

# Health and Wellbeing Board

Wednesday 15 January 2025

## Minutes

### Attendance

#### Committee Members

Councillor Margaret Bell (Chair)

Councillor Sue Markham

Councillor Jerry Roodhouse

Councillor Maggie O'Rourke - Rugby Borough Council

Councillor Jim Sinnott - Warwick District Council

Councillor Sandra Smith – North Warwickshire Borough Council

#### Officers

Amy Bridgewater-Carnall, Senior Democratic Services Officer

Gemma Mckinnon, Health and Wellbeing Delivery Manager

Becky Hale, Executive Director for Social Care and Health

Dr Shade Agboola, Director of Public Health

Nigel Minns, Executive Director for Children and Young People

#### Others Present

Elizabeth Hancock, Healthwatch Warwickshire

Sue Noyes (University Hospitals Coventry & Warwickshire)

Tim Sacks, Director of Primary Care – NHS Coventry & Warwickshire ICB

Dianne Whitfield (Coventry and Warwickshire Partnership Trust)

Emma Daniell, Deputy Police and Crime Commissioner

### 1. General

The Chair welcomed everyone to the meeting and highlighted the number of items for discussion and noting on the agenda. Councillor Bell asked partners to consider not only the great work already being carried out, but to identify opportunities to strengthen activity and ultimately improve residents' health and wellbeing.

#### (1) Apologies

Apologies for absence were received from Councillor Penny-Anne O'Donnell, Councillor Jo Barker and Councillor Marian Humphreys.

#### (2) Members' Disclosures of Pecuniary and Non-Pecuniary Interests

There were none.

### **(3) Minutes of the Meeting of the Warwickshire Health and Wellbeing Board on 11 September 2024 and Matters Arising**

The minutes of the meeting held on 11 September 2024 were received and agreed as a true record.

The Chair raised two matters arising from the minutes. Firstly, a briefing note on the new sexual health contract had been requested and officers agreed to double check this had been circulated.

Secondly, Councillor O'Rourke had asked for more information on the Urgent Care Review taking place across the County. Councillor Bell advised the meeting that this item had been added to the Adult Social Care & Health Overview & Scrutiny Chair and Spokes agenda, for discussion at a future meeting.

### **(4) Chair's Announcements**

Sue Noyes, UHCW, addressed the meeting and advised that the hospital were operating a 'full capacity protocol' as of that morning. Time had been spent looking at creating more temporary beds and were looking to avoid anyone receiving corridor care. The short stay unit had been very busy that week, managing 18 discharges the previous day whilst trying to manage privacy, dignity and sleep pattern which had been highlighted in a recent survey. UHCW were in receipt of a weekly report from NHS England for the Midlands and were currently in the middle of the pack for ambulance handovers, averaging 51 minutes timeframes, an improvement on the previous week. Ms Noyes concluded by advising that although the service was under pressure, it was not quite as busy as it had been after Christmas.

Diane Whitfield, Coventry and Warwickshire Partnership Trust, advised they had experienced significant bed pressures in November and December. This remained challenging but staff were managing the flow appropriately, including via the use of step-down accommodation. Additional support was being sought for adults in care homes and acute settings. The children's directorate was proving particularly challenging with month on month increases. The highest demand was impacting on waits within CAMHS and neurodiverse development services. Although the Trust had been relieved to hear of the recent Government commitment to retain the Mental Health investment standard. Ms Whitfield was pleased to report that the Trust had no out of area placements for over six months, which was very good news.

The Chair noted that there were no representatives from South Warwickshire NHS Foundation Trust or George Eliot Hospital NHS Trust to provide updates.

Becky Hale, Executive Director for Social Care and Health, addressed the meeting stating that, linked to the NHS pressures, there was a lot of demand in Adult Social Care. There had been good partner engagement throughout December and January, with a lot of discharges taking place on a day-to-day basis. Community services were equally busy with an increased growth of those needing support. Becky Hale recognised the amount of good joint working taking place to move through pressures, with staff continuing to push through. There was a hope that some of the pressures would settle over the next few weeks.

