1. **Introductions and Apologies**

   Introductions were made around the table, and apologies received as listed above.

2. **Health and Wellbeing and Body Image**

   Liz Ritchie, Self Care Body Image Therapist at St Andrews, spoke to the group about her work, the main points were:
   - Liz explained that she had a background working with children and their mental health regarding self image, she was currently working with the Youth Select Committee to support developments in Parliament
   - It had been found that 1 in 6 children aged under 6 had experienced body image issues and had expressed a desire to diet. 89% of girls (aged 5-16) had tried dieting and 74% of boys (aged 5-16) had said they wanted to look like someone else
   - Social media presented the current main challenge as it exposed young people to idealised images and sent a message that this was how you should look. With peer pressure and the need for social inclusion, young people often lost sight of their own identity
   - It was felt that Body Image needed to be brought to the public forum for discussion, and to understand
how to integrate this into school curriculums. Whilst body image was already discussed as part of Personal Social and Health Education (PHSE) lessons it needed to be separated, and teachers felt they lacked the skills to communicate this effectively. It was considered positive that issues were being recognised and discussed, it now needed to be structured and developed in order to progress

- Body Image was a subjective view of oneself; connected with self-esteem, a sense of self-worth, and needing to change oneself
- The current culture was about perfection and younger children now had access to images shared by the media, these images did not represent reality. It was considered that the resilience of previous generations was not evident as young people and children were subject to social media 24/7 and social skills were reducing
- Parents would play a pivotal role by making choices and had a chance to influence their children’s values and access to media. However, parents often felt uninvolved and disempowered, they needed to be given the right tools to make the right choices for their children
- The group discussed the role of NCC’s e-safety officer who was part of the Public Health team and went into schools to educate and raise awareness of media literacy. Raj Gangotra agreed to provide the contact details for the e-safety officer to Liz
- The effects and damage caused by social media was now being seen at St Andrews, with a cohort of younger people presenting with many mental health issues
- It was noted that it was not only Western cultures being influenced by social media, media images were now affecting other Asian and African cultures too. This was disassembling what had previously been considered cultural norms regarding body image and developing the same problems as Western cultures
- It was discussed and agreed that it was important not to confuse children with the healthy eating and low sugar messages with ensuring they had a healthy body image and self-esteem
- The next step was to work with the Youth Select Committee and pilot different approaches and resource packages in schools to build emotional confidence and resilience in children

For further information, Forum members were invited to contact Liz on LRitchie@standrew.co.uk

(1155 – Shirley Plenderleith and Liz Ritchie left the meeting)

ACTION: 1 (#17). Raj Gangotra to provide the contact details for NCC e-safety officer to Liz Ritchie

3. Minutes and Action Log of the previous meeting held 21 September 2017 (KHWB-17-20 and 21)

The following amendments were requested to the minutes:
Page 2 – Item 4 – Care and Repair (Northamptonshire) Limited – add “if available” to “….subsidised using charitable funds and grants if available….”
Page 2 – Item 5 – Update on Discharge Pilot – add “NHFT hospitals” to “….pilot project for Discharges from Kettering General Hospital and NHFT hospitals……”
and “Karen was located within the Discharge Team at KGH…” amend to “Karen was located within wards at both NHFT and KGH....”

Once these amendments were made, the minutes were agreed as an accurate record of the meeting.

Action Log Item 16 - It was requested that the KGH Discharge/Housing case studies were recirculated to the group.

ACTION: 2 (#18). KS to recirculate KGH Discharge/Housing case studies

4. Kettering Health and Wellbeing Forum Task and Finish Group

Apologies had been received from Kanchan Bhanage; Sunny Rohit spoke to the group about how to progress partnership working.
It was agreed that a new focus should be found for the Forum and for the Task and Finish Group to develop actions around. Sunny agreed to circulate an events calendar to the group that had been compiled by Kanchan, a subject area could be chosen from there. Trish Dewar also agreed to recirculate the Forum's Terms of Reference which would enable members to see the original focus of the Forum. It was suggested that the Health and Wellbeing Board's reports could provide useful guidance for priority areas, such as Adverse Childhood Experiences. This was being led by Raj Gangotra, Raj agreed to speak to the group at the next meeting about the work being done around this.

