

CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE AGENDA

Tuesday, 5 December 2017 at 1.30 pm in the Bridges Room - Civic Centre

From the Chief Executive, Sheena Ramsey

Item	Business
1	Apologies for absence
2	Minutes of last meeting (Pages 3 - 8) The Committee are asked to approve the minutes of the last meeting held on 31 October 2017.
3	The Council Plan - Six Monthly Assessment of Performance and Delivery (Pages 9 - 26) Report of the Strategic Director of Care, Wellbeing and Learning
4	Health and Wellbeing Board - Progress Update (Pages 27 - 34) Report of the Strategic Director of Care, Wellbeing and Learning.
5	OSC Review -Work to address harms caused by Tobacco in Gateshead - Evidence Gathering (Pages 35 - 36) Report of the Director of Public Health and Presentation by Ailsa Rutter MBE, Director of Fresh, Regional Tobacco Control
6	Annual Work Programme (Pages 37 - 40) Joint Report of the Chief Executive and the Strategic Director of Corporate Services and Governance.

Contact: Helen Conway email helenconway@gateshead.gov.uk, Tel: 0191 433 3993,
Date: Monday, 27 November 2017

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Public Document Pack Agenda Item 2

GATESHEAD METROPOLITAN BOROUGH COUNCIL

CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE MEETING

Tuesday, 31 October 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, R Mullen, I Patterson, J Simpson, A Wheeler and M Hall

APOLOGIES: Councillor(s): D Bradford and J Lee

CHW60 MINUTES OF LAST MEETING

RESOLVED – That the minutes of the last meeting held on 12 September 2017 were approved as a correct record.

CHW61 BLAYDON GP PRACTICE

The Committee received an update on the consultation on the future of Blaydon GP led practice.

Blaydon GP Led Practice is a GP practice based at Blaydon Primary Care Centre. The practice delivers essential, additional and enhanced services to 1,996 patients.

The current contract is delivered by Gateshead Community Based Care Ltd and has been extended until 30 June 2018. NHS Newcastle Gateshead CCG has commenced a period of engagement with patients and stakeholders to assist in the forming of options regarding the future of the practice. Phase one included engaging with members of the public on how they currently use the GP practice. Phase two is a period of consultation to consider the options available for the future of the service.

The engagement phase (phase one) took place between 1 – 15 September and included letters to patients, a survey, and liaison with various groups and stakeholders.

Patients reported in the feedback that the service they receive is either very good or good.

Patients also reported that they seem generally happy with the GP surgery and have left more positive comments than negative. In terms of improvements, respondents were more likely to say there is a need to see a regular GP and have less reliance

on the use of locums. Patients would like to have consistent and reliable access to quality healthcare services, and feel it is important to have continuity of care. They would also like it to remain in its current location.

Phase two (6 November 2017 – 14 January 2018) will focus on consulting on the options available for future provision of the service. The methodology includes:

- Writing out to patients (with details about what is being consulted on, how to get involved)
- Patient information – this includes information about the options involved and commonly asked questions
- Survey – available online and in paper form – this will focus on the options decided by the Primary Care Commissioning Committee
- Letters, patient information and surveys will be translated as appropriate
- Linking with local community groups
- Use of social media with promoted posts via Facebook
- Events organised by Healthwatch – this will include a public meeting and dedicated focus groups
- Healthwatch volunteers to help/encourage people to complete the survey within the practices

The OSC will be formally consulted on the proposed options for the practice at its meeting in January 2018.

- RESOLVED -
- i) That the information be noted
 - ii) That the outcome of the phase two consultation will be provided at the January meeting of the OSC

CHW62 GATESHEAD HEALTHWATCH INTERIM REPORT

The Committee received a report outlining the progress achieved for Healthwatch Gateshead since 1 April 2017 and also outlined the priorities for 2017/18.

At the start of the financial year, Healthwatch Gateshead and Healthwatch Newcastle held a joint annual event and conducted additional engagement activities to involve the community and partners in setting the priorities for 2017/18. Consultation resulted in the key work priority areas for Healthwatch Gateshead in 2017/18 being established as:

- Carers and the support carers receive
- NHS Continuing Healthcare (CHC)
- Mental Health
- Young People
- End of life

The OSC noted that Healthwatch was promoting a film produced by Enabled City who worked with Greenwich CCG and NHS England in relation to continuing care to better explain to patients and families how the NHS decides if someone is eligible for

NHS continuing healthcare and considered this was an excellent idea.

Healthwatch Gateshead agreed to provide the Committee with a further update at the meeting in March 2018.

- RESOLVED -
- i) That the information be noted
 - ii) That a further report be presented at the March meeting of the OSC

CHW63 OSC REVIEW - WORK TO ADDRESS HARMS CAUSED BY TOBACCO - EVIDENCE GATHERING

The Committee received a report and two presentations in the second evidence gathering session on the work being progressed to help people stop smoking, issues in providing this help and emerging models of stop smoking support.

The first presentation highlighted the stop smoking active intervention service and the second presentation discussed tobacco control.

The Committee were also advised:

- Gateshead has higher than average levels of smoking
- Smoking remains the single cause of most preventable illness and death in Gateshead
- There are significant inequalities in the prevalence of smoking between different groups and areas
- Demand for stop smoking services in reducing locally, regionally and nationally
- There are particularly low levels of take up of stop smoking services amongst some groups i.e. people from black, Asian and minority ethnic groups
- There is pressure on Public Health budgets now and in the future
- 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%
- Innovative solutions developed in Gateshead in the past have helped to transform smoking rates in particular communities.

The Committee noted that e-cigarettes have a role in helping individuals quit as part of the stop smoking service and queried whether there was any evidence at this stage of the effects of passive vaping. The Committee was advised that at this point in time there is no evidence of any harmful effects. The Committee was also advised that currently all the evidence suggests that e-cigarettes are 95% safer than traditional cigarettes. The potential risks of e-cigarettes are not yet known but a full scale review at a national level is due to commence shortly.

- RESOLVED -
- i) That the information be noted
 - ii) That any research (once released) on the use of e-cigarettes be made available to Committee
 - iii) That a further update be provided to the OSC in due course

CHW64 QUALITY OF COMMISSIONED SERVICES IN GATESHEAD

The Committee received a report and presentation on the Quality of Commissioned Services in Gateshead which provided an update on the quality of care provided by independent sector care organisations in Gateshead and described how commissioning activity within Commissioning and Quality Assurance helps to oversee, maintain, support and improve quality within the Gateshead Market. The OSC focused on services commissioned through Adult Social Care focusing on Care Homes and Home Care.

The Committee was updated on the duty placed on local authorities resulting from the Care Act 2014, the role of the Quality Assurance Framework, joint working with Clinical Commissioning Groups the Care Quality Commission and Healthwatch Gateshead, risk management, current quality issues in the market, care home performance, homecare performance and the next steps.

The Committee considered that provision at Shadon House was excellent and was keen to understand if learning from this good practice was being shared with other providers. The OSC was informed that there is a provider forum where good practice such as this is highlighted.

The Committee was keen to understand how the Council worked with providers in relation to different standards of provision and was advised of the various steps which were undertaken to improve quality of provision.

- RESOLVED -
- i) That the information be noted.
 - ii) That the OSC support the proposal to purchase the PAMMs system to give better oversight of quality and performance.
 - iii) That the OSC support the proposal to replicate the Serious Provider Concerns process for Children's Services.

