



## **HEALTH AND WELLBEING BOARD**

**2<sup>nd</sup> October 2025 at 2.00pm**

### **Present:**

Councillor Shreeve (in the Chair)  
Councillor Cracknell

### **In attendance:**

- Alasdair Booth (Humberside Police Representative)
- Katie Brown (Director of Adult Social Care and Communities)
- Tracey Good (Centre 4)
- Helen Kenyon (Place Director – Integrated Care Board)
- Diane Lee (Director of Public Health)
- Ann-Marie Matson (Director of Children's Services)
- Julie Walmsley (Door Step)
- Lucy Wilkinson (Healthwatch NEL)

### **Also in attendance:**

- Zoe Campbell (Senior Scrutiny and Committee Advisor)
- Louise Fadina (NAVIGO)
- Scott Fitzgerald-Becker (Northern Lincolnshire and Goole NHS Foundation Trust)
- Lindsay Hudson (Acting Consultant in Public Health)
- Karen Linton (Deputy Service Director – Skills Employability and Education Transport)
- Amy Rogers (Skills and Employability Strategic Lead)
- Jenni Steel (Service Director Education and Inclusion)
- Adrian Tallon (Cat Zero)
- Sarah Tedford (Interim Chief Delivery Officer – Northern Lincolnshire and Goole NHS Foundation Trust)
- Joe White (Deputy Service Director Inclusion)

One member of the public and no members of the press were present.

## **HWBB.10 APOLOGIES FOR ABSENCE**

Apologies for absence were received for this meeting from Sharon Wroot, Councillor Clough, Councillor Jackson, Carolina Borgstrom, Michelle Carrington and Chief Inspector Booth.

## **HWBB.11 DECLARATIONS OF INTEREST**

There were no declarations of interest made with regard to any items on the agenda for this meeting.

## **HWBB.12 MINUTES**

RESOLVED – That the minutes from the meeting of the Health and Wellbeing Board held on the 10th July 2025 be agreed as an accurate record.

## **HWBB.13 ITEM FOR DISCUSSION: ENABLE ALL CHILDREN, YOUNG PEOPLE AND ADULTS TO MAXIMISE THEIR CAPABILITIES AND HAVE CONTROL OVER THEIR LIVES'**

The Board received a presentation on the wider determinants of health which was split into the following four sections:

### **Cat Zero Humber – Supporting Individuals and Families to Live Happy, Healthy Lives :**

Cat Zero, was a personal development charity formed in 2008, operating Pan-Humber. The yacht was a crucial tool for delivery but not the sole focus; significant personal development work occurred on land with the aims for early intervention, delivering family-led solutions using a restorative practice framework. It focused on improving physical and mental well-being. Mr Talon explained that Cat Zero was currently funded by the National Lottery Community Fund, but future funding was at risk. He highlighted that the outcomes of the project were broad and covered Adverse Childhood Experiences (ACEs), confidence, physical activity, mental health, debt, relationships, education, housing, and employability, often involving connecting families to specialist local provision.

Councillor Shreeve enquired about links to mainstream services. Mr Talon confirmed there was close collaboration with Children's Services (Early Help) for referrals and safeguarding, and with schools.

Ms Lee praised the project that she felt was inspiring and a unique impact of the sea experience.

Ms Linton asked about provision for 16-17 year olds. Mr Talon explained that while Cat Zero originally focused on this age group, funding shifts led to a pivot to 18+. There was now a focus on 18-24, acknowledging

growing NEET (Not in Education, Employment or Training) numbers in the 16-18 bracket.

Ms Brown highlighted the opportunity Cat Zero offered to break cycles of behaviour for vulnerable groups.

### **Universal Offer: Supporting Young People Beyond 16**

Ms Rogers updated the board on the skills strategy, managed by the economy team within children's services and education which aimed to raise aspirations in young people. It had four strands which were collaboration, communication, confidence building, and careers. The Skills Board oversaw progress, integrating updates from various forums including SEND employability, aspiration and success, and the voluntary and community sector.

