

Nottingham City Council

Nottingham City Health and Wellbeing Board

Minutes of the meeting held in the Ballroom, The Council House, Old Market Square, Nottingham, NG1 2DT on Wednesday 26 May 2021 from 1:36pm to 3:15pm

Voting Membership

Present

Councillor Adele Williams (Chair)
Dr Hugh Porter (Vice Chair)
Dr Manik Arora
Councillor Cheryl Barnard
Councillor Eunice Campbell-Clark
Sarah Collis
David Johns
Sara Storey
Catherine Underwood

Absent

Diane Gamble
Michelle Tilling

Ciara Stuart (Substitute for Michelle Tilling)

Non-Voting Membership

Present

Louise Bainbridge
Tim Guylar
Superintendent Mathew Healey
Criag Parkin

Absent

Mel Barrett
Viki Dyer
Dr Sue Elcock
Richard Holland
Leslie McDonald
Jules Sebelin
Andy Winter

Colleagues, partners and others in attendance:

Adrian Mann - Governance Officer, Nottingham City Council
Donna Sherratt - Small Steps, Big Changes Head of Programme, Nottingham CityCare Partnership

1 Appointment of the Vice Chair

Resolved to appoint Dr Hugh Porter as Vice Chair of the Nottingham City Health and Wellbeing Board for the 2021-22 municipal year.

2 Changes to Membership

The Board noted that David Johns has replaced Alison Challenger as Nottingham City Council's Interim Director of Public Health, Dr Sue Elcock has replaced Julie Hankin as the representative of the Nottinghamshire Healthcare NHS Foundation Trust, and Louise Bainbridge has replaced Lyn Bacon as the representative of the Nottingham CityCare Partnership.

3 Apologies for Absence

Mel Barratt	-	Chief Executive, Nottingham City Council
Jules Sebelin	-	Deputy Chief Executive, Nottingham Community Voluntary Services
Michelle Tilling	-	City Locality Director, NHS Nottingham and Nottinghamshire Clinical Commissioning Group
Andy Winter	-	Director of Campus Life, University of Nottingham

4 Declarations of Interests

None.

5 Minutes

The minutes of the meeting held on 24 March 2021 were confirmed as a true record and signed by the Chair.

6 Minutes of the Commissioning Sub-Committee

The Board noted the draft minutes of the meeting of its Commissioning Sub-Committee, held on 24 March 2021.

7 Coronavirus Update

David Johns, Interim Director of Public Health at Nottingham City Council, 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) Coronavirus cases have been reducing over the last couple of weeks following a small rise, with 70 new cases in the last seven days. This represents an incidence rate of 21 case per 100,000 population, which is just below the national average. Infection rates for people aged over 60 are low, but the highest infection rates are in secondary school-aged children. Caution is required in managing the current infection rates and schools do need to be monitored closely. Social distancing requirements must still be complied with to manage the situation effectively;
- (b) nationally, there is an increase in the number and proportion of cases that represent 'Variants of Concern', particularly the 'Indian' strain. This variant has a higher rate of transmission, but its symptoms are not necessarily any more severe and vaccinations are effective after the second dose. It is now the dominant variant in Nottingham, which has seen confirmed cases with no connection to travel, suggesting transmission within the community. S-gene positivity testing is an effective and faster way of identifying variant cases, so work is underway to contact people with the s-gene and help them to self-isolate;
- (c) targeted testing has been carried out in a number of city accommodation blocks, and there was strong participation by residents. Positively, only a small number of cases were found, and support was provided for self-isolation. Full testing has also been carried out at three schools. PCR testing is in place for people who are

showing potential Coronavirus symptoms, while lateral flow test kits are available for regular testing by people not showing symptoms. Instances are still being reported of people using lateral flow tests when they have potential Coronavirus symptoms, so every effort should be made to ensure that people with symptoms know to take the PCR test, and this will be covered in the upcoming national communications campaign;

- (d) work is underway to maximise the capacity for providing vaccinations, including increased opening hours at vaccination centres. The vaccine is now available to people aged 30 and over and walk-in appointments are in place for people aged over 40. The 'vaccination bus' will have an intensified presence in the city over the next two weeks, and appointments do not need to be pre-booked. The bus is now able to provide the Pfizer vaccine. Targeted community engagement and communications to encourage getting a vaccination are underway;
- (e) the Board acknowledged that pop-up clinics are making a substantial contribution to carrying out vaccinations in communities. The universities will be opening again shortly to international students, so it will be vital to work with them closely on doing this safely. Engagement is also needed on managing vaccinations for students if they are likely to be at university at the point when vaccinations are made available to their age groups;
- (f) the Board noted that, at the start of the vaccination programme, there was a lower take-up in areas of higher deprivation. A great deal of work has been carried out since to improve uptake in these areas and it is vital to continue this so the gradient remains flat, but to extremely important to ensure that the disparity does not occur from the start in future vaccination programmes.