CHW65 SHARED CARE CLINICAL AUDIT

Mark Harrison, Independent Consultant, Public Health will provided the OSC with a presentation on the findings of the clinical audit and alcohol shared care service commissioned by Public Health. The 'shared care' arrangement is currently between the main clinical recovery service provider (Change Grow Live – CGL) and primary care (GPs). The primary care service delivers satellite provision that should complement the main service located in the Town Centre. These services are commissioned by Public Health using separate contracts.

- RESOLVED -
- i) That the information be noted
 - ii) That further updates be provided to Committee in due course

CHW66 INTEGRATING HEALTH AND CARE IN GATESHEAD

Julie Ross, Director of Integration Gateshead and Newcastle updated the Committee on the current thinking of health and care system leaders in Gateshead about the opportunities for integrating services with the explicit aim of improving the health and wellbeing outcomes of the population.

The OSC queried what mechanisms were being put in place in relation to oversight of the integration of health and social care.

The OSC was advised that the Health and Wellbeing Board at its meeting on 8 September agreed that Gateshead health and care system leaders come together in a formal group under the auspices of the Board, in order to further develop the proposals for the integration of health and care services in the borough. Further proposals will be brought back to the Board over the coming months for consideration.

The OSC was also keen to understand how the new arrangements were supporting the work of the Council and NHS partners in tackling delayed discharges and the differing budgetary and monitoring systems for both. The OSC was advised that current work has involved looking at how a bridge can be built between the acute and community funding regimes.

The OSC also considered that it would be useful when work is being carried out to deliver high quality co-ordinated care and support individuals maintain their independence and manage their own health that professionals look to use the film promoted by Healthwatch Gateshead in relation to continuing care and it was agreed that the potential for this would be explored.

- RESOLVED -
- i) The OSC supported the information presented and particularly the potential for integrating health and care services as part of an incremental approach to the overall integration of services in the borough.
 - ii) The OSC noted the creation of a time limited health and care system leader group to develop comprehensive and costed proposals, which will report to the Health and Wellbeing Board
 - iii) That regular updates be provided to committee in due course.

CHW67 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.....

TITLE OF REPORT: The Council Plan – Six Month Assessment of Performance and Delivery 2017/18
REPORT OF: Caroline O'Neil, Strategic Director, Care, Wellbeing and Learning

SUMMARY

This report provides 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 the Care, Wellbeing and Learning Group.

Background

1. The report forms part of the Council's performance management framework and gives an overview of progress for the priorities appropriate to the remit of the Care, Health and Wellbeing Overview and Scrutiny Committee (OSC).
2. The Council Plan 2015-2020 was approved by Cabinet on the 14 July 2015, to enable the Council, along with partners, to be better placed to achieve positive outcomes for the people of Gateshead and deliver the ambition of Vision 2030.

2020 Target Setting

3. As part of the Council's performance management framework, five year targets were replaced with a single 2020 target with strategic indicators identified as either target or tracker indicators. These targets were approved by Cabinet on 12 July 2016.

Delivery and Performance

4. This report sets out the a performance overview linked to the 20 strategic outcome indicators, which have been identified as providing a high level picture of the strategic priorities for the Council and its partners in health and wellbeing. These indicators fall under the Live Well Gateshead and Live Love Gateshead outcome.
5. All 20 indicators are listed in appendix 1 and where performance is available at the six month stage for relevant indicators this has been provided, along with a summary in section 3. Section 4 of this report updates on key achievements over the last 6 months, while section 5 identifies key activities being undertaken in each service area in the next 6 months.

Recommendation

6. It is recommended that the Care, Health and Wellbeing Overview and Scrutiny Committee:
 - (i) consider whether the activities undertaken during April to September 2017 are achieving the desired outcomes in the Council Plan 2015-2020;
 - (ii) are asked to identify any areas they feel they require more detail about or feel require further scrutiny.

Contact: Alice Wiseman

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**Care, Health and Wellbeing Overview and Scrutiny Committee
Council Plan – 6 Month Update of Delivery and Performance 2017/18**

5th December 2017

Portfolio:	Care, Health and Wellbeing
Portfolio Member:	Adult Social Care - Cllr Michael McNestry Health and Wellbeing - Cllr Mary Foy
OSC Chair:	Cllr Stuart Green
Lead Officer:	Caroline O'Neill
Support Officer:	Alice Wiseman, Director of Public Health

1. Introduction

1.1 This Committee undertakes scrutiny in relation to:

- Functions of the Council as a social services authority except those services provided to children and young people;
- The provision of health services in the Borough, including the function of the reviewing and scrutinising matters relating to the health services to adults as set out in the Health and Social care act 2001 and associated regulations;
- The provision of health services to children and young people in the borough;
- The health functions discharged by the Health and Wellbeing Board and the Director of Public Health under the Health and Social Care Act 2012 and the National Health Service Act 2006 (as amended) and any related enactment.

1.2 This report sets out the 6 month performance update for 2017/18 'assessment of delivery and performance' in line with the Performance Management Framework. The report provides an update on the performance against the remit of the Care, Health and Wellbeing Overview and Scrutiny Committee and the Council Plan 2015-2020 outcomes of Live Well Gateshead and Live Love Gateshead.

1.3 Section 4 of this report updates on key achievements in adult social care and public health over the last 6 months, while section 5 identifies key activities being undertaken in each service area in the next 6 months.

2.0 Recommendation:

2.1 Members are asked to receive this report for information, and to identify any areas they feel they require more information about or require further scrutiny.

3.0 Performance Summary

3.1 Of the 20 indicators monitored in this report, which are shown in their entirety in appendix 1, 11 have an updated position since the last report. The remaining 11 indicators will be updated during the course of the reporting period as the data becomes available.

- **Of the 11 updated indicators, performance trends are positive with 6 indicators showing an improvement**, including a reduction in excess weight for 4 to 5 year olds, improved rates of hospital admissions for alcohol related harm, an improved average number of days for delayed transfers of care from hospital, an increase in the number of older people rearing at home 91 days after a hospital discharge to a reablement service and a reduction in the number of repeat safeguarding enquiries.
- **4 of the 10 updated indicators have not improved.** The proportion of people who are dissatisfied with life, when asked as part of the annual population survey (ONS), has decreased since the last survey, however still remains better than the North East average. 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 time of delivery has increased on the previous year
- **One indicator has remained the same** - the proportion of BME carers assessed or reviewed by social services which has remained similar to the previous report (0.8%).

4.0 Achievements over the last 6 months

Adult Social Care

Enhancing Lives

4.1 During April 2017 to 30 September 2017 we have:-

- Agreed that the post of Service Director for Health and Social Care Commissioning and Quality Assurance will become a joint post between Gateshead Council and Newcastle Gateshead CCG. The job role and governance arrangements for the post are being finalised through the accountable officers group.
- Developed a Bridging Service to support safe discharge from hospital for people who require long term packages of care. This has enable the Council to achieved better Delayed Transfer of Care levels and enabled people to return home rather than remaining in hospital or to go to other settings such as Residential Care.
- Implemented the framework for under 65 Learning Disabilities residential care. A new Contract with updated terms and conditions has been introduced and a new progressive model of support specification has been put in place. There is now a clear rate of payment for providers associated to the level of support
- Made further progress on planning permission work with Housing Growth team and Home Group for housing for people with a Learning Disability. There has been planning approval for 12 units in Deckham. The build date is currently set for Feb 2018. Building approval has also been granted for sites in Winlaton.
- Developed supported living accommodation for 3 young men using the Individual Service Funds model in Blaydon and are looking at a mix needs development to support the 'Building the Right Support plan'.
- Developed 3 new supported housing models which increase capacity and offer directed interventions in respect of mental health, independent living skills and substance misuse treatment.

