

Contact Officer: Jenny Bryce-Chan

KIRKLEES COUNCIL

HEALTH AND WELLBEING BOARD

Thursday 13th June 2019

- Present:**
- Councillor Viv Kendrick (Chair)
 - Councillor Carole Pattison
 - Councillor Mark Thompson
 - Dr David Kelly
 - Carol McKenna
 - Dr Steve Ollerton
 - Richard Parry
 - Karen Jackson
 - Helen Hunter
- In attendance:**
- Jill Greenfield, Head of Integrated Local Partnerships
 - Helen Gilchrist, Development Officer
 - Sharron McMahon, Health Improvement Practitioner
 - Alexia Gray, Service Manager, Domestic Abuse and Safeguarding Partnership
 - Emily Parry-Harries, Consultant in Public Health
 - Stefan Serban, Specialty Registrar in Dental Public Health
 - Catherine Wormstone, Head of Primary Care Strategy and Commissioning
 - Alan Turner, Programme Manager, Primary Care Networks
 - Ian Holmes, Director
 - Rachael Loftus, Head of Regional Health Partnerships
 - Phil Longworth, Senior Manager, Integrated Support
 - Jenny Bryce-Chan, Principal Governance Officer
- Observers:**
- Councillor Habiban Zaman – Chair of Health and Adults Social Care Scrutiny Panel
 - Lisa Williams, Calderdale and Huddersfield NHS Trust
 - Matt England – Mid Yorkshire Hospital Trust
 - Tim Breedon – South West Yorkshire NHS Foundation Trust
 - Diane McKerracher, Chair Locala
 - Stacy Appleyard, Health Watch Kirklees

1 Membership of the Board/Apologies

Apologies were received from the following Board members: Cllr Musarrat Khan, Cllr Kath Pinnock, Rachel Spencer-Henshall, Jacqui Gedman, Kathryn Giles and Mel Meggs

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Emily Parry-Harries attended as sub for Rachel Spencer-Henshall.

Fatima Khan-Shah, has resigned from the position as lay member for Greater Huddersfield and North Kirklees CCGs. Appointment of a new lay member will take place shortly.

2 **Minutes of previous meeting**

RESOLVED - That the minutes of the meeting held on the 28 March 2019 be approved as a correct record.

3 **Interests**

RESOLVED - No interests were declared.

4 **Admission of the Public**

RESOLVED - That all agenda items be considered in public session.

5 **Deputations/Petitions**

RESOLVED - No deputations or petitions received.

6 **Public Question Time**

RESOLVED - No questions were asked.

7 **Appointment of Deputy Chair**

RESOLVED - That Dr David Kelly be appointed Deputy Chair of the Health and Wellbeing Board for the 2019/20 municipal year.

8 **Loneliness Strategy for Kirklees**

The Board received a report which outlined progress on the development of an integrated partnership strategy, and action plan on loneliness in Kirklees.

The Board was informed that there is growing evidence that links loneliness to an increased risk of heart disease, stroke, depression, low self-esteem, sleep problems an increased stress response in addition to a number of other conditions. National research indicates that loneliness fluctuates across the life course with different needs at different ages and is unique to an individual's circumstances, identity, personality and personal resilience.

The Board was informed that while there is a great deal of evidence with regard to the effects of loneliness on older people, there is less evidence around the stigma of loneliness on children and young people however, things are starting to emerge with regard to children.

A short clip developed by Community Plus was played which showed a personal story.

The Board was advised that in developing the strategy, the aim is to take a strong partnership approach to addressing the mental and physical impact of loneliness. There are approximately 39 partners around the table, including the Jo Cox Foundation, the Council, the CCGs and other statutory partners and the voluntary

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and community sector. However there is still some work to do to continue to make meaningful connections.

The Board was asked to consider and feedback on what it considered to be essential to making a good strategic partnership. Responses included:

- Engaging with people using accessible language
- Primary Care Networks will provide a real opportunity
- A person's story is very powerful and an important way to have a conversation

The Kirklees Health and Wellbeing Plan prioritises community connection aiming to increase the proportion of people who feel connected to their communities. The most sustained relationships are the informal relationships and creating local communities that supports people not to be isolated.

There are four main goals outlined in the loneliness vision:

- Making tackling loneliness everyone's business
- Making the most of existing assets to tackle loneliness
- Understanding the experiences and appropriate responses for different groups and communities
- Fostering personalised approaches for those that need extra support to overcome barriers to developing meaningful connections

The Board raised concerns with regard to care leavers in Kirklees who can often be housed in areas where they lose personal contacts and become isolated. Concerns were also raised about young and middle aged men who have a higher rate of suicide.

