

CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE AGENDA

Tuesday, 25 June 2019 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 - 10) The Committee are asked to approve the minutes of the last meetings held on 23 April 2019 and 16 May 2019 respectively
3	Constitution (Pages 11 - 12) Report of the Chief Executive
4	Role and Remit (Pages 13 - 14) Joint Report of the Chief Executive and the Strategic Director, Corporate Services and Governance
5	Briefing - Radiology Equipment Trinity Square, Gateshead (Pages 15 - 18) Verbal update by Claire Coyne, Director of Clinical Support and Screening, Gateshead Health NHS Foundation Trust and Colin Smith, Newcastle Gateshead CCG (Briefing Attached)
6	Adult Social care and Public Health - Making Gateshead a Place Where Everyone Thrives - End of Year Assessment of Performance and Delivery 2018/19 (Pages 19 - 48) Report of the Strategic Director Care, Wellbeing and Learning
7	OSC Review: Suicide, Every Life Matters, Scoping Report (Pages 49 - 56) Report of the Director of Public Health
8	Annual Work Programme (Pages 57 - 60) Joint Report of the Chief Executive and the Strategic Director of Corporate Services and Governance

9

Deciding Together - Progress Update

Presentation by representatives of Northumberland Tyne and Wear NHS Foundation Trust

Public Document Pack Agenda Item 2

GATESHEAD METROPOLITAN BOROUGH COUNCIL

CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE MEETING

Tuesday, 23 April 2019

PRESENT: Councillor S Green (Chair)

Councillor(s): M Charlton, W Dick, K Ferdinand,
B Goldsworthy, M Goldsworthy, I Patterson, J Simpson,
J Wallace, A Wheeler, J Lee and Gibson

APOLOGIES: Councillor(s): C Bradley, M Hood, P Maughan, R Mullen,
P McNally and M Hall

CHW129 MINUTES OF LAST MEETING

The Committee agreed the minutes of the last meeting, held on 22 January 2019 as a correct record.

CHW130 GATESHEAD HEALTHWATCH UPDATE AND HEALTHWATCH CONTINUING CARE RECOMMENDATIONS

Kim Newton and Michael Brown from Healthwatch provided a verbal update on progress made by Healthwatch and its work on the Continuing Care Recommendations.

Steph Downey, Service Director Adult Social Care also provided a verbal update on progress relating to recommendations from the Council on Continuing Care and Julia Young, Director of Quality Development, Newcastle Gateshead CCG provided a presentation and verbal update on the progress relating to recommendations for CCG.

The Committee requested that live case studies be brought to a future meeting of the
Committee for information.

- RESOLVED -
- i) That the information be noted.
 - ii) That live case studies be brought back for information to a future meeting of the Committee.

CHW131 PROGRESS UPDATE ON DUNSTON HILL PROPOSALS

Michael Laing, Associate Director, Community Services, Gateshead Care Partnership provided a powerpoint presentation and verbal update on the Dunston Hill Proposals, which included the proposals agreed previously by the OSC relating to an exit strategy for St Bede's Day Care Services and the Younger Persons Dementia Unit which were situated at the Dunston Hill site.

The Committee requested that a site visit would be beneficial in the near future to the Bensham Hospital Site to view the new facilities for the relocated Younger Persons Dementia Unit.

- RESOLVED -
- i) That the information be noted.
 - ii) That a Committee site visit be arranged in due course to visit Woodside, the Younger Persons Dementia Unit situated at the Bensham Hospital site in due course.

CHW132 REVIEW OF WORK TO HELP PEOPLE STAY AT HOME SAFELY - FINAL REPORT

The Committee received the final report as part of its review "Helping People Stay at Home Safely". The review has been carried out over a six month period and centred on the 6 core themes of:-

- Assistive technology and digital information;
- Enablement services;
- Housing options to support independent living;
- Commissioning for enablement services;
- Emergency and community services;
- Personalisation and choice.

As a result of the review, the following draft recommendations have been proposed:-

Recommendation 1 – to explore potential delivery models (with colleagues in health), in relation to the prevention of admissions to hospital for those people who arrive at A&E/Urgent Care, building on best practice evidence nationally and regionally.

Recommendation 2 – to work with partners in the Council, the ADASS regional team, and the ICS workforce stream to develop career pathways for health and social care, in order to address the workforce issues across the sectors.

Recommendation 3 – to further develop the Extra Care offer in Gateshead, in particular focusing on the provision of Dementia Specific Extra Care provision, which can meet the needs of people with cognitive impairment, and enable them to continue living in the community, thereby preventing admissions to care.

Recommendation 4 – to continue to further develop the enablement offer within the

services the Council provides and commissions, thereby preventing more people from requiring long term care.

Recommendation 5 – to continue to work with NHS colleagues and commissioned providers to continue the downward trajectory of Delayed Transfers of care (DTOCs), enabling people to be “discharged to assess”, and reducing delayed transfers of care from hospital.

Recommendation 6 – to undertake a systematic review of all assessment functions, to explore the potential to introduce “Trusted Assessor” models, thereby reducing duplication across the system whilst improving the journey for people using health and care services.

Recommendation 7 – develop and operationalise an Assistive Technology strategy, including the opportunity to learn from local, regional and national technology projects.

- RESOLVED -
- i) That the information be noted
 - ii) The Chair of the OSC will present the draft recommendations to Cabinet in due course.

CHW133 WORK TO ADDRESS THE HARMS CAUSED BY TOBACCO - UPDATE ON RECOMMENDATIONS

The Committee received a report providing a twelve month review update on the recommendations into the work to address the harms caused by tobacco.

RESOLVED - That the information be noted

CHW134 HEALTH AND WELLBEING BOARD - PROGRESS UPDATE

The Committee received a report providing an update on the work of the Gateshead and Wellbeing Board for the six month period October 2018 to March 2019.

The following key issues considered by the Health and Wellbeing Board:

- Joint Strategic Needs Assessment: Update/Refresh
- Thriving in Gateshead – rethinking Health & Wellbeing Conference
- Integrating Health and Care in Gateshead
- Director of Public Health Annual Report 2018
- Strategic and Operational Plans
- Impact of the Roll out of Universal Credit
- OFSTED Inspection of LA Children’s Services: Self Evaluation & Annual Conversation Update
- Annual Report on Permanent Exclusions (2017/18)
- Adult Mental Health – ‘Gateshead Newcastle Deciding Together, Delivering Together’
- Personal Health Budgets Update

- Assurance Agenda

The Committee were asked if they wished to be involved in the Health and Wellbeing Board Draft Strategy, currently under development.

- RESOLVED -
- i) That the information be noted
 - ii) That the OSC be involved in the preparation of the Health and Wellbeing Board Draft Strategy
 - iii) That a further six month update be provided in due course

CHW135 ANNUAL WORK PROGRAMME REVIEW AND FORWARD PLAN

The Committee received a report set out in two parts. The first part highlights how the work of this Committee has helped influence/shape the development of policy/decision making/performance improvement work during 2018-19 and the second part details proposals for the development of the work programme for OSC'S and sets out the provisional work programme for the Care, Health and Wellbeing OSC for the municipal year 2019-20.

The Committee requested that the Health and Wellbeing Board Draft Strategy be included in the forthcoming work programme.

- RESOLVED -
- i) That the information be noted
 - ii) That the Committee endorsed the OSC's provisional work programme for 2019-20 and refer it to Council on 23 May 2019 for agreement.
 - iii) Note that further reports will be brought to the Committee to identify any additional issues which the Committee may be asked to consider.

Chair.....

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

Thursday, 16 May 2019

PRESENT: Councillor S Green (Chair)

Councillor(s): M Charlton, M Hood, I Patterson, J Simpson,
J Wallace, J Lee and K McClurey

APOLOGIES: Councillor(s): W Dick, K Ferdinand, B Goldsworthy,
M Goldsworthy, R Mullen, A Wheeler, P McNally, M Hall and
Gibson

CHW136 QUALITY ACCOUNTS 2018-19

The OSC were invited to comment on the Quality Accounts for Gateshead Health NHS Foundation Trust, and Northumberland Tyne and Wear NHS Foundation Trust.

Overview and Scrutiny Committees, along with Healthwatch, are invited on a voluntary basis, to review the Quality Accounts of relevant providers and supply a statement commenting on the Account – based on the knowledge they have of the provider.

The Committee considered the Draft Quality Accounts for Gateshead Health NHS Foundation Trust and Northumberland Tyne and Wear HNS Foundation Trust.

Taking into account of the OSC's work during the previous year the OSC may wish to comment on the following for each respective account:-

- the Quality Account
- whether they believe that the Account is representative
- whether it gives comprehensive coverage of provider services
- whether they believe that there are significant omissions of issues of concern that had previously been discussed with providers in relation to Quality Accounts

RESOLVED – that the information be noted

CHW137 GATESHEAD HEALTH NHS FT QUALTY ACCOUNT 2018-19

The Committee received the Gateshead Health NHS Foundation Trust Quality Account for 2018-19.

Based on Gateshead Care, Health and Wellbeing OSC's knowledge of the work of

the Trust during 2018-19 the OSC were able to comment as follows:-

Quality Priorities for 2019-20

OSC expressed its support for the Trust's 12 proposed Quality Priorities for improvement for 2019-20.

Progress Against Quality Priorities for 2018-19

Clinical Effectiveness – Reducing variation in Clinical Practice – Getting it Right First Time (GIRFT)

OSC was very pleased to note that the work which had taken place in this area has been very successful in reducing variation and achieving improvements and as a result the Trust had recently been highlighted as one of the GIRFT leaders.

Patient Safety

OSC expressed concern that the improvements made last year in reducing incidents of pressure damage and the percentage of falls resulting in harm had not been sustained and the Trust had not met its targets in these areas. OSC acknowledged the challenges the Trust and the wider system faced in these areas, as a result of the high, frail, elderly population but was keen that these areas continued to be a priority area of focus for the Trust. OSC noted that the Trust had carried out a deep dive to better understand the situation in relation to incidents of pressure damage and was provided with assurances that the Trust was continuing to prioritise/take all actions it could to reduce levels of both pressure damage and fall in general and particularly the percentage of harmful falls.

OSC was however, pleased to note that the work the Trust had carried out during this period in relation to improving discharge medicines delivery to wards had resulted in a 57% reduction in delays. This ensured a minimal delay in discharge of patients from hospital due to waiting for medicines. OSC congratulated the Trust on the improvements achieved in this area.

Infection Control

OSC considered that this a priority area of focus and noted that whilst handwashing containers are placed outside each ward they do not appear to be in place at entry points into the hospital. OSC asked the Trust to explore the feasibility of installing additional containers for hand washing near to the points of entry into the hospital.

CQC Inspection Outcomes

OSC noted that the Care Quality Commission has not taken enforcement action against Gateshead Health NHS Foundation Trust during 2018/19.

RESOLVED - that the information be noted.

CHW138 NTW QUALITY ACCOUNT 2018/19

The Committee received the Northumberland Tyne and Wear NHS Foundation Trust Quality Account for 2018/19.

Based on the OSC's knowledge of the work of the Trust during 2018/19, the OSC were able to comment as follows:-

Quality Priorities for Improvement 2019-20

The OSC was supportive of all the quality priorities outlined for 2019-20 but expressed particular support for quality priorities 1. Improving the inpatient experience and quality priority 2. Improving waiting times.

In relation to quality priority 1. – improving the inpatient experience, OSC noted that as part of the Trust's service improvement and developments during 2018-19 the Trust had been working with other agencies across Newcastle and Gateshead to redesign mental health services to ensure that people can easily access the right care and treatment for their needs within the community.

OSC acknowledged that for a variety of reasons implementation of this work was not occurring at the pace originally anticipated. However, OSC indicated that it was particularly keen to receive regular information from the Trust on the various stages of implementation and timeframes for this work during 2019-20. OSC planned to consider progress on this work as part of its 2019-20 work programme.

Progress against Quality Priorities in 2018-19

Safety – Improving the Inpatient Experience

The OSC has previously raised concerns with the Trust regarding the availability of inpatient beds and the fact that some service users are having to be admitted to beds outside their home locality/go out of the area and was pleased to note that there has been a reducing trend in the number of inappropriate out of area bed days during 2018-19. However, the OSC was keen that the position continues to be monitored to ensure that this good work is sustained.

