

DURHAM COUNTY COUNCIL

At a Meeting of **Health and Wellbeing Board** held in Committee Room 2, County Hall, Durham on **Tuesday 20 March 2018 at 9.30 am**

Present:

Councillor L Hovvels (Chairman)

Members of the Board:

Councillors J Allen and O Gunn, C Bage, N Bailey, S Clegg, Dr S Findlay, C harries, A Healy, B Jackson, J Robinson, P Scott, Dr D Smart, A Smith, Dr J Smith and M Whellans

1 Apologies for Absence

Apologies for absence were received from J Gillon, S Jacques, L Jeavons, S Lamb, C Martin and A Reiss

2 Substitute Members

S Clegg for S Jacques, P Scott for C Martin and A Smith for S Lamb

3 Declarations of Interest

There were no declarations of interest.

4 Minutes

The minutes of the meeting held on 25 January 2018 were agreed as a correct record and signed by the Chairman.

5 Active Durham Partnership Update

The Board received a report and presentation from the Active Durham Partnership Independent Chair and Strategic Manager, Culture and Sport, Durham County Council (for copy see file of Minutes).

The presentation highlighted the following points:-

- What is Active Durham?
- Active Durham Vision
- Active Durham Purpose
- How Active Durham Works
- Delivering the Vision – A Framework

- What do we mean by physical activity?
- What are our ambitions?
- Progress
- Encouraging and evidence based approach
- Marketing and communications
- Influencing workforce
- Tackling children and young people participation
- Active 30 toolkit
- Working at scale – place based approach
- Celebrating success
- New phase – focus for next 12 months

Councillor Gunn commented about holiday activities with food, how the food provided was reaching the children and young people who needed it, and the successful support that the Area Action Partnerships had given to promote activities. She asked how the Active Durham Partnership was supporting the link to poverty.

The Strategic Manager, Culture and Sport advised that a place based approach had been taken and it had been recognised to work to scale. As an example the Shildon partnership would look at how to engage families with healthy eating, good food ideas together with physical activities. A lot of information had been received from Children and Young People's Services and although a whole County view was taken, it had been decided to start the roll out at Shildon.

Councillor Allen asked what was being done to promote social media sites and to gain more followers. The Strategic Manager reported that it was early days but that they were encouraging schools and other workforces to re-tweet posts. One of the targets set for the partnership was to raise audience levels as it needed to be sustainable. It was agreed that it was important to have one single message that partners could get behind.

The Director of Public Health, DCC commented that it was important to look at the links between activities and mental health as this could have a real benefit to secondary prevention. It was agreed it was important that the physical activity agenda continues to feed into the work of the Health & Wellbeing Board and the Team around Patients.

Resolved:

That the report and presentation be received.

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 Board received a verbal update from the Chief Operating Officer, North Durham and Durham Dales Easington and Sedgefield Clinical Commissioning Groups and the Chief Clinical Officer, Durham Dales Easington and Sedgefield

Clinical Commissioning Group in respect to the Sustainability and Transformation Plans for Northumberland, Tyne and Wear and North Durham and Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby Draft Sustainability and Transformation Plans.

The Chief Operating Officer and Chief Clinical Officer gave a presentation that gave an update on both the local and regional progress (for copy see file of Minutes):-

County Durham –

- County Durham Health and Care Plan
- Development of the plan
- Integration, teams around patients
- Working principles and next steps
- NHS planning guidance 2018/19
- Delivery of five year forward view
- Integrated system working - commissioners and providers
- Different way of planning through Integrated Care Systems focused on health and social care

Regional Update –

- Better Health Programme and Optimising Acute services – progress and direction of travel
- Progress with key workstreams:
 - Prevention
 - Transforming learning disabilities care
 - Mental health
 - Neighbourhoods and communities
 - Digital
 - Workforce
 - Pathology

The Chief Operating Officer outlined that there was a focus on the public pound for County Durham which includes streamlining arrangements, where possible and scaling up current arrangements. Clinicians and workstreams are involved in developing a future “blue print”. The Corporate Director of Adult and Health Services, DCC added that there was an ongoing dialogue about the complexity of the arrangements and mapping out across the North East and that governance is also being looked at.

The Clinical Director expressed concerns that there were a number of areas that were missing from the workstreams and were critical to health care needs – such as haematology, obstetrics, urgent and emergency care and paediatrics.

Resolved:

That the presentation be noted.

7 South Tyneside and Sunderland Path to Excellence Programme

The Board received a verbal update from the Director of Contracting and Informatics, NHS Sunderland Clinical Commissioning Group and Path to Excellence Programme Manager, South Tyneside and Sunderland Healthcare Group on the Path to Excellence Programme.

