(Note: These minutes are subject to confirmation at the next meeting of the Board scheduled to be held on 11 April 2019.)

Health and Wellbeing Board

14 March 2019

Present: Councillor M Hall (Chair)

Councillors K Clark, M A Green, J Mole and T Mulvenna

W Burke, North Tyneside Council

R Scott, North Tyneside Clinical Commissioning Group

I Kitt, Healthwatch North Tyneside P Jones, Healthwatch North Tyneside

C Riley, Northumbria Healthcare NHS Trust

M Galston, Northumberland, Tyne & Wear NHS Trust

L Jordan, Newcastle Hospitals NHS Trust

S Thompson, TyneHealth

G Brotherton, Tyne & Wear Fire & Rescue Service

C Wardlaw, North of Tyne Pharmaceutical Committee

R Burrows, Safeguarding Children Board

D McNally, Age UK North Tyneside

D Titterton, YMCA North Tyneside

Also Present:

Councillors L Spillard and A Waggott-Fairley

P Hanson, J Laughton, H Douglas, C Jordan and M Robson,

North Tyneside Council

A Foster, Lead Officer, North East & North Cumbria

Integrated Care System

J Stonebridge, Northumbria Healthcare NHS Trust

HW46/03/19 Apologies

Apologies for absence were received from Councillor G Bell, H Hudson and J Old (North Tyneside Council), M Adams (North Tyneside Clinical Commissioning Group), K Kale (Northumberland, Tyne & Wear NHS Trust), K Simpson (Newcastle Hospitals NHS Trust), P Stanley (TyneHealth), A Watson (North of Tyne Pharmaceutical Committee), L McVay (Tyne & Wear Fire and Rescue Service) and C Hearne (Community and Voluntary Sector).

HW47/03/19 Substitute Members

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

Councillor J Mole for Councillor G Bell

L Jordan for K Simpson (Newcastle Hospitals NHS Trust)

M Galston for K Kale (Northumberland, Tyne & Wear NHS Trust)

S Thompson for P Stanley (TyneHealth)

C Wardlaw for A Watson (North of Tyne Pharmaceutical Committee)

G Brotherton for L McVay (Tyne and Wear Fire and Rescue Service)

HW48/03/19 Declarations of Interest and Dispensations

There were no declarations of interest or dispensations reported.

HW49/03/19 Minutes

Resolved that the minutes of the meeting held on 28 February 2019 be confirmed and signed by the Chair.

HW50/03/19 NHS Long Term Plan and Integrated Care System for the North East and North Cumbria (Previous Minute HW15/08/18)

Alan Foster, the Lead Officer for the North East and North Cumbria Integrated Care System (ICS), attended the meeting to present details of the NHS Long Term Plan and its implications for the development of the ICS.

Alan began by explaining that the ICS was not about recreating a regional health authority. It sought to build upon the long track record of working at scale across the region to develop new ways of working between the NHS, local authorities and the voluntary sector to improve health outcomes and address operational pressures. The ICS would seek to do the right things at the right level with the right partners. The Board were presented with an inverted hierarchy of service tiers where people and patients would be put first in the system, overriding organisational boundaries. Below this local integrated community and primary health services would be developed and commissioned within neighbourhoods of between 30,000-50,000 and across place based systems the size of local authorities. Sub regional integrated care partnerships would ensure that there was a critical mass for non-specialist acute services. Strategic commissioning of specialised acute services and system wide co-ordination would be undertaken by the ICS for the whole region.

The NHS Long Term Plan required the ICS to be in place by 2021but there was no statutory framework to direct its form and operation. The system would therefore evolve over this period at a pace all partners were comfortable and allowing effective communication and engagement.

The Board asked a series of questions of Alan Foster when further consideration was given to:

- a) the size and scale of the ICS and the role and influence of individual local authorities within it;
- b) the contribution made by local authorities in tackling the wider determinants of health and wellbeing;
- c) the need for partners within the ICS to work together to change the demand for health services; and
- d) the need for public and patient engagement which would form part of the neighbourhood and place based commissioning.

The Chair of the Board thanked Alan Foster for his informative presentation and for answering the Board's questions. She made reference to the inverted hierarchy of service delivery included in the presentation which placed an emphasis on neighbourhood and place based commissioning. She believed North Tyneside was well placed to deliver this model.

HW51/03/19 North of Tyne Combined Authority

(The Chair had agreed to the following item of business being considered at the meeting as an urgent item in accordance with Section 100(B)(4)(b) of the Local Government Act 1972 (as amended) because the matter had originally been scheduled to be considered at the meeting but due to a misunderstanding the matter had been omitted from the agenda.)

