

DURHAM COUNTY COUNCIL

At a Meeting of **Health and Wellbeing Board** held in **Committee Room 2, County Hall, Durham** on **Tuesday 23 July 2024** at **9.30 am**

Present:

Members of the Committee:

Councillors R Bell, C Hood and K Burrows, Dr J Carlton, K Carruthers, C Cunnington-Shore, J Foggin, A Healy, M Houghton, F Jassat, M Laing, J Robinson, J Pearce, A Petty, P Sutton, J Todd

1 Election of Chair

Moved by Councillor R Bell, **Seconded** by F Jassat and

Resolved:

That Councillor C Hood be elected as Chair of the Board for the ensuing year.

Councillor C Hood in the Chair

2 Election of Vice-Chair

Moved by A Healy, **Seconded** by S Burns and

Resolved:

That M Laing be appointed Vice-Chair of the Board for the ensuing year.

3 Apologies for Absence

Apologies for absence were received from Councillor T Henderson and Chief Constable R Bacon, L Buckley, Prof C Clarke, M Graham, S Jacques and M Kelleher.

4 Substitute Members

S Burns substituted for L Buckley and J Foggin substituted for S Jacques.

5 Declarations of Interest

There were no Declarations of Interest.

6 Minutes

The minutes of the meeting held 13 May 2024 were agreed as a correct record and signed by the Chair.

The Director of Public Health, A Healy noted that the response of the Board to the Government consultation on Water Fluoridation had been submitted, however, due to the General Election the closing date for the consultation had been put back until 31 July 2024. She noted that an individual or organisation could therefore submit their comments prior to the deadline. In respect of Minimum Unit Pricing (MUP) for alcohol, the Director of Public Health explained that alcohol harm was an issue to keep high on the agenda working with the Office for the Police and Crime Commissioner (OPCC).

7 Health and Wellbeing Board Annual Report 2023/24

The Board received a Joint Report of the Corporate Director of Adult and Health Services and Director of Public Health in respect of the Health and Wellbeing Annual Report, presented by the Interim Strategic Manager – Partnerships, Julie Bradbrook (for copy see file of minutes).

The Board noted the progress against the four priorities: making smoking history; enabling healthy weight for all; improving mental health, resilience and wellbeing; and reducing alcohol harms. Members of the Board noted the work undertaken or supported over the last 12 months and noted case studies that demonstrated how the work of the Health and Wellbeing Board impacted people's lives. The Interim Strategic Manager – Partnerships noted that the Board continued to: lead on Health Protection; looked at the Better Care Fund; consider developments in Transforming Care; and provide support to those with Special Educational Needs and Disabilities (SEND). She added that in 2025 a new Pharmaceutical Needs Assessment (PNA) would be published, PNAs having a three-year review period.

Councillor R Bell noted the report was very comprehensive and also very readable, with good examples given through the case studies. He also praised the examples and use of a diagram of a person showing the split between health and social care, healthy behaviours and the wider determinants of health. He reiterated the report was very good and it was important to get this out to people in an accessible form.

Resolved:

- (i) That the Board note and agree the contents of its Annual Report 2023/24 and authorise publication.
- (ii) That the timeline and next steps outlined in the report be noted.
- (iii) That colleagues share the HWB Annual Report within their organisations to showcase this good work and share learning with partners.

8 Child Death Annual Report 2021-23

The Board considered a report of the Director of Public Health, who presented the 2021-23 County Durham and Darlington Child Death Overview Panel (CDOP) Annual Report (for copy see file of Minutes).

The Director of Public Health explained that during 2022-23 there had been 38 deaths notified to CDOP, fewer than the 47 notified the previous year. She reminded the Board of modifiable factors, some of which were HWB priorities. In reference to 'making smoking history', it was noted that addressing smoking during pregnancy, and within the household, and the management of high-risk pregnancies was an area of focus. She added that enabling healthy weight for all was another area of focus, which could help address maternal obesity during pregnancy and again, the management of high-risk pregnancies.