Improving Waiting Times

OSC has previously raised concerns in relation to waiting times and was pleased to note that in Gateshead there have been improvements across waiting times for all service areas. OSC was particularly pleased to note the significant reduction in the number of children waiting for treatment and that none were waiting more than 18 weeks as at 31 March 2019. However, the OSC noted that changes to the provider arrangements for children's services (with NTW bow acting as lead provider and sub-contracting with other providers as required) may impact on waiting times going forward. Changes in national reporting will also affect waiting times. It felt that this situation should be closely monitored and mitigating actions put in place as appropriate.

CQC

The OSC congratulated the Trust on achieving an overall rating of Outstanding from CQC and being one of only two mental health provider Trusts nationally to have achieved this rating.

The OSC was very pleased to note that all the Trust's core services have been rated as either good or outstanding and was pleased to note that the Trust's Children and Adolescent Mental Health Wards have now been re-categorised as Good in the Safe category due to reductions in restrictive practices and that wards for older people with mental health problems have been re-categorised to Good in the Effective category due to improvements in personalisation of care plans having both previously been rated as requires improvement.

However, the OSC noted that, during this period, acute wards for adults of working age and psychiatric intensive care units have been rated as "Requires Improvement" in terms of the category of Safety but received reassurances around actions being taken by the Trust to address this situation. The OSC also noted that the Trust has been accredited by the Accreditation for Working Age Wards (AIMS) and the Quality Network for Psychiatric Intensive Care Unit.

RESOLVED - that the information be noted.

Chair.....

TITLE OF REPORT: Constitution

REPORT OF: Sheena Ramsey, Chief Executive

The constitution of the Committee and the appointment of the Chair and Vice Chair as approved by the Council for the 2019/20 municipal year is as follows:

Chair S Green (C)
Vice Chair R Mullen (VC)

Councillors M Charlton
W Dick
P Diston
K Ferdinand
H Haran
J Gibson
B Goldsworthy
M Goldsworthy
M Hall
M Hood
J Lee
K McClurey
P McNally
I Patterson
J Wallace
A Wheeler

Recommendation

The Committee is asked to note the information.

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TITLE OF REPORT: Role and Remit

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

Summary

The report sets out the remit and terms of reference of the Committee as previously agreed by the Cabinet and the Council.

Background

1. Article 6 of the Council's Constitution sets out the aims and objectives of the scrutiny function in Gateshead Council. In particular it should be an integral part of the Council's framework and a constructive process which works alongside other parts of the Council's structure, contributing towards policy development. Importantly it will enhance rather than duplicate activity and it will look to broader issues affecting local people rather than just internal Council issues.

Remit/ Terms of Reference

2. Within the above principles, all Overview and Scrutiny Committees will
 - Review decisions, holding decision makers to account
 - Call - in executive decisions in accordance with the procedure set out in the Overview and Scrutiny Committee rules
 - Contribute to the policy making process
 - consider Councillor Calls for Action in line with the Council's protocol

⇒ carry out Policy reviews agreed as part of the service planning cycle

⇒ Advise Cabinet as part of the Council's performance management system

⇒ have a role in scrutinising and developing the Council's Improvement Programme

⇒ Examining the Schedule of Decisions

 - Ensure other agencies, public and private, play their part in achieving a better quality of life for Gateshead residents.

3. To perform the Overview and Scrutiny role in relation to:
 1. all the functions of the Council as a social services authority except those services provided to children and young people;
 2. health service for adults and an Overview of health services for children and young people and
 3. An overview of functions discharged under the Health and Social Care Act 2012 or any other enactment in relation to the planning, provision and operation of the health service in the area.

Membership: Eighteen members of the Council.

Recommendation

4. The Committee is asked to note its remit and terms of reference.

Contact: Angela Frisby

Ext: 2138

OVERVIEW AND SCRUTINY COMMITTEE BRIEFING ON TRINITY SQUARE RADIOLOGY EQUIPMENT REPLACEMENT

Background

Trinity Primary Care Centre sits within property owned by Tesco PLC Ltd. The Health Care Centre is managed by NHS Property Services. Gateshead Health NHS Foundation Trust (GHNFT) supported diagnostic imaging at Trinity Primary Care Centre at the request of the Commissioners, the Newcastle Gateshead Clinical Commissioning Group (NGCCG) to support GP requests for plain imaging, from 2012 until August 2018.

In 2017 it was identified that this equipment, owned by GHNFT needed to be replaced as it was experiencing multiple problems and breakdowns and impacting on service delivery to patients. Unfortunately, replacement of the equipment was not possible at that time due to the legal complexities of the lease arrangements of the building. No action could be taken until there was a fully signed agreement between Tesco PLC and NHS Property Services.

Equipment performance issues escalated throughout 2018 until a decision was made by the Trust in August 2018 to cease imaging at Trinity because of concerns of patient safety. In order to continue the safe provision of a plain imaging service to patients within the locality GHNFT arranged to fit the new equipment (that had originally been purchased for Trinity PCC) into the Queen Elizabeth Hospital (QEH) Radiology Department. Throughout this period patients have continued to have their x-ray imaging at either QEH or Blaydon Primary Care Centre and the service is not aware of any complaints.

There has been lengthy dialogue between a number of parties including the Commissioners, QEF and NHS Property Services since 2017 and we are aware that a legal agreement is now in place between NHS Property Services and Tesco PLC.

Within this context, Commissioners and the Trust have given detailed consideration of the need to replace the equipment at Trinity PCC which would involve the relocation of the x-ray machine now currently sited at the Queen Elizabeth Hospital. This has involved consideration of patient feedback captured in a patient survey which explored the possible locations for plain imaging for patients. The survey responses indicated that the preferred site to attend for any plain film imaging was the QEH, followed by Blaydon and Trinity PCC, the least.

The survey identified that a proportion of patients identified weekend and evening appointments to be available for appointments to fit in with their lifestyle. This offer of choice is not possible at Trinity PCC as the imaging service is linked with the Centre's opening times which are between core hours 9.00-5.00 pm. Evening and weekend

appointments are not feasible due to the facilities opening times and availability of resources.

The survey also indicated that having an imaging service closer to home was a key preference. It is acknowledged that QEH is only 2 miles away from Trinity Square and is therefore in a similar geographical boundary.

There have been no complaints received from patients in attending the QEH or Blaydon location as an alternative venue. The diagnostic facility supported the Diabetic service based in Trinity PCC for patients attending the diabetic clinic (approximately 2-8 per month) and views have also been received from providers of that service.

Patient attendances at the Trinity Square location had started to decline from an average of 160 patients per week in 2014/15 to 134 patients per week before the service moved 2018/19.

In addition to the service impact assessment and analysis of activity, work has been undertaken to identify the potential costs of relocating the newly installed equipment from Queen Elizabeth Hospital to Trinity PCC. This demonstrated that this could only be achieved at a prohibitive cost to the service, with the subsequent potential of having to redirect resources from other front line patient services.

After much consideration and deliberation, Gateshead Health and the NGCCG have together agreed to the proposal to continue the provision of plain imaging at QEH, in addition to Blaydon Primary Care Centre, rather than re-locate and re-install an x-ray facility into Trinity PCC. In summary this decision has been based upon:

- Patient feedback that assures the Trust and Commissioners of overall patient satisfaction
- No evidence of adverse experience with the existing service
- Assurance of patients' preference for services provided from Queen Elizabeth Hospital and Blaydon Primary Care Centre that offer increased flexibility of appointment times, with the offer to patients of evening and weekend appointments.
- The Diabetes service are aware of the rationale for retaining the x-ray equipment at the QEH and are supportive of this proposal, being confident that service improvement can be made using resources at QEH to improve the patient pathway.
- The need for NGCCG and GHNFT to ensure a safe and efficient diagnostic x-ray service that is sustainable going forwards, within an affordable envelope of public resource.

In Summary Gateshead Health and Commissioners would like to inform OSC of this decision and the underpinning rationale.

J. Bowes
Service Manager, Diagnostics Services
20/05/19

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TITLE OF REPORT: **Adult Social Care and Public Health – Making Gateshead a Place Where Everyone Thrives – End of Year assessment of performance and delivery 2018/19**

REPORT OF: **Caroline O’Neill, Strategic Director of Care, Wellbeing and Learning**

SUMMARY

This report provides the year end assessment of performance and delivery for the period 1 October 2018 to 31 March 2019 in relation to the Council’s Thrive agenda.

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 Care, Health and Wellbeing Overview and Scrutiny Committee (OSC).
2. The Council’s strategic approach Making Gateshead a Place Where Everyone Thrives, was approved by Cabinet in March 2018 to ensure the Council continues to get the best outcomes for local people and remains a viable and sustainable organisation into the future.
3. Committee were advised at the meeting in December 2018, that a review of the strategic indicators has been undertaken to ensure their appropriateness in measuring performance relating to the Thrive agenda.

Delivery and Performance

4. This report has been aligned to the Councils pledges. Section A provides an overview of performance linked to the indicators identified as falling under each pledge, along with any achievements or challenges. The section summarises if performance has improved or declined since the same period in the previous year. Also included is an update of actions identified in the previous periods report and actions identified for the next 6 months.
5. Section B provides a performance dashboard with individual performance details for the 19 indicators identified, grouped by the relevant pledge.
6. The current strategic indicators were reviewed in January 2019 to ensure they continue to be appropriate in measuring performance in respect of the Thrive agenda. 1 new indicator was identified and is identified in appendix 1. This new indicator will be incorporated into the first report of the 2019/20 cycle. The service proposes further review and refinement of our strategic indicators during the year, in light of the development of the CWL Strategic Priorities set out in Appendix 2.

Recommendation

7. Members are asked to receive this report for information and consider:

- (i) whether the activities undertaken during October 2018 to March 2019 are achieving the desired outcomes, in making Gateshead a place where everyone thrives,
- (ii) identify any areas they feel they require more detail about or feel require further scrutiny,
- (iii) note that Cabinet will consider a composite performance report at their meeting on 16 July 2019.

Contact: Jon Gaines

Ext: 3484

Care, Health and Wellbeing Overview and Scrutiny Committee

Adult Social Care and Public Health – Making Gateshead a Place Where Everyone Thrives – End of Year assessment of performance and delivery 2018/19

March 2019

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, Strategic Director CWL
Support Officer:	Jon Gaines, Service Manager Quality Assurance

1. Introduction

- 1.1 We know that over 50% of people and families in Gateshead are either managing or just coping and over 30% are in need or in vulnerable situations. We want to change those statistics and aim to make Gateshead a place where everyone thrives. “Making Gateshead a place where everyone thrives” is the new council approach aiming to narrow the gap of inequality across Gateshead resulting in more people living longer and leading healthier and happier lives.
- 1.2 As a group Care, Wellbeing and Learning within its primary focus of direct work with and commissioning of services to support the residents of Gateshead is critically placed to support the Thrive agenda. Our work spans the 5 Thrive pledges, of:
- 1 *Put people and families at the heart of everything we do*
 - 2 *Tackle inequality so people have a fair chance*
 - 3 *Support our communities to support themselves and each other*
 - 4 *Invest in our economy to provide sustainable opportunities for employment, innovation and growth across the borough*
 - 5 *Work together and fight for a better future for Gateshead*
- 1.3 The current strategic indicators were reviewed in January 2019 to ensure they continue to be appropriate in measuring performance in respect of the Thrive agenda. 1 new indicator was identified (see appendix 1). This new indicator will be incorporated into the first report of the 2019/20 cycle. The service proposes further review and refinement of our strategic indicators during the year, in light of the development of the CWL Strategic Priorities set out in Appendix 2.
- 1.4 For services covered by Adult Social Care and Public Health, 19 overarching strategic indicators are currently identified and monitored to support the group in understanding its performance linked to achieving the council aim of narrowing the gap of inequality across Gateshead and supporting its residents to thrive. This report sets out the 6-month performance update for October 2018 to March 2019 ‘assessment of delivery and performance’ in line with the current Performance Management Framework.

