

## CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE AGENDA

Tuesday, 12 March 2024 at 1.30 pm in the Bridges Room

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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 of last meeting</b> (Pages 3 - 6)   |
| 3    | <b>Declarations of Interest</b><br><br>Committee members to declare an interest in any particular agenda item where applicable.  |
| 4    | <b>Update on work to tackle Health Inequalities in Gateshead</b> (Pages 7 - 12)<br><br>Report of Ed O'Malley, Public Health  |
| 5    | <b>Support with the Menopause, Menstrual Cycle problems and post-partum mental health issues</b> (Pages 13 - 24)<br><br><i>Access to specialise support and variations of approach across Gateshead GP Practices.</i><br><br>Presentation of Nichola Bruce and Jane Conroy, with colleagues. |
| 6    | <b>CQC Assurance</b> (Pages 25 - 34)<br><br>Report of Steph Downey, Adult Social Care  |
| 7    | <b>Work Programme</b> (Pages 35 - 38)<br><br>Report of Democratic Services   |
| 8    | <b>Any Other Business</b>  |
| 8a   | <b>Adult Social Care LGA Peer Challenge</b><br>Update from Steph Downey, Adult Social Care   |

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# Public Document Pack Agenda Item 2

## GATESHEAD METROPOLITAN BOROUGH COUNCIL

### CARE, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE MEETING

Tuesday, 23 January 2024

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

Councillor(s): J Green, W Dick, P Diston, J Gibson,  
B Goldsworthy, M Goldsworthy, M Hall, G Kasfikis,  
J McCoid, S Potts, D Robson, J Wallace, D Weatherley and  
A Wintcher

**APOLOGIES:** Councillor(s): I Patterson

#### **CHW19 MINUTES OF LAST MEETING**

The minutes of the meeting held on 5 December 2023 were approved as an accurate record with no matters arising.

#### **CHW20 HOSPITAL DISCHARGE AND RESIDENTIAL CARE NUMBERS**

The Committee received a report and presentation detailing the work undertaken to improve the flow of people from hospital to their own home, with a focus on the Department of Health and Social Care's policies on Admission Avoidance, Home First and Discharge to Assess, and the improvements that additional Better Care Fund monies have achieved both for individuals and for the health and care system.

The report discussed the impacts of COVID 19 on reablement services and residential care admissions. The following actions were outlined:

- Following the reflections of winter 2022/23 it was agreed to invest additional Better Care Fund monies into community reablement services, and employ a Strategic System Lead who would oversee Transfers of Care on behalf of the NHS and Social Care.
- With an investment of circa £400k an additional 16 FTE workers have been recruited into the PRIME reablement service.
- Alongside this there has been investment via Central Government Market Sustainability Grants in the long term home care market, and a rebalancing of the Department's Medium Term Financial Strategy based on investment in community services and a reduction in spend on bed based care, leading to an overall reduction in the forecast.
- The Strategic System Lead for Transfers of Care commenced in post in September 2023 and the impact of her role so far and the work across

the system is outlined in the presentation to the committee.

Further information was given on discharge data, community packages data, reablement data, and residential care data.

The Board asked about the scenarios that would cause residential care admissions, preventative measures for postponing the development of frailty, and for the numbers of hospital admissions where the hospital acts in the role of a hospice.

**RESOLVED:**

- i. The Committee noted the report and presentation.

**CHW21 HEALTHWATCH GATESHEAD ANNUAL UPDATE**

The Committee received a presentation reviewing Healthwatch Gateshead's Annual Update.

Healthwatch Gateshead provide:

- a free signposting and information service for health and social care
- outreach and engagement activities to enable them to hear people's voices and to inform their work.
- Research reports that demonstrate good practice and highlight gaps in services which is then raised with commissioners, service providers and partners.

The presentation gave an overview of the highlights from Healthwatch Gateshead's Annual Report 2022/23. The Healthwatch Gateshead Committee agrees on 2 or 3 themes of work per year. Themes identified for 2024 are:

- Mental Health
  - Women
  - Young people
- Social Care
  - Impact of right care right person
  - Home care services
  - Digital Exclusion
- Youthwatch

Further priorities are set in November following an annual survey to gather public experiences and the Annual Meeting which takes place annually in September.

Communities that the Committee will be focusing specific outreach and engagement for are:

- Jewish Community
- Refugees and Asylum Seekers

- Young People
- Women

The Committee discussed dentistry access, including education for children on taking care of oral health and the difficulty registering with a dentist and receiving appointment slots. The Committee also asked about women's health and what the new Youthwatch initiative has captured so far.

**RESOLVED:**

- The Committee noted the presentation.

**CHW22 ADULT SOCIAL CARE - HOME CARE MODEL**

A report was presented to update the Committee regarding the Capacity and Demand planning for Adult Social Care services at home, and work being undertaken on the new model to support the 'Home First' approach in Gateshead.

Gateshead continues to follow the Discharge to Assess approach but has now been able to plan resources for 2023-24 and 2024-25 and invest in required services to support people at home. This includes receiving ring-fenced funding from the Market Sustainability and Improvement Fund, to support Adult Social Care markets for the financial years 2023-24 and 2024-25.

The report covered the current position of the model and its impact.

The Committee discussed staff retention and the use of direct payments.

**RESOLVED:**

- The Committee discussed and noted the report and work undertaken by the service.

**CHW23 STRENGTHS BASED APPROACHES**

A presentation was given describing the practice model Strength Based Practice that is used in Adult Services and explains the methods used to embed the model within the service.

The service's focus is on embedding strength-based practice within the service as a practice model. The report outlines how this is being embedded into the service, and the impact of this so far.

