

WEST NORTHAMPTONSHIRE HEALTH & WELLBEINGBOARD
Minutes of the meeting held on 28th September 2023 at 1.00 pm
Venue: Council Chamber, The Forum, Towcester

Present:

Councillor Matthew Golby (Chair)	Cabinet Member for Adults, Health and Wellbeing, West Northamptonshire Council
Anna Earnshaw	Chief Executive, West Northants Council
Chief Superintendent Rachael Handford	Northamptonshire Police
Cllr Fiona Baker,	Cabinet Member, Childrens and Families, West Northants Council
Hannah Scanlon - substitute	Office Manager, LMC
Michael Jones	Divisional Director, EMAS
Miranda Wixon	Chair VCSE Assembly
Naomi Eisenstadt	Chair, NHS Northamptonshire Integrated Care Board
Polly Grimmett - substitute	Director of Strategy, Northampton General Hospital
Sally Burns	Director of Public Health, West Northants Council
Sean Carter	Strategic Manager for Safeguarding and Quality Assurance, Northamptonshire Childrens Trust
Stuart Lackenby	Deputy Chief Executive, West Northants Council
Toby Sanders	Chief Executive, NHS Northamptonshire Integrated Care Board

Also, Present

Alex Copeland, Chief Executive, Hope Centre
 Annapurna Sen, Public Health Physician Health Protection, West Northants Council via Teams
 Cheryl Bird, Health and Wellbeing Board Business Manager
 Chloe Gay, Public Health Specialist, West Northants Council
 Chris Holmes, Chief Executive, Northamptonshire Sport
 Deborah Mbofana, Public Health Principal, West Northants Council
 Declan Ryan, Senior Lecturer Exercise Physiology, University of Northampton
 Emilie Vasasour, LAP Project Lead
 Jackie Brown, Northamptonshire Sport
 Julie Curtis, Assistant Director PLACE Development, West Northants Council
 Justine Horrocks, LAP Project Lead
 Michelle Grimwood, LAP Project Lead
 Peter Cox, Head of Sport Leisure and Culture, West Northants Council
 Peter Jones, Chair, Northamptonshire Sport
 Rachael Byrne, LAP Project Lead
 Sarah Hayle, Chief Executive, Community Law Service
 Scott Bradley, Head of Science, University of Northampton

55/23 Apologies

Carella Davies, Chief Executive, Daventry Volunteer Centre
Cllr Jonathan Nunn, Leader, West Northants Council
Cllr Wendy Randall, Labour Group Leader, West Northants Council
Colin Foster, Chief Executive, Northamptonshire Childrens Trust
Colin Smith, Chief Executive, LMC
David Maher, Deputy Chief Executive, Northamptonshire Healthcare Foundation Trust
David Peet,
David Smart, Chair Northampton Health and Wellbeing Forum
Dr Andy Rathborne, Primary Care Network
Dr Philip Stevens, GP, Chair Daventry and South Northants GP Locality
Dr Santiago Dargallonieto, Chair, Northampton GP Locality
Heidi Smoult, Chief Executive, Northampton General Hospital
Professor Jacqueline Parkes, Professor in Applied Mental Health, University of Northampton
Rebecca Wilshire, Director of Childrens Services, West Northants Council
Robin Porter, Assistant Chief Fire Officer, Northants Fire and Rescue
Russell Rolph, Chief Executive, Voluntary Impact Northamptonshire

56/23 Notification of requests from members of the public to address the meeting

None Received.

57/23 Declaration of members' interests

None received.

58/23 Chairs Announcements

David Peet will replace Nicci Marzec as the Office of Police Fire Crime Commissioner representative.

59/23 Community Training Partnership

The Chief Executive, Hope Centre introduced the formal launch of the Community Training Partnership (CTP). This partnership is a collaboration between West Northants Council (WNC) and Community Law Services. The CTP will host courses aimed at front line workers, helping those in the community who may be struggling or facing hardship.

The Chief Executive Community Law Service advised the CTP is delivering bite sized virtual sessions, with 10 sessions delivered so far and 18 more scheduled before Christmas. Currently 370 people have signed up through the CTP portal. The courses cover a wide range of topics such as mental health, substance misuse, debt advice and benefits. 100% of attendees have rated the tuition as excellent or good, 100% said the courses were valuable to their job and 89% said it improved their ability and confidence in making effective referrals.

RESOLVED that all are asked to consider the training needs of their front-line workers and promote the CTP across West Northamptonshire.