- 1.5 This report provides a performance overview linked to the 19 strategic indicators for Adult Social Care and Public Health which currently fall under three pledges of *“Putting people and families at the heart of everything we do”, “Tackle inequality so people have a fair chance” and “Work together and fight for a better future for Gateshead”*.
- 1.6 Section A provides an overview of performance linked to the indicators identified as falling under each pledge, along with any achievements or challenges. The section summarises if performance has improved or declined since the same period in the previous year. Also included is an update of actions identified in the previous periods report and actions identified for the next 6 months.
- 1.7 Section B provides a performance dashboard with individual performance details for the 19 indicators identified, grouped by the relevant pledge.

2.0 Recommendations:

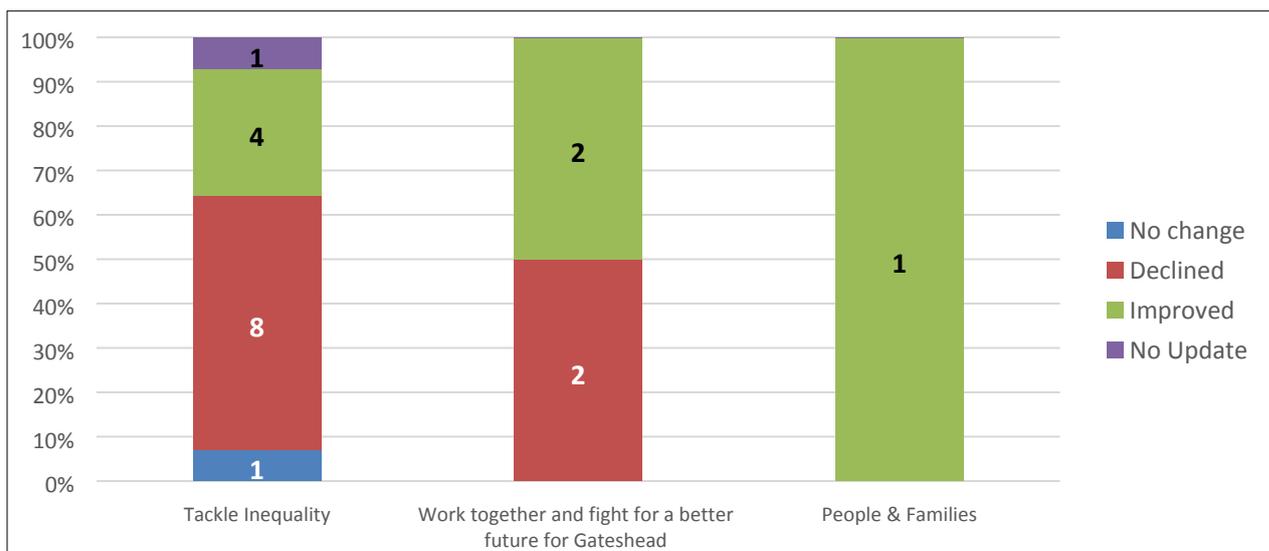
- 2.1 Members are asked to receive this report for information and consider:
- (i) whether the activities undertaken during October 2018 to March 2019 are achieving the desired outcomes, in making Gateshead a place where everyone thrives,
 - (ii) and asked to identify any areas they feel they require more detail about or feel require further scrutiny.
 - (iii) note that Cabinet will consider a composite performance report at their meeting on 16 July 2019.

Section A

3.0 Performance Overview

- 3.1 The chart below summarises the overall position and trend in performance compared to the performance, as of the 2017/18 end of year report, for the 19 indicators included in Section D, grouped under the relevant pledge. Specific detail for individual indicators is provided in Section D. Overall performance has improved in 7 out of the 18 indicators (38%) we have an updated position for. 1 indicator has received no update on the previous position.

Chart 1: Summary of direction of travel for indicators in section B



3.2 Putting people and families at the heart of everything we do

3.3 We have identified 1 strategic indicator linked to the pledge of ***Putting people and families at the heart of everything we do***. In the latest period this indicator has improved.

Performance Overview

3.4 We have noted an increase in the proportion of older people helped to live independently through enablement services. For those people aged 65 & over, discharged from hospital into an enablement service during October and November 2018, 85.9% remained at home 91 days after being discharged from hospital.

Achievements, Challenges and Actions

3.5 The Adult Social Care Provider service alongside health community services colleagues, are providing care closer to home to older people with frailty and multiple, complex conditions in the community. Daily phone calls are made between Domiciliary Care Managers and Locality Teams and attendance at fortnightly multi-disciplinary meetings.

3.6 We have developed a suite of standard documents to ensure clarity around the hospital discharge process, which can be given to the patient or their representative. This documentation gives clear information on what care and support can be offered once the patient is fit for discharge along with options on how this care can be provided.

3.7 As part of the remodelling of the Substance Misuse Service and the roll out of the new contract, there has been a full review of all of the service users in treatment to ensure that they are accessing effective treatment and encouraging use of the full range of support on offer.

- 3.8 Work has been completed in developing and launching Adult Social Care on-line forms for general enquiries, request for assessment or review and safeguarding concerns, giving more accessibility to clients and professionals. This has had a positive impact within Adult Social Care Direct and resulted in no e-mail backlogs and telephone calls answered in a shorter time.

Update on actions from previous report

Action	Thrive Pledge	Service Area	Update
All Older Persons care homes will receive a Quality Excellence Framework visit between October 2018 and end March 2019 to assess the quality of the service and place each home into a fee band linked to the quality delivered.	People & Families	Commissioning	All 28 homes have now had the QEF assessment completed and all appeals have been undertaken. Each home now has a new banding that links to the fee for 2019/20. Overall there has been a general drop in quality with the number of Band 1 homes going from 22 to 15.
Begin discussions exploring the development of more Extra care housing.	People & Families	Commissioning	An options Appraisal was completed and presented to the Councils Housing Solutions Group, which demonstrated the need for an additional 245 Extra Care Housing units to be developed by 2023. The demand evidence recommends that a new Extra Care Housing scheme is built each year to control and meet demand over the next 5 years. It was estimated that there are 78 people in long-term residential care who could have their needs met in Extra Care Housing. The data analysis around extra care has been fed into the CWL Accommodation Needs Analysis. Further analysis has identified where Extra Care Housing is needed, the areas are: Dunston / Whickham, Lobley Hill / Bensham, Felling, High Fell, Blaydon, Ryton / Crookhill and Stella. Developers have approached the Council and discussions to explore opportunities are underway.
It is envisaged that the rescore of the Carers tender by an expert panel will result in contracts being awarded to new providers and transition of services will take place by March 2019. However, this is wholly dependent on completion of the re-scoring by the independent panel.	People & Families	Commissioning	The carers tender was re scored by an expert panel, and award of contract was completed on the 1st May 2019, the contract is now in the mobilisation stage.
Complete the transition of extra care at Angel and Callendar Court to new provider on 19 November 2018.	People & Families	Commissioning	Human Support Group took over the care provision at Angel Court and Callendar Court on 19 November 2018.
We will examine the outcomes from the Promoting Independence Centre technology enabled care project and continue to work with the Achieving Changed Together team	People & Families	Care Call	Installed the equipment within the Promoting Independence Centre, the data has been collected and is currently being analysed. The work with Achieving Change Together (ACT) team will continue for another 12 months and so far, we have received 33 referrals for Technology Enabled Care.

Action	Thrive Pledge	Service Area	Update
We will examine the use of Technology Enabled Care assessment prior to residential care placements	People & Families	Care Call	We have completed the training of staff around the use of Technology Enabled Care assessments. The commencement date has yet to be agreed as we are working through referral processes.
Complete a review of the ASC web pages, which will produce new content and allow customers to find more appropriate and contemporary information for them to make self-judgements on whether they need to contact Adult Social Care.	People & Families	Adult Social Care	We have reviewed the web pages and a range out-of-date content has been removed. A second phase of work is being implemented to apply good website principles and to optimise web pages for our clients. The web pages are to be tested with a local third sector group to ensure potential client usability is optimised. The website development will also link into our information, advice and guidance planning and ensure clients are directed to the best advice quickly and effectively.
Implement training sessions within Children's Service Teams on Technology Enabled Care.	People & Families	Care Call	Agreed with Children Services to proceed with training sessions on Technology Enable Care and are currently pulling together the training plan.
All communication for Direct Payments will be refreshed and relaunched for staff and the public.	People & Families	Adult Social Care	The process map for direct payments has been completed and circulated to all assessment staff. The outcome of which is that staff now have full awareness of the Direct Payment process at each given point. Written communication leaflets etc. are still in the process of being refreshed.
Service Users have been identified with the plan that they will move in to the Orthodox Jewish Independent Supported Living scheme within the next 6 months	People & Families	Adult Social Care	The scheme is now ready and has been fully refurbished to meet the needs of the clients. The first client is moving in within weeks and has a robust care and support plan to meet their identified outcomes. This will allow Orthodox Jewish clients to remain within their own community.
Adult Social Care Provider service has been successful in securing 31 employees and Shared Lives carers onto Northumbria University's Positive Behaviour Support workforce development programme.	People & Families	Provider Services	Following the securing of places on Northumbria University's "Positive Behaviour Support workforce development programme", this has now commenced with the Council's Practice Lead (Level 6) and Facilitators (Level 4) undertaking initial modules. This development will be instrumental in enabling employees and Shared Lives carers to effectively respond to service users who display behaviours that challenge.
Carry out an audit of the Health Checks Programme, this will include looking to see if the recently implemented elements of the Health check are being delivered.	People & Families	Public Health	An Audit of the Health Checks Programme was completed in December 2018 and an action plan produced based on the recommendations from the audit. All actions were followed up by 31st March 2019
We will explore approaches to more targeted NHS health checks	People & Families	Public Health	Options to target NHS Health Checks were explored with NHS Health Checks Implementation Group and PH SMT. Targeted support visits will be offered to Providers with low uptake. Guidance on targeting invitations for NHS Health Checks is in the training and service specifications.

Action	Thrive Pledge	Service Area	Update
We are looking at attaching social care workers to a cohort of independent residential and nursing homes in Gateshead. Our aim is to hopefully reduce the number of safeguarding enquiries and to ensure those that needs have deteriorated will be referred for Continuing Health Care assessment in a timely manner	People & Families	Assessment & Care Planning	We have not yet fully implemented the process of attaching social care workers to a cohort of independent residential and nursing homes in Gateshead yet. However, we are going to be using a "mapping" process, which will help us identify the homes in clusters.

Actions for the next 6 months

- i. The Dynamic Purchasing System will be offered to the market with new lots covering Adults Mental Health and Physical Disability, the Children's lots will be enhanced with specialist Supported Accommodation and a wider lot will be added for Innovation to encourage providers to approach the Council on potential accommodation developments.
- ii. We will commence the 'Hospital to Home Scheme' whereby the PRIME domiciliary care service will transport service users from acute wards and integrate them back into their own home.
- iii. It has been identified that the current process for application, assessment and allocation of placements to all Extra Care establishments requires improvement. The process will be mapped via a Walk the Wall approach to identify the issues and gaps and to streamline the future process. The new process should be in place by end October 2019
- iv. We will work with the Community Transformation Service in developing locality working which is multidisciplinary. Whilst we are not fully working as a Multi-Disciplinary Team we do have direct contact with the locality nurses. The role of social care is to offer advice, information and support. Enabling people to remain at home with the right support at the right time. This work will be ongoing in its development.
- v. Training service users from the 3 PICs and Blaydon Resource Centre in weekly sports and then compete in the quarterly 'Gateshead Active Games'.
- vi. Trial a new process within the Locality Teams, in conjunction with Provider Services, whereby anyone admitted to Promoting Independence Centre for an assessment period will be allocated a key worker, who will be specifically assigned to carry out the assessment process.
- vii. Adult Social Care are currently carrying out a review into their social work allocation process. This review will consider where most delays are occurring and how these can be minimised or resolved. It is hoped that this review will improve the timescales for allocation for service users waiting for assessment or review.
- viii. Aim to have a completely revised the ASC landing page on the website. This will allow users to be provided with key links to websites which will give them specific pieces of information they require, as well as providing key information, advice and guidance. There are plans to develop 'chatbots' or 'Artificial Intelligence' to ensure that users enquiries are dealt with as effectively as possible.
- ix. Work with falls strategy to look at the collection of data from within the care call service around falls and the introduction of falls screening. This work covers all 4 key elements of the outcome markers already on form.