Adult Social Care's work with the National Development Team for Inclusion launches in January 2024, supporting the development a Community Led Support model. The team have worked very successfully with a number of Local Authorities, on making the shift from traditional case management models to a strengths based model of care, helping people to have better outcomes, and ensuring that internal processes reflect ambition for strengths

based practice.

**RESOLVED:**

- i. The report was noted.

**CHW24 WORK PROGRAMME**

The Committee received an update on the 2023/24 Work Programme and notice to submit items for the 2024/25 Work Programme.

**RESOLVED:**

- i. The Committee requested to add the following items to the 2024/25 Work Programme:
  - a. End of life care and continuing health care
  - b. Dentistry update
  - c. Orthopaedics referrals

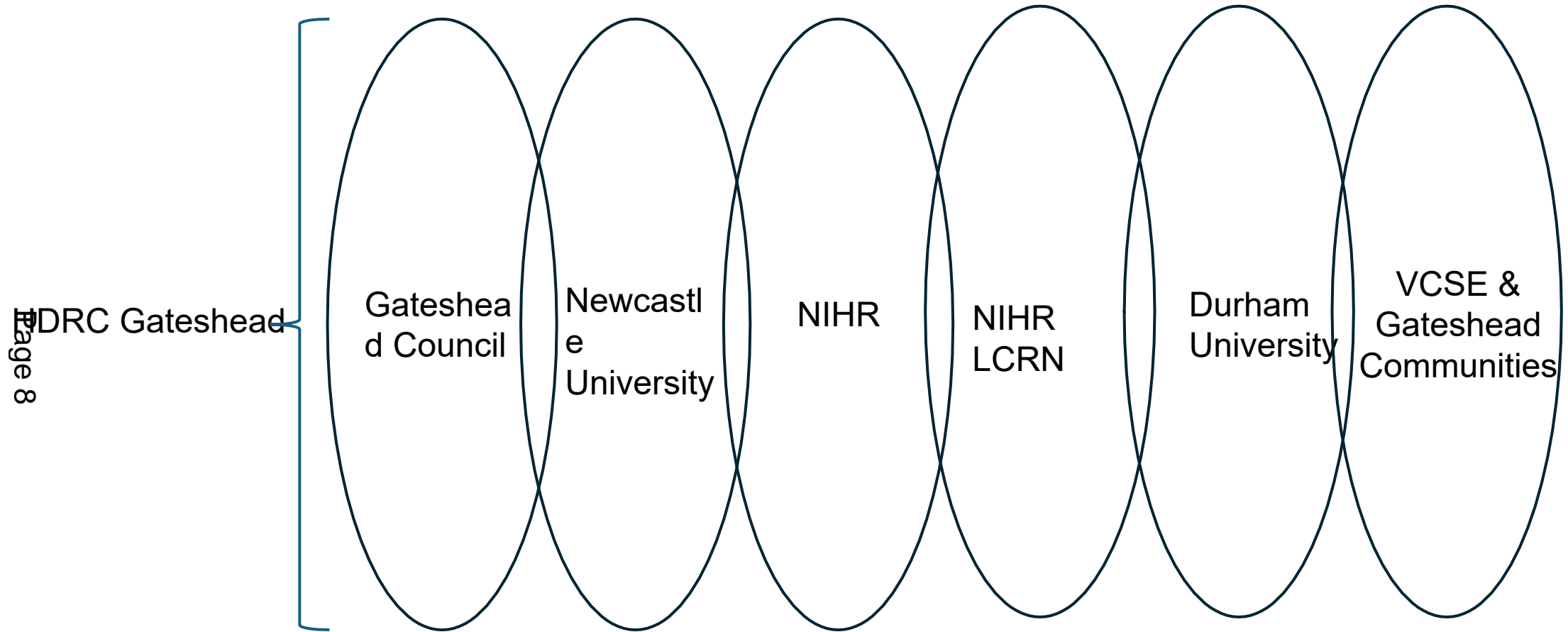
**Chair.....**

## HDRC – it's about:

- Building skills, capability and capacity within the LA for using research and development(R&D) funding
- Developing a culture of local R&D to make evidence informed decision making the norm
- Focusing on wider determinants of population health, health inequalities and the needs of disadvantaged groups.
- Enabling LA research activity, disseminating research evidence and getting this into practice
- Bringing LA, University and other stakeholders together to develop partnerships and collaborations
- **Collaboration, co-production and inclusion at its heart**

# HDRC - structure

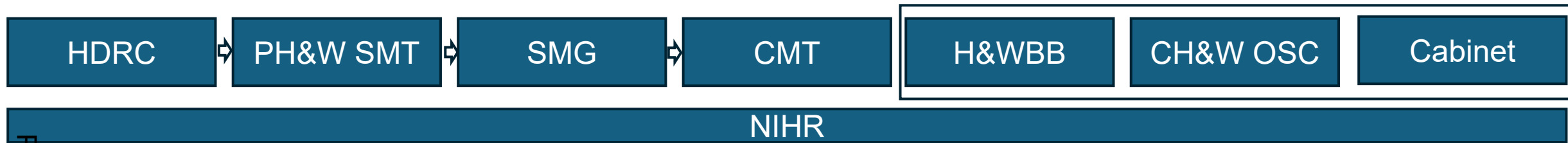
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## HDRC – governance:

- Good governance as part of every project
- Utilising Council infrastructure – assurance & decision making



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- Research ethics - Newcastle University & NIHR RSS
- Information governance - consent / storage / sharing / GDPR
- Financial - grants / payments / HDRC

