

CITY OF DONCASTER COUNCIL

HEALTH AND WELLBEING BOARD

THURSDAY, 9TH NOVEMBER, 2023

A MEETING of the HEALTH AND WELLBEING BOARD was held in the COUNCIL CHAMBER, CIVIC OFFICE, WATERDALE, DONCASTER on THURSDAY, 9TH NOVEMBER, 2023, at 9.00 a.m.

PRESENT:

Chair - Councillor Rachael Blake, Cabinet Member for Children's Social Care and Equalities

Vice-Chair - Anthony Fitzgerald, Executive Place Director, NHS South Yorkshire ICB

Councillor Nigel Ball, Cabinet Member for Public Health, Communities, Leisure and Culture

Councillor Sarah Smith, Cabinet Member for Adult Social Care

Toby Lewis, Chief Executive of Rotherham, Doncaster & South Humber (RDaSH) NHS Foundation Trust

Fran Joel, Chief Operating Officer, Healthwatch Doncaster

Richard Parker, Chief Executive of Doncaster and Bassetlaw Teaching Hospitals (DBTH)

Phil Holmes, Director of Adults, Health and Wellbeing, City of Doncaster Council

Laura Sherburn, Chief Executive, Primary Care Doncaster

Lee Golze, Assistant Director Partnerships & Operations, City of Doncaster Council (substitute for Riana Nelson)

Rachael Leslie, Acting Director of Public Health, City of Doncaster Council (substitute for Dr Rupert Suckling)

Chris Margrave, St Leger Homes of Doncaster (substitute for Dave Richmond)

Also in Attendance:

Councillor Glynis Smith

Lucy Garnham, Public Health Apprentice (Shaping Stainforth), City of Doncaster Council

Grace Bennett, Public Health Apprentice (Shaping Stainforth), City of Doncaster Council

Karen Seaman, Public Health Co-ordinator, City of Doncaster Council

Megan Green, Public Health Officer, City of Doncaster Council

Debbie Stovin, Senior Dental Commissioning Manager (Yorkshire & the Humber / South Yorkshire ICB Programme Lead)

Dr Sarah Robertson, Consultant in Dental Public Health, Healthcare Public Health, NHSE North East and Yorkshire

Agatha Agema, Oral Health Lead, Doncaster Council

Margaret Naylor, South Yorkshire & Bassetlaw Local Dental Network

Mandy Espey, Health Inequalities Lead, Doncaster Place

Marius Taba, Gypsy Roma Traveller (GRT) Community Link Worker, SY ICB

Whitley Smith, Gypsy Roma Traveller (GRT) Community Link Worker, SY ICB

Louise Robson, Public Health Lead, City of Doncaster Council

Ailsa Leighton, Director of Transformation, NHS South Yorkshire ICB

Ruth Bruce, Doncaster Place Partnership

Roomana Shafiq, Public Health Degree Apprentice, City of Doncaster Council  
Rachel Rodgers, Public Health Degree Apprentice, City of Doncaster Council  
Hamna Saeed, National Management Trainee, City of Doncaster Council  
Carys Williams, Public Health, City of Doncaster Council  
Faye Esat, Public Health, City of Doncaster Council

88 WELCOME, INTRODUCTIONS AND APOLOGIES FOR ABSENCE

The Chair welcomed everyone to the meeting and invited all attendees to make introductions.

Apologies for the meeting were received from Dr Rupert Suckling, Lucy Robertshaw, Dr Nabeel Alsindi, Dave Richmond, Riana Nelson and Cllr Cynthia Ransome.

89 CHAIR'S ANNOUNCEMENTS

There were no announcements by the Chair.

90 PUBLIC QUESTIONS

While there were no questions from members of the public, the Chair asked whether any elected Members in attendance had any questions/statements. The Board received and responded to a statement by Cllr Glynis Smith, as summarised below:-

Councillor Glynis Smith spoke of the difficulties experienced by a close family member in obtaining a timely diagnosis and treatment for a benign growth on his pituitary gland which had been bleeding and had caused pressure on his optic nerve. He had been suffering for a period of time with severe headaches and light sensitivity and initial visits to GPs and to the A&E department had only resulted in the patient being given pain relief. Cllr Smith had accompanied him to a further visit to a GP when the symptoms had worsened and suggested that he needed an urgent referral to a neurologist and that an MRI scan with contrast was needed. This was duly arranged by the GP, along with a referral to Endocrinology to investigate why the patient's hormone levels were skewed. Cllr Smith also pointed out that, during this time, the drive through Phlebotomy service at the Eco-power stadium in Doncaster had been very useful when her family member had needed to obtain a blood test.

