

**WEST NORTHAMPTONSHIRE HEALTH & WELLBEINGBOARD**  
**Minutes of the meeting held on 8<sup>th</sup> September 2022 at 1.00 pm**  
**Venue: Francis Crick House, Moulton Park, Northampton, NN3 6BF**

Present:

Councillor Matthew Golby (Chair)	Cabinet Member for Adults, Health and Wellbeing, West Northamptonshire Council
Sally Burns	Interim Director of Public Health, West Northants Council
Anna Earnshaw	Chief Executive, West Northants Council
Naomi Eisenstadt	Chair Designate, Northamptonshire Integrated Care Board
Colin Foster	Chief Executive, Northamptonshire Childrens Trust
Michael Jones	Divisional Director, EMAS
Jean Knight	Chief Operating Officer, Northamptonshire Healthcare Foundation Trust
Stuart Lackenby	Deputy Chief Executive, Director for Adult Social Services, West Northants Council
Professor Jacqueline Parkes	Professor in Applied Mental Health, University of Northampton
Wendy Patel	Healthwatch Northamptonshire
Cllr Wendy Randall	Opposition Leader, West Northants Council
Russell Rolph	Chief Executive, Voluntary Impact Northamptonshire
Toby Sanders	Chief Executive, Northamptonshire Clinical Commissioning Group
Dr Santiago Dargallonieto	Chair, Northampton GP Locality Board
Colin Smith	Chief Executive, Northamptonshire Local Medical Committee
Dr Philip Stevens	Chair, Daventry and South Northants GP Locality

Also, Present

Cheryl Bird, Health and Wellbeing Board Business Manager

Katie Brown, Assistant Director Safeguarding and Wellbeing Services, West Northamptonshire Council  
Dionne Mayhew, Director of Communications, Northamptonshire Healthcare Foundation Trust  
Vicki Rockall joined via Teams, Head of Community Safety and Engagement, West Northamptonshire Council  
Ashley Le Duc, Assistant Director Quality and Performance, West Northamptonshire Council  
Rhosyn Harris, Consultant in Public Health, West Northamptonshire Council

### 29/22 Apologies

Chris Kiernan, Director of Childrens Services, West Northants Council  
Dr Andy Rathborne, Primary Care Network  
Assistant Chief Constable Ashley Tuckley, Northamptonshire Police  
Alan Burns, Chair University Group of Hospitals, Northamptonshire  
Neelam Aggarwal-Singh, BAME representative  
Cllr Fiona Baker, Cabinet Member for Children, West Northamptonshire Council  
Dr Shaun Hallam, Assistant Chief Fire Officer, Northants Fire and Rescue  
Michael Jones, Divisional Director, EMAS  
Dr Philip Stevens, Chair Daventry and South North Locality Board  
Dr David Smart, Chair Northampton Health and Wellbeing Forum  
Nicci Marzec, Director of Prevention, Office of Police, Fire and Crime Commissioner

### 30/22 Notification of requests from members of the public to address the meeting

None received.

### 31/22 Declaration of members' interests

None received.

### 32/22 Chairman's Announcements

As part of the ongoing work to support delivery of PLACE the Board are asked to endorse as Board members, Nicci Marzec, representative from the Office of Police, Fire and Crime Commissioner and Dr David Smart as Chair of the Northampton Health and Wellbeing Forum.

There are some changes to Board membership:

- Wendy Patel is replacing Professor Will Pope as the Healthwatch Northamptonshire to the Board
- Dr Santiago Dargallonieto is replacing Dr Darin Seiger as the Northampton Locality Board.
- Professor Jacqueline Parkes will be replacing Nick Petford as the University of Northampton representatives.

**RESOLVED that: representatives from the following organisations are co-opted to membership of the Board:**

- **Office of Police Fire Crime Commissioner**
- **Chair of the Northampton Health and Wellbeing Forum**

### 33/22 Minutes from the Previous meeting 7<sup>th</sup> June 2022

**RESOLVED that: minutes from the previous meeting held on the 7<sup>th</sup> June 2022 were agreed as an accurate record.**

### 34/22 Action Log

The Board reviewed the actions from the previous meeting:

- The Prevention Concordat be circulated to the Board. **Completed, this has been circulated to the Board.**
- The detailed spend for individual DFG grants be circulated to the Board. **The Director of People to follow up this action with Chris Stopford.**

