

NORTHUMBERLAND COUNTY COUNCIL

HEALTH AND WELLBEING BOARD

At the meeting of the **Health and Wellbeing Board** held in Committee Room 1, County Hall, Morpeth on Thursday, 12 October 2017 at 10.00 a.m.

PRESENT

Councillor R.R. Dodd
(Chairman, in the Chair)

BOARD MEMBERS

Blair, A.	Jackson, P.A.
Brown, S.	Jones, V.
Dickinson, S.J.	Lally, D.
Evans, D.	Morgan, E.
Firth, R.	Patton, R. (substitute member)
Glennie, R.	Thompson, D.

OFFICERS IN ATTENDANCE

O'Brien, K.	Head of Commissioning, NHS Northumberland Clinical Commissioning Group (CCG)
English, A.	Strategic Safeguarding Adults Manager
Todd, A.	Democratic Services Officer

ALSO IN ATTENDANCE

Riley, C.	Northumbria Healthcare NHS Foundation Trust
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14. APOLOGIES FOR ABSENCE

Apologies for absence were received from V. Bainbridge, Councillor W. Daley, A. Johnson, P. Mead and G. O'Hare.

15. MINUTES

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on Thursday, 14 September 2017, as circulated, be confirmed and signed by the Chairman.

16. ITEMS FOR DISCUSSION

16.1 REPORT OF THE DIRECTOR OF ADULT AND COMMUNITY CARE SERVICES

Safeguarding Adults Annual Report - 2016/17

Anna English presented the report and provided an overview of work carried out under multi-agency arrangements for safeguarding adults in 2016-17. (Report filed with the signed minutes as Appendix A).

The report described the work during 2016/17 of the North Tyneside and Northumberland Safeguarding Adults Board (NSAB), and provided information about operational safeguarding activity during the year. The report described a range of improvements in safeguarding arrangements during the year. There were 768 Safeguarding Referrals during 2016/17, 15% lower than the previous year. These figures reflected a change in the way safeguarding concerns were now being recorded in Northumberland with a decision about whether to follow procedures being made prior to being inputted.

Members were advised that the Safeguarding Adults Annual Report had been presented to the relevant Scrutiny Committee.

Following on from the report a number of comments were raised, including:-

- It was confirmed that although the Northumberland and North Tyneside Safeguarding Adults Boards had merged into a single board last year they still operated their own governance arrangements with both reporting back to their respective council organisations.
- Following on from a query regarding third party assurance it was confirmed that the Safeguarding Adults Board was linked and inspected through the board's various different partner organisations quality assurance arrangements.
- Regarding the business priorities document it was confirmed that these were new priorities. The priorities set for 2016 had all been met. The Safeguarding Adults Board had established new targets for 2017 which was the reason why there were no updates or timescales detailed within the document. It was noted the document would be amended to show that the priorities described were for 2017 not 2016. It was suggested the plan, once populated, be brought back for the Health and Wellbeing Board to be kept up to date on the Adults Board priorities.
- Issues including modern day slavery, sexual exploitation and self-neglect were priorities the Safeguarding Adults Board had identified as areas of specific interest going forward.
- It was noted that overall awareness of safeguarding issues appeared to be improving.

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- Members discussed the difficulty in sharing intelligence between different authority areas when keeping in touch with those vulnerable people who moved frequently, particularly to other areas of the country. It was confirmed shared intelligence between departments and other authorities was effectively taking place but additional work was to take place to strengthen communication and the creation of the Multi-Agency Safeguarding Hub would further help share important information.
- Members expressed their support for the Multi-Agency Safeguarding Hub, agreeing that it was important that organisations shared intelligence on the dangers facing vulnerable young people.
- Members welcomed the multi-agency approach regarding those transitioning from children's to adults safeguarding arrangements and the strive to ensure this was as seamless as possible.

RESOLVED that the information be noted and an update on the Adults Safeguarding Adults Board Business priorities plan be considered at a future meeting of the Health and Wellbeing Board.