Cllr Smith stressed that this was not a complaint about the NHS and she appreciated the pressures that the service was currently facing, but she did wish to point out that her family member had been made to feel like he was a nuisance when he had made the initial visits to GPs and to A&E and was sent home with pain relief. She was also concerned over how other more vulnerable and less articulate patients were being looked after in situations such as this and felt it was important to not lose sight of the need to treat all patients with compassion.

During discussion on the points raised by Cllr Smith, Richard Parker agreed that, irrespective of the current pressures, the primary role of the NHS should always be to treat people with care and compassion. This included listening to patients so that their needs could be identified and a timely diagnosis and referral to services ensured. He stated that he would be happy to look in more detail at any aspects of the case described by Cllr Smith and provide a full response if Cllr Smith so wished.

Anthony Fitzgerald confirmed that the temporary Phlebotomy service at the Eco-power stadium was due to close on 24 November, due to the need to prioritise service provision, however he stressed that patient accessibility to all NHS services and facilities was always a key consideration and in the light of Cllr Smith's comments today, he would seek assurances from colleagues that there were no accessibility issues in relation to Phlebotomy services at the DRI and Montagu sites together with GP practices across Doncaster.

Richard Parker added that difficult conversations would be needed with partners and the wider community in the future as regards how services would need to adapt in the face of workforce and resource challenges, while maintaining high standards of care and patient accessibility to services and ensuring that the NHS continued to provide the services that people needed. In response, the Chair asked that an item on this subject be placed on the agenda for the Board's meeting in January 2024, which she suggested could also focus on equity and fairness which would tie in with the Board's consideration of the Fairness and Wellbeing Commission's recommendations which were also due to be discussed at the January meeting.

The Chair also stated that partners, including Healthwatch and the joint communications team that worked across the NHS and the Council, could play an important role in making people aware of the patient support and advocacy services that were available to them, and signposting people to the right service. On this point, she suggested that Healthwatch work with Louise Robson who supports the Health and Wellbeing Board to produce information about support and advocacy available and send it out before Christmas.

Richard Parker cited an example of good practice in terms of improving accessibility to health services which had, in turn, brought wider benefits to the community. This was the Community Diagnostic Centre set up at the Glassworks shopping centre in Barnsley. This facility had resulted in a 50% reduction in DNAs (people not attending appointments) and a 30% increase in people from particularly deprived areas accessing screening services. He felt that this was a great example of a multi-agency solution which ticked lots of boxes in terms of improving patient accessibility to health services and also helping the local economy, as it had also resulted in increased footfall and spending in the shopping centre. He felt that initiatives such as this were important in terms of looking at how NHS services might be delivered in the future.

RESOLVED that:

1. Healthwatch be requested to work with Louise Robson who supports the Health and Wellbeing Board to produce information about support and advocacy available and send it out before Christmas; and
2. An item on the subject of future service provision, focussing on patient accessibility and equity and fairness, be placed on the agenda for the Board's meeting in January 2024.

91 DECLARATIONS OF INTEREST, IF ANY

There were no declarations of interest made at the meeting.

92 MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 31ST AUGUST, 2023

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on 31<sup>st</sup> August, 2023, be approved as a correct record and signed by the Chair.

93 UPDATE ON ORAL HEALTH IMPROVEMENT AND DENTAL SERVICES

The Board received a presentation by Debbie Stovin, Dr Sarah Robertson and Agatha Agema which gave an overview of how South Yorkshire ICB and City of Doncaster Council were working to improve oral health and reduce oral health inequalities in Doncaster. The presentation covered:

- Population oral health data;
- A summary of the recent oral health needs assessment (OHNA);
- An overview of the dental commissioning challenges, including dental contract limitations;
- Access to dental care and the areas of opportunity to improve dental services through system working;
- The oral health position in Doncaster; and
- An overview of local community oral health improvement programmes.

