

GATESHEAD METROPOLITAN BOROUGH COUNCIL

HEALTH AND WELLBEING BOARD MEETING

Friday, 7 June 2019

PRESENT

Councillor Lynne Caffrey (Gateshead Council) (Chair)

Councillor Leigh Kirton	Gateshead Council
Councillor Mary Foy	Gateshead Council
Councillor Ron Beadle	Gateshead Council
Councillor Gary Haley	Gateshead Council
Sally Young	Gateshead Voluntary Sector

IN ATTENDANCE:

APOLOGIES: Councillor Martin Gannon, Councillor Michael McNestry, Caroline O'Neill

HW112 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor M Gannon and Councillor M McNestry, Caroline O' Neill, Lyndsey McVey, Steph Edeusi and Sheena Ramsey.

It was noted that this was Jane Mulholland's last meeting as she was retiring and the Chair, on behalf of the Board, thanked Jane for her contribution to the work of the Board and for Gateshead.

TIMING OF FUTURE MEETINGS

It is proposed that future Board meetings will now commence at 9am instead of 10am. An email will go out to Board Members about this, seeking any comments they may have on the proposed change.

HW113 MINUTES

RESOLVED:

The minutes of the last meeting were agreed as a correct record.

MATTERS ARISING

Follow up to the Thriving in Gateshead Workshop

It was noted that at the last meeting it had been agreed that members of the Board would take copies of the first draft of the new Health and Wellbeing Strategy back to their respective organisations to share and gauge feedback. However, no feedback had been received so far from the majority of partners.

At present a set of draft principles were in place based on the 6 Marmott principles and the work of Professor Chris Bentley.

It was also proposed that the Council's Overview and Scrutiny Committees be consulted on the Strategy refresh.

Sally Young advised that she would convene a meeting with representatives from the voluntary sector with a view to facilitating meetings or workshops to produce a collective perspective.

The Board was informed that a new Marmott document will be published in February 2020 and it was proposed that the release of the refreshed Health and Wellbeing Strategy be timed to coincide with the release of the Marmott response to obtain maximum impact.

It was noted that NHS colleagues need to respond to the proposals set out in the Long Term Plan and the refreshed Health and Wellbeing Strategy will form part of that response.

RESOLVED:

That consultation on the refreshed Health and Wellbeing Strategy for Gateshead be progressed on the basis outline above.

HW114 DECLARATIONS OF INTEREST

RESOLVED:

There were no declarations of interest.

HW115 DEVELOPMENT OF PRIMARY CARE NETWORKS IN GATESHEAD - TERESA GRAHAM (PRESENTATION)

The Board received a presentation on Primary Care Networks (PCNs) and the vision for Primary Care.

It was noted that PCNs are formed from groups of practices covering 30-50,000 patients working together and will have an Accountable Clinical Director, 1 day per week per 50K patients pro rata and a Practice Management lead and a board made up of member practices with co-opted members from community service providers and other organisations

The aim of forming the Networks is to :-

- bring care closer to the community and focusing services around local communities and local GP practices to help rebuild and reconnect the primary healthcare team across the area they cover.
- improve health and save lives
- improve the quality of care for people with multiple morbidities
- help to make the NHS more sustainable
- Increase integration between practices, increase resilience, tackle variation in primary care, expand the primary care workforce, increase investment into

primary care without it being siphoned off as profit.

The Board were informed of the steps taken in the formation of PCNs and the delivery of services and noted that as of July 2019 PCNs would be in operation offering extended hours across the network and recruitment to shared posts, initially social prescriber and pharmacist. PCN's would then start working to deliver the network priorities.

The Board received information on the identified clinical priorities, funding model and network configuration and the new investment and impact fund which would be in place from 2020/21. In addition, proposed links with Gateshead H&CS and beyond and the below opportunities for joint working were also highlighted:-

- Joint training
- Mentoring for nurse /prescribers
- Expand frailty and complex younger patients support such as virtual ward/ network level MDT
- Development of intermediate care type posts
- Closer integration of practice and community nurse teams.
- Mental health - closer support for practices from locality teams
- Improved links with VCS and integration of practice into the community
- Developing alternatives to admission
- Improved access/alternatives to A+E assessment
- Developing alternatives to outpatient attendances
- Social Prescribing across Primary and Secondary care
- Palliative care - opportunity to move to best practice
- Named Consultant support for individual networks

It was commented that this presented an exciting opportunity in terms of the work done with Chris Bentley about planned care and emergency care.

It was queried whether deprivation was factored into the funding model and the Board was advised that the funding model was complex and one of the benefits of Primary Care Networks was having a collection of practices in deprived areas. It was noted that for some Primary Care Networks the demographics were different and so social prescribing may look at issues such as frailty eg in areas such as Wickham.

It was noted that a huge amount of work had taken place and the impact on patients was noted. The Board expressed delight at the use of Egberts House which is working with emerging networks.

A discussion took place around patient involvement and shaping services. It was noted that the CCG was keen that patients don't have to travel too far for services but it was considered that there was a need to manage patient expectations in this regard.

