



Minutes

of the
Meeting of the
Public Health and Prevention Cabinet Panel
on
Wednesday, 14 November 2018

1. Agenda

3 - 8



To: All Members of the Public Health, Prevention and Performance Cabinet Panel, Chief Executive, Chief Officers, All officers named for 'actions'

From: Legal, Democratic & Statutory Services
Ask for: Stephanie Tarrant
Ext: 25481

**PUBLIC HEALTH, PREVENTION AND PERFORMANCE CABINET PANEL
14 NOVEMBER 2018: 10:00 AM**

ATTENDANCE

MEMBERS OF THE PANEL

A P Brewster, L A Chesterman, T Howard (substituted for C Clapper), M A Eames-Petersen, S Gordon, N A Hollinghurst, M B J Mills-Bishop, R G Tindall (substituted for N A Quinton), R M Roberts (Chairman), A F Rowlands, A Stevenson, A D Williams (Vice Chairman), W J Wyatt-Lowe

Upon consideration of the agenda for the Public Health and Prevention Cabinet Panel meeting on 14 November 2018 as circulated, copy annexed, conclusions were reached and are recorded below:

PART I ('OPEN') BUSINESS

1. MINUTES

ACTION

- 1.1 The Minutes of the Cabinet Panel meeting held on 6 September 2018 were confirmed as a correct record and signed by the Chairman.
- 1.2 Members noted the detail in the action tracker. The tracker provided an update on actions that had been progressed since being raised at the last meeting.
- 1.3 In relation to item 3, Members noted that a report on the Serious Violence and a briefing from the Police and Crime Commissioner had recently been taken to the Childrens, Young People and Families Cabinet Panel and that it would be circulated to Panel Members for information.

2. PUBLIC PETITIONS

- 2.1 There were no public petitions.

3. HERTFORDSHIRE COUNTY COUNCIL PREVENTION STRATEGY

[Officer Contact: Joanne Doggett, Head of Programme Delivery and Resources, Tel: 01992 556358]

3.1 Members received a report which provided a copy of the proposed Hertfordshire Prevention Strategy for consideration and comment. Members acknowledged that the Prevention Strategy should be read in conjunction with the Public Health Strategy and noted that Hertfordshire would be the first Local Authority in England to have a strategy of this nature. The strategy attempted to determine what the County Council could do as an organisation to keep residents independent and thriving.

3.2 Members welcomed the strategy and commented on raising awareness and encouraging waste reduction as detailed on page 15 of the strategy. Members commented that a more preventative approach would be to challenge manufactures on the amount of packing used for products. It was agreed that this should be further considered by the Community Safety and Waste Management Cabinet Panel.

3.3 The Panel commented on the use of vitamin D to aid the prevention of falls in the elderly and it was agreed that a separate report be prepared for Panel to consider, based on the new National Institute for Health and Care Excellence guidelines.

3.4 Members discussed prevention for families, especially for children being home educated. It was noted that this area of work was being closely considered by the Children’s Safeguarding Board and that this was being overviewed by the Director of Children’s services and the Executive Member for Children, Young People and Families.

3.5 Members made the following suggestions for officers to consider and potential amendments to the strategy:

- Additional boxes to be added on page 3 to show the County Council’s focus on a timescale basis e.g. the focus for 2019-2022.
- Page 29-30 to include reference to preventing domestic violence. It was noted that the Domestic Violence Strategy already had prevention included.
- Page 21 to consider sustainability and energy needs for new housing developments. Members noted the link to LTP4 and modal shift, with a list of schemes that Hertfordshire was scoping to be included in the strategy.
- An additional bullet point on page 7 to detail what continuous improvement would look like for the County Council.
- Air quality to be included in the strategy.

