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 September 2019 at 10.00 a.m.

PRESENT

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

BOARD MEMBERS

Brown, S. McEvoy-Carr, C. Daley, W. Morgan, E.

Docking, T. (substitute member) Riley, C. (substitute member)

Firth, R. Syers, G. Jones, V. Thompson, D.

Lothian, J.

ALSO IN ATTENDANCE

Senior Democratic Services Bennett, L.M.

Officer

O'Neil, S. Northumberland VCS Assembly **Democratic Services Officer** Todd, A. Deputy Medical Director, Warrington, J. Northumberland CCG.

One member of the press was also in attendance.

14. APOLOGIES FOR ABSENCE

Apologies for absence were received from N. Bradley, C. Briggs, Councillor S. Dickinson, Councillor C.R. Homer, Councillor P.A. Jackson, J. Mackey, P. Mead and C. Wardlaw.

15. MINUTES

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on Thursday, 8 August 2019, as circulated, be confirmed and signed by the Chairman.

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16. DISCLOSURE OF MEMBERS' INTERESTS

J. Lothian disclosure a personal interest in agenda item 4.2 (The role of the Voluntary Community and Social Enterprise (VCSE) Sector in supporting delivery of the Health and Wellbeing Strategy and wider agenda) as she was the Vice Chair of Hospice Care North Northumberland.

17. ITEMS FOR DISCUSSION

17.1 REPORT OF THE DIRECTOR OF PUBLIC HEALTH

Director of Public Health Annual Report 2018 - Mental Wealth

The purpose of the report was to present the Director of Public Health (DPH) Annual Report for 2018 which this year, which focused on mental health and wellbeing across the life course. (Report filed with the signed minutes as Appendix C).

The report was introduced by Councillor V. Jones, Cabinet Member for Adult Services and Wellbeing, who congratulated the Director of Public Health and her team for another excellent, very detailed report. It contained important information about mental health, including statistics about the contribution of poor mental health to early deaths and information about the impact of mental health during childhood.

E. Morgan, Director of Public Health then provided further details of the report which proposed a whole system approach to mental health, promoting it in the workplace, and signing up to the Prevention Concordat for Better Mental Health with Councillor Cessford being the councillor champion for mental health.

This year's report focused on mental health and wellbeing. It explained the link between psychology and biology and the pathway that links stress in childhood to poorer health and wellbeing outcomes in the longer term. It was advised that it takes a life course approach to mental health, exploring some of the protective and risk factors at each stage; where some of the inequalities lie; and what interventions were and could be put in place to protect and promote good mental health and wellbeing. The report concluded with a small number of recommendations on how the Northumberland system could protect and promote mental health and wellbeing.

Discussion took place regarding the work carried out in schools and in particular within the Seaton Valley Federation and at St Bede's R.C. Primary School and how by working together and supporting each other improvements in mental wealth could be achieved. It was advised that discussions were taking place to consider if a universal mental health offer could be rolled out to all Northumberland schools. A pilot had already taking place in Wales and it was hoped that by working with Northumbria Healthcare NHS Foundation Trust this could further help collaboration with schools and help raise awareness of a whole system-school approach to mental wealth.

It was noted that in May 2020 celebrations would be taking place to mark the 75th anniversaries of both VE and VJ Day. It was suggested this would be a good

opportunity to bring together older and younger people to share experiences and bring together communities.

It was reported that the next steps in becoming a signatory to the Prevention Concordat would be to submit an action plan to Public Health England for approval. It was stated that it would be timely if Northumberland could be signed up to the Prevention Concordat in time for the Every Mind Matters campaign starting at the beginning of October.

It was reported that the Sustainability and Transformation Partnership (STP) would soon be holding a Development Session. It was suggested that the recommendations detailed within the report be discussed at the session and consideration be given as to how to include these within the STP's work streams including the need for more resources and system support for children and families.

Members agreed that it was an excellent report and commended it for being uncomplicated to read.

RESOLVED that the:-

- (a) content of the DPH Annual Report 2018 be noted;
- (b) recommendations as detailed within the report be considered and accepted, and
- (c) Health and Wellbeing Board commits to the Prevention Concordat for Better Mental Health.

17.2 REPORT OF SIOBHAN BROWN ON BEHALF OF NHS NORTHUMBERLAND CLINICAL COMMISSIONING GROUP

NHS Long Term Plan / North East North Cumbria Integrated Care System Update

S. Brown, Chief Operating Officer gave an overview of the national NHS Long Term Plan (LTP) Implementation Framework and the process to develop the North East North Cumbria (NENC) Integrated Care System (ICS) 5 year strategic plan. (Report and a copy of the powerpoint presentation has been filed with the signed minutes as Appendix A).

