

GATESHEAD HEALTH AND WELLBEING BOARD AGENDA

Friday, 6 March 2020 at 9.00 am in the Whickham Room - Civic Centre

From the Chief Executive, Sheena Ramsey

Item Business

1 **Apologies for Absence**

2 **Minutes** (Pages 3 - 12)

3 **Declarations of Interest**

Members of the Board to declare an interest in any particular agenda item.

Items for Discussion

4 **Minimum Unit Pricing - Colin Shevills** (Pages 13 - 14)

5 **Health & Wellbeing Strategy - Alice Wiseman** (Pages 15 - 34)

6 **Integrated Care Partnership (ICP) Suicide Prevention Developments - Iain Miller** (Pages 35 - 44)

7 **Gateshead Health & Care System Update - All**

8 **Updates from Board Members**

9 **A.O.B.**

Items for Information

- Health Foundation funding programme for partnerships developing collaborative communities. Link: [Health Foundation Funding Programme](#)

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GATESHEAD METROPOLITAN BOROUGH COUNCIL
GATESHEAD HEALTH AND WELLBEING BOARD MEETING

Friday, 17 January 2020

PRESENT	Councillor Lynne Caffrey	Gateshead Council (Chair)
	Councillor Leigh Kirton	Gateshead Council
	Councillor Ron Beadle	Gateshead Council
	Lisa Goodwin	Connected Voice
	Alice Wiseman	Gateshead Council
	Ian Warne	Tyne and Wear Fire and Rescue
IN ATTENDANCE:	Felicity Shenton	Gateshead Healthwatch
	Sir Paul Ennals	Local Safeguarding Children's Board
	Steph Downey	Gateshead Council
	Lynn Wilson	Newcastle Gateshead CCG/Gateshead Council
	John Costello	Gateshead Council
	Fergus Neilson	Public Health England/NHS England
	Steve Haigh	Whickham School
	Susan Watson	Gateshead NHS Foundation Trust
	Natalie Goodwin	Gateshead Council
	Gerald Tompkins	Gateshead Council

HW163 APOLOGIES FOR ABSENCE

Apologies for absence were received from Bill Westwood, Caroline O'Neill, Councillor Gannon, Councillor Haley, Councillor M Foy, Councillor McNestry, Councillor P Foy, James Duncan, Joe Corrigan, Lynsey McVay, and Mark Dornan,.

The Chair noted a congratulations to Councillor Mary Foy on behalf of the Board following her election as Member of Parliament for the City of Durham. The Chair also noted a special thank you to Susan Watson as it was her last meeting; the Chair highlighted Susan's valued contribution to the Board to date.

HW164 MINUTES

The minutes of the last meeting held on 29 November 2019 and Action list were reviewed with the following amendment to note:

- Lisa Goodwin was noted as representing Newcastle CVS in the attendance of the last meeting; this is to be updated to 'Connected Voice' following the organisations name change.

From the Action List it was noted that an update on safeguarding oversights in relation to the Gateshead Community Model for People with Learning Disabilities and an update on the work of the Violence Reduction Unit and Future Plans will be

fed into the Board's Forward Plan.

RESOLVED:

- (i) The Board approved the minutes of the last meeting noting the above comments.

HW165 DECLARATIONS OF INTEREST

RESOLVED:

- (i) There were no declarations of interest.

HW166 MENTAL ILL-HEALTH PREVENTION IN EDUCATION - STEVE HAIGH, HEAD TEACHER, WHICKHAM SCHOOL & SPORTS COLLEGE (VERBAL)

Steve Haigh, the Head of Whickham School attended and presented a verbal update on the work being undertaken within the school to support pupils with mental ill-health.

Acknowledging the challenges of providing this support to pupils, Steve provided an overview of the mechanisms in place within Whickham School, these included:

- Staff training and awareness on mental health and wellbeing issues
- An in-house mental health nurse (seconded from the NHS)
- Partnership working with the Arts Council
- A pupil LGBT+ support network 'Rainbow Society'
- Adult and pupil mental health first aiders
- Use of online tools such as Kooth
- Links with the new Mental Health Trailblazer

It was reported that whilst no school is perfect, Whickham School put pupils at the heart of the efforts being taken to improve mental health and wellbeing. Steve advised the Board that Whickham School are not the exception in terms of the support being offered but added he was grateful to be invited to the Board to discuss the approach being taken by the school.

A comment was made noting that the work being done at Whickham School is inspiring. It was also noted that the absence of James Duncan at today's meeting was unfortunate given the work he is leading on for the NHS. The Chair thanked Steve on behalf of the Board for taking the time to attend.

RESOLVED:

- (i) The Board noted the update.

HW167 DPH ANNUAL REPORT 'AGEING WELL' - ALICE WISEMAN

The Board received and report and presentation from Alice Wiseman on 'Aging Well'; the annual report for Gateshead's Director of Public Health 2019.

From the presentation, the Board received information on the following:

- That the population structure is changing, and life expectancy is increasing
- There are several risk factors that contribute to living well or otherwise such as behavioural risks (e.g. smoking and diet) and other risk conditions such as poverty and unemployment
- Age related stigma
- Changing times such as the movement towards a digital society and changes to the family structure
- Inequalities in aging
- The impact of loneliness

The Board were also provided with letters that elderly residents have written to their younger selves; within the letters the individuals noted their life experience and advice.

From the report, an overview of recommendations were highlighted; these included the development of a coherent and organised well-being offer across Gateshead based on the principal of 'Making Every Contact Count' and the five ways to wellbeing. The final recommendation as outlined in the report and presentation was to ensure that all residents, as they age, can participate actively in society and that their contribution is valued and influential.

The Board were reminded that the Director of Public Health Annual Report is a statutory function but is independent. The acknowledgement of the importance of the community and voluntary sector within the report was also well received. A discussion also took place on the Better Health at Work award.

RESOLVED:

- (i) The Board endorsed the report.

HW168 DRAFT HEALTH & WELLBEING STRATEGY - ALICE WISEMAN

The Board received the report on the Gateshead Health and Wellbeing Strategy 2020 for views on the final draft proposals.

An overview of the draft proposals was provided from the report. It was reported that development of the strategy has been informed and influenced by the Marmot 10-year review of 'Fair Society, Healthy Lives'. The Board were also advised that HealthWatch were assisting with public engagement on the strategy and that it is planned to have it signed off in March 2020.

The strategy was welcomed by the Board. A comment was made noting that the draft strategy did not currently acknowledge the need for inward investment for services; it was also noted that the strategy needs to highlight how outcomes are to be measured. Feedback from the Board was noted.

RESOLVED:

- (i) The Board noted and endorsed the draft strategy.

HW169 CHILDHOOD IMMUNISATIONS - RACHEL CHAPMAN & FERGUS NEILSON

(PRESENTATION ONLY)

The Board received a presentation providing an update on Childhood Immunisations.

From the presentation the Board were provided with an overview of immunisation programmes and uptake statistics. It was also noted that childhood immunisation uptake is good in comparison to 'like-areas' and to England, although declining, and there is GP variation.

It was acknowledged that a whole system approach would be required to increase public awareness of the importance of immunisations. A discussion also took place on the role of schools in ensuring that pupils are immunised and in instances where they are not (due to absence) that this is followed up.

Additional discussions took place on the use of pork derivatives in some immunisations and the impact this has on communities that exclude pork from their diet. A question was asked as to whether alternative vaccines could be made available for such instances, but it was confirmed there is no current alternative. It was confirmed that the Muslim Council have been in consultation with Public Health England on the issue.

It was requested that a progress update on Child Immunisations be brought back to a future Board meeting and that this should cover details of the immunisations programme for 2020/21

RESOLVED:

- (i) The Board noted the contents of the presentation and requested a progress update in the Summer.

HW170 GATESHEAD HEALTH & CARE SYSTEM UPDATE - ALL

RESOLVED:

- (i) A brief update was provided on a recent joint development session held by the Gateshead Health & Care System with Directors of Finance and their representatives.

HW171 BETTER CARE FUND 3RD QUARTER RETURN 2019/20 - JOHN COSTELLO

The Board received the report for endorsement of the Better Care Fund return to NHS England for the 3rd Quarter of 2019/20.

It was noted that NHS England had indicated that the Better Care Fund 2019/20 submission has now been formally approved. It was confirmed that a letter confirming the approval is expected soon.

A comment was made highlighting that as a 'system', Gateshead looks to be holding its own. It was also reported that the return for the 3rd quarter of 2019/20 is required to be submitted by 24 January 2020.

RESOLVED:

- (i) The Board endorsed the 3rd quarter BCF submission for 2019/20.

HW172 UPDATES FROM BOARD MEMBERS

The issue of minimum unit pricing for alcohol was highlighted. It was noted that a report will be coming to this Board on this issue in due course.

