

NOTES OF THE ONE NORTHERN DEVON MEETING

Held in Barnstaple Fire Station at 9.30 am on 24th July 2019

PRESENT:

| | |
|---------------------------|---|
| Andrea Beacham (AB) | Partnerships Lead, NDHT |
| Duncan Buckley | Transformation and Engagement Lead NDHT |
| Sheon Sturland | Devon & Cornwall Police |
| Hannah McDonald (HMCD) | One Ilfracombe |
| Andy Moore (AM) | DPT |
| Steve Seatherton (SS) | One Ilfracombe |
| James Szymankiewicz (JSz) | ND GP Collaborative Board/Devon Nature Partnership (Acting Chair) |

APOLOGIES:

| | |
|----------------------|---|
| John Womersley | Chair One Northern devon, NHS Devon CCG |
| Toby Davies (TD) | Devon & Cornwall Police |
| Simon Jones (SJ) | NEW Devon CCG/ND GP Collaborative Board |
| Janet Williams (JWi) | Torrige District Council |
| James Wright (JWr) | Head of Commissioning Northern NHS Devon CCG |
| John Finn (JF) | Assoc Director NHS Devon CCG |
| Jeremy Mann (JM) | North Devon Council |
| Tracey Polak (TP) | Devon County Council |
| Gary Patch (GP) | Devon County Council/NDHT |
| Chris Burford (CB) | Devon Partnership Trust |
| Jennie Stephens (JS) | Devon County Council |
| Jon Worsley (JWor) | Devon & Somerset Fire & Rescue Service |
| Mark Rostock (MR) | Director of Neighbourhoods, North Devon Homes |
| Katherine Allen (KA) | Northern Devon Healthcare Trust |
| Fran Giblin (FG) | Children's Social Care |

IN ATTENDANCE:

Kate Winter PA to Chief Executive and Director of Finance (NDHT) – for minutes

45/19 Apologies

The apologies were noted.

46/19 Notes from the Meeting held on 12th June 2019

The notes of the meeting held on 12th June 2019 were agreed.

47/19 Matters Arising

The action grid was reviewed and updated.

48/19 Northern Devon 10 Year Wellbeing Strategy

Progress Report

AB reminded the group that at the last meeting they had revised the description of the focus of the wellbeing strategy under the Marmot Report headings to be:

- Opportunities for collaboration and partnership
- Improving the wellbeing of the population while reducing health inequalities
- Prevention and understanding of the wider determinants of ill health

AB reported that JWo had suggested including focus on communities as a further bullet point however SS suggested that it should focus on empowering and enabling One communities to deliver the strategy. It was suggested that a separate bullet point be added on improving wellbeing in communities while reducing health inequalities. After further discussion it was agreed that JWo will be asked to propose a fourth area/bullet for focus.

AB/JWo

49/19 Placed Based System Infrastructure and Support

The Board noted the objective to develop six One towns in the first year.

HMcD reported on the positive progress being made with the communities as follows:

- One Ilfracombe – continues to be successful with good progress continuing to be made.
- One Barnstaple - growing at a rapid pace with tangible progress being made. The Group is engaging with the local community and feedback is being collated,

including feedback from local schools. Themes from the feedback include isolation and homelessness and suggestions have been made for a community fridge and a friendly bench. The Flow Project continues to make good progress and is supporting individuals rather than referring them to different agencies.

- South Molton – an initial meeting was held to discuss the opportunities of having a One town and HMCD and SS have been invited to present to the full town council.
- Holsworthy – there is a lot of enthusiasm through the CCG Community Improvement Group. A survey has been undertaken with the local community and when the CCG reduces its level of commitment a One Holsworthy model will be developed.
- Livewell Braunton – have held a health and wellbeing event and HMCD provided support with engagement. There had been good attendance and feedback is being collated.
- Torrington 100 – the group are currently reviewing membership and governance including how they can pull the separate community groups together. Torrington has been successful in a social prescribing bid and has appointed two community officers who are starting this week.

JS reported on the work being undertaken by HMCD which is getting recognition at regional and national level. HMCD has also been asked to take part in the South West Institute of Social Prescribing as interest in the model continues to build.

JS referred to funding being held by PCNs which could be used to commission the One towns to support social prescribing. It was therefore important to establish formal links with the PCN clinical directors. JS reported on the model being developed to support people through collaborative working and suggested that the model being implemented in the South West will be rolled out across the country. To enable this there needs to be flex in the commissioning process so that funding can be directed to the right areas. AB advised that a model will be developed to link in with the work of PCNs. AM asked for the PCN boundaries to be circulated which HMCD agreed to circulate. JS reiterated the need to showcase the value of the work being undertaken in Northern Devon.

HMCD

- One Bideford – the group had been meeting but was not health focussed therefore discussions are taking place on how a model can be created in Bideford. Adam Kwiatkowski has been contacted to see whether he is able to take on the lead for health and wellbeing.

AB referred to the link to the Communities Newsletter and advised that she will ask for this to be included on One town websites: <https://indd.adobe.com/view/9432b889-70ff-4f16-bee9-e2f5a33d130c>

Outline Workplan for Development of Community Partnerships

AB presented the workplan including timescales to build community partnerships. The plan will support establishing partnerships, community engagement, understanding community needs and assets, identifying projects and seeking funding where required.

AB explained that some projects will be dependent on having a community builder such as the community fridge and friendly bench. JS referred to a policy and funding that can be provided to support social prescribing such as the appointment of a community builder. HMCD advised that funding is currently being used for a link worker. AB suggested that the lack of a community builder may be the risk to implementing projects therefore funding should be sought.

Minutes of the OND Communities Meeting held on 12th June 2019

The minutes of the OND Communities meeting held on 12th June had been circulated with the agenda for information.

50/19 Co-ordinated Joined Up Flow Between the Devon ICS System Through to Community Systems

AB referred to the comprehensive care model from NHS England which suggests a segmented approach across populations.

JS suggested that this needs to include wider determinants and interventions such as housing, police and fire in order to focus on prevention. It needs to be made clear that the placed based approach brings all organisations together. It should also be emphasised that this is about long term prevention and is not a 12 month output.

AB suggested that the placed based approach be covered at the facilitated away day.

AB

AB presented the OND system model which demonstrated the role of OND in NHS England's personalised care model. JS was concerned that health was dominating the model and felt that it should not be restricted by NHS England as it directs a health focus and excludes other partners. SSt suggested that it would be more beneficial to have preventative activity included in the model for crime and anti-social behaviour which transcends into health

inequalities. AM suggested expanding the model to acknowledge the other public services. Everything is connected and OND needs to explain how this supports the NHS England care model.

AB agreed to update the model to demonstrate that the OND model of personalisation is broader than the NHS model and includes those with long term involvement with the criminal justice system and to circulate to the Board. **AB**

51/19 Collaborative Commissioning of Activities Where Funding Can Be Sourced to Deliver the Wellbeing Strategy

Funding had been received for social prescribing pilots. A Northern Devon social prescribing network had been established which was proving to be a useful group to share knowledge and resources.

AB reported on the Flow Project and the aims of the project. The project is being piloted in Barnstaple and has about 10 partners engaged. AM highlighted that DPT were not included but was advised that HMCD had met with DPT who are involved in One communities and conversations remain ongoing regarding Flow. SSt referred to a pilot with the police regarding heightened users and suggested that this links with DPT and the Flow project.

AB reported on the NHS right care project and the model to have voluntary sector employees working with high intensity users using the flow approach. Funding of £60k has been applied for through the CCG to run a model for one year. This will also link to forward vision work.

Organisational Form

It was noted that this will be discussed at the facilitated away day.

AB

52/19 Wellbeing Performance Dashboard

It was noted that this will be discussed at the facilitated away day.

AB

53/19 OND 2019/20 Project – Supporting Frequent Users of Services

The Board noted that learning and recommendations from the frequent users of services project will be presented back to a future meeting. The project is being led by TD.

54/19 OND Website

SS reported that a prototype website had been developed which will be populated by the end of August. The website will be duplicated for Ones and can include a directory for the social prescribers.

JS asked for an email to be sent to each practice manager asking them to embed the website link onto their GP practice website as GPs are trying to move from an acute to a wellbeing approach.

HMCD

HMCD referred to a naturally healthy link that is also being developed and it was suggested that this be embedded into the One Communities. AB advised that future resources need to be agreed for the OND Communities which could involve devolved budgets into the community for the co-ordination/management of the community partnerships. SS asked when conversations on future form will take place and AB suggested discussing this in more detail at the facilitated away day.

JS referred to funding opportunities that could be explored to provide ongoing resource to the communities and it was agreed that AB, SS and HMCD will meet in advance of the away day to discuss what is required going forward and the cost of this.

AB, SS, HMCD

SS felt that the One towns are currently at a critical transition phase and some work will need to continue into next year and support will be required to enable this.

55/19 Communities Meeting Request for Support

HMCD reported on support required by the One towns for public liability insurance. As they are not constituted bodies they are unable to have their own insurance which is required when holding events. A number of options were suggested and SS agreed to explore the cost of One Ilfracombe providing cover at events supported by HMCD.

SS

56/19 NDHT Long Term Plan for Future Hospital Services

DB presented the hospital criteria weighting exercise. NDHT is currently in a collaborative agreement with RD&E and part of this agreement includes developing a long term plan for hospital services. Services being reviewed are those that are required to support a 24/7 A&E and clinical arrangements to meet the healthcare needs of the population.

DB reported on engagement that has been undertaken with staff, public and stakeholders. An external market research company has also been engaged to gain feedback from the local population and this will be collated into themes such as access, workforce and infrastructure etc.

A list of criteria had been presented to the NDHT Board which the OND Board were asked to weight. JS asked whether a list of stakeholder groups was available confirming who had received engagement and the criteria such as PCNs and DB agreed to review and report back to the next meeting. It was noted that the OND Board weighted scores will be combined with the NDHT Board scores to then develop scenarios for future organisational form. **DB**

On behalf of the OND Board, JS, AM and SSt scored the criteria as follows:

- Feasibility, Affordability and Quality - 100%. *These are all non-negotiable therefore a caveat is required as the preferred option does not necessarily need to be the least costly. May need to spend more to have access to services locally.*
- Access – 90%. *It should be noted that clients are hesitant to travel long distances. Distance impacts on the time and resources of partner organisations therefore better transport links need to be considered. From a police point of view, access is a high priority.*
- Workforce – 80%. *Issues with workforce need to be addressed through innovative models, collaborative working and increasing educational opportunities.*
- Equal Outcomes - 85%.
- Patient Focus - 85%. *This should be decided by patients and users of the services – need to be transparent on the outcomes.*
- Partnership Working - 75%.
- Infrastructure - 70%.
- System Strategy and Future Proofing – 50%.

57/19 Any Other Business

Personalised Care Spread Academy

AB reported on the academy which is being run by the South West Academic Health Science Network and advised that teams have been invited to apply for the 3 day residential. Each team will be made up of six people including a service user. It was agreed that a team should be submitted based on the flow project and the diversion support team. **AB**

58/19 Date and Time of Next Meeting

The next meeting was scheduled for the 4th September and the Acting Chair requested that the start time move to 9 am.

ONE NORTHERN DEVON ACTION GRID AS AT 24TH JULY 2019

| | | Action | Comments | Lead | Outcome | |
|--------------------------------|-------|--|---|--|---------|---------|
| 2 | 041/9 | Review Draft OND Principles | JWo to liaise with STP Comms Team to review Principles and see if they need to be reworded. | 01.05.19 there was uncertainty on whether JWo had discussed with the STP comms team therefore an update will be provided to the next meeting. 12.06.19 the principles had been shared with the STP comms team and feedback is awaited. JW agreed to follow up. 24.07.19 action carried forward to the next meeting | JW | Ongoing |
| 1st May 2019 | | | | | | |
| 20 | 23/19 | Matters Arising / Facilitated Session to Explore Identity of OND | JF and SJ will discuss a facilitated session to explore the identity of One Northern Devon in line with the developing ICS - how does the ICS develop in North Devon taking forward the work being undertaken | 12.06.19 It has proved difficult to find a suitable date in July so later dates are now being explored 24.07.19 a facilitated session had been arranged for 30.08.19 | SJ/JF | Closed |

| Action | | | Comments | Lead | Outcome | |
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| | | | by One Northern Devon? An update will be provided to the next meeting | | | |
| 21 | 24/19 | ND 10 Year Wellbeing Strategy | Circulate Public Health Analysis Reports | 12.06.19 it was noted that the reports had been circulated | AB | Closed |
| 22 | 28/19 | Wellbeing Performance Dashboard | All representatives to identify their organisations key measurements for further discussion at the next meeting. | 12.06.19 this was included on the agenda for discussion | ALL | Closed |
| 23 | 28/19 | Wellbeing Performance Dashboard | Circulate STP prevention list to OND | 12.06.19 AB agreed to circulate this to the OND Board 24.07.19 it was noted that the dashboard will be discussed as part of the facilitated session on 30.08.19 | SJ | Ongoing |
| 25 | 29/19 | AOB / Integrated Model of Care | Present report on integrated model of care to the next meeting | 12.06.19 JF agreed to co-ordinate a presentation for the next meeting 24.07.19 this was included on the agenda for discussion | JF | Ongoing |
| 12th June 2019 | | | | | | |
| 27 | 35/19 | ND 10 Year Wellbeing Strategy | Amend strategy focus to: <ul style="list-style-type: none"> - opportunities for collaboration and partnership - improving wellbeing of the population while reducing | 24.07.19 the strategy had been amended and was included on the agenda | AB | Ongoing |

| | | | Action | Comments | Lead | Outcome |
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| | | | health inequalities - prevention and understanding the wider determinants of ill health and present back to a future meeting. | | | |
| 28 | 35/19 | ND 10 Year Wellbeing Strategy | OND strategy to include details of who commissions services and the cost | 24.07.19 as above | AB | Closed |
| 29 30 | 35/19 | ND 10 Year Wellbeing Strategy | Identify areas/barriers where collaboration can make a positive difference | 24.07.19 as above | AB | Closed |
| 31 | 35/19 | ND 10 Year Wellbeing Strategy | Invite the LEP (Tim Jones) to attend the next meeting | 24.07.19 as above | AB | Closed |
| 32 | 37/19 | Co-ordinated Joined Up Flow Between the Devon ICS System and Trough to Community Systems | Share information on the function of the LCP | 24.07.19 it was noted that discussions on the future of LCPs remained ongoing | JF | Ongoing |
| 34 | 38/19 | Progress Report on Social Prescribing | Support each One Group to develop a bid for funding using the | 24.07.19 this had been included on the agenda | AB/HMcD | Closed |

| | | Action | Comments | Lead | Outcome | |
|----------------------------|-------|--|---|---|---------|---------|
| | | Pilots | One Ilfracombe template | | | |
| 35 | 38/19 | Gateshead Experience | Presentation to be made to a future meeting | 24.07.19 AB send an invitation for the presentation to be made to a future meeting | AB | Ongoing |
| 36 | 39/19 | Wellbeing Performance Dashboard | All organisations to identify their key targets for service delivery and performance alongside the objectives of the agreed projects and forward to AB. | 24.07.19 noted that this will be discussed at the facilitated away day on 30.08.19 | ALL | Ongoing |
| 37 | 41/19 | ND Long Term Plan for Future Hospital Services | Present a further report to the next meeting including patient and clinical feedback | 24.07.19 an exercise to weigh criteria had been included on the agenda | KA | Ongoing |
| 38 | 43/19 | Actions Arising from Meeting | Obtain information governance protocol from Serenity and ICE | 24.07.19 action remains ongoing | AB | Ongoing |
| 24 th July 2019 | | | | | | |
| 39 | 48/19 | 10 Year Wellbeing Strategy | Fourth bullet/area of focus to be confirmed to reflect focus on wellbeing of the communities | | AB/JWo | |
| 40 | 49/19 | Placed Based System Infrastructure and Support | Circulate PCN boundaries to OND for information | | HMcD | |

| | | Action | Comments | Lead | Outcome |
|----|-------|--|--|------|--------------|
| 41 | 50/19 | Joined up Flow Between ICS and Community Systems | Facilitated away day to include: <ul style="list-style-type: none"> - placed based approach - organisational form - wellbeing dashboard | | |
| 42 | 50/19 | Joined up Flow Between ICS and Community Systems | Update the OND System Model to include isolation, loneliness and long term involvement with criminal justice system and circulate to the group | | AB |
| 43 | 54/19 | OND Website | Forward website link to GP practice managers to embed in GP practice websites | | HMCD |
| 44 | 54/19 | OND Website | Meet in advance of 30.08.19 to discuss ongoing resources required to support the communities and the cost of this. | | AB, SS, HMCD |
| 45 | 55/19 | Community Support / Public Liability Insurance | Explore whether the One Ilfracombe can provide public liability insurance for community events attended by HMCD and the cost of providing this | | SS |

| Action | | | Comments | Lead | Outcome |
|--------|-------|----------------------------|--|------|---------|
| 46 | 56/19 | NDHT Long Term Plan | Confirm which stakeholder groups had been engaged with and received the criteria | | DB |
| 47 | 57/19 | AOB / Personalised Academy | Team to be submitted to the academy based on the Flow Project and the Diversion Support Team | | AB |
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