

**GATESHEAD METROPOLITAN BOROUGH COUNCIL**

**HEALTH AND WELLBEING BOARD MEETING**

**Friday, 3 March 2017**

**PRESENT**

Councillor Councillor Lynne Caffrey (Gateshead Council) (Chair)

Councillor Jill Green	Gateshead Council
Councillor Mary Foy	Gateshead Council
Councillor Martin Gannon	Gateshead Council
Councillor Malcolm Graham	Gateshead Council
Councillor Michael McNestry	Gateshead Council
Douglas Ball	Healthwatch Gateshead
Dr Mark Dornan	Newcastle Gateshead CCG
James Duncan	Northumberland Tyne and Wear NHS Foundation Trust
Ian Renwick	Gateshead Health NHS Foundation Trust
Dr Bill Westwood	Federation of GP Practices
Alice Wiseman	Gateshead Council
Sally Young	Gateshead Voluntary Sector
Steve Anderson	Tyne and Wear Fire & Rescue Service

**IN ATTENDANCE:**

John Costello	Gateshead Council
Gerald Tompkins	Gateshead Council
Peter Wright	Gateshead Council
Sonia Stewart	Gateshead Council
Iain Miller	Gateshead Council
Elizabeth Saunders	Gateshead Council
Jackie Cairns	
Julie Ross	Newcastle Council
Elizabeth Toberty	

**APOLOGIES:**

Councillor Ron Beadle  
Mark Adams and Sheila Lock

**HW111 MINUTES**

RESOLVED - That the minutes of the meeting held on 20 January 2017 be agreed as a correct record.

**HW112 ACTION LIST - 20 JANUARY 2017**

RESOLVED - That additions and work in progress as listed on the action list be noted.

**HW113      DECLARATIONS OF INTEREST**

**HW114      UPDATES FROM BOARD MEMBERS**

**Gateshead Council**

Gateshead Council has now agreed its budget at full Council. It was noted that despite the cuts the Council are still managing to provide a large range of services. The position is incredibly difficult. It was noted that our only option is to grow our income and we need to invest in order to do this.

**Newcastle Gateshead CCG**

The Board were advised that The Great North Care Record has been rolled out across the whole of the North East. Local Sharing Agreements are in place and Gateshead is one of the leading areas.

The CCG reported on financial issues for this financial year linked to the mandated requirement to produce a surplus.

Work will need to be undertaken with the public - in particular, highlighting “phone before you go” and “111” options before people use extra care facilities.

Joint Members seminars across Gateshead and Newcastle and being arranged on health and social care integration. Julie Ross will be in touch with John Costello to progress.

**NTW**

The trust have developed new services for people with challenging Autistic needs at the Northgate site; this provides a clear pathway for re-integration into communities. NTW have also been commissioned to take the lead nationally on work to improve Mental Health.

**The Board were advised that John Lawlor and Ian Renwick were listed in the Top 50 Chief Executives in the HSJ Awards. Ian Renwick advised the Board that this was a reflection of the staff he has working for him across the Trust.**

**Community and Voluntary Sector**

It was noted that as part of the Budget Consultation, the Voluntary Sector submitted a detailed response to the proposals. It was queried whether it would be possible for a summary of the changes which had been made as a result of the consultation to be shared with the various voluntary sector organisations who had taken the time to respond.

The work on the survey “Doing Good in Gateshead” has been completed and it is anticipated that the report will be ready by the end of the month. It has highlighted some key issues and pressures experienced by the voluntary sector in Gateshead. It was noted that it would be helpful to have a discussion on the issues raised at a

future Board meeting and possibly also a members seminar.

There has been some discussion about communications and how the various messages can be communicated to the public. It was suggested that we progress a co-ordinated approach to communications.

### **Healthwatch Gateshead**

The Board were advised that Tell Us North have been awarded the contract for Healthwatch provision in Gateshead.

## **HW115 10 YEAR TOBACCO CONTROL ACTION PLAN**

The Board received a presentation from Alice Wiseman on the 10 Year Tobacco Control Plan. Alice advised the Board that the issue of engagement still hasn't been resolved however, it was agreed that the team would continue to provide updates to the Board.

In terms of a reminder of the Background to the plan the current position in Gateshead is that:

- 29,485 Gateshead Residents Smoke
- Smoking is the single most preventable cause of early death
- 462 Gateshead residents die every year from smoking related diseases
- More than half of smokers will die early from a smoking related illness
- For every death there are 20 people living with a life limiting illness
- Smoking accounts for over half of the differences in risk of premature death between the most and the least deprived

Alice advised the Board that we are making progress; however, this is not fast enough. It was reported that the need to develop a 10 Year Plan was driven by the following:

- the Gateshead Tobacco Control Strategy elapsed in March 2016;
- The National Tobacco Control Strategy elapsed in December 2015 with no replacement to date;
- Findings from California show the rapid decline in adolescent smoking will not continue if tobacco control expenditure and focus are reduced;
- The commitment by the Council as part of the Regional Tobacco Alliance, 'Making Smoking History', to reduce smoking to 5% by 2025.