## HDRC – public involvement & community engagement:

- PICE as part of every project
- Linking PICE activity across Gateshead
- Gateshead resident rep in HDRC team meetings & HDRC Steering Group
- Gateshead & Newcastle HDRC VCSE engagement event
- Renumeration
- External communication

# HDRC – prioritisation

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|  |
|--|
| <b>Create and develop sustainable place and communities</b>  |
| Climate Change and Health  |
| Faith Groups and Health Inequalities   |
| Family Hubs  |
| Flourishing: relevance to PH   |
| Localities Evaluation  |
| Public Engagement and Community Involvement Group  |
| Warm Spaces Evaluation   |
| <b>Create the conditions for fair employment and good work for all</b>   |
| NIHR206295: Improving economic activity in the North of England  |
| Rethinking Precarity and Resilience  |
| <b>Enable all children, young people and adults to maximise their capabilities and have control over their lives</b>   |
| EDUCATE: A multidisciplinary approach to developing a domestic abuse   |
| Libraries: Digital Inclusion   |
| Libraries: General Evaluation  |
| NIHR CRN Contingency & Growth Fund: Preparing Young People to Thrive   |
| Reading Motivation   |
| <b>Ensure a healthy standard of living for all, in accordance with international law on economic and social rights</b> |
| Holiday Activities & Food (HAF) Programme (Primary School) / HAF+ (Secondary School)                                   |
| <b>Give every child the best start in life, with a focus on conception to age two</b>                                  |
| Baby Box   |
| <b>HDRC</b>  |
| eLearning  |
| Health Communication Evaluation of Community Champions in North-East England   |
| Human Learning systems evaluation project  |
| Research Sandpit   |
| Ripple Effects Mapping   |
| VCSE Unconference  |
| <b>Strengthen the role and impact of ill health prevention</b>   |
| Active Travel  |
| Buvidal (Opioid Use + Recovery)  |
| CodeBreakers   |
| Core20Plus5 Toolkit: Autism and Oral Care  |
| Men's Autism MH Support Group  |
| Mental Health Heritage   |
| MH of Male Veterans  |
| NHS Community Mental Health Transformation Evaluation  |
| PDG MH regional academy  |
| Sexual Health Needs Assessment   |
| Strength & Balance   |

- Policy context & priority
- Health inequality
- Gap
- Impact
- Reach
- Opportunity cost
- Enabling factors
- Challenges
- Risks

(1) [Achieving behaviour change - PHE](#)



edwardomalley@gateshead.gov.uk

# **Support with the menopause, menstrual cycle problems and post-partum mental health issues: access to specialist support and variations of approach across Gateshead GP practices**

**Nicola Bruce, Director of Strategy, Planning and Partnerships - Gateshead Health NHS Foundation Trust**

**Jane Conroy, Head of Quality and Patient Experience/Programme Manager for Women's Health - Gateshead Health NHS Foundation Trust**

**Nicola Allen, Chief Executive - CBC Health Federation**

**Teresa Graham, Business Partner and Practice Manager - Second Street Surgery/Oxford Terrace and Rawling Road Medical Group**

**Dr Sangeetha Brommisetty, GP and Clinical Lead Gateshead (Mental Health, Learning Disabilities, Children & Young People) - Beacon View Medical Group/NENC ICB**

**Mr Iain Cameron, Consultant Obstetrician & Gynaecologist, Gynaecological Cancer Unit Lead - Gateshead Health NHS Foundation Trust**

**Oversight and Scrutiny Committee**

**Tuesday 12<sup>th</sup> March 2024**

# Recap on the Women's Health Strategy for England

The strategy identified seven priority areas related to specific conditions or areas of health where the call for evidence highlighted particular issues or opportunities:



Menstrual health and gynecological conditions



Fertility, pregnancy, pregnancy loss and post-natal support



Menopause



Mental health and wellbeing



Cancers



The health impacts of violence against women and girls



Healthy ageing and long-term conditions

# What is a Women's Health Hub?

## Definition

Women's Health Hubs bring together healthcare professionals and existing services to provide integrated women's health services in the community, centred on meeting women's needs across the life course. Hub models aim to improve access to and experiences of care, improve health outcomes for women, and reduce health inequalities.

## Description of Women's Health Hubs

- Women's Health Hubs ('Hubs') are understood as a model of care working across a population footprint and are not necessarily a single physical place.
- Hub models address fragmentation in service delivery with the aim of improving access, experiences and outcomes.
- Hubs reflect the life course approach to women's health, where care is not limited to interventions for a single condition, but instead is wrapped around the needs of an individual woman, which in some cases may be multiple needs.

