

## **NOTTINGHAM CITY HEALTH AND WELLBEING BOARD**

**Date:** Wednesday, 26 September 2018

**Time:** 2.00 pm

**Place:** Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2 3NG

**Contact:** Jane Garrard **Direct Dial:** 0115 8764315

### **1 MEMBERSHIP CHANGE**

To note that:

- a) Catherine Underwood has replaced Helen Jones as the Nottingham City Council Director of Adult Social Care;
- b) Craig Parkin has replaced Wayne Bowcock as the Nottinghamshire Fire and Rescue Service representative on the Health and Wellbeing Board; and
- c) Hazel Buchanan, Director of Strategy and Partnerships has replaced Gary Thompson as the Greater Nottingham Clinical Commissioning Partnership representative on the Health and Wellbeing Board

### **2 APOLOGIES FOR ABSENCE**

### **3 DECLARATIONS OF INTERESTS**

### **4 MINUTES**

To confirm the minutes of the meeting held on 25 July 2018

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### **5 ACTION LOG**

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### **6 HEALTH AND WELLBEING STRATEGY 2016-2020 - HEALTHY CULTURE**

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### **7 CONSULTATION ON DRAFT ADULT SOCIAL CARE STRATEGY**

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### **8 JOINT STRATEGIC NEEDS ASSESSMENT ANNUAL REPORT**

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### **9 AMENDMENT TO HEALTH AND WELLBEING BOARD TERMS OF REFERENCE**

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<b>10</b>	<b>HEALTHWATCH NOTTINGHAM AND NOTTINGHAMSHIRE</b>	65 - 70
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<b>12</b>	<b>BOARD MEMBER UPDATES</b> Updates on issues of relevance to the Health and Wellbeing Board and/or delivery of the Joint Health and Wellbeing Strategy	
<b>a</b>	<b>Third Sector</b>	73 - 74
<b>b</b>	<b>Healthwatch Nottingham and Nottinghamshire</b>	No written update
<b>c</b>	<b>NHS Greater Nottingham Clinical Commissioning Partnership</b>	To follow
<b>d</b>	<b>Nottingham City Council Corporate Director for Children and Adults and Director of Adult Social Care</b>	No written update
<b>e</b>	<b>Nottingham City Council Director for Public Health</b>	75 - 78
<b>13</b>	<b>QUESTIONS FROM THE PUBLIC</b> Opportunity for members of the public to ask questions relating to matters within the Health and Wellbeing Board's remit.	

The maximum amount of time allocated to questions and responses is 30 minutes.

The Nottingham City Health and Wellbeing Board is a partnership body which brings together key local leaders to improve the health and wellbeing of the population of Nottingham and reduce health inequalities.

### **Members:**

#### Voting members

Councillor Sam Webster (Chair)	City Council Portfolio Holder with a remit covering health
Dr Hugh Porter (Vice Chair)	NHS Nottingham City Clinical Commissioning Group representative
Councillor Cheryl Barnard	City Councillor
Councillor Carole McCulloch	City Councillor
Councillor David Mellen	City Council Portfolio Holder with a remit covering children's services
Dr Marcus Bicknell	NHS Nottingham City Clinical Commissioning Group representative
Sam Walters	Greater Nottingham Clinical Commissioning Partnership Accountable Officer
Hazel Buchanan	Greater Nottingham Clinical Commissioning Partnership representative

Alison Michalska	City Council Corporate Director for Children and Adults
Catherine Underwood	City Council Director of Adult Social Care
Alison Challenger	City Council Director of Public Health
Martin Gawith	Healthwatch Nottingham representative
Samantha Travis	NHS England representative

Non-voting members

Lyn Bacon	Nottingham CityCare Partnership representative
Caroline Shaw	Nottingham University Hospitals NHS Trust representative
Chris Packham	Nottinghamshire Healthcare NHS Foundation Trust representative
Gill Moy	Nottingham City Homes representative
Ted Antil	Nottinghamshire Police representative
vacancy	Department for Work and Pensions representative
Leslie McDonald	Representing interests of the Third Sector
Jane Todd	Representing interests of the Third Sector
Craig Parkin	Nottinghamshire Fire and Rescue Service representative
Andy Winter	Nottingham Universities representative

IF YOU NEED ANY ADVICE ON DECLARING AN INTEREST IN ANY ITEM ON THE AGENDA, PLEASE CONTACT THE GOVERNANCE OFFICER SHOWN ABOVE, IF POSSIBLE BEFORE THE DAY OF THE MEETING

CITIZENS ATTENDING MEETINGS ARE ASKED TO ARRIVE AT LEAST 15 MINUTES BEFORE THE START OF THE MEETING TO BE ISSUED WITH VISITOR BADGES

CITIZENS ARE ADVISED THAT THIS MEETING MAY BE RECORDED BY MEMBERS OF THE PUBLIC. ANY RECORDING OR REPORTING ON THIS MEETING SHOULD TAKE PLACE IN ACCORDANCE WITH THE COUNCIL'S POLICY ON RECORDING AND REPORTING ON PUBLIC MEETINGS, WHICH IS AVAILABLE AT [WWW.NOTTINGHAMCITY.GOV.UK](http://WWW.NOTTINGHAMCITY.GOV.UK). INDIVIDUALS INTENDING TO RECORD THE MEETING ARE ASKED TO NOTIFY THE GOVERNANCE OFFICER SHOWN ABOVE IN ADVANCE.

QUESTIONS FROM THE PUBLIC: WHILE IT IS NOT NECESSARY TO DO SO, SUBMITTING A QUESTION IN ADVANCE WILL ENABLE THE BOARD TO PROVIDE AS FULL A RESPONSE AS POSSIBLE. QUESTIONS SHOULD BE SUBMITTED TO [CONSTITUTIONAL.SERVICES@NOTTINGHAMCITY.GOV.UK](mailto:CONSTITUTIONAL.SERVICES@NOTTINGHAMCITY.GOV.UK) THE ACCEPTANCE OF QUESTIONS AT THE MEETING IS AT THE DISCRETION OF THE CHAIR AND ANY INAPPROPRIATE QUESTIONS, FOR EXAMPLE THOSE THAT ARE OUTSIDE THE REMIT OF THE BOARD OR VEXATIOUS WILL NOT BE CONSIDERED.

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**NOTTINGHAM CITY COUNCIL**

**HEALTH AND WELLBEING BOARD**

**MINUTES of the meeting held at Loxley House, Nottingham on 25 July 2018  
from 2.04 pm - 3.51 pm**

**Membership**

**Voting Members**

Present

Councillor Sam Webster (Chair)  
Hugh Porter (Vice Chair)  
Dr Marcus Bicknell  
Hazel Buchanan (as substitute)  
Alison Challenger  
Martin Gawith  
Helen Jones  
Councillor David Mellen

Absent

Councillor Cheryl Barnard  
Councillor Carole McCulloch  
Alison Michalska  
Gary Thompson (sent substitute)  
Samantha Travis

**Non Voting Members**

Present

Tim Brown  
Leslie McDonald  
Gill Moy  
Jane Todd  
Caroline Shaw

Absent

Supd Ted Antill  
Lyn Bacon  
Wayne Bowcock  
Chris Packham  
Sam Walters  
Andy Winter

**Colleagues, partners and others in attendance:**

Nancy Barnard	- Governance Manager
Ian Bentley	- Strategy and Commissioning Manager, Nottingham Crime and Drugs Partnership
Helene Denness	- Public Health Consultant
Caroline Keenan	- Insight Specialist - Public Health
Claire Novak	- Insight Specialist - Public Health
David Pearson	- Nottingham and Nottinghamshire Sustainability and Transformation Partnership Lead
Steve Thorne	- Communications & Marketing Manager
Phil Wye	- Governance Officer

**16 MEMBERSHIP CHANGE**

**RESOLVED to**

**(1) note that Caroline Shaw has replaced Tracy Taylor as the Nottingham University Hospitals NHS Trust representative on the Health and Wellbeing Board;**

**(2) note that Jane Todd has replaced Louise Craig as a representative of the Third Sector on the Health and Wellbeing Board.**

**17     APOLOGIES FOR ABSENCE**

Councillor Cheryl Barnard  
Alison Michalska  
Chris Packham  
Gary Thompson (sent substitute)  
Andy Winter

**18     DECLARATIONS OF INTERESTS**

None

**19     MINUTES**

The minutes of the meeting held on 30 May 2018 were recorded as a correct record and signed by the Chair.

**20     ACTION LOG**

The Action Log was noted.

**21     HEALTH AND WELLBEING STRATEGY 2016-2020 OUTCOME  
PROGRESS HIGHLIGHT REPORT. OUTCOME 1: HEALTHY LIFESTYLES**

Caroline Keenan, Insight Specialist, Public Health, and Ian Bentley, Strategy and Commissioning Manager, Crime and Drugs Partnership, delivered a presentation highlighting the following:

Physical activity, obesity and diet

- (a) Nottingham City is not on track to meeting any of the key performance indicators in this area, with excess weight in both adults and children being particularly high;
- (b) a whole-system approach is being developed in order to enable people to make healthier food choices, and physical activity is being recognised as a standalone priority;
- (c) the Sherriff's Challenge set a target for Nottingham schoolchildren to cumulatively walk or run around the world. This has now been done three times;
- (d) the tier 2 adult weight management service provision has been decommissioned. An alternative is being sought but this will not be universal and will be more targeted;
- (e) a weight management app is being piloted by Nottingham City, with around 10% of GPs referring into it.

Committee members commented that shops could be encouraged more to stock healthy food, and marketing could be better and learning could be taken from other core cities. GPs also do not have a clear referral pathway for obese adults to the most cost-effective provision.

### Safer sex

- (f) targets for under 18 conceptions and HIV late diagnosis are on track to be met, but the target for new sexually transmitted infection (STI) diagnosis is not;
- (g) provision is changing to meet budget pressures, which is challenging as there has been an increase in diagnosis for gonorrhoea and syphilis and emerging issues like drug resistant and new STIs;
- (h) STI figures don't include chlamydia as Nottingham City has historically has had lower rates than statistical neighbours.

Committee members commented that changing culture and attitudes of young people are important and must be taken into account when developing services.

### Smokefree

- (i) the number of adults who smoke, routine and manual smokers, and pregnant women who smoke have all reduced. Further work still needs to be done as this still falls short of targets;
- (j) smokefree outdoor public spaces and smokefree hospitals have both been introduced, as well as smokefree policies and capacity building in organisations and at events.

Committee members were supportive of smokefree bus and tram stops across the city. The health risks of counterfeit tobacco should also be emphasised in communications.

### Alcohol consumption

- (k) there has been a reduction in alcohol related hospital admissions and alcohol related crime. However, the ability to report alcohol-related crime and antisocial behaviour remains problematic and highly subjective as it relies on police data;
- (l) night time economy violent crime attributed to alcohol has risen over the past 2 years;
- (m) 40 Identification and Brief Advice (IBA) training sessions were delivered to hospital staff during 2017/18, and 1,500 individuals received IBA as part of an intervention plan;
- (n) information and training sessions were conducted at fresher's week at both universities.

Committee members felt that more work could be done around prevention of serving intoxicated people in bars, pubs and clubs. They also felt that reporting around total sales and consumption would be useful, and that the health impacts of alcohol consumption are being forgotten.

**RESOLVED to**

- (1) sign the Nottingham City Health and Wellbeing Board's Physical Activity and Nutrition Declaration and identify an organisational lead to update on its implementation at the November 2018 Board;**
- (2) support the development of a system approach to eating and moving for health and wellbeing;**
- (3) consider recognising physical activity as a standalone priority and the impact this would have within member organisations;**
- (4) sustain the current level of sexual health service provision targeting high-risk groups as a minimum due to the proportion of young people and BME citizens who are at higher risk of poor sexual health;**
- (5) consider to what extent member organisations actively support the smokefree agenda in line with the Tobacco Control Declaration;**
- (6) continue to run the Greater Nottingham Alcohol Pathway meeting;**
- (7) continue to lobby for health input into licensing;**
- (8) develop a pathway, similar to the drugs pathway, for alcohol related crime.**

**22 UPDATE ON SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP AND INTEGRATED CARE SYSTEM**

David Pearson and Hugh Porter from the Sustainability and Transformation Partnership delivered a presentation, highlighting the following:

- (a) Nottingham and Nottinghamshire already have a strong foundation of innovation and collaboration but is now moving from a partnership to an Integrated Care System (ICS) with a clear focus on developing a common purpose for the health and wellbeing of the population;
- (b) the vision for the ICS is to provide sustainable, joined up high quality health and social care services that maximise the health and wellbeing of the local population, and eventually integrate health, care and wider public services;
- (c) outcomes and quality are improving and the costs of budgets are reducing, and a process has been agreed to embed and scale up Integrated Personal Commissioning (IPC) for children and adults with mental health needs. Within Nottingham and Nottinghamshire delivery units will be moving to Integrated Care Partnerships (ICPs) underpinned by local care organisations;

- (d) plans for 2018/19 include spreading of initiatives where the evidence is compelling, integrating commissioning and key services, the planning and delivery of enablers, and building leadership and workforce trust and capability;
- (e) in Nottingham and Nottinghamshire, local healthy life expectancy is too low and shows huge variation. In addition, there are high mortality rates for patients with long-term conditions, elderly and frail people spend too much time in hospital, and there are variable cancer outcomes. An ICP provides the opportunity to blend GP, community and hospital capabilities in a single entity to manage the entire care continuum and common resource;
- (f) work is underway bringing multiple teams together with a common language, shared dashboard and clear processes in place to transfer supported patients between care settings. The number of different forms for transfer of care has been reduced from 40 to 1 and the average weekly supported discharges has increased from 180 to 240;
- (g) the F12 project is developing a single set of referral best practice guidelines for general practice, which is already enabling the standardisation of care. Streamlining of referral support services is now being considered to ensure that patients consistently get the right treatment at the right time in the right place in accordance with best practice guidelines;
- (h) work to date has been supported by ongoing engagement with patients and citizens, including three large public events, close working with HealthWatch and the Citizens Advisory Group, and conversations with patient groups.

**RESOLVED to thank David and Hugh for the information provided.**

**23     ANNUAL UPDATE ON TEENAGE PREGNANCY TO THE HEALTH AND WELLBEING BOARD**

Helene Denness, Public Health Consultant, introduced the report providing an update of incremental progress toward achieving the Council Plan target of reducing teenage pregnancy rates by a further third by 2019, highlighting the following:

- (a) in Nottingham in 2016, the most recently available data, there was a 16.4% decrease in the number of under-18 conceptions. This is good news, but still higher than the all-England average and against some other core cities;
- (b) under 18 conceptions rates are only lower than the all-England average in two wards of the city;
- (c) young women prefer to attend pharmacies and clinics in the city centre as it is more anonymous and due to stigmas;
- (d) challenges in Nottingham include improving equal access to relationships and sex education, adapted services for a more diverse city, and collection of more timely data;

- (e) the Family Nurse Partnership is a universal service, but has a waiting list of over 60 young people.