Shade Agboola, Director of Public Health, advised that there had been an increase in the prevalence of flu, nationally as well as within Warwickshire. This was being referred to as a 'quad-demic' as it included flu, Covid-19, respiratory virus and norovirus. She reported that the vaccine uptake had not been great despite the campaign launched last October and provided statistics of vaccine uptake from various groups. Shade Agboola highlighted that there had been a decrease in vaccination uptake within staff groups. Promotional communications were repeated in December and January, via numerous channels. In relation to the Smoke Free Generation Grant, additional funding to progress had been received and outcomes were recording real progress. A new website had been launched, resulting in an increase in referrals and evidence showed there was a decrease in the number of pregnant women smoking at the time of delivery. Shade Agboola praised staff for their work and was delighted that the Council was able to take credit for the achievements so far. The next area of focus would be tackling the prevalence of vaping.

Following a query from Councillor Bell, Shade Agboola confirmed that the decline in uptake of the flu vaccine by staff included those working in a health setting.

Councillor Bell thanked all those who had attended the Development Session in November, a summary of which was included later on the agenda. The next development session would be held in March and the aim was to look at the recommissioning of the CAMHS service.

## **2. 2024 Director of Public Health Annual Report - The Power of People and Place: celebrating and inspiring community-based wellbeing**

Shade Agboola, Director of Public Health introduced the annual report which focused on The Power of People and Place. The Board were asked to consider and endorse the report along with the recommendations within it.

This year's report was presented as a mixed media video, which could be watched in its entirety or by chapter. A summary report was attached as an appendix to the report and Board members had been sent a link to the video in advance of the meeting.

Shade Agboola explained that the report had been produced in partnership with key stakeholders, with extensive engagement being carried out through a variety of forums from April to December 2024. The scope for the 2024 report was quite large and aimed to showcase what was good about Warwickshire.

Members received an update on progress made since last year's 2023 Annual Report was published, which had focused on Working Together to Prevent Domestic Abuse. They noted that real progress had been made, particularly in relation to Recommendation 1 which had encouraged partnership working. Detailed progress updates were included alongside each original recommendation on pages 25 and 26 of the report.

The recommendations within the 2024 report celebrated 'The Power of' Place, Communities, Relationships, Partnership, Prevention and the Possible. Each recommendation aligned with the individual power statements as detailed on pages 21 to 23 of the report. Timescales and next steps highlighted that the report would be published in a digital format on the Council's website

along with the Executive Summary and Appendices. This would be communicated and promoted widely with key partners, stakeholders and residents throughout Warwickshire.

Councillor Roodhouse thanked Shade Agboola for the report which he thought was very good. He queried how the recommendations would be turned into reality and whether they would align with other Council strategic documents. He also referred to the amount of work undertaken by Councillors and Parish Councils which he felt could be reflected within the document. Councillor Roodhouse also noted the chart on page 24 which indicated a number of health performance indicators as 'amber' or 'red'.

The Chair agreed that as the strategy was developed, it was important to focus on what had been 'red' for a long time and ensure those areas were targeted.

Shade Agboola assured there was a clear dissemination and expressed huge thanks to the team who had worked on the report. She advised there was a long list of people and organisations it would be shared with including District and Parish Councils. In response to queries relating to the Health Profile grid, she acknowledged that there had been movement on some areas from red to amber but reminded members there was a lag with the data of up to three or four years. Officers therefore relied on performance metrics instead and focused on real time data when available.

Councillor Maggie O'Rourke thanked officers for the report and was encouraged by the level of engagement plan. She queried whether the Council carried out any work with major employers or engaged with other businesses. In response, Shade Agboola referred to the Wellbeing For Life report, which appeared later on the agenda, and included details about work undertaken with local businesses, encouraging them to embed Health and Wellbeing activities in their workplace. She went on to explain that the recommendations were not just the responsibility of Public Health but were about embedding prevention, particularly following the Darzi review and all parties needed to be taken prevention seriously.