**ACTION:** 3 (#19). Raj Gangotra to attend January 2018 meeting to speak about Adverse Childhood Experiences, a priority area for the Health and Wellbeing Board.

## 5. Dignity in Crisis Project Proposal

Lynn Chapman from Kettering Community Unit (KCU) spoke to the group about the Dignity in Crisis project proposal, the main points discussed were:

- Nationally, changes to the benefits system have meant a 5-6 week delay for payments, putting people into financial difficulties. In households where the income is below £25k, 6 out 10 parents have skipped meals during school holidays so their children can eat.
- In Kettering delays to benefit payments were the top reason for food parcel requirements. Demand for food parcels had increased since last year, there was already a 26% rise when measured part way through the year, with the peak demand being in the school holidays.
- The Dignity in Crisis model offered assistance in all areas not just food parcels, such as allowing a client to obtain clothing and household items from a shop rather than an identifiable place. The aim was to deliver services in a way that treats people as customers to help reduce feelings of shame.
- KCU operated their food bank in a different way to most by distributing food parcels through partner organisations. Where possible a customer would be matched with a partner organisation that may also be able to provide assistance to enable the customer to get out of their difficult situation, such as Citizens Advice Bureau to assist with financial difficulties.
- KCU were looking into working in a similar way to the Trussell Trust to help families of premature babies by holding stocks of food and assisting with the costs of hospital visits.
- Common issues in the Kettering area were:
  - Low income families – especially during school holidays children suffered from a lack of socialisation and no longer received a school meal each day
  - Homeless and survivors of domestic abuse – clothing requirements and household items
  - Elderly/Vulnerable required assistance following discharge from hospital
  - Lack of appropriate clothing for job interviews and social occasions
  - Pets – owners often feeding their pets before themselves
- KCU held an event to develop the Dignity in Crisis model in July with 17 partner organisations and service users.
- It was noted that the KCU foodbank operated 24/7, with Police and local churches helping out of hours.
- Small local businesses helped KCU, a butchers had donated a van which was used to deliver food parcels. The butchers were also happy to accept vouchers for fruit and veg which it was hoped could be included in food parcels.
- Other ideas were to tailor food parcels for the recipients; to be aware that elderly often couldn’t use ring pulls, and homeless would not necessarily have access to a can opener. Also to work with organisations such as Groundworks and Homestart to be able to offer family activity days during school holidays which could include a hot meal.
- With the proposed new model KCU wanted to add value rather than duplicate what was already in operation, and it was hoped that by treating people as customers it would encourage them to get help earlier and not get into crisis. The aim was to provide crisis and transitional services to support people to get...
to a better place in their lives
- First For Wellbeing (FFW) commented that they had customers who would benefit from the Dignity in Crisis model, and FFW would be able to provide evidence of outcomes from their 12 week follow up. It was recommended that KCU mentors completed the Make Every Contact Count (MECC) training to increase the effectiveness of their help to transitional customers
- Raj offered to obtain data from the NCC Public Health Intelligence team if Lynn provided her requirements

The group agreed to take the following questions back to their organisations and provide feedback to Lynn (lynn.chapman.kcu@btconnect.com) by 08 December 2017 when the lottery bid was to be submitted:
- What are your views on the Dignity In Crisis approach?
- Is this a service you would access for your customers?
- Is there any further evidence of need that partner organisations are able to share at this stage?

6. Partner Updates

There were no questions on the updates that had been circulated prior to the meeting.

Trish Dewar, **Groundworks**, informed the group that Kettering Borough Council were holding an awareness event around Falls at the end of January. Groundworks issued a monthly newsletter, Trish invited attendees to submit their organisation’s events for inclusion.

Sue Watts, **Age UK**, informed the group that improvements had been scheduled to the Four Seasons Wellbeing Centre building, including new windows. Age UK Northamptonshire’s new CEO was named as Christopher Duff who had previously worked as the CEO of a hospice in Rotherham.