**RESOLVED to**

- (1) **note the actions, progress and risks outlined in the update report on the teenage pregnancy priority of the Health and Wellbeing Strategy;**
- (2) **identify where the Board and/or Board members can support the achievement of the teenage pregnancy priorities within the Teenage Pregnancy Joint Strategic Needs Assessment (JSNA) chapter.**

**24     NOTTINGHAM CITY HEALTH AND WELLBEING BOARD STAKEHOLDER EVENT**

Claire Novak, Insight Specialist, Public Health, introduced the report providing an overview of the Nottingham City Health and Wellbeing Board's Stakeholder Event, highlighting the following:

- (a) the event was held on Wednesday 6 June at the Council House, and was attended by a hundred people;
- (b) the aim of the event was to improve connectivity with the community and voluntary sector through consultation on Nottingham City's Joint Health and Wellbeing Strategy 2016-2020. It included presentations, stalls, networking, table discussions and a question and answer session;
- (c) response to the event was overwhelmingly positive, with the main negative being that the venue was unsuitable for smaller discussions;
- (d) outcomes from the session will be published on the Health and Wellbeing Board website.

**RESOLVED to consider the ways in which the Board can continue to engage with the wider system in future.**

**25     FORWARD PLAN**

The Forward Plan was noted.

**26     BOARD MEMBER UPDATES**

The Board member updates were noted.

**27     NEW JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) CHAPTER - ASYLUM SEEKER, REFUGEE AND MIGRANT HEALTH**

The new JSNA chapter was noted.

**28     NEW JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) CHAPTER - DEMOGRAPHY**

The new JSNA chapter was noted.

**29     NEW JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) CHAPTER -  
DOMESTIC AND SEXUAL VIOLENCE AND ABUSE**

The new JSNA chapter was noted.

**30     QUESTIONS FROM THE PUBLIC**

None.

**31     EXCLUSION OF PUBLIC**

**RESOLVED** to exclude the public from the meeting during consideration of the remaining item in accordance with Section 100A(4) of the Local Government Act 1972 on the basis that, having regard to all the circumstances, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

**32     HEALTH AND WELLBEING STRATEGY 2016-2020 OUTCOME  
PROGRESS HIGHLIGHT REPORT. OUTCOME 1: HEALTHY LIFESTYLES  
EXEMPT APPENDIX**

**RESOLVED** to note the exempt appendix.

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## Health and Wellbeing Board Action Log

### Outstanding actions:

Ref.	Meeting	Action	Lead	Progress update	Date for completion
170927/07	27 September 2017	Board member organisations to sign the Tobacco Control Declaration and develop action plans to demonstrate their contribution to the achievement of the City's tobacco control priority objectives	All Board members  Shade Agboola Kate Smith	Action plans have been submitted by Nottinghamshire Healthcare Trust, Nottingham City Clinical Commissioning Group, Nottingham University Hospitals and Nottingham City Council. Other Board member organisations haven't submitted an action plan yet. Support and information is available to organisations in relation to both the Declaration and the development of an action plan.	Update on Healthy Lifestyles Outcome to Board in July 2018
170927/08 170927/11	27 September 2017	BME Community of Practice Group to: <ul style="list-style-type: none"> <li>share learning on improving the reporting of Protected Characteristics</li> <li>Develop recommendations of the BME Health Needs Assessment into actions</li> </ul>	Helene Denness Jen Burton	These actions are being progressed by the BME Community of Practice Group.	To be determined by CoP group
171129/08	29 November 2017	Schedule a Development Session on safeguarding issues	Chair/ Alison Challenger	To be held during 2018/19	During 2018/19 Development Session period
171129/09 180725/01	29 November 2017 25 July 2018	Board members (or the organisations they represent) to sign the Physical Activity and Nutrition Declaration and develop action plans as outlined in the Declaration's commitments	All Board members  David Johns	Underway. Progress to be reported to Board meeting in November 2018	November 2018 (for signing of Declaration)
180131/01	31 January 2018	Align metrics of indicators (based on those in NHS and Public Health Outcome Frameworks and MH%YFV) across both the Mental Health and	Mental Health Delivery Group	The Mental Health Strategy is currently being refreshed. A long list of indicators has been established from which the main ones will be identified	Next update on Mental Health Outcome to Board in

Ref.	Meeting	Action	Lead	Progress update	Date for completion
		Health and Wellbeing Strategies from 2018 onwards		following engagement with partners.	November 2018
180131/02	31 January 2018	Board members support the Practice Development Unit through actively promoting the opportunities across their organisations and with their staff in order to encourage wider statutory agency representation	All Board members  Mental Health Delivery Group	Opportunity Nottingham has indicated that the situation has not changed and that the most recent PDU session was on the whole attended by Third Sector colleagues. Opportunity Nottingham intend to raise this with the Commissioning Executive Group.	Next update on Mental Health Outcome to Board in November 2018
180131/04	31 January 2018	Explore in more detail the local reasons for the excess mortality rate in adults with serious mental illness;; and model when a reduction in excess mortality is likely to be seen.	Mental Health Delivery Group	<p>Work has begun to investigate whether this is doable locally and whether Public Health has access to the relevant data.</p> <p>Public Health have consulted analysts in City Council who confirm this would be a complex piece of work requiring partners involvement and a number of assumptions being built into any modelling work. The Local Authority/Public Health do not have access to the Mental Health Minimum Dataset which would be essential to undertake this work.</p> <p>If this specific piece of work is deemed to be a priority i.e. there is indication that Nottingham may differ to the national picture of what contributes towards excess mortality amongst those with SMI then a joint piece of work would need to be planned with Nottinghamshire Healthcare NHS Trust.</p>	Next update on Mental Health Outcome to Board in November 2018
180328/05	28 March 2018	Hold an additional Board meeting specifically to look at the Greater Nottingham Integrated Care System	Chair		Autumn 2018
180328/06	28 March 2018	Report to the Board on how things can/ will be done differently to mitigate	City Council Portfolio Holder	Report scheduled for Board meeting in November 2018	November 2018

Ref.	Meeting	Action	Lead	Progress update	Date for completion
		risks associated with Nottingham City Council's savings to its targeted intervention services	for Adult Social Care and Health/ Alison Challenger		
180530/02	30 May 2018	Range of actions agreed to support delivery of the Healthy Environment outcome of the Joint Health and Wellbeing Strategy	All Board Member	Progress to be reported to Board meeting in January 2019	Next update on Healthy Environment Outcome to Board in January 2019
180725/02	25 July 2018	Range of actions agreed to support delivery of the Healthy Lifestyles outcome of the Joint Health and Wellbeing Strategy	Healthy Lifestyles Delivery Group	Progress to be reported to Board meeting	Next update on Healthy Lifestyles Outcome to Board in
180725/03	25 July 2018	Consider ways in which the Board can continue to engage with the wider system in the future	Chair/ Alison Challenger		

**Completed actions (within the last six months):**

Ref.	Meeting	Action	Lead	Progress update and any comments	Date completed
180328/01	28 March 2018	Range of actions agreed to support delivery of the Healthy Culture outcome of the Joint Health and Wellbeing Strategy	All Board members	Progress to be reported to Board meeting in November 2018 Email sent to Board members on 1 May 2018	November 2018
180530/01	30 May 2018	Circulate the Hospital to Home report	Gill Moy	Report circulated to Board Members by email on 19 June 2018	June 2018

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**HEALTH AND WELLBEING BOARD**

**26 SEPTEMBER 2018**

	<b>Report for Action</b>
<b>Title:</b>	Health and Wellbeing Strategy 2016-2020. Healthy Culture Report
<b>Lead Board Member(s):</b>	Marcus Bicknell
<b>Author and contact details for further information:</b>	Uzmah Bhatti, Insight Specialist (Public Health), Strategy and Resources, Nottingham City Council <a href="mailto:uzmah.bhatti@nottinghamcity.gov.uk">uzmah.bhatti@nottinghamcity.gov.uk</a>
<b>Brief summary:</b>	This report provides the Board with information on strategic developments in relation to the Healthy Culture Outcome of the Health and Wellbeing Strategy 2016-2020.

**Recommendation to the Health and Wellbeing Board:**

The Health and Wellbeing Board is asked to:

- a) note the contents of this report; and
- b) consider what actions Health and Wellbeing Board members can take together to continue to progress the Healthy Culture Action Plan.

**Contribution to Joint Health and Wellbeing Strategy:**

<b>Health and Wellbeing Strategy aims and outcomes</b>	<b>Summary of contribution to the Strategy</b>
Aim: To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities	This report provides the Board with information on strategic developments in relation to Outcome 3 (Healthy Culture) of the Health and Wellbeing Strategy 2016-2020.
Aim: To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy	
Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles	
Outcome 2: Children and adults in Nottingham will have positive mental wellbeing and those with long-term mental health problems will have good physical health	
Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well	
Outcome 4: Nottingham's environment will be sustainable – supporting and enabling its citizens to have good health and wellbeing	

<b>How mental health and wellbeing is being championed in line with the Board's aspiration to give equal value to mental and physical health</b>

<b>Background papers:</b>	None
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<i>Documents which disclose important facts or matters on which the decision has been based and have been relied on to a material extent in preparing the decision. This does not include any published works e.g. previous Board reports or any exempt documents.</i>	None
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## Health and Wellbeing Strategy 2016-2020 Outcome Progress Highlight Report

<b>Completed by:</b>	Uzmah Bhatti	<b>Reporting period:</b>	<b>From:</b>	April 2018	<b>To:</b>	September 2018
<b>Board meeting:</b>	26 <sup>th</sup> September 2018	<b>Next meeting at which this Priority Outcome will be discussed:</b>		28 <sup>th</sup> September 2018		

**Priority Outcome: Individuals and groups will have the confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing**

### Themes:

1. Services will work better together through the continued integration of health and social care that is designed around the citizen, personalised and coordinated in collaboration with individuals, carers and families
2. Individuals and groups will have confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing
3. Citizens will have knowledge of opportunities to live healthy lives and of services available within communities
4. We will reduce the harmful effect of debt and financial difficulty on health and wellbeing

### For information

Key Progress to bring to the Board's attention:

<b>Progress on metrics in this reporting period:</b>	<p><b>1. Increase in effectiveness of reablement (Ciara Stuart)</b></p> <p>Newton Europe were commissioned to support the Greater Nottingham health and social care community to reduce Delayed Transfers Of Care. A 6-week diagnostic was undertaken which included a focus on reablement support. The diagnostic identified that 46% of people reviewed were not discharged to their ideal place of care and a significant proportion of these would have benefitted from reablement. This prompted the question at the Summit convened to discuss the results <i>'CAN WE FURTHER EXPLORE THE UTILISATION AND TIME TO REABLE OF OUR REABLEMENT TEAMS IN ORDER TO INCREASE CAPACITY?'</i></p> <p>The recommendations from the Newton Europe diagnostic have been adopted by the A&amp;E Board and form part of the Board's plan.</p> <p>Year To Date performance is 87.8% against a target of 79%. The last few months have been over 95%. Last reportable month, January, saw performance at 98%. The end of 2016-17 and beginning of 2017-18 saw the service settling into new ways of working following a reorganisation. Since the service has been stable it has performed exceptionally well against this metric.</p> <p><b>2. Reduction in delayed transfers of care (DToC) (Ciara Stuart)</b></p> <p>The DToC methodology to calculate the metric has been revised nationally. Nottingham City is in the lowest-performing band of Health and Wellbeing Boards for both NHS and social care delays. A 30% reduction is expected from NHS delays and a 40% reduction in Social Care delays from the Quarter 3 2017-18 baseline. The</p>
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	<p>amended 2018-19 methodology, while still giving challenging targets for DToC reduction between June and September 2018, is more responsive and realistic. There has now been agreement from the A&amp;E Board that they will monitor the Better Care Fund DToC metric alongside the 3.5% acute DToC target to allow for a better understanding of flow across the system.</p> <p>Actions this period to reduce DToC have included:</p> <ul style="list-style-type: none"> <li>• Community beds for Enhanced needs patients (20 bed) is now live</li> <li>• Significant impact/improvement on medically safe (MSFD) list and Delayed Transfer of Care (DToC)</li> <li>• Discussions started with West Leics CCG to start discussions regarding out of area agreement/SOP to improve repatriation of D2A patients.</li> <li>• Funding from Home First Board supported for City Council rehab model review extended for 12/52 to explore opportunities across County and City</li> </ul> <p><b>3. A decrease in the percentage of citizens who report, through the Citizen Survey, that they struggle to keep up with bills and credit commitments.</b></p> <p>23.6% is an increase on the previous year which fared particularly well, but figures remain within target. Of the 23.6%, 21.6% were struggling to keep up whilst 2% were behind with bills.</p> <p><b>4. An increase in the percentage of citizens who report, through the Citizen survey, that they know where to go for advice, help and support if they are experiencing financial hardship.</b></p> <p>The baseline was set last year. This year has seen an increase which is slightly under target.</p> <p><b>5. PHOF – Children in low income families (all dependent children under 20)</b> (Published on a 2 year delay) Locally set aspirations base on “<i>A New Approach to Child Poverty: Tackling the Causes of Disadvantage and Transforming Families Lives</i>” which sets out the Government’s approach to tackling poverty for this Parliament and up to 2020. This strategy meets the requirements set out in the Child Poverty Act 2010, focuses on improving the life chances of the most disadvantaged children.</p>
<p><b>Key progress on delivery of action plans themes in this reporting period</b></p>	<p><b>1. LION – Online directory (Karla Banfield)</b></p> <p>LiON has been operational since May 2016 and had 56,000 users and 272,000 page views within the last 12 months. The Health and Care Point is currently using LiON to signpost citizens to appropriate activities and services. There are over 2,000 services registered on LiON and LiON has been embedded within the Adult Social Care Community Led Pathway.</p> <p>The way internet users view or find information online is changing. Traditionally a user who uses Google to search the internet would view text-based results, i.e. an article or webpage. However, this trend is changing and there is an increased emphasis on video content. Therefore, as part of our strategy, we are producing videos and dynamic content to be uploaded to LiON (and LiON’s YouTube channel) around key themes that impact citizen’s lives. The videos and other dynamic content needs to get the message across in under 60 seconds, as generally there is a 50% drop off rate after 40 seconds.</p> <p>Next Steps:</p>

- Continue to promote and market LiON to the wider workforce and citizens.
- Develop a Wellbeing Wheel that will sit on LiON and use the information within LiON. The wheel will be used as part of the social prescription/health coaching pathway.
- Further development to the What's On pages, which will enable easier navigation of events/activities.
- Continued development of 60-second videos to communicate key messages to citizens. This in response to the changes in surfing habits of internet users.