Councillor O'Rourke also noted that there were opportunities for greater focus working with local government at a local level. Shade Agboola agreed, referencing the Health in All Policies report on the agenda which aimed to embed health and wellbeing thinking with District and Boroughs.

The Chair reiterated the importance of the report being shared with District, Borough and Parish Councils and urged everyone to watch the link to the video, circulated prior to the meeting.

## **Resolved**

That, having considered the report, the Health and Wellbeing Board endorsed the 2024 Annual Report of the Director of Public Health and the recommendations within it.

### **3. 2024/25 Better Care Fund progress update**

Members received a report from Rachel Briden, Integrated Partnership Manager, which updated on the progress with the 2024/25 Better Care Fund, provided information on performance against national metrics and outlined preparations being undertaken for next year.

Rachel Briden outlined the progress so far and key schemes which included Progress and key schemes including Admission Avoidance, Community Integrator and the Community Recovery

Service. Members were reminded of the Health and Wellbeing Board Sub-Committee meeting held in October 2024, where the revised Better Care Fund Plan for 2024/25 had been approved. It was confirmed that funding was now in place and Members were signposted to the table at 1.4.4 of the report which highlighted the impact some of that funding was having.

Rachel Briden referred to the discussions had at the Sub-Committee relating to the impact on patients in Rugby and the data outlined at section 1.4.5 of the report. This demonstrated that the service was well utilised by all three acute trusts and access to services was roughly proportionate across the County. The report addressed the ongoing impact on services for Rugby residents, which remained challenging despite additional funding being made available from Coventry and Warwickshire Integrated Care Board. It was hoped that all parties would be involved in designing the model for next year.

Councillor Jerry Roodhouse thanked Rachel Briden for the report, raising a concern about the lack of inflationary increase which he felt equated to a reduction in funding. He asked how early stakeholders could be involved in the process, prior to the sub-committee being held, with a view to influencing where the money was allocated to.

Rachel Briden outlined the planning taking place and confirmed that one element of funding had been confirmed on 18 December 2024. Officers were still awaiting the conditions relating to the funding and had not received any further details regarding funding. She advised another sub-committee would be required in the Spring and highlighted that the ICB Discharge Fund was an unknown element at this stage.

The Chair recognised the issues being raised and hoped these could be picked up in the Forward Plan and at the Joint Development Session due in March 2025.

Councillor Maggie O'Rourke, Rugby Borough Council expressed her frustration at not seeing the data at a Place based level. She referred to a doctor led care unit which had been discussed for three years but the data was not being shared by the ICS. She expressed her desire for Public Health to look at this as this was not just affecting Rugby but all areas in Warwickshire.

In response, Becky Hale, Executive Director Social Care and Health, advised that she was on the board of the ICB as the local authority representative. She advised that the public papers were available but agreed to look at how this could be disseminated down to place partnerships.

Sue Noyes, UHCW, confirmed that she had discussed this issue with Danielle Oum, ICB, recently and were looking at how UHCW played into the Warwickshire Care Collaborative as she was concerned there was a gap, particularly with regard to Rugby, and hoped to address how to have a greater presence there.

The Chair stated that the Community Recovery Service had highlighted the challenges for residents in Rugby. She recognised that there would be no inflationary rise and queried what criteria would be used to address health and equalities. Rachel Briden advised there were a number of areas being looked at including immediate pressures, externally and internally delivered schemes, with a balance between discharge activity and admission avoidance.

The Chair thanked Rachel Briden for all of the work undertaken by her and the team.

## **Resolved**

That the Health and Wellbeing Board

- 1) notes the progress update on Better Care Fund priorities including the Community Recover Service;
- 2) notes performance against the national Better Care Fund metrics; and
- 3) notes planning in preparation for next year.

