.
 - Technology – concern that this would replace face to face appointments with medical professionals and carers.
 - Communication – why the STP had not been communicated to the public earlier. Also the language of the STP was not the easiest to understand.
- (g) an easier to understand version of the plan had been produced using plainer English. It is still a complex document and conveys an enormous amount of complex information;
- (h) not all groups in the community were reached during these consultations so there will be focused work to reach different communities in order to receive their feedback and comments on the plan;
- (i) an Annual Report will be produced towards the end of this year which will describe the changes made and the impact that this is already having.

During discussion the following points were made:

- (j) Long term sustainability has to be underpinned by short term sustainability of the transition. It is essential to have unified management of the plan and a unified budget along with national support to ensure that as an early adopter area Nottingham City succeeds in launching the STP;
- (k) HealthWatch groups across the country have reacted differently to the STPs. In Nottingham HealthWatch has chosen to be involved in the process from the start. The honesty and professionalism of colleagues working on the STP and their willingness to innovate is encouraging, but it will be important not to underestimate the amount of work required;
- (l) the attendance at the consultation events was not demographically representative of Nottingham City.
- (m) urgent clarity is required around the shortfall in finance for the STP and where this leaves the integration process.
- (n) Voluntary sector organisations are overwhelmingly supportive of the work being done, however concerns have been raised around the intention and idea that they will be able to deliver services to the community as a whole. More clarity is needed about what is expected of the voluntary sector and how it will be funded;
- (o) updates with details of challenges would be useful to allow the Board and its members a full picture of the progress of the STP.

RESOLVED to note the content of the report and presentation.

11 HEALTH AND WELLBEING BOARD FORWARD PLAN

RESOLVED to note the Health and Wellbeing Board Forward Plan.

12 PHARMACEUTICAL NEEDS ASSESSMENT

RESOLVED to note that preparations to publish a revised Nottingham City Pharmaceutical Needs Assessment by 1 April 2018 are underway.

13 BOARD MEMBER UPDATES

In addition to the written updates circulated as part of the agenda pack, further information was provided by Members:

- (a) Dawn Smith from NHS Nottingham City Clinical Commissioning Group informed members that the 4 regional clinical commissioning groups are coming together under a joint committee arrangements. They do not currently plan on merging until 2019 at the earliest. There will be a single management team and a single accountable officer.

RESOLVED to note the Board Member Updates.

14 NEW JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) CHAPTER - DEMOGRAPHY

RESOLVED to note that a new Joint Strategic Needs Assessment Chapter on Demography had been published.

15 DATES FOR FUTURE MEETINGS

RESOLVED to meet on the following Wednesdays at 2pm:

- **27 September 2017**
- **29 November 2017**
- **31 January 2018**
- **28 March 2018**