Suzanne Jackson, **Kettering Borough Council (KBC)**, updated the group regarding the KGH/KBC Discharge pilot – KGH wished to fund the pilot for a further 6 months from January 2018 and were waiting for the NHFT committee to approve.

7. Any Other Business

Gill Shadbolt, Care and Repair, informed the group about their Surviving Winter campaign which was aimed at 60+, Gill also highlighted the free home repair service offered in Corby for eligible residents. For further information Gill should be contacted on gshadbolt@careandrepairnorthamptonshire.org.uk.

**NEXT MEETING**
Thursday 18 January 2018, 10.00-12.00
Lahnstein Room, Kettering Borough Council, Bowling Green Road, Kettering, NN15 7QX
<table>
<thead>
<tr>
<th>Action Log Number (Meeting Action No.) (Meeting Date)</th>
<th>Item / Paper Number</th>
<th>Action</th>
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<tbody>
<tr>
<td>#19 (3) (23.11.17)</td>
<td>4</td>
<td>KHWBF Task and Finish Group</td>
<td>Raj Gangotra (RG)</td>
<td>January meeting</td>
<td>Delayed</td>
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<td>Raj Gangotra to attend January 2018 meeting to speak about Adverse</td>
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<td>Childhood Experiences, a priority area for the Health and Wellbeing</td>
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<td>Board.</td>
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<tr>
<td>#17 (1) (23.11.17)</td>
<td>2</td>
<td>Health and Wellbeing and Body Image</td>
<td>Raj Gangotra (RG)</td>
<td>ASAP</td>
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<td>Raj Gangotra to provide the contact details for NCC e-safety officer</td>
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<td></td>
<td>to Liz Ritchie</td>
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<td>2016 #12 (20.10.16)</td>
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<td>Group to decide on themes for future meetings and invite speakers</td>
<td>All</td>
<td>Ongoing action</td>
<td>Ongoing</td>
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For older completed actions please contact karen.seagrove@nhs.net to request a copy of the Master Action Log
HEALTH AND WELLBEING BOARD HWB FORUMS:

Locality Health and Wellbeing Forums (HWBF) have existed in District and Borough Council areas of Northamptonshire since 2012 in their present guise, some predate this in other guises such as LSPs etc. The HWBF were initially set up without specific detailed direction from the county Health & Wellbeing Board (HWBB), which supported the creation of HWBF, but took, and continues to take, the very specific view that the locality Forums are of, and for, the locality areas, therefore it will not 'interfere', 'instruct' or 'direct', but will seek to work in partnership where possible.

The HWBB anticipated that each of the locality HWBF would link closely with the Board and considers that it is important that all localities participate in setting individual, relevant local targets, as well as decision-making and delivery in their area. Since their inception, the locality forums have developed in response to local issues, however there is little consistency across the county. While this is understandable, given local diversity, and the varied level of support offered by District and Borough Councils and the CCGs over different localities, the world has moved on dramatically in the last five years.

The HWBB receives updates from the HWBF across the county via reports collated by its Business Manager and submitted to each meeting. There are also regular meetings between the Chair of the countywide Board and the Chairs and Lead Officers of the HWBF. However, there is no prescribed remit for the HWBF. Health & Wellbeing Forums, as things stand presently, are in essence unfunded, under resourced local collectives who do not have any accountability to the countywide Board as there is no top-down structure in place. Concerns have been expressed over time that there is a lack of evident HWBF influence in setting strategic direction at a countywide level. It is evident, though, that the forums do allow for the joining up of locality responses and raising of suitable challenge around serious issues within localities. HWBF are a significant engagement option for community response and GP focus.

The introduction and development of Sustainability and Transformation Plans (STP) is significantly altering the health economy across England. In Northamptonshire, the STP has attracted criticism for its centric approach, with Borough and District Councils only being included in the equation late, albeit this, at least in part, was due to NHS England’s prescriptive levels of imposed secrecy.