RESOLVED:

- (i) The Board noted the update.

HW173 A.O.B.

RESOLVED:

- (i) There was no other business.

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**GATESHEAD HEALTH AND WELLBEING BOARD
ACTION LIST**

AGENDA ITEM	ACTION	BY WHOM	COMPLETE or STATUS
Matters Arising from HWB meeting on 17th January 2020			
Childhood Immunisations	The Board to receive an update report in the summer (to include details of the immunisations programme for 2020/21).	R Chapman & F Neilson, NHS England	To feed into the Board's Forward Plan
Matters Arising from HWB meeting on 29th November 2019			
Gateshead Community Model for People with Learning Disabilities	The Board to receive an update on safeguarding oversights in relation to the Gateshead LD Community Model.	K Sprudd	To feed into the Board's Forward Plan
Overview of the Violence Reduction Unit and Future Plans	The Board to receive an update on the work of the VRU in Autumn 2020.	S Hume	To feed into the Board's Forward Plan
Matters Arising from HWB meeting on 18th October 2019			
Gateshead Joint Strategic Needs Assessment Update / Refresh	To receive an update in September 2020	A Wiseman	To feed into the Board's Forward Plan
Matters Arising from HWB meeting on 19th July 2019			
Deciding Together, Delivering Together	An update on the involvement/ engagement with the voluntary sector be provided at a future meeting.	J Duncan	To feed into the Board's Forward Plan.

AGENDA ITEM	ACTION	BY WHOM	COMPLETE or STATUS
Matters Arising from HWB meeting on 7th June 2019			
Climate Change Motion	Steps being taken by Partner organisations to reduce carbon footprint to be brought to future Board meeting.	Partner organisations on HWB	To feed into the Board's Forward Plan.
Achieving Change Together	Update on progress of ACT to be brought to Board in 6 months.	Louise Hill and ACT Team	To feed into the Board's Forward Plan.
Partner Updates (Re: Whorlton Hall)	Report on how care for Gateshead residents is quality assured.	Caroline O' Neill	To feed into the Board's Forward Plan.
Matters Arising from HWB meeting on 26th April 2019			
Early Help: outcomes and the impact on children, young people and families	To receive performance reports from the Early Help Service (Targeted Family Support) and to support early help approaches.	Gavin Bradshaw	To feed into the Board's Forward Plan.
Matters Arising from HWB meeting on 30th November 2018			
Annual Report on Permanent Exclusions (2017/18)	The receive further updates as required.	Jeanne Pratt	To feed into the Board's Forward Plan.
Matters Arising from HWB meeting on 7th September 2018			
Update on Integrated Care System / Integrated Care Partnership	To receive further updates as required.	Mark Adams	To feed into the Board's Forward Plan.

AGENDA ITEM	ACTION	BY WHOM	COMPLETE or STATUS
Matters Arising from HWB meeting on 20th July 2018			
Drug Related Deaths in Gateshead	The Board agreed to receive a further update later in the year.	Gerald Tompkins / Alice Wiseman	To feed into the Board's Forward Plan.

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TITLE OF REPORT: Minimum Unit Pricing for Alcohol

Purpose of the Report

1. To seek the views of the Health & Wellbeing Board on how the introduction of alcohol minimum unit price can be supported.

Background

2. The Minimum Unit Pricing (MUP) sets a floor price for a unit of alcohol. It targets the cheapest alcohol most commonly consumed by the heaviest drinkers.
3. Sheffield University were commissioned by the National Institute of Health Research to look at the impact of a 50p minimum unit price for alcohol on health harms at the local authority level across the North of England.
4. The results reveal that a 50p MUP would see alcohol consumption in some areas falling by twice the England average, leading to significant reductions in deaths, alcohol related hospital admissions and alcohol related crime across the North. A 50p MUP would see the heaviest drinkers in the poorest communities benefitting the most and as a result it would help reduce health inequalities.
5. Key findings from the MUP research indicate that in Gateshead:
 - 174 deaths would be prevented over the next 20 years
 - Alcohol related hospital admissions would reduce by an estimated 283 each year, reducing pressure on the NHS, with people from the poorest communities seeing the biggest falls and saving £850,000 per year.
 - The criminal justice system would also benefit, with crimes falling by 338. Those figures include 67 fewer thefts or robberies, 206 less incidents of criminal damage and 62 fewer violent incidents
 - the benefits of MUP would be particularly felt in areas of deprivation where the harm is greater and so would help reduce health inequalities.
6. There is no single solution to tackling alcohol-related harm, however, all the independent evidence tells us that getting rid of the cheapest, strongest alcohol would have the most impact as it is typically consumed by young people and those drinking at harmful levels.
7. MUP was introduced in Scotland at 50p per unit in 2018, meaning that three litres of strong cider (ABV 7.5%) now costs no less than £11.25. Currently in England, this same bottle of cider can cost as little as £3.50.

8. The latest study from NHS Scotland on the impact on off-sales in the 12 months since MUP has just been published and the headlines are as follows:
- The amount of pure alcohol sold per adult in Scotland has fallen from 7.4 litres to 7.1 litres, a reduction of 3.6%
 - At the same time off sales in England and Wales, measured in pure alcohol per adult, have increased from 6.3 litres to 6.5 litres
 - The reductions in different drinks categories are as follows:
 - Cider sales fell 18.6%
 - Spirits fell 3.8%
 - Wine fell 3%
 - Beer sales reduced 1.1%
9. This latest research follows data showing overall sales are falling in Scotland by 3% at a time when they were increasing in England and Wales by 2%. Sales are falling faster to the heaviest drinking households, according to analysis carried out by Newcastle University. There are early signs of reductions in liver disease admissions with the greatest falls in the most deprived groups.

Recommendations

1. The Health and Wellbeing Board is asked to support the introduction of minimum unit price in England and write to Westminster urging that minimum unit price is introduced without delay.

Contact: Gerald Tompkins, Consultant in Public Health / Service Director Health & Wellbeing Tel. 0191 4332940



TITLE OF REPORT: Gateshead Health and Wellbeing Strategy 2020

Purpose of the Report

1. To ask the Health and Wellbeing Board to endorse the new Health and Wellbeing Strategy for Gateshead, '**Good jobs, homes, health and friends**'.

Background

2. The Health and Social Care Act 2012 sets out the requirement for Health and Wellbeing Boards to develop a health and wellbeing strategy for their area. The previous health and wellbeing strategy, 'Active, Healthy and Well Gateshead', was developed in 2013 and covered the period up till 2016.
3. The Health and Wellbeing Board agreed a refresh of the Gateshead Health and Wellbeing Strategy to ensure it responded to the challenges identified in the Director of Public Health annual report for 2016-17 to address the issues of health inequalities in Gateshead.
4. The Board received an update in January 2020 giving an overview of the proposed strategy, how it had been developed, an update on engagement to date and asking for feedback on the draft strategy itself.
5. Board members were asked to take the strategy back to their boards for sign-off.
6. The strategy has been taken to Gateshead Council's Cabinet meeting on 25 February 2020 for recommendation onto Council in March 2020.

Proposal

7. The vision of the new strategy is; "Good jobs, homes, health and friends".
8. The focus of the new strategy is based upon the policy objectives from the Marmot framework "Fair Society, Healthy Lives" focusing on health inequalities. This builds on the issues identified from the 2017 DPH annual report – "*Inequalities: it never rains but it pours*"
9. The strategy has 6 policy objectives, with highest priority being given to the first objective:
 - A. Give every child the best start in life
 - B. Enable all children, young people and adults to maximise their capabilities and have control over their lives
 - C. Create fair employment and good work for all
 - D. Ensure a healthy standard of living for all

- E. Create and develop healthy and sustainable places and communities
- F. Strengthen the role and impact of ill health prevention.

Next steps and proposed timescale

- 10. The strategy requires approval by Full Council at their meeting in March 2020 to be adopted as part of the Council's policy framework.
- 11. A review of the membership of the Gateshead Health and Wellbeing Board is proposed to reflect the broader approach to health and well-being.
- 12. A review of the delivery mechanisms for the strategy, to ensure they are fit for purpose and sufficiently focussed on the evidence-based actions is also required.

Recommendations

- 13. The Health and Wellbeing Board is asked to endorse the proposed Gateshead Health and Wellbeing strategy.

For the following reasons:

- i. To ensure the Board is well placed to respond to the health and wellbeing needs of the borough, alongside taking action to tackle increasing health inequalities within Gateshead.
- ii. To ensure that the Council and Health and Wellbeing Board are well placed to meet their responsibilities as required by the Health & Social Care Act 2012 and associated regulations.

