



# Northumberland County Council

**Your ref:**

**Our ref:**

**Enquiries to:** Lesley Bennett

**Email:** Lesley.Bennett@northumberland.gov.uk

**Tel direct:** 01670 622613

**Date:** 5 December 2023

Dear Sir or Madam,

Your attendance is requested at a meeting of the **HEALTH AND WELL-BEING BOARD** to be held in **COUNCIL CHAMBER, COUNTY HALL, MOPRETH** on **THURSDAY, 14 DECEMBER 2023** at **10.00 AM**.

Yours faithfully

Dr. Helen Paterson  
Chief Executive

**To Health and Well-being Board members as follows:-**

**G Binning, A Blair, N Bradley, C Briggs, A Conway, P Ezhilchelvan (Chair), V Jones, S McCartney, V McFarlane-Reid, R Mitcheson, R Murfin, R Nightingale, G O'Neill, W Pattison, G Reiter, G Renner-Thompson, S Rennison, G Sanderson, E Simpson, H Snowdon, P Standfield, G Syers (Vice-Chair), C Wardlaw and J Watson**



**Dr. Helen Paterson, Chief Executive**  
County Hall, Morpeth, Northumberland, NE61 2EF  
T: 0345 600 6400  
[www.northumberland.gov.uk](http://www.northumberland.gov.uk)



# AGENDA

## PART I

It is expected that the matters included in this part of the agenda will be dealt with in public.

### 1. MINUTES

(Pages 1  
- 8)

Minutes of the meeting of the Health and Wellbeing Board held on Thursday, 9 November 2023 as circulated, to be confirmed as a true record and signed by the Chair.

### 2. APOLOGIES FOR ABSENCE

### 3. DISCLOSURES OF INTEREST

Unless already entered in the Council's Register of Members' interests, members are required where a matter arises at a meeting;

- a. Which directly relates to Disclosable Pecuniary Interest ('DPI') as set out in Appendix B, Table 1 of the Code of Conduct, to disclose the interest, not participate in any discussion or vote and not to remain in room. Where members have a DPI or if the matter concerns an executive function and is being considered by a Cabinet Member with a DPI they must notify the Monitoring Officer and arrange for somebody else to deal with the matter.
- b. Which directly relates to the financial interest or well being of a Other Registrable Interest as set out in Appendix B, Table 2 of the Code of Conduct to disclose the interest and only speak on the matter if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain the room.
- c. Which directly relates to their financial interest or well-being (and is not DPI) or the financial well being of a relative or close associate, to declare the interest and members may only speak on the matter if members of the public are also allowed to speak. Otherwise, the member must not take part in discussion or vote on the matter and must leave the room.
- d. Which affects the financial well-being of the member, a relative or close associate or a body included under the Other Registrable Interests column in Table 2, to disclose the interest and apply the test set out at paragraph 9 of Appendix B before deciding whether they may remain in the meeting.
- e. Where Members have or a Cabinet Member has an Other Registerable Interest or Non Registerable Interest in a matter being

considered in exercise of their executive function, they must notify the Monitoring Officer and arrange for somebody else to deal with it.

NB Any member needing clarification must contact [monitoringofficer@northumberland.gov.uk](mailto:monitoringofficer@northumberland.gov.uk). Members are referred to the Code of Conduct which contains the matters above in full. Please refer to the guidance on disclosures at the rear of this agenda letter

**4. UPDATE ON AND REFRESH OF THE JOINT HEALTH & WELLBEING STRATEGY - TACKLING THE WIDER DETERMINANTS OF HEALTH** (Pages 9 - 32)

- To update the Health and Wellbeing Board (HWB) on achievements made against the theme Tackling the Wider Determinants of Health in the Northumberland Joint Health and Wellbeing Strategy (JHWS) 2018-2028 and
- To review and agree priorities and actions for this theme and describe proposed amendments for the remaining period of the strategy from 2023 to 2028.
- To review indicators used to measure progress against this Joint Health and Wellbeing Strategy theme
- Comment on the national indicators aligned to this theme and other measures for understanding the qualitative impact of actions within this Joint Health and Wellbeing Strategy theme

**5. POVERTY AND HARDSHIP** (Pages 33 - 42)

To update Members on the progress of the Poverty and Hardship Plan.

**6. HEALTH AND WELLBEING BOARD - FORWARD PLAN** (Pages 43 - 50)

To note/discuss details of forthcoming agenda items at future meetings; the latest version is enclosed.

**7. URGENT BUSINESS (IF ANY)**

To consider such other business as, in the opinion of the Chair, should, by reason of special circumstances, be considered as a matter of urgency.

**8. DATE OF NEXT MEETING**

The next meeting will be held on Thursday, 11 January 2024, at 10.00 a.m. at County Hall, Morpeth.

**IF YOU HAVE AN INTEREST AT THIS MEETING, PLEASE:**

- Declare it and give details of its nature before the matter is discussed or as soon as it becomes apparent to you.
- Complete this sheet and pass it to the Democratic Services Officer.

<b>Name:</b>		<b>Date of meeting:</b>	
<b>Meeting:</b>			
<b>Item to which your interest relates:</b>			
<b>Nature of Interest i.e. either disclosable pecuniary interest (as defined by Table 1 of Appendix B to the Code of Conduct, Other Registerable Interest or Non-Registerable Interest (as defined by Appendix B to Code of Conduct) (please give details):</b>			
<b>Are you intending to withdraw from the meeting?</b>		Yes - <input type="checkbox"/>	No - <input type="checkbox"/>

## Registering Interests

Within 28 days of becoming a member or your re-election or re-appointment to office you must register with the Monitoring Officer the interests which fall within the categories set out in **Table 1 (Disclosable Pecuniary Interests)** which are as described in "The Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012". You should also register details of your other personal interests which fall within the categories set out in **Table 2 (Other Registerable Interests)**.

**"Disclosable Pecuniary Interest"** means an interest of yourself, or of your partner if you are aware of your partner's interest, within the descriptions set out in Table 1 below.

**"Partner"** means a spouse or civil partner, or a person with whom you are living as husband or wife, or a person with whom you are living as if you are civil partners.

1. You must ensure that your register of interests is kept up-to-date and within 28 days of becoming aware of any new interest, or of any change to a registered interest, notify the Monitoring Officer.
2. A 'sensitive interest' is as an interest which, if disclosed, could lead to the councillor, or a person connected with the councillor, being subject to violence or intimidation.
3. Where you have a 'sensitive interest' you must notify the Monitoring Officer with the reasons why you believe it is a sensitive interest. If the Monitoring Officer agrees they will withhold the interest from the public register.

### Non participation in case of disclosable pecuniary interest

4. Where a matter arises at a meeting which directly relates to one of your Disclosable Pecuniary Interests as set out in **Table 1**, you must disclose the interest, not participate in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest, just that you have an interest.

Dispensation may be granted in limited circumstances, to enable you to participate and vote on a matter in which you have a disclosable pecuniary interest.

5. Where you have a disclosable pecuniary interest on a matter to be considered or is being considered by you as a Cabinet member in exercise of your executive function, you must notify the Monitoring Officer of the interest and must not take any steps or further steps in the matter apart from arranging for someone else to deal with it.