### 35/22 Better Care Fund 2022/2023

The Chair advised Health and Wellbeing Boards have a statutory duty to endorse a Local Better Care Fund (BCF) Plan before submission. The Assistant Director Quality and Performance and Chief Executive West Northants Council gave the Board an overview Northamptonshire BCF Plan 2022/2023 and highlighted the following:

- The Integrated Care Across Northamptonshire (iCAN) collaborative is being brought into the joint funding arrangements.
- NHS England requested some changes be made to the BCF plan, which are currently being actioned. These were around evidence for the aspirations about reducing hospital admissions and reducing length of stay in hospital. The metrics are to be included from when we started and what the numbers are, also inequalities in the core 20+ national plan to be referenced specifically in the plan.
- The current plan does not include Age Well funding as this is paid directly to GPs, but the iCAN is aligned to Age Well and included as part of the discussion about future plan for the Age Well Programme. The Age Well funding could underpin work in the iCAN collaborative.
- The aim of this plan is provide better outcomes for people, focusing on improvements with hospital discharge pathways, becoming smoother which will provide better outcomes for people and the provide the ability to remain independent for longer
- The Northamptonshire BCF arrangements have historically been a transactional relationship between partners, by combining the iCAN Collaborative and BCF there will be a genuine pooling of resources.

The Board discussed the item and the following was noted:

- Northamptonshire is an outlier for stranded and super stranded patients and there is a need to keep a clear focus on the discharge work. A core purpose of this Board is to consider how the BCF can help address those challenges.
- The BCF as a mechanism to drive change and there are performance indicators that outline our aspirations on preventative work and to address the issue with hospital discharges.
- When the BCF end of year performance report is presented to the Board, there is a need to understand why metrics may not have been met and to challenge schemes that may be underperforming to assess whether they are still suitable in order to drive improvement.
- Primary Care Networks (PCNs) need to have more occupational therapists.
- Age Well has been very successful in stopping crisis escalating at the time of referral.

**RESOLVED that the Board:**

- a) **Give delegated authority once the agreed amendments are made and reviewed by NHS England to the Chair and Director of People to sign off the BCF Plan on behalf of the Board.**
- b) **Agreed for an agenda item at the next meeting to discuss the current position, including data, the impact on schemes and what more could be completed.**
- c) **Note that detailed plans have been submitted to NHS England for moderation.**
- d) **Note that West Northamptonshire Council and North Northamptonshire Council have undertaken a review of the schemes to better align the BCF to the Integrated Care Across Northamptonshire (iCAN) programme and these proposals have been agreed with Northamptonshire Integrated Care Board.**
- e) **Note that the mechanism for paying the iCAN delivery partner will be via the BCF pool, however the funding of those payments will need to be matched by corresponding income from constituent partners to pay the delivery partner against agreed milestones.**

36/22 Health Equality Grant

The Chief Executive of Voluntary Impact Northamptonshire (VIN) gave an overview of the Health Equality Grant and highlighted the following:

- VIN has been working closely with NHS Voluntary Partnerships Team and the National Lottery to secure an Integrated Care System (ICS) health equality grant of £448k for Northamptonshire over the next 3 years, with the aim to embed the voluntary sector into the ICS.
- VIN is the broker and project manager of the grant, and the grant will be ran by an oversight group comprising of voluntary sector statutory organisations.
- The grant will enable the voluntary sector to work more closely with the Directors of PLACE in West and North Northamptonshire Councils, and to complete more engagement with communities where voluntary sector input is required.
- NHS guidance suggests there should be a Memorandum of Understanding (MoU) between the ICS and voluntary sector which highlights a series of responsibilities in the way we communicate with each other.
- This grant will be presented to the NHS Northamptonshire Integrated Care Board at a future date.
- This grant will make a huge difference with the support the voluntary can give the emerging Local Area Partnerships (LAPs), and contains funding to mobilise the voluntary sector to help engage with communities
- The Outcomes Framework should not only be driven by data, but also include lived experiences told to the voluntary by local communities.
- The measure of social return on investment is still to be developed, with a process of social auditing or accounting to be adopted by the voluntary sector and statutory partners.
- The Community Engagement Framework, is not just about asking the question it is also so what happens next. LAPs will be able to tailor services for communities and there is a try to analyse the social impact these services created.
- Thanks were extended to Julie Curtis, Sally Burns and Katie Brown for their support with in negotiating with the National Lottery.

