

**HEALTH & WELLBEING MEETING
19th December 2013**

Present: Jo Cox (NHS Nene CCG, JC), Tracey Angus (TA), Patricia Dewar (Groundwork, PD), Joe Pryce (JP), Rosemary Plum (Community pharmacy, RP), Charlie Brewster (CB), Jenna Bartley (JB), Sue Hottinger (Housing, SH), Debbie Egan (DE), Sue Watts (SW), Maggie Price (Healthwatch, MP), Sonia Bray (SB), Kathryn Joseph (KJ), Jo Pettitt (Mind, JPe),

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1	<p><u>Welcome & Introductions</u> JC welcomed the group and introductions were made.</p>			
2	<p><u>Apologies for Absence</u> Received from Sandra Mellors, Rachel Wilson, Shirley Plenderleith, Ann Bodsworth, Valerie Hitchman, Mike Smeeton, Raf Poggi, Pina Sammarco, Deborah Mahon, and Shaun Birdsall.</p>			
3	<p><u>Matters Arising/Minutes from Last Meeting</u> The committee was happy that the minutes of the previous meeting accurately reflected the discussion.</p> <p>The group also commented on the recent HWB event at the Cornmarket hall, which was well attended and considered a great opportunity to network. JP attended on behalf of the HWB partnership to discuss the action plan with members of the public and other stakeholders. The general feedback was approval that the committee is focusing on the right targets to improve health and wellbeing in Kettering.</p>			

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4	<p><u>Dynamic Emergency Care Centre (DECC)</u></p> <p>The DECC will be returning over the Christmas period. This is a test period funded by health and KBC, which will provide an opportunity to collect information and help to measure the value of its advantages and identify the possibilities for future funding. The information we are looking to collect will include:</p> <ul style="list-style-type: none"> - time and reason for attendance - description of treatment received - details of previous attendances with DECC or A&E - What would they have done in the absence of the DECC - had the attendee consumed alcohol - where was the last place they were served (useful for identifying clubs who are continuing to serve people when they shouldn't be drinking more, etc.) <p>The service will be provided by St John's ambulance, as EMAS does not currently have the capacity to offer the service again.</p> <p>The pilot dates in December are the 20th, 21st, 24th, 26th, 27th, 28th and New Years' Eve, and the service will be provided from 9pm until 5am.</p>			
5	<p><u>Children and Young People recommissioning</u></p> <p>Unfortunately David Lloyd Hearn (commissioning lead for Children and Young People) was unable to attend today to give a presentation on the upcoming changes to services for this age group. However he has provided handouts which were distributed electronically before the meeting, and hard copies were given at the forum.</p> <p>KJ was able to comment that the handout includes feedback from a number of stakeholder events, and discusses the pathways they are looking at and how they might be changed, as well as information about the timescales for recommissioning. The proposed model combines national thinking with local feedback.</p> <p>If HWB members have any questions after reading the slides, you can contact JP who will speak to David, and if necessary schedule his attendance at a future meeting.</p>			

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6	<p><u>Housing developments discussion</u></p> <p>JC had recently attended a meeting on 106 agreements and the importance of having the correct organisations present early in the proceedings. New housing developments have an impact on all services; health, social, voluntary, etc.</p> <p>Concerns were raised over:</p> <ul style="list-style-type: none"> - Slow development at the moment due to low property prices. This has led to many 106 agreements being 'put on the back burner'. - Organisational restructure in health, and the consequent ambiguity over who is focused on these developments. - The decision over whether or not pharmacy access needs to be changed is made with the use of a pharmacy needs assessment document. RP raised concerns that these are not currently being completed. <p>The group discussed that the HWB meeting could be a good forum for discussing any proposed housing projects to ensure that all aspects of health and wellbeing are looked at during the planning stage. It may be possible to bring an officer from planning along to the meetings so that any concerns can be raised and solutions created.</p> <p>SH also commented on current difficulty in filling homes which have been converted to make them fully accessible for people living with physical and learning disabilities when they become available. Several members of the partnership felt that there is a demand for these properties and would be able to make use of them. Opportunity for further corroboration here.</p>	<p>SH to take back and discuss how this could be achieved.</p>	<p>SH</p>	