### Disclosure of Other Registerable Interests

6. Where a matter arises at a meeting which **directly relates** to the financial interest or wellbeing of one of your Other Registerable Interests (as set out in **Table 2**), you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest.

### Disclosure of Non-Registerable Interests

7. Where a matter arises at a meeting which **directly relates** to your financial interest or well-being (and is not a Disclosable Pecuniary Interest set out in **Table 1**) or a financial interest or well-being of a relative or close associate, you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting. Otherwise you must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest', you do not have to disclose the nature of the interest.
8. Where a matter arises at a meeting which **affects** –
- a. your own financial interest or well-being;
  - b. a financial interest or well-being of a relative or close associate; or
  - c. a financial interest or wellbeing of a body included under Other Registrable Interests as set out in **Table 2** you must disclose the interest. In order to determine whether you can remain in the meeting after disclosing your interest the following test should be applied
9. Where a matter (referred to in paragraph 8 above) **affects** the financial interest or well- being:
- a. to a greater extent than it affects the financial interests of the majority of inhabitants of the ward affected by the decision and;
  - b. a reasonable member of the public knowing all the facts would believe that it would affect your view of the wider public interest

You may speak on the matter only if members of the public are also allowed to speak at the meeting. Otherwise, you must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation.

If it is a 'sensitive interest', you do not have to disclose the nature of the interest.

Where you have an Other Registerable Interest or Non-Registerable Interest on a matter to be considered or is being considered by you as a Cabinet member in exercise of your executive function, you must notify the Monitoring Officer of the interest and must not take any steps or further steps in the matter apart from arranging for someone else to deal with it.

## Table 1: Disclosable Pecuniary Interests

This table sets out the explanation of Disclosable Pecuniary Interests as set out in the [Relevant Authorities \(Disclosable Pecuniary Interests\) Regulations 2012](#).

Subject	Description
<b>Employment, office, trade, profession or vocation</b>	Any employment, office, trade, profession or vocation carried on for profit or gain. [Any unpaid directorship.]
<b>Sponsorship</b>	Any payment or provision of any other financial benefit (other than from the council) made to the councillor during the previous 12-month period for expenses incurred by him/her in carrying out his/her duties as a councillor, or towards his/her election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.
<b>Contracts</b>	Any contract made between the councillor or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners (or a firm in which such person is a partner, or an incorporated body of which such person is a director* or a body that such person has a beneficial interest in the securities of*) and the council — (a) under which goods or services are to be provided or works are to be executed; and (b) which has not been fully discharged.
<b>Land and Property</b>	Any beneficial interest in land which is within the area of the council. 'Land' excludes an easement, servitude, interest or right in or over land which does not give the councillor or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/ civil partners (alone or jointly with another) a right to occupy or to receive income.
<b>Licenses</b>	Any licence (alone or jointly with others) to occupy land in the area of the council for a month or longer
<b>Corporate tenancies</b>	Any tenancy where (to the councillor's knowledge)— (a) the landlord is the council; and (b) the tenant is a body that the councillor, or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/ civil partners is a partner of or a director* of or has a beneficial interest in the securities* of.
<b>Securities</b>	Any beneficial interest in securities* of a body

	<p>where—</p> <p>(a) that body (to the councillor’s knowledge) has a place of business or land in the area of the council; and</p> <p>(b) either—</p> <ul style="list-style-type: none"> <li>i. the total nominal value of the securities* exceeds £25,000 or one hundredth of the total issued share capital of that body; or</li> <li>ii. if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which the councillor, or his/ her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners has a beneficial interest exceeds one hundredth of the total issued share capital of that class.</li> </ul>
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\* ‘director’ includes a member of the committee of management of an industrial and provident society.

\* ‘securities’ means shares, debentures, debenture stock, loan stock, bonds, units of a collective investment scheme within the meaning of the Financial Services and Markets Act 2000 and other securities of any description, other than money deposited with a building society.

## Table 2: Other Registrable Interests

You have a personal interest in any business of your authority where it relates to or is likely to affect:

- a) any body of which you are in general control or management and to which you are nominated or appointed by your authority
- b) any body
  - i. exercising functions of a public nature
  - ii. any body directed to charitable purposes or
  - iii. one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union)



## NORTHUMBERLAND COUNTY COUNCIL

### HEALTH AND WELL-BEING BOARD

At a meeting of the **Health and Wellbeing Board** held in County Hall, Morpeth on Thursday, 9 November 2023 at 10.00 a.m.

#### PRESENT

Councillor P. Ezhilchelvan  
(Chair, in the Chair)

#### BOARD MEMBERS

Binning, G.	O'Neill, G.
Blair, A.	Pattison, W.
Bradley, N.	Reiter, G.
Conway, A.	Sanderson, H.G.H.
Ice-ton, A (Substitute)	Standfield, P.
Jones, V.	Syers, G.
Lothian, J. (Substitute)	Wardlaw, C.
McCartney, S.	Watson, J.
Moulder, B. (Substitute)	

#### IN ATTENDANCE

L.M. Bennett	Senior Democratic Services Officer
Dr. J. Brown	Consultant in Public Health
Y. Hush	Public Health Manager
A. Kingham	Executive Director for Children, Young People & Education
J. Lawler	Consultant in Public Health
K. Lynch	Senior Public Health Manager
K. McCabe	Senior Public Health Manager (Inequalities)

#### 36. APOLOGIES FOR ABSENCE

Apologies for absence were received from Victoria McFarlane-Reid, Russell Nightingale, Hilary Snowdon and Councillor L. Simpson.

#### 37. MINUTES

**RESOLVED** that the minutes of the meeting of the Health and Wellbeing Board held on 12 October 2023, as circulated, be confirmed as a true record and signed by the Chair.

### 38. UPDATE ON AND REFRESH OF THE JOINT HEALTH & WELLBEING STRATEGY 2018-2028

#### EMPOWERING PEOPLE AND COMMUNITIES

Members received an update on progress on actions within Northumberland Joint Health and Wellbeing Strategy 2018-28 Empowering People and Communities Theme and propose amendments to priorities, actions, and indicators to measure progress for the remaining period of the strategy 2023-28. The report was presented by Karen McCabe, Senior Public Health Manager (Inequalities). (A copy of the report and presentation is filed with the signed minutes.)

The following key points were raised:-

- The theme currently aimed to ensure that ‘people and communities in Northumberland are listened to, involved and supported to maximise their wellbeing and health.
- Priority areas
  - Ensure that partners, providers, practitioners and the systems they work in promote and encompass a ‘more than medicine’ approach.
  - Provide people and communities with access to networks and activities which will support good health and resilience.
  - Support people to gain the knowledge, skills and confidence they need to be active partners in managing and understanding their own health and healthcare.
- During the summer a number of workshops had been held bringing together colleagues. Information had been gathered and was being presented to the Health and Wellbeing Board for discussion.
- **Mid-term progress for national indicators aligned to this theme**
  - In comparison for 2018/19, national indicators for 2021/22 showed a worsening position in Northumberland for a number of indicators, however when compared to both the North East and England averages they were not doing as badly.
  - It was noted that 2021/22 was the time when we were emerging from the Covid pandemic, lock down and social isolation and as such was a time when people were feeling less in control and empowered. Also, the data did not provide granular level detail and masked variance and differences in inequalities across Northumberland’s population. Collection of data was potentially limited by digital access and literacy levels.
  - Ambition – to move away from culture of preventing illness to promoting wellness. And from a culture of ‘doing to’ people to a culture of ‘doing with’. More than Medicine approach and five areas for action.
- **Reflections – where Northumberland is now**
  - Creating conditions necessary to foster ‘at scale’ transformation and a system wide culture shift towards community-centred, strengths-based approaches.

