

# GATESHEAD HEALTH AND WELLBEING BOARD AGENDA

Friday, 21 April 2023 at 10.00 am in the Whickham Room - Civic Centre

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From the Chief Executive, Sheena Ramsey

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Item	Business
1	<b>Apologies for Absence</b>
2	<b>Minutes</b> (Pages 3 - 10)  The minutes of the meeting held on the 27 <sup>th</sup> January 2023 are attached for approval, together with the Action List
3	<b>Declarations of Interest</b>  Members of the Board to declare an interest in any particular agenda item.
4	<b>Updates from Board Members</b>  <u>Items for Discussion and/or Agreement</u>
5	<b>Health and Wellbeing Strategy: Progress summary, draft approach and plan for implementation - Louise Sweeney</b> (Pages 11 - 80)
6	<b>Feedback from Planning Session on Gateshead Health and Care System</b> (Pages 81 - 88)
7	<b>Physical Activity Strategy - Michael Lamb and Natalie Goodman</b> (Pages 89 - 132)
8	<b>Notification of Removal from the Pharmaceutical List &amp; Changes to Pharmacy Opening Hours - Edward O' Malley</b> (Pages 133 - 136)
9	<b>Gateshead Cares System Board Update - Mark Dornan / All</b>  <u>Items for Information</u>
10a	<b>Lloyds Pharmacy at Harras Bank, Birtley: Change to Supplementary Hours</b> (Pages 137 - 138)
10b	<b>Bestway Pharmacy at Prince Consort Road: Change to Supplementary Hours</b> (Pages 139 - 140)
10c	<b>Bestway Pharmacy at Beaconsfield Road: Change to Supplementary Hours</b> (Pages 141 - 142)
11	<b>A.O.B.</b>

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## GATESHEAD METROPOLITAN BOROUGH COUNCIL GATESHEAD HEALTH AND WELLBEING BOARD MEETING

Friday, 27 January 2023

<b>PRESENT</b>	Councillor Jennifer Reay	Gateshead Council ( <i>Vice-Chair in the Chair</i> )
	Councillor Leigh Kirton	Gateshead Council
	Councillor Martin Gannon	Gateshead Council
	Councillor Gary Haley	Gateshead Council
	Councillor Michael McNestry	Gateshead Council
	Councillor Pamela Burns	Gateshead Council
	Councillor Jane McCoid	Gateshead Council
	Councillor Jonathan Wallace	Gateshead Council
	Alice Wiseman	Gateshead Council
	Dr Mark Dornan	Newcastle Gateshead CCG
	Claire Wheatley	Northumbria Police
	Helen Fergusson	Gateshead Council
	Dale Owens	Gateshead Council
	Peter Udall	Gateshead Council

<b>IN ATTENDANCE:</b>	Alan Pitchford	Northumbria Police
	Alison Dunn	Gateshead CAB/Gateshead Council
	Gavin Bradshaw	Gateshead Council
	John Costello	Gateshead Council
	Karen Soady	T&W Fire and Rescue
	Kirsty Roberton	Gateshead NHS FT
	Lisa Sweeney	Gateshead Council
	Lynn Wilson	NHS/Gateshead Council
	Michael Johansen	Gateshead Council
	Nicola Allen	CBC Health Federation
	Phil Hindmarsh	Gateshead Council
	Steph Downey	Gateshead Council
	Steve Kirk	CBS Health Federation
	Suzanne Dunn	Gateshead Council
	Vicky Sibson	Gateshead Council
	Yvonne Probert	Healthwatch Gateshead

### HW382 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Lynne Caffrey, Councillor Bernadette Oliphant, Helena Barron, Lisa Goodwin and Steve Thomas.

### HW383 MINUTES

RESOLVED:

- (i) That the minutes of the meeting held on 2 December 2022 be approved.

(ii) That the action list update be noted.

**HW384 DECLARATIONS OF INTEREST**

RESOLVED:

(i) That there were no declarations of interest.

**HW385 UPDATES FROM BOARD MEMBERS**

Karen Soady provided a verbal update on behalf of Tyne and Wear Fire & Rescue. The Board were advised that it had been a difficult year for fire services and that internal case reviews are currently underway regarding 9 potential fire-related deaths.

It was reported that one fire-related death had occurred in a North Tyneside care home and that the cause of fire was emollient stained materials being placed in a tumble dryer. Karen suggested that a task and finish group be established to increase awareness of the risks of emollients in Gateshead.

Board members agreed to provide feedback on this incident within their respective service areas; it was also suggested that this matter could be added to the agenda for the upcoming Gateshead Cares Board.

Councillor Gannon provided the Board with an update on devolution; Board members were reminded that the public consultation process is underway and that the results of the consultation are expected in March 2023.

RESOLVED:

(i) That the Board note the updates provided.

**HW386 DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT - ALICE WISEMAN**

The Board received the presentation 'Mind the Gap: Woman and health inequalities' from Alice Wiseman.

From the presentation, the Board noted that gender inequalities have a significant impact on health outcomes and life expectancy. It was also reported that gender inequalities have a disproportionately negative impact on the health and wellbeing of women; it was highlighted that women are more likely than men to experience mental health problems.

The Board were provided with a summary of sectors that have the biggest gender pay gaps; this list included education, finance and healthcare. It was also stated that in Gateshead, women are paid 8% less than men across all sectors. The Board acknowledged that the current cost of living crisis is also affecting women negatively as research shows that women are more likely to have lower paid jobs, are more likely to be in debt and are more likely to have caring responsibilities.

It was reported that there is a need to create and develop sustainable places and communities; it was also noted that in Gateshead cervical screening rates are higher

than the national average. The Board discussed the impact of alcohol specific conditions in women; it was noted that alcoholic liver disease is declining nationally but remains steady in Gateshead.

A summary of recommendations was provided from the report/presentation, the headline recommendations were:

- To give every child the best start in life
- To enable children, girls and women to live their lives to the fullest
- To empower women to have financial stability and independence
- To ensure a health standard of living for all and create generational life changes
- To develop safe, sustainable places and communities
- To ensure women live health lives for longer

The Board questioned the figures described for domestic abuse against women from the report; it was acknowledged that the figures could be much higher as many incidents of domestic abuse can go unreported. It was stated that women will often be the victim of up to seven incidents of domestic abuse before reaching out for help.

The Board discussed further the impact of alcohol abuse on women specifically; the Board agreed that the availability of alcohol and the low prices make it too accessible. The Board also agreed that lobbying at a national level for the introduction of minimum unit pricing should continue to be a priority.

It was explained that despite female education attainment being higher than that of men nationally and locally, the pay gap across sectors is disproportionate. It was noted that there are many factors that have influenced the gender pay gap; this includes cultural expectations for women to be employed in low-paying roles such as domiciliary care as well as the underutilisation of shared parental leave for new parents.

RESOLVED:

- (i) That the Board noted the report.
- (ii) That the Board endorsed the recommendations of the report.

### **HW387 DRAFT SEND STRATEGY - SUZANNE DUNN (PRESENTATION)**

The Board received a presentation providing an update on the area SEND inspection and SEND strategy.

The Board were provided with a summary of area SEND inspections from 2016 – 2022; it was highlighted that inspection outcomes worsened over time. It was noted that in all, Ofsted & CQC inspectors identified over 440 individual areas of significant weakness in the local area SEND services they inspected between 2016 and 2022. The three most common areas of weakness were defective leadership & strategy, poor joint commissioning of education and health services, and flawed Education, Health & Care Plan (EHCP) processes.

It was explained that a new area SEND inspection system is being implemented which will see inspections taking place across a cycle unlike previously. It was also noted that the purpose of inspections will change and will be broader in scope. The Board were also advised that inspections will not only focus on education and health aspects of SEND services but will also look at the social care side of SEND as well as aspects of alternative provision.

The Board noted that the most significant change to the process will see Ofsted and the CQC have a focus on the work being done by services to improve the experiences and outcomes of children and young people with SEND.

It was reported that the new area SEND inspectors won't use the standard Ofsted grading system, instead there will be three possible outcomes which were detailed in the presentation. The Board were also provided with information on the strategic priorities for SEND in Gateshead linking to the Thrive agenda.

The Board were advised that a public consultation would take place across February 2023 with the new strategy due to be published in March 2023.

The Board acknowledged the current work taking place to support children and young people with SEND.

RESOLVED:

- (i) That the Board noted the update.

#### **HW388 FAMILY HUBS - GAVIN BRADSHAW AND MOIRA RICHARDSON**

The Board received a report to seek views on the implementation of the Family Hubs and Start for Life Programme.

It was reported that the Family Hubs and Start for Life offer will have a direct impact on the six policy objectives of the Health and Wellbeing Strategy through the provision of (a) an integrated support offer to families with dependent children and (b) an all-age menu of help and advice for people of all ages, regardless of family composition. It was highlighted that the Government has allocated £301.75million over the next three financial years to enable 75 upper-tier local authorities in England to deliver a package of family support and Start for Life services.

An overview of proposals for the delivery model in Gateshead was provided, this included plans to repurpose existing Children's Centres to deliver bespoke, nurturing spaces for confidential discussions and group activities.

The Board were advised that a delivery plan is to be developed to evidence the Level 3 assessment criteria set by DHSE/DFE. It was also noted that the Start for Life offer will be hosted by the main Gateshead Council website and published in March 2023 alongside designated social media platforms.

The Board noted the update and agreed that the inclusion of voluntary sector partners in the proposals was crucial in ensuring its success.

RESOLVED:

- (i) That the Board supported the proposals reported.
- (ii) The Board requested a further update on the plans at a future meeting.

**HW389 GATESHEAD CARES SYSTEM BOARD UPDATE - MARK DORNAN / ALL**

The Board received a presentation providing an update from the Gateshead Cares System Board.

From the update, the Board received information relating to Mental Health Transformation in terms of locality working; it was highlighted that there will be an event on 'Community Mental Health Transformation in Gateshead...The Story So Far' to be held on 7<sup>th</sup> February 2023. It was also reported that work is underway to develop the crisis pathway.

It was also noted that 'Ageing Well: Transformation of Home Care and Care Homes' was discussed at the Board. It was reported that the short-term nature of additional funding to provide supported discharge from hospital impacts on services. The Board were also advised that home care plays an important role in supporting 'flow' across the health and care system.

The Board received an update on the Gateshead Cares Alliance Agreement: Enablers of Integration 2022/23; it was noted that discussions had taken place on:

- Workforce: making Gateshead a great place to live and work
- Digital Gateshead (incl. digital poverty/inclusion) and;
- Data: Axym/Gateshead Outcomes Framework

The Board agreed that the next meeting should be stood down and replaced with a health and care system focussed session on 10 March to revisit ambitions and priorities.

RESOLVED:

- (i) That the Board noted the update.

**HW390 HEALTH PROTECTION ASSURANCE REPORT - LOUISE SWEENEY**

The Board received a report providing an overview of the health protection system and outcomes for Gateshead as part of the Director of Public Health's responsibility to provide assurance that the current arrangements for health protection are robust and equipped to meet the needs of the population.

It was highlighted in the report that an analysis of data and information regarding health protection outcomes for screening, immunisation and communicable diseases and air quality had highlighted that there are areas that require improvement. It was noted that these improvements would form the assurance priorities for the next year 2022/23.

RESOLVED:

- (i) That the Board noted the arrangements reported.

**HW391 ADULT SOCIAL CARE DISCHARGE FUND PLANNING TEMPLATE RETURN**

RESOLVED:

- (i) That the Board noted this item for information only.

**HW392 WHITWORTH CHEMIST LTD, WREKENTON HEALTH CENTRE - CHANGE OF HOURS**

RESOLVED:

- (i) That the Board noted this item for information only.

**HW393 A.O.B.**

There was no other business.



**GATESHEAD HEALTH AND WELLBEING BOARD  
ACTION LIST**

<b>AGENDA ITEM</b>	<b>ACTION</b>	<b>BY WHOM</b>	<b>COMPLETE or STATUS</b>
<b>Matters Arising from HWB meeting on 27<sup>th</sup> January 2023</b>			
<b>Family Hubs</b>	To receive a further update on plans at a future meeting	Gavin Bradshaw	To feed into Forward Plan
<b>Matters Arising from HWB meeting on 21<sup>st</sup> October 2022</b>			
<b>Partner Updates</b>	To receive an update on Northumbria Police Prevent Strategy at a future meeting	Claire Wheatley	To feed into Forward Plan
<b>Delayed Discharges Harm Assessment</b>	To receive a progress report on delayed discharges in 2023	Jo Baxter / D Owens	To feed into Forward Plan
<b>Matters Arising from HWB meeting on 17<sup>th</sup> June 2022</b>			
<b>Anti-Social Behaviour Review</b>	To bring and update to a future Board meeting	A Tankerville	To feed into Forward Plan
<b>Matters Arising from HWB meeting on 29<sup>th</sup> April 2022</b>			
<b>Climate Change Strategy for Gateshead</b>	To receive an update on progress in taking forward the Climate Change Strategy  To feed into the Implementation Plan being developed for the Health and Wellbeing Strategy	A Hutchinson / L Greenfield	To feed into Forward Plan  Item on Health and Wellbeing Strategy Implementation Plan on the Agenda of the Board meeting on 21 <sup>st</sup> April 2023

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**TITLE OF REPORT: Progress summary and draft approach and plan for implementation of the Health and Wellbeing Strategy**

**REPORT OF: Director of Public Health**

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### **Purpose of the Report**

To provide a progress summary to the Health and Wellbeing Board on the Health and Wellbeing Strategy Implementation Group and present the draft Implementation Approach and Plan for feedback and decision.

### **Background**

The Gateshead Health and Wellbeing Strategy sets out six key policy objectives designed to tackle the root causes of health inequalities. It is also the delivery method to support the implementation of Gateshead's Thrive pledges.

The six policy objectives are:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair and good employment for all
- Ensure a health standard of living for all
- Create and develop sustainable places and communities
- Strengthen the role and impact of ill health prevention

With oversight of the Health and Wellbeing Board, a multi-agency Health and Wellbeing Strategy Implementation Group was established in May 2022 to review the strategy and develop an approach and plan to implementation. Through the group, a participatory and collaborative approach has been taken to support discussion around barriers and opportunities for implementation, and to develop actions and priorities going forward.

The group has now met several times, and some key activities have taken place to support development of the approach and plan.

## **1. Strategic mapping against the policy objectives**

The group completed a strategic mapping exercise to build a picture of the drivers and mechanisms that support delivery of the strategy's policy objectives across the system and identify windows of opportunity.

We used this exercise to:

- support us to challenge what we are doing
- help us focus our attention on key areas and prioritise
- enable us to identify gaps
- help us to identify where we can work together and build on partnership and collaborations.

Through partners we gathered strategies and key programs and mapped them to the policy objectives and actions. We then reviewed this work through an implementation group session to check they accurately reflected the strategic picture within Gateshead and identify some of the challenges and areas we could develop further in partnership.

This work reflected the complexity of the system and the breadth of work needed across the six policy objectives. We found that it was difficult to easily identify the strategies and plans that support this work across the system. Through work in development, there is an opportunity to ensure this work truly supports the Strategy's objectives, and areas of significant importance to health inequalities, where we could collaborate further.

## **2. Seeking the views of staff on their knowledge, understanding, training and development needs in relation to the strategy**

Whilst the strategic mapping was taking place, we sought to learn more about the views, understanding and knowledge of the strategy among the workforce, along with any potential learning and training needs. An online survey was developed, using a mixture of quantitative and qualitative methods of data collection and analysis. This was distributed through Health and Wellbeing Board members for wider dissemination among staff.

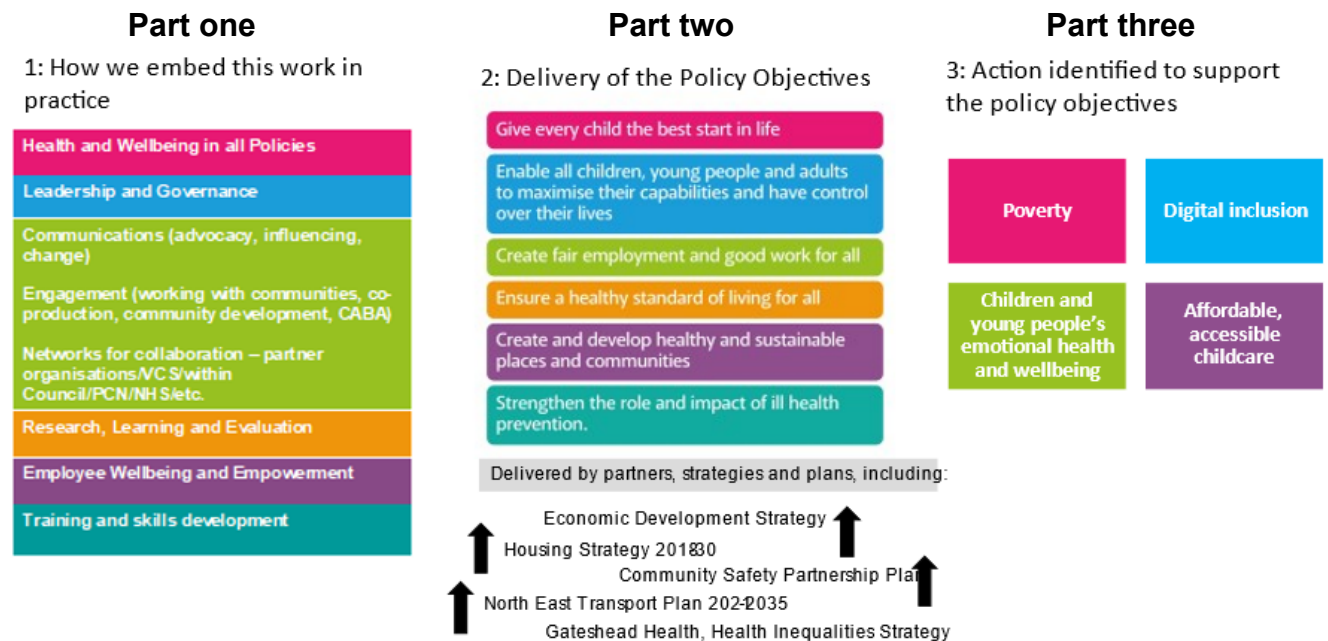
There were 265 respondents to the survey but less than 100 responses on most questions. The majority were among people working for the Local Authority. Therefore, the responses are not generalisable to the wider workforce, but do help provide some insight to what communications and learning needs to support strategy implementation may be. Findings included:

- Some did not understand what health inequalities meant, though many identified number factors and differences in groups, that are systematic and unfair and lead to unequal outcomes
- Almost one in four felt health and wellbeing was not considered when planning new projects
- Half of those responding hadn't seen information on the strategy or discussed it with colleagues
- Low familiarity of some tools to help assess health inequalities
- There was a willingness for research embedded within certain roles, some barriers to this were shared including knowledge, capacity, opportunity.

As survey respondents were self-selecting, there is a potential bias that those participating may have an interest in this area. Therefore, the findings may underestimate the level of awareness and learning needs around this topic.

### 3. Developing the Approach and plan

As the Strategy sets out address complex, multi-factorial issues that cut across organisations and systems, developing an approach to implementation and how we collaborate, and work together is important. Building on the work of the implementation group and considering different factors that will help guide how we work together; the Health and Wellbeing Strategy Implementation Approach and Plan is set out in three parts.



**Part one**, focuses on the way we work together to help to deliver the strategy and support implementation, these cross-cutting implementation themes include:

- Continuing to build a health and wellbeing in all policies approach to ensure the strategy and health inequalities are embedded within decision making, planning and evaluation
- Leadership and governance to ensure we are joined up, champion the approach and keep it on the agenda
- Communications, working together with our communities, and networks for collaboration on shared agendas
- Research, learning and evaluation to continue to build the evidence base, understand our progress and adapt based on learning, integrating the work of the Health Determinants Research Collaboration in Gateshead
- Employee experience and wellbeing to ensure our staff are well, supported, and empowered to help others thrive
- Training and skills development to enable teams to understand their work and role in relation to the strategy.

**Part two** of the plan builds on our strategic mapping exercise, focusing on the strategic drivers that help support delivery of the Health and Wellbeing Strategy's policy objectives. The aim of this section is to build a picture of action across the system and point to key workstreams, avoiding duplication. Going forward there is a need to ensure

these key strategic drivers and programmes, not only align with the Health and Wellbeing Strategy, but support meaningful delivery against the outcomes set out in the policy objectives. The Health and Wellbeing Board can use the mapping to ensure the work of partners is aligned to the Health and Wellbeing Strategy, identify areas it wishes to influence, and contribute to, and monitor, progress against this work to help maximise progress and impact on Health and Wellbeing Strategy objectives.

As an example of this, a template has been developed to support how the programmes delivered through Gateshead Cares consider, develop, and review their work in line with the strategy going forward.

**Part three** builds on the challenges and key areas that have been identified by the implementation group, since the strategy was first launched. This part of the plan needs further development and prioritisation, in collaboration with strategic leads from different services. Currently, this part of the plan sets out the rationale for action, the overarching outcomes of this work, and a high-level action plan to set the strategic direction and next sets.

The Health and Wellbeing strategy sets out to address complex policy areas, that will change and evolve to achieve long-term ambitions. We know that these are the areas that have the greatest impact on health across lifetime and tackling them requires commitment, perseverance, shared vision, partnership, collaboration, learning and evaluation. Therefore, it is recommended that the implementation approach and plan remain a live and iterative document, shared and owned by partners, with ongoing review, annual reflection, and reporting. This will enable the strategy and stakeholders to continue towards long-term goals for people in Gateshead, whilst remaining responsive against a dynamic and changing context.

#### **4. Reflections and lessons learned**

The importance of developing methods to enable implementation has become more apparent through the continued discussion and input of the implementation group. The need for communications, leadership, research, and ongoing learning have been clear as we've discussed some of the more complex issues.

As a group we have grappled with issues such as how we really prioritise prevention and move resources to those with greatest need. It is hoped that through a health in all policies approach we will begin to find solutions to some of those challenges. Ongoing dialog and participation through a multi-agency and multi-disciplinary implementation group has enabled development of implementation themes, such as the importance of employee wellbeing, enablement, and empowerment to do what matters to support people holistically, beyond organisational boundaries and silos.

This work takes time, which is difficult among the pressure to manage resources, meet increasing and immediate need, and demonstrate progress. There is a need to ensure commitment to our long-term vision and goals, to maintain focus and support through a complex journey.

It has not always been easy to find a clear picture of up-to-date plans and strategies, how they link together and how they contribute to the delivery of the Health and Wellbeing Strategy and Thrive. Without a clear and well-understood strategic framework, where all partners organisations and service areas understand how their role contributes to the reduction of health inequalities there is a high risk of silo working, duplication, a lack of progress and challenges in prioritising resources effectively.

Ownership of this work is needed across services and organisations to be effective in delivering the strategy. Complex problems impacting inequalities are not due to single root causes, owned by single agencies, and are constantly evolving. Thrive and addressing health inequalities need to be considered as a primary goal across organisations and services. These issues can feel big and overwhelming, and some may find it difficult to see how to support change and make a difference within their role and service. Clear and visible senior leadership remains important to enable this work to be prioritised against pressure and competing demands.

There was often an ask for priorities within the strategy, and a desire for simplification. The risk with singular, more simplistic approaches and targets, is that we fail to take account of the wider system and what this means for individuals and communities trying to navigate it. There may be an opportunity cost if focusing on narrow targets and indicators. Layers of bureaucracy, professional and organisational boundaries, and current systems and approaches may act as barriers to supporting the communities who need us most, and those with multiple and complex needs.

Work on the wider determinants of health through the policy objectives takes place across systems, with us all holding parts of the puzzle we need to fit together. To demonstrate this, we plan to use the Implementation Group to view this through the lens of different parts of the system. This started with Planning colleagues, who demonstrated how the work they do impacts on health and inequalities. Going forward, we aim to build on this, centering sessions around differing policy areas and enabling colleagues in those areas to take the lead, and using the implementation group forum as a platform for collaboration.

Creating a learning culture by providing a safe space to trial new approaches, learning what is and isn't working, and where we can improve, is vital to support progress. Going forward, we will consider what steps we can take to build in a cycle of reflection, learning and evaluation. This includes how we build on and develop appropriate outcome and quality improvement dashboards.

## **5. Next Steps**

Work through the implementation group will be ongoing as the actions set out in the implementation plan are taken forward. No single organisation or team can deliver this work alone, and it is important that the implementation group continues to provide a platform for collaboration, collective ownership, and action.

The next two implementation groups are scheduled for spring / summer, and it is the intention that these sessions will be led by strategic leads in key areas. It is proposed that the next sessions look at:

- Poverty, Economic Development, and Mental Health
- Housing, Neighbourhoods, and Community Safety

Work on the actions set out within the implementation themes will be ongoing, with a need for all partner organisations to identify colleagues to contribute to and support the implementation groups and ongoing work.