### **4. Adults with a Learning Disability Joint Strategic Needs Assessment**

The report presented the third needs assessment in the work programme approved by the Health and Wellbeing Board in January 2023. Shade Agboola introduced the report advising that there was a lot of support across the system including Coventry and Warwickshire Partnership Trust, the ICB and with other stakeholder groups detailed at paragraph 1.8 of the report.

Michael Maddox, Public Health Principal, outlined the joint strategic needs assessment which focused on adults aged 16 years and older with a learning disability in Warwickshire. Officers had made use of Population Health Management data along with an engagement mapping exercise which had been undertaken and subsequently fed into the document. Michael Maddox explained that an Easy Read version of the entire document was being developed with a one-page infographic which it hoped would help to get key points across.

The presentation covered the Scope of the JSNA along with Key messages summarised as follows:

- Not all people with a learning disability are on a GP register;
- Underrepresentation of people from ethnic minority backgrounds;
- Data relating to Health of the Population identifies that life expectancy for individuals with a learning disability is lower and there are physical as well as mental health issues;
- Individuals with mental health issues are less likely to attend health screening or vaccination appointments and are more likely to have an avoidable death;
- People with a learning disability are likely to be living in a deprived in later life which also impacts on health.

The recommendations within the JSNA had been grouped into four categories according to their audience:

- recommendations for multiple organisations;
- recommendations for local authorities;
- recommendations for all commissioners of services across Warwickshire; and
- recommendations for primary and secondary care.

Work would continue to promote the learning disability register, improve data collection and promote the use of health and social care passports.

Michael Maddox advised that the team would welcome feedback from the Board about where the JSNA could be shared, stating that a dissemination plan was being developed. Residents could sign up to receive JSNA updates, along with a six-monthly newsletter with updates on specific data. In addition, a Pharmaceutical Needs Assessment survey would be live until the end of the month.

Councillor O'Rourke felt that annual health assessments could be given a greater focus through place based care and recognised that there were specialist nurses working in hospitals.

Tim Sacks, Primary Care at the ICB, addressed the meeting and advised that annual health checks for those with learning disabilities was an enhanced service. The development of a register for those with a learning disability helped to encourage them to take up the offer of a health check on an annual basis and training was ongoing to embed this. He explained that at present, take up of this was approximately 70% but he would like it to be better.

The Chair asked if there was any data available to demonstrate take up of the service by geographical area. Tim Sacks agreed to contact CWPT colleagues and enquire, explaining that uptake was on a practice basis.

Councillor Roodhouse referred to the housing plans and growing demand for services, with Stratford District Council having recently gone out to consultation on future building plans. He queried if the Warwickshire Property Development Group could be approached with a view to looking at building specialist housing for the future. He also acknowledged that maintaining a strong workforce was a challenge and wondered if further encouragement could be given to draw people into working in the service. Councillor Roodhouse went on to talk about the importance of palliative care, transitioning periods of age and the support required when parents or carers of people with learning disabilities, passed away. He asked how this could be built into other strategies.

Michael Maddox explained that the team used live data which could be monitored and agreed that housing had similarly been a key factor in the Healthy Ageing JSNA. He advised that there was a piece of work underway to highlight this issue to Housing boards. In response to the question raised by the Chair, Michael Maddox also advised that data on annual health checks was broken down by Primary Care Network on page 49 of the report.

Councillor Roodhouse felt that speed was required as Stratford was consulting on their Local Plan now and asked if would be possible to submit a comment as Public Health.

In response to a question from the Chair, officers confirmed that there was a Learning Disability and Autism Collaborative and a Learning Disability Health and Equalities Group that could oversee these recommendations. It was suggested that both organisations be engaged with and asked to report back to the Board on progress.

## **Resolved**

That the Health and Wellbeing Board

- 1) Notes and endorses the findings and recommendations arising from the Adults with a Learning Disability Joint Strategic Needs Assessment (JSNA);

- 2) Approves the publication of the Adults with a Learning Disability JSNA and supports its dissemination within member organisations; and
- 3) Encourages all member organisations to make use of and have regard to the Adults with a Learning Disability JSNA in the exercise of their functions, including in the planning, review and commissioning of relevant services.

## **5. Update on the Health in All Policies (HiAP) approach across Warwickshire**

The Board received a presentation from officers updating them on the progress made implementing a Health in All Policies (HiAP) approach across Warwickshire. The aim of the Policy was to incorporate a collaborative, evidence-based approach to improving the health of people by incorporating health considerations into all decision-making and policy areas.

Members were reminded that the approach had been endorsed by them in 2021, with a lot of work having been undertaken in that time. Progress had been made with stakeholder engagement and evaluation outcomes, all of which aligned with the Health and Wellbeing Strategy. Staff awareness had been raised through workshops and the development of a toolkit which was now being revisited to see if a refresh was required. Hannah Cramp, Public Health Service Manager, advised that there had been good buy in from internal and external stakeholders, resulting in a number of positive case studies which evidenced meaningful change.

Chioma Pickering, Public Health Principal, outlined some of the case studies and referred to the partnership group, which was made up of different County Council services including Transport, Active Travel, Corporate Policy and Strategy Team, Public Health, Green Spaces and the Country Parks Team.

Janet Neale, Service Manager Infrastructure Team, explained that all of the District and Borough Councils had been worked with and outlined a list of the services currently involved. She also referred to Developer Negotiations and Contributions which included S106, CIL and S278 funding.

An example of integration at the South Warwickshire Place Partnership was given with training delivered and workshops being held in 2022. This had resulted in project delivery such as Lillington Respiratory Project and the EC04 Home Energy Efficiency Initiative.

The Chair thanked all of the officers for their presentation and work so far.

Councillor O'Rourke thanked the officers for the update and felt that Rugby Borough Council may benefit from a workshop for Members and the senior team.

### **Resolved**

That the Health and Wellbeing Board

- 1) Notes and comments the progress made with implementing a Health in All Policies (HiAP) approach across Warwickshire; and

- 2) Considers the formal adoption of the HiAP approach as a core component in the refresh of the Warwickshire Health and Wellbeing Strategy.

## **6. Health and Wellbeing Strategy 2026 - 2031**

Gemma McKinnon, Public Health Service Manager, introduced the report which outlined a timeline for development of the Health and Wellbeing Strategy 2026-2031. The existing strategy was due to run until March 2026, therefore, work had already started to develop a new strategy which would be developed from its Place-based Partnerships upwards.

The Chairs of the Place Partnership had committed to holding a series of workshops in February, March and April 2025 to help inform priority setting. The report suggested attending development of the strategy as a standing item to future HWBB meetings and proposed carrying out a governance review as part of the process. This would include reviewing membership and terms of reference of the HWBB and its associated groups.

One of the aims was to strengthen the role of Place Partnerships as only 20% of health was shaped by health care. Feedback received at previous HWBB meetings highlighted that the existing strategy did not focus on intended impacts, therefore there was an aim to build that in from the start.

A timeline of actions was attached at Appendix 1 to the report and it was agreed that a standing Health and Wellbeing Strategy item would be added to the forward plan for each meeting. Gemma McKinnon highlighted the engagement due to take place including a period of public consultation over the summer. A report would come back to the Board updating on the priority setting workshops and requesting approval to go out to consultation. A member development session would also be planned after that.

The Chair encouraged all those present with a portfolio responsibility for Health at the District and Borough Councils to communicate with officers to make the workshops happen. Councillor Bell felt that the strategy had been very broad previously and was keen to focus on certain, specific priorities in order to gain progress.

It was noted that Town and Parish Councils would also be included in engagement and a governance review of the HWBB would be undertaken to ensure that membership was fit for purpose.

### **Resolved**

That the Health and Wellbeing Board

- 1) notes the proposed timeline for development of the Health and Wellbeing Strategy 2026-2031;
- 2) endorses the proposed approach to develop the Health and Wellbeing Strategy 2026-2031 priorities from Place-upwards, with initial priority setting workshops to be held in February / March 2025; and

- 3) endorses the proposal to carry out a governance review as part of the Health and Wellbeing Strategy 2026-2031 process, including reviewing membership and terms of reference of the Health and Wellbeing Board I and its associated sub-groups.

