

Minutes of the Health and Wellbeing Board

14 December 2023

-: Present :-

Pat Harris, Matt Fox, Jo Williams, Lincoln Sargeant, Tanny Stobart, Paul Northcott, Roy Linden, Councillor Nick Bye, Councillor David Thomas and Councillor Hayley Tranter

35. Apologies

Apologies for absence were received from Adel Jones, Torbay and South Devon NHS Trust who was represented by Chris Winfield and Sarah Newham, Department for Work and Pensions, who was represented by Paul Phillips.

36. Minutes

The Minutes of the Health and Wellbeing Board held on 28 September 2023 were confirmed as correct and signed by the Chairman.

37. Health and Wellbeing Board Work Programme 2024

The Director of Public Health, Torbay Council introduced the submitted report which outlined the Work Programme and workshops for the Health and Wellbeing Board for 2024.

The Board was informed that the work programme currently set out five areas of focus across the Health and Wellbeing Strategy which also included cross cutting themes. In addition, the programme included statutory reports for endorsement by the Board. Additional items could be added to the work programme if necessary during the year. In addition, development workshops would be held to spotlight progress and activity around key areas from the Joint Health and Wellbeing Strategy.

Members resolved by consensus that the Health and Wellbeing Board:

1. endorse the Health and Wellbeing Board Work Programme for 2024 as set out in the submitted report.

38. Suicide Action Prevention Plan

Rachel Bell, Public Health Specialist, Torbay Council outlined the submitted report which sought to provide a summary of the new National Suicide Prevention Strategy 2023 – 2028 together with local intelligence and a summary of the new local Suicide Prevention Action Plan 2024 – 2027.

The Board was informed that there was a large difference between male and female rates of suicide and that during the pandemic, there was not an increase but

we had now returned to pre-pandemic levels. However, despite seeing a stabilising of rates in recent years, Torbay remains the fourth highest Local Authority area for suicide rates.

The aim of the national Strategy 2023-28 was to:

- reduce the suicide rate over the next 5 years;
- improve support for people who have self-harmed;
- improve support for people bereaved by suicide.

The priority areas for action were identified as:

- improving data and evidence to ensure that effective, evidence-informed and timely interventions continue to be adapted;
- providing tailored, targeted support to priority groups, including those at higher risk;
- addressing common risk factors linked to suicide at population level by providing early intervention and tailored support;
- promoting online safety and responsible media content to reduce harms, improve support and signposting and provide helpful messages about suicide and self-harm.

It was explained that the priority groups related to children and young people; people who have self-harmed; people in contact with mental health services; those in contact with the justice system; autistic people and pregnant women and new mothers. Common risk factors had been identified such as physical illness; financial difficulty; gambling; alcohol and drug misuse; social isolation and loneliness and domestic abuse.

The Board was informed that it was essential to provide effective crisis support to help those individuals who had reached crisis point and it was also important to reduce access to the means and methods of suicide. Effective bereavement support to those affected by suicide was also identified as significant and to make suicide everyone's business so that the collective impact could be maximised to prevent suicides.

In terms of the Suicide Action Prevention Plan, a local priority setting event had been held in July 2023 which had proven very successful with over fifty multi-agency partners in attendance. The Torbay Mental Health and Suicide Prevention Alliance and multi-agency partners agreed the draft Suicide Prevention Action Plan, the main aim of which was to continue the consistent downward trajectory towards the regional average with action areas concentrated on ensuring mental health and emotional support was accessible to all together with acknowledging and working with Torbay's risk factors for suicide and pooling resources to reduce suicide. The approach going forward was to establish Task and Finish Groups who would prioritise collaborative actions to take forward and report to the Torbay Suicide Prevention Plan Group quarterly. The Action Plan would be refreshed and refined in the later part of 2024.

The Board was also informed that:

- there was close work underway with the voluntary and community sector through the Suicide Prevention Alliance, including community builders;
- support was available to schools for prevention work and in managing any cases that may arise;
- the disparity between risk factors for Torbay when compared with Plymouth may be due to the fact that Plymouth's prevention plan had been in place for longer, but that Torbay and Plymouth were working closely to share learning;
- a multi-organisational approach, sharing information was essential;
- currently a trauma informed approach is being adopted by the suicide prevention plan and this feeds into the broader focus area the Strategy of Mental Health with work carried out around the positive aspects of prevention and wellbeing.

By consensus the Board resolved that:

1. the progress since last year's Suicide Prevention Action Plan be noted;
2. the new multi-agency Suicide Prevention Action Plan be endorsed; and
3. Board members' respective organisations be invited to contribute towards the multi-agency actions as set out in the Local Suicide Prevention Action Plan 2024 – 2027.

