

HEALTH OVERVIEW & SCRUTINY COMMITTEE

Minutes of the joint meeting of the Gloucestershire Health Overview & Scrutiny Committee and the Adult Social Care and Communities Scrutiny Committee held at Shire Hall, Gloucester, on Thursday 11 January 2024.

To view the recording of the meeting, please refer to the Gloucestershire County Council website at the link [here](#).

Present **ASCC:**
Cllr Cate Cody, Cllr Terry Hale, Cllr Tim Harman (Vice-Chair),
Cllr Stephen Hirst, Cllr Steve Robinson

HOSC: Cllr Andrew Gravells MBE (Chair), Cllr David Brown,
Cllr Linda Cohen, Cllr Dr David Drew (Vice Chair), Cllr Terry Hale,
Cllr Stephen Hirst, Cllr Paul Hodgkinson, Cllr Susan Williams (Remote)

Co-opted Members: Cllr Adrian Bamford, Cllr Dr Collette Finnegan,
Cllr Julia Gooch and Cllr Dilys Neill

1. APOLOGIES

1.1 Chair of the Gloucestershire Health Overview and Scrutiny Committee, Cllr Andrew Gravells MBE, welcomed everyone to the meeting and explained that the meeting was a joint meeting of the Health Overview and Scrutiny Committee and the Gloucestershire County Council Adult Social Care and Communities Scrutiny Committee.

1.2 Cllr Gravells welcomed Kevin McNamara, newly appointed Chief Executive of Gloucestershire Hospitals NHS Foundation Trust to the meeting. It was confirmed that Kevin was taking over the role from former Chief Executive, Deborah Lee, having previously worked for Great Western Hospitals, Swindon.

The following (member) apologies were noted at the meeting:

Cllr Lisa Spivey (Chair of the Adult Social Care and Communities Scrutiny Committee)
Cllr Cate Cody
Cllr Pam Tracey MBE
Cllr Alan Preest
Cllr Helen Fenton
Cllr Gemma Madle

Due to illness, Cllr Susan Williams joined the meeting via remote access.

Apologies were also noted from Cllr Carole Allaway-Martin, Cabinet Member for Adult Social Care: Commissioning.

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2. DECLARATIONS OF INTEREST

No declarations of interest were made at the meeting.

3. MINUTES

The minutes of the following meetings were confirmed and agreed as a correct record of the meetings: -

- a) Adult Social Care and Communities Scrutiny Committee meeting held on 14 November 2023 (Chair – Cllr Lisa Spivey)
- b) Gloucestershire Overview and Scrutiny Committee meeting held on 28 November 2023 (Chair - Cllr Andrew Gravells)

4. GLOUCESTERSHIRE HEALTH AND WELLBEING STRATEGY ANNUAL UPDATE 2024

4.1 In response to Motion 881 – Tackling Poverty and Deprivation, (motion proposed and seconded by Cllrs David Willingham and Cllr Jeremy Hilton at the Gloucestershire County Council meeting on 8 September 2021), the committee received an update on the Gloucestershire Health and Wellbeing Strategy. The update included presentations on the following Health and Wellbeing Board Strategic Priorities.

4.2 Health and Wellbeing Board Priorities Update – Siobhan Farmer (Director of Public Health)

4.3 To view the report and presentation published with the agenda, please refer to the link [here](#).

4.4 Members were informed that regular updates on the Health and Wellbeing Board Strategy are provided to the Gloucestershire Health and Wellbeing Board and form part of the work of the Gloucestershire Health and Wellbeing Partnership. To view updates on the work of the Partnership, please refer to the link [here](#).

4.5 The Gloucestershire Health and Wellbeing Board is responsible for overseeing the development and delivery of the Joint Health and Wellbeing Strategy, and ultimately, improve the lives of the people of Gloucestershire.

4.6 Focussing on the following priorities, the Health and Wellbeing Board vision is to ensure that Gloucestershire is a place where everyone can live well, be healthy and thrive.