The presentation concluded with a summary of what needs to happen in relation to further actions and next steps.

The Board noted that a South Yorkshire Dental Stakeholder event was to be held in Rotherham on the morning of 30 November. This event was open to a wide range of partners and agencies, including HWB and Overview and Scrutiny members, ICB members, representatives from dental practices, Healthwatch and other agencies. Further details and invites for this event were currently being sent out.

The officers then answered a wide range of questions on the presentation and the Board discussed various issues raised, including the following points:-

- The officers described what they felt would constitute success in 12 months' time. This included improving accessibility to dental services, better engagement with patients and reducing complaints. Anthony Fitzgerald stressed that if the ICB chose to make dental services a priority, then resources could be reallocated to assist with this, but obviously the ICB could only work with the resources that were available to it and in the light of the contractual limitations that had been referred to in the presentation.
- The Board recognised the importance of targeting support for those who struggled with accessing dental services the most, e.g. homeless and other vulnerable people and families living in deprived areas. Measures being taken included the establishment of a dental service for homeless people which it was hoped would commence in the next few weeks. The Board was also informed that a flexible commissioning scheme was operating, which took referrals from health visitors and looked after children teams for any children who did not have access to an NHS dentist and who were at high risk of poor oral health. Under this scheme, children were referred to one of the flexible commissioning dental practices for treatment.

- Rachael Leslie explained that the number one measure that would improve dental health and oral health was fluoridisation of water supplies across South Yorkshire, including Doncaster. She explained that plans and a survey for an operable scheme to introduce this across the region had been drawn up by engineers and submitted to the Secretary of State for a decision.
- The Board noted the importance of supervised tooth brushing schemes for children so that they learned the basics of oral/dental self-care, while recognising the need to get the message across to parents/carers that tooth brushing at home should still be carried out by children twice a day.
- Councillor Nigel Ball expressed the view that dental services warranted additional resourcing and prioritisation in Doncaster, given that it had the highest incidences of tooth decay amongst the South Yorkshire local authority areas. He also drew attention to the fact that although there were currently 24 dental practices across South Yorkshire which provided urgent access sessions, there was only one practice in Doncaster that supported the urgent care patient pathway, and he felt that this was clearly insufficient. Cllr Ball also highlighted the apparent lack of up-to-date data in the report, citing as an example the figures relating to adult oral health impacts in Yorkshire and the Humber 2018 by local authority. In response, Anthony Fitzgerald stated that the ICB would fully consider its options and the scope for prioritising dental services in Doncaster when it reviewed its resource allocations over the next 12 months. He explained that there was a balance to be struck when allocating resources in terms of how much was put towards the provision of additional access sessions at dental practices in the short term, and how much was invested in the prevention and education elements, which would help in the longer term to improve the oral health of the population. With regard to data, Anthony acknowledged that this was particularly poor in relation to dental health and access. He explained that data in this field was notoriously difficult to calculate and measure but accepted that there was a need to improve data and transparency around dental services.
- In response to a question as to whether deprived communities in Doncaster were being engaged with, Debbie Stovin explained that the South Yorkshire Healthwatch organisations were represented on the local dental network and would be involved in the Stakeholder event on 30 November. She added that work was being done with the ICB in looking at ways of improving communications with communities across South Yorkshire. On this point, Fran Joel stated that she had some concerns that because Healthwatch organisations were being asked by the ICB to work together at a South Yorkshire level, the focus on Doncaster as a place and on the local data she was collecting at Healthwatch Doncaster might be overlooked and 'lost' when the information was received and discussed at the Stakeholder event later this month.
- Councillor Sarah Smith stressed the importance of having access to local data down to Ward level, which would help with understanding the health inequalities in specific areas, particularly those which had deprived communities living in them.