Contact: Alice Wiseman, Director of Public Health (0191) 4332777

Good jobs, homes, health and friends

“Why treat people and send them back to the conditions that made them sick?”





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Foreword

by the Leader of the Council

Reducing health and social inequalities is not just a matter of fairness and social justice. Inequalities are bad for everyone in society. In unequal countries; civic participation decreases, household debt rises, and child well-being is worse¹.

It is morally unacceptable that there is a direct link between lower social position and poorer health. In line with other parts of the UK, inequalities have started growing again in Gateshead.

In our economically advanced society, rising inequalities suggest that the right policies are not in place to make use of all available resources to guarantee a decent standard of living for everyone. In Gateshead, one in five children live in poverty. Last year over 7,800 people accessed foodbanks in Gateshead (including over 2,500 children), and over 3,000 people needed support and advice to prevent or deal with homelessness and insecure housing. We know from our local research that Universal Credit (welfare reform) is pushing local people into debt².



The country has had over ten years of austerity which has seen public sector funding continually reduced by central government – we have lost nearly half of our previous funding, the equivalent of £900 less to spend per year on every household in Gateshead. Austerity has resulted in a significantly reduced universal and preventative service offer which, combined with a growth in the older population alongside the local impact of welfare reform, has produced an increase in demand for more expensive crisis services.

The combination of austerity and increasing need has meant it has become ever more difficult for all services to respond with the help and support people require. Closing the inequality gap is a big challenge which will need us to look beyond ill health treatment and social care services so that the causes of illness, which are rooted in the wider social issues, can be dealt with.

Put simply, the most effective way of ensuring people have the best chance of thriving, and living an enjoyable life in good health, is to make sure they have a good start in life, a good education, a warm and loving home, access to good quality work and enough income to meet their needs.

In addition, a new challenge has emerged in the form of climate change caused by the greenhouse effect which prevents heat escaping into the atmosphere and leads to global warming. There is now widespread acceptance that human activity is responsible for negatively changing the environment in which we live. Urgent action is required, and Gateshead wants to lead by example. That is why on the 23 May 2019 Gateshead Council declared a climate emergency and why this strategy is different from the ones we have produced in the past, incorporating vital action on climate change. Some of the behaviour change necessary to address poverty and climate change is of equal importance to our health and wellbeing, for example, active and more sustainable travel, buying and growing locally, tackling fuel poverty.

Delivering this strategy will require a different approach based on fairness, human rights, justice, relationships and trust that will facilitate the circumstances that enable people to have the best opportunities in life. It will need us to focus our community development expertise to galvanise both the power and commitment of individuals, supporting communities to take greater control over what happens in their neighbourhoods, creating relationships, improving confidence and encouraging a greater sense of belonging.

This foundation is where our 'Gateshead Thrive' approach originated, and it has been critical to develop a Health and Wellbeing Strategy that supports the delivery of this ambition.

We want this strategy to set out where we focus our attention to reduce levels of inequality through altering the circumstances that lead to inequality. We want to prevent the ongoing cycle of disadvantage for future generations. As Sir Michael Marmot says; *'Why treat people and send them back to the conditions that made them sick?'*³.

This strategy is not going to be easy to deliver. It will require close collaboration between public sector organisations, our communities, the voluntary and community sector and local business. It needs to be driven by place-based approaches that are directed and influenced by local people. Within our powers, we are determined to make social rights real in Gateshead. We should not, and will not, accept anything less.

We know this will be challenging because it is complex, and it is not something that will be completed in one, five or even ten years. But if we all work together on this, fighting for a better future, we believe that Gateshead can be a place where everyone thrives.



Cllr Martin Gannon
Leader, Gateshead Council

¹ Picket, K. and Wilkinson, R. (2018) *The Inner Level*. Penguin Books

² Cheetham et al. (2019) *BMJ Open* <https://bmjopen.bmj.com/content/9/7/e029611>

³ Marmot M. (2015) *The Health Gap: The Challenge of an Unequal World*. London: Bloomsbury Publishing

Our Vision

Our vision for health and wellbeing in Gateshead:
'Good jobs, homes, health and friends.'

Our strategic approach, 'Making Gateshead a place where everyone thrives', commits us to these pledges.

We pledge to:

- Put people and families at the heart of everything we do
- Tackle inequality so people have a fair chance
- Support our communities to support themselves and each other
- Invest in our economy to provide sustainable opportunities for employment, innovation and growth across the borough
- Work together and fight for a better future for Gateshead

We want Gateshead to be a place where everyone thrives.



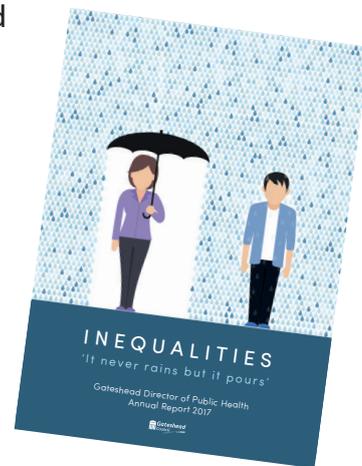
Our Current Position

[Our Gateshead Joint Strategic Needs Assessment](#) helps us to understand the key issues facing people in Gateshead. The ongoing challenges, and emerging issues, for health and wellbeing in Gateshead are set out by stage of life; Best start in life, Living well for longer and Ageing well.

We know that people in Gateshead experience significant health inequalities.

[The Director of Public Health Annual Report 2017-18 "Inequalities – 'it never rains but it pours'"](#)

focused specifically on this issue.

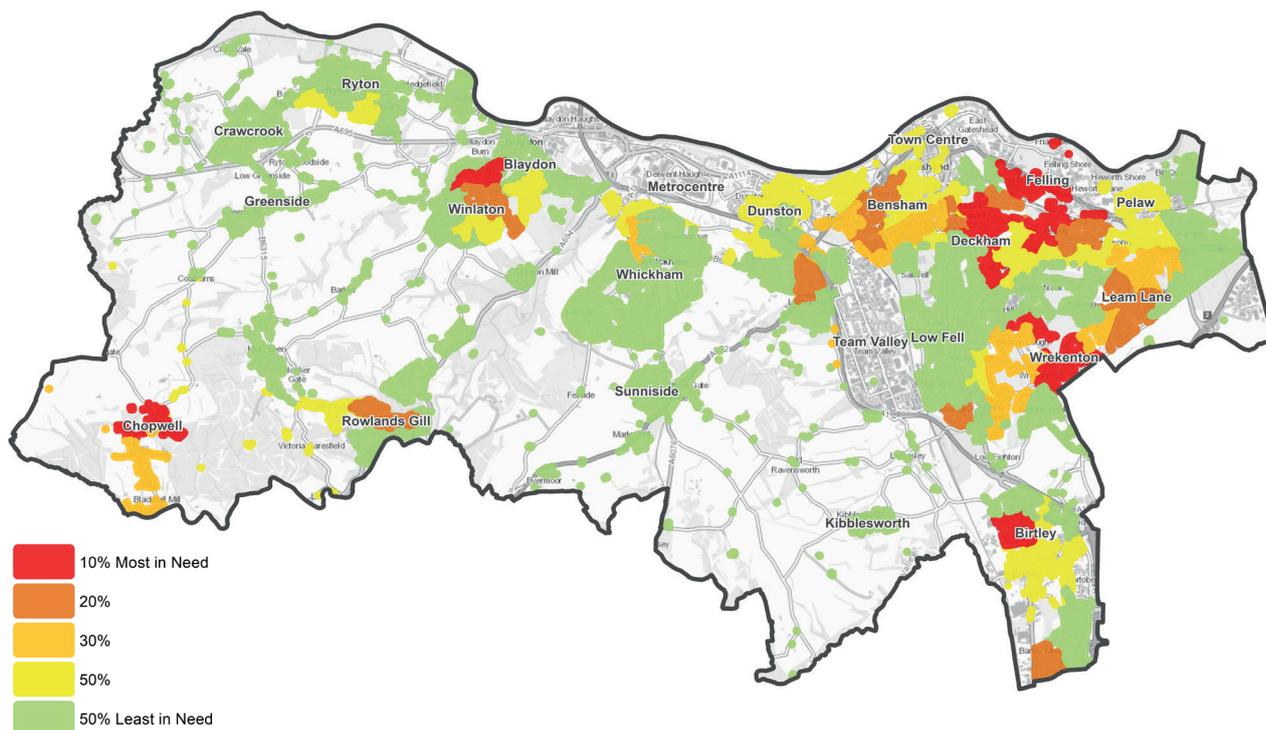


Two babies, born on this day in Gateshead, could have as much as a 10-year difference in life expectancy due entirely to the circumstances into which they are born.

If you look beyond Gateshead those same babies could have as much as a 15-year difference in life expectancy when compared to the most affluent area in Britain..

