



Health & Wellbeing Board

North Tyneside Council
13 August 2018

An extraordinary meeting of the Health & Wellbeing Board will be held:-

on **Wednesday 22 August 2018**

in **Room 0.02, Quadrant, The Silverlink North, Cobalt Business Park,
NE27 0BY**

at **1.30pm**

Agenda Item

Page(s)

1. Apologies for Absence

To receive apologies for absence from the meeting.

2. Appointment of Substitute Members

To receive a report on the appointment of Substitute Members.

Any Member of the Board who is unable to attend the meeting may appoint a substitute member. The Contact Officer named below must be notified prior to the commencement of the meeting.

Continued overleaf

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Item		Page(s)
3.	<p>To Receive any Declarations of Interest and Dispensations</p> <p>Voting Members of the Board are invited to declare any registerable and/or non-registerable interests in matters appearing on the agenda, and the nature of that interest. They are also invited to disclose any dispensation in relation to any registerable and/or non-registerable interests that have been granted in respect of any matters appearing on the agenda.</p> <p>Non voting members are invited to declare any conflicts of interest in matters appearing on the agenda and the nature of that interest.</p> <p>Please complete the Declarations of Interests card available at the meeting and return it to the Democratic Services Officer before leaving the meeting.</p>	
4.	<p>Minutes</p> <p>To confirm the minutes of the meeting held on 21 June 2018.</p>	3-9
5.	<p>Integrated Care System</p> <p>To receive a presentation from Mark Adams, Chief Officer of North Tyneside Clinical Commissioning Group, on the development of NHS Integrated Care System for North East and North Cumbria and to consider its implications for North Tyneside.</p> <p>(There is no written report in relation to this item. Should the presentation slides become available prior to the meeting these will be circulated.)</p>	-

Members of the Health and Wellbeing Board:-

Councillor Margaret Hall (Chair)
 Councillor Muriel Green (Deputy Chair)
 Councillor Gary Bell
 Councillor Tommy Mulvenna
 Councillor Karen Clark
 Wendy Burke, Director of Public Health
 Jacqui Old, Head of Health, Education, Care and Safeguarding
 Richard Scott, North Tyneside NHS Clinical Commissioning Group
 Lesley Young-Murphy, North Tyneside NHS Clinical Commissioning Group
 Iain Kitt, Healthwatch North Tyneside
 Paul Jones, Healthwatch North Tyneside
 Christine Briggs, NHS England
 Louise Robson, Newcastle Hospitals NHS Foundation Trust
 Claire Riley, Northumbria Healthcare NHS Foundation Trust
 Kedar Kale, Northumberland, Tyne & Wear NHS Foundation Trust
 Hugo Minney, TyneHealth
 Craig Armstrong, North East Ambulance Service
 John Pratt, Tyne & Wear Fire & Rescue Service
 Alma Caldwell, Age UK
 Andy Watson, North Tyne Pharmaceutical Committee
 Richard Burrows, North Tyneside Safeguarding Children Board
 Catherine Hearne, Voluntary and Community Sector Chief Officer Group

Health and Wellbeing Board

21 June 2018

Present: Councillor M Hall (Chair)
Councillors G Bell, K Clark, M A Green and T Mulvenna
W Burke, North Tyneside Council
H Hudson, North Tyneside Council
R Scott, North Tyneside Clinical Commissioning Group
L Young-Murphy, North Tyneside Clinical Commissioning Group
S Morgan, Healthwatch North Tyneside
P Jones, Healthwatch North Tyneside
C Riley, Northumbria Healthcare NHS Trust
K Kale, Northumberland, Tyne & Wear NHS Trust
D Campbell, Newcastle Hospitals NHS Trust
H Minney, TyneHealth
P Iveson, Tyne & Wear Fire & Rescue Service
R Burrows, Safeguarding Children Board
S Blackman, North of Tyne Pharmaceutical Committee
A Caldwell, Age UK North Tyneside

