### **DURHAM COUNTY COUNCIL**

At a Meeting of **Health and Wellbeing Board** held in Committee Room 2, County Hall, Durham on **Tuesday 8 March 2016 at 9.30 am** 

### Present:

## **Councillor L Hovvels (Chairman)**

## **Members of the Committee:**

Councillors J Allen and O Johnson

## 1 Apologies for Absence

Apologies for absence were received from N Bailey, J Chandy, A Foster, C Harries, S Jacques and R Shimmin

### 2 Substitute Members

T Hunt for S Jacques

### 3 Declarations of Interest

There were no declarations of interest.

### 4 Minutes

The minutes of the special meeting held on 21 January 2016 were agreed as a correct record and signed by the Chairman.

The Chairman informed the Board that this was the last meeting for Martin Barkley, Chief Executive of Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV NHS FT). She thanked him for his valued contribution as a board member since the Board came together in Shadow form, up to the present date.

### 5 Better Care Fund Update

The Board considered a report of the Strategic Programme Manager – Care Act Implementation and Integration, Children and Adults Services, Durham County Council that gave an update on Quarter 3 2015/16 Better Care Fund (for copy see file of Minutes).

The Board were advised that 5 out of 6 performance indicators had been met in Quarter 3. The indicator still to achieve the target was regarding permanent admissions of older people to residential/ nursing homes per 100,000 population.

The Strategic Programme Manager – Care Act Implementation and Integration advised of new planning arrangements for 2016/17 published by NHS England and arrangements for submitting the final BCF. The first draft of the BCF plan had been submitted. The payment for the performance element was no longer applicable.

## Resolved:

- (i) That the report be noted.
- (ii) That further updates in relation to the Better Care Fund be received.

## 6 Review of Youth Services in County Durham

The Board received a report of the Head of Children's Services, Children and Adult Services, Durham County Council that informed of the review of Youth Services in County Durham and provided details surrounding the consultation process (for copy see file of Minutes).

The Strategic Manager, Children's Services Reform informed the Board that a review exercise had taken place of the Youth Service and had found that the current youth work delivery has not adequately impacted on outcomes across a range of indicators in the County. It was proposed to target those in the greatest need and in disadvantaged areas where outcomes were poor.

She explained the three key proposals from the consultation:-

- A Strategy for Youth Support in County Durham
- Deploy Council Resources according to need to deliver a Targeted Youth Support Service
- Ceasing the existing Youth Work Support Grant (YWSG) and the allocation of funding to each Area Action Partnership (AAP) to address local priorities linked to Youth Services.

The Board were advised that the consultation ends on 27 April 2016 with a final decision being made by Cabinet in the Autumn.

The Chief Executive of TEWV NHS FT said that the principle of targeting those with the greatest need was encouraging. He went on to ask about the impact on the numbers of young people who potentially would no longer receive a service from the Council. He was advised that there were 64 youth projects taking place across the County with open access youth clubs that enjoy the support of youth work provision. Provisional contact was made with 25% of young people in the 13-19 year old age bracket. When broken down further, regular contact with an individual drops to 9%. If support was targeted then a better rate of engagement with the young person could be achieved.

The Chairman said that a new way of working, with AAPs supporting the overall objectives, would add value to the service and the community and allow projects to be developed in a more creative way. She added that it was important for the community to have more say in what was delivered.

Councillor O Johnson said that we needed a service fit for the 21<sup>st</sup> century and congratulated the work being undertaken. He referred to an interactive map that shows what youth provision is available and where.

The Chief Executive of Healthwatch County Durham informed the Board that there was a link between the Family Information Service and Locate, and the Strategic Manager said that both services do communicate with each other in order not to duplicate any areas of work.

### Resolved:

- (i) That the Youth Service Review and the consultation process be noted.
- (ii) That partner agencies be encouraged to engage in the consultation process.
- (iii) That an update on the outcome of consultation and the decision of Durham County Council Cabinet in due course be received.

