

## Minutes of the meeting of Health and wellbeing board held in Plough Lane on Monday 26 September 2022 at 3.30 pm

### Board members present in person, voting:

### Board members in attendance remotely, non-voting:

Councillor Pauline Crockett	Cabinet Member - Health and Adult Wellbeing
Hilary Hall	Corporate Director Community Wellbeing
Jane Ives	Managing Director, Wye Valley NHS Trust
Matt Pearce	Director of Public Health
Christine Price	Chief Officer, Healthwatch Herefordshire
Councillor Diana Toynbee	Cabinet Member - Children and Families, Herefordshire Council
Superintendent Edd Williams	Superintendent for Herefordshire, West Mercia Police

*Note: Board members in attendance remotely, e.g. through video conference facilities, may not vote on any decisions taken.*

### Others present in person:

Luke Bennett	Public Health	Herefordshire Council
Stephen Brewster		VCS
Simon Cann	Democratic Services	Herefordshire Council
Miriam Gardner	Project Manager All-Ages	
Cllr Elissa Swinglehurst	Scrutiny	

### Others in attendance remotely:

Ewen Archibald	Assistant Director, All Ages Commissioning	Herefordshire Council
Samantha Evans	Acting Head of Law and Business Partner – Community Wellbeing	
Marie Gallagher	Project Manager – All Age Commissioning	
Adrian Griffith	Head of Commercial Development	Herefordshire Council
Emma Lydall	Registrar	
David Mehaffey	Director for ICS Development	
Pete Norton		Herefordshire Food Alliance
Kristan Pritchard	Health Improvement Practitioner	Herefordshire Council

## 50. INTRODUCTION

The chair welcomed board members and attendees to the meeting.

## 51. APOLOGIES FOR ABSENCE

Apologies were received from: Susan Harris, Anna Davidson, Cllr Ange Tyler and Simon Trickett.

**52. NAMED SUBSTITUTES (IF ANY)**

There were no named substitutes.

**53. DECLARATIONS OF INTEREST**

There were no declarations.

**54. MINUTES**

The board approved the minutes of the meeting of the 21<sup>st</sup> July 2022.

**55. QUESTIONS FROM MEMBERS OF THE PUBLIC**

No questions received.

**56. QUESTIONS FROM COUNCILLORS**

No questions received.

Councillor Pauline Crockett (the chair of the board) introduced and welcomed Mr Stephen Brewster as a representative for the Voluntary Community Sector (VCS) and explained he would be participating as a contributor until the VCS role had been discussed and ratified by the board in a future meeting.

The chair also noted the inclusion of several slide decks that had been added to the agenda, but stressed they did not interfere or disrupt reports already on the main agenda.

**57. REPORT ON HEREFORDSHIRE PHARMACEUTICAL NEEDS ASSESSMENT 2022**

The chair introduced the final draft version of the Pharmaceutical Needs Assessment (PNA) for approval by the board, it was explained that a 60-day consultation period was still in effect and that the report would be subject to any amendments in relation to responses that may be received in the final days of the consultation.

Emma Lydall (Public Health Training Specialist Registrar), provided a detailed verbal presentation on the report based on the slides included in the agenda [Herefordshire 2022 PNA HWB Presentation](#).

The board asked questions about:

- The possibility of returning to the report in 18 rather than 12 months, to allow adequate time to monitor the impact of the changing role of the pharmacist?
- Whether the review covered off anything about the value for money of the services that were already commissioned?
- Who was responsible for ensuring the recommendations within the report were actioned and who was responsible for feeding back?

The registrar explained that a PNA working group was going to be established in Herefordshire and Worcestershire and that public health would work closely with this group and feedback to the Health and wellbeing board (HWB).

Matt Pearce (Director of Public Health, Herefordshire) explained that it fell to the HWB to provide a level of assurance. The actual delivery of the recommendations would be overseen by the public health team and partners and then approval would be sought from the HWB.

Jane Ives (Managing Director Wye Valley NHS Trust) felt that the relative urgency of the recommendations meant that it would be prudent to come back to them in 12 months rather than 18.

The director of public health noted that many papers were recommending the formation of task and finish groups and that in these instances a joined up approach with Worcestershire would be advisable as there would be potential shared ambitions. The director of public health emphasised the importance of maximising the use of pharmacies, and noted that they have a great reach especially in deprived communities.

The chair suggested that it was important that new GP surgeries should, whenever possible, have a pharmacy in them.

David Mehaffey (Director for Integrated Care System Development) noted the slide in the presentation pack with the map detailing 10 minute travel times. This showed the reach of Herefordshire facilities across the border of other counties, but did not show their reach into Herefordshire. It was possible that this gave a distorted view of the health inequality gap.