- x. The MECC programme is due to close at the end of September 2019. Valuation of the programme is currently being undertaken by Northumbria University with results expected in August 2019. A report based on this will be produced to outline results of the initiative and to consider legacy issues
- xi. Development of the digital Deprivation of Liberty Standards (DoLS) Portal will be completed and is anticipated to go live within the next 6 months.
- xii. We will utilise a more streamlined recording system so that the application of DoLS will become quicker and easier for care home managers and hospital staff. We anticipate that the website on the portal will also raise awareness of MCA and DoLS
- xiii. Develop new model Adult Social Care Direct - potential 3 conversation model - this will ensure people are being asked the right questions and it is strength based.

3.9 Tackle Inequality so people have a fair chance

- 3.10 As a council and group we must focus help on those areas of our remit where people are vulnerable and just coping, in order to support groups like these we have identified 14 strategic indicators linked to the pledge of ***Tackling Inequality, so people have a fair chance***. In the latest performance period, we have demonstrated improvements for 4 indicators in this pledge, 1 indicator remained the same, performance declined for 7 indicators, 1 received no update on the previous period and 1 is currently awaiting an update.

Performance Overview

- 3.11 The proportion of people dissatisfied with life has shown an increase compared to the same period last year and is the second period in a row to demonstrate a low satisfaction score. Gateshead has a slightly higher rate than England and North East rates, although not a significant difference.
- 3.12 The gap in the employment rate between those with Learning Disabilities and the overall employment rate has increase compared to the previous report; however Gateshead compare favourably against England and North East averages. Similarly, the gap in employment for those in contact with secondary mental health services has increased, being slightly higher than the England average but significantly higher than the North East.
- 3.13 It is not possible to state that there are any statistically significant changes in life or healthy life expectancy. However, indicatively, healthy life expectancy for men increased by 0.5 years in 2015-17 since the previous period (to 59.6) – the second increase in a row. The current gap to England for male life expectancy at birth is 2.1 years, having been very similar at 2.0 years the year before. Male life expectancy is currently 77.5.
- Again, indicatively, healthy life expectancy for women decreased by 1.5 years in 2015-17 since the previous period (to 59.1). The current gap to England for female life expectancy is 1.7 years, having been very similar at 1.8 years the year before. Female life expectancy is currently 81.4.
- 3.14 Inequality in life expectancy for both men and women is increasing. The general trend is upwards. The inequalities gap for men was 9.0 years in 2010-12, but was

10.3 years in 2015-17. For women, the gap was 7.1 years in 2010-12, but was 9.0 years in 2015-17.

- 3.15 There has been a decline in mortality from causes considered preventable. This is particularly evident in the significant decrease over the last 10 years. However, the rate in Gateshead is significantly worse than the England and North East averages.
- 3.16 The proportion of BME carers supported through an assessment, review or been in receipt of a carer related service during the period of April to March 2018/19 has decreased slightly compared to the 2017/18 period, from 14 to 13 carers.

Achievements and Challenges

- 3.16 A service user who attends the Phoenix Centre became a Double World Champion when representing Great Britain in swimming at the 2019 Special Olympics World Championships in Abu Dhabi, U.A.E.

Update on actions from previous report

Action	Thrive Pledge	Service Area	Update
A procurement exercise will take place to establish a framework for extra care and ensure providers are available for call-offs for any new developments.	Tackling Inequality	Commissioning	Commissioning exercise has started to update the current purchasing framework, to make a wider offer to the market, covering accommodation and support, which includes widening participation from other LA's, the adult LOTS have been extended to include MH and Physical Disability as well as LD/Autism.
Provide an update on Health and Care Integration to the Health and Wellbeing Board	Tackle inequality	Public Health	System partners have provided regular written and verbal updates to board meetings.
The Adult Social Care Provider service will continue to embed its Disability Enablement Framework, serving to ameliorate the growth of people with disabilities by securing Citizenship, Independence and Self-Management outcomes.	Tackling Inequalities	Provider Services	We have embedded our Disability Enablement Framework, this has enabled service users with disabilities to achieve independence, develop their skills and gain personal growth from the framework, resulting in service users being less reliant on social care support.

Action	Thrive Pledge	Service Area	Update
Establish a steering group and hold a stakeholder engagement conference to help shape the development of a new health and wellbeing strategy.	Tackle inequality	Public Health	A multi-agency steering group was established to develop a new Health & Wellbeing Strategy for Gateshead. The Steering Group organised a key stakeholder conference 'Thriving in Gateshead - rethinking Health & Wellbeing' on 23rd January, which included Sir Michael Marmot and other keynote speakers. Facilitated workshops also took place on the wider determinants of health; health behaviours and lifestyles; the places and communities we live in, and with; and an integrated health care system. Outputs from the conference are being used to inform and shape our future approach to health and wellbeing in Gateshead.
Consider the Director of Public Health's Annual Report for 2018	Tackle inequality	Public Health	The Director of Public Health Annual Report for 2018 'Obesity: Made in England' was presented to the Board which focused on maintaining a healthy weight. The report described the need to take a collaborative, whole systems approach, in promoting healthy weight in children, young people and families rather than taking single interventions on their own. The report identified areas where change could be affected, and the report recommended actions that contribute to the commitment to end obesity in Gateshead.
The Gateshead Director of Public Health report for 2017/2018 to be produced focusing on 'healthy weight' at Full Council.	Tackle Inequality	Public Health	Presented the Healthy Weight DPH report to Full Council. This focused on the stigma associated with obesity in today's society, highlighting that the blame lies primarily with societal, economic and environmental influences rather than with individuals and the behaviour choices they make. The report was well received and has also gained great feedback from across organisations.
Complete a CLear peer assessment of the Gateshead Smoke free Alliance. The assessment will inform the further development of the Alliance's activity	Tackle Inequality	Public Health	The Gateshead Smokefree Alliance completed a peer-led CLear assessment on 10 December 2018. This established several insights, strengths and opportunities for development. The Alliance has met to discuss the report and is acting on the opportunities for development. This will continue throughout 2019.
Following on from Gateshead's selection as a pilot area to review the draft whole systems obesity (WSO) guide and resources from Public Health England and Leeds Beckett University.	Tackle Inequality	Public Health	Completed the follow up from Gateshead selection as a pilot area for the Whole Systems Obesity approach. The guide and resources were reviewed, and feedback presented which will inform the finalised guide by PHE to be published in early Summer. This will inform LA's and partners how to implement a whole systems obesity effectively

Action	Thrive Pledge	Service Area	Update
Use information from the stop smoking service review and Health Equity Audit to inform the development of a new stop smoking support offer for Gateshead	Tackle Inequality	Public Health	The Health Equity Audit concluded in October 2018. The findings, in part, have been taken forward by the recommissioning of the stop smoking service completed in April 2019. This has included, for example, ensuring good provision in areas of low service uptake, such as Saltwell ward, by encouraging local general practices to re-establish a stop smoking service. In other wards with low levels of uptake, such as Lamesley, Public Health has worked with the Councils Communications department to design bespoke leaflets for different parts of the ward based on the principles of social marketing to raise awareness of the availability of local services. Over 9000 households will be targeted through this leaflet drop.
Establish a time limited working group to look at smoking in pregnancy as part of work around the "Best Start in Life" and system led improvement.	Tackling Inequality	Public Health	The Smoking in Pregnancy Group task and finish group was set up in November 2018. It brings together all organisations and services with an interest in helping women to stop smoking during their pregnancy and, ideally, for good. The Local Maternity System (commissioners and providers working together to ensure that women, babies and families can access the services they need and choose) has provided the Queen Elizabeth Hospital NHS Foundation Trust with a bespoke public health action plan based on an audit of current activity on smoking in pregnancy. The Smoking in Pregnancy task and finish group has met monthly since November 2018 and has delivered a number of actions. These include training in advice for the councils Early Help services and the 0-19 children's public health service, equipping more staff with carbon monoxide monitors to check maternal smoking status, and working with maternity services to develop the smoking in pregnancy pathway. These services will also be providing direct support to women to stop smoking. This will support the development of practice as recommended by NHS England's recently revised "Saving Babies' Lives Care Bundle". Further, the Trust is developing a business case for a number of activities the support the implementation of Smoke free NHS.
Consult and draft the 'Gateshead Healthy Weight Declaration' to ensure commitment and sign up from partners to a vision which encapsulates the promotion of healthy weight and to highlight the need for all policy areas to address healthy weight.	Tackle Inequality	Public Health	Started the process to consult and draft the 'Gateshead Healthy Weight Declaration' but further consultation is required before a this is complete, to ensure this reflects sign up from key partners. We have started the process but are not at the stage of drafting the declaration yet. We have liaised with the North West region who have committed as a region to the declaration and are further forward in terms of implementation. They have shared learning from their early experience.
Submit a trailblazer bid for 300k of funding to tackle childhood obesity over a 3-year period. The approach will focus on a whole system place-based approach.	Tackle Inequality	Public Health	Submitted the Trailblazer bid by partnership group, including Gateshead Council, CCG and Edberts House. The bid focused on a community centred approach at a place-based level to childhood obesity. The bid was unsuccessful in getting through to stage 2, however useful feedback was received.

Actions for the next 6 months

- xiv. Hold a further whole systems workshop/s in Gateshead and as part of this process, work with partners to inform a whole system plan. There is an intention to convene a strategic working group to develop this plan which will also be informed and steered at operational level by a newly developed healthy weight alliance which will represent all sectors.
- xv. Consult and draft the 'Gateshead Healthy Weight Declaration' to ensure commitment and sign up from partners to a vision which encapsulates the promotion of healthy weight and to highlight the need for all policy areas to address healthy weight.
- xvi. Start further work with catering to review provision in LA public buildings and facilities to make healthy foods and drinks are more available, convenient and affordable and limit access to high-calorie, low-nutrient foods and drinks.

3.17 Work Together and fight for a better future for Gateshead

- 3.18 As a council to improve the lives of the residents of Gateshead we must work together as a council, but also with our partners and others to do so. We have identified 4 strategic indicators linked to the pledge of **Work together to fight for a better Gateshead**. In the latest period, we have noted improvements in 2 indicators and a decrease in 1.

Performance Overview

- 3.19 We have made improvements in the average number of days per day adult transfers of care from hospital are delayed, with 6.6 per 100,000 population for the period. We have been working towards a very challenging nationally set target, and whilst we have not achieved this we compare favourably to national and regional averages.
- 3.20 The rate of hospital admissions for alcohol related harm have increased and Gateshead has a significantly higher rate than national and regional averages. Hospital admissions for self-harm (10 to 24 years), however, have seen a reduction and we compare favourably to national and regional averages.

Achievements and Challenges

- 3.21 The Every Life Matters programme has included taking responsibility for establishing a Suicide Prevention network at the geography of Northumberland Tyne and Wear to make it possible to access funding from NHS England for larger geography Suicide Prevention work. The first meeting was held in Gateshead in December 2018 with a member of the Gateshead Public Health Team Co-Chairing.
- 3.22 Completed a successful funding bid to Tyne and Wear Sport as a joint partnership between public health and leisure. The focus of the bid was to encourage LA staff who are sedentary to engage and sustain physical activity behaviour to benefit their health and wellbeing.
- 3.23 We have established a healthy weight sub-group across Newcastle / Gateshead CCG to review healthy weight provision across the area and to help prioritise areas going forward as part of a whole system approach.