## **7. Update on Wellbeing for Life**

Members received a report from Jo Southan, Delivery Manager Public Health, which detailed the evolution of the Wellbeing for Life programme since 2020, including the plans for 2025-2027.

The report provided an update on the work undertaken so far and the activities launched. There had been extensive partnership working across Coventry and Warwickshire, as well as with District and Borough councils and local services. Two of the activities highlighted in the report were 'Thrive at Work' and the 'Workplace Wellbeing Forum'.

Jo Southan outlined the Thrive at Work (TAW) accreditation programme that business could sign up to which promoted health and wellbeing. There were four levels of accreditation, funded by the UK Government and managed by West Midlands Combined Authority. The scheme was free to organisations across the West Midlands, with 111 businesses signing up during 2019. Since then, a further 118 businesses had signed up with many going on to achieve Gold accreditation. One example of a technology company had gone on to adopt some of the TAW best practice in other countries.

Members were signposted to section 1.8.5 of the report which gave an overview of the Workplace Wellbeing Forum and the progress this had made since its launch in 2022. Five forums had been held across Coventry and Warwickshire, enabling local employers to network and access resources to help them develop and improve wellbeing practices in their workforce. A variety of themes had been covered at the forums including mental health, suicide prevention, menopause and the wider determinants of health.

Jo Southan outlined the plans and next steps as detailed on page 203 which included a proposal to reconstitute the previously disbanded Steering Group as a Network. In addition, the website was also being reviewed by the Public Health and ICT teams. It was hoped that another festival could be held with a strong focus on prevention along with an aim to promote the accreditation across the County. Finally, local business would be encouraged to host and lead forums with Portfolio Holder support.

The Chair thanked Jo Southan and officers for their work and recognised that the Thrive at Work scheme had been a success.

### **Resolved**

That the Health and Wellbeing Board notes the update provided in this report and the progress made since the Wellbeing for Life approach was adopted in 2020.

## **8. Pharmacy, Optometry and Dental Services Delegated to the ICB**

Tim Sacks, Director of Primary Care - ICB, introduced the report stating that this was a complex picture of commissioning responsibilities, with services switching between organisations over the years. However, the responsibility had sat with the ICB since 2023.

The decision had been made to retain an officer for each team, based in Solihull. Local governance meetings were held regularly with different provider groups and, as of March 2025, there would be a joint forum established.

With regards to Pharmacy, Mr Sacks advised that a vote had been taken recently to start collective action, with contracts being lost and seven pharmacies closing across Warwickshire, mostly through Lloyds Pharmacies. It was hoped that strike action would not take place but there may be an impact on opening hours. Colleagues were being worked with to address issues and there had been a few bids looking to reopen pharmacies but it was a very difficult market financially, with only two applicants last year.

Mr Sacks highlighted section 3.8 of the report which related to Pharmacy First, which enabled patients with certain low acuity conditions to be seen in a Community Pharmacy, rather than by a GP. In addition, the IT was improving allowing direct bookings.

Mr Sacks went on to speak about Dental Services, advising there were good relationships with the Dental Committee who met regularly. He explained that Dentists were not required to take on NHS work, however, Coventry and Warwickshire were the second highest performing area for dental access and recovery. Funding remained an issue because money had to come from existing healthcare budgets but where an underspend was identified this could be reallocated to another dentist.

General Ophthalmic Services (GOS) were experiencing equal pressures and although sight tests were NHS funded, the cost of the test did not cover the work undertaken. The different types of contract were detailed at section 5.3 of the report and it was noted that there were currently 67 Optometry providers within Coventry and Warwickshire.

The Chair asked a question about the percentage of population accessing NHS funded dental services. She also queried if there was any data showing how many people chose to attend a private dentist instead. Mr Sacks explained that each dental practice that had an NHS contract had a Unit of Dental Activity (UDA) rate and were unable to exceed that without permission. With regard to private dentists, they were not required to provide patient number data with the NHS.

