

**GATESHEAD METROPOLITAN BOROUGH COUNCIL**  
**CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE**  
**MEETING**

**Tuesday, 20 June 2017**

**PRESENT:** Councillor S Green (Chair)

Councillor(s): N Weatherley, M Charlton, B Goldsworthy,  
M Goldsworthy, M Hood, R Mullen, J Simpson, J Wallace,  
A Wheeler, D Bradford and J Lee

**APOLOGIES:** Councillor(s): C Bradley, I Patterson and M Hall

**CHW45 MINUTES OF LAST MEETING**

RESOLVED – That the minutes of the meeting held on 25 April 2017 were approved as a correct record.

**CHW46 MINUTES OF QUALITY ACCOUNTS MEETING**

RESOLVED - That the minutes of the Quality Accounts meeting held on 18 May 2017 were agreed as a true record.

**CHW47 CONSTITUTION**

The Constitution of the Committee and the appointment of the Chair and Vice Chair for the 2017/18 municipal year, as approved by the Council at its meeting on 12 May 2017, was noted.

RESOLVED - that the information be noted.

**CHW48 ROLE AND REMIT**

The role of the Committee and the powers delegated to it were reported.

RESOLVED - that the information be noted.

**CHW49 DECIDING TOGETHER, DELIVERING TOGETHER - PROGRESS UPDATE**

The Committee received a report and verbal update from Ian Renwick, Chief Executive of Gateshead Health NHS Foundation Trust and Julie Ross, Director of Integration across the health and care partners in Newcastle and Gateshead.

The report identified the increased scope of the Deciding Together, Delivering Together programme to include older people's mental health services delivered by

Gateshead Health Trust in addition to social care and voluntary sector services. (The original programme was limited to Northumberland Tyne and Wear Mental Health Trust services only).

The Committee were updated about the Deciding Together process, which was led by the CCG, and involved asking people who use mental health services, their families, carers, mental health professionals and service providers for their views on improving the way specialist adult mental health services are arranged in Gateshead and Newcastle; it culminated in a listening exercise held during winter 2014/15 was published in April 2015.

The Committee were reminded that in March 2016, a joint scrutiny meeting between Newcastle and Gateshead considered the findings. In June 2016, the CCG governing body considered the findings of the Deciding Together process and the public consultation and made its decision about the future of the services.

Following the CCG decision work began to understand how to best implement the decision and on 1 February 2017, a stakeholder workshop was held to identify those next steps. The workshop group in February 2017 proposed to work in a collaborative way to redesign the pathways for adults and older people in Newcastle and Gateshead who have urgent (in its broader sense) and more complicated/intense mental health needs by December 2017.

The redesign work will cover all adult and older peoples mental health services in Gateshead and Newcastle; this recognises that the Deciding Together scope was limited to NTW provided services and that was not sufficiently broad to redesign services to meet the mental health needs of the population. The increased scope therefore means covering the Gateshead and Newcastle provision of:

- All NTW provided adult and older people's services
- Gateshead health provided older people's mental health services (new to scope)
- Third sector services, community and voluntary service services (new to scope)
- Social care services (new to scope)

Work is now underway to design the community based adult and older people's mental health services in both Gateshead and Newcastle.

The scope of the work covers the following:

- Gateshead and Newcastle localities
- NTW provided adult and older people's services
- Older people's mental health services in Gateshead
- Third sector mental health services, and the wider community and voluntary sector
- Social care and other local authority services
- Interface with GP services
- Interface with employment and housing

Two stakeholder events will be held in July and then four week long workshops during September and October, which the Vice Chair, Councillor Marilyn Charlton will attend on behalf of the OSC.

The Mental Health Programme Board, which comprises a range of service users, carers and small providers as well as the larger statutory bodies, is providing advice on how best to engage with the wider community through the process. Three interlinked work programmes have also been established to assist in the process:-

- Resources review group
- Stakeholder views group, and
- Design group (to include design community services and design inpatient delivery)

The Committee were advised that regular updates will be provided and NTW will be asked to attend a future meeting of the OSC to provide an update on their stream of work.

The Chair thanked Ian and Julie and offered any support necessary from members of the Committee in working together.

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| RESOLVED | i) That the information be noted                               |
|          | ii) That regular updates be provided to Committee              |
|          | iii) That NTW be invited to attend a future meeting of the OSC |

## **CHW50 THE COUNCIL PLAN - YEAR END ASSESSMENT OF PERFORMANCE AND DELIVERY 2016/17**

The Committee received a report and presentation on the year end assessment of performance for 2016/17, which also provided an update on the performance and delivery of the Council Plan 2015-2020.

Targets for 2020 were set out as part of the Council's Performance Management Framework, for the period 2015/2016 to 2019/2020 to enable performance to be monitored to ensure continuous improvement. These targets were subsequently approved by Cabinet on 12 July 2016.

The Committee wished to congratulate the teams involved in compiling the report, and wished to request that further work/lobbying be undertaken on the licensing system, on the back of the success in developing the hot food takeaway challenge for planning applications, which has been subsequently challenged and upheld twice.