## **2. Self Care (No update received since March)**

- Social Prescribing roll out to all City GP Practices is completed. Work is underway with Community Pharmacies, Community Led Support project, Employment and Housing to improve access to social prescriptions – currently only available through a GP or a member of the GP Practice Team.
- In preparation for adopting the Greater Nottingham Model in Quarter 3/ Quarter 4 this year the City's model is adopting a face to face health coaching assessment approach and using the "Patient Activation Measure" as an outcome measure. This update to the City model will go live in April. Working with GP practices to identify CoPD patients who would benefit from health coaching/a social prescription.
- Working with LiON to develop the Wellbeing Wheel – this will be used as part of the social prescription/health coaching pathway. This will deliver the online self-assessment tool for self-care that will have longevity if the LiON and Notts Help Yourself directories merge.
- 2017 Self Care Aware Campaign promoted a more traditional self-care/wellbeing message about taking time for yourself. Care Delivery Group specific leaflets promoted local activities and a standardised back page of 10 top tips to take a break and feel good. Leaflets were distributed to all GP Practices, Leisure Centres and Libraries across the City and this was backed up by a social media campaign during the week through the Council's twitter, facebook and email newsletter channels.

## **3. Assistive Technology (Dave Miles)**

The integrated Assistive Technology (AT) Service continued to grow in 2017/18 and by March 2018 had supported 9800 citizens to have lived more independently, with 7,200 currently with equipment. The Service retains very high satisfaction levels. There have been many case studies produced to evidence the impact the Service has on citizens' independence and safety.

In May 2018 service delivery was re-focussed to be targeted at citizens in receipt of a social care service, and to support social care demand management. This is common as best practice in most local authorities and reflects the budget pressures the service is under. As in many areas citizens have the opportunity to self-fund to support themselves where they want equipment but do not meet eligibility to be provided with it. Whilst there has been a drop in citizens being referred for AT there has been a promising level of citizens self-funding with an equipment package to meet need and budget. The Service is embarking on a marketing campaign to raise awareness on the new funded service eligibility criteria as well as raising awareness as to the range of equipment available and funding options to choose from.

## **4. Financial Resilience (Peter Morley)**

Following austerity and budget cuts, it has become necessary to reduce funding to financial vulnerability advice services. Work is underway with internally delivered and externally commissioned services to understand how to transform delivery from the

year 2019/20 onwards to manage services with a reduced budget.

Analysis showed that the implementation of a shared free phone number for citizens and the consequent advertising of this would put undue demand on services that are already operating at capacity and triaging effectively. Instead, it had been agreed to put in place a phone number for professionals to refer into the service and to support them to ensure citizens who come into the service are 'advice ready'. This work is unlikely to go ahead however, due to the reduction in budget for the service. It is not now clear if this is a viable approach within the future budget.

Work took place between March and June to review and consult on current provision and national and local context in order to inform the design of a model that will deliver effective, quality services that meet the demand for accessible financial vulnerability advice services in the City within available resources. Analysis was undertaken to understand if there is any difference between the internal Welfare Rights Service and externally commissioned services.

A consultation event took place with stakeholders from a range of agencies, including (among others) adults and children's social care, welfare and benefit advice providers, the voluntary and community sector, faith groups, the University of Nottingham, Nottingham Trent University and Public Health.

A programme of work is in the process of being worked up following consultation. There are a number of foci to the work which include: a joint approach to identifying and applying for additional funding, joined up working, a communications strategy, preparing for Universal Credit, working with big business to harmonise corporate social responsibility policies, developing the money and skills page on Ask LiON, among others.

A meeting is planned with Experian, Nottingham Rotary, The University of Nottingham and other stakeholders to finalise action planning to deliver the above and assign tasks to individuals. Experian have partnered with us to supply project management assistance, link us into other big business support and to support with the formulation of a communication strategy.

The communications strategy will focus on:

- Giving **citizens** information, for example about the risks of high cost credit, where they can go for help/advice, reducing the stigma of seeking help early, sources of affordable/ethical credit, raising awareness of Universal Credit risks, accessing all of their entitled benefits.
- Giving **frontline workers** information, for example about how poverty and financial resilience are connected to the issues with which they are supporting citizens, how and where their clients can access advice services and the benefits of advice services to the cohort they are working with (i.e. that advice services raised £19m of additional benefit income and managed £4.2m of debt in 2017/18).
- Developing Ask LiON to provide information on where to access services and light touch information about prioritising debt, access to credit, how to save, accessing the full benefit entitlement etc.

## **5. Integration (Gemma Poulter)**

As part of the Integrated Care System development one of the key interventions is to develop recommendations for outcome measures and Key Performance Indicators that will be system wide.

In light of this larger project and due to financial pressures, it was decided as part of

the joint financial recovery work which reviewed Better Care Fund spend to pause the Patient Centred Outcomes work. It was agreed by the Health and Wellbeing Board Commissioning Sub Committee that funding identified for the PCOM project would be redirected to the Better Care Fund savings.

#### **Primary Care Multi-disciplinary Teams**

The Primary Care Mental Health Service has been in place since January 2017. The service inputs into the Multi-disciplinary Teams and provides a bridge between GP, secondary mental health services and wider health and social care teams.

The CCG Executive Team is currently reviewing plans to develop a primary care pathway for mental health and align this across Greater Nottinghamshire. A draft plan will be shared in April.

A LTC Psychological Therapies pilot is underway which joins up physical and mental health support.

#### **Health and Care Point (NHCP)**

The performance delivered by NHCP is high and on average 95% of calls are answered in a timely manner. A range of performance measures are analysed and reported on a monthly basis in order to enhance demand management and excellent citizen outcomes.

Prior to the changes made at NHCP in January 2017 there was a high number of complaints received about the service mainly from citizens and professionals who were unable to get through on the telephone lines. Since January 2017 there have been no complaints received about the service and a number of compliments have been received.

Performance improvement achieved includes: a high number (around 70%) of citizens have their needs resolved at first contact with NHCP and are successfully signposted or connected to appropriate services as well as being provided with relevant information, advice and guidance from the skilled operatives at NHCP. Improved outcomes are being achieved in this way for citizens whose needs cannot be met via connection to alternative services via the use of 3 different pathways which include: a second conversation at one of the local authority's Community Together Surgeries where a citizen can meet with a social care practitioner to discuss their needs and how best to meet this within services available in their local community; up to a maximum of 6 weeks reablement support from our in house reablement service to enable the citizen's independence to be maximised to enable them to live as independently as possible; the Early Intervention Occupational Therapy service provides a responsive occupational therapy service advising citizens on appropriate equipment to purchase in order to maximise independence and through the issue of equipment to enable citizens to manage their needs independently.

Citizens who are connected to alternative services are contacted 2 to 4 weeks after their initial contact with NHCP to find out whether their needs have been met and to seek feedback on the service. All information gathered from these contacts is used by the responsible managers to inform service improvement and delivery.

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## Healthy Culture 2016/17 Action Plan

Version Control			
Version	Date	Change Details	Author
0.1	26.10.16	New template populated	Helene Denness
0.2	21.12.16	Reablement targets added Assistive technology - Missing target group added Version Control added	Uzmah Bhatti
0.3	Jan-Mar 2018	Based on advice from Christopher Curtis (CCG Head of planning, performance and QIPP) Reablement and DOTC baseline changed to actuals for 15/16, targets updated, actuals added and rag rated.  Baseline set for Financial hardship targets based on 2016 survey.  Review of plan due to changes in landscape over past 2 years affecting themes and outcomes  Theme 1 Action: <i>“Work with HEE to create a sustainable workforce to support integration and community care”</i> removed due no progress being planned at this stage at STP level.  Theme 1 Action: <i>“Development of a shared outcomes framework to ensure that we are all working to improve citizen outcomes”</i> removed as has now moved to STP footprint.  Voluntary Community Sector actions led by NCS Action: <i>‘Development of sector wide tracking system to help particularly smaller organisations monitor the number of referrals and track client progress’</i> removed as is not being taken forward at this time.	Uzmah Bhatti
0.4	September 2019	Dashboard updated	Uzmah Bhatti

Distribution			
Version	Name		
0.1	'Rachel.Jenkins@nottinghamcity.nhs.uk'; 'Joanne.Williams@nottinghamcity.nhs.uk'; 'dave.miles@nottinghamcity.nhs.uk'; Karla Banfield <Karla.Banfield@nottinghamcity.gov.uk>; Peter Morley <Peter.Morley@nottinghamcity.gov.uk>; Chris Wallbanks <Chris.Wallbanks@nottinghamcity.gov.uk>; Steve Thorne <Steve.Thorne@nottinghamcity.gov.uk>Bicknell Marcus <Marcus.Bicknell@gp-c84704.nhs.uk> (Marcus.Bicknell@gp-c84704.nhs.uk) Maria Ward <mariaw@nottinghamcity.nhs.uk>		
0.2	As above		
0.3	Name	Job title	Healthy culture role
	Dr Marcus Bicknell	GP/HWB member	HWB sponsor

	Helene Denness	Public Health Consultant (NCC)	Public Health Lead
	Uzmah Bhatti	Insight Specialist Public Health (NCC)	Coordinator
	Dave Miles	Assistive Technology Specialist (CCG)	Assistive technology lead
	Peter Morley	Commissioning Manager	Financial vulnerability lead
	Karla Banfield	Market and Business Partnership Manager (NCC)	LION lead
	Rachel Jenkins	Senior Project Manager – Health & Social Care Integration (CCG/NCC)	Self-Care Lead
	Ciara Stuart	Assistant Director Out of Hospital Care	Health & Social Care Integration
	Rebecca Cameron	Head of Membership Services (CVS) – replaces Maria Ward	VCS contribution to plan
	Steve Thorne	Communications & Marketing Manager (NCC)	Comms support to plan
	Health & Wellbeing Board		
0.4	As above, new self-care lead not confirmed.		

**Priority Action: Individuals and groups will have the confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing**

Headline measures / metrics	Metric/ KPI (inc. source and definition)		Baseline	Target and Actual Performance				Commentary
			15/16	16/17	17/18	18/19	19/20	
1	Increase in effectiveness of reablement – proportion of >65 yr olds at home 91 days after discharge from hospital	Target		77.6%	79.0%	80.0%	TBC	Targets are developed each year, based on performance, as part of the Better Care Fund (BCF) planning process. Stretch targets have been set in order to reflect expected outcome improvements for citizens after the integration of health and social care reablement services in 2016/17.
		Actual	74.7%	75.5% <b>A</b>	88.7% <b>G</b>	June 18 93% <b>G</b>		
2	Reduction in delayed transfers of care – number of delayed days aged 18+	Target		13473	6498	5264	TBC	The delayed transfers of care target is set by NHSE and was based on performance using a 3 month baseline based on Quarter 3 2017/18 data.
		Actual	13546	14,232 <b>R</b>	15,342 <b>R</b>	(Q1) 3317 <b>G</b>		
3	A decrease in the percentage	Target		26%	24%	22%	20%	Increase from previous year but

	of citizens who report, through the Citizen Survey, that they struggle to keep up with bills and credit commitments.	<b>Actual</b>	28% (2015)	20.2% <b>G</b>	24% <b>G</b>			still within target
<b>4</b>	An increase in the percentage of citizens who report, through the Citizen Survey, that they know where to go for advice, help and support if they are experiencing financial hardship.	<b>Target</b>			64%	66%	68%	Baseline set from new question in 2016 survey
		<b>Actual</b>		62% (2016 baseline)	63.3% <b>A</b>			
<b>5</b>	PHOF 1.01i– Children in low income families (all dependent children under 20)	<b>Target</b>		29.4	27.2	25.0	22.8	(Published on a 2 year delay) Locally agreed aspirations based on <a href="#">government approach to tackling poverty for this Parliament and up to 2020</a> .
		<b>Actual</b>	31.6%	33.6% <b>R</b>	28.5% <b>R</b>			

## Priority Groups

Older people, people with physical and/or learning disabilities, people with long-term conditions, mental health problems and/or dementia and those living in deprived households.

The Citizen Survey report identifies areas of the City that have the highest percentages of citizens 'struggling to keep up' financially (see table below). Locality based interventions will be focussed in the areas of the highest need.

Area/CDG	Wards	2015	2016	2017
1	Bulwell, Bulwell Forest	33.2	22.1	28.1
2	Basford, Bestwood	27.9	18.5	26.5
3	Aspley, Bilborough, Leen Valley	33.9	28.3	24.2
4	Arboretum, Dunkirk and Lenton, Radford and Park	26.6	17.3	20.7
5	Berridge, Sherwood	26.0	19.5	24.6
6	Dales, Mapperley, St Ann's	29.0	17.2	30.1
7	Wollaton East & Lenton Abbey, Wollaton West	12.5	20.3	16.7
8	Bridge, Clifton North, Clifton South	22.3	20.1	17.3

Percentages of citizens 'struggling to keep up' financially

Cohorts especially negatively affected by financial vulnerability include:

- Citizens with mental health issues
- Families
- Citizens with physical disabilities, sensory disability, learning disabilities and/or chronic illness
- Refugees and asylum seekers
- Elderly citizens
- Citizens with drug and alcohol misuse issues
- Young people
- Care leavers
- Citizens with experience of intimate partner abuse
- Job seekers and/or citizens in work and on low pay/in insecure employment
- Users of health and social care services
- Ex-offenders

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
Theme 1: Services will work better together through the continued integration of health and social care that is designed around the citizen, personalised and coordinated in collaboration with individuals, carers and families.								
Implementation and development of a Making Every Contact Count (MECC) programme across partner organisations to enable identification, brief advice and referral (inc. healthy lifestyles and self-care).	Agree strategy and identify named link workers in sectors outside of health and social care such as fire and rescue, police, third sector organisations including VAPN and CYPN and develop processes to incorporate self-care actions into care planning.  Resources identified and in place.  Training delivered to relevant staff and programme begins.	Strategy in place and increased involvement from relevant agencies in multi-disciplinary team process.	✓ G				CCG Rachel Jenkins	MECC included in STP workforce development enabling workstream delivery plans.
		Delivery plan signed-off.		✓ A				STP footprint MECC delivery plan under development. Anticipated sign off during Quarter 2 2018/19.
		Increase in number of contacts to lifestyles services from agencies identified.			✓	✓		
Multi-disciplinary teams will include mental health support.	Development of training programme for identified staff.  Implementation of support	Citizens experience well-coordinated care from a team who are aware of each other's interventions.	✓ G				CCG Ciara Stuart	Primary Care Mental Health Service has been in place since January 2017. The service inputs into the MDTs and provides a bridge between GP, secondary mental health services and wider health and social care teams.
		Citizens only tell their story once.		✓ G	✓	✓		CCG Executive Team is currently reviewing plans to develop a primary care pathway for mental health and align this across Greater Nottinghamshire. A draft plan will be shared in April.  A LTC Psychological therapies pilot is underway which joins up physical and mental health support.
		Care plan will include actions for physical and mental health where appropriate.	✓ G	✓ G	✓	✓		
Continue to implement fully	A reablement service offering the right level of care support	70% of citizens will increase their (activities	✓ G					Integration on hold during CCG Out of Hospital reprocurement.