## 7 Update on Progress with the Adult Autism Strategy "Fulfilling and Rewarding Lives"

The Board considered a report of the Head of Commissioning, Children and Adults Services, Durham County Council that informed of the progress made in relation to the Autism Strategy implementation and that shared the Local Autism Action Plan for 2016 (for copy see file of Minutes).

The Strategic Commissioning Manager for Learning Disabilities/Mental Health summarised the progress made in Durham and highlighted that arrangements had changed for the delivery of work. A multi-agency group had been established and a wider stakeholder group was facilitated by MAIN, which is a post diagnostic service. The Board were advised that there was an ongoing programme of training with specialist training in certain areas offered.

The Chief Executive of TEWV NHS FT said that MAIN provided close support through the transition period of 16 years+. Separate arrangements were made for children through health, educational psychologists and schools.

### Resolved:

- (i) That the contents of this report and action plan for information be noted.
- (ii) That a further update at a future meeting be received.

## 8 Urgent and Emergency Care Vanguard

The Board considered a report and presentation of the Chief Clinical Officer, Durham Dales, Easington and Sedgefield Clinical Commissioning Group that gave an overview of the Urgent and Emergency Care Vanguard Programme (for copy see file of Minutes).

The Chief Clinical Officer highlighted the following key points within his presentation:-

- The North East Urgent and Emergency Care Network Vision
- Key Principles

- Funding and programme of work for 2015/16
- Appointments
- Main Working Groups
- 2016/17 Plans
- Draft Five Year Investment Plan & Matched Funding
- Key Issues so far
- Governance
- Self Care
- Primary Care
- Integration
- Out of Hospital
- Urgent and Emergency Care Route Map

He added that this was a hugely ambitious plan and was a 'must do'. Funding was an issue but would involve everyone working together to deliver.

The Chairman thanked the Chief Clinical Officer for his very detailed presentation and appreciated that there was still a lot of work to do.

The Director of Public Health County Durham said that this would be linked across the whole system involving One Point and Children Centres. The Chief Clinical Officer advised that data systems would continue to be developed which would allow access to GP systems.

Councillor O Johnson said he found the presentation very interesting and hoped that this would improve outcomes for the people within our communities.

### Resolved:

- (i) That the content of the report be noted.
- (ii) That the presentation on the Urgent and Emergency Care Vanguard Programme be received.

## 9 Proposed Reconfiguration of Organic Inpatient Wards serving County Durham and Darlington

The Board received a joint report of the Chief Executive, TEWV NHS FT and Chief Operating Officer, North Durham and Durham Dales, Easington and Sedgefield Clinical Commissioning Groups that gave background information in respect of proposals by TEWV NHS FT and the three Clinical Commissioning Groups (CCGs) in County Durham and Darlington to consult on reconfiguration of Organic Inpatient wards serving County Durham and Darlington (for copy see file of Minutes).

#### Resolved:

That the report be received.

## 10 Joint Health and Wellbeing Strategy 2016-19

The Board considered a report of the Head of Planning and Service Strategy, Children and Adult Services, Durham County Council which presented the refresh of the Joint Health and Wellbeing Strategy 2016-19 (for copy see file of Minutes).

The Strategic Manager – Policy, Planning and Partnerships advised that there had been extensive consultation carried out around the strategy and that a full refresh of the document was circulated with the papers. Performance measures had been reviewed to ensure they remain fit for purpose. The Strategic Manager encouraged organisations to present the strategy through their own governance arrangements.

#### Resolved:

- (i) That the JHWS 2016/19 be agreed.
- (ii) That the JHWS Delivery Plan is presented to the July Health and Wellbeing Board meeting be agreed.

## 11 Development Of An Oral Health Strategy For County Durham

The Board considered a report of the Director of Public Health County Durham, Children and Adults Services, Durham County Council that provided an update on the development of the Oral Health Strategy including the progress on a feasibility study for fluoridation (for copy see file of Minutes).

The Director of Public Health reported that there was oral health inequality in children in County Durham. A strategy was being developed for Oral Health that would provide a short to medium term approach. Introducing fluoridation is a long and complex process and a feasibility study must be carried out in the first instance, followed by public consultation. The Board were informed that the Derwentside area and parts of the Chester-le-Street area already had fluoridated water.