Members were advised that following publication of the LTP implementation framework in June, the CCG had been working with partners across Northumberland to firstly develop plans for delivery of the LTP commitments at place level and then secondly reviewing these with partners across the ICP (Integrated Care Partnership) North. It was noted that the ICP North was to be the largest of its kind in the county.

It was reported that six key work streams had been established and partners had been contributing to the development of the vision and 'at scale' objectives which would in turn be supported by delivery at ICP and place level.

It was stated that the deadline for submission of the first draft of the ICS 5 year Strategic Plan, including System Narrative and System Delivery Plan, was 27 September 2019, with the final plan to be agreed by 15 November 2019. It was reported that these plans would be shared with the Health and Wellbeing Board when

available. To keep all informed of these changes work was to take place on a wider and inclusive communications and engagement drive.

With regard to climate change it was reported that the Local Authority and NHS each had a huge workforce and could contribute greatly. Work to enhance and make more environmentally friendly fixed assets and to help support staff to make better choices to hep the environment was being considered. Members were advised that the NHS and NTW were in talks with fleet management to also reduce their carbon footprint.

With regard to communications and engagement it was reported that further work was to take place to continue to advise all on the NHS Long Term Plan including more visible and locally led engagement. It was greed that the information provided to members of the public had to be easy to understand, relatable and there needed to be a focus on what systems could deliver with tangible outputs.

RESOLVED that the information provided on the NHS LTP Implementation Framework and the process for development of the NENC ICS 5 year strategic plan, be considered and noted.

17.3 REPORT OF NORTHUMBERLAND VCS ASSEMBLY

The role of the Voluntary Community and Social Enterprise (VCSE) Sector in supporting delivery of the Health and Wellbeing Strategy and wider agenda

R. Firth and S. O'Neil presented the first report to the Health and Wellbeing Board from the VCSE (report filed with the signed minutes as Appendix B). The report identified the opportunities and challenges facing the VCSE in working with the statutory sector and other partners/stakeholders to deliver the Health and Wellbeing Strategy and the Health and Wellbeing agenda more widely. The report also detailed the valuable contribution the VCSE make in working in partnership with public services to support the health and wellbeing of our communities.

It was noted that the VCSE welcomed the opportunity to engage with and help to shape social prescribing in ways that worked for the people supported within the sector. The commitment of NHS England to social prescribing represented a positive shift toward empowering those with social, emotional or practical needs to find solutions to improve their own health and wellbeing, often through accessing VCSE services. It was advised that to enable statutory organisations to be confident about working with local providers Northumberland Council for Voluntary Action (NCVA) had put in place a quality assurance health check for organisations. This had been adapted to ensure that it was in line with national guidance from the Social Prescribing Network. It was suggested that there needed to be recognition that some of the voluntary organisations were often small community groups and may feel overwhelmed by some of the responsibility and paperwork needed if they were to be used for social prescribing. There needed to be a balance between utilising services for social prescribing and continuing to advise of local community groups to strengthen the community offer available.

Members were made aware of the importance of VCSE organisations working in partnership with one another increasing cooperation and collaboration to meet community needs. It was stated that this was essential if the sector was going to be

able to bid for contracts. Often voluntary groups were only able to seek short term funding which made it very difficult to plan, recruit and embed services. It would also assist in avoiding duplication and competition between organisations.

Members discussed the Northumberland VCS Assembly and how this could link up with some of the key stakeholders to help inform all of the VCSE and help support, fund and work jointly on projects. The Northumbria Health Care NHS Foundation Trust stated that they would like to work in greater partnership with the VCSE and its Assembly and may be able to offer their assistance with regard to funding options and voluntary groups.

Members welcomed the comprehensive report and thanked the work of all those involved in the VCSE sector in Northumberland.

RESOLVED that the:-

- (a) board recognises the value and support the VCSE can provide to the public sector to improve the health and well being of people across the county;
- (b) VCSE to continue as an equal partner in strategic decision making and in the coproduction of health and care services, and
- (c) VCSE to be engaged at the beginning stage of the decision making process, in order to ensure that the maximum potential of the sector is actualised.

17.4 REPORT OF THE EXECUTIVE DIRECTOR OF ADULT SOCIAL CARE AND CHILDREN'S SERVICES

Ofsted Joint Targeted Area Inspection 17-21 June

C. McEvoy-Carr, Executive Director of Adult Social Care and Children's Services provided an overview of the Joint Targeted Area Inspection in relation to child sexual exploitation and criminal exploitation that took place in June 2019. (Report filed with the signed minutes as Appendix D).

Members were advised that work in relation to the action plan had commenced on a partnership basis and a number of areas for development were already underway in terms of:-

- A development of an intelligence profile
- Awareness raising and training pathway
- Review and refresh of the multi-agency referral document

It was noted that the action plan was to be submitted to Ofsted on 11 November 2019 but it was envisaged that all actions identified would be underway before this date.

