

Health and Wellbeing Board
with Norfolk and Waveney Health and Care Partnership (NWHCP) Oversight Group
Members
Minutes of the meeting held on 29 September 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	Adult Social Services, NCC
Cllr Elizabeth Nockolds	Borough Council of King's Lynn & West Norfolk
Cllr Alison Webb	Breckland District Council
Cllr Fran Whymark	Broadland District Council
Sara Tough	Children's Services, Norfolk County Council
Dr Louise Smith	Director of Public Health, NCC
Terry Hicks	East of England Ambulance Trust
Cllr Alison Cackett	East Suffolk Council
Cllr Emma Flaxman-Taylor	Great Yarmouth Borough Council
Patrick Peal	Healthwatch Norfolk
Jonathan Barber	James Paget University Hospital NHS Trust
Cllr Lana Hemsall	Leader of Norfolk County Council (nominee)
Tracy Williams	NHS Norfolk & Waveney CCG
Dr Anoop Dhesi*	NHS Norfolk & Waveney CCG
ACC Nick Davison	Norfolk Constabulary
David White	Norfolk & Norwich University Hospital NHS Trust
Oli Matthews	Norfolk & Suffolk NHS Foundation Trust
Melanie Craig*	Norfolk and Waveney Health and Care Partnership (Executive Lead) & NHS Norfolk & Waveney CCG
Cllr Virginia Gay	North Norfolk District Council
Cllr Beth Jones	Norwich City Council

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

Officers Present:

Hannah Bailey	Public Health Policy Manager
Tom Bassett	Partnerships Board Transformation Manager
Michael Bateman	AD SEND Strategic Improvement Learning & Inclusion
Jonathan Hall	Committee Officer
Nicola LeDain	Committee Officer
Heather Roach	Chair Norfolk Safeguarding Adults Board
Chris Robson	Chair of the Norfolk Safeguarding Children Board
Walter Lloyd-Smith	Board Manager, Norfolk Safeguarding Adults Board
Stephanie Tuvey	Advanced Public Health Officer (Health & Wellbeing Board)

1. Apologies

- 1.1 Apologies were received from Peter Boczko, Cllr John Fisher, Rt Hon. Patricia Hewitt, Ian Hutchison, Dan Mobbs, Alan Hopley, Giles Orpen Smellie, Josie Spencer, Matthew Winn, Cllr Sam Sandell (Cllr Elizabeth Nockolds substituting), Sam Higginson (David White substituting) Anna Hills (Jonathan Barber substituting), Cllr Mary Rudd (Cllr Alison Cackett substituting) and Caroline Shaw (Dr Claire Fernandez substituting).
- 1.2 Also absent was Dr Sanjay Kaushal.

2. Election of Chair

- 2.1 Cllr Bill Borrett was proposed by Cllr Alison Webb and seconded by Cllr Emma Flaxman-Taylor.
- 2.2 Cllr Bill Borrett was **duly elected** as Chair of the Health and Wellbeing Board for the ensuing Council year.

3. Election of Vice-Chairs

- 3.1 Cllr Alison Thomas was proposed by Cllr Fran Whymark and seconded by David White.
- 3.2 Tracy Williams was proposed by Dr Anoop Dhesi and seconded by Melanie Craig.
- 3.3 Cllr Alison Thomas was **duly elected** as Vice-Chair of the Health and Wellbeing Board for the ensuing Council year.
- 3.4 Tracy Williams was **duly elected** as Vice-Chair of the Health and Wellbeing Board for the ensuing Council year.

4. Declarations of Interests

- 4.1 None

5. Minutes

- 5.1 The minutes of the meeting held on 10th March 2021 were agreed as an accurate record and signed by the Chair.

6. Chair's Opening Remarks

The Chair welcomed members and substitutes to the meeting which was the first meeting back in person since the start of the pandemic. The Board had not met since March 2021, given the important work undertaken by members in dealing with the pandemic. The Chair thanked all members and substitutes for their attendance.

7. Actions arising

- 7.1 None

8. Public Questions

- 8.1 Two questions had been received and the responses had been published on the [County Council's website](#).

9. Health and Wellbeing Board Governance Update

- 9.1 The Health and Wellbeing Board received the report which was introduced by James Bullion. The Chairman took the opportunity to welcome the new members of the Board. David White from Norfolk and Norwich University Hospital NHS Trust outlined that the Trust felt it more appropriate going forward for the Chairman to be a member of the HWB as opposed to the CEO of the Trust.

