



Health and Wellbeing Together

Minutes - 22 January 2020

Attendance

Members of Health and Wellbeing Together

Councillor Jasbir Jaspal (Chair)	Cabinet Member for Public Health and Wellbeing
Emma Bennett	Director of Children's Services
Katherine Birch	Faculty of Education, Health and Wellbeing
Councillor Ian Brookfield	Leader of the Council
Station Commander Luke Buckley	West Midlands Fire Service
Tracy Cresswell	Healthwatch Wolverhampton
John Denley	Director of Public Health
Professor Steve Field CBE	Royal Wolverhampton NHS Trust
Inspector Helen Jackson	West Midlands Police
Councillor Linda Leach	Cabinet Member for Adults
Hannah Pawley	Community Safety Manager
Andrea Smith	Wolverhampton CCG
Councillor Wendy Thompson	Shadow Cabinet Member for Public Health and Wellbeing
Becky Wilkinson	Head of Adult Service Improvement

In Attendance

Madeleine Freewood	Development Manager
Sheila Gill	Healthwatch Wolverhampton
Shelley Humphries	Democratic Services Officer
Michelle James	Licensing Policy Manager
Michelle Marie Smith	Principal Public Health Specialist
Martin Stevens	Scrutiny Officer

Item No. *Title*

- 1 Apologies for absence**
Apologies for absence were received from Councillor John Reynolds, Sally Roberts and David Loughton.
- 2 Notification of substitute members**
Chief Inspector Helen Jackson attended for Chief Superintendent Andy Beard, Becky Wilkinson attended for David Watts, Andrea Smith attended for Steven Marshall and Hannah Pawley attended for Lynsey Kelly.
- 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 16 October 2019 be confirmed 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 2019 - 2020**

Madeleine Freewood, Development Manager presented the Health and Wellbeing Together Forward Plan 2019 – 2020 and outlined the planned agenda items for future meetings.

Members were invited to offer suggestions for agenda items for other meetings. It was suggested that items relating to the Workforce Development priority and the 5G Working Group had been scheduled on the forward plan, as well as an item on the Growing Well Strategy in relation to the prevention of obesity.

Resolved:

That the Health and Wellbeing Together Forward Plan 2019 - 2020 be noted.

7 **Growing Well: Children and Families Together Board Contribution to Delivery of the Joint Health and Wellbeing Strategy**

Emma Bennett, Director of Children's Services presented the Growing Well: Children and Families Together Board Contribution to the Delivery of the Joint Health and Wellbeing Strategy (JHWBS) 2018 - 2023. The report provided an overview of the activity undertaken by the Children and Families Together Board to provide assurance to the Health and Wellbeing Together membership that the 'Growing Well' priority areas identified as of strategic importance were being appropriately addressed.

It was outlined that the Children and Families Together Board, formerly known as the Children's Trust Board, sat underneath Health and Wellbeing Together as a sub-board to drive forward priorities underneath the 'Growing Well' theme of the JHWBS.

It was noted that the Children, Young People and Families Plan had been refreshed and signed off by Children and Families Together Board.

Key priorities were identified as: mental health and wellbeing, work around the prevention of the risk of obesity, reducing the number of families using bed and breakfasts as temporary accommodation, reducing school exclusions and promoting inclusion.

It was reported that, during the Children and Families Together Strategy Day held in May 2019, there had been commitment from partners to work towards co-production. A Co-production Charter had been devised which had been co-developed with children, young people and their families, the Council and its partners to pledge to work with residents to decide together how Council services should be delivered.

The Youth Engagement Strategy also known as #YES had served as a good example of co-production as an extensive consultation had taken place with young people and their families.

An update was provided in respect of the transition of the combined safeguarding boards to Wolverhampton Safeguarding Together, chaired by Sally Roberts, Chief Nurse and Director of Quality at Wolverhampton CCG. Assurance was offered to Health and Wellbeing Together members that this transition was progressing well with no significant risks identified.

The report and the work that had gone into the Youth Engagement Strategy and Co-production Charter was commended and it was agreed that children and young people were a priority for the City.