We have developed a Local Index of Need (LIoN) to identify geographically where our most vulnerable communities are within Gateshead, so that we can effectively target our resources.

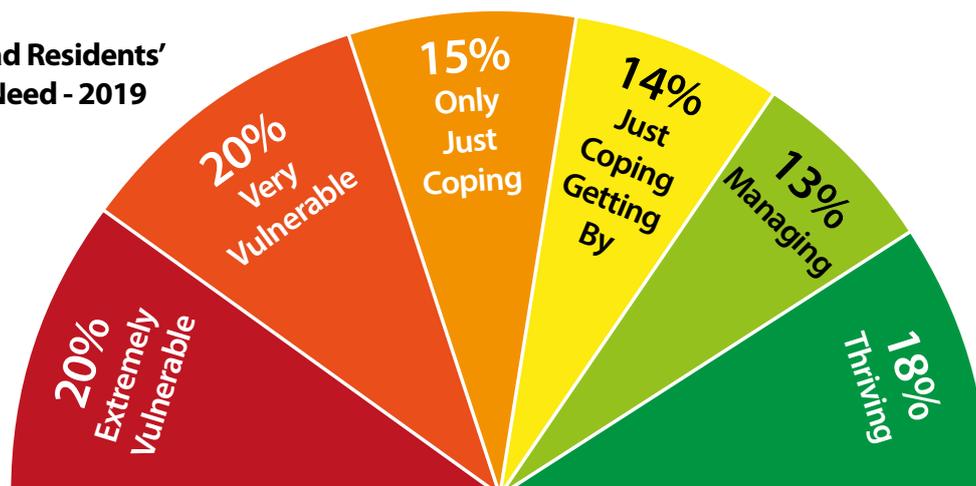
Overall Local Index of need (LIoN) 2019



Contains Ordnance Survey data © Crown copyright and database right 2020

From this we know that, during 2019, 40% were in vulnerable, or very vulnerable, situations with a further 29% just coping.

Gateshead Residents' Level of Need - 2019



We want to change this, to make Gateshead a place where fewer people need direct support and more people are thriving.

We want to help our communities not just survive, but to flourish, prosper and succeed. We are working differently, with partners, to achieve the right outcome for those people and families who require more care and support.

We have reviewed available evidence on the most effective way to achieve our ambitions. In response to our review, we have adopted the six policy objectives set out in the 'Marmot Review: Fair Society, Healthy Lives' (2010)⁴, as a framework to help deliver our vision of making Gateshead a place where everyone thrives.



The policy objectives are:

Give every child the best start in life

Enable all children, young people and adults to maximise their capabilities and have control over their lives

Create fair employment and good work for all

Ensure a healthy standard of living for all

Create and develop healthy and sustainable places and communities

Strengthen the role and impact of ill health prevention

⁴ Marmot, M (2010) Available at: <http://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review>

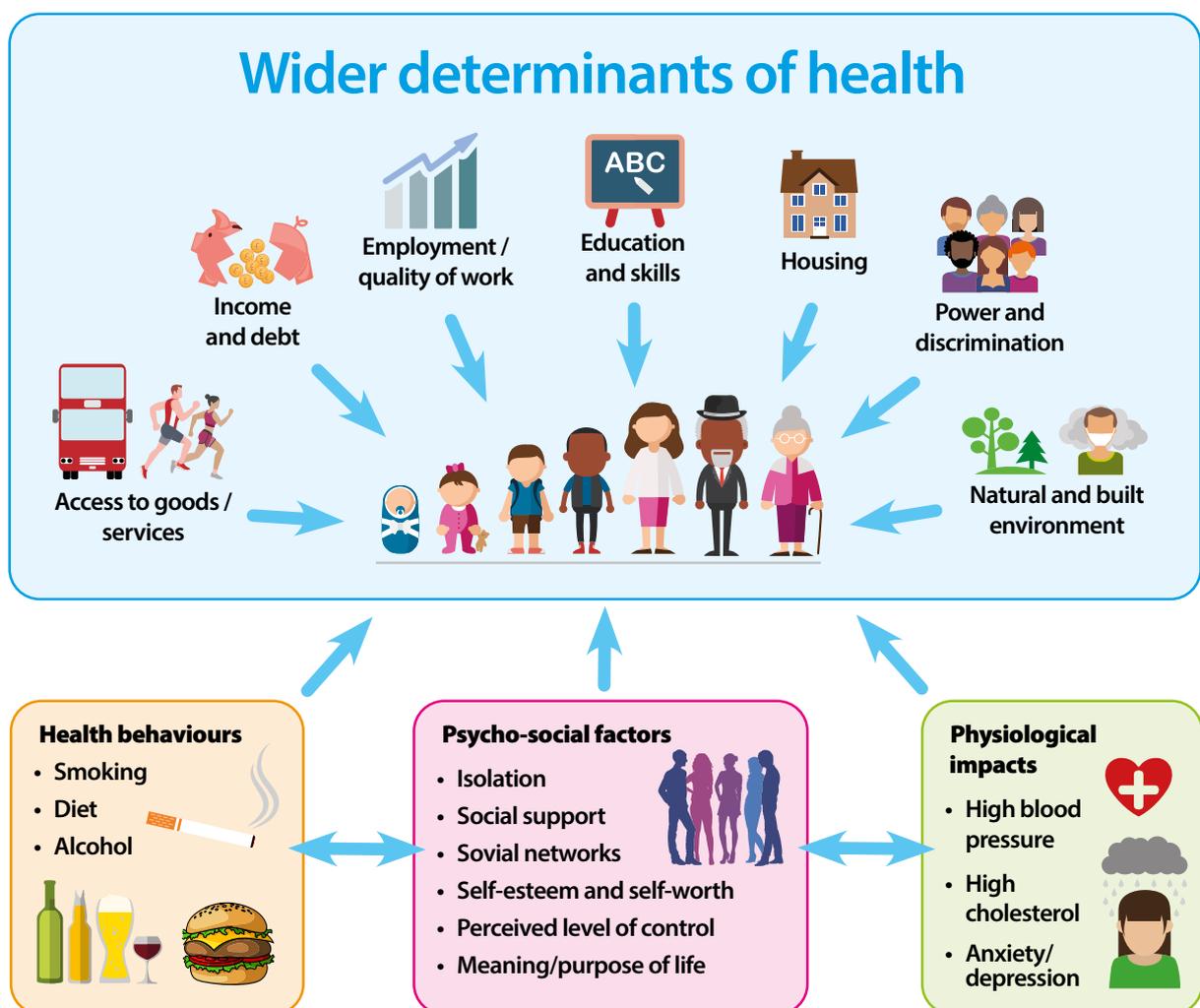
Our Approach

To achieve our vision, we know the importance of working together, across Gateshead, with communities, breaking down boundaries between organisations and services.

Our Strategy has been developed and agreed by our strategic partners. It will be delivered with the different organisations in the [Gateshead Health and Wellbeing Board](#).

Many underlying factors govern our health and well-being. They are rooted in the social, environmental and economic circumstances into which we are born and grow, the wider determinants of health. To effectively reduce health inequalities, we must understand these causes, so that we can see the opportunities for action.

The diagram below demonstrates the complexity of the issues which cause ill-health and allow inequalities to develop. It shows the different factors that impact our health, where they originate, and how they interact, multiply, and reinforce each other. At the centre of this are people and the communities in which they live. When viewed this way we can see that acting on single factors in isolation is likely to provide only a partial and incomplete response. Rather than acting on individual issues we recognise the need for a place-based approach.



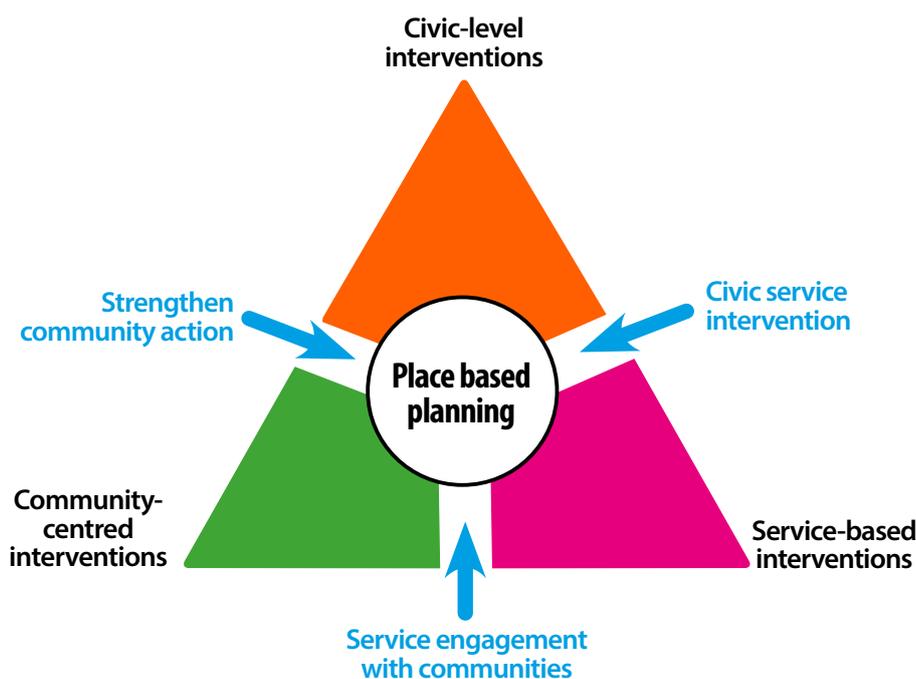
Our Health and Wellbeing Strategy recognises that to deliver improvements at a population level we will need comprehensive action across the whole system of community, civic, and service interventions. We accept that approaches which are multifaceted and complementary are more likely to be successful in reducing inequalities and helping people in Gateshead thrive.