Assistant Director,
Transport, Waste
& Environmental
Management

Jim McManus,
Director of Public
Health

Jim McManus,
Director of Public
Health

**CHAIRMAN’S
INITIALS**

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- A revision to the order of paragraphs at 2.1, with the purpose of the strategy set out at the beginning. In addition, consideration to the wording to ensure the aim of the strategy was easily understandable.
- An additional pre-requisite on page 14 to address the role of organisational culture in promoting mental and physical health.
- Promotion of the Prevent Strategy to District Councils, especially with regards to planning.
- Links with the voluntary sector and where the voluntary sector could increase public knowledge on prevent.
- Review of financial implications if service use increased. It was noted that an Invest to Transform bid had already been committed to the prevention programme.
- Gaps on page 28 were noted to be due to the County Council already taking preventative action in these areas. Member comments on further preventative actions were welcomed.
- Early years and neonatal work on mental health to be included.
- Page 9 paragraph 3.2 to include Committers and Cabinet Panels.

3.6 Panel requested that officers work out how preventative work undertaken by the County Council be reported back to panels including the Public Health and Prevention Panel.

Jim McManus,
Director of Public
Health

Conclusions:

3.7 The Panel:

- considered and commented on the content of the Prevention Strategy and recommended to Cabinet the adoption and implementation of the Strategy, subject to consideration of amendments as detailed above.
- considered and commented, as detailed above, on how the impact of preventive activity should be monitored and reported to Members so that these can be considered by the Director of Public Health in consultation with the Executive Member.

4. PUBLIC HEALTH QUARTERLY PERFORMANCE REPORT – Q2 2018/19

[Officer Contact: David Conrad, Consultant in Public Health (Evidence & Intelligence), Tel: 01992 555391 / Will Yuill, Public Health Analyst, Tel: 01992 555127]

4.1 The Panel received a report and presentation which detailed the quarterly performance for Public Health (PH), key statistics on local service performance and public health outcomes and provided an overview of the data on the ‘Developing Well’ life stage in Hertfordshire’s current Health and Wellbeing Strategy. The report and presentation can be viewed at: [Public Health & Prevention](#)

Cabinet Panel -14 November 2018¹

- 4.2 The Panel discussed the number of first time entrants to the youth justice system. Whilst it was noted that Hertfordshire had seen a decline, the decline was not as substantial as recorded for some neighbouring authorities. In response to a Member question, it was noted that the reason for the steep decline in Essex was not known. It was agreed that this would be looked into by officers and reported on in the next quarter. Members also requested that for any graphs reported in percentages that the actual figure also be provided in order for the true numbers to be understood.
- 4.3 Members discussed concerns around support to adopted and fostered children from CAMHS. It was noted that whilst fewer children were coming into care, those that were had more complex needs. It was noted that the Director of Childrens Services and the Executive Member for Children, Young People and Families were addressing concerns and that a wider more comprehensive mental health strategy was being progressed.
- 4.4 In response to a Member question regarding the decline in attendance at sexual health services, Members heard that seasonal variations affected the figures alongside the increased signposting to online services. In addition, it was noted that the decrease in HIV testing reflected a new online service. Officers confirmed that Public Health England issues home testing kits with samples returned to the laboratory for results to be determined professionally.
- 4.5 Members discussed the use of emergency hormone contraception and queried whether people were relying on this form of contraception. Members heard that guidelines had been introduced to limit the number of times a person could obtain emergency contraception before being referred to a clinic. It was also noted that there had been an increase in use amongst older people, which had not been expected.
- 4.6 The Panel discussed adult weight management and options for collating data around resident's statistics were discussed e.g. an online self-reporting tool for residents. Officers were to consider options available to better report on weight management across the county, within government guidelines. It was also noted that a future report would consider Healthy Weight in Hertfordshire due to new contractual arrangements with the Clinical Commissioning Groups.

David Conrad,
Consultant in
Public Health

Jim McManus,
Director of Public
Health

¹ <https://democracy.hertfordshire.gov.uk/ieListDocuments.aspx?CId=203&MId=265>

**CHAIRMAN'S
INITIALS**

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Conclusions:

4.7 Panel noted and discussed the content of the Public Health Quarterly Performance Report for Q2 2018/19 and the accompanying presentation (Appendix 2), as detailed above.

5. OTHER PART I BUSINESS

FUTURE WORK PROGRAMME

5.1 Members of the Panel noted upcoming items for the work programme:

- The impact of air quality on public health
- Healthy Weight in Hertfordshire

**KATHRYN PETTITT
CHIEF LEGAL OFFICER**

CHAIRMAN _____

**CHAIRMAN'S
INITIALS**

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