- Completed extensive negotiations and re-settlement planning work with key partners following a decision taken by a local provider to withdraw a supported housing service for vulnerable offenders. All of the vulnerable clients that required ongoing support have been re-housed with appropriate assistance.
- Agreed to a joint approach through the Newcastle Gateshead CCG Executive Group around Home Care and a joint contract with Care Homes which will look to develop a new quality banding tool.
- Extended the current contract for Older Persons Residential and Nursing Care Homes for 2017/18 with a new contract for 2018/19 onwards to be developed once the CCG have completed their CHC costing exercise.
- Agreed the Fee models for 2017/18 for the Older Persons Residential and Nursing Homes in June 2017. Gateshead was the second authority in the region to do this and the relationship with the Care Home association is now very positive.
- Established new day service with Age UK with an increased capacity for service users suffering with dementia. There was no impact on the service users following the closure of previous services and we achieved a saving of £56k per annum as a result of this.
- Seen Southernwood Promoting Independence Centre receive an award for being in the 'Top 20 Care Home' list for the North East region by carehome.co.uk. From 36 reviews, Southernwood currently has a 9.7 out of 10 rating.
- Seen our Special Olympics Gateshead Tyne and Wear team having great success at the National Games in August 2017, with an amazing medal total of 52.

Quality of Life

4.2 During April 2017 to 30 September 2017 we have:-

- Completed significant work as part of the Better Care Fund and Improved Better Care Fund monitoring processes, which has resulted in more accurate monitoring and reporting of delayed transfers of care. Resources were identified within the Improved Better Care Fund, to support and enhance hospital discharge processes. Since August 2017 a significant improvement in delays attributed to Adult Social Care has been reported.
- Developed the Commissioning Concerns process so that these are now being reported to the Quality Assurance sub group of the Safeguarding Adults Board.
- Secured through the GATES employment service paid work for 10 people with learning disabilities, with positions secured within employers such as Sage Gateshead, The Ark Children's play centre and INTU Metrocentre.
- Enabled 80% of the 847 individuals using the PRIME Enablement Service to attain their enablement goals.

Positive Lives

4.3 During April 2017 to 30 September 2017 we have:-

- Completed the review of the Adult Social Care model, and held sessions with teams to feedback the outcome of the review. A slightly revised model has been agreed which will be implemented in November 2017.
- Successfully partnered with Think Ahead, a graduate scheme for mental health social work, and have a social work unit on site (commenced September 2017).

The Unit consists of a Consultant Social Worker, who was recruited from within our service, and four student social workers. They are embedded within the Mental Health Team, and feedback so far has been very positive.

- Seen a number of colleagues across Adult Social Care successfully shortlisted for regional and national care awards.
- Seen success at the Commonwealth Powerlifting Federation Championships, with a Special Olympics athlete winning a gold medal. Two other athletes played for Newcastle United's Down syndrome team in the Costa Blanca Cup.

Protecting Lives

4.4 During April 2017 to 30 September 2017 we have:-

- Received a very positive commissioner visit to Eastwood Promoting Independence Centre, which in particular commended the integrated working across health and social care. The report stated "the visit was positive and staff demonstrated commitment and passion in delivering a bespoke service for intermediate care patients. The team was impressed with what they observed during the visit, especially the strong and passionate commitment to work together in order to provide the best care possible"
- Implemented a new Safeguarding Adults Quality Assurance Framework which facilitates scrutiny and challenge and will provide assurance to the Safeguarding Adults Board.
- Implemented the Flu Vaccination programme for Gateshead Council staff to increase uptake of flu vaccinations to protect vulnerable people.
- Completed 1379 Home Safety checks in partnership with Tyne and Wear Fire Rescue Service.

Health and Wellbeing Achievements (Public Health)

Health and Wellbeing Strategy

4.5 During April 2017 to 30 September 2017 we have:-

- Approved the Gateshead Better Care Fund Plan submission for the period 2017-19 by the Council, the Health & Wellbeing Board and by Newcastle Gateshead Clinical Commissioning Group and this was submitted to NHS England by the deadline of 11 September 2017.
- Developed the Forward Plan for the Health and Wellbeing Board for 2017/18 and this is currently being refreshed for the remainder of 2017/18.
- Endorsed a 'Year of Action' on Tobacco and Smoking at The Health & Wellbeing Board meeting in July 2017 to highlight the harms arising from tobacco and work that is underway with partners to counteract them. The purpose of the Year of Action is to maintain and raise the profile of the impact of tobacco in Gateshead and to galvanise action at all levels (i.e. community, organisational, sector-specific) to combat the harms from tobacco.
- Refreshed the Joint Strategic Needs Assessment which was considered and approved by the Health & Wellbeing Board (HWB) at its September 2017 meeting. The Board agreed to retain the existing strategic priorities relating to a Best Start in Life, Living Well for Longer, and Older People.

- Provided an update on the BME Needs Assessment was provided to the Health and Wellbeing Board (HWB) in July 2017, including an Action Plan based upon updated recommendations from the Health Needs Assessment.
- Had the HWB endorse the Homelessness and Multiple and Complex Needs Assessment at its June 2017 meeting and following this by The Gateshead Housing Company.
- Considered the contribution of the Voluntary Community Sector in improving health and wellbeing in Gateshead. A report on this issue was considered by the Health and Wellbeing Board at its July 2017 meeting.
- Developed a Neighbourhoods and Communities Model for Gateshead ('People, Communities and Care') which was considered and endorsed by the Health & Wellbeing Board at its meetings in April and June 2017. The Board also endorsed proposals to further explore the potential for integrating health and care services in Gateshead at its meeting in September 2017.

Making Every Contact Count

4.6 During April 2017 to 30 September 2017 we have:-

- Conducted consultation workshop sessions with the voluntary and community sector to agree the Making Every Contact Count (MECC) approach and further discussions also took place around the MECC grant process and how this would work practically in terms of monitoring and other support functions.
- Three MECC leads have been employed to develop the MECC approach in Gateshead including delivery of sessions on using the MECC approach in a range of community settings. They will also focus on key topic sessions on health and wellbeing in relation to alcohol, nutrition and physical activity, tobacco, and mental wellbeing. The sessions provided by these trainers will be free to access across all sectors and a targeted approach, focussing on those most in need, will be adopted.
- Appointed a Resources and Information Assistant post to support the delivery and implementation of MECC across Gateshead. Key achievements as part of the post include; a One You Social media account to promote lifestyle messages, services and campaigns and assisting in the development of resources and training materials for the roll out of the programme from November 2017 onwards.
- Established a Grant fund provide resources to support the uptake of the free training and other MECC related training in order to further develop the skills of staff in organisations across the Community and Voluntary Sector (VCS).
- Appointed to the Making Every Contact Count (Alcohol, Drugs and Tobacco) post, to increase very brief interventions and conversations in these areas.
- Recruited to posts to deliver training on smoking as part of the Making Every Contact Count programme.
- Recruited as part of the Making Every Contact Count (MECC) approach across Gateshead a worker with a focus on Mental Health and Wellbeing. This person has attended training in Connect 5, a national mental health awareness raising programme and is currently delivering this programme to staff employed by the Council.

