

DURHAM COUNTY COUNCIL

At a Meeting of **Health and Wellbeing Board** held in County Hall, Durham on **Thursday 29 November 2018 at 9.30 am**

Present:

Councillor L Hovvels (Chairman)

Members of the Board:

Councillor O Gunn, D Brown, L Buckley, Dr S Findlay, A Healy, S Jacques and Dr D Smart

1 Apologies for Absence

Apologies of absence were received from Councillor J Allen, N Bailey, R Chillery, J Gillon, B Jackson, L Jeavons, V Mitchell, J Robinson and Dr J Smith

2 Substitute Members

D Elliott for J Robinson, S Lamb for R Chillery and J Parkes for J Gillon

3 Declarations of Interest

There were no declarations of interest.

4 Minutes

The minutes of the meeting held on 4 September 2018 were agreed as a correct record and signed by the Chairman.

5 Vision for the County Durham Partnership

The Board received a report of the Director of Transformation and Partnerships, Durham County Council that advised of the emerging findings and provided an outline of the next public consultation phase in the development of a new vision for County Durham (for copy see file of Minutes).

The Head of Partnerships and Community Engagement, Durham County Council informed the board that further to the decision made by the County Durham Partnership to refresh the vision for the county, this document had been produced based on the findings from consultation feedback, performance data and main policy drivers.

The Head of Partnerships and Community Engagement reported that focus groups had been set up through the Area Action Partnerships (AAPs) and an online questionnaire had been developed.

The Strategic Manager Partnerships asked the board to feed any comments back to her before the Christmas period.

Resolved:

That the emerging findings and content of the consultation plan be noted.

6 Director of Public Health Annual Report, including Transforming County Durham's JSNA and developing Durham Insight

The Board received a report and presentation of the Director of Public Health, Durham County Council that presented her Annual Report for 2018 (for copy see file of Minutes).

The Director of Public Health gave a detailed presentation on the Annual Report that focused on the new vision for the public's health in County Durham. The presentation highlighted the following:-

- Health and wellbeing across County Durham
 - Our county
 - Our children
 - Our adults
 - Our older people
 - Our assets
- Where we are now?
 - Reduction of nearly 22,000 smoker with a pledge to further reduce this by another 5% by 2025
 - Now lower than the national average
 - Need to support another 53,000 smokers and lift people out of poverty

The Director of Public Health informed the Committee that the report had focused on a fictional family 'the Taylors' and the challenges they faced.

The presentation then highlighted:-

- The seven strategic priorities
- Our actions
- What this meant for the Taylor family
- JSNA transformation process – key themes
- Proposed new structure for County Durham – JSNA process

Resolved:

That the annual report be received.

7 Joint Health and Wellbeing Strategy (JHWS) 2019 - 22

The Board considered a report of the Strategic Manager Partnerships, Transformation and Partnerships, Durham County Council that set out the draft vision for the Health and Wellbeing Board, the objectives for the Joint Health and

Wellbeing Strategy (JSNA) for 2019-22, and that provided an update on the process for the refresh of the strategy (for copy see file of Minutes).

The Strategic Manager Partnerships highlighted the current strategic objectives, the process for the refresh of the vision and the suggested new strategic objectives. The draft Joint Health and Wellbeing Strategy would be presented to the board in early 2019.

The Director of Operations Durham and Darlington, TEWV said that he was happy with the new strategic objectives and would be carrying out further work around adult mental health and how this could fit in with Teams Around the Patients.

Councillor Gunn asked how this would be aligned to other plans such as the County Durham Partnership Vision, The Clinical Commissioning Groups Operational Plans and the Children and Young People's Plan. The Strategic Manager Partnerships advised that this alignment would be done by working with partners.

Referring to the Health and Wellbeing vision, the Director of Public Health said that we needed consistency of what this was in line with the County Durham Vision. In response, the Strategic Manager Partnerships said that the County Durham Vision was much wider with health being one aspect of it.

