

HEALTH AND WELLBEING BOARD

13 April 2023

Present:-

Councillors J McInnes (Chair), S Wollaston (Vice-Chair), R Croad,
F Letch MBE, A Saywell,

S Brown, Director of Public Health

I Luscombe, Environment Health Strategic Managers group

D Crump, Joint Engagement Forum

T Forster, Director of Integrated Adult Social Care

C Tidman, Royal Devon University Healthcare (for S Tracey)

S Liddicott, Interim Deputy Director of Children's Services (for J Wooster)

In attendance, virtual :-

J Crowley, Healthwatch Devon

N Acheson, Devon Integrated Care System Chief Medical Officer

Apologies:-

L Howell, Devon and Somerset Fire and Rescue Service

J Wooster, Interim Director of Children's Services

* **98** **Minutes**

The Chair informed Board Members this was Diana Crump's last meeting as a member, and she was formally thanked for the many years of service given. She also thanked the Board for its work and hoped the voice of vulnerable people would continue to be represented and listened to.

RESOLVED that the minutes of the meeting held on 19 January 2023 be signed as a correct record.

* **99** **Items Requiring Urgent Attention**

There were no items requiring urgent attention.

* **100** **Youth Voice on Mental Health Support in Devon**

The Board received a presentation from the Devon Youth Council Network on the Youth Voice Saturday on Mental Health event which had taken place on Saturday 15 October at the Tiverton Youth Centre, attended by 28 representative young people, 24 staff, professionals and Elected Members.

The event had been planned and led by young people from across the Devon Youth Council Network, using feedback collated from surveys and focus groups, resulting in an action plan being developed.

On 4 March 2023, 20 young people had met with decision makers from across Devon to review progress made and the six key themes were grouped under two headings – Education and Support Services. There were some areas where the youth voice had made a difference and some areas that still required work.

Discussion and questions from the Board and Officers included:

- Mental Health in School Teams were being introduced in some schools where funding was available, and this would be targeted in a purposeful way.
- The importance of improving communication from the Child and Adolescent Mental Health Services (CAMHS)
- Ensuring a smooth transition from Children to Adult Social Care and it was highlighted Adults Services were getting involved at an earlier stage
- The need for a multi-agency partnership on mental health and a commitment to getting this in place
- The role of councillors and how they can support this area
- Concern that some areas classified as safe spaces in schools might sometimes become a place of punishment
- In depth training for foster parents was welcomed
- Consideration of a detailed action plan including labelling allocated responsibilities to lead officers to help drive progress

The Board thanked officers and young people for their attendance and presentation and requested a future update on this in nine months' time to monitor progress. It was agreed to add this to the forward plan.

* **101** **COVID-19 Update**

The Director of Public Health updated the Board on the current position relating to the Coronavirus. Infection rates had plateaued and there was a fall in hospital admissions. A spring booster vaccine was being offered to people over 75 years, immunocompromised individuals and residents of older people care homes. The 1st April also saw the introduction of a new testing policy which is more targeted and focused to mainly used for symptomatic patients in hospital and to test to confirm outbreaks in settings such as care homes.

Dr Acheson said he could provide more information about the current booster programme at the next Board meeting.

Further discussion including noting that invites had been sent to some people for boosters and that district councils were still using outbreak management funding to support projects.

The main message was to continue to reinforce infection control in terms of prevention and encouraging eligible people to get booster injections.

Data was available at:

[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)

* 102 **Devon Joint Health and Wellbeing Strategy: Priorities and Outcomes Monitoring**

The Board noted the Report from 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 Report supplemented the full Devon Health and Wellbeing Outcomes Report for April 2023, which was available on the [Devon Health and Wellbeing website](#).

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 indicators below had been updated since the last report to the Board:

- Alcohol-related Admissions (Narrow), 2021/22
- Emergency Hospital Admissions for Intentional Self Harm, 2021/22
- Injuries due to Falls, 2021/22
- Key Stage 4 Performance, 2021/22
- Rough Sleeping, 2022
- Self-reported Wellbeing (Low Happiness Score %), 2021/22

Discussion and questions from the Board and Officers included:

- Concern about some of the figures for Key Stage 4 performance especially for the Torridge area and what will be done to improve this. Work was being carried out with schools to address this, but it was agreed further analysis would be useful to understand what how better to address this.
- Figures on admissions due to self-harm was also highlighted and recognised as concerning for the police as well as the health sector. It would be helpful to understand if a significant amount of these were due to people with complex issues being readmitted.
- There was limited understanding with the data as this didn't show complexities and other influencing factors. Coding challenges resulted in some cases where they fell into more than one code.
- A request for more detailed information regarding the Torridge key stage 4 performance data to understand relating issues.
- Rough sleeping information and further clarity about any linked factors such as alcohol and substance abuse. It was agreed that this could be looked at in more detail.
- The work of CoLab in Exeter and One Northern Devon were highlighted as successful programmes aiming to address complex vulnerabilities through multi-agency collaboration.
- Clarification on the statistics regarding admissions on self-harm. More detailed information was available from officers and could be provided.
- Healthwatch Devon had produced a report about children and self-harm which could prove informative in assisting with prevention work.

RESOLVED that the Board note the Devon Health and Wellbeing Strategy Outcomes Report.