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7	<p>Discuss Action Plan</p> <p>It was decided that a standing order on the agenda would be to discuss the action plan and any progress made in achieving the outlined partnership goals.</p> <p>Nene CCG has met with Housing officers John Conway and Sara Snelling to discuss ways that we can work together to reduce attendances at KGH, and agreed to share mutually useful data in order to improve availability and access to suitable services.</p> <p>Due to large number of 0-4s attending A&E, particularly immediately after school or work hours, Kettering practices have agreed to send a message to local schools to provide education on what services are available and when it is appropriate to use A&E.</p> <p>Each practice is also carrying out an access audit to assess the level of variance, and share best practice to improve access to GP services and reduce unnecessary attendances elsewhere.</p> <p>RP added that a huge amount of time is wasted at GP with conditions that could be dealt with at the pharmacy. A new scheme has been introduced to make people aware that they can attend the pharmacy for a lot of minor ailments.</p> <p>Note: if patient attendances are transferred from one service to another, eg. from over-run services like A&E to GP, or from GP to pharmacy, the appropriate resources should follow the patients, so that the better suited service is able to invest and prepare for the increased demand.</p> <p>SW updated that Age Concern A&E service has all staff in place and is just waiting for a go live date, and has a new scheme which aims to offer support to dementia patients to improve the discharge experience and help patients return to their homes more quickly and comfortably. This is currently in proposal to KGH.</p> <p>The disabled facilities grants' funding mechanism is changing. This will now be paid to the county council and will no longer be ring-fenced. Kettering Housing are concerned as this funding is already over-subscribed and there is a waiting list. The grants are crucial for facilitating discharge, and this therefore needs to be raised at the Healthier Northamptonshire or county-wide Health & Wellbeing board meetings to prevent greater health and social costs.</p>	<p>JP to pass message to Raf to raise at countywide meeting</p> <p>SB to raise at Healthwatch</p>	<p>JP</p> <p>SB</p>	<p>DE raised concerns that work at the local level HWB forum isn't feeding into the countywide HWB. We need to ensure we are not silo working. There doesn't seem to be a system in place to filter information in either direction</p>

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7	<p>KBC has continued work to reduce childhood obesity. Following decommissioning of MEND, the Food & Families course was run again, this time with 6 children and their families for 6 weeks. The programme again received good feedback, and has been asked to run again in January. Other schools have also approached with an interest in running similar schemes. The co-op is providing a free assembly on healthy eating. KBC will continue with these projects until there is a replacement for MEND. A new outdoor gym has also been built at Rockingham Road Park.</p> <p>CB also added that change4life is being introduced to all schools in the county. Charlie's role is based at Salfield School, which is the lead school for HWB in the county. Salfield is looking to develop a tracking system for each child with as much info about health and social issues (obesity, mental health, household income, etc) as possible presented in a RAG system – with interventions offered if the child's status switches to Amber or Red. They are looking for HWB support and suggestions about how this could be offered, eg. if domestic abuse at home is an issue, they would require information on what services are available.</p> <p>The group again discussed the development of a Directory of Services. Healthwatch are looking at developing a network to allow accurate signposting, working with a variety of partners. PD mentioned that with a network like this, you could sell the information to interested parties (eg. schools) and this would fund the maintenance required to keep the service accurate and up to date.</p> <p>The Integration of Health and Social Care is one of the Healthier Northamptonshire workstreams, which is also aiming to build towards a single point of access for HWB issues. The BestCare fund is available for this, and they are looking to very heavily involve housing, voluntary sector, etc. There should be progress to update on by the next meeting.</p> <p>The action plan also discusses pharmacy-run Stop Smoking programmes, and how it would be useful for the GP record to show when a patient has engaged in one of these schemes and can therefore build on the work.</p>	<p>JC and RP to discuss outside of HWB meeting</p>	<p>JC, RP</p>	<p>PD and SW commented on successful 'blender' scheme which aimed to ensure babies are given real food.</p>