Work will begin on implementing the health and wellbeing in all policies action plan, and there will be a need to involve a lead from partners to enable this to be applied across the system.

Governance arrangements need to be further understood across the policy objectives and we will seek to illustrate and assimilate this information through Implementation group. In addition, we need to further ensure we capture and integrate our statutory responsibilities as part of this work.

Going forward, there is a need to develop and build on processes for monitoring progress, continuous learning, and improvement.

## **6. Recommendations**

1. The Health and Wellbeing Board agree to, and endorse, the plan and approach for implementation of the Health and Wellbeing Strategy.
2. The Health and Wellbeing Board agree to the approach and plan being a live and iterative document, shared and owned by partners, with ongoing review, annual reflection, and reporting on progress to the Health and Wellbeing Board.
3. Health and Wellbeing Board members and partner organisations agree to ensure their plans and strategies clearly align to Thrive and the Health and Wellbeing strategy and support their staff to understand their role in delivering them to provide a strong foundation for the implementation of the H&W Strategy.
4. Health and Wellbeing Board members and partner organisations commit staff time and capacity to enable prioritisation of the delivery of this plan going forward to ensure progress.
5. The Implementation group continues in its current form to enable continued progress, partnership, and collaboration on strategy implementation. Members of the Board are invited to consider whether further representation is required within the group.

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**Contact:** Louise Sweeney 01914332909



# **Gateshead Health and Wellbeing Strategy**

## **Good jobs, homes, health and friends**

### **Our Approach and Plan for delivery; Working together to make a difference**

#### **Background**

In 2020, the Gateshead Health and Wellbeing Board agreed the Health and Wellbeing Strategy. The vision for the strategy is 'Good jobs, homes, health and friends', as health and wellbeing are determined by the circumstances into which we are born, grow, learn, work and live.

Differences in these circumstances can lead to health inequalities, which are unfair differences in health and wellbeing. In Gateshead, this means a baby boy born in one of our 10% most disadvantaged areas, is expected to live 10.8 years less, than a baby boy born in one of our least disadvantaged areas.

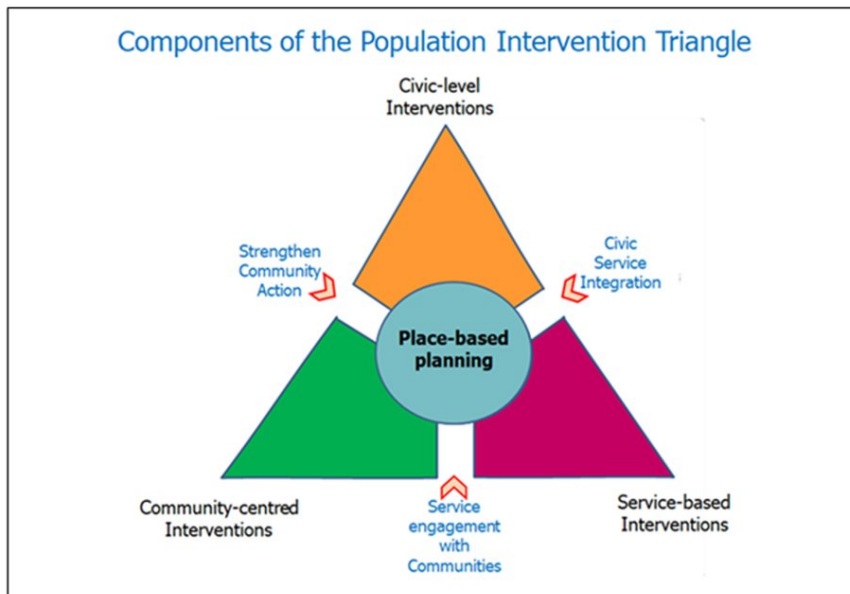
We want Gateshead to be a place where everyone thrives.

Making Gateshead a place where everyone thrives', commits us to these pledges. We pledge to:

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

The Health and Wellbeing Strategy uses the six policy objectives set out in the Marmot Review: 'Fair Society, Healthy Lives' (2010), as a framework to help deliver our vision of making Gateshead a place where everyone thrives. The 2022 Gateshead Director of Public Health Annual Report, Behind the Mask, highlighted the need for continued action across these policy objectives to address inequalities that increased due to the pandemic.

The Health and Wellbeing Strategy also sets out our approach to how we'll work together as a whole system using the population intervention triangle. This helps show the action needed in different parts of the system and will be used in this plan to help take forward this work in partnership.



This plan will set out our approach to working together as partners and organisations in a system to help people in Gateshead thrive. It will draw together our key strategies, programmes and plans to look at how actions are being supported across Gateshead, when actions are being delivered, and the milestones we are progressing towards.

It will also look at how we monitor our progress, and report back this work through different governance structures.

The ambitions set out in the strategy are long-term and influenced by changes happening regionally and nationally. Therefore, it is recognised that this plan needs to be flexible and dynamic, so we can adapt and respond to opportunities and challenges as they arise.

The plan also seeks to help the principles and objectives of the strategy become part of everyone's business, so that every opportunity to maximise health and wellbeing is taken. To do this, implementation themes have been set out to help us make sure the work we do, supports the strategy on all levels.

### **Our work so far**

An Implementation Group has been set up to:

1. Review the Health and Wellbeing Strategy and identify opportunities, activities and mechanisms to support implementation.
2. Agree a process for developing and monitoring the implementation plan that includes representation and involvement from stakeholders.
3. Develop an approach to implementation that supports consideration of the Health and Wellbeing strategy and health equity as part of everyday business across the system.

4. Identify and utilise supportive structures and processes for implementation.
5. Agree a framework for research, learning and evaluation to develop the implementation plan and support progress towards outcomes.

The Group agreed to map current strategies, plans and programmes against the policy objectives and actions set out in the Health and Wellbeing Strategy to help build a picture of our work as a system. This exercise aimed to:

- Support us to challenge what we are doing and whether this is delivering the Health and Wellbeing Strategy.
- Help us focus our attention on key areas and prioritise
- Enable us to identify gaps
- Help us to identify where we can work together and build on partnership and collaborations.

Work completed so far has been used to develop our three-part Implementation Plan:

1. Our cross-cutting implementation themes to embed the health and wellbeing strategy into everyday work, develop our plans and work together as a system
2. Our six policy objectives and their delivery mechanisms
3. Further action identified to support the policy objectives

## Part 1: Cross-cutting implementation themes

Over the last decade we have seen health inequalities increase between our most and least deprived communities. To work across different services, and truly support change that enables Thrive and the Health and Wellbeing Strategy to be delivered, we need to look at a range of methods to support this work to be adopted across stakeholders. Our implementation themes aim to embed the health and wellbeing strategy into everyday work, through the development our plans, and in the way we work together as a system. They include:

Health and Wellbeing in all Policies
Leadership and Governance
Communications (advocacy, influencing, change)
Engagement (working with communities, co-production, community development, CABA)
Networks for collaboration – partner organisations/VCS/within Council/PCN/NHS/etc.
Research, Learning and Evaluation
Employee Experience and Wellbeing
Training, Knowledge, and Skills development

The implementation themes are cross-cutting as each of these areas are needed through all the policy objectives to help ensure actions are delivered.

## Health and Wellbeing in all Policies

Health and Wellbeing in All Policies (HiAP) is about putting health and wellbeing outcomes on the agenda of other sectors. It is an approach to ensuring health and equity are considered within all strategies and policies to address the wider determinants of health. It is defined as:

“An approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity.” WHO, 2013

This theme aims to help make consideration of Thrive, and health and wellbeing, part of everyday business by aligning goals, utilising existing systems and processes, and embedding methods for identifying, planning, and acting on health inequalities. It is supported by the other cross-cutting implementation themes.

### Overarching outcomes:

- The Health and Wellbeing Strategy’s policy objectives are systematically considered within the planning and evaluation of strategies and programmes
- The drivers and impacts of inequalities are understood, identified, and considered within decision making processes
- Data, intelligence, and evidence-based practice are used in work across different services to ensure resources and actions are prioritised against need and support equity.

### Health and Wellbeing in all Policies Action Plan

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Develop and agree a set of principles to embed a health in all policies approach to support the Health and Wellbeing Strategy	<ul style="list-style-type: none"> <li>• Work with the implementation group to introduce the approach, identify action needed and shared principles</li> <li>• Seek agreement at Health and Wellbeing Board</li> <li>• Work with partners to introduce the approach to managers within different organisations</li> </ul>	<p>Implementation group</p> <p>Health and Wellbeing Board members</p>	<p>Multi-agency working group</p> <p>Digital toolkit to be developed</p>	2023-2024	Organisations have agreed to adopt the approach and take it through appropriate decision-making forms.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Develop and integrate evidence-based methods within existing planning and decision-making processes. Such as the Health Impact Assessment tool, Equity tools, and Social Value.	<ul style="list-style-type: none"> <li>Identify systems and processes that could be utilised for HiAP.</li> <li>Methods reviewed and adapted to support approach</li> <li>Develop and implement a Gateshead Toolkit for HiAP</li> <li>Toolkit implemented</li> </ul>	<p>Implementation Group working with:</p> <p>Public Health and Wellbeing</p> <p>Legal and Democratic services</p> <p>Commercialisation and improvement</p> <p>Commissioning and procurement</p> <p>Planning</p> <p>Gateshead Cares</p> <p>Gateshead Health</p> <p>Community Safety Partnership</p>	Digital toolkit to be developed	2023-2025	<p>Toolkit published online to provide resources and tools to partners.</p> <p>Clear linkage of to the Health and Wellbeing strategy through policy of plans.</p> <p>Evidence of the consideration of health outcomes and inequalities in decision making.</p>
Identify leads across the Council and across partner organisations to champion the approach and lead on its implementation in	<ul style="list-style-type: none"> <li>Leads identified by Implementation Group</li> <li>Network/forum established to support implementation, share practice and tools and to monitor progress.</li> </ul>	Implementation group members and developing network / forum	Business support to facilitate meetings and network	2024-2025	Leads identified and reporting back to the established forum to share experiences, challenges and learning.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
different services and organisations					
Joint Strategic Needs Assessment (JSNA)	<ul style="list-style-type: none"> <li>Promote JSNA as a statutory duty and key evidence source in planning programmes and services and evaluating the health impact of policies.</li> <li>Cross-sector development and update of the JSNA in line the strategy</li> </ul>	<p>Implementation group members</p> <p>Public Health and Wellbeing</p>	<p>Staff time and capacity across organisations.</p> <p>Data sharing agreements and governance reviewed and in place as required</p>	2023-2025	<p>JSNA updated collaboratively on and ongoing basis.</p> <p>JSNA used to underpin strategies and plans across the system</p>
Build in effective monitoring and evaluation of the health in all policies approach to ensure quality and effectiveness	<ul style="list-style-type: none"> <li>Develop an approach to monitoring and evaluation that helps us to understand progress and the impact of this work.</li> <li>Evaluation and learning cycles are built into practice to adapt the approach as needed with at least annual review.</li> <li>Link to performance and improvement frameworks across system partners to demonstrate progress on health inequalities.</li> <li>Learning shared across the system</li> </ul>	Implementation group members	<p>Staff time and capacity</p> <p>Research tools, training and input to support methods used</p>	2023-2025	Evaluation in place, with leaning and impact of the approach identified and informing ongoing practice.

### Leadership and Governance

No single team, service or organisation alone can tackle the issues leading to inequalities, and leadership is needed across organisations to support action across the policy objectives.

This theme will help look at how goals, strategic work and programmes align and the structures and processes in place for reporting, monitoring and progressing this work.

**Overarching outcomes:**

- There is a clear picture of delivery of the Health and Wellbeing Strategy across the system
- It is clear how structures align, and goals are shared
- Leaders champion the strategy and its implementation.

**Leadership and Governance Action Plan**

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Engagement in the strategy and initial consultation	<ul style="list-style-type: none"> <li>• Discussion at Health and Wellbeing Board, Gateshead Cares, Gateshead Health, Primary Care Health Inequalities Meetings</li> <li>• Council CMT, GMTs, and SMTs</li> </ul>	Health and Wellbeing Board Chair  Director of Public Health  Consultant in Public Health	Staff time and capacity	February – September 22	Feedback and initial ideas on implementation going forward
Establishing a Multi-Agency Implementation Group	<ul style="list-style-type: none"> <li>• Terms of reference Agreed</li> <li>• Quarterly meetings scheduled</li> </ul>	Consultant in Public Health	Staff time and capacity	May 2022- May 23	Review of the Strategy and successful input and engagement in developing an approach and plan for implementation
Strategic mapping against the policy objectives to build a picture of delivery and identify any gaps.	<ul style="list-style-type: none"> <li>• Strategy mapping template to be completed by organisations</li> <li>• Implementation Group workshop to complete the mapping exercise</li> <li>• Analysis and findings</li> <li>• Identified actions and next steps</li> </ul>	Implementation Group	Staff time and capacity	July- November 22	Findings used to draft the implementation plan and recommendations



Objective	Actions	Lead	Resources required	Timeframe	Outcome
Ensure there is a clear, current and well publicised framework for strategies to support delivery of key agreed priorities and resource allocation	<ul style="list-style-type: none"> <li>• Create a digital place, on the Council website, where current strategies and those in development are collated and accessible. Potentially linking to the JSNA.</li> <li>• Create a common approach to strategy development to ensure every strategy is aligned to Thrive and the Health and Wellbeing Strategy.</li> <li>• Create opportunity for challenge in key strategy developments to ensure alignment with Health and Wellbeing Strategy</li> </ul>	Implementation Group  Communications Leads  Intelligence and Analyst Leads  Policy and Strategy Leads	Staff time and capacity	2023-2024	Strategies are visible, accessible and clearly linked to Thrive, The Health and Wellbeing Strategy and Delivery plans
Review Structures and Processes for monitoring and reporting progress	<ul style="list-style-type: none"> <li>• Review current governance and decision-making structures identified within the mapping work.</li> <li>• Review current monitoring and reporting mechanisms to align with Implementation Plan</li> <li>• Make recommendations to support reporting on the policy objectives of the Health and Wellbeing Strategy.</li> </ul>	Implementation group  Legal and Democratic Services  Gateshead System	Staff time and capacity	2023-2024	Clear processes are in place to monitor and record progress on the strategy and implementation plan.  A programme is in place to help understand progress on strategic areas in relation to the policy objectives.
Establish and develop appropriate	<ul style="list-style-type: none"> <li>• Review and develop performance improvement frameworks to help</li> </ul>	Commercialisation and improvement	Staff time and capacity	2023-2024	Effectiveness and programme

Objective	Actions	Lead	Resources required	Timeframe	Outcome
outcome and quality improvement dashboards	<p>capture learning and progress across the system, whilst ensuring indicators support the objectives of the strategy in key strategic areas.</p> <ul style="list-style-type: none"> <li>• Work to ensure oversight helps capture the action on the strategy and health inequalities across the system.</li> </ul>	<p>Gateshead Cares</p> <p>Gateshead Health</p> <p>Community Safety Partnership</p>			measures are clear and understood.
Providing information to Strategic Boards and Partners on this work	<ul style="list-style-type: none"> <li>• Ongoing oversight/assurance at Health and Wellbeing Board,</li> <li>• Discussion at Gateshead Cares, Gateshead Health, Primary Care Health Inequalities Meetings</li> <li>• Regular updates on progress/barriers at CMT</li> <li>• Feedback on progress/barriers to GMTs, SMTs, and other Strategic Groups within Council</li> </ul>	Implementation group	Staff time and capacity	Ongoing with at least an annual review of progress	<p>Health and Wellbeing Board are provided with assurance and are able to understand and challenge barriers to progress.</p> <p>Linked groups and boards are informed, understand their role in this work.</p>

### Communications, Engagement and Networks for Collaboration

Community-centred approaches are one of the three components of the whole system, place-based approach to improve health and wellbeing. Action on this area is threaded through the Strategy's policy objectives with some specific actions:

- ensure that the views and opinions of local people are represented in all aspects of our work through our democratic process and asset-based community development approaches
- advocate for vulnerable people and communities to reduce differences in access to local services

- support the development of quality community activities, prioritising neighbourhoods with greatest need, remove barriers to community participation and support people to be involved locally
- embed the local VCSE organisations in ill health prevention, planning and delivery

To develop this as a system there is a need to look at how we build on our assets, work with communities, and engage them in our work. Thus, working together in partnership with our communities, partners, volunteers, and staff. This in turn may help us develop some community led specific actions, building on and embedding our place-based approach into practice.

**Overarching outcomes:**

- Increased awareness and engagement in the strategy
- Communities are engaged and involved in decisions that affect them
- Partner organisations and groups work together on issues that affect us all, recognising the links and impacts.

**Communications, Engagement and Networks for Collaboration Action Plan**

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Build on and develop community-centred approaches across the system in Gateshead	<ul style="list-style-type: none"> <li>• Understand current practice and the evidence base in support of the strategy</li> <li>• Develop an approach and principles that can be embedded through the system in Gateshead e.g. methods and principles of coproduction</li> <li>• Implement the identified approach, building in a process for monitoring progress, review, learning and action.</li> </ul>	Implementation Group  Participation groups  VCS	Staff time  Training	2023-2025	Community centred intervention approaches prioritised  Approach developed with communities and the VCS  Community centred intervention agreed by system partners and adopted.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Increased awareness and engagement of the strategy and how to support it	<ul style="list-style-type: none"> <li>• Develop a communication plan to support awareness of the strategy across organisations</li> <li>• As part of the plan, to develop a process for launching key strategies and plans so that all within organisations understand how they relates to their role and support its delivery.</li> <li>• Support partners to advocate for the most vulnerable communities and support for the strategy through existing forums and the media</li> <li>• Ensure strategic work, programmes and plans across the system are easy to find and navigate to support collaboration</li> </ul>	Communications leads from partners	Staff time	April - May 2023  Ongoing	<p>The Health and Wellbeing Strategy is recognised and understood by stakeholders.</p> <p>Staff understand their role in relation to the Health and Wellbeing Strategy and how they can support delivery.</p> <p>Strategic work in support of the strategy is easy to identify and access to help inform action and partnership work.</p>
Support collaboration on key strategic drivers such as climate change, cost-of-living, recruiting and retaining the public sector workforce.	<ul style="list-style-type: none"> <li>• Identify shared objectives from within the strategy and opportunities for collaboration</li> <li>• Utilise forums, structures, and processes to enable shared knowledge, expertise, and resources on shared goals.</li> <li>• Plan specific collaboration events or meetings around this agenda where need is identified.</li> </ul>	Implementation Group members and strategic leads for different agendas	Staff time  Resources for events / workshops		Shared vision and plans are developed on key strategic areas related to the health and wellbeing strategy.

## Research, Learning and Evaluation

It is important we continue to build evidence and adapt as we go forward. This ensures the work we do is evidence based, meets need, improves wellbeing, and reduces inequalities. It also means we are better able to prioritise our resources where they have the greatest impact.

Learning is really a key part of this, and as we work in such a complex and changing system, it will guide and shape our approach as we progress. This is important as the things that influence health can be described as ‘wicked problems’ as they often play out over a long-time and are influenced by many different factors. By embedding learning and research into our approach, we can increase understanding of the issues and our progress as part of an ongoing process.

### Overarching outcomes:

- Increased research capacity across the council on the social determinants
- Development of evidence & research that supports action on the Health and Wellbeing strategy
- Use of research and evidence to influence local, regional and national strategy, policy & practice to reduce health inequalities

### Research, Learning and Evaluation Action Plan

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Maximise the use of the JSNA to support action and delivery in line with need, monitoring, learning and evaluation	<ul style="list-style-type: none"> <li>• Update the JSNA to ensure data and intelligence gathered reflects the policy objectives of the Health and Wellbeing Strategy</li> <li>• Develop relationships and mechanisms that support partners to update and collaborate on the JSNA</li> <li>• Maximise use of the JSNA by incorporating it in to Health in All Policies approaches and training and skills development.</li> </ul>	Implementation group with key leads from services / directorates	Staff time and capacity across the system		The JSNA is the ‘go to’ document for organisations across the system, enabling the Health in all policies approach, and ensuing resources are used in line with need.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Increase capacity and the capability to conduct research and build the evidence base to support the Health and Wellbeing Strategy.	<ul style="list-style-type: none"> <li>Establish the HDRC Team within the Council (Governance, policy, recruitment)</li> <li>Embed the team within the different Directorates of the Council and build relationships with partners.</li> <li>Identify research priorities within the Directorates</li> <li>Identify ways to enable community and resident involvement in research</li> </ul>	Public Health and Wellbeing	Ringfenced Health Determinants Research Collaborations (HDRC) Funding £5m over 5 years  Staff time and capacity	2022-2023	HDRC team in place and beginning work in Directorates  Research Priorities identified  Actively working with communities and residents in research
Establish governance structures, policies and processes for research ethics within the Council	<ul style="list-style-type: none"> <li>Establish a research ethics committee within the Council</li> <li>Work with partners in the system to establish an ethics approval process that they can utilise</li> <li>Develop a research ethics policy</li> <li>Develop practical guidance for staff to support the implementation of research ethics proposals and practice</li> </ul>	Public Health and Wellbeing  Legal and Democratic Services  Newcastle University / ARC	Ringfenced HDRC Funding £5m over 5 years  Staff time and capacity	2022-23	Research Ethics Committee in place and functioning effectively.  Employees and System partners able to effectively utilise the ethics protocols and process.
Conducting research activities to focus on health inequalities and the wider determinants of health	<ul style="list-style-type: none"> <li>Developing research proposals</li> <li>Conducting research using appropriate research methods in partnership with communities and residents, academic partners, and system partners</li> <li>Writing research up for peer review</li> </ul>	HDRC team  Internal and external partners  Communities and residents  Newcastle University / ARC	Ringfenced HDRC Funding £5m over 5 years  Staff time and capacity  Community organisations	2023-2027	Research projects are implemented across Gateshead to build evidence on understanding and the addressing the determinants of health.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
			Volunteers		
Sharing research and learning across the system in Gateshead to inform planning, decision making, policy and practice	<ul style="list-style-type: none"> <li>Based on research, make recommendations for planning, decision making, policy and practice.</li> <li>Publish research within peer reviewed journals.</li> <li>Develop research finding briefings and communications that are accessible to a range of audiences</li> <li>Disseminate findings in a range of formats to maximise engagement</li> <li>Present research at conferences, Boards and meetings, to enable change.</li> </ul>	HDRC Team  Newcastle University / ARC  Health and Wellbeing Board	Ringfenced HDRC Funding £5m over 5 years  Presentations and communication materials	2023-2027	Research findings are considered through practice. We can clearly evidence the links and ways we take this forward.
Evaluate the impact of research on planning, decision making, policy and practice, to ensure interventions and services continue to be effective and deliver outcomes.	<ul style="list-style-type: none"> <li>Plan and deliver an evaluation in line with HDRC requirements</li> <li>Build in an evaluation cycle to understand how research learning and recommendations have been built into practice.</li> <li>Report learning back to the Health and Wellbeing Board to demonstrate how this work support the Health and Wellbeing Strategy.</li> </ul>	HDRC Team  Newcastle University / ARC  Health and Wellbeing Board	Staff time and capacity	2023-2027	Learning, effectiveness, and use of research is understood and used to drive further improvements.

## Employee Experience and Wellbeing

Partner Organisations in Gateshead are key anchors in the borough through the provision of crucial services, amenities, as buyers of goods and services, and as an employer. To help our residents to thrive, it is important our staff are thriving too, and that their experience at work is an exceptional one. This would mean that employees feel supported, engaged, capable, trusted to do their roles with confidence and enabled to help deliver brilliant outcomes for each other and for people living in Gateshead. Therefore, the actions set out through the implementation themes also seek to help maximise the contribution of the people that work with us in Gateshead.

### Overarching outcomes:

- Our people feel Gateshead is a great place to work
- Improved employee health and wellbeing

### Employee Experience and Wellbeing Action Plan

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Understand how people feel about working for their employer, and their experience at work	<ul style="list-style-type: none"> <li>• Gateshead's Partner Organisations complete a recognised employee survey where employers are benchmarked nationally with clear tangible results than can drive actionable plans.</li> </ul>	HR Leads across Partner Organisations	Survey Budget	Commence 2023 – and then biannually thereafter	Clear understanding of how people feel about working in Gateshead to allow for data driven decisions to improve the employee experience at work.
Remove barriers to enable a culture of trust where our people are empowered to meet the needs of the people they	<ul style="list-style-type: none"> <li>• Staff are supported to identify and share barriers through governance and systems to help improve quality of services and for them to succeed in their roles. .</li> </ul>	Implementation Group  Strategic leads taking forward specific programmes	Communications  System reengineering expertise	2023-2025	We effectively reach and support individuals and communities with greatest need through enabled and empowered staff.



