

SOMERSET HEALTH AND WELLBEING BOARD

Monday 13 June 2022

11.00 am Luttrell Room - County Hall,
Taunton



To: The members of the Somerset Health and Wellbeing Board

Cllr B Revans (Chair), Dr Ed Ford (Vice-Chair), Cllr R Wyke, Cllr C Booth, Cllr J Keen, Cllr B Hamilton, Judith Goodchild, Trudi Grant, Julian Wooster, James Rimmer, Mel Lock, Sup. Dickon Turner, Richard Schofield, Cllr A Dance, Cllr T Munt (Vice-Chair), Cllr G Slocombe, Cllr L Trimmell

All Somerset County Council Members are invited to attend.

Issued By Scott Wooldridge, Strategic Manager - Governance and Democratic Services – 3 June 2022

For further information about the meeting, please contact Terrie Brazier - tbrazier@somerset.gov.uk or Neil Milne - ndmilne@somerset.gov.uk or 01823 357628

Guidance about procedures at the meeting is included in the annexe of the printed agenda.

This meeting will be open to the public and press, subject to the passing of any resolution under Regulation 4 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

This agenda and the attached reports and background papers are available on request prior to the meeting in large print, Braille, audio tape & disc and can be translated into different languages. They can also be accessed via the council's website on www.somerset.gov.uk/agendasandpapers

Are you considering how your conversation today and the actions you propose to take contribute towards making Somerset Carbon Neutral by 2030?



RNID typetalk

AGENDA

Item Somerset Health and Wellbeing Board - 11.00 am Monday 13 June 2022

*** Public Guidance notes contained in agenda annexe ***

1 Apologies for absence

To receive Board Members' apologies

2 Declarations of Interest

Details of all Members' interests in District, Town and Parish Councils can be viewed on the Council Website at

[County Councillors membership of Town, City, Parish or District Councils](#)

The Statutory Register of Member's Interests can be inspected via request to the Democratic Service Team.

Any new or updated declarations of interests will be received.

3 Minutes from the meeting held on 21 March 2022 (Pages 9 - 18)

The Board is asked to confirm that the minutes are accurate.

4 Public Question Time

The Chair will allow members of the public to ask a question or make a statement about any matter on the agenda for this meeting. Questions must be received three clear working days before the meeting.

5 ICS Verbal Update

To receive the update.

6 Somerset's People Plan Update (Pages 19 - 30)

To receive the update.

7 Living with Covid Verbal Update

To receive the update.

8 Pharmaceutical Needs Assessment (Pages 31 - 36)

To receive the report.

Item Somerset Health and Wellbeing Board - 11.00 am Monday 13 June 2022

9 **Somerset Health and Wellbeing Board Work Programme** (Pages 37 - 40)

To discuss any items for the work programme. To assist the discussion, attached is the Board's current work programme.

10 **Any other urgent items of business**

The Chair may raise any items of urgent business.

Possible exclusion of the press and public

PLEASE NOTE: Although the main report for this item not confidential, supporting appendices available to the Board contain exempt information and are therefore marked confidential – not for publication. At any point if the Board wish to discuss information within this appendix then the Board will be asked to agree the following resolution to exclude the press and public:

Exclusion of the Press and Public

To consider passing a resolution having been duly proposed and seconded under Schedule 12A of the Local Government Act 1972 to exclude the press and public from the meeting, on the basis that if they were present during the business to be transacted there would be a likelihood of disclosure of exempt information, within the meaning of Schedule 12A to the Local Government Act 1972:

Reason: Information relating to the financial or business affairs of any particular person (including the authority holding that information).

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Guidance notes for the meeting

1. Council Public Meetings

The former regulations that enabled virtual committee meetings ended on 7 May 2021. Since then, all committee meetings need to return to face-to-face meetings. The requirement is for members of the committee and key supporting officers to attend in person, along with some provision for any public speakers. However due to the current COVID restrictions and social distancing measures only a small number of people can attend as meeting room capacities are limited. Provision will be made wherever possible for those who do not need to attend in person including the public and press who wish to view the meeting to be able to do so virtually.

Anybody attending the meeting in person will be asked to adhere to the current Government guidance and Council procedures in place to safely work during COVID 19. These include limiting numbers in a venue, maintaining social distancing, using hand sanitisers, wiping down areas that you have used, wearing face coverings when not sitting at a table (unless exempt from doing so) and following one-way signs in the venue/building. You will also be asked to sign in via the NHS Test and Trace app or to sign an attendance record and will be asked relevant questions before admittance to the meeting.

Please contact the Committee Administrator or Democratic Services on 01823 357628 or email democraticservices@somerset.gov.uk if you have any questions or concerns.

2. Inspection of Papers

Any person wishing to inspect minutes, reports, or the background papers for any item on the agenda should contact Democratic Services at democraticservices@somerset.gov.uk or telephone 01823 357628.

They can also be accessed via the council's website on www.somerset.gov.uk/agendasandpapers.

Printed agendas can also be viewed in reception at the Council offices at County Hall, Taunton TA1 4DY.

3. Members' Code of Conduct Requirements

When considering the declaration of interests and their actions as a councillor, Members are reminded of the requirements of the Members' Code of Conduct and the underpinning Principles of Public Life: Honesty; Integrity; Selflessness; Objectivity; Accountability; Openness; Leadership. The Code of Conduct can be viewed at: [Code of Conduct](#)

4. Minutes of the Meeting

Details of the issues discussed, and recommendations made at the meeting will be set out in the minutes, which the Committee will be asked to approve as a correct record at its next meeting.

5. **Public Question Time**

If you wish to speak, please contact Democratic Services by 5pm 3 clear working days before the meeting. Email democraticservices@somerset.gov.uk or telephone 01823 357628.

Members of public wishing to speak or ask a question will need to attend in person or if unable can submit their question or statement in writing for an officer to read out.

In order to keep everyone safe, we respectfully request that all visitors to the building follow all aspects of the Covid-Secure guidance. Failure to do so may result in you being asked to leave the building for safety reasons.

After entering the Council building you may be taken to a waiting room before being taken to the meeting for the relevant agenda item to ask your question. After the agenda item has finished you will be asked to leave the meeting for other members of the public to attend to speak on other items.

A slot for Public Question Time is set aside near the beginning of the meeting, after the minutes of the previous meeting have been agreed. However, questions or statements about any matter on the agenda for this meeting may be taken at the time when each matter is considered.

