

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

**Tuesday, 19 April 2016**

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

Councillors: M Hood, D Davidson, M Goldsworthy,  
C Bradley, M Charlton, W Dick, B Goldsworthy, F Hindle,  
D Robson, J Simpson and J Wallace

**IN ATTENDANCE:** Councillors

**APOLOGIES:** Councillors P McNally and P Ronan

**CHW36 MINUTES**

The minutes from the meeting held on 19 January 2016 were agreed as a correct record.

**CHW37 BLAYDON GP PROVISION UPDATE**

The Committee received an update from John Costello, as Matt Brown, NHS England was not able to attend the meeting.

The Committee were advised that the latest procurement exercise had failed to identify a provider although work is ongoing to try and find a solution by 30 June 2016.

All scenarios are currently being looked at including a review of the costs levied by the landlord (the council) to see if any savings/concessions can be made. As well as looking into the delivering of other services from the premises to help with the running costs.

The Committee expressed concern at the length of time the process had taken but acknowledged that all that could be done was being done.

The Committee requested that further updates be provided as soon as practicable and that all options identified should be considered. John Costello also will obtain a current update from NHS England.

The CCG also acknowledged that they were looking at every scenario possible and they were also in discussions with the QE Hospital, Metro Riverside and Blaydon to look at and consider all viable options.

The Committee were also assured that the Blaydon Walk in Centre was not affected in any way by the uncertainty surrounding Blaydon GP Practice; and walk in services

were continuing to be delivered from Blaydon and would also continue to do so.

RESOLVED -           i)       that the information be noted.  
                          ii)       that further updates be provided as soon as possible.

### **CHW38     HEALTHWATCH GATESHEAD**

The Committee received a report and presentation from the Chair of Healthwatch Gateshead in relation to work/achievements during the past year.

The Committee thanked Healthwatch for their continuing work and looked forward to more closer working in the future. The Committee acknowledged that Healthwatch had been very helpful during the consultation exercise into the Deciding Together Consultation and recognised the valuable work already undertaken.

RESOLVED -                               that the information be noted

### **CHW39     DECIDING TOGETHER CONSULTATION - UPDATE**

The Committee received a report outlining the next steps which Gateshead's Care, Health and Wellbeing OSC may now take following a meeting of a Joint Health OSC (Gateshead and Newcastle) on 31 March 2016 to consider the proposals for mental health services across Gateshead and Newcastle outlined in the Deciding Together Consultation.

At the conclusion of the meeting on 31 March 2016, members of the Joint Health OSC were of the view that, whilst there were some good elements to the consultation process, there were also a number of flaws in the content/process. There was also agreement that the trust wide scenario T (Hopewood Park and St George's) was not in the interests of the local area and that a central option was preferred. However, the Joint OSC was not able to indicate whether this should be option G or option N because there had been insufficient and conflicting information about those specific options.

The Joint OSC was advised that Gateshead retained its right to make a referral to the Secretary of State and indicated that Gateshead's Care, Health and Wellbeing OSC would make a decision on whether it should make a referral at its meeting on 19 April 2016.

In examining whether a referral to the Secretary of State might be an appropriate course of action the OSC considered the following:

- The benefits of making such a referral
- Any alternative action which can be progressed

When considering the benefits or otherwise of making such a referral the OSC noted that there were no guarantees that any referral would be successful, however, a potential outcome of a referral in relation to inadequate consultation might be that the CCG is asked to carry out the consultation again.

The OSC noted that a referral to the Secretary of State would delay a decision on the future of mental health provision across Newcastle/Gateshead for patients/carers and families after an already lengthy engagement/public consultation exercise.

The OSC acknowledged that a referral to the Secretary of State may have an impact on the resources of the CCG and the CCG was asked to conduct the consultation exercise again and this may lead to a reduction in resources available for other health provision for residents as a result.

The CCG have indicated that there has been no decision taken on any of the options outlined in the consultation and the CCG Board will make this decision on 24 May 2016. The CCG may therefore decide to progress the option of a central location for acute inpatient mental health services which the Joint Health OSC has indicated as its preferred option. In arriving at its decision, the CCG Board will take into account the outcome of the public consultation exercise, the views of the Joint Health OSC and the views of the Clinical Senate amongst other factors.

The Committee were advised as an alternative, the OSC could draft a formal letter to the CCG providing an overview of its concerns regarding the consultation, identifying areas requiring written clarification and assurances. This would have the benefit of providing the OSC with written confirmation as to how their concerns will be managed and would also minimise any delay in securing improved mental health provision for residents across Gateshead and Newcastle.

- RESOLVED -
- i) the OSC unanimously decided not to support the trust wide solution and agreed to exercise their right to make a referral to the Secretary of State on 27 May 2016, if the CCG Board's decision on 24 May 2016 is to support a Trust Wide solution, on the basis that this options would not be in the interests if the local health service.
  - ii) the OSC unanimously decided that a letter should be sent on behalf of the OSC to Dr Mark Dornan (the new Chair of the CCG) setting out its concerns in relation to the consultation exercise and a formal response is requested

#### **CHW40 REVIEW OF MENTAL HEALTH & WELLBEING - MONITORING REPORT**

The OSC received a report providing a progress update on the Mental Health Review, which was the review topic of the Committee for 2014-15. The final report, which analysed the issues identified during the review and made recommendations for future action, was discussed and agreed at the committee on 21 April 2015. A six month update was given on 15 September 2015 identifying progress made against each of the six identified recommendations.

Committee were reminded that, in Gateshead, the percentages of those diagnosed with mental health conditions are higher than regional and national averages. This could be due to a number of local factors, including higher detection and diagnosis

of these illnesses. However local partnership work has also suggested that austerity and welfare reform is impacting negatively on the mental health and wellbeing of affected residents.