The Chair then summarised the recommendations/actions that would need to be taken forward and it was

RESOLVED:

1. To commit to and provide the necessary resources for further engagement with stakeholders to ensure continued oversight of the local position for dental services. It was essential that a clear picture of the local situation as regards access to dental services was available, such as the number of children who did not have access to a dentist. The Chair stated that there was a wealth of anecdotal evidence that had been collected by Well Doncaster from engaging with local communities and it was important that this information was collated and made available for the Stakeholder event on 30 November;
2. To provide a commitment for continued development of community oral health improvement programmes year on year to ensure continuity of programmes. The Chair stated that she felt embarrassed as HWB Chair to hear the shocking statistics in relation to the number of children with tooth decay – this was a fundamental basic that needed addressing. She added that it was also important to factor in the barriers that families faced, such as the cost of living, in trying to adopt healthier lifestyles, and provide additional support to families where needed;
3. That a telephone number should be provided in addition to the digital platform to enable people to find dental practices that were accepting new patients, as it was important to recognise that some people were digitally excluded and did not have access to the internet;
4. To ensure that oral health improvement is part of the Health and Wellbeing Strategy for Doncaster, and that there is continued support for water fluoridation;
5. That the SY ICB looks at options for re-allocating resources in order to bolster oral health services as a priority. Similarly, the City of Doncaster Council looks at resourcing in relation to prevention activities with regard to oral health;
6. To carry out a refresh exercise of the Doncaster Oral Health Needs Assessment; and
7. That the Board receives an update on this item at its meeting in March 2024.

94 YOUTH ENGAGEMENT - LIVED EXPERIENCE: SHAPING STAINFORTH

The Board received a presentation by Lucy Garnham and Grace Bennett, supported by Karen Seaman, which outlined the various youth engagement activities that were taking place as part of the Shaping Stainforth initiative. This project was a 3-year pilot funded by the Health Foundation aimed at improving mental health and wellbeing in communities. Lucy and Grace had both been taken on as apprentices under the scheme and they outlined their lived experience journeys from the point of leaving school and explained how they had each personally benefitted from this experience on

a number of levels, including improved mental health and from a personal development and career perspective.

During subsequent discussion, Board members thanked Lucy and Grace for their excellent and thought-provoking presentations.

Councillor Nigel Ball advised that it might be useful for Karen and her team to approach the Towns Board to see if they would be willing to have a young person from Shaping Stainforth take up a seat on their membership. He also gave an example of an inter-generational 'Miners Tea Party' event held in Denaby that had been organised in conjunction with Heritage Doncaster which had been an effective way of educating school children on the industrial heritage links in their local community.

Toby Lewis offered to meet with Karen, Lucy and Grace to identify and understand the current gaps in mental health service provision they had spoken of, so that steps could be taken to re-shape services to meet those needs.

In response to a comment by the Chair on the need to link in with local young people in developing the Mental Health Strategy, Lee Golze confirmed that Karen and the team had been invited to the next Mental Health Strategy Group meeting in order to discuss ways in which all parties could connect better in this area of work. Lee also indicated that he would like to visit Karen and the team to see the good work they had been doing in Stainforth with a view to replicating this approach in other regenerative neighbourhoods in Doncaster.

With regard to actions, Rachael Leslie asked that a further recommendation be added in relation to encouraging all partners to have more apprentices within their organisations, particularly apprentices from local communities, working on local projects.

In addition to the above, the Board noted the following recommendations had been put forward for consideration:

- Listen to the voice of young people to support strength based changes;
- Invest in hyper local mental health services to ensure services for young people are accessible and local; and
- Influence young people's experiences by investing in Shaping Stainforth methodology.

The Chair suggested that these recommendations should be revisited by the Board at a future meeting, to allow time for the discussions to be held at the Mental Health Strategy Group and other actions as referred to above to be completed. Karen and the apprentices would be invited back again at that time to update the Board on progress and to advise on any outstanding areas of work that still needed attention.

RESOLVED to note the above recommendations/actions arising from discussion on the presentation and agree that an update on progress be received at a future Board meeting.

## 95 FAIRNESS AND WELLBEING COMMISSION RECOMMENDATIONS

The Board received a presentation by Rachael Leslie which provided an update on the latest position regarding the progress of the Fairness and Wellbeing Commission,

including the process and methodology that had been followed by the Commission in reaching its recommendations.

