



Health and Wellbeing Together

Minutes - 18 January 2023

Attendance

Members of Health and Wellbeing Together

Cllr Jasbir Jaspal (Chair)	Cabinet Member for Public Health, CWC
Paul Tulley (Vice-Chair)	Black Country ICB
Prof. Farzad Amirabdollahian	University of Wolverhampton
Emma Bennett	Executive Director of Families, CWC
Cllr Ian Brookfield ^v	Leader of the Council, CWC
John Denley	Director of Public Health, CWC
Sally Evans ^v	Royal Wolverhampton NHS Trust
Marsha Foster ^v	Black Country Healthcare Partnership Foundation Trust
Cllr Linda Leach ^v	Cabinet Member for Adults, CWC
Stacey Lewis	Manager, Healthwatch Wolverhampton
Lynsey Kelly	Head of Communities, CWC
Saffi Price	Wolverhampton Voluntary and Community Action
Samantha Samuels	West Midlands Fire Service
Cllr Wendy Thompson	Leader of the Opposition, CWC
Becky Wilkinson	Director of Adult Services, CWC

In Attendance

Brendan Clifford	Working for Councils in Black Country Integrated Care System
Andrea Fieldhouse	Principal Public Health Specialist
Madeleine Freewood	Public Health Partnership and Governance Lead
Sheila Gill	Healthwatch Wolverhampton
Shelley Humphries	Democratic Services Officer
Alison Hinds	Deputy Director of Social Care
Kate Lees	Partnership Manager
Michelle Marie-Smith	Principal Public Health Specialist
Cllr Susan Roberts	Chair of Health Scrutiny Panel
Richard Welch	Head of Partnerships (Public Health)

Part 1 – items open to the press and public

Item No. *Title*

- 1 **Apologies for absence**
Apologies were received from Professor David Loughton CBE, Ian Darch and Chief Superintendent Richard Fisher.
- 2 **Notification of substitute members**
Sally Evans attended for Professor David Loughton CBE and Saffi Price attended for Ian Darch.
- 3 **Declarations of interest**
There were no declarations of interest made.
- 4 **Minutes of the previous meeting**
Resolved:
 That the minutes of the meeting of 18 January 2023 be approved as a correct record and signed by the Chair.
- 5 **Matters arising**
There were no matters arising from the minutes of the previous meeting.
- 6 **Health and Wellbeing Together Forward Plan 2022 - 2023**
Madeleine Freewood, Public Health Partnership and Governance Lead presented the Health and Wellbeing Together Forward Plan 2022 – 2023 and outlined future agenda items.

Members were invited to suggest items for presentation at future meetings by contacting either the Chair, Madeleine Freewood or Democratic Services.

Resolved:

 That the Health and Wellbeing Together Forward Plan 2022 – 2023 be noted.

- 7 **Health Inequalities Dashboard Deep Dive - Physical Inactivity**
Madeleine Freewood, Public Health Partnership and Governance Lead introduced the Health Inequalities Dashboard Update by outlining the current position in relation to the Joint Health and Wellbeing Strategy, how the Dashboard supported the oversight of current workstreams and research into the groups affected by physical inactivity.

Richard Welch, Head of Partnerships (Public Health) and Andrea Fieldhouse, Principal Public Health Specialist delivered the Deep-Dive presentation with a focus on the partnership work undertaken on the Physical Inactivity priority. This included an overview of the outcomes the Strategy had already successfully achieved and aimed to achieve and proposed next steps which included the launch of the Competence and Confidence Workforce Survey to gather data to establish the training and development needs of the system.

In terms of engagement, members were asked to support and engage with the Physical Inactivity needs assessment consultation as well as encourage staff within

their organisations and wider networks to complete the Competence and Confidence Workforce Survey.

It was noted that work around physical inactivity could be aligned with work around promoting healthy eating and nutrition.

It was noted that the proposed incentive schemes would be beneficial in encouraging more residents to participate in physical activity with a potential added benefit of gathering further data on what activities residents preferred. A launch and extensive promotion programme would be coming soon and further detail on this would be provided in due course.

In addition to the Competence and Confidence Workforce Survey, it was highlighted that the City Lifestyle Survey was now live, which was designed to gather information on health and physical activity habits. It was hoped this would inform the types of physical activity residents already enjoyed doing or wanted to do, as well identifying any potential barriers. Partners were encouraged to share this widely and would be provided with the link via email.

It was suggested that further consideration be given to how to utilise resources to target specific groups such as parents using the Strengthening Family Hubs or children and young people in education and school settings. It was also suggested that the impact of the cost of living crisis on disposable income be considered when promoting activities.

Resolved:

1. That Health and Wellbeing Together agree to support and engage with the Physical Inactivity needs assessment consultation
2. That members of Health and Wellbeing Together promote and advocate for staff to complete the Competence and Confidence Workforce Survey to help establish training and development needs of the system.

8 **Initial Integrated Care Strategy 2022 - 2024**

Brendan Clifford, Working for Councils in Black Country Integrated Care System presented the Initial Integrated Care Strategy 2022 – 2024 and highlighted salient points.

