

## **DURHAM COUNTY COUNCIL**

At a Meeting of **Health and Wellbeing Board** held in Committee Room 2, County Hall, Durham on **Monday 27 November 2017 at 1.00 pm**

### **Present:**

**Councillor L Hovvels (Chairman)**

### **Members of the Board:**

Councillors J Allen and O Gunn, J Gillon, C Harries, A Healy, B Jackson, L Jeavons, J Robinson, J Chandy, G Curry and P Scott

#### **1 Apologies for Absence**

Apologies for absence were received from Dr S Findlay, N Bailey, S Jacques, S Lamb, C Martin, A Reiss, Dr D Smart, Dr J Smith and M Whellans

#### **2 Substitute Members**

G Curry for S Jacques, J Chandy for DDES and North Durham CCGs and P Scott for C Martin.

#### **3 Declarations of Interest**

There were no declarations of interest.

#### **4 Minutes**

The minutes of the meeting held on 25 September 2017 were agreed as a correct record and signed by the Chairman.

#### **5 Membership of Health and Wellbeing Board**

The Board considered a report of the Head of Legal and Democratic Services, Resources, Durham County Council that sought views on inviting County Durham and Darlington Fire and Rescue Authority to become an additional voting member and that advised of additional changes to the membership of the Board (for copy see file of Minutes).

#### **Resolved:**

That a representative of County Durham and Darlington Fire and Rescue Authority becoming an additional voting member of the Health and Wellbeing Board be agreed.

The Chairman welcomed Colin Bage, Deputy Chief Fire Officer to the meeting.

**6 Sustainability and Transformation Plans Update - Northumberland, Tyne and Wear and North Durham and Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby Draft Sustainability and Transformation Plans**

The Director of Primary Care and Engagement, DDES CCG advised the Board that the STP workstreams were continuing to progress the 14 areas of work.

The Interim Chief Executive of North Tees and Hartlepool NHS FT added that Alan Foster was leading on the governance arrangements for all three local STPs and he was actively talking to all stakeholders.

**Resolved:**

That the update be noted.

**7 Children and Young People's Mental Health, Emotional Wellbeing and Resilience Local Transformation Plan**

The Board received a report of the Chief Operating Officer, North Durham and Durham Dales Easington and Sedgefield Clinical Commissioning Groups and Chief Clinical Officer, Durham Dales, Easington and Sedgefield Clinical Commissioning Group that gave a background to the development of the nationally required children and young people's mental health, emotional wellbeing and resilience local transformation plan (CYP MH LTP), how the CYP MH LTP feeds into the County wide strategic mental health plan on a page and to describe the current governance arrangements for the plans (for copy see file of Minutes).

The Director of Primary Care and Engagement, DDES CCG highlighted the key priorities and challenges.

Councillor Gunn had met with the Corporate Director of Children and Young People's Services and they would like to be assured that the right people were involved to inform of the development of the plan at an early stage and to ensure it was co-produced with young people.

**Resolved:**

- (i) That the information provided in the report regarding the assurance of the transformation plan being progressed at a local level be noted.
- (ii) That the priorities for 2017/18 be noted and agreed.
- (iii) That the refreshed plan and priorities for action be endorsed.
- (iv) That to receive an updated children and young people mental health local transformation plan in March 2018 be agreed.

**8 Joint Health and Wellbeing Strategy 2016-19 Performance Report**

The Board considered a report of the Head of Strategy, Transformation and Partnerships, Durham County Council that described the progress being made

against the priorities and outcomes set within the County Durham Joint Health and Wellbeing Strategy (JHWS) 2016-19 (for copy see file of Minutes).

The Corporate Scrutiny & Performance Manager, Durham County Council highlighted the performance against the six objectives. Smoking at the time of delivery remained high in the area compared to the national and North East average. Although breastfeeding had improved the figures were still below the national average and teenage conceptions had continued to decrease. Performance was being closely monitored in relation to health checks and although above the national average, cancer waiting times were still below target. A new provider would take on the role of Drug and Alcohol Recovery Service from February 2018. With regards to suicide rates the authority were 5<sup>th</sup> out of the 12 regional authorities and the board were advised that Adults, Wellbeing and Health Overview and Scrutiny Committee were completing a piece of work about suicides.

The Chairman asked how we were reaching those people affected by the change in the Drug and Alcohol Provider. The Corporate Director of Adults and Health Services advised that there was a real focus on communication before the service goes live and she assured the board that this would be closely monitored.

**Resolved:**

- (i) That the performance highlights and areas for improvements identified throughout the report be noted.
- (ii) That the actions taking place to improve performance be noted, and any additional action planning required be agreed.
- (iii) That performance against the 2016/17 Quality Premium Indicators be noted.

## **9 Draft Pharmaceutical Needs Assessment 2018 - Consultation**

The Committee received a report of the Director of Public Health County Durham, Adult and Health Services, Durham County Council that presented the draft Pharmaceutical Needs Assessment 2018 for comments before the statutory 60 day consultation which runs from 28th November until 26th January (for copy see file of Minutes).

