

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, 13 September 2018 at 10.00 a.m.

PRESENT

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

BOARD MEMBERS

Blackman, S.	Lothian, J. (substitute member)
Brown, S.	Morgan, E.R
Daley, W.	Mead, P.
Dickinson, S.	Riley, C. (substitute member)
Firth, R.	Thompson, D.
Jones, V.	Shovlin, D.
Reiter, G. (substitute member)	

ALSO IN ATTENDANCE

Barron, S.	Head of SEND Strategy
Malone, C.	Communications Team
Stonebridge, J.	Consultant in Public Health
Todd, A.	Democratic Services Officers
Young, S.	Strategic Head of Corporate Affairs, NHS Northumberland Clinical Commissioning Group

One member of the press was also in attendance.

13. APOLOGIES FOR ABSENCE

Apologies for absence were received from V. Bainbridge, C. Briggs, R. Glennie, Councillor P.A. Jackson, D. Lally, J. Mackey, C. McEvoy and G. O'Hare.

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14. MINUTES

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on Thursday, 12 July 2018, as circulated, be confirmed and signed by the Chairman.

15. DISCLOSURE OF MEMBERS' INTERESTS

Councillor V. Jones disclosed an interest in item 4.2 (SEND: A Progress Report on Local Area Developments since the Start of the Academic Year, September 2017) on the agenda as she had a personal interest in the subject.

16. ITEMS FOR DISCUSSION

16.1 Delivering a strategy for prevention and population healthcare across – Northumbria Healthcare NHS Foundation Trust

J. Stonebridge, Consultant in Public Health presented a paper and powerpoint presentation which outlined the strategy for developing, strengthening and scaling up at pace prevention and population healthcare work across Northumbria Healthcare NHS Foundation Trust. (Report and powerpoint slides filed with the signed minutes as Appendix A).

Members noted the key aims of the strategy which were to make a contribution to:-

- Improving health and wellbeing
- Preventing disease and minimising its consequences
- Prolonging valued life
- Reducing inequalities in health

Members were advised that the proposed actions to deliver the strategy were aligned to the priorities of the Health and Wellbeing Board and would offer opportunities for adopting a system wide approach.

Following on from the presentation and report a number of comments were made which included:-

- Members welcomed the continued roll out model for 'Making Every Contact Count' (MECC) and MECC plus across all contacts and pathways.
- The positive step of developing and implementing an action plan for realistic/more than medicine approaches.
- A concern that shopping retailers could capitalise on the poor harvest this year and increase the price of fresh healthy foods.
- The need to continue to utilise all forms of advertising, including social media, to help support people in making positive behaviour changes.
- The positive measures and outcomes already achieved, particularly with regard to smoking, but also the continued drive that more could still be achieved.

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- The need to work with all partners to improve wider socio-economic determinants of health and wellbeing.
- Recognition of the partnership work done by the community and voluntary sector in developing, aiding and supporting healthcare across the county.
- It was noted a workforce health needs assessment to inform the development of the forward action plan to foster healthy workplaces and ensure staff health and wellbeing was promoted, supported and valued was taking place. Work was also underway in schools to try to improve young peoples health and wellbeing. Visits to schools from health care professionals were also taking place to not only inform children of the work carried out but also how to be healthy and safe and promote the health service as a career opportunity.
- It was reported that children and young people were not only identified within this strategy but were also included within the Joint Health and Wellbeing Strategy as a priority with a particular focus on promoting health choices.
- Members were reassured that work was being carried out to help support and prevent obesity.
- Initiatives taking place within schools such as the daily mile challenge, healthy school accreditation and funding being used to bring in sports organisations all helped to prevent and promote health eating and physical activity.
- Confirmation that there was currently a Northumberland physical activity strategy being drafted by Northumberland County Council and partners.
- Comments regarding e-cigarettes and the evidence based studies carried out on the reduced harm compared to tobacco smoking.
- It was reported that the northeast had seen the largest reduction in smoking but it still remained the single biggest cause of preventable deaths in the county.

RESOLVED that the report and comments made be noted.

16.2 REPORT OF THE DIRECTOR OF CHILDREN'S SERVICES

SEND: A Progress Report on Local Area Developments since the Start of the Academic Year, September 2017

S. Barron, Head of SEND Strategy provided the Health and Wellbeing Board with an update on progress and developments in the local area for children and young people with Special Educational Needs and Disability (SEND) since the start of the academic year in September 2017. (Report filed with the signed minutes as Appendix B).

It was advised that the report reflected the activity of partners within children's and adult services who supported those aged 0-25 with SEND across education, health and social care services.

Members welcomed the work undertaken on education, health and care plans (EHCPs) and the positive target of 98% of plans being produced within the statutory timescale of 20 weeks.