Substance Misuse (Including Alcohol)

4.7 During April 2017 to 30 September 2017 we have:-

- Shared the findings of the Clinical Audit with key partners, stakeholders and strategic groups. A paper has been presented to Cabinet, Health and Wellbeing Board and to Care, Health and Wellbeing OSC to agree the next steps to implement the recommendations of the Audit.
- Used Public Health data as evidence in several licensing committee hearings in Gateshead Council.
- Developed a separate Drug and Alcohol Annual Intelligence Snapshot document, which will also provide the information for the Drug and Alcohol sections of the JSNA.
- Presented Gateshead's Alcohol of Licensing work at various events including an Institute of Licensing training event and Balance North East regional meetings.
- Supported Balance North East's Media Campaign's – "Can't see it", raising public awareness of the harm caused by alcohol, especially the links between alcohol and cancer.

Reducing Smoking

4.8 During April 2017 to 30 September 2017 we have:-

- Recruited a post to provide training and mentoring to providers of the Stop Smoking Service and NHS Health Checks along with work to re-establish a single point of access for the Stop Smoking Service following the decommissioning of Live Well Gateshead.
- Commenced a review of activity to minimise tobacco harms in Gateshead for Care Wellbeing and Learning Oversight and Scrutiny Committee.
- Worked closely with Northumberland Tyne and Wear (NTW) and Fresh to ensure that the training offer to NTW staff is clear.
- The QE is implementing software that will support recording a patient's smoking status and whether they have been referred to local services. DPH and Consultant in Public Health meeting with Chief Executive from the QE to discuss resource implications of further action on smoking.

Sexual Health

4.9 During April 2017 to 30 September 2017 we have:-

- Finalised the Sexual Health performance and quality frameworks and dashboards enabling data from multiple sources to be aggregated and evaluated by a single tool.
- Migrated the GP and Pharmacy contracting process onto online portals resulting in rapid contracting opportunities such as the staff flu vaccination programme from community pharmacies.
- Extended the Sexual Health contract.
- Expanded and targeted sign up of GP's and Community pharmacies providing sexual health and contraceptive services.

Mental Health and Wellbeing

4.10 During April 2017 to 30 September 2017 we have:-

- Developed a Suicide Prevention plan on the back of a piece of work comparing the Gateshead data against the three year rolling data at national level in line with the national guidance from Public Health England.
- Commissioned the comprehensive training programme on a range of mental health issues and delivery is ongoing. Training includes programmes around Mental Health First Aid, A life Worth Living, understanding Self-Harm, Understanding Eating Disorders and Mental Health Awareness for managers.

NHS Health Checks Programme

4.11 During April 2017 to 30 September 2017 we have:-

- Recruited a Health and Wellbeing Intervention Lead to provide mentoring, training and quality assurance for the Health Checks programme. The Lead has begun a programme of mentor visits along with reviewing and developing training around the Health Checks.
- Increased provision of NHS Health Checks from 3 pharmacies to 15 pharmacies.
- Explored the addition of a diabetes risk tool to the Gateshead Health Checks programme and agreed that this will be added in to align with the National Diabetes prevention programme.

Healthy Weight

4.12 During April 2017 to 30 September 2017 we have:-

- Commissioned a research project, to explore a whole system approach to engaging communities in efforts to address childhood obesity in an area with high levels of health inequalities. The study took place from September 2016-October 2017 and the interim findings are now available. This study can contribute to our understanding of the most effective ways to improve the health of disadvantaged communities, including children and young people's views.
- Began the process for development of a whole systems healthy weight strategy for Gateshead across the life course, which will seek support from the Health and Wellbeing Board and sign up from strategic partners to take the strategy forward.

Better Health at Work Award

4.13 During April 2017 to 30 September 2017 we have:-

- Established a new Public Health/commissioning lead for the Better Health at Work Award programme. Commissioning lead for regional support has confirmed TUC as provider and there is a Key Performance Indicator reporting structure in place.

5. Actions over the Next 6 Months

- 5.1 The following have been prioritised as key actions over the next 6 months to support delivery against the shared outcome Live Well Gateshead – a healthy, inclusive and nurturing place for all.

Adult Social Care

Enhancing lives

- 5.2 During October 17 to March 18:

- We will monitor the "Bridging Service", to further facilitate timely discharge from hospital, in line with the Department of Health's High Impact Change Model, and the Improved Better Care Fund.
- The Adult Social Care Provider domiciliary care team will work with newly appointed Healthcare Locality Managers to provide wrap around services to individual general practices within 5 locality wards.
- By February 2018, the Local Authority domiciliary care team will develop an options paper for the delivery of a joint health and social care urgent care / rapid response team.
- The joint Carers Review for Newcastle Gateshead CCG will be taken to Cabinet where approval will be sought to go to procurement. This will be the first piece of joint commissioning between Gateshead Council and Newcastle Gateshead CCG.
- We will complete the consultation and model for extra care support, however the tender is on hold until decision is formalised.
- Work will commence in October to upgrade telecare equipment from Housing Revenue Account capital programme at all identified sites by the end of the financial year.
- Phoenix Community Base will attend the North East Equality Awards in October 2017 as a finalist in the 'Groups who have made a difference' award category.
- 3 ASC Provider service teams (Blaydon Lodge, Rapid Response service and Shared Lives) and 9 individual employees have been made finalists at the North East Care Awards in November 2017.

Quality of Life

- 5.3 During October 17 to March 18 we will:

- Launch the Market Position Statement on 9th November at the inaugural Health and Social Care Conference "Working Together to Increase Choice and Improve Quality Conference"
- Facilitate transition of Direct Payment support service into Gateshead Council and support individuals to resolve any issues from previous provider. Work with safeguarding and the police to ensure that all identified cases of potential financial abuse are investigated.
- Create a training programme that will support Providers to develop their offer for care and support which will enable them to offer better choice and control in relation to the care and support they receive.
- Develop a new fee band quality framework for Older Peoples residential and nursing care homes.

- Carry out a Quality Assessment Framework on all adults' statutory social care services and produce a quality score for each service.
- Undertake work with Home Care providers to identify opportunities for innovative practice in order to meet the increasing demands on homecare services and difficulties with workforce.
- Work with our NHS colleagues in Gateshead, to develop the Gateshead Care Partnership
- We will consider if we are to be working towards the new accreditation for Tennent Services Authority or retaining the old.

Positive Lives

5.4 During October 17 to March 18:

- It is hoped that a minimum of 2 Special Olympics Gateshead Tyne and Wear will be selected by Great Britain in January 2018, to represent their country at the 2019 Special Olympics World Championships in March 2019.
- In November 2017, GATES employment service will commence an internship programme within IKEA, Gateshead in which interns will be provided with a large amount of employment opportunities.
- We will work with clients and providers in our small Learning Disability care homes, to support the positive development of a model of independent living.

Protecting Lives

5.5 During October 17 to March 18 we will:

- Develop the Trusted Assessor model, in line with the Department of Health's High Impact Change Model, and the Improved Better Care Fund.
- Improve our Deprivation of Liberty Safeguarding process, by utilising digital technology.
- Work with colleagues in the Safeguarding Adults Board to publish a Communication and Engagement Strategy to raise awareness and promote key messages about Safeguarding Adults with our adults at risk of abuse or neglect, stakeholders and the wider community.
- Monitor and evaluate the flu vaccination programme to determine increased uptake. Consider barriers to uptake and options for increasing uptake next year.

