

DONCASTER METROPOLITAN BOROUGH COUNCIL

HEALTH AND WELLBEING BOARD

THURSDAY, 5TH SEPTEMBER, 2019

A MEETING of the HEALTH AND WELLBEING BOARD was held in Room 007A AND B - CIVIC OFFICE on THURSDAY, 5TH SEPTEMBER, 2019, at 9.00 a.m.

<u>PRESENT:</u>	Vice-Chair -	Dr David Crichton, Chair of Doncaster Clinical Commissioning Group (In the Chair)
Councillor Nuala Fennelly		Portfolio Holder for Children, Young People & Schools
Councillor Cynthia Ransome		Conservative Group Representative
Dr Rupert Suckling		Director of Public Health, Doncaster Council
Steve Shore		Chair of Healthwatch Doncaster
Julie Mepham		Director of Children's Social Care, Doncaster Children's Services Trust, substituting for Paul Moffat
Peter Dale		Director of Regeneration and Environment, Doncaster Council
Richard Parker		Chief Executive of Doncaster & Bassetlaw Teaching Hospitals Foundation Trust
Paul Tanney		Chief Executive, St Leger Homes of Doncaster (SLHD)
Lucy Robertshaw		Assistant Director, Darts
Chief Inspector Jayne Forrest		South Yorkshire Police, substituting for Chief Superintendent Shaun Morley
Rebecca Mason		Head of Engagement and Partnerships, L&O:CYP, Doncaster Council, substituting for Riana Nelson
Ray Hennessy		Deputy Head of Operational Business Support, Rotherham, Doncaster and South Humber NHS Foundation Trust, substituting for Kathryn Singh

Also in attendance:

Dr Victor Joseph, Public Health Consultant, Doncaster Council
Anna Brook, Public Health Registrar
Jennie Daly, Tenancy Sustainability Service Manager, SLHD
Olwen Wilson, Better Care Fund Project Manager, Doncaster Council

13 WELCOME, INTRODUCTIONS AND APOLOGIES FOR ABSENCE

Apologies were received from Councillor Rachael Blake, Councillor Nigel Ball, Kathryn Singh, Jackie Pederson, Paul Moffat, Phil Holmes, Riana Nelson, Chief Superintendent Shaun Morley, Steve Helps and Laura Sherburn.

14 CHAIR'S ANNOUNCEMENTS

There were no announcements made by the Chair.

15 PUBLIC QUESTIONS

Mr Doug Wright referred to his previous requests that meetings of the Health and Social Care Joint Commissioning Management Board (JCMB) be opened to the public and have the facility for public questions/statements on agendas. He explained that this would bring it in line with other meetings of the Doncaster Clinical Commissioning Group (DCCG) and Doncaster Council which were open to the public and received public questions/statements. He also pointed out that the JCMB minutes had not been included on any DCCG Governing Body agendas for some time, and that the minutes before this Board today dated back to May 2019. Mr Wright stressed that he had been calling for this since February 2018 and asked whether this simple request could be implemented by January 2020.

In reply, the Chair, Dr David Crichton and Dr Rupert Suckling confirmed that Mr Wright's requests had always been given due consideration at the time of being raised. However, it was explained that there was no mandate for holding the JCMB meetings in public and therefore the compromise position had been reached whereby the JCMB minutes were received at meetings of the DCCG's Governing Body and at this Board, which provided an opportunity for the public to scrutinise and ask questions on the minutes in both of these forums. They undertook, however, to bring Mr Wright's request to the attention of Jackie Pederson (Chief Officer, DCCG) and Damian Allen (Chief Executive, Doncaster Council).

16 DECLARATIONS OF INTEREST, IF ANY

There were no declarations of interest made at the meeting.

17 MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 13TH JUNE 2019

RESOLVED that the minutes of the meeting held on 13 June 2019 be approved as a correct record and signed by the Chair.

18 REPORT FROM HEALTH AND WELLBEING BOARD STEERING GROUP AND FORWARD PLAN

The Board considered a report which provided an update on the work of the HWB Steering Group to deliver the Board's work programme and also provided a draft Forward Plan for future Board meetings, as set out in Appendix A to the report.

