

**Health and Wellbeing Board
with Norfolk and Waveney Health and Care Partnership (NWHCP) Oversight Group
Members**

**Minutes of the meeting held on 01 December 2021 at 09:30am
in Council Chamber, County Hall Martineau Lane Norwich**

Present:

Representing:

Cllr Bill Borrett*	Cabinet member for Adult Social Care, Public Health and Prevention, Norfolk County Council
James Bullion	Executive Director, Adult Social Services, Norfolk County Council
Cllr John Fisher	Cabinet Member for Children's Services and Education, Norfolk County Council
Cllr Elizabeth Nockolds	Borough Council of King's Lynn & West Norfolk
Cllr Fran Whymark	Broadland District Council
Sara Tough	Executive Director of Children's Services, Norfolk County Council
Dr Louise Smith	Director of Public Health, Norfolk County Council
Ian Hutchison	East Coast Community Healthcare CIC
Terry Hicks	East of England Ambulance Trust
Cllr Mary Rudd	East Suffolk Council
Cllr Emma Flaxman-Taylor	Great Yarmouth Borough Council
David Trevanion	Healthwatch Norfolk
Cllr Lana Hemsall	Leader of Norfolk County Council (nominee)
Tracy Williams	NHS Norfolk & Waveney CCG
Oli Matthews	Norfolk & Suffolk NHS Foundation Trust
Dr Claire Fernandez	Queen Elizabeth Hospital NHS Trust
Cllr Florence Ellis	South Norfolk District Council
Dan Mobbs	Voluntary Sector Representative
Alan Hopley	Voluntary Sector Representative

** Joint members of the NWHCP Oversight Group and Health and Wellbeing Board*

Officers Present:

Jonathan Hall	Committee Officer
Stephanie Guy	Advanced Public Health Officer (Health & Wellbeing Board)
Debbie Bartlett	Director of Strategy & Transformation, Adult Social Services

Speakers:

Christopher Butwright (item 9)	Assistant Director Prevention & Public Health, Norfolk County Council
Howard Martin (item 9)	Director of Population Health & Health Inequalities, Norfolk & Waveney CCG
Sharon Brooks (item 11)	Chief Officer, Carer's Voice
Bethany Small (item 12)	Commissioning Manager, Social Care & Health Partnerships Team, Norfolk & Waveney CCG
Nick Clinch (item 12)	Assistant Director Social Care & Health Partnerships Commissioning, Norfolk County Council
Chris Scott (item 13)	Assistant Director Community Commissioning, Norfolk County Council
Rachael Peacock (item 13)	Head of System Resilience, Norfolk & Waveney CCG

Also in attendance:

Cllr Michael Chenery of Horsburgh	Norfolk County Council
Emma Ratzer	Chair, Norfolk & Waveney Voluntary Community and Social Enterprise sector

1. Apologies

1.1 Apologies were received from Melanie Craig, Rt Hon. Patricia Hewitt, Cllr Beth Jones, Cllr Virginia Gay, Giles Orpen Smellie and his substitute Dr Gavin Thompson, David White and his substitute Sam Higginson, Nick Davison and his substitute Chris Balmer, Cllr Alison Webb and her substitute Cllr Sam Chapman-Allen, John Webster and his substitute Geraldine Broderick, Matthew Winn and his substitute Rachel Hawkins, Patrick Peal and his substitute Alex Stewart (David Trevanion is substituting), Cllr Sam Sandell (Cllr Elizabeth Nockolds substituting), Caroline Shaw (Dr Claire Fernandez substituting), Cllr Alison Thomas (Cllr Florence Ellis substituting)

1.2 Also absent was Dr Sanjay Kaushal, Anna Hills, Dr Anoop Dhesi, Cllr Beccy Hopfensperger.

2. Chair's Opening Remarks

2.1 The Chair noted that there was a high number of apologies received and this was partly due to the NHS calling a meeting at short notice to discuss the impact of the Omicron Covid variant.

3. Minutes

3.1 The minutes of the meeting held on 29th September 2022 were agreed as a true and accurate record and were signed by the Chair.

4. Actions arising from minutes

4.1 Paragraph 9. page 5, E)

A proposal to invite the Chair of the Norfolk and Waveney VCSE: This was in the process on being arranged with support from voluntary sector partners. Emma Ratzer was attending today as a guest and was welcomed by the Chair.

Paragraph 9.2 page 5, F)

NNUH change in membership: The HWB membership and HWB webpages had been updated to reflect this change.

Paragraph 14.2 on page 9,

A request for future agenda item on Domestic Abuse: It has been proposed that an item on domestic abuse will come to a future board meeting early in 2022.

5. Declarations of Interest

5.1 None

6. Public Questions

6.1 No questions were received.

7. Urgent Arising Matters

7.1 None

8. Delivering our Joint Health & Wellbeing Strategy

8.1 The Health and Wellbeing Board received the report which was introduced by Debbie Bartlett, Director of Transformation and Strategy, Norfolk County Council Adult Social Services.