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
integrated reablement and urgent non-elective H&S care services to enable citizens to be as independent as possible.	and appropriate clinical interventions is accessible to citizens when they need it.	of daily living) ADL outcome measure score on exit from the service.						New service to commence in July 2018.  Anticipating support from Newton Europe to support DToCs and this will be focused on reablement.  Yet to agree a standard care plan to roll out but that is part of the workshop on 28 <sup>th</sup> March however MH is part of the MDT core team so will be considered in the care planning process.  We will continue to work towards integrated reablement through a range of forums.
	Teams will be relocated with joint operational processes in place.	All 'supported' transfers of care from NUH will access reablement (unless there is a recorded reason for exclusion).	✓ G	✓ G	✓	✓		
	Access to the service will be through the community triage hub only to ensure appropriate utilisation of the service.	Alliance agreement in place to support service delivery through the Joint venture.	✓ A					
Children's Health and Social Care Integration for 19 year olds. Page 30	Development of an Integrated service specification.	The functions of the Health Visiting Service, Family Nurse Partnership, School Nursing Services, Breastfeeding Peer Supporters, the Children's Nutrition Team and the Early Help Service have been incorporated into integrated teams.	✓ G				NCC Helene Denness  Chris Wallbanks	The milestones have been met and a preferred provider for the Children's Public Health Service has been appointed. This new service will commence in April as planned. PH services listed have been integrated within the contract awarded, BUT, the integration with our Early Help Service will evolve over the next 2 years. This process will be overseen and Governed by a Joint Executive Group.
	Pathway of services and interventions agreed with partners.				✓			
	Procurement of integrated service by April 2018.				✓			
	Delivery of integrated service.				✓	✓		
Theme 2: Individuals and groups will have confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing.								
Rollout of the self-care approach across the city based on the model and learning from the	Complete evaluation of pilot to inform roll-out.	Evaluation report and recommendations published	✓ G				CCG Rachel Jenkins	Evaluation completed mid 2016. Social prescribing now rolled out citywide. Changes made to model – moved from telephoned based signposting service to face-to-face health coaching. Patient
	Establish strategy for city-wide roll-out defining which of the following elements will be used	Strategy agreed absorbed into STP priority 1.		✓ G				

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
Bulwell & Bulwell Forest Self-Care Pilot.	and where: <ul style="list-style-type: none"> <li>• Social Prescribing</li> <li>• Community Navigators</li> <li>• Web-based Self-Care Directory</li> <li>• Self-Care hubs to access directory</li> <li>• Community clinics</li> </ul> Agreement and sign-up of partners to rollout plan  Implementation	Delivery plan in place – roll out completed.		✓ G				activation measure licences (PAM) being released from NHSE Feb18 to enable more quantitative evaluation as well as case studies. Self-Care directory incorporated into LION. Self-care planning tool for LION to go live summer 2018 (enable users to develop individual self-care plans).  Currently targeting CoPD patients linked in with community led support hubs (Linda Sellers). Promoting through via LION.
		Expand to Greater Nottingham self-care model.			✓	✓		
		Increase use of social prescribing in targeted areas, increase in use of self-care hubs and directory			✓	✓		
		Implement Self-assessment tool (online or app) available to enable citizens to identify areas of their lifestyle that could benefit from adopting self-care practices.			✓			
Deliver an annual Self-Care Aware campaign across Nottingham City to promote the national Self-Care week.	Awareness raising and information materials agreed and produced in accessible formats.	Increased citizen awareness and understanding of self-care. self-care is contributing to citizens leading a healthier lifestyle.  Self-care is contributing to citizens managing long term conditions.	✓ G	✓ G	✓	✓	CCG Rachel Jenkins	2016- Partnership with LAEO – Notts TV presence and leaflets  2017 – Self care campaign in partnership with LION – Care Delivery Group (CDG) specific leaflets with generic self care messages, top tips, local CDG based services. Social media campaign led by NCC comms. Activity limited by budget constraints.  2018 – Notts wide campaign with city focus, (hearts and minds). YouTube videos being considered. Vignettes. Linking in with LION.  Calendar of community events established, Will scale up to Greater Notts in the forthcoming
	Calendar of community events established to provide information, advice and support and encourage self-care. Link with other campaigns throughout year and incorporate SC messages			✓ G	✓	✓		

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
								self care comms and engagement strategy due out in the Autumn
Provision of an up-to-date web based directory of activity that is the “citizen hub”.	Web based directory is developed which is accessible including printed versions, audio, translated, easy read etc.	Web based directory in place and accessed regularly.	✓	✓	✓	✓	NCC Karla Banfield	LiON is being embedded in to the Community Led Pathway (better lives, better outcomes) and will be used by the workforce to connect citizens to activities and services within their locality. A wellbeing wheel is being developed to help citizens, carers and the workforce access the information easily on LiON and develop a person centred care plan that includes community connections alongside more traditional services and activities.
		The number of unique hits increase year-on-year.	Establish baseline (Mar17)	Target				
				10k	20k	30k		
				Actual				
	41k G							
Encourage providers, citizens and workforce to populate, rate and use the online directory.	Use of Google analytics will show usage by citizens from different demographic groups establishing equitable access.	700 adult social care providers are signed up to the directory by 19/20	Establish baseline	Target				
		500		600	700			
		Actual						
	500							
	The majority of providers will be registered within 2 years.	500 health care providers are signed up to the directory by 19/20		Target				
		300		400	500			
		Actual						
		303						
	Additional providers will come in to the market but there will be some net movement.	800 number of other providers of services signed up to directory by 19/20		Target				
600		700	800					
Actual								
	1600							
Provide accurate and up to date information to enable citizens to self-manage a range of needs and empowering them with healthy choices.	Establishment and promotion of the directory	Percentage of citizens stating that as a result of the information they were empowered to manage their situation better by 19/20.	Establish Baseline	Target				
				Actual				
		Percentage of providers reporting high level of satisfaction of services		Target				
				Actual				
Percentage of the workforce	Target							

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
					Actual			
		reporting that LION offered up to date, and satisfactory advice to citizens.						
Establish Nottingham Health & Care Point (NCHP - an integrated citizen triage function to support access to appropriate services).	A metric is developed and piloted that identifies and records service ‘hand-offs’ (callers being transferred between services).	% of calls answered	✓ G	✓ G			CCG Rachel Jenkins pre Jul17  NCC Gemma Poulter	New telephone number and health and social care advisors at NCHP– went live January 2017. Handed over to NCC mid-2017 and no complaints received since January 2017. Service receiving compliments. Bulk of calls received from professionals in partner agencies asking for telephone numbers for voluntary sector organisations
		Citizens only need to describe the issue once and receive the right support at the right time having their needs met at first contact						
Expand the use of assistive technology to support proactive care.	Increase in referrals for assistive technology services for priority groups:- <ul style="list-style-type: none"><li>To prevent a hospital admission / support a timely discharge;</li><li>To prevent / delay residential care admissions;</li><li>Adults with long term conditions;</li><li>Adults with dementia;</li><li>Adults with learning disabilities.</li><li>Disabled young people</li></ul> High levels of user/carer satisfaction evidenced by evaluation.	There is a sustained increase in the number of citizens who have received support through AT to live independently.	Target				NCC/ CCG Dave Miles	Due to budgetary pressures 2018 onwards focus to shift to prioritise citizens in receipt of social care package/services to continue to be supported through services. Citizens not in receipt of such services will need to self-fund to receive the service. This aligns provision with other local authorities.
			8071	9571	11071	12571		
		There is an increase in the satisfaction ratings from citizens and their carers who use assistive technology.	Actual					
			8300	9677	10216 (Q1)			
			Target					
			85%	87%	89%	90%		
			Actual					
			91%	93%	92%			
Theme 3: Citizens will have knowledge of opportunities to live healthy lives and of services available within communities								
Production of joined-up communications with Nottingham		Successful delivery of shared messages through local channels.	✓ G	✓ G	✓	✓	NCC James Blount	Being done at STP level. Official communications protocol drawn up and agreed to ensure consistent messages from

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
City CCG and the VCS via VAPN and CYPN on the integrated care agenda								partners. Monthly meeting to manage this. Voluntary and community sector not yet involved. E.g. recent winter pressures campaign
Promote campaigns on Healthy Lifestyles and Mental Wellbeing.	Delivery of campaigns to give citizens knowledge and tools to make the right decisions to have a healthy culture.	Successful delivery of campaigns through local channels	✓ G	✓ G	✓	✓		National campaigns and local activity aligned to relevant Health and Wellbeing Strategy areas. E.g. Time to Talk, Mental Health Weeks, Sexual Health Campaigns,
Clear and consistent messages.	Agree key messages and key lines-to-take with the Health and Wellbeing Board	Clear, signed-off agreed messages on all aspects of health and wellbeing	✓ G	✓ G	✓	✓		Monthly HWB e-newsletter with over 5.5,000 subscribers
	Key spokespeople identified to speak on topics related to health and wellbeing.	Spokespeople identified	✓ G	✓ G	✓	✓		Clearly identified designated spokespeople in STP comms protocol
Signposting to relevant help, advice and support.	Ensure there is clear information on public website and through leaflets and social media including in easy read formats.	Easy access to information for children, adults and older people	✓ G	✓ G	✓	✓		Social media activity e.g. 'My Nottingham' followed by over 100,000 people on Twitter
Communities will work together to challenge stigma around mental health, disability and other protected characteristics.	Participation in national campaigns and initiatives such as <i>Time to Change</i> .	Time to Change (TTC) campaign takes place on an annual basis	✓ G	✓ G	✓	✓	NCC Equalities Team	Organisational TTC pledge signed by then councillor Alex Norris to reduce mental health stigma. NCC secured funding to become regional hub for TTC.
	Equalities team to lead on 3 priority groups (BME, disabled and LGBT) targeted in communities.	HWB members support weeks of action led by equalities team.	✓ G	✓ G	✓	✓		LGBT - Supporting the CCG to carry out research around Mental Health within the LGBT community of Nottingham. International Day against Homophobia, biphobia and transphobia community event. Partnership with Notts County football Club to eradicate homophobia, biphobia and transphobia with sport. LGBT external Consultative and Scrutiny

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
								Board.  Disability - Milestones as follows: Disability Involvement Group meets quarterly; Consultation with representatives from local disability groups about NCC policies and developments; Celebration of Disability History Month.
Communities will work together to develop a healthy, inclusive culture that is adapting to the needs of different citizens.  Page 35	Nottingham works towards identifying opportunities where actions will also contribute to Dementia Friendly, Age Friendly, Autism Friendly etc status	Nottingham develops a reputation as a healthy, inclusive community	✓ A	✓ A	✓	✓	NCC Sharan Jones/ Helene Denness	Nottingham has WHO Age Friendly status.
	Nottingham runs annual Michael Varnam awards to recognise and encourage community based empowerment and change		✓ G	✓ G	✓	✓		'Age Friendly' monthly bulletin via 'Stay connected' with a reach of >5k citizens  'Take a Seat' for older people campaign to reduce loneliness achieved national recognition
	Establish Dementia Friendly City Status by 2020					✓		National Autism Friendly status cost requirement cannot be met, however, local autism friendly initiatives such as co-production/social movement and champion models being aligned to new Autism strategy.  Dementia framework being developed. Working towards Dementia Friendly status.
Theme 4: We will reduce the harmful effect of debt and financial difficulty on health and wellbeing								
Develop a Financial Resilience Strategy and Action Plan	Identify key stakeholders including, NCC, CCG and VCS representatives, to be part of the group to drive the creation of the strategy	There will be a coherent and joined up strategy and	✓ G				NCC Peter Morley	Financial Resilience Strategy and Action Plan in place – being implemented by steering group.
	Commitment and resources secured to progress the development of the plan		✓ G					

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
Implement a shared approach to accessing and assessing for financial vulnerability for advice services in Nottingham.  Page 36	Priorities for action identified with SMART actions for implementation	action plan in place to improve financial resilience in Nottingham City. This will have been signed off by and be governed via the Health and Wellbeing Board.	✓ G					Workshops held around 'asking the right questions', 'actioning the right triage', 'identification of wider issues', 'appropriate assessment and signposting'  Some of the previously secured Transformation Challenge Funding will now be used to transform services to mitigate the impact of funding cuts.  Analysis will be undertaken between March and June 2018 to understand if the shared telephone number is still viable in light of funding reductions
	Partners signed up to plan. Strategy and plan are dynamic and responsive to priority needs and issues arising from communities and the local financial resilience groups		✓ G	✓	✓	✓		
	Develop shared assessment approach with providers	Citizens and professionals report that they know how to access financial resilience services across the City and that there is a consistent approach from services to assessing and dealing with citizens' need.	✓ G					
	Roll out shared assessment methodology across advice services in Nottingham		✓ G					
	All providers using shared assessment process principles standardised quality, processes and positive outcomes for citizens across advice services in Nottingham		✓ G					
	Analysis work to scope the feasibility, practicality, potential benefits and timescales of implementing a shared telephone number and access arrangements for advice services in Nottingham.		✓ R	✓ R				
Introduce new approaches to help prevent or intervene sooner against financial difficulty	Develop and agree proposals to use Transformation Challenge Fund and reinvestment monies to reduce the occurrence and/or severity of financial difficulty. Examples (to be agreed) include: <ul style="list-style-type: none"> <li>Training for frontline staff (e.g. from health services,</li> </ul>	Evaluation indicates that people have been helped to avoid the occurrence or escalation of financial difficulty through access to preventative advice and support	✓ R					Was to be funded via transformation challenge award – being re-evaluated considering the current financial situation