The Board discussed the item and the following was noted:

- There is an ambition within the emerging Outcomes framework for people to be accepted and valued for who they are, which will be difficult to measure, it is important collectively to work out how this can be achieved.
- Professor Richard Hazenberg is Director of the Institute of Social Impact and Innovation Measurement at the University of Northampton and be useful.
- The MoU is not explicit in who the parties involved are. NHS Northamptonshire ICB will be a formal signatory to this grant.
- Thanks were given to the Chief Executive, VIN for securing the grant.

**RESOLVED that:**

- **Jacqueline Parkes to send the Chief Executive, VIN the contact for Professor Richard Hazenberg.**
- **Endorse the Health Equality Grant Memorandum of Understanding and become signatory to the grant.**

37/22 NHS Northamptonshire Integrated Care Board update

The Chair and Chief Executive of NHS Northamptonshire ICB gave an update and highlighted the following:

- There is a new Secretary of State for Health and Social Care who has outlined their key priorities as:
  - ambulance,
  - backlog
  - care
  - dentistry
  - doctors
- The difficulty within the work of the ICB is political pressure in seeing improvement quickly, compared to the longer term work needed to create partnerships and joint working need for the prevention agenda. Although urgent work is needed it should not be at the cost of preventative work to reduce demand on health and social care services in future years.
- There are some big challenges around production of the Outcomes Framework, and the ICB 5 year plan.

A suggestion was made to invite the new attorney general to these meetings in order to convey the pressures Northamptonshire will face this winter and to galvanise support to implement the changes needed.

**RESOLVED that:**

- **ICB update be removed as a standing agenda item for future meetings.**
- **The Chair, Director of People and Leader of West Northamptonshire Council to discuss inviting the new Attorney General to Board meetings.**
- **The Board noted the update.**

38/22 Outcomes Framework

The Consultant in Public Health gave an overview of the development of the Outcomes Framework (OF) and highlighted the following:

- There is a need to have a longer term view on what we want to achieve in preventing some of the increasing demand on our services by focusing on the wider determinants of

health by shaping our environments to be healthier and help communities to be more resilient and thrive.

- The OF will look at the wider determinants of health by using the 'Live Your Best Life' 10 ambitions, with each ambition linked to priority outcomes that need to be worked on as a partnership over the next 10-15 years.
- Sitting under the OF will it more detailed scorecards to show more narrative to help shape outcomes, each with a named executive director leads.
- The ambition we have struggled to get outcomes for is the timely access to health and social care.
- The PLACE Directorate have provided feedback on the metrics they would like to see in the OF.

The Board discussed the Outcomes framework, and the following was noted:

- Some of the measures are about service access which is not an outcome.
- Education should be part of children and young people, with schools needing to take more social responsibility for outcomes for children and young people.
- NHS Northamptonshire ICB will need a clear framework for where to invest and agree corporate outcomes that we all contribute to.
- It would be beneficial to have 5-10 indicators for each outcome, where data can be matched data to show the current position for the county and PLACES.
- There is a need to focus on the 5 indicators that can make a difference for local people as soon as possible.
- There is gap in outcomes for children's mental health, metrics need to be included to identify what is causing the rise in mental health related conditions in children and young people, particularly with eating disorders.
- Looked after children need to be included as they fit into every grouping.
- How do we evidence the wider community investment and role of schools?
- Need to liaise Early Help Partnership Board, which reports to the Children and Young People (CYP) Collaborative, and Safeguarding Childrens Board and are developing a set of metrics.
- Access to a poor service is not a good outcome.
- The input needs to be structured and be clear about requirements in order to achieve the outcomes.
- There are 1370 voluntary sector organisations in West Northamptonshire, 76 sit in thematic assembly for Children and Young People and not part of the CYP collaborative.
- The indicators used to populate the draft outcomes framework were compiled following engagement with partners and to influence activity moving forwards. At the NHS Northamptonshire ICB workshop, these will be discussed to if these are right and which are the ones could be elevated to have a priority focus.