- 3.24 The Gateshead Safeguarding Adults Board, Local Safeguarding Children’s Board and Gateshead Council Public Health Team held a successful conference in February 2019 to raise awareness about Adverse Childhood Experiences (ACE’s) and the impact on the life course.
- 3.25 We have continued development of MECC within three Council departments; Libraries, Gateshead Housing and Domiciliary Care. These departments were targeted due to the amount of daily face-to-face contact that staff have with clients in our target groups.
- 3.26 To further increase sustainability there has been a focus on the delivery of a Train the Trainer model for ‘Mental Health First Aid’ and ‘Have a Word’ Alcohol Brief Interventions’. This approach helps to ensure that training and key themes / information can continue to be delivered within organisations by identified trainers without the support of the MECC programme.
- 3.27 Through the Making Every Contact Count approach in Gateshead, Very Brief Advice (VBA) on Smoking training has been delivered to staff and volunteers from the Voluntary and Community Sector organisations currently signed up to MECC. The training has also been delivered to over 100 housing staff from TGHC and staff from Gateshead Libraries and staff from the QE Hospital. This delivery of VBA training is ongoing as the roll out of Making Every Contact Count continues. The training focusses on the skills, knowledge and confidence to deliver brief interventions on stopping smoking and accessing the Stop Smoking Service, e-cigarettes and second-hand smoke.

Update on actions from previous report

Action	Thrive Pledge	Service Area	Update
Complete a wholesale review of ASC procedures, policies and processes. This will produce a future state and provide ASC with a specification to go to market to procure a new case management (IT) system that will ensure the efficacy of ASC is improved and the customer journey and experience will be optimised.	Working Together	Adult Social Care	Conducted a complete end-to-end review of all business processes within Adult Social Care, which has identified a number of gaps in policies and procedures which is being addressed by commissioning a third-party solution. Procurement are currently leading the development of the specification to take to market to procure a new case management system. The tender should be issued through an open market procedure in July 2019. Whilst the tendering process is running, ASC Business Process Redesign Analysts are designing the future-state for ASC business processes.
Older person's accommodation and support strategy to be finalised to set out the strategic vision and priorities for Gateshead.	Working Together	Commissioning	As part of the work around “Older person accommodation and support strategy” it was realised that a needs analysis of accommodation for CWL was required. The data from this need’s analysis / evidence base will be used as a tool to commence dialogue between all relevant partners and produce an agreed set of priorities. The needs analysis sets the scene in Gateshead, and comprehensive narrative about current provision and gap analysis within Gateshead. This work will link to and inform the development of an accommodation DPS as referenced below.

Action	Thrive Pledge	Service Area	Update
There will be continued development of the Multi Agency Adults Referral Team (MAART) to ensure service users are accessing universal services where appropriate.	Working Together	Assessment & Care Planning	Embedded MAART and the policy and procedures have been developed which will be signed off by the Safeguarding Adults Board in July 2019. Multi-Agency Complex case meetings are held each week with partners and actions agreed. The MAART social worker is also working with those individuals who are hard to reach and not engaging with services.
Produce a digital strategy that will provide a roadmap for the next four years describing within each year the digital improvements that will eventually lead to a golden state whereby all health and social care practitioners in Gateshead can access information on customers at the point of need, thus allowing decisions to be accurately made based upon the records of the customer.	Working Together	Adult Social Care	Produced and cascaded through leadership briefings the Adult Social Care Digital Vision for the next three years. Staff have had a thorough opportunity to understand the scope and range of digital development taking place within Care Wellbeing & Learning. A graphic has also been developed to simplify the three-year development.
Look to extend the trusted assessor model to include therapists within the QE trust. The trust has identified 2 Occupational therapists and 2 Physiotherapists. The therapists will be shadowing our Enablement service to understand what their role is. The plan is to expand the trusted assessor model across the trust, however we need to ensure everyone understands what we mean by "trusted assessor" as different trusts and LA have interpreted differently.	Working Together	Provider Services	Expanded the Trusted Assessor model augmenting the hospital discharge pathway from hospital into the Local Authority's PRIME domiciliary care service.
Work with North East Ambulance Service on a rapid fall's response service.	Working Together	Care Call	Commenced the Rapid Falls response service in conjunction with the North East Ambulance service. The service started on 10th December 2018, so far care call has responded to 39 falls between the hours of 6pm and 8am. A report will be going to the CCG Board in June to look at future funding of the project.
Ensure that regular updates are provided on an emerging Integrated Care System and Integrated Care Partnerships for the north east and Cumbria	Working Together	Public Health	Updates have been provided to the Northumberland, Tyne & Wear & North Durham STP Health Scrutiny Committee on the development of ICPs and an ICS for the north east and north Cumbria. This included updates on related issues such as workforce, prevention agenda and care closer to home (frailty).

Action	Thrive Pledge	Service Area	Update
Explore with the Gateshead Mental Health and Wellbeing Partnership opportunities and the potential for targeted partnership work across the life course with an initial focus on working age males and suicide prevention. Further scoping of options for targeted work on children and young people's mental health and social isolation.	Working Together	Public Health	Explored potential opportunities for targeted work across the Life Course. This has focussed on; Children and Young People and getting agreement on an organised approach to prevention work in Primary Schools, Middle aged men and Suicide Prevention with engagement and development of sub regional partnerships and interventions as part of the Integrated Care System (ICS) and Social Isolation research in partnership with Northumbria University. The report was launched and presented at a Regional event and further sharing of the findings continue to be requested.
Appoint Provider for new ISHS contract start date April 1st, 2019	Working Together	Public Health	Completed procurement and South Tyneside and Sunderland NHS Foundation Trust have been appointed on a 4-year contract with 2 x 12 month extension options
Aim to complete contracts process for all pharmacies to supply 2nd Emergency Hormonal Contraception drug option	Working Together	Public Health	Finished the contracts process and now all public health contracted pharmacies are now able to supply both drug options of Emergency Hormonal Contraception
Deliver upon all recommendations of Emergency Hormonal Contraception Audit	Working Together	Public Health	Implemented the recommendations of the Emergency Hormonal Contraception audit and these have been checked and validated by internal audit
Carry out an audit of the files from the Coroner's Office that are listed as Suicide or injury undetermined deaths on 18 October 2018. This is an annual audit and helps to identify high risk groups, risk factors and identify potential preventative measure that can be built into the Suicide Prevention Action Plan	Working Together	Public Health	Completed the audit of files from the Coroner's Office and the findings shared with the Gateshead Mental Health and Wellbeing, the Public Health Team and the Newcastle Gateshead Mental Health Advisory Group. A further Audit will be carried out in October 2019 with good working relationships established with the Coroner's office.
Plan and finalise an independent external evaluation of the MECC programme in partnership with FUSE, the Centre for Translational Research in Public Health. FUSE brings together the five North East Universities of Durham, Newcastle, Northumbria, Sunderland and Teesside in a unique collaboration to deliver robust research to improve health and wellbeing and tackle inequalities	Working Together	Public Health	Funding has been secured to commission an external evaluation of the MECC programme. Working with the Institute for Local Governance and Fuse (a collaboration between the Region's five universities on public health research), a project brief has been developed and disseminated to generate expressions of interest from researchers to carry out the evaluation. The intention is to start the evaluation in January with a completion date of July 2019.

Action	Thrive Pledge	Service Area	Update
Plan and finalise an independent external evaluation of the MECC programme in partnership with FUSE, the Centre for Translational Research in Public Health. FUSE brings together the five North East Universities of Durham, Newcastle, Northumbria, Sunderland and Teesside in a unique collaboration to deliver robust research to improve health and wellbeing and tackle inequalities	Working Together	Public Health	Funding from Public Health and the Institute for Local Governance (ILG) has been used to commission an external evaluation of the MECC programme. Working with the ILG and Fuse (a collaboration between the Region's five universities on public health research), a project brief was developed and disseminated to generate expressions of interest from researchers to carry out the evaluation. A competitive application process saw Northumbria University secure this commission and work is currently underway on the evaluation with a final report expected in August 2019.
Explore local buy in for Public Health England's Prevention Care Concordat. The Prevention Concordat for Better Mental Health Programme aims to facilitate local and national action around preventing mental health problems and promoting good mental health. A set of resources is designed to help local areas to put in place effective prevention planning arrangements. These are aimed at health and wellbeing boards, local authorities, clinical commissioning groups and their partners	Working Together	Public Health	The issue of signing up to Public Health England's Prevention Care Concordat within the Council was raised with the Public Health team. It was felt that as the Council is currently signed up to the "Time to Change" pledge, then implementing the Concordat would result in some duplication and consequently was not needed. The Public Health Programme Lead has attended some regional events around promoting the Concordat and it was concluded that if a decision was taken to move in this direction it would be easy to sign up to
Provide support for Gateshead NHS Foundation Trust's implementation of the Smokefree NHS agenda, including work to improve the delivery of Very Brief Advice across the Trust and the referral pathway to stop smoking services	Working Together	Public Health	The NHS Trust has developed an action plan that includes improved activity to identify and treat nicotine dependence amongst patients. Around 500 staff have been trained in Very Brief Advice. Patients will now be asked upon admission if they smoke and, if they do, will be offered NRT for the duration of their stay. Upon discharge, they are asked if they would like help to stop smoking. Those requesting help may be offered text support from the Trust, and/or be referred electronically to the Public Health team. The electronic referral system was established in December 2018, with the Public Health team adopting a new role to co-ordinate and respond to referrals. Those referred are taken through the options available to help them to stop smoking. The Trust is planning further work with respect to controlling smoking on the premises and an agreed policy on the use of electronic cigarettes.

Action	Thrive Pledge	Service Area	Update
Work with the Gateshead Recovery Partnership to mobilise the new substance misuse contract. This includes holding workshops (in October – invitations were sent to Elected Members, key partner agencies, and service users) to raise awareness of the new service	Working Together	Public Health	The new Substance Misuse Service is fully mobilised, and the contract continues to be monitored by Public Health. The launch event was held in October to promote the service across the partnership and work is ongoing to ensure that the service is promoted.
Public Health will be piloting a new Rapid Responses Drug Related Deaths Panel review process to more quickly determine the causes and circumstances of these deaths and to determine the lessons learned in a timelier manner. This work will also link with the developing Central Drugs Alliance	Working Together	Public Health	In response to the increase in drug related deaths mid-2018, a new review process was implemented. The process was changed from a quarterly meeting to a much more rapid session: a case is now usually discussed within three weeks from notification of the death. The rapid nature of this review process has been much more useful in identifying and implementing lessons at a much earlier stage. Actions identified within the group are followed up within the Substance Misuse and Drug Related Deaths Strategy Group.
Publish a statutory Safeguarding Adults Review for 'Adult B' which aims to identify whether there are lessons to be learned from the way in which agencies worked together for a case in which a person died as a result of potential neglect.	Working Together	Adult Social Care	This did not take place; the complexity of the review has meant that additional time was required by the Independent Author. We are currently hoping that this will go to our July Board, but this is not currently confirmed.
A Risk Summit event is planned for February 2019, to consider risks across the social care market and how those risks can be mitigated.	Working Together	Commissioning	The risk summit has did not take place, a "walk the wall" approach has been undertaken to look at risk in the Social Care Market. The "walk the wall" approach involves partners and providers.

Actions for the next 6 months

- xvii. By September 2019 we will be nearing the completion of the CWL Group tendering process to procure a new social care system, which will then allow a final business case to be submitted to Cabinet for approval in quarter 3 of the financial year.
- xviii. Integrated Care Home Model has commenced with a Steering Group being formed to oversee the project. By the end of June, it is envisaged that both the CCG and LA will agree on a pooled budget approach on the delivery of care for Older People in Gateshead Care Homes.
- xix. Publish and share the learning from a Safeguarding Adults appreciative inquiry instigated following a significant and sustained period of abuse and neglect experienced by an adult in Gateshead.
- xx. Sign off the MAART Policy and Procedures at the Safeguarding Adults Board in July 2019.

