HEALTH AND WELL BEING BOARD

Thursday, 4 July 2019

PRESENT – Councillor Tostevin (Cabinet Member with Housing, Health and Partnerships Portfolio) (Chair), Councillor Crudass (Cabinet Member with Children and Young People Portfolio), Councillor Mills (Cabinet Member with Adult Social Care Portfolio), Councillor Harker, Councillor Mrs H Scott (Leader of the Council), Miriam Davidson (Director of Public Health), Nicola Bailey (Chief Officer) (Darlington Clinical Commissioning Group), Michael Houghton (Director of Commissioning Strategy and Delivery) (NHS Darlington Clinical Commissioning Group), Alex Sinclair (Director of Commissioning, Strategy and Delivery) (NHS Darlington Clinical Commissioning Group), Jon Carling (Office fof Durham Police, Crime and Victims' Commissioner), Jill Foggin (Communications Officer, County Durham and Darlington Foundation Trust), Sarah Hackett (Chief Executive) (Tees Valley YMCA), Jonathan Lumb (Darlington Secondary Schools Representative), Dr Amanda Riley (Chief Executive Officer) (Primary Healthcare Darlington), Levi Buckley (Tees Esk and Wear Valleys Foundation Trust) and Michelle Thompson (Chief Executive Officer) (Healthwatch Darlington)

ALSO IN ATTENDANCE – Christine Shields (Assistant Director Commissioning, Performance and Transformation), Ken Ross (Public Health Principal) (Public Health), Lynne Wood (Elections Manager) and Hannah Fay (Democratic Officer)

APOLOGIES – Suzanne Joyner (Director of Children and Adults Services), Marion Grieves (Dean of Health and Social Care) (Teesside University), Sam Hirst (Primary Schools Representative), Ron Hogg (Police, Crime and Victims' Commissioner) (Durham Police Area), Sue Jacques (Chief Executive) (County Durham and Darlington Foundation Trust), Rita Lawson (Chairman) (VCS Strategic Implementation Group), Colin Martin (Chief Executive) (Tees, Esk and Wear Valley Mental Health Foundation Trust) and Ann Baxter (Independent Chair) (Darlington Safeguarding Adults Partnership Board)

HWBB1 DECLARATIONS OF INTEREST.

There were no declarations of interest reported at the meeting.

HWBB2 TO CONSIDER THE TIMES OF MEETINGS OF THIS BOARD FOR THE MUNICIPAL YEAR 2019/20 ON THE DATES AS AGREED IN THE CALENDAR OF MEETINGS BY CABINET AT MINUTE C110/FEB/19

RESOLVED – That meetings of this Health and Well Being Board be held at 3.00 pm for the remainder of the 2019/20 Municipal Year.

HWBB3 TO HEAR RELEVANT REPRESENTATION (FROM MEMBERS AND THE GENERAL PUBLIC) ON ITEMS ON THIS HEALTH AND WELL BEING BOARD AGENDA.

No representations were made by Members or members of the public in attendance at the meeting.

HWBB4 TO APPROVE THE MINUTES OF THE MEETING OF THIS BOARD HELD ON 17 JANUARY 2019

Submitted – The Minutes (previously circulated) of the meeting of this Health and Well Being Board held on 17 January 2019.

In respect of Minute HWBB27/Jan/19, the Chair reported at the meeting that further amendments were required to be made to the Terms of Reference for this Board and that those amendments would be brought to the next meeting of the Board for further consideration.

RESOLVED – That the minutes be approved as a correct record.

REASON – They represent an accurate record of the meeting.

HWBB5 INTEGRATION BOARD GOVERNANCE ARRANGEMENTS

The Director of Children and Adults Services submitted a report (previously circulated) requesting that consideration be given to the proposed governance arrangements for the Integration Board (also previously circulated).

The submitted report stated that following an amendment to the terms of reference for this Board, the responsibility for the day to day issues of this Board had been passed to the Integration Board and outlined the proposed governance arrangements and how they related to the strategic, operational and joint commissioning working groups, various Boards and Strategies and to this Board.

It was reported at the meeting that following the introduction of the 'life course' approach by this Board, the role of the Integration Board had been strengthened, to ensure that there were robust arrangements in place; the terms of reference of the Integration Board had been reviewed; new Governance Arrangements had been proposed; a number of groups would feed directly into the Integration Board; and that the Integration Board would take a 'forward planning' approach.

Particular reference was made at the meeting on how any information would be fed back to Members of the Council.

RESOLVED – That the governance arrangements for the Integration Board, as appended to the submitted report, be noted.

REASON – To inform the Board of the governance arrangements for the Integration Board.

HWBB6 STARTING WELL: GIVING EVERY CHILD THE BEST START IN LIFE

In introducing the reports below, the Director of Public Health reminded Members of the 'life course' approach that had been adopted by this Board, and stated that the focus of this meeting would be 'Starting Well: Giving Every Child the Best Start in Life'.

(1) DARLINGTON CHILD HEALTH PROFILE 2019

The Director of Public Health submitted a report (previously circulated) informing the Board of the key messages contained within the Darlington Child Health Profile 2019.