- Physical activity;
- Adverse childhood experiences;
- Mental wellbeing;
- Social isolation and loneliness;

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- Healthy lifestyles (focussing on healthy weight);
- Early years and best start in life;
- Housing and health.

4.7 The Director of Public Health confirmed that progress was being made on all priorities, but not necessarily in the direction that had been anticipated pre Covid. Some areas of activities had halted, whilst others had been introduced in response to the pandemic. Not all priorities were presented at the meeting, the progress of which can be accessed via the County Council website at the link [here](#).

4.8 Key areas of focus considered during the first presentation included mental wellbeing and social isolation. Presenting a summary of highlights plus areas of challenge, members were assured that, from effective partnership working, any next steps to be taken would focus on overcoming the challenges.

4.9 Responding to questions, the Director of Public Health and Chief Executive of Gloucestershire Health and Care NHS Foundation Trust, Douglas Blair, were asked to provide statistical data on young people's mental health in Gloucestershire, including on the increased number of young people not attending school following the pandemic. **Action by – Siobhan Farmer and Douglas Blair**

4.10 It was reported that the huge rise in demand for mental health services, including mental health services for young people, was having a significant impact on the health and care system. From collective partnership working, every effort was being made to address current demands on the system.

4.11 A member enquired what activities were being explored to support the mental health and wellbeing of asylum and refugee families in Gloucestershire. The comments were noted and an update on the work relating to Gloucestershire Action for Refugees and Asylum Seekers (GARAS) to be provided to both committees. For more information, members may wish to refer to the agenda and minutes of the Adult Social Care and Communities Scrutiny Committee meeting held on 14 November 2023. **Action by – Public Health Team**

4.12 Adverse Childhood Experiences (ACEs) Priority, including updates on trauma informed relational practice and complex lives – Samantha James, Molly Macleod and Helen Flitton

4.13 The Gloucestershire ACEs campaign first launched in 2017/18. At the same time, trauma informed approaches were being introduced nationally, with various training packages commissioned and implemented in local schools.

4.14 Progress was being made but had halted and significantly impacted upon during the pandemic.

4.15 The slide show presentation referred to at the meeting (circulated to members after the meeting) can be viewed at the link [here](#).

4.16 Presenting officers gave specific examples of some of the restorative work being undertaken in Gloucestershire, including references to an incident involving four Year 9 pupils facing potential criminal charges of arson with intent to endanger life and permanent exclusion following a fire at the school. Responding to the incident, a restorative approach was taken, commencing with a discussion at the school involving representatives from 14 agencies within 24 hours of the fire.

4.17 Having been offered an assessment of need, 3 of the 4 girls were found to have undiagnosed Special Educational Needs (SEN) and more than 4 Adverse Childhood Experiences (ACEs). All 4 pupils were at risk of child sexual exploitation and regarded as highly vulnerable. It was only through partnership and information sharing that the vulnerability came to light.

4.18 One pupil was reintegrated back into school with the other 3 offered a managed move and Family Group Conference to aid a successful transition. All 4 pupils were offered restorative intervention with the school via the Children's First Panel. As a result of the restorative action taken, no criminal charges were brought about and all 4 girls went on to obtain their GCSEs.

4.19 Avoiding having to take the exclusion route and commending the alternative restorative approach, the Head Teacher applauded the positive outcomes that can be achieved from a variety of agencies working effectively together to the benefit of young people.

4.20 Other areas of best practice referred to during the presentation, including adopting a 'whole school approach' towards positive culture change; acknowledging that culture change, (not behaviour management), takes commitment and time to embed; good leadership, walking the walk; unblocking barriers within the local system and creating communities of practice through locality networks.

4.21 Halted by the pandemic, work with local schools on Trauma Informed Relational Practice (TIRP) has now resumed. ACEs awareness training has progressed from being delivered in isolation to forming part of TIRP, an integral part of the 'Relational Schools' programme.

4.22 Noting some of the positive outcomes from working closely with schools and adopting a 'whole school community' network, members commended the collaborative approach. It was reported that over the past 7 years, GCC has worked with over 70 schools, with more than 40 senior leaders taking their schools through the Relational Schools programme. Consistently many other schools are now adopting this approach.