In particular, the report included updates for the Board on:

- Suicide Prevention and Mental Health Awareness;
- Motor Neurone Disease Update;
- Board Effectiveness;
- Forward Plan for the Board;
- Minutes of SY&B Shadow Integrated Care System Collaborative Partnership Board held on 10 May 2019; and
- Minutes of Joint Commissioning Management Board held on 9 May 2019* [**NOTE: these minutes had been omitted from the agenda pack and subsequently circulated to members on 29 August to replace the set of JCOG minutes which were wrongly included in the agenda pack*]

With regard to suicide prevention and mental health awareness, Dr Rupert Suckling confirmed that all GP Practices in the Borough had signed up to a number of initiatives aimed at promoting ways to achieve better mental health and raising awareness of suicide, and he therefore wished to thank Primary Care partners for their support. Councillor Nuala Fennelly reported that one school in Doncaster, which had been affected by the suicide of two pupils in the past two years, had introduced a new programme for Year 7 pupils aimed at encouraging young people to talk about mental health issues.

In referring to the Motor Neurone Disease Charter, which this Board had signed up to in March 2018, Dr Rupert Suckling advised that updates would be sought from Board members by the end of September 2019 on their progress in signing up to the Charter.

Members noted that a review of the Board's effectiveness had been carried out by Mitchell Salter, a National Management Trainee in Public Health, against the 21st Century Public Servant Model, using a series of interviews and a Board observation. The findings of this work would be discussed at the Board's development workshop in December 2019.

RESOLVED:

- (1) that the update from the HWB Steering Group be received and noted; and
- (2) that the proposed Forward Plan, as detailed in Appendix A to the report, be agreed.
- (3) to note that Dr Rupert Suckling and Louise Robson will be contacting Board members outside of the meeting seeking updates from their respective organisations on their progress in signing up to the Motor Neurone Disease Charter.

19 TOBACCO CONTROL UPDATE

Further to the discussion held at the Board's last meeting, Members considered a report and accompanying presentation on the latest position with regard to Tobacco Control. The proposal outlined in the report was aimed at addressing smoking prevalence in Doncaster, drawing on lessons from a peer assessment carried out in March 2019; and a wide range of initiatives from public consultation on smoke-free environments. It was reported that, if implemented, the actions were likely to reduce smoking prevalence, thus improving the health of the people of Doncaster.

In reply to a question by Councillor Nuala Fennelly with regard to the processes in place for dealing with the estimated 1,300 children and young people per year who were expected to start smoking, Anna Brook explained that a specialist support service was provided. This service did not achieve as high a quit rate amongst its clients as the adult service, but it was noted that this was not uncommon. Councillor Fennelly advised that she would be happy to give her support and assistance under her portfolio, such as in engaging with schools, on this issue.

Richard Parker, Chief Executive of Doncaster and Bassetlaw Teaching Hospitals (DBTH), explained that measures were being taken to try and tackle the issue of smokers congregating outside hospital entrances, so that patients such as those

suffering from cancer, did not have to walk through clouds of smoke on their way in and out of hospital. He added, however, that this work needed a joined up approach, as DBTH serviced two different Clinical Commissioning Groups in its area.

Dr David Crichton drew two initiatives to the Board's attention. Firstly, he reported that Doncaster was one of ten targeted centres in England which would be running lung health checks for people with a smoking history who were aged 55 - 74 years. Smoking cessation support would be provided as part of this project. Secondly, Dr Crichton informed Members that under the Yorkshire and Humber's IVF policy, in order to be eligible for NHS funded specialist fertility treatment, couples were required to demonstrate that they had been smoke free for at least 3 months. This was based on national guidance about how smoking had a negative effect on the chances of successful IVF treatment.

During discussion on smoke free public spaces, Anna Brook confirmed that from the public consultation carried out on the SmokeFree Doncaster proposal, it was evident that there was significant public support for smoke free spaces, particularly family areas. The Board also acknowledged that there was scope for doing more to encourage pubs and cafes to designate their outside spaces as smoke free zones, so that non-smokers could also enjoy sitting outside.

During further discussion, Members made a number of observations/comments in relation to Tobacco Control and reducing smoking prevalence, including the following:-

- Paul Tanney, Chief Executive of St Leger Homes of Doncaster (SLHD), stated that SLHD would be happy to assist in promoting no smoking initiatives through its tenants' newsletters and website.
- Dr David Crichton pointed out that there was a strong correlation between poverty and high instances of smoking. In response, Lucy Robertshaw, Assistant Director of Darts, explained that her organisation often worked in areas of deprivation within the Borough and stressed that community activities could be a useful distraction from smoking for some people.
- Chief Inspector Jayne Forrest advised that South Yorkshire Police were able to help with arranging for test purchases of cigarettes to be carried out in shops.

