#### **DURHAM COUNTY COUNCIL**

At a Meeting of **Health and Wellbeing Board** held in Committee Room 1A, County Hall, Durham on **Thursday 3 July 2014 at 9.30 am** 

#### Present:

## Members of the Committee:

Councillors L Hovvels, O Johnson and M Nicholls, N Bailey, J Chandy, Dr S Findlay, A Foster, S Halpin, C Harries, S Jacques, J Mashiter, R Shimmin and L Wilson.

#### 1 Election of Chairman

### Resolved:

That Councillor L Hovvels of Durham County Council be elected Chairman of the Board for the ensuing year.

## Councillor L Hovvels in the Chair

# 2 Appointment of Vice-Chairman

## Resolved:

That of Dr S Findlay be appointed Vice-Chairman of the Board for the ensuing year.

## 3 Apologies for Absence

Apologies for absence were received from M Barkley, Dr K Bidwell and A Lynch.

## 4 Substitute Members

L Wilson for A Lynch and S Halpin for M Barkley.

# 5 Declarations of Interest

Councillor L Hovvels declared an interest in Item No 10.

Dr Stewart Findlay and Joseph Chandy declared an interest in Item 10 Primary Care Strategy and Item No. 13 Urgent Care Strategy.

## 6 Minutes of the meeting held 5 March 2014

The Minutes of the meeting held on 5 March 2014 were confirmed by the Board as a correct record and signed by the Chairman.

Rachael Shimmin, Corporate Director of Children and Adults Services asked how the Mental Health Concordat was moving forward with an overview of Mental Health. Peter Appleton, the Head of Planning and Service Strategy said that a specific Task Group had been set up, led by Michael Houghton from North Durham CCG.

The Chairman informed the Board of the retirement of Dr Kate Bidwell and placed on record her thanks for the significant contribution she had made. Dr David Smart would take up her place on the Board.

# 7 Housing, Health and Wellbeing

The Board received a joint presentation of the Special Projects Housing Manager, Regeneration & Economic Development, Durham County Council and the Chief Executive of Cestria Community Housing that focused on making the links between Housing and Health and Wellbeing (for copy of presentation see file of Minutes).

David Siddle, Special Projects Housing Manager highlighted the following:-

- The importance of housing to health and care
- Linking with the priorities of the Joint Health and Wellbeing Strategy
- Solution through the integration of housing with health and social care
- Available housing services
- The challenge of Housing Conditions
- The challenge of the Housing Market

Paul Fiddaman, Chief Executive of Cestria Community Housing continued the presentation and focused on the following points:-

- The challenge of housing and communities
- The National Picture
- The local picture in County Durham
- Making Strategic Connections

The Chairman thanked David Siddle and Paul Fiddaman for their very informative presentation and welcomed the joined up approach to deal with these issues.

Rachael Shimmin, Corporate Director, Children and Adults Services referred to the Care Act and how there is a wellbeing duty within it that will change the way we think about prevention. She said that it was important to capture what housing were doing. David Siddle stated that the rationale was to invest to save in the long term, and that they were looking at schemes to cater for a wider range of people, e.g. extra care. Paul Fiddaman added that the housing sector needs to act more upon the evidence that is available. Work will take place to further include housing information into the Joint Strategic Needs Assessment.

Peter Appleton, the Head of Planning and Service Strategy referred to the challenge of housing conditions and the estimate cost of £39m to the NHS over the next 10 years, and asked if this figure had been shared with Public Health. David Siddle agreed that a dialogue with Public Health was very important. The Head of Planning and Service Strategy went on to discuss the importance of housing being

involved in an Implementation Group dealing with dementia. He informed the Board that fuel poverty was a discussion topic at Area Action Partnership meetings and he felt it was important to get the message across to help people to sign up for the scheme.

Joseph Chandy, DDES CCG said that the presentation was refreshing and recognised the relationship with housing and health. He referred to a scheme by Gentoo working with DDES around fuel poverty issues whereby patients with medical issues can have improvements to their homes to help alleviate health problems.

The Board continued to discuss the challenge of fuel poverty and how best to address this issue by working together. Dr Lynn Wilson, Public Health Consultant, said that the scheme by Gentoo would be interesting to show the impact warmer homes have on reducing health inequalities and that this could be brought back to a future meeting.

# 8 Improving Palliative and End of Life Care: Strategic Commissioning Plan 2013 - 2018

The Board considered a report of the Chief Operating Officer, North Durham and DDES Clinical Commissioning Group, which presented the Improving Palliative and End of Life Care: Strategic Commissioning Plan 2013-2018 (for copy see file of Minutes).

The Corporate Director, Children and Adults Services said that this was an important piece of work and a commitment had been given to deliver the plan and suggested that it would be interesting to carry out an evaluation at some point. Judith Mashiter, Healthwatch County Durham, noted that Healthwatch could be involved in the evaluation of this work.