- Long-term commitment and trust between partners, ourselves and voluntary sector and development of different ways of working. An example of an enabler which had come into play was the Northumberland Inequalities Plan and County Plan
- Measuring success – there were multiple systems of data collection and data sets making comparisons at scale difficult. Progress was being made in this area.
- Active, not passive language.
- **Landscape, Terminology and Language**
  - Desired outcome – All communities in Northumberland are heard, understood, and empowered and have an active role in optimising their wellbeing and health.
  - Principles –
    - Take a strengths-based approach
    - Working collaboratively
  - Priority Areas
    - Work collaboratively to remove barriers, promote and mobilise a local, holistic, whole person approach
    - Equity of access to opportunities supporting resilience, belonging and connectivity
    - Enable development of knowledge skills and confidence to understand health and are choices and their consequences.
    - Lived experience central within policy development and practice.
  - What are we going to do?
    - Be resilient, be inclusive, be community-based, be consistent, be open and made every door ‘the right door’.
  - All partners within the Health & Wellbeing Board and partners across the system had inequality plans and community centred approaches. It was strongly felt that empowering local communities should not be diluted and should be strengthened.
  - It was hoped that the other three themes of the JHWS would also take on this approach and work with leads of the other themes and look at metrics within those themes that linked to the healthy life expectancy and inequality take forward and help people deliver within the Empowering People and Communities approach.

A number of comments were made, including:

- It was important to get the narrative regarding care homes right and not to imply that they were ‘bad’. There was an increasingly aging population in Northumberland and living in a care home could be transformative for many.
- This was acknowledged and the aim was to try and reduce demand to ensure that there was space available for those who really needed them. There was a tipping point between when it was better for an elderly person to remain in their own home or move to the supportive environment provided by a care home.

- There were some issues within the domiciliary care sector as it was difficult to meet needs so some were going into care homes. Attempts were being made to grow that workforce. This also affected hospital discharges as there was not the support in place to care for a person in their own home. Care homes were often used as an interim measure, however, there was the risk of a person becoming institutionalised.

**RESOLVED** that the proposed amendments outlined in the report be approved.

### **39. NORTHUMBERLAND TOBACCO CONTROL PARTNERSHIP ANNUAL UPDATE 2023**

Members received an update on Northumberland's collaborative approach to Tobacco Control and the development of the Northumberland Tobacco Control Partnership during 2023. The report was presented by Kerry Lynch, Senior Public Health Manager. (A copy of the report and presentation is filed with the signed minutes.)

The following key points were raised:-

- Smoking remained the biggest preventable cause of death and illness in Northumberland, the North East and England. It put a huge pressure on the NHS with hospital admissions and GP appointments. There was no safe level of exposure to tobacco smoke including second hand smoke. It was important to continue to drive to action at all levels and use political and organisational influence to achieve a tobacco free generation.
- Smoking prevalence in Northumberland was 9.6% but there were higher levels amongst those in routine and manual works and people with mental illness.
- The shared vision of the Health and Wellbeing Board and local partnership was

**Northumberland children born today will live a smoke free life. We aspire to reach a Smoke Free 2030, where adult smoking prevalence is 5% or lower by 2030. We shall work in partnership using an evidence-based approach.**

- National Measures – new measures had been announced which proposed legislation to make it an offence for anyone born on or after 1 January 2009 to be sold tobacco products in England. Additional funding of £366,000 would be made available to the Council for stop smoking services. Funding would also be available to improve enforcement to prevent illegal tobacco and vaping. It was expected that these measures would lead to up to 1.7 million fewer people smoking by 2075. A consultation process was currently live and members were urged to respond.
- Priority populations were
  - Young people
  - Smoking in pregnancy

Ch.'s Initials.....

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- Routine and manual occupations
- Mental health conditions
- Smoking Related Health Inequalities
- Social Housing – Continue with bespoke support model and offer of free vape starter kits to smokers living in social housing, part of the nation Pathfinder opportunity.
- Illicit Tobacco – Trading Standards and Public Health were working together to augment illicit tobacco and alcohol work and engage in prevention.
- Action planning and next steps
  - Finalising JSNAA chapter with recommendations
  - Action plan to developing actions further and address identified gaps in knowledge of community assets.
  - Local advocacy of national measures and participation in consultations

A number of comments were made, including:

- Vapes as part of the ‘Swap to Stop’ scheme would only be offered to adult current smokers and were not for use by non-smokers or children.
- It was not advisable to compare the effects of smoking with use of alcohol or obesity as all are major public health factors. In terms of preventable deaths, smoking deaths were higher.
- Additional resources were being made available for border controls to deal with the importing of cheap tobacco from abroad.
- Some people turned down intervention from a pharmacist but were often more receptive to a joint approach from a social prescriber and a pharmacist. There had been conversations with CAB around debt and the link with smoking. There was a stigma for someone struggling with their finances and for there to be a conversation about smoking in that context. This needed to be well thought out. Links were being made with housing and the voluntary sector.
- It was confirmed that support could be offered for completion of the consultation. The first four questions of the consultation related to the raising of the age of sale and were the most crucial.
- A representative from the voluntary sector would be welcome to attend meetings of the Northumberland Tobacco Control Partnership.
- With regard to mental health, there was a robust service for in patients, however, further effort and focus was needed within community teams. Particularly for those who worked into primary care more actively and there needed to be more focus and a commitment to take away to look at what the organisation was doing for the county and more broadly within the community teams.
- Was MECC (Making Every Contact Count) embedded in the policies of partner organisations and if so, how was it delivered? There was a need to ensure that it made sense to the operational staff who were in and out of people’s homes.

**RESOLVED** that the development and progress of the Northumberland Tobacco Control Partnership during 2023 be noted.

#### **40. UPDATE ON PROMOTING BETTER MENTAL HEALTH AND WELLBEING IN NORTHUMBERLAND**

Members received an update on multiagency activity in Northumberland to promote better mental health since the last report to the Board in December 2020. The report was presented by Jon Lawler, Consultant in Public Health. (A copy of the report and presentation is filed with the signed minutes.)

The following key points were raised:-

- The involvement of a number of officers at Northumberland County Council and the NENC ICB was acknowledged.
- The importance of good mental health and wellbeing – there was an increasing trend in common mental health problems. This was compounded by the Covid-19 pandemic and the increase in cost of living. Socioeconomic inequalities were closely linked to many risk factors for poor mental health.
- Multiagency partnerships in Northumberland
  - Adults – Crisis Care, Suicide Prevention and Mental Health Strategic Partnership, Operational Group – promoting good mental health action plan 2022
  - Children – Emotional Wellbeing and Mental Health (EWMH) Steering Group, SEND Strategic Partnership, EWMH Operation Group – Emotional Wellbeing and Mental Health Strategy 2022-25 and Local Area Strategy 2021-24
- Examples of collaborative Working to support adults
  - Community Mental Health Transformation – further development of multidisciplinary teams and closer working between voluntary sector, primary/secondary care and Northumberland County Council. ‘No wrong door approach’, HOPE (Helping Overcome Personal and Emotional Difficulties) Team
  - Partnership Working – Northumberland Communities Together, Dementia Diagnosis Care Home Project
  - Urgent Care Work – Right Care, Right Person, NHS 111 mental health option
  - Alternatives to crisis – Safe Haven development, Together in a Crisis
- Promoting good mental health and suicide prevention –
  - Training through NCC Public Health
  - Partnership support for campaigns
  - ICB support for primary care
  - Better Health at Work Award Scheme
- Supporting Northumberland County Council staff – there was a comprehensive wellbeing offer to staff including a health and wellbeing portal, financial wellbeing guidance and support and mental health training

for managers. Other organisations will have their own staff wellbeing offer.

