## HEALTH AND WELLBEING BOARD

# 7 April 2022

## Present:-

Councillors J McInnes (Chair), Y Atkinson, R Croad, A Leadbetter, A Saywell

D Crump, Joint Engagement Forum Councillor B Deed (District Council representative) J Drew, Healthwatch Devon J Fraser, Deputy Chief Officer for Children's Services (DCC) T Golby, Director of Integrated Adult Services (interim) (DCC) T Henry, Deputy Director of Public Health L Howell, Devon & Somerset Fire & Rescue Service Dr P Johnson, CCG

#### Apologies:-

Councillors S Brown

# \* 45 <u>Minutes</u>

**RESOLVED** that the minutes of the meeting held on 13 January 2022 be signed as a correct record.

### \* 46 <u>Items Requiring Urgent Attention</u>

There were no items requiring urgent attention.

### \* 47 <u>COVID-19 Update</u>

The Deputy Director of Public Health updated the Board on the current position relating to the Coronavirus.

Free Covid testing had ceased on 31 March and so the pattern of testing had changed. Devon still had high levels and were currently above the England rate, with 1 in 11 people who may currently be impacted with Covid.

There were now few restrictions in place and the focus now was on protecting those most vulnerable and ensuring that eligible people were tested accordingly. Vaccinations were now available for the 5-11 age group.

Hospital numbers were still high, but were coming down, with numbers in high dependency units low. Covid was now being treated the same as other respiratory infections. Any new strains of the virus would be tracked closely.

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> The message had changed to stay at home if you had symptoms, which could be flu or Covid, and not to mix with others who were vulnerable.

Discussion and questions included:

- Vaccination rates and the focus on communication campaigns to encourage uptake;
- Measures remained quite consistent across other countries and valuable learning from best practice.

The Board were referred to the following online data:

DCC Covid-19 Dashboard: Coronavirus dashboard and data in Devon - Coronavirus (COVID-19)

National Coronavirus Tracker: Daily summary | Coronavirus in the UK (data.gov.uk)

National Coronavirus Interactive Map: Interactive Map | Coronavirus in the UK (data.gov.uk)

### \* 48 <u>Devon Joint Health and Wellbeing Strategy: Priorities and Outcomes</u> <u>Monitoring</u>

The Board noted the Report of the Director of Public Health on the performance for the Board, which monitored the priorities identified in the Joint Health and Wellbeing Strategy for Devon 2020-25.

The indicator list and performance summary within the full report set out the priorities, indicators and indicator types, and included a trend line, highlighting change over time.

The latest Health and Wellbeing Outcomes Report, along with this paper, was available on the <u>Devon Health and Wellbeing website</u>.

The Report monitored the four Joint Health and Wellbeing Strategy 2020-25 priorities, and included breakdowns by local authority, district and trends over time. These priorities areas included:

- Create opportunities for all
- Healthy safe, strong and sustainable communities
- Focus on mental health
- Maintain good health for all

The following indicators had been updated since the last report to the Board as follows:

# Alcohol-Related Admissions (Narrow), 2020/21

The alcohol related admission rate per 100,000 in Devon was 424.3. This was statistically better than the England rate of 455.9. East Devon, Mid Devon, South Hams and West Devon were all statistically better than the England average and Exeter and North Devon were statistically worse.

# Cancer Diagnosed at Stage 1 or 2, 2019

The proportion of cancer diagnosed at stage 1 or 2 rate for Devon was 57.8%. This was statistically better than the England value of 55.1%. However, most areas in Devon were statistically similar to England, with only East Devon and Exeter performing statistically better.

# Emergency Hospital Admissions for Intentional Self Harm, 2020/21

The rate of emergency hospital admissions for intentional self harm in Devon was 211 per 100,000, which was statistically worse than the England rate of 181.2. Exeter, Mid Devon, North Devon and Torridge were all significantly worse than the England rate and only West Devon was statistically better.

### Injuries Due to Falls, 2020/21

The rate of injuries due to falls in Devon was 1662.4 per 100,000. This was statistically better than the England rate of 2023.0. Almost all areas in Devon were statistically better than the England rate except for North Devon and West Devon which were statistically similar.

### Reablement Services (Effectiveness), 2020/21

The proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement services in Devon was 67%. This was statistically significantly worse than the England proportion of 79.1%. All local authority areas in Devon were also significantly worse than the England rate.