The registrar acknowledged that the report did only look at Herefordshire pharmacies, but that it might be possible to look at the cross-border picture. However, the population of Herefordshire was adequately serviced by pharmacies and dispensing practices. The registrar and director for ICS agreed that more work on cross-county reach would be a valuable addition to the mapping of future assessments.

Councillor Diana Toynbee noted that pharmacies are businesses and enquired as to whether if a pharmacy decides to close there is any leverage to stop this happening. The registrar deferred to the director of public health for an answer. The director said he understood that the pharmacies had to get permission to close from NHS England, but if they're not financially viable there might not be a choice. The director said he would take the question away and seek a definitive answer.

The managing director Wye Valley NHS Trust emphasised the importance of working jointly with Worcestershire when it was appropriate and cost-effective to do so. The board agreed to keep the annual review timeline in place.

The report recommendations were proposed and seconded and approved unanimously:

**RESOLVED:**

**That:**

- a) Members note the PNA consultation responses received to date.**
- b) Members are asked to note the consultation responses received to date (Appendix 1) and to delegate final approval for publication to the PNA working group, subject to any minor or technical amendments recommended by the working group.**

**58. TOBACCO CONTROL 2022**

The chair introduced the report and Luke Bennett (Senior Commissioning Officer) presented, providing a summary of the Khan review: [Appendix 1 The Khan Review Summary](#) , which broadly recommended:

- Increased investment for interventions
- Increasing the age of sale
- Offering vaping as a substitute for smoking
- Improving prevention in the NHS

A local context was then provided, including a brief overview of work being undertaken in the area.

The senior officer went through recommendations for the board, which included:

1. That the Health and wellbeing Board welcomes the publication of Javed Khan's Independent Review into smoking
2. Health and wellbeing board supports the recommendations from the Khan review and the resulting actions to help make smoking obsolete in England and Herefordshire.
3. Health and wellbeing board member organisations are asked to actively promote and engage in activity to work towards making smoking obsolete in Herefordshire.

The chair thanked the senior officer for his presentation. Concerns were raised about the available manpower to implement some of the recommendations in the Khan review.

The chair asked the managing director of Wye Valley NHS Trust about the Wye Valley Trust's response to smoking in pregnancy figures in Herefordshire, which were above the national average.

The managing director of Wye Valley NHS Trust explained that recent data showed the number of pregnant smokers was going in the right direction and that hopefully this would be a trend. Carbon monoxide monitoring of pregnant women was also helping the situation.

The managing director of Wye Valley NHS Trust said that this was a broad area and that what they were already doing was working, but there was a need to prioritize and focus on areas of concern.

Hilary Hall (Corporate Director Community Wellbeing) endorsed what the managing director of Wye Valley NHS Trust had said and suggested that trying to do everything could result in things generally being done less well. By focusing on one or two priorities, such as smoking in pregnancy it would be possible to achieve something significant and make a demonstrable gain.

Cllr Toynbee also agreed with the need for focus on key areas of concern. Additionally, Cllr Toynbee raised concerns about the promotion of vaping contained with the Khan review. She acknowledged the argument that vaping was an alternative to smoking or an aid to giving up, but she had serious concerns about the explosion in popularity of vaping in school children and the damaging chemicals they were being exposed to as a result.

The director of public health agreed with the need for focus on areas of concerns, but also urged mindfulness in relation to areas where Herefordshire was faring well on a national basis, as this could potentially mask important inequalities in the population and that a business as usual approach was also needed to ensure those areas where Herefordshire was in the average range were still monitored closely, as they could often have significant impact on death rates and illness.

The director of public health noted Cllr Toynbee's comments about vaping and pointed out that in public health vaping is often seen from a harm reduction perspective rather than as being a gateway into smoking and it was important that messages about vaping were framed properly.

The senior officer also emphasised the importance of not neglecting fundamental issues relating to smoking such as the fact that 66% of smokers start before the age of 18.

Getting to the root and stopping people before they start would have broad and wide benefits.

The director for ICS development noted that the local maternity and neonatal system (LMNS) would have stopping smoking during pregnancy as one of their priority work areas, so it was already a business as usual priority that was operating within the system.

A discussion took place about recommendation 'd' it was felt that there were existing mechanisms in place including; ongoing NHS tobacco dependency work, steering groups and the forthcoming Integrated Care Strategy that would help in promoting and engaging in activity to work towards making smoking obsolete in Herefordshire, but it was not felt necessary to amend the recommendation.

The report recommendations were proposed, seconded and approved unanimously.