- Promoting better mental health for men – Men were 3 times more likely to die by suicide than women and had different coping mechanisms and health seeking behaviours. Examples of activity in Northumberland included Andy's Man Club and the Northumberland Recovery College and Family Hubs work to support new fathers.
- Children and young people – increasing demand on services (apparent pre-Covid-19) and increasing complexity of needs. Multiagency strategy with strong emphasis on partnership work e.g. 0-19 service Emotional Health and Resilience 'pillar', Kooth online support and Mental Health Support Teams in schools.
- Developing a promoting better mental health strategy – building on established partnerships and extensive collaborative work and develop a strategy for Northumberland. Strategy could include – preventing mental disorders, promoting mental wellbeing and promoting resilience.

A number of comments were made, including:

- A significant proportion of mental health conditions in adulthood were initiated during childhood and it was important to strengthen parental support through Children's Services and Family Hubs.
- It was important to pull together all the strands in this very broad area. A strategic approach would do this and enable the Board to look back in a year's time to see whether a difference had been made.
- What were we not doing, or need to do differently to fill in the gaps? There was an effective strategic partnership in place but how did the rest of the system know what was going on within that strategic partnership? It was important to look at the data on inequalities to understand at a strategic level what the impact of inequalities was and where should efforts be focused.
- Could more voices be involved as mental health and wellbeing was everyone's business and conversation?
- Healthwatch had been reflecting on how best to connect with communities. The strategy provided a framework to pull together all the various initiatives but there was always room for improvements. Connecting across the statutory and VCS sector was fundamental. Consideration should be given to which communities were not being heard from and which we could connect with better.
- All four of the themes in the Joint Health & Wellbeing Strategy needed to be effective as a system to improve the health and wellbeing of the population and reduce inequalities. It would be impossible to have good mental health if areas such as income, employment, housing and education were not right. Making stronger communities along with health care and a whole system approach to health care would be a challenge. All aspects linked together, and none could be seen in isolation.
- It would be useful for the health and wellbeing strategies of employers in Northumberland to be developed more as part of the strategy along with learning from good practice. Some initiatives such as Safe Haven were

launching in the New Year. A huge challenge for CNTW would be community transformation and how that rolled out in partnership.

- The four component parts of the Joint Health & Wellbeing Strategy needed to be seamless and large employers and mental wellbeing would come out in the theme at the next Board meeting. The whole refreshed strategy would then be brought to the March meeting of the Health & Wellbeing Board.

**RESOLVED** that the wide range of multiagency work which has been undertaken to promote better mental health be noted.

#### **41. HEALTH AND WELLBEING BOARD – FORWARD PLAN**

Members noted details of forthcoming agenda items at future meetings.

#### **42. DATE OF NEXT MEETING**

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

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

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





## Northumberland County Council

Health and Well-being Board

Thursday, 14 December 2023

### **Update on and refresh of the Joint Health and Wellbeing Strategy theme 'Tackling the wider determinants of health'**

**Report of Councillor(s)** Veronica Jones, Cabinet Member for Improving Public Health and Wellbeing

**Responsible Officer(s):** Simon Neilson , Executive Director - Place and Regeneration

#### **1. Link to Key Priorities of the Corporate Plan**

This report is relevant to the following priorities in the NCC Corporate Plan 2023-26:

- **Achieving value for money:** Creating conditions for everyone to live their best lives is typically highly cost effective and can yield lifelong costs savings such as increased earnings and productivity and reduced use of health and social care services.
- **Tackling Inequalities:** To create a society where everybody can thrive, our residents need all the building blocks in place: a stable job, good pay, quality housing and good education. For some of our residents these foundations are weak or missing which create inequalities.
- **Driving Economic Growth:** Ensuring that all our residents have access to building blocks of a good life, will help them to remain health and independent and pay an important part in contribution to Northumberland's future prosperity.

#### **2. Purpose of report**

The purpose of this report is:

- To update the Health and Wellbeing Board (HWB) on achievements made against the theme Tackling the Wider Determinants of Health in the Northumberland Joint Health and Wellbeing Strategy (JHWS) 2018-2028 and
- To review and agree priorities and actions for this theme and describe proposed amendments for the remaining period of the strategy from 2023 to 2028.
- To review indicators used to measure progress against this Joint Health and Wellbeing Strategy theme.
- Comment on the national indicators aligned to this theme and other measures for understanding the qualitative impact of actions within this Joint Health and Wellbeing Strategy theme.

### **3. Recommendations**

The Board is recommended to:

- 3.1 Consider and comment on the achievements described in this report; and
- 3.2 agree to the proposed amendments to the name of the theme, priorities, and associated actions; and
- 3.3 comment on the national indicators aligned to this theme and other measures for understanding the qualitative impact of actions within the Joint Health and Wellbeing Strategy Theme.

### **4. Key Issues**

- 1.1 Tackling the wider determinants of health is one of the four themes of the Northumberland 2018-28 Joint Health and Wellbeing Strategy (JHWS). This theme seeks to improve people's health and wellbeing by addressing the conditions within which people born, grow, live, work and age as these have a much bigger impact on health and inequalities than healthcare services and health behaviours. This theme includes 4 priorities tackling fuel poverty, supporting people to live independently, increasing the number of people with long term health conditions into work and transport.
- 1.2 This report is a mid-point review of progress which has been made against these priorities.
- 1.3 The member lead and elected member sponsor for this theme is Councillor Veronica Jones, Portfolio Holder/Cabinet member for Improving Public Health and Wellbeing; although the nature of this theme also cuts across the portfolios of Strategic Transport & Infrastructure and Climate Change; Supporting Business & Opportunities; Caring for Adults; Improving Our Roads and Highways and Looking After our Environment. The

director sponsor is Rob Murfin, Director of Housing and Planning, Place and Regeneration, Northumberland County Council.