The Board was informed that in recognition of the relationship between loneliness and mental health, mental health strategy work has been identified as a key component of the Mental Health Concordat and suicide prevention. There are also links to Public Health's work on Suicide Prevention and looking at men's mental health.

RESOLVED - That the Board acknowledges the work that has been carried out to date and endorses the recommendations and approach outlined in the report.

9 **Domestic Abuse Strategy**

The Board received a presentation on the Kirklees Domestic Abuse Strategy 2019/21 and its associated priorities.

The Board was informed that domestic abuse is a complex social problem that can have a major human and financial impact on children, adults, families and communities. It affects people from all backgrounds and the damage caused to health and wellbeing can often last throughout the person's life. In addition to the disruption caused by domestic abuse to individuals and families, there are also significant costs associated with addressing domestic abuse across all agencies, therefore a strong partnership response is required to be able to address it.

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Since 2015-2018, some of the work that has progressed over the last three years included:-

- Securing funding arrangements every year to allow continuation of the Independent Domestic Violence Advisor (IDVA) contract and Multi Agency Risk Assessment Conference (MARAC) post
- Substantially increasing the training offer across the partnerships
- Since Operation Encompass was rolled out in 2018, 117 primary schools and 23 high schools have received notifications of children who were present/witnessed domestic abuse within the previous 24 hours
- Through working collaborative at West Yorkshire level, the region has accessed £1m funding over 3 years for accommodation based support for victims with complex needs

The Board was informed that the Domestic Abuse Strategy 2019/21, will directly link to the vision outlined in the Kirklees Health and Wellbeing Strategy. The Domestic Abuse Strategic Partnership is governed by the Kirklees Communities Board which includes the statutory and voluntary sector. In developing the strategy, the aim is to move it away from just the victim to developing a whole picture approach. The intention of adopting this approach is to increase awareness raising about domestic abuse in order to give people the courage and knowledge to challenge it.

The 'whole picture approach' represents a shift in emphasis to tackling the issue. This style of approach is championed by the SafeLives organisation which Kirklees has adopted. The four key features are:

- The whole person
- The whole family
- The whole community
- The whole society

Reducing the prevalence of domestic abuse is a key priority for Kirklees and the main group established to lead on implementing the Domestic Abuse Strategy is the Domestic Abuse Strategic Partnership (DASP). The DASP is a multi-agency group of representatives from all relevant agencies and is committed to addressing the impact of domestic abuse in Kirklees.

RESOLVED - That the Board supports the Domestic Abuse Strategy 2019/20 and welcomes further progress updates

10 **Opportunities for Oral Health improvement**

The Board received a presentation on the work being undertaken on the oral health needs assessment of the local population and opportunities to improve oral health.

The Board was informed that local authorities have a statutory responsibility for oral health which includes securing the provision of oral health improvement programmes. Good oral health is an integral component of general health and wellbeing and the Oral Health Strategy is in line with Kirklees Joint Strategic Assessment (KJSA). The aim is to capture good practices for oral health

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improvement and provide a baseline evaluation of the oral health of the local population in a regional and national context.

Information was presented which highlighted the need to improve access to dental services. In addition, work needs to be undertaken to improve communication around prevention and encouraging stakeholders to give a consistent message around the prevention.

The Board enquired whether there was any scope to introduce dental services in schools. Questions were also raised with regard to the different demographics and whether different communities were being targeted.

The Board was informed that it will require a whole system approach and partnership with NHS England to resolve some of these issues, which includes reducing sugar consumption amongst children and young people.

Oral health advice provided to parents at all core 0-19, in line with Public Health England guidance includes:

- Breast feeding
- Diet and nutrition
- Importance of regular dental check-ups
- Importance of early introduction of effective brushing of teeth with fluoride toothpaste

To achieve improvements in oral health, the aim is to set up a joint 'Oral Health Advisory Group' (OHAG) between Kirklees and Calderdale Council, which will report to the Health and Wellbeing Board of each council. The joint OHAG will have separate action plans which are in line with the specific priorities and ways of working of the two councils. The OHAG will include representation from schools and Locala. Opportunities for working together will enable the integration of oral health in all policies, training of the workforce in the latest evidence based information and system leadership.