Resolved:

- (i) That the vision for the Health and Wellbeing Board be agreed.
- (ii) That further work with leads to take place to identify key ambitions for the Health and Wellbeing Board to work towards be noted.
- (iii) That the six strategic objectives for the JHWS 2019-22 be agreed.
- (iv) That progress for the refresh of the JHWS 2019-22 be noted.

8 Joint Health and Wellbeing Strategy (JHWS) 2016-19 Q2 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 Equality and Strategy Manager, Durham County Council gave a presentation that highlighted the following:-

- Escalation Areas and Strategic Objectives
 - Smoking at the time of delivery – the figure had come down marginally from last year with 16.9% in County Durham compared to 10% nationally
 - Percentage of patients seen face to face second contact within 9 weeks of referral to CAMHS – the target of 90% had deteriorated with an increase in the number of people going through the system
 - Successful completion of drug and alcohol treatment – there had been a recent decline in performance which could be attributable to the transition to a new provider
 - Gap between the employment rate for those with a long-term health condition and the overall employment rate – an emerging issue in County

Durham with overall improvement over the last few years. However, there was a larger gap between healthy and unhealthy people.

The Chief Clinical Officer, DDES CCG asked if the indicators for drugs and alcohol had impacted on performance and was advised that there had been a lot of changes over the last six to nine months and the data was being gathered to learn from it. The Director of Public Health said that there had been a lot of instability due to the previous provider failing and there had been a new provider procured. Work was ongoing with long term opiate clients to tailor treatment for them based on age and gender which was expected to increase successful completions.

The Director of Operations Durham and Darlington, TEWV advised that they were working closely with the CCGs on early interventions. They were seeking funding for two further placements that would help overcome the challenges. With regards to the CAMHS data there had been a 12% increase in referrals from last year. He confirmed that all patients had appointments and that the nine week wait had been a challenge.

Referring to mental health of young people, the Head of Children's Public Health Nursing, Harrogate & District NHS Foundation Trust informed the board that a lot of work was ongoing with children who were not referred to CAMHS. The Director of Public Health commented that this area was a real concern and joint workshops had been held to look at pathways and the quality of services provided.

The Chairman, as a mental health champion, said that we should all strive to do more in this area and to continue to tackle the challenges.

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 2017/18 and 2018/19 Quality Premium Indicators be noted.

9 The children and young people's mental health, emotional wellbeing and resilience local transformation plan on a page consultation

The Board received a joint report of the Corporate Director, Children and Young People's Services, Durham County Council, and Director of Public Health, Durham County Council that provided consultation feedback on the draft children's mental health, emotional wellbeing and resilience local transformation plan on a page 2018-2020 (for copy see file of Minutes).

Councillor Gunn was pleased to see that children and young people had been involved in the development of the plan as it was important to listen to their concerns and views. She would like to receive some feedback on how many looked after children had been involved in the process.

Resolved:

- (i) That consultation had taken place be noted and the CYP MH LTP plan on page be signed off.
- (ii) That the actions within the CYP MH LTP would be part of the overarching all age mental health strategy for County Durham, and that would be a major theme within the development of the children's strategy for County Durham, be noted.
- (iii) That the full CYP MH LTP assurance document, signed off by the Chair of the Health and Wellbeing Board and the Corporate Director of Children and Young People's Services on 25 October, as per the requirements of NHS England ahead of submission on 31 October 2018 be noted.

10 Durham's Mental Health Strategy and Concordat 2018-2021

The Board received a report of the Director of Corporate Programmes, Delivery and Operations, North Durham Clinical Commissioning Group that highlighted the comments received during Mental Health Strategic Plan (MHSPB) development, the impact of those on the future work of the MHSPB and its delivery workstreams, the initiatives being planned for 2018/19 and the emergence of a new mental health strategy and concordat (for copy see file of Minutes).

Councillor Gunn expressed concerns about the transitional arrangements from children to adult services and was advised that this would be developed through the appropriate workstream and was an area of focus.

The Director of Operations Durham and Darlington, TEWV commented that the workstream were suggesting that the transitional arrangements should run up to the age of 25 as some young people were not ready to transition at the age of 18. They would look at the overlaps and when it was best for that young person to hand over.