**RESOLVED that:**

- **The Consultant in Public Health to look at metrics for mental health related conditions for children and young people**
- **Change 'health assessments' to read initial health assessments and review health assessments.**
- **Add looked after children to the Outcomes Framework**
- **Endorse the first iteration of the ICP Outcomes Framework to present for approval to the Integrated Care Partnership.**

### 39/22 Joint Strategic Needs Assessment Summary

The consultant in Public Health gave an overview of the Joint Strategic Needs Assessment (JSNA) summary and highlighted the following:

- The summary identifies challenges in the West and North of Northamptonshire.
- Two of the challenges for West Northamptonshire is access to green space and air quality.
  - A large proportion of the West Northamptonshire population is located in areas where access to green space is poor.
  - Air quality management areas are likely to increase due to increase in nitrogen dioxide levels. Changing air quality needs the input not just from the highways team but the wider public and voluntary sector.
- Local insight data will be available online and members of public can view metrics within boundary areas.
- The next re-iteration of the JSNA summary will include local area plans.

The Board discussed the JSNA summary and the following was noted:

- Local Insight data will be good for looking at fuel poverty as this contains measures for energy efficiency in domestic buildings, which can be linked to Anti Poverty Strategy and energy efficiency work in areas of higher deprivation.
- If the data highlights the quality of some of our properties is poor, then how this can be addressed in the short, medium and long term can be addressed in the Housing Strategy.

**RESOLVED that the Board endorsed publication of the Integrated Care Partnership JSNA summary.**

### 40/22 Integrated Care Partnership Strategy

The Assistant Director Safeguarding and Wellbeing Services provided an update on the Integrated Care Partnership (ICP) Strategy and highlighted the following:

- National guidance for creation of the strategy was published on the 29<sup>th</sup> July 2022.
- Core membership of the ICP needs to be finalised in order for the strategy to be progressed. Leaders from across the local system having being working collaboratively on how the strategy should look for the Northamptonshire ICS.
- The strategy needs to be based on the JSNA summary, linked to the OF, and must consider how:
  - The integrated care strategy must set out how the assessed needs from the JSNA are to be met by the functions of the ICB
  - The ICP must consider whether the needs could be effectively met with an arrangement under section 75
  - The strategy may include a statement on better integration of health or social care services with 'health related' services
  - In preparing the strategy the ICP must have regard to the NHS mandate
  - The preparation of the strategy must involve local Healthwatch organisations and people who live and work in the area
  - The ICP must publish the strategy
  - The ICP must consider revising the strategy whenever they receive a JSNA
- Areas to consider in strategy are
  - Personalised care
  - Disparities in health and social care
  - Population health and prevention
  - Health protection

- Babies, children, young people, their families and healthy ageing
- Workforce
- Research and innovation
- 'Health-related' services
- Data and information sharing
- Approaches and mechanisms
- Shared outcomes
- Quality improvement
- Joint working and section 75 of the NHS Act 2006
- As the strategy will be underpinned by the JSNA and OF that gives us a clear sight of what we are achieving strategically.
- There are 11 existing strategy maps from organisations across the system that will serve as an anchor for the strategy.
- As a system we have a number of commitments that underpinned by evidence of what we want to prioritise in Northamptonshire.
- The approach for developing the strategy is underpinned by the 'Live Your Best Life' 10 ambitions and OF.
- Phase 1 of the strategy development is:
  - Health inequalities mapping to Strategy
  - Completion of strategic outcomes framework and JSNA refresh
  - Continued community engagement and coproduction
  - Strategy shared with Health & Wellbeing Forums
  - November 2022: Health & Wellbeing Board recommendation
  - December 2022: Approval by ICP
- There are massive interdependences in the system but there is a need to be clear as a system what we are focusing on.
- An early draft of the strategy will be forwarded to Board members before December.

The Board discussed development of the strategy and the following was noted:

- It would be beneficial to have a joint workshop in December where the initial mapping work can be reviewed and a strategic sense check completed.
- The existing ICS structure should be used to support underpinning elements of the strategy.
- The voluntary sector will have a more comprehensive understanding of what our priorities are as a system and contribute in a more holistic manner than previously seen.