The HWBB should consider the future role of locality forums, how they should link with the Board and what role they might have in relation to localising the STP, particularly the prevention agenda. HWBF have the potential to become wider engagement and participation vehicles to support implementation. This provides an opportunity to facilitate a stronger, more cohesive, and more directly aligned relationship between the HWBF and the HWBB. This could support the development of the refreshed STP by providing a consistent, robust locality structure. This would ensure that criticism of the STP being centrally focussed would be less likely to be reiterated as a mechanism for two-way communication between the centre and localities would be firmly established. However, the forums might potentially need resource if they are to complete what tasks might be in mind for them in such a brave new world.

Forums and their structure need consideration by this Board and an organised approach adopted. The Board needs to clarify where responsibility lies for ensuring the existence of individual forums, and for their support, as well as be clear as to who must ensure their continued presence and who is accountable should a forum fail. In my view, District & Borough Councils are best placed to adopt this responsibility, formally, and to manage this task with minimal resource and workforce outlay.

The Board is requested to:

- Articulate a proposed structure for Health & Wellbeing Forums,
- Work with District & Borough Councils to develop the Health & Wellbeing Forums,
- Establish responsibility for continued existence of Health & Wellbeing Forums,
- Identify accountability in the event of Health & Wellbeing Forum failure.
<table>
<thead>
<tr>
<th>Date/Month</th>
<th>Event</th>
<th>Description</th>
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<tbody>
<tr>
<td>8 - 14 January 2018</td>
<td>National Obesity Awareness Week</td>
<td>Obesity Awareness Week promotes how as a country we can eat healthier, be more active and improve our overall health.</td>
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<tr>
<td>February 2018</td>
<td>National Heart Month</td>
<td>The British Heart Foundation’s annual campaign to increase awareness of heart and circulatory disease.</td>
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<tr>
<td>4th February 2018</td>
<td>World Cancer Day</td>
<td>Cancer affects so many people across the world and currently 8.2 million people die from cancer worldwide each year. World Cancer Day is the ideal opportunity to spread the word and raise awareness of cancer in people’s minds and the world media. This global event takes place every year on 4 February and aims to save millions of preventable deaths each year by encouraging individuals to take action.</td>
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<tr>
<td>7th March 2018</td>
<td>No Smoking Day</td>
<td>Aim is to encourage as many smokers as possible to quit on No Smoking Day.</td>
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<tr>
<td>12th – 18th March 2018</td>
<td>Nutrition and Hydration Week</td>
<td>This global movement aims to focus on nutrition and hydration as an important part of quality care, experience and safety improvement in health and social care settings.</td>
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<tr>
<td>Date</td>
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<td>1-31 May 2018</td>
<td>National Walking Month</td>
<td>National Walking Month encourages people to walk more throughout May. Initiatives include, Walk to Work Week and Walk to School Week.</td>
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<tr>
<td>14-20 May 2018</td>
<td>Mental Health Awareness Week</td>
<td>Mental Health Awareness Week is a UK event supported by the Mental Health Foundation. The aim is to educate the public about mental health issues and to promote better mental health.</td>
</tr>
<tr>
<td>11-17 June 2018</td>
<td>BNF Healthy Eating Week</td>
<td>British Nutritional Foundation (BNF) Healthy Eating Week. There are five health challenges at the heart of BNF Healthy Eating Week: Have Breakfast; Have 5 A Day; Drink plenty; Get active; and try something new and we will be providing all registrants with lots of resources and information to help meet the challenges.</td>
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<tr>
<td>11-17 June 2018</td>
<td>Diabetes Week</td>
<td>Diabetes Week is an annual highlight in the Diabetes UK calendar, to raise awareness of the condition and the vital funds required for future work.</td>
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<td>11-17 June 2018</td>
<td>Men's Health Week</td>
<td>Led by the Men's Health Forum, the purpose of Men's Health Week is to raise awareness of preventable health issues and encourage men and boys to seek professional advice for health-related problems.</td>
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<tr>
<td>2-8 July 2018</td>
<td>Health Information Week</td>
<td>Health Information Week is a campaign to improve access to health information. Staff from local authorities, public libraries, NHS, voluntary sector, independent information and advice centres have all been working together to make their health resources more available to the public.</td>
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<td>Date</td>
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<tr>
<td>11-17 September 2018</td>
<td>Know Your Numbers! Week</td>
<td>Blood Pressure UK's flagship blood pressure testing and awareness campaign, encourages adults to know their blood pressure numbers and take the necessary action to reach and maintain a healthy blood pressure.</td>
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<tr>
<td>10 October 2018</td>
<td>World Mental Health Day</td>
<td>World Mental Health Day raises public awareness about mental health issues.</td>
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<tr>
<td>1 November 2018</td>
<td>National Stress Awareness Day (NSAD)</td>
<td>NSAD aims to develop greater understanding of stress and offer individuals and organisations access to proven coping strategies and sources of help.</td>
</tr>
</tbody>
</table>
Health & Wellbeing Board Update: 18/01/18.