Also Present

S Woodhouse, S Meins, S Bishop and M Robson, North Tyneside Council
T Dunketon and G Charlton, North Tyneside CCG
J Brown, Healthwatch North Tyneside

HW01/06/18 Chair's Announcements

The Chair referred to the report from the Care Quality Commission (CQC) arising from its inspection of the Council's 0-19 Children's Public Health Service. The report had highlighted how staff protected children and young people from avoidable harm and abuse, and made sure they followed procedures to keep them safe. It commended the service for creating a 'strong, visible and person-centred culture', delivering 'compassionate and sensitive care'. Staff had won praise for being 'highly motivated and inspired to offer the best possible care to children, young people, and families' while leaders are described as 'dynamic' and 'proactive'. The Chair commented that the inspection had been an opportunity to showcase the excellent work. The outcome had been testament to the fantastic teams and everyone was delighted with the result.

The Chair referred to the serious failings of the national breast screening programme resulting in thousands of woman aged between 68 and 71 not being invited for their final screening invitation between 2009 and 2018. The NHS was in the process of inviting all women who missed their final appointment to attend for screening. In North Tyneside 850 women had been contacted as part of the patient notification exercise in relation to the breast screening incident. The local breast screening provider at the RVI was working hard to offer appointments to women over the summer and it was anticipated that all women would have had an opportunity to attend for screening by October 2018.

The Chair acknowledged that a new urgent care service for North Tyneside had been commissioned by North Tyneside Clinical Commissioning Group and this would open at North Tyneside General Hospital on 1 October 2018. She stated that a report on the new service would be considered by the Board at its next meeting in September 2018.

Finally the Chair thanked those members who had attended an informal meeting with members of the Northumberland Health and Wellbeing Board on 14 June 2018 to consider the Care Quality Commission's approach to Local System Reviews. Haley Hudson outlined the next steps in terms of an officer planning group continuing to prepare for the possibility of a review.

HW02/06/18 Apologies

Apologies for absence were received from J Old (North Tyneside Council), I Kitt (Healthwatch North Tyneside), L Robson (Newcastle Hospitals NHS Trust), J Pratt (Tyne & Wear Fire & Rescue), A Watson (North of Tyne Pharmaceutical Committee), D Titterton (Community & Voluntary Sector) and J Stonebridge (Northumbria Healthcare NHS Trust).

HW03/06/18 Substitute Members

Pursuant to the Council's Constitution, the appointment of the following substitute members was reported:

H Hudson for J Old (North Tyneside Council)
S Morgan for I Kitt (Healthwatch North Tyneside)
D Campbell for L Robson (Newcastle Hospitals NHS Trust)
P Iveson for J Pratt (Tyne & Wear Fire & Rescue)
S Blackman for A Watson (North of Tyne Pharmaceutical Committee)

HW04/06/18 Declarations of Interest and Dispensations

Hugo Minney, Chief Executive of TyneHealth, declared the following conflicts of interest as a non-voting member of the Board in relation to:

- a) Minute HW06/06/18, as Chair of the charity Building Self Belief CIO which addresses mental well-being in year 9 children (age 13/14) and has run a successful pilot project in Churchill Community College. This was not directly referenced in the policy;
- b) Minute HW07/06/18, as GP practices in North Tyneside have registers of carers and receive a payment under enhanced services contracts to ensure these registers are up to date and as complete as possible;
- c) Minute HW08/06/18, as GP practices have trained 74 Primary Care Navigators whose role is primarily around low intensity social prescribing. TyneHealth makes a payment to GP practices to provide dedicated time for this role, and
- d) Minute HW09/06/18, as TyneHealth provides the management and administration (including screening, identification and booking), and many of the clinical staff, for the falls prevention clinics as a subcontractor to Newcastle Hospitals.

HW05/06/18 Minutes

Resolved that the minutes of the meeting held on 13 March 2018 be confirmed and signed by the Chair.