4.23 Some of the positive outcomes reported at the meeting included: -

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- Leaders feeling more confident and happier in their roles;
- A reduction in the number of exclusions and suspensions;
- Improvement in staff retention and well-being;
- Improvement in well-being, attendance and attainment for students;
- Better relationships across the school community and calmer learning environments;
- Improved Ofsted ratings for schools

4.24 Work aimed at enabling the systems that provide support to schools become more inclusive included: -

- GCC Education Hub Teams Training
- GCC HR Policy Updates (to include Restorative Practice)
- Lead schools identified across the system (Primary/Secondary/Special and Alternative Schools)
- University of Gloucestershire – policies being rewritten to include relational, trauma informed and restorative content.

4.25 Other positive outcomes reported at the meeting included:

- Recognition of being at the fore front of practice nationally:
- The TIRP and the Relational Schools Programme being traded with Oxfordshire, Staffordshire and Portsmouth
- Contributions to evidence in the field, with 2 of the team undertaking PhD's – one evaluating the Relational Schools Programme and the other evidencing the impact of Restorative Practice in Education across England
- Cited as an example of best practice in the Children and Young People Mental Health Report published in June 2023 'Behaviour and Mental Health in Schools'
- Hosting South Korean Education Authorities to enable them to adopt the approach.

4.26 Commending the work of the ACES team, members asked what work was being considered to inform teaching training activities in secondary schools and to support home education provision. Areas of focus included staff retention levels and community support work. The comments were noted.

4.27 Healthy Lifestyles (healthy weight) Priority – Sue Weaver and Stuart King

4.28 To view the powerpoint presentation presented at the meeting, please refer to the presentation published with the agenda at the link [here](#).

4.29 Members received an in-depth overview of the work involved in tackling obesity in Gloucestershire and of the weight management support available to people with health and weight issues.

4.30 It was reported that locally, progress was being made to advance a more joined up partnership approach from which to support and contribute to obesity prevention. It was noted that more work was needed to limit the burden of obesity on individual health and wellbeing, and on the health and care system.

4.31 It was acknowledged that work to progress local ambitions from which to address inequalities and the wider economy remained a key focus. Efforts were being made to promote the wide range of multiple opportunities available within the county from which to address the social, environmental and economic determinants of obesity. It was reported that, in Gloucestershire, although programmes of activity existed across all local areas, more needed to be done to better understand what was working and what joined up activities might be explored to create more awareness and improve progress.

4.32 Noting data comparisons on obesity levels recorded in Gloucestershire, (25.97% adults reported as obese (Active Lives Survey, 20221/22) and 20.4% of Year 6 children living with obesity, (approximately 1375 children, of whom 315 have severe obesity), it was reported that the current levels of obesity were lower than those reported in 2020/21 and 2021/22 but had not reverted to pre-pandemic levels.

4.33 To qualify the statistical evidence presented at the meeting, it was confirmed that obesity remains one of the biggest public health challenges facing society today. While levels of childhood obesity are lower than immediately after the pandemic, 8.6 % of reception age children, more than one in five (20.4%) of Year 6 children in Gloucestershire have obesity, and 62.4% of adults are above a healthy weight.

4.34 Obesity is a health inequalities issue with income, social deprivation and ethnicity all having an impact on the risk of gaining excess weight.

4.35 The National Institute of Health Research (NIHR) identified nine priority local areas from which to exert influence and take action on to contribute to the prevention and management of obesity. In Gloucestershire, it was reported that programmes of activity existed in each of the nine priority areas, with evidence to support that the greatest gains are gained from implementing community-led approaches and from taking collaborative action to address the causes deemed the most important.

4.36 Addressing concerns on child obesity, Stuart King, Maximus Account Director & BeeZee Bodies Founder, gave an overview of the work associated with the Children and Young People's Weight Management Service, including the work aimed at making lasting changes from which to

create a healthier lifestyle for children and families in Gloucestershire based on nutritional and behavioural change. This county wide service was launched by BeeZee Bodies in April 2023.