In response to a comment raised on the number of exclusions it was confirmed that a Scrutiny Task and Finish Group had been tasked with investigating the causes of the substantial increases in both fixed and permanent exclusions and asked to develop recommendations on working with partners, targeting resources and developing strategies to significantly improve the current situation. Following on from this piece of work there had been a reduction in the number of both fixed and permanent exclusions but dialogue would continue with schools to continue the trend.

RESOLVED that the information and the proposed plans detailed within the report be noted.

17.5 REPORT OF THE EXECUTIVE DIRECTOR OF ADULT SOCIAL CARE AND CHILDREN'S SERVICES

New Adult and Children's Safeguarding Arrangements

C. McEvoy-Carr, Executive Director of Adult Social Care and Children's Services provided an update to the Health and Wellbeing Board in respect of the new safeguarding arrangements which would replace the current Local Safeguarding Children Board as outlined in Working Together 2018 and to be provided with an overview of the Early Adopter work across Tyne and Wear. (Report filed with the signed minutes as Appendix E).

RESOLVED that the information and the proposed plans detailed within the report be noted.

17.6 REPORT OF NORTHUMBERLAND HEALTHWATCH

Healthwatch Annual Report

D. Thompson, Chair of Northumberland Healthwatch presented their Annual Report to the Health and Wellbeing Board (report filed with the signed minutes as Appendix F).

Members were advised that the sole purpose of Healthwatch was to understand the needs, experiences and concerns of people who use health and social care services and to ensure these experiences and views were heard by those in authority, also that those authorities provide a proper, reasoned and transparent response to the issues raised.

It was noted that a major focus of the work this year had been in North Northumberland due to the proposed changes in the way that health services were to be delivered in the area particularly in Berwick and Rothbury.

It was reported that there was a general acceptance that the health and social care provision within the county was of a high standard. However, within the annual survey respondents were asked to rank a list of priorities for Healthwatch Northumberland in 2019/20. The top three identified were mental health, GP services and access to services.

Members were advised that the annual conference was scheduled to take place on Wednesday 16 October 2019 in Blyth. It was for everyone to join in the community conversation, share experiences of care services with those who provide them and find out what was available locally. During the conference there would be speakers and workshops include social prescribing, health checks, substance misuse, patient involvement and GP services, dementia, and singing.

It was reported that following an open recruitment process in autumn 2018, the Healthwatch Northumberland Board welcomed three new members who between

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them brought experience and knowledge of mental health services, young people, volunteering and primary care in North Northumberland. It was noted that Healthwatch could utilise the Council's Youth Cabinet, Northumberland Virtual School, Children and Young People Group representatives as part of Health services and the Children and Young People Engagement Partnership to help engage more with young people to find out their views on services.

Members welcomed the comprehensive report and thanked the work of Northumberland Healthwatch.

RESOLVED that the annual report be received.

17.7 REPORT OF THE EXECUTIVE DIRECTOR OF ADULT SOCIAL CARE AND CHILDREN'S SERVICES

Health and Wellbeing Board Development – Terms of Reference for agreed Task and Finish Groups

The report presented the draft Terms of Reference of the three Task and Finish Groups agreed at the previous meeting to review and develop areas of the Board's activity. (Report filed with the signed minutes as Appendix G).

The membership of each Task and Finish Group was discussed and it was agreed that the following elected member representation:-

- Councillor W. Daley to be included in the Profile and Communications and Engagement of the Health and Wellbeing Board Task and Finish Group.
- Councillor C.R. Homer to be included within the Impact of the Health and Wellbeing Board Task and Finish Group.
- Councillor S. Dickinson to be included in the Terms of Reference and governance of the Northumberland Health and Wellbeing Board Task and Finish Group.

It was also suggested that J. Warrington, Deputy Medical Director, replace G. Syers within the membership of the Terms of Reference and governance of the Northumberland Health and Wellbeing Board Task and Finish Group.

RESOLVED that:-

- (a) the terms of reference for the three Task and Finish Groups be approved;
- (b) the proposed elected member representation and lead on each be agreed, and
- (c) the reporting timeline be agreed.

18. HEALTH AND WELLBEING BOARD - FORWARD PLAN

E. Morgan, Director of Public Health presented the Health and Wellbeing Board Forward Plan (a copy of which has been filed with the signed minutes as Appendix C

It was suggested the following items be included within the Forward Plan:-

• Draft Prevention Green Plan (October meeting)

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- Winter Planning (November meeting)
- Brexit Planning

RESOLVED that the Work Programme and comments made above be noted.

CHAIF	RMAN_		
DATE			