- 1.4 It is important to note the caveats attached to the quality of the data in Table 2 where collection of data has been affected by COVID-19 or latest data has not been released in time for this report.
- 1.5 Since 2017/2018, there have been improvements in the following indicators with evidence that the gap is closing when compared with England and the Northeast:
  - proportion of adults in contact with secondary mental health services who live in stable and appropriate accommodation,
  - the employment gap for those with long term physical or mental long-term conditions and the percentage of adults cycling for travel at least 3 times per week.
- 1.6 The fuel poverty national indicators do not cover the period of the cost-of-living crisis, so still appears stable, although this is unlikely. The proportion of adults with a learning disability who live in stable and appropriate accommodation and percentage of adults walking for travel at least 3 times per week has also remained stable.
- 1.7 There has been a slight fall in the overall employment rate for 16+ and a worsening trend for workless households.
- 1.8 The quality of housing and access to outside space during COVID-19 affected households experiences and outcomes. Economic inactivity has risen since the pandemic. Whilst seeing an initial rise in cycling and walking during the pandemic, it is not clear yet if this will be sustained longer term and there has been a notable decline in the use of public transport.
- 1.9 It is proposed that the following changes are made to this theme:
  - The theme be renamed from 'Wider Determinants of Health' to 'Building Blocks of Good Life', as this language increases knowledge of the fundamental role that the circumstances within which we live has the biggest impact on health and inequalities.
  - The 2 priorities for housing (fuel poverty & independent living) be broadened to include the impact on health of wider strategic housing and planning issues and rename the theme "Healthy Housing and Planning". Due to issues with the fuel poverty indicator, it will be supplemented with an indicator which measures Energy Efficiency Standards in households. Indicators for affordability and overcrowding will also be added (See Table 2).
  - It is proposed to focus the Inclusive Economy section on closing the gap in employment outcomes for people with long term physical and mental health conditions and reducing economic activity linked to poor health. If approved the indicators will be amended accordingly (See Table 3).

The Transport theme will contain the same priorities and indicators (See Table 4) although the actions have been refreshed.

## **5. Background**

'Tackling the wider determinants of health' is one of the four themes of the Northumberland 2018-2028 Joint Health and Wellbeing Strategy (JHWS). The NHS was never meant to be the only institution working to improve health, it was always intended to be part of a broader system of support addressing jobs, housing, education, and public transport. A healthy and thriving community needs all the right building blocks in place: jobs, pay, housing and education. For some of our residents these building blocks are missing, weak or need replacing. This theme is a call to action to those agencies and departments working mainly outside the health and care system to take action to ensure

all of our communities irrespective of their background, have stronger foundations to be able to thrive and seize the opportunities in Northumberland.

This theme focuses on three of these wider determinants of health: housing, employment, and transport.

- **Housing** - Living in a home, which is unaffordable, cold, or damp can result in respiratory health conditions and worsens many long-term health conditions. It can affect children's ability to study at home and constantly worrying about having enough money to pay the rent can also lead to chronic stress, anxiety, and depression.
- **Employability** – Having a good quality job is protective for good health. Long term unemployment, low paid, inflexible, insecure work with irregular hours, or where the working environment is challenging, with low levels of control or autonomy or support can cause chronic stress; this can lead to high blood pressure and a weaker immune system.
- **Transport services and infrastructure** can affect health directly through air pollution or by providing opportunities to travel actively but also indirectly as transport also provides access to education, work, services, recreation, family and friends. An inadequate transport system has the potential to widen social and economic inequality by limiting opportunities to find employment and socialise with friends, as well as accessing public services.

## 5.2 Review of the JHWS Theme

The Joint Health and Wellbeing Strategy includes a mid-term review of priorities to provide assurance that they still reflect the priorities for Northumberland. The review of this theme describes progress against the national indicators specified in the JHWS and a summary of key achievements against priority areas. The report highlights some of the actions that we are aware of which have been taken since the strategy launch which reflect the extensive multi-agency work up to 2023 to achieve its priorities. It is not possible to reflect all the work carried out across multiple sectors locally, regionally and nationally to improve housing, transport and economic inclusion in Northumberland, but hopefully provides an insight for the Board on the broad range of actions being taken.

Updated priorities are proposed for the remaining five-year period of the JHWS. These refreshed priorities have been identified through discussion with multiple stakeholders, previous discussions in the Board, responses from the Inequalities Plan Locality Events. Northumberland County Councils Place and Regeneration Directorate have agreed to take ownership of this theme.

## 5.3 The Impact of the COVID-19 pandemic

The pandemic focussed attention on existing inequalities and how the conditions that people live in and the type of work they have affected people's ability to protect themselves from the virus.

### Housing/Fuel Poverty

Research published by the [National Housing Federation](#) and [The Health Foundation](#), indicated that 31% of adults in the UK had experienced mental or physical health problems linked to the lack of space in their home, housing conditions or lack of outdoor space during lockdown. or its condition during lockdown.

The cost-of-living crisis which followed COVID-19 caused by multiple factors has resulted in rising fuel costs and inflation rates. [A recent study by Crisis](#) (February 2023), found that there is more pressure on households on the lowest incomes as they spend a greater proportion of their income on housing, food and energy, with the lowest income decile facing total average housing, food and energy costs exceeding their incomes by 43 per cent. Northumberland has around 20,000 properties with approximately 35,000 residents living these conditions (based on 2020 population estimates).

## Employment

The Post Covid recovery period has been characterised by relatively weak employment growth, hard-to-fill vacancies, and a shrinking labour pool. Unemployment is low with many vacancies remaining unfilled, particularly in health and social care. The active pool of labour, both employed and unemployed has contracted. There is a noticeable trend showing growth in economic inactivity (people not in employment and not looking for work) and the proportion of people who are economically inactive due to ill health.

## Transport

COVID 19 has had a disruptive impact on travel patterns. While car usage has made a rapid recovery, public transport recovery has been a lot slower. Despite the negative impacts of COVID-19, there is an opportunity to build on the reduction in car dependency witnessed during the pandemic to achieve long term change.

## Quality of data for monitoring purposes

As has been indicated in previous discussions in the Board, there has been an impact on the reliability and quality of the national data used to monitor progress due to the coronavirus pandemic which will take time to smooth out.

## 5.4 Progress against national indicators

Table 1 shows progress against the most recent published data for the national indicators which were originally selected for this theme.

Table 1: Updated data on indicators of fuel poverty in the Joint Health and Wellbeing Strategy					
Indicator	N'land	Northeast	England	Time Period	Trend
Fuel Poverty*	13.8%	14%	13.1%	2021	→
Winter Mortality Index**	31.9%	24.3%	36.2%	2020-21	↑
Adults with a <u>learning disability</u> who live in stable and appropriate accommodation ***	86.1% →	86.4% ↑	78.8% ↑	2021/22	No significant change
Adults in contact with <u>secondary mental health services</u> who live in stable and appropriate accommodation (Persons)****	57.0% ↑	69% ↑	58.0% →	2021/22	Closing the gap with England but not NE

<b>% gap in 16+ employment rate and those with physical or mental long-term conditions lasting more than 12 months</b>	8.9%	9.7%	11.8%	5-year trend to 2022/23	Gap is narrowing.
<b>Percentage of workless households</b>	21.5%	19.7%	13.4%	5-year trend to 2022/23	Increasing and gap widening.
<b>Overall Employment rate 16+</b>	51.4%	55.7%	61%	5-year trend to 2022/23	Widening gap compared with NE & England
<b>% adults walking for travel at least 3 times per week</b>	10.9%	15.2%	17.4%	2021/22	Reducing and no change in gap
<b>% adults cycling for travel at least 3 times per week</b>	2.3%	1.8%	2.3%	2019/20	Narrowing gap with England and Northeast

Notes

\* A household is considered to be fuel poor if they are living in a property with a fuel poverty energy efficiency rating of band D or below **and** when they spend the required amount to heat their home, they are left with a residual income below the poverty line. This date is based on modelled estimates.

