

Minutes of the meeting of the Health, Care and Wellbeing Scrutiny Committee held in The Conference Room, Herefordshire Council Offices, Plough Lane, Hereford, HR4 0LE on Friday 25 November 2022 at 9.00 am

Committee members present in person and voting: Councillors: Peter Jinman (Vice-Chairperson), Trish Marsh, Tim Price, David Summers, Elissa Swinglehurst (Chairperson) and Kevin Tillett

Committee members participating via remote attendance: Councillors: Helen l'Anson

Note: Committee members participating via remote attendance, e.g. through video conferencing facilities, may not vote on any decisions taken.

Others in attendance: B Baugh (Democratic Services Officer), M Carr (Interim Statutory Scrutiny Officer), Pauline Crockett (Cabinet member - health and adult wellbeing), S Evans (Acting Head of Law and Business Partner – Community Wellbeing), H Hall (Corporate Director Community Wellbeing), Dr F Howie (Public Health Consultant), J Ives (Managing Director, Wye Valley NHS Trust), D Mehaffey (Executive Director of Strategy and Integration, NHS Herefordshire and Worcestershire Integrated Care Board), Councillor F Norman, M Pearce (Director of Public Health) and M Willimont (Head of Public Protection)

20. APOLOGIES FOR ABSENCE

Apologies for absence had been received from Councillor Carole Gandy.

21. NAMED SUBSTITUTES

Councillor Helen l'Anson participated via remote attendance on behalf of Councillor Carole Gandy.

22. DECLARATIONS OF INTEREST

Councillor Peter Jinman declared an 'other interest' in the agenda item 'The Impact of the Intensive Poultry Industry on Human Health and Wellbeing Scrutiny Report' due to connections to farming related bodies, as disclosed previously in the Register of Interests.

23. MINUTES

The minutes of the previous meeting were received.

RESOLVED:

That the minutes of the meeting held on 23 September 2022 be confirmed as a correct record and be signed by the Chairperson.

24. QUESTIONS FROM MEMBERS OF THE PUBLIC

No questions had been received from members of the public.

25. QUESTIONS FROM MEMBERS OF THE COUNCIL

No questions had been received from councillors.

26. PROGRESS REPORT

The Interim Statutory Scrutiny Officer reported that the recommendations made at the last meeting on 'Obesity in Herefordshire' ([minute 16 of 2022/23 refers](#)) had been reported to Cabinet on 24 November 2022, and the executive response was expected within two months.

RESOLVED:

That the progress report on scrutiny information requests, scrutiny reports and recommendations, and other matters raised by the committee be noted.

27. HEALTH, CARE AND WELLBEING SCRUTINY COMMITTEE WORK PLAN 2022-2023

The Interim Statutory Scrutiny Officer introduced the work plan for the committee.

The Chairperson noted that matters relating to Herefordshire Minor Injury Units (MIUs) had been considered by the former Adults and Wellbeing Scrutiny Committee and a briefing note on the current position was requested from the Managing Director of Wye Valley NHS Trust. The committee briefly discussed the role of cabinet members and how information was disseminated to other councillors.

The Chairperson noted that a briefing note had been requested at the last meeting on dementia provisioning, aligned to the agenda item on 'Domiciliary and Residential Care in Herefordshire' to be considered at the 6 March 2023 meeting.

In response to a question from the Vice-Chairperson, the Managing Director of Wye Valley NHS Trust provided an update on the situation in terms of strike action to be taken by the members of the Royal College of Nursing (RCN). It was noted that the required thresholds had not been reached at Wye Valley NHS Trust but RCN members at Herefordshire and Worcestershire Health and Care NHS Trust would be taking action, and the Herefordshire and Worcestershire Integrated Care System was planning accordingly.

RESOLVED:

That the work plan for the committee be noted.

28. THE HEALTH AND WELLBEING STRATEGY

The Director of Public Health introduced the item with the following comments: the report included an assessment of the existing strategy and limitations in terms of being able to understand its impact and the governance for the delivery of the strategy were acknowledged; the report set out the process for developing the new strategy, in accordance with the requirements of the Health and Social Care Act 2012; an online survey was being undertaken, closing on 11 December 2022; and, with input from the Executive Director of Strategy and Integration, an overview was provided of the interface

between the Health and Wellbeing Strategy, the new Integrated Care Strategy for Herefordshire and Worcestershire, and the new Joint Forward Plan.

