

**UN-CONFIRMED MINUTES OF THE MID-NOTTINGHAMSHIRE PLACE BASED
PARTNERSHIP (PBP) FORUM MEETING HELD ON 21st April 2022
VIA MICROSOFT TEAMS**

PRESENT:	Rachel Munton	Independent Chair	RM
	Hayley Barsby	Chief Executive PBP, Mid-Nottinghamshire PBP	HB
	Paul Robinson	Chief Executive Officer, Sherwood Forest Hospitals NHS Foundation Trust	PR
	David Ainsworth	Locality Director, NHS Nottingham and Nottinghamshire CCG	DA
	Jane Hildreth	Partnership and Engagement Officer, Newark and Sherwood CVS	JH
	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 District Council	TB
	Michael Cawley	Operational Director of Finance, Mid- Nottinghamshire, NHS Nottingham and Nottinghamshire CCG	MC
	Craig Sharples	Associate Director of Partnerships, Nottinghamshire Healthcare	CS
	Diane Carter	Care Integration Lead, Mid-Nottinghamshire PBP	DC
	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
	Arwel Griffiths	Chief Executive, Nottingham Emergency Medical Services Community Benefit Services	AG
	Jane Laughton	Chief Executive, Healthwatch Nottingham and Nottinghamshire	JL
	Theresa Hodgkinson	Chief Executive, Ashfield District Council	TH
	Madeleine O'Sullivan	Chief Executive, Newark and Sherwood CVS	MO
	Greg Cox	General Manager, Nottinghamshire Division, East Midlands Ambulance Service	GC
	Kerrie Adams	Senior Public Health and Commissioning Manager, KA Nottinghamshire County Council	
IN ATTENDANCE:			
	Lauren Shelton	Project Support Officer, Mid-Nottinghamshire PBP (Minutes)	LS
MEMBERS:	Pat Kelsey	Public Member	PK
APOLOGIES:	Lorraine Palmer	Interim Programme Director, Mid-Nottinghamshire PBP	LP
	Helen Davies	Strategic Lead, Active Partners Trust	HD
	Tim Guyler	Director of Integration, Nottingham University	TG

Emma Challans	Hospitals NHS Trust Director of Culture & Improvement, Sherwood Forest Hospital NHS Foundation Trust	EC
Sarah Furley	Director of Partnerships, Nottinghamshire Healthcare NHS Foundation Trust	SF
Lesley Watkins	Partnership and Engagement Manager, Mansfield CVS	LW
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
Dr Gavin Lunn	Clinical Lead, Mid-Nottinghamshire, PICS Limited and Primary Care Network Representative	GL
Maria Ballantyne	Group Manager - Living Well South, Nottinghamshire County Council	MB
Sarah Taylor	Health and Wellbeing Officer, Ashfield Voluntary Action	ST
Richard Henderson	Chief Executive, EMAS	RH
Jo Marshall	Public Health and Commissioning Manager, Nottinghamshire County Council	JM
Lucy Jones	Senior Public Health and Commissioning Manager, Nottinghamshire County Council	LJ
Kim Ashall	Head of Discharge to Assess Integrated Hub, Sherwood Forest Hospitals	KA
Andrea Stone	Health and Wellbeing Manager, Ashfield District Council	AS
Claire Culverhouse	Deputy Director of Integration, Nottingham University Hospitals NHS Trust	CC
Mariam Amos	Strategic Director, Mansfield District Council	MA
Steve Morris	Chief Officer, Mansfield Community and Voluntary Services (CVS) NHS Foundation Trust	SM
Garry McKay	Service Manager, Nottinghamshire County Council	GMK
Dawn Jenkin	Consultant in Public Health, Nottinghamshire County Council	DJ
ABSENT:		
Dr Khalid Butt	Primary Care Network Representative	KB