**RESOLVED that the Board noted the update.**

#### 41/22 Local Area Partnerships

The Assistant Director Safeguarding and Wellbeing Services provided an update on the development of the Local Area Partnerships (LAPs) and highlighted the following:

- In West Northamptonshire there will be we have 9 LAPs 5 sitting under the Northampton Health and Wellbeing Forum and 4 sitting under the Daventry and South Northants Health and Wellbeing Forum.
- The LAPs are based on community areas collaborating across organisational barriers to engage and coproduce services with local people. Using Local Area Profiles to provide insight for priorities.
- Two pioneer LAPs have been identified to accelerate and test how the model might work:

##### **DSN4**

Bugbrooke  
Towcester and Roade  
Deanshanger  
Hackleton and Grange Park

##### **N4**

Dallington Spencer  
Castle  
Abington and Phippsville  
St George

- General Practice and PCNs have been mapped to the LAPs and the Director of PLACE in West Northamptonshire is reaching out to GPs to create relationships.
- Adult social care services are to be mapped to the LAPs and a meeting will take place with other council services in West Northamptonshire requesting they adopt a LAP approach for delivery of services where possible.
- The pioneer LAPs will focus on 2 or 3 specific priorities which will enable discussions with VIN about what VCSE organisations are needed.
- The 3 priorities for N4 is employment, education and child poverty.
- The following developments will also take place:
  - Police “beats” arranging themselves into LAPs.
  - Links to iCAN welfare support teams to enhance access to services
  - Local Area Profile data to inform LAP priority setting.
  - Asset mapping of LAPs.
  - Asset based community engagement and coproduction.
  - Links to WNC Anti-poverty Strategy Action Plan, where there are clear workplans and strategies to join these up at a local level to work towards tackling these priorities.

The Director of Public Health advised at the next Health Inequalities workshop there will be an exercise using data to see how we can work together and use health inequalities funding to get focus in the initial partnership working. The Chair added development of the LAPs is a good opportunity for elected members to bring the ICS into communities.

**RESOLVED that:**

- **The Chief Operating Officer, NHFT and Assistant Director Safeguarding and Wellbeing to discuss NHFT services linking into the LAPs.**
- **The Board noted the update.**

42/22 West Northamptonshire Anti Poverty Strategy Action Plan

The Head of Community Safety and Engagement gave an update on the West Northamptonshire Anti Poverty Strategy action plan and highlighted the following:

- The strategy was approved by West Northamptonshire Cabinet in April 2022, since then the Public Health team and Healthier Communities team have been working with the Anti Poverty Oversight Group (APOG) and other partners to turn the strategy into a series of measurable actions.
- The intention of the action plan is to collate the work already taking place across West Northamptonshire to identify any gaps and establish a partnership where we can collaborate and add value to the work already taking place.
- The strategy focuses on three key priorities
  - Supporting people who are struggling with poverty now
  - Preventing people from falling into poverty
  - Continue to influence the government and other national organisations to get the best deal for communities in west Northants.
- These priorities are supported by 8 strategic objectives and 32 commitments.
- The membership of the APOG consists of elected members, public health housing, Poverty Truth Commission, voluntary and community sector, to ensure we reflect the voices and involvement of people with lived experiences of poverty.

- Through continuous engagement an action plan was produced in June 2022 containing over a 100 actions, with agreement of the APOG and partners priority actions to focus on in the first year has been developed. Partners across the system are working collaboratively to deliver the priority actions.
- The cost of living crisis has continued to worsen since the publication of the strategy, so the challenge is how do we measure success when the cost of living is increasing. Looking at developing performance measures to monitor activity.
- The intention is to update the board on regular basis as actions are developed and delivered.
- Working groups and collaborative groups have been focused on outcomes defined within the strategy to ensure we are led by data, local intelligence and need of communities.
- Below is an update on some of the priority actions:
  - Establishing a West Northants Social Welfare Alliance, to provide training sessions for anyone who has regular conversations with residents who are presenting with a range of social welfare issues. There are 2 soft market testing events in October to build specification, followed by a tender process with implementation early 2023.
  - Distribution of the household support fund. We have linked with Northamptonshire Community Foundation to reach the most financially vulnerable residents in West Northants through distribution of vouchers by local community groups and charities.
  - A working group is focusing on fuel poverty and winter pressures. The focus of this group is going to be on immediate actions prior to winter season commencing, one being having warm welcoming spaces. Discussions are ongoing around suitable building assets available.
  - Work continues with the Food Aid Alliance, there are over 40 food aid providers giving practical support to people in poverty across West Northamptonshire, focusing on immediate aid and longer term support.
  - Ensuring those in hardship know where to access support services. A cost of living web page has been developed by the Communications Team containing information about support and services available. The Communications team are also supporting development of a communications and engagement strategy to support delivery of strategy. Looking to build on the work undertaken during COVID19 and continued engagement with the Anti Poverty Truth Commission and community leaders.
  - A money and debt working group has been established to look at money and debt information advice services. A large number of benefits remain unclaimed and ensuring those facing hardship have access to these services.
  - There is working group looking at a sustainable approach to address the shortfall in immigration support and advice. Ensuring all eligible residents achieve settled status. A citizens map will be created to understand the immigration issues residents face, identify gaps and resources available.
  - A mental health task and finish group in conjunction with the Mental Health Learning Disability and Autism collaborative and Public Health to implement services and support in community settings to vulnerable residents.
  - Continue to support existing neighbourhood hubs, building on 'Host Ukraine' and the Well Northants programmes, focusing on our highest deprived areas.
- The project team is in the process of developing a performance framework with indicators to measure the impact against the outcomes within the strategy.

