

## NORTHUMBERLAND COUNTY COUNCIL

### HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE

At a meeting of the **Health and Wellbeing Overview and Scrutiny Committee** held in Committee Room 1, County Hall, Morpeth on Tuesday, 5 June 2018 at 1.00pm

#### PRESENT

Councillor Rickerby, L.J.  
(Vice-chair, in the Chair)

#### COUNCILLORS

Cessford, T.  
Moore, R.  
Nisbet, K.

Simpson, E.  
Seymour, C.

#### OFFICERS

V. Bainbridge  
M. Bird  
S. Cain  
A. Curry  
C. Malone  
E. Morgan

Executive Director of Adult Care  
Senior Democratic Services Officer  
Service Development Manager  
Senior Manager - Commissioning  
Communications Business Partner  
Director of Public Health

#### ALSO IN ATTENDANCE

P. Fletcher  
R. Goode  
D. Nugent  
C. Riley  
S. Young

NHS England  
NHS England  
Healthwatch Northumberland  
Northumbria NHS Foundation Trust  
NHS Northumberland Clinical  
Commissioning Group

One member of the press was in attendance.

#### 15. APOLOGIES FOR ABSENCE

Apologies were received from Councillors Dungworth, Foster, Horncastle and Watson.

#### 16. MINUTES

**RESOLVED** that the meeting of the Health and Wellbeing OSC held on 15 May 2018, as circulated, be approved as a true record and signed by the Vice-chair, subject to a line in minute 6, page 3, third paragraph being amended to “‘however treatment **would** be offered at a later date if the level of oral hygiene improved’.

A member raised some further queries on the minutes regarding their reference to the terms of engagement process for the proposed Berwick integrated facility, the next steps for updates from the Recovery Partnership, and reasons for why no statistics were retained on how long patients were actually kept on methadone, to which officers replied and/or clarified their responses given at the last meeting.

The Vice-chair then clarified that the minutes were being presented for consideration by the committee as to whether they were a correct record and to be signed by her, and not for matters arising about previous discussions.

## **17. FORWARD PLAN OF KEY DECISIONS**

Members received the latest Forward Plan of key decisions (enclosed with the official minutes as Appendix A). It was noted that the one item within this committee's remit was included later on the agenda for pre-scrutiny.

**RESOLVED** that the information be noted.

## **REPORTS FOR CONSIDERATION BY SCRUTINY**

### **18. DENTAL SERVICES IN COQUETDALE**

With the Vice-chair's agreement, the order of the agenda was then revised.

Following the presentation given to the committee on 16 January 2018 and update given to the committee's last meeting on 15 May, NHS England officers attended to provide a presentation that included a full analysis of the patient engagement and to discuss next steps to inform the future provision of dental services in the Coquetdale area. (Summary paper from NHS England attached to the official minutes as Appendix C.)

A presentation was then provided by Pauline Fletcher and Ros Goode of NHS England (copy attached to the official minutes), of which the key details were:

- the patient engagement process, including drop in sessions in Hadston on 5 April and Rothbury on 9 April, letters and survey sent to 1,748 patients who previously attended Coquetdale Dental Practice prior to closure, and the online survey available to the wider public
- feedback from the Hadston and Rothbury drop in sessions
- details of the surveys, which included a total of 783 completed questionnaires, including 38 from the drop in sessions, 699 via post and 46 through the online survey
- considerations: results of patient engagement, population, patient demand and need, public transport, housing, financial viability of any new contract in a limited market, and results of the market engagement
- next steps: to produce a business case, with options/timescales, and the required NHS England sign off process
- it was hoped to produce and approve a business case by August 2018, with procurement for a new service hopefully beginning in September 2018, with the intention to have a service in place by June 2019.

In response to a member's query about how 'larger contracts' were defined and how to fit with patients' needs geographically and the impact on transport needs, members were advised that providers did not generally favour contracts sustaining one dentist, and a minimum of two surgeries was expected. The size and value of the contract depended on the level of activity and the number of sites the services were being delivered across; the more sites to deliver across could reduce the attractiveness of the contract to possible providers. The level of demand might not align with the size of contract that providers might expect. A number of options were being considered.

The Vice-chair acknowledged that a process had to be followed, but it was essential that NHS England kept members updated on progress, so it was agreed that a further update should be provided.

**RESOLVED** that

- (1) the information be noted; and
- (2) a further update be provided later in 2018.

## **19. REPORT OF THE DIRECTOR OF PUBLIC HEALTH**

### **Director of Public Health Annual Report 2017**

The purpose of the report was to present the Director of Public Health (DPH) Annual Report for 2017. (Copy attached to the official minutes as Appendix D.) It was recommended that the Health and Wellbeing Overview and Scrutiny Committee noted the content of the DPH Annual Report 2017 and accepted and supported the recommendations.

The report was introduced by Councillor Jones, following which a presentation was then provided by Director of Public Health Liz Morgan (copy of presentation attached to the official minutes), of which the key details were:

- details of the wider determinants of health in Northumberland
- the social determinants, rurality and measuring need
- the four key areas:
  - a) education and skills, and work being done to improve the picture
  - b) employment in Northumberland and how employment/unemployment affected health
  - c) housing, including healthy homes
  - d) transport, including how transport supported good health
- recommendations for taking a health in all policies approach; using the 'Making Every Contact Count' (MECC) approach; using the Better Health at Work Award; considering a multi-agency review of patient/service user transport services for health and social care; embed a 'more than medicine' approach with health providers, and using the NICE Quality Standard for preventing excess winter deaths to improve health and social care commissioning and provision.