## Resolved:

- (i) That the Improving Palliative and End of Life Care: Strategic Commissioning Plan 2013-2018 attached at Appendix 2, be agreed.
- (ii) That the direction of travel and development work required in primary care to locally take this forward, be supported.
- (iii) That the continued partnership working to ensure integrated delivery of patient centred services, be supported.

# 9 Dementia Strategy 2014-2017

The Board considered a report of the Chief Operating Officer, North Durham and DDES Clinical Commissioning Group, which presented the 'Dementia Strategy for County Durham and Darlington; 2014 - 2017' (for copy see file of Minutes).

The Head of Planning and Service Strategy said that this was a really good document with a lot of interest in it and that there would be publicity surrounding it.

It was agreed the CCGs would invite a housing representative to join the Dementia Strategy Implementation Group. Nicola Bailey, North Durham CCG will present an

evaluation report of the dementia-friendly communities to a future Health and Wellbeing Board meeting.

#### Resolved:

That the content of the Dementia Strategy for County Durham and Darlington; 2014 – 2017, be agreed.

# 10 CCG Primary Care Strategy - A Discussion Document

The Board considered a joint report of the Chief Clinical Officer, DDES Clinical Commissioning Group and Chief Operating Officer, North Durham and DDES Clinical Commissioning Group, which sets out how Clinical Commissioning Groups (CCG) in County Durham are proposing to develop Primary Care in the next five years. This is particularly relevant at this moment in time when NHS England is seeking expressions of interest for the co-commissioning of Primary Care. The drivers for developing Primary Care were set out clearly in the Call to Action debate lead nationally by NHS England (for copy see file of Minutes).

Joseph Chandy, DDES CCG, stated that really useful feedback from patient groups had been received and incorporated into the strategy. He said that it had been a really useful process and affordability had been key to the plan. Nicola Bailey, North Durham CCG, echoed that statement for North Durham.

Following a question from Judith Mashiter, Healthwatch about what the consumer can see is happening, Mr Chandy explained that a patient group was established and that their comments had been carried through the core of the strategy.

Alan Foster, Chief Executive of North Tees and Hartlepool NHS Foundation Trust said that he endorsed the approach and the strategy for all CCGs and understands how enormous the challenge was. He added how important it was to work together around funding as felt it was key to the challenge of delivery.

Andrea Petty, the Strategic Manager, Policy, Planning and Partnerships, Children and Adults Services, informed the Board that she was happy to put together a response to CCGs and asked that any feedback be given to her by 16 July.

### Resolved:

- (i) That the report and the draft primary care strategies, be received.
- (ii) That CCG's be advised whether it supports the 'direction of travel' outlined in this report and commit to provide any detailed comments into the CCGs by the 25<sup>th</sup> July 2014.
- (iii) That the CCG's be informed if there any priorities not covered in this report.
- (iv) That further updates as appropriate, be received.

# 11 County Durham Drug Strategy 2014-2017

The Board considered a report and summary document of the Director of Public Health County Durham which presented the first County Durham Drug Strategy 2014-2017 (for copy of report see file of Minutes).

Dr Lynn Wilson, Public Health Consultant, highlighted the 3 themes that the strategy focused on

- Reducing Demand;
- Restricting Supply; and
- Building Recovery in Communities.

The Chairman suggested that it would be helpful for Dr Wilson to provide a briefing on what differences there are from the previous approach to drugs compared to the new approach outlined in the Strategy. Nicola Bailey agreed and was pleased to see that the strategy would come back to the Board in its final stages in November 2014.

The Corporate Director, Children and Adults Services pointed out that it was important to remember that this was the first ever strategy for County Durham and commented that it was helpful that all strands had been brought together.

Councillor Nicholls commented how important it was to protect the young, aged and vulnerable population.

## Resolved:

- (i) That a copy of the Drugs Strategy (2014-2017) for comment, be received.
- (ii) That the drug strategy will be presented to CMT, Children and Families
  Partnership and Safe Durham Partnership for comment between May
  and July, and presented to the Health & Wellbeing Board in November for
  final agreement, be noted.

# 12 Child and Adolescent Mental Health Services Commissioning - Outcome of Review

The Board considered a report of the Chief Operating Officer, North Durham and DDES Clinical Commissioning Group, which gave an update on the outcome of the Children and Adolescent Mental Health Services (CAMHS) commissioning review (for copy see file of Minutes).

#### Resolved:

- (i) That the governance for CAMHS as outlined in Appendix 2, be supported.
- (ii) That the Children and Young People's Mental Health and Emotional Wellbeing group will also provide updates to the Children and Families Partnership, be noted.
- (iii) That an interim 1-year CAMHS/children and young people's mental health and emotional wellbeing joint commissioning strategy 2014/15 is developed by September 2014, based on available intelligence, be agreed.
- (iv) That a longer term Children and Young People Mental Health and Emotional Wellbeing (including CAMHS) strategy, starting from 2015, is developed as part of the overarching Mental Health Framework No Health without Mental Health Implementation plan, be agreed.