- xxi. Work closely with the other 12 Councils in the North East and North Cumbria to develop the infrastructure and system architecture to allow Adult Social Care integration into the North East Health Information Exchange and Great North Care Record.
- xxii. Work with Gateshead College providing weekly work placement opportunities for students who are working towards Health and Social Care qualifications to get experience in the work environment which will help them achieve their goals and benefit the service by future recruitment opportunities. We are looking to place 7 students over a 15-week period.
- xxiii. Complete a suicide audit of Gateshead residents and continue development and delivery of Suicide Prevention work at the Northumberland Tyne and Wear level as part of Integrated Care System level developments.
- xxiv. Targeted support visits will be offered to Providers with low uptake of NHS Health Checks
- xxv. Explore how we might use peer led research to gain further insight into the complex, increasing problem of Drug Related Deaths by seeking the views and knowledge held by our service users. This recognises that the people best placed to deliver this are trained peer-led researchers working alongside research colleagues at Newcastle University
- xxvi. Link with other local authorities who are also experiencing the same challenges in relation to drug related deaths to look at the possibility and benefit of holding joint information sharing and learning events
- xxvii. Work with the Gateshead Recovery Partnership to undertake an in-depth review of the OST dispensing and supervision regimes of service users within central prescribing based on the ASCI risk tool
- xxviii. We have agreed with the Gateshead Mental Health and Wellbeing partnership to focus on two campaigns during 2019/2020, with World Mental Health Day on 10 October 2019 and Every Life Matters, the Public Health England (PHE) One You programme agreed as priorities. A sub group of the Partnership has been developing a Strategic approach to their work and have drafted a plan on a page and outline strategy group which was taken to the Partnership meeting in May 2019 for approval. The sub group will continue to develop the overall strategy and enlist support of the Council's Communications team in developing a finished product.

3.28 Invest in our Economy

Performance Overview

3.29 There are currently no strategic indicators linked to "*Invest in our Economy*"

Achievements, Challenges and Actions

3.30 Developed the Mental Health First Aid (MHFA) network to cover Gateshead with funding from the Making Every Contact Count programme supporting two cohorts of 10 people accessing the national Train the Trainer course. This will give CVS organisations the opportunity for income generation in the coming years and ensure that people working in organisations in Gateshead have easy access to a MHFA course at a reasonable price.

3.31 Support our Communities

Performance Overview

3.32 There are currently no strategic indicators updates linked to “**Support our Communities**”

Achievements, Challenges and Actions

3.33 We have worked with commissioning colleagues in NHSE to ensure the sexual health service offer includes accessing appointments to the National Cervical Screening Programme.

3.34 A Time to Change master class – a growing national social media movement working to change the way we all think about mental health problems, was hosted at the Dryden Centre for organisations who have signed up to Time to Change or who are considering signing up.

3.35 The Gateshead Safeguarding Adults Board and Local Safeguarding Children’s Board launched a new website <http://www.gatesheadsafeguarding.org.uk> and twitter account @gatesheadsafeguarding to improve access to information about safeguarding in Gateshead.

3.36 Funding has been secured to continue to deliver a comprehensive stop smoking service for everyone who lives or works in Gateshead.

3.37 We have dedicated support and commitment to the regional Fresh Tobacco Control Office to continue development of hard-hitting mass media campaigns which have a strong evidence base in triggering quit attempts, encouraging quitters to stay quit, and reducing uptake among children.

3.38 The 'Have a Word' training for delivery of Brief Advice for alcohol has been rolled out across Gateshead within the Voluntary and Community Sector and Library Services. 62 staff and volunteers have been trained to deliver alcohol brief advice as part of the Making Every Contact Count delivery, with a further 12 staff members attending the Train the Trainer courses to build capacity within delivery of alcohol brief advice training ensuring that up-to-date health information about alcohol reaches those in all parts of the community.

Update on actions from previous report

Action	Thrive Pledge	Service Area	Update
Market Position Statement to go online linking in with the JSNA.	Support our Communities	Commissioning	Gateshead Council Market Position statement was approved by Gateshead Council on 24th April. Work has now started to develop the MPS into an online format linked to the JSNA

Action	Thrive Pledge	Service Area	Update
There will be ongoing monitoring of the number and location of needle finds reported which will be reviewed if supplementary actions are required to address this issue	Support our Communities	Public Health	The monitoring of number and location of needle finds is ongoing. Work is ongoing with local needle exchange services to implement measures to tackle the problem when required; this includes working with service users to increase awareness of needle finds and the harm it can cause.
Further develop the Public Mental Health approach in Gateshead by engaging key partners in boosting participation in initiatives such as Time to Change and Five Ways to Wellbeing, as well as promoting positive messages through publicising a number of key national events scheduled throughout the year	Support our Communities	Public Health	Celebrated the main Mental Health Awareness raising day, "World Mental Health Day", at the Shipley Art Gallery, Gateshead on 10 October 2018. There were around 35 organisations supporting people with mental health issues in attendance sharing information and developing networks. This was supported by Gateshead Mental Health and Wellbeing Partnership. Further work has been carried out to plan a way forward in 2019/20 and agreement has been reached to focus on World Mental Health Day and the new Public Health England One You campaign, "Every Mind Matter". This is due to be launched in Autumn 2019. Time to Change and Five Ways to Wellbeing are supporting this work with members of the MECC Team training as trainers in Mental Health First Aid and Connect 5
Develop MECC resources and information to spread the message about the role of MECC and opportunities for health improvement and utilise accessible methods for ensuring accessibility for groups where appropriate	Support our Communities	Public Health	<p>Communication channels are important and the dedicated One You Gateshead Facebook and Twitter pages have been engaging with the Gateshead public for just over a year. Both have been a great resource to share health campaigns and local information. 81,274 people have seen our posts and tweets across both platforms during November 2018, 47,074 on Facebook and 34,200 on Twitter.</p> <p>Better access to resources has been a consistent request and the MECC team have been working with the Our Gateshead community website and VCS organisations to help make the site more accessible, particularly to those who may experience barriers to accessing information. The MECC page on the Our Gateshead website has been recognised regionally and nationally, while Public Health England (PHE) consider it a leading example of best practice.</p>

Actions for the next 6 months

- i. Undertake a Pen Pals project in conjunction with the PICs and Highfield Middle School in Hexham, whereby service users and pupils are making friendships by sharing common interests and updating each others of significant events that have and are happening in their lives.
- ii. Develop a Communications Action Plan to facilitate partners of the Gateshead Mental Health and Wellbeing Partnerships involvement in promotion of Every Life Matters, Public Health England's One you campaign on Suicide Prevention.
- iii. Develop the "a Time to Change" network across Gateshead with a review of Gateshead Councils Time to Change Pledge and Action Plan.
- iv. Develop a Mental Health First Aid (MHFA) network across Gateshead and the delivery of a number of MHFA training courses in the community

- v. Facilitate World Mental Health Day 2019 development by the Gateshead Mental Health and Wellbeing Partnership members
- vi. A project to encourage communication and mutual learning between the Public Health team, stop smoking services, community members and others is being delivered in partnership with Edberts House. Based in the east of Gateshead, the project will develop relationships and insights that will be used to improve outcomes related to reducing harms due to tobacco use.
- vii. Action on smoking to be embedded in all other relevant Council and public sector plans through a Health in All Policies Approach to ensure recognition of the importance of public health across the public sector.
- viii. Implementation of additional support for stopping smoking in secondary care including specialist mental health treatment services as set out in the NHS Long Term plan.

Section B: Performance Overview (Performance is measured against the position at the previous End of Year report (October 17 – March 18))

Indicator	Thrive Pledge	Service Director	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	18/19			
TI11 – Decrease the Percentage of People who are Dissatisfied with Life	Tackle inequality	Alice Wiseman	4.8%	-	5.4% (2017/18)	Declined	<ul style="list-style-type: none"> This is the second period in a row to show an increase in the % of people with a low satisfaction score. Gateshead is higher but not significantly higher than both the England (4.4%) and the North East (5.0%) rates. Gateshead has the 4th highest low satisfaction score of the 12 North East LA's and the 6th highest of the 16 comparable CIPFA LA's Gateshead's rate is the 28th highest of the 152 English UTLA's, however there were only 93 published LA's due to suppression or insufficient sample size. It is important to remember that this is just an estimate based on a sample of the population. It is a big step to infer that the % of people reporting a certain level of well-being is true for all people living in that area. There are a number of factors (not just the place) that influence personal well-being, for example; health, relationships and employment situation.
TI8 – Prevention of ill health: % of mothers smoking at time of delivery	Tackle inequality	Alice Wiseman	9.9%	-	15.1% (2017/18)	Declined	<ul style="list-style-type: none"> This is the second increase in the % of mothers smoking at time of delivery in the last two years from its previous lowest point in 2015/16 Gateshead is significantly higher than the England rate (10.8%) but we are lower though not significantly lower than the North East rate (16.3%) Despite this increase Gateshead has the 4th lowest rate of the 12 North East LA's and the 4th lowest rate of its 16 comparable CIPFA LA's However, when compared to the 152 English UTLA's Gateshead has the 31st Highest rate in the England.
TI9 - Reduce Excess weight 4-5 year olds - excess weight =obese/overweight	Tackle inequality	Alice Wiseman	18.1%	-	22.5% (2017/18)	Declined	<ul style="list-style-type: none"> This is the first increase in excess weight for 4-5 year olds in the last 4 years of data Despite increase Gateshead is still significantly better than the North East (25.0%) and is worse but not significantly worse than the England average of 22.4% Gateshead had the 4th lowest prevalence of excess weight amongst the 16 CIPFA (nearest neighbour) LA's. We have the lowest prevalence of Excess weight in 4-5 year olds of all 12 of the North East LA's

Indicator	Thrive Pledge	Service Director	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	18/19			
							<ul style="list-style-type: none"> Nationally Gateshead had the 77th highest prevalence of excess weight of the 150 published English upper tier local authorities.
TI10 - Reduce excess weight 10-11 yr. olds (excess weight =Obese/overweight)	Tackle inequality	Alice Wiseman	25%	-	36.8% (2017/18)	Improved	<ul style="list-style-type: none"> Excess weight for 10-11 year olds has decreased for the first time in 2 years. Despite the decrease Gateshead is still significantly worse than the England average of 34.3% and is better but not significantly better than the North East (37.5%). Gateshead had the 8th highest prevalence of excess weight amongst the 16 CIPFA (nearest neighbour) LA's, and the 4th lowest of the 12 North East LA's Nationally Gateshead had the 55th highest prevalence of excess weight of the 150 published English upper tier local authorities.
WT8 – Stabilise the Rate of Hospital Admissions per 100,000 for Alcohol Related Harm (Narrow)	Working Together	Alice Wiseman	789 per 100,000	-	1003 per 100,000 (2017/18)	Declined	<ul style="list-style-type: none"> This is only the 2nd time in 10 periods of data that Gateshead has been higher than 1000 per 100,000 and seen more than 2000 admissions. Gateshead is significantly higher than both the North East (862 per 100,000) and the England average (632 per 100,000) It is unlikely at this stage unless there are some significant reductions that Gateshead will reach its 5-year target Gateshead has the 2nd highest rate for this indicator in the North East, the highest of its 16 comparable CIPFA LA's, and is the 3rd highest of the 152 English UTLA's.
TI12 – Gap in the employment rate between those with a learning disability and the overall employment rate	Tacking Inequality	Alice Wiseman	58.6% points	-	63 %points (2017/18)	Declined	<ul style="list-style-type: none"> Despite the increase on the previous period Gateshead is still significantly lower than the England rate (69.2 % points) and is lower but not significantly lower than the North East rate (65.1 % points) Gateshead has the 4th lowest rate of the 16 comparable CIPFA LA's and the 5th lowest of the 12 North East LA's. Gateshead has the 30th lowest % point gap of the 152 upper tier English LA's.
WT4: Hospital admissions for self-harm rate per100,000 (aged 10-24 years)	Working Together	Alice Wiseman	Reduce	Reduce	386.1 per 100,000 (2017/18)	Improved	<ul style="list-style-type: none"> This is Gateshead's lowest rate per 100,000 since the data was first published in 2011/12 Gateshead is significantly lower than the North East (458.0) and is lower but not significantly lower than the England value (421.2).

