

## NORTHUMBERLAND COUNTY COUNCIL

### HEALTH AND WELL-BEING BOARD

At the meeting of the **Health and Well-being Board** held at Council Chamber, County Hall, Mopreth on Thursday, 10 August 2023 at 10.00 am.

#### PRESENT

P Ezhilchelvan (Chair) (in the Chair)

#### MEMBERS

G Binning  
V Jones  
V McFarlane-Reid  
W Pattison  
E Simpson  
P Standfield  
J Watson  
R Wigham

A Conway  
P Lee  
R Murfin  
S Rennison  
H Snowdon  
G Syers  
L Whittaker

#### OFFICERS

A Bell  
L M Bennett  
A Everden  
K Lounten  
J Maybury  
D Nugent  
L Robertshaw

NENC ICB Northumberland  
Senior Democratic Services Officer  
Public Health Team Pharmacy Advisor  
Service Manager, Registrars  
Public Health  
Healthwatch Northumberland  
Public Health

#### 13 APOLOGIES FOR ABSENCE

Apologies for absence were received from A. Blair, N. Bradley, A. Icceton, S. McCartney, R. Mitcheson, G. O'Neill, G. Reiter, C. Wardlaw, and Councillor Renner-Thompson.

#### 14 MINUTES

**RESOLVED** that the minutes of the meeting of the Health and Wellbeing Board held on 8 June 2023, as circulated, be confirmed as a true record and signed by the Chair.

#### 15 ANNUAL REPORT OF SENIOR CORONER

Members received an update on the Coroner Service and the Annual Report of the Senior Coroner. The report was presented by Karen Lounten, Interim Head of Service.

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Karen Lounten raised the following key issues from the report:-

- **Background**
  - The Coroner was an independent judicial officer appointed by, but not employed, by the County Council. This enabled total impartiality.
  - Four assistant Coroners had been appointed on a sessional basis to provide cover for holidays etc. and provide resilience in the event of a major incident.
  - Excellent accommodation facilities had been provided in County Hall by Northumberland County Council enabling a high level of service to be offered to bereaved families and staff. The Chief Coroner had been very impressed by the facilities available during a recent visit.
  - Four investigative staff were employed by the Police and worked in County Hall.
  - The high level of service was due to a team effort between the Coroner's staff, the Police and Northumberland County Council.
- **Role and Purpose of the Coroner**
  - The role of the Coroner was to investigate and possibly hold an inquest into violent or unnatural deaths, where the cause was unknown or a death which happened in custody or state detention.
  - The purpose of an inquest was not to determine civil or criminal liability but who determine who the person was, where, when and how they died.
  - It was good practice to produce an Annual Report outlining the work, the challenges and achievements.
  - In 2022, 2,023 cases were referred to the Coroner although many cases were discontinued when the death was found to be from natural causes. 270 open inquests had been held and 732 post mortems.
  - Cases took approximately 26.5 weeks to process. There were no cases which had not been concluded within 12 months.
  - There had been a slight increase in the number of deaths since 2019.
  - NSECH at Cramlington received seriously unwell people from all over the region which had led to increased demand for the service as it was the place of death rather than the home address of the deceased which determined where the death was registered.
- **Trends and Patterns**
  - There had been an increase in the number of suicide conclusions. One explanation could be the consequence of a change in the standard of proof from 'beyond reasonable doubt' to 'on the balance of probability'.
  - It was not clear to what extent the COVID 19 pandemic may have affected these figures. The service had operated as near to normally as possible during the Pandemic aided by the excellent facilities and ability to use technology to assist with attendance.
- **Next Steps**
  - There would be dialogue with the Police with a view to increasing resources. Northumberland had the second highest demand in the region in terms of cases but fewer officers.
  - Discussions were ongoing with NHS colleagues regarding non-invasive post mortem facilities and body storage facilities.
  - The provision of a Medical Examiner system was long awaited and although may reduce the case load, the cases referred to the Coroner

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may become more complex.

- The Senior Coroner had extended his thanks to Northumberland County Council, NHS and Police colleagues for their contribution towards providing an excellent service for Northumberland.

The following comments were made:-

- The suicide rate had spiked in 2021 and then reduced. It was noted that the number of suicides was small, although the rate was high and the small numbers could skew rates so caution was needed when interpreting these data.
- Where emergency hospitals such as NSECH operated across borders, it would be useful if the figures reflected the reduction in cases elsewhere.
- The inequalities theme was not referred to at all in the report. Karen Lounten agreed to investigate and report back.
- Data regarding demographic changes could also be added to future reports

**RESOLVED** that the presentation be received.

## 16 **HEALTHWATCH ANNUAL REPORT 2022/23**

Members received the Healthwatch Annual Report presented by Derry Nugent.

The following key points were raised:-

- **Major work in the last year included**
  - Autistic Young People and Mental Health Services
  - Work to improve experience of families and young people accessing mental health services. The report had been welcomed by CNTW and ICB. Plans and strategies would be developed and Healthwatch would follow progress to ensure they were followed through.
  - Engagement with young people - A survey had been developed with assistance from young people and received a fantastic response. Ponteland High School had built this into its lesson plans including young people's voices in a range of areas from democracy to health care and raised the idea of being a citizen.
  - Exploration of A&E attendances by 0-5 year olds living in Blyth. It had been found that in many cases parents took their children to A&E because they were advised to by other respected agencies.
- **What had Healthwatch been told?**
  - **Access to GPs** – this was the most common problem with concerns about telephoning, available appointments and continuity of care. There were increasing numbers of 'Did Not Attends'. Working with GPs and patients to identify the cause.
  - **Pharmacies** - There was concern about pharmacies reducing their opening hours. Greater emphasis on communicating changes to patients was required.
  - **Dentistry** – Concerns about access to dentistry could only be addressed at a national level. It was currently not possible to direct anyone to a Northumberland practice which was accepting NHS patients. Work was ongoing with Healthwatch in other areas to gather further information.