16.2 REPORT OF THE ACCOUNTABLE OFFICER, NORTHUMBERLAND CLINICAL COMMISSIONING GROUP

Northumberland's 0-25 Emotional Health And Wellbeing Strategy And Children's Pathways Update

Kate O'Brien updated the Health and Wellbeing Board on Northumberland's 0-25 Emotional Health and Wellbeing Strategy progress and the developmental work on the countywide multi-agency children's pathways. (Report filed with the signed minutes as Appendix B).

It was reported that all of the current objectives for 2015, 16 and 17 had been achieved or would be achieved by year end. Significant investment into the primary care mental health team (early intervention and prevention) was made in 2016 and this dovetailed with the redesign and provision of the 0-19 resilience strategy.

However, it was advised that there were particular issues in Northumberland (as there were nationally) regarding the recruitment and retention of a skilled workforce in both the early intervention and specialty services.

Following on from the report a number of comments were raised, including:-

- A query as to whether looked after children had now been awarded a higher priority when referred. It was reported that all looked after/vulnerable background children should now receive assessment and treatment prioritised to clinical need.
- Members welcomed the news that the 0-25 Emotional Health and Wellbeing Strategy currently remained on track for delivery in 2020 and that the priorities set for 2017 had been achieved or would be achieved by the end of the year.
- The THRIVE model would hopefully be a useful model moving away from the service led Tiered model to a new conceptualisation of services based on the needs of children and young people.

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- With regard to the proposal within the plan to create a local lead accountable commissioning body with single budget for children and young people's mental health. It was reported that this had been paused whilst the proposed Accountable Care Organisation (ACO) business case was being further considered. In response to a query regarding the difficulties faced by the service if an ACO was not created, it was confirmed that, whether an ACO was in place or not, challenges faced by the service would remain, including finance and budget implications.
- Concerns were raised regarding the low number of available NHS psychiatrists working in children and adolescent mental health services. It was becoming increasingly difficult to find recruits to fill vacant posts, leading to a shortfall that was affecting the delivery of patient care.
- A joined up approach was needed by organisations to promote Northumberland as a place not only to work in but also to live in to hopefully attract and keep skilled workers in the county.
- It was noted that Child and Adolescent Mental Health Service (CAMHS) had employed locums earlier on in the year to try to improve waiting times for referrals however this decision was against national guidance and was not a long term solution.
- There were concerns raised that the improvement in waiting times had been down to triage rather than treatment and support being provided. It was confirmed that the CCG was confident that waiting times were now being recorded from referral to treatment rather than to triage. It was advised that waiting lists were being monitored and the next progress update would be considered by the CGG in early 2018. Members were advised the CCG would also continue to provide 6 monthly updates on progress to the Health and Wellbeing Board.

RESOLVED that:-

- a. Progress already made (as Appendix 1 refers), be noted;
- b. The improvement in the early intervention and prevention pathways, be acknowledged, and
- c. The plans and proposals for redesigning the complex needs pathway be considered.

17. HEALTH AND WELLBEING BOARD - WORK PROGRAMME

Members considered the Health and Wellbeing Board Work Programme (a copy of the work programme has been filed with the signed minutes as Appendix C).

It was suggested the following issues be placed on the Work Programme for future meetings:-

- A report on the difficulties regarding recruitment and retainment of health professionals.
- Report on training and development career pathways for all public sector services.

It was suggested discussions take place first to establish which areas of the above issues members of the board would like to consider in more detail before reports were produced.

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RESOLVED that the Work Programme and items above be noted.

FOR INFORMATION

18. CONSULTATIONS

A member of the board raised the issue of the Coquetdale Dental Practice. As the local councillor of one of the dental practices in his area he had been notified that it would cease trading as from today without warning. There had been a consultation underway regarding the possible closure of the South Broomhill practice and the transfer of patients to the Rothbury practice. However, the councillor informed members that he had been advised that the South Broomhill practice would close as of today and also the Rothbury practice would also be closed. This would leave many of his residents without access to an NHS dentist.

It was suggested that on behalf of the board an urgent position regarding the above be conveyed to members.

RESOLVED that the information be noted and an email be sent to NHS England for an update on the situation.

CHAIRMAN _____

DATE _____

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