Objective	Actions	Lead	Resources required	Timeframe	Outcome
interact with so they receive more holistic and joined up services.	<ul style="list-style-type: none"> <li>• A learning culture is developed across organisations to enable staff to share problems and solutions confidently, acknowledging that challenges are often due to multiple factors which require multi-stakeholder action.</li> <li>• Leaders and managers will work with staff to identify root causes to challenges, solutions and new approaches which are trialled, reviewed and developed further to ensure that we reduce inequalities through this learning culture.</li> <li>• We will communicate and educate our people on what we mean by a 'learning culture'.</li> <li>• Best practice is identified and shared to help inform other service areas, e.g. Anti-social behaviour review, Debt recovery, Family Hubs, People at the Heart.</li> <li>• Key programmes piloting these processes will be linked into, to help understand impact on the outcomes within the Health and Wellbeing Strategy.</li> <li>• Progress and learning on implementation will be shared among stakeholders through</li> </ul>	and plans across organisations.	Presentations and stakeholder involvement		<p>We are able to reflect on approaches used and profile initiatives to enable further adoption.</p> <p>Best practice is shared and disseminated.</p>

Objective	Actions	Lead	Resources required	Timeframe	Outcome
	the implementation group and other organisational forums.				
Our partner organisations, as employers, create and adapt jobs, and recruitment practices in line with the objectives of the Health and Wellbeing Strategy.	<ul style="list-style-type: none"> <li>• Recruitment practices ensure equality for all</li> <li>• Flexible working approaches are defined and communicated to staff across services</li> <li>• Recruitment initiatives target people living in our most deprived areas, in addition to groups that may experience health inequalities.</li> <li>• Areas that are difficult to recruit to with increasing vacancy rates will be considered within the context of the Health and Wellbeing Strategy and how access to employment could be supported through these areas.</li> <li>• Innovative and transformative work opportunities will be shared and promoted, as will learning on their impact on retention and recruitment. For example, the new CYP Trauma Team.</li> <li>• Current policy and practice will be reviewed and updated to reflect a positive approach to health inequalities.</li> </ul>	HR Strategic Leads across partner organisations	Staff time and capacity to consider and adapt current practice	2023-25	<p>Pathways and opportunities to access employment are tailored to address inequalities.</p> <p>We can evidence the impact on recruitment practices on inequalities.</p>

Objective	Actions	Lead	Resources required	Timeframe	Outcome
	<ul style="list-style-type: none"> <li>• The impact and progress of this work will be monitored and shared across stakeholders through the implementation group.</li> </ul>				
<p>Physical and mental health and wellbeing is prioritised and promoted through our working practices and environments.</p>	<ul style="list-style-type: none"> <li>• Workforce health and wellbeing strategies across partners will aim to help people with:               <ul style="list-style-type: none"> <li>○ Social wellbeing</li> <li>○ Financial Wellbeing</li> <li>○ Emotional wellbeing</li> <li>○ Physical wellbeing</li> </ul> </li> <li>• Safe working practices are prioritised through a health and safety culture including; safe equipment, and personal safety training.</li> <li>• Good work experience will be supported through a positive approach to: Working environment; Good line management; Effective people management policies, Training for line managers, Sickness absence management.</li> <li>• Work demands will be considered in the context of health and wellbeing including; Job design, job roles, job quality, workload, working</li> </ul>	<p>HR Strategic Leads across partner organisations</p>	<p>Staff time and capacity to consider and adapt current practice</p> <p>Training</p>	<p>2023-2027</p>	<p>Reduced employee illness</p> <p>Increased reported wellbeing</p> <p>Improved retention of staff.</p>

Objective	Actions	Lead	Resources required	Timeframe	Outcome
	<p>hours, job satisfaction, work-life balance.</p> <ul style="list-style-type: none"> <li>Organisational values and principles are clearly communicated to support understanding of shared goals and purpose through communications, appraisal and development, induction and supervision.</li> <li>Personal growth and career development</li> </ul>				
Consider and explore the opportunity offered by committing to the Good Work Pledge in supporting the above objectives	<ul style="list-style-type: none"> <li>Implementation group consider the good work pledge in line with the current better health at Work Award.</li> <li>Partner organisations review the steps needed to commit to the Good Work Pledge.</li> <li>Develop an action plan to achieve the Good work pledge if appropriate.</li> </ul>	Implementation Group		2023-2027	Commitment to supporting Employee Experience and Wellbeing is evident across partner organisations and advocated for among wider employers in Gateshead.

### Training, Knowledge, and Skills development

Often there is a disconnect between perceptions around what determines our health, and the action needed to address this. Therefore, there is a risk, that for those working in non-health sectors and services, may not realise the potential impact of their work and role on health inequalities.

To help increase knowledge and understanding and build on the strength of our workforce, this implementation theme will seek to provide learning and training opportunities to support staff to understand the importance of the strategy in reducing inequalities, and achieving thrive, and the information, tools and resources they can use to make this part of their work.

**Overarching outcomes:**

- All employees have an awareness of the Health and Wellbeing strategy and how it relates to their role and service.
- All employees understand what health inequalities are, and the causes of health inequalities.
- All employees are able to take action, as appropriate to their role, to support the strategy and reduce inequalities.

**Training, Knowledge, and Skills Development - Action Plan**

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Review learning and training offer in line with the Health and Wellbeing Strategy and identify learning and development needs	<ul style="list-style-type: none"> <li>• Conduct a training survey to help identify cross-sector training needs to support Implementation of the Health and wellbeing Strategy</li> <li>• Review training offer, within partner organisation in line with the strategy, to ensure employees are aware of the strategy, its role, and to ensure they have an understanding of health inequalities.</li> <li>• Identify existing training opportunities, such as induction and refresher training, where the strategy could be incorporated.</li> </ul>	Implementation Group  Workforce Development  Partner Organisations	Council digital platform	September to December 2022	Survey analysis, report and recommendations for action

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Produce a volunteer and workforce learning and development plan to support implementation of the strategy	<ul style="list-style-type: none"> <li>• Draft a learning and development plan in collaboration with partners, to help implementation approaches such as Health in All Policies and embedding prevention in practice</li> <li>• Involve staff and stakeholder groups in developing what the learning resources look like, to ensure relevance to their work and role.</li> <li>• Ensure the learning and development plan is based on evidence-based methods and enables upstream behaviour change</li> <li>• Develop a training offer for members, managers and wider workforce and volunteers, as needed, to support implementation</li> <li>• Communicate offer</li> </ul>	<p>Implementation group</p> <p>Workforce Development</p> <p>Cross sector partners to be identified by the implementation group</p>	<p>Existing platforms and processes</p> <p>Staff time and capacity</p> <p>Methods to engage those without digital access</p>	2023-2024	<p>Learning and development plan agreed by Implementation Group</p> <p>Training opportunities available and integrated</p> <p>Good uptake of training across partners</p>
Ensure effective monitoring and evaluation to ensure learning, training and development opportunities are effective, support the strategy, and	<ul style="list-style-type: none"> <li>• Establish systems for monitoring and evaluating the reach, uptake, effectiveness and impact of training, working collaboratively with HDRC</li> <li>• Ensure systems build in an learning cycle to enable quality improvement ,</li> </ul>	<p>Implementation group</p> <p>Workforce Development</p>	<p>Staff time and capacity</p> <p>Training and learning resources</p> <p>Potential procurement of specialist training</p>	2023-2025	<p>Evaluation and learning report completed and reported back to the Health and Wellbeing Board.</p> <p>Improved knowledge of the strategy,</p>

Objective	Actions	Lead	Resources required	Timeframe	Outcome
have a positive impact	effective use of resources, and adaptation in response to need.				health inequalities, wider determinants and specific tools to guide decision making.  Methods effectively adopted within practice

## Part 2: Delivery of our Six Policy Objectives

Here we set out the key strategies, plans and programmes that will help us deliver Health and Wellbeing Strategy. Some of this work cuts across policy objectives. Through our mapping work, for each Health and Wellbeing Policy objective, we have identified four strategic layers that support delivery. They are:

- ‘Foundation strategic drivers’ - these are key strategies that are relevant to a number of the Health and Wellbeing strategy objectives and provide the foundation for a wide range of strategies, plans and policies
- ‘Key drivers’ - those which provide a foundation or framework for work on the specified Health and Wellbeing Policy objective,
- ‘Targeted strategies’ - those which focus on a particular group or population’ and,
- ‘Topic-based’ strategies which focus on one particular element of the Health and Well-being objective.

We have also collated programmes – we purposefully did not include day to day services but focused on pilot, developing or time-limited work which has the potential to deliver substantial progress on Health and Wellbeing Policy objectives. This is not an exhaustive list, but key initiatives identified together with partners.

By capturing this in one place, we hope to build a picture of the work supporting delivery of the strategy. The Health and Wellbeing Board can use this to ensure the work of partners is aligned to the Health and Wellbeing Strategy, identify areas it wishes to

influence, and contribute to, or monitor progress against this work to help maximise progress and impact on Health and Wellbeing Strategy objectives.

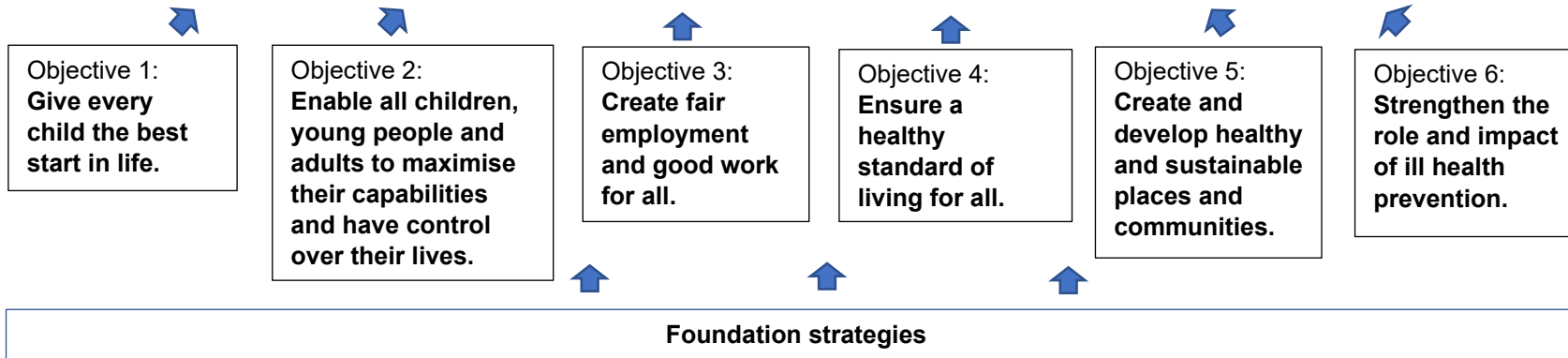
On an ongoing basis, there is a need for strategies, programmes, services, and plans to consider their work in relation to the strategy and support of the policy objectives. The Health and Wellbeing in all Policies implementation theme will support this work. Health and Wellbeing Board may wish to seek assurance that resources are used in line with the actions set out in the strategy, prioritise prevention, and are proportionate to need.



# Delivering the Health and Wellbeing Strategy and Thrive

**Our overarching approach:**  
**Making Gateshead a place where everyone thrives**

**Health & Wellbeing Vision:**  
**Good jobs, homes, health and friends**  
 'Aiming to deliver the most positive outcomes for everyone but focusing our resources to benefit those in the most need.'



**Other strategies, plans and policies across partner organisations**

## Foundation strategic drivers

These are key strategies that are relevant to a number of the Health and Wellbeing strategy objectives and provide the foundation for a wide range of strategies, plans and policies. It is therefore important that they align closely with Health and Wellbeing strategy objectives to maximise progress on its objectives

Strategy	Status	Strategic Lead	Timeframe	Governance and reporting structures	Key aims
Economic Development Strategy	Current	Strategic Director, Economy, Innovation and Growth	Long-term strategy. Next review late 2024	External: Thriving Economy Board (proposed) & HWB Board  Internal: Economy Delivery Board, CMT & Cabinet	<ul style="list-style-type: none"> <li>• Building the economy of the future</li> <li>• Supporting businesses</li> <li>• Helping people</li> <li>• Shaping future places</li> <li>• Improving connectivity</li> </ul>
Housing Strategy	Current	Strategic Director, Housing, Environment and Healthy Communities	2018-30	Strategic Housing Board, Housing Portfolio and HWB Board  SMG Housing, CMT & Cabinet  Partnerships include the Gateshead Housing Providers Partnership, Housing Development Forum and the Homelessness Forum	<p><b>Housing Supply - Delivering the homes we need</b> ‘To ensure the supply of new housing and use of existing stock best meets current and future needs and aspirations.’</p> <p><b>Housing Standards - Ensuring our homes sustain health and wellbeing</b> ‘To improve the quality, condition and management of housing so that all residents benefit from safe, healthy and well-managed homes.’</p> <p><b>Housing Support - Supporting our residents to thrive</b> ‘To help residents access, and sustain, a home which promotes their wellbeing.’</p>

Strategy	Status	Strategic Lead	Timeframe	Governance and reporting structures	Key aims
Investment Strategy	To be developed over the next 3 months	Strategic Director, Resources and Digital	5 years	CMT/SMG Projects/Cabinet	Ensuring that capital resources are aligned to Council priorities and strategies and the achievement of Thrive and to maximise positive outcomes for Gateshead residents and businesses and the local economy.
Community Safety Partnership Plan	Current	Director of Public Health and Community Safety Partnership Board partners	2020-2023	Community Safety Partnership Board	<p>Strategic priorities:</p> <p>Violence, exploitation and abuse</p> <ul style="list-style-type: none"> <li>• serious violence and knife crime</li> <li>• domestic abuse (including violence against women and girls)</li> </ul> <p>Thriving neighbourhoods and communities</p> <ul style="list-style-type: none"> <li>• anti-social behaviour (youth, adult and place)</li> <li>• locality-based problem solving</li> </ul> <p>Community cohesion and resilience</p> <ul style="list-style-type: none"> <li>• hate crime and tension monitoring</li> <li>• preventing violence extremism, radicalisation and terrorism.</li> </ul>
Gateshead Health NHS Foundation Trust 'Our patients, our people, our partners' Corporate Strategy	Current	Chief Executive Officer	2022/23 - 2024/25	Gateshead NHS Foundation Trust's board	<p>Strategic aims:</p> <ul style="list-style-type: none"> <li>• continuously improve the quality and safety of our services for our patients.</li> <li>• be a great organisation with a highly engaged workforce.</li> <li>• enhance our productivity and efficiency to make the best use of our resources .</li> <li>• be an effective partner and be ambitious in our commitment to improving health outcomes.</li> <li>• develop and expand our services within and beyond Gateshead.</li> </ul>

Strategy	Status	Strategic Lead	Timeframe	Governance and reporting structures	Key aims
Gateshead Health NHS Foundation Trust Health Inequalities Strategy	Agreed			Gateshead Health NHS Trust Health Inequalities Board which reports to Board SMT and Quality Governance Committee.	Strategic aim four: be an effective partner and be ambitious in our commitment to improving health outcomes Objectives: <ul style="list-style-type: none"> <li>• Tackle our health inequalities</li> <li>• Work collaboratively as part of Gateshead Cares system to improve health and care outcomes to the Gateshead population.</li> </ul>
North East and North Cumbria Integrated Care Strategy	Current	North East and North Cumbria (NENC) Integrated Care Partnership			Key aims are longer, healthier life expectancy, excellent health and care services and fairer health outcomes with a focus on: <ul style="list-style-type: none"> <li>• Prevention and health promotion</li> <li>• Improved health and digital literacy</li> <li>• Addressing health inequalities Core20Plus5</li> <li>• Long Term Conditions, Learning Disabilities and autism, cancer and mental health.</li> </ul>
Gateshead Place Plan	In development	North East and North Cumbria (NENC) Integrated Care Partnership			Main priorities/themes: <ul style="list-style-type: none"> <li>• Integration: developing integrated neighbourhood teams in line with the Fuller report recommendation</li> <li>• Primary care and community services including mental health</li> <li>• Social care as relates to the NHS</li> <li>• Population health including priorities from the Health &amp; Wellbeing Board,</li> </ul>

Strategy	Status	Strategic Lead	Timeframe	Governance and reporting structures	Key aims
					JSNA and Joint Local Health & Wellbeing Plans <ul style="list-style-type: none"> <li>• Reducing inequalities including Core20Plus5 and Deep End Practices</li> <li>• Place governance and partnership working.</li> </ul>

## Give every child the best start in life

### Key drivers

Strategy	Status	Organisations involved	Timeframe	Governance and reporting structures	Key aims
Children & Young People's Strategy	In development	Lead: NENC ICB			
Early Help Strategy	To be agreed April 2023.	Lead: Gateshead Council	2023-2026	Health and Wellbeing Board  Gateshead Safeguarding Children Board	Partnership Early Help Strategy providing the vision, principles, priorities and performance framework for supporting families in need of early intervention and prevention across the Gateshead early help system.
Children and Young People's mental health and emotional wellbeing	Agreed	Lead: NENC ICB Gateshead Cares Gateshead Council	2022/23	NHSE Health & Wellbeing Board CYP MHLDA Board	The Gateshead Local Transformation Plan has been developed to bring about coordinated change across the whole system to improve the emotional health and wellbeing of children, young people and families by:

Strategy	Status	Organisations involved	Timeframe	Governance and reporting structures	Key aims
transformation plan 2022/23					<ul style="list-style-type: none"> <li>• Building resilience, prevention and early intervention</li> <li>• Improving access to effective support</li> <li>• Caring for the most vulnerable</li> <li>• Developing the workforce</li> </ul>
Multi-Agency Safeguarding Arrangements (MASA) Children & Young People	Current	Gateshead Safeguarding Children Partnership	2022-2024	<p>The three Safeguarding Partners with delegated responsibility are:</p> <ul style="list-style-type: none"> <li>• Strategic Director (DCS) of Children's Services – Gateshead Council</li> <li>• Director of Nursing – North East &amp; North Cumbria Integrated Care Board</li> <li>• Designated Chief Superintendent – Northumbria Police</li> </ul> <p>The Safeguarding Partners will discharge their broader responsibilities through the Gateshead Safeguarding Children Partnership (GSCP) and its groups.</p>	There is a shared and collective responsibility between organisations and agencies to safeguard and promote the welfare of children in Gateshead.

## Other relevant strategies

### Targeted strategies

Strategy	Lead	Status
Children & Young People in Care & Care Leavers Strategy 2018-23	Gateshead Council	Current
Safeguarding Adults and Children Strategy 2019-2022	NGCCG	Current
Reducing the number of children in need of Care Strategy	Gateshead Council	Current
Special Educational Needs & Disability Strategy	Gateshead Council	In development
Gateshead Accessibility Strategy 2021-2024	Gateshead Council/Education Gateshead	Current
Elective Home Education Strategy 2020-25	Gateshead Council/Education Gateshead	Current
Gateshead Youth Justice Strategic Plan 2021-23	Gateshead Council	Current
Hot food takeaway SPD – overweight children	Gateshead Council	Current

### Topic-based strategies

Strategy	Lead	Status
Anti-bullying strategy 2020-25	Gateshead Council	Current
Emotionally Based School Avoidance (EBSA) Strategy 2020-2025	Gateshead Council/Education Gateshead	Current
Attendance strategy 2020-25	Gateshead Council	Current
Learning and Skills Strategy	Gateshead Council	Current
Physical Activity Strategy 2022-2032	Gateshead Council	Current
Fuel Poverty Plan	Gateshead Council	Draft

## Key programmes

Strategy	Aim	Strategic Lead	Timeframe	Governance and reporting structures
Development of Family Hubs and Start for Life Programme	<ul style="list-style-type: none"> <li>An integrated support offer to families with dependent children</li> <li>An all-age menu of help and advice for people of all ages, regardless of family composition.</li> </ul>	Director of Public Health	Current funding up to 31/3/2025	The Family Hubs and Start for Life Steering Group is directly accountable to the Health and Wellbeing Board.
Children & Young People: Best Start in Life / SEND	Adopting a system approach including: <ul style="list-style-type: none"> <li>Further improvements to the Local Offer</li> <li>Increase co-production with our Children, Young People and Families, ensure that all the resources across the system are joined up</li> <li>Develop and deliver training packages across health, education and social care</li> </ul>	ICB CYP&F Lead		Health & Wellbeing Board  SEND Board  CYP MHLDA Board  Gateshead Cares
ASB Review	A major review of ASB services in Gateshead that will: <ul style="list-style-type: none"> <li>better understand together how we tackle ASB in Gateshead</li> <li>agree a shared purpose between services involved in tackling ASB, supporting victims and in helping those connected with ASB to change their behaviour</li> <li>set up and test new ways of working that achieve that purpose and make best use of resources</li> <li>From the learning, make informed decisions about permanently changing the way the work is carried out.</li> </ul>	Strategic Director, Housing, Environment and Healthy Communities	Until March 2024	Community Safety Board



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

### Key drivers

Strategy	Status	Organisations involved	Timeframe	Governance and reporting structures	Key Aims
Early Help Strategy	In development	Lead: GC	April 2023	See 'Give Every Child a Best Start in Life' key drivers table.	
Multi-Agency Safeguarding Arrangements (MASA) Children & Young People	Current	Gateshead Safeguarding Children Partnership	2022-2024	See 'Give Every Child a Best Start in Life' key drivers table.	
Children and Young People's mental health and emotional wellbeing transformation plan 2022/23	Agreed	Lead: NENC ICB Gateshead Cares Gateshead Council	2022/23	See 'Give Every Child a Best Start in Life' key drivers table.	
Integrated Adults and Social Care Services Living Thriving Lives Plan	Draft	Lead: GC	2023-2028	Monitoring commitment and delivery of the vision an action and delivery plan is being developed. Reporting annually on progress with the production of a local account	<p>Vision: To work with our communities to enable residents to live thriving lives, be independent and individual, support themselves and each other, and access personalised quality support when they need it.</p> <p>Priority areas:</p> <ul style="list-style-type: none"> <li>• Prevent, reduce and delay the need for support</li> <li>• Caregivers</li> <li>• Workforce</li> </ul>

Strategy	Status	Organisations involved	Timeframe	Governance and reporting structures	Key Aims
					<ul style="list-style-type: none"> <li>Commissioning</li> </ul>
Gateshead Safeguarding Adults Board Strategic Plan 2019-2024 2022 Refresh	Current	Lead: Gateshead Safeguarding Adults Board	2019-2024	Gateshead Safeguarding Adults Board is a statutory body. An Independent Chair enhances scrutiny and challenge.	<p>Everybody in Gateshead has the right to lead a fulfilling life and should be able to live safely, free from abuse and neglect – and to contribute to their own and other people’s health and wellbeing.</p> <p>Key actions:</p> <ul style="list-style-type: none"> <li>Quality Assurance</li> <li>Prevention</li> <li>Communication and Engagement</li> <li>Operational Practice</li> <li>Mental Capacity.</li> </ul>
Corporate Commissioning & Procurement strategy	Agreed	Gateshead Council	2021/22 - 2026/27		<ul style="list-style-type: none"> <li>Tackling inequality, supporting local communities, and putting people at the heart of everything we do</li> <li>Investing in our local economy</li> <li>Working together for a better and greener future</li> <li>Delivering value for money and ensuring a sustainable Council.</li> </ul>

## Other relevant strategies

### Targeted strategies

Strategy	Lead	Status
Special Educational Needs & Disability Strategy	Gateshead Council	In development
Children & Young People in Care & Care Leavers Strategy 2018-23	Gateshead Council	Current
Reducing the number of children in need of Care Strategy	Gateshead Council	Current
Safeguarding adults & children strategy	Lead: NGCCG	To be reviewed
Resident Influence Strategy	Gateshead Council	Current
Carers Strategy	Gateshead Council	Being updated

### Topic-based strategies

Strategy	Lead	Status
Domestic Violence Strategy	Gateshead Council	In development
Culture Strategy	Gateshead Council	Requires updating.
Apprenticeship Strategy (Council) 2021-2024	Gateshead Council	Current