Item No.	Item	Action	Date
PBP/22/28	WELCOME AND INTRODUCTIONS INCLUDING MINUTES OF THE PREVIOUS PBP FORUM MEETING HELD 24TH FEBRUARY AND 17TH MARCH		
	<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>Following a review of the minutes of the PBP Board (Forum) held 24th February 2022 and 17th March 2022 the Forum CONFIRMED the minutes as a true and accurate record.</p> <p>DA gave an update on the support being provided to those fleeing, Ukraine: all three districts within Mid Notts are supporting families and the Councils are working with the locality where there is a health requirement. SS is supporting with housing and finance. DA reported one incident which was addressed immediately.</p> <p>SS informed the group that she attended the first host meeting for people who are taking in families which offers support, advice and assistance to remove any barriers. The work which took place included home safety and safeguarding checks.</p> <p>SS explained her team are now looking towards school places, reducing language barriers offering online courses, transport, and employment along with different social activities. Links with Public Health to provide mental health support for those who have been affected are taking place. Currently there are 6 families placed in Mid Notts but expecting over 70 in the next couple of weeks.</p> <p>PR asked SS to keep Sherwood Forest on the list for any opportunities that families may need with employment, healthcare, and any other opportunities that families may need.</p> <p>Agreed that an update on this issue would be a part of forthcoming Executive updates for the immediate period.</p> <p>PBP/22/24 ACTION: Update on War in Ukraine to be added to the Executive Update each month.</p>	Exec Rep	19/05/22
PBP/22/29	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/22/30	DECLARATIONS OF INTEREST		
	No declarations of interest were received from those present relating to items on the agenda.		
PBP/22/31	ACTION TRACKER AND FORWARD PLANNER		
	The Action Tracker was not discussed at the meeting.		
PBP/22/32	EXECUTIVE UPDATE		

HB informed the group that the executive meeting set out to discuss the changes in governance arrangements for Mid Notts going forward and what the structure will look like. MO represented CVS colleagues as part of the voluntary sector involvement and stressed the importance of continuing to think about how place is at the centre of all conversations and the impact at Mid Notts level reflecting the issues that our communities face.

The meeting considered delivery, priorities, and objectives; Discussions around the integration White Paper and scrutiny about where we are as Mid Notts in readiness for what is set out as the expectation for us as a Place Based Partnership (PBP).

As a forum HB suggested having a plan ready for April 2023, which will set out our priorities, objectives, and outcomes for a Mid Notts Place. It is important for the Integrated Care Board (ICB) to have confidence about our offer and delivery, including how it fits within the priorities that the ICB are setting. HB anticipates the Executive will present this to the Forum by the November meeting as a draft proposal for comment to ensure a final fit for purpose document in for April 2023.

HB mentioned that Kathy McLean [Chair] and Amanda Sullivan [Chief Executive] of Nottingham and Nottinghamshire ICB will be visiting the MN PBP on 8th August.

AS was invited to brief on desired learning outcomes for this event, and initially stated a keenness to see the different ways of working.


HB discussed the future relationship between the Executive and the Partnership Forum and felt the work will evolve with a push pull between all parties, as described in the Terms of Reference. The Forum will set the strategic direction for the Executive Team, with them developing the granular detail to bring about change due to their accountability and responsibility for delivery. The Forum will have the opportunity to hold the Executive to account to ensure outcomes for patients, communities and citizens are being delivered. The meeting agenda and forward plan will be critical to provide a sense of direction to ensure the Executive Team are focussed and that the Forum provide a sense of direction relating to the outcomes against which the Executive Team must deliver. The Forum will evolve towards this way of working during this transition period to April 2023.

RM was assured that the Forum will be the 'engine room' for action and activity and will not dilute the value of all partners and the strategic guidance and expertise of the Forum, however the Forum will not have accountability for delivery as this will rest with the Executive Team.

PR noted that there is a need for a clear description of the role of the Executive Team to avoid duplication and any impression that the Forum is merely 'rubber stamping' decisions.

