## DONCASTER METROPOLITAN BOROUGH COUNCIL

#### HEALTH AND WELLBEING BOARD

## THURSDAY, 7TH JANUARY, 2016

A MEETING of the HEALTH AND WELLBEING BOARD was held in the DRAWING ROOM - ST CATHERINES HOUSE, BALBY on THURSDAY, 7TH JANUARY, 2016 at 9.30 A.M.

PRESENT: Chair – Councillor Pat Knight, Portfolio Holder for Public Health and

Wellbeing

Vice-Chair – Chris Stainforth, Chief Officer, Doncaster Clinical

Commissioning Group (DCCG)

Councillor Nuala Fennelly Portfolio Holder for Children, Young People and Schools

Councillor Glyn Jones Portfolio Holder for Adult Social Care and Equalities
Councillor Cynthia Doncaster Council Conservative Group Representative

Ransome

Dr Rupert Suckling Director of Public Health, Doncaster Metropolitan Borough

Council (DMBC)

Damian Allen Director of Learning, Opportunities and Skills

Karen Curran Head of Co-Commissioning, NHS England (Yorkshire &

Humber)

Paul Wilkin Deputy CEO, Rotherham, Doncaster and South Humber

NHS Foundation Trust (RDaSH), substituting for Kathryn

Singh

Dr Nick Tupper Chair of Doncaster Clinical Commissioning Group

Steve Shore Chair of Healthwatch Doncaster

Jacqueline Wilson Director of Transformation, Doncaster Children's Services

Trust, substituting for Colin Hilton

Mike Pinkerton Chief Executive, Doncaster & Bassetlaw Hospitals NHS

**Foundation Trust** 

Susan Jordan Chief Executive, St Leger Homes

Chief Superintendent District Commander for Doncaster, South Yorkshire Police

Di la La

Richard Tweed

Norma Wardman Chief Executive. Doncaster CVS

Steve Helps Head of Prevention and Protection, South Yorkshire Fire

and Rescue

#### Also in attendance:

Peter Dale, Director of Regeneration and Environment, DMBC
Elaine Thompson, Public Health Improvement Coordinator, DMBC
Louise Robson, Public Health Specialist, DMBC

Oliver Judges, Interim Project Director – Assets & Property Rationalisation, DMBC

## 37 <u>WELCOME, INTRODUCTIONS AND APOLOGIES FOR ABSENCE</u>

Apologies were received from Colin Hilton (Jacqueline Wilson deputised) and Kathryn Singh (Paul Wilkin deputised).

The Chair welcomed Ian Margerison, Macmillan Involvement Co-ordinator who was observing today's meeting.

## 38 CHAIR'S ANNOUNCEMENTS

The Chair advised the Board that she had agreed to a request to defer agenda item no. 10 (Doncaster Libraries and Culture Supporting Wellbeing) to the Board's next meeting.

## 39 PUBLIC QUESTIONS

There were no questions from the public.

## 40 DECLARATIONS OF INTEREST, IF ANY

No declarations of interest were made.

## 41 MINUTES OF THE MEETING OF THE HEALTH AND WELLBEING BOARD HELD ON 5TH NOVEMBER 2015 (ATTACHED)

<u>RESOLVED</u> that, subject to the addition of Peter Dale's name to the list of those in attendance, the minutes of the meeting of the Health and Wellbeing Board held on 5th November 2015 be approved as a correct record and signed by the Chair.

## 42 OBESITY PERFORMANCE UPDATE

As requested at a previous meeting, the Board received a presentation on the Obesity priority area and was asked to consider proposals to move away from providing small-scale, local weight management services and initiatives towards a whole systems approach to obesity.

Elaine Thompson, Public Health Improvement Coordinator, outlined in detail the current position in Doncaster with regard to the prevalence of obesity amongst the Borough's population and the harmful effects that this had, the current services provided and the need to move towards a whole system approach (WSA) to tackling obesity in the future. It was noted that a WSA would allow for a longer term, more sustainable plan to be put in place and this would have a much wider focus on tackling obesity, rather than continuing to deliver small-scale initiatives that were showing little, if any, improvement. In particular, the Board noted the following points:-

- Currently the prevalence of people who were classified as being overweight or obese across Doncaster was considerably higher than the England average.
- In Doncaster, it was estimated that over 7000 children (aged 2-15) and 71,000 adults (16+) were classified as obese.
- The proportion of overweight and obese adults was estimated to rise to 74.4% last year, and the 2014/15 data from the National Child Measurement Programme (NCMP) showed that 34% of 10-11 year old children and 22% of 4-5 year olds in Doncaster were overweight and obese.