The rates of hospital admission for self-harm and unintentional injury for both under 18's and adults are higher than national averages. The figures point towards a very clear difference in admission rates per 100,000 population for self-harm with the North east of England recording triple the rate of admissions according to population size than London.

The recovery rate for those people being treated by the Improving Access to Psychological Therapies (IAPT) Service is higher than the national average. The national average recovery rate is around 40% and Gateshead is regularly performing at 50% or above. The service is also above average for access rates. Figures for Quarter 4 2014/2015 show:-

- 56.2% completed treatment i.e. 880 of 1565
- 53.4% hit recovery and 52.3% hit reliable recovery
- 72.7% hit "Reliable improvement" i.e. 640 out of 880. This is those who may not have hit recovery but made significant enough progress to be classed as a reliable improvement

The Gateshead suicide rate is below the national average, but small numbers annually means that looking at the rate for a single year must be viewed with caution. A suicide audit was completed in 2015 and this will be repeated in June 2016 for the two year data 2014 & 2015.

The suicide rate as calculated by the Office of National Statistics is among the lowest in the North East region, there on average 12 deaths per annum in Gateshead. The rate does not appear to be changing significantly over time although for half year figures in 2014 there appeared to be an upward trend.

The use of anti-depressant medication is quite high in the North East in comparison to England as a whole, averaging 1.7 against an England average of 1.3 in 2014/2015. Newcastle Gateshead CCG area has the second highest spend in the North East and Cumbria area, only North Durham spending more on anti-depressants. Both these have increased since the last reporting period of 2013/2014 (PHE Community Mental Health Profiles website).

- RESOLVED -
- i) that the Committee noted the progress made against each recommendation as contained in the report
  - ii) that the work done so far be acknowledged and further updates be provided to Committee in due course.

#### **CHW41 HEALTH AND WELLBEING BOARD - PROGRESS UPDATE**

The Committee received a report providing a progress update on the work of the Gateshead Health and Wellbeing Board from October 2015 – March 2016.

The Committee were advised that the following Strategic and Operational plans and their delivery arrangements were considered by the Board during October 2015 to March 2016:-

- Children and Adolescent Mental Health Services (CAMHS) Transformation Plan
- Children and Young People (0 to 19) delivery framework
- 'Deciding Together' mental health consultation
- Learning Disability Transforming Care Programme Fast Track Plan
- Health & Wellbeing Strategy Refresh
- 10 Year Plan for Tobacco Control in Gateshead
- Older Peoples Strategy

The Committee were advised that the Director of Public Health's Annual Report was considered at the Board's meeting in January 2016 which focused on health inequalities and the wider determinants of health, health in childhood and, in particular, the role of services and schools in child health improvement. The report's main theme, childhood health, was chosen to highlight the significance that achieving the best start in life has in reducing health inequalities in subsequent years. Details were also provided of action taken in response to the previous Director of Public Health Annual Report which focused on alcohol.

The Committee also received an update on work with the Integration Agenda, Assurance Agenda the Performance Management Framework and other issues to be considered.

The Committee also were advised that as the Health and Wellbeing Board commences its fourth year as a statutory committee of the Council, the health and care landscape continues to undergo change both in response to financial and other pressures facing the system and opportunities to work in new ways to better meet the needs of local people. The Board will need to be clear on the key strategic issues for Gateshead and how it can best influence this agenda for the benefit of local people.

Building upon the progress made in 2015/16, the Board will need to develop a revised Forward Plan and work programme for the year ahead.

RESOLVED - that the information be noted

## **CHW42 ANNUAL WORK PROGRAMME 2016-2017**

The Committee received a report setting out the provisional work programme for the municipal year 2016-17. As well as the draft work programme the Committee agreed that the proposed review topic would be the 'Review of the role of Housing in Promoting Health and Wellbeing' and the proposed case study would be 'Delayed Transfers of Care and Hospital Discharges'

The Committee also requested that the treatment into eating disorders be investigated also.

- RESOLVED -
- i) that the review topic and case study for 2016-17 be agreed.
  - ii) that the provisional work programme for 2016-17 be endorsed and be referred to Council on 26 May 2016 for agreement.
  - iii) that further reports will be brought to the Committee to identify any additional issues which the Committee may be asked to consider.

#### **CHW43 REVIEW OF GP ACCESS - FINAL REPORT**

The Committee received the final report into the Review of GP Access.

The Committee has considered a significant amount of evidence as part of the review of GP Access in order to scrutinise the current position across the Borough, to review challenges faced locally and nationally and to identify opportunities to build upon existing work to enhance access for the benefit of local people.

Following a series of evidence gathering sessions and site visits, the final report analyses the issues presented throughout the review and suggests headline recommendations.

The Committee were advised on the headline findings and the recommended actions on each of the priorities.

- RESOLVED -
- i) that the final report of the review of GP Access be approved
  - ii) that the priorities arising from the review be agreed
  - iii) that the recommendations be put forward to Cabinet and Council for approval and implementation

#### **CHW44 VOTE OF THANKS**

The Committee were advised that this would be the last meeting for Councillors Hindle, Robson, Coates, Ronan and Holmes. The Committee wished to place upon record their thanks and appreciation for their contribution as members of the Committee and wished them well for the future.

The Committee also wished to thank Carole Wood who is retiring as Director of Public Health; the committee wished to place upon record their thanks and appreciation for her contribution and wished her well for the future. The new Director of Public Health will be Alice Wiseman.

The Committee were also advised that Michael Laing will also be moving on and this would be his last meeting. The Committee wished to place upon record their thanks and appreciation for his contribution and wished him well for the future.

RESOLVED - that the information be noted

**Chair.....**