The Chief Clinical Officer asked if there was any evidence about the effects of fluoridation and was advised that Public Health England had reported no adverse effects, with some areas having fluoridated water in their systems since the 1960s.

Councillor J Allen found the report interesting but referred to the stark differences between the areas within the County. She welcomed the introduction of the strategy and the feasibility study into fluoridation.

Councillor O Johnson was pleased to see that this Board has initiated the strategy being developed and was pleased that the quality of life for people within the County would be improved.

The Chairman thanked the Director for her report and said that clear communication would be very important going forward.

### Resolved:

- (i) That the report for information be noted.
- (ii) That the development of a fluoridation feasibility study by Northumbria Water be noted.

(iii) That the NICE guidance and development into a local Oral Health Strategy to be signed off by the Health & Wellbeing Board be noted.

# Hospital Admissions Caused by Unintentional and Deliberate Injuries (aged 0-24) - Behind the Headlines

The Board considered a report of the Director of Public Health County Durham, Children and Adults Services, Durham County Council that provided an update on hospital admissions from unintentional and deliberate injuries in children and young people (0-24 years) (for copy see file of Minutes).

The Director of Public Health said that the report was not intended as an update on developments related to the Unintentional and Deliberate Injuries in Children and Young People's Strategy and that this would be reported at a later date.

The Chief Clinical Officer asked if Public Health would be working with key acute providers and was advised that they would be happy do this.

Councillor Allen said that she would like to see why people were presenting at the wrong place and why they were choosing to bypass their GP and go directly to Accident & Emergency.

The Executive Commercial Director, County Durham & Darlington NHS Foundation Trust (CDDFT) asked if there was any analysis of cases and how we compared to others in terms of self-harm. He was advised that the self-harm data is benchmarked and that a lot of self-harm goes unreported.

#### Resolved:

- (i) That the content of this report and that further data is expected from Public Health England that will allow granular analysis within County Durham that is not available at the time of writing be noted.
- (ii) That how childhood injury prevention is explicit in all key strategies to ensure steps are taken to raise the profile of child injury prevention across all partner agencies be considered.
- (iii) That opportunities across partnerships to influence and prevent injuries through a targeted approach across County Durham, taking into account deprivation e.g., commissioning of children's services, the community parenting programme and the development of a new early years strategy be noted.
- (iv) That the unintentional and deliberate injuries in children strategy will be refreshed to take account of most recent data sets be noted.
- (v) That the issue be raised with AAPs once the Middle Super Output Area (MSOA) detailed information is available to enable consideration during their prioritization process.
- (vi)That locality / (Clinical Commissioning Group) CCG level data will be available at a later date be noted.

## 13 No Health Without Mental Health Update including the Mental Health Crisis Care Concordat

The Board considered a report of the Chief Operating Officer, North Durham and Durham Dales, Easington and Sedgefield Clinical Commissioning Groups that updated on the progress of the No Health without Mental Health Implementation Plan and the Mental Health Crisis Care Concordat (for copy see file of Minutes).

The Joint Commissioning Manager, Mental Health highlighted the key points within the report.

The Chairman added that mental health was an important issue for the Board and advised that Public Health had been involved in work with veterans.

#### Resolved:

- (i) That the contents of the report be noted.
- (ii) That the progress made in relation to the County Durham Mental Health Implementation Plan be noted.
- (iii) That the progress made in relation to the County Durham and Darlington Mental Health Crisis Care Concordat local action plan be noted.

## 14 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 item of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraphs 1 & 2 of Schedule 12A to the said Act.

## 15 Pharmacy Applications

The Board considered a report of the Director of Public Health County Durham, Children and Adults Services, Durham County Council which provided a summary of Pharmacy Relocation Applications received from NHS England in accordance with the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 since the last formal meeting of the Board in January 2016 (for copy see file of Minutes).

### Resolved:

That the report be noted.