

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

Tuesday, 5 December 2017

PRESENT: Councillor S Green (Chair)

Councillor(s): N Weatherley, M Charlton, C Bradley, W Dick,
K Ferdinand, B Goldsworthy, M Goldsworthy, M Hood,
P Maughan, J Wallace, D Bradford and M Hall

APOLOGIES: Councillor(s): R Mullen, I Patterson, J Simpson, A Wheeler
and J Lee

CHW68 MINUTES OF LAST MEETING

RESOLVED – that the minutes of the last meeting held on 31 October 2017 were approved as a correct record.

CHW69 THE COUNCIL PLAN - SIX MONTHLY ASSESSMENT OF PERFORMANCE AND DELIVERY

The OSC received a reported which provided the six month update of performance and delivery for the period April to September 2017 in relation to the Council Plan 2015-2020 for the indicators and activity linked to care, health and wellbeing delivered and overseen by Adult Social Care and Public Health services within Care, Wellbeing and Learning Group.

The OSC noted that of the 20 indicators monitored in this report 11 had an updated position since the last report with 6 indicators showing an improvement. However, 4 of the indicators had not improved and these related to the proportion of people who were dissatisfied with life, when asked as part of the annual population survey (ONS), although this still remained better than the North East average. In addition, excess weight levels amongst year 6 children (10 to 11) have increased, as has the mortality rate from causes considered preventable. Mothers smoking status at the time of delivery has also increased on the previous year. One indicator has stayed the same since the last report and this is the proportion of BME carers assessed or reviewed by social services and this remains at 0.8 %.

The OSC received an update from the Portfolio Holder for Adult Social Care and was advised that key pieces of work over the last twelve months had been the creation of a social care business plan and work to promote independence, including the use of personal budgets to enable people to remain in their own homes as well as work to develop a centre of excellence. The OSC was also advised that the aim

was to have a new Director of Commissioning post in place by early spring.

The OSC congratulated the Portfolio Holder for Adult Social Care on the work being done in relation to some of the Council's Care Homes and the care provided via the Domiciliary Care Service.

The OSC queried whether the work around the Domiciliary Care Service would require some initial outlay at the start and was advised by the Portfolio Holder for Adult Social Care that this would be the case. The OSC also queried whether unannounced visits to Care Homes still took place and it was confirmed that this was the case to ensure compliance with Care Home standards. The Portfolio Holder for Adult Social Care informed the OSC that there were significant challenges in relation to the stability of the market for care home providers and domiciliary care and this is why the Council has retained its in house Domiciliary Care Team.

The OSC queried whether there would be any value in the OSC visiting some of the Care Homes and was informed that it would be useful for the OSC to visit Care Homes such as Shadon House which is nationally recognised for its Dementia Care but this would need to be done in small groups.

The OSC noted that information had been highlighted about care homes in other localities having to go into liquidation and the OSC queried whether there any Gateshead residents likely to be affected by some of these closures. The OSC was advised that Gateshead residents should not be affected as the organisations involved were not big providers in Gateshead.

The Portfolio Holder for Adult Social Care advised that one of the reasons for retaining the in house team was to ensure that where there are issues in Gateshead Care Homes the in house team can provide appropriate support.

The OSC thanked the Portfolio Holder for Adult Social Care for the update and indicated support for the approach to support independence and keeping people in their homes as long as possible and the retention and development of the in house domiciliary care team.

The OSC also received an update from the Portfolio Holder for Health and Wellbeing on the work being done as part of the Year of action on Tobacco, homelessness and complex needs, healthy weight across the life course and inequalities.

The OSC raised concerns that the NHS locally was not driving forward the issue of tackling smoking in hospitals forcefully enough as they were aware of examples where this was continuing on hospital premises. The OSC considered that smoking is an addiction and should be tackled in the same way as other areas such as alcohol misuse etc where action is targeted at addressing an addiction.

The OSC was advised that work is ongoing across the region amongst Directors of Public Health and via the STP Prevention Board to ask the NHS to step up and treat nicotine dependence in the same way as other addictions and they are asking the NHS to fund nicotine replacement therapy when people are in hospital.

The OSC queried who was involved in the Tobacco Alliance and was advised that there was involvement from the Council, Housing Company, voluntary sector and CCG. However, it was acknowledged that the membership needed to be expanded much more widely in order to drive forward the agenda.

The OSC considered that a letter should be sent to the Chief Executive of Gateshead Health NHS Foundation Trust raising the OSC concerns in relation to NHS involvement in tackling smoking in hospitals and a response requested.

The OSC thanked the Portfolio Holder for Health and Wellbeing for the update.