Ms Matson expressed an interest in broadening work experience opportunities beyond care leavers. Ms Linton noted the upcoming Family Enterprise Initiative would involve canvassing local employers.

Ms Brown emphasised the importance of focusing on vulnerable groups who lack advocates for work experience.

Councillor Shreeve acknowledged the 8% NEET figure was not ideal but noted ongoing efforts by the Corporate Parenting Board and children's services. He praised the Skills Fair and the National Citizen Service.

### **Looked After Children and Electively Home Educated Cohorts**

Ms Brown questioned the ongoing impact of COVID on vulnerable children. Ms Steel stated the virtual school was moving away from using COVID as an excuse, as it lowered ambition and expectation.

Ms Linton highlighted the importance of supporting children to achieve their expectations (e.g. being the first in their family to secure a job) and addressing parental engagement issues.

### **Electively Home Education (EHE)**

Mr White highlighted that a significant national increase in EHE had been observed, particularly since COVID. A local transformation project had been established with the aim to understand the reasons, impacts, and support needs.

Mr White explained the top three reasons for EHE were dissatisfaction with school, general dissatisfaction with provision, and mental health difficulties, with parents often making decisions without prior school consultation.

Ms Matson stressed the importance of prevention and schools balancing attendance enforcement with holistic support for complex families. EHE should be an elective, positive choice.

Ms Lee raised questions about vaccination links for EHE children and queried why EHE numbers had doubled between Year 7 and 8. Mr White explained this was due to the differing nature of primary and secondary school environments and historical attendance approaches, which were now being addressed through improved transition work.

Councillor Shreeve noted a gap in academic outcome data for EHE children and requested that any available information be circulated.

Councillor Shreeve expressed concern about parents wilfully ignoring their children's education and the potential for schools to be too accepting of EHE for challenging children. Ms Steel explained that high EHE numbers had led to a loss of around £2 million of funding for local schools, prompting a shift in their approach to re-engage with young people.

Mr White provided balance, highlighting that many EHE children achieved excellent education from well-resourced parents, with some achieving national recognition in various fields.

Ms Matson confirmed that EHE governance would now sit under the Children's Safeguarding Partnership, providing additional oversight and scrutiny, acknowledging that while the upcoming bill was welcome, it did not go far enough.

RESOLVED –

1. That the presentations be noted.
- 2 . That academic outcome data for EHE children information be circulated to members of this board.

## **HWBB.14 DECEMBER HEALTH AND WELLBEING BOARD MINI CONFERENCE**

The Board discussed the mini conference proposed for the Health and Wellbeing Board in December 2025.

Ms Hudson explained that the purpose of the mini conference was to increase stakeholder involvement and awareness. It was suggested as a half-day event in December. Ms Hudson proposed rolling the planned healthy weight workshop into a full-day conference, with partnership working in the morning and the workshop in the afternoon.

Councillor Shreeve suggested including the Health and Wellbeing Strategy, Marmot Place update, adult social care CQC inspection, and wider healthcare partnership issues.

Ms Maston proposed incorporating findings from the Adolescent Lifestyle Survey.

Councillor Shreeve also suggested exploring the connectivity and coordination of health and wellbeing delivery. Ms Hudson noted this could be linked to the Marmot Place context and University College London's (UCL) engagement. A date is yet to be set, but input for the agenda was requested.

RESOLVED –

1. That the updated be noted.
2. That any suggestions for topics for discussion or attendees be forwarded by email to Ms Hudson.

## **HWBB.15 MARMOT PLACE UPDATE**

The Board received a verbal update on the progress of Marmot Place.

Ms Hudson reported that the contracting and procurement process with University College London (UCL) was taking longer than anticipated, with a launch now hoped for late October or November 2025. Recruitment for a dedicated Marmot Officer, funded by transformation funding, was underway. Work was progressing with the monitoring officer to embed Marmot and the health equity principles into all Council reports and papers. Public Health was also now involved in the Business Development Group to ensure funding applications aligned with the Marmot principles.