\*\* compares the number of deaths that occurred in the winter period (December to March) with the average of the non-winter periods (August to November and April to July)

\*\*\* [Adults with a learning disability who live in stable and appropriate accommodation](#) - Working age learning disabled clients who are living in their own home as a percentage of working age learning disabled clients (aged 18 to 64) (source Fingertips, NHS Digital. Measures from the Adult and Social Care Outcomes Framework, table 1G.)

\*\*\*\* [Adults in contact with secondary mental health services who live in stable and appropriate accommodation \(Persons\)](#) - Adults who are receiving secondary mental health services on the Care Programme Approach recorded as living independently, with or without support, as a percentage of adults who are receiving secondary mental health services and who are on the Care Programme Approach (aged 18 to 69). (Source: Fingertips, NHS Digital Measures from the Adult and Social Care Outcomes Framework, table 1H. (Resources)).

The fuel poverty indicator is based on modelled estimates and does not directly capture the number of people who live in fuel poverty so it is possible that small areas which are atypical are unlikely to be identified by the model. It is therefore essential, wherever possible, to compare the modelled results to local data. The local authority data for fuel poverty indicator is available up to 2021 which does not include the period of the cost of living and energy crisis. Whilst the average proportion of households living in fuel poverty according to the last data is 13.8%, we need to continue to prioritise households who experience higher levels of fuel poverty, these include rural areas, villages, hamlets, and isolated dwellings (16.1%), people with disabilities (17.3%), people living in private rented properties (24.7%) and lone parents with dependent children (25.1%).

Likewise, the data period for Winter Mortality up to 2021 shows a worsening trend which is in line with the Northeast and England trends. In 2020 the coronavirus pandemic led to a large increase of deaths mostly in the non-winter months which has impacted on the data as this is used to calculate the difference for the winter months so should be interpreted with caution.

Adults in contact with mental health services living in stable and appropriate accommodation has seen an improvement and is similar to England but behind the

Northeast. Due to the disruption of coronavirus, this has affected the quality and coverage of some of the mental health statistics, therefore, data should be interpreted with care over the period of the pandemic.

The gap in the employment rate for those with a long-term health condition is narrowing between Northumberland and the Northeast and England and this is a long-term trend. Changes in the method of data collection during coronavirus which moved from face to face to telephone interviews is likely to have affected the quality of this data.

The proportion of workless households in Northumberland is increasing and the gap is growing between local and national trends but is more stable when compared to the region. The employment rate for those aged 16+ is falling slightly in Northumberland and nationally but rising regionally.

Transport indicators were not selected in the original JHWS so, we have provided indicators which measure progress to increase walking and cycling. Trips made on foot or by bike in Northumberland regardless are roughly in line with regional and national averages. Whilst recognising the rural nature of the county and the practicalities of making trips of this distance by an active method of transport, approximately a third of all trips made in the county are less than 5 kilometres where possible walking and cycling should be considered. Generally, lower levels of walking and cycling are seen amongst population groups on lower incomes, older age and for people with disabilities.

## **5.5 Progress during 2018 to 2023 by priority area**

This section provides an update of some of the work that we are aware of to address the priorities of the JHWS. This update is by no means exhaustive or fully reflects the extent of activity carried out across Northumberland by multiple partners but provides a flavour of key work in these areas. A fuller list of the activity carried out is provided at **Appendix 1** of this report.

### **5.5.1 Priority 1: Housing Tackling fuel poverty by increasing the number of households with access to warm homes by:**

- **Through design standards and building control** – The adoption of the Adoption of [Northumberland Local Plan](#) (March 2022) presented opportunities to include a number of policies to support the delivery of JHWS priorities including supporting Health and wellbeing and healthy and sustainable homes.
- **Promoting energy efficiency schemes to public and front-line workers** – the response to the COVID pandemic strengthened the pathways and partnership working amongst partners in the Council, charities and NHS and this continued through into the cost-of-living crisis. Action has included providing resources and training to front line staff on warm homes, developing clearer pathways to support predominantly provided in the VCS, use of Frontline to promote services to residents.
- **Maximising the take up of retrofit measures boilers/Insulation** via Capital Programme also delivering a range of retrofit schemes as part of the Councils Housing Capital Program and national schemes such as ECO and the various

grants under Warmer Homes and ensuring there is a clear Energy Pathway to this support.

### **5.5.2 Priority 2 Housing - Supporting people to live independently for as long as possible through regulations and powers by.**

- **Considering needs of older/disabled people to live independently** through converting and building new purpose-built homes and adaptations to existing housing.
- **Using Use Local Plan to create healthier places**, a new local plan was adopted in 2022 with a range of new policies to improve health and wellbeing. We now have developers completing health impact assessments as part of the planning process. We also have a Hot Food Takeaway Policy to limit new takeaways.
- **Maximise Disabled Facilities Grant take up** – 560 applications agreed since Jan 2022.

### **5.5.3 Priority 3: Increasing the number of people with long term health conditions moving into and sustaining work.**

- **Continue to develop opportunities to integrate employment and health services** - North of Tyne Combined Authority and Northeast and ICB Work and Health Strategy developed to provide a future commissioning and policy context. Various pilots ongoing and looking for funding opportunities via national funding streams.
- **Employer focused interventions to improve recruitment/retention of people with long term health conditions.** Northumbria's Community Promise, Post in Advance Northumberland to improve employer engagement on good working practices, North of Tyne Good Work Pledge and Northeast Better Health at Work Scheme.
- **Support carers and over 50s into work/sustain work.** - Many employment services delivered by local organisations and commissioned nationally will include carers in their cohort. Also, specific Generic employment support delivered by Solid Foundations, Work and Health Programme and Northumberland Carers Return to Work Project.
- **Support users of Mental Health and therapy services into work** – Mental Health Trailblazer and CNTW Individual Placement Service.
- **Actively engage with employers to promote good work** – See bullet point 2 above.
- **Progression from low wage economy** – Regeneration programmes such as Energising Blyth and Borderlands Growth Deal are aimed at improving the quality of jobs available in Northumberland.

### **5.5.4 Priority 4: Ensuring local transport policy delivers on providing resilient, flexible, and sustainable transport options across the county, particularly rural areas.**

- **Improving Equity of Access to Public and Community Transport** – Reinstating passenger transport services to the Northumberland Line, Developments as part of the Bus Service Improvement Plan and Northeast Enhanced Bus Partnership and commissioning a Public and Community Transport Health Needs Assessment due to report in December.



- **Increase children and young people's active travel** – A comprehensive range of support and behaviour change interventions provided to schools to help them move children and their families to more active types of travel.
- **Increase walking and cycling through local infrastructure improvements and behaviour change approaches** – A range of cycling infrastructure improvements across Northumberland are currently being delivered with more in the pipeline, cycle loan schemes rider training and trailing cargo bikes and adapted bikes to broaden participation.

## 5.6 Proposed updated priorities and actions for 2023-2028

The COVID-19 pandemic and cost of living crisis has reinforced the need to redouble our efforts to reduce inequalities by strengthening the building blocks of a good life.