Indicator	Thrive Pledge	Service Director	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	18/19			
							<ul style="list-style-type: none"> As a result of the decrease Gateshead is still on course to meet the stated 5-year (19/20) target of reducing the rate per 100,000 (no specific target was set). This is the first time that Gateshead has been lower than both the North East and England rates in the same period Gateshead has the 5th lowest rate of the 12 North East LA's, the 5th lowest rate of its 16 comparable CIPFA neighbours. Compared to the other 152 English UTLA's Gateshead has the 90th highest rate in England
TI13 – Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate	Tacking Inequality	Alice Wiseman	59.4% points	-	68.8 % points (2017/18)	Declined	<ul style="list-style-type: none"> Gateshead is higher but not significantly higher than the England rate (68.2 % points). However, we are significantly higher than the North East rate (62.0 % points) Gateshead has the highest of the 12 North East LA' and the 4th highest of the 16 comparable CIPFA LA's Gateshead has the 52nd highest % point gap of the 152 upper tier English LA's.
TI14 – Excess under 75 mortality rate in adults with serious mental illness (<i>indirectly standardised ratio</i>)	Tackle inequality	Alice Wiseman	351.8	-	397.3 (2014/15)	No Change	<ul style="list-style-type: none"> No change on previous year report Next update to this indicator is currently unknown
TI15: Reduce Mortality from Causes Considered Preventable	Tackle inequality	Alice Wiseman	182.7 per 100,000	-	236.8 per 100,000 (2015-17)	Improved	<ul style="list-style-type: none"> Even with the improvement on the previous periods Gateshead is now significantly worse than the North East rate of 223.4 per 100,000 and the England rate of 181.5 per 100,000. Gateshead has the 4th highest rate of preventable mortality of the 12 North East LA's and compared to its 16 CIPFA neighbours it has the 3rd highest. When we compare against the 151 published English UTLA's Gateshead has the 17th highest rate. 5 of the 20 highest rates in England are from the North East and 4 of the 20 highest are part of Gateshead's CIPFA grouping.
TI16 - Healthy Life Expectancy at Birth (Male)	Tackle inequality	Alice Wiseman	63.7 years	-	59.6 Years (2015-17)	Improved	<ul style="list-style-type: none"> This is the 2nd period in a row to show an increase in Male Health life expectancy Gateshead is higher but not significantly higher than the North East (59.5 years), but we are still significantly lower than the England value (63.4 years)

Indicator	Thrive Pledge	Service Director	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	18/19			
							<ul style="list-style-type: none"> This is the first time in the published data that Gateshead Male HLE has been higher than the North East average Gateshead has the 7th highest comparable CIPFA HLE and the 4th highest in the North East We do however have the 31st lowest HLE of the 150 calculated English UTLA's. This is an improvement on the previous period where we were the 27th lowest.
TI17 - Healthy Life Expectancy at Birth (Female)	Tackle inequality	Alice Wiseman	64.0 years	-	59.1 years (2015-17)	Declined	<ul style="list-style-type: none"> This period has shown the highest recorded decrease in female HLE since the published data became available This is now the 2nd lowest recorded HLE for females in Gateshead since the data became published (2009-11) Gateshead is lower but not significantly lower than the North East (60.4 years), but we are significantly lower than the England value (63.8 years) Gateshead has the 7th lowest comparable CIPFA HLE and the 5th lowest in the North East We have the 26th lowest HLE of the 150 calculated English UTLA's.
TI18 – Gap in Life Expectancy at Birth between each local authority and England as a whole (Male)	Tackle inequality	Alice Wiseman	-1.2 years	-	-2.0 years (2015-17)	No Change	<ul style="list-style-type: none"> Performance has remained the same after the current update compared to previous end of year report
TI19 – Gap in Life Expectancy at Birth between each local authority and England as a whole (Female)	Tackle inequality	Alice Wiseman	-1.2 years	-	-1.7 years (2015-17)	Improved	<ul style="list-style-type: none"> Gateshead is higher but not significantly higher than the North East gap (-1.5 years) but we are significantly higher than the England benchmark of 0.0 years. Gateshead has the 6th lowest gap of the 12 North East LA's and the 7th highest Gap of the 16 comparable CIPFA LA's Of the 150 published English upper tier LA's Gateshead had the 25th highest gap in life expectancy.
TI20 – Health Inequalities – Reduce the inequalities in Life Expectancy across Gateshead (Male)	Tackle inequality	Alice Wiseman	8.2 years	-	10.8 years (2015-17)	Declined	<ul style="list-style-type: none"> Gap in inequalities in life expectancy for males has increased on the previous end of year report. This is the 5th increase in the 6 periods of published data. This is Gateshead's highest published Inequality in life expectancy at birth for men Gateshead is in the second highest deprivation quintile in England for this indicator. Gateshead has the 4th lowest Inequality in life expectancy of the 12 North East LA's and 8th lowest of its comparable CIPFA LA's

Indicator	Thrive Pledge	Service Director	Target		Most Recent Performance	Direction of Travel	Comments and Actions
			2020	18/19			
TI21 – Health Inequalities – Reduce the inequalities in Life Expectancy across Gateshead (Female)	Tackle inequality	Alice Wiseman	7.3 years	-	9.0 years (2015-17)	Declined	<ul style="list-style-type: none"> • Gap in inequalities in life expectancy for females has increased on the previous end of year report. • This is the 5th increase in the 6 periods of published data. • This is Gateshead's highest published Inequality in life expectancy at birth for females • Gateshead is in the worst deprivation quintile in England for this indicator. • Gateshead has the 6th highest Inequality in life expectancy of the 12 North East LA's and 4th highest of its comparable CIPFA LA's
WT10 - Delayed Transfers of care from hospital, average days per day, per 100,000 population	Working Together	Steph Downey	-	4.0 per 100,000	6.58 per 100,000 (Apr 18 – Mar 19)	Improved	<ul style="list-style-type: none"> • The performance data for 17/18 was not available at the time so we are comparing performance to the now published rate of 6.59 per 100,000. • We have exceeded the target of 4.0 per 100,000, however, we were always aware that this would be an immensely challenging target to reach • We are lower than the England rate for March 19 of 10.24 per 100,000 and lower than the calculated average of the 16 comparable CIPFA LA's (8.90 per 100,000). • We are higher than the North East rate of 5.32 per 100,000 and have the 8th lowest rate of the 16 comparable CIPFA LA's • The primary areas for delays are "Care Package in Own Home" and "Patient/Family Choice".
PF11 – Helping Older People to live independently – the proportion of older people 65+ still at home 91 days after hospital discharge to a reablement service	People & Families	Steph Downey	87.5%	87.5%	86.1% (Oct - Dec discharges)	Improved	<ul style="list-style-type: none"> • The ASCOF definition monitors the indicator for only Oct, Nov and Dec discharges. • Performance shows that 155 out of 180 people remained at home giving a result of 85.9%, which is currently lower than the 87.5% target but an improvement on the previous period.
LW14(b) – Support for Carers in BME Communities	Strategic	2020 Tracker	2.0%	2.0%	0.9%	Declined	<ul style="list-style-type: none"> • 13 BME Carers out of a total 1464 carers have had an assessment, review or been in receipt of a carer related service during the period of April to March 2018/19 • There has a slight change compared to the same time last year (Apr to Mar 2017/18) where the proportion of BME carers was 1.1% (14 out of 1230).

Appendix 1: Changes to Strategic Indicators

The following changes are being proposed to be implemented from the 2019/20 performance reporting cycle:

Care Health & Wellbeing OSC

The following indicator has been proposed to be monitored through this OSC that would measure the **increase in the number of people accessing the Supporting Independence Service, helping people to stay in their own homes for longer.**

These changes will be incorporated into the first report of the 2019/20 cycle.

CWL Strategic Priorities

February 19

Making a Gateshead a place where everyone can thrive and reach their full potential

Put people and families at the heart of everything we do	Tackle inequality so people have a fair chance	Support our communities to support themselves and each other	Invest in our economy to provide sustainable opportunities for employment, innovation and growth across the borough	Work together and fight for a better future for Gateshead
<p>1. Ensure people and families have access to relevant information, advice and guidance, in order to access appropriate and timely support.</p> <p>2. Keep all children and adults living safely in their own homes as long as possible and positively and proactively manage risk, with least restrictive interventions.</p> <p>3. Ensure that choice and control are embedded across all services and functions.</p> <p>4. Strengthen the voice of the child.</p> <p>5. Deliver services locally as the preferred option</p> <p>6. Ensure the CWL accommodation strategy provides a wide range of suitable properties to promote independence and reduce costs.</p>	<p>1. Promote educational inclusion and reduce the numbers of pupils being permanently excluded from school.</p> <p>2. To reduce inequality in educational achievement by raising educational outcomes for all children and especially the most vulnerable and disadvantaged so that they are more able to thrive in the next phase of their lives.</p> <p>3. To maintain strong leadership of maintained schools and support children to achieve well by ensuring above average standards in statutory assessments.</p> <p>4. Take a whole system approach to planning and delivering services based on need that aim to reduce inequalities and improve healthy life years</p> <p>5. Reduce the number of children looked after by the council and subject to child protection plans.</p> <p>6. Return OOB children to Gateshead and place no children more than 20 miles from home.</p> <p>7. Maintain a single-minded focus on prevention and wellbeing to increase healthy life expectancy and quality of life of Gateshead residents.</p>	<p>1. Take an asset based, holistic approach to meeting the needs of vulnerable children and adults.</p> <p>2. Take a system wide place-based approach to meeting the needs of children and adults.</p> <p>3. Work with all partners and communities to minimise social isolation and promote volunteering.</p> <p>4. Re-enable residents so that individuals' independence is maximised and reduce the numbers of people accessing residential care.</p> <p>5. To ensure all children of school age receive an education which prepares them fully to become respectful, responsible, healthy and resourceful members of our multi-cultural society.</p>	<p>1. Recruit and train the best foster carers to care for LAC in Gateshead.</p> <p>2. Recruit and retain a stable, motivated and highly skilled workforce.</p> <p>3. Stimulate the market and commission smartly to enable CWL to secure effective and best value for money services.</p> <p>4. Improve accountability and responsibility for managing budgets ensuring expenditure is controlled within the resources available and deliver agreed budget savings.</p>	<p>1. Work with partners and communities to ensure that Safeguarding is everybody's business and ensure that allegations of abuse are appropriately responded to.</p> <p>2. Work efficiently with all partners to prevent problems emerging and intervene early to ensure problems do not escalate to the point where more targeted services are necessary.</p> <p>3. Work closely with partners to streamline the delivery of support to people; reducing duplication and ensuring a customer focused approach.</p>



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CARE HEALTH AND WELLBEING
OVERVIEW AND SCRUTINY
COMMITTEE
25 June 2019

TITLE OF REPORT: Suicide; Every Life Matters.

REPORT OF: Iain Miller, Programme Lead

Summary

Following consultation with Councilors, the Care Health and Wellbeing Overview and Scrutiny Committee (OSC) agreed its annual work programme for 2019/2020. As part of this programme it was agreed that a review of suicide in Gateshead would take place. This scoping report describes the process for taking the proposed review forward and the evidence that will be considered. It seeks the support of the OSC committee over the coming year to consider the context of suicide from a local, regional and national perspective and to agree a local way forward for Gateshead. To support their scrutiny of the topic the committee will hear from those working to address suicide in Gateshead and further afield, sharing their experience and knowledge on the issue.

Background

1. Suicide prevention policy in the UK has, in recent decades, developed and expanded considerably as concerns around suicide rates have intensified. In 2012 the Government launched their integrated Government strategy "Preventing Suicide in England: a cross-government outcomes strategy to save lives".¹ Since 2017 it has included a commitment to reduce the rate of suicides by 10% in 2020/21 nationally, as compared to 2016/17 levels.²
2. Since 2012-2014 suicide rates per 100,000 of the population nationally have been showing a downward trend. In 2015-2017 the rate for all persons in England was 14.7 deaths per 100,000 population, which is one of the lowest rates observed since the suicide data series began in 1981. However emerging findings for 2018 identify a slight increase.
3. In Gateshead, the suicide rate for all persons increased from 2010-2012, when it stood at a lowest recorded level of 6.2 per 100,000, to 9.6 per 100,000 in 2014/16 with no change, 9.6 per 100,000, for 2015/17 (the latest recording period). Underlying this have been increases in both male and female rates.