* 103

NVQ 4 Performance in Teignbridge & Torridge - Update

The Board noted the update on NVQ4 Performance in Torridge and Teignbridge as requested at the October 2022 Board meeting.

The update included the Current Position; Skills Geography – Torridge; Skills Geography – Teignbridge; and What was happening locally.

Discussion included:

- Recognition of Torridge as an outlier around some of the data
- The effect of job losses in the districts in 2017 and 2018 such as the closure of Appledore shipyard
- Cornwall was often highlighted as a place suffering poor performance but some of Devon's districts were 10 to 15 per cent behind Cornwall
- Challenge for Teignbridge was that it was underperforming but it was not high enough up the list to require intervention.
- The devolution deal and the possibility of this providing some solutions with control of some areas such as adult education budgets

- The effect of a single industry closure on the statistics but it was hoped that with Harland and Wolff coming into the area coupled with a new maritime centre and levelling up funding there would be new investment and an increase in employment which would positively affect future performance.
- One of the key aims of the Integrated Care Systems was for the NHS to support broader social and economic development - should Torridge be an area for its focus.
- Employers could have a large impact in local areas with developing skill sets and upskilling people
- Opportunities for disabled people, many who live in the Torridge area and find it difficult to engage in the economic market - work was underway to improve this through targeted projects
- One of the main blocks for those with disabilities getting paid employment was the lack of transport. This would be explored further with the Highways and Transport team.
- Partner organisations should show leadership in supporting local organisations and employment by purchasing products and services locally

RESOLVED that the Board note the update.

* 104

Joint Forward Plan

The Board considered the current draft of the One Devon Joint Forward Plan (JFP). The Health and Care Act 2022 required that Integrated Care Boards (ICBs), and their partner trusts, prepared a JFP before the start of each financial year. For this, the first year, the final publication date would be 30 June 2023.

JFP guidance required the opinions of HWBs on “*whether the draft takes proper account of each JLHWS published by the HWB that relates to any part of the period to which the JFP relates*”.

Discussion included:

- Inclusion of dementia was important. Links with Primary Care work around this would be strengthened.
- Request for references to housing as a joint piece of work to be included
- The plan was ambitious so it was essential to be clear about what could be delivered in 5 years. Projects would be sequenced to ensure they were realistic.
- To have a financial strategy to ensure there were the resources to deliver
- It was hoped tackling obesity in children could be a key target as well and that positive engagement with child carers take place to ensure their views were included

- This was a really good plan which enabled partner organisations to hold each other to account
- Preventing duplication of targets and linking with work already underway
- Recognising the support of independent care providers within the whole system
- The Plan would be published end of June and would be refreshed annually

RESOLVED that the Board supported the Joint Forward Plan and the final version would be forwarded to members and signed by the Chair and the Director of Public Health.

105 Annual Health Protection Assurance Report 2021-2022

The Board received the Health Protection Committee Annual Report 2021/22, 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 2021 to 31 March 2022.

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.

The Annual Report included progress on the Work Programme Priorities for 2021/22 and set out the agreed Work Programme Priorities for 2022/23.

RESOLVED that the Health Protection Committee Annual Report 2021/22 be endorsed and noted.

*** 106 Adult Social Care Vision & Strategies**

The Board received the Report of the Director of Integrated Adult Social Care on the updating of the Integrated Adult Social Care Vision and Strategies, which had last been updated in 2018/19.

The vision was expressed through three strategies:

- Living well in Devon
- Ageing well in Devon

- Caring well in Devon

Although public feedback had closed, any feedback from the Board would be taken into account in its redrafting before submission to the Cabinet in June for approval.

Discussion included:

- Promoting independence enabling people to achieve better outcomes
- Consultation with service users and carers and feedback had been received on language and principles, structure, and style as well as on proposals
- The importance of working with people with lived experience and listening to their views and acting on these
- Recognition of the need for more housing options and making greater use of technology in the care sector
- Clearly communicating to service users and carers how the different plans and strategies worked and linked to each other
- Ensuring there was tracking of progress against the aims

RESOLVED that the Report be noted.

* 107 **NHS Devon - Update**

The Board received the report of the Chair of the NHS Devon Clinical Commissioning Group which provided an update on CCG business, Devon-wide 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.

Update highlights included:

- Junior Doctor industrial action
- Pharmaceutical, ophthalmic and dental services
- Vaccinations for flu and Covid
- Urgent and Emergency Care Performance
- No Criteria to Reside (beds occupied by patients who are medically ready to leave hospital)
- £200m National Hospital Discharge fund.
- Finance update outlining challenges and savings expectations.

RESOLVED that the Report be noted.

* 108 **Dates of Future Meetings**

Future meetings dates of the Board could be found on the Council's website - [Browse meetings - Health and Wellbeing Board - Democracy in Devon](#)

Next meeting – 20 July 2023

NOTES:

1. *Minutes should always be read in association with any Reports for a complete record.*
2. *If the meeting has been webcast, it will be available to view on the [webcasting site](#) for up to 12 months from the date of the meeting*

* **DENOTES DELEGATED MATTER WITH POWER TO ACT**

The Meeting started at 2.15 pm and finished at 4.50 pm