A member questioned the reference to a health warning in the presentation about how some work was not good for people, to which members were advised that the intention concerned the impact of job insecurity and workplace stress. This section

of the presentation could however be reworded, to reflect how some work could be detrimental to people's health, as although employment was good, it was important to monitor people's health and wellbeing at work.

A member referred to impact of zero hour contracts on people's health as it could both make them insecure and prevent them from planning for their futures.

Members were advised that MECC could be measured through contractual means, whereby staff were trained in MECC principles, and the impact of brief interventions could also be monitored. Members welcomed how even brief interventions could benefit staff. This work underpinned the Joint Health and Wellbeing Strategy, and it would be productive to roll out MECC principles to all frontline public sector staff if possible.

Members praised the report, which they considered one of the best Public Health reports they had seen; it was detailed and incorporated both a retrospective look and a look forward to what should be in the Health and Wellbeing Strategy, which was reflected in the Corporate Plan. Members welcomed that the Health and Wellbeing Strategy would be presented for consideration by this committee in due course.

**RESOLVED** that

- (1) the content of the DPH Annual Report 2017 be noted; and
- (2) the recommendations be accepted and supported.

## **REPORT FOR CONSIDERATION BY CABINET**

### **20. REPORT OF THE EXECUTIVE DIRECTOR OF ADULT CARE**

#### **Extra Care and Supported Housing Strategy**

The report (attached to the official minutes as Appendix B) sought approval for a strategy for the development of housing schemes designed to enable people to live independently. The report was presented for pre-scrutiny before Cabinet considered the recommendations at its meeting on 14 June 2018.

The report was introduced by Cabinet member for Adult Wellbeing and Public Health Councillor Veronica Jones. Councillor John Riddle, Cabinet member for Planning, Housing and Resilience was also present. Following the introduction of the report, a detailed presentation (copy of presentation attached to the official minutes) was then jointly provided by Alan Curry, Senior Manager - Commissioning, and Sandra Cain, Service Development Manager, of which the key details included:

- the reasons for the strategy and the objectives
- who the strategy covered
- Northumberland's definition of supported housing
- demand and supply for older people and younger adults
- principles for developing supported housing
- the delivery of the strategy through a range of delivery methods, the areas for the initial focus for older people
- details of any gaps in provision for younger adults in the north of the county.

Discussion followed of which the key points from members were:

- support was expressed for sheltered schemes, which could provide both privacy and communal areas for their residents
- It was acknowledged some sheltered schemes are not to modern standards
- support was expressed for two bedroom properties, especially bungalows, with reference to the successful Haltwhistle scheme. It was acknowledged that extra care facilities included guest bedrooms, but that a survey had found that people preferred two bedroom properties, which could provide more space and a room for visitors or carers to stay in
- praise was expressed for the arrangements at The Manors, West Wylam, which comprised extra care facilities with sheltered housing around it
- the standards of new supported housing had much improved in recent years
- details were noted about how figures about demand and supply for supported housing had been attained through research
- the proposal was warmly welcomed and considered overdue, especially in light of members' awareness of local housing needs
- it would be helpful if social housing providers in some areas could be asked about their plans to update their current housing stock
- there was an opportunity for Northumberland to develop a rural exemplar which other areas might wish to replicate
- the Haltwhistle scheme was welcomed, particularly for its partnership work and excellent standard of accommodation.

In response to a question, a member was advised of the following key statistics for Berwick: two in five people would count as older by 2020; the proportion of people with disabilities was high; 29% of people in social housing were over 55, 106 social housing properties were advertised between February 2016 - February 2017, of which only seven were for sheltered accommodation, and two were for bungalows, with each bungalow receiving 37 bids.

In response to further questions, members also welcomed the strategy being undertaken and how it linked with other related housing and social care initiatives. Members agreed that they fully supported the proposals and it was thus:

**RESOLVED** that Cabinet be advised that this committee support the recommendations as outlined in the report.

## **21. REPORT OF THE SENIOR DEMOCRATIC SERVICES OFFICER**

### **Health and Wellbeing OSC Work Programme**

Members considered the work programme for the Health and Wellbeing OSC. (Work programme enclosed with the official minutes as Appendix E.)

Members were advised that the next meeting would include an update from Healthwatch, and two annual updates: the joint children's services and adult services complaints report and the welfare rights report. The requested updates on dental services in Coquetdale and substance misuse services would be added into the work programme.

Members' attention was also brought to an event on 28 June in Durham: 'prevention focused leadership workshop for elected members'. Committee members were invited to attend and should confirm their interest via Democratic Services. Details of the programme for the day were circulated at the meeting.

**RESOLVED** that the work programme be noted.

## **22. INFORMATION REPORTS**

### **Policy Digest**

Members were advised of the availability of the latest policy briefings, government announcements and ministerial speeches which might be of interest to members, which was available on the Council's website.

**RESOLVED** that the information be noted.

**CHAIR** \_\_\_\_\_

**DATE** \_\_\_\_\_