8.2 The interim report outlined the progress made in refreshing the strategy following the one to one interviews that had taken place recently with stakeholders and further information gained from the development of the Integrated Care System (ICS) and Health & Care strategy.

Worked had been commissioned from Britain Thinks and Healthwatch Norfolk who had engaged with the public to establish their perceptions of prevention and how this could lead into the issue of tackling health inequalities, both of which feature in the proposed

refreshed strategy.

8.3 The key interim findings of the BritainThinks report were as follows:

1. People drew a distinction between being healthy and feeling well. The latter tended to include a greater focus on mental health.
2. Mental Health was being seen increasingly as a priority in line with physical health.
3. Norfolk was thought generally a healthy place to live and work, with the abundance of open green spaces being important
4. Prevention was broadly understood as a concept although actions associated with prevention were often seen as interventions by healthcare professionals for physical health issues.
5. The reasons for requiring prevention measures was not fully understood and individuals had a tendency to leave minor issues until attention was required. Prevention was seen as a measure to reduce demand not promote health and wellbeing.

8.4 The Health and Wellbeing Board **agreed** to note the feedback so far from stakeholder interviews and research from BritainThinks, and **agreed** to the next steps, as set out in section 3 of the report which aim to ensure a strong effective relationship between the development of both the Joint Health and Wellbeing Strategy, and the Health and Care Strategy.

9. **Health Inequalities Data in Norfolk (Part A)** **System Progress & next Steps (Part B)**

9.1 The Health and Wellbeing Board received the report which was introduced and a presentation undertaken ([available on the Board's website page](#)) by Chris Butwright, Assistant Director Prevention & Public Health, Norfolk County Council for Part A.

Part B was introduced by Tracy Williams from NHS Norfolk & Waveney CCG and a presentation ([available on the Board's website page](#)) was undertaken by Howard Martin Director of Population Health & Health Inequalities from Norfolk & Waveney CCG.

9.2 The following was discussed and noted:

- Whilst the data regarding inequalities was well known it was thought that it was important to acknowledge it so that efforts can be directed correctly to ensure the most effective impact can be made with the resources available.
- It was important to understand what services individuals needed rather than provide services which had historically been provided and assumed.
- The work would provide the backdrop to enable those difficult conversations to take place regarding discrimination and exclusion.
- Economic factors, such as poor housing or reduced employment opportunities were also a key driver for those suffering in the inequality group and work to link these factors together with more practical measures was required to fully tackle the issue.
- Understanding the barriers individuals faced was also important and how these could be overcome.
- The ICS once formed, would enable all parts of the system and local communities to work together to achieve better outcomes.
- The data collected was also useful to underline the reasons why the prevention agenda requires investment and resource and to help justify the spend required in those areas that make a difference.

- It was thought that schools could also be a useful conduit to help engage with those inequality groups who have been identified within the data.
- The vaccination programme could be built upon to establish greater links to help and support the inequality groups in levelling up.

9.3 The Health and Wellbeing Board **AGREED** to:

- Note the collaborative approach being recommended to help shape our future ways of working to tackle health inequalities, to endorse the approach and to provide comments on the ambitions and future opportunities we have in N&W ICS to further embed collective action.

10. Delivering our Integrated Care Partnership

10.1 The Health and Wellbeing Board received the report, which was introduced by James Bullion. The report was produced following the workshop that had taken place in October on how the relationship between the new ICS and ICP would be developed with the Board, subject to legislation being formally completed by April 2022.

Further guidance as to how the governance of the new arrangements would work are still to be received, however the agreed outcomes to note from the development workshop were:

1. Simplicity of the system.
2. Working at a 'place' based approach and supporting the principle of subsidiarity.
3. Working collaboratively within an integrated system and focus evidence on needs such as prevention.

Several requirements needed to be in place by April 2022 although consideration needed to be given to ensure matters are dealt with in the correct order to follow the establishment of the ICB and ICP. These matters were outlined in section five of the report.

It was noted that there was a high level of agreement between all stakeholders on the board and that this was largely due to the work that had been undertaken in the last few years by the Board developing relationships and partnerships between themselves.

10.2 The Health and Wellbeing Board **agreed** to:

- Note the summary of the workshop outcomes.
- The next steps to:
 - Develop the governance arrangements, taking account of the statutory and legislative framework for HWBs and ICPs, for a 'joint' ICP and HWB, with common membership and streamlined arrangements for holding meetings (January 2022).
 - Develop the process for appointing an ICP chair designate, taking account of national guidance on functions and ensuring there is a transparent and jointly supported decision-making process (February 2022).
 - Work through the HWB District Sub-Committee, to engage local partners in developing the approach to place-based health and wellbeing partnerships (January 2022).

