

NOTTINGHAM CITY COUNCIL

HEALTH AND WELLBEING BOARD

MINUTES of the meeting held at Ground Floor Committee Room - Loxley House, Station Street, Nottingham, NG2 3NG on 25 May 2016 from 14.01 - 16.11

Membership

Voting Members

Present

Councillor Alex Norris (Chair)
Dr Marcus Bicknell (Vice Chair)
Councillor Neghat Nawaz Khan
Councillor David Mellen
Alison Michalska
Alison Challenger
Dawn Smith
Dr Ian Trimble
Dr Hugh Porter

Absent

Councillor Steve Battlemuch
Martin Gawith
Helen Jones
Vikki Taylor

Non-Voting Members

Present

Peter Homa
Gill Moy
Simon Smith
Leslie McDonald
Chief Superintendent Mike Manley
Candida Brudenell

Absent

Lyn Bacon

Colleagues, partners and others in attendance:

Christine Oliver	- Crime and Drugs Partnership
James Rhodes	- Strategic Insight Manager
Chris Cook	- Independent Chair, Nottingham City Safeguarding Children Board
Clive Chambers	- Head of Safeguarding and Quality Assurance
Katy Ball	- Director of Procurement and Children's Commissioning
David Pearson	- Corporate Director of Adult Social Care, Health and Public Protection and Deputy Chief Executive of Nottinghamshire County Council
Colin Monckton	- Director of Strategy and Policy
Andy Evans	- Programme Director, Connected Nottinghamshire
Mark Garner	- Project Manager of Opportunity Nottingham
Grant Everitt	- Opportunity Learning and Evaluation Lead for Opportunity Nottingham
Colin Monkton	- Director of Commissioning Policy & Insight
Pete McGavin	- Healthwatch Nottingham
Jane Garrard	- Senior Governance Officer
Catherine Ziane-Pryor	- Governance Officer

1 APPOINTMENT OF VICE CHAIR

The Chair thanked the outgoing Vice-Chair, Dr Ian Trimble, for his contribution and dedication during his time on the Board.

RESOLVED that Dr Marcus Bicknell of the Nottingham City Clinical Commissioning Group, is appointed Vice-Chair for the 2016/17 municipal year.

2 CHANGE TO BOARD MEMBERSHIP

RESOLVED to note that Councillor Neghat Khan has been appointed to the Board in place of Councillor Sally Longford.

3 APOLOGIES FOR ABSENCE

Councillor Steve Battlemuch
Helen Jones
Martin Gawith

4 DECLARATIONS OF INTERESTS

None.

5 MINUTES

The minutes of the meeting held on 30 March 2016 were confirmed as a true record and signed by the Chair.

6 FINAL DRAFT OF THE JOINT HEALTH AND WELLBEING STRATEGY 2016 TO 2020

James Rhodes, Strategic Insight Manager, introduced the report which presented the final draft of the 'Happier Healthier Lives: Nottingham Joint Health and Well-being Strategy 2016 to 2020' prior to its release for consultation, with the overarching aim to increase healthy life expectancy and reduce health inequalities across the City.

The strategy focuses on the following outcomes:

- 1) adults, children and young people in Nottingham adopt and maintain healthy lifestyles;
- 2) adults, children and young people in Nottingham will have positive mental well-being and those with long-term mental health problems will have good physical health;
- 3) there will be a healthy culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill-health;
- 4) Nottingham's environment will be sustainable; supporting and enabling its citizens to have good health and well-being.

It is intended that consultation on the final draft strategy will take place during June, with the final strategy presented to the Board for approval in July with detailed action plans presented to the Board for approval at the September meeting.

It was noted with regard to measuring the success of the strategy, there will be some areas in which progress will be hard to gauge so not all areas will be measured with KPIs but the achievement of the broader outcomes will be considered.