## Key programmes

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
Gateshead Cares Programme Areas. Each programme area will address health inequalities, prevention, integrating pathways and evaluating outcomes.				
Children & Young People: Best Start in Life / SEND	Adopting a system approach including: <ul style="list-style-type: none"> <li>• Further improvements to the Local Offer</li> <li>• Increase co-production with our Children, Young People and Families, ensure that all the resources across the system are joined up</li> <li>• Develop and deliver training packages across health, education and social care</li> </ul>	ICB CYP&F Lead		Health & Wellbeing Board  SEND Board  CYP MHLDA Board  Gateshead Cares
Ageing Well – Adults & Older People: <i>Transformation of Home Care</i>	A vibrant Home Care Market will indirectly support the Health and Care system to achieve better outcomes for people in the community.	Director of Commissioning	End March 2024	Health & Wellbeing Board  CMT
<i>Transformation of Care Homes</i>	A new model to deliver care home provision in Gateshead will enhance the quality of support for some of the most vulnerable adults, but also help shape how both residential and nursing care is developed and delivered over the next 10 years.	Director of Commissioning  Director of Place	End March 2024	Health & Wellbeing Board?  Joint Committee at Place?
<i>Frailty (Prevention)</i>	By reducing frailty and falls in older persons the programme aims to improve quality of life, reduce impact on care systems, reduce	NENC ICB		

<b>Programme</b>	<b>Aim</b>	<b>Strategic Lead</b>	<b>Timeframe</b>	<b>Governance and reporting structures</b>
	social isolation and enable people to live independently for longer.  Includes embedding the delivery pathway for Strength and Balance referrals and continue to support and promote exercise for over 50's in all settings.			
Community Mental Health Transformation	Develop a coordinated local offer focussed on addressing the wider determinants of mental and physical health through building local capacity and opportunities in communities. The work aims to foster closer working and integration of clinical and non-clinical services, which includes and is informed by experts by experience and delivered through a skilled workforce.	ICB Mental Health Lead	End March 2024	ICB Executive Health & Wellbeing Board Gateshead Cares
Multiple & Complex Needs (people@theheart)	To ensure pathways join up and reduce duplication.			
Adult Social Care Business Plan (draft)	Sets out goals, actions and success measures for the next 12 months	Service Director Adult Social Care	April 23 -March 24	Transformation Board and GMT
Development of locality working	To develop and embed community development approaches and strengthen partnership work across the borough.	Service Director - Neighbourhoods and Localities	March 2024	Corporate Management Team / Senior Management Team / OSC Corporate Resources / Strategic Housing Board
Develop Neighbourhood Teams	To deliver a model of integrated care and support for people and communities with the aims of:	Director of Place		NENC Executive

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
	<ul style="list-style-type: none"> <li>Streamlining access to care and support</li> <li>Providing proactive and personalised care through multi-disciplinary teams</li> <li>tackle health inequalities</li> </ul> <p>Make best use of resources – money, people, buildings across primary care. local authorities and communities.</p>			Health & Wellbeing Board

## Create the conditions for fair employment and good work for all

### Key drivers

Strategy	Status	Organisations involved	Timeframe	Governance and reporting structures	Key Aims
Corporate Commissioning & Procurement strategy	Agreed	Gateshead Council	2021/22 - 2026/27		See Key Drivers section, Enable all children, young people and adults to maximise their capabilities and have control over their lives
Gateshead Council Workforce Strategy	Current	Gateshead Council	2022-2025		To be an employer of choice. With quality services delivered by a flexible workforce which is healthy, engaged, motivated and who Thrive Through Work

### Other relevant strategies

#### Targeted strategies

Strategy	Lead	Status
SEND Strategy	Gateshead Council/Education Gateshead	Current

## Topic-based strategies

Strategy	Lead	Status
Strategic Economic Plan	NELEP	Current
Northern Powerhouse Strategy for the North	National government	Current
Recovery & Renewal Plan for the North East	LA7 & NELEP	Current
Newcastle Airport masterplan – connecting the North East to the world	LA7	Current
North East Bus Service Improvement Plan	Transport North East	Current
Modern Slavery Concept of Operations	Gateshead Council	Current
Apprenticeship strategy (internal)	Gateshead Council	Current
Culture Strategy	Gateshead Council	Requires updating

## Key programmes

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
Economic Development Strategy Programmes	<p>The intention is to establish work programmes aligned to the Policy Objectives in the following way (these will be defined as part of the production of a Delivery Plan this financial year).</p> <ul style="list-style-type: none"> <li>• Building an Economy of the Future – a work programme for each of the challenges/opportunities e.g. digital, green, visitor, local</li> <li>• Supporting Businesses</li> <li>• Helping People</li> </ul>	Strategic Director, Economy, Innovation and Growth	Long term with regular reviews	Programme and project boards

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
	<ul style="list-style-type: none"> <li>Shaping Future Places</li> <li>Improving Connectivity</li> </ul>			
Community Wealth Building	Community Wealth Building is a new people-centred approach to local economic development, which redirects wealth back into the local economy. It uses combined power of anchor institutions to retain as much wealth as possible in the local economy, whilst creating local opportunities, new jobs, and new enterprises.	Strategic Director, Corporate Services and Governance	Ongoing	
UK Sharing Prosperity Fund	<p>The UKSPF Investment Plan supports the Economic Development Strategy and its five objectives and has identified priority interventions and activities that can be delivered between now and March 2025. There are 3 investment priorities:</p> <ul style="list-style-type: none"> <li>Communities &amp; place</li> <li>Supporting local businesses</li> <li>People &amp; skills</li> </ul>	Strategic Director, Economy, Innovation and Growth	Up to March 2025	Cabinet
Gateshead Independent Volunteer Centre	For Gateshead residents, to provide opportunities that help people to find purpose, build skills and confidence, and increase wellbeing by promoting volunteering opportunities. For Gateshead organisations, to promote volunteering opportunities and to provide peer support around managing volunteers.	<p>Connected Voice</p> <p>Service Director, Voluntary and Community Sector Development</p>	Opened April 2022	



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

### Key drivers

Strategy	Status	Organisations involved	Timeframe	Governance and reporting structures	Key Aims
Corporate Commissioning & Procurement strategy	Agreed	Gateshead Council	2021/22 - 2026/27	See Key Drivers section, Enable all children, young people and adults to maximise their capabilities and have control over their lives	

### Other relevant strategies

#### Targeted strategies

Strategy	Lead	Status
Apprenticeship Strategy (internal)	Gateshead Council	Current
Homelessness and Rough Sleeping Strategy 2022-2027	Gateshead Council	Current

#### Topic-based strategies

Strategy	Lead	Status
Recovery & Renewal Plan for the North East	LA7 & NELEP	Current
Fuel Poverty Plan	Gateshead Council	In development

### Key programmes

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
Economic Development Strategy Programmes	See Key Programmes - Create the conditions for fair employment and good work for all			
Community wealth building	See Key Programmes - Create the conditions for fair employment and good work for all			

<b>Programme</b>	<b>Aim</b>	<b>Strategic Lead</b>	<b>Timeframe</b>	<b>Governance and reporting structures</b>
UK Shared Prosperity Fund	See Key Programmes - Create the conditions for fair employment and good work for all			
Warm spaces initiatives	To create a network of Warm Spaces, a group of places where Gateshead people can come together to stay warm, perhaps enjoy a cup of tea and a biscuit and be treated with dignity and respect.	Service Director, Voluntary and Community Sector Development		

## Create and develop sustainable places and communities

### Key drivers

<b>Strategy</b>	<b>Status</b>	<b>Organisations involved</b>	<b>Timeframe</b>	<b>Governance and reporting structures</b>	<b>Key Aims</b>
Corporate Commissioning & Procurement strategy	Agreed	Gateshead Council	2021/22 - 2026/27	See Key Drivers section, Enable all children, young people and adults to maximise their capabilities and have control over their lives	
Gateshead Climate Change Strategy	Agreed	Lead: Gateshead Council			<ul style="list-style-type: none"> <li>• By 2030 we will have achieved our commitment to making Gateshead carbon neutral, organisations will be working together in a combined effort to reduce carbon emissions.</li> <li>• Opportunities in the 'green economy' will be realised within the businesses benefiting from sustainable growth.</li> <li>• Our community will have healthier and more active lifestyles, improved access to nature, cleaner air, warmer homes with lower</li> </ul>

Strategy	Status	Organisations involved	Timeframe	Governance and reporting structures	Key Aims
					<p>energy bills and better access to local services.</p> <ul style="list-style-type: none"> <li>We will have supported our community through this change, and we will reduce inequalities across the borough, enabling everyone to thrive.</li> </ul>
Northumbria Police Neighbourhood Strategy 2020-25	Current	Northumbria Police	2020-25		We are determined to keep our communities safe; supportive and inclusive of our diverse communities; passionate about our region; dynamic in our approach to understanding and solving problems and proud of what we do.
Northumbria Police Crime Prevention Strategy 2020-25	Current	Northumbria Police	2020-25		Fewer victims, fewer offences, and less demand on policing achieved by addressing the causes of crime, utilising sophisticated partnership oriented problem solving.

### Other relevant strategies

#### Targeted strategies

Strategy	Lead	Status
Supplementary Planning documents	Gateshead Council	Current
Tenancy Strategy	Gateshead Council	Agreed
Specialist and Supported Accommodation Strategy	Gateshead Council	To be agreed
Zero Carbon Heat Strategy	Gateshead Council	Current
Chopwell Plan	Gateshead Council	Current

## Topic-based strategies

Strategy	Lead	Status
Green Infrastructure and Delivery Plan	Gateshead Council	Draft
Climate Emergency Action Plan	Gateshead Council	Current
Gateshead Cycling Strategy	Gateshead Council	Current
Gateshead Local Cycling and Walking Infrastructure Plan	Gateshead Council	In development
Highways Asset Management Plan	Gateshead Council	Current
Physical Activity Strategy	Gateshead Council	Current
North East Bus Service Improvement Plan	Transport North East	Current
Newcastle Airport masterplan – connecting the North East to the world	LA7	Current
Housing Development Strategy and Delivery Programme 2022-2025	Gateshead Council	Current
Early Intervention Strategy 2021-25	Northumbria Police	Current
Northumbria Police Serious Violence and Homicide Strategy 2021-25	Northumbria Police	Current
Hate Crime Action Plan	Northumbria Police	Current

## Key programmes

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
Economic Development Strategy Programmes	See Key Programmes - Create the conditions for fair employment and good work for all			
UK Shared Prosperity Fund	See Key Programmes - Create the conditions for fair employment and good work for all			
Development of local working	See Key Programmes - Enable all children, young people and adults to maximise their capabilities and have control over their lives			
Active Travel Social Prescribing Pilot	To create the conditions that support those living in the most economically challenging	Director of Public Health	April 2023-April 2025	Strategic and Operational multi-agency

<b>Programme</b>	<b>Aim</b>	<b>Strategic Lead</b>	<b>Timeframe</b>	<b>Governance and reporting structures</b>
	areas of Gateshead to participate more frequently in active forms of travel, increasing their level of physical activity, and improving their health and wellbeing.			<p>project groups formed to steer and oversee the project. Regular reporting through mechanisms established by Active Travel England (ATE).</p> <p>Cabinet approval sought and a further update to be provided once project established.</p>

### Strengthen the role and impact of ill health prevention

#### Key strategic drivers

<b>Strategy</b>	<b>Status</b>	<b>Organisations involved</b>	<b>Timeframe</b>	<b>Governance and reporting structures</b>	<b>Key Aims</b>
Children & Young People's Strategy	In development	<b>Lead:</b> NENC ICB			
Children and Young People's mental health and emotional wellbeing transformation plan 2022/23	Agreed	Lead: NENC ICB Gateshead Cares Gateshead Council	2022/23	See 'Give Every Child a Best Start in Life' key drivers table.	

Primary Care Strategy and Delivery Plan	In development	NENC ICB	Strategy: 2023/28  Delivery Plan 2023/25		
Tenancy Strategy	Current	Joint Leads: Gateshead Council and the Housing Providers Partnership	2022-27		<ul style="list-style-type: none"> <li>• To set out our expectations for our partner registered providers when formulating their own housing policies.</li> <li>• To provide a clear development mandate across the borough and specifically with areas subjected to local plans.</li> <li>• To assist affordable housing developers to understand what the council requires of social housing landlords who own, let and manage stock</li> <li>• To ensure that the supply of affordable housing is genuinely affordable and built to a good standard to meet the needs of local residents, specifically of those on low income. The development of this supply will be linked to the aims set out in the housing strategy in response to climate and net zero.</li> <li>• To support communities to thrive through the creation of sustainable social housing offers.</li> <li>• To meet housing need, whilst recognising that need changes and evolves and the service needs to be able to flex with that evolution.</li> </ul>

### Other relevant strategies

## Targeted strategies

Strategy	Lead	Status
Homelessness and Rough Sleeping Strategy 2022-2027	Gateshead Council	Current
Homelessness Charter	Gateshead Council	Current
Specialist and Supported Accommodation Strategy	Gateshead Council	To be agreed
Children & Young People in Care & Care Leavers Strategy 2018-23	Gateshead Council	Current

## Topic-based strategies

Strategy	Lead	Status
Gateshead's Substance Misuse Strategy 2017-2022	Gateshead Council	Current. To be updated.
Green Infrastructure and Delivery Plan	Gateshead Council	Draft
Gateshead Healthy Weight Declaration	Gateshead Council	In development
Contaminated Land Strategy 2020	South Tyne and Wear Waste Management Partnership	Current
Physical Activity Strategy	Gateshead Council	Current

## Key programmes

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
Family hubs/Best Start in Life	See 'Create the conditions for fair employment and good work for all' key programmes.			
UK Sharing Prosperity Fund	See 'Create the conditions for fair employment and good work for all' key programmes.			
Housing Improvement Programme	Housing Improvement Programme <ul style="list-style-type: none"> <li>Homelessness and Allocations Review</li> <li>Anti-Social Behaviour Review</li> </ul>	Housing, Environment and Healthy Communities	Different programmes have	Housing Strategy

Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
	<ul style="list-style-type: none"> <li>• Housing Development Strategy</li> <li>• Home Improvement Agency</li> <li>• Locality Working</li> </ul> Construction Services Improvement <ul style="list-style-type: none"> <li>• Selective Landlord Licencing</li> <li>• Empty Homes</li> <li>• Older Persons Review</li> <li>• Specialist and Supported Needs Assessment and Strategy</li> </ul>		different timescales	
Changing Futures Northumbria (Homelessness Prototype)	Gateshead is participating in the delivery of the Changing Futures programme aiming to improve outcomes for people experiencing multiple disadvantage, including homelessness. There are 3 aims: <ul style="list-style-type: none"> <li>• Person – to stabilise and improve</li> <li>• Service – to transform local services</li> <li>• System – to test different approaches to funding between Central Government and the Local areas.</li> </ul>		?	
Primary Care Networks (PCN) Additional Roles Reimbursement Scheme (ARRS)	To support core General Practice with diversification and expansion of workforce.  Two specific roles in Gateshead currently feed in to ill health prevention with a more proactive and holistic focus (Social Prescribing Link Workers and Frailty nurses) but others will	Gateshead PCN Clinical Directors	Ongoing	Within PCNs



Programme	Aim	Strategic Lead	Timeframe	Governance and reporting structures
	contribute in part and new roles may develop under this scheme.			
Primary Care Networks Health Equity Forum	To delivery action within PCN areas to reduce inequalities based on local needs. Supporting the NHS focus on Core 20 plus 5.	GP Health Inequalities Clinical Fellow	Ongoing	Within PCNs

### Part 3: Further action identified to support the policy objectives

Through the mapping exercise, partners have identified the following gaps and priority areas for further work. These will be further prioritised and relevant actions identified at subsequent meetings of the Health and Wellbeing Strategy Implementation Group.

In completing this exercise, we found that that:

- **Empowering the workforce** in delivering the Health and Wellbeing strategy and supporting their wellbeing through the cost-of-living crisis was a priority. It is also an opportunity to enable staff to support the strategy's delivery and enable them to do the right thing to help people in Gateshead thrive
- **Poverty** in its many forms was identified as a key driver of health inequalities. A need for an overarching strategy across the system was identified as a gap
- **Digital inclusion** was also identified as a driver of inequalities, with concerns raised about access to health and care services, learning, employment, advice and information and services for those digitally excluded. Action across the system is needed.

- **Working and engaging with communities** in a meaningful way cuts across policy objectives. There is an opportunity to develop our approach to working with and empowering communities, building on community-centred approaches, assets, and the Voluntary and Community Sector (VCS), as a system. This could include methods such as co-production and asset-based approaches. How this links with locality-based working was highlighted as an area could be further explored. Children and young people need to be included through this work.
- **How we prioritise resources against evidence-based need** also came through strongly, with the need to use and share data to support longer-term prevention, acknowledge complexity within indicators and measures, and increasing understanding of where we can make a difference. {UPDATE: Capturing evidence of impact to influence decision makers elsewhere -
- **Childcare** was identified as an issue across several of the Health and Wellbeing policy objectives. There is not currently a childcare strategy in place for Gateshead. The most recent report on childcare sufficiency found that provision appeared sufficient, however, this does not mean all needs are met and childcare costs rose higher than inflation. Further information on this topic is needed in terms of how it impacts health and inequalities across the borough.
- **Additional learning and gaps identified** included:
  - Capturing the strategies and work of the system
  - Perceptions around public sector pay and conditions impacting retention and recruitment
  - Strategies e.g. Climate Change and the Apprenticeship strategy could be broader to include partners e.g. a shared public sector approach on big issues
  - Tension between acute issues e.g. cost-of-living crisis, hospital waiting times, and maintaining focus on long-term prevention.

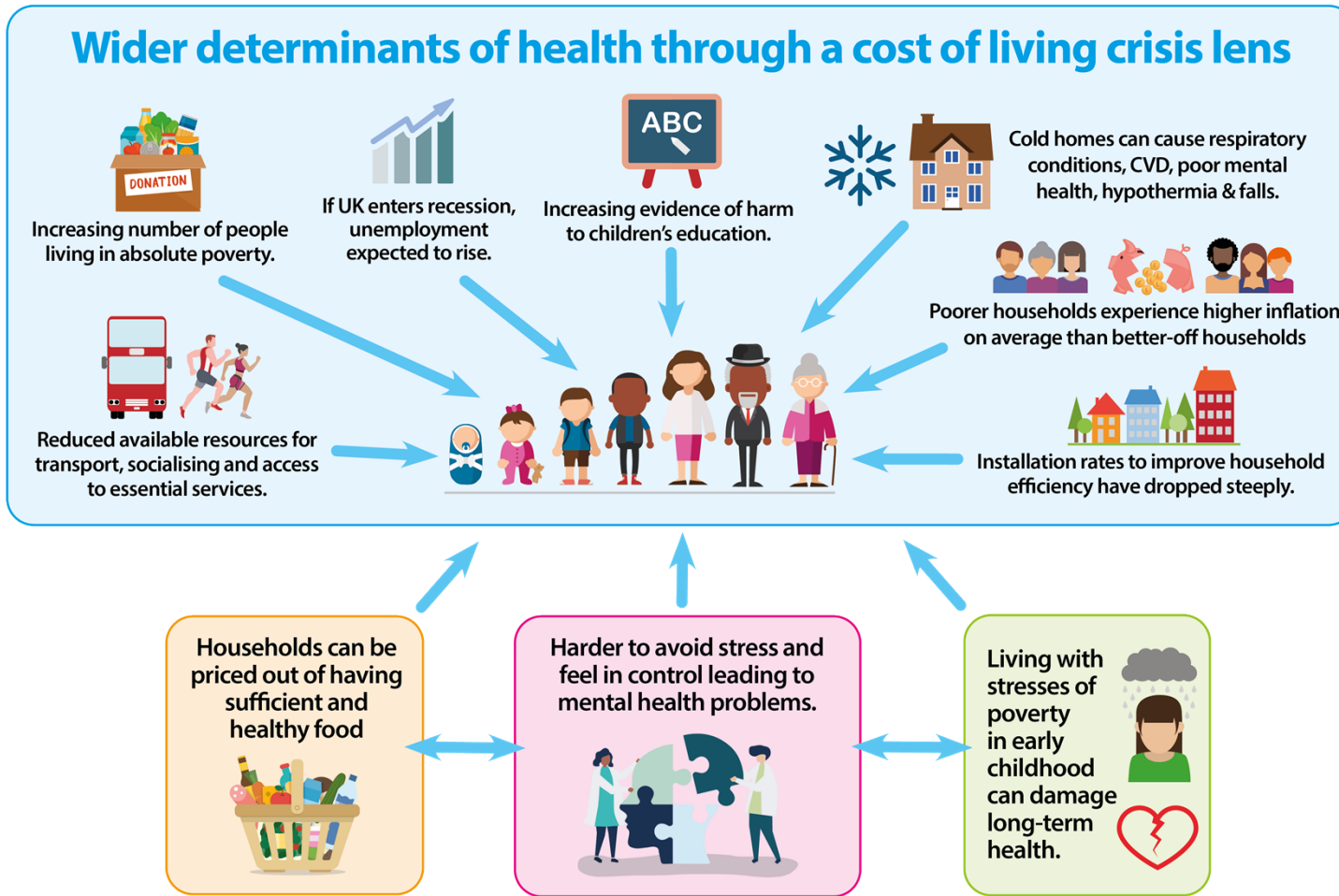
Some of these areas are already captured within the cross-cutting implementation work. But areas where further action would help support the aims and policy objectives of the Health and Wellbeing Strategy are set out here.

## 1. Addressing Poverty

Financial hardship can have a long-term impact on health through chronic stress, reduced opportunities and resources, access to healthy food and secure, stable, and good quality homes. The impact of poverty is far reaching, and as well it's negative impacts on health, it also has negative consequences for crime, education, and social mobility. The impact of poverty can be felt across a lifetime and can have long-term effects on child development.

The cost-of-living crisis through 2022-2023, has worsened the situation for people who were already vulnerable because of the pandemic. Costs have been increasing across utility bills, food and drink, and housing for mortgages and rent. Wages have not kept pace with increasing living costs and those on the lowest incomes are disproportionately affected as a greater proportion of their income is spent on these essentials, making it difficult to cut back, whilst also being less likely to access cheaper deals. For example, those on the lowest incomes are more likely to buy budget brands when grocery shopping which have increased in price at a greater rate than premium brands. They are also less likely to have the income to buy and invest in products that help save money in long run, such as cooking appliances and other energy efficiency measures.

The cost-of-living has increased for three out of four adults in the UK (ONS, 2022). National research has found that a greater proportion of adults are experiencing food insecurity than before the pandemic, with 3 in 10 people reporting they cannot afford balanced meals, and 1 in 10 reporting being hungry in the last month due to lack of money (Resolution Foundation, 2023). Child poverty has increased, with 28.9% of children under 16 years, estimated to be living in relative poverty in Gateshead in 2020/21.



The issue of poverty cuts across the policy objectives of the Health and Wellbeing Strategy, acting as both a barrier to achieving them, and with solutions to help address the causes and impacts of poverty found within them. Our work on the Health and Wellbeing Strategy Implementation approach and plan can help provide a catalyst for collaboration, partnership, and action across

organisations locally to help address this issue. This work will help provide strategic direction and linkage across key areas including food insecurity, fuel poverty, income maximisation, and employment.