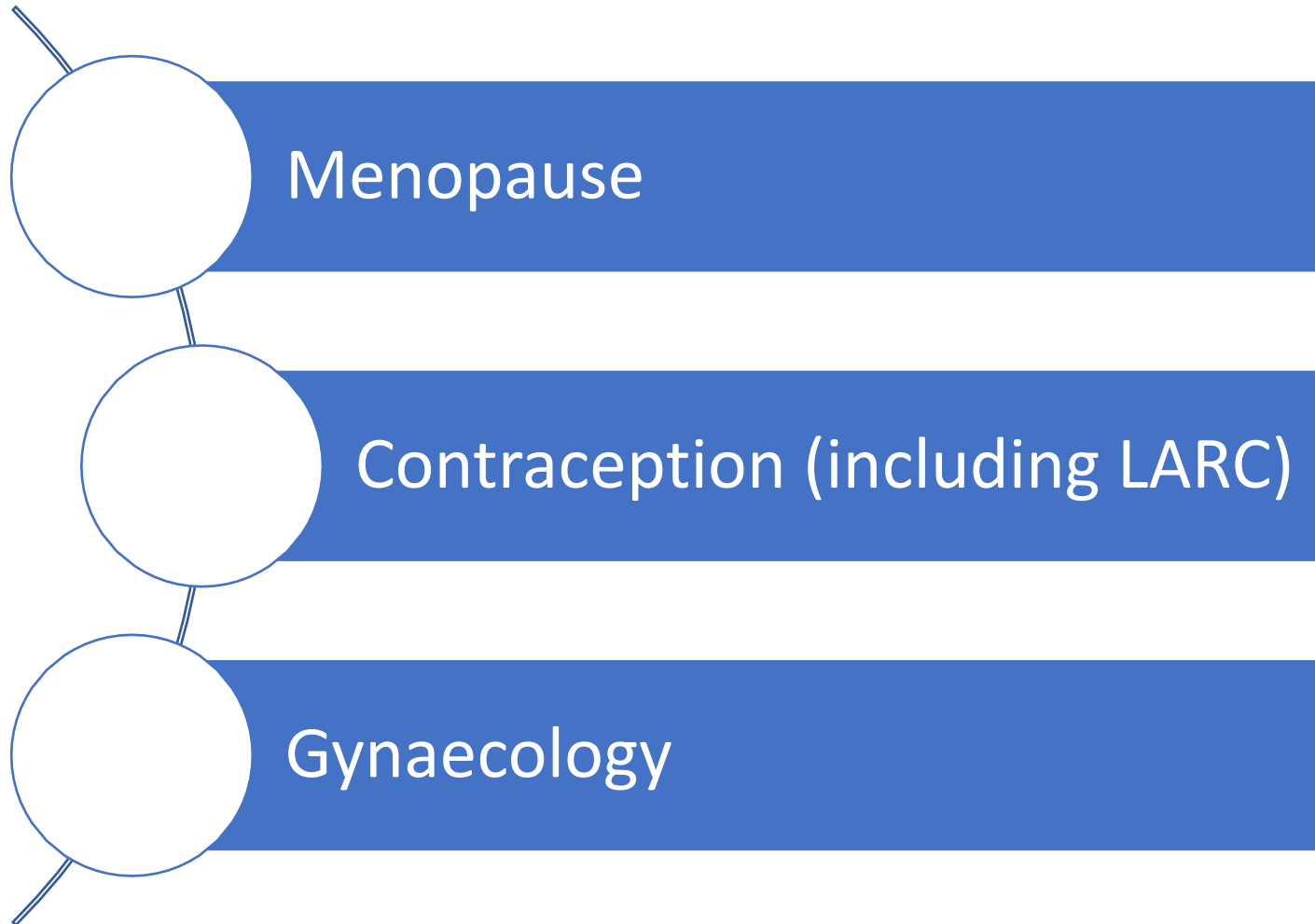
# What Women's Health Hubs are not

As well as describing Women's Health Hubs, it is important to be clear what Hubs are not. They are not:

- a replacement for Primary Care, which should remain the first point of contact for most women seeking non-emergency healthcare, including for issues such as menstrual health or menopause
- a replacement for Secondary Care or Specialist Services where that is required. Similarly, Hubs are not Hospital Outpatient Services, as this would not align with the principle of bringing care closer to home for most women
- an additional barrier in the patient journey - Hubs should not delay referral for specialist and/or urgent care where required, for example referral into cancer pathways
- a duplication of existing services - Women's Health Hubs should not duplicate other local services, and rather could improve pathways into other services, for example Mental Health Services
- one size fits all - Hubs should be tailored to meet local population needs and system objectives



