

Minutes of the Northampton Health and Wellbeing Forum
1.30 pm on Thursday 13th April 2017
The Board Room, Francis Crick House,

Present:

David Atkinson (Chair)	(DA)	Chair, Northampton, East and South Locality Group
Cllr Sylvia Hughes	(SH)	Chair of the Northamptonshire Health and Wellbeing Board
Peter Lynch	(PL)	Health and Wellbeing Board Business Manager, Northamptonshire County Council
Muriel James	(MJ)	Chair, Central Locality Engagement Group
Phil Harris	(PH)	Head of Housing and Wellbeing, Northampton Borough Council
Jeanette Pidgen	(JP)	Northampton West Locality support Manager, Nene Clinical Commissioning Group
Derry Miller	(DM)	Services Director Age-UK
Sara Horner	(SH)	Northants County Association of Local Councils
Frank Earley	(FE)	Service Development Relationship Manager, Northamptonshire County Council
Nicky McKenzie	(NM)	Northampton Partnership Homes

Minute Taker:

Cheryl Bird	(CB)	PA, Northamptonshire County Council
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Apologies:

Spt. Mark Evans	(ME)	Early Intervention Lead, Northamptonshire Police
Louise Tarplee	(LT)	Senior Locality Manager, Nene Clinical Commissioning Group
Jane Finch	(JF)	Locality Support Manager for Northampton Central, Nene Clinical Commissioning Group
Kelly Morris	(KM)	Service Relationship and Health Protection Manager, Northamptonshire County Council
Cllr Stephen Hibbert	(SH)	Northampton Borough Council
Dr Tom Howseman	(TH)	GP, Chair Northampton Health and Wellbeing Forum.
Natalie Jennings	(NJ)	St Andrews Hospital
Kate Howard	(KH)	Deputy Director of Nursing, Northamptonshire Healthcare Foundation Trust
Sarah Ward	(SW)	Area Manager, First for Wellbeing
Lisa Bryan	(LB)	Northamptonshire Fire and Rescue
Dawn Cummins	(DC)	Interim Chief Executive, Voluntary Impact Northamptonshire

1. Welcome & Apologies

DA opened the meeting and welcomed everyone present.

2. Minutes from the previous meeting 14th July 2016

The minutes from the previous meeting of the 14th July 2016 were agreed as an accurate record.

3. Election of Chair and Vice Chair

DA advised that Jane Carr had resigned her position as Chair of this Forum after accepting a position in First for Wellbeing, DA is the current interim Chair until a new chair is elected. DA hoped once the new chair is appointed then the Forum can relaunch as this Forum is ideally placed to lead on addressing local health and wellbeing needs.

PL noted there are currently six other Health and Wellbeing Forums across the county which are at different stages of development and these forums provide a good collective of people from across the locality. DM noted this Forum is important as there is a wealth of information from partners attending these meeting and this could lead to avoiding duplication of work and encourage more collaborative working across the locality.

SH added from a Health and Wellbeing Board perspective these forums are invaluable as they act as a conduit between the Board and population of the county and the Health and Wellbeing Board would like to see these Forums become part of the bigger picture in improving health across the county. SH also chairs the Forum Chairs Group where the Chair from each locality meet to discuss issues and feed information to and from the Health and Wellbeing Board. SH added a Northampton representative is currently missing from these meetings. DA agreed to be the Northampton Forum representative for this group.

JP commented that health is currently changing rapidly across the county and if this Forum does regroup there is a risk engagement with the population from across the locality will be lost, which is vital if we want to succeed with delivering the required change in health and social care across the county. Due to financial restraints partners are facing the health and wellbeing of the locality can only be improved by working collaboratively and thinking about how partners can complement each other to find the best fit.

PL nominated Dr Tom Howseman (TH), to become Chair of this group, as having a GP as the Forum chair would raise the profile of the Forum. JP added as well as being a GP, TH is the clinical lead dementia and learning disabilities within Nene CCG. The group elected TH as Chair and asked DA to remain as Vice Chair, DA agreed.

4. Matters arising

PL asked for the actions from the previous meeting to be discharged, the group agreed.

5. Future Forum Meeting Schedule

The group agreed the frequency of the meetings would be discussed in more detail at the next meeting on the 11th July.

FE suggested having focused task and finish groups to progress work of identified priorities in-between Forum meetings and use the Forum meetings to monitor outcomes of task and finish groups, TH and DA will be able to assess the progress of the task and finish groups in-between meetings. The group agreed to discuss this in more detail at the next meeting.