The submitted report stated that the Darlington Child Health Profile 2019 reported data from 2017/18 to provide a snap shot of child health in Darlington to enable comparisons to be made against regional and England averages; the profile was designed to help understand local need and enable services to be planned, in order to improve health and reduce health inequalities; the profile provided an overview of the health and wellbeing of children in relation to 32 indicators; and that the indicators fell into five broad domains, namely premature mortality, health protection, wider determinants of ill health, health improvement and prevention of ill health. Particular reference was made to the fact that the health and wellbeing of children in Darlington was generally worse than the England average, with eleven indicators for Darlington being worse than the England average.

In presenting the report the Director of Public Health stated that the childhood immunisation rates amongst two year olds in Darlington were above the recommended coverage rate of 90 per cent; 88.8 per cent of children in Darlington were up to date with immunisations which was in keeping with the England average; the proportion of 16 to 17 year olds not in education, employment or training in Darlington was statistically significantly better than the national and regional average; the rate of 10 to 17 year olds in Darlington coming into contact with the youth justice system remained similar to the England average and had fallen in Darlington since 2010; and outlined the priorities to improve the health and wellbeing of children and young people in Darlington and reduce inequalities in health between Darlington and England.

Discussion ensued hospital admissions; the figures for attendance at Accident and Emergency; and the Urgent Care Treatment Centre.

RESOLVED – That the Darlington Child Health Profile 2019 report be noted, and further reports be received as appropriate to lines of enquiry.

REASON – To inform the Board of the key messages in the Darlington Child Health Profile 2019.

(2) DARLINGTON HEALTHY LIFESTYLE SURVEY

The Director of Public Health submitted a report (previously circulated) updating the Board on the results and key messages from the Darlington Healthy Lifestyle Survey and informing the Board that the Healthy Lifestyle Survey was being reviewed.

The submitted report stated that the survey gathered and analysed information from children and young people in Darlington about their attitudes and behaviours across a range of health related topics; that this information was used to inform strategic planning service delivery and practice; and that the results were used to challenge peer pressure and negative stereotypes of young people.

In presenting the report the Public Health Principal outlined the key messages from

the survey for the academic year 2018/19; stated that the survey had been undertaken by 6560 pupils aged between 9 and 16 years of age across 23 primary and seven secondary schools; the results indicated that young people in Darlington largely understood the health information and messages they received; and that they acted on the information and messages through exhibiting positive attitudes and health seeking behaviours.

It was reported that a review of the survey was underway which focussed on revisiting the core Social Norms principles and purpose of the survey and that a programme of engagement was underway which included a series of questionnaires and focus groups to inform the next survey in the new academic year.

- **RESOLVED (a)** That the results of the survey, be noted, and considered in future discussions in relation to young people's priorities.
- **(b)** That the current review of the Healthy Lifestyle survey, be supported, and any recommendations be considered at a future meeting of the Board.
- **REASON (a)** The survey is an annual process using an established methodology and provides a 'snap shot' of the attitudes and beliefs and self- reported health behaviours of young people in Darlington.
- **(b)** The survey has been running in Darlington for a number of years and it has been identified that the survey has become large and complex to administer and complete. Work is required to revisit the size and identify the key questions and themes for the survey to achieve the original purpose.

(3) CHILDREN AND YOUNG PEOPLE'S PLAN 2017/2022 - PROGRESS REPORT

The Director of Children and Adults Services submitted a report (previously circulated) updating the Board on the progress to date against the delivery of the Children and Young People's Plan 2017-2022.

The submitted report stated that the Children and Young People's Plan (CYPP) was one of the identified delivery plans within the Sustainable Community Strategy (SCS); the Plan identified the key actions to be taken to deliver the agreed SCS priority of the best start in life for every child; a multi-agency steering group (MASG) had been established to bring together key partners to ensure effective monitoring and delivery of the plan; and provided an update on the progress of the Year Two priorities.

Discussion ensued on Priority 3, in relation to accessing Child and Adolescent Mental Health Services and managing the expectations of those people who use the service.

RESOLVED – That the progress to date on delivering the Children and Young People's Plan 2017/22, as detailed in the submitted report, be noted.

REASON – To update the Board on the progress made to date on the Children and Young People's Plan 2017/22.

HWBB7 INTEGRATED CARE SYSTEM - UPDATE BY THE CHIEF CLINICAL OFFICER, NHS DARLINGTON CLINICAL COMMISSIONING GROUP.

The Chief Officer, NHS Darlington Clinical Commissioning Group (CCG), gave an update to the Board on the Integrated Care System (ICS) for the North East and Cumbria; outlined the background and purpose of the ICS and Integrated Care Partnerships (ICP) key challenges; the features and key principles of ICS Partnership Assemblies; key benefits to local people; the proposals for new clinical commissioning groups for the Tees Valley and Durham CCG's; the current arrangements; what CCG's do; the reasons for the changes; the proposals for change; key principles and expected benefits; and including the next steps.

The Chief Executive Officer, Healthwatch Darlington reported at the meeting that a significant piece of work had been undertaken in respect of the NHS Long Term Plan which included local Healthwatch from 14 areas, seeking thoughts on the priorities of the ICS and ICP; that a report was due to be published; and that Healthwatch Darlington would also be co-ordinating local Healthwatch from five areas to gather thoughts on the proposed CCG merger.

RESOLVED – That the thanks of the Board be conveyed to the Chief Officer, NHS Darlington Clinical Commissioning Group, for her update.

REASON – To convey the views of the Board.