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
	social care, support for families and VCS) to aid earlier detection and support <ul style="list-style-type: none"> <li>Preventative courses or other advice / information for citizens at risk</li> <li>Locating advisors within other services including VCS</li> </ul>							
Develop locality based services e.g advice centres/surgeries in communities to serve specific local needs  Page 37	Groups will be supported to identify opportunities to: <ul style="list-style-type: none"> <li>Increase uptake of debt and advice services</li> <li>Increase citizen income</li> <li>Increase awareness of affordable credit</li> <li>Increase financial capability education</li> <li>Support citizens to save</li> <li>Mitigate the impact of the switch to Universal Credit</li> <li>Support the cohorts of citizens most at risk of financial vulnerability.</li> </ul>	Increased successful activity in locality areas with higher need evidence through the annual report.  Fairer access to assistance in line with need across the City		✓				Consider Area survey to be conducted via Area Teams/Councillors to measure perceived impact.  Switch to Universal Credit is currently on pause.  Five groups have been set up in locality areas: Aspley, St Ann's, Sneinton, Bulwell, Meadows. Some of these have been incorporated into local employment and skills forums. There is a varying degree of continuing engagement across these groups. There have been challenges in maintaining some of these due to a lack of financial support or administrative resources.  Local area committees have had presentations aimed at sharing learning about local financial vulnerability issues.  There has been a successful bid for funding from Awards for All (Lottery). This is to carry out detailed interviews with people

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments
			16/17	17/18	18/19	19/20		
								who have experienced financial difficulty. This is in order to better understand financial and debt problems in localities and to tailor services to better meet need.
<b>Voluntary and Community Sector Actions led by NCVS</b>								
VCS organisations will have an understanding of the self-care agenda and how they can contribute to the integrated care agenda.	Development of regular training to ensure that VCS are kept informed	Via the VAPN and CYPPN organisations will receive up to date information on the agenda and regular information to inform contribution to the integration / self-care agenda.	✓ G				NCVS Rebecca Cameron	Self-care and integrated care agendas information regularly shared with the networks. An IPC specific event is planned for 22/3/18. Organisations have been encouraged to use LiON for their own services and to find out about local services for their clients. The Nottingham and Nottinghamshire self-care website has also been widely promoted.
	Delivery of Training for VCS on MECC and self-care			✓ G	✓	✓		
	Links established to community navigators project and community clinics.			✓ G				
VCS organisations will be aware of where they can find out about local services.	Promotion of the self-care Nottingham website, NCVS database and the proposed Nottingham City Council city wide directory.	VCS organisations are aware of local services and are directing citizens to the appropriate service.	✓	✓ G	✓	✓		
VCS Organisations will refer to local services, such as lifestyles services in partnership with clients.	VCS organisations will work with local services to implement measures to enable them to track the progress of clients referred to other services.	Tracking shows sustained increase in referrals from VCS to local services. Access to these services enables citizens to make positive changes to their lifestyle.		✓ G	✓	✓		

**HEALTH AND WELLBEING BOARD**

**26 SEPTEMBER 2018**

	<b>Report for Resolution</b>
<b>Title:</b>	Better Lives Better Outcomes: a new strategy for sustainable adult social care in Nottingham
<b>Lead Board Member(s):</b>	Catherine Underwood, Director of Adult Social Services and Transformation
<b>Author and contact details for further information:</b>	Helen Carlin, Transformation Programme Manager- Adult Social Care <a href="mailto:helen.carlin@nottinghamcity.gov.uk">helen.carlin@nottinghamcity.gov.uk</a>
<b>Brief summary:</b>	Nottingham City Council has a new draft strategy for adult social care and would like to invite members of the Health and Wellbeing Board to take part in the consultation.

**Recommendation to the Health and Wellbeing Board:**

The Health and Wellbeing Board is asked to:

- a) consider the draft adult social care strategy and give feedback to help inform the final strategy.

**Contribution to Joint Health and Wellbeing Strategy:**

<b>Health and Wellbeing Strategy aims and outcomes</b>	<b>Summary of contribution to the Strategy</b>
Aim: To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities	The adult social care strategy contributes to outcome 3 of the Health and Wellbeing strategy- 'there will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well'. We are calling our strategy 'Better Lives Better Outcomes', which reflects our ambition for Nottingham to be one of the best cities for adults in need of support to live well. A key part of this is promoting independence and the aim is for citizens to remain independent and live in their own homes for as long as they are able to or choose to. We will work with all citizens and communities, their needs, aspirations, skills and resources, to build their resilience and independence. We will ensure that citizens have access to the right information and support services.
Aim: To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy	
Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles	
Outcome 2: Children and adults in Nottingham will have positive mental wellbeing and those with long-term mental health problems will have good physical health	
Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well	
Outcome 4: Nottingham's environment will be sustainable – supporting and enabling its citizens to have good health and wellbeing	

<b>How mental health and wellbeing is being championed in line with the Board's aspiration to give equal value to mental and physical health</b>
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The strategy sets out aims for all citizens in need of adult social care services including those with mental health issues. For these citizens, we will help them move towards recovery. Delivering improved outcomes and managing demand by focusing on prevention and early intervention, promoting independence and working with citizens in their communities has a strong resonance with the recovery model in mental health, focusing on supporting good quality of life and building resilience rather than just treating symptoms.
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<b>Background papers:</b>	None
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<i>Documents which disclose important facts or matters on which the decision has been based and have been relied on to a material extent in preparing the decision. This does not include any published works e.g. previous Board reports or any exempt documents.</i>	None
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## **Better Lives Better Outcomes: a new strategy for sustainable adult social care in Nottingham**

**Report to Health and Wellbeing Board, Wednesday 26<sup>th</sup> September 2018**

We have a new draft strategy for adult social care in Nottingham and we would like to invite members of the Health and Wellbeing Board to take part in the consultation on our strategy.

This new strategy contributes to outcome 3 of the Health and Wellbeing strategy- *'there will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well'*. We are calling our strategy *'Better Lives Better Outcomes'*, which reflects our ambition for Nottingham to be one of the best cities for adults in need of support to live well. A key part of this is promoting independence and our aim is for citizens to remain independent and live in their own homes for as long as they are able to or choose to. We will work with all citizens and communities, their needs, aspirations, skills and resources, to build their resilience and independence. We will ensure that citizens have access to the right information and support services.

For citizens with mental health issues, we will help them move towards recovery. Delivering improved outcomes and managing demand by focusing on prevention and early intervention, promoting independence and working with citizens in their communities has a strong resonance with the recovery model in mental health, focusing on supporting good quality of life and building resilience rather than just treating symptoms.

### **Context:**

Nottingham needs a sustainable social care system to help people live better lives. Despite a growth in demand for health and social care services, funding to Councils from Government has fallen significantly in recent years and so maximising the effectiveness of the money we spend is more important than ever.

To be sustainable we need to be:

- Supporting people to do what they can for themselves
- Helping friends and families to provide the best possible support for each other
- Providing connections to others who can help from within Nottingham's caring communities.

Where people do need more support, that support will promote wellness and maximise independence. For those who can pay for and arrange their own services, we will signpost them where necessary.

This draft strategy sets out how we intend to better support adults in Nottingham. At the heart is the development of a financial strategy to enable a sustainable social care system. We are calling our strategy *'Better Lives Better Outcomes'*, which reflects our ambition for Nottingham to be one of the best cities for adults in need of support to live well.

In 2017-18, Nottingham City Council supported over 7,300 older and disabled adults, along with over 1,500 carers, spending in total over £100m on adult social care. However, adult social care services are under increasing pressure: demand is increasing due to longer life expectancies and people living with longer periods of long term ill-health, the National Living Wage is having a significant impact on care costs along with inflation and funding from national government to local councils has been cut year on year. Nottingham faces the double impact of higher levels of deprivation meaning a greater proportion of citizens rely on state support, alongside lower levels of funding raised through council tax. The cost of providing adult social care has begun to outstrip the available resource and this is not sustainable.

**The strategy:**

Our new strategy is all about a sustainable approach to supporting older adults and disabled people. It sets out our ambition to change the way we work with citizens, communities and partners so that we are able to achieve good outcomes within the resources available. It is based on a principle of promoting independence: that we will work with citizens and communities, their needs, aspirations, skills and resources, to build their resilience and independence.

The four themes in the strategy will underpin our approach and we are inviting citizens, communities and other partners to work with us in this new framework. This will mean changing the way we work together with a relentless focus on getting the best outcomes with the whole range of resources we have available between us.

**Prevention:** promoting healthy lifestyles and intervening early when people's wellbeing is at risk to avoid crisis and loss of independence.

**Community Connections:** ensuring citizens are connected to the resources and support in their local neighbourhoods, ensuring no one is socially isolated and lonely.

**Independent Lives:** supporting personal and community resilience, strengths and resources, reducing dependence on council funded support where possible.

**Choice and Control:** seeing the citizen in the driving seat, shaping solutions around the outcomes which matter for individuals.

This is not a quick change. It is a radical reset of adult social care in Nottingham and as such will take time and commitment to put in place.

**Consultation:**

We are inviting citizens, families, communities and partners across the City firstly to help us shape this strategy and then to play a full part in delivering Better Lives Better Outcomes in Nottingham. Consultation started on 6<sup>th</sup> August and will run until 30<sup>th</sup> September.

The online survey and summary strategy document are available through the NCC Engage website:

<https://www.nottinghamcity.gov.uk/engage-nottingham-hub/open-consultations/adult-social-care-strategy/>

We also have printed copies of these and an easy-read version of the questionnaire. The full version of the strategy is also available on request.

**Next Steps:**

Following the end of the consultation period, survey responses will be analysed and feedback used to inform our final Adult Social Care strategy. The final strategy will be taken to Nottingham City Council Executive Board in October and Full Council in November for approval. We will then implement the new strategy from the start of 2019.



# **Better Lives Better Outcomes:**

a new strategy for sustainable  
adult social care in Nottingham  
DRAFT



## Message from Councillor Sam Webster, Portfolio Holder for Adult Social Care & Health

**Nottingham needs a sustainable social care system to help people live better lives.** Despite a growth in demand for health and social care services, funding to councils from Government has fallen significantly in recent years and so maximising the effectiveness of the money we spend is more important than ever.

To be sustainable we need to be:

- Supporting people to do what they can for themselves
- Helping friends and families to provide the best possible support for each other
- Providing connections to others who can help from within Nottingham's caring communities.

Where people do need more support, that support will promote wellness and maximise independence. For those who can pay for and arrange their own services, we will signpost them where necessary.

This strategy sets out how we intend to better support adults in Nottingham. At the heart is the development of a financial strategy to enable a sustainable social care system. We are calling our strategy **Better Lives Better Outcomes**, which reflects our ambition for Nottingham to be one of the best cities for adults in need of support to live well.

The four themes in the strategy will underpin our approach and we are inviting citizens, communities and other partners to work with us in this new framework:

- 1) **Prevention:** promoting healthy lifestyles and intervening early when people's wellbeing is at risk to avoid crisis and loss of independence.
- 2) **Community Connections:** ensuring citizens can connect to the resources and support in their local neighbourhoods, ensuring no one is socially isolated and lonely.
- 3) **Independent Lives:** supporting personal and community resilience, strengths and resources, reducing dependence on council-funded support where possible.
- 4) **Choice and Control:** seeing the citizen in the driving seat, shaping solutions around the outcomes that matter for individuals.

# The Strategy for Adult Social Care

## Our Vision

**We will enable all older and disabled citizens in Nottingham to live as independently as they can, with a connection to their communities. When formal care and support is needed, its aim will be to retain and restore independence. No one will live in residential care unless all other options are exhausted**

## Our Culture

**We will promote independence. We will work with citizens, recognising individuality and diversity and that people are the experts in their own lives. We believe that an independent life is a better life. We will challenge ourselves, and others, to be creative in finding ways to achieve outcomes that reduce reliance on formal care and support services.**

## Better Lives, Better Outcomes



Our approach will have four themes that reflect principles set out in the Care Act:

**Prevention** is at the heart of the Council's offer. It is set out in Nottingham's Health and Wellbeing strategy '*Happier, Healthier Lives*' which aims to increase healthy life expectancy in Nottingham and make it one of the healthiest cities. The Council provides a range of services that promote health such as parks and leisure facilities, places to come together such as libraries and community centres or those that protect people from harm such as those that deal with rogue traders or anti-social behaviour in our community protection services. Our approach will be underpinned by acting to 'prevent, reduce or delay' need for care and support. Early intervention is key to preventing need from increasing unnecessarily.

**Community Connections** and friendship can reduce need and promote wellbeing far better than any 'service-based' intervention. We know that loneliness is damaging for health and wellbeing and drives need for care and support services. We will develop our 'Community Together' surgeries and a team of community connectors across the city, working with partners to connect people to available support and activities. Communities already provide a range of support from looking out for neighbours to more organised arrangements such as self-help, voluntary or faith-based groups and we will continue to build on this as well as initiatives such as Age Friendly Nottingham.

**Independent Lives** are more fulfilling lives. All of our interventions will be enabling in nature. Our reablement service and occupational therapists are experts in helping people to access equipment to support independence. We will also build skills with people who may never have had the opportunity to develop them, for example supporting people with a learning disability to learn skills to live more independently. We will also focus on real and meaningful employment or voluntary opportunities for working age adults through the work outlined in our 'Employment strategy for disabled people'. Equally, where employment is not an option, we will signpost people to benefits to which they are entitled. We will only support a move into residential care when all other options are exhausted.

**Choice and Control** We will focus on outcomes that matter to the individual. People should be able to define what they want to achieve and have choice and control over what happens to them and how support meets their needs. This will be balanced against ensuring support is proportionate to need and limited resources. Where people are at risk of harm, in protecting them from abuse and neglect we will keep their desires and wishes at the heart to enable the outcomes that they want to be achieved.



## Key areas of focus

### Information and advice

Citizens should come to the Council for signposting to trusted sources of advice on a range of issues, including how to source care and support.

LION – Local Information Online Nottingham – is the city’s community directory and the go-to place for information and advice in our communities. We will continue to develop this website to provide the information that helps citizens connect to community resources, find trusted sources of advice and choose the services they want to use.

### Place-based planning

Independent lives are lived in Nottingham’s diverse neighbourhoods and communities. We will work with people and resources in local areas to understand what people need, what works for them and what the available opportunities are. The Council invests in neighbourhoods through local libraries, community protection officers and a whole range of activities and services.