RESOLVED - That the Board endorses and supports the development of the joint Oral Health Advisory Group

11 **Development of the West Yorkshire and Harrogate 5 Year Plan Strategy for Health and Care**

The Board received an update on the development of the West Yorkshire and Harrogate 5-year strategy for health and care. The Board was reminded that in February 2018, the West Yorkshire and Harrogate Health and Care Partnership published 'Our Next Steps to Better Health and Care for Everyone'.

The document described some early successes that had been achieved by working together in partnership, particularly in relation to the 15 programmes of work that passed the subsidiarity test for things that needed to be worked on jointly at the West Yorkshire and Harrogate level. A lot of work has been undertaken and it is time for a refresh.

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In January 2019, the NHS Long Term Plan was published and it includes the commitment that every Integrated Care System in the country will develop a new 5 year strategy for health and care.

As a partnership it has been agreed that the approach will continue to be, to develop a strategy that relates to the local area, which will then be checked against national requirements. The final deadline for submission will be October 2019.

The Board was informed that the development of the 5-year strategy will ensure that efforts and resources are being put in the right place. Work will be undertaken to review and revise the existing programme and there are proposals to develop two new priority areas:-

- Children, Young People and Families
- Improving Population Health

The Board was asked for its view on the high level approach and whether the right priorities were being considered. The Board commented that there are children and young people who are carers for parents and siblings, many who are not visible and it was important that they are identified and provided with support.

The Board further commented that while it was content with the efforts of the Health and Care Partnership, the Integrated Care System has struggled to provide a Kirklees view and it was important to continue to look at what the local priorities are. It was also vital to take stock at Integrated Commissioning Board, the Integrated Provider Board and the Health and Wellbeing Board.

RESOLVED - That the Board will:

- (a) Input views and ideas into the overall development of the 5 year strategy for Health and Care in West Yorkshire and Harrogate
- (b) Contribute specific feedback to the development of the 2 new programmes

12 Kirklees Primary Care Network registration and development Update

The Board received an update on the development and registration process of Primary Care Networks in Kirklees. Primary Care Networks (PCNs) are a vital part of the vision for health and social care as set out in the Kirklees Health and Wellbeing Plan. They represent a change in the way health and care is provided to the population. GP practices, community services, social care and others will be expected to work together.

The Board was informed that by the 15 May 2019, each of the nine network had submitted the required information which included, names of the member practices, a map clearly marking the agreed network area and the named accountable Clinical Director.

The new contract framework marks a big change to General Practice and will be essential to deliver the ambitions set out in the NHS Long Term Plan. The contract increases investment and more certainty around funding and looks to reduce

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pressure and stabilise general practice. It will ensure general practice plays a leading role in every PCN.

The Board enquired what engagement activity had taken place and in response was advised that, stakeholders had been included in the configuration of PCN's from the outset and both CCGs had engaged extensively with the public/patients around primary care services and community care service. While it is important to continue to have the conversations in Kirklees, it will play out differently across the different areas of Kirklees.

Work is nearly complete to develop data packs with much more granular information. The data packs should be ready in approximately 6/8 weeks.

RESOLVED - That the Board will:

- (a) Receive the update on the development of the Primary Care Networks in Kirklees
- (b) Note the importance of the GP contract reform
- (c) Consider and discuss the implications, next steps and challenges of the Primary Care Networks

13 **West Yorkshire and Harrogate Health and Care Partnership Transformation Funding**

The Board was informed that one of the benefits of being an Integrated Care System (ICS) is that transformation money is available which has to be spent on specific things. In 2018/19, the ICS received non-recurrent funding from NHS England/Improvement to support transformation and change. This comprised two main elements:

- Hypothecated, national transformation funding to support specific national priority areas (£8.5m)
- Flexible national transformation (£8.75m)

The primary purpose of these resources is to support the transformation priorities of the West Yorkshire and Harrogate Partnership. The prioritisation of the flexible transformation funding was undertaken collectively by all partner organisations.

Since the report was drafted the ICS has revised the proposed allocations across programmes to include £0.4 million to support the children's work programme.

RESOLVED - That the Board will:

- (a) Endorse the principles and proposed approach to the development of Kirklees Place Based proposals for the use of flexible transformation funding in 2019/20
- (b) Agree to the Chair signing off the Kirklees Place Based proposals only if it is not timely to bring the proposals back to a formal meeting of the Board
- (c) Agree that a paper summarising the Kirklees Place Based proposals be presented to the next Board meeting.