

Nottingham City Council Health and Wellbeing Board

Minutes of the meeting held remotely via Zoom and live-streamed on YouTube on Wednesday 24 March 2021 from 1:32pm to 3:20pm

Voting Membership

Present

Councillor Eunice Campbell-Clark (Chair)
Dr Hugh Porter (Vice Chair)
Dr Manik Arora
Councillor Cheryl Barnard
Alison Challenger
Sarah Collis
Councillor Angela Kandola
Michelle Tilling
Sara Storey
Catherine Underwood
Councillor Adele Williams

Absent

Diane Gamble

Non-Voting Membership

Present

Lyn Bacon
Tim Guylar
Leslie McDonald
Jules Sebelin
Andy Winter

Absent

Mel Barrett
Viki Dyer
Julie Hankin
Superintendent Mathew Healey
Richard Holland
Craig Parkin

Tim Brown (substitute for Viki Dyer)

Colleagues, partners and others in attendance:

Sarah Carter - Executive Director, Nottingham and Nottinghamshire
Clinical Commissioning Group
David Johns - Consultant in Public Health, Nottingham City Council
Adrian Mann - Governance Officer, Nottingham City Council

40 Changes to Membership

The Chair held a minute's silence in memory of Helen Blackman, Nottingham City Council's Director of Children's Integrated Services, who passed away earlier in the year.

The Chair noted that this would be the last meeting of Allison Challenger (Nottingham City Council's Director of Public Health) and Lyn Bacon (the Nottingham CityCare Partnership's Chief Executive) as members of the Board, and wished them all of the best for the future.

The Board noted that Sara Storey has joined the Board as Nottingham City Council's Director of Adult Social Care.

41 Apologies for Absence

Mel Barrett
Viki Dyer
Superintendent Mathew Healey
Craig Parkin

42 Declarations of Interests

None.

43 Minutes

The minutes of the meeting held on 27 January 2021 were confirmed as a true record and signed by the Chair.

44 Coronavirus, Testing and Vaccination Update

Alison Challenger, Director of Public Health at Nottingham City Council, and Sarah Carter, Executive Director at Nottingham and Nottinghamshire Clinical Commissioning Group (CCG), provided an update on the impacts and response to the Coronavirus pandemic, and on the associated testing and vaccination programmes. The following points were discussed:

- (a) there is a decreasing trend of Coronavirus cases, with a current rate of 68.8 per 100,000 of population, which is down from 79 in the previous week. This is higher than the national average, but the gap is closing. There has been an increase of asymptomatic testing in schools, to seek to avoid the need of sending all children home when Coronavirus cases occur. However, the decline is starting to slow and may reach a plateau, so caution is still required and the current restrictions must still be observed as the national roadmap to recovery progresses. Nationally, infection rates appear to be higher in the north of the country than the south;
- (b) the Local Outbreak Management Plan has been refreshed to incorporate the current learning, in partnership with the County and the Local Resilience Forum. The Plan covers a range of local authority responsibilities including ongoing surveillance, community testing, enhanced contact tracing, self-isolation support and outbreak management, and seeks to ensure that the response is sustainable in the longer term, enabling communities to live safely with the virus;
- (c) the next phase of the national roadmap will be implemented from 29 March, allowing outdoor sports facilities to open and for groups of up to six or two households to meet outdoors;
- (d) a community testing programme is in place, and asymptomatic tests are being offered to everyone who has to travel to a workplace on a regular basis. One in three people who have Coronavirus display no symptoms, so the testing is vital in revealing infections and enabling people to self-isolate. Over 12,000 tests have been carried out so far, with a positive result in 0.8% of cases. It is important to note that the Lateral Flow tests are for people not showing symptoms of

Coronavirus – people with symptoms should instead take the PCB test, for accurate confirmation;