It was then

RESOLVED that:

- (1) the contents of the report and appendices and accompanying presentation be noted;
- (2) the recommendations as detailed in the report, including sign off by all organisations, be endorsed as follows:-
 - CLear Peer Assessment:
 - Publish the report on the Council's website;
 - Prioritise some of the recommendations for immediate action;

- Agree all the responses to the recommendations and work through them over time;
 - Repeat the self-assessment in 12 months' time to track how the score changes;
 - Consider commissioning a CLeaR peer re-assessment in 2022
- Revised strategic approach and plan-on-a-page:
 - Agree the revised strategic approach
- (3) the Smoke-free Doncaster proposal be submitted to the Cabinet and Full Council.

20 ARTS AND HEALTH UPDATE

The Board received a presentation by Lucy Robertshaw, Assistant Director of Darts, which provided an update on 'Arts on Prescription in Doncaster' and the various initiatives being undertaken to maximise the health and wellbeing benefits for Doncaster residents by encouraging them to participate in creative activities.

Lucy explained that there was evidence from clinicians to demonstrate that the Arts brought tangible health and wellbeing benefits, and could help people to keep well, aid recovery and support longer lives better lived. The Arts could also help meet major challenges facing health and social care, ageing, long-term conditions, loneliness and mental health. The Arts could also help save money in the health service and social care.

It was reported that the Arts and Health Project Board, whose membership included various health partners and other organisations such as Cast, Darts, Heritage Doncaster and Doncaster Council, had now been running for a year. It was noted that Doncaster was at the forefront of this work, which was attracting local and national attention. Lucy confirmed that the 4 priorities for 2019-21 were Mental Health, Dementia, Increasing Physical Activity and Loneliness and Social Isolation.

Lucy then summarised the funding secured in 2019-21 (£2.1m), and the various areas across the Borough where the different programmes of activity were taking place. She outlined how these projects were being evaluated, and summarised the early results, which were showing that participants were feeling more connected and independent, and their wellbeing was improving in terms of satisfaction with life and anxiety/depression scores. With regard to next steps, it was hoped that stronger connections with GP Practices could be established, and that the profile of this work could be raised.

Lucy concluded by explaining that the longer-term aspiration was to develop this work so that it moved from being a series of short term grant funded projects to a wider service that all GPs could refer people to, thus enabling it to reach thousands rather than hundreds of people.

During subsequent discussion, Board Members asked various questions and/or made observations, as follows:-

- Dr David Crichton felt that it should not be the case that people had to visit their GP in the first instance in order to find out more about these activities

and be referred to a programme. Instead, he suggested that front desk staff in Practices had an important role to play in signposting people to these activities, where appropriate.

- Dr Rupert Suckling stated that there was a need to give consideration as to how to make these Arts and Health initiatives more sustainable for when the grant funding ceased. In reply to a query regarding the grant funding received, Duncan Robertshaw, Chief Executive of Darts, explained that the bulk of the funding came from national bodies such as Big Lottery and Arts Council England. He stated that, by comparison, only a small amount of private sector funding had been received to date. Duncan confirmed that Darts was fortunate to have strong fund raising teams, but he stressed that the challenge would be in rolling out this programme on a Borough-wide basis.
- Duncan Robertshaw explained that while the Arts on Prescription programme was currently only focused on adults, there would be scope in future to refine the models and widen the activities to also target children and young people.
- In terms of expanding this scheme and getting all GPs in the Borough on board, Dr David Crichton stressed that evaluation was a key factor from a commissioning perspective. He explained that if there was evidence available which demonstrated the value of these pilots in terms of bringing tangible health and wellbeing benefits to people, then that would be the mechanism for developing this as a mainstream service in the future.
- Steve Shore advised that Healthwatch Doncaster would be happy to help with regard to publicity and signposting people to these activities.

After Dr Rupert Suckling had suggested that the Arts and Health Project Board could be tasked with taking this work forward, with further updates being received by this Board at the appropriate time, it was

RESOLVED to:

- (1) note the content of the presentation and support the further development of arts and health in Doncaster; and
- (2) note that this work will be taken forward by the Arts and Health Project Board, with further updates being received by this Board at the appropriate time.

21 HEALTHWATCH DONCASTER - ANNUAL REPORT AND SERVICE UPDATE

The Board received the Healthwatch Doncaster Annual Report for 2018-19, together with a briefing paper which provided a service update outlining Healthwatch's future plans and projects.

In presenting this item, Steve Shore, Chair of Healthwatch Doncaster, outlined the context within which Healthwatch Doncaster operated, being one of approximately 150 Healthwatch bodies in the UK. He explained that Healthwatch Doncaster's 3 key functions were to engage, inform and influence. It was noted that Healthwatch was

focusing more on widening its digital footprint in order to reach as wide an audience as possible. Steve explained that although Healthwatch Doncaster had a relatively low profile amongst the general public, it was nevertheless very successful when asked to engage with people. As an example, he reported that Healthwatch Doncaster had engaged with over 1300 people seeking their views on the NHS Long Term Plan, which was launched in January 2019.