The Board noted the update.

8 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 work streams, engaging with Healthwatch and the Nottingham Community and Voluntary Service. Some programmes will be adjusted to ensure that they are not too short-term in scope and have ongoing impetus. Support for care leavers and people with Severe Multiple Disadvantages is progressing well, and there is a strong focus on mental health;
- (b) as much work as possible is underway to achieve joined-up thinking across services to ensure that people with multiple service needs do not reach a crisis point. Partnerships have been developed with specialist services within communities, including with social prescribers. There has been progress around mental health and wellbeing, and there are opportunities to bring a great deal of learning together. A tight, coherent focus needs to be maintained on cohort-based programmes;

- (c) the ICP is developing as an organisation, driven by the NHS White Paper that is moving through the Parliamentary process, and is working alongside the wider Integrated Care System (ICS) to ensure that that the city has the right representation and input. So far, ICP and Board members have had two sessions together to discuss models for affective alignment, going forward;
- (d) the Clinical Commissioning Groups' Locality Team has put a huge amount of effort into ensuring delivery of the Coronavirus vaccines, including through the effective provision of pop-up clinics within communities. The ICP is working with the wider healthcare system to approach the significant upcoming challenges in recovery, and in addressing service backlogs created by the pandemic;
- (e) the Board noted that it is vital for there to be strong partnership working with the voluntary sector with viable strategies in place, including on the best use of social prescribing and how to carry out collaborative commissioning effectively. A compact on working with the voluntary sector is being produced and will be shared with the Board, in order to encourage as wide an engagement as possible;
- (f) co-production as part of a full-system, partnership approach is extremely important, and checks need to be in place to assess how the system performs on hearing and responding to the direct input from service users. Continual 'soft' engagement is vital for people's wellbeing and health, so the ICP is carrying out ongoing 'temperature checks' of all parts of the system to ensure that it is working together effectively on all levels.

The Board noted the report. As co-production will be a significant focus of the system going forward, the Board asked whether the ICS team working on this area would be able to attend a future meeting to discuss co-production further.

9 Small Steps, Big Changes: Impacts of Covid-19 on Expectant Parents, Babies and Children

Donna Sherratt, Small Steps, Big Changes (SSBC) Head of Programme at the Nottingham CityCare Partnership, presented a report on the early findings of research into the impact of Coronavirus on expectant parents, babies and children. The following points were discussed:

- (a) SSBC is a scheme run by CityCare and support by the Community Lottery Fund, with £45million in funding to operate a programme over 10 years. Its four key outcomes are that children should have a healthy and positive social and emotional development, effective and age-appropriate communication and language skills, and good nutrition, and to promote cross-partnership system change. The primary aim is that all children will be ready to learn at 2, ready for school at 5 and ready for life at 16. SSBC places children at the heart and enables parents to lead the process, supported by key specialists and experts. It is committed to co-production and works with parent champions and ambassadors, and a wide range of partners;
- (b) in July 2020, SSBC commissioned the Nottingham Centre for Children, Young People and Families to carry out a study of the experiences of families with children under five during the Coronavirus pandemic. Ultimately, it was found that

Coronavirus has had a significant impact on many families who were already in a difficult financial position when the pandemic began, particularly as it became much more difficult to receive direct support from extended family members. The first 1001 days of a child's life is a critical period for their development, and the impacts of the pandemic on this developmental period are significant. Families from BAME communities have been particularly affected;