- Childhood obesity can be associated with emotional and behavioural problems from a very young age, weight related teasing and bullying and increases in school absenteeism.
- The harmful effects of obesity on communities included long term health conditions which placed increasing demands on social care services and resulted in lost productivity for employers.
- With regard to current services, despite what appeared to be a comprehensive pathway of service provision, there was very little change in fact, the NCMP figures for 2014/15 suggested that children were becoming more obese during their school years. Although obesity was a Health and Wellbeing priority, current provision was piecemeal and involved the commissioning of small scale services. Given the reduction in the Public Health Grant, it was no longer possible to work in this small scale manner and there was a need to consider other wider reaching methods of tackling obesity across the lifespan but especially in children.
- A whole system approach was needed in order to address those factors influencing obesity that were outside an individual's control and which required society wide action to change. These included:
  - Creating an environment where it was easy for people to shop healthily, do physical activity, spend time doing positive things with families and friends, travel actively, cook affordable healthy meals and have good mental health and resilience;
  - Ensuring people had enough money and the right skills, knowledge and equipment to feed themselves and their families;

These measures required input society-wide from a range of partners across statutory, voluntary, community and private sectors. In order to work towards this approach, Public Health were linking with the development of the Local Plan particularly in relation to improving health and wellbeing, transport and movement, and quality of place.

With regard to how this Board could support this work going forward, it was suggested that a 'Health in all Policies' perspective was needed. The Board also had a key role in helping to achieve the aim of making the healthy choice the easy choice for people, via environmental change and action at population and individual levels. This would include working together to engage with local businesses in encouraging healthy workplace initiatives and the adoption of environments that would promote healthy weight and improved wellbeing. It was also hoped that a member of this Board would take on the role of 'Champion for Obesity' and be the driving force behind the WSA to this priority area.

The Board then discussed at length the points raised in the presentation. In response to a query regarding examples of best practice elsewhere, Dr Rupert Suckling explained that 4 areas had been selected to operate as whole system providers in a national pilot and it was hoped that Doncaster would be able to learn from that exercise, possibly by shadowing one of the participating areas.

Members recognised that individual responsibility had a significant part to play in changing people's attitudes and behaviours and that there were personal triggers that would make people take steps to curb obesity, as with other conditions/habits. The Board also acknowledged that more could be done by targeting specific sectors of the population, such as children in care, many of whom came from deprived areas. Schools also needed to be engaged in this work, as a lack of physical activity was a major factor which contributed to obesity, and it was felt that currently there was more of a focus on attainment targets than on health and wellbeing in schools. It was also suggested that the partner organisations represented on this Board could each do more to support this work by reviewing their own internal policies in order to help their staff live healthier lifestyles.

#### It was then

## **RESOLVED:**

- To approve, in principle, the development of a whole system approach to obesity, subject to any decisions affecting the future provision of specific local weight management services being discussed in detail between the relevant partners/service providers prior to being implemented; and
- 2) To pursue the possibility of shadowing one of the 4 local authority areas selected to operate as whole system providers in the national pilot scheme.

## 43 HEALTH AND WELLBEING STRATEGY UPDATE

The Board considered the final draft of the Doncaster Health and Wellbeing Strategy 2016-21, together with the Due Regard Statement 2015-21, for endorsement and subsequent referral to Full Council for adoption.

In presenting the Strategy, Louise Robson summarised the latest changes made to the document. During subsequent discussion, Members endorsed the Strategy for recommendation to Full Council, subject to making the following observations/comments:

- The Mission Statement on page 8 should be amended to read "Prevent disease, disability and harm, and sustain health and wellbeing through a world class health and care system." It was also suggested that the use of the words 'world class' should be reviewed.
- It was pointed out that the last bullet point on page 7 of the Strategy, which
  read "Ofsted recognised improvements in services for children in need of
  safeguarding, looked after children and care leavers, including 'Good' services
  for looked after children", was inaccurate as the 'Good' rating had been given
  for the adoption service.
- A view was expressed that the section on Children and Families on page 18
  was still quite narrow in its focus, as it only referred to the Stronger Families
  programme and not to any other services.

After Members had discussed the issue of the alignment of the planning frameworks of the various partnership bodies and the need for a clearer understanding of the wider relationships between each of the thematics, it was

<u>RESOLVED</u> that, subject to the above comments and further minor drafting amendments, the final draft of the Doncaster Health and Wellbeing Strategy 2016-21, including the Due Regard Statement 2015-21, be approved for recommendation to Full Council for adoption.

## 44 BETTER CARE FUND UPDATE

The Board received a detailed update by Chris Stainforth on the latest position regarding the development of the Better Care Fund (BCF). In particular, the Board was briefed on the following key issues:

- The planning guidance from the NHS in respect of the Better Care Fund for 2016/2017;
- The services currently funded from the BCF;
- The performance targets that were being looked at nationally; and
- Changes to the governance arrangements to manage the individual workstreams.