# Gateshead Women's Health Hub: a model of care

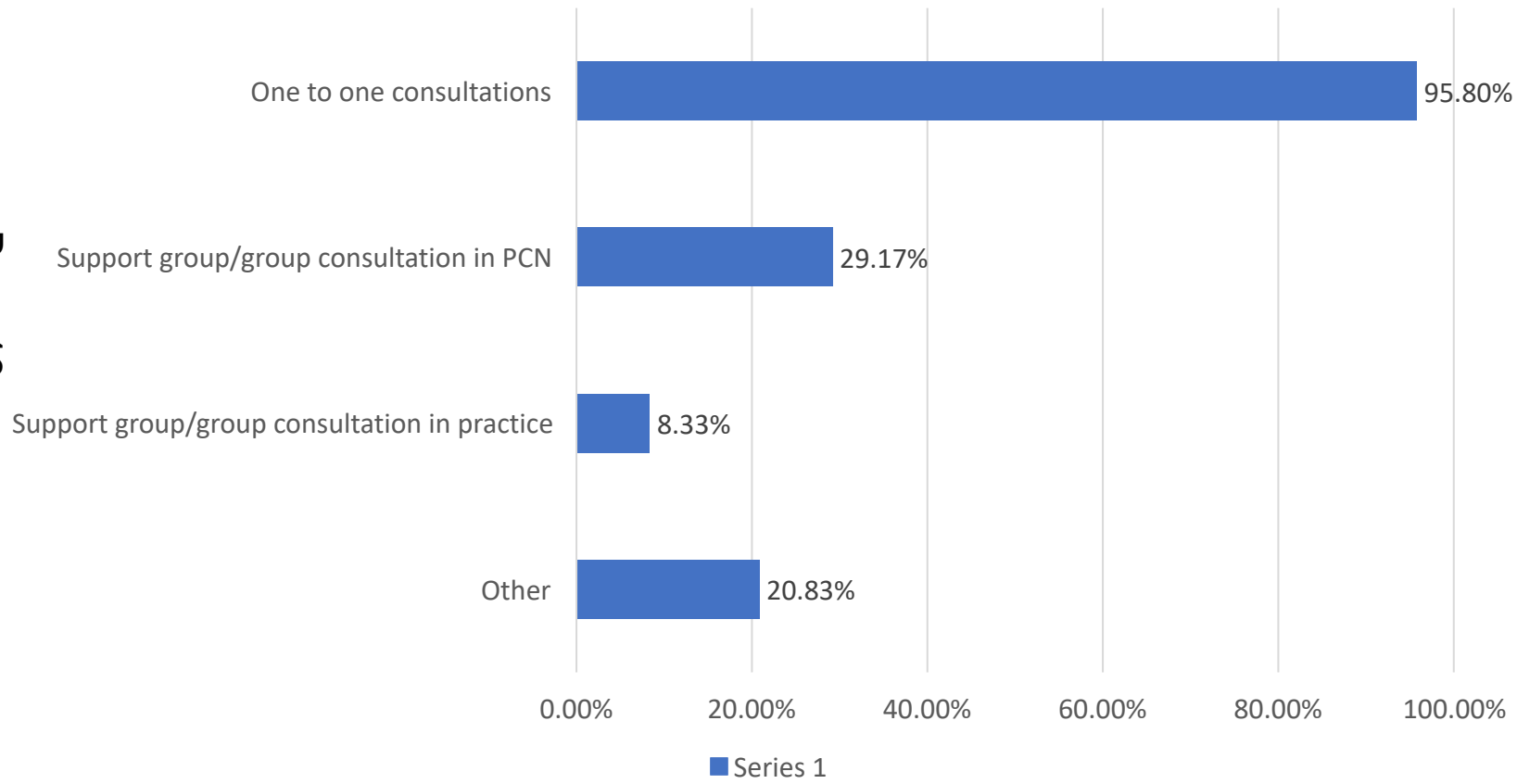


# GP Practice Survey

- Survey undertaken February 2024
- This was part of the stakeholder engagement for the Gateshead Women's Health Hub model of care to support with identifying areas for improvement
- Survey shared with 28 GP Practices across Gateshead
- 21 GP practices responded to the survey
- We have only included the survey outputs relevant to OSC's request within this presentation

# Menopause

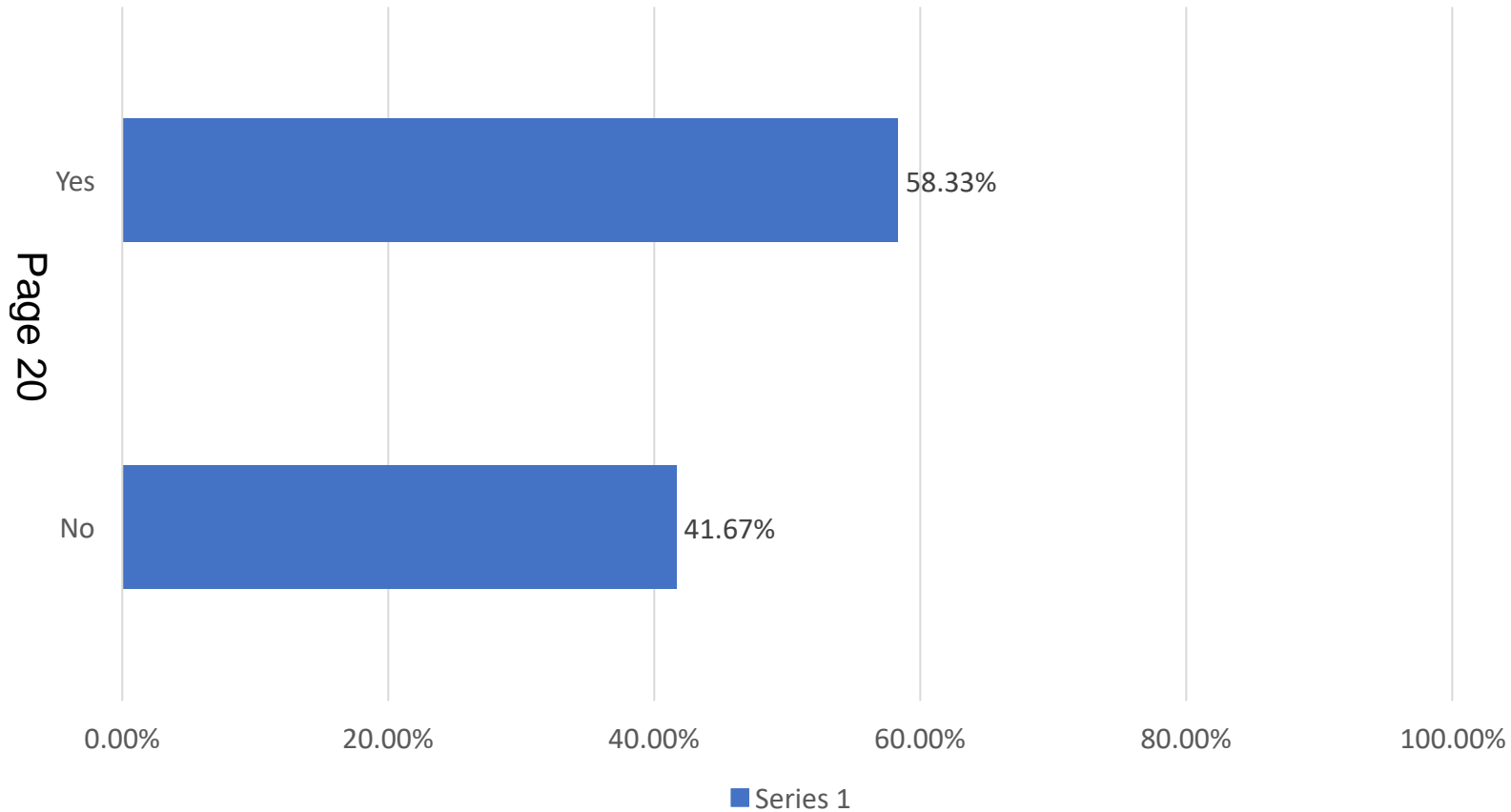
What menopause services do you offer to women in your practice/PCN?