HW06/06/18 Healthwatch North Tyneside – Six Month Activity Report

Joanne Brown from Healthwatch North Tyneside presented a trends report drawing on the work Healthwatch had undertaken and the feedback it had received during the period from October 2017 to March 2018. There had been a decrease in the amount of feedback Healthwatch had received during this period due to a reduction in its engagement activities whilst the organisation restructured following a re-tendering process.

A range of issues were highlighted from the trends report including access to GP appointments, the closure of Earsdon Park Surgery, poor quality mental health care and treatment and issues around support in crisis. People continued to be satisfied with the quality and standard of care received in hospital but transport to Northumbria Hospital continued to be reported as a concern for some people. Feedback about Care Plus had been very positive with support for carers representing a large proportion of feedback in this area.

Healthwatch was currently reviewing its future priorities and ways of working so it could best respond to the feedback it received. A workplan would be presented to the Board at a future meeting.

The Board considered ways in which Healthwatch could engage with children and young people as their voice and views were currently underrepresented in the healthcare system. It was proposed that a Young Healthwatch be established so young volunteers could undertake their own research. It was suggested that this work should complement existing engagement with young people organised by the Council and Northumbria Healthcare.

Healthwatch had not received any feedback from the public in relation to the Sustainable Transformation Plans (STP) or Integrated Care Systems (ICS). The Board discussed how the public and partners would be engaged in the STP/ICS process. The Chair stated that the Board was due to receive a further report on the STP/ICS process in the near future.

Resolved that (1) the concerns gathered from residents of North Tyneside be noted; and
(2) members of the Board share and discuss the trends report within their organisations.

HW07/06/18 Strategic Objective No. 4 “To improve the mental health and emotional resilience of the North Tyneside population”

Scott Woodhouse, the Council’s Strategic Commissioning Manager: Adults, presented a report on the progress made in relation to the Board’s Strategic Objective No. 4 “To improve the mental health and emotional resilience of the North Tyneside population”. This was the first in a series of reports relating to delivery of the Board’s work plan for 2018/2020.

The report focussed on work to develop, implement and deliver the following strategies:

The North Tyneside Children and Young People's Mental Health and Emotional Wellbeing Strategy 2016 – 2021 sought community led change where everybody recognises the part they can play to build resilience and mental wellbeing; from young people themselves, parents and carers, schools and colleges, our voluntary sector and health and social care services. Prevention and early intervention were crucial to improving mental health and emotional resilience and to stop serious mental health issues developing. This was the key focus of the Strategy's action plan and the Board were presented with a summary of current work, progress made and future actions.

The North Tyneside Joint Mental Health and Wellbeing Strategy 2016 – 2021 was a multi-agency strategy relating to working age adults approved by the Board in June 2016. The Board received details of the progress made in relation to the seven themes contained in the strategy together with a report on the work of a suicide prevention task group set up to achieve the national 10% reduction in suicide rate by 2020/21.

The Board were presented with the Mental Wellbeing in Later Life Strategy 2018 – 2023. The Strategy had been formulated to improve mental health and dementia services for older people and carers and to ensure that there was targeted prevention for people at risk of mental ill health and early intervention for older people with symptoms of mental illness. The Strategy would be delivered through an implementation plan which would contain detail about what would be done, by whom and by when. It would be refreshed annually. The Mental Health Integration Board would monitor progress and report to the Board as required and ensure there was collaboration with other relevant partnership boards. This work would complement delivery of the Board's other strategic objectives.

It was proposed that the governance structure for mental health strategy be revised to establish one overarching Board with a responsibility for mental health and emotional wellbeing and three strategy groups each focussed on matters relating to the respective work plans for children and young people, working age adults and older people.