The Interim Head of Commissioning, Adult and Health Services, Durham County Council reported that a lot of work was taking place with colleagues in Children's Services in relation to this area of work.

The Assistant Chief Fire Officer commended the fictional 'Taylor' family within the Director of Public Health's Annual report and said that this was a really good way to interlink across the board and get messages across.

Resolved:

- (i) That the content of the report, noting the outcome of the consultation and the response of the Mental Health Strategic Partnership Board be noted.
- (ii) That the Mental Health Strategic Plan and infographic in Appendices 2 & 3 be approved.
- (iii) That the Mental Health Strategy and Concordat in Appendix 4 be approved.

11 Market Position Statement 2019/21

The Board received a report of Interim Head of Commissioning, Durham County Council that presented the revised Market Position Statement for 2019/21 (for copy see file of Minutes).

The Interim Head of Commissioning highlighted the key messages in the statement and the key areas of concern, including mental health and housing.

Resolved:

- (i) That the report be noted.
- (ii) That the Market Position Statement, as the final document for circulation, be endorsed.

12 Public Health Grant

The Board received a report and presentation from the Director of Public Health, Durham County Council that highlighted the risks to future public health funding and the potential impact on activities related to the health and wellbeing of Durham residents (for copy see file of Minutes).

The presentation included information on the following:-

- Background about the grant
- Public Health responsibilities
- Proposals beyond 2020 and implications for Durham
- Key Areas of Focus and Future Lobbying
- Comparison of County Durham , the North East, England (the best and worst) and Surrey and Herfordshire LAs
- Successes
- Risks
- Next steps

The Board and partners agreed to give support by writing to central government.

The Chairman stressed that this affected all partners and the prevention agenda that we were all trying to deliver.

Councillor Gunn was fully supportive of this and commented on the real effects of budget cuts across the local authority and commented that it was important to work together across all partnerships to provide the best possible support.

With regards to the 0-19 services, the Head of Children's Public Health Nursing, Harrogate & District NHSFT said that the amount of safeguarding issues and serious case reviews had increased and were in need of further funding without having the implications of additional cuts.

Resolved:

- (i) That the report be noted.

- (ii) That the activities being co-ordinated by the Director of Public Health be endorsed.
- (iii) That these activities be supported personally through appropriate channels.

13 Health and Social Care Plan

The Board received a presentation from the Chief Clinical Officer DDES CCG that gave an overview of the Integrated Care Partnership and an update on the Integrated Care System (for copy see file of Minutes).

The presentation highlighted the following:-

- ICP
 - Ambition
 - Integrated Model – Progress
 - The next steps
 - Reminder of the future

- ICS
 - Overview
 - Integrated Care Partnerships

Resolved:

That the presentation be noted.

14 Better Care Fund Quarter 1 Performance Report 2018/19

The Board considered a report of the Strategic Programme Manager Integration, Adult and Health Services, Durham County Council that provided an update on the Better Care Fund (BCF) Q1 2018/19 benchmarking and analysis of non-elective admissions data (for copy see file of Minutes).

The Strategic Programme Manager advised the target for permanent admissions of older people to residential/nursing care homes was a challenge and above target as there had been an increase in the number of beds days for patients with dementia. With regards to delayed transfers of care performance had missed the target due to waiting for non-acute care. With regards to delayed transfer of care, although above target, there was close scrutiny taking place on this on a daily basis and Durham had been the 14th lowest in England, however, good performance in August had seen this rise to 10th.

The Board were advised that quarter two data would be available shortly and circulated to members.

Resolved:

- (i) That the contents of this report be noted.
- (ii) That to receive further updates in relation to BCF quarterly performance be agreed.

15 Smoke Free NHS

The Board received a joint report from the Chief Executive, County Durham and Darlington NHS Foundation Trust (CDDFT), and the Director of Operations Durham and Darlington, Tees Esk and Wear Valley NHS Foundation Trust (TEWV) that gave updates on becoming NHS Smokefree NHS Foundation Trusts (for copy see file of Minutes).