We will develop methods which consider and address this complexity as a whole system. The Population Intervention Triangle⁵ below illustrates how the different elements required for a joined-up approach to treating a place fit together:

- Civic led interventions refer to a wide range of functions, across a range of public sector organisations, such as planning, broadband, water, housing, road infrastructure and schools
- Service-based interventions refer to the range of public services, for example the NHS
- Community centred interventions recognise the vital contribution that the community themselves make to health and wellbeing.

While each element makes an important contribution, when isolated from each other the impact is not as great as it could be. No one part is more important than any other, but the ambition must be to effectively combine these parts into a coordinated, multifaceted whole through place-based planning.

Population Intervention Triangle



We will use our Local Index of Need (LIoN) alongside conversations with local communities and professionals working with those communities, to help us understand the relative needs of different places and people. This will support us in identifying and developing appropriate interventions and where they would be best targeted within local communities.

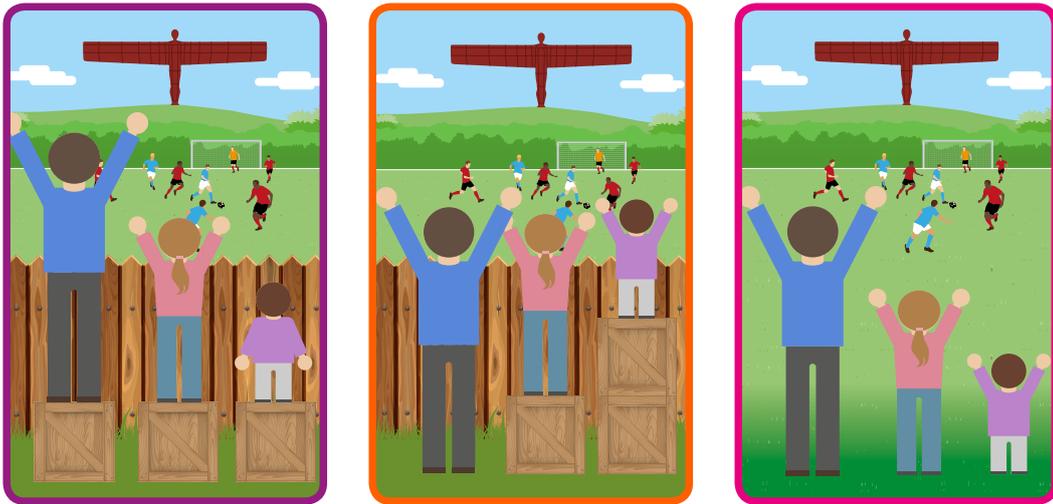
In addition to geographically defined communities we will also consider the needs of communities of interest and develop approaches which tackle health inequalities for these groups.

⁵ Bentley, C (2017) "Population Intervention Triangle Model" Available at PHE: <https://www.gov.uk/government/publications/health-inequalities-place-based-approaches-to-reduce-inequalities/place-based-approaches-for-reducing-health-inequalities-main-report>

Our Methodology

We aim to deliver the most positive outcomes for everyone, but we will focus our resources to benefit those in the most need – this will mean doing different things in different places.

We know we need to do more to address inequalities so we will prioritise the use of our collective resources to those communities in Gateshead that need us most. This is very different to how we have previously allocated resources based on equality (everyone getting the same).



Delivering on the identified aims require action across a much broader range of partners, strategies and structures. We recognise that there are already active workstreams which aim to address many of the actions required. This strategy will not replace existing work but instead acknowledge, connect, streamline and enhance current activity, within and between our partners and our communities. Each aim identifies the current ways in which actions are being delivered.

We recognise that many of the outcomes we aspire to deliver are enormously ambitious. However, we feel passionately that all Gateshead residents deserve to live in conditions that facilitate good health and wellbeing.

Our Aims

Give every child the best start in life, with a focus on conception to age two

Ensure a healthy standard of living for all, in accordance with international law on economic and social rights

Enable all children, young people and adults to maximise their capabilities and have control over their lives

Create and develop sustainable place and communities

Create the conditions for fair employment and good work for all

Strengthen the role and impact of ill health prevention

Give every child the best start in life, with a focus on conception to age two

The foundation for a healthy life starts in pregnancy and extends throughout childhood. To address inequalities, we need to reduce the differences in children's access to positive experiences in early life and eradicate adverse childhood experiences.

We know that many children and young people in Gateshead already have circumstances which enable them to have the best start in life. We understand there are some families, or communities, where additional pressures make the best start in life more difficult to achieve.

We know the importance of an environment that makes confident, resilient and positive parenting possible.

We will provide universal support to families in health and education. We will also deliver targeted support proportionately to meet health and social needs of different families.

We know that investing in interventions early on that support preschool development, is the most effective way of enhancing a child's long-term outcomes.

We also recognise the importance of transition points in children's lives. We will develop programmes to support key milestones.

The action we will take

We will:

- focus our efforts on supporting confident, positive and resilient parenting, to those who most need our support
- increase the focus of existing expenditure on early years to reduce inequalities in early development
- build the resilience and wellbeing of all children and young children
- make sure maternity services, parenting programmes, childcare and early year's education are of high quality and meet needs of all groups
- support our schools to deliver an effective curriculum that addresses the skills required for later life and supports emotional wellbeing
- develop a framework to support Gateshead as a child friendly place

We will deliver this through:

- Early Help Strategy
- Education Gateshead and Gateshead Schools
- Gateshead Safeguarding Children Partnership
- Children and Young People's Mental Health and Emotional Wellbeing Plan
- The Children's System Board
- Voice of the Child

We will know we have made a difference when:

- the circumstances which result in adverse childhood experiences are prevented
- parents can access support proportionate to meet their needs, to be the best parents they can
- all children start school ready to learn
- all permanent school exclusions are prevented

Enable all children, young people and adults to maximise their capabilities and have control over their lives

Without life skills and readiness for work, young people and adults will not be able to realise their full potential, to develop and take control over their lives.

We will strive to make sure that the emotional health and wellbeing of local people is a priority. Positive emotional health increases life expectancy, improves our quality of life, increases economic participation, improves educational attainment and facilitates positive social relationships.

We will make sure that all local people can contribute to and engage with the future of Gateshead.

The action we will take

We will:

- focus efforts on creating the conditions for people to enjoy positive emotional health and well-being. We will consider measures across the whole population alongside specific action in various settings e.g. the workplace, schools and opportunities for volunteering and social action
- prioritise our resources towards those groups and communities who are most in need
- ensure that the views and opinions of local people are represented in all aspects of our work through our democratic process and asset-based community development approaches
- focus on improving our residents' achievement in education and skills for life
- prioritise preventing and reducing the scale and impact of violence and domestic abuse giving everyone control of their lives.

We will deliver this through:

- The Mental Health and Well-being Network
- Our approaches to community development and democratic engagement
- Our Learning and Skills steering group
- Culture Strategy
- North East Strategic Economic Plan
- Local VCSE organisations and Connected Voice

We will know we have made a difference when:

- all young people are resilient, with good physical and mental health and wellbeing
- all young people are ready and appropriately skilled for the workplace
- Gateshead is a positive place in which everyone's mental health and wellbeing can flourish
- everyone is able to be an active part of their community
- all domestic abuse is prevented



Create the conditions for fair employment and good work for all

Being in good quality work is good for health and wellbeing.

We know that good quality employment is critical for people's health and wellbeing. The core attributes for good work to support a healthy life, are defined by the Health Foundation⁶ as; pay fairly and offer lasting security, ensure good working conditions, enable a good work life balance, and finally provide training and opportunities to progress.

We want to create the conditions for high quality employment for every Gateshead resident.