We want to develop place-based plans with local areas where we can identify the key ingredients to support independence and work out how we bring these together in the best way for the citizens in each local area.

### Supporting carers

Some people choose to become a carer; looking after a person you care about is something many of us want to do. However taking on the responsibilities of caring can have a major effect on an individual’s life, often leading to isolation and exhaustion. For adult carers it can affect their ability to work and may lead to ill health. For young carers it can delay their educational progress and limit their social development.

Carers also play a significant role in supporting some of our most vulnerable people in society. Not only does this positively impact on the quality of the life of these people, but also significantly reduces the demand for services, both in the reduction of care packages for those living in the community as well as avoiding or delaying the use of residential care.

The Council is committed to a conversation with carers to revise and develop the Carers Strategy to ensure a robust local offer driven by carers’ experiences, needs and the outcomes they seek in their caring role.

### Whole Life Disability

The Council is committed to creating a Whole Life Disability Programme to support children, young people and their families.

The Whole Life Disability service supports disabled children, adults and their families to improve and maintain independence at the key points in their life. It will reduce the impact of transition between different ages and stages of life by working with individuals, their families and others who support them, to create a seamless experience. From birth, it will ensure that disabled people and their families will have access to the right information and support to be actively included within their communities. It will support them to develop the skills they need to lead a more independent life through employment or becoming active contributors in their community. A strengths-based approach will take account of informal as well as formal networks of support to link people into their own community capacity rather than wrap services around them.

By taking this whole life approach, we will support people when they really need it, but in ways which will retain their independence.

### A new plan for own care provision

The Council provides an extensive range of direct care and support services including reablement, day services, specialist home care, residential and respite care. We are committed to our own services being driven by outcomes and supporting independence. For example, our new Nottingham Pathway team supports people with a learning disability to develop the skills and confidence to meet their outcomes within their communities, whether that is moving from residential care into supported living or taking on voluntary work and joining a community group as an alternative to attending a day service.

As part of our Strategy, we will develop the Council’s own direct care and support services, building on the changes they have already put in place to create the most impact for wellbeing.

### Care and support providers

The Council funds care and support services for people who have eligible needs and cannot afford to fund them. The Council also ensures there is a sufficient ‘market place’ of care services in the city, which is diverse and of good quality, regardless of who is funding the services. We have set up new contracts that commit providers to meeting outcomes that support independence. This will help people to develop or regain the skills that make a difference to their lives. We will work with care and support providers to ensure the services we arrange focus on promoting independence and outcomes and that they always offer best value for money.

### Quality Matters

We will drive out poor quality providers and those that pay low wages to ensure the workforce receives a decent wage and terms and conditions, whilst managing the market effectively to end unreasonable cost. Now our resources are stretched, we will continue to work

closely with the Care Quality Commission and our Clinical Commissioning Groups to maintain a robust oversight of quality in care and support services through the Quality Improvement Framework. This allows us to identify concerns early through shared intelligence and to work with providers to ensure local services are safe, effective, caring and responsive.

### Housing

A good home underpins independence and wellbeing. Adults with care and support needs should, where possible, live in their own home and only to move to residential care when all options are exhausted. We are committed to developing solutions that support young people with disabilities to find a home and to have the skills or support to manage it.

Nottingham’s Housing Strategy, *‘Quality Homes for all’*, recognises the importance of appropriate housing for people with care and support needs, especially older adults and adults with disabilities. It commits to improving access to suitable housing, such as bungalows, and lifetime homes suitable for older people, as well as developing new independent living schemes, tackling fuel poverty and homelessness and better supporting tenants to engage with their communities.

Nottingham City Homes (NCH) provides housing for around one fifth of households in the city. We will work together with NCH and other housing providers to respond to the housing needs of older and disabled adults, to address the care and support needs of tenants and to engage with local communities.



## Employment

Our local economy needs to draw upon all of the skills and talents in Nottingham. We often fail to see the assets disabled people bring to the workplace. It is vital that everyone can develop to their full potential and that we create an inclusive city where disabled children and adults are not marginalised.

People who are more distant from the employment market, because of a life-long or acquired disability, must also be a priority. The *'Nottingham Health, Disability and Employment Strategy'* outlines our intention to support people with the most significant disability-related barriers to work to achieve genuine paid employment. We will embed employment in our approach to promoting better outcomes for adults, including recognising the importance for carers to sustain or gain employment.

## Digital and technology in adult social care

We will make sure we are making the best use of technology in our work with citizens by:

- Making information easily available across services and to citizens
- Enabling people to interact with services through digital channels
- Promoting independence and wellbeing through digital technology and devices
- Working better together with the health services through analysing data together
- Using technology to support colleagues in their work

We will also work with care and support providers to ensure their services make good use of technology to promote dignity, quality and efficiency.

## Working with the health services

Adult social care has long-established partnerships with NHS bodies in Nottingham and has already integrated services where we can better support citizens who have health and care needs:

- Nottingham Health and Care Point provides an integrated contact centre
- Care Delivery Groups embed social workers in GP practices
- We make investments from a shared £36m Better Care Fund with the NHS
- We arrange joint packages of care with the NHS, including within the Transforming Care programme for people with learning disabilities/autism and behaviour which challenges.

We will continue to work closely with our local health services to develop integrated health and care. Our priorities for the next three years will include:

- Supporting urgent and emergency care by strengthening the way people are discharged from hospital
- Using data to support better, more consistent medical decision-making
- Identifying funding sources to support further innovation
- Strengthening our ability to identify people at risk and to intervene with effective solutions

## Approach to funding

We will get the best value from the funding we have for social care. This does not mean paying low prices, it means paying the right prices. We expect good value, but Nottingham will also make sure the funding of care services means employees are properly paid. We will seek efficiencies or use technology to remove unnecessary cost so that we can prioritise staff. We will also ensure that we use our available funding fairly between citizens – based on need, on what other support options

are available and on people's ability to fund their own care. We will consider value for money in all care and support we fund, either through services we pay for or through Direct Payments for citizens to make their own arrangements. We will regularly review needs and care and support plans so that we can adjust arrangements over time.

## Our approach to meeting care and support needs

There are key ingredients to maintaining a good quality of life and independence. We will develop ways to ensure these are checked at every contact:

- Social – tackling social isolation
- Physical activity – being active for health and wellbeing
- Finances – maximising income, planning for the future
- Housing – suitable home, planning for the future
- Technology – assistive technology, digital inclusion

## Excellence in social care practice

The commitment and knowledge of social care staff is essential. We will use our expertise to find creative solutions, to signpost to sources of support and, where needed, we will assess needs and agree care plans with citizens. Social care colleagues will ensure they protect people's rights, such as safeguarding, where capacity to make decisions is limited and detention under the Mental Health Act.

## Financial Strategy

We have seen a significant reduction in funding since 2012/13, which will continue. Our strategy will demonstrate a model for financial viability by:

- Securing best value in the services we purchase, working with providers to deliver excellent value
- Challenging ourselves to be at the forefront of efficiency
- Shifting investment into prevention
- Maximising external funding, attracting investment into Nottingham, including opportunities afforded by the Greater Nottingham partnership
- The Council's work to develop the economy of Nottingham, to attract inward investment and thriving business all contributes to fund the care Nottingham citizens will need in the future
- Making the case to Government for Nottingham and for social care.

Without adequate Government funding, Nottingham must make tough decisions about what services it can afford to fund.



## What we offer... and what we ask

We believe that achieving good outcomes within the resources we have available will depend on all of us working differently together.

### Our offer is:

- We will do everything we can to help you live independently. When you need support we will ensure we help you to live your life, meet your caring responsibilities and remain independent
- If you come to us for help, we will treat you as someone with unique talents and strengths which we will help you to identify and use
- If you come to us in crisis, we will work with you to restore your independence and avoid making any permanent decisions until the crisis is over
- We will recognise the caring nature of Nottingham's people and communities and work to connect people and unblock obstacles for our citizens who reach out to help others
- Where people are at risk of harm or neglect we will take account of what you would like to happen in keeping you safe
- Where services are needed, we will ensure that they are of good quality

### Our ask is:

- Look out for others who might be vulnerable and tell us if you think someone is at risk of harm or neglect
- Tell us about anything you are doing or want to do to help others so we can help you to connect others or unblock obstacles
- If you approach us for support, work with us to identify your personal assets and resources as a starting point to meeting need
- If you receive services, tell us if they are not helping you to live your life or if you have any concerns about quality





**We welcome your  
feedback on our draft  
strategy. Please email  
[engage@nottinghamcity.gov.uk](mailto:engage@nottinghamcity.gov.uk)  
with any comments you have.**

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## Adult Social Care Strategy Action Plan

Theme	Action	Date
<b>Employment</b>	We will ensure that all citizens have access to employment support where employment is one of their outcomes.	By April 2019
	We will work with partners in One Nottingham and through Nottingham Jobs to identify how business can make Nottingham an exemplar for the employment of disabled people.	By 2021
<b>Carers</b>	We will support carers in their vital caring role. We will review our support for carers against the new national action plan by January 2019.	By 2019
	We will develop a new joint Carers Strategy with NHS partners during 2019.	By 2020
<b>Care and support</b>	We will develop a strategic plan with partners and work together to ensure a career in care is supported as a valued and structured career in Nottingham.	By 2020
	We will continue to review and reshape our own care and support services to ensure they remain fit for purpose in providing citizens with high quality facilities which meet their outcomes.	2018 – 2021
<b>Health integration</b>	As part of our national Integrated Personal Commissioning Pilot we ensure that all citizens who need health and care services have access to an integrated assessment and integrated Personal Budget.	By 2019
	With our NHS partners we will review our reablement services to ensure they are efficient and available to all who can benefit from them.	By winter 2018
	As part of the Greater Nottingham Partnership we will design integrated health and care services to meet needs of Nottingham's older people.	By 2021
<b>Housing</b>	We will set out our plans to ensure that housing development in Nottingham addresses the needs of older and disabled people and those with mental health issues.	By April 2020

Theme	Action	Date
	We will in partnership with our own housing company Nottingham City Homes and other partners to deliver the homes that older and disabled people need to support their independence and wellbeing.	To April 2021
	We will reduce our use of residential care and will support 100 people to move into supported living, working with Nottingham City Homes and other partners to provide the homes needed.	By April 2019 and beyond
	We will review our Shared Lives service so that it is available to people with dementia and mental health needs.	By October 2019
	We will work with NHS and County Council partners to ensure we have the right housing and support for people with complex learning disabilities and/or autism in the Transforming Care Programme.	By March 2019.
<b>Community Led Support</b>	We will set up Community Together Surgeries in each of our 8 localities in order to connect people with networks and opportunities in their local area.	By October 2019
	We will address social isolation and loneliness ensuring that all citizens with care and support needs are linked in to connections in their community.	By April 2019
	We will develop the Nottingham Pathway to ensure that everyone with a learning disability has the opportunity to develop the skills and connections to live as independently as they are able to.	By 2019
	We want to plan with our communities and partners how we bring together the ingredients to support independence in every neighbourhood. We will develop Place-based Plans with local areas, having the first one in place by March 2019 and all by 2020.	By March 2020
	We will ensure that Council services in the community continue to develop their offer to support older and disabled people to be physically active, including our leisure services.	By March 2020

**HEALTH AND WELLBEING BOARD**

**26 SEPTEMBER 2018**

	<b>Report for Resolution</b>
<b>Title:</b>	Joint Strategic Needs Assessment Annual Report
<b>Lead Board Member(s):</b>	Alison Challenger, Director of Public Health
<b>Author and contact details for further information:</b>	Shade Agboola, Public Health Consultant <a href="mailto:shade.agboola@nottinghamcity.gov.uk">shade.agboola@nottinghamcity.gov.uk</a> Claire Novak, Insight Specialist Public Health <a href="mailto:claire.novak@nottinghamcity.gov.uk">claire.novak@nottinghamcity.gov.uk</a>
<b>Brief summary:</b>	The report provides information on the progress and development of Nottingham City's Joint Strategic Needs Assessment (JSNA) for 2018/19. The JSNA evidence contributes towards improving health and wellbeing and reducing inequalities for Nottingham's citizens. This report requests the Board's endorsement of several recommendations.

**Recommendation to the Health and Wellbeing Board:**

The Health and Wellbeing Board is asked to:

- a) endorse the streamlining approach to chapter production;
- b) endorse the criteria and process for the issuing of supplementary statements to the 2018 Pharmaceutical Needs Assessment (PNA) whereby the Board is consulted on notifications of proposed changes, and for notifications that require a response before the next Board meeting delegate authority to the Director for Public Health to respond to the consultation on behalf of the Board, with the consultation response reported to the next Board meeting; and
- c) note the 2018/19 workplan and progress and development of the Joint Strategic Needs Assessment.

**Contribution to Joint Health and Wellbeing Strategy:**

<b>Health and Wellbeing Strategy aims and outcomes</b>	<b>Summary of contribution to the Strategy</b>
Aim: To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities	The JSNA directly informs Health and Wellbeing Strategy formulation and commissioning.  Its contribution cuts across the strategic aims and outcomes in the Health and Wellbeing Strategy.
Aim: To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy	
Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles	
Outcome 2: Children and adults in Nottingham will have positive mental	

wellbeing and those with long-term mental health problems will have good physical health	
Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well	
Outcome 4: Nottingham's environment will be sustainable – supporting and enabling its citizens to have good health and wellbeing	

**How mental health and wellbeing is being championed in line with the Board's aspiration to give equal value to mental and physical health**

JSNA authors consider mental health impact alongside physical health. In addition, several chapters focus specifically on mental health topics.

**Background papers:**

*Documents which disclose important facts or matters on which the decision has been based and have been relied on to a material extent in preparing the decision. This does not include any published works e.g. previous Board reports or any exempt documents.*

None

# JOINT STRATEGIC NEEDS ASSESSMENT ANNUAL REPORT

## 1.0 Background

- 1.1 Nottingham City's Joint Strategic Needs Assessment (JSNA) is an assessment of the current and future health and social care needs of its citizens. The JSNA should identify the needs of citizens as well as highlight inequalities and, in doing so inform priorities, targets and commissioning decisions.
- 1.2 The City's JSNA is produced in collaboration with public health, social care, the Nottingham City Clinical Commissioning Group and the Crime & Drugs Partnership. There are nearly 50 individual chapters covering clinical topics such as diabetes and mental health, behavioural topics such as smoking and alcohol, and vulnerable client group chapters such as children in care and homelessness.
- 1.3 This report provides Nottingham City's Health and Wellbeing Board with an annual update on the JSNA; including key achievements and the 2018/19 work plan.