6. Future Priorities

PH advised the districts and boroughs feel the Health and Wellbeing Strategy did incorporate the key points for housing and how housing can affect a person's health and wellbeing. As the Health and Wellbeing Board is reliant on the forums to deliver work needed for the priorities set within the Strategy, but there is a need to ensure we have appropriate priorities set for Northampton locality which can make a difference to the locality. Also for future Forums meetings more time is needed to allow for a more detailed discussion of topics presented and for this forum to be able to show tangible outcomes for

Northampton. It would be beneficial to start with a small number of priorities which are achievable and be able to show tangible outcomes for the county.

FE noted the Northamptonshire Health Profiles look at the entire life span for the county and will be able to flag up health issues for Northampton and local areas where work can be delivered to improve a specific identified health outcomes which can be linked to the Health and Wellbeing Strategy. The current significant issues for Northampton are:

- GCSE attainment,
- Violent crime and anti social behaviour,
- Long term unemployment,
- Smoking and increased mortality due to smoking and CVD in the under 75
- Under 18 conceptions,
- Hospital admissions due to self harm and/or excessive alcohol consumption,
- High prevalence of sexual disease.

FE will circulate the Health Profile tool to the group for discussion at the next meeting.

Action:FE

7. Social Isolation

DM noted social isolation is an issue in urban as well as rural settings, and often correlates with people's fear of the local environment such as crime and anti social behaviour. But there are lots of projects achieving success with social isolation within Northampton but they are not aligned and there needs to be more collaborative working particularly with the current financial constraints all partners are facing. Social isolation is a cause of increased mortality and increases the risk of dementia and unhealthy behaviours. Social isolation has a significant health impact on younger people as well as older people.

FE noted FfW offer a self assessment form via OCTIGO, and it is hoped in the future if social isolation is highlighted during the completion of the assessment form, it will signpost people to groups that operate within an area which can help elevate social isolation. FfW wellbeing advisers are also present in GP practices, where patients can discuss health and wellbeing and prevention in person which is particularly beneficial for socially isolated patients. DM has been liaising with age Door to Door to discuss helping people to become more active, as a barrier for some of Age UK clients becoming more active is not having access to transport, and this initiative may help people not to go into residential care. DA asked for social isolation to be kept as a priority and for this item to be on the agenda at the next meeting as a workshop item to enable a wider discussion. The group agreed for this priority to start with older people and then move to younger age groups once established and outcomes are achieved.

PH offered to host a workshop to enable the mapping of existing services, identify gaps, to look at raising awareness of befriending networks and to develop and grow services to draw on resources to encourage collaborative working. The information gathered at this workshop will be mapped on to GIS to help identify gaps and compile an action plan for the next six months. PH will set up a task and finish group including DM, NM and MJ will meet to discuss the detail, to establish how we want to proceed, and how we can define befriending groups and define the approach in reducing social isolations.

Action:PH

DM added there is a need to ensure we engage with minority groups and Voluntary Impact Northamptonshire would be crucial in helping to identify BME groups, cultural and religious leaders. FE will circulate a report on social isolation to the group which will help with the mapping of current resources.

Action:FE

DM added Door to Door would be happy to be a part of this workshop as they play a major part in reducing social isolation.

8. Heart Disease

FE asked if the priority for reducing heart disease can be kept, as a lot of progress has been made in this area over the past year, FE agreed to be the lead for this task and finish group. The group agreed and asked for this to be an agenda item for the next meeting.

FE commented that many risk factors for CVD can be reduced by modifying lifestyle factors and existing investments in this area can be used to help raise awareness and reduce mortality. DM advised that Age UK are running a Collaborative Care project helping people to stay more independent in their homes for longer. DM will forward more information on this to FE.

Action:DM

PH noted a Heart Disease, raising awareness workshop led by Dr Dipesh Naik was held on the 2nd March discussing the issues in raising heart disease awareness and how this can be improved. A further workshop will be held to discuss a proposed action plan going forward.

FE noted we need to consider how local employers look after the health and wellbeing of their employees whilst at work and there is a need to build on small successes. FE will liaise with PH regarding the CVD task and finish group.

Action:FE

9. Forum Chairs Group (FCG) Meeting Feedback

PL will circulate minutes from the Forum Chairs Group meeting to the group.

Action:PL

10. Date of Next Meeting

The date of the next meeting will be on the 11th July 2017 9.00 am in the Blue Room, County Hall, Northampton.