### Self Reported Wellbeing (Low Happiness Score), 2020/21

The percentage of people self reporting low happiness was 7.2% for Devon. This was statistically significantly better than the England proportion of 9.2%.

Discussion and questions covered:

- A masterclass on the navigation tools available on the JSNA web pages was offered to those Board Members requiring assistance in obtaining information.
- It was noted that an update on Self-Harm would be provided to the next Board meeting in July.

#### \* 49 <u>Better Care Fund - Update</u>

The Board received the Report from the Interim Director of Integrated Care (Devon County Council and NHS Devon Clinical Commissioning Group) on the Better Care Fund, which covered latest performance.

The Better Care Fund (BCF) was the only mandatory policy to facilitate integration between Health and Social Care, providing a framework for joint planning and commissioning. The BCF brought together ring-fenced budgets from Clinical Commissioning Group (CCG) allocations, the Disabled Facilities Grant and funding paid to local government for adult social care services. The Health and Wellbeing Board had oversight of the BCF and was accountable for its delivery.

The Report set out the latest performance for the following BCF metrics:

- Avoidable Admissions
- Length of Stay
- Discharge to Normal Place of Residence
- Residential Admissions
- Reablement

Nationally, Government had indicated its intention to continue with the BCF for 2022/23 and in that year to introduce further development of the BCF for future years; and the national announcement of Planning and Reporting Guidance for 2022/23 would be published in May.

Discussion covered voluntary sector investment and close working in cluster areas to develop community services.

**RESOLVED** that the Board note the latest performance data and national requirements.

#### \* 50 <u>Annual Health Protection Assurance Report 2020/21</u>

The Board received the Health Protection Committee Annual Report 2020/21, which provided a summary of the assurance functions of the Devon, Cornwall and Isles of Scilly Health Protection Committee and reviewed performance for the period from 1 April 2020 to 31 March 2021. Due to the time lag in reporting data for 2020/21, the report contained some information in relation to activities undertaken in 2021/22, to provide a more timely picture of progress.

The report considered the following key domains of Health Protection:

- Communicable disease control and environmental hazards
- Immunisation and screening
- Health care associated infections and antimicrobial resistance

• Emergency planning and response.

The aim of the Health Protection Committee was to provide assurance to the local Health and Wellbeing Boards that adequate arrangements were in place for prevention, surveillance, planning and response to communicable disease and environmental hazards, to protect the public's health.

Priorities agreed by Health Protection Committee members for 2021/22 were to:

- 1 Maintain response to COVID-19 and ensure preparedness and resilience to respond to future pandemics or health protection emergencies. As part of this, lead efforts to target vaccination inequalities
- 2 Recover screening and immunisation programme delivery, coverage and uptake
- 3 Embed and strengthen community infection management services to prevent and respond to infections throughout the community
- 4 Work to reduce the incidence of healthcare associated infections and to tackle antimicrobial resistance across our communities
- 5 Focus efforts to address health inequalities, in particular health protection pathways for migrant and homeless communities
- 6 Maintain a focus on local action to address the climate emergency.

**RESOLVED** that the Health Protection Committee Annual Report 2021/22 be noted and accepted

#### \* 51 <u>Devon Voluntary, Community and Social Enterprise (VCSE) & Public</u> Sectors: Creative Collaboration in a Pandemic

The Board received a presentation from representatives from Devon Communities Together, Devon Voluntary Action and Public Health Devon entitled Devon VCSE and Public Sectors Creative Collaboration in a Pandemic.

The presentation covered:

- Context
- How has the VCSE sector worked together differently?
- How have the sectors worked together differently?
- How have we communicated differently?
- What have we done differently together?
- DCC Perspective
- What have we learned? Together is better!
- Next Steps

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The development of a new Devon, Plymouth and Torbay VCSE Assembly model was being looked at to pilot and develop new ways of working that would benefit communities.

Members' questions and comments included:

- The pandemic had affected the number of volunteers coming forward, but it was hoped that with the help of campaigns on social media, numbers would improve.
- Welcome the voluntary sector coming together collaboratively to improve working in the community.

The Chair thanked Officers for the presentation.

**RESOLVED** that an update be provided to the Board in six months' time.

[A copy of the presentation is attached to these Minutes.]