At the Chair's invitation you may ask questions and/or make statements or comments about any matter on the Committee's agenda – providing you have given the required notice. You may also present a petition on any matter within the Committee's remit. The length of public question time will be no more than 30 minutes in total (20 minutes for meetings other than County Council meetings).

You must direct your questions and comments through the Chair. You may not take a direct part in the debate. The Chair will decide when public participation is to finish.

If an item on the agenda is contentious, with many people wishing to attend the meeting, a representative should be nominated to present the views of a group.

An issue will not be deferred just because you cannot be present for the meeting. Remember that the amount of time you speak will be restricted, to

three minutes only.

In line with the council's procedural rules, if any member of the public interrupts a meeting the Chair will warn them accordingly.

If that person continues to interrupt or disrupt proceedings the Chair can ask the Democratic Services Officer to remove them as a participant from the meeting.

Provision will be made for anybody who wishes to listen in on the meeting only to follow the meeting online.

6. **Meeting Etiquette for Participants**

- Only speak when invited to do so by the Chair.
- Mute your microphone when you are not talking.
- Switch off video if you are not speaking.
- Speak clearly (if you are not using video then please state your name)
- If you're referring to a specific page, mention the page number.
- Switch off your video and microphone after you have spoken.
- There is a facility in Microsoft Teams under the ellipsis button called turn on live captions which provides subtitles on the screen.

7. **Exclusion of Press & Public**

If when considering an item on the agenda, the Committee may consider it appropriate to pass a resolution under Section 100A (4) Schedule 12A of the Local Government Act 1972 that the press and public be excluded from the meeting on the basis that if they were present during the business to be transacted there would be a likelihood of disclosure of exempt information, as defined under the terms of the Act.

If there are members of the public and press listening to the open part of the meeting, then the Democratic Services Officer will, at the appropriate time, ask Participants to leave the meeting when any exempt or confidential information is about to be discussed.

8. **Recording of Meetings**

The Council supports the principles of openness and transparency. It allows filming, recording and taking photographs at its meetings that are open to the public - providing this is done in a non-disruptive manner. Members of the public may use Facebook and Twitter or other forms of social media to report on proceedings. No filming or recording may take place when the press and

public are excluded for that part of the meeting. As a matter of courtesy to the public, anyone wishing to film or record proceedings is asked to provide reasonable notice to the Committee Administrator so that the relevant Chair can inform those present at the start of the meeting.

Webcasting notice: Please note that this meeting may be filmed for live or subsequent broadcast via the Council's website or YouTube. At the start of the meeting the Chair will confirm if all or part of the meeting is being filmed. You should be aware that the council is a data controller under the Data Protection Act. Data collected during this webcast will be retained in accordance with the council's policy. Therefore, by entering the meeting room or joining remotely, you are consenting to being filmed and to the possible use of those images and sound recordings for webcasting and/or training purposes. If members of the public do not wish to have their image captured they should ask the committee clerk, who will advise where to sit or participate in the meeting. If you have any queries regarding this, please contact the Committee Manager for the meeting.

A copy of the Council's Recording of Meetings Protocol is available from the Committee Administrator for the meeting.

ADVISORY SOMERSET HEALTH AND WELLBEING BOARD

Minutes of an Advisory Meeting of the Somerset Health and Wellbeing Board held virtually via Microsoft Teams on 21 March 2022 at 11.00 am

Board Members in Attendance: Cllr C Paul (Chair), Cllr F Nicholson (Vice Chair), Trudi Grant, James Rimmer, Julian Wooster, Judith Goodchild, Sup Richard Turner, Cllr Ros Wyke, Mel Lock, Cllr J Keen

Other Members in Attendance: Cllr C Lawrence

Apologies for absence – Agenda Item 1

Apologies were received from Dr Ed Ford, Dr Alex Murray, Cllr M Rigby

Declarations of Interest - Agenda Item 2

The list of declared interests on the website was noted. There were no new declarations.

Minutes from the meeting held on 17 January 2022 - Agenda Item 3

The minutes were noted with one correction: Cllr J Keen advised that she had given her apologies for the meeting.

Public Question Time - Agenda Item 4

There were no public questions.

ICS Verbal Update - Agenda Item 5

Paul von der Heyde, Somerset ICS Chair and Chair Designate for NHS Somerset ICB, introduced the topic, noting that the Health and Care Act continues to progress through Parliament, with 1st July 2022 now being the date for institution of the new ICB, which is the successor organisation to the Somerset CCG. He and the ICB Chief Executive Designate, Jonathan Higman (who could not be present for this meeting due to illness), have sent letters to four potential non-executives for the ICB and are also in the process of appointing the non-statutory executives. The ICP planning is less advanced but is progressing.

James Rimmer, Chief Executive of CCG and System Lead, then made the presentation; he works with Jonathan Higman on the ICB, and this presentation is the evolution of their work. There are four key aims of the ICS: To improve outcomes in the population's health and healthcare; to tackle inequalities in outcomes, experience and access; to enhance productivity and value for money; and to help the NHS support broader social and economic development. As for the Somerset community, the population is 580,000 with 13 Primary Care Networks, 2 Foundation Trusts, and the CCG; the expenditure for 2020/21 was £993.5 million, with 48% of that going to secondary care commissioning and hospital services. He noted that Improving Lives is the strategy for Somerset county with respect to delivering improvements for the population, while Fit for my Future is the strategy by which the Somerset ICS will effect the vision of people living healthy independent lives supported by thriving communities with easy access to high-quality public services. The Improving Lives strategy is at the heart of the ICS/ICB, with key partners centred around it; while Fit for my Future aims to improve the health and wellbeing of the population, provide the best care and support to people, strengthen care and support in local communities, reduce inequalities, and respond well to complex needs. The principles of system working were touched on, as well as the structure of the ICS, which has the ICS and HWBB sitting above the ICB, the Local Authority, and the ICS "engine room", which is described as a way of working where partners come together to work as a single system. Initially, the engine room is made up of teams from all partner organisations, although as it develops, it could be consolidated to be hosted within a single partner organisation. Other aspects of the ICS and ICB include professional and clinical leadership, which is being developed currently, and the recruitment of a Chief Medical Director and Chief Nursing Director. The Year One priorities include continuing to lead the pandemic response and recovery, creating the ICS engine room starting with the population health hub, establishing the ICP and its health and care strategies, developing and implementing a systemwide strategy for primary care, developing the five-year financial and workforce strategies, and developing the Board, organisation, and system as a whole.

The Board then discussed the presentation; Trudi Grant, Director of Public Health, provided further information on the population and health work, noting that this Wednesday, proposals for the five-year programme will be taken to the ICS Board. It will focus on transforming local health and care services to become more prevention driven rather than demand driven, with the national guidance and policy supporting this. If the programme is approved, she would like to bring it back to the HWBB Board in the future.

Cllr Nicholson, Vice Chair, said that the presentation had been very helpful; she asked if the appropriate focus on various groups such as children, SEND, etc. will be reflected in the future programme. It was responded that there are currently six delivery boards

that were established two years ago and that focus on primary care, urgent care, mental health, etc., and these will transition into the ICB. The details are being worked out as to where and how these delivery boards will sit across all partners, who are also transitioning over to the ICB. It was also reassured that specific issues will not be lost in the transition.

The Advisory Somerset Health and Wellbeing Board expressed its support for the proposed, ways of working, and governance arrangements for the Somerset ICS and ICB.

SEND Update- Agenda Item 6

Dr Rob Hart, Assistant Director for Inclusion at SCC, made the presentation with his colleague Vikki Hearn. He began by noting that 27% of the Somerset populations is under 25 and that one in six of those young people will have some kind of disability or special educational need. When one is talking about SEND, it entails children and young people with mental health needs, physical and sensory difficulties, learning disabilities such as autism, speech/language/communication issues, and difficulties requiring additional support in school. The health outcomes for those children and young people are worse than for those without such difficulties, and there can only be equal outcomes when they are able to live independently, access employment and community services, etc. In 2014 the Children and Families Act set out the framework for new ways of working together across health care and education; this presentation provides an update on where we are currently.

In March of 2020, the Care Quality Commission undertook an inspection of SEND services across Somerset and found 10 weaknesses:

- Joint working between services underdeveloped
- Autistic spectrum condition assessment pathway dysfunctional
- Too much variability in implementation of reforms across front line services
- Timeliness of assessment process for plans too slow
- Rate of exclusion of children and young people with SEND too high
- Limited capacity to bring about improvements needed
- Little evidence to show betterment in experience for SEND children and families
- SEND reforms implemented too late with widespread weaknesses in identification of needs
- Joint commissioning limited and resources underutilised
- Quality of assessing and then meeting needs inconsistent and often weak with EHC plans lacking input from health and care professionals

In response, Somerset SEND produced nine Written Statements of Action to address these deficiencies, along with a plan to implement them; each improvement priority (IP) has a named lead, IPs are grouped in themes with school leaders and parent carers involved, there is dedicated project management support from SCC and the CCG with external support available from DfE and NHS programmes, a fortnightly delivery group brings together IP leads to monitor delivery, a monthly strategic partnership board provides a forum for discussion and planning, another monthly improvement board receives progress reports, and there is a quarterly monitoring meeting with DfE and NHS England advisors.

Somerset SEND is also promoting a culture of inclusion and collaboration; 445 new families have joined the PCF since the inspection, and families will be involved in service design. There is also improved communication within the SEND community through various means. A Joint Commissioning Strategy has been developed, barriers to assessment have been removed, and joined up work involving therapies, specialist equipment, schools, local authorities and health services has improved. A school-led Inclusion Enquiry has engaged with school leaders to strengthen inclusive practice; and processes for identification, assessment and planning have been strengthened.

DfE and NHS monitoring in January 2022 found that the local area has maintained good progress in implementing the Written Statements of Action, while those actions that are behind schedule have been identified and corrective measures put into place. Significant improvement in collaborative activity has been observed. Risks and challenges remain with respect to engagement, data use, commissioning restrictions, the effects of the pandemic, reorganisations of the ICS and Somerset Council, and budgets; while more needs to be done with respect to strengthening joint working and work with families, autism assessment, inclusion, improving access, Covid recovery, and the new SEND strategy from 2023 onwards. Vikki Heard emphasised that a needs analysis was paramount in for this new strategy moving forward, and Dr Hart opined that a focused development session with HWBB would be very useful in this respect.

The Chair thanked the presenters, noting that it was very evident how much work had been put in to arrive at the current point, and she asked for questions and comments from the Board. Cllr Keen enquired with respect to exclusion of children if the issue had existed even before the pandemic, if it had to do with the time required for assessments, and if the numbers were included with those who are home schooled; she said that it was a matter of concern and asked if there could be a more detailed discussion of this in future, with the Chair agreeing that there was a need for more information on alternative education. It was responded that it was, in fact, a concern before the pandemic, with a drop-off in the numbers during the pandemic; it does not appear, however, that there is a link between the length of time required for

assessment and exclusion, as the timeliness of assessments has improved significantly over the last 18 months and is now better than the national average. At times excluded children have not been identified by the school as having any special educational needs, but afterwards these needs are identified, so there is a need to strengthen school identification and to give support to elective home education. Families have a right to educate children in ways other than at school, and many get a very high-quality experience from elective home education. They do track the numbers of children educated at home and have processes whereby they can check with other agencies as to whether there are any associated risks. The government has announced plans for a type of mandatory registration for families to inform that they are home schooling. With respect to a more in-depth discussion on the subject, a report was made to the Scrutiny Children's committee in February, which could be of interest to this Board, although he is happy to share future updates as well. The Chair agreed that the presentation mentioned would be helpful and sharing of the report would be followed up on, and she is 100% behind holding a joint development session. She thanked the presenters for their work.

The Advisory Somerset Health and Wellbeing Board noted the recommendations on Page 22 of the Agenda pack and the suggestion for a development session.

Homelessness Reduction Board Report - Agenda Item 7

Andrew Lloyd, Health Promotion Manager for SCC, and Claire Tough, Director of Neighbourhoods of Homes in Sedgemoor, presented the report, which provides an update for HWBB on the progress of their initiatives. The HRB, which was established in April 2021, has been monitoring progress with the Better Futures programme action plan, which covers six themes:

- Early help and prevention
- Commissioning homes and support
- Appropriate use of short-term supported accommodation
- Access to permanent homes
- Sustainable tenancies
- Leadership, learning and governance

These items are further discussed in the report. As regards health support, the HRB has delivered Covid vaccinations to the wider homeless cohort in Somerset, has introduced the Homeless Nursing Team pilot, is preparing a bid to pilot a bespoke dentistry offer, is attempting to improve access to palliative care and clinical psychology, is working on a dual diagnosis strategy together with the Foundation

Trust's mental health directorate, and is adhering to the Improving Lives priorities and outcomes regarding improved health and wellbeing and fairer life chances for all.

The Chair thanked the presenters and welcomed the exceptionally good work done in a short time, then asked for questions and comments. The Director of Public Health agreed that she was delighted to see so much progress in a year and the funding that they had attracted; she opined that Andrew Lloyd and his associates had done sterling work. Cllr Keen also applauded their work and pointed out that the work does not end with the placement in housing of the homeless; it requires ongoing support to avoid that these persons relapse and to ensure that they integrate into the community, which will require a great deal of funding and man hours. Cllr Lawrence said it was an excellent report and wanted to emphasise that the current affordability, or lack thereof, of rentals can be crippling for young families. It was responded that the HRB is working with planners and developers for suitable accommodation for everyone, including larger families; and as for the compliments for their work, they are very grateful for the contributions of everyone involved. Cllr Wyke noted that private landlords are now escalating rents excessively in order to 'evict' tenants without actually going through eviction proceedings; she asked if the Council has a plan to deal with this. It was responded that this was a broader question outside the remit of the Board, but Claire Tough will follow up on the question.

The Advisory Somerset Health and Wellbeing Board received the update on the work of the Homelessness Reduction Board and encouraged members to contribute positively to the Better Futures agenda.

Health Protection Annual Report - Agenda Item 8

Jessica Bishop, Health Protection Manager, and Alison Bell, Consultant in Public Health, made the presentation of the Health Protection Forum Assurance Report for 2021, which was produced to provide assurance to the HWBB that they are protecting the community from communicable diseases and environmental hazards. The Health Protection Forum includes District Councils, NHS Somerset, UK Health Security Agency, Somerset County Council, and other bodies.

It was noted that in 2021 they were principally responding to the pandemic and most non-Covid work was on hold, but there were still 74 outbreaks, 3 complex TB cases, and other problems. Infectious diseases capitalise on weaknesses, so they often affect people living in adverse conditions. The key areas of success for Health Protection in 2021 were as follows:

- Communicable Diseases – An action group for blood-borne diseases like hepatitis and HIV; avian influenza

- Environmental Hazards – Air quality steering group, SCC Public Health and Civil Contingencies Unit assisting people with cold homes/fuel poverty
- Infection Prevention Control – Principally in response to Covid
- Resilience – Offsite Emergency Plan test carried out at Hinckley
- Screening and Immunisations – Local immunisation group, immunisations in schools, HEAT (Health Equity Assessment Tool), backlog reduction or elimination in screening programmes

The key areas for improvement were:

- Treatment of TB – Somerset has a low incidence of TB, but treatment completion remains lower than national levels at 68.8%
- Breast cancer screening – There has been a delay in the deadline for recovery; this is now August 2022
- Radiation Monitoring Unit capacity – Regional plan
- Childhood immunisation coverage

The priorities for 2022 include collaboration with the Somerset ICS, the Musgrove and Yeovil hospitals coming under one NHS provider trust, the Local Health Resilience Partnership moving within ICS boundaries, and the transition to a unitary authority (Somerset Council). Another priority is preserving the legacy of the joined up working and behavioural changes learned during the Covid pandemic, retaining the capacity to respond and building a better system. An important matter that was noted was the standing down of the Covid Engagement Board, which means that updates on Covid will now be received by HWBB.

The Chair stated that she was reassured by the depth of detail in the report and asked for questions and comments. The Director of Public Health also thanked the presenters for the report and breadth of work, especially behind the scenes. She is keen to have a really good look at the system response, actions and proposals, especially with the ongoing development of the ICB, and would like it brought back to a future HWBB meeting. The Chair agreed, asking whether we should be aware of additional risks and the ability to protect the population from them. It was replied that Health Protection does scan/monitor what is occurring globally; avian flu is currently a concern, for example, and there is a need to have good surveillance systems. Cold weather and current fuel prices are also a threat; resources for assisting with heating are being signposted. It is also being encouraged from the health protection viewpoint that everyone gets the flu vaccine in the autumn, as well as childhood vaccinations, where a drop in the rate of uptake has been seen.

The Advisory Somerset Health and Wellbeing Board noted the report and is minded to endorse the priorities proposed for 2022/23 to ensure the

strengthening of health protection as Somerset goes through several crucial transitions.

Somerset Moves – Physical Activity Strategy – Agenda Item 9

The presentation was made by Dr Tom MacConnell (CCG), Kate Anderson (Public Health), and Jane Knowles (SASP), who stated that the aim of this strategy is to improve public health via physical activity. They set the scene for the strategy by noting that society has become less active and therefore more susceptible to cardiovascular disease; it is known that the more active anyone is, the better their quality of life. There needs to be an integrated system, shaped through engagement with people and through evidence, that produces a comprehensive message to increase physical activity.

The Somerset Moves strategy is overseen by steering groups involving the CCG, Foundation Trust, SCC (Public Health and Education), SASP, and independent expert consultants; SASP will drive collaboration with other organisations and partners. There are six focus areas of work and the “Five Asks” to help mobilise the strategy; the Five Asks and the strategy as a whole were endorsed by the CCG Clinical Executive Committee for Somerset in February 2022. The six areas of focus are:

- Positive experiences for children and young people
- Increasing community activity
- Connecting with health and wellbeing
- Developing more active environments
- Supporting and motivating people to move
- Developing leadership, the workforce, and partnerships

It was pointed out that currently 36% of adults across Somerset do not meet physical activity guidelines, with 45% of people with a disability and 30% of people with a long-term condition being inactive. Lower affluence also means lower activity levels. As for children, over 50% of Somerset children do not meet physical activity guidelines, with 1 in 5 arriving at school overweight, and 1 in 3 leaving primary school either overweight or very overweight. Covid has had a negative effect as well on everyone’s activity levels. Gender makes less of a difference than age, as levels of activity decreased with age. Those in higher socio-economic groups were more active, while those living alone were less active. There was shown to be a positive association between sports participation/physical activity and levels of mental wellbeing, although wellbeing has shown a long-term downward trend.

The Physical Activity Strategy is linked to the Improving Live strategy through Priorities 2-4, while the Five Asks entail leading by example, empowering people in your care,

promoting physical activity within your workforce, communications that support the promotion of physical activity, and system-level funding. The recommendations are that the HWBB discusses the draft Somerset Moves strategy, provides feedback and endorses it; that the HWB supports the implementation of the strategy through the Five Asks; and that all system partners commit to reducing inequality and inactivity for the prevention of ill health, while supporting funding opportunities to achieve this.

Questions and comments were then made by the Board; Superintendent Richard Turner observed that a more sustained way of ensuring health and wellbeing is through a good diet and reduced food intake, so will these be part of the strategy? It was responded that a food resilience cell has been established, and this topic will be expressed as a joint message along with physical activity. It was noted that there are basic issues and common themes, such as the fact that activity helps you to maintain weight loss and also makes people feel better, which enables them to better address their weight; it is a holistic approach. The Chair stated that she would be happy to hear about food preparation and related matters, and she thanked the presenters for their work.

The Advisory Somerset Health and Wellbeing Board is minded to endorse the Physical Activity Strategy, endorse the Five Asks and discuss them within their host organisation, and discuss progress by taking forward the Five Asks at the September meeting of the Board.

Work Programme - Agenda Item 10

The Chair reiterated that should the need arise to address Covid, this Board is where updates will be received from now on. She noted the current work programme in the agenda and advised that any suggestions for additional items be emailed to Lou Woolway, Deputy Director of Public Health.

The Somerset Health and Wellbeing Board noted the Work Programme.

Any Other Items of Business - Agenda Item 11

There were no other items of business. The next meeting is scheduled for 13 June 2022.

The meeting ended at 13:09 pm

CHAIR

ICS People Plan update for Health and Wellbeing Board Somerset People Board for Health and Social Care

Jane Graham
ICS Workforce Programme Manager
June 2022

- Who we are
- Our People Plan – 8 strategic aims
- Work highlights & achievements
- Priorities for 22/23
- Focus on:
 - Health and Wellbeing work
 - Social care
- Recommendations
- Questions

Who are the People Board?

- Formal workforce delivery Board of the ICS
- Chaired by Chris Squire (Somerset County Council HR & OD Director)
- About 24 members strong representing health, social care, local authority, VCSE, HEE, unions
- Small workforce team seconded from SCC, SFT & CCG
- Responsible for coordinating the health and care (ICS) workforce plan – Somerset's People
- Have aligned our plan to other national plans & regulatory frameworks:
 - NHS People Plan
 - Adult Social Care People Plan
 - 10 outcome based functions expected of the ICB new People Function
 - The 4 core purposes of ICS' found in NHSE ICS Design Framework
- We've refreshed our People Plan for 22/23
- Near future - People Board restructure and governance in line with new ICB/ICS developments



We're building a **brilliant** health & social care sector in Somerset

Planning for the future,
addressing workforce shortages



Creating opportunities to
support personal development



Recognising the impact of Covid
and supporting health and wellbeing



Developing career pathways, attracting
more people to join the workforce



Ensuring we're offering great employment and
development opportunities on our doorstep



Improving the ways we collaborate
and learn from each other



Promoting Somerset as a great
place to live and work in care



Nurturing more inclusive workplaces
and celebrating our diversity



**We're
doing this
by...**

Ultimately, this will help us:



To develop a **train/work here** culture,
keeping good talent here in Somerset



Maximise collaboration between
employers and education providers



Support independent living and
care within in the community



Create **equality** across health and social care services
and the wider voluntary and community sector



Develop digital skills in the delivery of health
and care services and in education and learning



Support our community with a
diverse and inclusive sector

Achievements: 2021 - 2022

- **We've created a better understanding of our workforce shortages**, increased clinical placement capacity, have dedicated resource looking at Advanced and Enhanced Clinical Practice expansion, Somerset Registered Nurse Degree and Nursing Associate apprenticeship programmes in place, new cross-sector pharmacy technician apprenticeship programmes
- Supported the **Sector Based Work based Academy programme (SWAP)**, led by Somerset NHS Foundation Trust
- Created a broader, proactive partnership & strategy around **social care**
- Have received national recognition for our work on **health and wellbeing** (next slide)
- Started the development of an **ICS Talent Hub** to support our work on recruiting, retaining & developing our health and care talent, deploying to areas of need or at times of surge activity
- Created a system approach to **Equality, Diversity and Inclusion**
- Building our **systems thinking/leadership capacity** and capabilities through a Systems Leadership Competency Framework

Page 23

Somerset ICS People Board 2021 - A Year in Review

Working together to create a sustainable, vibrant, resilient and agile workforce for Somerset's health and social care sector

- Planning for the future, addressing workforce shortages**
 - Workforce supply analysis completed for 14 RHP groups and identified priority areas.
 - Expanded clinical placement capacity across nursing and RHP groups and secured funding for further expansion
 - Recruited the first fully Somerset-based cohort of Registered Nurse Degree Apprenticeships and Nursing Associate Apprenticeships.
- Ensuring we're offering great employment and development opportunities on our doorstep**
 - NMC accreditation for University Centre Somerset to deliver Ed and BSc Nursing Programmes, New Facility based in Taunton.
 - Commendation for strength of partnerships between college and local employers
- Recognising the impact of covid and supporting health and wellbeing**
 - Enhanced OH Project
 - Success of React MH Training Coaching and mediation offer
 - Bereavement Strategy work
 - Collaborative work with providers - Somerset Emotional Wellbeing Hub
- Develop career pathways, attracting more people to join the workforce**
 - Paired work placement programmes for 30 T Level (Health) students in conjunction with Bridgwater & Taunton, Strade and Yeovil Colleges
 - Developed career pathways, Health and Care Town
- Promoting Somerset as a great place to live and work in care**
 - Sector based work academy (SWAP) began May 2022
 - Built connections for place based work in Chard and Wiveliscombe
 - Proud to Care - recruited engagement lead. Hosted first careers event in Taunton.
- Creating opportunities to support personal development**
 - 13 sessions of group coaching for PCNs
 - System approach to SW Leadership Academy Offers - programme established
- Nurturing more inclusive workplaces and celebrating our diversity**
 - Overhauling Recruitment Group established
 - Broader EDI work mapped and best practice understood
 - Training shared
 - Plan in place to roll out work over 22/23
- Improving the way we collaborate and learn from each other**
 - Implemented new cross-sector pharmacy technician apprenticeship programmes involving primary care networks as well as traditional areas of practice.
 - Systems Leadership Work

Thank You to all partners across the system

22/23 Priorities

- Continuing workforce planning and expanding training capacity- particularly nursing and pharmacy
- Continue Enhanced OH work
- Social care - place based recruitment
- Build on People Board governance and assurance framework
- Develop 'One Workforce' Talent Hub