4.37 It was confirmed that, following the successful community-based children and families weight management pilot conducted in Gloucester and the Forest of Dean, Gloucestershire County Council had invested in this substantive countywide service, for families with children aged 4-17 years (age 25 years for young people with SEND).

4.38 Operational from May 2023, BeeZee Bodies provide a personalised 'structural resilience' approach of providing support to families to address social, economic and practical barriers and sustain behavioural change.

4.39 The Forest Voluntary Action Forum (FVAF) is commissioned to work in partnership with BeeZee Bodies to support shared delivery of the programme with local communities. One shared ambition is to harness the strengths of the programme and transfer resources to the local VCSE sector over the course of the contract.

4.40 Responding to questions, including what actions are being taken to improve awareness of the offers available to local communities, particularly in the Barton and Tredworth area of Gloucester, members were advised that a 16-week face to face programme was due to commence the following week to address the low take up of numbers/families in that area.

4.41 Acknowledging that the success of the programme was not just a local issue but very much dependent on the level of parental engagement, it was explained that a significant amount of the work focussed on promoting healthy lifestyles within local communities and not merely on losing weight.

4.42 Responding to concerns about the low take up of the programme and a number of issues raised during an in-depth discussion at the meeting, it was suggested that Cllr Andrew Gravells, Chair of the Health Overview and Scrutiny Committee, and Cllr Julia Gooch, Forest of Dean representative on HOSC, visit the BeeZee Bodies Office in Gloucester to gain a better understanding of the work involved in the County Council commissioned work. After the meeting, it was suggested that local member, Cllr Sajid Patel, also join the visit and this was agreed. **Action by – Democratic Services/BeeZee Bodies**

4.43 Presenting Officers welcomed the offer by some members for local councillors to become engaged and support the Children and Young People's Weight Management Programme within their areas. Cllr Tim Harman, former Cabinet Member for Public Health, commended the work of the Public Health and Communities Team and spoke in support of the BeeZee Bodies Programme. Cllr Harman urged members to raise awareness of the programme within their divisions and at local authorities. **Action by – Members**

4.44 It was requested that comparable data to reflect the variations in child obesity across the County, and nationally, be circulated after the meeting. It was noted that, Year 6 levels of obesity for Gloucestershire were currently lower than the national average. Information on the costs involved in commissioning the Children and Young People's Weight Management Programme was also requested. **Actions by – Sue Weaver**

4.45 Physical Activity Priority - Tom Beasley and Chris Davis

4.46 To view the powerpoint presentation presented at the meeting, please refer to the presentation published with the agenda at the link here.

4.47 Outlining some of the work being invested in behavioural change, including the analysis undertaken in 2018 to better understand the benefits of considering changes in behaviour in order to improve people's lives, the presenting officers informed members that the two areas of focus included: -

- Older adults taking part in community strength and balance classes; and
- Older adults engaging in self-directed exercises to maintain and improve function.

4.48 Reflecting specifically on changes to reduce the number of trips and falls and address the issue of frailty in older people, Chris Davis from Active Gloucestershire updated members on the following statistics and confirmed that Gloucestershire, (as a county), was ageing faster than other counties nationally.

4.49 The County of Gloucestershire is represented by: -

- 143,039 people aged over 65
- 51,000 people aged 65+ (physically inactive)
- 90,000 people classified as living with mild, moderate or severe frailty.

4.50 It was acknowledged that a fall often had a significant effect on a person, not only medically, but also in terms of wellbeing, confidence, feelings of isolation and mental health. For these reasons, physical activity was considered a key priority in maintaining and improving people's lives.

4.51 During the presentation, members attention was drawn to use of the 'Group Model Building' approach, referred to as 'an engaging and collaborative approach that fosters accessible, inclusive, and active participation from members of the community'. Outlining the merits of the approach, it was explained that GMB helped to generate a deeper

understanding of the causes and effects associated with complex problems, issues or challenges, the outcomes of which had been significant.

