

**GATESHEAD METROPOLITAN BOROUGH COUNCIL**

**HEALTH AND WELLBEING BOARD MEETING**

**Friday, 20 July 2018**

**PRESENT**

Councillor Lynne Caffrey (Gateshead Council) (Chair)	
Councillor Paul Foy	Gateshead Council
Councillor Ron Beadle	Gateshead Council
Councillor Mary Foy	Gateshead Council
Councillor Malcolm Graham	Gateshead Council
Councillor Michael McNestry	Gateshead Council
Mark Adams	Newcastle Gateshead Clinical Commissioning Group
James Duncan	Northumberland Tyne and Wear NHS Foundation Trust
Dr Bill Westwood	Federation of GP Practices
Alice Wiseman	

**IN ATTENDANCE:**

Andy Graham	Gateshead Public Health
Wendy Hodgson	Gateshead Healthwatch
David Brady	Gateshead Public Health
Neil Jenkinson	Gateshead Public Health
Lynn Wilson	Gateshead Care, Wellbeing & Learning
John Costello	Gateshead Public Health
Michael Laing	QE Hospital
Jane Mullholland	Newcastle Gateshead CCG
Dave Escott	Tyne & Wear Fire Service

**HW35 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Martin Gannon, Alison Dunn, Caroline O'Neill, Dr Mark Dornan, Ian Renwick, John Pratt, Sally Young, Sheena Ramsey, Sir Paul Ennalls, Steph Downey and Susan Watson.

**HW36 MINUTES**

**RESOLVED:**

- (i) The minutes of the meeting held on 15 June 2018 and Action List were agreed as a correct record.

**Action List Update:**

It was highlighted that the 'Reflections on Gateshead Health and Care System Development Report-out' is to be presented to the Board in the Autumn.

It was further noted that further updates are to be provided to the Board during the

phased implementation of the CAMHS transformation programme – this is expected at the October meeting.

Progress reports for the Gateshead Newcastle Deciding Together, Delivering Together are expected by September/October

**HW37      DECLARATIONS OF INTEREST**

RESOLVED:

- (i) There were no declarations of interest.

**HW38      GATESHEAD HEALTHY WEIGHT NEEDS ASSESSMENT - EMMA GIBSON**

**HW39      EXECUTIVE SUMMARY OF NEEDS ASSESSMENT**

**HW40      FULL NEEDS ASSESSMENT**

The Board received a report and presentation providing an overview of the Gateshead Healthy Weight Needs Assessment.

It was highlighted that the report is an evolving document that aims to provide a factual overview of healthy weight across the life course.

From the presentation it was highlighted that obesity levels in the general population are too high. It was further noted that inequalities relating to childhood obesity are widening and that there are opportunities to shift towards a healthier local food and physical environment. The Committee were advised that this is a complex problem that can't be addressed with 'simple' solutions.

The Committee were advised that there continues to be several challenges to tackling obesity. These include the lack of evidence as to what works in addition to perceived ineffectiveness of programmes and interventions. It was further highlighted that work needs to be done to combat ingrained attitudes and social norms.

A copy of the full Obesity System Map was presented illustrating the various factors that contribute towards obesity – these included food production, societal influences, food consumption, biology, individual psychology, individual activity and activity environment. It was also noted that urban planning can have a significant impact on opportunities for physical activity, promoting safer environments for walking, cycling and recreation.

From the presentation the Committee were also provided with a summary of the impact of obesity on children and young people and the effects of obesity in adults throughout their life.

It was noted that the annual cost of obesity to the wider economy is £27bn made up of the cost to the NHS, social care, obesity medication and obesity attributed sick days.

Maps showing children with excess weights 2016/2017 and index of multiple deprivation 2015 were presented in addition to a table of child obesity prevalence by regional deprivation and age.

An overview of adult key findings was provided noting the following points:

- Nationally, 58% of women and 68% of men are overweight or obese.
- Obesity prevalence increased from 15% in 1993 to 27% in 2015.
- In Gateshead 69.0% of adults have excess weight (overweight and obese). This is significantly worse than the England average of 61.3% and regional average of 66.3%.
- Almost two in every three adults in Gateshead has excess weight and around one in four are obese.
- Nationally, only 66% of adults self-report that they undertake the recommended 150+ minutes of physical activity each week;
- In the North East this is even lower at 64% and for Gateshead 63.2%

The Board were updated on the approach to Obesity taken in Amsterdam where success has been found in hitting multiple targets at the same time. It was noted that from 2012 – 2015 the number of overweight and obese children has dropped by 12% which is the biggest fall in obesity rates amongst the lowest socio-economic groups.