During subsequent discussion on issues relating to the BCF, Board Members commented on/noted the following:-

- The proposed use of 'place based plans' was welcomed;
- There was a need to ensure that real transformation took place, rather than relying upon the BCF to prop up services;
- Currently the focus was on 3 main transformation areas:
  - Urgent Care system this was being redesigned in line with the recommendations from Professor Keith Willett's Urgent and Emergency Care Review report;
  - Intermediate Care Service ways of improving services received by dementia patients were being looked at; and
  - Primary Care Strategy/System there was a need to identify alternative methods of delivering primary care services. Once this work was done, the findings would be brought to this Board at the appropriate time.

<u>RESOLVED</u> to note the update on the progress and future of the Better Care Fund.

## 45 <u>DONCASTER LIBRARIES AND CULTURE SUPPORTING WELLBEING</u>

This item was deferred until the next meeting.

#### 46 JOINT WORKING WITH SOUTH YORKSHIRE FIRE AND RESCUE SERVICES

The Board considered a report which outlined a proposal to broaden the content of the Home Safety Checks conducted by the South Yorkshire Fire and Rescue Services (SYFRS) to include Health and Wellbeing messages and the introduction of preventative activities. The Board also viewed a video which illustrated the wide range of services provided by SYFRS.

In presenting the paper, Steve Helps explained that within Doncaster a steering group comprising representatives from Public Health, CCG commissioning, St Ledger Homes, Age UK and SYFRS was working towards the introduction of Fire and Rescue Service led Safe and Well Visits across the Borough. The introduction of Safe and Well Checks in Doncaster would enable closer working between key agencies who shared responsibility for supporting vulnerable older people across the Borough.

Taking into account the local priorities identified through the Joint Strategic Needs Assessment and the Health and Wellbeing Board, the Safe and Well Visit would focus on ageing safely, falls prevention, fire safety in the home and crime prevention, with established signposting pathways in place to enable additional support through the most appropriate partners.

It was noted that training of SYFRS staff would be through accredited courses provided by the Royal Society of Public Health with Safe and Well Visits being delivered from 1st April 2016.

During subsequent discussion, Members gave their full support for this initiative.

In response to a comment, Steve Helps confirmed that the Fire and Health conference to be held on the 16<sup>th</sup> Feb 2016 and hosted by SYFRS was aimed at identifying the current and future joint working between Fire and Health service partners. Invites to this event had been sent out to senior managers who worked across the various health and social care providers.

It was then

<u>RESOLVED</u> to note and support the proposed introduction by SYFRS of Safe and Well Visits within Doncaster.

# 47 <u>ASSETS - THE HEALTH PARTNERS WORKING TOGETHER UNDER ONE PUBLIC ESTATE</u>

The Board received a presentation by Oliver Judges outlining the One Public Estate and the Doncaster Health Partnerships Joint Assets Strategy, which essentially looked at ways of co-locating and working together to reduce costs on buildings whilst supporting improvement to services.

It was noted that the key focus was to reduce the cost of the Health and Public estate by reducing the number of buildings and supporting the protection of front line services. This also brought an opportunity to reorganise service locations making them more accessible and, working under a single system approach, to improve service levels, experience of the service and efficiencies.

Having outlined the aims and objectives of the One Public Estate, Oliver Judges explained how this work would be taken forward. It was reported that funding had been awarded to support the delivery of the Programme, and that a cross-public sector Operational Assets Board and One Public Sector Project Delivery Team had been established.

Discussion followed, during which Dr Rupert Suckling pointed out that it was important to remember that there were also other third sector partner assets and non-public estate properties situated across the Borough. In reply, Oliver Judges confirmed that work was ongoing in relation to mapping the distribution of various property assets in the Borough but he acknowledged that there was scope for collecting more data in respect of third sector assets.

After Members had agreed that it would be useful to receive the Doncaster Health Partnerships Joint Assets Strategy at a future meeting of this Board, it was

## RESOLVED to:

- 1) note the potential of the One Public estate and agree to work together to deliver projects under this initiative;
- note the development of a new Health Partnership Estates Strategy and request that this be submitted to a future meeting of the Board when completed.

#### 48 REPORT FROM HWB OFFICER GROUP AND FORWARD PLAN

The Board considered a report which provided an update on the work of the Officer 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.

Dr Rupert Suckling summarised the salient points in the report, which included updates on:

- Use of the Pharmaceutical Needs Assessment;
- Public Health Grant Reductions 2016/17;
- Draft Recommendations from the Director of Public Health's Annual Report 2015;
- Anti-Poverty issues; and
- Forward Plan for the Board.

## **RESOLVED**:

- 1) to note the update from the Officer Group; and
- 2) to agree the proposed Forward Plan, as detailed in Appendix A to the report.

CHAIR:	DATE: