



**UN-CONFIRMED MINUTES OF THE MID-NOTTINGHAMSHIRE PLACE BASED
PARTNERSHIP (PBP) FORUM MEETING HELD ON 19th May 2022
VIA MICROSOFT TEAMS**

PRESENT:	Rachel Munton	Independent Convenor	RM
	Hayley Barsby	Chief Executive PBP, Mid-Nottinghamshire PBP	HB
	Lorraine Palmer	Interim Programme Director, Mid-Nottinghamshire PBP	LP
	Paul Robinson	Chief Executive Officer, Sherwood Forest Hospitals NHS Foundation Trust	PR
	Suzanne Shead	Director of Housing, Health and Wellbeing, Newark and Sherwood District Council	SS
	Ben Widdowson	Mid-Nottinghamshire PBP Estates Lead, Sherwood Forest Hospital NHS Foundation Trust	BW
	Thilan Bartholomeuz	Clinical Lead, Mid-Nottinghamshire PBP	TB
	Michael Cawley	Operational Director of Finance, Mid- Nottinghamshire, NHS Nottingham and Nottinghamshire CCG	MC
	Craig Sharples	Associate Director of Partnerships, Nottinghamshire Healthcare	CS
	Sue Batty	Service Director, Nottinghamshire County Council	SB
	Amanda Sullivan	Chief Executive of the Nottingham and Nottinghamshire Integrated Care Board (ICB)	AS
	Teresa Jackson	Manager, Ashfield Voluntary Action	TJ
	Leanne Monger	Deputy Locality Director, Nottingham and Nottinghamshire CCG	LM
	Jane Laughton	Chief Executive, Healthwatch Nottingham and Nottinghamshire	JL
	Madeleine O'Sullivan	Chief Executive, Newark and Sherwood CVS	MO
	Claire Culverhouse	Deputy Director of Integration, Nottingham University Hospitals NHS Trust	CC
	Lesley Watkins	Partnership and Engagement Manager, Mansfield CVS	LW
	Garry McKay	Service Manager, Nottinghamshire County Council	GMK
	Dawn Jenkin	Consultant in Public Health, Nottinghamshire County Council	DJ
IN ATTENDANCE:			
	Katie Towndrow	Care Integration Support Officer, Mid-Nottinghamshire PBP (Minutes)	KT
	Charlotte Inkle	Bellamy Communities Officer, Mansfield CVS	CI
	Diane Carter	Care Integration Lead, Mid-Notts, PBP	DC
	Dominic Duggan	Deputy Head of Service (Nottinghamshire) Stakeholder & Engagement Lead, ABL Health	DD
PUBLIC ATTENDEE:			
	Julie Tasker	Public Attendee	JT

APOLOGIES:	Helen Davies	Strategic Lead, Active Partners Trust	HD
	Tim Guylar	Director of Integration, Nottingham University Hospitals NHS Trust	TG
	Emma Challans	Director of Culture & Improvement, Sherwood Forest Hospital NHS Foundation Trust	EC
	Joanna Cooper	Assistant Director, Nottingham and Nottinghamshire ICS	JC
	Jonathan Gribbin	Director of Public Health, Nottinghamshire County Council	JG
	Alison Rounce	Managing Director, PICS Limited	AR
	Sarah Taylor	Health and Wellbeing Officer, Ashfield Voluntary Action	ST
	Mariam Amos	Strategic Director, Mansfield District Council	MA
	David Ainsworth	Locality Director, NHS Nottingham and Nottinghamshire CCG	DA
	Greg Cox	General Manager, Nottinghamshire Division, East Midlands Ambulance Service	GC
	Arwel Griffiths	Chief Executive, Nottingham Emergency Medical Services Community Benefit Services	AG
	Jane Hildreth	Partnership and Engagement Officer, Newark and Sherwood CVS	JH
	Nic Roberts	CEO, Nottinghamshire Mind	NR
	Irene Kakoullis	Group Manager Early Childhood Services, Nottinghamshire County Council	IR
	Kerrie Adams	Senior Public Health and Commissioning Manager, Nottinghamshire County Council	KA
	Jo Marshall	Public Health and Commissioning Manager, Nottinghamshire County Council	JM
	Andrea Stone	Health and Wellbeing Manager, Ashfield District Council	AS
	Steve Morris	Chief Officer, Mansfield Community and Voluntary Services (CVS) NHS Foundation Trust	SM
	Theresa Hodgkinson	Chief Executive, Ashfield District Council	TH
	Liz Woodworth	Professional Lead – Smoking Cessation Services, ABL Health	LW
	Ann Mackie	Public Member	AM
ABSENT:	Dr Khalid Butt	Primary Care Network Representative	KB
	Maria Ballantyne	Group Manager - Living Well South, Nottinghamshire County Council	MB

Item No.	Item	Action	Date
PBP/22/ 38	WELCOME AND INTRODUCTIONS INCLUDING MINUTES OF THE PREVIOUS PBP FORUM MEETING HELD 21st April 2022		
	<p>The meeting was held by video conference. All participants confirmed they were able to hear each other. The meeting being quorate, RM declared the meeting open at 14:00. RM welcomed members to the meeting.</p> <p>RM on behalf of the PBP Forum passed on her congratulations to David Ainsworth who has been appointed as the Director of Strategy and Partnerships for Sherwood Forest Hospitals. PR confirmed that it is hoped that DA will commence the role at the end of June. Whilst the position will be internally focused on the Sherwood Strategy, it will include reaching out and ensuring partnership working and collaboration for Place.</p> <p>Thanks, were provided to Gavin Lunn who has stepped away from the Forum representing both the Primary Care Network (PCN) and PICS LIMITED to focus on clinical responsibilities.</p> <p>RM welcomed Charlotte Inkle as a guest speaker to the meeting and due to other commitments agreed to bring item 8 on the agenda forward to after the Executive Team Update.</p> <p>Following a review of the minutes of the PBP Forum held 21st April the Forum CONFIRMED the minutes as a true and accurate record subject to clarification around the Plan which will set out priorities, objectives and outcomes for Mid Notts Place ready for April 2023. HB confirmed that the draft would be presented to the Forum at the end of the Calendar year. The recently circulated first draft of the Joint Health and Wellbeing Strategy 2022-2026 and Framework will support the work of the Mid Notts Plan.</p> <p>At the next PBP Forum in July there will be a diagrammatic representation of how the Executive Team will feed into the Forum in terms of dates and agenda items, which will look to Forum members to drive the agenda.</p> <p>Following on from the comments from JL regarding the perceived lack of patient and public involvement and potential stalling, this action will be picked up through a future Objective Update to allow further debate and challenge.</p> <p>PBP/22/38 Action: DC to liaise with Objective Leads to request information on patient and public involvement to be included in the Objective Update.</p>	DC	22.09.22
PBP/22/ 39	APOLOGIES FOR ABSENCE		
	Apologies for absence were noted as outlined above and thanks given to those who notified attendance in advance to optimise the efficiency of the meeting.		
PBP/22/ 40	DECLARATIONS OF INTEREST		

	No declarations of interest were received from those present relating to items on the agenda.		
PBP/22/41	ACTION TRACKER AND FORWARD PLANNER		
	The Action Tracker was appropriately updated.		
PBP/22/42	APPROVE TERMS OF REFERENCE FOR THE PARTNERSHIP FORUM		
	The Terms of Reference for the Partnership Forum were AGREED, having received no further comments.		
PBP/22/43	EXECUTIVE UPDATE		
	<p>HB confirmed that the last meeting of the Executive Team took place on the 28th April. The focus was the objectives and the importance as an Executive Team to own the outcomes relating to the objectives and to really challenge delivery, whilst ensuring the objectives meet the needs of the community. The Executive Team agreed to focus on the 'Best Start Strategy' that is a key objective that is also one of the ICS breakthrough objectives. An approach has been agreed on the Terms of Reference for the Executive Team formalising the responsibilities which will continue to evolve and reviewed over the coming months.</p> <p>The Integrated Care Board (ICB) held it's last meeting in its current format and membership on the 5th May. From July the new membership of the ICB will meet with a proposal for members who contributed previously to form part of a Reference Group to have the opportunity to shape some of the thinking for the ICB informally.</p> <p>The need for the Forum to understand the system pressures currently being felt across services was highlighted. Whilst Covid restrictions are changing the pressure to services is still being felt, from the impact of Covid and not everything has returned to normal. One of the key agenda items for the meeting is a focus on prevention and the wider need to focus on health inequalities.</p> <p>A recent presentation provided by Public Health highlighted the need for equity rather than equality, with a focus on individual needs who may be coming from different starting points. HB suggested tabling a discussion around equity, which was supported in principle by DJ and proposed focussing on our communities in a geographical sense and not just providing a service that one size fits all but looking at what extra can be put in place to meet the need of the community. DJ explained the piece of work around homelessness and how many services need to be navigated through demonstrating the complexity of the system for those people with complex needs.</p> <p>HB explained that the Joint Health and Wellbeing Strategy 2022-2026 and Framework that has been circulated for comment. This can be completed by individual organisations but there will a Mid Nott's PBP Partnership response. The documents will be discussed at the next Executive meeting on the 26th May and anyone wanting to raise any comments or observations please email directly to HB and LP for inclusion.</p> <p>The document is underpinned by the presentation delivered by John Doddy and the subsequent discussion at the March Forum meeting.</p>		

	<p>DJ highlighted that the Strategy and Framework is a flexible document that will evolve over time and will provide guidance and toolkit at a local level to allow for progression.</p> <p>PBP 22/44 Action – Comments and Observations on the Joint Health and Wellbeing Strategy and Framework to be emailed to LP&HB.</p> <p>Response for Ukrainian Migration SS shared that since 16th May there are approximately 900 Ukrainian families or individuals that are going through the visa process across all districts within Nottinghamshire (excluding City). 335 are expected across Mid Nottinghamshire and as of the 18th May there were 107 confirmed arrivals.</p> <p>Resources are currently being focused on ensuring properties are fit to be occupied and necessary safeguarding checks have been carried out in partnership with the County Council. The responsibility then moves to the local authority and support will be provided based on the resources available. The collation of themes and trends is taking place with a focus on making sure they are registered with Doctors, Dentists etc. Additional support for Mental Health particularly around post-traumatic stress disorder for adults and children is also being sourced.</p> <p>RM proposed if support is required from the Partnership a small working group could be arranged to carry out some focus work.</p> <p>TB was cautioned against the overloading of information on our Ukrainian guests avoiding conflicting information from all services trying to support, with a need for a co-ordinated approach. The suggestion of seeking out a couple of patient/community champions for feedback on their experiences and what they have found beneficial and what they felt were the gaps, would assist the support and welcome future families. SS supported the suggestion and explained that as far as possible there will be one source for information. Due to the resettlement programme being based on a host system, many individuals and families are living in rural areas so transport can be difficult. The recruitment of a Ukrainian person to support community engagement is being developed.</p> <p>Due to time constraints all agreed to proceed to agenda item 8.</p>	All	25.05.22
PBP/22/44	PARTNERSHIP FORUM – FOCUS AND DISCUSSION ITEM 2 – DEVELOPING THE ROLE OF MN PBP – PREVENTION PROGRAMME		
	<p>DC introduced CI and LW to provide an update on the work being carried out within the Bellamy Estate as part of the NHSEI Prevention Programme.</p> <p>LW explained that Bellamy Estate is on the edge of Mansfield going out towards Rainworth, with just under 1000 households. There are no permanent services on the estate for example GP surgery or Pharmacy. Sharratt Court has recently been refurbished and will house between 40 – 50 residents (depending on capacity) all of whom will have support needs. Part of the criteria to live there must be individuals are receiving support from a service, for example people leaving prison, care or people who are receiving support for drugs, alcohol, or mental health services. For any resident wanting support they need to go into Mansfield, which does create transport issues. LW acknowledged all the previous work</p>		

that has been carried out in Bellamy over the years through Mansfield Health Partnership, the District Council and Active Notts, along with the Tenants and Residents Group and Friends of Bellamy that CI is part of.

During the last two months focus work has been carried out and from this a formalisation of some of the informal social prescribing that is being carried out. Waiting lists for Social Prescribers are long, so if informal support can be provided this can prevent residents going to their GP or A&E.

The recruitment of CI as the Community Officer in Bellamy has really increased uptake in a couple of projects.

