

**TITLE OF REPORT: Gateshead Health & Wellbeing Board – Progress Update****REPORT OF: Caroline O’Neill, Strategic Director, Care, Wellbeing & Learning**

---

**Summary**

To update and seek the views of the Care, Health & Wellbeing OSC on the work of the Gateshead Health & Wellbeing Board for the six month period October 2017 to March 2018.

---

**Background**

1. The Health and Social Care Act 2012 provided for the establishment of Health & Wellbeing Boards (HWBs) as committees of local authorities to bring together leaders from the health and care system to work together to improve the health and wellbeing of their local population.
2. As part of the 2017/18 work programme for the Care, Health & Wellbeing OSC, it was agreed to provide two six monthly updates on the work of the HWB.
3. A report has already been provided on the work of the HWB for the period 1 April 2017 to 30 September 2017.

**Gateshead Health & Wellbeing Board – Progress Update October 2017 to March 2018**

4. The following update highlights key issues considered by the HWB and progress made for the period 1 October 2017 to 31 March 2018.

**Needs Assessments***Pharmaceutical Needs Assessment:*

5. The Board considered a revised Pharmaceutical Needs Assessment (PNA) 2018 for Gateshead. The development and publication of a PNA is a statutory responsibility of the Health and Wellbeing Board under the Health and Social Care Act 2012.

6. The PNA describes the Gateshead population's health needs and the pharmaceutical services which exist or could be commissioned to address these. It is also used to identify any gaps in pharmaceutical services which could be filled by new pharmacies. The initial PNA was produced and implemented on 1 April 2015 with the requirement that the HWB publish a statement of its revised assessment within 3 years of publication. Development of the PNA was led by the Council's Public Health Team with input from the CCG, the Local Medical and Pharmaceutical Committee and HealthWatch Gateshead.
7. The PNA concluded that the current number of pharmacies and overall number of hours is adequate to meet the needs of people accessing pharmacy services, with the possible exception of the East locality.
8. It was also found that there is varied access to pharmacy services in the evenings and at weekends across the localities and it was recommended that NHS England and the CCG work with the Local Pharmaceutical Committee to review the availability of pharmacy services out of normal working hours and implement any required changes.

#### *BME Needs Assessment*

9. The Board received an update from partner organisations on how they are implementing the recommendations from the black and minority ethnic (BME) population needs assessment in Gateshead.

#### **Director of Public Health Annual Report 2017**

10. The Gateshead Director of Public Health Annual Report 2017 "It never rains but it pours", was presented to the Board. The report focused on inequality and described how disadvantage can cluster and accumulate across the life course. It explored how inequalities are experienced through the eyes of people in Gateshead.
11. It was noted that poor health outcomes are significantly more prevalent in communities that experience other hardships such as poverty. It was also noted that the three key strategic recommendations set out in the report were consistent with the Council's new strategic approach around the 'Thrive' agenda:
  - The Health and Wellbeing Strategy should be renewed, adopting a much longer term approach, with a strengthened vision to address inequalities. This needs to include measures to address the social determinants of health alongside prevention and early intervention at every level.
  - Partners in Gateshead should shift the focus from managing the burden of ill health to promoting actions that create the right

conditions for good health through the employment of a robust Health in all Policies approach.

- The Council and its partners should target resources to those individuals and communities most in need. Robust evaluation of reach and impact should be undertaken regularly using a Health Equity Audit approach.

12. The Board felt that the report lays down some real challenges for healthcare commissioners and providers. It was also felt that there is an economic case to encourage local businesses to support work to implement the recommendations of the report.

### **Strategic & Operational Plans**

13. The Board considered the following strategic and operational plans during the period October 2016 to March 2017:

#### *Gateshead Council's New Strategic Approach:*

An overview of the 'Making Gateshead a place where everyone thrives' - the Council's new strategic approach, was provided to the Board, including the 5 pledges 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 to fight for a better future for Gateshead.

It was considered that there is a need to reduce demand for Council services from those in thriving communities and to focus available resources more on those who are 'vulnerable' or 'just coping'.

It was noted that the success in delivering the Council's new vision will be reliant upon the buy-in from residents and Council partners. As such, it is a call to action for members of the Board to work collaboratively to achieve the new vision.

#### *Development of a Whole System Healthy Weight Strategy for Gateshead:*

The development of a Whole System Healthy Weight Strategy for Gateshead was considered by the Board. Its purpose is to increase the proportion of the Gateshead population who are a healthy weight, requiring partner support for a whole system approach. It was noted that the issue is multifaceted and therefore requires a multifaceted solution.

The report asked Board members to:

- Consider the leadership role their organisations / system components might play in preventing obesity and promoting a healthy weight environment.
- Agree to the development of a whole systems healthy weight strategy and action plan, which all partners should sign up to facilitating system wide action (further reports to come to the Board on taking the strategy forward).

