

One Northern Devon Board Business Meeting Action Notes



Date: 25th March 2025

Time: 1.30 - 4.30pm

Location: Microsoft Teams / Petroc

	Agenda Item
1.	<p>Welcome and introductions.</p> <p><u>Present:</u> Peter Morrish (Co-Chair), Katherine Allen (Co-Chair), Andrea Beacham, Sonja Manton, Ken Miles, Toby Davies, Tim Jones, Ken James, Marie Gould, Lou Higgins, Steve Hearse, Peter Leaver, Kurt Hintz, Ed Bond, Marc Rostock, Nicola Dalgleish, Beth Simons, Gemma Nield.</p> <p><u>Apologies:</u> Solveig Wright, Simon Chant, Gareth Dix, Tony George, Lynsey Webb, Beki Sharples, Oliver Hassall, Nicholas Child</p> <p>The Board welcomed Dr Ed Bond from the Northern Devon Primary Care Collaborative Board who will now be on OND Board membership.</p>
2.	<p>Minutes and Action Log</p> <p>The minutes of the last meeting were agreed.</p> <p>All actions were updated. Any further updates, please send to gemmanield@nhs.net</p>
3.	<p>Collaborative working with NDF proposal</p> <p>KA discussed the governance structure proposal below, describing the links between 2 programmes (OND / NDF):</p> <div data-bbox="256 1503 316 1563" data-label="Image"> </div> <p data-bbox="183 1570 392 1621">OND and NDF programme governar</p> <p>The board made the following comments:</p> <ul style="list-style-type: none"> • Good way of reducing duplication and focus on right things. • Make sure the two organisations fit together well. • NDF have an away day in 6 weeks' time to discuss further. • Some action groups are more established than others – at different stages in development. • Make clear key objectives for each group and measurables. • Diagram helps to explain to all what partnership groups do. • KPIs – bring community partnership work into this too (safety, crime in communities, loneliness, impact on productivity, social prescribers, economy, etc). • The structure will shape agenda of meetings.

	<ul style="list-style-type: none"> • Use AI tools – need lead on how to utilise. <p>Action 22 – KH to look into the use of AI tools within the two Boards.</p>
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<p>4.</p>	<p>Joint Collaborative Projects</p> <p>Torrige Community Regeneration Partnership</p> <ul style="list-style-type: none"> • 3rd March – Regeneration partnership was signed off. • £20m for a range of projects. • Projects link in with new structure as clear need for connectivity within partnership and stakeholder groups. • Majority of budget is for economic / business growth: <ul style="list-style-type: none"> ○ Business Park in Torrington and Bideford. ○ Agri bus park – Holsworthy ○ Biosphere – water quality in water system and sea water quality ○ Two projects around housing ○ Increasing EPC rating ○ Land for residential purposes in Bideford ○ Bideford hospital – reconfigure site to a community health and wellbeing hub ○ Acquisition of Globe Hotel and conversion for students training in hospitality. ○ Council owned offices – town council reconfiguration of old offices for community facilities. • Money needs to be spent by March 2027. • Half of projects are with external partners and others Torrige Council will be directly leading on . • Torrige Place Board oversees delivery of projects. • EB commented that Red Cross are liaising with Torrige PCN for a project which fits in areas above. Investing in social prescribers. <p>Ilfracombe Levelling Up</p> <p>KM outlined proposed programmes of work in Ilfracombe. One Ilfracombe Board have approved overall themes. The board is going through a transition. There will be a secretariat function under the board. Councillors working together for the benefit of Ilfracombe, leading on different areas.</p>  <p>One-Ilfracombe-Task force-Proposal-6.pdf</p> <p>The Board discussed Ilfracombe and members of One Ilfracombe working together and making positive changes in the town.</p> <p>The Board discussed antisocial behaviour on Ilfracombe high street and what might be put in place as solutions.</p> <p>Poverty Truth Commission</p>  <p>Feb-March-2025-PTC -Project-report.pdf</p> <p>Since Autumn, planned, facilitated time with local residents (Ilfracombe area) and partners on PTC. Moving from discovery phase to development phase. Four areas to look at – ‘humanising’ system, intervening early, housing, and education and training. Starting to yield benefits and reflecting on changes already. Hoping learning will be brought back to OND Board and NDF Board to expand on to other parts of Northern Devon.</p> <p>The Board discussed whole scale change and quick wins. Learning on how to interface with public and services.</p>
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Closing the gap on equality across Northern Devon



Health Inequalities
Strategy Development

AB discussed the programme of work, with individual organisations working towards accessibility, experiences and outcomes for the population of Northern Devon.