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

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

4. During the same period, male suicide rates have increased from 10.6 per 100,000 to 15.1 per 100,000.
5. Female suicide has increased from a total of five episodes in 2010-2012 (rate suppressed due to low numbers) to a rate of 4.2 per 100,000 (11 people) in 2015 – 2017, a slight reduction from 4.5 per 100,000 (12 people) in 2014-16.³
6. Since 1984 it has been consistently held in England that the standard of proof in suicide cases should be the same as in criminal prosecutions, beyond reasonable doubt,... although there is no crime involved and an inquest is not a criminal trial. The comparative difficulty in obtaining a conclusion of suicide may well mean that official statistics significantly underestimate the occurrence of suicide. However, a recent judgment in the Court of Appeal in the case of *Maughan -v- HM Senior Coroner for Oxfordshire (Maughan)* [2019] EWCA Civ 809 has confirmed that the standard of proof required for a jury to return a conclusion of suicide is the civil standard, i.e. the balance of probabilities. This applies whether it is a short form or narrative conclusion. This is likely to lead to an increase in the numbers of Suicide across the country, including Gateshead.⁴
7. Recent Audits of Suicide and unintentional deaths in Gateshead have identified the impact this could have with around a third of the files reviewed by Council employees showing a verdict of Suicide, the others include; Open Verdicts, Accidental/Misadventure and Narrative verdicts.

Scope of the review

8. The review will explore these trends further through local, regional and national data to provide context for the current situation for suicide in Gateshead. An overview of key risk factors and current practice will be presented, and the evidence base of what works in suicide prevention and intervention will be explored.
9. *Trends* The Suicide rates in Gateshead had been increasing each reporting period since 2010 – 2012 for all three categories; All Persons, Male and Female, up to 2015 – 2017 when rates for All persons plateaued and Females decreased slightly as highlighted by Public Health England in their Fingertips Profile.³ This is against the national trend which has seen rates falling in All persons in recent years.

Despite the local rate increases over time, Gateshead still compares favourably with national and regional figures, lower than Region and similar to National for All Persons, Lower than Region but higher than national for Men and lower than Regional and National levels for Females.

³ Public Health England Fingertips Profiles (February 2019)

⁴ [Standard-proof-suicide-verdicts-inquest-criminal-or-civil](#)

Table 1: Suicide rates per 100,000 population 2015 - 2017

	Gateshead	NE Region	England
Persons (All)	9.6	10.8	9.6
Male	15.1	16.8	14.7
Female	4.2	5.0	4.7

10. *Key risk factors* The key Risk Factors identified by Public Health England (PHE) Fingertips can be found at the following link [Risk Factors identified by PHE Fingertips](#) They include factors such as; relationship difficulties, divorce/separation, recent bereavement, depression, reports of self-reported wellbeing, social isolation and poverty.

Those people with long term health conditions, those in contact with the criminal justice service and those who have seriously self-harmed and previously attempted suicide are more at risk.

The most recent Audit of Suicide and undetermined deaths of Gateshead residents highlighted:

48% were unemployed or on long term sick leave.

48% had relationship problems.

62% were single, divorced or separated.

52% were known to have either a drug or alcohol problem or both.

24% had previously attempted suicide

11. *Current practice*

11.1 Work is being carried out at three different geographical levels:

- Local – Gateshead suicide prevention focus is facilitated through the multi-agency Mental Health and Wellbeing Partnership which is developing a strategic approach to public mental health.
- Sub Regional - Funding has recently been secured for partnership working at this level, covering the 6 local authority areas of Gateshead, Northumberland, Newcastle, North Tyneside, Sunderland and South Tyneside.
- Regional – Linking into the regional work that is emerging as part of the Integrated Care System (ICS) mental health workstream.

11.2 Suicide prevention work sits as part of the Public Mental Health agenda and a wide range of Public Mental Health Interventions are being delivered and developed in Gateshead by the Gateshead Mental Health and Wellbeing Partnership members. At a Population level there is a focus

on encouraging organisational sign up to Time to Change, the anti-stigma campaign, and focussed work into local communities with The Five Ways to Wellbeing. There is also support of World Mental Health Day each October with a strong presence from Statutory and Voluntary Community Sector organisations supporting people with Mental Health related issues and the partnership will be focussing on PHE's One You, Every Mind Matters campaign when it launches in the Autumn. The Partnership has also developed a local Suicide Prevention Action Plan.

11.3 Gateshead Public Mental Health strategy has adopted a life course focus and the Gateshead Suicide Prevention Action Plan is part of this. As part of the life course approach this strategy is also looking at:

- Interventions focussed on Children and Young People.
- Community based interventions targeted on Males in the 40 – 55 years age group with a particular focus on suicide prevention.
- Tackling social isolation in older people, using the results from research conducted by Newcastle and Northumbria Universities of 18 projects in Gateshead to guide a way forward.

11.4 Gateshead Council has signed the Time to Change pledge and has made a commitment to change how we think and act about mental health in the workplace. An action plan is in place aiming to tackle the stigma of mental health in the workplace with all actions developed to improve people's mental health and wellbeing.

Gateshead Council also holds the Continuing Excellence level of the Regional Better Health at Work Award which also has improving the mental health of the workforce as one of the key criteria for award holders.

12. Current evidence base

12.1 Professor Louise Appleby, lead for the National Suicide Prevention Strategy and is Professor of Psychiatry at the University of Manchester and Director of the National Confidential Inquiry into Suicide and Homicide by People with Mental Illness, has identified key areas for action including:

- Reducing risk in men, especially in middle age, with a focus on: economic factors such as debt; social isolation; drugs and alcohol; developing treatment and support settings that men are prepared to use
- Preventing and responding to self-harm, with a range of services for adults and young people in crisis, and psychosocial assessment for self-harm patients
- Addressing Mental health of children and young people, with joint working between health & social care, schools & youth justice, and

plans to address the drastic increase in suicide risk between 15 to 19 year olds

- Treatment of depression in primary care, with safe prescribing of painkillers & antidepressants
- Acute mental health care, with safer wards & safer hospital discharge, adequate bed numbers & no out of area admissions
- Tackling high frequency locations, including working with local media to prevent imitative suicides
- Reducing isolation, for example through community-based supports, transport links and working with third sector
- Bereavement support, especially for people bereaved by suicide

12.2 Over the long term, local areas should aim to tackle all six areas of the national strategy. Addressing self-harm was added in 2017 as part of the Third Progress report of the National Strategy resulting in the seven areas shown below:

- Reducing the risk of suicide in high risk groups;
- Tailoring approaches to improve mental health in specific groups;
- Reducing access to means of suicide;
- Providing better information and support to those bereaved or affected by suicide;
- Supporting the media in delivering sensitive approaches to suicide and suicidal behaviour;
- Supporting research, data collection and monitoring; and
- Reducing rates of self-harm as a key indicator of suicide risk.

5

The Process

13. The process and timescale for the review in this paragraph is set out in Appendix 1. It is proposed that the review will take place over a ten-month period from 25 June 2019 to 21 April 2020. It will involve the presentation of expert evidence, research and Experts by Experience.

⁵ [Preventing suicide in England: Third progress report of the cross-government outcomes strategy to save lives](#)

14. While the Review is led by the Council, partner organisations will be involved to ensure an approach that reflects the complexity, prevalence and extent of the response.
15. It is proposed that the first evidence gathering session will provide a detailed overview of suicide from a legal/Coroners perspective and also the impact of suicide from someone with lived experience, enabling factual information to be presented to provide members with insight into the key factors involved and the impact of suicide on a community. Subsequent evidence gathering sessions will include presentations from;
 - 15.1. Members of the Public Health Team describing the process and findings of local Audits of Gateshead data on Suicide and undetermined injury.
 - 15.2. Regional leaders and our partners from Newcastle Gateshead Clinical Commissioning Group and on the work at Integrated Care System (ICS) level and sub regional sub groups.
 - 15.3. Representatives from the Criminal Justice system and Voluntary Community Sector (VCS) identifying high risk groups and what can be done to minimise risk.
16. Evidence will be sought from key data sources such as Public Health England, Gateshead Mental Health and Wellbeing Partnership members, the Newcastle and Gateshead Clinical Commissioning Group, Gateshead Hospitals NHS Foundation Trust, Northumbria Tyne and Wear NHS Foundation Trust and leading academics and clinicians.

Recommendations

17. Overview and Scrutiny Committee is recommended to agree the scope, process and timescale as set out in this report.

Contact: Alice Wiseman Ext: 2777

Appendix 1

Progress of the Review

This appendix sets out the standard framework for Overview and Scrutiny Committees to agree and conduct policy reviews and includes proposals specific for this review.

Stage 1

The scope, purpose and intended outputs of the Review should firstly be agreed by the Cabinet and the relevant Overview and Scrutiny Committee. The recommendations of Advisory Groups may also be considered if appropriate.

Proposal

- 25th June 2019: Scoping report to Scrutiny Committee

Stage 2

Evidence may be gathered by the Overview and Scrutiny Committee making visits as necessary or inviting persons and organisations to give evidence before it. Relevant Group or Strategic Directors and the Chief Executive will assist the Overview and Scrutiny Committee as necessary. The evidence gathered by the Overview and Scrutiny Committee will be written up by officers.

Proposal

- 10th September 2019, 29th October 2019, 10th December 2019 and 28th January 2020 - To have evidence-gathering events that will involve research, presentations by relevant officers, outside organisations and site visits if appropriate (details to be confirmed).

Stage 3

The Overview and Scrutiny Committee will then meet (as many times as is necessary) to analyse the information gathered and prepare its conclusions.

Proposal

- 3rd March 2020 - Committees to consider an interim report, prepared by the Lead Officers, and to analyse the evidence presented.

Stage 4

Officers will then prepare a report on the issue based on the views of the Overview and Scrutiny Committee. Officers will submit this report to the next practicable meeting of the Overview and Scrutiny Committee to secure

agreement that the report is a fair, accurate and complete reflection of the Overview and Scrutiny Committee's conclusions.

Proposal

- 21st April 2020 - Draft final report to be considered by the Committee.

Stage 5

The Chair of the Overview and Scrutiny Committee will then present this report to the Cabinet. The Cabinet may take note of the report, approve all or some of the report's recommendations or refer the report to full Council or to an Advisory Group for further consultation.

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 2019/20.

1. The Committee's provisional work programme was endorsed at the meeting held on 23 April 2019 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 2019/20	
25 June 19	<ul style="list-style-type: none"> • Constitution (to note) • Role and Remit (to note) • Making Gateshead a place where everyone thrives – Year End Assessment and Performance Delivery 2018-19 • OSC Review of Suicide– Scoping Report • Implementation of Deciding Together – Progress Update • Diagnostic X Ray Services - Briefing
10 Sept 19	<ul style="list-style-type: none"> • OSC Review of Suicide – Evidence Gathering • Monitoring - OSC Review - Helping People to Stay at Home Safely • Annual Report of Local Adult Safeguarding Board and Business Plans • Social Services Annual Report on Complaints and Representations – Adults • Work Programme
29 Oct 19	<ul style="list-style-type: none"> • OSC Review –Evidence Gathering • Green Paper on Adult Social Care -Council Response • Gateshead Healthwatch Interim Report • Health & Well-Being Board Progress Update • Work programme
10 Dec 19	<ul style="list-style-type: none"> • OSC Review – Evidence Gathering • Making Gateshead a place where everyone thrives – Six Monthly Assessment of Performance and Delivery 2019 -20 • Sepsis Prevention- Case Study • Work Programme
28 Jan 20	<ul style="list-style-type: none"> • OSC Review – Evidence Gathering • Drug Related Deaths • Work Programme
3 Mar 20	<ul style="list-style-type: none"> • OSC Review – Interim Report • Gateshead Healthwatch • Support for Carers (Adults) • Work Programme
21 April 20	<ul style="list-style-type: none"> • OSC Review of Suicide–Final Report • Monitoring - OSC Review - Helping People to Stay at Home Safely • Health and Well-Being Board – Progress Update • OSC Work Programme Review

Issues to slot in

- Universal Credit – Impact on Emotional Health and Wellbeing (possible joint meeting with other OSCs)
- **Deciding Together Delivering Together – Progress Updates / Potential Consultation**
- 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
- ICS Updates - as appropriate.