The Chief Executive and General Manager for Mental Health and Health Improvement Services, CDDFT gave a presentation that highlighted the following:-

- Why people smoke
- Impact of smoking in County Durham
- Smokefree NHS is strategically important
- PHE Tobacco Control Delivery Plan
- Our approach
- Our priorities
- Preventing ill health by risky behaviours
- Proposed community approach

The Director of Operations Durham and Darlington, TEWV presented the following smokefree update:-

- Smokefree Trust
- Nicotine Replacement Therapy – first 6 months
- Trust wide Anti-Smoking Status
- Friends & Family Test Results (FFT)
- CQUIN 2017-2018
- CQUIN 2018-2019
- PHE report
- Future Goals 2018-2019
- Trust signing of national smokefree pledge

The Strategic Manager Partnerships asked what support was given to staff and was advised by the Director of Operations that TEWV had carried out a nicotine replacement scheme initially and had introduced a smokefree site.

The Director of Public Health congratulated the NHS Trusts on some fantastic results. She advised of some joint working around e-cigarettes through the Tobacco Alliance. The Corporate Director of Operations also advised of work that would be carried out in prisons and acute hospitals.

Resolved:

- (i) That the presentation be received.
- (ii) That the Northumberland, Tyne & Wear and TEWV Executive Summary detailed in Appendix 2 be noted.

16 Evaluation of County Durham and Darlington Fire and Rescue Service Safe and Wellbeing Visits

The Board received a report of the Director of Public Health, Durham County Council that provided the results of the co-produced evaluation study of the Safe and Wellbeing Visits (SWV) delivered by County Durham and Darlington Fire and Rescue Service (CDDFRS) and the recommendations for future consideration (for copy see file of Minutes).

The Assistant Chief Fire Officer informed the board that safe and wellbeing visits had been a part of the prevention agenda since 2004, and since then there had been a 40% reduction in fires. He went on to advise that the Fire and Rescue Service also fit free smoke alarms and advised on fire safety aspects such as overloading sockets, consoles and exit routes. The board were informed that 18,000 homes were visited throughout the year and the officers had an understanding of looking for vulnerable homes. Nationally, the role of a fire fighter had broadened and now included looking at risk factors of dying in a fire.

The Public Health Strategic Manager gave a detailed presentation that included the following information:-

- Background to the Safe and Wellbeing Visits
- Research aims and objectives
- Key Findings
- Key Recommendations

He advised that the next steps would be for CDDFRS and public health to develop an action plan.

The Head of Children's Public Health Nursing, Harrogate & District NHSFT said that the outcomes were focused on the elderly but asked if there was any evidence that pointed to issues of neglect, in particular for under four year olds. She further asked if the officers would look for signs of domestic abuse and make safeguarding referrals. The Assistant Chief Fire Officer advised that those issues were not covered under safe and wellbeing but under a separate process that had its own pathway. Under the safe and wellbeing visits, people had to be informed as to the reason for the visit. Under the evaluation, the Public Health Strategic Manager said that many risk factors had been associated with age.

The Director of Public Health advised that an in depth piece of work would be carried out looking at the measures and interactions that the fire service had. This was sometimes enough for people and referrals would not be necessary, as intervention was just as important.

In response to a question from the Chairman, the Director of Public Health advised that care leavers and young people were a targeted area for people accessing the service.

Resolved:

- (i) That the content of the report be noted.

- (ii) That consideration be given to the report's findings and recommendations.
- (iii) That an action plan update in the next six months from the Fire and Rescue Service be received.

17 Public Health Campaigns

The Board received a presentation from the Director of Public Health, Durham County Council regarding the latest Public Health Campaigns on the following:-

- Tobacco
- Alcohol
- Mental health and wellbeing

Resolved:

That the presentation be noted.

18 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.

19 Pharmacy applications

The Board considered a report of the Director of Public Health County Durham which provided a summary of a Pharmacy Relocation Application 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.