The committee discussed the report, the principal points included:

1. The Chairperson noted the difficulties with the existing Health and Wellbeing Strategy and the need for robust monitoring and analysis of the effectiveness of the new strategy going forward.
2. The Director of Public Health said that the existing strategy was relatively good but there had been challenges around organisational memory and ownership. The new strategy would identify high level priorities which would be allocated to partnership / governance groups for oversight of the delivery plans, with reporting to the Health and Wellbeing Board; the intention was to co-produce the delivery plans with the community.
3. The Director of Public Health said that it was recognised that many determinants of health lay outside the National Health Service and there was an opportunity to utilise system leadership through the Health and Wellbeing Board to influence the wider socioeconomic, cultural and environmental conditions; this may involve focus on a smaller number of priorities over a certain period.
4. The Director of Public Health considered that the Health and Wellbeing Board was fulfilling its functions in accordance with the provisions of the Health and Social Care Act 2012 but the development of the strategy provided an opportunity to consider how the board could be more effective in addressing existing and emerging challenges and inequalities.
5. In response to a comment from a member in attendance about the dissemination of information in relation to the 'Roll out of the Solihull Parenting Programme', as referred to in Table 1- 'Summary of achievement against priorities' (agenda page 45), the Chairperson suggested that the matter be raised through the Children and Young People Scrutiny Committee.
6. The Vice-Chairperson commented on the need for measurable and meaningful Key Performance Indicators (KPIs), with appropriate monitoring and reporting, to ensure that outcomes were being achieved.

The Executive Director of Strategy and Integration concurred and said that the Joint Forward Plan would set out specific, measurable indicators with clear trajectories and actions to address the identified priorities.

For purposes of clarity, the Director of Public Health advised that the KPIs referenced in Table 1 related to the Fingertips Public Health Outcomes Framework ([link to the website](#)) which involved longer term and national issues.

The Director of Public Health emphasised that there were many positive achievements during the past five years, including the introduction of Talk Community and enhanced partnership working.

The Chairperson commented on the need for an outcomes framework that worked alongside the timescale of the strategy.

7. The Chairperson said that it would be helpful to map the relationships between the different strategies and plans maintained by the system partners, strategies should avoid objectives for which the owner did not have any levers, and there was a need to enable people to ensure that there was ongoing resilience.

The Director of Public Health confirmed that strategies were being mapped, the current focus was on overarching outcomes, and the next phase would consider evidence and examine good practice.

8. A committee member suggested that a further report on progress be provided in three months.
9. The Vice-Chairperson noted that Appendix 2 - 'A summary of areas of concern informed by Public Health Outcomes Framework' (agenda page 52) provided the 'Herefordshire picture' for problem areas but suggested that an additional column was needed to identify relevant targets.

The Executive Director of Strategy and Integration commented on the opportunity to reduce smoking prevalence.

The Director of Public Health advised that the problem areas were being considered and commented on the difficulty to quantify some targets / ambitions.

With attention drawn to the problem area heading 'climate change', the Chairperson noted that the potential public health impact was specifically in relation to air quality.

10. A committee member said that it would be useful to reference relevant national averages, strategies and data needed to be rigorous and clear to ensure appropriate measurement in future years, and the online survey was welcomed but questions needed to be probing and detailed to make it worthwhile.

The Director of Public Health advised that, in addition to the online survey, there had been engagement with the Community Partnership and workshops were being conducted to obtain qualitative feedback. Supported by epidemiology, the consultation data would be used to inform prioritisation by the Health and Wellbeing Board.

It was noted that it was often difficult to obtain responses from people disproportionately affected by health inequalities.

The Executive Director of Strategy and Integration advised that more outreach work was being undertaken in communities and intelligence was also being provided by the voluntary and community sector, GP practices, Healthwatch, social care providers, schools, and others.

11. In response to questions from a member in attendance, the Director of Public Health advised that a simplified version of the survey was available, a county-wide approach was being taken to the workshops, and engagement through food banks could be considered.
12. The Managing Director of Wye Valley NHS Trust made a number of points, including: it would be helpful to include regional and national benchmarks in Appendix 2; a preference was expressed for focus a smaller number of priorities; in view of the limited resources available, existing structures would need to be used for the oversight of the delivery plans; and a healthy population should be one of the priorities of the emerging Big Economic Plan.
13. The Vice-Chairperson commented on the number of leading experts that had retired to Herefordshire and the potential to harness knowledge and abilities.

The Executive Director of Strategy and Integration made reference to the NHS reservists programme ([link to the website](#)) which provided opportunities for people to support the health service.

The Director of Public Health commented on the work being undertaken through Talk Community to develop social capital in the county.

14. The Cabinet Member - Health and Adult Wellbeing made a number of points, including: the Integrated Care System and the Health and Wellbeing Board were working well together; promotion of the online survey was encouraged; the need for appropriate KPIs was recognised, with assessment, planning, implementation and evaluation; the membership of the Health and Wellbeing had been increased in recent years, resulting in improved partnership engagement and constructive challenge; the Community Partnership meeting held on 23 November 2022 had been well attended; a further report on progress with the development of the strategy could be provided to the committee in due course; the prevalence of smoking during pregnancy had been at a low rate when there had been a dedicated smoking cessation midwife, highlighting the need to reflect on previous results; and further ideas to improve the strategy were welcomed.
15. The Director of Public Health confirmed that the Understanding Herefordshire website ([link to the website](#)) formed the live evidence based for the Joint Strategic Needs Assessment (JSNA) and a Summary Report was produced every three years, supplemented by 'deep dive' papers as and when necessary. It was suggested that, for the purposes of transparency, a summary of the development stages for the strategy could be published in due course.

The Cabinet member – Health and Adult Wellbeing commented on the valuable work of the Public Health team.