The Public Health Pharmacist advised the Board that they would be asked to approve the final version of the PNA in March 2018 before publication on the Integrated Needs Assessment (INA) website by 1st April 2018. She added that the PNA considers the health needs of the population and the provision of pharmaceutical services and a judgement would be made if there was sufficient services or potential gaps. The Board were informed that the conclusion of the PNA said that there were sufficient services across County Durham.

The Public Health Pharmacist thanked Healthwatch for their involvement and the number of good public responses received.

Mr Jackson was advised that online pharmacies were exempt from this.

The Public Health Pharmacist added that the PNA was a live document that would be backed up by supplementary statements as and when changes in pharmacy services occurred.

The Director of Public Health County Durham thanked the Public Health Pharmacist. She said that this was really positive for County Durham and she advised that we would be involved in assessing other local authorities PNA's when on the border of County Durham.

**Resolved:**

That comments on the current draft PNA 2018-21 before it begins the statutory 60 day consultation in preparation for publication of the final PNA 2018-21 on the INA website by 1st April 2018 be noted.

**10 Public Health England Child Health and Health Profiles 2017 for County Durham**

The Board considered a report of the Director of Public Health County Durham, Adult and Health Services, Durham County Council that introduced the Public Health England (PHE) Child Health and Health Profiles 2017 for County Durham, and compared indicators against the previous profile (2016) (for copy see file of Minutes).

The Director of Public Health advised that the indicators used in the profile did not necessarily represent the most recent performance data, as it was not a performance management tool. It presented a snapshot in time, and all indicator time periods were dated. She highlighted the key findings and reported that there was a focus on the areas where performance was worse than the previous period.

Councillor Gunn was pleased to see the areas being addressed but was concerned that the number of children living in poverty was 23.9%.

The Corporate Director of Adult and Health Services said it would be useful to have an update to a future board meeting to show what had been done with regards to poverty. Councillor Gunn said that it was important to bring all aspects of work together. The Director of Public Health said that health and wealth go together and that it was crucial to have an update on the Health and Wellbeing Board forward plan. She added that tobacco control was a success area which we could look to emulate across other programmes.

The Head of Partnerships and Community Engagement said that it was important to share best practice through the AAPs with regards to the prevention agenda and by encouraging people to help themselves. He added that every contact counts and volunteering opportunities should be taken up where possible.

Following on from this the Corporate Director of Adult and Health Services said that a wider approach to tackling poverty in the school day was needed.

**Resolved:**

- (i) That the information within the health profiles be noted.

- (ii) That the health profiles form part of a wide range of information drawn together in the Joint Strategic Needs Assessment be noted.
- (iii) That the profiles were being used as a key data to inform the refresh of the Joint Health & Wellbeing Strategy and other partnership plans be acknowledged.

**11 County Durham Prevention of Unintentional Injuries Framework (0-19 years) 2017-2020**

The Board considered a report of the Director of Public Health County Durham, Adult and Health Services, Durham County Council that presented a revised delivery framework for the prevention of unintentional injuries in children and young people (0-19 years) in County Durham 2017-2020 (Appendix 4), following consultation. The action plan was also included as part of the framework towards the end of Appendix 4 (for copy see file of Minutes).

**Resolved:**

- (i) That the amendments to the framework following consultation be noted.
- (ii) That final comments be provided and sign off on the revised unintentional injuries delivery framework be agreed.

**12 eXtreme Group - Children's and Young People's SEND 'Promise' for County Durham**

The Board considered a report of the Strategic Manager SEND and Inclusion, Children and Young People's Services, Durham County Council that provided an overview of the content and recommendations for the Children and Young People's SEND (Special Education Needs and Disability) 'Promise' developed by the eXtreme Group (for copy see file of Minutes).

The Chairman welcomed to the meeting Chris Affleck, Project Worker for Investing in Children together with E and J from the eXtreme Group.

Chris explained that E and J were young people from County Durham with a disability and that they were part of the eXtreme Group that looked at how to make lives better and that gave the opportunity to talk about issues that affected them.

E and J gave a presentation to the Board about the SEND promise. They gave details about an event that they had arranged and the feedback taken from that. They were in the process of arranging a further event and they were asking organisations to sign up to the promise. The event gave young people the chance to find out information of what was available to them. They hoped to be able to talk to people about the transition into jobs and apprenticeships and the event also offered activities such as sport and entertainment.

The Board and its partners were asked to adopt the principles set out in the SEND 'promise'.

The 'Promise' includes the following themes:

- Education
- Health
- Activities/Leisure Provision
- Respite Opportunities
- Transport
- Children in Care
- Employment
- Access to information
- Having a Voice

The Chairman thanked E and J for their presentation and said that it was evident that they enjoyed what they did. She said that it was important that their voices were heard and were responded to. She asked if they would return to a future meeting to give a further update.