Priorities for 22/23: highlights



- Getting underneath the **(workforce) data & intelligence & workforce planning to address workforce shortages** which includes:
 - Developing 5 year system wide workforce plans, supply metrics and dashboard with governance and assurance
 - Delivering transformation programmes for:
 - AHP
 - Pharmacy
 - Nursing
 - Diagnostics
 - Social work
 - Social care
 - Continue to deliver clinical placement capacity & T-level expansion plans
 - Increase employer engagement in Somerset TNA programme
 - Expansion of Advanced and Enhanced Clinical Practitioner roles
- Understanding and taking action to **retain our older workforce and those at flight risk**
- Expand the **SWAP programmes** to include social care & deliver the (Chard) Place based pilot ('Passport to Care')

Priorities for 22/23: highlights

- Support the **regeneration of the Old Bridgwater Hospital site** to become a Centre of Excellence for Health and Social Care (Levelling Up Funding)
 - Implement the **ICS Workforce Talent Hub** – attract, recruit, develop, retain & deploy our flexible workforce needs across the system – creating flexible roles and meeting demands from surge/winter pressures/vacancy gaps
- Continue to deliver the 4 elements of our system **colleague wellbeing offer**
- Identifying targeted opportunities at 'place-based' level to **widen engagement, participation and access to health and social care careers** by particular 'disadvantaged' groups (linking with PHM/JSNA)
 - Scope a system wide **work experience programme**, expansion of work with schools and colleges
 - Expand **Proud to Care** to become our 'One Workforce' care brand
 - Identify workforce requirements for **digital skills**, transformation and growth
 - Develop and implement our **Systems Leadership Competency Framework** & build capacity/capability around QI and systems thinking
 - Develop our system plan around **equality, diversity and inclusion**
 - Continue to develop **equity of voice** in our system work so we 'speak whole system'

Focus on ICS Colleague Health and Wellbeing Programme

- **Continue to deliver and evaluate the 4 ICS Colleague Health and Wellbeing projects**
- Workforce Bereavement Support strategy - charter
- A National ambassador site for ShinyMind wellbeing app - Nursing workforce and Primary Care patient prescribing pilot
- World first innovation with a Somerset Pan System Engagement survey – providing system data & insights for current and emerging needs
- Colleague Support line

Page 26



- **To develop and implement a 1- 5 year system Health and Wellbeing strategy - Levelling up system support**
- Placing emphasis on a positive health and wellbeing culture
- Place greater emphasis on the preventative health and wellbeing interventions – Women’s Health Strategy (menopause), System OH& EAP review
- Embedding equality, diversity and inclusion
- Providing a clear rational and QI case for change

Purpose, vision and key objectives

Vision

Our vision is that by working collectively, we will **raise the value and uniqueness** of social care so that a greater number of people are attracted into a **resilient and vibrant sector** and that our **current workforce feels valued and is retained** (reduced vacancies and turnover or loss from the social care sector)

Purpose

- Provide coordination and strategic direction to deliver workforce transformation
- Collectively identify transformational change activity & decide priorities
- Provide influence, data, advice and guidance to system partners and decision makers on all matters relating to social care

Objectives

- Identify and coordinate the key actions that are needed (the action plan) that will achieve the vision and decide their order of priority and timescales.
- Identify and mobilise key stakeholders from across the health, social care and voluntary and community sectors to deliver against the plan
- To raise the profile and value of social care across Somerset through Proud to Care and other initiatives
- Identify risks and points of escalation to senior leaders across health and social care
- Monitor the performance (improvement) of the system action plan through the collation of all relevant data and present a single view of the social care workforce to help inform decision making

10 point plan

1. Attracting & retaining younger people into care, with opportunities for development

- Engage with young people to understand core motivations and drivers

2. Creating more sustainable workforce supply routes into care

- Develop a collaborative employer engagement (MoU) to offer local work to local people

3. Creating a more sustainable workforce supply against a diminishing pool of local care talent

- Develop new workforce supply models
- Workforce redesign

4. Opening up access and creating consistency in quality of learning provision across the system

- Learning and development provision for care roles

5. Increasing the attractiveness and value of working in care

- Recruitment initiatives

6. Promoting social care as a valuable and rewarding career/job to targeted audiences

- Call for action marketing activity

7. Increasing young people's experience of social care through development of consistent work experience opportunities to change the perception of working in care

- Consistent work experience programme

8. Improving turnover and retention rates through improving candidate experience and employee satisfaction

- Retention initiatives

9. Identify the impacts of and the opportunities provided by the micro-provider market on home care

- Assess the impact of the micro provider market on home care

10. Understanding the all assets within local areas to identify capacity to support place based care

- Mapping all assets in each neighbourhood area

Focus on social care

New website launched (04/10/21), offering a free job advertising service and promoting real life local case studies of the sector. We continue to see a high number of visits to the site with **15k visits to job page and 2.1k visits to the Proud to Care homepage**

Urgent Appeal / Campaign launched to attract 'brilliant people into care' (Oct'21 - Jan'22) Facebook, Instagram, Leaflets, 'Your Somerset'

12 Days of Christmas (Dec'21) Run as part of our paid care recruitment campaign, utilising local care providers contributions and offering free marketing as well as raising the profile of care

Exploring new, innovative campaign idea for 2022 ('Art for Care')

Exploring and promoting Apprenticeship opportunities

Twitter and Tiktok presence

Recruitment Fairs and activity Engagement with the National Careers Service, The Princes Trust and Job Centre Plus to promote opportunities in care

Ensuring engagement with care experienced young people (e.g. young carers, children in care, care leavers)

Page 29

World Social Work Day

How Does Social Care Integrate with the Trust

"As the Community Clinical Skills Team (previously known as the Social Care Train and Learn Service), we are a team of 5 trainers, who are able to provide person-specific clinical skills training to patients, families and any social care providers; facilitating hospital discharges, preventing unnecessary District Nurse visits, and to ultimately promote safe, effective, evidence-based care, within the community"

Charlie Herbert - Social Care Clinical Skills Trainer



Somerset West and Taunton

Somerset Integrated Care System

Somerset Health & Social Care Training Centre of Excellence

Project Board Meeting 4th April 2022

'Passport to Care' (Chard/Ilminster/Crewkerne pilot)

An 18 month programme aimed at attracting new entrants into the care sector

- Older people living in a residential home
- Older people living in a nursing home
- Working with NHS teams in the community
- Supporting someone who has just left hospital
- Supporting someone with a learning disability or Mental Health issue
- Providing care and support in someone's home or community
- A job where you can try different care settings in 3 month placements

- Experience care in different settings
- Find what suits you
- A guaranteed job at the end of the programme
- Learn 'on the job'
- Access to qualifications
- A personal coach and mentor
- Staff discount scheme

Somerset Care @SomersetCare · 21h

We're excited to soon welcome 24 Trainee Nurse Associates, who will undertake their placements towards their degree from the University Centre Somerset, across some of our care homes. #learningatworkweek @lawweekwire

1 2 3



Recommendations

1. Note the progress made by the People Board and delivery against the Plan
2. Agree future reporting arrangements will be made through the Integrated Care Partnership (ICP)

Title: Draft Somerset Pharmaceutical Needs Assessment (PNA) 2022-25.