Councillor Maggie O'Rourke asked to see the figures as to how many people were attending A&E with tooth problems. In addition, she asked how many were accessing services in Coventry instead of their local dentist. She also highlighted that although the technology for requesting prescriptions was good, there were individuals who needed assistance and support to use this, with many waiting days for their medication.

Tim Sacks advised there was a National Dental Team meeting due that week and dentists were being asked for the data related to the provision of urgent care. There were eight places that people could access different levels of care. Mr Sacks acknowledged that there were more NHS practices available in Coventry and fewer residents accessed private dentists in the city. In relation to the pharmacy app query, Mr Sacks advised this was improving with the repeat prescription service and direct links from the GP to the pharmacy but there was no software to advise if there would be a wait for medication.

Councillor Sue Markham asked for clarification on whether patients were able to choose the dental service they wanted on the NHS as not all treatments were included. Mr Sacks referred to section 4.10 of the report which detailed the activity and payment bands that dental providers could deliver, noting that not all dental services had to be provided on the NHS.

The Chair acknowledged the delicate balance between setting up private businesses and local authorities commissioning services from them. She was unsure why the relevant health service tried to restrict businesses from setting up in this area.

Councillor O'Rourke asked for a response on her query relating to risk registers. Tim Sacks advised that there were risk registers for all services and gave an overview of the different types of risk including not enough service provider or the contract not delivering the service. There was not a risk identified specifically from a public health basis relating to the impact of individuals unable to access a service and attending elsewhere.

Mr Sacks provided further explanation on the risks included in their risk register, the ongoing challenges relating to funding and the desire for service providers to accept NHS patients if it was not financially viable for them.

The Chair thanked Mr Sacks for attending the meeting and providing a comprehensive overview.

## **Resolved**

That the Health and Wellbeing Board

- 1) notes the report on the delegation of responsibility for Primary Pharmacy, Optometry & Primary and Secondary Dental Services from NHS England to the Coventry and Warwickshire ICB taking effect from on 1st April 2023 and the processes outlined for the management and governance of these arrangements; and
- 2) notes the status of the services delegated as outlined in this report.

## **9. Minutes of Health and Wellbeing Board Sub-Committee**

The minutes of the Health and Wellbeing Board Sub-Committee held on 30 October 2024 were accepted and agreed.

## **10. Children and Young People Partnership**

The Chair advised that the items listed under 'Updates to the Board' would be taken as read but any questions or comments could be responded to outside of the meeting.

This report detailed activity from the Children and Young People Partnership. There were no questions raised and the report was noted.

## **11. Warwickshire Safeguarding Annual Report 2023-2024**

This was an annual report received in accordance with the requirements of the Care Act 2014 and outlined the work progressed by partners.

The Chair noted the importance of this report and advised that following the separation of the Children and Young People and Adult Social Care and Health directorates, further safeguarding reports would be submitted to the Board.

There were no further questions raised and the report was noted.

## **12. Pharmaceutical Needs Assessment Supplementary Statement**

The report requested endorsement of the Pharmaceutical Needs Assessment Supplementary Statement, which had been published on Warwickshire's Joint Strategic Needs Assessment (JSNA) website. There were no questions raised and the report was noted.

## **13. Summary of Health and Wellbeing Board Development Session (November 2024)**

The report provided a summary of the Health and Wellbeing Board Development Session held on 20 November 2024. There were no questions raised and the report was noted.

## **14. Forward Plan**

It was agreed that an additional meeting would be added towards the end of May 2025 and the Senior Democratic Support Officer would circulate invitations as soon as possible.

In addition, the following items would be added to the forward plan for either May or July 2025:

- Discharge from Hospital (Laura Nelson, ICB); and
- Safeguarding changes

A standing item on the Health and Wellbeing Strategy would also be included.

The meeting rose at 12.11pm

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Chair