

Communities Committee

Minutes of the Meeting Held on Wednesday 15 November 2017

10:00am Edwards Room, County Hall, Norwich

Present:

Mrs M Dewsbury – Chairman

Ms J Barnard

Mrs J Brociek-Coulton

Mrs S Butikofer

Ms E Corlett

Mr N Dixon

Mr P Duigan

Mr R Hanton

Mr H Humphrey

Mr M Kiddle-Morris – Vice-Chairman

Mr I Mackie

Mr T Smith

Mrs M Stone

1. Apologies and substitutions

- 1.1 Apologies for absence were received from Mr D Bills (Mr P Duigan substituted) and Ms C Rumsby (Ms E Corlett substituted).

2 To agree the minutes of the meeting held on 11 October 2017.

- 2.1 The minutes of the meeting held on 11 October 2017 were agreed as an accurate record by the Committee and signed by the Chairman.

3. Declarations of Interest

- 3.1 Ms J Barnard declared an Other interest in agenda item 9 (Public Health Strategy Review) as she works for an organisation in receipt of a grant from Public Health.

4. Urgent business

- 4.1 The Chairman asked the Chief Fire Officer to update the Committee on how the fire fighter injured whilst attending an incident in Thetford recently was recovering.

The Chief Fire Officer said that Norfolk Fire & Rescue Service had responded to a number of nuisance calls in Thetford on that particular evening, such as bonfires, and this had been the second time the crew had responded to an incident at that particular site. The crew had extinguished the fire and were seated in the truck ready to return to base, when it came under attack from a group of youths throwing stones. A stone had shattered the back window of the appliance, resulting in one fire fighter getting glass in his eye. Crew members had immediately irrigated the eye and taken their colleague to hospital where he had received treatment, no glass had been found, and he been discharged. The fire fighter had now returned to duty. The Chief Fire Officer stated that, although this was an isolated incident, it had been taken very seriously and he was working with

the Police to identify the suspects. Glazing in vehicles and protective equipment was also being reviewed to identify if anything further can be done in future to protect staff when attending incidents.

5. Public Question Time

5.1 No public questions were received.

6. Local Member Issues / Members Questions

6.1 No Local Member Questions were received.

7 Getting Norfolk Active

7.1 The Committee received and **noted** the report and presentation from the Director of Active Norfolk, a copy of which is attached at Appendix A.

7.2 The following points were noted in response to questions from the Committee:

7.2.1 In order to promote and motivate the general public and improve outcomes there were a number of opportunities being offered through a range of partners and clubs. Particular focus was being paid in areas and communities which were furthest away from a “good” level, to try and motivate those people who were least active to make a cultural change and to encourage everyone to choose to take up physical activity.

7.2.2 There were a number of men-specific activities undertaken in partnership with organisations to address mental health conditions for men in the 50Plus age group.

7.2.3 No schemes which required long-term investment were being set up. Initiatives such as “Mobile Me” working in partnership with the University of East Anglia, had led to NorseCare committing £1000 to each of its care homes to promote activities.

7.2.4 Once it became available, the resource pack outlining the range of tools would be made available on the Active Norfolk website. <https://www.activenorfolk.org/>

7.2.5 To try to increase the number of females who qualified for a sports coaching role, campaigns such as “This Girl Can in Norfolk” and “This Girl Can Coach” were promoting a range of activities for anyone wanting to consider coaching as a career.

7.2.6 Active Norfolk had a role in delivering the Government Strategy through a primary premium where each primary school received £8,000, with an additional £5 per pupil to increase physical activities in schools. Active Norfolk offered advice and guidance to schools and Governors on how the resource could be used.

7.2.7 The Chairman thanked the Director of Active Norfolk for attending and suggested Adult Social Care Committee and Children’s Services Committee may like to receive a similar presentation to make them aware of the excellent

work being carried out by the Service.

7.3 The Committee **RESOLVED** to note the presentation.

8 **Annual Review of the Enforcement Policy**

8.1 The Committee received the report by the Executive Director of Community & Environmental Services setting out proposed changes to the Enforcement Policy.