Steve also highlighted Healthwatch Doncaster's Micro-Grants scheme, which allowed local community organisations to apply for a small amount of money (up to £500) to assist them to engage with local people to listen to their views about health and care services. This was seen as a useful networking mechanism, with a network of 40 small organisations/community groups now in place, and Steve stressed that Healthwatch was also keen to strengthen the existing partnerships it had with other organisations. The Board also noted that Healthwatch acknowledged there was a need to change the perception held in some quarters, that it was some kind of 'watchdog' body. This was not the case and, in reality, Healthwatch aimed to work in partnership with others as a critical friend.

It was noted that, to a large extent, Healthwatch Doncaster was dependent on funding from Doncaster Council, although it was trying to reach a position whereby that level of dependency lessened.

During discussion on the outcomes from the Healthwatch Doncaster report on Missed Appointments, it was noted that a new text reminder service had been introduced to help reduce the number of missed appointments.

In reply to a question as to whether there were currently any hot topics that the public were interested in or concerned about, Steve Shore advised that young people were increasingly concerned about issues relating to Mental Health and Suicide. He added that the Health and Wellbeing Board could feel reasonably assured that the issues that were the subject of the public's current concerns were already on its radar.

Members acknowledged the valuable work carried out by Healthwatch Doncaster in its role as the independent champion for people using local health and social care services.

RESOLVED to receive and note the Healthwatch Doncaster Annual Report 2018-19 and service update outlining Healthwatch Doncaster's future plans and projects.

22 UNIVERSAL CREDIT UPDATE

The Board received a presentation by Paul Tanney, Chief Executive of St Leger Homes of Doncaster (SLHD) and Jennie Daly, Tenancy Sustainability Service Manager (SLHD) on the impact of Universal Credit focussing mainly on the work of the St Leger Homes Tenancy Sustainment Team and their work to help support tenants to remain in their Council homes.

In introducing this item, Paul Tanney explained that having a safe and secure home had a huge impact on people's health and wellbeing. He explained that as a result of Universal Credit, people's stress and anxiety levels had increased due to worries over increasing debt and rent arrears, and the seriousness of people's situations was evident in the increased use of food banks.

Jennie Daly then gave a presentation on the work carried out by the Tenancy Sustainment Team, including supporting tenants through welfare reform, helping them to maximise income and reduce debt, reduce rent arrears and reduce evictions.

In response to a question about the links between the Tenancy Sustainment Team and health services, Jennie explained that many of the cases dealt with by the team often involved substance misuse and mental health issues, so the team assisted people by referring or signposting them to the appropriate services so that they received the help and support they needed. The team also liaised with local job centres to assist those individuals who needed additional help in applying for Universal Credit.

In reply to a further question as to whether Board members could provide any additional support from an anti-poverty perspective, Paul Tanney explained that there was scope for improving attendance at the Anti-Poverty Strategy Group, as partner organisations were not always represented at meetings of the Group.

RESOLVED to note the content of the presentation.

23 BETTER CARE FUND 2019-20 DRAFT PLAN

The Board received a report which requested feedback on Doncaster's draft plan for the use of the Better Care Fund (BCF) in 2019-20. In introducing this item, Dr Rupert Suckling confirmed that given the delay in funding announcements, the majority of existing schemes had been rolled over into 2019-20.

Olwen Wilson, BCF Project Manager, then outlined the timeline and key stages for agreeing the Doncaster BCF Plan. It was noted that informal pre-submission feedback on the draft Plan would be received from the Regional Assurance Panel by 13 September, and that the final BCF submission was to be made by 27 September. It was noted that a supporting Section 75 Agreement would be developed once the final Plan was signed off. With regard to the sign off arrangements of the final plan, the Board was being asked to agree that the Director of Public Health be given delegated authority to sign off the final Plan in consultation with the Chair of this Board.

RESOLVED to:

- (1) note the draft Doncaster BCF Plan for 2019-20;
- (2) agree that the Director of Public Health be given delegated authority to sign off the final plan in consultation with the Chair, pending feedback from regional assurance on 13 September 2019, for submission by the deadline of 27 September, 2019;
- (3) note that a supporting Section 75 Agreement will be produced incorporating the final plan; and
- (4) agree to review progress of Doncaster's BCF Plan for 2019-20 and evaluation of schemes at future meetings.

CHAIR: _____

DATE: _____