CI explained that she is a resident of Bellamy with her family and children. With friends the creation of Friends of Bellamy was formed and from this she has successfully secured the 10-hour role with Mansfield CVS as the local Community Officer. Since in post, a health & well-being course leading to a horticulture qualification has been arranged with to date 20 learners signed up. The course links with Mansfield District Council/Family Action Food Club, Growing Mansfield project. A Community allotment is established with new raised beds which is part of the estate redevelopment. All learners currently have either long-term health or mental health conditions, with one resident who came as a result from a food bank referral, including a guest from the Ukraine. All learners will benefit from learning new skills, meeting friends, fitness and to make healthier choices. Upon completion of the 9-week course learners will receive a £50 'Love to Shop' voucher or £50 credit to the Bellamy Food Club.

On the 6th April, Bellamy hosted a Health and Wellbeing Event and from this:

- 13 vaccinations
- 2 GP registrations
- 16 Blood pressure checks (4 of whom were found to have high blood pressure)
- 11 IAPT signposts
- 4 AGE UK Connect referrals
- 4 potential Building Better Opportunities

have been achieved. The event was carried out with lots of partnership working.

LW explained the case study around supporting a young couple trying to register with a GP and due to not having photo identification, or access to a printer or scanner they were put off from registering, however with the support from the Community Officer they were able to register with a GP. The issue regarding new patient GP registrations have been raised with LM who is working with practices to ensure the registering of new patients is simplified and communications are updated to reflect this.

Wednesday mornings hold a dedicated coffee morning to which LP and DC attended and witnessed first-hand how some of the residents have been supported and their keen interest in supporting and improving the estate for the residents of Bellamy. All local residents are welcome to join the coffee mornings where the Building Better Opportunities Team are available, District Council and local Councillor to offer support and guidance. Going forward another Health and Wellbeing day in the Autumn with the opportunity to offer not only the Covid vaccination but a

	<p>flu clinic is being planned.</p> <p>RM thanked and congratulated both LW and CI on the incredible work carried out on behalf of members. TB expressed his thanks to the powerful presentation and how we could replicate this good work across other neighbourhoods. MC acknowledged the tremendous work that has been carried out but questioned how we support and sustain this type of work, an issue in previous initiatives. LP explained that the NHSEI Prevention programme has supported the initial work and we need to look to partners on how this can be supported long term. The amount of work that has taken place in 6 weeks over 10 hours a week has made a real impact to residents' lives. The need to create a sustainable model whilst managing expectations is paramount along with providing the data and evidence on the difference the project is making. GM was interested in linking in with the local community groups and what contribution the service could add. JL felt that the system needs to provide permission to allow case studies to demonstrate the impact rather than facts and figures.</p>		
<p>PBP/22/45</p>	<p>PARTNERSHIP FORUM – FOCUS AND DISCUSSION ITEM 1 – DELIVERING OUR OBJECTIVES</p>		
	<p>DC confirmed that the Objectives update for Quarter 4 covers the period from January 2022 to April 2022.</p> <p>Objective 2.2 regarding smoking cessation and the quest to increase the uptake of referrals was put to the Board. SS explained that following discussions with the Council's Health Improvement Officer that the referral system is quite difficult to navigate so providing a person-centred approach may be beneficial, rather than getting individuals to fit around the system. Smoking can also be used as a 'crutch' by people as other things may be dire in their life and this gives them some pleasure or release, it can also be used to dull a 'pain'.</p> <p>TJ stated whilst smoking was the highest area for referrals and questioned what other areas might also need referrals for example, weight management, diabetes. Addressing the referral system by supporting residents in other areas might then have a positive impact on smoking which was supported by JT.</p> <p>TB explained within one of his other roles he undertakes the Lung Health Check Program encounters challenges in trying to refer patients to smoking cessation services. Those who get invited for the lung program do have successful outcomes, but the uptake is low. Generally, most of the population do not see the smoking itself as an illness so as such will not see the GP in the first place regarding this. The need to self-refer and continuing to promote messages around the risks of smoking to ensure subliminal messaging is important.</p> <p>HB reiterated the need of Smoking Cessation Groups meeting the needs of the individuals rather than it being a single offer for residents to take up the service.</p> <p><i>POST MEETING NOTE: DC is meeting with the objective leads around the referral process for smoking cessation to review some of the ideas suggested by Forum members to increase referrals to the smoking cessation service.</i></p> <p>PBP/22/45 (1) Action: DC to meet with Objective Leads to discuss the ideas suggested by Forum Members to increase referrals into the services.</p> <p>DC explained that Objective 3.2 (Make sure people known to be frail are looked after in the best possible way) at the time it was discussed at the</p>	<p>DC</p>	<p>14.07.22</p>

