

**GATESHEAD METROPOLITAN BOROUGH COUNCIL**

**HEALTH AND WELLBEING BOARD MEETING**

**Friday, 26 April 2019**

<b>PRESENT</b>	Councillor Lynne Caffrey	Gateshead Council (Chair)
	Councillor Paul Foy	Gateshead Council
	Councillor Mary Foy	Gateshead Council
	Councillor Ron Beadle	Gateshead Council
	Councillor Martin Gannon	Gateshead Council
	Councillor Gary Haley	Gateshead Council
	Councillor Michael McNestry	Gateshead Council
	Caroline O'Neill	Care Wellbeing and Learning
	Steph Edusei	Gateshead Healthwatch
	James Duncan	Northumberland Tyne and Wear NHS Foundation Trust
	Alice Wiseman	Gateshead Council
	Sally Young	Gateshead Voluntary Sector
	Lynsey McVay	Tyne & Wear Fire and Rescue Service
<b>IN ATTENDANCE:</b>	Micheal Brown	Gateshead Healthwatch
	Susan Watson	Gateshead NHS Foundation Trust
	John Costello	Gateshead Council
	Jane Mullholland	Newcastle Gateshead CCG
	Gavin Bradshaw	Gateshead Council

**HW102 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Elaine Devaney, Mark Adams, Sheena Ramsey, Mark Dornan and Sir Paul Ennals.

**HW103 MINUTES**

The Board were advised that a response had not been received from the Secretary of State for Work Pensions, although there has been dialogue with DWP on the widespread impact of Universal Credit. It was noted that it has been recognised that Universal Credit is not working for the most vulnerable groups. The Board were also advised that there has been a promise of a continued dialogue on the issue.

RESOLVED:

- (i) The minutes of the last meeting were agreed as a correct record.

**HW104      DECLARATIONS OF INTEREST**

RESOLVED:

- (i)            There were no declarations of interest.

**HW105      FOLLOW-UP TO THE 'THRIVING IN GATESHEAD' WORKSHOP: - REFLECTION FROM BOARD MEMBERS AND DIRECTION OF TRAVEL - DISCUSSION ITEM LED BY CLLR CAFFREY**

The Board were advised that the first draft of the new health and wellbeing strategy has been completed by the working group. A discussion also took place on the conference that took place on the Beveridge Report of 1943 and how those theories link in with the Thrive Agenda and the principles of the health and wellbeing strategy.

A comment was made noting that the conference was inspiring but highlighted that it is a shame that the reforms suggested by Beveridge have not progressed as much as they should have. A further comment was made stating that the priorities of all partners need to be agreed and then condensed into realistic aims that reflect a “Gateshead view”.

It was further stated that community involvement is important in devising the new strategy. Frustration was also noted that under the current government there has been a reduction or removal of services such as Surestart Centres, facilities that many vulnerable people relied upon. It was also noted that whilst there are many negatives there is also a lot to be positive about, particularly the strong partnerships across Gateshead services who are committed to improving the lives of residents.

Another discussion took place on the Michael Marmot steering group in Manchester; it was highlighted that there is a broad-based stakeholder involvement in Manchester who aim to be a Marmot city.

The Board were advised that the working title for the new strategy is “A job, a home, good health and friends”.

RESOLVED:

- (i)            The Board agreed to take copies of the draft back to their respective organisations to share and gauge views and feedback.
- (ii)          The Board agreed to receive a further update at the July meeting.

**HW106      HEALTHWATCH GATESHEAD- UPDATE ON PRIORITIES AND RESEARCH WORK - STEPH EDUSEI**

The Board received a report and presentation from Healthwatch Gateshead on the impacts of reduced funding for adult social care in Gateshead and Mental Health Services.

From the presentation the Board were advised that Healthwatch has been running

for six years with the current contract provision in place for two years. An overview of the previous work done by Healthwatch was also provided in addition to a summary of 2018/19 priorities which included mental health for those on universal credit and minority groups.