## 2.0 Governance

- 2.1 Following restructure as a result of the Health and Social Care Act 2012, including the transition of public health to local authorities, there was a lack of clarity regarding the local government arrangements, responsibility and resourcing of the City's JSNA. To address this, the JSNA Steering Group was refreshed in July 2015 to reflect organisational responsibility for the JSNA and the membership of the Health and Wellbeing Board.

## 3.0 Key Achievements

- 3.1 Since the last update to the Health and Wellbeing Board in September 2017, the JSNA Steering Group has met regularly to provide overall guidance and oversee chapter development. This has been an exceptional year with widespread organisational change affecting chapter production, capacity for authorship and owning groups, and membership of the JSNA steering group.

### 3.2 Streamlining chapter production

A proposal to streamline chapter production was supported by the JSNA steering group at the December 2017 meeting. This was in response to requests by authors and a need to improve efficiency to ensure that chapters are succinct, timely and fit with commissioning cycles. To this end, authors are advised to aim for a chapter first draft of 6-8 pages, with a final draft of 10-15 pages. A system of milestone codes to aid monitoring and an escalation procedure was introduced to resolve any blockages. It is recommended that the Board endorse this approach.

## 4.0 The 2018/19 Work Plan

### Pharmaceutical Needs Assessment

- 4.1 Responsibility for pharmaceutical needs assessments (PNAs) was transferred to Health and Wellbeing Boards under the Health and Social Care Act 2012. The Nottingham City Health and Wellbeing Board published its second PNA on 1<sup>st</sup> April 2018, in line with regulations set out in the Act (Department of Health, 2013).
- 4.2 The PNA steering group met in June to reflect on lessons learned and agree criteria for issuing supplementary statements. There was a consensus that the joint City and County process had worked well and should be repeated for the next PNA, due 1<sup>st</sup> April 2021 (unless a new PNA is triggered sooner). It was agreed that the following should be included in supplementary statements:
- Pharmacy closures or consolidations (mergers onto one site)
  - Market entry (new pharmacies)
  - Changes to opening hours affecting evening, weekend or bank holiday opening
  - Changes to supplementary hours/100 hour opening (pharmacies hold 40 or 100 hour core contracts; supplementary hours are additional hours agreed by NHS England)
  - Changes to NHS England (NHSE) commissioned services
  - Any other amendments that NHSE may need to take into account when considering a market entry application.
- 4.3 Supplementary statements are published quarterly on Nottingham Insight. Minor changes to opening hours, names or ownership do not require a supplementary statement. If significant changes to pharmaceutical provision occur, which may warrant a full refresh of the PNA before the 3-year refresh cycle, NHSE has an obligation to inform the local Health and Wellbeing Board as a statutory consultee. It is recommended that the Board takes a view on supplementary statements.

### Chapter and Content Development

- 4.4 The JSNA Steering Group met in April 2018 to finalise the JSNA work plan for 2018/19. The process of transition as Nottingham City CCG moves towards a Clinical Commissioning Partnership (CCP) resulted in the process being delayed and is not fully resolved. In the interim, the JSNA steering group adopted a pragmatic approach to the workplan. For example, a second stage prioritisation process was employed; including an 'acid test' to ensure that chapter production would have considerable impact in the near future. It is recommended that the Board endorse this approach.
- 4.5 There have also been discussions regarding moving the JSNA process to a larger geographical footprint in line with the CCP. Opportunities for joint working with county colleagues were employed with the Pharmaceutical Needs Assessment and Viral Hepatitis chapter, where commissioning or production cycles coincided.
- 4.6 Two chapters that were due for update last financial year are nearing completion. As well as completion of the outstanding chapters, up to an additional thirteen chapters will be refreshed this financial year. A new chapter on Adults with Multiple and Complex Needs (substance misuse, mental ill health, homelessness and offending behaviour occurring simultaneously) will be produced. Further detail on the 2018/19 work plan is contained within Appendix 1.

## 5.0 References

Department of Health. (2013). *Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies*. London: Department of Health.

*The Health and Social Care Act 2012*. Available at:  
<http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>. Accessed: 24/08/2017.

Department of Health (2013). *Pharmaceutical needs assessments: information pack for local authority health and wellbeing boards*. Available online:  
<https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack>. Accessed 24/08/2017.

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# Joint Strategic Needs Assessment Annual Report

## Appendix 1: JSNA Work Plan 2017/18

Chapter	Due	Owning Group	Progress
Adult Mental Health	2019	TBC	0
Adults with Multiple and Complex Needs	2019	Opportunity Nottingham Board	1
Adult Substance Misuse	2019	CDP Executive Group	1
Air Quality	2019	Nottinghamshire Health Protection Strategy Group	1
Cardiovascular Disease	2019	TBC	0
Chronic Obstructive Pulmonary Disease	2019	TBC	0
Demography	2018	JSNA Steering Group	7
Excess Winter Deaths and Cold Related Harm	201718	Health and Housing Partnership Board	2
Falls and Bone Health	201718	Greater Nottingham Falls and Bone Health Oversight Group	3
Housing	2019	Health and Housing Partnership Board	1
Maternity	2019	Local Maternity System Steering Group	2
Musculoskeletal Conditions	2019	TBC	0
Sexual Health and HIV	2019	Sexual Health Strategic Advisory Group	2
Smoking and Tobacco Control	2019	Strategic Tobacco Control Group	2
Stroke	2019	TBC	0

### Key for milestone codes

- 0 Not started
- 1 Engaging stakeholders and working towards a PID
- 2 PID agreed and working on a first draft
- 3 First draft completed and out to consultation

- 4 Incorporating stakeholder comments into final draft
- 5 Final draft completed and waiting for sign-off
- 6 Working on final tweaks
- 7 Publish on Nottingham Insight

# **HEALTH AND WELLBEING BOARD**

**26 SEPTEMBER 2018**

	<b>Report for Resolution</b>
<b>Title:</b>	Amendment to Health and Wellbeing Board Terms of Reference
<b>Lead Board Member(s):</b>	-
<b>Author and contact details for further information:</b>	Jane Garrard, Senior Governance Officer <a href="mailto:jane.garrard@nottinghamcity.gov.uk">jane.garrard@nottinghamcity.gov.uk</a>
<b>Brief summary:</b>	The Board is asked to support a proposed amendment to the Board's Terms of Reference, to add Nottingham City Council Chief Executive as a non-voting member.

## **Recommendation to the Health and Wellbeing Board:**

The Health and Wellbeing Board is asked to:

- a) recommend to Full Council that the Health and Wellbeing Board Terms of Reference are amended to add the Nottingham City Council Chief Executive as a non-voting member of the Board.

## **Contribution to Joint Health and Wellbeing Strategy:**

<b>Health and Wellbeing Strategy aims and outcomes</b>	<b>Summary of contribution to the Strategy</b>
Aim: To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities	The report relates to the governance of the Health and Wellbeing Board, which aims to ensure that it operates appropriately so that it can carry out its role and responsibilities in relation to the Joint Health and Wellbeing Strategy.
Aim: To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy	
Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles	
Outcome 2: Children and adults in Nottingham will have positive mental wellbeing and those with long-term mental health problems will have good physical health	
Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well	
Outcome 4: Nottingham's environment will be sustainable – supporting and enabling its citizens to have good health and wellbeing	

<b>How mental health and wellbeing is being championed in line with the Board's aspiration to give equal value to mental and physical health</b>
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The report relates to the governance of the Health and Wellbeing Board, which aims to ensure that it operates appropriately so that it can carry out its role and responsibilities including fulfilling the aspiration to give equal value to mental and physical health.
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<b>Background papers:</b>	None
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<i>Documents which disclose important facts or matters on which the decision has been based and have been relied on to a material extent in preparing the decision. This does not include any published works e.g. previous Board reports or any exempt documents.</i>	None
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### **Amendment to Health and Wellbeing Board Terms of Reference**

The Health and Wellbeing Board was established by the Full Council of Nottingham City Council. Amendments to the Board's terms of reference and voting arrangements can only be made by Full Council, but the Health and Wellbeing Board must be consulted on proposed changes before they are made.

To reflect evolution in the work of the Board the report proposes an amendment to the membership and voting arrangements to add the Nottingham City Council Chief Executive as a non-voting member of the Board.

The Board is asked to consider this proposal and recommend that the change is made by Full Council at its next meeting on 12 November 2018.

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**HEALTH AND WELLBEING BOARD**

**26 SEPTEMBER 2018**

	<b>Report for Information</b>
<b>Title:</b>	Healthwatch Nottingham and Nottinghamshire
<b>Lead Board Member(s):</b>	Martin Gawith, Joint Chair of Healthwatch Nottingham and Nottinghamshire
<b>Author and contact details for further information:</b>	Jane Laughton, Interim CEO, Healthwatch Nottingham and Nottinghamshire (HWN) <a href="mailto:jane.laughton@hwn.co.uk">jane.laughton@hwn.co.uk</a> 0115 956 5313
<b>Brief summary:</b>	The two Healthwatch organisations in the City and County merged on 1 June 2018. This report provides an update on the remit of Healthwatch, and an overview of current priorities and current challenges.

**Recommendation to the Health and Wellbeing Board:**

The Health and Wellbeing Board is asked to:

- a) receive this update from the newly merged Healthwatch Nottingham and Nottinghamshire.

**Contribution to Joint Health and Wellbeing Strategy:**

<b>Health and Wellbeing Strategy aims and outcomes</b>	<b>Summary of contribution to the Strategy</b>
Aim: To increase healthy life expectancy in Nottingham and make us one of the healthiest big cities	<p>Healthwatch seeks the views of the most vulnerable people in our local community and uses this feedback to influence local health and care commissioners and providers and help to shape improvements.</p> <p>Healthwatch covers the whole life cycle from children to adults</p> <p>Healthwatch has set mental health as a priority area for focus in 2018/19.</p> <p>Healthwatch seeks to promote transparency of communication between organisational and system strategy and the public, and holds these bodies to account for their commitments to the public.</p>
Aim: To reduce inequalities in health by targeting the neighbourhoods with the lowest levels of healthy life expectancy	
Outcome 1: Children and adults in Nottingham adopt and maintain healthy lifestyles	
Outcome 2: Children and adults in Nottingham will have positive mental wellbeing and those with long-term mental health problems will have good physical health	
Outcome 3: There will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health well	
Outcome 4: Nottingham's environment will be sustainable – supporting and enabling its citizens to have good health and wellbeing	

<b>How mental health and wellbeing is being championed in line with the Board's aspiration to give equal value to mental and physical health</b>
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Mental health is one of the strategic priorities of focus for HWNN in 2018/19
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<b>Background papers:</b>	None
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<i>Documents which disclose important facts or matters on which the decision has been based and have been relied on to a material extent in preparing the decision. This does not include any published works e.g. previous Board reports or any exempt documents.</i>	None
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## **Background to Healthwatch**

Healthwatch was created in 2013 under the Health and Social Care Act 2012 to ensure that service users are at the heart of health and social care delivery. The Act stipulates that a local Healthwatch must be an independent organisation that is not-for-profits and run for community benefit only.

Local Healthwatch organisations are commissioned by Local Authorities who receive funding from the NHS. Locally, this led to the creation of Healthwatch Nottingham to serve the City and Healthwatch Nottinghamshire to serve the County.

Healthwatch provides an effective, powerful, representative and independent local public and patient voice for all aspects of health and social care services within the community, including sitting on the Health and Wellbeing Board. Local Healthwatch bodies also support local views in influencing national policy and practice through Healthwatch England.

## **Merger**

During 2017 Nottingham City Council and Nottinghamshire County Council agreed that Healthwatch Nottingham and Healthwatch Nottinghamshire should be combined into one body and this merger took place on 31<sup>st</sup> May 2018. The new organisation is called Healthwatch Nottingham and Nottinghamshire (HWNN).

The advantages of merger are:

- It better reflects the future organisation of NHS services around the Sustainability and Transformation Plans across Nottingham and Nottinghamshire.
- Given the budget reductions both the Local Authorities and Healthwatch are facing the merger provides savings whilst enabling the Healthwatch function to continue.
- It enables the improved use of shared information, data collection and adoption of standard approaches and frameworks, thereby increasing our capability and capacity to deliver evidence and insight work.

## **Scope and Approach**

The key aims for local Healthwatch organisations are:

- Obtaining the views of patients, service users, and the public
- Influencing the planning and delivery of public-centred health and social care services
- Providing feedback, advice and information to help people access health and social care services and support and make informed choices
- Holding commissioners and service providers to account.

The scope of HWNN is all publicly funded services in Nottingham City and Nottinghamshire County, including hospitals, primary care, mental health, community services, residential care, care at home, social services, adults and children's services and public health. The

small team of 10 staff is enhanced by our group of active volunteers who support many of our functions. We also work collaboratively with a range of networks, including the voluntary and community sectors, scrutiny bodies such as the Care Quality Commission, other patient and user groups and engagement processes.

Our values are to be representative of the communities we serve, support the long term sustainability of quality health and care services, to be responsive to current concerns and issues, to ensure that we are transparent in everything we do and to adopt best practice approaches and maintain high standards in our work.

### **Focus on vulnerable groups**

A key strategic aim is to focus on vulnerable groups and the 'seldom heard' to ensure that the voice of these communities is fed back to providers and commissioners of services. We do this by building links to these communities and going out to meet them where they are in their own groups.

We monitor a range of demographic data and other characteristics of those from whom we gather experience data, including gender, sexual orientation, main language, ethnicity and disability. We seek to improve the collection of experiences from any groups that are underrepresented in our data – for example, men, younger people and those from BME communities.

### **Approach**

We collect the views and experiences of local people in a range of ways to ensure that we achieve both coverage (quantitative approaches) and more detailed experiences (qualitative approaches). Quantitative approaches include our 'question of the month' – for example on access and quality of mental health services, and experiences of repeat prescriptions and medication reviews. We collect qualitative insights through our 'Enter and View' programme to care homes, holding 'Talk to Us' points in community centres, libraries and health centres and in depth case studies with individuals over a period of time.

We also undertake commissioned insight projects. Recent examples have included:

- A report for the City and County Adult Safeguarding Boards when we undertook 150 awareness surveys in the City and 250 in the County, with the objective of finding out how well people understood the terms safeguarding, vulnerable adults, what constitutes abuse and who they would report safeguarding concerns to. This report will be used to inform the Boards' communication strategy, raise awareness of the role of the Safeguarding Boards and to demonstrate, 'evidence of community awareness of adult abuse and neglect and how to respond.'
- A report for the Nottinghamshire County Council Public Health Team to undertake 9 focus group discussions to provide insight to inform their commissioning specification for wellbeing services from conversations with members of the public who would benefit from wellbeing services but are not currently using them.