#### \* 52 Alcohol Specific Admissions in under 18s in Devon

The Board received a Public Health draft overview of the available data on alcohol use and harm among those under 18 years of age in Devon, including:

- Risk factors
- Prevalence
- Hospital admissions
- Deprivation
- Treatment
- Referral routes
- Needs and Outcomes
- Summary

Members' questions covered:

- Although the use of cannabis had been referred to, it was not within the scope of the paper, but could be followed up by the Public Health specialist.
- Whether there was any Scottish data on the minimum unit pricing for alcohol which, again, could be followed up.

#### \* 53 <u>GP Strategy Review for Devon</u>

The Board received a presentation from the Director of Commissioning at NHS Devon CCG on the Devon General Practice Strategy, Refresh for 2022.

Learning from the pandemic had shown how different primary care could and should be and, with increased pressure on the system, it was now time to revise the strategy, taking into account learning from experience.

The presentation covered:

- Background
- Progress to date
- Why a Refresh?
- Approach
- Three Phases

It was anticipated that the refreshed strategy would go to the CCG's Primary Care Commissioning Committee in July 2022.

In discussion, Members' questions covered:

- Surveys had gone out to every patient and member of the public to ensure engagement with everyone (e.g. the vulnerable and unpaid carers); and it was suggested that ambassadors to unpaid carer groups could be contacted;
- Workforce issues was an important issue, and key in the strategy would be looking at viable and robust models for the future.

[A copy of the presentation is attached to the Minutes.]

### \* 54 <u>CCG Update</u>

The Board received the report of the Chair of the NHS Devon Clinical Commissioning Group which provided an update on CCG business, Devonwide and national developments within the NHS. It was intended to provide the Board with summary information to ensure Members were kept abreast of important developments affecting the NHS.

The Board noted the updates, including:

- The Integrated Care Board would come into being on 1 July 2022, following the passing of the new legal framework, to be chaired by Dr Sarah Wollaston.
- The digital GP Locum Service, enabling GPs to be located anywhere in the UK to carry out online consultations to patients across Devon.
- The engagement programme involving online focus groups set up to listen to local people on waiting lists.

The Chair wished to acknowledge the pressure that the NHS and Adult Social Care was under.

### \* 55 <u>References from Committees</u>

Nil

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# \* 56 <u>Scrutiny Work Programme</u>

The Board reviewed the Council's Scrutiny Work Programme in order to avoid any potential duplications.

### \* 57 <u>Forward Plan</u>

The Board considered the contents of the Forward Plan, as outlined below (which included any additional items agreed at the meeting).

Meeting dates	Matter for Consideration
14 July 2022	Performance / Themed Items Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)
	Business / Matters for Decision Better Care Fund - frequency of reporting TBC JSNA/ Strategy Refresh (June) Self-harm in Children & Young People update Homeless Reduction Act: 12 month update Integrated Care Systems CCG Updates Self-Harm in Children & Young People
	<u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters for Information
20 October 2022	Performance / Themed Items Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)
	Business / Matters for Decision Better Care Fund - frequency of reporting TBC CCG Updates Adults Safeguarding annual report (September / December) Devon Voluntary, Community and Social Enterprise (VCSE) & Public Sectors: Creative Collaboration in a Pandemic - update
	<u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters

	for Information
19 January 2023	Performance / Themed ItemsHealth & Wellbeing Strategy Priorities and OutcomesMonitoringTheme Based Item (TBC)Business / Matters for DecisionBetter Care Fund - frequency of reporting TBCCCG UpdatesJoint Commissioning Strategies – Actions Plans(Annual Report – Dec)Other MattersScrutiny Work Programme / References, BoardForward Plan, Briefing Papers, Updates & Mattersfor Information
6 April 2023	
Annual Reporting	Adults Safeguarding annual report (September / December) Joint Commissioning Strategies – Actions Plans (Annual Report December) JSNA / Strategy Refresh – (June)
Other Issues	Equality & protected characteristics outcomes framework Pharmaceutical Needs Assessment

**RESOLVED** that the Forward Plan be approved, including the items approved at the meeting.

# \* 58 Briefing Papers, Updates & Matters for Information

Members of the Board received regular email bulletins directing them to items of interest, including research reports, policy documents, details of national/ regional meetings, events, consultations, campaigns and other correspondence. Details were available on the <u>Devon Health and Wellbeing</u> <u>website</u>.

No items of correspondence had been received since the last meeting.

# \* DENOTES DELEGATED MATTER WITH POWER TO ACT

The Meeting started at 2.15 pm and finished at 4.37 pm