

Time Commenced: 1.03pm  
Time finished: 3.05pm

**Health and Wellbeing Board  
19 July 2018**

**Present:**

**Chair: Councillor Poulter**

**Elected members: Councillors Ashburner, Care, Hudson, J Khan and Repton and Councillors Webb – Cabinet Member for Adults, Health and Housing and Williams – Cabinet Member for Children and Young People**

**Appointed officers of Derby City Council: Cate Edwynn (DCC - Director of Public Health) and Pervez Sadiq (DCC – Service Director – Adults and Health)**

**Appointed representatives of Southern Derbyshire Clinical Commissioning Group: Dr Richard Crowson**

**Appointees of other organisations: Steve Studham (Healthwatch Derby), Kath Cawdell (Community Action Derby) and Vikki Taylor (Derbyshire STP Director, NHS England)**

**Substitutes: Gareth Harry (Derbyshire Healthcare Foundation Trust) and Robert Taylor (Derbyshire Fire and Rescue Service).**

**Non board members in attendance: Jane Careless (DCC – Senior Health Protection Manager), Robin Dewis (DCC – Consultant in Public Health Medicine), Jenny Goodwin (Joined up Care Derbyshire), Nishi Madan (DCC – Senior Public Health Manager), Robert Smithers (DCC – Livewell Treatment Manager) and Alison Wynn (DCC, Assistant Director of Public Health)**

**01/18      Apologies for Absence**

Apologies were received from Tracey Allen (Derbyshire Community Healthcare Services), Gavin Boyle (Derby Hospitals NHS Foundation Trust), Helen Dillistone (Derbyshire Clinical Commissioning Groups), Paula Holt (University of Derby), Ifti Majid (Derbyshire Healthcare Foundation Trust), Andy Smith (DCC – Strategic Director of People Services) and Gavin Tomlinson (Derbyshire Fire and Rescue Service).

**02/18      Late Items**

There were no late items received.

## 03/18      Declarations of Interest

There were no declarations of interest.

## 04/18      Minutes of the meeting held on 17 May 2018

The minutes of the meeting held on 17 May 2018 were noted.

## 05/18      Welcome and introductions from the new Chair

The Chair welcomed Members of the Board to the meeting.

## 06/18      Health and Wellbeing Board Terms of Reference and Membership

The Board received a report of the Chair on Terms of Reference – Review and Update. The report was presented by Derby City Council's Assistant Director of Public Health.

It was reported that the Terms of Reference for the Health and Wellbeing Board were last reviewed and updated in 2015 and that following changes in Council leadership and the Chair of the Board, alongside changes in the local health system, it was timely that the Terms of Reference for the Health and Wellbeing Board be reviewed and updated.

Members noted that the Terms of Reference remained substantively similar to the previous version and maintained the following six sections:

1. Background.
2. Purpose and functions.
3. Membership.
4. Governance and reporting arrangements.
5. Meeting management.
6. Amendment and review.

It was proposed that the following roles/organisations be added to the non-statutory membership of the Board:

- Service Director, Adult Social Care Services.
- Joined Up Care Derbyshire (STP) representative.
- DHU Healthcare.
- East Midlands Ambulance Service.

The additions to non-statutory Members of the Board were agreed.

Members discussed and agreed a number of amendments to the Terms of reference.

**Resolved to approve the updated Terms of Reference, subject to the amendments as outlined in the meeting.**

## **07/18 Falls Pathway, Ask, Assess and Act**

The Board received a report of the Senior Public Health Manager on Falls Pathway, Ask, Assess and Act. The report was presented by Derby City Council's Senior Public Health Manager.

It was reported that falls prevention had been identified as a key priority area for the STP due to the high costs and poor outcomes associated with falling, particularly for those who were already frail. It was also reported that this was accentuated when combined with increased risks of fractures.

It was noted that people aged 65 and older had the highest risk of falling, with 30% of people older than 65 and 50% of people older than 80 falling at least once a year. It was also noted that falls were estimated to cost the NHS more than £2.3 billion per year and that many of these falls were preventable if appropriate interventions had been in place.

It was reported that estimates had demonstrated that we could expect around 70,000 people to fall each year across Derbyshire and that the Joint Falls Needs Assessment for Derbyshire had revealed that there were gaps in awareness raising, prevention activities, a complete falls pathway and risk identification. It was also reported that actions to address these gaps were planned and would create significant system level savings across Derbyshire.

Members noted that actions already undertaken included liaison with Care Link and Telecare services and working with Derby County Community Trust to promote and increase referrals to the Forever Active Programme. Members also noted that referral levels were currently low and capacity was available to work with many more individuals.

### **Resolved:**

- 1. to endorse the Falls pathway; all members of the Health and Wellbeing Board to understand the importance of the preventative aspects of the Falls Pathway and to become 'ambassadors' for falls prevention within their organisations;**
- 2. to agree that front line staff should understand the falls pathway and their role within this pathway and that older people are asked about falls when they have routine assessments and reviews with health and social care practitioners (Quality Statement 1 NICE guidance updated Jan 2017);**
- 3. to agree that front line staff should be supported to undertake any 'falls prevention' training and development;**
- 4. to agree that front line staff should be proactively referring people in the community who have a known history of recurrent falls for strength and balance exercise programmes (Quality Statement 8 NICE guidance 2015);**

and

5. **to agree that front line staff should be signposting to services which promote healthy ageing such as; Healthy Housing, Safe & Well Checks, Strength & Balance Programmes and Carelink Services.**

## 08/18      Health of Offenders Residing in the Community

The Board received a report of the Director of Public Health on Health of Offenders Residing in the Community. The report was presented by Derby City Council's Consultant in Public Health Medicine.