Councillor R Bell referred to Table 2 within the report, which gave a breakdown of the age of the child at the time of notification of death. He noted the largest group was for 0-27 days, the next largest being 28 days to one year old and asked how those two age ranges differed. The Director of Public Health noted that the CDOP had a range of agencies involved, including health partners. She added that those deaths within 0-27 days often were very complex with multiple morbidities and in some cases were expected despite positive care. She noted that information was fed back to services and departments accordingly. A Petty noted that a number of years ago, the HWB had wrote to the Clinical Board and the Integrated Care Board (ICB) as regards issues, such as Junior Doctors being able to escalate issues to their Seniors. She asked as regards whether that had been flagged with the Care Quality Commission (CQC) or had been resolved. The Director of Public Health noted it was not flagged with the Panel, however, it was noted that there were escalation processes in place. It was added that there were themed reviews, with governance via the ICB and their sub-committees.

The Corporate Director of Children and Young People, John Pearce noted that while numbers were thankfully very small, he asked how statistically significant they were in terms of the ICB or wider footprint in terms of learning. The Director of Public Health noted that discussions with the ICB included as regards quality of safeguarding, with some issues noted such as co-sleeping. Dr J Carlton noted that these were the most devastating outcomes and he asked as regards how the HWB could take assurance in terms of previous recommendations. The Director of Public Health noted it was for the HWB to take assurance from the report, or challenge, if they felt appropriate. She gave smoking during pregnancy as an example, with the HWB knowing the issue and also knowing that it was a modifiable factor and therefore it was an area of work for partners and Trust colleagues. She noted the HWB were kept informed, with those areas flagged as complete and those themes going forward. Dr J Carlton noted as regards evidence of health interventions that should be taking place, adding that for modifiable factors, campaigns should help reduce numbers further. The Director of Public Health noted that work and actions would begin as soon as they were understood, and not wait until reports were fed back to various boards, such as the HWB.

Resolved: That the Board;

- (i) Note the content of this report and the associated CDOP Annual Report as assurance CDOP is fulfilling its responsibilities as a sub-group of the Durham Safeguarding Children Partnership (DSCP).
- (ii) Note the modifiable risk factors aligned to the HWB priorities and consider any additional actions required to mitigate against them.
- (iii) Continue to promote a 'call to action' and continue to take forward the recommendations from the Tobacco Control update report presented in March 2024.

9 Healthwatch County Durham Annual Report 2023/24 and Workplan 2024/25

The Board received an update from the Chair of Healthwatch County Durham and Board Member, Chris Cunnington-Shore on the Healthwatch County Durham Annual Report and Work Plan (for copy of report see file of minutes).

Chris Cunnington-Shore explained as regards the Healthwatch County Durham Team and thanked them, and all the volunteers, for their hard work culminating in the Annual Report.

He noted nine reports regarding improvements and referred the Board to the priorities for 2024/25, including: engaging with the farming community; youth health 14-24 year olds; and mental health, working with Tees, Esk and Wear Valley (TEWV) NHS Foundation Trust in terms of suicide intervention and crisis support; pharmacy first; maternity services; and substance misuse.

Chris Cunnington-Shore noted challenges, including dentistry, regional work undertaken by Healthwatch County Durham, and noted there were still challenges nationally in addition. He reiterated his thanks and commended the Healthwatch Team and volunteers for all their hard work.

The Director of Integrated Community Services noted the work carried out by Healthwatch County Durham in relation to hospital discharge, explaining it had been extremely useful for the Trust and partners, helping to implement new processes, adding there had been a good positive impact from the work.

K Burrows added her thanks and commended the Healthwatch Team for all their work, adding they were the most relevant partner within the voluntary sector. She added the importance of bringing issues to light, such as with dentistry, and in helping to highlight those with regional colleagues. She noted that it would be useful if partners could amplify and help spread the word out.

The Chair asked as regards patient transport and asked whether that included public transport, noting issues with such in the east of the county and rural areas, especially in terms of cuts to public transport. Chris Cunnington-Shore noted that was an issue he would feedback on, working with Local Authorities in terms of services provided. The Director of Public Health noted that the Project Lead, Healthwatch County Durham, Gail McGee had presented the report to the ICB and issues such as dentistry had been noted, with areas that impacted such as water fluoridation, as well as a new priority on young people, looking at sexual health, helping to ensure work was joined up.

Resolved:

- (i) That the Healthwatch County Durham Annual Report be noted;
- (ii) That the ongoing workplan priorities and the engagement topics for inclusion in the new workplan for 2024/25 be noted;
- (iii) That the Board provide comment on the future work areas for Healthwatch County Durham to ensure further alignment to the Joint Local Health and Wellbeing Strategy.

10 Key Health and Wellbeing Board Campaigns

The Board noted a presentation from the Director of Public Health on the following public health campaigns (for copy of presentation see file of minutes). The Board noted that questions could be directed to the Director of Public Health should any members require additional information on the key campaigns.

A Petty noted Police operations in terms of alcohol and drug testing of drivers during the Euro 2024 Football Championship, with 54 testing positive for alcohol, and 52 for drug use, adding those figures echoed the national picture. The Director of Public Health noted information had been fed back to BALANCE, and a campaign as regards domestic abuse also took place during Euro 2024.

The Corporate Director of Children and Young People asked if there were any campaigns in terms of vaping, especially in the education setting. The Director of Public Health noted that in early September there would be information given to Headteachers, to then be followed up with further information as regards the use of vapes, paralleling the Tobacco and Vapes Bill, using evidence from our young people in County Durham. She added there would also be campaign work outside of school settings. The Corporate Director of Children and Young Peoples Services noted it was very important to focus on vaping as an approach to help give up smoking, and not to encourage vaping use a new habit.

Councillor R Bell noted the information from A Petty and asked as regards drug limits, and how those were quantified and how Public Health were getting those messages across to the public. A Petty noted that with random testing, it was shown around 15 percent tested positive for drugs or alcohol. A Petty added that it was an area that was within the developing Police and Crime Commissioner's Plan, focussing on Drug/Alcohol anti-social behaviour.

The Director of Integrated Community Services noted the opportunities for communication on issues, such as from GPs in terms of medication advice and how that could impact activities such as driving. The Director of Public Health noted it was also an issue that could be picked up within 'Better Health at Work', for example where a transport company may conduct drug and alcohol testing, working with employers to try and reduce the prevalence.

Resolved:

That the information contained within the presentation be noted.

11 Better Care Fund End of Year Template 2023-24 and Better Care Fund Plan for 2024-25

The Board received a report of the Director of Integrated Community Services on the Better Care Fund, presented by the Strategic Programme Manager Integration, Paul Copeland (for copy of report see file of minutes).

Resolved:

- (i) That the content of the report including the BCF End of Year Template for 2023-24, and the BCF Plan for 2024-25 be noted.
- (ii) That further BCF updates be received at future meetings of the Health and Wellbeing Board.

12 MIND Mental Health at Work Commitment

The Board noted a briefing note for information on the MIND Mental Health at Work Commitment (for copy of presentation see file of minutes). The Interim Strategic Manager - Partnerships noted that it was a commitment the Council had signed up to and encouraged partners to sign up in addition.

13 Exclusion of the Public

Resolved:

That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the meeting for the following items of business on the grounds that they involved the likely disclosure of exempt information as defined in Paragraphs 1 and 2 of Part 1 of Schedule 12A of the Act.

14 Pharmacy Applications

The Board considered a report of the Director of Public Health which presented a summary of Pharmacy Applications received from NHS England in accordance with the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (for copy see file of minutes).

Resolved:

That the report be noted.

15 Dental Services Provision

The Board received a verbal update from the Joint Head of Integrated Strategic Commissioning, Sarah Burns as regards dental contract hand backs, it was noted that the matter would be considered at the meeting of the Adults, Wellbeing and Health Overview and Scrutiny Committee.

Resolved:

That the update be noted.