#### *National Tobacco Control Plan*

An update was provided to the Board on the new national Tobacco Control Plan and the implications for local action on smoking and tobacco control. The ambitions and actions in the Plan were broadly welcomed, and it was noted that they reflect existing practice in Gateshead.

It was also noted that the Plan, in itself, is likely to be insufficient to help us achieve our collective vision. There are opportunities to improve whole system wide delivery in Gateshead around the evidence base, for instance through comprehensive NHS implementation of NICE guidance. Gateshead still requires work at all tiers from the international down to the community grass roots level.

The Board endorsed the local approach being taken and supported the refreshed Gateshead Smokefree Tobacco Control Alliance's ambitions to reduce smoking prevalence to 5% by 2025.

## **Reviews**

14. The Board considered the following reviews:

#### *System Review: Gateshead Shared Care Substance Misuse*

The Board considered an update on a system review of Gateshead shared care substance misuse services. The Board was advised that the scope of the review also included the provision of advice to the Council in relation to potential substance misuse service redesign. A summary of system wide observations were provided relating to engagement, treatment, recovery and governance. The Board noted the findings of the Shared Care Audit.

#### *Strategic Review of Carers Services*

The Board considered a report on the strategic review of carers services. It was highlighted that the review provided an opportunity for the Council and Newcastle Gateshead Clinical Commissioning Group to take an innovative approach to the integrated commissioning of carers services across Gateshead.

## **Gateshead Newcastle Deciding Together, Delivering Together**

15. The Board considered an update on work to progress the implementation of 'Deciding Together, Delivering Together' (DTDT) regarding the design of inpatient and community adult mental health services.

16. It was noted that following extensive desk top data analysis and preliminary stakeholder engagement earlier in 2017, four week-long design workshops were held in September and October and attended by more than 70 participants including service users and carers. It was reported that the workshops generated a comprehensive description of the Community Mental Health services to be created in Gateshead and Newcastle under the following headings:

- Getting help when you need it
- Understanding need and planning support
- Delivering support
- Staying well

17. An overview of the proposed structure to ensure there are strong implementation arrangements in place was also provided.

18. It was pointed out that some of the earlier consultation that took place on Deciding Together was undertaken when the scope did not include older people's mental health services in Gateshead. The widened scope provided opportunities for HealthWatch to continue to contribute to the design of services and that there will be continued engagement with stakeholders until re-designed services are established.

19. It was noted that outputs from the Deciding Together Work will need to be broken down into three categories of delivery over the short, medium and long term. The Board agreed to receive regular updates on the proposals.

### **Excess Winter Mortality in Gateshead**

20. The Board considered the issue of excess winter mortality (EWM) in Gateshead. It was noted that although EWM is associated with low temperatures, conditions directly relating to cold, such as hypothermia, are not the main cause of EWM. The majority of additional winter deaths are caused by cerebrovascular diseases, ischaemic heart disease, respiratory diseases and dementia and Alzheimer's disease.

21. The Board was also advised that households living in fuel poverty are less likely to be able to afford the cost of staying warm in winter.

22. It was felt that increasing the uptake of the flu vaccine is one of the most important priorities for the NHS in reducing winter pressures and excess winter mortality.

### **Performance Management Framework**

23. The Board received an update on progress in relation to key indicators linked to its health and wellbeing agenda drawn from:

- The Public Health Performance Management Framework
- Gateshead Better Care Fund Plan

- Newcastle Gateshead CCG Strategic Indicators
- Children's and Adult Social Care Strategic Outcome Indicators

24. The Board also endorsed quarterly returns to NHS England relating to the Better Care Fund Plan – quarters 2 and 3 of 2017/18. The returns focused on budget arrangements, how national conditions relating to the BCF are being met and performance against key indicators.

### **Assurance Agenda**

25. As part of the Board's assurance agenda, the following reports were received:

- The Local Safeguarding Children's Board Annual Report 2016/17 and Business Plan 2017/18;
- The Safeguarding Adults Annual Report 2016/17 and updated Strategic Plan 2016-19.

### **Other Issues**

26. Other issues considered by the Board included:

- *Fit for the Future* – The Board received a presentation on the work of place based, community led, collaborative approaches to addressing health inequalities in Gateshead.
- *Remit of the Health and Wellbeing Board* – The Board agreed to proposals to extend its remit to take into account those areas relating to the health and wellbeing of children that were previously the responsibility of the Children's Trust Board. It also agreed to extend its membership to include the Cabinet Member for Children and Young People.

### **Recommendations**

27. The views of OSC are sought on:

- (i) the progress update on the work of the Gateshead Health & Wellbeing Board for the six month period October 2017 to March 2018, as set out in this report.

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