- (c) currently, a balance has been created between remote and in-person contact with families, and feedback has been positive on how social workers were able to engage with families during the pandemic. Going forward, creative, partnership-based ways of engaging with families will be vital, and it is important reference and engage actively with fathers. Work is underway to develop better representation of children's voices in service provision and policy development, combat isolation and create more space for outdoor activities. A team has been commissioned around mental health, and a 'child-friendly city' status is being developed, with an officer appointed at the Council to lead on this and connect the project to the right services and resources. It is also important that engagement is carried out in multiple languages, and that these are heard within the system;
- (d) ultimately, the SSBC project has four years of funding left, so as much support as possible is needed for planning ahead to ensure that the programme can be used to its greatest effect, and suitable investment and prevention measures are in place for the future. The best use must be made of the resources available in the system, including working with the relevant statutory services and all possible partners. The funding granted to SSBC is on the basis that it should enhance, rather than replace, existing service provision. Significant public spending has been carried out during the pandemic, which is likely to result in funding challenges in the near future, so it is important to plan the right investment approach for early years to support outcomes and link to the Integrated Care System (ICS) to support transformation. Going forward, it is vital that the ICS takes as much learning as possible from the SSBC programme, to continue to support service provision beyond it;
- (e) following the pandemic, it will be important to consider the different experiences of families as a result of Coronavirus and understand the individual needs of children, to identify how children's services should be prioritised. Some services have not been available during the period, so co-production is required for effective resumption. Particular engagement will be needed in areas of high deprivation, schools and existing neighbourhood organisations, to support children and families in challenging circumstances. Consideration must also be given to addressing the impact of digital exclusion on children as remote delivery is now growing, and how to manage any dis-benefits;
- (f) the Board was concerned regarding the impact of Coronavirus on the SSBC programme, which has time-limited funding, and on how quickly it would be possible to return SSBC to normal service. It hoped that it will still be possible to maintain a strong level of work relating to prevention going forward as a vital means of addressing health inequalities, while not losing the learning and partnerships created by the programme. Planning is required for service provision in the long-term, but a rapid response is also required to address the immediate impacts of the pandemic on families. Co-production with the Integrated Care

Partnership is vital, with full engagement with communities. Ultimately, a ‘child-friendly city’ can only exist if there is a holistic, full-system culture of promoting children’s welfare;

- (g) the Board queried how engagement will be carried out with schools on welcoming pupils back as part of proposals to extend school days for the purposes of catching up, in the context of achieving positive outcomes for children’s mental health, rather than focusing simply on attainment. Local schools are aware of the mental health and social development impacts of the pandemic on children and are seeking to address them. There is an opportunity in schools to share experiences of what went well during the pandemic, as many schools carried out strong work with their pupils, and to address the challenges arising. However, the additional funding for school-aged children is unlikely to bring support for children under three years of age, as there is much more financial assistance planned for mainstream schooling than there is for early years.

The Board noted the report.

10 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 work being carried out by the Council’s Children’s and Adults’ Services;
- (b) a new Chair of the Integrated Care System (ICS) has started and is working to bring the ICS and the Clinical Commissioning Group together, and development sessions have been planned. Consideration is needed as to how the new bodies will work with the Board and its Joint Strategic Needs Assessment (JSNA) both in the city and across the county. Particular attention is required on how integration as set out in the NHS White Paper can be delivered and how the JSNA can be operationalised, while working to ensure that the specific health inequalities within the city are not lost within a larger healthcare system;
- (c) reports are being produced on the impacts upon mothers giving birth during the pandemic, digital inclusion and digital access to healthcare services, and the long-term health impacts of Coronavirus;
- (d) so far, around 3500 Fixed Penalty Notices have been issued by Nottinghamshire Police in relation to breaches of lockdown restrictions. Officers have worked to a strong policy of prevention, to seek to achieve as much compliance as possible. Officers have also been working at vaccination sites and addressing protests, which are reducing in number. Levels of anti-social behaviour increased sharply during the pandemic, but most other crime levels have decreased. However, cases of domestic abuse increased generally during the lockdown period and remain a concern. The pandemic has increased the vulnerability of young people to becoming involved in crime, particularly due to schools not being open. There has been an increase in the number of children going missing, and this can represent a cross-border issue. Issues may also arise when the night-time economy first reopens fully.

The Board noted the updates from members.

11 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.

12 Future Meeting Dates

Resolved to meet on the following dates:

- **Wednesday 28 July 2021 at 1:30pm**
- **Wednesday 29 September 2021 at 1:30pm**
- **Wednesday 24 November 2021 at 1:30pm**
- **Wednesday 26 January 2022 at 1:30pm**
- **Wednesday 30 March 2022 at 1:30pm**