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- **Annual Survey** which this year had been changed to an Annual Conversation. It had been carried out working with community sector partners and so heard from groups which would not normally engage with Healthwatch.
- **Priorities for Next Year**
- Social Care and Health – in Social Care, how the service user voice and involvement was enabled and included
  - Maintaining communications during lockdown conditions in care homes – looking into what worked and what did not.
  - Health – Primary Care, GPs, Pharmacy, Dentistry and Audiology.
  - Northumberland Residents’ experiences of using Newcastle Hospitals – particularly experience of travelling from more remote areas.
  - Health Visiting Services – gathering information by talking to parents and Harrogate District NHS Foundation Trust.
- Other themes would include access to services by those in isolating jobs with additional factors restricting access to services, such as the fishing and agriculture industries.
- Improvement and Feedback processes within services. People were often uncertain about how to give feedback. Websites were often not updated regularly with appropriate information.
- The Healthwatch AGM would be on the afternoon of 18 October 2023, and would be a community listening event this year. Strategic partners were invited to attend to listen to the voices and experiences of invited service users.

The following comments were made:-

- With regard to access to Primary Care, it may be useful for Healthwatch to have discussions with the Local Medical Council.
- Armed Forces families could have difficulties registering with a dentist, this issue should be flagged up as strongly as possible.
- Patients awaiting treatment for cancer may experience delays in their treatment if they could not get dental treatment and may not be able to afford private treatment.
- If S.106 funding was generated for additional GPs or dentists capacity as part of a new housing development there was an issue with local surgeries not wanting to take it up.
- Inequality played a role in demand at a local level and it was important to look at what could be fixed or affected at a local level.

**RESOLVED** that the report be received.

## 17 **BETTER CARE FUND PLAN 2023-25**

Members were requested to sign off the Northumberland Better Care Fund (BFC) Plan 2023-25 and to make any proposals about the sign-off process for future BCF plans. The report was presented by Alan Bell, North East and North Cumbria ICB.

The Board was informed that guidance notes for the current year had been received late and had a tight deadline for the submission of the BCF plan. The aim of the plan was to help people stay well, safe and independent in their homes

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and to encourage integration between health and care services. The main element of the plan was the Discharge Fund which aimed to ensure the successful discharge of patients from hospital into care services within the community. It was hoped that the BCF would be signed off by NHS England in October 2023.

**RESOLVED** that

- (1) the BCF Plan annexed to the report as Annex A (narrative plan) and Annex B (spreadsheet plan) be signed off by the Board.
- (2) the Council's statutory Director of Adult Social Services (currently the Executive Director for Adults, Ageing and Wellbeing) be delegated the authority to sign off any future BCF planning submissions, if the nationally-set timetable made it impracticable for the Board to do so before the submission date, provided that a draft of the submission had been circulated to all Board members for comment, and no issues had been raised which required fuller discussion at a Board meeting before sign-off.

## 18 **NOTIFICATION OF CLOSURE OF 100 HOUR PHARMACY IN CRAMLINGTON**

Members received a report updating them on the closure of a 100-hour pharmacy in Cramlington.

Ann Everden, Public Health Pharmacy Adviser, informed the Board that the Cramlington pharmacy had closed before the end of the notice period. The Pharmaceutical Needs Assessment (PNA), approved in September 2022, was now out of date. This could be addressed by way of a supplementary statement referring to a gap in the pharmacy service between 6 and 10 pm Monday-Saturday and Sundays 10 am – 4 pm.

There was also an opportunity to update the PNA to reflect the changes in ownership. A report would be brought back to the November/December meeting outlining the pharmacy situation in Blyth, Prudhoe and Ashington. Ann Everden reported that she had been seconded onto an ICB working group looking at the ICB's processes for communication of these issues.

**RESOLVED** that

- (1) A supplementary statement to the Pharmaceutical Needs Assessment 2022 be agreed declaring that there was a gap in essential, advanced, additional and locally commissioned pharmaceutical services in Cramlington between the hours of 6 pm and 10 pm Monday to Saturday and on Sundays between 10 am and 4 pm.
- (2) a second supplementary statement was required to acknowledge the change in ownership of all Lloyds pharmacies in Northumberland.
- (3) an update report be submitted to the November/December meeting of the Board.

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19 **ICB DRAFT JOINT FORWARD PLAN**

Members received a copy of the Integrated Care Board Draft Joint Forward Plan.

Graham Syers reported that this was a statutory document that the ICB was required to produce and submit to NHS England by late September 2023. The plan sets out a strategic overview of key priorities and objectives for the medium term, its collaborative work with other bodies and strategic ways of working.

Any comments were welcomed and should be directed to Graham Syers who would forward them on.

**RESOLVED** that the report be noted.

20 **HEALTH AND WELLBEING BOARD – FORWARD PLAN**

Members noted details of forthcoming agenda items at future meetings.

An update report on the Safe Haven at Ashington was requested for a future meeting.

21 **DATE OF NEXT MEETING**

The next meeting will be held on Thursday, 14 September 2023, at 10.00 am in County Hall, Morpeth.

**CHAIR**.....

**DATE**.....

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