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It was reported that officers continued to work closely with other authorities to share good practice. It was noted that good working relationships with colleagues across the health economy was essential to improve outcomes for children and young people. It was also reported that areas of challenge for the SEND team were transition, joint commissioning, the need to access services such as speech and occupational therapy quicker, and outcomes.

A query was raised regarding the adult learning provision and the differing services available depending on where you lived and how this could impact on those transitioning from education into adulthood. It was agreed to seek a response from the Adult Learning Team.

Members agreed that there needed to be good partnership work across all departments and commented on the valued work carried out in communities to deliver SEND provision, often in the rural parts of the county.

Members discussed the increase in demand for special schools and the need to promote the SEND offer in maintained schools. It was noted that there was a number of Northumberland SEND roadshows and consultation events taking place which would offer a range of information, advice and support that families children and young people with SEND may find useful.

RESOLVED that the report be received.

16.3 REPORT OF THE DIRECTOR OF PUBLIC HEALTH

Evaluating the Leadership Role of Health and Wellbeing Boards as Drivers of Health Improvement and Integrated Care across England – Summary of Research Report

E. Morgan, Director of Public Health presented the findings of the research by Durham University on evaluating the leadership role of Health and Wellbeing Boards (HWBs) as drivers of health improvement and integrated care across England; and considered the implications for the Northumberland HWB. (Report filed with the signed minutes as Appendix C).

Members agreed that the board had come along way since its beginnings as a shadow board. It was valued and remained the only place where the system could come together at this level as equal partners with some form of democratic accountability.

The report's view was that there were two scenarios for Health and Wellbeing Board's:

- They were revisited and reconstituted to assume responsibility as the accountable organisation for the delivery of place-based population health in an area; or

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- They become 'talking shops' as ICSs/ICPs effectively take over their role and function.

Members discussed both scenarios and felt the board should conduct future operations at a sensible level between the two. There was now the a clear focus on the Joint Health and Wellbeing Strategy and some linkages with the local System Transformation Board although it was recognised that this could be further improved. It was suggested that as the way ahead concerning Integrated Care Systems (ICS) and Integrated Care Partnerships (ICP) was better determined the Health and Wellbeing Board would be in a better position to enhance its profile in the local community and seek views on how best to take forward the delivery of place-based population health. It was also suggested that the roles, responsibility and how the board sits in relation to the Council's overview and scrutiny committee should also be revisited.

Members agreed that once the proposed roles of the ICS and ICP became clearer a development sessions should be convened to discuss the leadership role of the Health and Wellbeing Board in this environment.

RESOLVED that the conclusions of the research and comments made be noted.

17. CONSULTATIONS

Boots Pharmacy, Bedlington

Members were advised of a request that had been received regarding a merger of two Boots pharmacies within Bedlington in August. Due to timescales set a formal response had already been sent to NHS England although no definitive decision had been reached to date. Officers had visited and reviewed services and agreed that the merger would have no detrimental effect on the community. The pharmacy would move to the bigger site less than 75 yards down the road and could offer later opening hours if the merger was agreed. NHS England also agreed the merger would leave no gap in service.

RESOLVED to ratify the decision to approve the merger.

Replacement of Berwick Leisure Centre and proposed new Berwick Hospital

Members were advised of the recent meeting of the Northumberland County Council's Cabinet where it was agreed to approve the construction of a new leisure centre in Berwick as an integrated Council facility with services likely to incorporate learning disability day services.

However at the meeting there had been a lot of misinformation about the proposal of the proposed new Berwick Hospital. Most concerns raised at the meeting had been about the hospital proposals not the leisure centre.

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It was reported that Northumbria Healthcare NHS Foundation Trust had assured the Council that there would be no change to the current services provided, more outpatient provision and a wider range of diagnostic services.

Comments were made regarding the need to put the people of Berwick's minds at ease. Due to rumours circulating many members of the public had been led to believe there would be less services provided and they would need to travel to Northumbria Specialist Emergency Care Hospital in Cramlington for routine procedures such as blood tests.

It was considered that a robust communications drive was needed to reassure residents about the proposal for a new hospital. Members were informed that this was being progressed and a publication for the Berwick Advertiser had been drafted along with some social media articles.

RESOLVED that the information be noted.

18. HEALTH AND WELLBEING BOARD - WORK PROGRAMME

S. Young, Strategic Head of Corporate Affairs, NHS Northumberland Clinical Group presented the Health and Wellbeing Board Work Programme (a copy of the programme has been filed with the signed minutes as Appendix D).

RESOLVED that the Work Programme be noted.

CHAIRMAN _____

DATE _____

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