60/23 Minutes and actions from the previous meeting 27th July 2023

RESOLVED that:

- **The minutes from the previous meetings held on the 27th July were agreed as an accurate record.**
- **Findings from the Homelessness Needs Assessment are awaiting final approval before being circulated to the Board.**

61/23 Better Care Fund Quarterly Report

The Deputy Chief Executive advised there is a statutory requirement for the Better Care Fund (BCF) to submit performance against the BCF Plan on a quarterly basis through this Board. The submission template has only just been received and must be submitted before the 31st October. The Deputy Chief Executive requested that delegated authority be given to the Chair to review the performance report on behalf of the Board, before submission by the 31st October. Currently submission dates for performance against the BCF Plan do not correlate with Board meetings dates, these will be reviewed for 2024 to try and get an alignment.

RESOLVED that:

- **The Board agreed to give delegated authority to the Chair to review the BCF Quarterly Performance Report before submission.**
- **The BCF Quarterly Performance Plan to be presented at the next meeting.**

62/23 Live your best life domains: Opportunities to be fit well and independent:

The Chair advised the Live Your Best Life (LYBL) thematic theme for this meeting is Opportunities to be fit well and independent, focusing on the active lives element of this ambition.

The Public Health Principal gave an overview of physical activity and highlighted the following:

- Physical activity is not just about gyms and leisure centres, it incorporates everyday activities such as gardening, housework and walking. Creating active lives is about getting people more active, as 1-6 deaths can be related to a person being inactive.
- The benefits of undertaking physical activity can also include community cohesion, social networks, volunteering, feeling of belonging to the community and increasing levels of social trust.
- National guidance is for adults to have 150 minutes moderate exercise or 75 minutes vigorous intensity activity each week. For children it is an average of 60 minutes a day physical activity.
- 60.4% of the adult population across West Northamptonshire completes 150 minutes+ activity a week, 10.7% are fairly active 30-149 minutes a week, 28.9% of individuals undertake less than 30 minutes activity a week.
- Although trends for physical activity for West Northamptonshire have increased, they are still below the national and regional averages. Activity rates for children are above the regional and national averages.
- People from low-income households are 20% less likely to be active than those from higher income households.
- Over 50% of adults aged 75+ are inactive, which is a challenge due to an ageing population. It is important to encourage physical activity early in life with the aim that this will continue throughout the life course, helping to achieve the best possible health and

wellbeing outcomes for older people and supporting them to stay independent for as long as possible.

- Disabled adults are almost twice as likely as non-disabled people to be physically inactive. People from ethnically diverse communities are half as likely to be active as those from white British backgrounds.
- Promotion of physical activity as a positive behaviour, impacts most of the LYBL ambitions, as well as supporting interventions towards emerging priorities across the Local Area Partnerships (LAPs).
- Local champions can be upskilled to deliver activities and clubs in the community, which could help reduce anti-social behaviour. Well Northants Community Workers can assist with identifying local champions and Northamptonshire Sport (NSport) train volunteers as well as assisting in the building of networks and community clubs in deprived areas.
- There are challenges about how to work together to share outcomes.
- A Physical Activity Pathway review is being conducted in collaboration with NHS Northamptonshire Integrated Care Board.

The Chief Executive NSport gave an overview of the Active Lifestyles Framework and highlighted the following:

- NSport is one of 42 active partnerships established across the country by Sport England with the aim to get more people active. NSport became a charity in 2020.
- United in Movement, is a 10 year strategy launched by Sport England in 2021 and places inequalities at the heart of Sport England's strategic view. Using a systemic PLACE based approach from the ground up, working with local communities to create the interest in physical activity at the heart of communities.
- The Department for Culture Media and Sport have released their strategy, 'Get Active'. This Strategy concentrates on groups in society that need additional help and support, with more resource shifted towards these cohorts to help overcome the barriers they face in being active. Sport England are required to allocate a third of their budget to working with these groups, with a target being set for 2.5 million adults and 1 million children being moved from inactive to active by 2030.
- The Active Lives Survey is commissioned annually by Sport England where 180k people nationally, including 1k in Northamptonshire are surveyed on their physical activity.
- The Active Lifestyles in Northamptonshire Framework is a countywide strategy and will be facilitated and driven by NSport, with shared ambitions and measures to track progress of the strategy.
- The shared ambition of the Framework is that by 2028, healthy active lifestyles will be an integral part of all people's lives in Northamptonshire, irrespective of background, race, age, gender or geography.
- The Framework highlights 6 enablers of physical activity through a life course, as activity in younger years, might not be suitable for when people are older.
- There is good work taking place in schools and early years settings to encourage activity.
- A good environment will help make activity choices easier such as cycle lanes, tracks, parks, leisure centers with bespoke easy to access opportunities that suit current lifestyles, as circumstances in people's lives are constantly changing.
- Integrating physical activity into services, systems and places will make it easier to be active on a daily basis, as well as communicating consistent messages about the benefits of an active lifestyle to enable sustained behaviour change.