The following recommendations were made by the Health and Wellbeing Board in June 2016:

- **Action 1:** Ensure a greater focus on tobacco control activity by all partners on Health and Wellbeing Board for Gateshead.
- **Action 2:** Undertake a CLear review of the Gateshead Smokefree Tobacco Alliance in July 2016 in partnership with HWB members.
- **Action 3:** Work with young people in Gateshead to establish their views and build local action.

- **Action 4:** Develop a local 10 year delivery plan based on both the output of the CLear assessment and national, regional and local intelligence.
- **Action 5:** Maintain public support for action, communicate a clear understanding of the harm caused by tobacco and the benefits of stopping smoking in partnership with FRESH NE.
- **Action 6:** Ensure the Sustainability and Transformation Plans (STPs) include challenging action and targets for reducing smoking locally.

The following 5 key objectives the plan aims to achieve are:

- Reduce smoking prevalence among adults 18 year+ by 1.5% per year to 5% by 2025
- Reduce smoking prevalence in routine and manual groups by 2.3% per year to 5% by 2025
- Reduce smoking prevalence among young people (15 year olds) by 0.8% per year to 5% by 2025
- Reduce smoking during pregnancy by 0/9% per year to 5% by 2025
- Show progress in tackling local inequalities in smoking rates on a year by year basis

It was suggested that the ambition of 5% smoking prevalence across the Board should be openly more ambitious when it comes to smoking during pregnancy and smoking amongst young people. The aim should be 0% for these particular groups.

There was a request that partners think about how they engage in the Tobacco Alliance.

It was noted that there will be a presentation at the next Board meeting on how the Tyne and Wear Fire Service can be a health asset and this could be an area in which they broaden their work around safety visits.

The Director of Public Health has been challenged to a Year of Action on Tobacco. Alice also advised the Board that Tobacco dependents need to be treated as though they have a long-term condition and in a non-judgemental way.

- RESOLVED -
- (i) That the 10 Year Tobacco Control Action Plan be endorsed by the Board.
  - (ii) That it is noted that further engagement work will take place on the 10 Year Plan.

## **HW116 STP UPDATE**

The Board were provided with an update on the current position with regards to the STP (Sustainability and Transformation Plan).

Feedback has been received from NHS England and national policy leads following the October submission outlining the national support available for STPs moving forward, with a subsequent commitment from NHS England to support STPs through the alignment of resource locally.

Work stream workshops have been established at STP footprint level aligned to the following transformation areas:

- Prevention, Health and Wellbeing
- Out of Hospital Collaboration (now called Neighbourhoods and Communities)
- Optimal Use of the Acute Sector
- The core ambition of the STP is to ensure “no health without mental health”. This will involve the development of an integrated life span approach to the integrated support of mental health, physical health and social need which wraps around the person.

Some of the work streams have held “pre meet” working groups prior to holding wider workshops in January and February.

The work to date in developing the plan has been to create a case for change, which describes the gaps, challenges and on-going work. We are now working together with partners to take forward this transformation work, via the work stream workshops.

A detailed timeline for subsequent stages of the consultation process is currently being developed, following which an updated draft plan will be consulted on, which will involve more engagement with key stakeholders and members of the public.

It was agreed that it will be important to be upfront with the public on the true extent of the challenges facing the Gateshead area and to fully engage with them on how those challenges will be addressed.

RESOLVED - That the update on the current position regarding the STP process be noted.

## **HW117 DEVELOPMENT OF OSC WORK PROGRAMMES FOR 2017/18: EMERGING THEMES**

The Board received a report which outlined proposals for the development of OSC Work Programmes and the emerging priority issues for all of its Overview and Scrutiny Work Programmes. Views have been sought from Board members, key stakeholders and the Gateshead Strategic Partnership. Emerging themes for OSCs have been put forward following consideration of a range of factors including:

- Vision 2030
- The Council Plan 2015-2020
- The Health and Wellbeing Strategy for Gateshead
- Relevant Legislation
- Performance Information
- Issues of concern to local people
- Issues highlighted by councillor on Overview and Scrutiny Committee

- Public Health Commissioning Priorities
- Clinical Commissioning Group Priorities
- Safer Gateshead Partnership Priorities
- Children Gateshead (the plan for children, young people and families)

RESOLVED - That the Board noted the emerging themes and had no additional comments to make.