The Board were advised that the 2019/20 priorities for Health Watch were as follows:

- Having an accessible information standard
- Adult social care
- GP services
- Mental health services
- NHS prescriptions
- Outpatient appointment

A comment was made noting that the 2019/20 priorities were generic, particularly the reference to GP services. It was confirmed that Healthwatch intend to work to improve access to GP services considering the increasing pressures on GPs. It was further noted that the issue of access to GP services has also been debated at a Council overview and scrutiny committee.

It was stated that the work being done to improve access to mental health services is welcomed. It was further stated that it was good that the report acknowledged the concerns regarding the removal of contracts with a mental health service provider to deliver mental health services.

The Chair passed on her thanks to Healthwatch for the work being done.

RESOLVED:

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

## **HW107 EARLY HELP: OUTCOMES AND THE IMPACT ON CHILDREN, YOUNG PEOPLE AND FAMILIES - GAVIN BRADSHAW**

The Board received a report and presentation to seek their views on the Targeted Family Support function of the Early Help Service.

From the presentation the Board received an overview of the Early Help Service which includes teams such as the Youth Offending Team and the Domestic Abuse Team. It was noted that nationally, a 71% reduction in budgets for all forms of Local Authority early intervention is predicted up to 2020. It was stated that whilst resource is decreasing demand is increasing.

An overview of the services Common Assessment Framework was provided; it was highlighted that Early Help teams sit in the “emerging and escalating needs” category of the framework. Following this, the Board received a summary of referrals that have been received by the service, it was stated there is currently a live caseload of 872.

It was noted that caseloads are mapped against Thrive and LloN categories. These categories were:

- Vulnerable – Extremely
- Vulnerable – Very
- Just Coping – Only Just
- Just Coping – Getting By
- Managing
- Thriving

It was acknowledged that there are significant volumes of referrals being received and that staff are holding an increasingly complex level of work. From the presentation an overview of changes in practice was provided in addition to a summary of closed cases. The Board also received a display of case studies and quotes from the service to provide a wider context to the work being done.

A comment was made noting that the presentation and report is excellent. A concern was noted on the comment that resources within Early Help teams were reducing. It was stated that officer caseloads have been maintained at a safe level but that this may result in some individuals and families being excluded from services.

It was noted that a refreshed Gateshead Early Help Strategy (2018-2021) is placing a higher emphasis on Early Help as “everyone’s business” to broaden the partnership responsibility for delivering timely and effective support to families in a range of contexts and settings.

RESOLVED:

- (i) The Board considered and noted the contents of the report.
- (ii) The Board agreed to receive performance reports from the Early Help Service (Targeted Family Support) and to support early help approaches.

## **HW108 GATESHEAD HEALTH & CARE PARTNERSHIP: VERBAL UPDATE - ALL**

A discussion took place on the Gateshead Health & Care System. It was noted that high level work continues and that emerging primary care networks need to be discussed further.

It was noted that work is ongoing with regard to financial and contractual issues. A summary of the workstreams was provided again noting that frailty is included as a workstream. It was also stated that work is to be done on the children and young people’s agenda which is a huge undertaking in addition to providing support for those with multiple and complex needs.

A discussion took place on the current congestion charge consultation highlighting that “Place” in regard to health is going to have a high profile. It was agreed that further updates would be brought back to the Board.

RESOLVED:

- (i) The Board agreed to receive a further update at a future meeting.

**HW109 BETTER CARE FUND QUARTER 4 RETURN TO NHS ENGLAND - JOHN COSTELLO**

The Board received the Better Care Fund: 4<sup>th</sup> Quarterly Return (2018/19) for retrospective approval.

A copy of the 4<sup>th</sup> Quarter BCF return for 2018/19 was attached within the agenda pack; it was noted that things continue to move in the right direction.

RESOLVED:

- (i) The Board provided their endorsement.

**HW110 UPDATES FROM BOARD MEMBERS**

RESOLVED:

- (i) There were no other updates.

**HW111 A.O.B.**

RESOLVED:

- (i) There was no other business.