It had been highlighted that feedback from the Youth Engagement Strategy consultation conveyed the strong message that young people and their families preferred activities they could participate in independently or as a family. It was noted that the holiday scheme had been very well received and it had been reported by West Midlands Police that crime had reduced by 48% during the period in which the scheme ran.

The Co-production Charter was particularly commended by partners as it was noted that engagement and maintaining engagement was a difficult process to undertake.

As ward Councillors for Bilston, Councillor Linda Leach and Councillor Philip Page commended and offered their support to the holiday scheme and reported that it had not only been well attended in their ward area but had received very positive feedback.

It was noted that, in addition to the consultation for the Co-Production Charter, decision-making on the funding had been shared with young people and their families to agree where the funding could be allocated.

Resolved:

1. That Health and Wellbeing Together agree to endorse the City Co-production Charter for children and young people
2. That members of Health and Wellbeing Together agree to promote the Co-production Charter in their respective organisations
3. That Health and Wellbeing Together agree to support a launch event on 27 January 2020 for the Co-production Charter and Youth Engagement Strategy, #YES
4. That the refreshed Children, Young People and Families Plan (2015 – 2025) be noted.
5. That the outcome and recommendations of the Youth Engagement Strategy, #YES, be noted.

8 **Substance Misuse Partnership Update**

Michelle Smith, Principal Public Health Specialist presented the Substance Misuse Partnership Update report and highlighted salient points. The report provided an outline to Health and Wellbeing Together of the intended approach to tackling substance related harm, which built upon the Board's previous commitment to the alcohol harm reduction agenda.

It was noted that alcohol misuse had been agreed as a priority within the Living Well theme of Wolverhampton's Joint Health and Wellbeing Strategy (JHWBS) 2018 – 2023.

A short presentation was also delivered which provided an overview of the substance related hospital admissions and mortality rates as well as drug prevalence in a local context and outlined the proposed priorities for the City.

It was noted that alcohol dependence within the City was higher than the national average however it was highlighted that, in terms of the recovery of people receiving support, Wolverhampton had been placed in the top quartile nationally.

It had been noted that the sizable and complex issues of alcohol and drug dependency could not be tackled without a joined-up approach, therefore the Substance Misuse Partnership had been established in July 2019 with a view to developing a new Substance Misuse Strategy. It was highlighted that an alcohol misuse strategy had previously been in place in 2012, however the proposed strategy was the first to include drug misuse as well. It was suggested that an update be provided to Health and Wellbeing Together in future.

Of the priorities listed for the City, four key areas were touched upon and a number of points and statistics were highlighted.

To improve Outcomes in Housing, Employment and Mental Health:

It was highlighted that whilst successfully undergoing treatment, 85 residents had been supported into gaining employment and 129 had been assisted in resolving housing problems.

To reduce Drug-related Deaths:

It was reported there were plans to widen the availability of the synthetic drug naloxone, used to counter the effects of overdose. It was noted that work was being undertaken to introduce an early warning system to raise the alert to bad batches of drugs entering the market. It was reported that the concept of establishing an inquiry panel to investigate and learn from drug-related deaths was being explored.

To reduce the impact of parental substance misuse

It was reported that, in Wolverhampton over a three-year period, 1450 children had a parent receiving treatment for alcohol dependence. Based on prevalence data there was an 82% unmet need for alcohol dependence. On this basis there were many more people to engage into treatment, many of whom would be parents. It was reported that 1159 children had a parent in treatment for an opiate dependency, given an unmet need of 55% there were many people and families who should be engaged with treatment and recovery services. It was noted that these figures appeared stark however they were in line with UK national figures.

To reduce the density of alcohol licensed premises

Work was being undertaken in partnership with responsible authorities in terms of representations to new premises licence applications as well as an update in the Wolverhampton Statement of Licensing Policy.

Michelle James, Licensing Policy Manager delivered a presentation on the revised Statement of Licensing Policy which had been approved at Statutory Licensing

Committee on the morning of 22 January 2020. It was reported that the density of licensed premises was significantly higher than the national average and five Cumulative Impact Zones (CIZs), where the combined impact of outlets was highest around Wolverhampton, had been implemented.

Applications for premises licences within these zones relied upon responsible authorities or other individuals making representations against an application or variation applications based on the premises' likelihood of undermining one of the licensing objectives.