HB confirmed that the Terms of Reference for the Executive Team will be presented as a draft to their meeting on the 28th April, being mindful that the Memorandum of Understanding will be coming from the ICB to the PBP which will be critical to the document, which will influence the terms

	<p>of reference over time.</p> <p>AS confirmed that both the Forum and Executive Team responsibilities will evolve and as suggested previously there are functions that the ICB want PBP's to undertake on behalf of the NHS, and these are areas which lend to the unique strengths of the partnerships, collaborative working and the local population.</p> <p>RM suggested that as both the Executive Team and Forum evolve the Terms of Reference proposed for the Forum will require frequent review to ensure the inclusion of emerging changes. .</p> <p>HB supported the intentions to continue and strengthen the Forum to represent the voice of the community which also runs through the Integrated Care System (ICS) to make the community and citizen the central tenet and that all PBP work is happening with our communities and not to them. This has always been a real strength of Mid Nottinghamshire with the voice of the voluntary sector and our patient representatives, and we must ensure this is not diluted. The granular detail and compliance work will be carried out within the Executive Team, with the conversation and shaping of narrative taking place within the Forum to ensure our Place is the central direction for our priorities.</p>		
<p>PBP/22/33</p>	<p>MN PBP PARTNERSHIP FORUM – PROPOSED TERMS OF REFERENCE</p>		
	<p>HB is mindful of the amount of time and work that has been carried out by the Forum going through the function and arrangements for this Forum with the transition from the Board. From these discussions the Terms of Reference reflect and pull together all this work and will require regular review and will evolve to recognise any system changes. Fundamentally the document sets out the key principles and membership that has been discussed and the strategic direction that the Forum will need to undertake including holding the Executive Team to account to ensure outcomes and progress in health inequality priorities.</p> <p>RM took the document as read and explained some grammatical and formatting changes are required with a change to the diagram. After a lengthy discussion regarding the diagram, it was agreed that as it was not currently accurate and needs to be so to assist immediately understanding of emerging structures. It was therefore removed in this format.</p> <p>PBP/22/33 Action: Terms of reference to be amended as discussed and to be presented prior to, and at the next PBP Forum meeting.</p> <p>SB felt the document was shaping up and questioned if there have been any discussions with Public Health with regards to Health Inequalities. Due to both Social Services and Public Health attending under Nottinghamshire County Council it was questioned if both are required to attend.</p> <p>HB confirmed that Public Health has gone on the membership as an addition and that Adult Social Care is also a member.</p>	<p>LP/HB</p>	<p>19/05/22</p>

	<p>SB confirmed that between herself and JG due to work pressures expressed by DJ previously that meetings could be covered between themselves. Although the term is Nottinghamshire County Council it was acknowledged that this included different departments.</p> <p>RM wanted to reassure partners that are not part of the Executive Team that their voice would be heard within the partnership forum.</p> <p>JL required conformation regrading the Patient Partnership Group and Communication and Engagements. DA explained that the Communication and Engagement group is already in existence with an update being provided later in the meeting. Before COVID there was a vibrant patient group which needs to be re energised and would look for support with this.</p>		
PBP/22/34	ADULT SOCIAL CARE REFORM PAPER		
	<p>SB delivered a presentation on the Adult Social Care reform paper which is embedded below.</p>  <p>Microsoft PowerPoint Present:</p> <p>SB would appreciate having a focus on how to avoid placing people into residential care which is not always the most appropriate service. The community does not have the right support to be adapted quickly, advance awareness could reduce placing people in residential care. HB agreed this is something to build into the executive work and forward plan to allow partner contribution.</p> <p>JH explained a lot of unpaid carers undertake this role at short notice with very little guidance and support, work is being carried out within the primary care networks (PCN) to signpost and to empower carers and community champions.</p> <p>TB expressed the importance of putting the patient at the centre and building around what will be the challenges across Mid Nottinghamshire and County Council and to understand the services of how everyone could work together. A workshop style meeting to progress this piece of work was suggested to allow a deep dive into this.</p> <p>PBP/22/34 ACTION: A workshop to develop themes raised in this paper to be scheduled at a future meeting.</p>	SB	TBC
PBP/22/35	UPDATE ON PCN DEVELOPMENT		
	<p>DA provided a presentation on the Primary Care Networks (PCN) development.</p> <p>The PCN's are delivery vehicles for improving health and wellbeing at neighbourhood level. Typically, primary care networks serve 50,000 to 70,000 population. There is a lot of positive work already happening with partners at the PCN and neighbourhood level. Across all the networks there has been a lot of emphasis and energy into additional roles, which will continue to broaden from April 2022, with the opportunity to employ up to 12 additional roles in general practice and primary care networks</p>		