The Board acknowledged examples of good practice regarding mental wellbeing in North Tyneside including the MH:2K model for engaging young people in conversations about mental health, the inclusion of dementia risk awareness as part of the NHS health checks programme, funding for delivery of a suicide prevention action plan and Dragon, a play highlighting the problem soldiers face with Post Traumatic Stress Disorder (PTSD) when they return from action overseas.

The Board examined in more detail the changes that the Mental Wellbeing in Later Life Strategy was seeking to achieve and how these would be achieved. The proposed Older Persons Strategy Group would be tasked with formulating an action plan to deliver the strategy and identify suitable performance measures. The desired outcomes were likely to be difficult to measure in the short term, rather the strategy was about investing resources now to derive benefits in the longer term.

Resolved that (1) the progress to date in delivering the Strategic Objective and future work planned in relation to the Children and Young People's strategy and the Joint Mental Health and Wellbeing Strategy for working age adults be approved; (2) the Mental Wellbeing in Later Life Strategy 2018 – 2023 be approved; and (3) the proposed structure of the Mental Health Integration Board and proposed strategy groups to oversee this work and the proposed performance and governance arrangements be endorsed.

HW08/06/18 Strategic Objective No. 5 “An integrated approach to identifying and meeting carers health and wellbeing needs (of all ages)”.

Tom Dunkerton, the CCG’s Commissioning Manager, presented a report to update the Board on work to meet its Strategic Objective No.5 “An integrated approach to identifying and meeting carers health and wellbeing needs (of all ages)”.

The report outlined the background to the objective in terms of the number of adult and young carers in North Tyneside and how this number had increased over recent years, the legal duties contained in the Care Act 2014 and the Children and Families Act 2014 to address the needs of carers and the existing integrated approach to identifying and assessing carer health and wellbeing in North Tyneside. The Board had previously considered delivery the North Tyneside’s Commitment to Carers which had been developed by a range of partners to improve the health and wellbeing of all carers living in North Tyneside, and support them to have a life outside of caring and to actively promote open, honest working in co-production with carers.

In order to take forward the Board’s strategic objective it was proposed that a half day scoping event be held on 28 June 2018, to determine the main functions of a Carers Partnership Board and the board be tasked with developing a plan to identify and support carers and develop mechanisms to ensure carers views are included. Draft terms of reference had been compiled and were presented to the Board for consideration. It was suggested that a shared responsibility for safeguarding children should be included within the terms of reference.

Resolved that (1) the establishment of a Carers Partnership Board be approved; (2) the Carers Partnership Board be requested to produce a joint plan for supporting carers, building on the existing North Tyneside Carer’s Commitment; and (3) the Carers Partnership Board be requested to report on progress made in formulating and delivering the joint plan to the Health & Wellbeing Board in January 2019.

HW42/03/18 Strategic Objective No. 8 “To reduce social isolation and increase cultural engagement to improve health and wellbeing in North Tyneside”.

Steve Bishop, the Council’s Senior Manager: Cultural Services, presented a report in relation to Strategic Objective No.8, “To reduce social isolation and increase cultural engagement to improve health and wellbeing in North Tyneside”.

The Board heard that there was increasing evidence to support the case that the arts and cultural activity had a positive impact on enhancing health, wellbeing and quality of life for people of all ages. However, the potential contribution of the arts and culture to health and wellbeing had, as yet, been all too little realised. The key to success was leadership and collaboration across the systems of health, social care and the wider cultural sector.

In July 2017 the All-Party Parliamentary Group (APPG) on Arts, Health and Wellbeing published a report Creative Health: The Arts for Health and Wellbeing. The report set out ten recommendations with the objective of encouraging the development of policy to work towards creative activity being part of all of our lives.

There had been an increasing recognition of the positive role of the arts and cultural provision upon the health and wellbeing of the population in North Tyneside. This had resulted in greater joint working between officers from Cultural Services and Public

Health and the adoption of an objective relating to cultural engagement within the Board's work plan.

