

CITY OF DONCASTER COUNCIL

HEALTH AND WELLBEING BOARD

THURSDAY, 9TH MARCH, 2023

A MEETING of the HEALTH AND WELLBEING BOARD was held in the COUNCIL CHAMBER, CIVIC OFFICE, WATERDALE, DONCASTER DN1 3BU on THURSDAY, 9TH MARCH, 2023, at 9.00 am.

PRESENT:

Chair - Councillor Rachael Blake, Portfolio Holder for Children's Social Care, Communities and Equalities

Vice-Chair - Anthony Fitzgerald Executive Place Director, NHS South Yorkshire Integrated Care Board

Councillor Andrea Robinson, Portfolio Holder for Adult Social Care

Councillor Cynthia Ransome, City of Doncaster Elected Member

Riana Nelson, Director of Children, Young People and Families

Richard Parker, Chief Executive of Doncaster and Bassetlaw Teaching Hospitals

Dr Nabeel Alsindi, GP and Place Medical Director, SY ICB

Lucy Robertshaw, Health and Social Care Forum Representative

Also in Attendance:-

Louise Robson, Public Health Lead, City of Doncaster Council

Councillor Glynis Smith, City of Doncaster Elected Member

APOLOGIES:

Apologies for absence were received from Councillors Nigel Ball and Andrew Bosmans, Dr Rupert Suckling, Phil Holmes, Dan Swaine, Dave Richmond, Cath Witherington and Sheila Lloyd.

48 WELCOME, INTRODUCTIONS AND APOLOGIES FOR ABSENCE

The Chair welcomed everyone to the meeting and allowed everyone in attendance to make introductions.

49 CHAIR'S ANNOUNCEMENTS

Councillor Rachael Blake made the following announcement:-

'On behalf of the Board, I would like to begin by placing on record our thanks and best wishes to Steve Shore who has stepped down from his position as Chair of Healthwatch Doncaster and has therefore now left the Board's Membership. Steve was one of the Board's longest serving Members, having attended his first meeting on 6 November, 2014 as the then newly appointed Chair of Healthwatch. I am grateful to Steve for the commitment he has shown to the Board and for his valuable

contributions in meetings. Obviously, Doncaster will continue to be represented on this Board as an organisation and I'm pleased to welcome Andrew Bosmans in his place.'

50 PUBLIC QUESTIONS.

There were no public questions asked at the meeting.

51 DECLARATIONS OF INTEREST, IF ANY.

There were no declarations made at the meeting.

52 MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 12TH JANUARY 2023

RESOLVED that the minutes of the Health and Well-Being Board meeting held on 12th January, 2023 were approved as a correct record and signed by the Chair.

53 THE LIVED BRITISH SIGN LANGUAGE (BSL) USER

The Chair received an oral presentation from Pauline Dunn, Trustee, Secretary and Treasurer of the Doncaster and District Deaf Society. Ms Dunn's presentation was informative, thought provoking and provided a valuable insight into the lived experiences of British Sign Language Users in Doncaster.

Some of the key points highlighted throughout the presentation, included the following:-

- The lack of BSL interpreters available for medical appointments. It was highlighted that many GP Surgeries would not provide one as it was believed that this was at a cost to them, however, this was not the case and they were fully funded;
- Access to Social Care was time-consuming frustrating and intimidating for many deaf people as the paperwork that needed completing was very confusing without someone to explain and go through things.
- Alert Alarms were often problematic for elderly and vulnerable deaf people as they often didn't realise they had set it off, nor could they respond when the alarm then raised a contact;
- With regard to Early Years and Playgroups, very few could cope with deaf BSL users and all support was directed in different directions meaning that from an early age, many children and families were missing out on interactions, opportunities and valuable support;
- With regard to recruitment, many deaf individuals were overlooked or felt isolated, as they were unable to communicate with potential employers. More support was needed in this area;
- Mental Health was a huge health issue for children, young people and adults from the deaf community, and many people were still not able to access valuable support, thus increasing the problems they faced. It was a huge problem throughout their lives, based on social isolation, and lack of communication and integration.
- There were many many gaps all across all services and it was imperative that this was addressed in order to prevent the problem within society from escalating further. There was a national shortage of BSL interpreters and

whilst some companies were starting to make some improvements, it still was not enough

The Health and Well Being Board were extremely grateful for the presentation and it raised some very important issues that many people previously may not have been fully aware of with all partners agreeing that work needed to be done in a variety of areas.

It was agreed that it was a powerful presentation, holding people to account and some simple changes could be made, which would make huge impacts across the deaf community. Additionally, there were some more timely pieces of work that needed to be looked at, but there was agreement across the Board that this needed to be addressed.