The action we will take

We will:

- help to create the conditions for local wealth and economic growth across Gateshead
- encourage local enterprise through self-employment and develop community led, cooperative employment opportunities
- support sustainable, diverse and flexible opportunities for employment, innovation and growth
- encourage volunteering and social action as a positive pathway to work
- encourage employers to create or adapt jobs, with flexible working patterns, that enable people to balance employment with personal commitments that support their wellbeing
- support employers to effectively promote physical and mental health and wellbeing at work
- support our local public sector to provide apprenticeships and employment
- review current ways of supporting people into employment, with consideration of those with different needs, who may be disadvantaged in the labour market

We will deliver this through:

- Gateshead's Local Plan
- Culture Strategy
- North East Joint Transport Plan
- Gateshead Goes Local, Community Led Local Development
- Community Wealth Building
- North East Strategic Economic Plan
- Local VCSE organisations and Connected Voice
- Procurement Strategy

We will know we have made a difference when:

- all working age residents have access to good quality, sustainable work with decent pay and conditions
- all people in low paid, low skilled jobs have opportunities to improve their skills base so they can more easily achieve personal progression and attain an improved standard of living

⁶ Williams, R (2018) "How is work good for our health?" Available at THF: <https://www.health.org.uk/infographic/how-is-work-good-for-our-health>

Ensure a healthy standard of living for all, in accordance with international law on economic and social rights

We know how important it is to give people the power to make the most of their money and their lives, to give people a fair chance and reduce the stress faced by people moving between benefit entitlements and work. An essential part of this is to tackle inequality so people of all ages have a fair chance and receive an income sufficient for healthy living.

Like most other countries around us, the UK has voluntarily subscribed to [international legal standards](#) that declare that everyone is entitled to an adequate standard of living, including healthy food and decent housing.

The action we will take

We will:

- commission and provide advice, information and guidance which is local and meets individuals needs
- promote the real living wage and agile and flexible working to employers
- maximise household income and improve financial skills to increase financial wellbeing across all age groups including pensioners
- encourage the availability of Credit Union facilities for all our communities
- support community-based initiatives and plural forms of ownership that aim to ensure a more sustainable community approach to living
- advocate for vulnerable people and communities to reduce differences in access to local services
- implement the socio-economic duty (Section 1 of the Equality Act 2010)

We will deliver this through:

- Tackling Poverty in Gateshead Board
- Gateshead Strategic partners
- Community wealth building
- North East Strategic Economic Plan
- VCSE networks including Connected Voice

We will know we have made a difference when:

- all working age residents receive a living wage that considers the true cost of healthy living
- individuals and families are supported to have the best possible financial wellbeing, to access debt and social welfare advice, to maximise household income and improve financial management skills
- affordable childcare is accessible to those who need it



Create and develop sustainable places and communities

Our health and wellbeing is influenced by where we live and the communities and homes we live in. Our understanding of the impact of climate change, air pollution, housing and active forms of travel, is improving rapidly. The environment, 'our place', is a major determinant of health, thought to account for almost 20% of all deaths in Europe⁷. Using place-shaping approaches, our vision is that by 2030 Gateshead will be a more prosperous, attractive and sustainable place to live with improved quality of life and thriving communities.

The action we will take

We will:

- develop policies, with health impact assessment embedded, to reduce the scale and impact of climate change and health inequalities
- support the development of quality community activities, prioritising neighbourhoods with greatest need, remove barriers to community participation and support people to be involved locally
- promote community cohesion and the prevention of crime and anti-social behaviour
- ensure all communities are able to access and benefit from the natural environment
- actively support measures that deliver clean air and environmental improvements, including energy efficiency
- ensure provision of homes at the right number, type, quality and affordability, and choice of tenure, to meet the current and future needs of all residents
- make Gateshead accessible to all, achieving a shift to sustainable forms of travel

We will deliver this through:

- Gateshead's Local Plan
- Gateshead Community Safety Partnership
- Economic, Housing and Procurement Strategies
- North East Joint Transport Plan
- The Gateshead Housing Company
- Local VCSE organisations and Connected Voice

We know we will have made a difference when:

- local communities and social networks are strong
- social connections are improved for groups in need
- all residents have access to a high quality, affordable, warm and energy efficient home
- all communities have access to good quality natural environment
- Gateshead has clean air with low levels of pollution
- Gateshead has low levels of crime and anti-social behaviour
- Gateshead is carbon neutral by 2030

⁷ <http://www.euro.who.int/en/health-topics/environment-and-health>

Strengthen the role and impact of ill health prevention

We know our health and care services are changing, and demand is increasing as our population gets older and technology advances. We must ensure that our services support everyone's needs. We will involve local communities and the voluntary and community sector in the planning of services to reflect local priorities and needs. We will integrate our health and care services whilst ensuring they are placed based and bespoke to the needs of individuals.

Our health and care system will measure success in terms of improved wellbeing, independence and social connections. We will try to move existing resources away from expensive acute care provision, so we can reinvest in prevention and early intervention measures. We will keep people who need complex support, living at, or near, home, to have the support of their family and community.

The action we will take

We will:

- prioritise funding for the prevention of ill-health and high cost intervention at all levels
- embed the local VCSE organisations in ill health prevention, planning and delivery
- integrate how we plan, make decisions and provide health, social care and housing, to respond to needs where people live
- prevent homelessness and better understand its root causes and how we address them
- ensure that no-one is living in unhealthy or unsafe accommodation
- reduce the scale and impact of substance misuse (alcohol, tobacco and drugs)
- adopt a system-wide Make Every Contact Count approach
- monitor the health of people in Gateshead together with our partners through shared long-term measures
- design how we work, and what we do, together across Gateshead, to recognise and facilitate effective social prescribing approaches

We will deliver this through:

- Gateshead Health and Care System Board
- Integrated planning, performance and commissioning plan
- Public service reform
- Gateshead Housing Company
- Homelessness and Rough Sleeping strategy
- Local VCSE organisations and Connected Voice
- Gateshead Smoke free, Healthy Weight and Substance Misuse Alliances
- Procurement Strategy

We know we will have made a difference when:

- all preventable ill health in Gateshead is reduced, to end the gap in inequalities within the borough
- no one will be homeless, or living in accommodation that does not provide a safe and healthy environment
- all residents will be able to access flexible health and care support, when and where they need it

For more information please contact:

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TITLE OF REPORT: **Integrated Care Partnership (ICP) Suicide Prevention Developments**

Purpose of the Report

1.1 The purpose of this report is to provide an update to the Gateshead Health and Wellbeing Board on the Public Mental Health approach to Suicide Prevention planning across Northumberland Tyne and Wear and outline the positive benefits for Gateshead from this partnership approach.

Background

2.1 Suicide prevention policy in the UK has, in recent decades, developed and expanded considerably as concerns around suicide rates have intensified. In 2012 the Government launched their integrated Government strategy “Preventing Suicide in England: a cross-government outcomes strategy to save lives”.¹ Since 2017 it has included a commitment to reduce the rate of suicides by 10% in 2020/21 nationally, as compared to 2016/17 levels.²

2.2 Since 2012-2014 suicide rates per 100,000 of the population nationally have been showing a downward trend. In 2015-2017 the rate for all persons in England was 9.6 deaths per 100,000 population, which is one of the lowest rates observed since the suicide data series began in 1981. However, findings for 2016-2018, released in October 2019, identify a slight increase in Males, up from 14.7 deaths per 100,000 population to 14.9 per 100,000.

2.3 Suicide is the leading cause of death among young people aged 20-34 years in the UK and it is considerably higher in men, with around three times as many men dying as a result of suicide compared to women. It is the leading cause of death for men under 50 in the UK. Those at highest risk are men aged between 40 and 44 years who have a rate of 24.1 deaths per 100,000 population.³

2.4 Gateshead has lower than Regional rates of Suicide and similar rates to England.

¹ Preventing Suicide in England: a cross-government outcomes strategy to save lives.

² Briefing Paper Number CBP 08221: Suicide Prevention: Policy and Strategy: House of Commons Library: 10 September 2018

³ Office for National Statistics (2017). Suicides in the UK: 2016 registrations. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarri...> [Accessed on 21/08/18].