Comments from the Board included;

- (a) there is a clear logic to align with the Clinical Commissioning Group's strategic priorities;
- (b) the outputs from implementation of the strategy need to be measurable to identify for citizens and the Board when outcomes are not on track;
- (c) the strategy is welcomed, however some of the graphics could be modernised;
- (d) recognition of the role of third sector is welcomed and it will be interesting to see how the third sector can help deliver the strategy;
- (e) the strategy is well written with good graphical information but further detail and consideration of presentation would be beneficial within the mental health section of the strategy which needs a greater emphasis;
- (f) consideration should be given to removing 'Core Cities' references as many citizens are unclear of what this actually means.

The Chair thanked James and his team for their hard work in producing and progressing an excellent piece of work and requested that all members of the Board contribute to the strategy's consultation.

RESOLVED

- (1) to approve the final draft for consultation with partners, providers and stakeholders;**
- (2) to note the next steps and timetable as outlined within the report.**

7 GREATER NOTTINGHAMSHIRE NHS SUSTAINABILITY AND TRANSFORMATION PLAN

David Pearson, Corporate Director of Adult Social Care, Health and Public Protection and Deputy Chief Executive of Nottinghamshire County Council, and Colin Monckton, Director of Strategy and Policy Nottingham City Council jointly presented the report on the Greater Nottinghamshire NHS Sustainability and Transformation Plan, and delivered a presentation which was added to the online agenda following the meeting.

The following points were highlighted:

- (a) the Nottinghamshire five-year Sustainability and Transformation Plan is required to be completed by the end of June 2016 although further, more detailed planning will be required following the initial submission;
- (b) the plan will provide mapping for more sustainable health care and support systems;
- (c) the three main focuses are on addressing gaps in the following areas;
 - (i) Health and Wellbeing;
 - (ii) Care and Quality;
 - (iii) Finance and Efficiency;
- (d) it is important to ensure the objectives and strategies of the plan reflect national and local pressures, taking account of the specific health needs of pockets of population;
- (e) the needs of the population are increasing faster than any potential increase in funding and a key aspect of the Plan is ensuring future financial sustainability. This is a challenging issue and therefore the NHS, local authorities and partners need to work collaboratively, ensuring collective ownership of the Plan so it can progress and maintain momentum;

- (f) existing services and strategies need to be built on with joint working on 'big ticket' issues to ensure the best outcomes;
- (g) there needs to be a culture change to enable different health approaches including promotion of self-care, prevention and self-motivation;
- (h) medical needs will have to be more broadly met within the community, including explanations and clarification of risks and how these should be managed;
- (i) to date there has been progress in identifying the key health inequality and finance gaps which currently exist
- (j) there is a £460 million funding gap if nothing is done to transform the NHS, but current initiatives can contribute approximately £300-£350 million;
- (k) the four main priorities include:
 - (i) urgent and emergency care
 - (ii) prevention, self-care and promoting independence;
 - (iii) primary and community services;
 - (iv) technologically enabled care;
- (l) the Plan will be submitted to the July meeting of the Board for approval.

Board Members' questions were responded to as follows:

- (m) no age groups are specifically mentioned as the broadest view needs to be maintained to ensure an holistic approach;
- (n) raising the healthy life expectancy is important as Nottingham's average age is currently 61 years for men and 64 years of age for women;
- (o) it is intended that the NHS and Local Government work together to develop and deliver the Plan. It is unusual that the lead is from a local authority but the lead officers are working well together, illustrating the common commitment to improving local services;
- (p) the voluntary sector needs to be engaged with delivery of the Plan

Board Member's comments included:

- (q) many citizens are not clear on their responsibility with regard to self-care so this area in particular needs improved engagement;
- (r) the new approach to IT is positive and may well shape social care in the future;

RESOLVED to note the progress in developing the Nottinghamshire Sustainability and Transformation Plan, and the likely benefits in improving the Health and Wellbeing of Nottinghamshire citizens, and the long –term sustainability of the health and social care system.