### Overarching Outcomes

- The health impacts of poverty are identified and mitigated across the life-course
- All working age residents receive a living wage that considers the true cost of healthy living
- Individuals and families are supported to have the best possible financial wellbeing, to access debt and social welfare advice, to maximise household income and improve financial management skills

### Addressing Poverty Action Plan

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Provide targeted support for people struggling with poverty	<ul style="list-style-type: none"> <li>• Co-ordinate and develop local strategic commissioning and operational structures to coordinate services designed to alleviate poverty.</li> <li>• Review related grants and funding streams available and develop a more joined up person centred approach</li> <li>• Improving access by maximising the accessibility of services so that those in the greatest need can be reached.</li> <li>• Promote information, advice and support to service users and professionals.</li> <li>• Continue to invest in advice, information and guidance with a strong emphasis on income</li> </ul>	Service Director, Voluntary and Community Sector Development working with strategic leads across partners	Staff time and capacity  Budget	2023-26 TBC	<p>Residents will be able to access essential services on a channel and at a time that suits their needs.</p> <p>Residents and frontline staff will know what services are available, how to signpost and refer.</p> <p>People who live, work or study in Gateshead have access to good quality, advice,</p>

Objective	Actions	Lead	Resources required	Timeframe	Outcome
	<p>maximisation and money problems.</p> <ul style="list-style-type: none"> <li>Undertake analysis of those approaching the Council for financial support to understand their needs.</li> </ul>				information and guidance.
Develop local support and food networks to reduce food and fuel poverty	<ul style="list-style-type: none"> <li>Improve connectivity and collaboration in relation to food insecurity, food waste, fuel poverty and energy efficiency.</li> <li>Develop local support and food networks to reduce food and fuel poverty.</li> <li>Increase the uptake of Healthy Start vouchers and free school meals.</li> <li>Explore the potential for moving towards free school meals for all children regardless of income.</li> <li>Review the impact and effectiveness of the Warm Spaces initiative to inform further development and investment.</li> </ul>	Service Director, Voluntary and Community Sector Development working with strategic leads across partners	Staff time and capacity	2023-26 TBC	<p>Duplication will be reduced; our approach will be consistent and resource will be maximised.</p> <p>Residents at risk of crisis will have access to emergency food and fuel.</p> <p>More pregnant women and parents with children under 4 years of age can buy milk or fruit and receive free vitamins.</p> <p>More children receive a healthy breakfast and lunch, improving</p>

Objective	Actions	Lead	Resources required	Timeframe	Outcome
					their health and educational attainment. Warm Spaces are a sustainable option for residents who are experiencing cold homes, loneliness and isolation.
Build the capacity of residents and communities	<ul style="list-style-type: none"> <li>Facilitate community action, volunteering and mutual support.</li> <li>Continue to invest in and support the development of the Independent Volunteer Centre.</li> <li>Raise educational attainment, aspiration and social mobility.</li> <li>Support individuals and families in to work.</li> <li>Seek ways to address the growing problem of social isolation and loneliness across all age groups.</li> </ul>	Service Director, Voluntary and Community Sector Development working with strategic leads across partners	Staff time and capacity	2023-26 TBC	More people volunteer which improves loneliness, isolation and for those who want to work, it moves people closer to employment.
Campaign for long term change in government policy and practice	<ul style="list-style-type: none"> <li>Understand the breadth of data within local government and strategic partners, and any gaps that we need to close.</li> <li>Use our data and insight to develop campaign themes.</li> <li>Join forces with local advice agencies to support a benefit take-up campaign recognising there are millions of pounds of unclaimed</li> </ul>	Service Director, Voluntary and Community Sector Development working with strategic leads across partners	Staff time and capacity	2023-26 TBC	<p>We better understand what data we have, and any gaps we may need to close.</p> <p>We stop collecting any data that isn't useful to us, and we focus on the</p>

Objective	Actions	Lead	Resources required	Timeframe	Outcome
	<p>benefits Gateshead residents are missing.</p> <ul style="list-style-type: none"> <li>Partner organisations understand the steps required to become a real living wage employer and identify actions needed to work towards this.</li> </ul>				<p>data that will make the biggest impact.</p> <p>Our campaign themes are evidenced and support our goal of reducing inequality and ensuring every resident has the opportunity to Thrive.</p> <p>Resident income is maximised and unclaimed benefits in Gateshead reduced.</p> <p>Our employees have a good standard of living and are able to make healthy choices.</p>

## 2. Digital Inclusion

Digital inclusion is about having the skills and capabilities to be able to use digital devices such as the internet, smart phones and computers, having access to digital devices to be able to access services and information, and ensuring that digital services are designed to meet everyone's needs. Through the COVID-19 pandemic, we experienced the opportunities that digital services and



technology can bring, through to sending and receiving information on social media, to being able to book and access health and care appointments/support. For some people in our communities, this meant improved access to information and services, but for others who may not have the resources, the connectivity, and capabilities they need, it could create a barrier. We also know that the cost-of-living crisis is negatively impacting on peoples' ability to fund access to digital connectivity, although use of digital access can help reduce other costs/resources such as travel and time, and has a positive impact on carbon levels, (whilst appreciating that digital technology in and of itself has a carbon footprint). Specifically in terms of access to health and care services via digital routes it is also acknowledged that lack of health literacy can create a barrier for people; challenges with general literacy can create barriers to all digital routes, although with the right access tools, digital devices can improve access for those who require additional support.

In Gateshead, the Gateshead Cares Alliance has sponsored a digital inclusion programme, which is supported by the Council, ICB, Trust, VCSE, AHSN, LEP and industry partners. A Digital Inclusion Programme Manager has been appointed by Connected Voice (with funding from Gateshead Cares) and will commence in 2023. Their role will be to coordinate and connect with multiple partners across the Borough who are working in this space; to help identify and share good practice; connect with other places and systems to learn from their experience; bid for additional funding; improve our understanding of the reach and impact of digital exclusion in Gateshead; explore social value propositions relating to digital inclusion.

### Overarching Outcomes

- Everyone can be an active part of their community
- Everyone can access the services they need in the community to enable them to thrive
- Inequalities in digital skills and resources are reduced, leading to a reduction in health inequalities.

### Digital Inclusion Action Plan

Objective	Actions	Lead	Resources required	Timeframe	Outcome
To identify need in relation to digital exclusion to	<ul style="list-style-type: none"> <li>• Identify data, intelligence, stakeholders, and research that helps us understand need and populations affected by digital exclusion.</li> </ul>	Digital Inclusion Programme Manager working with strategic leads in key areas including:	Staff time  To be determined	2023-26 TBC	The groups and communities who face digital exclusion are identified and their

Objective	Actions	Lead	Resources required	Timeframe	Outcome
better understand where to target initiatives	<ul style="list-style-type: none"> <li>Work together as partners across the system to understand where digital exclusion may act as a barrier to achieving the health and wellbeing strategy policy objectives, access to services, and reducing inequalities in Gateshead.</li> <li>Identify interventions and initiatives that can be utilised to reduce digital exclusion.</li> </ul>	Health Care Libraries Resources and Digital Economic Development			needs are understood and used to inform development of plans and interventions.
To join up and work collaboratively on digital exclusion to maximise use of resources and systematically address digital exclusion across policy objectives.	<ul style="list-style-type: none"> <li>Hold a cross stakeholder session to look at the role different services and sectors could play to learn from best practice, maximise use of resources, and take forward actions to reduce digital exclusion.</li> <li>Consider use of the Local Government Digitalisation Almanac as a resource and guide to support partners to support collaboration and action on digital inclusions.</li> </ul>	Digital Inclusion Programme Manager working with strategic leads in key areas:  Health Care Libraries Resources and Digital Economic Development	Staff time  To be determined	2023-26 TBC	Initiatives and interventions to reduce digital exclusion are joined up, with best practice identified and shared, to maximise use of resources and impact.
Understand the reach and effectiveness of interventions to address digital exclusion	<ul style="list-style-type: none"> <li>Consider interventions through an inequalities lens, identifying barriers and evaluating interventions and programmes against this.</li> <li>Build in approaches for reflection and learning to understand impact and effectiveness, and continuous quality improvement.</li> </ul>	Digital Inclusion Programme Manager working with strategic leads in key areas:  Health Care Libraries	Staff time  To be determined	2023-26 TBC	Learning and evaluation is in place, enabling us to measure our progress, understand our reach, and the impact of this work.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
		Resources and Digital Economic Development			This is used to inform ongoing practice.

### 3. Whole System Approach to Children and Young People’s Emotional Health and Wellbeing

Whilst children and young people were at lower risk directly because of COVID-19, the measures that were put in place to control the virus and subsequent impacts of lost learning, social and developmental opportunities, along with the increased financial pressure experienced by many families, could have significant impacts for health and wellbeing. Gateshead’s Director of Public Health Report 2020-21, Behind the Masks, identified that children and young people experienced significant disruption to their lives at key stages in their development and the need to focus on how we support our children and young people to recover, if we are to limit the impact into the future.

Since the pandemic we have seen:

- Increasing levels of children living in poverty
- Increases in persistence absence from school among secondary school age pupils
- Increased number of children with identified special educational needs
- An increase in the number of children in care
- Increased hospital admissions for self-harm among teenagers and young people.

Like other age groups, children and young people’s health is influenced by multiple factors which may include poverty, trauma, abuse, bullying, and family difficulty. We cannot treat young people and expect them to get better, whilst they continue in the conditions that led to them becoming unwell. Action is needed across all six policy objectives to improve these conditions for children and young people too. To support this, a whole system approach is needed to address the determinants of child health, with collaboration between the NHS, housing, education, public health, social services, voluntary and community organisations, community safety, police, and youth justice sectors.

## Overarching outcomes

- The circumstances which result in adverse childhood experiences are prevented
- All permanent school exclusions are prevented
- All young people are resilient, with good physical and mental health and wellbeing
- All young people are ready and appropriately skilled for the workplace
- parents can access support proportionate to meet their needs, to be the best parents they can
- Gateshead is a positive place in which everyone’s mental health and wellbeing can flourish.

## Whole System Approach to Children and Young People’s Emotional Health and Wellbeing Action Plan

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Understand the root causes of increasing levels of poor mental health and wellbeing among young people, including the full causal pathway for emotional health and wellbeing for girls and young women,	<ul style="list-style-type: none"> <li>• Conduct a Child and Adolescent Mental Health Needs Assessment to identify root causes of poor mental health and wellbeing and make recommendations for practice to support prevention and early intervention.</li> <li>• Share the learning and recommendations from the Health Needs Assessment among partners in the system.</li> </ul>	ICB  Public Health and Wellbeing  Children’s Services  Community Safety	Budget	2023-2024	The root causes of children and young people’s emotional health and wellbeing are understood and mapped against current services and provision.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
so that we can intervene and prevent self-harm.					
Continue to build and develop a whole systems response across sectors	<ul style="list-style-type: none"> <li>• Conduct a deep dive into the current system in relation to the HNA recommendations, with the aim of reducing inequalities and improving wellbeing through a whole system approach.</li> <li>• Include the HNA recommendations within this action plan to support implementation and monitor progress as part of a system response across settings.</li> <li>• Ensure strategy, plans and programmes for children and young people are driven by the Health and Wellbeing Strategy.</li> <li>• Develop a youth strategy for Gateshead to ensure coordinated action and delivery across sectors</li> </ul>	ICB Implementation Group Public Health and Wellbeing Children's Services Community Safety Neighbourhoods	Staff time and capacity	2023-2025	Organisations and services in Gateshead work together to embed the Health and Wellbeing Strategy into their work, taking an equitable, whole-system, preventative approach to children and young people's emotional health and wellbeing.

#### 4. Affordable, Accessible Childcare

Childcare acts as an enabler across a several Health and Wellbeing Strategy Policy objectives. Early years provision, delivered through childcare settings, helps provide a foundation for Best Start In Life, providing social, learning and developmental opportunities. When childcare is accessible and affordable, it helps parents access employment, providing the whole family with income that provides resources for a healthy life. As identified in Gateshead's Director of Public Health annual report, Mind the Gap, the cost of childcare can be a barrier to employment, particularly for single parent households, where the cost of childcare can outweigh their wages.

In Gateshead, the childcare sufficiency assessment (2021) found that there appears to be sufficient childcare places in Gateshead, however, the needs for all parents/carers may not be met if they work outside of core hours or have unusual patterns, such as shift workers or those working in health and social care. It identified that the number of two year olds eligible for a funded place is reducing, both due to a declining birth rate and as a result of earning eligibility thresholds (£15400) not increasing in line with earnings growth. This risks the sustainability of provision. Uptake of eligible funded places is high in Gateshead.

The cost of childcare has been increasing in Gateshead. In the North East, full time nursery fees for a child under 2 are on average £238.03 per week, equivalent to 45% of a man's average salary in Gateshead and 59% of a woman's average salary in Gateshead.

Director of Public Health annual report, Mind the Gap, recommended that we advocate for childcare to be more affordable so that women have the choice of returning to employment and that we should work with employers to encourage flexible working practices, for both males and females, and positively demonstrate how this can be successfully achieved.

### Overarching outcomes

- All children start school ready to learn
- Affordable childcare is accessible to those who need it

### Affordable, Accessible Childcare Action Plan

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Build the evidence base on childcare as enabler for the health and wellbeing strategy	<ul style="list-style-type: none"> <li>• Work with research partners and local organisations to identify barriers and solutions to affordable and accessible childcare locally.</li> </ul>	Implementation Group	To be determined	2023-2025	Research findings support us to understand and describe the impacts of childcare on health, and the opportunities to take this work forward.

Objective	Actions	Lead	Resources required	Timeframe	Outcome
Identify opportunities for a whole system approach to childcare provision locally	<ul style="list-style-type: none"> <li>Hold a cross stakeholder session to look at the role different services and sectors could play to help enable affordable and accessible childcare provision such as apprenticeships, neighbourhood planning, economic development, transport.</li> <li>Consider childcare in relation to anchor institutions in the Borough, involving staff to understand childcare needs and lived experience and considering ways these can be supported through co-design and as employers</li> <li>Identify and agree a set of actions to support this work going forward, incorporating these into the Health and Wellbeing Strategy Implementation plan going forward.</li> </ul>	<p>Implementation Group with strategic leads for key areas including:</p> <p>Early Years and Education Economic Development Neighbourhoods Planning Transport Human Resources and those working on anchor institutions</p>	<p>Initially staff time and capacity</p> <p>Potential resources required for any facilities for any specific initiatives identified and agreed for staff within organisations</p>	2024-2026	<p>The agenda is owned across sectors, each considering their role, and identifying opportunities for action</p> <p>Childcare support becomes more accessible for a greater range of people supporting access to employment and best start in life.</p>
Communicate the evidence base and advocate for affordable, accessible childcare	<ul style="list-style-type: none"> <li>Incorporate the learning and evidence base on this work into the overarching communications plan for the Health and Wellbeing Strategy.</li> </ul>	Communication leads	Staff time	2023-2027	We are able to use our learning to advocate for changes to national policy to improve access to overt

## Appendix 1: Our Health and Wellbeing Partnership

Organisations involved in developing and delivering this work:

- Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)
- Connected Voices
- Gateshead Council
- Gateshead Health NHS Foundation Trust
- North East North Cumbria Integrated Care Board
- HealthWatch
- Gateshead Cares System Board
- Northumbria Police
- Primary Care Networks

## **Appendix 2: Our Policy Objective strategic maps**

[These will be linked electronically when published online.]



**TITLE OF REPORT:           Feedback from Planning Session on Gateshead Health and Care System**

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## **Purpose of the Report**

1. To set out the feedback and key messages from the Health and Wellbeing Board Planning Session held on the 10<sup>th</sup> March, which focused on the future direction of our Gateshead health and care system.

## **How does the report support Gateshead's Health & Wellbeing Strategy?**

2. The report supports Gateshead's Health & Wellbeing Strategy 'Good Jobs, Homes, Health & Friends' as a key focus of the planning session was on what our priorities should be as a system, how they will they help us to deliver Gateshead's Health and Wellbeing Strategy and address the health and inequalities gap in Gateshead.

## **Background**

3. The Planning Session took place on the 10<sup>th</sup> March and was facilitated by Prof. Peter Kelly. Representatives of partners who sit on the HWB and Gateshead Cares System Board took part in the session including:
  - Gateshead Council
  - Integrated Care Board (Gateshead Place)
  - Foundation Trusts (Gateshead Health Trust, Newcastle Hospitals Trust and Cumbria, Northumberland, Tyne & Wear (CNTW) Mental Health Trust)
  - Community Based Care (Health) / Gateshead GP Federation
  - Primary Care
  - Healthwatch
  - VCS
  - Northumbria Police
  - Tyne & Wear Fire and Rescue Service
4. The format of the session was a mixture of:
  - Input and perspectives on where we currently are as a system and on our future direction of travel;
  - A mixture of Group and plenary discussions to consider questions that explored key issues relating to our work and working arrangements going forward.

## **Outputs from the Planning Session**

5. A summary of the feedback and discussions from session is attached as an appendix to this report.
6. Key messages from the session included:

### ***Transparency and Honesty in Addressing Inequalities Gap***

7. We need to be transparent and honest about those areas we have not made sufficient progress against e.g. in addressing the health and inequalities gap which is widening in Gateshead.
8. Existing funding arrangements can perpetuate health inequalities. We need to focus on the resources we control so that they can be targeted more equitably.

### ***Targeted Approach***

9. A targeted approach is needed more than ever if we are to bridge the inequalities gap, to reach communities most in need and to engage with disenfranchised members of our communities. Resources need to be targeted to where they are most needed.

### ***Accessibility***

10. There needs to be more of a focus on how our organisations gain access to individuals and communities, rather than how they should access our organisations and services.

### ***Focus on Prevention***

11. There needs to be a greater focus on prevention i.e. prevention at every opportunity. We need to find a way to resource preventative approaches to health and care against a backdrop of significant financial challenges across our local system.
12. We need to turn things on their head – justify why we should not focus on prevention (rather than having to justify a focus on prevention). A cultural change is needed to facilitate this.
13. We also need to be better at building in lived experience and value service user experience in developing preventative responses.

### ***Our Priorities***

14. We have the right priorities as a system that support our health and wellbeing strategy. It is more about how we align our priorities and take them forward with a focus on prevention e.g. through targeted approaches, as mentioned above.

### ***Our Workforce***

15. It is clear that there are workforce challenges across our health and care system which impact on how we can deliver key programmes of work that underpin our priorities. These challenges need to be addressed pro-actively in a joined-up way by partner organisations across our local system, making the most of opportunities to work in tandem with one another.

### ***Harnessing our Evidence Base and Data***

16. Data has also been identified as a key enabler in taking forward our priorities. We need to harness our evidence base and data across our system to inform and drive forward preventative approaches linked to our programme areas and enablers i.e. data and evidence led approaches.

### ***Doing what is best for Gateshead communities***

17. Whilst we need to comply with government / national requirements, our focus needs to be on what will secure the greatest benefit for Gateshead people and communities.

### ***Governance Arrangements***

18. We need to ensure that our governance arrangements support our ambitions and direction of travel as a Place system. Our aspiration is to work towards a Joint Committee arrangement with the ICB at Gateshead Place. This could enable us to better control / join-up up our finances, secure maximum value and develop joint business cases.
19. Consideration also needs to be given to how a Joint Committee arrangement can help us to drive preventative approaches / pathways.

### **Recommendations**

20. The Health and Wellbeing Board is asked to consider the key messages and feedback from the Planning Session and our next steps.

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**Contact:** John Costello (0191) 4332065

**Gateshead Health and Wellbeing Board**

**Planning Session on Gateshead Health and Care System  
(Gateshead Cares)**

**10<sup>th</sup> March 2023**

**Feedback from Discussions on Questions**

**Part 1: Our Gateshead Health & Care System (Gateshead Cares)**

**Questions considered:**

**Building upon our strengths, what do you think 'great' would look like in Gateshead?**

*Table 1:*

- Why do we start with our strengths, should we not start with the gaps and weaknesses.
- Long term funding for preventative services, including VCSE.
- Joined-up commissioning across different statutory sector services – look at resources collectively. We have the right ambition but need a plan to follow through.
- For mental health services, build up from a foundation of funding community services.
- Great is moving from discussion to action.
- A strong evidence base / more evidence focused, clarity about objectives, ownership of priorities.
- A clear starting point needs to be defined so that we can demonstrate the difference made.
- Leaner process – reducing forms, bureaucracy (could be through joint commissioning).
- De-construct and recreate – honesty and bravery across the system.
- Don't forget the lessons of Covid – we are building bureaucracy back in.
- Great is people getting the services they need and people not being 'passed off'.

*Table 2:*

- Employment access for Looked after children.
- System prioritisation of children and young people (invest to save).
- Prevention needs to be considered at every opportunity e.g. to increase numbers living in the community (e.g. not in care homes). Need to develop prevention pathways.

- Accounting more transparently for spend and where it is directed – for treatment or for prevention. Need to recognise and act on the basis that investment in prevention will ultimately reduce pressures on acute services.
- Proactively engage with disenfranchised members of the community.
- Public perception and awareness: social stigma e.g. addiction.
- Value service user experience and develop services based upon lived experience.
- Digital recognition of circumstances e.g. appointment times that work for the users.
- 'Acceptance' around mental health.
- Utilise the capacity of other services capacity to help address the care gap.

*Table 3:*

- Wealth and income, not debt.
- No differences in the wider determinants of health – decent housing and decent employment for all. Do this by targeting across the social gradient. Need levelling up.
- Maslow's hierarchy.
- Within the control of the individual. Need to engage with communities and local population using a multi-agency approach. Working in small areas, engaging with communities.
- Early intervention is key and need to change aspirations.

*Other Points Made:*

- Peoples own aspirations for their lives and those of the families to be raised.

**What should our Priorities be (and how will they help us to deliver Gateshead's Health and Wellbeing Strategy and the NENC Integrated Care Strategy)?**

*Table 1:*

- We spend too much time setting priorities and not delivering them.
- A priority is to align all of the different priorities we already have e.g. community mental health transformation, locality working, public sector reform.
- Housing should play a bigger part of Health & Wellbeing Strategy as it has a massive impact on health.
- Because of scale / size of our ICS, we should be able to have more influence.
- Working out what needs to be done at scale and what at local place. For some issues e.g. ADHD, people could be better served at place – talking to local families to solve the problem at source.
- Neighbourhood working – we must fund and support this. Access point / hub model – co-location works.
- Education needs to be at the table too.

*Table 2:*

- Accessibility – community (location); focus on how we access our patients, not how they access us.

- Prevention needs to be seen as a key enabler and focus of our System Boards.
- Need to address the reality that those organisations that fund preventative approaches don't always see the benefits for their organisations. As a system, we know that the focus should be on prevention so we need to find a way of addressing this.
- Measure what we are preventing.
- Undertaking pro-active analysis – e.g. of missed appointments.
- Move away from judgement to empathy.
- Governance structures.

*Table 3:*

- Integration workers need to be enabled to work together.
- Community empowered to build relationships and then consider the issues.
- As people come together, enable them to have a voice as to what they want and need.
- Need to refer to policy and evidence, but it should not be the driver over community voice.
- Engagement – needs patience, won't happen overnight.
- The Digital agenda is important.

*Other Points Made:*

- We have the right priorities, the issue is how we implement them.
- As a system, we need to take ownership of prevention – this will need a cultural change. We also need to move from a business case culture to a learning culture.
- We need to see things through the lens of prevention.
- We need to be brave and move resources from acute provision to prevention (that will reduce the onset of conditions that otherwise will increase demand for acute services).
- We need to work with the acute sector to manage people's expectations from services.
- As a system, we are so busy responding to acute demand that we don't have enough time to focus on prevention.
- Primary care needs to be able to focus more on those who don't come to a GP (rather than the 'worried-well').
- One-off, short-term, non-recurrent funding towards preventative approaches, addressing inequality is not enough to make the change needed.
- Need to target resources to where they are most needed. We don't do this consistently.

**What changes or additions to the Programme Areas and Enablers will be required (to take forward our priorities and address key system challenges and opportunities)?**

*Table 1:*

- Funding for local community services.

- We are not representing communities adequately within our forums – e.g. do the people here today reflect the communities we serve?

*Table 2:*

- Data – a greater focus by Gateshead Cares on the data, being data driven.

*Table 3:*

- Access to services – e.g. dentistry.
- Lobby government to ring-fence taxes to addressing inequalities.

*Other Points Made:*

- The programmes and enablers are fine, the issue is how we take them forward with a focus on prevention.
- We need to move from intent to practice (otherwise, day-to-day pressures get in the way).

## **Part 2: Governance and Working Arrangements**

### **Questions considered:**

**What would the tangible benefits be of a Joint Committee arrangement, how could it add value and help us to take forward our aspirations?**

*Plenary Discussion:*

- We have been clear as a system that we aspire to put in place a joint committee arrangement.
- It could enable us to better control / join-up up our finances and secure maximum value.
- It could facilitate joint commissioning of services.
- There could be more scope to develop joint business cases.
- Need to consider how a Joint Committee arrangement can help us to drive preventative approaches / pathways.
- Opportunities to develop our learning more quickly and respond to it.
- Area-wide (place) pathways can be effective and there would be opportunities / benefits to develop these from a Joint Committee arrangement.
- Could help to change / develop a joint culture around prevention.
- It needs to be recognised that it is difficult to influence overall budget levels – much is nationally mandated e.g. for the acute sector. However, we can seek to make the best use of available resources for Gateshead Place by working together jointly.
- We will need to work through the detail and ensure that arrangements are consistent with schemes of delegation / constitutions of our organisations.
- Good governance is a minimum to provide a solid framework for decision making.

## **How can we best advocate for Gateshead Place at broader geographies (ensuring a strong voice)?**

### *Plenary Discussion:*

- We need to recognise that Gateshead Place will not have much control over acute services (hospitals, ambulance services) as decision making will not be undertaken at Place level. However, we can seek to influence decision-making by advocating for Gateshead Place.
- Need to recognise how housing fits in to the wider system and how we then advocate in a joined-up way
- There are a number of people from Gateshead Place involved in different Area, sub-regional and regional Groups and Committees – they will need to work together to advocate for Gateshead Place.