8.2 In response to a question about Norfolk County Council being at risk of being sued if individual trader names and/or businesses suspected of breaching the law were published, the Head of Trading Standards advised that there was sometimes a need to alert the public when trading malpractices had been identified to prevent more people losing money. Often, in such cases, information would be published giving only general information. However sometimes it was necessary to publish specific names to provide public protection. In such cases, the decision was taken at a senior level within the Service, following legal advice if appropriate before publication, to mitigate any risk of legal action against the County Council.

8.3 The Committee **RESOLVED** to:

- Confirm the revised CES Enforcement Policy (set out at Appendix 1 of the report) and its annex documents meet the requirements of Communities services, prior to consideration by Policy & Resources committee (the approval body for the Policy).

9 **Public Health Strategy Review**

9.1 The Committee received the report by the Director of Public Health together with a presentation (Appendix B) setting out the progress made by public health since the strategy was approved by the Committee in November 2016.

9.2 The following points were noted in response to questions from the Committee:

9.2.1 All work undertaken locally with regard to domestic abuse was gender neutral as it was recognised anyone could be a victim or perpetrator of domestic abuse.

9.2.2 No specific targets had been included in the section in the report relating to partnership working as they would not be quantifiable. Financial information would be included in future Finance Monitoring Reports.

9.2.3 With regard to the “gap in employment rate: long-term health conditions” outlier, work had been undertaken with Job Centre Plus (East Anglia) on a bid to fund advisors or key workers in outlying areas with the aim of getting people back into long-term employment. The Director of Public Health would investigate how statistics were recorded by the Department for Work and Pensions (DWP) in other areas and provide a written response.

9.2.4 The Director of Public Health would investigate whether the pilot scheme in schools involving school nurses identifying mental health issues in young

people had gone ahead and provide a written response. It was recognised that more work was needed in this particular area.

- 9.2.5 The Health and Wellbeing board (HWB) Stakeholder event, held in June 2017 to develop and shape future Joint Health and Wellbeing Strategy for Norfolk had been targeted at professional stakeholders rather than the general public.
- 9.2.6 The Chairman advised that, at the Active Norfolk Sports Awards 2017, the winner of the Active Workplace of the Year category had been Aviva.
- 9.2.7 The biggest contributory factor of a young person starting smoking was being around adults who smoked. The main focus of the stop smoking service was about getting adults to stop smoking. Norfolk had a high rate of young smokers and some work was being undertaken with providers and Youth Advisory Boards to see if existing youth workers could be trained to carry out some smoking cessation work.
- 9.2.8 No information was currently available for people who stopped smoking and then re-started. The main statistics collected were around the 4-week cessation period. In Norfolk key performance indicators had been introduced to look at 12 week outcomes and once that was in place 6-month outcomes could be looked at. On average nationally, approximately 80% of people stopped smoking 6.5 times before they managed to quit permanently, although Norfolk only data was not available.
- 9.2.9 Following a request for information about what training was available for Councillors to help them if they received a call from a constituent threatening to commit suicide, the Director of Public Health advised that the best option was just to ask them how they could help as often an individual just wanted to talk. She also advised Members to make themselves aware of the contact details of the Samaritans. (Telephone No: 116 123 (UK); 24 hours a day, 365 days a year. Email: jo@samaritans.org; Write to: Freepost RSRB-KKBY-CYJK, PO Box 9090, STIRLING, FK8 2SA).
- 9.2.10 The Chairman signposted the Committee to the Arts Forum conference on health and wellbeing which would be offering workshops on topics including mens mental health and homelessness over the forthcoming year.
- 9.2.11 The Director of Public Health advised that the Public Health Department's budget was not under strain at the moment, although there may be a need to reprioritise initiatives in future. When resilience work had moved under the remit of Public Health, the budget had been transferred; the community safety aspect of the service had already been funded by public health and the road safety budget had also been partly transferred.
- 9.2.12 The Director of Public Health would let Ms E Corlett have information regarding the CHAT text service and whether the data collected in relation to children's mental health issues was being fed into mental health commissioning. (A copy of the response is attached at Appendix C).
- 9.2.13 The re-procurement of the drug and alcohol service was complex and the Committee would receive a report on its mobilisation at the January 2018

meeting.