- 9.2 The Health and Wellbeing Board **AGREED** to:
- a) Note that Norfolk County Council has amended its constitution to include East of England Ambulance Trust Membership for the HWB.
 - b) Note the changes to HWB representation from organisations and officially welcome new members to the Board.
 - c) Note the HWB attendance record for April 2020 – April 2021 (Appendix A).
 - d) Delegate further discussions around the governance arrangements for the Health and Wellbeing Board and Integrated Care Partnership to James Bullion and Melanie Craig, with a formal proposal brought to the Board for endorsement.
 - e) Support the proposal to invite the Chair of the Norfolk and Waveney VCSE (Voluntary, Community and Social Enterprise sector) Health and Social Care Assembly to be a member of the Health and Wellbeing Board, under the membership for the VCSE sector.
 - f) Note the changes to representation for the Norfolk and Norwich University NHS Trust.

9.3 Cllr Lana Hempsall joined the meeting.

10. Delivering our Joint Health and Wellbeing Strategy

10.1 The Health and Wellbeing Board received the report, which was introduced by James Bullion. The report outlined the statutory requirement for all Health and Wellbeing Boards to produce a local, Joint Health and Wellbeing Strategy and looked back on progress against the strategy's priorities during 2020/2021.

The report then outlined the need to drive improvements and refocus the Board's vision in a different landscape to when it was originally launched, and so a review and refresh of the Joint Health and Wellbeing strategy was recommended.

10.2 ACC Nick Davison joined the meeting.

10.3 The following points were discussed and noted:

- Greater focus was required on wellbeing aspects in addition to health. The strategy needed to be more holistic to include prevention, education and environmental health works.
- The term prevention needs to be clearly defined at all health and care levels and in the context of demand.
- The effects of domestic abuse are very influential within wellbeing, with a fifth of all recorded crimes relating to the issue. In addition, it was acknowledged that much domestic abuse goes unreported.
- The refresh of the strategy also needs to align with that of the ICS and take in to account the needs of patients, as the sector comes out of the pandemic and deals with the backlog of treatment required.
- Addressing inequalities, funding the increase of mental health demands, and promoting the need for prevention were also thought to be key issues for the refreshed strategy.
- Work had been commissioned with Britain Thinks to ascertain what the public understand by prevention and what interventions they can currently access.
- HealthWatch Norfolk have also been asked to undertake a literature review and small programme of engagement as to what provides good health, wellbeing and prevention.
- The proposed Health and Wellbeing Board Awards and Conference Programme would be an important opportunity to recognise the dedication of the workforce during the pandemic and bring wider partners together in commitment to the

refreshed strategy.

10.4 The Health and Wellbeing Board **AGREED** to:.

- a) Endorse the progress against the JHWBS vision and priorities for 2020 /2021 (Appendix A).
- b) Endorse the proposal for reviewing and refreshing the JHWBS for 2022 and commit to engaging with the process on behalf of Member organisations.
- c) Comment on the joint commitments that could be strengthened through the review and refresh process.
- d) Support the re-launch of the HWB Awards and Conference and agree that this activity is focussed on prioritising prevention.

11. Developing Norfolk & Waveney's Integrated Care System

11.1 The Health and Wellbeing Board received a report which was presented by Melanie Craig. The report updated the Board on progress with developing Norfolk and Waveney's Integrated Care System (ICS) since March 2021.

11.2 The following points were discussed and noted:

- The prevention theme is a high priority for the new ICS as well as the wider concerns of wellbeing. Ensuring staff are protected and valued will mean that patients receive the highest care possible.
- The changes involve a measure of devolution and were welcomed. The 'place' level arrangements are complex and required further thought and discussions with organisations and partners. It was felt it was important to obtain a local view to investigate how services could be delivered which will involve more community engagement in the process. Duplication at the place level should be avoided.
- Transition had been happening more slowly than previous reorganisations as the last three years had demonstrated. The process will be completed by April 2022 although not all changes will have happened by then.
- The transition in Norfolk and Waveney had been smoother because the direction of travel had been acted upon earlier by the merger of five CCGs in to one.
- The pandemic had proven that greater collaboration amongst service providers had been very fruitful, the Covid 19 vaccination programme had been a good example of this.
- The objectives of the Integrated Care Board and the Integrated Care Partnership do need to align.. The Integrated Care Partnership will have a core focus on prevention. The 'place' partnerships on district council boundaries will be helpful to provide focus to the key objectives.
- It was important to ensure the momentum is not lost as services are restored and the crisis of the pandemic eases.
- The goal of "telling your story once" was essential particularly for patients moving from primary to secondary care. The patient sees health care as one, not different sectors.
- Implementation of the new system will be complex. The system is not dismantling the current architecture but over laying it with the new ICS arrangements. The implementation stage is a golden opportunity to ensure that collaboration is key

rather than competition.