A consultation exercise was conducted on the proposed options for Stroke Services, Obstetrics and Gynaecology, Paediatrics and Emergency Services over a 14 week period. There had been a number of meetings held, presentations to various Overview and Scrutiny meetings and over 3000 responses received to the survey circulated. The decision making process on the preferred options had commenced in February 2018 and would take into account the impact of residents from South Tyneside especially in terms of travel and transport. The Joint Health Overview and Scrutiny Committee had indicated they were referring this issue to the Secretary of State.

The next steps of the process were identified including Phase 2 of the process which would look at Medicine and Emergency Care, Surgery, Clinical Support Services and Elective Services. Phase 2 consultation is expected to be later in 2019. A clinical design team had been set up to develop the options and look at influencing factors. Staff workshops had been held and this would be rolled out to cover wider staff engagement, including frontline staff. Patient experience will also be fed into the review. The Northern Clinical Senate would be helping to benchmark this area of work.

Resolved:

That the verbal report be noted.

8 Primary Care Navigation

The Board received a report and presentation of Director of Primary Care, Partnerships and Engagement, North Durham and Durham Dales Easington and Sedgfield Clinical Commissioning Groups regarding the development and implementation of Primary Care Navigation for County Durham (for copy see file of Minutes).

The presentation highlighted the following points:-

- Why do care navigation
- What is care navigation
- Benefits of using care navigation
- What care navigation is not
- How care navigation works
- Key stages in development

The Director of Primary Care, Partnerships and Engagement outlined that all 70 GP practices were going live with the care navigation scheme and receptionists were being trained between May and September 2018.

Colin Bage asked how communications were getting through to the general public about this and if they understood it. The Director of Primary Care agreed that

communications were equally as important as the implementation. He added that Practice Managers were speaking to their own Patient Reference Groups (PRGs).

The Corporate Director of Adult and Health Services, DCC enquired how this would link in to Durham Locate. The Director of Primary Care explained that specific task groups had been set up to look at the public health delivery contract. The Wellbeing for Life Service were setting up a best practice template and was an opportunity for them to get into general practices. He added that teams around patients (TAPs) would identify people who would benefit the most from the service and these care navigators would be able to advise the multi-disciplinary teams.

The Director of Public Health, DCC commented that clear communications were really important and that a change in culture to more self-care was an important conversation to have through patient reference groups.

Resolved:

That the report and presentation be received.

9 Children and Young People's Services Management of Child and Adolescent Mental Health Service Waiting Times - Report of Director of Operations, Durham and Darlington Children and Young People's Services, Tees, Esk and Wear Valley NHS Foundation Trust

The Board considered a report of the Director of Operations, Durham and Darlington Children and Young People's Services, Tees, Esk and Wear Valley NHS Foundation Trust (TEWV) to give an update on progress made in reducing waiting times for children and young people accessing TEWV and Children and Adolescent Mental Health Services (CAMHS) (for copy see file of Minutes).

Councillor Gunn expressed concern about the level of support to schools in relation to mental health and she asked if the feedback from patients had been positive. The Director of Operations confirmed that the feedback had been very positive and he assured her that school nurses work with those schools that had opted in. He added that training and support was offered for all staff.

The Corporate Director of Children and Young People's Services referred to the recent Green Paper on transforming children and young people's mental health provision, and said that it was important to speak to head teachers as they have a clear role in relation to children and young people's mental health. She also highlighted that mental health and wellbeing should be part of a Healthy School programme framework. She had also been speaking to Public Health about resilience and recognised that there was a lot of work ongoing to address this.

Councillor Allen asked if there was a variation in waiting times across the County and was advised that this was no more than four weeks.

Further to a question from the Chairman, the Director of Operations said that he would share the data on further clinical interventions.

Resolved:

- (i) That the report be noted.
- (ii) That the Children and Young People Mental Health Local Transformation Group provide an update against the key actions and the process to refresh the current plan at the May Board meeting, be agreed.

10 Pharmaceutical Needs Assessment 2018-21

The Committee received a report of the Director of Public Health County Durham, Adult and Health Services, Durham County Council that presented the final draft of the Pharmaceutical Needs Assessment 2018 (for copy see file of Minutes).

The Public Health Pharmacist advised that all comments received on the draft PNA had been considered and she thanked Healthwatch for helping to shape the document. The key points and conclusions were highlighted.

Further to questions from Councillor Allen it was confirmed that feedback had incorporated into the development of an action plan and that the board would keep this under review and be reported on an annual basis.