9.2.14 Public Health was now liaising with Norwich City Council with regard to alcohol licensing applications.

9.2.15 County Farms Estate, particularly Clinks Care Farm was commended as a flagship care farm which received no funding from Norfolk County Council. It was suggested that public health could look to supporting other similar initiatives in the future.

9.2.16 The Committee would receive an update at a future meeting about how the initiatives below fit into the public health strategy:

Wellbeing data.

Importance of mental health.

Getting people into employment.

9.3 The Committee **RESOLVED** to:

1. **Note** progress in relation to the delivery of the Public Health Strategy.
2. **Agree** the strategic priorities and commissioning intentions over the next four years, in order to better meet the needs of the residents of Norfolk.

10 **Norfolk Community Learning Services: Update**

10.1 The Committee received the report by the Executive Director of Community and Environmental Services providing it with the latest information on Norfolk Community Learning Services progress and, in particular, the two strategic objectives previously determined for 2016-17:

- a) To build on the recent Grade 2 (Good) Ofsted judgement and work towards achieving a Grade 1 (Outstanding).
- b) To continue to meet NCC priorities for the people, communities and businesses of Norfolk.

10.2 The following responses were noted in reply to questions asked by the Committee:

10.2.1 One of the reasons for the drop in the number of people enrolling on community learning courses could be due to the service being quicker in supporting learners to progress onto accredited courses so they could achieve certified qualifications.

10.2.2 The Head of Service - Norfolk Community Learning Services took on board that not everyone knew where to obtain information about when courses were running and how to enrol on them. He advised that he would consider ways of making sure the relevant information was more easily accessible.

10.2.3 Course term dates and times were published on the website and the Head of Service – Norfolk Community Learning Services would make enquiries about how information could be more easily accessible to give everyone an opportunity to enrol onto courses at the same time. One way of making the

service more easily accessible could be to hold a waiting list where people trying to book a course were advised if the course was full, and that their name would be held on a waiting list until the next course became available. This could also help the service identify whether it was worthwhile setting up additional courses.

- 10.2.4 The Committee noted that Judy Youngs (Assistant Head of Service - Norfolk Community Learning Services) would be retiring soon and wished to place on record its thanks for her service to the County Council.
- 10.2.5 Support was given to help people with learning difficulties gain employment through the 'Match' employment programme. This initiative strongly supported the Promoting Independence agenda within Adult Social Care. The Head of Service - Norfolk Community Learning Services advised that the team had a target to fund 10 sustainable jobs although this target could be more ambitious in future.
- 10.2.6 A sustainable job was identified as being a job that was not a work placement, for example traineeships, which offered potential for full-time employment in the future.
- 10.2.7 If information was available about when universal credit would be rolled out nationally, the Committee would receive an update at its next meeting.
- 10.2.8 The Head of Service – Norfolk Community Learning Services advised that an initiative titled “get digital” was available, although it was not specifically aimed at elderly people. He would make some enquiries as to whether some work could be carried out with organisations such as Age Concern to see if it would be worthwhile running such courses purely for elderly residents.
- 10.3 The Committee unanimously **RESOLVED** to:
 - a) **Note** the improvement to date, and
 - b) **Agree** the continued development of NCLS as Norfolk’s provider of a balanced lifelong learning offer for all the community through: first steps learning; ‘second chance’ learning; employment skills development; community resilience; and informal leisure learning.