- A simplified and practical approach to the relationship between the Health and Wellbeing Board and the Integrated Care Partnership was desirable, albeit within the statutory constraints. It would be important to avoid duplication, streamline and reduce bureaucracy.
- The acute hospitals were working together to develop processes to have a single waiting list, albeit this was a long-term aim as the current backlog is an enormous challenge.
- District Councils were ready and willing to help support the ICS if delegation and resource was passed down.
- The transfer of direct and specialised commissioning raises the challenge of access to GPs and especially access to dentistry, both of which were difficult. Unfortunately, the new arrangements by April 2022 will not make access easier as in the case of dentistry, the budget has been reduced dramatically and dentists have no incentive to take on NHS work due to the national policy and contract. Lobbying was required at a national level and members were advised to pursue this to help drive improvements to the dentistry service.
- The integration of Children's Services within the new ICS governance should be considered so there is no duplication or disruption of services. Schools within the local level are important in the role of children's health, wellbeing and safety as the recent pandemic had proven.
- The James Paget Hospital is on the new hospital build programme. This placing is not to replace the current hospital but as system capacity which provides the ICS with a good opportunity to utilise this extra resource.
- Reducing health inequalities was a key ambition of the new ICS. The 'place' based arrangements, together with the five alliances and the district councils, are ideally situated to tackle that work which would need to see a delegation of responsibility, decision making and resource from the ICS.

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

- a) support the continued development of the Norfolk and Waveney Integrated Care System.

12. Norfolk Autism Partnership Board Update, Autumn 2021

12.1 The Health and Wellbeing Board received a report and [presentation](#) (see appendix A) from Tom Bassett. The presentation outlined the progress made by the Norfolk Autism Partnership Board since the last report to the Health and Wellbeing Board in 2019.

12.2 The following points were discussed and noted:

- James Bullion advised that the annual report from the partnership had been received in 2019 where it was agreed it would continue to be presented to the Board annually. The latest report had been discussed at a recent Chair and Vice Chair's meeting.
- The Board were pleased to see the high number of staff who had undertaken the training with over 4500 NCC staff having undertaken the e learning and 1000 staff participated in the day course. The eLearning is also available for free on the Norfolk Autism Partnership website, with 300+ people accessing the training and 12 organisations trained to deliver the day course. The Chairman encouraged any staff or member who has not yet undertaken the training to do so. Those members that had undertaken the training advised it was very useful in understanding and improving communication with Autistic people.

- It was reminded that Autism is a syndrome and the pathway to diagnosis did not have a single diagnostic test. For many people the diagnosis wasn't as important as the support, understanding and considerations required for their day to day living.
- 12.3
- Autism diagnosis waiting times whilst improving are still very challenging. Many people do not receive a diagnosis until later in life.

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

- a) Signpost organisations to the Autism eLearning on the NAPB website to work towards a more inclusive Norfolk.
- b) Support in the wider engagement activities of the NAPB by offering resource, time or links to relevant parties.

12.4 Cllr Beth Jones left the meeting

13. **Norfolk Area Special Educational Needs & Disability (SEND) Strategy**

13.1 The Health and Wellbeing Board received the report highlighting the need to endorse and support the implementation of the strategy. The Area SEND Strategy was a self-contained strategic document setting out Norfolk's current 4 priorities for SEND and the associated high level action plan and key performance indicators. The report was presented by Maxine Blocksidge.

13.2 The following points were discussed and noted:

- It was important for members to not only endorse the strategy but to own it as an area and to provide the necessary leadership for its implementation.
 - There are three areas in the written statement of action that arose from the inspection; timeliness and quality of education health and care plans, communication and co-production, and adequate provision for young people as they move into adulthood. Each priority has a Board sat around it with the presence of NHS England and the DFE to give added oversight.
 - The transition to employment from education for the age group 18 to 25 years olds was being supported by a 'preparation for adult life group' which starts working with children from age 14. There are other groups which work with children for preparation of adult life. Within the strategy itself there are clear elements to support the transition such as providing work experience opportunities.
- 13.3

The Health and Wellbeing Board **AGREED** to

- a) Endorse the refreshed Area SEND Strategy for Norfolk.
- b) To provide leadership to the implementation of the Area SEND Strategy to ensure that all agencies, partners and stakeholders are aware of the priority actions and support these equally in the strategic and operational work of the children's 'system' across Norfolk.