### **Overarching Points / Issues Raised**

- As a system, we need to be transparent and honest about those areas we have not made sufficient progress against e.g. in addressing the health and inequalities gap which is widening in Gateshead.
- There needs to be a greater focus on prevention – prevention at every opportunity. We need to find a way to resource preventative approaches to health and care against a backdrop of significant financial challenges across our local system.
- We need to turn things on their head – justify why we should not focus on prevention (rather than having to justify a focus on prevention)
- We need to harness our evidence base and data across our system to inform and drive forward preventative approaches linked to our programme areas and enablers – data and evidence led approaches.
- A cultural change is needed to focus more on prevention.
- Funding arrangements perpetuate health inequalities. We need to focus on the resources we control to target them more equitably.
- We need to ensure that our governance arrangements support our ambitions and direction of travel as a Place system. It is our aspiration is to work towards a Joint Committee arrangement with the ICB at Gateshead Place.
- We need to consider how we can best comply with government / national requirements but at the same time ensure that we are able to do what we feel we should do to secure the most benefit for Gateshead people and Gateshead communities.



# Gateshead

# Physical Activity Strategy

## 2022-2032



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## **1. Foreword**

For too long, many of the people with the most to gain from being physically active have often been the least able to take part. A combination of structural, social, environmental and economic factors have all played their part in keeping people away from physical activity, including access and affordability, a lack of opportunities, or a feeling for some that 'physical activity is not for them' or they 'don't belong' in sports facilities or clubs.

The Covid-19 pandemic has been devastating for many individuals and communities and it has both highlighted and exacerbated inequalities in Gateshead. Even before the pandemic, many aspects of modern life made it harder to live a healthy and active life: new technology at home and work, convenience food, more sedentary jobs, and a growth in leisure activities such as gaming have all played a part. Many of us need to make a conscious decision to build physical activity into our daily lives.

However, the pandemic has also brought with it a new energy to do things differently and to tackle long standing inequalities. We have seen the power of social action in communities when local community groups stepped up to support their vulnerable neighbours. We also learned how much successful partnerships can achieve when local government, health and other public sector partners, charities, the voluntary sector and community groups come together behind a shared goal. We can continue to build on this renewed focus and purpose as we look to the future.

Just before the pandemic began, Gateshead Council and partners published Gateshead's Health and Wellbeing Strategy, 'Good jobs, homes, health and friends'. It sets out our ambition to make Gateshead a place where everybody can thrive. In a world living with Covid, it is now more relevant than ever.

We know that supporting people to be active is a vital part of achieving our vision for Gateshead. Not only can physical activity have profound benefits for our physical health, but it's also good for our mental wellbeing too. What's more, it helps us meet new friends, improves job opportunities and has huge value to the nation's economy. It can also help us move towards a greener future.<sup>1</sup>

As a Marmot City\*, we are passionate about the need to build back fairer. We want to ensure that every Gateshead resident can easily access a range of opportunities for sport and physical activity regardless of age, gender, race, ability, background, where they live or income. As part of our ambition to make Gateshead a place where everyone thrives, we need to get Gateshead moving. We particularly want to support those who are least active, or face the greatest barriers to physical activity, and so build a stronger, fairer society for all.

***Councillor Angela Douglas, Cabinet Member for Culture, Sport and Leisure***  
***Councillor Bernadette Oliphant, Cabinet Member for Health and Wellbeing***

## 2. Our strategic approach

### Our vision

[We want Gateshead to be a place where everyone thrives.](#)

Our strategic approach commits us to these pledges:

**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**

Our vision for [health and wellbeing](#) in Gateshead:

**‘Good jobs, homes, health and friends.’**

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\*See Appendix 1: Glossary

**Our Physical Activity Strategy will help us to deliver our vision for Health and Wellbeing in Gateshead:**



## Our mission

Working with our communities and partners, to get Gateshead moving. We want to make Gateshead a borough where every resident has access to a range of appropriate and affordable opportunities for physical activity that become part of their everyday life and improve health and wellbeing.

## Objectives

- **Recover, reinvent and thrive** - we will learn from the pandemic to become a stronger and fairer borough, where no-one is less active because of who they are or where they live.
- **Creating a positive experience for children and young people** - we want our children and young people to enjoy being physically active and build foundations for a long, healthy and active life.
- **Living well and ageing well** - we will strengthen the connection between physical activity and health and wellbeing throughout every stage of life.
- **Supporting communities** - physical activity brings people together and helps makes better places to live. We will work with communities and partners to support people be more active where they live, particularly targeting where inequalities are greatest and recognising that every community is different.
- **Creating active environments** - we want to make it easier for people in Gateshead to be active in the space around them and contribute to the reduction of carbon emissions.

## How we will work

Our **values** and **guiding principles** are:



**Partnership** - working collaboratively across sectors and communities, bringing together experience, expertise, resources and enthusiasm. We need everyone to make it their mission to get Gateshead moving.

**Inclusion** - reflecting diverse voices and lived experience in our work. Treating all ideas and everyone's challenges and circumstances with respect.

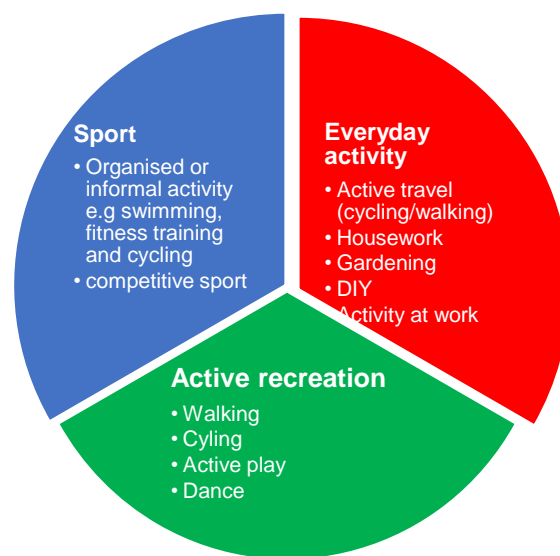
**Innovation** - exploring new ways of working to find creative solutions.

**Proportionate universalism** balancing universal and targeted provision in a way that's proportionate to level of need - focusing most on engaging the least active and those who face the greatest barriers to being active.

**People-centred** - putting people, their needs and the barriers they face at the heart of our plans. Delivering services in and with communities.

**Physical activity** - simply means all movement. Popular ways to be active include walking, cycling, sports, active recreation and play, and can be done at any level of skill and for enjoyment by everybody.<sup>2</sup>

Physical activity broadly falls into three groups.



*Adapted from: Be Active, Be Healthy. A Plan to get the Nation Moving, Transport 2017 (Department of Health 2009)*

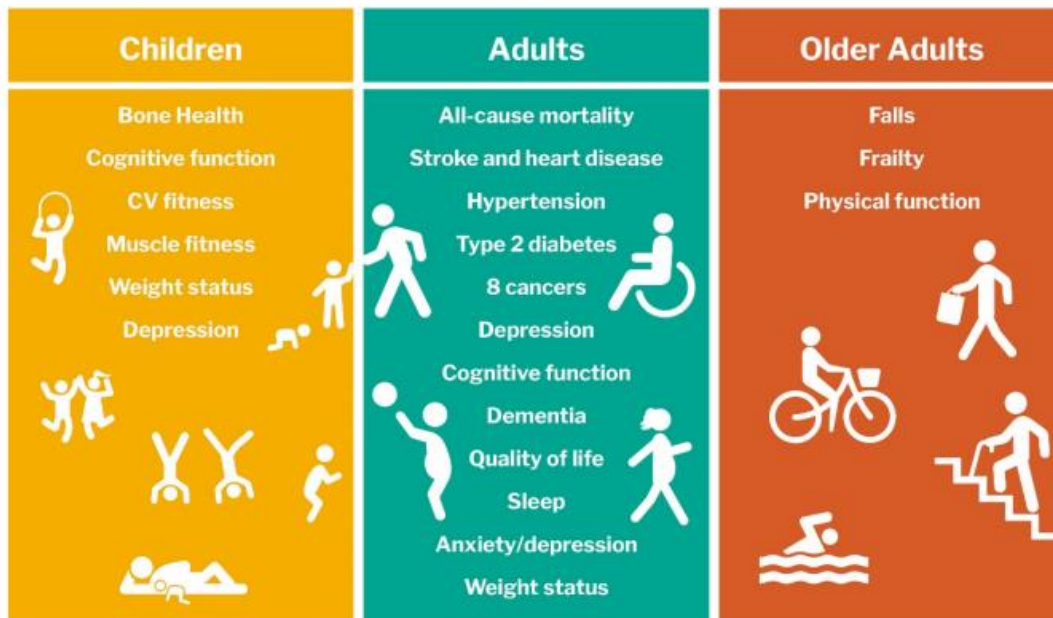
### 3. Why is physical activity important?

If physical activity were a drug, we would refer to it as a miracle cure, due to the great many illnesses it can prevent and help treat."

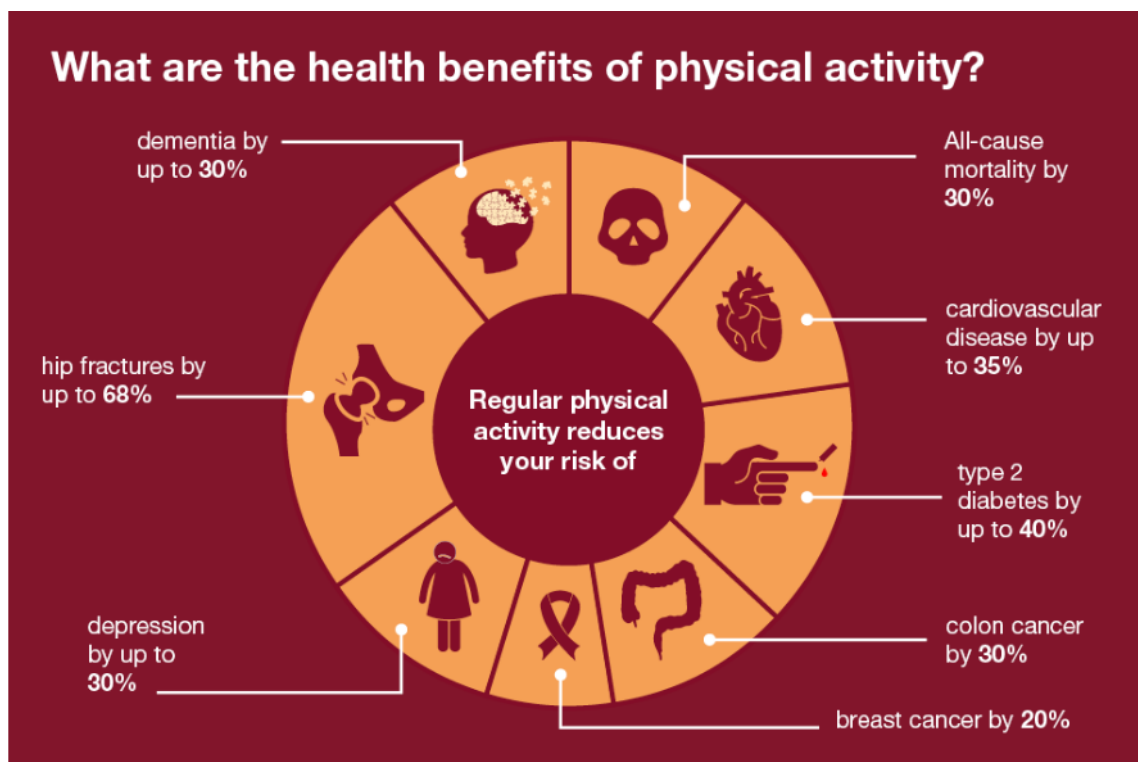
**UK Chief Medical Officers 2019<sup>3</sup>**

There is overwhelming evidence that regular physical activity is good for your physical and mental health and wellbeing and prevents long term health conditions such as heart and lung diseases, diabetes, cancers and obesity.

### Moderate or strong evidence for health benefit



Source: UK Chief Medical Officers' Physical Activity Guidelines, 2019<sup>3</sup>



Source: Office for Health Improvement & Disparities, Physical activity: applying All Our Health, updated March 2022<sup>4</sup>



Physical inactivity is associated with 1 in 6 deaths in the UK<sup>5</sup>.

Regular physical activity also contributes to a range of wider social, environmental and economic benefits<sup>6</sup> including:

**For individuals:**

- improved learning and attainment
- increasing productivity in the workplace
- development of social skills and better social interaction.

**For social and community development:**

- building stronger communities by bringing people from different backgrounds together via participating, volunteering and spectating
- improving community links, levels of cohesion and social capital
- improving residents' sense of belonging in an area.

**For the environment:**

- active travel reduces road congestion and air pollution.

**For the economy:**

- inactivity costs the UK an estimated £7.4 billion a year. The potential cost savings to health (in primary and secondary care) and social care are significant<sup>7</sup>
- sport and physical activity generate more than £13bn in economic value through the sports-related goods and services we consume as a nation including more than 285,000 jobs that employ people within the community sport and physical activity sector.<sup>8</sup>

**Every £1 spent on sport and physical activity in England generates almost £4 in return across health and wellbeing, stronger communities and the economy.**

This figure is calculated by measuring the total social and economic value (£85.5 billion) against the costs of engagement and providing sport and physical activity opportunities (£21.85 billion.)

*Sport Industry Research Centre, Sheffield Hallam University*<sup>9</sup>

### **Some is good, more is better** <sup>3</sup>

For good physical and mental health, adults should aim to be physically active every day. Any activity is better than none, and more is better still.

For an adult, the UK Chief Medical Officers recommended physical activity levels are at least 150 minutes moderate intensity per week, or at least 75 minutes vigorous intensity per week or a combination of both. There are different recommendations for different age groups. A summary of these can be seen at Appendix 2.

#### 4. The national context

<p><b>UK Chief Medical Officers' Physical Activity Guidelines (2019)<sup>3</sup></b></p> <p>This report updates the 2011 guidance, covering the volume, duration, frequency and type of physical activity required across the life course to achieve health benefits.</p> <p>It presents compelling evidence to support the health benefits of regular physical activity for all groups. It also says that regular physical activity can deliver cost savings for the health and care system and has wider social benefits for individuals and communities.</p> <p>This report emphasises the importance of regular activity for people of all ages.</p>	<p><b>Uniting the Movement Strategy (2021)<sup>10</sup></b> Sport England's 10-year strategy. identifies five big issues:</p> <p><b>Recover and reinvent</b> - recovering from the pandemic and reinventing as a vibrant, relevant, sustainable and inclusive network of organisations providing sport and physical activity opportunities.</p> <p><b>Connecting communities</b> - Focusing on physical activity's ability to make better places to live and bring people together.</p> <p><b>Positive experiences for children and young people</b> - Unrelenting focus on positive experiences for all children and young people as the foundations for a long and healthy life.</p> <p><b>Connecting with health and wellbeing</b> - Strengthening the connections between sport, physical activity, health and wellbeing.</p> <p><b>Active environments</b> - Creating and protecting the places and spaces that make it easier for people to be active.</p>	<p><b>Cycling and walking plan for England: Gear Change A bold vision for cycling and walking (2020)<sup>11</sup></b></p> <p>The strategy sets out that increasing cycling and walking can help of the challenging issues including improving air quality, combatting climate change, improving health and wellbeing, addressing inequalities and tackling congestion on our roads. Bold action will help to create places we want to live and work – with better connected, healthier and more sustainable communities.</p> <p>Actions are set out under four themes</p> <ul style="list-style-type: none"> <li>• Better streets for cycling and people.</li> <li>• Cycling at the heart of decision-making</li> <li>• Empowering and encouraging Local Authorities</li> <li>• Enabling people to cycle and protecting them when they do.</li> </ul>	<p><b>Tackling obesity: empowering adults and children to live healthier lives (2020)<sup>12</sup></b></p> <p>The strategy outlines actions that the government will take to tackle obesity and help adults and children to live healthier lives. These include</p> <ul style="list-style-type: none"> <li>• PHE's new Better Health campaign that will urge people to take stock of how they live their lives in the wake of Covid-19, promoting evidence-based tools and apps with advice on how to lose weight and keep it off.</li> <li>• expand weight management services so that more people get the support they need to lose weight</li> <li>• offer all Primary Care Networks the opportunity to equip their staff to become healthy weight coaches.</li> </ul>	<p><b>Sporting Future A new strategy for an Active Nation (2015)<sup>13</sup></b></p> <p>The Government's strategy for sport confirms its recognition and understanding that sport makes a positive difference and states its intention that the sector will deliver five simple but fundamental outcomes:</p> <ul style="list-style-type: none"> <li>• physical health</li> <li>• mental health</li> <li>• individual development</li> <li>• social and community development</li> <li>• economic.</li> </ul> <p>In future, funding decisions will be made based on the outcomes that sport and physical activity can deliver.</p>
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## 5. Where we are now – the national picture

- 1 in 3 (34%) men are not active enough for good health
- almost 1 in 2 (42%) women are not active enough for good health
- 1 in 5 (21%) men are classed as physically inactive
- 1 in 4 (25%) women are classed as physically inactive
- 44% of disabled adults are physically inactive
- only 34% of men and 24% of women undertake muscle-strengthening activities at least twice a week

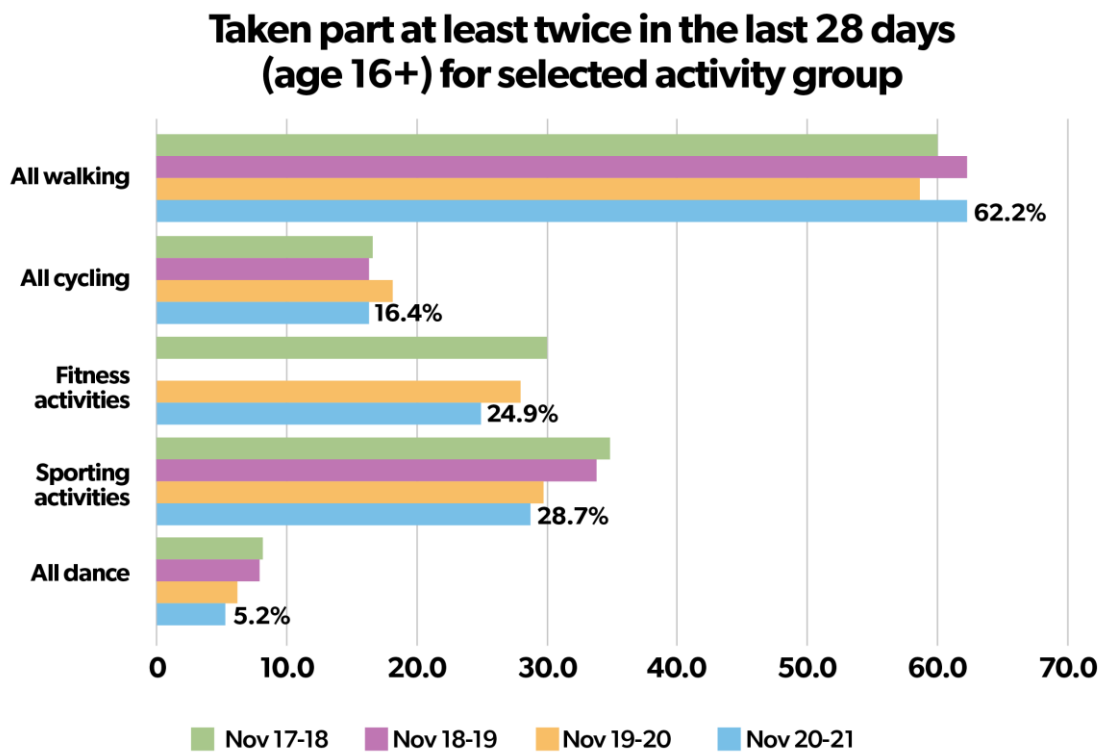
***Public Health England, 2020<sup>3</sup>***

There are stark inequalities in levels of physical activity:<sup>14</sup>

- Inactivity increases steadily as people get older.
- LGBT (Lesbian, Gay, Bisexual, Transgender, and other sexual and gender identities) people are less likely to be active than the general population.
- Women are less likely than men to reach recommended levels of physical activity
- More girls than boys disengage from sport and exercise in their teens.
- Less affluent people are more likely to be inactive than those who are better off as well as less likely to be active.<sup>15</sup>
- Disabled adults are almost twice as likely as non-disabled people to be physically inactive.<sup>16</sup>
- Levels of physical activity vary with ethnicity. People of mixed ethnicity were the most likely out of all ethnic groups to be physically active. The percentages of physically active people in the Asian, Black, Other and Chinese ethnic groups were lower than the national average.<sup>17</sup>
- Participation in sport and physical activity is higher among some faith groups than others.<sup>18</sup>

A range of sports and physical activities contribute to people’s engagement with physical activity<sup>19</sup> :

- Looking at broad types of physical activity\*, walking (whether for recreation or travel) makes the biggest contribution to physical activity. Just over 62% of adults over 16 took part in walking. This is more than double those who participate in either sporting activities (28.7%) or fitness activities (24.9%). Even before the pandemic began, walking had by far the highest level of participation.



*Note: Taken part at least twice in the last 28 days (adults age 16+) with at least moderate intensity.*

**Source:** Sport England, Active Lives Survey, Nov 20-21.

## 6. Where we are now – the Gateshead picture

### Population



**201,950**  
17% are under 16  
20% are over 65

The population is ageing.  
By 2043, it's predicted that:

People 65+ ↑ 29%.



Children under 16 ↓ 10%.



**32,700 (16%)**  
people in Gateshead live  
in one of the **10%** most  
deprived areas of England.

### Ethnicity:

White ethnicities: **96.3%**

Black ethnicities: **0.5%**

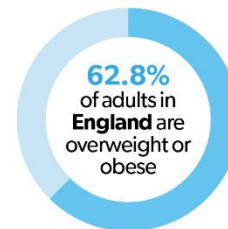
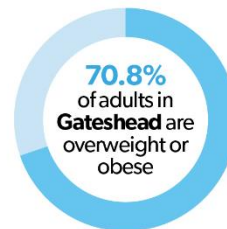
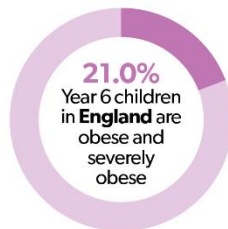
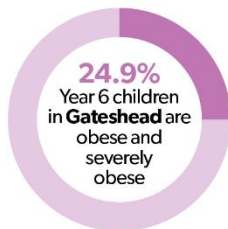
Asian ethnicities: **1.9%**

Mixed ethnicities: **0.8%**

Other ethnicities: **0.5%**

Over **3000** people state  
that their religion is **Jewish**.

### Health



#### Gateshead:

**86** people per **100,000** die from  
cardio-vascular disease

#### England:

**70.4** people per **100,000** die from  
cardio-vascular disease.



#### Gateshead:

Since **2009/10** Gateshead has seen a  
year-on-year increase of **5.8%** GP  
patients with a **diabetes diagnosis** to  
**7.3%** in **2019/20**.



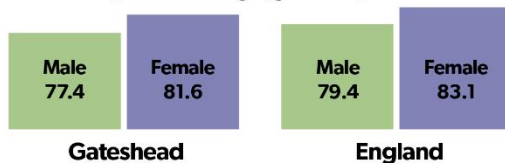
### Mental Health

Estimate of proportion of the  
adult population in **Newcastle**  
and **Gateshead** with both  
depression and anxiety is  
**17.3%**.

Estimate of the adult  
population in **England** with  
both depression and anxiety  
at **13.7%**.