Health & Wellbeing Board Meeting: 11th November 2017

The day started with a one-hour session around new reporting structures for the Board and the joint project working around Adverse Childhood Experiences (ACEs) that is currently under development.

The Board considered the Progress against Desired/Designated Outcomes, or PADO, Template. The aim is to provide targeted strategic updates that link to the priorities identified in the county Health & Wellbeing Strategy. Ultimately, it is intended that the PADO will replace the current Strategic Partner Update report section on the Health and Wellbeing Board agenda. The intention is for each reporting organisation to highlight in each sub section what their locality is achieving against the outcome from the Health & Wellbeing Strategy, which should reduce the amount of information needed.

Lucy Wightman (formerly Douglas-Green) gave the Board an update on the ACEs work. There have been two meetings to date, and representatives of attending organisations have been asked to complete a mapping document on behalf of their organisations. The purpose is identify gaps and overlaps in services, and to develop a set of recommendations for the Board to consider.

The main Board meeting opened with an update on Board membership:

- Damon Lawrenson (DL) the Interim Chief Executive of Northamptonshire County Council will become a Board member,
- Lucy Wightman has now been appointed as Director of Public Health and will sit as a permanent member of the Board,

Simon Weldon has been appointed as Chief Executive for Kettering General Hospital and will start in his new role April 2018. Fiona Wise will continue as interim Chief Executive until then.
Chris Pallot gave the Board an update on the recent CQC inspection of Northampton General Hospital (NGH). Previous inspections had classified NGH as needing improvement, and in some areas inadequate. Following two CQC inspections this year NGH was assessed against five domains - whether care is: safe, effective, caring, responsible and well led. NGH has now been classified as good across all domains and outstanding in well led and A&E provision. The focus now is to maintain and improve on these classifications.

Darin Seiger informed the Board that following consultation with NHS Nene CCG and NHS Corby CCG Boards, a proposal has been submitted to the Secretary of State for Health for Carole Dehghani, Chief Executive of NHS Corby CCG, to be the interim Chief Accountable Officer for Nene CCG whilst she remains the substantive Accountable Officer for NHS Corby CCG. This will require Secretary of State approval.

Gordon King, Deputy Director of Mental Health at NHFT, gave the Board a brief overview of the Health and Wellbeing Board’s Recovery Focused Mental Health Development session held on the 12th October 2018. The session focused on work happening under the Board’s Mental Health Crisis Care Concordat Steering Group, as well as showcasing recovery focused work, the Recovery College and co-production.

The Board received an update from NHS England. Following the submission of the Northamptonshire BCF to NHS England, an escalation meeting attended by partners within the county was held. The outcome of this meeting was the recognition of the good partnership working which has taken place, and an approval of the local trajectory to address Delayed Transfers of Care (DTOC) – this is awaiting formal sign off. Anna Earnshaw, county BCF lead, confirmed following the escalation meeting, that all the schemes within the BCF have agreement on who will take ownership, how to deliver and where the risk will sit. NHS England is focusing on DTOC over the next few months.