8 LOCAL DIGITAL ROADMAP UPDATE

Andy Evans, Programme Director, Connected Nottinghamshire, presented the report which was accompanied by a presentation

- (a) the Local Digital Roadmap (LDR) has to be submitted with the Sustainability and Transformation Plan (STP) at the end of June, setting out a five year vision for technology across the Nottinghamshire footprint area which sits within the region of the Midlands and East of England, outlining how the golden thread of technology will support addressing the identified gaps of:
 - (i) health and wellbeing;
 - (ii) finance and efficiency;
 - (iii) care and quality;
 - (iv) (informally recognised) culture.
- (b) the Connected Nottinghamshire Programme is co-ordinating development of the LDR, for which Rushcliffe is the Lead, focusing on interoperability and the development of Integrated Digital Care Records with LDR members which include:

- (i) Local Authorities;
 - (ii) Primary Care Providers;
 - (iii) Hospital Trusts;
 - (iv) NEMS;
 - (v) Circle Partnership;
 - (vi) EMAS;
 - (vii) PICS;
 - (viii) CHP;
 - (ix) CityCare, and
 - (x) Patient representative groups;
- (c) potential funding may be available from the 'Developing Digital Maturity Fund' with progress of development reviewed assessed annually in the following key areas:
- (i) universal capabilities, including managing of digital maturity;
 - (ii) supporting the ambitions of the STP;
 - (iii) achieving paperless working at the point of care by 2020;
 - (iv) citizens accessing their own health and care records, including to support self by 2020;
 - (v) infrastructure;
 - (vi) information sharing;
 - (vii) electronic communications;

Board Members' questions were responded to as follows:

- (d) top priorities include:
- (i) moving from paper to digital working and communication;
 - (ii) supporting the cultural shift in ensuring that information recorded in patient records can be understood by patients, in preparation of when patients will be able to access that information to support self-care;
- (e) it is a concern that only 1% of patients responded to the request for their information to be shared within LDF area so further work needs to be done increase confidence in the security of the system with assurance that information is only shared on request.

RESOLVED

- (1) to note that the Local Digital Roadmap is being produced and will be submitted with the STP in June 2016;
- (2) to support the Local Digital Roadmap after it has been approved through the formal channels.

9 NOTTINGHAM CITY COUNCIL AND NOTTINGHAM CITY CLINICAL COMMISSIONING GROUP JOINT COMMISSIONING PRIORITIES 2016/17

Katy Ball, Director of Procurement and Children's Commissioning, and Christine Oliver, Head of Service for Crime and Drugs Partnership, were in attendance to present the report which sets out the commissioning intentions for Nottingham City Council and Nottingham Clinical Commissioning Group for 2016-17.

The following points were highlighted:

- (a) the priorities have been identified following discussions with relevant partners and information based on citizen outcomes, policy and legislative requirements, contractual issues, budgetary issues, the outcome of the last review and deliverability;
- (b) commissioning priorities have been identified to support the following Health and Well-Being Board outcomes with details provided within the comprehensive appendices to the report:
 - (i) people in Nottingham adopt and maintain healthy lifestyles;

- (ii) people in Nottingham will have positive mental well-being and those with serious mental illness will have good physical health;
 - (iii) they will be a healthy culture in Nottingham which citizens are supported and empowered to live healthy lives and manage ill-health;
 - (iv) the City's environment will be sustainable; supporting enabling citizens to have good health and well-being;
- (c) commissioning priorities have been brought together within a single joint work plan;
- (d) although there is still further work to be done, the Board's approval is sought for the joint commissioning priorities, but as City Council joint commissioning and NHS time lines are not aligned, it is proposed to submit a further report to the Board within the next few months with RAG rated progress;

Members of the Board commented as follows:

- (e) care should be taken with regard to 'citizens at risk of social exclusion', and that the 'significant ongoing efficiencies' not risk the achievements to date in this area which would also benefit from consideration of issues around debt and finances;