It is proposed that the 'Wider Determinants of Health' theme be renamed the 'Building blocks of a good life', as comparing building a healthy society with the construction of a sturdy building is more likely to resonate with partners and our residents. Using this is a metaphor will also increase knowledge of the fundamental role that the circumstances within which we are born, live and work has the biggest impact on our resident's health and inequalities.

The development of the Northumberland Inequalities Plan and subsequent inequalities summit and locality events across the county and the Place Standard Tool helped inform this review. We also considered highlighting and building on activity using asset-based approach so considered the 3 questions posed in the inequalities plan. What do communities want to do for themselves? What might communities need some help with? What can't communities do that agencies can? This is shown at Table 5.

### 5.6.1 Priority Theme 1 – Healthy Housing and Planning

The JHWS original priorities 1 & 2 covered a collection of activities focussed on fuel poverty and independent living. The issue of fuel poverty has clear action being undertaken to address this challenge and has largely been mainstreamed via the Energy Pathway and the various retrofit workstreams. It is therefore proposed that the 'housing' priority be broadened and renamed 'Healthy Housing and Planning' to provide a focus on strategic housing and planning issues to include factors such as the conditions of housing, availability of different types of housing and affordability.

In early 2024 the Health and Wellbeing Board will be receiving a report on The Healthy Housing Theme to provide an opportunity to develop further actions in this area.

The proposed actions within the newly named 'Healthy Housing and Healthy Planning Theme include:

#### **Priority 1: Supporting Healthy environments through Planning**

1. Undertake early engagement work with the developers raise understanding of the benefits of addressing the wider determinants of health (and carbon reduction) as part of new developments.
2. Ensure the effective involvement of Public Health in the planning application process to ensure that health considerations are given appropriate weight in planning decisions and that health is integral from the start. This will include input at the pre-application stage and in planning decisions and refreshing HIA (Health Impact Assessment) guidance as part of an update to the Planning Validation List.

3. Ensure the effective engagement and involvement in work in strategic plan making. This could include planning guidance to supplement the Local Plan, support for Neighbourhood Plan making and developing Design Guides.
4. Develop a common narrative across LA7, narrowing of the inequalities gap through devolution, create LA7 healthy developments messaging.

**Priority 2: Blyth Deep Dive Housing and Healthy Housing Hub**

80 - 100 bed extra care unit on hospital site in partnership with NHS

A third phase of Energising Blyth programme, focused on Housing renewal and town centre living supported by Levelling Up Deep Dive funds.

- £12m awarded through Blyth Deep Dive specifically towards this.
  - Empty Homes Team will be established in Winter 2023
  - Bowes Court – an energy efficiency scheme to improve NCC properties - delivery starts early 2024.
  - Extra Care Facility – delivery 2024-26.
  - Richard Stannard House – redevelopment of commercial property as high quality residential apartments for rent. Delivery from 2024-2026
- Selective Licencing pilot within Cowpen Quay
- Continue to gather resident voice using Place Standard Tool

**Priority 3: Hirst Housing Masterplan Phase One Implementation**

Supporting the implementation of Phase 1 of the Hirst Masterplan - Heart and Hopes of Hirst - Towards an Imagined Future

Introduce strategic lead and a community and housing programme manager to deliver phase 1 of the Master Plan and prepare for phase 2. Including:

- Clean, tidy and safe streets
- Shaping our neighbourhood
- Opportunity sites
- Community connections
- Community assets
- Skills and job

Respond to resident voice using Place Standard Tool

**Priority 4: Available, Affordable, Quality Housing**

More affordable housing, better spread across the county (inequalities localities events summer 2022)

1. Work with partners to optimise the delivery of Rural Affordable Housing
2. NCC will aim to be an exemplar as the biggest social landlord in the county
3. Working to drive up quality of housing and support tenants with healthy living initiatives.
4. Respond to resident voice using Place Standard Tool

The national indicators to support an understanding of progress within this theme are shown in Table 2.

<b>Table 2: Proposed measures of success for Priority 1</b>					
<b>Healthy Housing Indicators</b>	<b>N'land</b>	<b>Northeast</b>	<b>England</b>	<b>Time Period</b>	<b>Trend</b>
<b>NEW INDICATOR</b> <b>Affordability of home ownership *</b>	6.5	5.4	9.1	2021	Not available
<b>NEW INDICATOR</b> <b>Overcrowded Houses</b>	3.6%		8.7%	2021	Awaiting new census data
<b>NEW INDICATOR % of properties at band C and above ** &amp; ***</b>	40%	42%	42%	2023	
<b>RETAIN Fuel Poverty</b>	13.8%	14%	13.1%	2021	
<p>Notes: * Ratio of median house price to median gross annual residence-based earnings (A higher ratio indicates that on average, it is less affordable for a resident to purchase a house in their local authority district)</p> <p>** EPC Ratings Source <a href="#">DLUHC EPC</a></p> <p>*** <a href="#">EPC ratings by ward across Northumberland</a> in the JSNAA demonstrate a significant discrepancy between wards across the county of between 89.13 &amp; 39.5% below EPC band C, with rural wards typically demonstrating the least fuel efficiencies.</p>					

### 5.6.2 Priority Theme 3 - Inclusive Economy

Actions which increase the number of residents moving closer or returning to work, increasing good quality work opportunities, and providing services for those with poor health and employment needs together are elements of an effective work and health system. These actions will also help to make Northumberland a land of opportunities for everyone; irrespective of where they live, their background or circumstances such as age, disability, health condition or caring responsibilities. The proposed future priorities for this theme, reflect recent discussions in the Board during 2023 and are shown below.

<b>Priorities</b>	<b>Actions</b>
<b>Priority 1: A focus on supporting the economically inactive with long term health conditions to obtain and sustain good quality work.</b>	
Improve our joint health and employment support response to residents with long term health conditions facing barriers to getting/sustaining work	<ol style="list-style-type: none"> <li>a. Work with the Northeast and North Cumbria Integrated Care Board and emerging Northeast Mayoral Combined Authority to develop a strategic approach to Work and Health</li> <li>b. Integrate the approach of frontline health and employment support by: <ul style="list-style-type: none"> <li>• strengthening and expanding Northumberland's Employment and Skills Partnership to include NHS primary care services.</li> </ul> </li> </ol>

	<ul style="list-style-type: none"> <li>strengthen referral pathways, skills, and confidence of staff in primary care and employment services to address health and work outcomes together.</li> <li>Identify further funding opportunities to further test the integration of health and employment services.</li> <li>Identify opportunities and work towards place-based approaches which co-locate health/employment and other services together.</li> </ul>
<b>Priority 2: Increase access to Good Quality Work</b>	
Increase access to Good Work (secure, safe and healthy working environment, decent level of pay and opportunities to progress)	<ol style="list-style-type: none"> <li>Delivering ambitious regeneration plans such as Energising Blyth, Ashington, Borderlands, Rural Stewardship Growth Investment Plan.</li> <li>Continue to strengthen the alignment and promotion of the Good Work Pledge and Better Health at Work Award under new Combined Authority.</li> <li>Review current activity to identify opportunities to enhance/develop in-work support for employers and employees to address health and wellbeing issues, particularly within smaller and medium-sized employers.</li> </ol>
<b>Priority 3: Maximise the economic levers of Northumberland's Institutions to reduce inequalities</b>	
Maximise the opportunities to deliver wider economic, social, and environmental benefit via Northumberland's Anchor Institutions (Public, Private, VCSE)	<ol style="list-style-type: none"> <li>Share and celebrate existing good practice of Northumberland Employers e.g., Bernicia, Northumbria Hospital's Trust Community Promise to generate economic, social, and environmental benefit as an employer, purchaser of services and owner of assets.</li> <li>Expand to include private sector business.</li> <li>Develop a Northumberland shared framework to maximise the opportunities of the Social Value Act and Corporate Social Responsibilities.</li> </ol>
<b>Priority 4 – Develop place-based approaches in increase access to volunteering</b>	
Increase in impactful, volunteering and training opportunities for economically inactive.	Working with Combined Authority and local VCSE place based partners to develop an Inclusive Economy Local Community Partnership to increase opportunities for residents who are economically inactive to come together and take action in their local area.