Lead Officer: **Professor Trudi Grant, Director of Public Health**

Author: Pip Tucker, Public Health Specialist

Contact Details: Pip Tucker, pztucker@somerset.gov.uk

<p>Summary:</p>	<p>All Health and Wellbeing Boards have a statutory duty to report on the accessibility of pharmacies and pharmacy services from rural, dispensing GP practices in their localities. A report normally needs to be produced every three years, although the timetable has been disrupted by Covid-19, meaning that it is now four years since the last report, whose validity has been extended by government.</p> <p>This report is sent to NHS England, who use the information contained within to assess applications by pharmacies to open or change their services.</p> <p>There are no <i>major</i> gaps in provision, but, the steering group has noted that many pharmacies are reducing their hours, which has knock on effects on accessibility and quality of service.</p> <p>There is a statutory 60-day consultation period (27th April-25th June 2022) on the draft. Views are particularly welcome on two questions:</p> <ul style="list-style-type: none"> • Although not previously identified as a gap, should Sunday pharmacy opening be commissioned in Chard, especially given the growth in the town? • Would the health of the population be improved if Hepatitis C Antibody testing were to be extended from Taunton, Bridgwater and Wedmore?
<p>Recommendations:</p>	<p>That the Somerset Health and Wellbeing Board:</p> <ol style="list-style-type: none"> 1. Endorses the attached draft 2. Comments, if appropriate, on provision in Chard, or Hepatitis C Antibody testing, or both, as described above.

	<p>3. Delegates endorsement of the final draft of the report to the Chair of the Health and Wellbeing Board, assuming only minor changes from the consultation draft.</p>								
<p>Reasons for recommendations:</p>	<p>The draft attached has been drawn up by a steering group delegated by the Health and Wellbeing Board to do so. It brings together evidence from NHS England, Office for National Statistics, Office for Health Improvement and Disparities, local pharmacies and GPs as well as member bodies of the HWB (CCG, SCC, Healthwatch) and public consultation. The steering group is confident that it represents a fair and realistic picture of pharmaceutical need in Somerset.</p>								
<p>Links to The Improving Lives Strategy</p>	<p>Please tick the Improving Lives priorities influenced by the delivery of this work</p> <table border="1" data-bbox="544 891 1465 1357"> <tr> <td data-bbox="544 891 1289 1016">A County infrastructure that drives productivity, supports economic prosperity and sustainable public services</td> <td data-bbox="1289 891 1465 1016" style="text-align: center;">✓</td> </tr> <tr> <td data-bbox="544 1016 1289 1142">Safe, vibrant and well-balanced communities able to enjoy and benefit from the natural environment</td> <td data-bbox="1289 1016 1465 1142" style="text-align: center;">✓</td> </tr> <tr> <td data-bbox="544 1142 1289 1227">Fairer life chances and opportunity for all</td> <td data-bbox="1289 1142 1465 1227" style="text-align: center;">✓</td> </tr> <tr> <td data-bbox="544 1227 1289 1357">Improved health and wellbeing and more people living healthy and independent lives for longer</td> <td data-bbox="1289 1227 1465 1357" style="text-align: center;">✓</td> </tr> </table> <p><i>1 Community pharmacies are also commercial enterprises. 2 Community pharmacies contribute to the vibrancy of high streets. 3 Pharmacies provide access to health advice, often in town centres and at times when face-to-face advice is not available elsewhere. 4 Advice in pharmacies promotes better health and independence.</i></p>	A County infrastructure that drives productivity, supports economic prosperity and sustainable public services	✓	Safe, vibrant and well-balanced communities able to enjoy and benefit from the natural environment	✓	Fairer life chances and opportunity for all	✓	Improved health and wellbeing and more people living healthy and independent lives for longer	✓
A County infrastructure that drives productivity, supports economic prosperity and sustainable public services	✓								
Safe, vibrant and well-balanced communities able to enjoy and benefit from the natural environment	✓								
Fairer life chances and opportunity for all	✓								
Improved health and wellbeing and more people living healthy and independent lives for longer	✓								
<p>Financial, Legal, HR, Social value and partnership Implications:</p>	<p>There are no direct implications of these types for members of the HWB. Extended Hepatitis C Antibody testing may lead to support provided by Somerset Drug and Alcohol Service being better informed. The PNA is produced in partnership, and promotes joint working in its preparation. There may be financial implications for NHSE in their response to evidence of pharmaceutical need presented in the final draft.</p>								

<p>Equalities Implications:</p>	<p>The report includes a full Equalities Impact Assessment. In most cases, pharmacies provide an opportunity to increase access for excluded groups, including particularly those with protected characteristics of age and disability. For some people there may be difficulty of access as a result of inability to speak English; we found that the knowledge of 'Language Line' in pharmacies (which includes interpretation of British Sign Language) was not universal. In particular, the report highlights problems of access for people in rural areas, especially at weekends, and for people affected by digital exclusion; these problems apply to access to pharmaceutical services as much as for other services.</p>
<p>Risk Assessment:</p>	<p>Failure to produce a Pharmaceutical Needs Assessment by October 2022 would constitute maladministration by the Board. Whilst the impact could be serious, the likelihood is negligible. Failure to identify fully-argued patterns of pharmaceutical need in a published PNA may be challenged in law, notably by providers seeking to benefit commercially from a lack of clarity.</p>

1. Background Information

- 1.1** The Pharmaceutical Needs Assessment is a report *from* the Somerset Health and Well-being Board on the effectiveness of provision of pharmacy services to the county. It includes community pharmacies and GP practices that dispense medicines in many rural areas. It considers whether pharmacy provision will remain adequate until the next assessment in 2025. It is written to inform NHS England, Somerset Clinical Commissioning Group and Somerset County Council in their commissioning, and whether new pharmacies should be encouraged or permitted to open.
- 1.2** We cannot expect everyone in Somerset to have very local access to every pharmaceutical service, but initial findings from the steering group are that distribution and opening times are generally appropriate, and services are commissioned in ways that largely cover the county.
- 1.2** The steering group has been aware during the preparation of this draft that opening hours of pharmacies are changing frequently, and these changes have often meant reduction of access in the mornings and evenings. This reduction is in contrast to the pressure on GPs to extend opening hours to improve access. We are concerned that reduced hours can also have knock on effects, such as in reducing the promptness with which patients receive prescribed medicine and increasing the distances that patients have to travel, with all the implications that has for accessibility, sustainability and cost.