11 **Finance Monitoring**

- 11.1 The Committee received the report by the Executive Director of Community and Environmental Services providing it with information on the budget position for services reporting to Communities Committee for 2017-18. The report provided information on the revenue budget including any forecast over or underspends and any identified budget risks. It also provided an update on the forecast use of reserves and details of the capital programme.
- 11.2 The following points were noted in response to questions from the Committee:
 - 11.2.1 The Committee was reassured that any use of reserves would continue to be drawn in and used in a sensible and planned way.
 - 11.2.2 The Chief Fire Officer advised that over the past twelve months, an in-depth

review of the service estates, vehicles and equipment had led to a clear understanding of the capital funding required. He confirmed he was confident that the current predicted needs of the service could be met, as well as the future predicted needs. The Committee was also reassured that Corporate Finance colleagues had given an assurance that if money was needed for an emergency, this could be met corporately.

- 11.2.3 Some issues remained with the recruitment and retention of fire fighters. The recent assessment day for potential retained firefighters had resulted in all candidates successfully completing the physical tests and they would now progress to the written tests. The Chief Fire Officer advised that through combined efforts, Outwell fire station was now running at about 65% capacity and that the national target of 90% was attainable with Norfolk currently in a good position around 83% availability.

11.3 **RESOLVED**

That the Committee **Note**:

1. The forecast out-turn position for the Communities Committee and the current budget risks that are being managed by the department.
2. The Capital Programme for Communities Committee.
3. The current planned use of the reserves and the forecast balance of reserves as at the end of March 2018.

12 **Forward Plan and decisions taken under delegated authority.**

- 12.1 The Committee received the report by the Executive Director of Community & Environmental Services setting out the Forward Plan for Communities Committee.

- 12.2 With regard to the Norfolk Infant attachment project, the Director of Public Health advised that the service was commissioned by Children's Services department and she had been asked to provide funding from public health to regularise the perinatal infant mental health service.

12.3 **RESOLVED:**

That the Committee:

1. **Note** the Forward Plan.
2. **Note** the delegated decisions detailed in section 1.2 of the report.

The meeting concluded at 12.30pm.

Chairman

Appendix A

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Getting Norfolk active


"If physical activity was a drug it would be regarded as a miracle,
so everyone must take it seriously"

Professor Dame Sally Davies, Chief Medical Officer

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What is Active Norfolk?


- Funded mainly by Sport England + PH, NCC partnerships
- Wide range of partners
- Strategic lead for sport and physical activity
- Hosted by Norfolk County Council
- One of 44 County Sports Partnerships since 2005



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The Mission

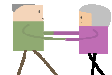
Working in partnership to harness the power of sport
and physical activity to improve lives in Norfolk



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Strategic Objectives

- Increase**
To increase participation in sport and physical activity
- Improve**
To improve health and wellbeing by reducing physical inactivity
- Establish**
To improve lives by establishing and increasing sport and physical activity's contribution in creating stronger, more sustainable and prosperous communities



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The Importance of Physical Activity

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Among modifiable risk factors, physical inactivity is the fourth leading cause of death globally

Inactivity is now a greater risk to health than obesity

Increasing physical activity has a greater impact on mortality than any other intervention including smoking cessation



Statistics

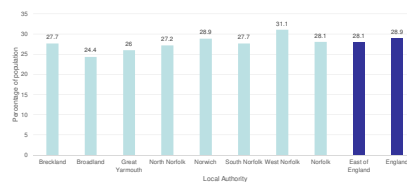
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Adults

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Percentage of adults classified as inactive in Norfolk



Example of our work

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PROJECT PROFILE – ENERGISE LAKENHAM AND TUCKSWOOD

In September 2016 this two year project worth £162,500 was launched. Working in partnership with Sport England and Comic Relief, Energise Lakenham aims to encourage people in the Lakenham and Tuckswood areas of Norwich to be more physically active.

Active Norfolk has commissioned Community Action Norfolk to deliver this project which uses sport and physical activity to empower a community to create social change and have a positive impact on social issues.

The project aims to achieve the following outcomes:

- Reduce social isolation
- Improve health and mental wellbeing
- Increase community cohesion
- Raise aspirations of residents
- Improve the sustainability of assets in the area
- Enable residents to engage earlier with support services available in the area
- Increase levels of physical activity

Energise Lakenham utilises the principals of Asset Based Community Development, focusing on what Lakenham has in terms of assets: organisations, people, services, facilities, and employing those assets to grow and enhance the offering of services and activities around the community. Community consultation is at the heart of this project, ensuring that the programs and activities that are designed and delivered reflect the genuine desire and interest of the community and not just perceived need.