## 13 Urgent Care Working Group Update

The Board considered a report of the Chief Clinical Officer, Durham Dales, Easington and Sedgefield Clinical Commissioning Group that provided an overview of the collaborative approach being taken by County Durham and Darlington Urgent Care Working Group to addressing issues being experienced across the whole health and care system – from primary & community care to social care and acute hospital care, ambulance transport and police and fire services (for copy see file of Minutes).

Dr Stewart Findlay explained that in future the Urgent Care Working Group will be named the System Resilience Group and would also cover planned as well as urgent care. Dr Findlay also explained that the Urgent Care Strategy would be rewritten to be a Whole System Strategy which would be consulted upon.

Sue Jacques, County Durham and Darlington NHS Foundation Trust acknowledged the extremely difficult work carried out in trying to get all agencies to work together. She added that there would need to be a tighter role between the Clinical Programme Board, the System Resilience Group and Health and Wellbeing Board.

Dr Findlay also explained that winter pressures funding from the government had been made available to CCGs for whole system planning and response for winter 2014.

Alan Foster, North Tees and Hartlepool NHS Foundation Trust said that there was a wider role of the resilience group in terms of cancer awareness campaigns and radiology capacity.

The Corporate Director, Children and Adults Services said that it was important for the group to have sight of demand through the group, and thought it would be useful to receive regular updates, along with a programme of work.

## Resolved:

That the report for information, be received.

# 14 Proposal for a Consultation to Make Play Parks/Area in County Durham Smoke Free

The Board considered a report from the Director of Public Health County Durham that proposed a consultation to Make Play Parks/Area in County Durham Smoke Free (for copy of report see file of Minutes). It was noted that Area Action Partnerships will be part of the consultation process.

## Resolved:

That the proposal for a consultation to implement a voluntary code to make play parks/area in County Durham smokefree, be supported.

# 15 Joint Health and Wellbeing Strategy Annual 2013-2014 Performance Report

The Board considered a report of the Head of Planning and Service Strategy, Children and Adults Services that described the progress being made against the priorities and outcomes set within the County Durham Joint Health & Wellbeing Strategy (JHWS) 2013-17 (for copy of report see file of Minutes).

#### Resolved:

- (i) That the performance highlights and areas for improvements identified throughout this report, be noted.
- (ii) That the actions taking place to improve performance and agree any additional actions where relevant, be noted.

# 16 Health and Wellbeing Board Annual Report 2013-2014

The Board considered a report of the Head of Planning and Service Strategy, Children and Adults Services that presented the Health and Wellbeing Board Annual Report 2013/14 for agreement (for copy of report see file of Minutes).

## Resolved:

- (i) That the Health and Wellbeing Board Annual Report 2013/14 which is attached at Appendix 2, be agreed.
- (ii) That the work that has taken place during the first year of operation of the Health and Wellbeing Board, be noted.

# 17 Joint Health and Wellbeing Strategy Delivery Plan 2014-17

The Board considered a report of the Head of Planning and Service Strategy, Children and Adults Services that presented the Joint Health and Wellbeing Strategy (JHWS) Delivery Plan 2014-2017 for agreement (for copy of report see file of Minutes). The report will be published following presentation to Cabinet in September 2014.

## Resolved:

- (i) That the JHWS delivery plan which is attached at Appendix 2, be agreed.
- (ii) That performance updates will be presented to the Health and Wellbeing Board in November 2014 and July 2015, be noted.

# 18 Healthwatch County Durham Annual Report 2013-2014

The Board considered a report of the Joint Chair of Healthwatch County Durham that presented the Annual Report for 2013-2014 (for copy of report see file of Minutes).

The Chairman thanked Healthwatch County Durham for producing a helpful and clear report.

## Resolved:

- (i) That the report and the progress which Healthwatch County Durham has achieved during its first year be received and noted.
- (ii) That the organisation's ongoing work as consumer champion for health and social care services, be noted.

# 19 Any Other Business

The Head of Planning and Service Strategy informed the Board about the funding round for the Integrated Digital Care Fund and asked for an application to be supported, as was in line with the direction of travel.

Sue Jacques, County Durham and Darlington NHS Foundation Trust added that a number of events had been held with stakeholders and approval from the board could be included in the bid.

## Resolved:-

That the board fully support the bid.

#### 20 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 Schedule 12A to the said Act.

# 21 Pharmacy Relocation Applications

The Board considered a report of the Director of Public Health 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 March 2014 (for copy see file of Minutes).

## Resolved:

That the Board note the Pharmacy Relocation Applications received.