**Other = Menopause Cafes and IUD**

# Menopause

Do you offer pessary fitting in the practice?



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**Barriers – predominantly training but also funding/time**

**Comments that multiple practices will refer to the Sexual Health Clinics or to Secondary Care for this**

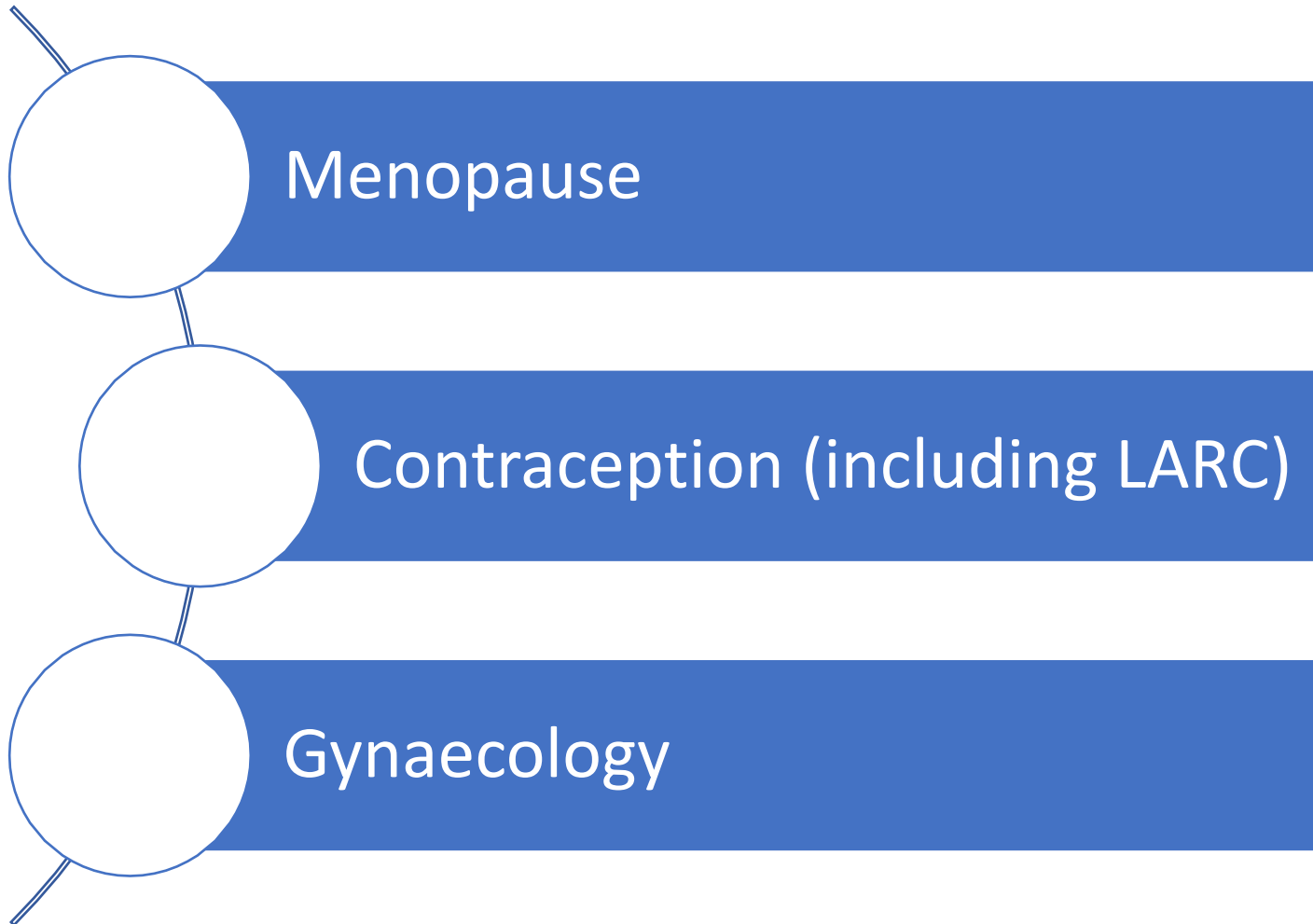
# Perinatal Mental Health Services

|                      |  |  |                         |
|----------------------|--|--|-------------------------|
| Low to Moderate Need | <b>Universal Services</b>  | <b>Psychological Support</b>   | Moderate to Severe Need |
|                      | <ul style="list-style-type: none"> <li>• Health visitors</li> <li>• Primary Care</li> <li>• Midwives</li> <li>• Community Support</li> <li>• Family Hubs</li> </ul>  | <ul style="list-style-type: none"> <li>• NHS Talking Therapies</li> <li>• Parent Infant mental health services</li> </ul>  |                         |
|                      | <b>Enhanced Support</b>  | <b>Specialist Support</b>  |                         |
|                      | <ul style="list-style-type: none"> <li>• Birth reflections</li> <li>• Bereavement Midwives</li> <li>• Perinatal Midwives</li> <li>• Obstetric Mental Health Clinics</li> <li>• Enhanced Health Visiting</li> <li>• Early Help</li> <li>• Pre-birth team</li> </ul> | <ul style="list-style-type: none"> <li>• Maternal Mental Health Services</li> <li>• Specialist Community Perinatal Mental Health Team</li> <li>• Mother and Baby Unit</li> </ul> |                         |

\*in blue text are the elements available within Gateshead

# Gateshead Women's Health Hub: making improvements together

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# Questions

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**TITLE OF REPORT:** CQC Assurance Update

**REPORT OF:** Steph Downey, Service Director, Integrated Adults and Social Care Services.

### Summary

The following report describes the current national position on CQC Assurance and the preparation being undertaken by Integrated Adults and Social Care Services to prepare for CQC inspection.