Through the project there is also a small grants fund, where local clubs, projects and activities can apply for funding to deliver their activities in the community using local facilities and assets. To date, over £50,000 has been awarded or committed to 22 groups to deliver activities ranging from conservation sessions and walking football, to dog walking groups and toddler dance workshops.

What else do we do?

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Provide Leadership

- Represent sport and physical activity
- Strategic role

Build partnerships

- Work across sectors
- Traditional and non-traditional partners

Increase investment

- Identify need with partners
- Attract funding

Promote

- One-stop-shop for public & partner info
- Advocacy role

Measure impact

- Find out what works
- Use evidence to make the case

Contact Information

Ben.jones@activenorfolk.org
or 01603 732331

Appendix B

Update Public Health Strategy 2016 - 2020

Dr S. J. Louise Smith
November 2017

Background

- Member working group 2016
- Strategy agreed November 2016
- First time NCC has agreed a Public Health Strategy

Objectives for Strategy

- Adopt the recommendations of the member's working group
- Identify priorities in line NCC priorities & changing population needs
- Ensure that the council is meeting its responsibilities under the Health & Social Care Act 2013
- Set clear direction for staff

Strategy Priorities

1. Provide PH Services
Early help: Healthy child programme
2. Promote health
NHS Health Checks, Employment & health
3. Protect population health
Vulnerable people: drugs, MH, tobacco control, domestic abuse
Emergency planning & resilience
4. Work in Partnership
STP, Health & Wellbeing Board, Localities

Update November 2017

- Communities Committee asked for annual update
 - Progress actions
 - Review performance & outcomes
 - Discuss priorities for 2018 in line with finances, County Plan and Norfolk Futures

Significant changes in 2017

- PH department
 - Road casualty reduction
 - Resilience & Business Continuity
 - Community Safety

Outcomes & Performance

- Public Health Outcomes Framework matrix
 - Outcomes where performance worse than England
 - Trends: not improving / deteriorating
- Directly commissioned service performance
 - Adult Drug & Alcohol service
- Highlights from 2016/17: Case studies

Case Study: Chat Health



Children & Young people

- New service: health assessments LAC
- Digital innovation: Chat Health texting service
- Digital innovation: Postal sexual health testing to manage demand

Case Study: Providing a New Start



Vulnerable Adults

- Re-procured, community behaviour change drug & alcohol service
- Ormiston Families project: repeat care proceedings
- Suicide reduction strategy & multi agency conference

Case Study: Road Safety



- Safe Rider Scheme
- Roadside drug testing
- Norfolk County Council Pensions Forum, >200 people: older driver issues
- A drink and drug driving campaign

Case Study: Health Improvement



- One You New Year Campaign
- Slimming World
- 95,000 NHS Health Checks

Next steps: 2018

- Local services
 - Healthy child programme: joint offer with CC
- Families in crisis
 - Drug treatment service: improve performance, LAC
- Information & guidance
 - Norfolk's living well website
- Health & Social Care: STP
 - Joint work with NHS: Prevention work stream
- Community Safety
 - Domestic Abuse Beacon project implementation
- Finances
 - Cross cutting spend and savings

Any questions?



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27 November 2017

Dear Emma

You asked at Communities Committee about whether data from Chathealth text service was being used to inform the re-procurement of Children and Adolescent Mental Health Service (CAMHS). The short answer is, 'yes'

We have received the data from the provider of the Heathy Child Programme and we have sent it to the Intelligence and Analysis team who are collating the Mental Health Needs Assessment. This will be used to inform the re-procurement of the CAMHS.

Yours sincerely

A handwritten signature in black ink, appearing to read "Louise Smith", enclosed in a rectangular box.

Louise Smith
Director of Public Health
Norfolk County Council