It was noted that one of the changes to the Policy included a matrix approach to licensing decision-making within the City. This matrix outlined the types of premises which would be less likely to have an impact upon the existing premises located within the CIZs.

The refreshed Policy also introduced a Special Consideration Area for premises which fell around the curtilage of the CIZs, but may still impact upon these areas, with fewer restrictions on premises types than within the CIZs.

Applications for non-alcohol-led premises or premises considered more beneficial for certain areas, such as restaurants, theatres or cafés, were considered more favourably than those that were considered to cause harm, such as off-licences and takeaways.

It was noted that many of these restrictions were not applicable within the heart of the City Centre as a diverse offer of venues would be expected in this area.

The application of the matrix approach relies upon relevant representations being received for applications and variations.

It was agreed that the risks associated with substance misuse could potentially affect everyone and the extensive work undertaken was commended. The positive effect of working within a partnership was highlighted as well as the importance of working with premises licence holders in respect of reducing alcohol-related harm.

A concern was raised around the length of time taken for GPs to refer individuals to other services following a visit to seek treatment for a substance dependency. It was thought that the associated problems could continue or escalate during the wait period, possibly resulting in a risk to the individual and there were concerns around the impact on their family as well. Reassurance was offered that treatment could be accessed direct through Recovery Near You (treatment and recovery service). It was agreed that support around the family was equally important as the support around the individual. It was noted that there was a potential to include a pathway through Primary Care. It was agreed that these suggestions be taken on board.

It was added that work was being done in the Wolverhampton CCG around specialist workforce being introduced and there was potential with the introduction of social prescribing and signposting individuals to support networks and services.

It was suggested that work could also be done following alcohol or substance related hospital admissions.

It was clarified that responsible authorities would be mindful not to appear to be influencing residents to make representations however it was equally important that extensive engagement was carried out to enable communities to make decisions around the types of premises licenses granted in the area.

In respect of county line issues and drug use, it was noted that it had been a challenge to understand the direction of travel of drugs. It had been noted that many problems with drug misuse had occurred within affluent areas.

It was reported that a monitoring scheme had been implemented by Michelle Smith, Principal Public Health Specialist and her team, which provided colour-coded needles to pharmacies offering free needle and syringe programmes in Wolverhampton. Each colour represented a different quadrant of the City to identify which areas discarded needles had originated from. It was noted that it would be interesting to see how the journey of these needles was plotted out.

It was noted that West Midlands Fire Service regularly came across needle litter, which posed a risk to crewmembers and it was agreed that a map showing the colour-coded quadrants would be shared with the service representative to cascade to crewmembers.

Resolved:

1. That Health and Wellbeing Together agree to endorse the Substance Misuse Partnership's approach to tackling substance related harm.
2. That Health and Wellbeing Together agree to endorse the upcoming Substance Misuse Strategy produced by the Substance Misuse Partnership.
3. That Health and Wellbeing Together receive an annual progress report from the Substance Misuse Partnership.
4. That the quadrant map for the colour-coded needles be provided to West Midlands Fire Service.

9

Healthwatch Wolverhampton Annual Report 2018 - 2019

Tracy Cresswell, Healthwatch Wolverhampton Manager presented the Healthwatch Wolverhampton Annual Report 2018 - 2019 and highlighted salient points. The report provided an overview of progress made against Healthwatch Wolverhampton's statutory functions and the impact of the delivery of Healthwatch services in the City.

It was noted that the feedback around hospital discharge and review had been taken on board by Adult Services.

It was highlighted that the Healthwatch Wolverhampton service had been shortlisted for the Healthwatch Network Award for Championing Diversity and Inclusion following the extensive work undertaken to improve the wellbeing of the deaf community. This was commended as to be shortlisted from a large number of services was an achievement.

It was raised that it had been disappointing that no response had been received from New Cross Hospital in terms of the feedback and recommendations provided following the unannounced visit to Ward A12 of New Cross. It was noted that a 10-day response deadline had been set, which was extended if required, and that usually 9 out of 10 providers offered a response to their feedback.

[NOT PROTECTIVELY MARKED]

The annual report and work undertaken by Healthwatch was commended.

Resolved:

That the Healthwatch Wolverhampton Annual Report 2018 - 2019 be received.