In order to develop work around the delivery of this objective, officers from Cultural Services and Public Health had been working with Helix Arts, to plan a workshop to consider the recommendations of the APPG report and how these could be applied to North Tyneside. This workshop was to be held on 29 June 2018 and the Board were presented with the programme. In order to carry forward the Strategic Objective, a key outcome of the workshop would be the establishment of a multi-agency delivery group to take forward the findings of the APPG in a local context and provide a conduit to the emerging regional and national structures in this area of work.

The Board welcomed the approach being taken to reduce social isolation and increase cultural engagement and members made a number of suggestions as to how future plans may embrace and complement existing projects.

Resolved that (1) the proposed workshop and formation of a delivery group to take forward the recommendations of the APPG report and Strategic Objective 8 of the Board's Work Plan 2018-20 be approved; and
(2) a further report, with a plan of action and performance measures, indicating progress towards achieving the objective of reducing social isolation and increasing cultural engagement be submitted to the Board at its meeting in January 2019.

HW43/03/18 Strategic Objective No.9 "To reduce falls and fractures risk and ensure effective treatment, rehabilitation and secondary prevention for those who have fallen."

Lesley Young-Murphy, Chief Operating Officer of North Tyneside Clinical Commissioning Group (CCG), presented a report on the progress made in relation to the Board's Strategic Objective No.9 "To reduce falls and fractures risk and ensure effective treatment, rehabilitation and secondary prevention for those who have fallen".

The Board were presented with the North Tyneside Falls Strategy 2017 - 2020 which had been developed and agreed across all stakeholder organisations in North Tyneside including the CCG, Local Authority, Public Health, Foundations Trusts, GP Federation, Voluntary Sector, Tyne & Wear Fire Service and North Tyneside's Patient Forum.

The strategy set out the system commitment and plans for reducing the rate of falls and harm from falling in North Tyneside. It set out the current position, strategic priorities, required service developments, ambitions and key actions. Together partners aspired to create a "fall free" North Tyneside and aimed to:

- Ensure that the population understand what they can do to age well and reduce their risk of falls.
- Prevent frailty, promote bone health and reduce falls and injuries
- Early intervention to restore independence
- Respond to the first fracture and prevent the second
- Improve patient outcomes and increase efficiency of care after hip fracture

The partners, led by North Tyneside Clinical Commissioning Group, oversee the delivery of the strategy via a falls strategy group which reports into North Tyneside Future Care Programme Board. The multiagency programme board provides assurance to the Health and Wellbeing Board on delivery of the strategy together with any issues which require their intervention.

The Falls Strategy sat within a wider falls prevention system. The Board were presented with details of Active North Tyneside and wider Public Health priorities and initiatives committed to work to continue to seek opportunities to maximise the use of existing resources to help deliver the aspiration of a “Falls Free”. The community falls service pathways had been established on evidenced based best practice. The community falls service consists of 6 elements: a community falls clinic, strength and balance training, safe and well checks, falls first responders, community bone health clinic and a falls education programme. North Tyneside GPs had a significant part to play in early identification of those people who are at a risk of falling and working with partners to ensure appropriate interventions.

The Board considered how it might increase investment in falls prevention, for example by addressing the risks of falling caused by inactivity, thereby reducing the costs of the healthcare required when people fall and become injured. Members also discussed how a co-ordinated multi-agency approach to falls reduction could maximise the use of existing resources. For example the role of community pharmacies in minimising the risks associated with the use of medications was recognised and members considered how the use of financial resources available from the Better Care Fund and future investment in the NHS could be directed towards prevention.

Resolved that (1) the North Tyneside Falls Strategy 2017 - 2020 and the ambitions set within it be endorsed;
(2) the governance arrangements to provide assurance to the Health and Wellbeing Board on its delivery be approved; and
(3) a further report indicating progress towards achieving the objective “to reduce falls and fractures risk and ensure effective treatment, rehabilitation and secondary prevention for those who have fallen.” be submitted to the Board at its meeting in November 2018.