It was reported that the Reducing Offending, Re-offending and Health Board was a County-wide partnership Board chaired by the Derbyshire Leicestershire Nottinghamshire and Rutland Community Rehabilitation Company. It was also reported that a Health Needs Assessment (HNA) of Community Offenders was commissioned by the Board and that the report provided a summary to the Health and Wellbeing Board for its information.

It was noted that in Derby City, there were 1,664 offenders residing in the community and that this cohort had higher rates of both mental and physical illness, than the general population. It was also noted that there was a complex relationship between health and social influences on offending and re-offending behaviour and that this HNA provided an understanding of the actions which could be taken to reduce inequalities and improve the health and wellbeing of the local population.

It was reported that among these offenders, smoking, alcohol consumption, and illicit drug use were far higher than among the general population and that this HNA found that respondents may be willing to adopt a healthier lifestyle, with over half of the smokers reporting recent attempts to quit, and one-third of drug users reporting that they had sought help to stop using drugs.

Members noted that no specialised health services were commissioned for community offenders, who were expected to access the same services as the general population and that many community offenders were not registered with primary care services, resulting in overuse of crisis care.

Members agreed that the health of community offenders was influenced by wider factors such as issues with housing or finance.

It was agreed that the report authors should liaise with the Health and Wellbeing Board Mental Health Sub Group.

Members requested that an update report be brought to a future meeting of the Board.

**Resolved:**

- 1. to note the findings of the Health Needs Assessment and the poor health outcomes experienced by offenders residing in the community;**
- 2. to note the role taken by the Reducing Offending, Re-offending and Health Board to improve the health of offenders residing in the community;**
- 3. to support the recommendations of the Health Needs Assessment; and**
- 4. to request that an update report be brought to a future meeting of the Health and Wellbeing Board.**

## **09/18      Joined Up Care Derbyshire - Update**

The Board received a report of the Derbyshire STP Director on Joined up Care Derbyshire – Update.

Members noted that the local sustainability and transformation partnership was known as Joined Up Care Derbyshire (JUCD) and that it aimed to help meet the ‘triple challenge’ set out in the NHS Five Year Forward View to work and plan much better together, focusing on new ways of working to:

- Help keep people healthy.
- Give people the best quality care.
- Run services well and make the most of available budgets.

It was reported that eight Place Alliances had been agreed and aimed to shift the focus of health and care services to enable citizens to take responsibility to maximise their health and wellbeing. It was also reported that Derby City Place Alliance had had their first meeting and work was underway to agree priorities.

It was noted that significant work was underway to understand and develop our workforce including:

- Two engagement events were held earlier in the year to share the thinking so far on meeting the national targets and to seek input from general practices and other stakeholders in relation to the GP Forward View.
- The development of a JUCD STP Talent Academy.
- Derbyshire had received an allocation of £508,320 for workforce transformation in 18/19.

It was also noted that JUCD STP Derbyshire had been successful in the application process to develop specialist perinatal mental health community services during 2018/19.

It was reported that in line with the national direction of travel, JUCD was expected to continue its progression into becoming an Integrated Care System (ICS) and that in neighbouring parts of the country integrated care systems had already begun to progress. It was also reported that NHS organisations, in partnership with local councils and others, took collective responsibility for managing resources, delivering national standards, and improving the health of the population they served.

Members noted that in Derbyshire it was planned that an ICS would be in place by April 2019; at least in shadow form. Members also noted that this would see organisations acting together as a strategic commissioner, overseeing services, standards and how resources were allocated.

**Resolved to note the update on Joined Up Care Derbyshire.**

## **10/18      Annual Statement from the Health Protection Board**

The Board received two reports of the Director of Public Health on Health Protection Board Annual Report Update and Health Protection Board Update. The reports were presented by Derby City Council's Senior Health Protection Manager.

It was noted that the Health Protection Board, a sub group of Derbyshire County Councils and Derby City Councils Health and Wellbeing Boards, sought to provide assurance of arrangements for the prevention, surveillance, planning and response required to protect the public's health. It was also noted that the Board was a high level forum for agreeing strategic priorities, seeking assurance and challenge and facilitating strategic relationships.

It was reported that the scope of the Board included:

- National Screening and Immunisation programmes commissioned by NHS England
- Communicable disease control
- Infection prevention and control
- Environmental Hazards
- Emergency planning via links with the Local Health Resilience Partnership and Local Resilience Forum

It was also reported that the Board's Priorities were:

- Infection Prevention and Control
- Emergency Planning, Resilience and Response
- Screening and Immunisation programmes
- Environmental risks
- Communicable disease

Members noted that the Health Protection Board Update report provided an overview of the key messages arising from the Derbyshire Health Protection Board meeting on Tuesday 24th April 2018, including an update on the screening and immunisation programmes commissioned by NHS England and a tuberculosis update.

**Resolved:**

- 1. to note the Health Protection Board Annual Update; and**
- 2. to note the Health Protection Board Update.**

## 11/18      Livewell Annual Report 2017/18

The Board received a report of the Strategic Director of People Services on Livewell Annual Report 2017/18. The report was presented by Derby City Council's Livewell Treatment Manager.

It was reported that the Council's Livewell integrated lifestyle and behaviour change programme had completed another successful year of meeting its targets as set by the Public Health Department.

Members noted the successes that had been achieved in relation to weight management, smoking cessation and NHS health checks, as outlined in the report.

It was reported that Derby City Council had an excellent relationship with Derby County Community Trust (DCCT) who hosted the Children's Livewell programme and that they had supported children through the weight management service and the Active Schools programme.

**Resolved to note the Livewell Annual Report 2017/18.**

MINUTES END