

Health and Wellbeing Board
Minutes of the meeting held on Wednesday 8th February at 9.30am
in the Edwards Room, County Hall

Present:

Chris Bean	Norfolk and Norwich University Hospitals NHS Foundation Trust
Cllr. David Bills	South Norfolk District Council
Hilary Byrne	South Norfolk Clinical Commissioning Group
Cllr. Penny Carpenter	Great Yarmouth Borough Council
Cllr. Shelagh Gurney	Vice Chair, Children's Services Committee
Joyce Hopwood	Voluntary Sector Representative
Sarah Jones	Children's Services, Norfolk County Council
Dr Ian Mack	West Norfolk Clinical Commissioning Group
Cllr. Elizabeth Nockolds	Borough Council of King's Lynn and West Norfolk
Sheila Oxtoby	Great Yarmouth Borough Council
Cllr. Andrew Proctor	Broadland District Council
Chief Insp. Lou Provart	Norfolk Constabulary
Dr. Janka Rodziewicz	Voluntary Sector Representative
Dr. Louise Smith	Norfolk County Council
Jo Smithson	Norwich Clinical Commissioning Group
Dr. John Stammers	Great Yarmouth and Waveney Clinical Commissioning Group
Alex Stewart	Health Watch Norfolk
Cllr. Margaret Stone	Vice Chair, Adult Social Care Committee
Cllr. Vaughan Thomas	Norwich City Council
Dr. Wendy Thomson	Norfolk County Council
Catherine Underwood	Norfolk County Council
Cllr. Brian Watkins (in the Chair)	Norfolk County Council

Also present:

Christine Allen	James Paget University Hospital
David Ashcroft	Norfolk Children's Safeguarding Board
Dennis Bacon	Norfolk Independent Care
Cllr. Richard Bearman	Norfolk County Council
Sam Cayford	South Norfolk District Council
Matthew Cross	Broadland District Council
Cllr. Margaret Dewsbury	Chair, Communities Committee
Adele Madin	Norfolk Community Health and Care
Robert Read	Great Yarmouth Borough Council
Rhiana Rudland	Breckland District Council
Jon Shalom	Community Safety Manager
David Wright	James Paget University Hospital

The Chairman welcomed Chief Inspector Lou Provart, Dr Janka Rodziewicz, Adele Madin and Chris Bean to their first meeting of the Board.

1 Apologies

- 1.1 Apologies were received from Cllr Roger Smith, Cllr Bill Borrett, Temporary Assistant Chief

Constable Mike Fawcett, Pip Coker (Voluntary Sector), Dan Mobbs (Voluntary Sector), Geraldine Broderick (East Coast Community Health Care), Roisin Fallon Williams (East Coast Community Health Care), John Fry (Norfolk and Norwich Hospital), Mark Davies (Norfolk and Norwich Hospital), James Bullion (Norfolk County Council), Cllr Yvonne Bendle (South Norfolk District Council), Tracy Williams (Norwich CCG), Michael Scott (Norfolk and Suffolk NHS Foundation Trust) and Cllr Paul Claussen (Breckland District Council).

2. Chairman's Opening Remarks

- 2.1 The Chairman welcomed Cllr Margaret Dewsbury (Chair of Communities Committee) and Cllr Richard Bearman to the meeting as observers.

3. Minutes

- 3.1 The minutes of the Health and Wellbeing Board (HWB) held on the 21st September 2016 were agreed as a correct record and signed by the Chairman.

4. Declaration of Interests

- 4.1 There were no interests declared.

5. Urgent Business

- 5.1 There was no urgent business received.

6. Norfolk and Waveney Sustainability and Transformation Plan (STP)

- 6.1 The Board received the report from the Managing Director, Norfolk County Council, which provided an update on the development of key aspects of the Norfolk and Waveney Sustainability and Transformation Plan (N&W STP) including governance arrangements, communications and engagement. It also outlined four bids currently under development for submission to the Transformation Fund.
- 6.2 During the ensuing discussion the following issues were raised:
- Where possible the governance structure for the STP would use existing rather than additional resources.
 - With regard to the accountability of the structure for the STP there would be collective ownership and each of the groups would be responsible for electing their own leads.
 - The Board discussed the advantages of localism and the importance of District Councils in understanding local needs was recognised. It was stressed that in order to meet local needs, local variations needed to be understood.
 - The Board considered the need for engagement with colleagues in the Waveney area. It was noted that Great Yarmouth and Waveney CCG and East Coast Community Healthcare were represented in STP groups and Waveney District Council was represented on the newly established Stakeholder Board. In response to an issue raised regarding joint working with the Suffolk Health and Wellbeing Board, the Director of Public Health said that in the past the Board had

invited representatives when there was a pertinent item on the agenda and this approach would be continued.

6.3 The Board **Resolved** to:

- Note the progress on the key aspects of the STP and identified any actions that Board member organisations could take at this stage to support its developments.

7. Better Care Fund Plan 2017-19: Progress and Future Planning

7.1 The Board received the report which provided a summary of the progress of the Better Care Fund for 2016/17 and an overview of the strategic direction for the 2017-19 Plan.

7.2 In introducing the report Catherine Underwood said that detailed BCF guidance was still awaited and it was expected that this would be available shortly. It was hoped that the BCF 2017 -19 could be brought to the April meeting of the Board for final sign off if timings allowed.

7.3 The Board's attention was drawn to the proposed BCF schemes for 2017-19 and the progress being made with those schemes that were already committed to. The need to fully understand the impact of the 2016-17 BCF to inform future planning was recognised as was the need to align the developing BCF Plan with the STP.