RESOLVED that:-

- 1) Dr Alsindi communicate to all GPs the need to use BSL interpreters reiterating this is at no cost to the Practice;
- 2) Pauline Dunn to meet with Riana Nelson to address the issues with regard to Early Years, as well as picking up culture issues highlighted within the presentation in relation to recruitment and employment;
- 3) In the area of Adult Social Care, Annika Leyland Bolton would pick up on the learning lessons highlighted within the presentation, including the issues relating to pendant alarms, form filling and phone calls;
- 4) Richard Parker to contact the Head of Patient Experience to arrange a meeting between themselves and Pauline Dunn;
- 5) A report be brought back to the Health and Well Being Board at the September Meeting for an update and to see what changes had been implemented

54 UPDATE ON CHILDREN & YOUNG PEOPLE'S MENTAL HEALTH STRATEGY AND SEND STRATEGY

Martyn Owen and Emma Price, gave a presentation to the Health and Well Being Board, focussing on the Children and Young People's Mental Health Strategy and the SEND Strategy.

The Young People's Mental Health Strategy was based around young people's ambitions for improvements to mental health services and aimed to develop a 24/7 platform for children and young people to access peer support and mental health and well-being resources.. The Strategy outlined five key principles, which are detailed as follows:-

- Effective partnerships at all levels
- Prevention and early intervention
- Resources and expertise in the right place at the right time

- Quality education and services as close to home as possible
- Maximise capacity and sufficiency in all education settings

The principles underpinned the aim to ensure that children, young people and families got the right support at the right time to prevent needing statutory services to step in, and encourage the thought process that early help was there to support. Extensive consultation had been undertaken across all areas of the field to ensure that the right message was delivered in the strategy to encourage people to seek early help when and where needed.

Members were pleased to see the progress that had been made to date, and felt the strategy was strong. However, concern was still voiced as to the timescales mentioned through the course of discussion with regard to accessing support. Officers assured Members that a huge amount of work was being done and improvements were being seen, with the backlog greatly reduced and that this was in fact a problem nationally.

With regard to the SEND Strategy, the Board was given an overview of its current context in relation to Doncaster, and also, nationally. It had been acknowledged that SEND was an area in crisis across the country, and there had been a huge rise in the levels of need post pandemic meaning that costs for education, health and care plans had all increased which was a huge representation of how the Covid Pandemic had affected families.

The overspend for High Needs was projected to be £18m by 2023, and was expected to reach £60m by 2026 which was largely due to the increase in need and it was important to ensure the right provision was supplied and an understanding of great depth needed to be applied on a case by case level.

The key principles outlined above, also sat within the SEND Strategy and worked to underpin the SEND Strategic Priorities which were detailed as follows:-

- Ensure that a graduated response is delivered coherently and consistently
- Implement a high quality partnership wide response to needs
- Ensure that the neurodevelopmental pathway supports the needs of all
- Ensure that Doncaster school provision meets the needs of SEND Children
- Deliver positive transitions for young people with SEND to adulthood
- Improve the use of information to better inform strategic planning and joint commissioning.

Members thanked officers for their work and it was agreed that the presentation was very well articulated and the Service was approaching the issues in a multi-faceted way in order to support young people and families with their needs.

It was acknowledged that the prospective overspend was daunting and work needed to be done to bring this down, but this would be challenging with the demand for support ever rising, but it was hoped that the new framework would have some impact on this.

RESOLVED that the update be noted and the Board looked forward to receiving a further update at a future meeting.

55 SOUTH YORKSHIRE INTEGRATED CARE STRATEGY

Members of the Health and Well Being Board were presented with the final South Yorkshire Integrated Care Strategy. This was a legal requirement for the Department of Health and Social Care and had previously been considered by the Board at previous meetings in its draft form. It had been developed by the Integrated Care Partnership (ICP) and was seen as the beginning of a journey with the people and communities of South Yorkshire.

The Vice Chair, Anthony Fitzgerald, outlined that the Strategy was scheduled to be launched on 20 March 2022, by the South Yorkshire Mayor and it would look to work with the regions residents and communities to bring about meaningful change, focusing on early diagnosis, prevention, reduce health inequalities and bring about health improvements.

The Strategy was very ambitious, but realistic and pressure would have to be placed on driving the key points forward to achieve real change. Engagement with the public was critical to achieving this success and insight had been retrieved through the 'what Matters to you?' campaign. Through this, the outcome had shown that emphasis was placed on access and quality of care, living well, improving mental health and well-being and the affordability of this.

It was acknowledged that there was a lot of work to do in achieving success with this strategy but there was positivity that this would be achieved through good partnership working.

RESOLVED that the report and comments be noted in advance of the launch of the Integrated Care Strategy.

56 DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2022

The Health and Well Being Board received the Director of Public Health Annual Report for 2022.