Health and Wellbeing (Public Health)

Health and Wellbeing Strategy

5.6 During October 17 to March 18 we will:

- Report on Progress in implementing the Better Care Fund Plan for 2017/18.
- Refresh the Health and Wellbeing Board Forward Plan for the remainder of 2017/18.
- Secure approval to a refreshed Gateshead Pharmaceutical Needs Assessment for 2018.
- Progress the development of a Healthy Weight Whole System Strategy for Gateshead.
- Appoint a temporary worker to raise the awareness of cancer signs and symptoms.

Making Every Contact Count

5.7 During October 17 to March 18:

- The MECC programme will be further established and delivered across all sectors. This will be monitored and the effectiveness of programme delivery evaluated around how MECC is being embedded within Gateshead.
- We will provide 'train the trainer' training 'Have a Word' and Drugs Awareness via the Making Every Contact Count post to statutory and 3rd sector organisations to equip staff to 'start the conversation' with patients and clients.
- We will confirm and provide Making Every Contact Count offer to employers as part of the Better Health at work award.

Substance Misuse (Including Alcohol)

5.8 During October 17 to March 18 we will:

- Revise the Substance Misuse Action Plans in light of the recently published National Drug Strategy and Clinical Guidelines to ensure our local plans and actions reflect the national evidence base.
- Develop health harms maps for specific wards to inform licensing developments and decisions, as detailed in the Gateshead Statement of Licensing Policy.
- Commence a procurement exercise (including consultation) for a remodelled Drug and Alcohol Integrated treatment and recovery service in light of the findings and recommendations of the Clinical Audit.
- Explore the opportunities to further develop the work with veterans focusing on prevention, alcohol use and abuse and referral pathways into services.

Reducing Smoking

5.9 During October 17 to March 18 we will:

- Complete Equality Impact Assessment of stop smoking service.

- Develop and action communication/marketing plan around smoking and tobacco control to include 'Stoptober', the 'Keep it Out' campaign on illicit tobacco, and promotion of the stop smoking service.
- Review and expand membership and role of the Smoke-free Tobacco Control Alliance.
- Re-establish a single point of contact for the stop smoking service that will permit electronic referrals to be made by secondary care trusts, this is estimated to be ready to receive referrals by January 2018.

Sexual Health

5.10 During October 17 to March 18 we will:

- Work with the Sexual health service provider to identify further cost savings for 2018/19.
- Introduce second drug for emergency hormonal contraception across community pharmacies
- Plan the procurement phase for the sexual health service
- Revise the specification and evaluate the key performance indicators to inform the new tender.

Mental Health and Wellbeing

5.11 During October 17 to March 18:

- The Mental Health and Wellbeing Partnership is being reviewed and a focus for the work being agreed. This will be informed by the Public Mental Health Strategy and action Plan and the Suicide Prevention Action Plan.
- The Dual Needs strategy will be agreed and signed off and delivery of the action plan will be the focus of meeting discussions.
- Based on an audit of the 2017 suicide data to be completed at the start of October 2017 a report will be taken to the Mental Health Programme Board for discussion.

NHS Health Checks Programme

5.12 During October 17 to March 18 we will:

- Deliver training and mentor visits to all NHS health check providers and standardise the Health Check results letters across all providers.

Healthy Weight

5.13 During October 17 to March 18 we will:

- Work with Public Health England to take forward regional plans for an outdoor initiative agreed by Directors of Public Health as a follow on from the 'Everybody Active North East' work. The work will be focused on developing an 'outdoor app' aimed at children and families.
- Provide a report to go to Health and Wellbeing Board around the process of developing the whole systems health weight strategy.

- Develop a strategy group to oversee the healthy weight strategy and health needs assessment in order to inform the development of activity in this area.

Better Health at Work Award

5.14 During October 17 to March 18 we will:

- Support new and existing award recipients to prepare and submit portfolios for assessment.
- Revise local marketing and engagement plan to promote uptake and completion of the award.

Section 2: Delivery of the Council Plan 2015-2020

Table 1: Strategic Outcome Indicators Summary of Performance, Public Health – Alice Wiseman

Indicator	Objective	Target Type	Target 2020 17/18		Most Recent Performance	Direction of Travel	Comments and Actions
LL4 – Decrease the Percentage of People who are Dissatisfied with Life	Strategic	2020 Tracker	4.8%	-	4.9% (2016/17)	Declined	<ul style="list-style-type: none"> Gateshead is currently better than the North East average but is higher than the England average Data is from Annual Population Survey (APS); Office for National Statistics (ONS).
LW2 – Prevention of ill health: % of mothers smoking at time of delivery	Strategic	2020 Tracker	9.9%	-	14.5% (2016/17)	Declined	<ul style="list-style-type: none"> Gateshead is currently significantly higher than the England average but is not significantly different to the North East average. A major programme to embed NICE guidance to help midwives raise the issue and refer women to stop smoking services through the babyClear initiative has doubled quitting rates and received national acclaim. Work is currently underway to re-establish a referral pathway for midwives to refer women to local stop smoking services. While these improvements are significant, they have been hard won. The babyClear model isn't consistently applied and will require continued 'servicing' to maintain progress.
LW4a - Reduce Excess weight 4-5 year olds - excess weight =obese/overweight	Strategic	2020 Tracker	18.1%	-	22.0% (2016/17)	Improved	<ul style="list-style-type: none"> Gateshead has the lowest prevalence of excess weight amongst reception children since 2012/13. A research project was commissioned to explore engaging communities to address childhood obesity in areas with high levels of health inequalities. Provisional findings are now available. Work with Public Health England and Newcastle University's Open Lab is taking place to progress regional plans for an outdoor initiative focusing on a "Outdoor App" to allow Children & families to find out more about and access to green spaces, parks and cycling/walking routes in local areas

Indicator	Objective	Target Type	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	17/18			
LW4b - Reduce excess weight 10-11 yr. olds (excess weight =Obese/overweight)	Strategic	2020 Tracker	25%	-	37.9% (2015/16)	Declined	<ul style="list-style-type: none"> Excess weight levels amongst Year 6 children have increased from 37.9% in 15/16 to 38.5% in 16/17 Highest level of excess weight in year 6 since 2009/10 and joint highest level overall. Please reference LW4a for actions
LW13 – Stabilise the Rate of Hospital Admissions per 100,000 for Alcohol Related Harm (Narrow)	Strategic	2020 Tracker	789 per 100,000	-	989 per 100,000 (2016/17 provisional)	Improved	<ul style="list-style-type: none"> Data is provisional for 2016/17 Gateshead is significantly higher than the North East and the England rate. Second highest rate of all 152 upper tier LA's.
LW15 – Gap in the employment rate between those with a learning disability and the overall employment rate	Strategic	2020 Tracker	58.6% points	-	62.9% points (2015/16)	Improved	<ul style="list-style-type: none"> No change since last report
LW16 : Hospital admissions for self-harm rate per100,000 (aged 10-24 years)	Equality	2020 Tracker	Reduce	Reduce	544.9 per 100,000 (2015/16)	NA	<ul style="list-style-type: none"> No change since last report, latest data not available until March 2018 Gateshead has the 2nd highest rate of admissions per 100,000 for those aged 10-24 for self-harm in the North East
LW17 – Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate	Strategic	2020 Tracker	59.4% points	-	69.2 %points (2015/16)	NA	<ul style="list-style-type: none"> No change since last report
LW18 – Excess under 75 mortality rate in adults with serious mental illness (<i>indirectly standardised ratio</i>)	Strategic	2020 Tracker	351.8	-	397.3	NA	<ul style="list-style-type: none"> No change since last report
LW19 : Reduce Mortality from Causes Considered Preventable	Strategic	2020 Tracker	182.7 per 100,000	-	239.1 per 100,000 (2014-16)	Declined	<ul style="list-style-type: none"> Gateshead is currently significantly higher than the England average, but is not significantly different to the North east average. Gateshead has the 4th highest rate of the 12 North East LA's
LW20 - Healthy Life Expectancy at Birth (Male)	Strategic	2020 Tracker	63.7 years	-	57.0 years (2013-15)	NA	<ul style="list-style-type: none"> No change since last report, next update available November 2017