Paul Hanson, the Council's Chief Executive, and Jackie Laughton, the Council's Head of Corporate Strategy, attended the meeting to present the North of Tyne Combined Authority's (NTCA) emerging work streams and their impact on the health and wellbeing of communities in North Tyneside.

The NTCA had been established on 2 November 2018. The Authority represented a significant shift of powers, funding and responsibility from central government to the local level. The deal enabled Newcastle, North Tyneside and Northumberland Councils to pursue through the NTCA a shared ambition for an inclusive economy. NTCA would have a £600m investment fund, worth £20m a year over 30 years, which was expected to generate £1.1 billion for the local economy, create 10,000 new jobs and leverage £2.1 billion in private sector investment. As well as this £600m of extra money to invest in the North of Tyne area, the deal included:

- a) a new, directly elected Mayor for North of Tyne to give a strong and powerful voice to the area:
- b) projects to improve education, skills and help people get into work;
- c) local control of the £23 million per year budget for adult education;
- d) powers to develop land for economic growth and regeneration;
- e) projects that increase the growth and productivity of rural communities;
- f) better working with Government to boost trade and investment;
- g) projects to grow the digital sector and low-carbon economy;
- h) a joint committee to manage public transport across the North East; and
- i) a commitment to explore new opportunities for the North of Tyne in future.

The Board recognised that educational attainment made the first and biggest difference to the health of an individual and that work was the next most important determinant. The NTCA's shared ambition for an inclusive economy and its projects to improve education, skills and help people get into work were therefore expected to have an influence on the wider determinants of health and wellbeing of communities in North Tyneside.

The Board considered the role of the voluntary sector in helping to deliver the NTCA's educational projects and it recognised examples of innovation within the region which often went unnoticed. Members examined how the NTCA might help address workforce shortages within the health and social care sector and accessibility to health services by public transport.

The Chair thanked Paul Hanson for his presentation which had provided the Board with a clearer understanding of the Combined Authority's role and agenda.

HW52/03/19 Strategic Objective No. 6 – To Reduce Alcohol Misuse (Previous Minute HW08/06/17)

The Board received a report regarding the work of the North Tyneside Alcohol Strategic Partnership in delivering the Board's Strategic Objective No 6, "To reduce alcohol misuse". The partnership had been established in January 2016 to bring together a

range of partners to tackle identified priorities following the Board's Alcohol Action Day in September 2015 and to deliver the strategic objective. The partnership had been chaired by Councillor Alison Waggott-Fairley who would be standing down as a councillor and as the chair of the partnership in May 2019. Her support had been invaluable in raising the profile of the partnership, securing commitment and driving the agenda forward. Councillor Waggott Fairley paid tribute to the collaboration, innovation and harmony achieved by the group which had been recognised as an exemplar partnership by Balance.

The partnership had developed an action plan which was presented to the Board. Good progress had been made in delivering the plan and improved integration had been achieved which was key in terms of the complexity of the agenda, long term sustained action and improving outcomes. The report set out details of key achievements including the delivery of key health improvement campaigns, work with licensing and trading standards on illegal sales, procurement of a new specialist treatment service and development of a drug and alcohol protocol for schools.

The report set out progress made towards the following specific objectives set out in the Board's work plan:

- a) The Board had tasked the partnership to reduce the proportion of adults who drink more than 14 units of alcohol per week in North Tyneside to below the best rate in the region of 20.2%. It was estimated that currently 23.5% of adults drink over the Chief Medical Officer's low risk levels, which was lower than the England rate of 25.7% but was higher than the best rate in the North East region of 20.2%;
- b) The Board aimed to reduce alcohol related and specific admissions in adults to the same or less than the England rate. The rate of alcohol related admissions was significantly higher than the rate for England but the rate had not increased significantly since 2008; and
- c) The Board sought to reduce alcohol admissions for young people to same or less than England rate. In North Tyneside between 2014/15 to 2016/17 there had been a total of 98 hospital admission episodes for under 18s in North Tyneside where the primary diagnosis or any of the secondary diagnoses were wholly attributable to alcohol. This represented a 19.5% increase on the previous figure of 82. This rate was the third highest rate in the North East and was also higher than the England rates.

The partnership's work programme for the forthcoming year included the 'Bottled Up' Programme to identify and support children of alcohol dependant parents/carers, embedding new services and developing new pathways associated with the new specialist treatment service, re-launch the revised provision for children and young people with drug and alcohol problems and deliver the Alcohol free children initiative.

In considering the report the Board paid attention to the contribution made by the Police to the partnership, particularly in reducing domestic violence incidents involving alcohol, how a bid for capital funding would be used to relocate the specialist treatment service and how the misuse of alcohol by young people formed a significant element of the partnership's action plan. The Board welcomed the broad approach adopted by the partnership to alcohol misuse which recognised the links with other related health issues such as mental health.