### Purpose of the Report

1. To update the Committee regarding the work undertaken to prepare for CQC assurance and the current position as reported by CQC regarding their role out of the assurance framework nationally.

### Background

2. Further to previous updates to Committee, the Integrated Adults and Social Care Services department has continued to prepare for CQC assurance.
3. New colleagues have been appointed to support the development of our assurance activities; the department has developed an overarching strategy to identify and progress our transformation priorities; we are working with the National Development Team for Inclusion to redesign our care pathway; and we have requested a Peer Review by the Local Government Association to help us become inspection ready.
4. CQC nationally continue to announce further Local Authorities for inspection, with Durham and Northumberland having been announced in the North East so far.
5. CQC have published findings in respect of the five pilot inspections undertaken:
 

[Evaluation of CQC's local authority pilot assessments - Care Quality Commission](#)  
[Local authority assessment reports - Care Quality Commission \(cqc.org.uk\)](#)
6. They have identified the following themes from the assessments undertaken so far:

- **Integrated working has enabled pilot LAs to address challenges in hospital discharge**
- **Waiting lists** for assessments existed mainly **due to lack of capacity** in the social work assessment workforce, but LAs were **managing this by prioritising risk**
- **Partnership working** was key for improving outcomes for people
- **Transition pathways from children to adult services did not always work well**
- **More work is needed** for LAs to understand how to reach people whose voices are seldom heard
- **Social care workforce capacity issues persist**, and **LAs are using a range of incentives** to address recruitment and retention issues, as well as supporting the professional development of the workforce to meet local needs
- Overall, **LAs had developed learning cultures** to help them identify where things were not working well and take steps to improve

### Current Position

7. A self assessment and information return have been completed and shared with the Local Government Association ahead of the Peer Review.
8. The Departments Peer Review will take place from 19<sup>th</sup> – 21<sup>st</sup> March 2024, with Case File audits having been completed by a Principle Social Worker from Stockton Borough Council on 4<sup>th</sup> March 2024.
9. The learning from the Peer Review will be developed into an action plan for any areas where we currently do not have an active action plan, and the implementation of this will be monitored via the Departments governance arrangements.

### Recommendations

10. Committee are asked to note the content of the report and provide scrutiny in respect of the preparatory work being undertaken by the Department.

**Contact: Steph Downey**

**Ext 3919**

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# Adult Social Care LGA Peer Challenge

# Background

- The Local Government Association offers all councils an Adult Social Care Preparation for Assurance Peer Challenge seeks to help councils deliver good support to local people and thereby prepare effectively for Care Quality Commission Inspections.
- The peer challenge is a tried and trusted method of improvement; it provides councils with a robust and effective improvement tool which is owned and delivered by the sector, for the sector.
- Peers remain at the heart of the peer challenge process and are invited into Councils as a 'critical friend' taking a 'no surprises' approach

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Four themes for all Adult Social Care Preparation for Assurance Peer Challenges have been adopted from the approach taken by the Care Quality Commission (CQC) Adult Social Care Assurance process which are

- Working with people
- Providing Support
- Ensuring Safety
- Leadership

## Care Quality Commission Assurance themes

### Theme 1: Working with people.

#### This theme covers:

- Assessing needs
- Planning and reviewing care
- Arrangements for direct payments and charging
- Supporting people to live healthier lives
- Prevention
- Wellbeing
- Information and advice
- Understanding and removing inequalities in care and support
- People's experiences and outcomes from care.

### Theme 2: Providing support.

#### This theme covers:

- Market shaping
- Commissioning
- Workforce capacity and capability
- Integration
- Partnership working.

### Theme 3: How the local authority ensures safety within the system.

#### This theme covers:

- Section 42 safeguarding enquiries
- Reviews
- Safe systems
- Continuity of care.

### Theme 4: Leadership

#### This theme covers:

- Strategic planning
- Learning
- Improvement
- Innovation
- Governance
- Management
- Sustainability.

# Scope

- The scope for these peer challenges is going to be driven by the LGA / ADASS self-assessment we complete to prepare for CQC assurance inspections
- It will create a narrative that has identified where we have strengths, where we can improve, what plans we have to improve and the evidence to support these views
- The peer team have been asked to look at particular areas of the service both strengths and areas for improvement, these are;
  - Gateshead's improvement plans
  - Front door, prevention, and early intervention
  - Home care commissioning plans
  - Housing and accommodation plans

# Timing and duration

- A peer challenge takes around a 3 months lead-in time, including to secure time in peers' diaries and complete the collation of the self-assessment, and accompanying documents
- Dates for the onsite element of the peer challenge is 19<sup>th</sup> to 21<sup>st</sup> March 2024
- 1 peer reviewers will undertake case file audits prior to the peer review team being onsite
- All documentation has to be prepared and sent to the peer review manager 2 weeks prior to the challenge dates