RESOLVED – That the update be noted.

## **HWBB.16 JOINT HEALTH AND WELLBEING BOARD STRATEGY**

The Board discussed their vision for the Health and Wellbeing Board Strategy.

Ms Hudson presented the Joint Health and Wellbeing Strategy, commending the design team and thanking all contributors. The Board was asked to endorse the strategy and refer it to the Health and Adult Social Care Scrutiny Panel, Cabinet, and Full Council for adoption, as well as other partner organisations. The Board endorsed the strategy and agreed to its referral through the council's governance process.

RESOLVED - That the strategy be endorsed and referred through the council's governance process.

## **HWBB.17 PHARMACEUTICAL NEEDS ASSESSMENT UPDATE**

The Board received a verbal update on the pharmaceutical needs assessment (PNA) that was out for consultation.

Ms Hudson explained that the draught PNA had been produced and circulated to Health and Wellbeing Board members. To avoid delays, the

Board was asked to delegate the signing off of the PNA to the Chair and the Director of Public Health at the end of the consultation period, after any necessary changes had been incorporated. The final version would then be presented to the subsequent Health and Wellbeing Board meeting on 4th December 2025.

RESOLVED –

1. That the updated be noted.
2. That the Chair of the Health and Wellbeing Board and the Director of Public Health be delegated authority to sign off the PNA at the end of the consultation period.
3. That the final version of the PNA be represented to this board at its meeting on 4<sup>th</sup> December 2025.

## **HWBB.18 NHS UPDATE AND COMMUNITY DIAGNOSTIC CENTRES**

The Board received a verbal update on the NHS Humber Health Partnership in terms of diagnostics and waiting times.

Ms Tedford acknowledged significant concerns regarding current waiting times across all specialties (cancer, diagnostics and elective treatment) and stated this was not acceptable for the local population. Detailed plans were in place to address these issues with the top priority to return to target for diagnosis within 28 days and treatment within 62 days. She highlighted that extra funding (just under £2 million) from the Cancer Alliance was supporting increased staff, equipment, and team support.

Referring to the Community Diagnostic Centres (CDC) in Scunthorpe and Grimsby, Ms Tedford confirmed that significant progress had been made in reducing waiting lists for non-obstetric ultrasounds, with nearly 1,500 patients taken off the list since June 2025. A dedicated manager had been appointed to promote CDC usage and improve communication with GPs.

Ms Lee enquired about the number of patients waiting over 60 weeks. Ms Tedford confirmed this detail was available but not to hand at the meeting.

Councillor Cracknell asked for a timescale for returning to the required target levels for waiting times. Ms Tedford outlined a specialty-by-specialty approach, aiming for significant improvement by March 2026, with cancer patients being the top priority.

Councillor Shreeve highlighted the need to fully exploit CDCs and improve the relationship with primary care networks, citing an example of a two-week wait for bloods from a GP versus next-day availability at a CDC. He suggested an invitation to the Health and Adult Social Care Scrutiny Panel in the new year to monitor progress.

Ms Brown expressed a plea for collaboration, noting the CDC's location within a neighbourhood health pilot area and the need for engagement with secondary care providers.

Councillor Cracknell agreed on the need for improved communication between primary and secondary care and suggested a broader partnership approach to maximise CDC potential. Ms Tedford proposed a follow-up meeting to discuss this further.

RESOLVED –

1. That the updated be noted.
2. That it be recommended that a representative from the Northern Lincolnshire and Goole NHS Foundation Trust be invited to the Health and Adult Social Care Scrutiny Panel in the new year to monitor progress of the diagnostics and waiting times.

## **HWBB.19 FOR INFORMATION**

The board received the Safeguarding Children's Partnership Annual Report for information.

The board received the Better Care Fund Plan 2025/2026 Quarter One and approved the return.

RESOLVED – That the quarter one Better Care Fund return be approved.

There being no further business the meeting was closed at 3.56 p.m.