11. All Age Carers' Strategy for Norfolk & Waveney 2022 – 25 Progress Report

- 11.1 The Health and Wellbeing Board received a report which was introduced by James Bullion. The report provided an overview of engagement activities used to support the development of an All Age Carers Strategy for Norfolk and Waveney. The work was being coordinated by Carers Voice Norfolk and Waveney and included a survey of carers. The survey has been co-produced with carers and comprises 20 questions covering topics such as access to services and impact of caring roles on health, education and employment.

Sharon Brooks the Chief Officer of Carer's Voice undertook a presentation ([available on the Board's website page](#)) which updated on the progress of the development of the strategy for carers.

- 11.2 The following was discussed and noted:

- The Suffolk Health and Wellbeing Board was working with the Board to ensure that the Waveney area does not have two strategies.
- There was a commitment to engage schools within the development of the strategy.
- It was important to identify what help is actually required by carers as that these actions can be incorporated within the strategy.
- The profile of carers had increased in recent times especially during the pandemic and a joined up approach by stakeholders was required in order to provide better help and support.
- A draft strategy for carers would come to the Board in the near future for discussion and consideration.
- The term 'carer' did not always resonate with individuals and that to help identify 'hidden' carers using phrases such as "looking after someone" was more appropriate.
- The challenge was set to promote this work through all local authorities, voluntary sector, networks and local organisations to help identify carers so more of their needs can be identified and what help and support they require.
- Debbie Bartlett committed to work with the Council's Communications Team to help produce an item that could help members of the Board engage with other sectors, organisations and authorities.

- 11.3 The Health and Wellbeing Board **agreed** to:

Support the launch of the survey and development of an All Age Carers Strategy by:

- Promoting the survey to relevant stakeholders and networks.
- Endorsing co-production as part of strategy development.
- Providing insight to support additional lines of enquiry.
- Agree to receive the Carers Engagement Report and Strategic Recommendations for the Carers Strategy in 2022.

12. Norfolk Better Care Fund 2021/2022 Submission

- 12.1 The Health and Wellbeing Board received the report which was introduced by James Bullion. A presentation ([available on the Board's website pages](#)) was undertaken by Nick Clinch, Assistant Director Social Care & Health Partnerships Commissioning, Norfolk County Council and Bethany Small Commissioning Manager, Social Care & Health Partnerships Team, Norfolk & Waveney CCG.

- 12.2 The Board oversees the delivery and spend of the Better Care Fund and is required to jointly agree a plan for submission with Health and Social Care. The fund amounts to a spend of £116m and aims to join up health and care services so people can manage their health and wellbeing and live independently in their communities for as long as is possible.
- 12.3 The following was discussed and noted:
- The detail and transparency in the report was welcomed and a commitment was made by the Chair to see if details of providers of invested monies could be included in the future.
 - An example of new grants for those severely ill with conditions such as Motor Neurone Disease provided by district authorities was testament as to how effective the fund could be.
 - There was hope that later in the day the Minister of State for Care at the Department of Health and Social may announce more monies for grants to work alongside the Better Care Fund, perhaps more targeted toward issues such as housing or technology.
- 12.4 The Health and Wellbeing Board **agreed** to:
- Support the progress of the Better Care Fund (BCF) Review.
 - Sign off the BCF submission for 2021/22, including the BCF Narrative Plan and the BCF Excel Template

13 Adult Social Care Winter Plan

- 13.1 The Health and Wellbeing Board received the report which was introduced by James Bullion who highlighted the extreme circumstances the system will face in the winter because of Covid, staff recruitment issues, delays in hospital discharge, backlog of elective surgery and primary care work as well as capacity issues in care homes.

A presentation ([available on the Board's website page](#)) was undertaken by Chris Scott Assistant Director Community Commissioning, Norfolk County Council and Rachael Peacock, Head of System Resilience, Norfolk & Waveney CCG.

- 13.2 The following points were discussed and noted:
- The winter period will only be survived if cooperation from all was received. Families will need to make a plan to care for those who are most vulnerable.
 - Those individuals who were already receiving a care package were streamlined for elective surgery to maintain independent living as much as possible to avoid long term care being required.
 - A programme of digital integration did take place with NHS colleagues.
 - The highest level of operational concern (OPEL 4) had already happened this winter over a particular weekend. This was unprecedented for this level to have been reached so soon in a winter period.
 - Everyone was encouraged to help the current situation by observing Covid social distancing rules and obtaining vaccinations when available.
 - All health and social care staff had been working through the pandemic non stop and the demand for their services showed no sign of letting up. It was hoped that this would be borne in mind when patients and their families are engaging with staff during the busy winter period.

13.3 The Health and Wellbeing Board **agreed** to:

- Agree and endorse the Adult Social Care Winter Plan for 2021/2022.

Meeting Concluded at 11.51am

**Bill Borrett, Chair,
Health and Wellbeing Board**



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