

PUBLIC Minutes of the meeting of the Health and Wellbeing Board held on 23 June 2023 10.30am-12.30pm

Present: Councillor G Coxshall (Chair)
Councillor Johnson
Councillor Rigby
Councillor Shinnick
Ian Wake, Corporate Director for Adults, Housing and Health
Jo Broadbent, Director of Public Health
Margaret Allen, Deputy Thurrock Alliance Director
Gill Burns, Director of Children's Services, Northeast London Foundation Trust (NELFT)
Fiona Ryan, Managing Director, Mid and South Essex NHS Foundation Trust
Rita Thakaria, Partnership Director, Thurrock Council, EPUT and NELFT
Michele Lucas, Assistant Director for Education and Learning
Kim James, Chief Operating Officer, Healthwatch Thurrock
Jenny Barnett, Chief Superintendent, Essex Police

Apologies: Sheila Murphy, Corporate Director for Children's Services
Michael Dineen, Assistant Director for Counter Fraud and Community Safety
Aleksandra Mekan, Thurrock Alliance Director
Alex Green, Executive Director of Community Services and Partnerships, Essex Partnership University Trust (EPUT)
Hannah Coffey, Acting Chief Executive, Mid and South Essex NHS Foundation Trust
Michelle Stapleton, Integrated Care Pathway Director, Mid and South Essex NHS Foundation Trust
BJ Harrington, Chief Constable, Essex Police
Mark Tebbs, Chief Executive, CVS
Jim Nicolson, Adult Safeguarding Board

Guests: Jeff Banks, Mid and South Essex Integrated Care System
Ewelina Sorbjan, Thurrock Council

1. **Welcome, Introduction and Apologies**

Colleagues were welcomed and apologies were noted. Michele Lucas confirmed attendance on behalf of Sheila Murphy.

The previous Chair, Cllr Deborah Arnold was thanked for her commitment to driving forward the Board's priorities and reflecting the recommendations of the independent review of the Board in its operation.

Cllrs Ralph, Liddiard and Muldowney were thanked, as well as previous members representing partners, for their commitment to supporting improved health and wellbeing outcomes for Thurrock residents as Board members.

2. **Minutes / Action Log**

The minutes of the Health and Wellbeing Board meeting held on 10 February 2023 were approved as a correct record.

There were no actions or decisions on the action and decision log for consideration as this meeting was held at the beginning of the new municipal year.

3. **Urgent Items**

There were no urgent items received in advance of the meeting.

4. **Declaration of Interests**

There were no declarations of interest.

5. **Terms of Reference Annual Review**

This item was introduced by Darren Kristiansen, Thurrock Council. Key points included:

- The Health and Wellbeing Board is a statutory partnership board governed by s194 of the Health and Social Care Act 2012 (the Act). The Act specifies who must be a member of the Board and specifies how additional Board members are to be appointed. The Act states that at any time after a Health and Wellbeing Board is established, the Local Authority must, before appointing another member of the Board or amending the Terms of Reference, consult the Health and Wellbeing Board.
- A commitment provided in the Board's Terms of Reference is that it will be reviewed and refreshed on an annual basis. This includes reviewing and amending functions and job titles of Board members, ensuring appropriate representation across partners, and reviewing the operation of the Board such as frequency.
- As part of ensuring that the Board drives forward the refreshed Health and Wellbeing Strategy and effectively monitors progress, each of the six themes (Domains) are considered each municipal year.

Action: The meeting frequency will be updated, as going forward, meetings will now be held on a Thursday.

Decision: Members agreed the changes to the Terms of Reference as outlined within the report.