- 2.5 Suicide rates in Gateshead had increased from 2010 – 2012 up until the reporting period of 2015 – 17 when there was a plateau for All Persons and a decrease for Women. The latest data release ⁴(October 2019) of 2016 - 2018 shows a positive downward pattern with rates per 100,000 population falling for the three categories; Persons, Males and Females (See **Appendix 1**).
- 2.6 In October 2018, the Public Mental Health Leads from Gateshead and Newcastle, attended the Integrated Care System (ICS) Zero Suicide Ambition Steering group. (one of the seven workstreams of the ICS Mental Health group). During this meeting Wave 2 NHS England Transformation Funding was discussed and the North ICP (Geography covering; Northumberland, Newcastle, North Tyneside, Gateshead, South Tyneside and Sunderland) was eligible to apply.
- 2.7 Part of the eligibility for funding was the existence and functioning of a multi-agency suicide prevention partnership. As Gateshead and Newcastle City Councils were represented at the meeting from the ICP locality, both Public Mental Health Leads agreed to take on the role of joint chairs and reform the former Northumberland, Tyne and Wear Suicide Prevention Partnership.

Progress to date

- 3.1. The first meeting of the partnership was convened on 14th December 2018 at Gateshead Civic Centre. Terms of Reference were developed alongside an Action Plan, detailing priority areas for funding identified by the group. The North ICP benefitted from the South ICP (Durham and Teesside) having successfully applied for Wave 1 funding and so had peer support to guide the developments. A number of workstreams were then identified including workstream leads to progress each area of work.

- 3.2. The bid was submitted at the end of March 2019 and confirmation of funding given in July/ August 2019.

- 3.3. Workstream updates:

3.3.1. Recruitment

- Suicide Prevention Coordinator recruited (Monday 7 October 2019). Post is hosted by Northumbria Police and jointly managed by Police and the two public health mental health leads. The post oversees the delivery of the Transformation Funding Action Plan and other areas for development around Suicide Prevention at the ICP geography.
- Suicide Prevention Data Analyst recruited (08/11/2019). Post is hosted and managed by Newcastle City Council Public Health team. This post is developing the real time data surveillance system.

3.3.2. Real time data surveillance system

- Discussions have been held around the process for a Real time data surveillance system so that suicide data can be collated in real time. The proposed data surveillance system can be found in **Appendix 2**. The

⁴ <http://fingertips.phe.org.uk/search/suicide>

decision taken to adapt this model was influenced by a review of the County Durham Early Alert system which identified areas for improvement in their current model. This model follows a population-based approach as opposed to individual case reviews.

3.3.3. Postvention support

- If U Care Share have been commissioned across Northumberland, Tyne and Wear, to provide bereavement support for family, friends and colleagues of those bereaved by suicide. This has been secured through additional Postvention funding made available by NHS England and topped up through CCG funding. Newcastle & Gateshead CCG are leading on this work.
- Postvention support offer will be a police led process; through the completion of the CID27 form, and then establishing the needs of the families and friends at the point of the First Response. Training will be facilitated by the Suicide Prevention Coordinator who will work with If U Care Share and the Police to establish training programme for First Responders.
- If the bereaved / Next of Kin refuses Postvention support at the time of first response, the Suicide Coordinator will follow up in a set timescale offering support.

3.3.4. Training Hub Development

South Tyneside Public Health Team have led the tendering process for a sub-regional Mental Health Training Hub. The training hub will provide Level 1, 2 & 3 training, and is based on Health Education England Competency framework for self-harm and suicide prevention.

The tender closed on the portal on Friday 17th January 2020. The provider will be notified January/February. It is anticipated that contracts will be signed, and the hub should be available by early April.

In the interim Suicide Prevention Coordinator to work with the Local Authorities to begin to identify the training needs in their areas.

3.3.5 Developing Safer Communities (Football Club development)

Newcastle United Foundation and Sunderland Foundations have been commissioned to develop a joint campaign rolling out the BeAGamechanger campaign.

#BeAGameChanger is a social marketing campaign using the power of Football in the North East as a vehicle for engaging men in conversations around mental health. This is achieved using a population-based approach to promote good mental health and reduce ill health. The aim of the campaign is to promote conversations about emotions and low mood to help improve mental health, and encourage help seeking behaviour where appropriate. Predominant target audiences are men under the age of 50. Using a range of mediums including social media platforms and podcast; traditional press (newspapers, radio, TV); match day activity; community

and workplace events, and a dedicated #BeAGameChanger webpage to encourage men to talk openly about mental health.

3.3.6. Small Grants programme

The panel for the grassroots projects was held in early December 2019. Out of a total of 60 applications, 20 were funded across the North ICP.

It is anticipated that those projects will have a very positive impact on the community. Projects included: podcasts for a radio station; a peer support group for me; a counselling service for visually impaired people; a forest school; a peace garden for veterans; a mental health resilience and intervention hub; a one off community event to help raise awareness of suicide prevention and to reduce the stigma around mental health and a weekend residential for autistic learners.

In the applications organisations were asked to provide details of how they would evaluate their projects. This included case studies from participants.

A meeting was held on 28th January 2020 to go through the contract the organisations will be required to sign, as well the evaluation process.

3.3.7. Self-Harm

Work around Self-Harm is still progressing after initial ideas tabled at Steering Group, around a Safety Planning Train the Trainer proposal, were deemed to be inappropriate use of the funding as this was already part of commissioned core business of the partners who were proposing the work and that the funding should be used to add value.

A decision was taken to review where we were going with this intervention and the Suicide Coordinator is pulling together a group to develop the work.

Next Steps

The next steps for the Steering Group will be:

- 4.1. **Development of an Action Plan for 2020/2021 and 2021/2022 funding.** The work programme outlined above will be reviewed / evaluated and decisions taken on the focus of the work for 2020/2021 with longer term thinking for 2021/2022.
- 4.2. **Development of a Logic Model to guide the Evaluation of the full programme.** Although evaluation has been built in to certain aspects of the delivery a Logic Model will provide a comprehensive approach to monitoring success of the programme.

4.3. **Review the Real Time data Alert system and Postvention support.** The system was developed to enable data to be available at the time of the incidents to enable action on data capture and support for people affected by the suicides. This will be reviewed and amended as necessary to help identification of prevention efforts.

4.4. **Continue working on preventative programmes in the wider community**. Work has already started on developing safer communities through the introduction of a small grants scheme, the commissioning of BeAGameChanger and other initiatives and this preventative work will continue to be the focus of the group.

4.5. **Sustainability of the work.** Look towards sustainability of the model from 2022/2023.

Recommendations

5. It is recommended that the HWB Board:

- Note the progress on the continuing development of Suicide Prevention work at Northumberland, Tyne & Wear level.
- Note and support the planned next steps in developing this work at Northumberland, Tyne & Wear level;
- Note the benefits to Gateshead residents of working at this level.
- Receive an update report in 6 months time.

For consideration

The Gateshead Health and Wellbeing Board are asked for comments on the contents and the progress made to date, including the added value for the Gateshead area.

Contact: Alice Wiseman, Director of Public Health. Telephone (0191) 4332777
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1. Department of Health (2012): Preventing Suicide in England: A Cross Government Outcomes Strategy to Save Lives: London
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2. Briefing Paper Number CBP 08221: Suicide Prevention: Policy and Strategy: House of Commons Library: 10 September 2018
3. Office for National Statistics (2017). Suicides in the UK: 2016 registrations. Available at:
<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarri...>
[Accessed on 21/08/18].
4. Public Health England Fingertips Suicide Prevention Profile
<https://fingertips.phe.org.uk/profile-group/mental-health/profile/suicide>

Appendix 1 - Figure 1, 2 & 3: PHE Fingertips data

Suicide age-standardised rate for persons 15+ years: per 100,000 (3-year average)
Gateshead V's National and Regional data.

Figure 1 - Gateshead Suicide trends 2001 – 2018 (All Persons)

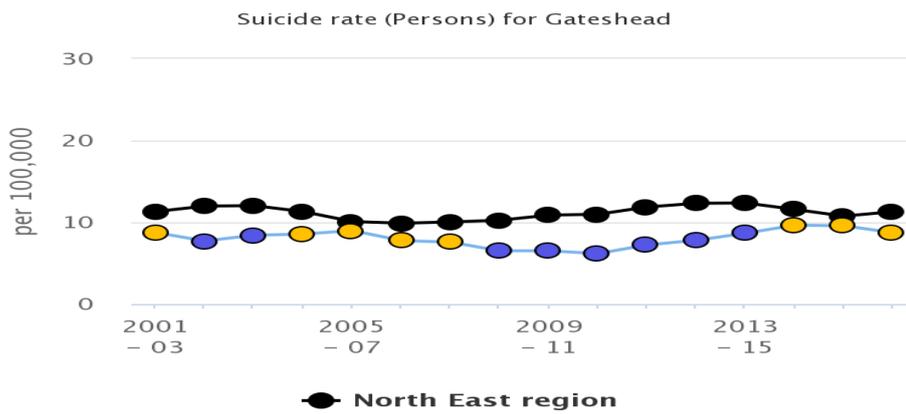


Figure 2 - Gateshead Suicide trends 2001 – 2018 (Male)