It was commented that the rationale for the Birtley / Oxford Terrace Primary Care Networks was unclear.

It was queried how social prescribers would be identified and it was noted that a route for organisations could be “Our Gateshead” once this is refreshed.

It was queried how the Board could monitor and review how well this new system was working. It was indicated that this might be through the GP Federation feeding in audits and clinical governance monitoring reports but the way forward on this was yet to be agreed.

It was noted that ward councillors need to be kept up to date

RESOLVED:

The Board noted the contents of the presentation.

HW116 AIR QUALITY - GERALD TOMPKINS (PRESENTATION)

RESOLVED:

That this item be deferred to the next meeting of the Board.

HW117 CLIMATE CHANGE MOTION AGREED BY COUNCIL ON 23RD MAY 2019 - CLLR. CAFFREY

Councillor Caffrey reported that the Council had agreed a motion at its meeting on 23 May 2019 declaring a climate change emergency and had highlighted the implications of climate change both globally and locally.

Councillor Caffrey also noted that the LSC had produced a report identifying 1000 excess summer deaths as a result of climate change.

Gateshead has reduced its carbon footprint by 40% in the last year and Councillor Caffrey asked Board members to report back on the work their organisations were doing to reduce their carbon footprints and nominate a representative to facilitate a wider discussion on this issue at a future meeting.

It was noted that Air Quality was not just about clean air zones. Gateshead disagreed with the Government modelling.

Sir Paul Ennals commended the Council for being a step leader in this area. The Board was advised that the Chair of VONNE was looking for a civil society lead in this matter. Individual organisations can do a great deal but a vehicle was needed to involve communities.

It was noted that GO NE / Nexus have received funding to improve emissions on a further 94 buses and a bid is being developed for electric vehicles for east Gateshead.

RESOLVED:

That the steps being taken by partner organisations to reduce their carbon footprint be brought to a future meeting of the Board.

HW118 ACT - PROGRESS REPORT

The Board received a presentation on progress being made to develop a new more in-depth dynamic model for adults with a learning disability that would implement a new approach through a multi - disciplinary team with specialists in assessment, reablement, occupational therapy and travel training to work together and dynamically respond to fluctuating needs by offering the right amount of support at each point in time to ensure maximum safe independence and improved outcomes for service users whilst at the same time effectively managing available resources.

The Board also received a case study outlining the positive impact of the new approach in relation to improved outcomes for a service user whilst at the same time spending less.

The Board was advised that next steps involve work to ascertain the next appropriate cohort.

Work would also be taking place around sharing lessons learned and disseminating better practice and having better processes.

A visit has also taken place to Newcastle who are heading towards the fourth year of their scheme to identify good practice and an exit strategy is being developed as the aim of the pilot is to make this way of operating the norm.

The Board noted the investment to save approach in relation to care packages and was impressed with the person-centred approach. It was suggested that the team should link up with Caroline Wills at NTW NHS FT.

The Board noted that initial work had focused on high cost complex packages and the scope for developing this work further was queried. It was also queried whether there were any cases studies highlighting where the approach had been unsuccessful.

It was noted that in 2018-19 initial work had focused on individuals with high cost packages of care, but it is considered that benefits can also be achieved in medium to low risk packages which comprise the bulk of the LD funding spent. It was proposed that a further progress update be provided in 6 months - time which could include further case studies.

RESOLVED:

That a further progress update be provided to the Board in six months time.

HW119 GATESHEAD HEALTH & CARE SYSTEM UPDATE

Feedback from the Gateshead System Workshop was provided. It was noted that Mark Dornan was the incoming Chair.

The Board was informed that it was a year since the System week long workshop took place. The opportunity was taken at a recent one -day workshop to review and

have a stocktake of what has been achieved by the system over the last year, what the learning points were, what our priorities should be for 2019-20 and how we can ensure momentum is maintained. In terms of achievements it was noted that relationships in Gateshead are built on strong foundations and Gateshead is now being discussed nationally in terms of its partnership culture. The system is also responding collectively with “one voice” in relation to a number of issues, most recently the air quality consultation.

It was also reported that the Gateshead System has put in place solid foundations through its memorandum of understanding, associated governance arrangements and an agreed programme of work.

Challenges also remain in relation to finances and capacity within the system.

Going forward, it will be important that we continue to learn from other areas (and share our learning with them) and focus down on a limited number of key priorities.

A more detailed report will be brought to the next Board meeting which will review where we are currently and provide a “forward look” on our future direction.

RESOLVED:

That the Board note the information provided.

HW120 UPDATES FROM BOARD MEMBERS

The police investigation relating to Whorlton Hall Hospital was highlighted and information was sought information on how care for Gateshead residents is quality assured.

The Board was advised that no Gateshead residents were in the care of the company responsible for providing services at the hospital.

An update was also provided in relation to the Hardman Centre.

RESOLVED:

That a report on how care for Gateshead residents is quality assured is brought to a future meeting of the Board.

HW121 A.O. B

RESOLVED:

There was no other business.