Indicator	Objective	Target Type	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	17/18			
LW21 - Healthy Life Expectancy at Birth (Female)	Strategic	2020 Tracker	64.0 years	-	59.1 years (2013-15)	NA	• No change since last report, next update available November 2017
LW22 – Gap in Life Expectancy at Birth between each local authority and England as a whole (Male)	Strategic	2020 Tracker	-1.2 years		-1.8 years (2013-15)	NA	• No change since last report, next update available November 2017
LW23 – Gap in Life Expectancy at Birth between each local authority and England as a whole (Female)	Strategic	2020 Tracker	-1.2 years		-1.5 years (2013-15)	NA	• No change since last report, next update available November 2017
LW24(a) – Health Inequalities – Reduce the inequalities in Life Expectancy across Gateshead (Male)	Strategic	2020 Tracker	8.2 years	-	9.9 years (2013-15)	NA	• No change since last report, next update available November 2017
LW24(b) – Health Inequalities – Reduce the inequalities in Life Expectancy across Gateshead (Female)	Strategic	2020 Tracker	7.3 years	-	8.7 years (2013-15)	NA	• No change since last report, next update available November 2017

Table 2: Strategic Outcome Indicators Summary of Performance, Adult Social Care – Steph Downey

Indicator	Objective	Target Type	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	17/18			
LW10 – Delayed Transfers of care from Hospital in days per 100,000 population	Strategic	2020 Tracker	165.0	229.98	262.34 per 100,000 (Apr–Aug 17)	NA	<ul style="list-style-type: none"> This method of collection has changed and a new methodology is now in place (see below).
NEW Definition Delayed Transfers of care from hospital, average days per day, per 100,000 population	-	-	-	8.6 per 100,000	7.13 per 100,000 population aged 18+ (Apr to Aug 17)	Improved	<ul style="list-style-type: none"> The Government mandate to achieve a 3.5% rate of delayed transfer beds by September has meant a change in the reporting methodology of this indicator. This means the previous method (LW10) has been replaced with a new definition – average number of days per day, per 100k
LW11 – Helping Older People to live independently – the proportion of older people 65+ still at home 91 days after hospital discharge to a reablement service	Strategic	2020 Tracker	87.5%	85.6%	85.1%	Improved	<ul style="list-style-type: none"> This value is based on 6 months data, those discharged from hospital into reablement services between January and June 2017. 297 out of 349 people remained at home 91 days after discharge into a reablement service. This is an improvement on the same time last year (79.2%) and the 16/17 year end position (80.8%) The North East average for 16/17 is 85.4% and the England average is 82.5%
LW12 – Repeat Adult Safeguarding Enquiries	Strategic	To be agreed	To be agreed	To be agreed	18.75% (Apr–Sep 17)	Improved	<ul style="list-style-type: none"> During April to September 2017 there were 33 people who had a previous enquiry within 12 months of the latest enquiry, from a possible 176 people. This is a reduction in repeat enquires compared to the same time last year (35.4%) which has demonstrated the improvement made to referral mechanisms.
LW14(b) – Support for Carers in BME Communities	Strategic	2020 Tracker	2.0%	-	0.7%	No change	<ul style="list-style-type: none"> 7 BME Carers out of a total of 1044 have been assessed, reviewed or were known to social services during April to September 2017. This has decreased slightly compared to the number reported at the same point in 2016 (9). Performance is lower than the 2019/20 target of 2.0%



**CARE, HEALTH & WELLBEING
OVERVIEW AND SCRUTINY
COMMITTEE
5th December 2017**

TITLE OF REPORT: Gateshead Health & Wellbeing Board – Progress Update

REPORT OF: Caroline O'Neill, Strategic Director, Care, Wellbeing and Learning

Summary

To update and seek the views of the Care, Health & Wellbeing OSC on the work of the Gateshead Health & Wellbeing Board for the six month period April to September 2017.

Background

1. The Health and Social Care Act 2012 provided for the establishment of Health & Wellbeing Boards (HWBs) as committees of local authorities to bring together leaders from the health and care system to work together to improve the health and wellbeing of their local population.
2. As part of the 2017/18 work programme for the Care, Health & Wellbeing OSC, it was agreed to provide two six monthly updates on the work of the HWB.
3. This report provides an update on the work of the HWB for the period 1 April 2017 to 30 September 2017. A second progress update covering the period 1 October 2017 to 31 March 2018 will be brought to OSC on 17th April 2018.

Gateshead Health & Wellbeing Board – Progress Update April to September 2017

4. The following update highlights key issues considered by the HWB and progress made since the previous update to Care, Health & Wellbeing OSC on 25th April 2017.

Joint Strategic Needs Assessment & Other Needs Assessments

Joint Strategic Needs Assessment

5. The Board confirmed the following strategic priorities for Gateshead through the Joint Strategic Needs Assessment (JSNA):

Best start in life

- Education and skills
- Emotional health and wellbeing
- Starting and staying healthy and safe

Living well for longer

- Economic factors
- Emotional health and wellbeing
- Tobacco control and smoking
- Alcohol misuse
- Healthy weight and physical activity

Older people

- Frailty
- Long term conditions
- Emotional health and wellbeing

6. The following next steps were endorsed by the HWB:
 - Continuing to engage 'expert authors' in developing and reviewing the content of the JSNA;
 - Adding more examples of the 'lived experience' of local people in the form of case studies to bring additional richness to the JSNA;
 - Continuing to integrate intelligence on Gateshead's assets into the JSNA and to engage with the public;
 - To invite Health and Wellbeing Board members to suggest areas for 'Deep Dive' work such as that recently carried out in relation to Homelessness.
7. The findings of the 2016 Health and Lifestyle Survey were also reported to the Board. It was noted that the information will be used to enhance the JSNA evidence base.

Gateshead Homelessness and Multiple and Complex Needs: Health Needs Assessment

8. The Board also considered the Gateshead Homelessness and Multiple and Complex Needs Health Needs Assessment (HNA). It sought to assess the scale, nature and impact of homelessness combined with complex and multiple needs in Gateshead.
9. The HNA demonstrated that homelessness is not inevitable and is rarely a housing issue alone. There is a strong overlap between homelessness and other support needs such as substance misuse, physical and mental ill health, cycles of physical and emotional abuse and involvement with the criminal justice system. Homelessness is also evidence of inequalities and is a late marker of exclusion and disadvantage.
10. The Board recognised the need to address this issue from a whole system point of view. It noted that how we work together to meet the needs of the homeless and those with multiple and complex needs should be a

barometer of how well we work together as a local system. If we can get it right for this cohort, the ripple effect for other groups can also be significant.

