

(Note: These minutes are subject to confirmation at the next meeting of the Board scheduled to be held on 7 March 2019.)

Health and Wellbeing Board

10 January 2019

Present: Councillor M Hall (Chair)
Councillors G Bell, K Clark, M A Green and T Mulvenna.
J Old, North Tyneside Council
W Burke, North Tyneside Council
A Paradis, North Tyneside Clinical Commissioning Group
I Kitt, Healthwatch North Tyneside
P Jones, Healthwatch North Tyneside
C Riley, Northumbria Healthcare NHS Trust
K Kale, Northumberland, Tyne & Wear NHS Trust
C Armstrong, North East Ambulance Service
P Stanley, TyneHealth
G Brotherton, Tyne & Wear Fire & Rescue Service
A Caldwell, Age UK North Tyneside
R Burrows, Safeguarding Children Board
C Hearne, Community and Voluntary Sector
D Titterton, YMCA North Tyneside

Also Present:

A James, S Bishop and M Robson, North Tyneside Council
T Dunketon and J Arris, North Tyneside CCG
J Stonebridge, Northumbria Healthcare NHS Trust
L Jordan, Newcastle Hospitals NHS Trust
K Soady, Tyne & Wear Fire & Rescue Service

HW32/01/19 Apologies

Apologies for absence were received from L Young-Murphy and R Scott (North Tyneside Clinical Commissioning Group) and J Pratt (Tyne & Wear Fire & Rescue Service).

HW33/01/19 Substitute Members

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

A Paradis for L Young Murphy (North Tyneside Clinical Commissioning Group)
G Brotherton for J Pratt (Tyne & Wear Fire & Rescue Service)

HW34/01/19 Declarations of Interest and Dispensations

There were no declarations of interest or dispensations reported.

HW35/01/19 Minutes

Resolved that the minutes of the meeting held on 8 November 2018 be confirmed and signed by the Chair.

HW36/01/19 Children and Young People with Special Educational Needs and Disabilities (SEND) Support Services (Previous Minutes HW30/11/18 and HW40/03/18)

The Board had previously received reports regarding support services for children and young people with special educational needs and disabilities (SEND) when the Board had agreed to receive periodical integrated performance information on SEND outcomes. Angela James, the Council's Assistant Director: Education, Skills and Employment, accompanied by Janet Arris, Commissioning Manager from the North Tyneside CCG, attended the meeting to present an overview of the service including a summary of performance. The Board were presented with a reminder of the strategic direction, an update on staffing within the service, the action taken following a comprehensive systems review, its achievements and commentary on the increasing demand for SEND services.

The performance of the service was summarised in the following terms:

- a) there had been an increase in usage of the local offer;
- b) there had been a decline in the percentage of Education Health and Care Plans (EHCPs) completed within 20 weeks which was currently below latest national figures;
- c) attainment outcomes were significantly better than the national figure for SEN Support pupils and in line with national figures for pupils with an EHCP;
- d) overall absence from school was increasing but local performance compared well with national data;
- e) there was a lower percentage of exclusions locally, both fixed term and permanent, than nationally;
- f) the percentage of SEND pupils who were in education, employment or training was in-line with national figures;
- g) initial waiting times for Child and Adolescent Mental Health Services (CAMHS) had reduced; and
- h) there were long waiting times on some CAMHS pathways for example neurodevelopmental services.

Work to review the SEND systems was continuing, particularly in relation to the neurodevelopmental pathway, where there had been a significant increase in referrals and the CCG had invested in year and was working with the provider to reduce waiting times. A review of CAMHS was also being undertaken to ensure all elements of the service were fit for purpose and meeting assessed need. An Ofsted Inspection of the service was expected in the near future.

The Board considered the contributions made by partners across the wider healthcare system to meet the health and wellbeing needs of children and young people with SEND and their families and to ensure they received the support required to access education. The Board also discussed the challenges in meeting the increased demands on the service and parental wishes particularly when special schools were full and there were no placements available. It was acknowledged that there were challenges in recruiting suitably qualified and experienced people to fill the key positions within the service.

