

**Minutes of a meeting of the EAP Health & Wellbeing and Vulnerable People**  
At 9.30 am on Friday 28th January, 2022 in the  
Held as currently virtual

**Present:-**

Members

Councillor Helen Harrison (Chair)  
Councillor Ken Harrington  
Councillor King Lawal  
Councillor Russell Roberts

Councillor Geoff Shacklock  
Councillor Chris Smith-Haynes

Officers

Also in attendance – Councillor

**63 Chair's Announcements**

Councillor Harrison welcomed members and officers to the meeting. The Chair informed members that the speaker on the two Northamptonshire Health Care Foundation Trust (NHFT) collaboratives was unable to attend. These items would continue to be discussed by the Panel. The Better Care Fund would be considered as a future item.

**64 Apologies for absence**

Apologies were received from Councillor John McGhee.

**65 Members' Declarations of Interest**

The Chair invited those who wished to do so to declare any interests in respect of items on the agenda.

No declarations of interest were received.

**66 Minutes of the Meeting Held on 17 December 2021**

It was AGREED:

- i. That the minutes of the Health, Wellbeing & Vulnerable People Executive Advisory Panels held on 17 December 2021 be approved as a true and accurate record of the meeting.

**67 NHCP - Mental Health, Learning Disabilities and Autism Programme**

The Chair introduced the NHCP Mental Health collaborative and members noted that the presentation at this stage focussed solely on the Mental Health Programme. The Chair invited members to share their views through an open discussion.

During discussion, the Panel raised the following principal points:

- i. The potential lead providers for the collective could be shared and suggested that the Northamptonshire HealthCare NHS Foundation Trust (NHFT) would be the most suitable available option.
- ii. There was confusion over the responsibilities and accountabilities of the lead provider shared amongst some members of the Panel.
- iii. Concerns were raised over the level of management outlined on page 51.
- iv. It was felt that the current collective outlined was quite institution heavy. Members expressed a wish to see additional information in the case for change that would set out how the collaborative would work more with placed based and community led opportunities. It was felt that this would result in the right organisation providing the right care at the right level.
- v. The Panel noted the Care Quality Commission of 'Excellent' held by the NHFT.
- vi. The potential re balancing of funds presented scope for new arrangements that could include access for voluntary organisations.
- vii. The perception that accessing services is not easy should be taken on board as a consideration during revisions.
- viii. The outlined commitment to collaborative working with children's mental health on page 41 should be further explained and demonstrate how a flow of resource will operate to support early intervention.
- ix. The Panel suggested that the link between adult and child mental health was difficult to separate.
- x. Members shared the value of the previous Sure Start service and suggested a resurrection of early preventative work.

## **68 NHCP - Elective Collaborative Case for Change Summary Presentation**

The Chair outlined new ideas such as single points of contact and referral within the Elective Collaborative Case for Change Summary.

During discussion, the Panel raised the following principal points;

- i. A single point of referral for primary care was sensible.
- ii. The collective should ensure that handovers and the need for case-based story repetition are limited.

- iii. Members queried whether the shifting into the preventative and intermediate care remit ought to sit with Public Health.
- iv. The new collaborative should take the opportunity to become more dynamic with the Integrated Care System and challenge the current inertias in the NHS.
- v. Opportunities for community-led partnerships should be explored at a conceptual strategic stage to give due consideration to this approach.
- vi. The collaborative should challenge itself in the pay it provides for elective care.
- vii. Examples of self-administered dialysis were noted as encouraging methods by members of the Panel.
- viii. Prior plans for discharge plans should be in place before admission to elective care to ease delays in treatment and recovery.

#### **69 Better Care Fund**

This item was amended to be considered as a future update.

#### **70 Forward Plan of Executive Items**

The Panel received the Executive Forward Plan covering the period 1 January to 30 April 2022.

It was AGREED that the Executive Forward Plan of items be noted.

#### **71 Work Programme**

Members reviewed the forward list of items for future consideration by the panel.

It was AGREED that the work programme of the Health, Wellbeing & Vulnerable People EAP be noted.

#### **72 Updates and Alerts**

The Executive Director Adults, Communities and Wellbeing provided a brief update covering the following items;

- Local resilience forum update
- Integrated Care Systems
- Public Health Arrangements
- Poverty Truth Commission
- Multi-use community building

Members noted that;

- i. The LWF had declared a major incident to deal with health care challenges. This had put in place arrangements for statutory organisations to access

additional staffing. The weekly review held on 27 January 2022 recommended that this could now be stood down.

- ii. Integrated Care System deadlines had been pushed back to June/July to allow local systems to focus on the Omicron variant.
- iii. The Director of Public Health role in Northamptonshire would now be separated. John Ashton was welcomed as the new Interim Director of Public Health for North Northamptonshire.
- iv. The Poverty Truth Commission would be expected to commence its' launch phase from April 2022.
- v. The recommendation from the EAP to the Executive to re-evaluate the original proposals for the multi-use building were noted and would be considered in conjunction with a revised business case.

**73 Close of meeting**

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Chair

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Date

The meeting closed at Time Not Specified