Thanks were extended to John Denley, Director of Public Health for support and leadership as well as the Public Health team, partner organisations and colleagues for their contributions to the Strategy, which was echoed by the Chair.

It was highlighted that further engagement events were planned to continue to develop the dialogue over time, including any feedback from patient voices. A workshop session was due to take place on 26 January 2023 and a larger scale event scheduled for March 2023, which members were encouraged to attend where possible.

It was noted that resident surveys had revealed that access to GPs and urgent care, face to face appointments and quality of care were priorities for many.

Resolved:

That the Initial Integrated Care Strategy 2022 – 2024 be received.

9 **Financial Wellbeing Strategy Progress Review**

Alison Hinds, Deputy Director of Social Care and Kate Lees, Partnership Manager delivered the Financial Wellbeing Strategy Progress Review presentation. This provided an overview of work undertaken to build an understanding of issues faced by Wolverhampton residents as a result of the cost of living crisis and how to offer support, as well as the progress of initiatives already in place.

It was highlighted that a number of interventions had been devised which included provision of advice on managing finances, support in accessing financial support and benefits and access to Community Food shops offering reduced groceries to members.

It was acknowledged that in-work poverty was also an emerging issue, which affected the demographic who were working and financially impacted by rising costs but entitled to few or no benefits. Work was already underway to understand how to tackle this.

It was suggested the Financial Wellbeing Strategy could be informed by the Physical Inactivity Strategy work as it was noted that costly gym memberships were often the first cuts made when households scaled back on spending disposable income. It was noted that promoting or providing options for the public to access free or subsidised physical activities were being explored.

The report was commended by partners, particularly the initiative providing suitable beds which was not always a well-known issue. A query was raised around whether the Warm Spaces were still being used as some residents preferred to stay in their own home. It was noted that support and advice had been made available in respect of keeping homes as efficiently warm as possible.

It was also noted that extensive work was being undertaken targeted at individuals with learning disabilities and SEND.

The face-to-face element was commended as it was recognised that not all residents have access to devices or internet.

The Community Shops initiative was commended as a thoughtful way to provide significant savings on essentials whilst retaining dignity and consumer choice. It was highlighted that the shop was open to everyone and there was no requirement to be in receipt of benefits to become a member.

In respect of Warm Spaces, it was reported that a Wolverhampton school had also been offering free use of laundry facilities and this prompted discussion on exploring other similar initiatives. It was also announced that plans were underway to introduce community chefs to the Community Shops to deliver workshops teaching residents how to cook healthy yet economical meals.

It was highlighted that the Bilston Community Shop was trialling increasing the face value of Healthy Start vouchers when redeemed in the shop, as well as stocking Healthy Start vitamins.

Professor Farzad Amirabdollahian, University of Wolverhampton raised a query around how the work would be evaluated as there was great learning potential and offered to engage in terms of how the University of Wolverhampton could support this.

The community chef initiative was commended as a helpful way to steer residents away from cheaper, less nutritious convenience foods whilst keeping within tight budgets.

Resolved:

That the Financial Wellbeing Strategy Progress Review be received.

10

Update - Alcohol Harm in Wolverhampton

Michelle Smith, Principal Public Health Specialist presented the Update - Alcohol Harm in Wolverhampton briefing note and highlighted salient points. The briefing note provided Health and Wellbeing Together with an update on the current position on alcohol harm in Wolverhampton with reference to alcohol-specific mortality. It also set out plans for addressing alcohol harm within the City, which included reducing the supply and use of alcohol and increasing pathways to treatment and recovery support services.

It was highlighted that although Wolverhampton's rate for alcohol-specific mortality were the worst in the country, other data sets showed that the successful completion rate for residents who had received drug and alcohol treatment in Wolverhampton was better than the national average.

In respect of the point around training GPs to make referrals to relevant support services if a patient presented with alcohol problems, it was queried whether there was a consistent approach and if there had been any data collected on referrals made. It was noted that a Quality Outcomes Framework Plus (QoF+) scheme existed where participating GPs would screen for alcohol harm outside of their contracted service requirements, which offered a standardised approach to assessing patients.

It was suggested it would be helpful to steer public perceptions away from confusing the recommended alcohol unit limit for recommended intake, which the UK Chief Medical Officer had reportedly stated as none.

The point was raised that the increase in alcohol intake amongst ethnic minorities was not following the same trend as at national level therefore a targeted intervention may be necessary.

In response to a query around the data presented it was confirmed that, where stated, analytics were specific to Wolverhampton and did not encompass neighbouring authorities.

Following a point raised around the availability of alcohol, including concerns of single can sales from off licences, it was confirmed that the Council, police and other relevant partners were working together with premises licence holders.

It was acknowledged that alcohol misuse was often a hidden problem in families or communities and alcohol consumption had been normalised. It was concluded that initiating open conversation around moderating alcohol consumption and removing the stigma of seeking treatment would support the reduction of alcohol-related harm.

Resolved:

That the Update - Alcohol Harm in Wolverhampton briefing note be received.

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Other Urgent Business

In response to a query around forthcoming strikes, it was confirmed that none of the planned NHS strikes directly impacted Wolverhampton services at present.