4.52 Members commended the work of Active Gloucestershire, including the work in the community and in conjunction with schools, employers, neighbourhood groups, social clubs and charities.

4.53 For more information on the work of Active Gloucestershire, please refer to <https://wecanmove.net> and www.activegloucestershire.org

4.54 Having considered all of the updates, members thanked officers for the detailed presentations.

4.55 Noting the requirements of Motion 881 and the request for regular updates on the progress of the Health and Wellbeing Board's strategic priorities, members were reminded of previous updates to the committee, including the presentation at the joint committee meeting on 18 October 2022. It was clarified that the update at today's meeting was a continuation of the reporting process to HOSC, after which it was suggested, that further updates, relating to specific matters and issues on the Strategy be included in the Director's reports to the relevant committee, (to form part of the regular reporting process to the committee), and this was agreed.

5. BUILD BACK BETTER AND GLOUCESTERSHIRE'S LEVELLING UP TOGETHER GRANT SCHEME

5.1 Gloucestershire County Council's 2022-2026 Strategy "Building Back Better in Gloucestershire" sets out its ambition to 'level up' Gloucestershire communities. Details of the strategy can be viewed [here](#)

5.2 Incorporated within Council Motion 881, (agreed at the Gloucestershire County Council Meeting on 8 September 2021), was a request for a review of the outcomes from the Build Back Better Conference held on 18 May 2022, plus an update on Gloucestershire's Levelling Up Together Grant Scheme.

5.3 Diana Billingham, Head of Voluntary and Community Partnerships, and Emily Brown, Senior Public Health Officer from the Public Health and Communities Hub were present at the meeting to respond to questions on the interim report published with the agenda and to the PowerPoint presentation circulated in advance of the meeting.

5.4 The 'Gloucestershire Levelling Up Together Grant Scheme: Six Months On' report provides an interim detailed evaluation of the Levelling Up Together Grant Scheme, including an update on the 52 projects funded by the scheme.

5.5 The report focuses on the six-month period from which the grants were awarded to a total of 45 partners (April – September 2023). All partners were asked to participate in an interim evaluation survey in September 2023, the results of

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which are summarised in the report. A 'final' report will be published in May 2024. To view the full list of projects and organisations please refer to the link [here](#)

5.6 Notable dates include:

5.7 Levelling Up Together celebration event in February 2024 - Levelling Up Together partners and elected members are encouraged to help shape and plan the event.

5.8 Further evaluation to be undertaken during Spring/Summer 2024 to mark 12 months since the grants were awarded.

5.9 Next Phase of Levelling Up to include:

- Additional investment into the Councillor-led Build Back Better grant scheme
- Investment into thematic areas to tackle inequalities which are not necessarily geographically based. The themes identified for investment are:
 1. Digital inclusion
 2. Cost of living
 3. Online harms and vulnerable young people
 4. Community transport and access to services
- Working with and investing in some voluntary and community sector organisations with the connections, skills and expertise to deliver activities which tackle inequalities under the themes outlined above.

5.10 For more information, please visit the [next phase of levelling up in Gloucestershire communities webpages](#)

5.11 Members commended the value of the work shaped by the scheme and expressed their appreciation for the opportunity to make a difference within their local communities. The report and the presentation were taken as read at the meeting.

5.12 To meet the requirements of Motion 881, the report and presentation were circulated to all members after the meeting, inviting members to submit any comments or questions to Emily.Brown2@gloucestershire.gov.uk.

6. HOSC GLOUCESTERSHIRE INTEGRATED CARE SYSTEM (GICS) PERFORMANCE REPORT

6.1 The committee noted the Gloucestershire Integrated Care System, (ICS), Performance Report detailing the performance of the NHS Gloucestershire Integrated Care Board. The report included information on performance, quality and workforce. The report was taken as read at the meeting.

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6.2 To view the contents of the report please refer to the link on the Gloucestershire County Council website at the link [here](#).