Chris thanked the Board for the opportunity to attend the meeting and said that E and J were great advocates for the group. He asked the Board to promote the SEND promise.

**Resolved:**

- (i) That the Children and Young People's SEND 'Promise' as the children and young people with SEND charter for the Local Area be recognised.
- (ii) That the 'Promise' as it relates to the Health and Wellbeing Board and its partners be approved.
- (iii) That the 'Promise' throughout the Health and Wellbeing Board and its partners be cascaded.

**13 Oral Health Update**

The Board considered a report of the Director of Public Health County Durham, Adult and Health Services, Durham County Council that gave an update on the possibility of implementing water fluoridation in response to the poor levels of oral health and associated harms locally (for copy see file of Minutes).

The Chairman welcomed Peter Kelly, Regional Director for Public Health England to the meeting.

The Director of Public Health said that oral health was very important for general health and wellbeing and she reported that there were inequalities throughout the County with regards to tooth decay in children. She went on to highlight the benefits of fluoridation.

The Regional Director for Public Health England explained how evidence had shown where there was natural occurring fluoride or from schemes where fluoride had been introduced, tooth decay was a lot less than areas without it. He added that Public Health England had found no evidence of any adverse effects.

The Board were advised of the 3 options and the preferred option identified at paragraph 1 of the report would also benefit residents in Sunderland and South Tyneside and would therefore require agreement and joint working:-

- Option 1. According to Northumbrian Water the simplest and most economic method of fluoridating a water supply is to construct the fluoridation plant at all the water treatments works supplying County Durham. These Water Treatment Works also supply water to properties within Sunderland and South Tyneside Council boundaries. The capital cost is approximately £1,200,000.

On answering a question from the Chairman about timescales, the Regional Director Public Health England said that it was important to get the process precisely correct and therefore timescales might longer than outlined. He advised that the feasibility study would take 3-6 months once agreement had been reached to go ahead by Sunderland and South Tyneside. A technical appraisal would then be carried out followed by a consultation in the Autumn of next year. Public Health England would support the local authorities with any subsequent consultation.

The Chairman commented that it was important to get the consultation phase right and she believed that this would help to give young people the best start in life. The Regional Director of Public Health England said that Durham were leading on this and agreed that the evidence was overwhelming and he believed that this was a very strong proposal.

Councillor Gunn asked how long it would take to see the benefits of this scheme and was informed that once water was fluoridated this had an immediate effect on children and if based on the current timeline this would be after 2020.

**Resolved:**

- (i) That option 1 involving the construction of a fluoridation plant at all water treatment works in County Durham be adopted as the preferred option be agreed.
- (ii) That the progression to a full technical appraisal of fluoridation of County Durham (the central supply area) be agreed.
- (iii) That a further report would be submitted to the Board following completion of the technical appraisal be noted.

## **14 Integration Update**

The Board considered a report of the Director of Integration, North Durham and Durham Dales, Easington and Sedgefield Clinical Commissioning Groups and Durham County Council that provided progress with regard to Community Hubs/Teams Around Practices (TAP) (for copy see file of Minutes).

Referring to the BCF funding the Chairman asked what would the consequences be of not meeting the delayed transfer of care target. The Corporate Director of Adult and Health Services explained that there may be a financial risk if the delayed transfer of care target was not met.

The Director of Primary Care and Engagement reported that the DDES CCG had welcomed the TAP approach and could see the co-ordination of community nursing working well. North Durham CCG colleagues were enthusiastic about the integration arrangements and he confirmed that both CCGs were supportive around the TAP development.

Councillor Allen asked what difference would be seen by members of the public. The Director of Integration said that activity was being managed better and therefore time was freed up to enable work to be carried out. In terms of assessment she explained that this would not be duplicated by lots of different professionals, and for the older person care would be centred where possible in the home rather than in hospital.

**Resolved:**

- (i) That the content of the report be noted.
- (ii) That to receive further updates in relation to Health and Social Care Integration on a six monthly basis be agreed.

**15 Refreshing Durham's Mental Health and the Work of the Mental Health Partnership Board**

The Board considered a report of the Director of Public Health County Durham, Adult and Health Services, Durham County Council that presented the draft priorities for mental health into a single plan on a page that asked for agreement for wider consultation (for copy see file of Minutes).

The report also highlighted a number of crosscutting themes, and provided an update on the current governance arrangements.

Councillor Gunn was pleased to see so much emphasis on schools.

**Resolved:**

- (i) That the draft strategic mental health plan (Appendix 2) on a page for wider consultation be agreed.
- (ii) That the consultation timeline for agreement of the strategic mental health plan on a page in March 2018 be noted.

**16 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 paragraph 3 of Part 1 of the Local Government Act 1972.

**17 Pharmaceutical and Local Pharmaceutical Services Regulations 2013**

The Board considered a report of Director of Public Health County Durham, Adult and Health Services, Durham County Council that provided details in relation to the

closure of a Practice Dispensary in accordance with the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

**Resolved:**

That the recommendations contained within the report be approved.