#### **HW118 BETTER CARE FUND QUARTER 3 RETURN 2016/17**

The Board received the Quarter 3 Update Report on the Better Care Fund for 2016/17. The return sets out progress in relation to budget arrangements, meeting national conditions and performance against BCF metrics. In particular, it was noted that we are on track to meet our end of year targets for non-elective admissions and admissions to residential care.

RESOLVED - That the Better Care Fund Quarter 3 Return for 2016/17 be endorsed by the Board for submission to NHS England.

#### **HW119 PRIMARY CARE (MEDICAL SERVICES) GOVERNANCE ARRANGEMENTS**

Currently NHS England has joint responsibility with Newcastle Gateshead CCG, for the commissioning of primary care medical services. From April 2017, this responsibility will be delegated to Newcastle Gateshead CCG.

As part of the nationally agreed arrangements for joint commissioning between NHS England and the CCG, a representative from both HealthWatch and the Health and Wellbeing Board currently attend the Primary Care Joint Committee. The Committee meets in public, unless the business being transacted requires the meeting to be held in private, in accordance with CCG Standing Orders.

To reflect the increased responsibility for primary care commissioning, the CCG will establish a revised Primary Care Commissioning Committee, with effect from April 2017. Governance arrangements will be in accordance with national recommendations and the Primary Care Commissioning Committee will report to the CCG Governing Body. The Committee Terms of Reference are also based on the national template provided by NHS England.

It was noted that representatives of Healthwatch and the Health and Wellbeing Board will continue to be invited, in a non-voting capacity, to Primary Care Commissioning Committee meetings held both in public and private. This is something that both HealthWatch Gateshead and HealthWatch Newcastle had sought within a joint letter to the CCG.

A representative of NHS England will also be in attendance at all meetings.

RESOLVED - That the revised local arrangements for commissioning of primary care medical services as of April 2017 be noted.

## **HW120 HEALTH PROTECTION ASSURANCE REPORT**

The Board received the Annual Health Protection Assurance Report. This report is submitted to the Board to provide assurance on the delivery of the Council's statutory duties regarding health protection assurance.

The Board were advised that uptake in Gateshead (and nationally) of the flu vaccine had decreased for people aged 65+ and also for those aged under 65 and at risk. In regard to the latter, it was noted that there is significant variation across GP Practices in Gateshead with uptake ranging from 37.9% to 60%. Uptake amongst pregnant women and amongst children is also down for Gateshead.

It was reported that there are some specific data issues relating to the newborn screening programme which are being addressed. The DPH has sought a report from Public Health England on progress made to-date and associated timescales.

The Board were advised that there is a Health Protection Assurance Group and issues are picked up and monitored at this group. The Board were advised that, as a council, there has also been some successese.g. a bid to secure £0.5m to look at measures to improve air quality.

The issues of Excess Winter Deaths was also raised and it was agreed that a report will be brought back to a future Board meeting.

RESOLVED - (i) that the information in the report be noted.  
(ii) that the Board be assured that measures are in place to monitor screening and prevention programmes in order to protect the health of the local population.

## **HW121 LONG TERM CONDITIONS STRATEGY**

A report was presented to the Board (for information) to inform the Board of the publication and content of the Long Terms Conditions Strategy which was approved by the Newcastle and Gateshead CCG's Executive at its November 2016 meeting.

The Strategy details the CCG's vision for Long Term Conditions over the next five years. The CCG aims to transform how services are managed, taking a partnership approach both in planning and providing care. It will aim to integrate services further, move care closer to the patient's community and increase the information and support people can access; making use of all the resources available in communities to fully develop the 'more than medicine' approach. It will also support the local implementation of priorities identified in the wider STP.

It was noted that there seems to be a lack of recognition of unpaid / non-professional input.

It was noted that Steve Kirk has offered to come to a future Board meeting to discuss implementation of the strategy.

RESOLVED - That the information in the report be noted.

**HW122 HEALTH AND SOCIAL CARE STATEMENT OF INTENT**

An update was provided to the Board (for information), to advise that Accountable Officers across Newcastle and Gateshead have signed a Statement of Intent “Delivering Better Health and Social Care Outcomes for Newcastle and Gateshead.”

The Accountable Officers across the Gateshead and Newcastle Health and Social Care system have been collaborating on the development of an approach to system redesign. This is an acknowledgement of the need to work collaboratively beyond the usual planning framework, to mitigate the impact of the severe cuts across both health and social care.

RESOLVED - That the information in the report be noted.

**HW123 ANY OTHER BUSINESS**

No additional items of business were raised.

**HW124 DATE AND TIME OF NEXT MEETING**

Friday 28 April 2017 at 10am.