11. The Board agreed that this piece of work be shared and progressed with partner organisations and that our local MPs be made aware of its findings so that they can bring them to the attention of central government. The report was subsequently presented to and endorsed by The Gateshead Housing Company and a letter has been sent to local MPs seeking their support in ensuring its key messages reach a wide audience, not least within central government itself.

Gateshead Health Needs Assessment: Black and Minority Ethnic Population

12. The Board received a progress update on a health needs assessment (HNA) of the black and minority ethnic (BME) population of Gateshead. It was agreed that partner organisations would report back on the steps they are taking to implement relevant recommendations and actions identified by the HNA.

Integrating Health and Care in Gateshead

13. The Board considered the current thinking of health and care system leaders in Gateshead about the opportunities for integrating services to improve the health and wellbeing outcomes of our population.
14. It was reported that there is whole system support for an integrated approach to meet the following three objectives:
 - (i) To shift the balance of services from acute hospital care and crisis interventions to community support with a focus on prevention and early help.
 - (ii) To support the development of integrated care and treatment for people with complicated long term health conditions, social problems or disabilities.
 - (iii) To create a better framework for managing the difficult decisions required to ensure effective, efficient and economically secure services during a period of continued public sector financial austerity.
15. It was agreed that system leaders would come together in a formal group, under the auspices of the health and wellbeing board, in order to further develop the proposals for the integration of health and care services in the borough. Further proposals will be brought back to the board over the coming months for consideration. Members of OSC will also be aware that an update on this work was provided to its meeting on 31st October.
16. A separate report was considered by the Board on discussions held between NHS and Local Authority leaders during May and June 2017 at two Members seminars focussing on the integration of health and care services. The main reflections from the joint seminars were:

- The NHS and Local Authority priorities are very similar – from focusing on preventative services and prioritising children’s health and care, to considering new solutions to the depleting workforce and the demise of community infrastructures.
- All parts of the public sector are facing huge financial challenges as demand grows and budgets reduce – we all support the need to work together across organisational boundaries and in the interests of the populations we serve.
- The local authority has responsibility for a range of services that can positively affect the health of the population – such as public parks and spaces, community facilities etc.; harnessing the opportunities to improve the overall health and wellbeing of the population within available resources was a recurring theme.
- The cost of providing hospital based care is substantial in comparison to community based and preventative services; our collective challenge is to find creative ways of reducing demand for hospital services; the resources released as a result could form a platform for investing in preventative services and other priorities such as primary care, community and mental health services.
- ‘Prevention’ was identified as a major theme. It was noted that austerity has led to some services being stopped or reduced. A priority is to consider how mainstream services can still have a preventative focus.

Strategic & Operational Plans

17. The Board considered the following strategic and operational plans during the period April to September 2017:

Substance Misuse Strategy for Gateshead: The Board endorsed the Substance Misuse Strategy 2017-2022 and Action Plan for Gateshead with a focus on prevention across the lifecourse; promoting responsible retailing by the trade to support a reduction in substance misuse-related harm; and ensuring an evidence based ‘health and wellbeing’ approach to addressing the needs of service users and their families.

A Year of Action on Tobacco and Smoking: The views of the Board were sought on undertaking a “Year of Action” to highlight the harms arising from tobacco use and what’s happening in Gateshead to counteract them. It was reported that the intention is to maintain and raise the profile of the impact of tobacco in Gateshead, and to galvanise action at all levels (i.e. community, organisational, sector-specific) to combat harms.

A series of monthly activities is being undertaken to generate press/media interest and provide a platform for the communication of key messages around the impact on health, encouraging people not to start smoking, protecting others from second-hand smoke, and promoting support for those wanting to stop smoking.

People, Care & Communities (Neighbourhoods & Communities Model)

18. The views of the Board were sought on an initial draft Neighbourhoods and Communities model that was developed to facilitate more care being provided in community and neighbourhood settings. The model sought to capture work already underway in many parts of the Gateshead geography. However, it was noted that there was insufficient emphasis on children and health inequalities within the draft model. It was felt that reference also needed to be made to the 'place' dimension and that the language used to describe the model will be key in getting key messages across. It was also felt that the 'enhanced primary care' component of the model would be crucial going forward.
19. A revised model was subsequently brought back to the Board which had been re-titled the 'People, Communities and Care' model. The updated model incorporated feedback received from stakeholders, including from the Health & Wellbeing Board.

Better Care Fund Plan 2017- 19

20. The Better Care Fund (BCF) Plan for 2017-19 was agreed by the HWB in advance of being submitted to NHS England. It was developed in line with government guidance and confirmation has recently been received from NHS England that it has been approved in full. The Plan seeks to build upon existing work to provide more care in out-of-hospital settings and closer to peoples' homes.
21. The Board also endorsed a quarterly return to NHS England and a progress update on the previous year's BCF Plan (2016/17). The return focused on budget arrangements, how national conditions relating to the BCF are being met and performance against key indicators.

Contribution of the Voluntary and Community Sector to improving health and wellbeing in Gateshead

22. The Board received a presentation on the contribution of the voluntary and community sector to improving health and wellbeing in Gateshead. It was noted that the VCS has multiple roles, often dependent on the size and nature of the organisation, and that these include:
- As a service provider;
 - As a mechanism for bringing patients, users, and carers together e.g. support groups, peer experience;
 - As an advocate for individuals, groups and communities who are often excluded;
 - Through the use of volunteers to enhance services and experiences;
 - As a partner in decision-making;
 - As a source of information, knowledge and expertise on particular communities (e.g. contributor to the JSNA);
 - As an improver of the physical environment;
 - As a campaigner for environmental and other improvements.
23. The VCS identified the need to look at and re-define relationships with the sector, including the Gateshead Compact.

Gateshead Health & Care Workforce: Challenges and Opportunities

24. The Board received a presentation on key workforce challenges and opportunities relating to Gateshead. It noted that:

- Issues around workforce recruitment and retention are often tied to prospects for the local area and available resources and investment in the area;
- It is important to engage and work with local universities and colleges in looking to address the workforce issues identified e.g. work between the QE and Gateshead college;
- We need to continually review how new technologies can be harnessed to support our local workforce so that it can work in new ways and deliver our new models of care;
- The solution to workforce shortages is not always about recruiting more of the same. The answer can often be supporting staff to work in different ways, ensuring that 'prevention' is embedded in everything we do and is seen as everyone's responsibility – being proactive rather than reactive in our approach;
- 'Making every contact count' is a good example of how prevention can be embedded within the roles of all staff.

0 to 19 Public Health Service Provision

25. The views of the Health & Wellbeing Board were sought on the proposed model for 0 to 19 public health services (health visiting, school nursing and family nurse partnership). It was noted that the review process included the following elements:

- A full health needs assessment;
- Evidence base and guidance review;
- Consultation with service users and key stakeholders;
- Development of a service model and specification to deliver an integrated 0 to 19 Healthy Child Programme.

26. It was reported that the new service specification would be published on the NEPO portal, with the new contract due to commence on 1st April 2018.

HealthWatch Gateshead Annual Report 2016/17 and Priorities for 2017/18

27. The Board received a presentation from HealthWatch Gateshead on its priorities for 2017/18 and an update on progress since April 2017. Priorities identified for 2017/18 include:

NHS Continuing Health Care (CHC) – a joint priority area with Newcastle HealthWatch, proving an opportunity to combine data collection from the CCG and acute hospitals with patient and relative feedback.