### Life Expectancy (years)

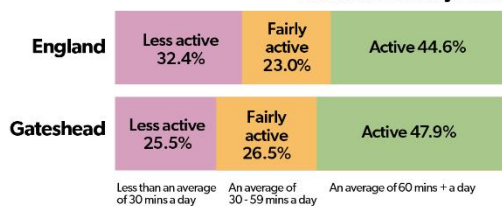


### Healthy Life Expectancy (years)

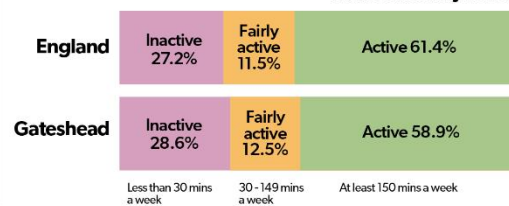


### Physical Activity

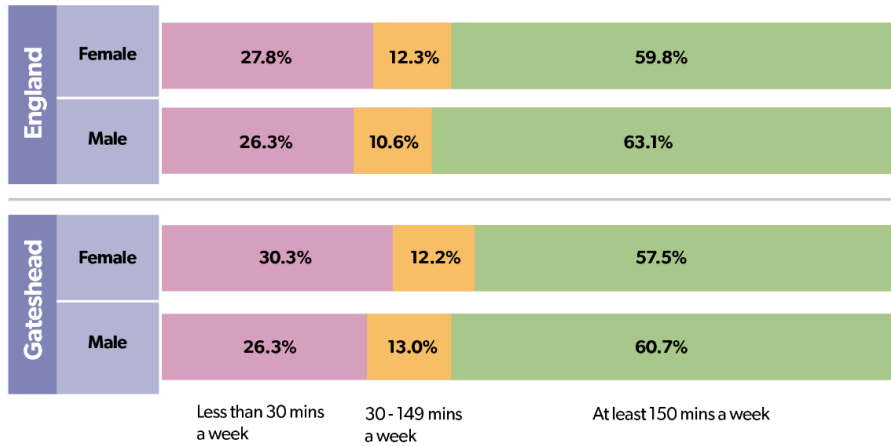
#### Children's Activity Levels



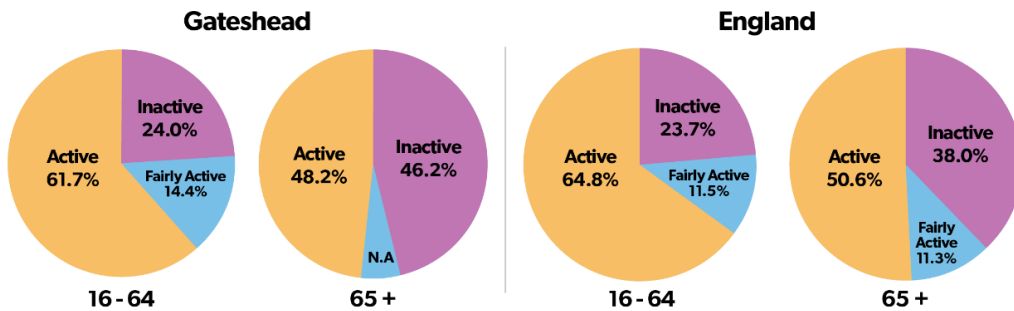
#### Adult's Activity Levels



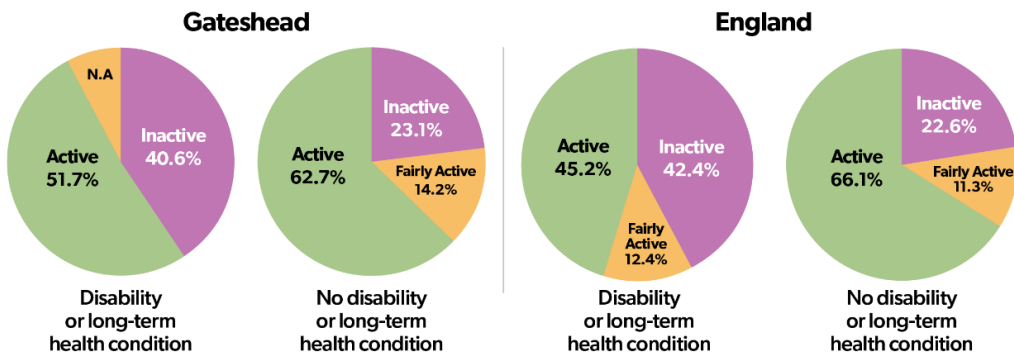
### Level of activity (adults): gender



### Level of activity (adults): age



### Level of activity (adults): disability or long-term health condition



**Source:**

Gateshead JSNA [Gateshead JSNA - Joint Strategic Needs Assessment](#)  
OHID, Local Area Health Profiles [fingertips.phe.org.uk](http://fingertips.phe.org.uk)

Sport England Active Lives Children and Young People data Academic Year 2020-21 [Active Lives | Children And Young People Activity Data \(sportengland.org\)](#)

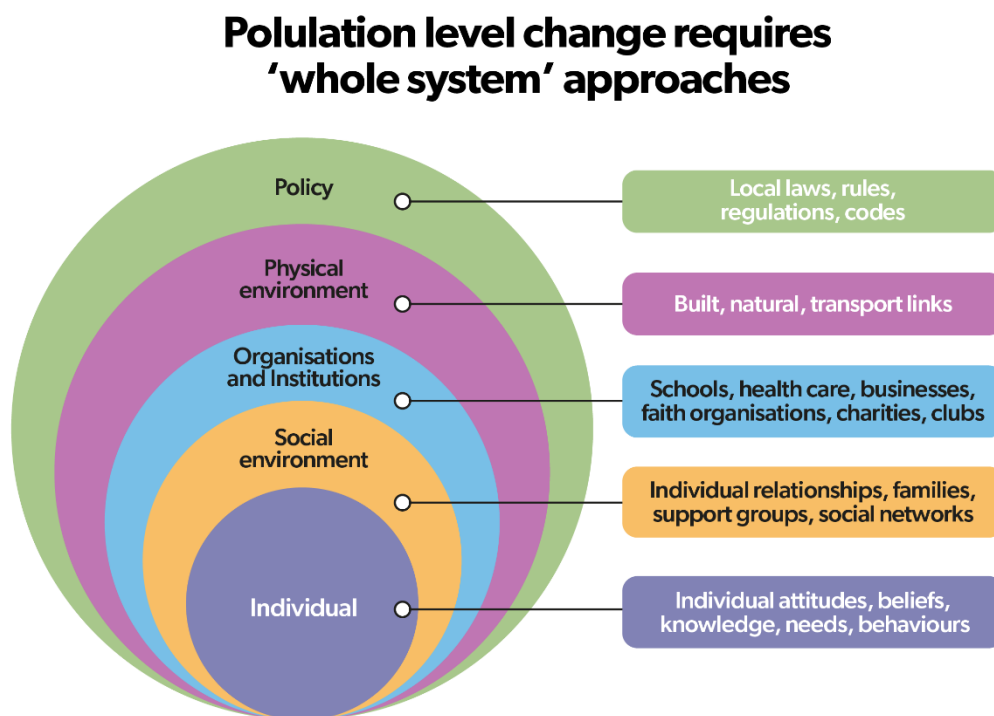
Sport England Active Lives Adult data Nov 20- Nov 21 [Active Lives | Adult Data \(sportengland.org\)](#)

## 7. Taking a 'whole system' and 'place-based' approach

There isn't one magic solution to get everyone moving - real lives are influenced by a combination of many factors.

### Looking at the 'whole system':

We need to consider the changes required, at all the layers in the system, to tackle inactivity. This includes changes to policy, the physical environment, organisations



and institutions, the social environment, as well as to individuals themselves.

*Source: socio- ecological model as used by Sport England, 2021<sup>20</sup>*

Examples of changes that can be part of a whole systems approach:

- **Policy** e.g. policies and systems that promote walking, cycling and public transport.
- **Physical environments** e.g. access to open and green spaces which encourages people to be active.
- **Organisations and institutions** e.g. programmes embedded in primary health care such as social prescribing in GP practices and schools that integrate physical activity initiatives into the school day.



- **Social environment** – e.g. people are more likely to be active if it is seen as ‘normal’, and if their friends and peers are also active.
- **Individuals** e.g. people can decide to become more physically active in response to a community campaign. Evidence suggests these are only effective when supported by local level community activities.<sup>20</sup>

### **Focusing on ‘place’:**

To really change how active a person or a community is, all of these influencing factors need to work coherently as a ‘system’ around them. If we’re going to help foster positive change in these places, there needs to be a change of focus.

***Sports England, 2021<sup>21</sup>***

We know that physical activity levels are closely related to the wider determinants of health (the conditions into which people are born, live and work). Health inequalities are not caused by one single issue, but a complex mix of environmental and social factors which play out in a local area, or place - this means that local areas have an important role to play in reducing health inequalities.<sup>22</sup> But national programmes often can’t tackle the barriers that can exist at a local level, and top-down interventions don’t lead to sustainable change.<sup>23</sup> That’s why it’s important to shift to a person-centred, bottom-up approach, whilst looking at the whole system from a community perspective. By working together to gain local knowledge and insight and make best use of the resources available locally, we can better meet the unique needs of people in one place.

### **Case study: ‘It’s not about telling people to eat better, stop smoking or get on the treadmill’**

Gateshead Council’s Public Health team commissioned Pattinson House, a Voluntary and Community Sector (VCS) organisation in a deprived ward in Gateshead to develop a childhood obesity prevention project. This was part of ongoing work with residents to ‘build happier, healthier, friendlier communities.’ The project was evaluated by an embedded researcher from Fuse (The Centre for Translational Research in Public Health.)

The research uncovered major structural, environmental, social and financial barriers to health and wellbeing. It raised concerns about traffic, community safety and the lack of safe spaces for children to play. The adverse effects of welfare reform and austerity increased poor health outcomes and limited people's choices. Community engagement and children's activities, alongside opportunities for people to volunteer, eat, socialise, have fun, get out, learn and play together improved health and wellbeing, social support, community cohesion, sense of belonging and partnership working. Social relationships developed through Pattinson House helped to reduce social isolation, promote mental health, improve community connectedness and increase physical activity.

***Source: Fuse brief, Fit 4 The Future – how community-led approaches can address childhood obesity, 2018<sup>24</sup>***

## **8. The challenge**

We need to increase levels of physical activity across Gateshead because:

- Preventable, yet life-changing conditions, like obesity and diabetes are increasing.
- There is overwhelming evidence that regular physical activity is good for your physical and mental health as well as bringing a wide range of social, economic and environmental benefits.

We need to work differently because:

- The pandemic has widened health inequalities. It has also increased the ongoing financial pressures that the Council has experienced over the last 10 years.
- We need to expand our focus and encourage all physical activity because the most frequently undertaken activities, like walking and cycling, take place in informal settings, green and open spaces and the built environment.
- There is increasing evidence about the importance of using a place-based approach – working with communities to develop opportunities for people to be physically active close to home. To be successful, we need to drive change across the whole system – individuals, social environment, organisations, physical environment and policy.

We need to address barriers to participation and increasing physical activity levels across everyday activity, recreation and sport. Barriers include:

- Increased sedentary behaviour stemming from pandemic restrictions, working from home and reduced opportunities for active travel.
- Difficulties in accessing green and open spaces for recreation including proximity and fear of crime or anti-social behaviour.
- A built environment that doesn't support healthy choices or active travel.
- Cost - the current rise in the cost of living is squeezing budgets. This affects both the ability of individuals and families to participate in many sport and physical activities and the viability of sports and activity providers to offer them.
- In addition to cost, individuals can face many barriers to wider activities that improve wellbeing including.<sup>25</sup>
  - a lack of confidence or embarrassment
  - a lack of motivation
  - caring for children or adults
  - health or physical access issues
  - a lack of local opportunities
  - cultural barriers.

## 9. Opportunities and outcomes

### Objective 1: Recover, reinvent and thrive

**We will learn from the pandemic to become a stronger and fairer borough, where no-one is less active because of who they are or where they live.**

As the UK emerges from the COVID-19 pandemic it would be a tragic mistake to attempt to re-establish the status quo that existed before – a status quo marked in England, over the past decade, by a stagnation of health improvement that was the second worst in Europe, and by widening health inequalities.

***Build Back Fairer, The Marmot Review, 2020<sup>26</sup>***

### Opportunities

The Covid-19 pandemic made physical activity difficult for many, significantly impacting people's physical and mental wellbeing. Lockdowns, social distancing and other restrictions resulted in massive changes to how people were physically active, particularly for those who, before the pandemic, regularly took part in organised sport and physical activity such as football clubs, dance, parkrun and community fitness classes.

Gateshead's network of sports clubs and activity providers are a key gateway to local opportunities for sport and physical activity, often hugely reliant on volunteers and run on a shoestring. Supporting and developing a strong and sustainable network of organised activity providers, working collaboratively to reduce inactivity, will be essential as they recover and rebuild after the pandemic.

Also, vital to widening opportunities for physical activity are the community groups and organisations in Gateshead who engage with those who are more likely to be physically inactive. Introducing physical activity awareness into the offer of these groups will support the engagement of different audiences. This is already happening in some cases but is unrecognised as physical activity. Running tea dances, walking to a meeting and encouraging people to get out and about are all ways that inactivity is challenged without people realising it.

During the pandemic, when facilities were closed, there was a new enthusiasm for many people to increase physical activity through informal avenues such as walking, either on their own or with friends or family. We need to continue to promote the huge benefits/importance of informal exercise for both mental and physical health as we continue to recover from the pandemic.

We know that women and girls, people who are poor, disabled people, people aged 55+, people from LGBT+ communities and people who are from ethnically diverse communities and/or minoritised communities can have lower levels of physical activity and experience more barriers to participation. We want to adapt our offer and meet the needs of the people, in our borough, who need our support the most and encourage our partners to do the same. This will involve working closely with local communities, providing activities in new places close to where people live and may also include the provision of new or emerging activities, or targeting activities to specific groups.

#### **Case Study: Active through football**

With support from the National Lottery, Gateshead Council is delivering the Active Through Football programme together with Sport England, the Football Foundation, RISE, and local partners including Gateshead Older People's Assembly and Egberts House.

Over the next five years, the programme aims to increase activity levels particularly amongst females aged 16+, males aged 50+, refugees and individuals experiencing mental health issues. Its purpose is to make football more accessible to these groups, with sessions tailored to all levels of fitness, ability and confidence.

### **Case Study: A weight off your mind (AWOYM)**

People with mental health conditions and people with learning disabilities are at increased risk of premature morbidity, dying up to twenty years sooner than the general population. It is thought that two thirds of these early deaths are caused by avoidable physical illnesses that are linked with unhealthy lifestyles such as poor diet and low levels of physical activity. Cumbria, Northumberland, Tyne and Wear NHS Foundation are working with partners, service users and carers to develop a regional weight management plan which aims to address the needs of those in their care. It combines physical activity, healthy weight and nutrition as core topics to ensure consistency of messages to patients.

### **Outcomes**

By 2032 we will have:

- Increased physical activity levels and reduced inactivity levels for:
  - Women and girls
  - Ethnically diverse and/or minoritised communities.
  - Older people (55 and over)
  - People with a disability or long-term condition
  - People from LGBT+ communities
  - People who live in areas that are in the 10% most deprived in England.
- A strong and sustainable network of organised activity providers, working collaboratively to reduce inactivity.
- Worked with clubs, community groups and other physical activity providers to access funding, training and opportunities to develop their activities to reach less active groups.
- Adapted the Council sport and leisure offer to better meet the needs of groups who have lower levels of activity by being more accessible, more inclusive and by offering improved, more affordable experiences.

- Provided more opportunities and support for people in Gateshead to be physically active in the places where they live, using community facilities and the local green environment.
- Encouraged the introduction of new sports and physical activities to complement more traditional ones and appeal to new audiences.

## **Objective 2: Creating a positive experience for children and young people**

**We want our children and young people to enjoy being physically active and build foundations for a long, healthy and active life.**

Physical inactivity poses a serious and growing danger to society; it damages health, economy and the environment and limits the educational attainment and future lives of children.'

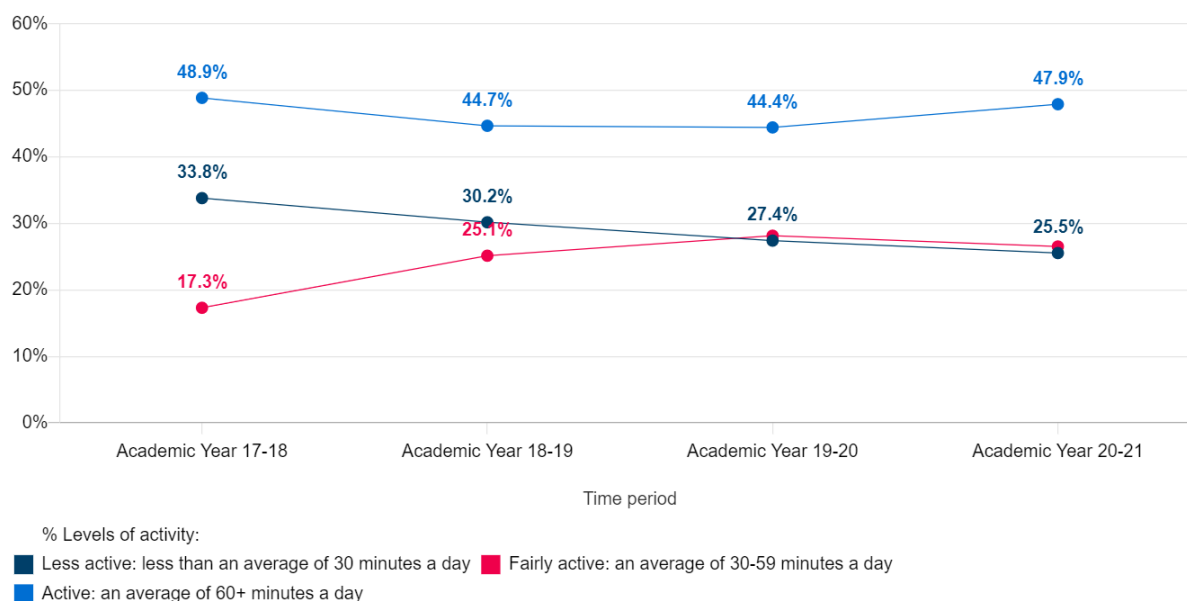
***All-Party Parliamentary Commission on Physical Activity<sup>27</sup>***

### **Opportunities**

Developing regular physical activity behaviours in childhood is crucial as we know that children who are active are more likely to become active adults and continue to reap the benefits of an active lifestyle throughout their life course.<sup>28</sup>

Although children and young people have the lowest clinical risk from Covid-19, they nevertheless experienced significant disruption at a critical time in their development, which may have long term implications for their physical and mental health.

## Levels of activity in Gateshead's children and young people



Source: *Sport England Active Lives Children and Young People data Academic Year 2020-21* <sup>29</sup>

In Gateshead, the number of 'active' children dropped in the year before and during the pandemic, although is now increasing. However, the level of 'less active' children has decreased over the last four years. National results suggest that across the academic year (20-21) as a whole, activity levels have fallen compared to pre-pandemic (2018-19) for children from the least affluent families while remaining unchanged for those from the most affluent families – widening the gap.<sup>30</sup>

The Gateshead Millennium Cohort Study found that physical activity levels may start tailing off as early as seven-years-old, rather than during adolescence as is widely believed, and there is no evidence to indicate that the decline is greater among girls than it is among boys.<sup>31</sup> Other research has found that too many girls are disengaging from sport and exercise in their teens and teenagers' engagement with exercise differs between boys and girls and requires different solutions. Self-belief, capability, and body image concerns can be significant issues for both boys and girls but are more apparent in girls than in boys.<sup>32</sup> Evidence also suggests that young people who are not cis gendered also experience significant issues in relation to self-belief, capability, and body image concerns.<sup>33</sup>

We want to enable all children and young people to become physically literate, to really enjoy physical activity and feel more confident and competent taking part. We need to particularly focus on those groups who currently have less opportunities to



be active and experience more barriers to taking part including teenage girls, children and young people from diverse or economically deprived communities and disabled children. We will work with children and young people, schools, colleges, clubs, community groups and other physical activity providers to explore ways of doing this and offer new opportunities. We also want to support pathways for progression where those that want to progress in their chosen sport are able.

Schools and early years provision have an important role to play in encouraging children and young people to be active. We believe that multi-component, whole school approaches that encompass, active travel, active play and cross-curricular physically active learning and are embedded in the culture, ethos and environment of the school, are most effective.<sup>34</sup> Many local schools already make a significant contribution to increasing children and young people's physical activity levels. In addition, we want whole school sport and physical activity in schools and early years settings to be complemented by opportunities in the community which appeal to families and young people who prefer the social side of physical activity and sport, as well as opportunities for those who prefer competitive sport.

#### **Case Study: WOW walk to school challenge**

A number of schools in Gateshead are working with national charity, Living Streets, to deliver their WOW walk to school challenge. WOW is a pupil-led initiative where children self-report how they get to school every day using the interactive WOW Travel Tracker. If they travel sustainably (walk, cycle or scoot) once a week for a month, they get rewarded with a badge. Living Streets are working to achieve a better walking environment and inspire people to walk more.

#### **Case Study: Brighten the day of a child**

For several years, Gateshead Council has worked closely with partners (including schools, local charities and community organisations) to provide much needed food and activities during school holidays, particularly aimed at children who are eligible for school meals and families who are struggling to make ends meet but do not access this benefit. The activities include pop-up sports activities, bike rides, nature walks and healthy cooking ideas.

## **Outcomes**

### **By 2032:**

- More children and young people in Gateshead will be physically active and achieving the Chief Medical Officer's recommended levels of physical activity.
- There will be an improvement in childhood obesity levels.
- We will work with young people to gain a better understanding of barriers to activity and the opportunities they seek. New place-based opportunities and environments to be active will be co-created with children and young people.
- More children and young people in our most deprived areas will be regularly taking part in physical activity, enjoying the experience and be reporting more positive mental health.
- More schools will have adopted a whole school approach to physical activity.

### **Objective 3: Living well and ageing well**

**We will strengthen the connection between physical activity and health and wellbeing throughout every stage of life.**

There is no point in life where doing more exercise does not improve health in multiply ways

**Professor Chris Whitty, Chief Medical Officer, 2020<sup>35</sup>**

### **Opportunities**

By strengthening the connections between physical activity, health and wellbeing, we can make physical activity a central part of how we all feel about our health and wellbeing. Throughout people's lives, their interests and values change. We want to ensure that there are always opportunities, throughout their lives, to enable them to lead an active, healthy lifestyle. The more we can widen access and participation in physical activity, sport and active travel, the more it becomes embedded in everyday life and the greater the chance of increasing levels of physical activity across Gateshead.

We know that there are many barriers to people taking part in activity which can vary depending on where they live and their individual circumstances. To break down these barriers, we need to understand more about what stops them taking part and map the barriers for different localities and communities. We can then develop targeted actions to overcome them whether at home, work or play.

### **Case Study: Active Mums**

Active Mums is a fun way to meet for new mums (after their 8-week health check or 12 weeks if they've had a Caesarean) to meet new people and get active outdoors with their baby. With babies safe and snug in their pushchairs, mums work on improving fitness and toning up by performing a range of enjoyable cardio and bodyweight exercises, overseen by a qualified instructor. As well as supporting mums to become more physically active, the scheme helps reduce social isolation and builds confidence.

Whilst for some, physical activity is an integral part of their job, for others their role is mainly sedentary. Along with stress, depression and anxiety, musculoskeletal disorders account for most of the sickness absence in the UK.<sup>36</sup> Regular physical activity can support good musculoskeletal health as well as positive mental health. Many employers recognise that supporting measures to improve the health and wellbeing of their employees can bring business benefits such as better staff satisfaction and retention, as well as reduced absence. National Institute for Health and Clinical Excellence (NICE) has produced guidance<sup>37</sup> to help employers prevent the diseases associated with a lack of physical activity. Efforts made in the workplace, alongside wider strategies to increase physical activity levels, can help improve people's health significantly. In Gateshead, we want to create a culture where being physically active in the workplace is encouraged and we will continue to support initiatives which contribute to this such as the Better Health at Work award.

Activity levels generally decrease with age, with the sharpest decrease coming at age 75+. Nationally, the 75+ age group was particularly affected by the pandemic. This may be linked to the requirement for many of those aged 70+ to shield during the earlier stages of the pandemic and a continued nervousness of mingling indoors or in crowded outdoor spaces.<sup>38</sup> Regular physical activity, in combination with standard medical care, also has an important role in the management and prevention of many long-term conditions.<sup>39</sup>

### **Case Study: Gateshead Falls Prevention pathway**

Partners from health, the voluntary sector and local authority have developed a referral pathway that enables those who have fallen or who are at risk of falling, to engage with supported exercise to improve their strength and balance. By offering Otago based exercise, staying steady classes and physical activity opportunities in the community, the over 50's are encouraged to stay active for longer. This approach aims to reduce frailty and help individuals to stay in their own homes for longer.

Gateshead Council works in partnership with health providers to provide a range of targeted services to individuals and groups with long term conditions such as pulmonary rehabilitation and cardiac rehabilitation. We want to ensure that this is expanded so that physical activity provision is integrated with health systems and will

strengthen our connections and collaboration with primary and secondary care, so that more people are recommended or referred into activity as part of services and care pathways. This will result in more people engaging in physical activity and better outcomes.

Gateshead already has a well-established social prescribing scheme. Health professionals can refer patients to community link workers who spend time with patients addressing their needs in a holistic way and supporting individuals to take greater control of their own health. They make referrals to non-medical services and support people to engage with activities, usually provided by voluntary and community organisations, including volunteering, arts and befriending as well as ones which can promote physical activity including gardening, sports, walking and cycling.

## **Outcomes**

### **By 2032:**

- More adults (aged 19-64) and older adults (aged over 65) will be physically active and achieve the Chief Medical Officer's recommended levels of physical activity.
- Being physical active will be a larger part of workplace culture.
- More physical activity opportunities will be seen as 'age friendly'.
- We will understand more about the barriers that prevent people from being active at different stages of their life and be working with communities to tackle this.
- More people will be accessing physical activity through the health care system, at both primary and secondary care, with it becoming further embedded into care pathways. This will include increased use of social prescribing into active recreation and active travel.