RESOLVED

- (1) to approve the main areas of activity identified within the joint headline plan (appendix 1 to report) and the detailed implementation plans (appendix 2 and 3 to report);**
- (2) for a further report, potentially RAG rating each activity area, to be submitted to a future meeting of the Board.**

10 NOTTINGHAM CITY CHILDREN SAFEGUARDING BOARD STRATEGIC BUSINESS PLAN 2016-2018

Chris Cook, Chair of the Nottingham City Safeguarding Children Board (NCSCB), introduced the report which presents the Strategic Business Plan for 2016-18 and the work plan which aims to help co-ordinate the activity of local agencies to continue to improve the outcomes for children and young people and their families.

It was noted that there are strong links between safeguarding and the work of the Health and Wellbeing Board and consideration needs to be given to how the two bodies engage with each other.

The strategic priorities were identified as follows:

- (i) promote, monitor, co-ordinate and evaluate multi-agency effectiveness in safeguarding children and young people across the child's journey;
- (ii) strengthen and support a competent and equipped workforce that is committed to learning and developing safeguarding practice with assurance that safeguarding is everyone's responsibility;
- (iii) to evidence the impact of NCSCB.

The annual work plan is summarised as follows:

- (i) Partnership implementation of the self-harm practice guide;
- (ii) keeping children and young people safe from harm including CSE and missing children;
- (iii) ensuring an effective response to physical abuse including promoting shared good quality assessment standards for physical abuse;
- (iv) forward planning for the financial restraints of continued austerity on the Board;

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- (v) ensuring the operating model is fit for purpose;
- (vi) revision of the performance framework to ensure clear identification of the impact and achievements of the Board;
- (vii) ensuring that the Board's engagement strategy provides maximum opportunity to promote safeguarding and enable feedback which can then inform the Board;
- (viii) ensuring strategies are clear with comprehensive approaches to ensure young people are supported to be safe online.

RESOLVED to note the Nottingham City Children Safeguarding Board Strategic Priorities for 2016-18 and the Annual Work Plan for 2016-17.

11 NOTTINGHAM CITY ADULTS SAFEGUARDING BOARD STRATEGIC BUSINESS PLAN 2016-2018

Clive Chambers, Head of Safeguarding and Quality Assurance, introduced the report which presents the Nottingham City Adults Safeguarding Board Strategic Priorities of 2016-18 and the annual work plan for 2016/17.

The following strategic priorities had been agreed by the Nottingham City Adults Safeguarding Board:

- (i) prevention;
- (ii) assurance;
- (iii) making safeguarding personal;
- (iv) Board performance and capacity.

Board members' questions were responded to as follows:

- (a) with regard to assurance that the Adult Safeguarding Board is receiving the input necessary to be able to function, it is recognised that complete data collection is vital and that just one missing part of information can have a significant impact. It is vital that all partners are fully engaged and committed;
- (b) the Health and Well-Being Board needs to ensure that it has an appropriate interface with other bodies including the Children's and Adult's Safeguarding Boards and the Crime and Drugs Partnership. Consideration needs to be given to where there are multiple overlapping and interlinked of areas work. It was suggested that the new Health and Wellbeing Board Steering Group look at this issue.

The Chair requested that if any challenges or blockages occurred for either of the Safeguarding Boards with regard to the work of the Health and Wellbeing Board that he be made aware.

RESOLVED to note the Nottingham City Adults Safeguarding Board's Strategic Priorities for 2016-18 and the Annual Work Plan 2016/17.

12 THE CONTRIBUTION OF OPPORTUNITY NOTTINGHAM TO THE DELIVERY OF NOTTINGHAM CITY HEALTH AND WELLBEING KEY STRATEGIC AIMS

Mark Garner, Project Manager of Opportunity Nottingham, and Grant Everitt, Opportunity Learning and Evaluation Lead for Opportunity Nottingham, presented the report which outlines the contribution of Opportunity Nottingham to the delivery of Nottingham City's health and well-being strategic aims.