7.4 The Board agreed that if it was not possible for the final BCF Plan for 2017-19 to come to the April meeting, that the decision would be delegated to the BCF Sub-Group (the Chair and Vice Chairs). In these circumstances, the final draft submission would be sent to all HWB members for comments.

7.5 The Board resolved to:

- Note the overall strategic direction of the BCF Plan, in particular noting that it should be aligned with the Norfolk and Waveney STP.
- Agree that, if deadline timings allow, the final submission should be brought to the full Health and Wellbeing Board meeting in April for approval. If timings do not allow then this will be circulated to all members of the Board for comment with the final decision delegated to the BCF Sub-Group (the Chair and Vice Chair).

8. Norfolk's Response to Domestic Abuse

8.1 The Board received a report which summarised the strategic direction of work to improve how Domestic Abuse is tackled in Norfolk and suggesting how the Health and Wellbeing Board could contribute.

8.2 In introducing the report Jon Shalom reminded the Board that responsibility for tackling Domestic Abuse did not rest with just one agency but required a whole system approach.

8.3 The Board highlighted that the impact of Domestic Abuse on children was particularly important because of the inter-generational consequences. Attention was drawn to the report undertaken by the Children's Services Committee regarding the Emotional Wellbeing and Mental Health of Children in Norfolk. The importance of working with schools to discuss Domestic Abuse was emphasised, as was the importance of

discussing behaviour in relationships, particularly for teenagers. It was noted that work was being piloted in Great Yarmouth schools to identify when a DA incident had occurred in a child's home in order that the child involved could be properly supported in the school environment.

8.4 David Ashcroft, Independent Chair of the Norfolk Children's Safeguarding Board (NCSB), reinforced the message that Domestic Abuse cut across different services and acknowledged that while there was still work to do to integrate support it was a high priority of the NCSB.

8.5 It was noted that the Safe Lives project had approached the County Council to put forward funding, however this did not undermine or cut across the work of other agencies.

8.6 The need to highlight issues in workplaces surrounding Domestic Abuse was raised. It was noted that Public Health England had developed a toolkit for employers and suggested that this could be looked at being rolled out to other employers in Norfolk. Board members, who were employers, were also encouraged to look at the toolkit. In addition all partners not already actively engaged in the DA awareness raising campaign were encouraged to commit to do so.

8.7 **RESOLVED to:**

- Confirm that partners endorse the approach being taken to tackle DA in Norfolk through the partnership with SafeLives for MASH development, and the piloting of Penta interventions.
- Assist in building awareness of our approach and influencing the alignment of strategy between partners
- Consider the role that partners could play, both collectively and individually, in ensuring the practical implementation and embedding of our approach.
- Consider how integrated care pathways for DA are commissioned.
- Identify major risks or barriers and how these might be addressed.

9. **Developing our Future Strategy - a draft Framework**

9.1 The Board received a report which provided a draft Framework for developing future Strategy based on the Board's three longer term goals or themes. It was noted that for each of the longer term goals, the draft Framework outlined the Board's overall purpose and principles involved, and a high level statement about how the Board would go about addressing the challenges facing the system.

9.2 During the ensuing discussion the following issues were raised:

- The importance of developing integration between health and social care was highlighted by the Board. The Board stressed that there was a need to be clear as to what was meant by integration, what was trying to be achieved and the most appropriate time to move forward with any new approaches.
- Targets needed to be focused on prevention in order to delay the onset of

dementia particularly for older people in deprived areas.

- There was a commonality with the proposed themes and those of the STP and it was important that the Board challenged the STP regarding these themes.
- It proposed that the Engagement event for wider stakeholders would receive contributions from outside experts to highlight examples of successes both nationally and in Norfolk as well as breakout discussions regarding the strategic direction of the Board's themes.

The Board noted the date for the Stakeholder Engagement event of Wednesday 21st June 2017.

9.3 **RESOLVED to:**

- Consider and comment on the contents of the paper
- Agree the draft Framework as the basis for developing the next Joint Health and Wellbeing Strategy
- Approve the outlined proposals for an engagement event with wider stakeholders on the developing Strategy to be held in the summer.
- Identify any key factors that should inform the next stages of its development.

10. **Prevention and Promoting Independence. Creating wellbeing and improving health and social care - a District Council perspective**

10.1 The Board received the report and presentation (attached) which had been prepared with the aim of developing a shared vision of the role District Councils have in supporting residents across Norfolk to live independently in their own homes, promote independence and prevent ill health.

10.2 During the ensuing discussion the following issues were discussed:

- The importance of District Council work within communities was recognised and it was suggested that there might be an opportunity to explore the role of the District Councils in supporting integration as part of the proposed engagement event around developing the Joint Health & Wellbeing Strategy. District Councils had a key role in developing stronger, more resilient communities through developing affordable homes, supporting businesses, leisure services, adapting homes, etc.
- The initiatives outlined were welcomed and it was highlighted that they linked with the priorities of Adult Social Care that people live their lives as independently as possible with access to services within communities.
- From the perspective of the STP, prevention had originally been a separate workstream but was now a key part of the work of the Prevention, Primary and Community Care workstream and this connectivity was crucial. There were opportunities to build upon the framework in place and a real 'win' for Norfolk people would be for all partners to make sure that prevention opportunities were being recognised and realised.

10.3 **Resolved to:**

- Support the joint working initiatives, recognising the importance of locality working and the role played by District Councils, alongside other partners, in building stronger communities, creating wellbeing, early help and prevention and the potential to integrate services.
- Identify any actions that Board Member organisations could take to support its development.

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The meeting closed at 11.50 after which it continued into a workshop.

Chairman