39. Torbay and South Devon Adult Safeguarding Partnership Annual Report

Paul Northcott, Chair of Torbay and South Devon Safeguarding Adults Board introduced the submitted report and explained that the Care Act 2014 required the Safeguarding Adults Board ("SAB") to publish an annual report detailing work carried out by the SAB during the year to achieve its main objective and implement its strategic plan together with details of what each member had done to implement the strategy and the findings of any safeguarding adults' reviews and subsequent actions.

Members were informed that the report covered the period 2022 – 2023 and had been submitted to the Board for information; had already been sanctioned by the Partnership Board and would also be submitted to other forums for information.

It was explained that the report was split into ten sections covering purpose; scope; membership and key data relating to adult safeguarding, for example. The report illustrated the progress made over the last 12 months and highlighted the value of the partnership and work undertaken. Priorities would be renewed in the coming year and on an annual basis. For this year the partnership had made a conscious decision to focus on the progression and completion of safeguarding adult reviews which played an integral part of the assurance process and allowed the partnership to work with frontline staff, managers and families to identify areas of improvement and best practice.

The Board was informed that the strong local partnership between Torbay and Devon had resulted in sharing best practice and learning.

By consensus the Board resolved that:

1. The Torbay and South Devon Adult Safeguarding Partnership (“TDSAP”) Annual Report 2022/23 and the requirement to publish the report be noted.

40. Children's Safeguarding Partnership Annual Report

Shaun Evans, Head of Service, Safeguarding, Early Help and Business Intelligence and Neil Cotton Business Manager Torbay Safeguarding Children Partnership introduced the submitted report which provided an annual update for 2022–2023. It was a statutory requirement for the report to be submitted to the Health and Wellbeing Board, although it had already been sanctioned by the Partnership's Executive.

The report concentrated upon the following areas:

- the current governance arrangements and structure of the partnership;
- the role of the independent scrutineer;
- the priority areas of focus for the partnership;
- the financial arrangements;
- the local background and context;
- any statutory reviews and audits that have taken place and the impacts of these;
- child death overview arrangements;
- learning and development; and
- allegations that have taken place against people that work with children.

Members were informed that due to the date range, the report also contained an update on the impact of Covid-19 on Torbay Safeguarding Children Partnership activity that took place during this time.

It was explained that the four key priority areas were:

- to reduce the level of child neglect in the Torbay areas and challenge the causes of local neglect to prevent re-occurrences;
- to prevent child exploitation and sexual harm within the Torbay area and to ensure the safety of all children, resident or visiting Torbay, from these forms of abuse;
- to prevent children in Torbay from being harmed by the effects of domestic abuse;
- to ensure that children in Torbay receive appropriate mental health support at their time of need and that this support dovetails with any other care planning needs of the child.

Whilst a lot of progress had been made against the key priorities, it was acknowledged that there was still progress to be made in respect of the mental health priority.

The Board acknowledged the importance of both statutory and non-statutory agencies working in partnership together across Local Authority boundaries and welcomed the news that more non-statutory agencies were becoming involved with the Torbay Safeguarding Children's Partnership.

By consensus the Board resolved that:

1. The contents of the Torbay Safeguarding Children Partnership ("TSCP") Annual Report 2022 – 2023 be noted and endorsed.

41. Torbay Drug and Alcohol Partnership Report

The Director of Public Health presented the Torbay Drug and Alcohol Partnership ("TDAP") Report which provided a progress update against three priority areas:

- breaking drug supply chains;
- delivering a 'world-class' treatment and recovery system;
- achieving a shift in the demand for drugs.

It was explained that the three key priorities were underpinned by eighteen commitments, for example, around ensuring better integration into family hubs to provide mental health support; employment opportunities; good recovery pathways and better integration with schools, utilising existing relationships particularly through the Local Education Board and promoting life skills in schools. Funding was in place for more dedicated outreach work, particularly for those individuals not engaging with the system. There was also a pilot of an opiate replacement modality (Buvidal) which offered another option to methadone to support recovery in cohort of people who may have more complex needs. It was acknowledged that there was still further work to be done around drug and alcohol related deaths.

Members were informed that there had been an increase in the number of individuals treated for alcohol misuse and continuity of care, for example, individuals leaving prison and connecting with Drug and Alcohol Services and that there had been a reduction in the reported use of substances by young people. There had been an assurance that capacity for young people accessing treatment would improve and the Partnership had highlighted mental health and the unmet need for adults and children in that respect.

Members were informed that the key milestones achieved to date had been:

- the formalisation of how TDAP operates, including membership, terms of reference, it's governance as well as outlining the roles and responsibilities of the group;

- completion of the partnership's Joint Strategic Needs Assessment. This document was being used to identify key TDAP priorities for action which informs the TDAP Delivery Plan;
- establishing TDAP's outcome metrics, identifying areas of improvement and best practice. These metrics would help steer the delivery plan and identify subsequent task and finish groups;
- completion of TDAP's annual membership review, ensuring the right individuals were present and could contribute to TDAP's progress;
- a mapping exercise had identified 17 existing groups currently working in some way towards the commitments outlined within the drug strategy, whilst also highlighting current system gaps;
- the creation of task and finish groups focused on the gaps identified from the mapping exercise;
- the successful completion of all national audit requirements for the 2022/23 reporting period.