14. **Norfolk Safeguarding Annual Report for 2020-21: Safeguarding adults during a global pandemic**

14.1 The Health and Wellbeing Board received the report which was presented by Heather Roach. The report summarised the work of the Norfolk Safeguarding Adults Board (NSAB) and the wider partnership's adult safeguarding activity during 2020/21. It set out the work done to safeguard those at risk of abuse and harm in very challenging and fast changing circumstances of the response to the Covid-19 pandemic.

14.2

The following points were discussed and noted.

- 14.3
- The Board welcomed the report and the positive outcomes that had been achieved over the pandemic.
 - The Domestic Abuse Partnership Perpetrator Approach (DAPPA) programme was working well because of additional funding added to the domestic abuse support and because of the strong working relationship with Norfolk Constabulary.
 - Two routes were available within the DAPPA programme for offenders. The first being a diversionary pathway and the second, for those who are non-compliant and refusing to engage, there was a disruption pathway.
 - The domestic violence disclosure scheme gives individuals the right to be aware of offenders and their previous behaviour.
 - It was suggested that an item around preventative approaches for addressing Domestic Violence was brought to the Health and Wellbeing Board at a future meeting.

Heather Roach provided a verbal update on the recommendations on the Cawston Park Hospital review.

- Many of the main issues raised by the review were already in progress through a multi-agency action plan
- All remaining patients were removed from Cawston Park Hospital.
- A review of the commissioning arrangements was in place to consider ethical commissioning as well as the removal of medical admissions and social care discharges.
- Issues concerning racism towards patients with cognitive impairments were being addressed.
- National recommendations such as the review of corporate governance of private companies had received support from Jerome Mayhew MP, who was to attend a meeting with the NSAB and the Law Commission in October 2021.
- Meetings had taken place with NHS England to ensure CCGs were aware of what services they were commissioning. In addition, reviews of placements for individuals were also to be considered to ensure physical and mental wellbeing was appropriate for that patient.
- NSAB had met with CQC who responded by advising they are looking to get more families and patients involved in their processes, shorter and more frequent inspections and more tools and training for their staff.
- In future the joint commissioning between Adult Social Services and the CCG will focus on a strengthened single approach with a hoped single funding scheme aimed at providing solutions solely for the individual patient.

- 14.4 The Health and Wellbeing Board **AGREED** to:
- a) Agree the contents of the annual report 2020/21.
 - b) Promote the work of NSAB to HWB partner organisations and stakeholders.
 - c) Use its media profile to support the work of NSAB and partners agencies in protecting those adults at risk of abuse and harm.

15. Norfolk Safeguarding Children Partnership Annual Report

- 15.1 The Board heard a [presentation](#) by Chris Robson Chair of the Norfolk Safeguarding Children Board (see Appendix B) who also provided the Children's version of the report for members. The Norfolk Safeguarding Children Partnership (NSCP) Annual Report summarises the local arrangements for safeguarding children, which includes governance and strategic overview; Norfolk's response to Covid-19; independent scrutiny; progress against NSCP priorities; learning from Serious Case Reviews/Safeguarding Practice Reviews; training and workforce development; and the voice of the child.
- 15.2 The following points were discussed and noted:
- The report was well received by the Board and Chris Robson was thanked for his involvement.
 - The genuine engagement and involvement of young people in the report was commended.
 - The three strands of the partnership (Norfolk County Council, NHS and Norfolk Constabulary) had a very strong relationship and meet at least 4 times a year as well as frequent informal engagement. Such a strong partnership was not common across the country and the value this provided should not be underestimated.
 - Chris Robson's role is independent and provides a check and balance for the Board members reassurance.
 - The multi-agency training that has been delivered and the children's version of the NSCP's annual report are finalists in the LGC awards.
- 15.3 • The Safeguarding campaign undertaken through the pandemic period is also a finalist in the forthcoming public sector public relations award.
- 15.4 The Health and Wellbeing Board provided comment on the contents and **AGREED** to:
a) endorse the report.

The Chairman thank all those who attended the meeting and reminded members of the Board's Development Session to be held on October 27th 2021.

Meeting concluded at 12.13pm

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



If you need this document in large print, audio, Braille, alternative format or in a different language please contact Customer Services on 0344 800 8020 or Text Relay on 18001 800 8020 (textphone) and we will do our best to help.