6. Joint Forward Plan Mid and South Essex (MSE)

This item was presented by Jeff Banks, Mid and South Essex Integrated Care System. Key points included:

- Each Integrated Care Board (ICB) along with its partner NHS Trusts/ Foundation Trusts are required to prepare a five-year Joint Forward Plan (JFP), working with local Health and Wellbeing Boards to ensure that the joint local Health and Wellbeing Strategy and relevant joint strategic needs assessments are reflected in the JFP.
- The JFP has been developed with the Integrated Care Strategy for Mid and South Essex ICS, which was also approved by Thurrock's Health and Wellbeing Board as its starting point.
- There has been a shared desire to ensure that, alongside the varied NHS commitments, the JFP is able to pinpoint the most impactful issues that NHS partners should work together on. The draft JFP is therefore presented as a three-part document:
 - Part One – provides background to the current challenges the NHS is facing in Mid and South Essex, and identifies shared ambitions with partners;
 - Part Two – provides the underpinning aspects of the ICB's approach, outlining work on population health improvement, health inequalities and prevention, and the approach to local delivery via Alliances;
 - Part Three – contains a delivery plan for the NHS Long Term Plan commitments and other statutory duties placed upon the NHS. Each appendix describes the governance arrangements for ensuring delivery, including oversight and assurance arrangements through the relevant system governance mechanisms.
- The JFP provides a continued commitment to engagement with residents and partners.
- The JFP is due to be published by the end of June 2023, following presentation and comment by each of the necessary Health and Wellbeing Boards. A formal letter of support is required following this. The JFP will then be updated on an annual basis.

During discussions, the following points were made:

- Members thanked Jeff Banks for his commitment and efforts to strong partnership working as the comprehensive plan aligns with Thurrock's Health and Wellbeing Strategy which was welcomed.
- The clear commitment to subsidiarity, Alliances and devolving power downwards was noted and reflects Thurrock's ambitions. The Better Care Fund was recognised as the delivery mechanism therefore highlighting the need to ensure collective ambitions are captured via this fund.
- The JFP has a strong focus on prevention and health inequalities by undertaking a population health management approach. For Thurrock, this approach is particularly important for reducing obesity and smoking rates as the main causes of death in the borough are related to cardiovascular disease and diabetes.

- Colleagues noted smoking rates for Thurrock are falling and are now slightly below the national average for England. The national ambition is to reduce smoking prevalence to 5% by 2030.
- It was recognised obesity is a difficult, complex, and multifactorial condition therefore it is particularly challenging to have a local impact as often the drivers relate to national policies.
- However, there are various initiatives in Thurrock to help reduce obesity prevalence, such as ongoing work within the Stanford-Le-Hope Primary Care Network (PCN). The PCN identifies those who are overweight or obese and works with them as part of tier two and tier three weight management services. Furthermore, severe binge eating behaviour services have been established as these behaviours previously resulted in a 30% drop out rate for traditional weight management services.

Action: Margaret Allen to provide the weight loss and maintenance figures associated with the Stanford-Le-Hope PCN obesity initiative.

- It was noted that historically for tier three weight management services, 100 people were funded each year and over the last two years, NHS England have incentivised GPs to make referrals for tier two services. Thurrock has gone from 100 people per year completing the course to now nearly 500 per year. Furthermore, an alternative offer for weight management is being considered and work is ongoing, with a contract due to be awarded by April 2024.

Action: Margaret Allen to provide further detail for the alternative weight management offer.

- Members also noted the Thurrock Healthier Futures clinic operating from the Corringham Integrated Medical and Wellbeing Centre. This adult only clinic includes clinicians, dietitians and health coaches working with individuals to ascertain the causes of their weight issues, such as relationships, debt or housing concerns and personal wealth. Colleagues from Thurrock's Housing and Community Led Supports Teams are evaluating the impact of these conversations as part of a human learning systems appreciative enquiry.
- Colleagues recognised that 40% of Year Six students are overweight, which is an increase since the pandemic therefore healthy eating habits need to be encouraged for children and young people. The Whole Systems Obesity Strategy was noted as a key mechanism as it provides an all age approach and will include a Child Weight Management Task Force. Furthermore, the long term plan is to embed weight management services within the 0-19 services offered, although it was noted this service is to be recommissioned by September 2024.
- Mid and South Essex partners will continue to reach out and engage with schools regarding key priorities for children and young people, for example, good connections are being made with the Healthy Schools Programmes. In addition, the cost of living crisis and access to food banks was discussed, as access to fruit and vegetables may be limited.