## **Objective 4: Supporting communities**

**Physical activity can bring people together and help make better places to live. We will work with communities and partners to support active lives, particularly targeting where inequalities are greatest.**

In order to build community contributions into a central role within place-based strategies to address health inequalities, it is important that all partners, including communities themselves, understand their potential. The assets within communities, such as the skills and knowledge, social networks, local groups and community organisations, are building blocks for good health.

**Public Health England, 2021<sup>40</sup>**

### **Opportunities**

The place around us has a significant impact on our health. By working together to adopt a place-based approach, we want to create local communities that are happy, healthy and active. We want to create sustainable opportunities for physical activity which are fun, easy to access and affordable.

We know we need to do more to meet communities where they are today, develop our collective understanding of their priorities and challenges, and support them to make sustainable changes to their behaviours so that they can lead healthy, active and fulfilling lives. To achieve this, there will be a need to collaborate with local people to develop local opportunities for physical activity that meet their needs and interests. This will require a bottom-up approach to be used, working with the people in each community and the organisations that local people trust.

One essential factor in increasing levels of physical activity amongst under-represented groups, is the role of skilled, supportive and non-judgemental enablers (including employees, community members and volunteers) to engage with people in the community. Widening these skills will require investment in training and development.

### **Case Study: Beat the Streets**

Beat the Street is an evidence-based intervention that increases activity levels, reduces health inequalities and can bring about sustainable behaviour change across local populations and communities, including those in areas of high deprivation. It uses gamification to mobilise large numbers of residents and create a social norm around walking, cycling, rolling and running. Beat Boxes are placed on street furniture (usually lamp posts) across the playing area and players score points by tapping at least 2 Boxes within an hour using fobs. The focus starts with schools and their families but can include all aspects of the community and local businesses. Other community groups, teams, families and individuals can also take part. Teams compete against each other over the four-week game to win prizes and travel as far as they can. Beat the Street creates a legacy of physical activity by signposting people to events and activities in their area as well as working with local stakeholders to continue to build active communities. Gateshead Council has worked with Intelligent Health (a strategic partner within Beat the Street) and local partners to pilot this initiative in two wards locally. The initiative was well-received.

### **Outcomes:**

#### **By 2032:**

- More Gateshead people will be taking part in fun and sustainable physical activities in their local community.
- Sports clubs, community groups and other activity providers will be providing more opportunities for local people to be physically active.
- New activities and services will have been co-designed with residents in their communities, following work with them to understand their priorities and challenges.
- More enablers, with a diverse experience and backgrounds, will be active in communities and have been equipped with the training and skills to engage with people effectively.
- Good practice, innovative projects, inspirational role models and influencers will be recognised within Gateshead.

## **Objective 5: Creating active environments**

### **Opportunities**

We want to make it easier for people in Gateshead to be active in the space around them. The places where we live, work and play all influence how physically active we are. Environments that are attractive and accessible encourage us to become more active within them. The places that support us to live active lives include:

- Sports and leisure facilities e.g. swimming pools, sports halls, fitness facilities, pitches, and courts
- Community spaces e.g. parks, green and open spaces, public rights of way, community centres and school buildings
- Built environment e.g. streets, housing estates, roads and paths

Councils have a central role in championing the vision for active environments and bringing everything together by connecting diverse Government objectives and service areas including planning, active travel schemes, parks and playgrounds, allotments and sports and leisure facilities.

**Sports and leisure facilities:** We want to ensure that Gateshead has affordable, accessible, and sustainable sport and leisure facilities which will support residents to live active and healthy lives now and in the future. Our Physical Activity Strategy is supported by a Built Facilities Evaluation and a Playing Pitch Strategy which have been developed using Sport England methodology to underpin our understanding of future demand. The strategies recognise that there are significant challenges in delivering the level and quality of infrastructure required and that we will need to explore innovative partnerships and cross-sector sustainable delivery and funding models to support achievement of our vision.

**Community spaces:** although walking and nature has been a lifeline to many in the pandemic, national research shows that people from more deprived communities and people from ethnic minorities live further from green spaces.<sup>41</sup> The links between access to green space and levels of physical activity are well-established and



research shows that access to green space is associated with better health outcomes, and income-related health inequality is less pronounced where people have access to green space.<sup>42</sup>

Gateshead has a fabulous network of parks, green and open spaces and countryside sites. We need to make sure that everyone can access and enjoy them. Allotments also provide a great opportunity for exercise as well as opportunities for growing fresh produce and getting fresh air. We want to explore measures to further increase access to allotments such as encouraging plot-sharing schemes and shared community allotments.

#### **Case Study: Get Walking Gateshead Council**

Get Walking Gateshead offers a series of free led walks that take place weekly at various locations across Gateshead. Walks last from 10 to 90 minutes, are led by fully trained Volunteer Walk Leaders and take place in a variety of locations across the borough. They are a great way for people who are new to exercise or need more support to get out, get active and meet new people. The walks are run in partnership with the Ramblers Association who provide schemes with support and free resources such as training, and insurance.

**Built environment:** Building well-designed, accessible places and neighbourhoods can encourage healthier choices. For most people, the easiest and most acceptable forms of physical activity are those that can be built into everyday life. Examples include walking or cycling instead of car travel and using stairs instead of lifts.<sup>43</sup>

Several aspects of neighbourhood design (walkability and mixed land use i.e. areas that include green spaces) can maximise opportunities for social engagement and active travel.<sup>44</sup> The strategic housing sites allocated in the Gateshead and Newcastle Councils' Planning for the Future, Core Strategy and Urban Core Plan 2010-2030 (CSUCP), have been master-planned to incorporate access to green spaces, sports facilities, play and recreation facilities to promote active and healthy lifestyles. Gateshead Council's Making Spaces for Growing Places Local Plan contains policies to require the provision of open space and play in new housing

developments, as well as policies to promote active travel. We will continue to promote healthy and active lifestyles through Gateshead's Local Plans.

We are exploring concepts such as '20-minute neighbourhoods' which aim to create places in which most of people's daily needs can be met within a short walk or cycle. Benefits include people become more active, reduced traffic, thriving local shops and businesses and people seeing more of their neighbours.

Gateshead declared a climate emergency, in May 2019 and there are areas where air quality is an issue. We know that giving people the opportunity to walk and cycle more will be key in reducing carbon emissions and levels of Nitrous Oxide (NO<sub>2</sub>) as well as increasing physical activity levels. The Local Cycling and Walking Infrastructure Plan (LCIP) aims to identify the cycling and walking improvements required.

We want – and need – to see a step-change in cycling and walking in the coming years. The challenge is huge, but the ambition is clear. We have a unique opportunity to transform the role cycling and walking can play in our transport system and get England moving differently.

***Department of Transport, 2020<sup>45</sup>***

## **Outcomes**

By 2032:

- The refreshed Sport and Leisure Built Facilities and Playing Pitch Strategies will be monitored regularly to ensure that our Physical Activity Strategy is supported by appropriate, affordable, accessible and sustainable sport and leisure provision, irrespective of ownership and operation.
- More people in Gateshead will be using our parks, green and open spaces and countryside sites.
- More journeys will be made by walking and cycling and will be supported by more walking and cycle routes

- Increased active travel will be reducing the environmental impact of transport and supporting Gateshead's climate strategy
- Allotments will be supporting increased levels of physical activity.
- Gateshead's Local Plans will continue to promote healthy and active lifestyles.

## Appendix 1: Glossary

Active play	What children and young people do when they follow their own ideas and interests, in their own way, and for their own reasons.
Active travel	Active travel (or active transportation or mobility) means walking, scooting or cycling for the purpose of making everyday journeys
Built environment	Man-made structures, features, and facilities viewed collectively as an environment in which people live and work.
Embedded research	Embedded research involves co-locating researchers within non-academic organisations. It is increasingly seen as a powerful way to link research and researchers with practice and practitioners.
Fuse	The Centre for Translational Research in Public Health
Health inequalities	<p>Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. Health inequalities arise because of the conditions in which we are born, grow, live, work and age.</p> <p>These conditions influence our opportunities for good health, and how we think, feel and act, and this shapes our mental health, physical health and wellbeing.</p>
Marmot City	<p>Marmot Cities are a network of local authorities in England, working in-depth to develop a 'Marmot' approach tackling health inequalities, based on the Marmot Review Team publication <a href="#">Fair Society, Healthy Lives</a> (The Marmot Review) in 2010.</p> <p>Sir Michael Marmot has been Professor of Epidemiology at University College London since 1985.</p>
Neighbourhood walkability	Making neighbourhoods walking friendly.
Organised sport and physical activity	Sport and physical activity organised by people including volunteers.

Place-based approach	Place-based approaches recognise the importance of addressing the wider determinants of health (the conditions into which people are born, live and work) across the life course.
Physical literacy	Physical literacy: is the mastering of fundamental movement skills and fundamental sport skills that permit a child to read their environment and make appropriate decisions, allowing them to move confidently and with control in a wide range of physical activity situations.
Sedentary	Tending to spend much time seated; somewhat inactive.
Social prescribing	Social prescribing is a way of linking patients in primary care with support within the community to improve physical and mental health. It may be used in place of medication or alongside other forms of treatment. People are referred to activities in their community such as exercise, lunch clubs and volunteering
Socio ecological model	The Socio Ecological Model (SEM) is a theory-based framework for understanding the multifaceted and interactive effects of personal and environmental factors that determine behaviours, and for identifying behavioural and organisational leverage points and intermediaries for health promotion within organisations.
Wider determinants of health	Wider determinants of health describe the social and environmental conditions in which people are born, grow, live, work, and age, which shape and drive health outcomes

Appendix 2: Summary of UK Chief Medical Officers' Physical Activity Guidelines (2019 and 2022)

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## Physical activity for early years (birth – 5 years)

Active children are healthy, happy, school ready and sleep better

BUILDS RELATIONSHIPS & SOCIAL SKILLS

MAINTAINS HEALTH & WEIGHT

CONTRIBUTES TO BRAIN DEVELOPMENT & LEARNING

IMPROVES SLEEP

DEVELOPS MUSCLES & BONES

ENCOURAGES MOVEMENT & CO-ORDINATION

### Every movement counts

**Aim for at least 180 Minutes per day for children 1-5 years**

PLAYGROUND

JUMP

CLIMB

MESSY PLAY

THROW/CATCH

SKIP

OBJECT PLAY

DANCE

GAMES

PLAY

TUMMY TIME

SWIM

WALK

SCOOT

BIKE

**Get Strong. Move More. Break up inactivity**

UK Chief Medical Officers' Physical Activity Guidelines, 2019

## Physical activity for children and young people (5 – 18 Years)

BUILDS CONFIDENCE & SOCIAL SKILLS

DEVELOPS CO-ORDINATION

IMPROVES CONCENTRATION & LEARNING

MAINTAINS HEALTHY WEIGHT

STRENGTHENS MUSCLES & BONES

IMPROVES HEALTH & FITNESS

IMPROVES SLEEP

MAKES YOU FEEL GOOD

### Be physically active

**Aim for an average of at least 60 minutes per day across week**

Spread activity throughout the day

All activities should make you breathe faster & feel warmer

PLAY

RUN/WALK

BIKE

ACTIVE TRAVEL

SWIM

SKATE

SPORT

PE

SKIP

CLIMB

Activities to develop movement skills, and muscle and bone strength

**ACROSS WEEK**

WORKOUT

DANCE

**Get strong**

 INACTIVITY


**Move more**

**Find ways to help all children and young people accumulate an average of at least 60 minutes physical activity per day across the week**

UK Chief Medical Officers' Physical Activity Guidelines, 2019


# Physical Activity for Disabled Children and Disabled Young People

Getting and staying active is about



- Equality
- Inclusivity
- Finding what's fun
- Exploring what activities make you feel good

## Benefits of physical activity



- Meet new people
- Mental health
- Muscles and motor skills
- Balance and coordination
- Calmer, less stressed
- Sense of achievement
- Confidence and concentration
- Meet new people

## How much physical activity should I do?

- When starting build up slowly**  
Ask: Can you do this today?  
Do bite-size chunks of physical activity throughout the day
- For good health benefits do 20 mins of physical activity per day**
- Do challenging but manageable strength and balance activities 3 times per week**  
Small amounts of physical activity are good for you as well

UK Chief Medical Officers' Physical Activity Guidelines for Disabled Children and Disabled Young People 2022. This infographic was co-produced with disabled children, disabled young people, parents and carers.

# Physical Activity for Disabled Adults

Make it a daily habit



**Disabled adults**

Physical activity makes you feel good  
Being inactive is harmful to health

Don't be still for too long  
Even a little movement is better than nothing

- Creates opportunities to meet new people and feel part of the community
- Improves mental health and quality of life
- Makes maintaining a healthy weight easier
- Makes daily tasks easier and increases independence
- Strengthens muscles and bones
- Improves fitness
- Improves mobility and balance
- Helps to prevent chronic disease

Give things a go and enjoy what you do

Even a little movement is better than nothing

Can talk, but not sing = moderate intensity activity

Difficulty talking without pausing = vigorous intensity activity

**Do strength and balance activities on at least two days per week**

**For substantial health gains aim for at least 150 minutes each week of moderate intensity activity**

Remember the talk test:

UK Chief Medical Officers' Physical Activity Guidelines, 2019

# Physical activity for adults and older adults

- Benefits health
  - Improves sleep
  - Maintains healthy weight
  - Manages stress
  - Improves quality of life
- Reduces your chance of
- Type II Diabetes -40%
  - Cardiovascular disease -35%
  - Falls, depression etc. -30%
  - Joint and back pain -25%
  - Cancers (colon and breast) -20%

Some is good, more is better      Make a start today: it's never too late      Every minute counts

## Be active

at least **150** minutes moderate intensity per week  
increased breathing able to talk

OR

at least **75** minutes vigorous intensity per week  
breathing fast difficulty talking

or a combination of both

**Build strength**  
to keep muscles, bones and joints strong

on at least **2** days a week

Swim, Brisk walk, Cycle, Gym, Carry heavy bags, Run, Stairs, Sport, Yoga, Bowls, Tai Chi

**Minimise sedentary time**  
Break up periods of inactivity

**Improve balance**  
For older adults, to reduce the chance of frailty and falls  
2 days a week

Dance

UK Chief Medical Officers' Physical Activity Guidelines 2019

# Physical activity for pregnant women

- Helps to control weight gain
- Helps reduce high blood pressure problems
- Helps to prevent diabetes of pregnancy
- Improves fitness
- Improves sleep
- Improves mood

**Not active?** Start gradually

**Already active?** Keep going



Do muscle strengthening activities twice a week

Every activity counts, every minute counts, more is better

No evidence of harm      Listen to your body and adapt      Don't bump the bump

UK Chief Medical Officers' Physical Activity Guidelines, 2019



# Physical activity for women after childbirth (birth to 12 months)

- Time for yourself - reduces worries and depression
- Helps to control weight and return to pre-pregnancy weight
- Improves tummy muscle tone and strength

- Improves fitness
- Improves mood
- Improves sleep



- It's safe to be active. No evidence of harm for post partum women
- Depending on your delivery listen to your body and start gently
- You can be active while breastfeeding

UK Chief Medical Officers' Physical Activity Guidelines, 2019

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**For more information, please contact:**

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**TITLE OF REPORT: Notification of Removal from the Pharmaceutical List & Changes to Pharmacy Opening Hours**

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## **Purpose of the Report**

1. To notify the Health and Wellbeing Board of the closure of Lloyds Pharmacy Limited t/a Lloyds Pharmacy (FMG80), Inside Sainsburys, Eleventh Avenue, Team Valley Trading Estate, Gateshead, NE11 0NJ

## **How does the report support Gateshead's Health & Wellbeing Strategy?**

2. Provision of local Pharmaceutical Services is a statutory responsibility of the Health and Wellbeing Board under the Health and Social Care Act 2012

## **Background**

3. A notification from NHS England and NHS Improvement – North East and Yorkshire, dated 26th January 2023 that NHS England had received notice that Lloyds Pharmacy Limited will cease to provide pharmaceutical services on 22nd April 2023 and will be removed from the pharmaceutical list for the area of Gateshead Health and Wellbeing Board with effect from that date.
4. NHS England have been working closely with the pharmacy and has been given assurances that all measures have been taken to ensure patients will not be adversely affected by this closure.
  - a. Patients and Care Homes will be informed
  - b. The pharmacy will put arrangements in place for the transfer/disposal of excess stock on the day of closure
  - c. The pharmacy will ensure all owings are dispensed for patients and no prescriptions where full stock is not available are dispensed. Please note - If there are still outstanding owings, the GP practice will be informed so new prescriptions can be issued where necessary
  - d. The pharmacy will ensure that all patients with prescriptions awaiting collection are contacted and, if necessary, deliver the medication to patients' home
  - e. The pharmacy will return any prescriptions remaining in the pharmacy uncollected to the prescribing practice

- f. The pharmacy will submit all dispensed prescriptions to the PPD for payment and any enhanced service claims to relevant organisation
  - g. The pharmacy will ensure that premises are left secure
5. Lloyds Pharmacy (FMG80) has been situated within the Sainsbury's Supermarket at the south end of the Team Valley Trading Estate in the south locality of Gateshead. The pharmacy is contracted by NHS England to provide a 40 hour pharmacy but in addition has provided longer opening hours to this as, most recently, an additional 38 supplementary hours resulting in an extended opening time on weekdays and over weekends.
6. In the most recent Pharmaceutical Needs Assessment (PNA), published October 2022, the south locality was well served by 11 community pharmacy services. In addition of the 3 distance selling pharmacies in Gateshead, one is also located in the Team Valley Estate.

**Pharmacy accessibility as a result of the closure of the Team Valley Lloyds pharmacy:**

**Pharmacies per population**

7. Table 1 (below) demonstrates that the impact of the closure on proportion of pharmacies per population is such that the south locality remains well served by pharmacy services and the average number of pharmacies per 100,000 population remains higher than the figures for England as a whole.
8. Table 1: Average number of pharmacies per 100,000 population, PNA Oct 2022 (data taken in March 2022)

Information from PNA 2022	Persons per pharmacy	Pharmacies per 100,000 population
South (11)	4,047	24.7
Gateshead (46)	4,390	22.8
England	4,875	20.5
Impact of closure of Lloyds (FMG80)		
South (10)	4,452	22.46
Gateshead (45 )	4,488	22.28

**9. Evening and weekend opening access**

10. The impact of the closure of this pharmacy is likely to be noticed in terms of access to pharmacies in the evening and weekends, in particular on Sundays where there will only be 6 pharmacies open across the Gateshead area although the existing 100 hour pharmacy is in the south locality (Durham Road, Birtley).

## **11. Pharmaceutical needs assessment 2022**

### **12. The PNA 2022 identified that:**

13. "While there has been a reduction in pharmacy provision in Gateshead since the last PNA, there continues to be adequate access to community pharmacies during the weekdays and weekends although this is reduced in the evenings and on Sundays which limits the ability to access essential services, advanced services such as the community pharmacy consultation service (CPCS) or the new medicine service (NMS) and self-care medicines as well as placing more demand on urgent and emergency care services."

### **14. Also in the recommendations of the PNA 2022:**

15. "Concerns remain from the previous PNA about the accessibility of pharmacy services outside normal hours, which remains largely unchanged. This is particularly the case in the East and West localities. Access to essential and advanced pharmacy services in the vicinity of the urgent care provision in Gateshead appears adequate, however, better access to these services would be secured by the review of provision on weekday evenings and weekends. The HWB continues to recommend local discussions with the LPC regarding possible support to evening or weekend opening to ensure patients with minor ailments and/or require medication to be dispensed following consultation with and extended access service, out of hours GP or referral by 111 for emergency medication can access pharmacy support"

16. Therefore, although the closure of the Lloyds pharmacy (FMG80) sited in Sainsbury's at Team Valley does not create a gap in community pharmacy services in Gateshead, it further influences the need to discuss access to services in evenings and weekends.

### **Proposal**

17. It is proposed that out of hours and weekend provision be reviewed and is added into the PNA2022 as a supplementary statement.

### **Recommendations**

18. The Health and Wellbeing Board is asked to approve a review of Pharmacy provision specifically in relation to out of hours and weekend hours

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**Contact:** Edward O'Malley, HDRC & PHI Lead, Gateshead Council,  
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Please note that the following pharmacy will change its hours as indicated below:

**Lloyds Pharmacy Limited**  
**t/a Lloyds Pharmacy**  
**9 Harras Bank, Birtley, Chester-le-Street, DH3 2PE**

### Existing hours

Days	Contracted Hours	Supplementary hours (if any)	Total hours
Monday	09:00-12:30; 13:30-18:00	07:30-09:00; 12:30-13:30	07:30-18:00
Tuesday	09:00-12:30; 13:30-18:00	07:30-09:00; 12:30-13:30	07:30-18:00
Wednesday	09:00-12:30; 13:30-18:00	07:30-09:00; 12:30-13:30	07:30-18:00
Thursday	09:00-12:30; 13:30-18:00	07:30-09:00; 12:30-13:30	07:30-18:00
Friday	09:00-12:30; 13:30-18:00	07:30-09:00; 12:30-13:30	07:30-18:00
Saturday	None	None	Closed
Sunday	None	None	Closed
Total Hours per week	40 Hours	12.5 Hours	52.5 Hours

### Revised hours with effect from 10<sup>th</sup> March 2023

Days	Contracted Hours	Supplementary hours (if any)	Total hours
Monday	09:00-12:30; 13:30-18:00	12:30-13:30	09:00-18:00
Tuesday	09:00-12:30; 13:30-18:00	12:30-13:30	09:00-18:00
Wednesday	09:00-12:30; 13:30-18:00	12:30-13:30	09:00-18:00
Thursday	09:00-12:30; 13:30-18:00	12:30-13:30	09:00-18:00
Friday	09:00-12:30; 13:30-18:00	12:30-13:30	09:00-18:00
Saturday	None	None	Closed
Sunday	None	None	Closed
Total Hours per week	40 Hours	5 Hours	45 Hours

**Please note that the total hours column represents the times that a pharmacist will be available to the public.**

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Please note that the following pharmacy will change its hours as indicated below:

**Bestway National Chemists Limited**  
**T/A Well**  
**105 Prince Consort Road, Gateshead, NE8 1LR**

### Existing hours

Days	Contracted Hours	Supplementary hours (if any)	Total hours
Monday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Tuesday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Wednesday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Thursday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Friday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Saturday	None	09:00-12:00	09:00 - 12:00
Sunday	None	None	Closed
Total Hours per week	40 hours	10 hours 30 minutes	50 hours 30 minutes

### Revised hours with effect from 19<sup>th</sup> March 2023

Days	Contracted Hours	Supplementary hours (if any)	Total hours
Monday	09:00-17:00	17:00-18:00	09:00 - 18:00
Tuesday	09:00-17:00	17:00-18:00	09:00 - 18:00
Wednesday	09:00-17:00	17:00-18:00	09:00 - 18:00
Thursday	09:00-17:00	17:00-18:00	09:00 - 18:00
Friday	09:00-17:00	17:00-18:00	09:00 - 18:00
Saturday	None	09:00-12:00	09:00 - 12:00
Sunday	None	None	Closed
Total Hours per week	40 hours	8 hours	48 hours

Please note that the total hours column represents the times that a pharmacist will be available to the public.



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Please note that the following pharmacy will change its hours as indicated below:

**Bestway National Chemists Limited**

**T/A Well**

**14 Beaconsfield Road, Low Fell, Gateshead, NE9 5EU**

**Existing hours**

Days	Contracted Hours	Supplementary hours (if any)	Total hours
Monday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Tuesday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Wednesday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Thursday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Friday	09:00-17:00	8:30-09:00, 17:00-18:00	08:30 - 18:00
Saturday	None	09:00-13:00	09:00 - 13:00
Sunday	None	None	Closed
Total Hours per week	40 hours	11 hours 30 minutes	51 hours 30 minutes

**Revised hours with effect from 19<sup>th</sup> March 2023**

Days	Contracted Hours	Supplementary hours (if any)	Total hours
Monday	09:00-17:00	17:00-18:00	09:00 - 18:00
Tuesday	09:00-17:00	17:00-18:00	09:00 - 18:00
Wednesday	09:00-17:00	17:00-18:00	09:00 - 18:00
Thursday	09:00-17:00	17:00-18:00	09:00 - 18:00
Friday	09:00-17:00	17:00-18:00	09:00 - 18:00
Saturday	None	09:00-13:00	09:00 - 13:00
Sunday	None	None	Closed
Total Hours per week	40 hours	9 hours	49 hours

**Please note that the total hours column represents the times that a pharmacist will be available to the public.**



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