

Health and Wellbeing Board
Minutes of the meeting held on Wednesday 15 July 2015 at 9.30am
in Edwards Room, County Hall, Norwich

Present:

William Armstrong	Healthwatch Norfolk
Cllr Yvonne Bendle	South Norfolk Council
Dr Hilary Byrne	South Norfolk Clinical Commissioning Group
Cllr Penny Carpenter	Great Yarmouth Borough Council
Pip Coker	Voluntary Sector Representative
T/ACC Nick Dean	Norfolk Constabulary
Richard Draper	Voluntary Sector Representative
Cllr Gail Harris	Norwich City Council
Joyce Hopwood	Voluntary Sector Representative
Cllr James Joyce	Chair, Children's Services Committee, NCC
Sheila Lock	Interim Executive Director, Children's Services, NCC
Dr Ian Mack	West Norfolk Clinical Commissioning Group
Lucy Macleod	Interim Director of Public Health
Jenny McKibben	Deputy Police and Crime Commissioner
Cllr Elizabeth Nockolds	Borough Council of King's Lynn and West Norfolk
Dr Chris Price	Norwich Clinical Commissioning Group
Cllr Andrew Proctor	Broadland District Council
Dr John Stammers	Great Yarmouth & Waveney Clinical Commissioning Group
Dr Wendy Thomson	Managing Director, Norfolk County Council
Catherine Underwood	Director Integrated Commissioning, Adult Social Services
Cllr Brian Watkins	Norfolk County Council
Cllr Sue Whitaker	Chair, Adult Social Care Committee, NCC

Also present:

- Debbie Bartlett, Head of Business Intelligence and Performance Service and Corporate Planning and Partnerships Service
- Anne Gibson, Executive Director of Resources

1 Apologies

- 1.1 Apologies were received from Annie Claussen-Reynolds and Ruth Derrett, NHS England, East Sub Region Team.

2. Election of Chair

- 2.1 Cllr Brian Watkins was duly elected for the ensuing year.
At this point, the Chair thanked Cllr Dan Roper as former Chair, for his hard work and contribution whilst he had been involved with the Health and Wellbeing Board.

3. Election of Vice Chairs

- 3.1 Dr Ian Mack and Cllr Yvonne Bendle were duly elected for the ensuing year.

4. Declarations of Interests.

4.1 There were no interests declared.

5. Minutes

5.1 The minutes of the Health and Wellbeing Board (HWB) held on the 29th April 2015 were agreed as a correct record and signed by the Chair.

6. DPH Annual report - presentation

6.1 The Board received the annual report from the DPH in the form of a presentation which focused on mental health and the position in Norfolk. The DPH stressed that she was raising whole-system concerns, not specific services.

6.2 There was agreement for partners to develop a fourth priority regarding mental health, rather than relying on the 'golden thread' approach, which was seen by some as not working as effectively as it might.

6.3 Partners welcomed the opportunity to have discussions looking at a whole system approach to mental health, including that of children and young people. It was important to have a process of engagement with young people and to hear their innovative ideas.

6.4 It was suggested that the Board's role could be in putting the appropriate support in place and taking ownership of an integrated, system wide, approach. Work was being carried out on areas such as debt, poverty, domestic violence, but all in separation.

6.5 Early work was being undertaken to protect children and young people from developing mental health problems, and there had been a close tight focus by CCG's and NHS England, but there was concern expressed that the Board's work had moved away from the preventative agenda. The voluntary sector could bring valuable insight into what was going on in communities to assist the Board in its aim.

6.6 The Board AGREED to appoint a mental health champion to help take this priority area forward.

6.7 The Board **RESOLVED** to;

- Note the report.

7. Joint Health and Wellbeing Strategy 2014-17 Annual Report 2014/15

7.1 The Board received the report from the DPH, on behalf of the H&WB Strategy Implementation Group. The report provided information on progress with implementation of the Joint Health and Wellbeing Strategy including its achievements to date.

7.2 It was recognised that a lot of work had been carried out with regards to dementia before the Strategy had been implemented and that service users had been fully engaged. There were considerable variances in the deaths associated with dementia. There was a general assumption that only older people suffer from dementia therefore it was necessary to increase the awareness that younger adults could always suffer from it.

7.3 Mental health was threaded through the three priorities and it would be necessary for the relevant streams of work around mental health, which were currently incorporated in the existing priorities, to be brought together as part of the developing priority area of mental

health. There needed to be a firm definition of this new priority area.

- 7.4 In the discussion that followed, there was a view that the relationship between the Board and the new Health & Wellbeing Sub Group of the Children & Young People's Strategic Partnership should be strengthened so that it could report into the H&WB. The Chairman confirmed that he would take this view on board in the review of the H&WB.

- 7.5 The Board **RESOLVED** to;

- Note the report and considered views on the delivery of the Strategy to date and any change on emphasis or reporting required in the forthcoming year

8. Joint Strategic Needs Assessment (JSNA) Annual Summary Report 2014/15.

- 8.1 The Board received a brief update on the Joint Strategic Needs Assessment (JSNA) since its review and refresh reported in July 2014.