The following points were highlighted:

- (a) the project is nearing the end of its second year of an eight-year project which has been funded by the National Lottery;
- (b) Opportunity Nottingham is one of 11 'fulfilling lives' projects within England and currently works with 159 vulnerable beneficiaries in Nottingham who have multiple complex needs, defined as three out of four of the following:
 - (i) mental ill health;
 - (ii) offending;
 - (iii) substance misuse;
 - (iv) homelessness;
- (c) beneficiaries often experience stark health inequalities, many with extremely poor physical health and are at risk of premature death due to their chaotic lifestyles and chronic ill-health;
- (d) to date the organisation has experienced a good level of input and engagement from partners at a local level within City, however this needs to be consolidated at higher strategic levels where currently blockages occur to ensure that information and data is shared to enable the best outcomes to be sought;
- (e) Opportunity Nottingham is happy to respond to suggestions from the Health and Well-Being Board and is willing to evaluate any areas within its remit which the Board may request;
- (f) information sharing with partners is vital to Opportunity Nottingham as the National Lottery look at data evidence to justify the financial need of the programme.

The Chair commended the work of Opportunity Nottingham and welcomed the report and proposal to establish a link with the Health and Well-Being Board to help navigate information blockages, assuring the presenting officers that the issues highlighted regarding blockages will be progressed.

RESOLVED

- (1) **for the Health and Wellbeing Board to become a key route of accountability for both the City Council and the Clinical Commissioning Group in ensuring that they support and deliver the key aims of the Opportunity Nottingham programme, specifically:**
 - **system change**
 - **meaningful beneficiary involvement**
 - **embracing closer joint working**
 - **embedding the aims and principles across commissioned City services**
 - **publicising, sharing & adopting learning and best practice**
 - **participating in the local evaluation;**
- (2) **to take full account of the needs of people with multiple complex needs when commissioning services;**
- (3) **to recognise the needs of people with multiple and complex needs within the Health and Wellbeing Strategy;**

13 FORWARD PLAN

Jane Garrard, Senior Governance Officer presented the Forward Plan and advised that a Steering Group was being established. As part of its work, the Steering Group would look at the future work programme and agenda management, including the possibility of having themed meetings linked to the Joint Health and Wellbeing Strategy.

There was a suggestion that the Board have discussion at a future meeting about the importance of the Third Sector and how best to engage the Third Sector with the work of the Board

RESOLVED to note the Forward Plan.

14 UPDATES

a CORPORATE DIRECTOR FOR CHILDREN'S SERVICES

Alison Michalska introduced the written update from the Corporate Director for Children's Services. There were no additions to the update which was circulated with the agenda.

b DIRECTOR FOR ADULT SOCIAL CARE

Alison Michalska introduced the written report from the Director for Adult Social Care. There were no additions to the update which was circulated with the agenda.

c DIRECTOR OF PUBLIC HEALTH

Alison Challenger, Interim Director for Public Health, updated the Board, highlighting the work being undertaken to address current trends within Dental Health in which Nottingham does not statistically compare well with neighbouring authorities.

Dental health promotion to parents will be increased with an emphasis on the need for dental health from when a child's first tooth appears.

d NOTTINGHAM CITY CLINICAL COMMISSIONING GROUP

Dawn Smith introduced the written update from Nottingham City Clinical Commissioning Group. There were no additions to the update which was circulated with the agenda.

e HEALTHWATCH NOTTINGHAM

Pete McGavin introduced the written update from Healthwatch Nottingham. There were no additions to the update which was circulated with the agenda.

15 FUTURE MEETING DATES

RESOLVED to meet on the following Wednesdays at 2pm:

27 July 2016

28 September 2016

30 November 2016

25 January 2017

29 March 2017