Lucy Wightman gave an update on the uptake of flu vaccinations for children. Last year there was variable uptake across the county, but this year there has been good partnership working by communication teams, health visitors, and school nurses to increase uptake.

Mike Coupe, STP Programme Manager presented a report on the progress of the Northamptonshire STP. Key points included:
• The county STP reset, which has taken place over the previous few months, will be completed by the end of December 2017.

• The STP reporting process will be overhauled in 2018.

• The STP Partnership Board has now replaced the STP Programme Board.

• A draft governance structure has been completed and was discussed at the first meeting of the new STP Partnership Board in October. It is expected to be signed off once clarity has been reached about the most appropriate way of engaging with general practice and primary care.

• A Fighting Fund is in the process of being confirmed which will target supporting the implementation of new models of care, and enable project change managers to support each of the key priorities contained within the STP.

• The Chief Executives have agreed in principle who will be leading on each of the key priority workstreams, and the process of identifying senior responsible officers for each workstream has begun.

• Recruitment is underway for a part-time clinical lead who will focus on enabling clinical driven management.

• A future workshop is planned to identify a process of co-designing and getting stakeholders to identify how they should be involved in the STP.

• In early 2018 there will be a planning process for each of the workstreams and key performance indicators and metrics will be used to give assurance on performance of each of the workstreams.

Mike Coupe stated that there is no loss of commitment to the health and wellbeing agenda, but there are national and local priorities and the first set of priorities is set by the NHS England around the Five Year Forward View. The real test is how to get the system as a whole to invest in health and wellbeing when providers are facing serious financial challenges and the resources available work for health and wellbeing as well as the priorities set by central government.

The Five Year Forward View and the STP have very NHS focused priorities. Concerns were raised that there is still no clear relationship between the STP and the Health and Wellbeing Board, as currently the STP governance structure shows a dotted line between this Board and the STP, which is not in line with other areas of the country.

Dr. Joanne Watt, Chair of NHS Corby CCG addressed the Board on matters surrounding Corby Urgent Care Centre. The financial impact on the CCG of the expert determination process is approx. £3.5 million pounds. There will be an overall evaluation of healthcare
provision in Corby - a period of pre consultation and engagement with a wide variety of groups across Corby is underway. Once this process is complete, a period of formal consultation will begin. NHS Nene and Corby CCGs have approved a joint disinvestment and decommissioning policy, which is led by the joint quality team.

The Board received a brief update on the Joint Strategic Needs Assessment (JSNA). The Health and Wellbeing Board has a statutory duty to ensure a JSNA is produced. A number of chapters have been prioritised reliant upon the STP clinical priority areas around prevention. The Prevention Concordat has been launched and work on the Mental Health JSNA needs assessment has been brought forward, as this is fundamental in underpinning the plan as it is developed. An oral health chapter is also being added to the JSNA, and the needs assessment for this is being undertaken by a dental therapy fellowship post jointly funded with Public Health and Health Education England.

Anna Earnshaw gave the Board a brief update on the iBCF and highlighted the following areas:

- Approval for the overall BCF plan is currently awaited.
- DToC remains the key focus for this winter.
- Joint work is being completed with the CCGs regarding admissions to hospital from care homes. Nursing provision within care homes is a big challenge within the county.
- Northamptonshire have one of the lowest admission rates to care homes in the country. Even so, despite a 15% increase in capacity for homecare this year, there is still a 1000 hours pending due to capacity issues.
- Other options such as step down care with CCGs for assessments out of hospital are being considered.
- There is a big issue with the level of frailty in patients when admitted to the acutes as in some cases people are leaving it too late to seek medical health when ill resulting in a hospital admission.
- A key focus this year is working jointly with NHFT and the CCGs is to improve outcomes for people with a mental health learning disability, in order to move away from traditional residential care placements.
- iBCF money will be used to improve interventions within the community such as expanding the re-enablement teams, working with the intermediate care teams and looking at community based care around families.
A part of the NCC consultation a proposal is for First for Wellbeing Wellbeing Advisors to focus upon supporting patients at highest risk of being frail, with multiple clinical issues and social issues.