### **Activity and Impact**

In 2017-18 we visited 72 places across the City to talk to people about their experience of health and social care and in addition reached 5,664 citizens in the City through digital

channels. We spoke to 1,134 people in the City about their views and experiences of health and social care and collected 612 detailed experiences.

We analyse the data that we collect through identification of themes, service providers and whether comments are negative or positive. We use this information to provide feedback to service providers, and inform future work programmes. In addition we monitor the impact of our work by following up recommendations we make in our reports, for example a review at the Mary Potter Health Centre of the quality of GP consultation received by people who needed an interpreter present led to an increase in the length of the appointment slots allocated for those needing an interpreter, in order to improve the patient experience and the outcome of GP consultations.

We influence at a strategic level through STP and Transformation Boards, where we provide advice and seek to ensure that leaders include effective communication and engagement with the public in their approach.

### **Priorities for 2018/19**

Our organisational priorities are to:

- augment our expertise and our reach by growing our contracted income and using that to reinvest in our capability
- build our profile and influence
- focus more on the voice of those who are 'seldom heard'
- identify and demonstrate our impact, to ensure greater transparency and accountability
- build our capability and maximise our resource.

In addition to our focus on the seldom heard, we have agreed two further priority areas for 2018/19: the frail elderly and mental health.

The themes were selected based on the strategic context of health and care in Nottingham and Nottinghamshire, intelligence gathered from external meetings and our own evidence and insights. Both themes also require organisations in health and care to work together effectively to deliver good care and therefore test the strength of this partnership working.

### **Challenges**

In order to extend our reach and gather as many views as possible, including from under represented communities, we are looking to recruit more volunteers, especially from the City and from BME communities.

We need to improve how we feedback on our work and communicate with stakeholders – we are planning to start issuing a 6 monthly stakeholder bulletin.

The name of Healthwatch attracts views and experiences from the public mainly about health care. We need to develop better ways on capturing views from the public on the social care that they receive.

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## \Health and Wellbeing Board Forward Plan 2018/19

Submissions for the Forward Plan should be made at the earliest opportunity through Jane Garrard, Nottingham City Council Constitutional Services Team  
[jane.garrard@nottinghamcity.gov.uk](mailto:jane.garrard@nottinghamcity.gov.uk)

Date of meeting	Report title	Lead report author and contact details
28 November 2018	Joint Health and Wellbeing Strategy Mental Health Outcome – Progress	
	Physical Activity and Nutrition Declaration - Progress	Caroline Keenan <a href="mailto:caroline.keenan@nottinghamcity.gov.uk">caroline.keenan@nottinghamcity.gov.uk</a>
	Nottingham City Safeguarding Children Board Annual Report 2017/18	John Matravers <a href="mailto:john.matravers@nottinghamcity.gov.uk">john.matravers@nottinghamcity.gov.uk</a>
	Nottingham City Safeguarding Adults Board Annual Report 2017/18	Louisa Butt <a href="mailto:louisa.butt@nottinghamcity.gov.uk">louisa.butt@nottinghamcity.gov.uk</a>
	Update on Nottingham City Councils fulfilment of public health responsibilities	Alison Challenger <a href="mailto:alison.challenger@nottinghamcity.gov.uk">alison.challenger@nottinghamcity.gov.uk</a>
	Domestic and Sexual Violence and Abuse Services	Jane Lewis <a href="mailto:jane.lewis@nottinghamcity.gov.uk">jane.lewis@nottinghamcity.gov.uk</a>
	Trauma Informed Practice	Donna Stenton-Groves <a href="mailto:donna.stenton-groves@nottinghamcity.gov.uk">donna.stenton-groves@nottinghamcity.gov.uk</a> Sara-Jane Brighthouse <a href="mailto:sara-jane.brighthouse@nottinghamcity.gov.uk">sara-jane.brighthouse@nottinghamcity.gov.uk</a>
	STP and ICS Update (tbc – depending on latest position)	David Pearson
	Forward Plan	Jane Garrard <a href="mailto:jane.garrard@nottinghamcity.gov.uk">jane.garrard@nottinghamcity.gov.uk</a>
	Board member updates	-
	Draft minutes of the HWB Commissioning Sub Committee meeting held on 26 September 2018	-
	New JSNA Chapters	Claire Novak <a href="mailto:claire.novak@nottinghamcity.gov.uk">claire.novak@nottinghamcity.gov.uk</a>

Date of meeting	Report title	Lead report author and contact details
	Public questions	-
30 January 2019	Joint Health and Wellbeing Strategy Healthy Environment - Progress	Nick Romilly <a href="mailto:nick.romilly@nottinghamcity.gov.uk">nick.romilly@nottinghamcity.gov.uk</a>
	STP and ICS Update (tbc – depending on latest position)	David Pearson
	Forward Plan	Jane Garrard <a href="mailto:jane.garrard@nottinghamcity.gov.uk">jane.garrard@nottinghamcity.gov.uk</a>
	Board member updates	Board members
	Draft minutes of the HWB Commissioning Sub Committee meeting held on 28 November 2018	-
	New JSNA Chapters	Claire Novak <a href="mailto:claire.novak@nottinghamcity.gov.uk">claire.novak@nottinghamcity.gov.uk</a>
	Public questions	-
27 March 2019	Joint Health and Wellbeing Strategy Healthy Lifestyles Outcome - Progress	Caroline Keenan <a href="mailto:caroline.keenan@nottinghamcity.gov.uk">caroline.keenan@nottinghamcity.gov.uk</a>
	Annual review of Joint Health and Wellbeing Strategy performance metrics	Caroline Keenan <a href="mailto:caroline.keenan@nottinghamcity.gov.uk">caroline.keenan@nottinghamcity.gov.uk</a>
	STP and ICS Update (tbc – depending on latest position)	David Pearson
	Forward Plan	Jane Garrard <a href="mailto:jane.garrard@nottinghamcity.gov.uk">jane.garrard@nottinghamcity.gov.uk</a>
	Board member updates	Board members
	Draft minutes of the HWB Commissioning Sub Committee meeting held on 30 January 2019	-
	New JSNA Chapters	Claire Novak <a href="mailto:claire.novak@nottinghamcity.gov.uk">claire.novak@nottinghamcity.gov.uk</a>
	Public questions	-

#### Items to be scheduled:

- Review of progress and outcomes of Board members signing up to the tobacco declaration
- Review of progress and outcomes of Board members signing up to the alcohol declaration
- Autism Strategy

**NCVS Report for H&WB Board – Community Sports**

**26th September 2018**

**Disability Sport Insight and Participation Project:**

- The DSIPP is a 3 year programme in partnership with NCC.
- The project is Sport England funded to learn and understand the barriers individuals with disabilities face in order to get physically active.
- The focus of the project is to 'listen and learn' from the experiences of Nottingham's disabled people and disability organisations.
- The intention is to shape Nottingham City's sports offer so it better meets the needs of disabled people and make Nottingham the fastest growing city for disability sports participation in the UK.
- Approx. 300 individuals have been signed up in return for feedback on their experience.
- Feedback is used to inform positive changes across the 8 leisure centres to make the more disability friendly and accessible.
- In addition, NCVS coordinates a Disability Sport Network of disability organisations
- Over 50 groups, organisations and services have joined the DSN representing the needs of their service users.

**Volunteer Buddies:**

- NCVS are submitting proposals to NCC Community Sport and Leisure Centres Team for a Volunteer Buddy scheme
- 'Buddies' will support those with disabilities or long term illness to access Sport and Leisure Centre facilities.
- Individuals needing support will be referred to NCVS from current Sport and Leisure Teams
- Individuals will be matched to Buddies according to need and interests
- Buddies will receive ongoing training and support from NCVS

**Poolside Helpers:**

- NCVS are submitting proposals to support NCC Community Sport and Leisure Team's recruitment and support of Volunteer Poolside Helpers
- NCVS will recruit and induct a team of Helpers who will work across the city supporting and building confidence of disabled swimmers
- NCVS will train S&L managers in the recruitment and ongoing support needs of the volunteers

**Friends of Leisure Centres:**

- NCVS are submitting proposals to assist NCC Community Sport and Leisure Team to develop the current FOLC groups
- NCVS will work with NCC Community Sport and Leisure Teams to recruit more 'Friends' who currently do not use their local sport facilities

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Statutory Officers Report for the Nottingham City Health and Wellbeing Board – 26<sup>th</sup> September 2018

### Director of Public Health

#### 1. Nottingham Time to Change (NTTC)

As I have previously updated, Nottingham hosts one of eight Time to Change Hubs. The NTTC hub vision is to live in a city where people talk openly about mental health problems in the same way as physical health issues and without fear of stigma or discrimination.

Just six months in and NTTC has already exceeded the targets agreed with the national TTC team in March.

- 123 local individuals have expressed an interest in becoming TTC Champions

Champions have been busy attending meetings, participating in training sessions and supporting events where they can talk to members of the public. The national TTC team has been so impressed with the way in which Nottingham has engaged with local BAME communities that they are coming to Nottingham to film and interview individual champions.

- 15 local employers are on their way to completing the TTC Employer Pledge

All HWBB members agreed at the application stage of Nottingham TTC to encourage their organisations to sign the Employer Pledge. If your organisation has not yet started this process, I urge you to contact Sharan Jones, Insight Specialist – Public Health for further information, [sharan.jones@nottinghamcity.gov.uk](mailto:sharan.jones@nottinghamcity.gov.uk)

The coming months will see some key events for the NTTC Hub. Further information will follow but for now the dates for your diary are:

- Official launch of the NTTC Hub at Nottingham Playhouse (Saturday 17<sup>th</sup> November)
- BAME NTTC Champions launch (Wednesday 17<sup>th</sup> October)

#### 2. Know your Blood Pressure

Do you know your blood pressure? When was the last time you had it checked?

High blood pressure is the biggest risk factor for stroke, contributing to over 50% of all strokes. It is always a good idea to know your blood pressure. Nottingham City Council recently welcomed the Stroke association to Loxley House and invited colleagues to drop in, have a blood pressure check and receive information on how lifestyle choices can put you at a greater risk of having a stroke. In return colleagues made a small donation to support the work of the Stroke Association. This was a really popular event with 76 colleagues attending and further sessions planned.

If you would like to offer this opportunity in your organisation you can contact the Stroke Association's local fundraising office: [midlandsfundraising@stroke.org.uk](mailto:midlandsfundraising@stroke.org.uk).

### **3. Be Clear on Cancer – raising awareness of lung cancer in Nottingham**

The latest data from the Office of National Statistics shows that lung cancer continues to be the biggest cancer killer, responsible for in excess of 500 deaths a year in Nottinghamshire and Nottingham City. Early diagnosis is vital to save lives and improve quality of life.

Public Health England East Midlands has launched a 'Be Clear on Cancer' campaign in Nottingham, urging people to see a doctor if they are getting out of breath doing things they used to do, or if they've had a cough for three weeks or more, as these are key symptoms of lung disease. The campaign calls on people to look out for each other and encourage friends and family to visit the GP.

In addition, eligible citizens in Nottingham can participate in the lung cancer MOT project. This is targeted at citizens aged 60-75 years old, living in Aspley, Bilborough and Strelley. Eligible citizens will receive an invitation from their GP practice.

Bill, a resident from Bulwell, who was diagnosed with stage 1 lung cancer after attending a lung health check said, "I'm so glad I went to the lung health check. It saved my life. My doctor said it's given me ten more years of life. If I hadn't gone for that scan, I could be dead in a year's time."

For more information about the campaign, contact Robert Stephens, Insight Specialist – Public Health, [Robert.stephens@nottinghamcity.gov.uk](mailto:Robert.stephens@nottinghamcity.gov.uk)

### **4. International Older People's Day – 1<sup>st</sup> October 2018**

Nottingham is proud to be an Age Friendly City, as recognised by the World Health Association. Held annually, International Older Person's Day, highlights the important contributions older people make to society. In celebration of International Older People's Day, Age Friendly Nottingham will be offering health and wellbeing information days in local communities on the 1<sup>st</sup> October. A seminar, "Employment and Volunteering in Later Life" will also explore how people aged 50+ continue to contribute to society through employment and/or participating in formal/informal volunteering.

The event will take place at Loxley House from 10.20am until 1.00 pm. The morning will include a mixture of presentations and round table discussions with an opportunity to ask questions of the expert panel. Places are limited so booking is essential – please email [healthandwellbeing@nottinghamcity.gov.uk](mailto:healthandwellbeing@nottinghamcity.gov.uk) or call 0115 876 3514 to book a place.

A promotional flyer with all the details of the event including the draft programme can be found at the end of this update.

### **5. Public Health Forums**

As you may be aware, Nottingham City Council holds monthly public health forums. With topic-focussed sessions, these are a great opportunity to learn more about current public health issues and have your say. The next public health forums will be looking at:

- 10<sup>th</sup> October – Oral Health
- 14<sup>th</sup> November – Implications of our ageing population

To find out more, be added to the mailing list or book your place please contact: [healthandwellbeing@nottinghamcity.gov.uk](mailto:healthandwellbeing@nottinghamcity.gov.uk)



**Age Friendly  
Nottingham**

# **Age Friendly Nottingham celebrates International Older People's Day 1 October 2018**

## **Seminar on Employment and Volunteering in Later Life**

Age Friendly Nottingham (AFN) are marking International Older People's Day by holding a seminar that will explore how people aged 50+ continue to contribute to society through employment and/or participating in formal/informal volunteering.

The draft programme for the day includes

- 10.15 Refreshments and registration
- 10.30 Welcome and reflection of Age Friendly Nottingham's Achievements  
*Councillor Eunice Campbell-Clark, AFN's Older Citizens' Champion*
- 10.40 The economic and community contributions of older citizens – reviewing both the national and local positions  
*Rachel Quinn, D2N2 Careers, Employability & Inclusion Manager*
- 10.55 Round table discussions
- 11.30 Break
- 11.50 Volunteering opportunities in Nottingham  
*Jane Todd, OBE, DL, Hon LLB (Interim Chief Executive at NCVS)*
- 12.05 Round table discussions
- 12.30 Question and answer panel
- 13:00 Close

The event will be held in Room LB 41 at Loxley House, Station Street, Nottingham NG2 3NG from 10.30 am until 1.00 pm.

Places are limited so booking is essential – please email [healthandwellbeing@nottinghamcity.gov.uk](mailto:healthandwellbeing@nottinghamcity.gov.uk) for a place or call 0115 8763514

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