AB has gathered results from surveys sent to organisation and asked the board to think about the following questions:

1. How will this work go down in your organisation?

ICB – Health inequalities is a key requirement for the ICB. It would be well received and input into public health team re health inequalities discussion. Could also spread to other LCPs.

DPT – Would go down well in DPT. Vision to address health inequalities / gaps in services.

Council – Confused on how to apply across the organisation. Could apply in a statutory role. In principle sign up to it but not sure of practicalities.

DCC Children's Services – Will go down well.

Acute health (trust) – Urgent care workstream – targeted. Fits well with ethos.

Business – Understand what programme looks like. Change impact on services. Time taken?

Police – Inequalities is part of core business. Geographic. Virtual communities.

VCSE – investigate further

District council – Some part of ethos and for some departments, it wouldn't be on their radar.

Education – key focus is closing gap in inequalities. Make sure it aligns with all we do already.

2. What barriers do you foresee being raised?

ICB – Access to data – could be resolved. Pinpointing gaps. Measuring success / results.

DPT – Tensions re productivity, challenges with efficiency, away from day job. What's missing is understanding barriers (stigma, confidence to attend appts, etc).

Council – Knowing what we are doing is creating a barrier.

DCC Children's Services - Long term preventative approach whilst 'firefighting'

Business – Capacity, understanding outcomes, risks around duplication, costs, financial / legal implications?

Police – Capacity, balancing effort with return, measuring impact

3. What should next steps be for communicating within your organisation?

ICB – Socialising with Public Health and ICB Board. Celebrate work in Northern Devon.

DPT – Anchor with priorities (all have same agenda)

Council – Next steps re comms.

DCC Children's Services – Next steps – focus on which part (family hubs, young people's homelessness, etc)?

Acute Health (trust) – Targeted comms

Business – wider comms depending on where services are. Partnership Board?

Police – internal comms easy.

4. Would a workshop with staff be helpful at this stage or later?

ICB – Workshop later to give staff engagement and time to comment on work.

Council – Workshop for staff helpful – targeted to teams rather than across board.

DCC Children's Services – Yes to workshop but need to co-design.

Business – Clarity in advance of workshop. More exploration of how to engage businesses.

Police – Workshop later (get buy in first) or need to justify people putting in the effort.

Summary – OND Board agreed it fits well with all organisations' ethos. Target specific areas in statutory organisations. Target teams.

	AB will email group asking for a representative from each organisation and next steps.
5.	<p>OND workplan: project review and escalations Proposal re communicating updates.</p> <p>One communities – requested a chair. MG to take chair role as already Community Development and Learning Group chair. All agreed. Secretariat – Donna Sibley (Torridge District Council). Steve Hearse agreed. Admin support needed to both groups and chair needed for One Communities. MR to discuss with councillors.</p>
6.	<p>Changing Partner Landscape (risks and opportunities):</p> <p>Devolution</p> <ul style="list-style-type: none"> • Devon and Torbay combined authority. Groups established. Business advisory, skills and employment advisory group. • Growth plans • Capital funding – being allocated and approved across Devon. • Wider devolution – nothing communicated yet. • Re-org – submitted modelling proposals.
7.	<p>AOB</p> <p><u>ICB Update – Lou Higgins</u></p> <ul style="list-style-type: none"> • 13th March formal announcement re ICB cuts. No further details yet. • Distraction of large-scale reduction will impact ability to support programmes of work such as OND. • NHS trusts are also looking at reducing management costs (DPT, RDUH, etc) • Challenging time with recruitment freeze and lots of vacancies. • LH is leaving the ICB on 5th June. <p>It was noted that it would be Toby's last meeting.</p> <p>Close</p>
	Date of next meeting – Tuesday 27th May 1.30pm – 4.30pm Venue tbc

Membership			
Name	Organisation	Role	Contact
Katherine Allen	RDUHT	Director of Strategy	katherine.allen@nhs.net
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