The report, which was the eighth Annual Report authored by Dr Suckling, provided a high level assessment of how the overall health status was changing in Doncaster and that this year, it was clear there were significant reductions in life expectancy, healthy life expectancy and increases in health inequality. These were caused by the direct and indirect impact of the COVID-19 pandemic and other infectious diseases including the increase in the invasive Group A Streptococcal disease at the end of the year.

The report made six recommendations for Team Doncaster partners all of which it was acknowledged had been picked up and addressed, and following consideration by the Board, it would now be considered at the Place Committee for noting and any actions to be worked on.

It was noted that in Dr Suckling's absence, it would be pertinent to bring the report back to the next meeting of the Health and Well Being Board, following its consideration by the Place Committee for any final comments.

RESOLVED that the Health and Well Being Board note the content of the Annual Report.

PUTTING LOCAL PEOPLE AT THE HEART OF THE DONCASTER HEALTH AND WELLBEING BOARD

The Board held a discussion with how the meetings would be operated in moving forward, as there was a desire to ensure that the public were fully engaged with the process. It was important that the citizen voice was fully heard, and discussions ensued as to how this would be facilitated.

Members of the Board were asked to agree on an approach for commitments and areas of focus and a robust discussion was held with positive input across all Members of the Board.

One area of discussion was in terms of Public Questions at the meeting. Currently, the Board allowed members of the public to attend the meeting and ask a question relating to an item on the agenda. While the Board was keen to ensure this conversation was not stifled, it was noted that in many cases, if advance notice of a question had been received, it would allow for a full and informative answer to be provided at the meeting.

Consideration was given to changing the venue and taking it into the community. However, this had been trialled before and had not had the desired effect on increasing public participation. Therefore, it was suggested that instead the meeting be made more 'welcoming' with teas and coffees on arrival.

In order to ensure that the agenda of a meeting was listening to the public voice, it was proposed that an item at the start of every meeting be to consider 'a lived voice', whereby an individual representing a community or group attend to give their first-hand experience of health and well-being in their lives. This would look to engage with different people and groups across the borough and provide first hand evidence of problems faced. This could also include videos, recordings and question and answer sessions if appropriate. A proposal was put forward to invite the Learning Disability Partnership Board to attend the next meeting and give their experiences to the Board

Encouragement of youth participation was also noted as an area on which the Health and Well being Board wished to build, and consideration would be given to holding meetings later in the day, outside of school hours, or in the school holidays to allow this to happen. It was noted that the 31st August meeting was in fact in the school summer holidays and thought could be given to inviting some representatives from youth groups to attend.

The Health and Well Being board considered an item that proposed a new set of approaches for encouraging local people to take part in and feel part of the Board's business, activity and meetings. The Board had a strong discussion on the considerations put before them with a number of points raised.

RESOLVED that thought be given to the following points for future meetings:-

- 1) The first hour of meetings be dedicated to real life experiences with local groups invited to share their stories;

- 2) Public questions be welcomed, with questions on notice encouraged, as well as at the meeting;
- 3) Short videos and audio recordings be included at meetings;
- 4) Make the venue more appealing, with tea and coffee offered to welcome the public;
- 5) A representative from the Learning Disability Partnership Board be invited to the next meeting of the Health and Well Being Board to give their 'lived experience';
- 6) Thought be given to holding some of the Board meetings either in the early evening or in school holidays to allow young people to attend and contribute.

58 JOINT HEALTH AND WELLBEING STRATEGY

Allan Wiltshire informed Members that the Joint Health and Well Being Strategy was due to be refreshed following the expiration of the current strategy. It was a statutory duty to have a Health and Well Being Strategy in place, and a strong policy which was evidence based would provide a strong framework for the Health and Well Being Board's Work Plan.

Members were presented with three options as to how to proceed with the Strategy refresh which are detailed as follows:-

Option 1 – Summary Only

This would be a short piece of work that would outline the key priorities up to 2025. This would be succinct and simple but would be no more than five pages long.

Option 2 – Summary and Headline Actions

This would again outline the key priorities but would provide more information as to how the Board would achieve them. This would provide detail on areas of activity and work programmes too.

Option 3 – Full Process

This would be an in depth piece of work that would start at the beginning of the process and work through all areas of work in full. This would be a large piece of work and would take around 6 months to complete.

Members had a brief discussion surrounding the proposals and as to what they felt would be the best fit for the Board, and the general consensus was to go with Option 2, as this would provide a good refresh without taking too much on at the current stage.

RESOLVED that the Health and Well Being Board pursue Option 2 for the Joint Health and Well Being Strategy Refresh and an update on the position be provided at the next meeting of the Board.

FOR INFORMATION ONLY - HEALTH PROTECTION ASSURANCE GROUP
MINUTES

RESOLVED that the minutes from the Health Protection Assurance Group be noted for information.

CHAIR: _____

DATE: _____