- RESOLVED -
- (i) That the activities undertaken during April to September 2017 are considered to be achieving the desired outcomes in the Council Plan 2015-20.
 - (ii) That a letter is sent to the Chief Executive of Gateshead Health NHS Foundation Trust raising the OSC concerns in relation to NHS involvement in tackling smoking in hospitals and a response requested.

CHW70 HEALTH AND WELLBEING BOARD - PROGRESS UPDATE

The Chair of the Health and Wellbeing Board attended and provided the OSC with an update on key areas of work which included:-

- Identifying the need to refresh the Health and Wellbeing Strategy and Inequalities agenda (it was identified that the next update from the Board to the OSC should be able to highlight further progress)
- A members seminar on the Strategic Needs Assessment
- Developing a whole systems approach to homelessness
- Examining the needs of the BME community
- Workforce challenges and Development - particularly in relation to GP recruitment and retention and a major recruitment drive underway and work with the CCG to look at potential new models. It was noted that a number of different approaches are being progressed such as training new GPs, apprenticeships in health and social care and also work around changing the roles of some health professionals.
- Pooling of budgets
- A Recovery Model for Substance Misuse – whereby those coming through the system are trained to become advocates
- Use of the Better Care Funds to keep people out of hospital and in their own homes
- The role of the voluntary and community sector on the Board
- Reshaping of 0-19 Public Health Services
- Deciding Together Implementing Together – progress had been encouraging and assurances had been received that no decisions had been made and still opportunities for discussion.

- Fire Service involvement in the health agenda – where carry out general checks use these as an opportunity to refer people to other support agencies where appropriate.
- Pharmaceutical needs Assessment – the Government is progressing an online pharmacy in Blaydon in spite of the fact the Health and Wellbeing Board in Gateshead has not supported this as it was considered that this would mean it was harder for individuals to receive appropriate advice.

The OSC queried whether information was reported back on the difference being made by the Better Care Fund.

The OSC was advised that the Council has to submit a number of returns outlining progress on how national conditions are being met and performance against a number of performance indicators related to areas being funded by the Better Care Fund eg hospital discharges and waiting times.

The OSC asked if the six monthly performance reports provided to the OSC could highlight those indicators which relate to the Better Care Fund.

The OSC supported the view that a Pharmacy was required in Blaydon as this would help ease pressure on local GP practices. However, it was considered that an on line Pharmacy should not be dismissed as this may be a more convenient option for some. It was considered that the option of having both a physical and on line Pharmacy should be explored.

The OSC also noted that the UK immigration figures were down and that skilled people within the NHS were being lost and queried whether this was impacting on GP recruitment.

The OSC was informed that Newcastle Gateshead CCG was part of a bid to recruit GPs from Europe.

The OSC considered that new models for GP recruitment are needed as issues such as student debt etc may mean that those considering becoming a GP do not have the means to buy into a GP practice.

The OSC thanked the Chair of the Health and Wellbeing Board for the update.

RESOLVED That the information be noted.

CHW71 OSC REVIEW -WORK TO ADDRESS HARMS CAUSED BY TOBACCO IN GATESHEAD - EVIDENCE GATHERING

The OSC received a report and a presentation from Ailsa Rutter, Director of the Fresh Regional Tobacco Control programme on comprehensive Tobacco Control action for its third evidence session.

The presentation provided an overview of current priority areas in tobacco control

and the associated challenges with dealing with these with a particular emphasis on work to protect people from second hand smoke and smoke free provision, what has already been achieved and what more remains to be done.

The OSC considered the presentation in the context of the following:-

- Smoking remains the single cause of most preventable illness and death in Gateshead and will kill half of all long term users.
- Gateshead has higher than average levels of smoking with more than 29,000 smokers and significant inequalities in the prevalence of smoking between different groups and areas.
- The Gateshead Health and Wellbeing Board has an ambition to reduce smoking prevalence in Gateshead to 5% or less by 2025 from its current prevalence of 17.9%
- There is pressure on Public Health budgets now and in the future.
- Demand for stop smoking services is reducing locally, regionally and nationally
- There are particularly low levels of take up of stop smoking services amongst some groups ie People from black, Asian and minority ethnic groups
- Innovative solutions developed in Gateshead have helped in the past to transform smoking rates in particular communities

A representative of Healthwatch Gateshead also highlighted their own personal difficulties in trying to stop smoking and in accessing help in Gateshead and received further information on where to access help and support.

The OSC considered that the presentation made it clear that more work needed to be done to tackle actions by the tobacco companies.

RESOLVED That the information be noted and the views of the OSC be taken into account.

CHW72 ANNUAL WORK PROGRAMME

The Committee received a report outlining proposed changes to the annual work programme for the municipal year 2017-18.

RESOLVED (i) That the provisional work programme be noted.
 (ii) That further reports will be brought to the Committee to identify any additional policy issues which the Committee may be asked to consider.

Chair.....