- 8.2 The Board **RESOLVED** to;

- Note the report and considered views on the progress in developing the JSNA and its future direction.

9. Locally-led Health Improvement

- 9.1 The Board received a report which brought together updates on the impact being made across Norfolk through locally-led health improvement activity. The report included an update by each of the district, city and borough Councils, who had been working with the DPH, public health team, and local partners to commission activities that would result in a demonstrable improvement in one or more of the Board's strategic priorities and goals.

- 9.2 The Board heard that it had been challenging working with short term funding but that where success was being demonstrated then local areas were considering integrating into mainstream activity to help keep projects on track to deliver future benefits.

- 9.3 The Board also received three presentations from local areas about their health improvement activity and, amongst other things, these demonstrated the importance to communities of reducing social isolation.

- 9.4 The Board **RESOLVED** to;

- Consider the contribution being made on the Board's strategic priorities and goals.

10. Re-Imagining Norfolk

- 10.1 The Board received the report which set out the County Council's completely new strategic direction – Re-Imagining Norfolk – which would radically change the role of the authority and the way it delivered its services. It outlined the Council's vision and priorities for Norfolk through working effectively across the whole public service on a local basis.

- 10.2 The Board welcomed the report and the opportunity taken by NCC's Managing Director to share its major change strategy with the Board. Members discussed the importance of the wider context in which all partners were working – one of funding reductions and major change. There was also the devolution agenda and it was noted that discussions were beginning to take place and would develop during the summer and autumn.

- 10.3 The Board **RESOLVED** to;
- Note the report
 - Agreed that developing work on NCC's priorities and the outcomes sought be brought to the next Board meeting.

11. Integration and the Norfolk Better Care Fund Plan

- 11.1 The Board received the report which provided information about the progress with integration in Norfolk and with delivering the Better Care Fund Plan. This included case studies which illustrated some of the impact being made from a number of initiatives and an outline of overall trends in performance in relation to non-elective admissions to hospital. It also provided the H&WB with the information submitted to NHS England for the first BCF quarterly report, following final sign off by the Board's BCF sub-group.
- 11.2 Members discussed both the challenges and the lessons which were being learnt, including the fact that one size does not fit all, and there was a need to change historic ways of treating people and work on changing attitudes.
- 11.3 In relation to the trend data in relation to non-elective admissions in Great Yarmouth & Waveney, the small decrease in admissions was testament to the efforts being carried out by all those involved.
- 11.4 The Board **RESOLVED** to;
- Note the key issues arising from the information provided in the report, including the examples of good practice identified in the case studies.
 - Note the submission to NHS England for the period 1 January to 31 March 2015, and the recent re-confirmation of the target reduction in admissions as agreed in the Norfolk BCF plan.

12. Children's Services Improvement and Performance

- 12.1 The Board received the report which provided an update on operational performance within Children's Services including support for school improvement and social care and safeguarding. It also updated on partnership arrangements and the recent adoption of eight sub-groups by the Children & Young People's Strategic Partnership.
- 12.2 It was reported that the numbers of Looked after Children had decreased from 2300 in 2013 to 1058 at the time of the report. All children are known individually and have a support package in place. Signs of Safety had been helpful in reducing these numbers.
- 12.3 The Board discussed the nature of future reporting on children and young people and it was suggested that in future we could move to exception reporting, and a possible shift to looking at particular issues at a more granular level, including looking at information by locality.
- 12.4 The Board **RESOLVED** to;
- Note the report.

13. Healthwatch Norfolk verbal update

- 13.1 William Armstrong, Chairman, Healthwatch Norfolk (HWN) reported that their Annual report had recently been published and this was available at the link

<http://www.healthwatchnorfolk.co.uk/about/docs>

- 13.2 It was also reported that Healthwatch had moved to premises in Wymondham which were more suitable for their needs, and the Chairman, HWN, encouraged any partners to get in touch if there was any topic that colleagues at HWN could review or be involved with.

14. NHS Five Year Forward View: New Models of Care

- 14.1 In the absence of a representative from NHS England, the Board received a brief update report on NHS England's Five Year Forward View (FYFV). The Board had received a full briefing at its meeting in April 2015 and this follow-up report outlined progress with the 29 vanguard projects, which were focused in new models of care.
- 14.2 It was noted that, although some good bids had been put in, there were no vanguard projects in the East of England. It was also suggested that this pressing need for transformation in health and social care needed higher consideration on the Board's agenda and it should be considered in context with Norfolk County Council's Re-Imagining Norfolk.
- 14.3 The Board **RESOLVED** to;
- Note the progress towards the new models of care as outlined within the Five Year Forward View.

15. Road Casualty Reduction Partnership

- 15.1 The Board **AGREED** to appoint Cllr Penny Carpenter to the partnership.

16. Norfolk Health Overview and Scrutiny Committee Meetings

- 16.1 The Board received and **NOTED** the minutes of the Norfolk Health Overview and Scrutiny Committee from the meetings held on 26 February 2015, 16 April 2015 and 28 May 2015.

The next meeting would take place on **Wednesday 21 October 2015** at 9.30am. The venue would be confirmed.

The meeting closed at 1pm

Chairman