The performance summary indicated that the service was in a relatively strong position because the Council, the CCG and its partners had been proactive in reviewing and improving the service. But there was still much to do including improving the EHCP process, creating a more consistent level of support within all schools and achieving better co-ordination of healthcare services.

Resolved that (1) the overview of the Children and Young People with Special Educational Needs and Disabilities (SEND) Support Services and the performance information be noted; and
(2) the Board be presented with a further report outlining the outcomes from the anticipated Ofsted Inspection and the report include an emphasis on the action taken to address the issues raised during the Board's discussion and set out above.

HW37/01/19 Strategic Objective No. 9 “To reduce falls and fractures risk and ensure effective treatment, rehabilitation and secondary prevention for those who have fallen” (Previous Minute HW10/06/18)

The Board received a progress report in relation to delivery of 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 report was the latest in a series of reports relating to the delivery of the Board's work plan for 2018-20. The Board had previously considered progress in relation to this objective in June 2018 when it had endorsed the North Tyneside Falls Strategy 2017-20. The strategy set out the system commitment and plans for reducing the rate of falls and harm from falling in North Tyneside.

The Board heard that the CCG had commissioned a Community Falls Service in November 2017 for an initial 12 month pilot phase. The service was made up of the following components; a community falls clinic, strength and balance training, safe & well checks, a falls first responder service, a community bone health clinic and a falls education programme.

Following the pilot phase the CCG had evaluated the service and the key findings were presented to the Board. The pilot phase had produced sufficient evidence to suggest that the care pathway and delivery model for community falls was viable. The CCG had therefore agreed to extend the contracts for 4 of the 5 constituent parts of the service for a further 18 months (to May 2020). In light of difficulties associated with commissioning a community bone health service, the CCG intended to review the local market to ascertain whether a viable provider option existed and consider what contingency measures may need to be put in place.

In considering the report the Board received clarification that the strategy and service were targeted at older people who were more at risk of falling. Data in relation to the causes of falls had been collated as part of a needs assessment and this information had been analysed in formulating the Falls Strategy.

The Board acknowledged the value of preventative programmes such as those delivered by Northumbria Healthcare Trust in its Accident and Emergency Department and the Council's Active North Tyneside Programme in reducing the number of falls.

The Board welcomed the report and the success of the pilot phase of the Community Falls Service. The next stage in the delivery of the Strategic Objective would be for

evidence to be presented to the Board that the service had made a difference in terms of reducing the number of admissions for injuries due to falls.

Resolved that (1) the progress report in relation to delivery of the Board's Strategic Objective No. 9 be noted;
(2) the Board support the continued implementation of the North Tyneside Falls Strategy; and
(3) a further progress report be submitted to the Board, including evidence of the outcomes achieved from delivery of the Falls Strategy and the Community Falls Service.

HW38/01/19 Strategic Objective No. 5 "An integrated approach to identifying and meeting carers health and wellbeing needs (of all ages)" (Previous Minute HW08/06/18)

Following an earlier report in June 2018 the Board reviewed the progress made towards achieving its Strategic Objective No. 5 "An integrated approach to identifying and meeting carers health and wellbeing needs (of all ages)". The Board had agreed to establish a North Tyneside Carers Partnership Board with the brief to take the carers agenda forward and in doing so, adopt a system wide approach.

A stakeholder event had been held in June 2018 to scope out a future work plan and determine the main functions of the Carers Partnership Board moving forward. The event had highlighted a number of high level themes including deficiencies in the quality of information collected, limitations in the identification and subsequent assessment of need, limited education for the workforce on the effects that caring has upon a person, failure of services to recognise carers on an equal footing to that of the person they care for and to value their contribution as experts in care.

The Carers Partnership Board was now meeting on a monthly basis with a key focus on delivering the following objectives:

- a) Ensure safeguarding is considered with regard to all agenda items;
- b) Develop a programme to support primary care to identify carers;
- c) To improve carer health and wellbeing e.g. carers breaks, crisis support;
- d) To improve timely access to information and support by increasing opportunities for carers to find out what is available to support them and how to access it;
- e) To review quality and assurance processes across education, health and care to ensure carers needs are identified and met during assessment and review processes;
- f) To ensure a targeted workforce is trained to recognise adult and young carers and parent carers to assess their needs across education, health and care;
- g) To ensure all young carers assessments consider whether it is appropriate or excessive for the young carer to provide care for the person in question, in light of the young carer's needs and wishes; and
- h) To ensure that actions required safeguarding and promoting the welfare of carers are implemented.