	<p>Executive Team meeting, did not have a Lead, this has now been rectified: the previous lead will continue as additional support is being provided to allow this to be picked up.</p> <p>The communication of some pop-up clinics was raised at the Executive Team meeting as there were some taking place within Mid Nottinghamshire that the CVS were not aware of, however this has now been rectified.</p> <p>RM highlighted that Objective 1.1 (Increase readiness for schools and the number of children with skills needed to start school) states that 55% of all vulnerable children aged 2-4 were meeting their expected development, meaning 45% are not ready and yet this objective is on track. DC highlighted that this objective will be going to the next Executive Team meeting for a further deep dive. The numbers provided are for Nottinghamshire and not just specifically for Mid Nottinghamshire so the percentage could be slightly higher/lower and there is a need to investigate these figures further. HB stressed the need to look at where we are with regards to inequalities and the starting position of our communities with Mid Nottinghamshire.</p> <p>AS raised the issue of to what extent the pandemic has impacted on different cohorts within Mid Nottinghamshire, including access to services etc and noted the work taking place is described and linked back to the outcome's framework. CS felt the impact of some of the work that is happening needs to be clearly articulated around what has been delivered. LM questioned the level of engagement from key partners for example from schools. DC confirmed that the narrative in the spreadsheet is completed by the Objective Leads and they are the ones that will have an interface with those key partners.</p> <p>TB suggested that future iterations of the objectives report should link back to the ICS Outcomes Framework and to the Joint Health & Well-being Strategy. A huge piece of work within the population health management programme will be on Covid and its impact within Mid Nottinghamshire and will look to provide an update at a future meeting.</p> <p>PBP/22/45 (2) Action: TB to present an update on the impact of Covid within Mid Nottinghamshire</p> <p>DC confirmed that the NHSEI Prevention work that is taking place in Bellamy will be presented at the ICS Health Inequalities meeting to share learning.</p>	TB	17/11/22
PBP/22/46	<p>HOSTING KATHY MCLEAN CHAIR INTEGRATED CARE BOARD AND AMANDA SULLIVAN CHIEF EXECUTIVE INTEGRATED CARE BOARD ON THE 8th AUGUST</p>		
	<p>Due to timing the breakout session arranged to discuss options for Kathy McLean and Amanda Sullivan's visit to Mid Nottinghamshire on the 8th August did not take place.</p> <p>RM requested all members to have a think about where we would like them to go and how we can best convey the way in which we are working that meets the outcomes that we are attempting to achieve. HB and LP to draft a proposal for discussion at the next meeting.</p> <p>(PBP/22/37) PBP 22/46 (1) Action- Members to suggest new ways of working where the Mid Notts PBP has added value as a partnership for the visit by Amanda Sullivan and Kathy McLean on the 8th August.</p>	All	29/06/22

	(PBP/22/37) PBP 22/46 (2) Action – HB&LP to draft a schedule for the visit from Amanda Sullivan and Kathy McLean for the 8 th August for discussion at the next meeting.	HB&LP	14/07/22
PBP/22/47	ANY OTHER BUSINESS		
	RM confirmed that the next meeting will be a hybrid meeting with the opportunity for members to meet in person at the Committee Room at Ashfield District Council Offices or to join via MS Teams. Therefore, members were requested to confirm if they would be attending in person or virtually to allow for the smooth running of the meeting.		
PBP/22/48	DATE AND TIME OF NEXT MEETING		
	It was CONFIRMED that the next PBP Forum meeting would be a hybrid meeting of face to face in the Committee Room, Ashfield District Council and MS Teams held on 14 th July at 14.00 There being no further business the Chair declared the meeting closed at 16.00.		
	Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted. Rachel Munton Chair		
	Date		