The Chair of the Board proposed that Councillor Janice Mole be appointed as chair of the North Tyneside Alcohol Strategic Partnership with effect from May 2019.

Resolved that (1) the work undertaken by the North Tyneside Alcohol Strategic Partnership be noted;

- (2) the North Tyneside Alcohol Strategic Partnership's Action Plan for 2019/20 be approved; and
- (3) the appointment of Councillor Janet Mole as Chair of the North Tyneside Alcohol Strategic Partnership from May 2019 be approved.

HW53/03/19 Strategic Objective No. 2 - To Reduce the Use of Tobacco Across the Life Course (Previous Minute HW24/11/17)

The Board received a report regarding the work of the North Tyneside Smoke Free Alliance in delivering the Board's Strategic Objective No. 2 - To Reduce the Use of Tobacco Across the Life Course. The North Tyneside Smoke Free Alliance was a multiagency partnership which provided leadership of the wider system in North Tyneside in addressing the harm caused by tobacco. It had been chaired by Councillor Lesley Spillard, who was standing down as Councillor and Chair of the Alliance from May 2019. The Chair of the Board proposed that Councillor Trish Brady be appointed Chair of the Alliance with effect from May 2019.

The Board were presented with a briefing note setting out the progress made across North Tyneside and some of the important work undertaken. North Tyneside had made considerable progress over the last decade in reducing smoking rates from 27.5% (2006-08) to 16.5% (2017/18). North Tyneside tobacco control metrics were generally similar to the England average and better than the North East average. The only exception to this was the numbers of 15 year olds who report as regular smokers. North Tyneside had the lowest rates of women smoking at time of delivery (11.3%) in the North East and was the only area in the North East which was similar to the England average (10.7%). The borough's specialist stop smoking service performed better than the England average across the majority of indicators, it had good outcomes for service users and was cost effective. The Council's trading standards had received funding to implement an inspection regime to reduce the supply of tobacco products to young people.

The Board recognised the contributions made by all three NHS Foundation Trusts serving North Tyneside who were smoke free and had implemented the CQUIN for 'Preventing ill health by risky behaviours – tobacco'. There had been a significant amount of progress made in identifying smokers in hospital settings and referring them on to the specialist stop smoking service. A working group had started work on developing a local model for implementation in primary care settings to support the stop smoking pathways in the community.

The Board emphasised the importance of the Council's licensing and planning controls to regulate the sale of alcohol and tobacco.

The Smoke Free Alliance had identified the following priorities as the basis for its work programme in 2019/20:

- a) To test out and implement the North Tyneside treating tobacco dependency model;
- b) Ensure that all NHS trusts that serve the population of North Tyneside are smoke free and implementing the CQUIN for 'Preventing ill health by risky behaviours tobacco':
- c) Embed a pathway for pregnant smokers within the maternity system;
- d) Address underage sales and sales of illicit tobacco products in order to reduce uptake of smoking amongst young people; and
- e) Ensure that North Tyneside commission high quality specialist stop smoking services and that key performance indicators are reviewed on a quarterly basis.

Resolved that (1) the progress made to date in reducing the use of tobacco be noted and the North Tyneside Smoke Free Alliance be requested to continue to have oversight for this work:

- (2) the appointment of Councillor Trish Brady as Chair of the North Tyneside Smoke Free Alliance from May 2019 be approved;
- (3) the priorities for the North Tyneside Smoke Free Alliance Work Programme 2019/20 as set out above be approved; and
- (4) an annual progress report on the action and recommendations outlined in this report. be submitted to the Board.

HW54/03/19 Director of Public Health's Annual Report 2018

The Director of Public Health had presented her Annual Report 2018 to members of the Board at a joint event with members of the Council's Adult Social Care, Health & Wellbeing Sub-Committee held on 7 March 2019.

Resolved that the Director of Public Health's Annual Report 2018 be noted.

HW55/03/19 Commissioning Intentions 2019/20

Members of the Board had received and considered the Council's and the Clinical Commissioning Group's Commissioning Intentions for 2019/20 at a joint workshop style event with members of the Council's Adult Social Care, Health & Wellbeing Sub-Committee held on 7 March 2019. The event had been held in order to avoid duplication and to encourage dialogue between partners. Members had received a series of short presentations to consider the commissioning intentions related to early years, children and young people, working age adults, older and people. There had also been an opportunity to hear what residents were telling Healthwatch NorthTyneside.

The Board were advised it had the power to consider whether the commissioning intentions took proper account of the Joint Health & Wellbeing Strategy and Joint Strategic Needs Assessment and to give its opinion to the CCG and Council if it so wished.

Resolved that the North Tyneside Clinical Commissioning Group and North Tyneside Council's commissioning intentions be noted and no further action be taken.