# The Process

- The peer team will meet with a range of those with a lived experience and carers, officers and members over the course of the peer challenge, as well as a range of external stakeholders such as colleagues in the NHS and the voluntary, community and social enterprise
- There will be informal feedback to the Challenge Sponsor at the end of each day
- During the morning of the last day the peer challenge team will finalise the presentation and time should be built into the day to give a 'no surprises' feedback to the Challenge Sponsor
- During the afternoon of the last day the peer challenge team will present its findings to the Councils Leadership Team including relevant members
- This will be followed by a report building on the presentation delivered on the last day of the peer challenge and written by the peer challenge manager with input from the peer team. The council will receive the draft report in approximately 4 weeks
- The Council is encouraged to publish the report to support openness, transparency, and shared learning across the sector. The LGA will publish this once it has been placed in the public domain through your Council's own procedures



# The Peer Challenge Team

- Lead Peer – Director of Adult Social Services – Sue Wallace Bonner – Halton Borough Council
- Member Peer – Leader or Portfolio Holder – Keith Cunliffe - Deputy Leader of Wigan Council. He has held the Portfolio for Health and Adult Social Care since 2008 and is Chair of the Wigan Health and Wellbeing Board.
- Senior Officer Peer 1 – Assistant Director – Tracey Harrison - Tameside Metropolitan Borough Council
- Senior Officer Peer 2 – Head of Service / Commissioning Lead – Wendy Shepherd – West Sussex Council
- Senior Officer Peer 3 – Principal Social Worker – Angela Conner – Stockton Council
- Senior Officer Peer 4 – Michaela Pinchard – LGA Associate
- LGA Peer Challenge Manager – Kathy Clark

# Questions?

**TITLE OF REPORT:**        **Work Programme**

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

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## Summary

The report sets out the provisional work programme for the Care, Health and Wellbeing Overview and Scrutiny Committee for the municipal year 2023/24.

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1. The Committee's provisional work programme was endorsed at the meeting held on 12 September 2023 and Councillors have agreed that further reports will be brought to future meetings to highlight current issues / identify any changes/additions to this programme.
2. Appendix 1 sets out the work programme as it currently stands and highlights proposed changes to the programme in bold and italics for ease of identification.

## Recommendations

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

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| <b>Draft Care, Health and Wellbeing OSC Work Programme 2023-24</b> |   |
|--|---|
| <b>13 June 2023</b>  | <ul style="list-style-type: none"> <li>• Performance Management and Improvement Framework- Year End Performance 2022-23</li> <li>• <b>Work to Attract and Retain a multi professional Workforce /Access to GP Appointments</b> (<i>focusing on how different practices manage demand that they cannot fulfil; same-day appointments only; in person and phone appointments; access barriers to appointments via landline, mobiles and online booking and any particular groups experiencing difficulty securing appointments / update to include patient satisfaction data broken down to each surgery if possible / information on whether younger GPs coming into the profession in Gateshead prefer to be directly employed NHS Workers/ salaried GPs or the traditional GP business model</i>)</li> <li>• <b>PH update on the £5m grant to research inequalities</b></li> <li>• OSC Work Programme</li> </ul> |
| <b>12 September 2023</b>   | <ul style="list-style-type: none"> <li>• <b>Departmental Strategy and Delivery Plan</b></li> <li>• <b>Demand pressures on social care services</b></li> <li>• <b>Social Services Annual Report on Complaints and Representations – Adults</b></li> <li>• <b>Annual Report of Local Adult Safeguarding Board and Business Plans &amp; emerging priorities</b></li> <li>• OSC Work Programme</li> </ul>   |
| <b>24 October 2023</b>   | <ul style="list-style-type: none"> <li>• <b>Social Care Recruitment</b></li> <li>• <b>Health and Wellbeing Board / Better Care Fund –Update</b></li> <li>• <b>CQC Maternity Inspection Report</b></li> <li>• <b>CQC Assurance</b></li> <li>• OSC Work Programme</li> </ul>  |
| <b>5 December 2023</b>   | <ul style="list-style-type: none"> <li>• Performance Management and Improvement Framework – Six Month Update – 2023-24</li> <li>• <b>Care Home model</b></li> <li>• <b>Extra Care/Supported Living models</b></li> <li>• OSC Work Programme</li> </ul>  |
| <b>23 January 2024</b>   | <ul style="list-style-type: none"> <li>• <b>Healthwatch Gateshead – Annual Update</b></li> <li>• <b>Home Care Model</b></li> <li>• <b>Strengths Based Approaches</b></li> <li>• <b>Hospital discharge and residential care numbers</b></li> <li>• OSC Work Programme</li> </ul>   |
| <b>12 March 2024</b>   | <ul style="list-style-type: none"> <li>• <b>Update on work to tackle Health Inequalities in Gateshead</b></li> <li>• <b>Support with the menopause, menstrual cycle problems and post-partum mental health issues: access to specialist support and variations of approach across Gateshead GP practices –</b></li> <li>• <b>CQC Assurance</b></li> <li>• OSC Work Programme</li> </ul>   |
| <b>16 April 2024</b>   | <ul style="list-style-type: none"> <li>• <b>Co Production</b></li> </ul>  |

|  |  |
|--|--|
|  | <ul style="list-style-type: none"><li>• <b>Health and Wellbeing Board – Update</b></li><li>• <b>OSC Work Programme</b></li></ul> |
|--|--|

**Issues to slot in –**

- **The new LPS (Liberty Protection Safeguards) Update**
- **Sister Winifred Laver Promoting Independence Centre (Visit in Autumn 2023)**
- **The Newcastle and Gateshead Persistent Physical Symptoms Service (PPSS)**