The Board discussed the action plan and following was noted:

- We need to ensure that agencies going into residents homes are able to signpost residents to support available.
- A report will be presented to West Northamptonshire Cabinet and Full Council, detailing plans for a refresh of the APSOG to bring in wider group of partners to consolidate the interventions and communicate to wider groups of staff.

- It would be beneficial to have a register or helpline to help agencies identify residents who may be in need of support.
- There is increasing evidence highlighting the link between poverty and poor health and poor mental health and this work will link in with the OF.

**RESOLVED that:**

- **An update on the action plan and work relating to fuel poverty will be brought to the meeting in January 2023.**
- **The Head of Community Safety and Engagement to arrange for a fact sheet to be developed providing details of support available for agencies who could into residents homes.**
- **The Board noted the update.**

43/22 Community Engagement Framework

The Director of Communications presented the Community Engagement Framework developed on behalf NHS Northamptonshire ICB and highlighted the following:

- This framework is co-produced and co-designed with partners across the county, with the aim to work collaboratively to support our communities and the framework will be used to bring accountability and accessibility.
- There are different segments of our communities that have different needs, by working together more robustly and forging links in a strategic way through the framework we can understand and integrate into our working practice.
- Through development of the framework we have listened to experiences in how our communities have wanted to engage. T
- The framework will need to align with the emerging structures of the ICS and we have developed four key themes to ensure we embed our framework as a way of working through 2022 to 2025:
  1. Embedding a consistent approach to co-production
  2. Ensuring genuine diversity and inclusion is at the core of our approach
  3. Making best use of our insight around the health and wellbeing of all our people and communities
  4. Evaluating what we do, sharing the learning and celebrating our successes
- Some projects have been devised and worked together to talk what would really make a difference in years 1 and 2
  - Project 1: Listening and working together to inform our strategic plans
  - Project 2: Moving from hearing to doing
  - Project 3: Work together to embed equality through emerging Health and Wellbeing forums at Integrated Care Partnership levels
- A recurring theme heard whilst developing the strategy has been the need to build trusting relationships.
- NHS Northamptonshire ICB will continue to review and update the strategy.
- Phase 2 is centred around planning to make this framework live by setting the blueprint and bringing the voice of the community into our strategic plans. Ensuring we are committed to hearing what people say, prioritising the needs and issues that are important to people in communities.
- A desk research project is being worked on with partners across the system, completing a thematic analysis on gaps, which will be available to those developing the strategy. This process aligns with development of the LAPs.
- Engagement will continue as national guidance around ICB forward planning is released to ensure there is alignment.

The Director of Public Health gave an update on the Well Northants programme and highlighted the following:

- This is a community development programme which began in 2021 in some pilot areas.
- Focusing on having asset the conversations in communities in the 20% most deprived communities and inclusion health communities.
- West Northamptonshire and North Northamptonshire both have Community Development Teams and the model used by these teams is to community profiling, look at evidence for the community, complete door knocking, host a world café event, produce an action plan and begin implementation.
- Small amounts of funding is available to be able to shape solutions such a developing apprenticeship and training opportunities for people in the local community to support the programme.
- Feedback received during the engagement has been mapped to the 'Live your Best Life' 10 ambitions.
- Work is needed with the voluntary and community sectors to get a richness of discussions in rural and urban areas.
- There is a need to consider how we can add parish councils into the framework and people who live on their own and may be isolated.

**RESOLVED that the Board:**

- **Noted the Integrated Care Board's Draft Community Engagement Framework**
- **Agreed to support the ongoing development of the Framework and its priority programmes to ensure they embed across health and care**

There being no further business the meeting closed at 3.35 pm.