The following recommendations were put to the Board:

- Develop a Local Healthy Weight Declaration for Gateshead.
- Develop a long term and sustainable whole place approach identifying clearly priorities for local delivery.
- Prioritise work to address health inequalities through proactive work to target groups at greater risk
- Ensure an appropriate balance between population-level measures and more targeted interventions and approaches. Population approaches include:
  - Design of the built environment to promote walking and active transport
  - Build health into infrastructure through careful investment
  - Seek to reduce exposure to an obesogenic diet by focusing on the availability of energy dense foods and sugar-rich drinks, changes in procurement and innovative changes in advertising and promotion.
- Encourage robust community led interventions to tackle obesity at a place level.

The following next steps were also identified and presented:

- Creation of a strategic steering group to identify priorities.
- Creation of an operational Healthy Weight Alliance to tackle this agenda.
- Actions clearly identified taking into account the balance between tackling the wider environment and addressing the most at risk groups.
- Maintaining and nurturing relationships and adapting the system, network and plans to reflect changing influences and emerging progress in Gateshead.
- Lessons can be learnt from progress with other areas such as tobacco control.

The Board expressed its thanks to Emma Richardson for the detailed and interesting presentation. It was noted that the complexity of this issue should also be a 'call to action' for partners on the Board.

Gateshead Council's decision some years ago to invest Capital Funding in its Sports and Leisure facilities was highlighted. It was further noted that this effort has been undermined by austerity and such policies as planning deregulation. The use of the former 'Local Fund' was noted with an example of a project to tackle childhood obesity in Barley Mow provided as an example. It was also highlighted that the community and voluntary sector have a critical role in supporting this agenda.

It was noted that some schools continue to take part in the 'Mile a Day' scheme which has proven to be effective in maintaining a healthy weight in school age children. The public cost of supporting those who are obese was also noted highlighting the need for adapted properties, transport and hospital equipment.

It was said that talks are currently ongoing between Gateshead Public Health and Nexus to reduce the advertising of unhealthy/fast food on the Metro service. A discussion also took place around people's lack of knowledge about home cooking and their reliance on convenience foods – it was highlighted that there needs to be more work done with parents and schools to educate children about making healthier choices.

RESOLVED:

- (i) The Board endorsed the high-level recommendations of the report.
- (ii) The Board agreed to receive a further update in six months.

#### **HW41 REPROCUREMENT OF THE GATESHEAD INTEGRATED SEXUAL HEALTH SERVICE - ALICE WISEMAN & DAVID BRADY**

The Board received a report to seek views on progress to date with the re-procurement of the Gateshead Integrated Sexual Health Service. It was noted that the Integrated Sexual Health Service is being retendered in August 2018 with the new service going live from April 2019.

From the report the Board were advised that across the country there is a lack of market interest when such services are procured. It was further noted that there is uncertainty of the public health budget post April 2020 which provides a potential risk. It was said that commissioners are keen to consider an extended contract to prospective bidders to help stimulate greater market interest i.e. a 4+1+1 to mitigate the risk of lack of interest and creating more certainty for future providers.

An overview of the actions to date to inform the new specification was provided. This included:

- Critical friend review
- Public and service user survey
- Mystery shopping exercise

- Updated Sexual Health Needs Assessment completed and Equality impact assessment
- NEPO Market Engagement Questionnaire

The Board were also advised of the key risks and proposed actions from the report which were detailed within the Appendix. A timeline of milestones was also provided from the report advising that the tender deadline is 19<sup>th</sup> September with the contract to be awarded (pending Cabinet approval) from December for an April 2019 start.

Concerns were raised regarding the cost of staffing for the new contract. It was noted that the budget set over the 4 years is adaptable to mitigate any impact on staff/redundancies. It was further noted that a quarter of service users come from outside of the borough with Newcastle residents and students choosing to make use of services in Gateshead.

It was also noted that if the service does not continue to be provided from Trinity Square (i.e. its current location), there would be void costs that would need to be met by the CCG and the costs would represent a loss of resources to the local system.

RESOLVED:

- (i) The Board noted the contents of the report.