- (e) the community testing sites are open for extended hours, including at weekends, and will be open until the end of June at least, though they will likely continue for longer. Data on the ethnicity of people receiving tests is not available currently, but the centres are located to be as accessible as possible to all members of the community. It is likely that the temporary testing centre at Djanogly will be relocated in the near future;
- (f) a mobile testing unit is now active in the County, and a similar unit may be introduced for city areas. Arrangements are being finalised for collection systems for home testing, to ensure the best access to testing for citizens. There is close engagement with schools, but it is not yet confirmed whether or not they will be a collection point for home test kits – which may focus around pharmacies. There are extensive communications on testing, using a number of routes, languages and easy-read versions, to ensure that citizens have access to easily understandable information. However, there is always room for further improvement;
- (g) work is being carried out to engage wherever possible with employers and provide strong communications, with assistance from the Council's Economic Development Team, to ensure that their staff participate in regular testing, as an outbreak can be devastating for businesses. The physical and mental wellbeing of employees in general is a significant issue, and organisations should take as many steps as possible to reduce potential vulnerabilities and preserve a healthy workforce;
- (h) the Integrated Care Partnership is leading a proactive vaccination programme, which started on 8 December 2020 from hospital hubs, moving to more local delivery centres with volunteer staffing and good transport links. There has been high usage of the vaccination transport hub. Primary care pop-up clinics have been deployed to areas of lower vaccination uptake (often in BAME areas or communities with higher levels of social deprivation), including in some mosques, and provision is now also possible from a number of pharmacies. Work is underway with community leaders and trusted community venues, including places of worship, to improve uptake. A great deal of early communications focused on explaining what is in the vaccine, though it is important that this messaging is repeated regularly. It is also important that there are staff working at vaccination centres who can speak all of the local community languages;
- (i) more than 115,000 local people have now been vaccinated, including over 90% of all citizens over 70 years old. There has been a focus on the most vulnerable cohorts and communities, with close engagement in place with community groups. The priority cohorts for vaccination have been front-line health services and those with a high chance of mortality if infected by Coronavirus. All people in these cohorts have now been offered a vaccination, and it is aimed to complete vaccinations by the end of June. Second jabs are now being carried out for care home residents and staff;

- (j) vaccinations for people aged 55-59 have begun recently and, by mid-April, vaccinations will be offered to people in the non-priority cohorts on the basis of descending age. Rates are on track to meet the national target by 15 April. There is reasonable assurance that the right staff resourcing will be in place to achieve delivery of the major vaccination programme during May and June, though work is needed for the further recruitment and retention of staff and volunteers, and to ensure resilience – particularly when volunteers on furlough may be returning to regular work;
- (k) ultimately, it is vital that people book and attend their appointments, to ensure the strongest possible protection. Both the Council and GPs do follow up with citizens who have not taken up the offer of a vaccination, or who did not attend a booked appointment – though non-attendance levels are low.

The Board noted the update.

45 Nottingham City Integrated Care Partnership Update

Dr Hugh Porter, Clinical Director of the Nottingham City Integrated Care Partnership (ICP), presented a report on the current position of the ICP and its main priorities. The following points were discussed:

- (a) the ICP is reviewing its programme priorities ahead of 2021/22, in the context of the recent NHS White Paper on health and social care integration and innovation. The first five programme priorities are citizen-facing and have continued to make good progress in their first year, despite operational pressures caused by the Coronavirus pandemic;
- (b) support has been provided to help 70 rough sleepers into sheltered accommodation, which represents a huge change for these vulnerable people, and measures are also in place to secure supported accommodation for young people leaving care. The Opportunity Nottingham funded programme has provided close support to citizens experiencing Severe Multiple Disadvantage. Cases of flu are much lower, but Nottingham is the only core city where the vaccination rates for pregnant women have increased. A significant number of people have accessed support to quit smoking;
- (c) the ICP has been successful in the first round of its funding bid to the Government's 'Changing Futures' programme. The ICP is also seeking to progress further work on mental health and is reviewing commissioning for Children's Services, in support of the City's 'Small Steps, Big Changes' programme;
- (d) the sixth programme priority focuses on developing the ICP itself. ICPs are fairly new and, as such, are always learning and developing. Working is underway with the Clinical Commissioning Group and the Local Government Association to improve governance, and a large piece of work is underway on creating the right culture within the ICP. It is vital for there to be strong messaging with staff and citizens, and there is a great deal of information on the Integrated Care System website;