#### **APPROVED**

**That:**

- a) Health and Wellbeing Board welcomes the publication of Javed Khan's Independent Review into smoking and supports the development of an action plan to help make smoking obsolete in Herefordshire;**
- b) Health and Wellbeing Board acknowledge the findings from the recent smoking needs assessment and commit to supporting Herefordshire to become Smoke Free;**
- c) Health and Wellbeing Board actively support the need for a whole system approach to smoking at primary, secondary and tertiary prevention levels, and**
- d) Health and Wellbeing Board member organisations are asked to actively promote and engage in activity to work towards making smoking obsolete in Herefordshire, including supporting the establishment of a working group to produce an action plan reporting into the board annually.**

#### **59. UPDATE ON THE WORK OF THE ORAL HEALTH IMPROVEMENT PARTNERSHIP BOARD**

The chair introduced the item and passed over to the director of public health to present the update. The director provided a verbal update referencing the [Herefordshire Oral Health Improvement Action Plan \(2020-2023\)](#) and the [Herefordshire Oral health Needs Assessment](#)

The director highlighted a wealth of positive activity relating to children, adults in care homes and early years staff giving out brushing packs to children.

The director cited one omission from the report as being the change in legislation contained in the Health and Care Act 2022 relating to water fluoridation arrangements being moved away from local authorities to the secretary of state and central government. The director considered water fluoridation to be one of the strongest evidence-based measures for improving oral health in Herefordshire and wanted to establish the most effective way of lobbying the government on this issue.

Christine Price (Healthwatch) enquired about commissioning being delegated down to the ICS for dental services, as to date there hadn't been much traction at the oral health improvement board around commissioning.

The director for ICS development said the responsibility of commissioning services would become the responsibility of the ICB, but this wouldn't happen until at least April 2023. At the moment work was underway to establish what will be inherited from the current commissioners at NHS England in the region. The integrated Care Board was

currently carrying out proper due diligence to make sure it struck the right funding allocation, as well as understanding the baselines, key risks and challenges. The intention of making commissioning services more local was to ensure that they could be integrated with the wider work around improving population health and wellbeing. This would necessitate greater integration input with local partners.

The chair emphasised the importance of prevention and praised public health incentives being taking into schools such as 'Brush, book and bed'.

The managing director of the Wye Valley NHS Trust enquired about what form the lobbying of government would take. The director of public health explained that this was something that would need to be looked into, but an understanding of the process was needed to get Herefordshire at or near the top of the list for fluoridation.

Stephen Brewster asked whether the voluntary sector was being used to enable cross-pollination and amplification of messaging in relation to delivering aspiration within reports - such as bringing the oral health advice and incentives to schools visited by the voluntary sector.

Christine Price (Chief Officer, Healthwatch Herefordshire) echoed the need to make greater use of the voluntary sector, in addition to statutory bodies, schools and health visitors in delivering health and wellbeing related messages to the community. There was a need to make all the messages count.

The director for ICS development explained that the Integrated Care Partnership was focused on working more closely and effectively with the partners in the voluntary sector.

The report recommendations were proposed, seconded and approved unanimously.

## **APPROVED**

### **That:**

- a) **The committee note the progress of the Oral Health Improvement Partnership Board; and**
- b) Adopt the recommendations set out the Oral Health Improvement Plan by their own organisations, and support the delivery of the plan at system level, wherever possible; and**
- c) Make a recommendation to the Oral Health Improvement Board to investigate the best way of lobbying the government on the issue of water fluoridation, with a view to encouraging positive interaction between the water firms and the government, which would lead to a positive adoption of best practice in relation to fluoridation of water in Herefordshire.**

## **60. HEREFORDSHIRE'S BETTER CARE FUND (BCF) INTEGRATION PLAN 2022-23**

The chair introduced the item and Ewen Archibald (Service Director All Age Commissioning) and Adrian Griffith (Head of Commercial Development) led the presentation.

The service director explained that frustratingly the deadlines meant the plan was due to be submitted to the Department of Health this same day and that the board would therefore only be able to suggest minor amendments (if it wanted to make changes). It was noted that there was not a significant change in the: documentation, the overall profile of the proposed spending and the metrics from last year. Some minor changes to the metrics were in evidence and the narrative report contained slightly more detail on the disabled facilities grant, regarding how that was spent.

The service director also discussed an announcement from the Department of Health to say that it was introducing a new funding stream, which appeared to have similarities to the previous hospital discharge fund, but the details had not been published.

The head of commercial development provided a brief overview to the change of the metrics and explained that the timeframes involved meant the planning guidance came out halfway through the year to which the plan refers, which meant there was very little time to put together a plan and consult with everybody who might have sensible and relevant input. It was also stated that as soon as this plan was submitted, planning would commence on the next plan in a bid to avoid a reoccurrence of the situation.