- Colleagues concluded there are specific actions in the JFP regarding smoking and obesity and that further collaborative work is required as the NHS system will not make progress alone as wider determinants of health considerations are vital for this work.

Action: A letter supporting the JFP is to be drafted and sent on behalf of the Health and Wellbeing Board chair to Jeff Banks at the earliest opportunity.

Decision: Members acknowledged receipt of the draft Joint Forward Plan produced by Mid and South Essex ICB and confirms this appropriately takes into account and aligns with the strategies and priorities of the Thurrock Health and Wellbeing Board.

7. Joint Domestic Violence and Abuse (DVA) in the context of sex/gender briefing note

This item was introduced by Ewelina Sorbjan, Thurrock Council. Key points included:

- Following discussions at the Health and Wellbeing Board meeting on 9 December 2022 in relation to Goal 5C, partners have provided a more detailed written report in relation to support provision for male survivors of domestic abuse. Goal 5C aims to provide safe, suitable, and stable housing solutions for people who have or who are experiencing domestic abuse and/or sexual violence or abuse.
- For the year ending March 2022, the Crime Survey for England and Wales (CSEW) estimated that 1.7 million women and 699,000 men aged 16 years and over experienced domestic abuse in the last year. This is a prevalence rate of approximately 7 in 100 women and 3 in 100 men.
- Across Essex, Essex Police recorded domestic abuse by gender in 2022 which depicted the disproportionality of women experiencing a form of domestic abuse but that men are also victims.
- The Housing Safeguarding Team (HST) is the borough's community response to domestic abuse and other crimes and behaviours that fall under a safeguarding remit. They have an important role to play in the wider safeguarding agenda concerning many different types of abuse, and work closely with services across the borough, Essex wide and nationally. The HST are uniquely positioned within the Housing Team at Thurrock Council and the Team includes a male staff member.
- The support offered by agencies across Thurrock are available to all residents, and often individuals are supported by more than one agency. The HST can offer advice and support in the first instance, however, they will also seek specialist support assistance if needed from another agency, for example, via Karma Nirvana or the Forced Marriage Unit.
- If someone has contacted an agency that is not best placed to support them, the individual will be helped to speak to the support service for their need. Supporting survivors of domestic abuse can be complicated, intersectionality plays a huge role and prioritising risk over need is a difficult balance.

During discussions the following points were made:

- Members noted safeguarding concerns are to be addressed to the Housing Safeguarding Team and reported to Essex Police. There are specific Domestic Abuse Problem Solving Teams within the Police who focus on getting the best outcome for the victim, regardless of gender.
- Colleagues acknowledged that males often do not follow the same reporting route as females as there is often a big gap in follow up support. However, support is led by the survivor therefore agencies cannot enforce support if this is refused and signposting to other services is often helpful. In addition, there is considerably more information available to female survivors such as support networks and community groups.
- Further work is required as a society to change the perceived stigma around male domestic violence victims.

Decision: Members noted and commented on the contents of the briefing note.

8. Health and Wellbeing Strategy in focus - overview of Thurrock Health and Wellbeing Strategy

This item was introduced by Jo Broadbent, Thurrock Council. Key points included:

- The Health and Wellbeing Strategy focuses on Levelling the Playing Field and aims to tackle the many causes of poor health that are not level across Thurrock. These include individuals' health risk behaviours such as smoking and the quality of clinical care that people receive, but the greatest influences on overall community health are wider determinants of health. These include high-quality education, access to employment and other opportunities, warm and safe homes, access to green spaces and leisure, strong and resilient communities, and effective public protection. Thurrock experiences an unlevel playing field in each of these areas and this Strategy aims to level up those inequities.
- The Strategy sets out goals and actions across six broad domains that influence the determinants of health, these are:
 - Domain 1: Staying Healthier for Longer;
 - Domain 2: Building Strong and Cohesive Communities;
 - Domain 3: Person-Led Health and Care;
 - Domain 4: Opportunity for All;
 - Domain 5: Housing and the Environment;
 - Domain 6: Community Safety.
- The domain areas and priority goals were developed through engagement with stakeholders and a public engagement process with residents (facilitated by Healthwatch).
- The delivery of the ambitions within these goals is underpinned by several key topic-specific strategies, including the Better Care Together Thurrock: The Case for Further Change, the Housing Strategy, Brighter Futures and the Local Plan. Progress measures have been identified to monitor impact on high level outcomes over the lifetime of the Health and Wellbeing Strategy, plus activity and process milestones detailing key actions to deliver on the ambitions.

- This Strategy aims to ensure that Levelling the Playing Field is a key consideration across all the Council's strategic agenda of People, Place and Prosperity.

During discussions the following points were made:

- Colleagues discussed the data sources used to inform the Strategy, which included national ONS datasets and data from local services through performance indicators. As part of the engagement process, Healthwatch facilitated qualitative data collection via workshops and questionnaires, as well as via Thurrock's consultation portal. The feedback received was collated and summarised into key themes.
- Concerns were raised regarding access to GP practices in Thurrock, however members were reassured there is significant work underway to address access to Primary Care. The 27 GP practices in Thurrock have been evaluated on their accessibility and a small number will receive intensive support to improve this. The remaining practices will either receive intermediate level support or light touch, depending on their evaluation requirements.
- Furthermore, Thurrock remains an under doctored area, however the GP fellowship scheme aims to increase the number of doctors within the area. The Mid and South Essex wide GP fellowship programme will work alongside the Thurrock programme. Members were reassured that by August 2023 there will be an additional five GPs, with the aim to have 12 posts in total.
- Colleagues recognised the challenges to delivering the aims of the Strategy, for example the cost of living crisis being felt by families. It was noted Thurrock is working with the nationally funded Family Hubs as part of a holistic approach to support families, particularly around the promotion of breastfeeding and Healthy Start vouchers.

Health and Wellbeing Strategy in focus - Domain 1 (Healthier for Longer) report against commitments for year one and new commitments for year two (23/24)

This item was introduced by Jo Broadbent, Thurrock Council. Key points included:

- The aims of Domain 1 (Healthier for Longer) are to improve the prevention, identification, and management of physical and mental health conditions and to ensure people live as long as possible in good health.
- Goal 1A focuses on reducing smoking and obesity in Thurrock. To support the reduction in smoking prevalence, a Whole System Tobacco Control plan will be developed, with prevention, treatment and enforcement identified as key elements. Furthermore, targeted smoking cessation activities are underway which focus on specific cohorts such as those with manual occupations, those with serious mental illness and maternity services.
- In relation to reducing obesity rates, the Whole System Obesity Strategy is due to be refreshed and implemented, with the focus of a life course approach to supporting healthy weight and reducing obesity.
- The commitments for Goal 1A for year one were reported against and included the following examples:

- A Health in All Policies Place Shaping report is currently under consultation;
 - The Tobacco Control Joint Strategic Needs Assessment (JSNA) was completed and the Strategy final draft under consultation;
 - Targeting of smoking cessation support in place in line with the JSNA;
 - A Weight Management for Children and Families Taskforce established and service to be included within the Healthy Families service re-procurement in 2023/24.
- The commitments and ambitions for year two (2023/24) were outlined as follows:
 - Implementation of the Thurrock Tobacco Control Strategy and amended action plan;
 - Revised weight management pathway in place across the Local Authority and NHS services;
 - Commission an enhanced children and families weight management service;
 - Health in All Policies Place Shaping report findings included in revised Thurrock Local Plan.
- Goal 1B relates to working together to promote good mental health and reduce mental ill health and substance misuse in all communities in Thurrock.
- The commitments for Goal 1B for year one were reported against and included the following:
 - The completion of the Health Needs Assessment for Substance Misuse;
 - A multi-disciplinary Complex Care team pilot is underway, with both specialist Mental Health and Substance Misuse outreach support;
 - Wellbeing calls pathway in place for individuals with a new depression diagnosis;
 - A service transition policy is now in place for young people transitioning to Adult Mental Health Services.
- The commitments and ambitions for year two (2023/24) were outlined as follows:
 - Substance Misuse Service recommissioning completed for new integrated all age service;
 - Complex Care Team Assertive Outreach for substance misuse function commissioned as part of core service;
 - Dual diagnosis pathway for substance misuse and mental health review under way as part of the Case Finding Strategy.
 - Mental health diagnoses in cardiovascular conditions reviewed as part of the Case Finding Strategy development;
 - Publication of Wellbeing Calls Evaluation Report for 2022/23.
- The focus for Goal 1C is to continue to enhance identification and management of Long Term Conditions (LTC). National data for 2022/23 shows that quality of Primary Care for cardiovascular disease (CVD) in Thurrock is among the best in England, although the borough is significantly under doctored.
- The commitments for Goal 1C for year one were reported against and included the following:
 - After a successful pilot, a programme of outreach sessions is in place across all Traveller and Showmen sites in Thurrock;

- The Integrated Medical and Wellbeing Centre in Corringham is operational and hosting a range of NHS and wider wellbeing services;
- Cardiovascular Disease Local Enhanced Service (CVD LES) is in place in Primary Care and is building on improvements in previous years;
- Hypertension detection programmes are underway within Primary Care and the LTC Case Finding Strategy is in development;
- There is ongoing development work with Primary Care Mental Health Practitioners to maximise the uptake of health checks amongst those with Severe Mental Illness (SMI).
- The commitments and ambitions for year two (2023/24) were outlined as follows:
 - Continuation of outreach programme for the Traveller, Showman and Homeless communities and an impact evaluation is to be completed;
 - LTC Case Finding Strategy co-produced between Thurrock Primary Care, Clinicians and Public Health;
 - CVD Primary Care quality improvement programme agreed with the Mid and South Essex Integrated Care System (MSE ICS), with an aim to roll out to other conditions in due course;
 - MSE ICS Population Health Improvement Board (PHIB) health inequalities initiatives implemented in Thurrock, including physical and mental health, and an all-age approach;
 - Delivery of MSE Action Plan for SMI Health Checks.
- As part of reporting against each of the commitments for each goal, a monitoring framework of key metrics has been developed.

During discussions the following points were made:

- Members welcomed the integrated working and commitment of partners to drive forward the Health and Wellbeing Strategy. The Strategy remains a live document which is constantly evolving.
- Colleagues noted Thurrock is the third best in the country in relation to diagnosis and treatment of high blood pressure to reduce cardiovascular disease. The programme is embedded within the Better Care Fund and has resulted in a reduction of hospital admissions and a considerable number of lives being saved.
- It was recognised that an all-age approach to commissioning of services to reduce health inequalities is important. For example, the substance misuse service is due to be recommissioned as an all-age service, whereby education and outreach will be available to schools.
- Members were advised that according to the World Health Organisation (WHO), children who are breastfed are up to 25% less likely to experience obesity therefore highlighting the need to support mothers with breastfeeding. Thurrock is working closely with the national Family Hubs programme and funding has been allocated to encourage breastfeeding peer support, along with closely working with CVS partners.
- It was noted that a wider range of long-term conditions will be reviewed alongside the prevalence of cardiovascular disease. For example, diabetes and those with mental health concerns will be reviewed holistically to further reduce health inequalities and improve life expectancy.

Decision: Members noted the overview provided on the Health and Wellbeing Strategy.

The Board reviewed, commented on and approved progress made against domain one commitments for year one, as previously approved by Board and commitments for year two.

The meeting finished at 12:22pm.

CHAIR.....

DATE.....