The Head of Sport, Leisure and Culture gave an update on the development of the WNC Active Lives Strategy and highlighted the following:

- The core purpose of developing this strategy is to increase activity in residents, with the initial challenge to ensure this is connected to the countywide Framework.

- A working group will start the mapping process before the co-production work begins. Part of the initial work will be to look at mitigating the fear that physical activity is unachievable for some people.
- There is a need to have safe and clean streets, as well as accessible green spaces to encourage physical activity.
- A wider determinants of health 'Active Lives' workshop was held including representatives from Public Health and Communities and Opportunities Teams. At the workshop attendees were asked 'how can we connect on a personal level and on a workplace level to create more active lifestyles;'. The key messages from the workshop were that active lives plays a key role in the shaping of place, with a need to create more opportunities for people to be active. The workshop discussed the assets and infrastructures already in place, and the ability to improve on these and create better spaces for people to be more active, including improved engagement.
- The aim of the Active Lives strategy is to combine the work partners are completing rather than working in silo, being underpinned by an evidence base.
- The aim is to reach people who don't understand the benefits of increased physical activity and create organisational behaviour change within WNC, by influencing system change and connecting how partners work together.

The Board discussed the presentations and the following was noted:

- Concerns were raised about how sport is taught in schools, as not all children enjoy these experiences and could dissuade children from participating in physical activities during their life course.
- Providing information on standing and sitting for long periods of time can help with the promotion of being active and mobile to live happier healthier lives.
- There is a need to consider how activity can ease social isolation and loneliness. Carers are a big support network who can encourage those they care for to be more active.
- Integrated Care Systems have a 4th aim 'helping the NHS to support broader social and economic development'. There is a need to consider this more ambitiously about how Board members as employers can support their workforce to become more active during and out of work.
- There is a need to maximise opportunities to enable patients within local hospitals to undertake activities to build their strength, as well as those in communities with long term conditions where physical activity could help manage their condition.
- The VCSE Assembly are creating a Sports Thematic led by the Chief Executive NSport, with the aim for this work to be embedded into the LAPs.
- Organisations will need to consider how they can contribute to each element of the Framework.

The Chief Executive NSport gave an overview of NSport's PLACE approach and highlighted the following:

- Through data and intelligence mapping 7 hotspots were identified across Northamptonshire, NSport have a place lead working 2 days a week in each hotspot.
- This is an asset based approach with 4 elements, insight, identify, connect and mobilise, working with communities to build trust, suggesting ideas and opportunities for these communities.
- Measurement of success is via a Hotspot Maturity Matrix, whether residents were feeling more confident about physical activity, and are more clear about how they could be more active in community areas.
- Some of the learning is understanding the characteristics of these local areas, working in smaller population areas of between 4k-20k and to recruit local champions.
- The next steps is to continue to work with the existing hotspots, consider new hotspots and how they can align with other projects such as Well Northants.

The Senior Lecturer Exercise Physiology gave an overview of the Active Quarter and highlighted the following:

- The Active Quarter started as a partnership of early adopters, to encourage residents to use the local green spaces and is currently focusing on the South of Northampton Town centre.
- The aim of the Active Quarter is to bring residents together to enjoy outdoor space, by using a partnership approach to understand the mutual benefits for health, economic growth, tourism and education
- Public Health England recognise the value of green space in local communities for health and wellbeing. A sense of belonging and pride in the community is also crucial to improved wellbeing.
- Access needs to be prioritised to those communities that are experiencing unequal access.
- The World Health Organisation has a Urban Green Spaces brief for action, which contains recommendations for a whole system approach, ensuring that green space feeds into all services.
- There is a need to understand the needs and wants of residents in designing interventions and green spaces, which will be more sustainable when incorporating stakeholders from different sectors.
- Natural England (2023) Green Infrastructure Framework provides a process journey for local authorities to follow, which the Active Quarter partnership is using to guide strategic planning.
- Community and elected member partnerships are being built upon to ensure there is 'end-user' representation, a strategy for the Active Quarter will be co-produced, so decision-making is informed by community wants and needs.
- The aim is to focus on the top 20% most deprived communities, ethnic groups, women and girls and those suffering disabilities who tend not to use green spaces and live within a 15 minutes' walk of a green space.
- There are the following ambitions:
 - PLACE - the core infrastructure within the area, looking at the physical access to green spaces such as trails, tracks and rights of way; cycling and walking; seating; use of the lakes. A 3km walking route has been created in Delapre Abbey in conjunction with NSport funded by University of Northampton (UoN) as a research project to help local people to explore their green spaces. More table tennis tables and benches have been added at UoN Waterside Campus. Audits have been completed around the Brackmills estate to assess access for cycling and walking.
 - Identity - communication, marketing, information and messaging required to create an identity, perception, sense of civic pride and shape a place. £5k of funding has been received to develop a website for the Active Quarter. There is a need for residents to get involved and have a shared responsibility in developing green spaces within the town. A map has been developed to help identify what opportunities that are available in the area.
 - People - the way people use the place and engage in activities set up within the area. The Thriving People Social Prescription project has been developed at Delapre Abbey funded by Arts Council England. The National Academy for Social Prescription and Natural England are using the Delapre Wellbeing Hub as an exemplar of sustainable partnership working to deliver programmes. UoN conducts interviews with those visiting Upton Country Park, Hunsbury Hill and Delapre Abbey to find out why they used these spaces. There will be an online consultation around cycling and walking social prescription programme launched once the footpaths are upgraded. The findings from the consultation will be fed back into the community. There will be a co-produced 'Thriving Communities' Social Prescribing project in partnership with the General Practice Alliance.
- The next steps are to:

- Redevelop 19th Century stable block at Delapre Abbey to a Wellbeing Hub. Northamptonshire Community Foundation are establishing a Active Quarter Fund that local groups can bid into to support local projects that promote activity, wellbeing and connecting communities.
- Develop a suite of research that provides Active Quarter partners with evidence base intelligence.
- Align the Active Quarter with the local Integrated Care System, Health & Wellbeing Forums and LAPs.
- Align the Active Quarter with WNC strategic plans, such as Sport and Leisure, Community Safety and Community Engagement, Regeneration, Economic Growth, Parks and Open Spaces, and Highways.

RESOLVED that:

- **An update on being active will be brought back to a future meeting.**
- **The Board endorsed 'Move Northamptonshire' as the key system-wide Framework for active lifestyles, physical activity and sport across the county.**

63/23 Joint Health and Wellbeing Strategy

The Director of Public Health gave an update on the Joint Health and Wellbeing Strategy (JHWBS) and highlighted the following:

- The Health and Care Act 2022 requires all Health and Wellbeing Boards to develop and deliver a Joint Local Health and Wellbeing Strategy.
- The engagement process in development of the Strategy has included elected members sessions, WNC Cabinet, communities and residents.
- Feedback from the final public consultation has been incorporated into the Strategy, making the document more accessible and strengthened the references to active travel.
- The Strategy articulates how this Board will improve the health and wellbeing of residents in West Northamptonshire, as well as focusing on health inequalities.
- The Strategy aligns with the Integrated Care Northamptonshire (ICN) Strategy, and NHS Northamptonshire 5 Year Forward Plan and how this can be delivered at a place level by focusing on the wider determinants of health.

RESOLVED that:

- **Delivery plans for the Joint Health and Wellbeing Strategy to be presented at the next meeting.**
- **The Board endorsed the final Joint Health and Wellbeing Strategy.**

64/23 Local Area Partnership Project Leads

The Assistant Director PLACE Development advised 4 LAP Project leads and 2 LAP administrators are now in post, with one further LAP Project lead to start in October. The LAP Project Leads will create a delivery plan for each LAP to understand the need in their communities and identify health inequalities which will underpin the JHWBS and ICN Strategy. Chatty Cafes are now being introduced into LAP areas, with some walking groups becoming a spin off from some of these.

RESOLVED that the Board the Board noted the update.

65/23 Health Protection Committee Annual Report 2022/2023

The Public Health Physician Health Protection gave an update on progress of the Health Protection Committee 9 strategic priorities agreed in 2022 and highlighted the following:

- Immunisation
 - There has been decline in childhood vaccinations including seasonal flu vaccination in 2- and 3-year-olds, preschool boosters, and HPV in 12–13-year-old females, which were below national targets.
 - Seasonal flu vaccination local coverage reduced in all adult cohorts apart from pregnant women. In addition, Shingles and all seasonal flu adult cohorts, except over 65s, were below the national targets.
 - The system will be supported to increase uptake in the childhood and adult immunisation programmes across the county area, maintaining COVID-19 vaccination rates, as well as a measles elimination plan.
- Screening
 - There was a drop in the take up of cervical screening amongst 24–49-year-olds.
 - Cervical and Breast screening did not meet the national targets.
 - The uptake of Bowel screening dropped, but has met the national target.
 - AAA and diabetic eye screening are below the national targets.
 - The system will be supported to increase uptake in the screening programmes across the county area.
- Infection, Prevention and Control
 - There was an increase in C Diff rates in both Acute hospitals.
 - There was a small increase in Syphilis diagnosis rate during the year.
 - The System will be supported to:
 - ❖ Continue delivery of consistent IPC compliance, risk assessment and training in high-risk settings. Care homes, nursing homes and SEND schools.
 - ❖ Reduce rates of C Diff in both Acutes.
 - ❖ Contribute a further reduction in the diagnosis rates of Syphilis.
 - ❖ Contribute to initiatives and measures that support the reduction of COVID-19 cases, including good COVID-19 vaccination uptake.
- Tuberculosis (TB)
 - There was a reduction in starting timely treatment within 4 weeks for TB.
 - The number of TB cases offered HIV test is lower than the national average.
 - The system will be supported to:
 - ❖ Improve proportion of people starting treatment within 4 months of diagnosis.
 - ❖ Deliver the countywide latent screening programme to people from high-risk countries who have lived in the county for the last 5 years.
- Blood Borne Viruses
 - HIV testing rates are lower than the national average. Late diagnoses of HIV is above the national and regional averages.
 - There was a rise in hospital admissions due to Hepatitis B related liver disease/cancer, and a reduction in people entering drug misuse treatment accepting Hepatitis B vaccination.
 - Increase in Hepatitis C (Hep C) rates, and mortality rate from Hep C related liver disease / cancer remains higher than the regional and national averages.
 - The system will be supported to:
 - ❖ Maintain improvements to HIV testing and diagnoses to prevent the increase in late diagnoses rates and to support achieving regional and national averages.
 - ❖ Improve Hepatitis B vaccination uptake in people under substance misuse treatment.
 - ❖ Support work that contributes to reducing hospital admissions due to Hepatitis B and Hepatitis C

- ❖ Prioritise follow up care of people newly diagnosed with Hep C to contribute to reducing mortality rates from Hep C related disease/cancer
- ❖ Reduce rates of Hep C.
- Environmental Health
 - Mortality due to air pollution is higher than national and regional averages.
 - The system will be supported to carry out an air quality health needs assessment to identify issues in poor air quality areas.
- Outbreak Management
 - The System will be supported to:
 - ❖ Update and localise the systemwide outbreak management plan which are sufficiently resourced.
 - ❖ Review the MoU between LHRP partners and the local authorities, to include the management of cross border incidences.
- Training and Campaigns
 - Continue to work with organisations and groups representing high-risk groups, delivering education and media campaigns that improve immunisation and screening across the system, and deliver professional updates to the workforce.
- Addressing Health Inequalities
 - Continue to address inequalities by engaging with groups with poor health and social outcomes in deprived areas, high risk populations and those experiencing inaccessibility.

The Board discussed the update and the following was noted:

- Administering of COVID19 and flu vaccinations have been brought forward due to the rise in COVID19 cases. There will be a wellbeing campaign to promote the uptake of vaccinations and the Outbreak Management Plan is being refreshed. Infection Prevention Control are working with lots of different settings to minimise risk.
- There are some highly urbanised areas of West Northamptonshire where there are concerns about poor air quality.
- Work is taking place in Northampton Central LAP on high rates of CPOD rates.

RESOLVED that the Board noted the progress against the priorities endorsed the recommendations contained within the Health Protection Committee Annual Report.

66/23 Any Other Business

The Northamptonshire Care Record has now gone live, which will enable information to be shared appropriately with clinicians in different settings across the county.

There being no further business the meeting closed at 3.30 pm.

West Northamptonshire Health and Wellbeing Board Action Log				
Action No	Action Point	Allocated to	Progress	Status of Action
Actions completed since the 28th September 2023				
Action No	Action Point	Allocated to	Progress	Status of Action
270723/02	Feedback from the Homelessness Needs Assessment to be circulated to the group	Rhosyn Harris	On the agenda 11th Dec	Completed
280923/01	The BCF Quarterly Performance Plan to be presented at the next meeting.	Ashley Leduc	On the agenda 11th Dec	Completed
280923/02	Delivery plans for the Joint Health and Wellbeing Strategy Delivery Plan to be presented at the next meeting.	Sally Burns Karen Spellman	Circulated 29th September	Completed
280923/03	Presentations from the meeting to be circulated to the Board	Cheryl Bird	Circulated 29th Sept	Completed