The information gained will help HealthWatch to design a questionnaire for service users and carers to gather their experience of the process, and the information available to them. Findings will be the subject of a

comprehensive report which will be shared with stakeholders and providers for comment before it is published before the end of the financial year.

Carers – researching people’s experience of accessing care arrangements and follow-up support.

Young People – Young People will be an engagement priority for 2017/18.

Mental Health – A potential area for research which has been identified is the physical health of people with mental ill-health.

End of Life – HealthWatch is working with the CCG in undertaking a review of end of life services.

28. Progress in taking these priorities forward was reported to OSC at its meeting on 31st October.

Other Issues

29. Other issues considered by the Board included:

Deciding Together, Delivering Together – an update was provided to the Board on arrangements being put in place to design inpatient and community mental health services across Gateshead and Newcastle.

Childhood Obesity (Year 6 data) – An update was provided to the Board on how Gateshead is performing in reducing childhood obesity.

‘Fire as a Health Asset’ – The Board received a presentation on ‘Fire as a Health Asset’ from the Tyne & Wear Fire & Rescue Service. It was noted that fire death risk factors include people’s mental health, poor housekeeping, alcohol, smoking, drugs (prescription/illegal), limited mobility and living alone. The fire service priorities and core activities include responding to incidents, building resilience, prevention work and protection.

Opportunities identified by the Fire Service to work together with partners to improve health and wellbeing in Gateshead included:

- Prevention focused activities;
- Working together for joint benefit e.g. JSNA and data sharing to improve targeting/risk profiling; two-way referral/signposting (including Making Every Contact Count);
- Supporting the health and wellbeing agenda in Gateshead.

Pharmacy Applications – the Board considered reports on pharmacy applications received relating to change of hours, change of ownership and distance selling.

Recommendations

30. The views of OSC are sought on:

- (i) the progress update on the work of Gateshead's Health & Wellbeing Board for the first six months of 2017/18 as set out in this report.

John Costello (Ext 2065)

TITLE OF REPORT: Work to address the harms caused by tobacco in Gateshead

REPORT OF: Alice Wiseman, Director of Public Health

SUMMARY

This report gives details of the evidence gathering session that will take place on 5th December 2017. The views of the Committee are being sought on the evidence presented and the future plans outlined.

Background

Care, Health & Wellbeing Overview and Scrutiny Committee agreed that the focus of its review in 2017-18 is work to address the harms caused by tobacco.

The first evidence gathering session on 12th September presented an overview of the impact of harms arising from tobacco in Gateshead, and an introduction to current work to reduce those harms. The second evidence gathering session on 31st October focussed on the importance of providing support to smokers to stop, the current provision for this in Gateshead, and new and emerging models of support.

Purpose of this session

The scoping report agreed by OSC on 20th June 2017 described the range of activities that reduce harm caused by tobacco. Broadly, these are:

- Stopping people starting smoking
- Helping people stopping smoking
- Reducing exposure to secondhand smoke
- Tobacco control (ie. 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) is central to all of the above.

This third evidence gathering session will hear a presentation from Ailsa Rutter MBE, Director of the Fresh Regional Tobacco Control programme, on comprehensive Tobacco Control action.

The session will provide an overview of current priority areas in Tobacco Control, and the associated challenges of dealing with these, with a particular emphasis on work to protect people from second-hand smoke and smoke-free provision, what has been achieved, and what more remains to be done.

Issues to Consider

When considering the evidence outlined above the Committee may wish to consider 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 in the past have helped to transform smoking rates in particular communities

Recommendation

OSC agree

- i) To note the approach and content as set out in this report and presentations.
- ii) To give its views on the information presented.

Contact: **Alice Wiseman** **Ext: 2777**



**CARE, HEALTH & WELLBEING
OVERVIEW AND SCRUTINY COMMITTEE
5 December 2017**

TITLE OF REPORT: Annual Work Programme

REPORT OF: Sheena Ramsey, Chief Executive
Mike Barker, Strategic Director, Corporate Services and Governance

Summary

The report sets out the provisional work programme for the Care, Health and Wellbeing Overview and Scrutiny Committee for the municipal year 2017/18.

1. The Committee's provisional work programme was endorsed at the meeting held on 25 April 2017 and Councillors have agreed that further reports will be brought to future meetings to highlight current issues / identify any changes/additions to this programme.
2. Appendix 1 sets out the work programme as it currently stands and highlights proposed changes to the programme in bold and italics for ease of identification.

Recommendations

3. The Committee is asked to
 - a) Note the provisional programme;
 - b) Note that further reports on the work programme will be brought to the Committee to identify any additional policy issues, which the Committee may be asked to consider.

Contact: Angela Frisby

Extension: 2138

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Draft Care, Health & Well-being OSC 2017/2018	
20 June 17 (5.30pm meeting)	<ul style="list-style-type: none"> • Constitution • Role and Remit • The Council Plan - Year End Assessment and Performance Delivery 2016-17 • OSC Review - Work to Address Harms caused by Tobacco- Scoping report • MHA/DOLs Update • Deciding Together, Delivering Together - Progress Update
12 September 17	<ul style="list-style-type: none"> • Monitoring - OSC Review of Role of Housing in Improving Health & Wellbeing • OSC Review - Work to Address Harms Caused by Tobacco - Evidence Gathering • Social Services Annual Report on Complaints and Representations - Adults • Annual Report of Local Adult Safeguarding Board and Business Plans -(Chair of Board to attend) • Scrutiny of STP • Work Programme
31 October 17	<ul style="list-style-type: none"> • OSC Review - Work to Address Harms Caused by Tobacco - Evidence Gathering • Gateshead Healthwatch Interim Report • Blaydon GP Practice • Shared Care Clinical Audit • Quality of Commissioned Services in Gateshead • Integrating Health and Care in Gateshead • Work programme
5 December 17	<ul style="list-style-type: none"> • OSC Review - Work to Address Harms Caused by Tobacco - Evidence Gathering • The Council Plan - Six Monthly Assessment of Performance and Delivery (incl LSCB update) • Health & Well-Being Board Progress Update • Work Programme
23 January 18	<ul style="list-style-type: none"> • OSC Review - Work to Address Harms caused by Tobacco - Evidence Gathering • Blaydon GP Practice - Consultation on Options

	<ul style="list-style-type: none"> • Substantial Variation and Development - Deciding Together Delivering Together Consultation on Options • Work Programme
5 Feb 2018 (Additional Meeting)	<ul style="list-style-type: none"> • New Service Delivery Model for Extra Care Services • Gateshead Care Partnership Progress Update • Case Study 1- Health and Social Care System Wide Workforce Issues • Delayed Transfers of Care / Reablement Progress Update
6 March 18	<ul style="list-style-type: none"> • OSC Review - Work to Address Harms caused by Tobacco - Interim Report - • Gateshead Healthwatch • Case Study 2- Hospital Admissions as result of Alcohol related Harm • Work Programme
17 April 18	<ul style="list-style-type: none"> • OSC Review - Work to Address Harms caused by Tobacco - Final Report • Monitoring - OSC Review of Role of Housing in Improving Health and Wellbeing • Health and Well-Being Board - Progress Update • Food & Health and Safety Intervention Plans - Progress Update • OSC Work Programme Review

Issues to slot in

- Impact of any health transformations on adult services.
- Quality Accounts - Gateshead Health NHS Trust and NTW NHS Foundation Trust and South Tyneside NHS Foundation Trust
- STP Updates - as appropriate.
- **Adult Social Care Account - Video**