The presentation gave an overview of the purpose and scope of the Commission, its membership and the key principles and values that its members had agreed to follow through the course of the Commission's investigations. It then summarised each recommendation in turn, before concluding with the timeline for next steps and recommendations for this Board to consider.

Rachael informed the Board that an online workshop would be arranged later this month which would provide members with an opportunity to look at the Commission's recommendations in greater detail, prior to this Board formally considering the recommendations in January 2024.

RESOLVED to note the progress of the Fairness and Wellbeing Commission, including the proposal to hold an online workshop later this month to discuss the Commission's recommendations.

#### 96 SMOKE FREE GENERATION - PROPOSED LEGISLATION

The Board received a report which provided further details on the planned legislation to raise the age of sale for tobacco by one year every year and to tighten restrictions on the sale of vapes to children and young people.

In summarising the salient points, Rachael Leslie explained that these proposals would help Doncaster to achieve the ambition of a smokefree England by 2030 and ensure children and young people did not become addicted to tobacco in the first place.

RESOLVED to:

1. support the proposed changes to legislation for age of sale for tobacco and marketing of vapes,
2. respond to the national consultation on vaping and the changes to the age of sale via the Tobacco Control Group;
3. support local schools in responding to the consultation on vaping; and
4. write to Doncaster MPs with the Board's recommendation that the new legislation be supported.

#### 97 HEALTH INEQUALITIES - A FOCUS ON GYPSY ROMA TRAVELLER (GRT) COMMUNITIES

The Board received a presentation by Mandy Espey, Marius Taba and Whitley Marie Smith, which outlined the health inequalities being faced by the Gypsy Roma Traveller communities living in Doncaster. As part of the presentation, Whitley outlined a case study example of the life journey experienced by one female member of the GRT community and how she and her family had been supported by various agencies/partners to make personal life changes that had resulted in positive outcomes for all concerned.



It was reported that there were estimated to be 4000 people from Gypsy Roma and Traveller communities living in Doncaster, the second largest settlement in the region. The GRT community experienced the starkest health and social inequalities of all ethnic groups, with the biggest challenge they faced being hate crime and discrimination, affecting them through all life stages. They also struggled to navigate services and often did not get the timely care and support that they needed. Consequently, they experienced significantly worse mental and physical health, with life expectancy being 10-25 years shorter than the general population. These communities touched a wide range of partners, including housing, health, social care, education, police, prison and young offender services. There was some good work happening across Doncaster to support the communities, but it was not consistent or joined up.

Members noted that the Board was being asked to consider ways of bringing wider partners together to connect with GRT communities, using more of a health inequality and kindness lens to improve their physical and mental health and wellbeing. On this subject, the Board noted that there was scope for more joined up working between partners and the ask at today's meeting was for the Board to support a more integrated approach towards improving the health of the GRT communities.

Arising from discussion on the points raised, a number of Board members gave a commitment to work with Mandy and colleagues in addressing issues around accessibility to services for the GRT community and providing training for their employees/colleagues so that they had a greater insight and appreciation of the GRT communities they served. Board Members acknowledged that as leaders, each had an important role to play in improving the health outcomes for the GRT communities in Doncaster, both as a moral and a health and wellbeing imperative.

The Chair asked that those organisations on the Board that were not in attendance today be contacted and asked to consider appropriate actions/recommendations, alongside the other Board members, so that an update could be brought to the Board's meeting in March 2024.

RESOLVED:

1. That the Board supports a more integrated and joined up approach towards improving the health of the GRT communities;
2. That Board members give a commitment to work with Mandy and colleagues in addressing issues around accessibility to services for the GRT community and providing training for their employees/colleagues so that they have a greater insight and appreciation of the GRT communities they serve; and
3. That those organisations on the Board that were not in attendance today be contacted and asked to consider appropriate actions/recommendations, alongside the other Board members, so that an update can be brought to the Board's meeting in March 2024.

98 HEALTH PROTECTION ASSURANCE GROUP MINUTES OF 18 OCTOBER, 2023

The Board received and noted the minutes of the Health Protection Assurance Group meeting held on 18 October 2023.

CHAIR: \_\_\_\_\_

DATE: \_\_\_\_\_