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8	<p>Update from Nene CCG</p> <p>The CCG is currently in financial recovery, as it inherited a lot of debt when it took over and wasn't able to achieve the required saving level. This will likely lead to a further 'tightening of belts.'</p> <p>One of the ways it is looking to do this is without cutting services is by tightening the discipline on the correct clinical process for these services. As a result, in December 12 procedures changed from 'Amber' status (need to match certain criteria before being approved) to 'Red', (will always go to a panel for approval). The purpose is to ensure that all of these referrals are appropriate.</p> <p>However, budget allocations for the CCGs were announced yesterday, and there will be a slight increase for next year. There has also been a change in the way the organisation focuses its resources. Last financial year, the CCG carried out over 400 small QIPP schemes, with much effort spent on planning and monitoring these schemes. Moving forward, the focus will be on fewer, larger and more effective schemes. Nene is also encouraging practices to work collaboratively to reduce unnecessary duplication, allow specialisation, and create fewer but larger organisations so that Nene can contract more effectively.</p> <p>SB raised concerns over the difficulty in attracting GPs to Northamptonshire. JC stated that while Kettering does have several training practices which should attract new GPs, there is likely to be a shortage due to the numbers currently reaching retirement or opting to take early retirement due to the current pressures on general practice. It is possible that working collaboratively will improve the situation.</p>			
9	<p>Update from KBC</p> <p>Following the resignation of the borough's Sports and Wellbeing officer, KBC will be recruiting to the post again on a 2 year term.</p> <p>KBC is working on several health related projects, including working with the Co Op for obesity awareness week (2nd week in January) and looking to incorporate 'Dry January' into the scheme to reduce alcohol intake and capitalise on New Years' resolutions!</p> <p>A health programme for tenants is also being developed, whilst the health walk in Desborough goes from strength to strength and remains popular.</p>			

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9	<p>An update was also read out from Shirley Plenderleith. Environmental Health Departments) from across Northants have submitted a joint outline project bid to the Public Health Team at NCC to revamp the healthy eating scheme across the County. The project seeks to work with local food businesses to ensure that all of the food they offer is as healthy as it can be e.g. takeaways, coffee shops, cafes etc.</p> <p>SH also updated that 1 in 5 homes in the borough is privately rented, and that work is being carried out to reduce the number of substandard houses. Advice has been provided to landlords on relevant subjects (eg. fire and electrical safety, how to prevent damp and mould, etc.) at a very well attended event for landlords. Stronger action is also intended for landlords who refuse to comply.</p> <p>A rough sleeping estimate was carried out on 27th November. Worryingly, the number increased to 11, compared to just 1 at this time last year. Often these sleeping on the streets were single men, aged 25-45, commonly with mental health issues.</p>			
9	<p>AOB</p> <p>A number of projects' contracts are ending on 31st March and it is unclear what supporting mechanisms will be put in place to cover those affected by the removal of these services. The worry is that a lot of these people have high level needs but not deemed high enough for social care input. The group believed that removing these services was short sighted as it could lead to greater costs in the future.</p> <p>One project currently being planned is to operate a B&B to home people who have nowhere else to go and need a few months of support to get them back on their feet.</p> <p>The police have seen a high increase in the number of cases of anger management issues resulting in individuals getting into one-off trouble. Discussions have taken place around the possibility of running an anger management course in some circumstances in place of a court appearance.</p> <p>HealthWatch are holding a Northamptonshire Health & Wellbeing event on the 9th January, to help develop the organisation's strategy. No venue yet, but details will be sent to JP to distribute to the partnership.</p>	<p>SB to send details to JP</p>	<p>SB</p>	

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9	<p>There will be a new organisational structure for Public Health. Consultations are taking place about how the department should be formed, and feedback is welcomed from any stakeholder. JP will distribute proposal document to the group so that any comments can be passed onto NCC.</p> <p>Shaun Birdsall will be leaving NCC for a Public Health role in Cambridgeshire. Best of luck to Shaun, who has said he will update JP when his successor is determined, so that we can continue to have a Public Health representative present at the HWB meeting.</p>	Distribute PH re-structure proposal document	JP	
10	<p><u>Date & Time of Next Meeting</u> Details to be confirmed and distributed</p>			