Chris Millar gave an update from the Housing and Planning Workstream Group established following the Board Development Session on the 29th June 2017. It was recognised that the health sector needs to be part of the planning processes early on to ensure the achievement of optimum funding and facilities needed for the anticipated population growth. The group was developed to create a more co-ordinated approach for planning and health, ensuring that the correct infrastructure for health and wellbeing is included in the planning process. At the first meeting in October it was agreed that two sub groups be established to design a protocol for health and planning, based on an existing document drawn up in Nottinghamshire, and to lead on the work of a case study (a Sustainable Urban Extension [SUE] in Kettering). This work will not just be about formulating the health infrastructure required for planning new developments, but will also relate to formulating an evidence base for the delivery of preventative elements which will contribute to healthier communities. The group will produce a “Who Does What?” document, designed to inform organisations about the inner workings of the planning system where it pertains to health and wellbeing. There is a proposal to second a planner for a year to work within the health sector to work with planners and develop a countywide Health Supplementary Planning Document. The Board were advised that NHS England has appointed a dedicated Estate Manager for Northamptonshire.

The Board received the Northamptonshire Safeguarding Adults Board (NSAB) Annual Report. Key highlights from the report were:

- Prevention is a priority for safeguarding adults at risk.
- The need to ensure there is enough quality staff within care homes, and to ensure they are well trained.
- The importance of good housing to ensure people are kept safe.
- National issues around the Mental Capacity Act and the Deprivation of Liberty Safeguards, which Northamptonshire are having to put a lot of resource into managing the impact of.
- The role of safeguarding should be included within the STP.
- Changes have been made to the NSAB board structure due to the implementation of the integrated business office for safeguarding across children and adults.
The priorities for this year are around making safeguarding personal, focusing on what customers think about the interventions and support offered.

The Care Act has created new categories particularly around self-neglect - there is a need to become more aware of self neglect which impacts on housing and the fire service due to dangers around fire.

The Board received the Northamptonshire Safeguarding Childrens Board (NSCB) Annual Report. Key highlights from the report were:

- The NSCB has been restructured to have fewer sub groups, become more focused and make better use of data.
- The quality assurance process has been tightened up, six audits a month are completed on various topics. Every agency must produce an audit return enabling a comprehensive discussion about their safeguarding approach.
- A review will take place on NSCB operations, including frequency of meetings, how to be more strategic, planning processes and ensuring there are good links with partners and their reporting boards.
- Northamptonshire has a high level of looked after children as there isn’t sufficient early intervention for prevention taking place through tier 4 services.
- There is some inconsistency around child protection planning, attendance at conferences and production of reports, although police attendance has improved.

The Board received a brief overview of proposed Changes to Local Safeguarding Arrangements under a consultation currently taking place. There are three elements to the consultation:

- The Safeguarding Childrens Board would be replaced by Safeguarding Partnerships - core partners would be CCGs, Police, Local Councils, Districts and Boroughs. There would also be associated partners. This would be a permissive piece of legislation, thus boards are not required to make any changes, but it could present new opportunities.
- There would be changes to the child death overview panels, based on the population size, and moved to health, but it is unclear exactly where they would sit.
A national board would determine which cases go on to a serious case review and all data correlations and analysis on a serious case review would be required to be carried out within 5 working days.

Next Health & Wellbeing Board: 18th January 2018:

The next Health and Wellbeing Board meeting is expected to include:

- A report on the Housing - Homelessness Development Session,
- An STP Update,
- A BCF Update,
- An iBCF Update,
- Updates from Board Member organisations,
- Prevention Concordat Steering Group Workstream Update,
- Mental Health Crisis Care Concordat Steering Group Workstream Update,
- Healthier Workplace Workstream Update,
- Housing & Planning Workstream Group Update,
- A report on Corporate Parenting from Lesley Haggar,
- A Report from Aces Steering Group,
- A Resetting Care in Corby Update,
- A report on the SEND - Single Route of Redress National Trial
- A report on the Armed Forces Community Covenant - Action Plan
- A Work on Cold Homes in Partnership Update

Development Days / Events Upcoming:

- 01/02/18 STP Engagement Event: Last Years of Life,
- 01/02/18 Northamptonshire Police Development Day.
Health and Housing Partnership Role – Update (January 2018)

Background

- July 2017 saw the start of an innovative new project between Kettering Borough Council’s Housing Service, Kettering General Hospital (KGH) and Northamptonshire Healthcare Foundation Trust (NHFT).