The head of commercial development set out the report recommendations and opened discussion up to the board:

The managing director of Wye Valley NHS Trust noted that next year reviewing discharge to assess pathways and funding and reshaping that would be very important and would provide better value and outcomes from what had been put in place during Covid.

The managing director of Wye Valley NHS Trust highlighted the need to make the role of the One Herefordshire Partnership clearer in terms of its relationship with the BCF. The Integrated Care Executive (ICE) and its performance management/scrutiny function was also brought to the attention of the board.

The service director asked the board to note the work done by Adrian Griffith and Marie Gallagher in putting the plan together.

The report recommendations were proposed, seconded and approved unanimously.

## **APPROVED**

**That:**

- a) the Herefordshire Better Care Fund narrative plan, planning template and capacity and demand template be approved; and**
- b) note work ongoing to support integrated health and care provision that is funded via the BCF.**

## **61. HEREFORDSHIRE FOOD CHARTER**

Pete Norton (Herefordshire Food Alliance Coordinator) provided the board with an update on briefing of the [Herefordshire Food Charter](#) It was explained that there were over 40 signees and that the alliance was hoping to create an 'umbrella for food activity' in the county with a focus on health, local economy, community and environment. The coordinator then urged board members to sign up to the charter and to circulate it with their partner organisations.

The development of a Marches Regional Food Procurement Hub with Monmouthshire, Shropshire, Powys, Telford & Wrekin councils was also reported. This was being led by Monmouthshire council and it had received an initial £10,000 grant from the Dixon Foundation to carry out a feasibility study, which if successful could in principle lead to up to a £100,000 further investment.

The alliance would also be applying for a sustainable food places bronze award in the next available round in Spring 2023.

The coordinator also informed the board that his colleague Rebecca Tully would be taking over the role of coordinator from November 2022.

The board applauded the work that had been done on the charter and the procurement hub and noted that good food was often neglected as being a key driver for health and sustainability.

Kristan Pritchard (Health Improvement Practitioner) highlighted the importance of this work particularly in relation to the healthy weight agenda. It was also a good example of how a whole systems approach to food could be used across the county.

The chair concluded the item and thanked the team for its excellent work.

## **62. COST OF LIVING REPORT SEPTEMBER 2022**

Hilary Hall (Corporate Director Community Wellbeing) presented slides on the [Cost of Living - Herefordshire Response](#) . The director explained that she felt a cost of living commission, pulled together under the auspices of the Health and wellbeing board, would allow all the partners of the board to come together and say what could be done together and as individuals. A commission would also allow the voice of residents to be heard directly, which would avoid second guessing how the cost of living crisis impacts individuals, families and communities. By coming together as a set of partners including housing associations and the volunteering community sector, it might be possible to get an accurate sense of what's going on and then to engage with residents via talk community hubs. The slides contained four recommendations and the Director invited discussion on these from the board.

The board welcomed the recommendations and felt that a commission that could assist in creating a place where all available advice and support was in one place would be of enormous value. It was also stated that the ICB was very keen to work with the board and the council in this area. The voluntary community sector attendee highlighted the pressure the sector was under as people tightened their belts and said the VCS would welcome the opportunity to be involved in a broader discussion about the cost of living.

The recommendations were proposed, seconded and approved unanimously.

### **APPROVED**

#### **That:**

- a) **Continue to promote the range of ways in which the council and its partners supports residents in need, particularly through Talk Community and Money on your Mind.**
- b) **Ensure that specific support is in place for those for whom Herefordshire Council is a corporate parent.**
- c) **Establish a Cost of Living Commission to gather information and identify other actions that the council and its partners can take to support residents. D)**
- d) **Develop a longer term strategy for working with the voluntary and community sector, building on the foundations established over the last two years.**

## **63. JOINT HEALTH AND WELLBEING BOARD STRATEGY UPDATE**

The director of public health introduced the item and explained that the presentation was to update the board in terms of progress to date and that there was still plenty of time for the board to contribute to and shape the priorities of the strategy.

Miriam Gardner talked the board through the [Joint Health and Wellbeing Strategy Progress Update](#)



The board noted the update and highlighted the need to get the strategy priorities right. Limited financial resources would likely necessitate a review of what kind of strategy would offer best value and the board felt that a future workshop on the strategy would allow for interesting discussion especially with regards to areas such as resilience, vulnerability and prevention.

**64. HEALTH AND WELLBEING BOARD WORK PROGRAMME**

The board noted the Work Programme and the chair asked for meeting dates to be set for the next 6 months.

**65. DATE OF NEXT MEETING**

Date of next meeting: 12<sup>th</sup> December 2022

The meeting ended at Time Not Specified

**Chairperson**