- (e) there is substantial engagement with the Primary Care Networks (PCNs), with support in place for social prescribers and 22 clinical pharmacists, currently. All care homes are now aligned to a PCN. For 2021/22, the ICP is approaching community mental health and adult social care transformation in the context of a neighbourhood model. Work is also needed on addressing Coronavirus and its long-term health impacts;
- (f) the Committee noted that a tangible difference is being made by the ICP through proactive work with communities. It considered that the work with care leavers and young people is very important, as are the initiatives on prevention. It commented that as much work as possible is needed to drive the integration of care services through a full partnership approach, to address health inequality and support those with Serve Multiple Disadvantages.

The Board noted the report.

46 Health and Wellbeing Strategy and Integrated Care Partnership Alignment Update

Alison Challenger, Director of Public Health at Nottingham City Council, and Dr Hugh Porter, Clinical Director of the Nottingham City Integrated Care Partnership (ICP), provided an update on developing further alignment between the Board and the ICP. The following points were discussed:

- (a) an initial workshop to consider ways of aligning the work of the Board and the ICP, and the delivery of the Health and Wellbeing Strategy, took place on 12 March. A second workshop is scheduled for 20 April to continue to develop the proposals, ahead of a formal report being presented to the Board later in the year.

The Board noted the update.

47 Joint Strategic Needs Assessment: Proposed Approach for 2021/2022

David Johns, Consultant in Public Health at Nottingham City Council, presented a report on the proposed development of Nottingham City's Joint Strategic Needs Assessment (JSNA). The following points were discussed:

- (a) a refresh of the JSNA is underway with partners to align it with the Health and Wellbeing Strategy, which is in turn informed by the Integrated Care System and integrated Care Partnership priorities. The refresh is also intended to make the JSNA as relevant as possible for commissioning partners, taking a place-based approach and promoting neighbourhood delivery at a Primary Care Network level;
- (b) due to the Coronavirus pandemic, the production and review of JSNA chapters has been paused, though three chapters will be coming to the Board in due course. It has also been challenging to produce the statutory Pharmaceutical Needs Assessment, due to reduced capacity, but the national deadline has now been extended to the end of April 2022 and measures are in place to ensure that the Assessment will be delivered on time;

- (c) the Board considered that, ultimately, the health priorities and impacts of Coronavirus must be made as clear as possible.

The Board noted the report and endorsed the proposed approach to the JSNA for 2021/22, with further details on the refresh to be brought to the September 2021 Board meeting.

48 Board Member Updates

Board Members provided the following updates:

- (a) Catherine Underwood, Corporate Director for People at Nottingham City Council, presented a report on the current position and activities of Children's and Adults' Services;
- (b) Jules Sebelin, Deputy Chief Executive at Nottingham Community Voluntary Services, raised concerns about the potential fatigue in the voluntary sector due to the Coronavirus pandemic – particularly when emergency funding sources come to an end. However, a pilot scheme for green social prescribing will be launched shortly, and some good candidates have come forward for the role of Programme Manager.

The Board noted the updates from Board Members.

49 Work Plan

The Chair presented the Board's proposed work plan for the coming 2021/22 municipal year. If members have any comments or suggestions for future items to be considered by the Board, these can be forwarded to Nottingham City Council's Director for Public Health. Issues that can be presented by multiple Board members are particularly welcome.

The Board noted the Work Plan.

50 Future Meeting Dates (Provisional)

The Board noted the provisional meeting dates for the coming 2021/22 municipal year.