The Committee also requested that future reports include comparison tables to other local authorities in the Tyne and Wear area and not just Gateshead and that a

further update be provided in the next report on the targets for bed-blocking.

The Committee also wished to note that they were very concerned about the increase in excess weight among year 6 children.

- RESOLVED -
- i) The Committee agreed that the activities undertaken at year end 2016/17 were achieving the desired outcomes in the Council Plan 2015-2020.
  - ii) Agreed for further updates to be presented in due course on the areas highlighted
  - iii) Agreed that the report be referred to Cabinet on 18 July with the recommendations from the OSC for their consideration.

## **CHW51 WORK TO ADDRESS THE HARMS CAUSED BY TOBACCO - SCOPING REPORT**

The Committee have agreed that the focus of its review in 2017-18 will be work to address the harms caused by tobacco.

During the course of the review it is proposed that the Committee will consider how tobacco use in Gateshead impacts negatively upon physical and mental wellbeing, its impact upon the local health and social care economy, and its role in perpetrating poverty and inequalities within and between generations.

The review will provide an overview of current activity to reduce harms caused by tobacco in Gateshead compared to best national and/or international practice, where such practice exists.

Currently, about 17.9% of adults in Gateshead smoke, compared to an English average of 16.9%. This is around 29 485 people. Around 12.4% of 15 year olds in Gateshead smoke, around 280 young people. Nearly 500 Gateshead residents every year will die from smoking related diseases.

Activity that reduced harm caused by tobacco can be thought of in terms of four main sets of activities:

- Stopping people starting smoking
- Helping people stopping smoking
- Reducing exposure to second hand smoke
- Tobacco control (i.e. Enforcement of legislation round the sale of tobacco)

At a population level, making tobacco use the exception rather than the norm (the “denormalisation” of tobacco use) can be seen as central to all of the above

It is proposed that the above is considered in the context of:

- Higher than average levels of smoking in Gateshead Council

- The fact that smoking remains the single cause of most preventable illness and death in Gateshead
- Significant inequalities in the prevalence of smoking between different groups and areas
- Reducing demand for stop smoking services
- Particularly low levels of take up of stop smoking services amongst some groups i.e. people from black, Asian and minority ethnic groups
- Pressure of Public Health budgets now and in the future and opportunities for future savings to primary and secondary care costs from prevention activity

The process and timescale for the review was presented to the Committee. It is proposed that the review will take place over an eleven month period from 20 June 2017 to 17 April 2018. It will involve the presentation of expert evidence, research and site visits.

The Committee were advised that the first evidence gathering session will provide a detailed overview of those harms arising in Gateshead due to tobacco use. Information will be presented at the most local levels possible to provide members with insight into inequalities arising from tobacco use across Gateshead, and how tobacco harms impact upon individual wards. Subsequent evidence gathering sessions will include presentations from internal services, external organisations and experts in their respective disciplines.

Evidence will be sought from Gateshead Public Health Team, Development and Public Protection, the Newcastle and Gateshead Clinical Commissioning Group, Gateshead Hospitals NHS Foundation Trust, Northumbria Tyne and Wear NHS Foundation Trust, Gateshead Advice Centre, Public Health England, Fresh North East, Action on Smoking and Health (ASH) and leading academics and clinicians.

The Committee requested as part of the review that the effects of second hand smoke be investigated as well as the increased use and effects caused by vaping.

- RESOLVED -
- i) That the information be noted
  - ii) That the scope, process and timescale as set out in the report be agreed

## **CHW52 MENTAL CAPACITY ACT (MCA) & DEPRIVATION OF LIBERTY SAFEGUARDS (DOLS)**

The Committee received a report providing an overview with regards to the Mental Capacity Act/Deprivation of Liberty Safeguards and also an overview of legal compliance to date, as well as an update on future direction.

The Committee were advised that the Council as supervisory body has remained legally compliant with the Supreme Court judgement, ensuring that local citizens continue to receive legal protection as and when required despite the figures showing increase to demand, and the resource challenge this has brought.

Nationally; official figures show 15-16 had the highest increase to the number of

DoLS applications to date at 195,840, 30% higher than 14-15, and significantly higher than 13,700 in 13-14. The increase, plus the overly technical and bureaucratic processes involved have given weight to the compelling case that DoLS needed to be overhauled. An initial consultation paper by the Law Commission confirmed DoLS was in crisis, and the existing system should be repealed and a new scheme introduced.

The Committee were advised that a Draft Bill has been introduced in March 2017 with the recommendations to replace the existing DoLS scheme. This scheme is known as the "Liberty Protection Safeguards". The Draft Bill will also amend some of the Mental Capacity Act to continue to provide increased protections within the Human Rights Framework.

The recommended scheme serves the same essential purpose as the existing DoLS; however, the new scheme has removed the features of DoLS which were felt as being inefficient and actively detrimental.

The next step will be for the Department of Health to respond to the Law Commission's recommendations which will happen in the next 12 months. It is widely believed that these changes will take some time to come into effect therefore unlikely to see significant changes within two/four years.

- RESOLVED -
- i) That the information be noted
  - ii) That the Committee agreed to receive updates on actions and progress in relation to OSC workplan

**Chair.....**