16. The Executive Director of Strategy and Integration noted the additional pressures resulting from the Covid-19 pandemic, particularly in terms of mental health and impact on waiting lists, and emphasised the need to work individually and collectively on prevention.

A committee member considered that more public information was needed on managing stress. The Executive Director of Strategy and Integration commented on the establishment of a mental health collaborative to look at needs and how the system could work with others, including employers and schools, on upstream determinants.

With input from the Interim Statutory Scrutiny Officer, the committee discussed and agreed the resolution below.

RESOLVED:

The committee made the following conclusions to inform the development of the new Health and Wellbeing Strategy:

- 1. That the governance arrangements for the adoption and the delivery of the joint strategy be clearly defined;**
- 2. That a delivery plan for the strategy be produced which identifies the responsibility for the objectives, with clear targets and timelines;**
- 3. That the delivery plan be co-produced with key stakeholders and the community;**

4. That the strategy and delivery plan include meaningful and measurable key performance indicators, ensuring that these are framed around the availability of measurable data and outcomes;
5. That the draft strategy be presented to the scrutiny committee once available for review, before it is considered by the Health and Wellbeing Board;
6. That the committee commends the emphasis on prevention and supports the intention to work with businesses, schools and other partners as key community stakeholders in the production and delivery of the strategy.

29. THE IMPACT OF THE INTENSIVE POULTRY INDUSTRY ON HUMAN HEALTH AND WELLBEING SCRUTINY REPORT

Further to the draft report debated in detail by the committee at its meeting on 22 July 2022 ([minute 8 of 2022/23 refers](#)), the committee considered a further iteration of the task and finish group report.

Councillor Felicity Norman, chairperson of the task and finish group, advised that the report had been updated to reflect comments made during the previous discussion and to tighten some of the wording used in the document. Members, officers and stakeholders involved in the preparation of the report were thanked for their input. Councillor Norman reported that the task and finish group had not found evidence of harmful impact from the intensive poultry industry on human health, commented on the importance of 'One Health' (i.e. the interlinking of the health of people, animals and the environment), noted that anecdotal evidence indicated that some people had anxieties and concerns, and emphasised the need for more research and evidence.

The committee discussed the document, the principal points included:

- i. With reference made to a recent report by the Alliance to Save Our Antibiotics and World Animal Protection ([link to the report](#)) and a related response by the Responsible Use of Medicines in Agriculture (RUMA) Alliance ([link to the response](#)), the Chairperson noted that this was a live topic and there was a need for more data and better understanding.
- ii. Attention was drawn to Recommendation 5 (Pollution Monitoring and Abatement Equipment and Techniques) and the Chairperson commented that local testing in terms of modelling would be beneficial to the planning application process.

The Head of Public Protection advised that no monitoring of dust levels was required by the Environment Agency currently and it was understood that the purpose of the recommendation was to invite government to consider best available techniques now available.

The Chairperson suggested that the council should work with the industry on a voluntary basis on the use of monitoring equipment to sense-check modelling reports.

- iii. With reference made to paragraphs 30-32, a committee member welcomed the suggestions about the involvement of local public health bodies in the development of a 'Health Impact in Planning' Supplementary Planning Document and for all planning applications to be screened for suitability for health impact assessments.

The Public Health Consultant welcomed the report and advised that preliminary work was being undertaken on a toolkit for conducting a health impact assessment.

- iv. A committee member commented on the need to encourage the upgrading / retrofitting of existing intensive poultry units to the best available techniques. The Chairperson suggested that an adjustment to Recommendation 5 to reference both existing and new intensive poultry units explicitly.
- v. In response to a query from the Head of Public Protection about Recommendation 8 (Intensive Poultry Farming Myth Busting), the Chairperson considered that the recommendation anticipated the preparation of a brief summary of current knowledge, with links to further resources, and suggested adjustments to the recommendation.

The Vice-Chairperson acknowledged the importance of addressing common misconceptions and offered to assist in this regard.

With input from the Interim Statutory Scrutiny Officer, the resolution below was agreed by the committee. The Chairperson thanked all those involved in the preparation of the report, including the members of the public who had come forward to share their experiences.

RESOLVED:

- a) **The report and recommendations on ‘The Impact of the Intensive Poultry Industry on Human Health and Wellbeing’ be adopted, subject to:**
 - i. **the amendment of Recommendation 5 to read ‘That Herefordshire Council lobby Defra about the need for the Environment Agency to review *and implement* the advice and guidance on the best available techniques now available for *existing and new* Intensive Poultry Units pollution monitoring and abatement and equipment for both ammonia and particulates both within the county and nationally.’**
 - ii. **the amendment of Recommendation 8 to read ‘That a fact checking, myth-busting *summary* document tackling common misconceptions about common public health concerns, ~~such as anti-microbial resistance and the use of antibiotics in intensive poultry farming~~ be prepared.’**
 - iii. **the inclusion of an additional recommendation ‘That the council work with the industry on the assessment of dust and odour emitted near intensive poultry units to assess and verify the modelling of emissions is confirmed from experience’; and**
- b) **The report be referred to Cabinet for consideration and Executive Response.**

The meeting ended at 11.16 am

Chairperson