The Carers Partnership Board was in the process of developing a three year action plan encompassing both adult and young carers.

In considering the report the Board asked questions and made comments when the following issues were discussed:

- a) The Carers Partnership Board contained representation from a wide variety of stakeholders but the current membership was not exhaustive and any other partners were welcome to participate.

- b) The Board heard how primary care, care homes and care providers would be engaged in the work of the Carers Partnership Board.
- c) The Board considered how the idea of a carers' passport would help carers communicate information about the person they cared for easily and effectively without the need to repeat themselves.
- d) The Board recognised the important contribution made by the Community and Voluntary Sector to the system of support available to carers.
- e) The Carers Partnership Board were aware of the good practice developed by the Northumberland, Tyne & Wear Foundation NHS Trust as part of The Triangle of Care initiative and were keen to learn from it.
- f) The action plan and additional funding for mental health services, recently announced by the government, could help enhance provision in schools to identify and support young carers, many of whom did not wish to identify themselves as carers.

Resolved that the progress made towards achieving the Board's Strategic Objective No. 5, "An integrated approach to identifying and meeting carers' health and wellbeing needs (of all ages)", be noted.

HW39/01/19 Strategic Objective No. 8 "Reduce social isolation and increase cultural engagement to improve health and wellbeing" (Previous Minute HW09/06/18)

Following an earlier report in June 2018 the Board reviewed the progress made towards achieving its Strategic Objective No. 8 "Reduce social isolation and increase cultural engagement to improve health and wellbeing". At that time it had been agreed that a delivery group be established to take forward the recommendations of the All Party Parliamentary Group (APPG) report *Creative Health: The Arts for Health and Wellbeing* and the Strategic Objective No. 8.

In June 2018 a workshop had successfully brought together a range of practitioners and providers from the health and cultural sectors to discuss the issues and recommendations raised in the APPG report. The Culture Health and Wellbeing Delivery Group had been established as a result of the workshop and it had subsequently agreed its Terms of Reference and a draft Culture Health and Wellbeing Action Plan 2018-20 for North Tyneside. Both documents were presented to the Board.

Much of the work so far had been preparatory in order to build an understanding of the APPG recommendations and engage partners in considering how they could contribute to their delivery. The draft action plan summarised the work to date but it was anticipated that it would evolve as partners committed to actions over the lifetime of the plan. Progress to date had revealed a lack of shared understanding between the cultural and health sectors regarding their respective priorities. The need to introduce confidence building measures in order to clarify how partners could contribute towards the delivery of the APPG recommendations and strategic objective remained necessary.

The Board considered the extent to which cultural engagement, social isolation and its impact on health and wellbeing were recognised in the recently published NHS Long Term Plan. It was acknowledged that Northumbria Healthcare NHS Trust operated a cultural programme and wanted to contribute to the delivery of the cultural agenda. Reference was also made to the need for, and the possible expansion, of social prescribing services within primary care. Northumbria Healthcare's programme and social prescribing services illustrated the broad range of activities which needed to be incorporated into the Delivery Group's action plan.

It was noted that representatives from Durham and Newcastle Universities had indicated that they would be willing to work with the delivery group to help measure the impact of cultural engagement on social isolation and health and wellbeing.

Resolved that (1) the establishment of the Culture Health & Wellbeing Delivery Group, to deliver the Board's Strategic Objective No. 8, be noted;
(2) the progress made to date by the Group to develop a multi-agency action plan, to deliver the objective and the recommendations contained in the All Party Parliamentary Group report, *Creative Health*, be endorsed; and
(3) all relevant partners be requested to demonstrate their commitment to delivering the strategic objective by participating in the work of the group and taking responsibility for actions contained in the plan.