## **HW42 DRUG RELATED DEATHS IN GATESHEAD - ALICE WISEMAN**

The Board received a report to update on the current position within Gateshead in respect of drug-related deaths and the action being taken to address this.

A summary of the report was given which provided background on the national issue of drug-related deaths. The report highlighted that deaths involving opioids (such as heroin) account for the majority of drug poisoning deaths. It was further noted that deaths have also arisen from the use of cocaine and new psychoactive substances and the misuse of prescription medication.

Local issues were also summarised as follows:

- All but one of the 19 deaths were males, the majority were aged 19-34, with the oldest being 54. Seven people lived with family or friends. Nine people lived alone of whom six died alone. Three people were homeless, and all but one were unemployed.
- Opioids (such as heroin) accounted for the majority of drug deaths (16) or were present in the system. Fifteen deaths involved opioids and diazepam. Prescription medications (Pregabalin and Gabapentin) were present in nine deaths in small amounts, a small number also had traces of over-the-counter medication. NPS accounted for the one female death. Alcohol was present in half of the deaths, which is higher than the national average.
- 14 people were open or known to the adult drug and alcohol service (Evolve), 10 were currently in treatment, four were previously known. Five were not known to the drug and alcohol service, one of whom was prescribed by their GP (not in shared care).

- 13 of the 19 cases had some form of mental health condition or had previously attempted suicide (though note deaths from suicide are not included in the DRD figures, even where the deceased is a known user).

It was noted that a similar analysis will be included in the 2017 annual report which has yet to be published. It was also highlighted that the lives of those who fall victim to substance misuse are often very complicated with multiple barriers to leading healthy lives.

The Board were advised that the procurement of the Gateshead drug and alcohol service has been successful. It was noted that the current provider will continue to deliver services in Gateshead which will be good for service users who will have continuity of service.

A comment was made noting the use of the Internet to access drugs in addition to concerns around products such as 'honey oil' being made in the home causing fires.

RESOLVED:

- (i) The Board noted the position regarding drug related deaths in Gateshead.
- (ii) The Board agreed to receive a further update later in the year.

#### **HW43      BCF AND IBCF QUARTER 1 RETURN TO NHS ENGLAND - JOHN COSTELLO / ALL**

The Board were provided with an overview of the Better Care Fund: 1<sup>st</sup> Quarterly Return (2018/19) for endorsement.

It was noted that NHS England is continuing its quarterly monitoring arrangements for the BCF which requires quarterly template returns to be submitted. As part of the reporting arrangements for 2018/19, the return also incorporates how Improved Better Care Fund (IBCF) funding (announced at the Spring budget 2017) is being used to support initiatives and projects including those addressing adult social care pressures. It was highlighted that this was previously reported in a separate return to DCLG during 2017/18.

From the report it was also noted that in line with the timetable set by NHS England, a return for the 1<sup>st</sup> quarter of 2018/19 is required to be submitted by 20<sup>th</sup> July.

RESOLVED:

- (i) The Board endorses the 1<sup>st</sup> Quarter return for 2018/19.

#### **HW44      GATESHEAD LOCAL SYSTEM MINI PEER REVIEW - FINAL SUMMARY REPORT**

The Board were provided with an overview of the Local System Mini Peer Review.

It was noted that in April 2017 the government issued additional funding for social

care and that attached to the additional monies would a set of targets which local areas would have to achieve. It was also highlighted that a targeted programme of whole system reviews would be undertaken by the CQC using an appreciative enquiry methodology.

It was further noted that the final report of the Mini Peer Review Team is similar to the initial findings already reported to the Board. It was also noted that there is the potential for the Board to further strengthen its leadership position in the local system.

RESOLVED:

- (i) The Board noted the contents of the report.

#### **HW45 UPDATES FROM BOARD MEMBERS**

It was noted that NHS England have recently rated Newcastle Gateshead CCG as 'outstanding' which recognises the positive relationships and progress made by the CCG working with local partners for the benefit of local people.

It was highlighted that Healthwatch Gateshead priorities are being focussed on mental health and the LGBT community. It was agreed that Healthwatch Gateshead would present an update at a future Board meeting.

It was further noted that the refresh of the Health & Wellbeing Strategy will be progressed during the Autumn.

RESOLVED:

- (i) The Board noted the updates.

#### **HW46 A.O.B.**

RESOLVED:

- (i) There was no other business.