	<p>across multiple professionals. The creative space hub based at Ashfield Health and Well Being Village, which show Ashfield voluntary Action (AVA) have been a real key driver for the creative space area that has room for private one to one consultation and group consultation/group therapy spaces. There is a Community service redesign across the out of hours to include weekends and evenings starting with community nursing, the redesign will be a 100-day pilot and will involve private home care providers including around 4000 people in their own homes looking at early deterioration, and monitoring people in new ways. DA thanked the partners who came together with the primary care networks to organise a pop-up event at Oak tree lane, there was positive feedback from the education sector and voluntary organisations working in that area particularly around access to GP's. There have been around 10,000 appointments provided for people in Oak Tree Lane between January and March. DA and TB acknowledged the Clinical Directors could attend this forum if it will add value and structure the meeting for specific agenda items. This could add a new level of knowledge and experiences to this forum.</p> <p>PBP/22/35 ACTION: DA and TB to speak with the clinical Directors about the optimal way they might be represented or be further involved in Forum discussions.</p>	DA/TB	19/05/22
PBP/22/36	<p>COMMUNICATION AND ENGAGEMENT STRATEGY UPDATE</p>		
	<p>DA provided a presentation on the work currently undertaken by the Communications and Engagement Group.</p> <p>A channel audit has been completed to understand where the communications are going through which of our partner organisations, which has resulted in a vibrant cascade system in place which is operating well across health, social care, voluntary and councils. Marcus Duffield at Sherwood Forest Hospital Trust has helped produce a schedule of communication activities from July onwards that aligns to the Forum objectives. This will be used to gather updates from the leads of the priority areas, case studies coming forward to this Forum and wider partner cascades.</p> <p>A winter and Easter communication campaign has taken place. Data has been shared across partners around the postcode areas with high A&E attendances and with the help and thanks to the Community Champions 18,000 leaflets were posted through the doors of our residents regarding making the right choice for health and social care and not always needing to go to A&E.</p> <p>The Executive Team have requested the group to look at compiling a new logo for Mid Notts Partnership, due to the current logo being out of date. JH is supporting this piece of work and the suggestions is to run a community competition to design the new logo.</p> <p>PBP/22/36 Action: Schedule of communication activities and further update to be brought to a future meeting.</p>	DA	TBC

PBP/22/ 36	ANY OTHER BUSINESS		
	<p>HB expressed her thanks to SB and DA for the informative presentations. As the Forum meeting progresses and allows for focused areas of work to be undertaken it will clearly articulate the opportunities that are available both within the health and social care sector, and both presentations demonstrated a clear link between the two.</p> <p>DA provided the update on the Primary Care Network (PCN) it clearly evidenced the partnership work and contributions from a variety of partners to deliver the work that has taken place. Going forward we need to continue to challenge ourselves to test if all partners that can be involved, are included, following the examples that came from SB's presentation to explore and maximise the impact and outcomes for our communities.</p> <p>The Terms of Reference will be amended and circulated back out to members for comments, with them to be approved at the May meeting.</p> <p>RM explained her preference of the July meeting being a hybrid approach to allow for attendees to meet in person and via MS Teams. TJ would welcome the opportunity to meet in person but felt the blended system needs to be carefully chaired to ensure those on screen are not lost with the people in the room talking.</p>		
PBP/22/ 37	DATE AND TIME OF NEXT MEETING		
	<p>It was CONFIRMED that the next PBP Board meeting would be held on 19th May 2022 at 14.00</p> <p>There being no further business the Chair declared the meeting closed at 16.00.</p>		
	<p>Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted.</p> <p>Rachel Munton</p> <p>Chair</p> <p style="text-align: right;">Date</p>		