By consensus the Board resolved that:

1. The Torbay Drug and Alcohol Partnership Report be noted;
2. The Director of Public Health provides the Board with data and information to establish the level of performance against the key milestones and demonstrate the progress achieved against the three priority areas as outlined within the Government's 2021 drug strategy "From Harm to Hope".

42. Director of Public Health Annual Report

The Director of Public Health introduced the Annual Public Health Report 2023 and explained that preparation of the report was a statutory requirement under the National Health Service Act 2006. The content of the report had been developed in partnership with wider colleagues with contributions from primary and secondary care clinicians, Torbay Happy Hearts support group, voluntary sector organisations and Your Health Torbay (healthy lifestyles provider).

Members were informed that this year's report focussed on cardiovascular disease which remained one of the biggest causes of premature death and disability, with an impact worsened by the Covid-19 pandemic. The Annual Report discussed the risk factors for cardiovascular disease and looked at promotion of prevention, early detection and how to optimise treatment and support.

It was explained that prevention measures included:

- healthy eating;
- getting more active;
- spatial planning and environment;
- reducing smoking and alcohol;
- getting a good start to life and accessing information and advice.

In terms of detection, there were Devon-wide targets to identify and treat three cardiovascular disease risk factors early, such as atrial fibrillation, high blood pressure and high cholesterol. Outreach health checks in the community assisted those underserved and daily blood pressure checks were available at the Paignton Community Hub.

Members were informed that in relation to optimisation, there was strong evidence for medications such as statins and holistic interventions such as support groups and that optimising treatment for 80% of people with high blood pressure could prevent 158 heart attacks and 235 strokes and save up to £4.5 million. The South West Innovation Partnership worked with GP practices to identify patients who could benefit from improved treatment and the Lipid project improved the treatment pathway for high cholesterol. Peer groups such as 'Torbay Happy Hearts' also helped in terms of optimisation.

The Annual report contained six recommendations and implementation of those recommendations would be overseen by the Torbay Healthy Heart Partnership. Progress would be monitored during the year and reported formally in the 2024 Annual report.

In addition, Members were informed that funding was now available around highlighting the message of "stop smoking" and supporting people to quit. The risks of vaping in young people were recognised and enforcement of underage sales was a feature of national policy. It was important to work with partners to achieve a coordinated approach. Torbay Council have recently awarded a new contract for lifestyle services including smoking cessation and so support would not be reduced.

By consensus Members resolved that:

1. The contents of the Annual Public Health Report 2023 be noted.

43. Local Care Partnership Business Programme

The Board noted a verbal update provided by Justin Wiggins, Head of Integrated Care (South and West), NHS Devon who informed the Board that the South Local Care Partnership ("LCP") continued to develop its programme delivery structure to progress the implementation of the Joint Forward Plan and that the current delivery and pace of LCP development was in the context of urgent and emergency care, winter pressures and system financial pressures. It was explained that the South Unscheduled Programme Board was focussing on a range of priorities to alleviate urgent emergency care pressures, for example, high intensity users of the emergency department; discharge delays; admission avoidance; coordination of care; falls and frailty; urgent community response and end of life. Population health remained a key focus working with Public Health to build on the Joint Strategic Needs Assessment and one Devon Data Set to better understand the South population to support the identification of priorities; launch and fund organisations to focus on population health and prevention needs and to develop support for individuals waiting for surgery who were most impacted by health inequalities and wider determinants.

44. Turning the Tide on Poverty/Cost of Living update

The Board noted a verbal update provided by the Director of Public Health who advised that there had been improvements compared to last winter in terms winter planning in the NHS. With the opening of the acute medical unit at Torbay Hospital and other developments in the Emergency Department reports of ambulance turnaround times had improved, for example. In terms of Torbay Council, much of what was in place would continue. The Council would not be funding warm banks directly but it was likely that some voluntary sector organisation may offer these. It was acknowledged that the economic situation was slightly different and that inflation was coming down. The issues flagged as concerns related to housing (people maintaining tenure) and with the expectation that as people saw the ending of fixed-rate mortgages it was recognised that this could present an acute 'pinch point' with new mortgages being unaffordable for many households. Ongoing sustainability of food banks and social supermarkets was being monitored, since both relied upon people's donations. As a system there remained a drive towards looking at the longer term and developing a better understanding of what was currently available in terms of employment and skills opportunities and how those opportunities might be increased and better targeted.