6.3 Key messages highlighted at the meeting included: -

- Urgent and Emergency Care had experienced significant challenges during December and the Christmas holidays. This was now stabilising and under control.
- Ambulance admissions to Gloucestershire Royal Hospital on Christmas Day had resulted in 128 admissions balanced against 36 discharges.
- NHS111 had seen a significant improvement in call answering during October 2023, with proportion of calls abandoned dropping to 9.8% (down from 20% average in September). The Practice Plus Group had been trialling a new contract to improve evening and weekend shift fill and increase the resilience of the service – this will be kept under review, but initial performance appeared encouraging. Cllr Gravells enquired when the new contract for the service would be announced and asked to be informed when the announcement was made. **Action by – NHS Gloucestershire**
- Members enquired when the next update on the delivery of maternity services was expected, including an update on the Avita Birthday Pool located at Cheltenham General Hospital. The committee requested that an update be provided at the next meeting. **Action by – NHS Gloucestershire**
- Raising concerns about cancer performance targets, members requested a full update, including comparable data, at the next meeting. **Action by – NHS Gloucestershire**

The report was noted.

7. HOSC NHS GLOUCESTERSHIRE INTEGRATED CARE BOARD (ICB) REPORT

7.1 The NHS Gloucestershire Integrated Care Board, (ICB), report was taken as read at the meeting. The report included updates from Integrated Care System (ICS) Partners with responsibility for overseeing the day-to-day commissioning and provision of NHS services in Gloucestershire.

7.2 To view the contents of the report please refer to the link published on the Gloucestershire County Council website at the link [here](#).

7.3 At Appendix 1 of the report, members were asked to consider a Memorandum of Understanding, (MOU), relating to a proposed service variation for the transfer of Lung Cancer clinics to the new Quayside Community Diagnostic Centre in Gloucester.

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7.4 The Lung Cancer service currently delivers clinics across both acute hospital sites, Gloucester Royal Hospital (GRH) and Cheltenham General Hospital (CGH), utilising clinical rooms in each sites' Outpatient's Department.

7.5 The proposal put forward was to permanently move the two lung cancer clinics from GRH to Quayside CDC, as well as undertake a temporary move of two clinics from CGH also to Quayside CDC. It was noted that the service would maintain some Lung Cancer clinics at CGH, to offer patient choice and to cater for those service users unable to access Quayside CDC. The number of clinic appointments at CGH would, however, reduce from those currently available. The proposed move to coincide with the opening of the new Community Diagnostic Centre at Quayside House in February 2024. The committee noted the Memorandum of Understanding and supported the proposal.

7.6 At the HOSC meeting in November 2023, members were invited to take a tour of the new £15m Gloucestershire Community Diagnostic Centre at Quayside House, Gloucester. A tour was undertaken at the end of today's meeting.

The report was noted.

8. WORK PLAN

8.1 The combined work plan of the Adult Social Care and Communities Scrutiny Committee (ASCC) and Health Overview and Scrutiny Committee (HOSC) was circulated to members in advance of the meeting. Members noted the work plan and invited to suggest items for consideration at the respective future meetings of each committee via email to jo.moore@gloucestershire.gov.uk.

8.2 The following items to be considered at the HOSC meeting on 12 March 2024

- Review of the NHS Gloucestershire Winter Sustainability Plan 2023/24
- Gloucestershire Local Medical Committee Overview Nic Wright Operations Manager from Gloucestershire LMC invited to the meeting.
- John Martin, Interim Chief Executive of the South West Ambulance NHS Foundation Trust, to be invited to the meeting (via remote access) to provide an update on current performance and to respond to questions.
- Maternity Services Update – NHS Gloucestershire Update Report
- NHS Gloucestershire Briefing on the support provided to veterans – NHS Gloucestershire Update Report

8.3 The following items to be considered at the ASCC meeting on 05 March 2024

- Behavioural Science Update (briefing note to be circulated as information in advance of the meeting)
- Rough Sleeping Briefing (Gloucestershire Strategic Housing invited to give a presentation)

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- Director of Public Health Annual Report (Alcohol) Update and an opportunity to meet the new drug and alcohol service providers.

CHAIRPERSON

Meeting concluded at 12.50pm