The Chairman asked how the PNA would be promoted to the public and how it fit in with the Joint Health and Wellbeing Strategy. The Public Health Pharmacist confirmed that the public would be made aware of what pharmacies could do in the key statement from the PNA. The action plan would also help support the Local Pharmaceutical Committee to start a local campaign. She added that one of the new actions was the delivery of medicines in rural areas as concerns came to light during the public consultation.

The Chief Clinical Officer, DDES CCG said pharmacies and primary care should be thought of together and not as competition to each other and the impact for both services needed to be looked at.

Councillor Gunn said that it was important to ensure that the public were aware of what was happening and that comments had been taken on board.

Resolved:

- (i) That the report be signed off and published by 1 April 2018.
- (ii) That comments on the action plan be received.

11 Healthwatch County Durham Work Plan 2018-19

The Board considered the Healthwatch County Durham Work Plan 2018/19 (for copy see file of Minutes).

The Programme Manager presented the work plan for 2018/19 and reported that 50% of the plan was generated by what the public had informed Healthwatch. The plan included barriers to learning disability health checks, barriers to bowel, breast and cervical screening programmes, use of pharmacy services, people with a learning disability living in a care home, access to support services for stroke patients, understanding of safeguarding and access to health screening by vulnerable women, observations on Sustainability and Transformation Plan

engagement events, accessibility of care home websites and maternity support services.

The programme manager asked that board members promote the work of Healthwatch through social media where possible.

Referring to GP appointments, Colin Bage asked if this was in response to the navigator role or if the issue had been raised previously. The Programme Manager advised that the issues were what people had informed them about and access to a GP was one of those. She did add that Healthwatch would be feeding into the review of Care Navigators.

The Corporate Director of Children and Young People's Services said that it was important to have a focus on children with regards to mental health and requested that the work programme is inclusive of children and young people issues.

Dr Smith thanked Healthwatch for the help and support received recently in terms of an enter and view visit and the Programme Manager.

The Director of Public Health outlined that funding had been received from the Northern Cancer Alliance due to the positive work carried out by Healthwatch on cancer screening.

Resolved:

- (i) That the proposed work plan priorities in the report be received.
- (ii) That the public vote through their networks until 31 March be promoted.
- (iii) That areas of patient, user and public engagement that would support the Joint Health and Wellbeing Strategy and submit related work plan requests be considered by the HWCD Board.

12 Public Health Marketing Campaigns 2018

The Board received a report and presentation of Director of Public Health County Durham, Adult and Health Services, Durham County Council that gave an update on the planned public health marketing campaigns for 2018 (for copy see file of Minutes).

The presentation highlighted the following points:-

- Health communication is seen to have relevance for virtually every aspect of health and well-being, including disease prevention, health promotion and quality of life." (Rimal & Lapinski, 2009)
- Communications should be undertaken as part of a comprehensive sustained approach to tackling the issue.
- Should not be done in isolation but combined with other activities and actions.
- Communication/campaigns need a purpose; whether it is to raise awareness of an issue, signpost people to local services or as a call for action.
- Priority: Mental Health
- Priority: Breastfeeding

- Priority: Tobacco
- Priority: Alcohol
- Priority: Stay Well this Winter
- How partners can support
- How can we measure impact

Referring to the Children and Families Partnership and schools, Councillor Gunn said that it was important to highlight successes and good new stories.

Councillor Allen suggested that there was an opportunity to identify a small number of key campaigns and activities and to focus more effort on one of them each quarter.

The Strategic Manager PPP offered to link with the Public Health Portfolio Lead to take this forward and align the Health and Wellbeing agendas with the key campaign dates.

Resolved:

- (i) That the content of the report be noted;
- (ii) That the proposed themes for sustained effort across all partners across the year 2018/19 be discussed and agreed;
- (iii) That to the development of coordinated multi-agency communications plans for the agreed priorities and facilitate a mechanism by which communication specialists from partner agencies are able to come together to achieve this be agreed;
- (iv) That discussions with other partnerships such as Safe Durham Partnership and the Children and Families Partnership, particularly around vulnerabilities and children to agree a composite calendar of public health campaigns across the year be agreed.

13 Adult Autism Self-Assessment Implementation Update

The Board received a report of Strategic Commissioning Manager, Adult and Health Services, Durham County Council that provided a progress update on the delivery of the 14+ Autism Strategy Implementation Action Plan and provided feedback from the statutory self-assessment for County Durham (for copy see file of Minutes).

The Strategic Commissioning Manager highlighted the positive improvements in relation to the autism pilot model which had seen waiting times reduce significantly.

Resolved:

- (i) That the contents of the report and proposed next steps be noted.
- (ii) That a comprehensive joint report in July 2018, which will incorporate an update in relation to performance and developments for children, young people and adults with autism be received.