- The ‘health and housing’ project funded by KGH and NHFT initially for 6 months aims to improve discharge for patients with housing concerns in our acute, community and mental health hospitals in north Northants.

- Karen Clarke is employed as the projects Housing Options Advisor (HOA) and focuses predominantly on avoiding /resolving accommodation related Delayed Transfers of Care.

- Karen is based at Kettering General Hospital on Mondays and Thursdays and in the Community and Mental Health hospital wards (in north Northants) managed by NHFT on Tuesdays and Fridays.

- Specifically Karen is offering advice and assistance on; homelessness, social housing, private renting, overcrowding, housing debt, property condition, disabled adaptations, and sheltered housing.

Achievements

- During the first 6 months (July to December 2017) a total of 77 patients have been referred to the project’s Housing Options Advisor.

- The reasons for referral have varied and included not being able to return to their current property, keysafe or furniture move being required, patient in need of supported housing or 24 hour care and homelessness.

- Of the 77 cases to date 58% of these have been due to the patient being homeless following a relationship breakdown or being street homeless.

- 69 of these referrals are now closed and for 84% of these cases a housing solution was successfully found through the intervention of the project enabling the patient to be discharged from hospital and reducing delay.

Pilot extended

- Following on from the success of the pilot, KGH and NHFT have agreed to fund the pilot for a further 6 months (Jan to June 2018) with a view to trying to secure a permanent arrangement in the future.
Physical Activity and Nutrition Programme in Schools

A physical activity and nutrition programme called ‘STOP’ will be delivered in Park Infants School in February. The programme aims to get children active and enhance their knowledge around maintaining a healthy diet. The programme takes a whole school approach to promoting a healthy lifestyle and consists of four physical activity and four nutrition education sessions.

Healthier Christmas

KBC carried out some activities with information and advice to stay safe and healthier during the festive period. An event was held for residents in Highfield Barns to demonstrate a safe way to cook a turkey along with information and advice on healthier menu options for Christmas. A blog was also published on the KBC website with helpful information and advice and ideas to stay active during winter.

Networking Event

KBC will be hosting a networking event for County Falls Prevention and Bone Health network at the Com Market Hall on Wednesday 31st January 2018 on behalf of Northamptonshire County Council. The event will involve representatives from a wide range of organisations and guest speakers from The Royal Society for the Prevention of Accidents.

Walking Football

Walking football sessions continue to run at Kettering Arena (Tuesdays 10.30am – 12pm) and Desborough Leisure Centre (Fridays 10.30am – 12pm). Both sessions continue to run successfully. Players are keen to begin looking at friendly fixtures against other local groups. They are also investigating the possibility of some tournament entries.

LifePlan

A new ‘Your Courses’ booklet is available for customers. LifePlan will deliver two Cooking on a Budget sessions this year at Kettering Buccleuch Academy. Both the sessions are now fully booked.

Workplace Wellbeing

A week of activities are scheduled for staff at KBC. Staff will have an opportunity to get a health check and get access to a range of resources to help them with their New Year’s resolutions. Resources include support to quit smoking, Dry January, Change4Life, and weight loss.

Falls Prevention Programmes

KBC continues to offer strength and balance exercise sessions aimed at people over 65, who are at a higher risk of falls. This 10 week programme is open to all Kettering residents for a small charge of £3. Sessions are delivered across the borough, which
include Tudor Court (Kettering), St Andrews Court (Broughton), Harry Potter House (Kettering), and Madams Gardens (Rothwell).