- 1.3** We have identified two improvements that could be made in provision, and are particularly interested in any views or information about the following:
- There is no Sunday opening in the Chard, Langport and Ilminster Primary Care Network area, and our evidence suggests that access would be improved if a pharmacy in Chard were to be commissioned to open on Sundays.
 - Only four pharmacies, in Taunton, Bridgwater and Wedmore, are commissioned to provide the Hepatitis C antibody testing service; this disease is often associated with intravenous drug users. On the basis of the patterns of needle exchange, evidence suggest that an improvement would be made if this service were also commissioned in Yeovil, Frome, West Mendip, West Somerset and Chard/Langport/Ilminster Primary Care Network areas.

2. Improving Lives Priorities and Outcomes

2.1 A County infrastructure that drives productivity, supports economic prosperity and sustainable public services

Community pharmacies are part-funded by the NHS, but are also commercial enterprises and an important part of most high streets. The report discusses the issues of environmental sustainability of access to pharmacies, particularly the necessity of using cars for most people outside normal working hours.

2.2 Safe, vibrant and well-balanced communities able to enjoy and benefit from the natural environment

Community pharmacies contribute to the vibrancy of high streets, and are generally located closer to more deprived communities than other parts of the health system. The location of pharmacies in towns mean that they are tend to be closer to more deprived communities than GP surgeries or hospitals which generally require more space than is readily or affordably available in such locations.

3.3 Fairer life chances and opportunity for all

Pharmacies provide access to health advice, often in town centres and at times when face-to-face advice is not available elsewhere. This level of health support, particularly when located close to poorer communities, as described above, Pharmacies may be less off-putting than GP surgeries for some patients.

3.4 Improved health and wellbeing and more people living healthy and independent lives for longer

In addition to the simple supply of prescribed medicines or appliances, provision of services and advice in pharmacies promotes better health and independence.

3. Consultations Undertaken

- 3.1** In the period before writing the consultation draft of the report, a public consultation was undertaken through Somerset CCG Engagement and Advisory Group (SEAG) and distributed by Healthwatch Somerset and Patient Participation Groups. This yielded 55 responses, described in the draft, that were consistent with the access criteria applied. Pharmacies were also contacted through the Local Pharmaceutical Group to check opening hours and services against NHS England data, and to ask about potential additional commissioned services. The corrections are included in the report.
- 3.2** The statutory 60 day consultation period runs from 27th April to 25th June. There is a [questionnaire for stakeholders](#), on the factual content and assertions of the report, and the [public questionnaire on access](#) is also being held open for this period.
- 3.3** Representative groups, such as Compass Disability and the Community Council for Somerset, are being contact specifically for comments during the statutory consultation period.

4. Request of the Board and Board Members

- 4.1** This is a report drawn up by the PNA steering group as delegated by the Health and Wellbeing Board, and so the consultation is *by*, rather than *with*, the HWB. The steering group would, though, welcome views of Board members on the findings,.
- 4.2** Members are invited to comment on the draft at the meeting, by email (pztucker@somerset.gov.uk) or using the [on-line form for stakeholders](#). Members are also invited to respond to the [public survey on pharmacy use and access](#).

5. Background Papers

- 5.1** The consultation draft of the PNA, along with 12 separate locality assessments is published at <http://www.somersetintelligence.org.uk/pna.html>

6. Report Sign-Off

	Seen by:	Name	Date
Report Sign off	Relevant Senior Manager / Lead Officer (Director Level)		Click or tap to enter a date.
	Cabinet Member / Portfolio Holder (if applicable)	Clare Paul	Click or tap to enter a date.
	Monitoring Officer (Somerset County Council)	Scott Wooldridge	Click or tap to enter a date.

Somerset Health and Wellbeing Board – WORK PROGRAMME 2022-23

Agenda Item	Date of Meeting	Details and Lead Officer
	13 June 2022	
PNA - Pharmaceutical Needs Assessment		Pip Tucker (15 min)
ICS Verbal Update		Jonathan Higman and Paul von der Heyde
Somerset's People Plan Update		Jane Graham/Chris Squire
Living with Covid Verbal Update		Alison Bell / Joe McGregor-Harper
	26 September 2022	
Mental Health Update		
Healthwatch Update		
Children & Young People Plan		Helen Price / Fiona Phur
ICS Verbal Update		Jonathan Higman and Paul von der Heyde
Somerset Moves update – Physical Activity Strategy (20 mins)		Jane Knowles-Chief Exec at SASP/Kate Anderson SCC/Thomas Macconnell-CCG
	28 November 2022	

JSNA verbal update		
Somerset Safer Partnership		
Better Care Fund		
ICS Verbal Update		Jonathan Higman and Paul von der Heyde
	January 2023	
	March 2023	
Adult Safeguarding Report		Stephen Miles
	Member Information Sheets	
Community Care Somerset Activities and Sport (SASP) Out of Hours 111 Service		TBC Clare Paul - TBC Devon Doctors
	To Add Later	
Neighbourhoods & Communities		Mel Lock / Tim Baverstock

Economic Update – Covid-Related		James Gilchrist
Learning from Covid / Community Support After Covid / Prevention Agenda		Trudi Grant

- Reports should generally be no longer than 6 sides of A4 with detail being contained in appendices or available via contact officer.
- If reports are not received by the deadlines indicated, they will be taken off the agenda for that meeting unless there are exceptional circumstances.
- Draft / final reports and appendices to be sent to Julia Jones via email wherever possible.
- None of the above replaces the need for report authors to consult relevant senior officers on the contents of the draft reports during their preparation.
- **All H&WB meetings – 11am via Microsoft Teams.**

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