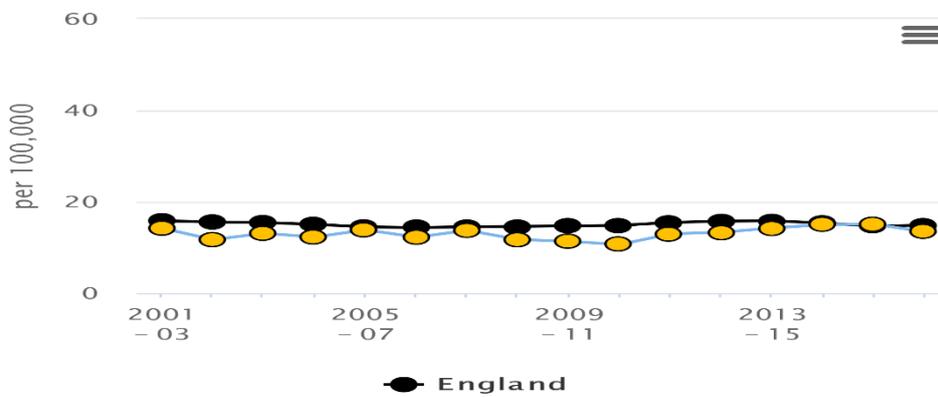
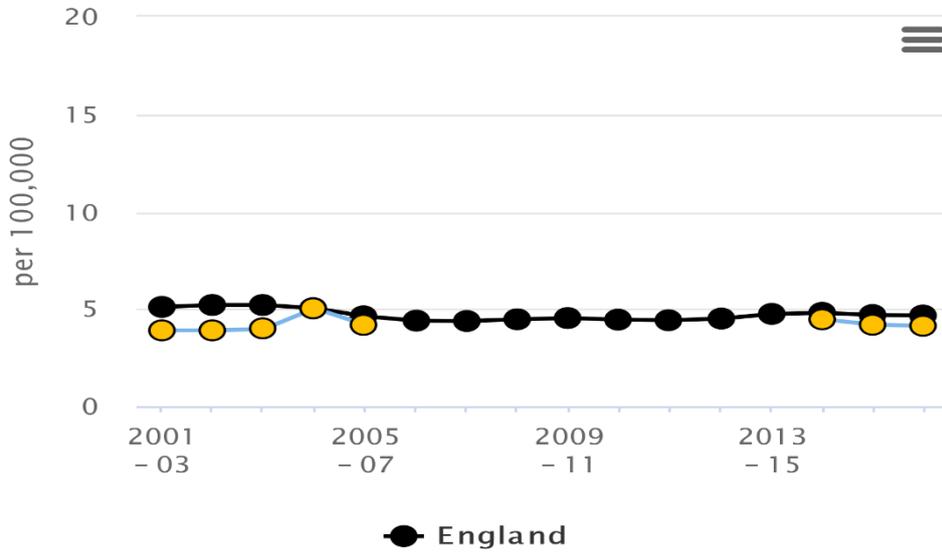


Figure 3 - Gateshead Suicide trends 2001 – 2018 (Female)



Appendix 2 - Northern Sub-regional Suicide Prevention Group's Real Time Surveillance System

See attached sheet



Northern Sub-regional Suicide Prevention Group's Real Time Surveillance System

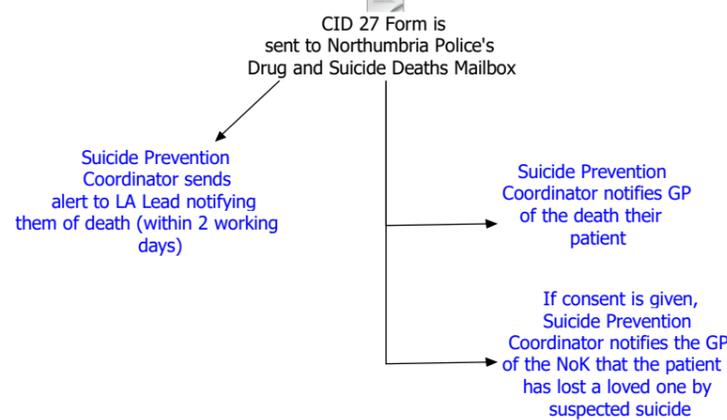
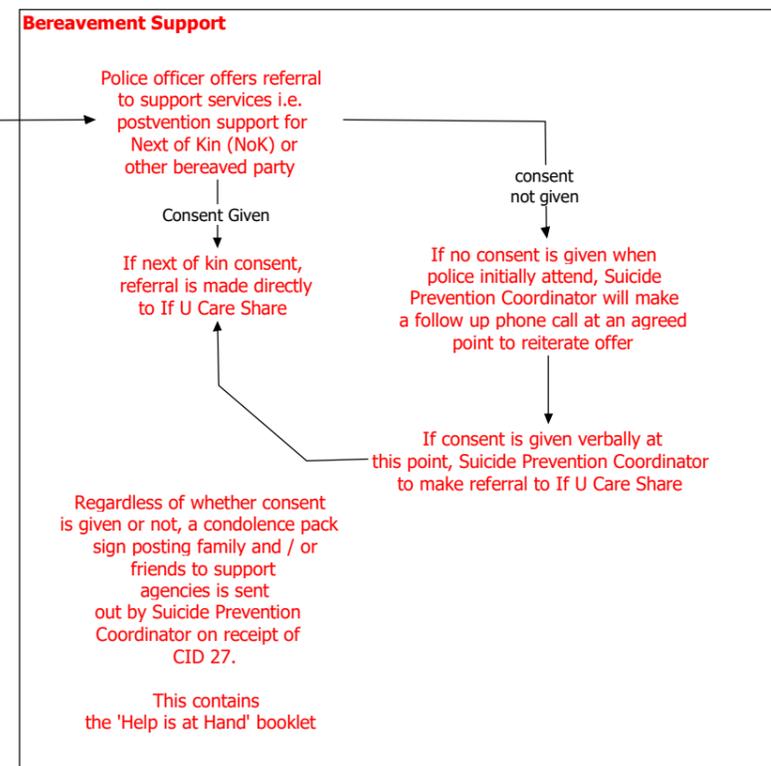
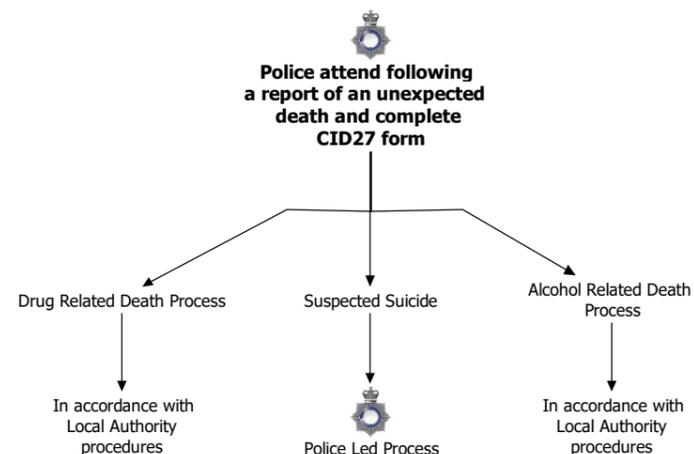
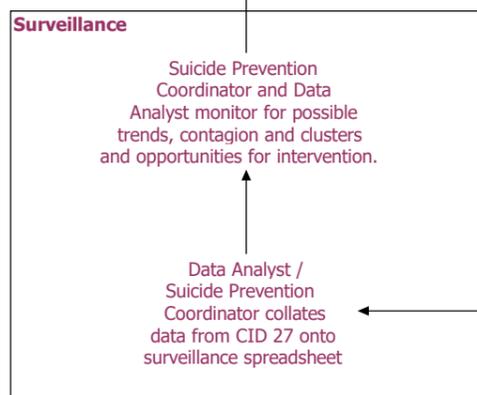
Establish a Single Point of Contact to Work with media in order to ensure sensitive reporting and to facilitate prevention

Further identify groups and individuals requiring bereavement support, i.e. network analysis

Identify vulnerable groups and individuals and target prevention measures.
Establish whole population wellbeing and suicide prevention awareness.

Establish monitoring and review processes

If a cluster is identified, a Suicide Cluster Response Group should be convened to;



From PHE Suicide Prevention; Identifying and Responding to Suicide Clusters and Contagion: a Practice Resource (September 2019)

Key Components of a Cluster Response Plan

- surveillance – to identify and monitor occurrence of suicidal acts
- information sharing – between relevant agencies to ensure consistency of response
- media issues – to ensure responsible reporting
- bereavement support – to help those bereaved and affected by suicide
- prevention – to reduce risk of further suicides
- monitoring and review – to assess the impact of the response, what has been learned and to inform future plans

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