For this theme with revised priorities, we are proposing using the national indicators outlined in table 3 below to help us understanding what progress is being achieved.

<b>Table 3 - Proposed indicators for Priority 2</b>					
<b>Inclusive Economy Indicators</b>	<b>N'land</b>	<b>Northeast</b>	<b>England</b>	<b>Time Period</b>	<b>Trend</b>
<b>RETAIN % Gap in employment rate between those with long</b>	14%	14%	10%	2021/22	Increasing gap to England Similar to NE

<b>term physical or mental health conditions and overall employment rate</b>					
<b>NEW INDICATOR % Economic inactivity Rate (Short, long term, health conditions, caring responsibilities)</b>	25.2%	25.6%	21.2%	2021/22	Increasing gap to England Similar to NE

### 5.6.3 Priority Theme 3 - Equity of Transport

The proposed future priorities for this theme are included in the table below.

<b>Priorities</b>	<b>Proposed Actions</b>
<b>Priority 1: Public and Community Transport is equitable, accessible, and appealing</b>	
Improving Equity of Access to Public and Community Transport	<ul style="list-style-type: none"> <li>a) Continue with reintroduction of passenger services to the Northumberland Line which aims to increase job opportunities, potential employers moving to the area, access to services, leisure and work within Northumberland and linked to Newcastle and North Tyneside.</li> <li>b) Consider and respond to recommendations of emerging Public and Community Transport Health Needs Assessment</li> <li>c) Maximise a full package of devolved transport investment and powers to create an integrated transport system as part of Northeast Devolution and the opportunities available under the Bus Service Improvement Plan</li> </ul>
<b>Priority 2: Increase children and young people's active travel.</b>	
Increase children and young people's active travel.	Continue to support Schools Go Smarter focusing on: <ul style="list-style-type: none"> <li>a) increasing the number of schools achieving MODESHIFT Stars Accreditation and achieving a higher level.</li> <li>b) Supporting schools with advice, ideas and the tools to implement active travel approaches.</li> <li>c) Engaging with parents via workshops and research to consider more sustainable and active travel.</li> <li>d) Look for further opportunities to develop Safer Routes to schools' programmes.</li> </ul>
<b>Priority 3: Ensuring the built environment is conducive to active travel</b>	

<p>Increase walking and cycling through local infrastructure improvements and behaviour change approaches</p>	<ol style="list-style-type: none"> <li>a. Continue to deliver on the ambitions of Our Way and Local Cycling and Walking Improvement Plans</li> <li>b. Provision of community cargo cycle and rider training for cargo cycle usage in Berwick Upon Tweed to support local journeys around the town to test potential for sustainable hub for local freight.</li> <li>c. Department for Transport (DFT) capability and ambition funding secured for 100 cycle instructor training places to engage with existing and potential cyclists.</li> <li>d. DFT funding has been secured to develop an employability and education cycle loan to operate out of four locations in Northumberland.</li> <li>e. Work will continue to progress on the delivery of Levelling-Up Funded active travel schemes and work will be undertaken to identify a pipeline of schemes to submit to various funding opportunities.</li> <li>f. We will apply Local Plan policies to encourage new development in sustainable and accessible locations and encourage walking and cycling.</li> <li>g. Align our campaigns and approaches to change behaviour to evidence-based behaviour change models and ensure that our actions reduce inequalities.</li> </ol>
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Transport indicators were not included in the original JHWS, it is therefore proposed that the national indicators shown in Table 4 will be used to support an understanding of progress within this theme.

Table 4 – Proposed indicators for Priority 3					
Transport Equity Indicators	N'land	Northeast	England	Time Period	Trend
<b>RETAIN % adults walking for travel at least 3 times per week.</b>	10.9%	15.2%	17.4%	2021/22	No change in gap
<b>RETAIN % adults cycling for travel at least 3 times per week</b>	2.3%	1.8%	2.3%	2019/20	Narrowing gap

## 5.6 The Inequalities Plan

In the table below we have used the three questions posed by the Inequalities Plan relate to our joint work on improving the building blocks of a good life and indicate how we will continue to maintain this community focus over the next 5 years.

### What do communities want to do for themselves?

- Identify and share community assets.
- Looking out for each other.
- Volunteer & take social action to improve their area. E.g., Climate Change Champions, Love Northumberland volunteers.
- Organise opportunities for communities to come together and connect with others.

### What might communities need some help with?

- Playing a part in giving their views – e.g., through participatory methods which are actively involved in shaping and monitoring improvements in their areas e.g., through Place Standard Tool
- Community Led Housing
- Access to small grants and funding advice to help communities put their ideas into action.
- Signposting communities to good quality advice and opportunities.

### What can't communities do that agencies can?

- Develop and enforce policy and regulatory frameworks.
- Secure external funding to take forward projects.
- Lead by example with other developers, employers, and institutions to create healthy and equitable neighbourhoods, workplaces and economy.
- Consistently consider the impact on inequalities of our decision making.

## 6. Conclusion

This mid-point review of the JHWS theme 'Wider Determinants of Health' has used a range of information to describe achievements and progress against the priorities and actions, identifying limitations in some national indicators and areas where performance against national indicators has worsened.

The proposed amendments to the name of this theme, the priorities and associated actions and indicators reflect discussions within the Regeneration and Place Directorate Management Team within Northumberland County Council. The input from HWB partners is requested to develop this theme to ensure it reflects our shared priorities and identifies appropriate actions for the remaining period of the Joint Health and Wellbeing Strategy

## 7. Implications

<b>Policy</b>	This paper updates the theme 'wider determinants of health' which has now been renamed 'Building Blocks of a Good Life' of the Northumberland Joint Health and Wellbeing Strategy. It considers and seeks to align with other organisational strategies and plan
<b>Finance and value for money</b>	It is not anticipated that the refreshed actions will require additional funding outside of existing plans. However, they will require additional implementation plans which may articulate the need for additional funding
<b>Legal</b>	This report supports the Health and Wellbeing Board to fulfil its statutory duty to complete a joint local health and wellbeing strategy. It is not anticipated that the refreshed actions will have legal implications, however they will require additional action plans and each organisation will need to consider legal implications at this point.

<b>Procurement</b>	There are no specific requirements for procurement articulated in this report, however the actions will require additional action plans and each organisation will need to consider procurement implications at this point.
<b>Human resources</b>	No new recruitment is identified. However, system partners will need to devote resources in terms of staff / officer time to deliver these actions. It may be that as part of an implementation plan, organisations consider if their recruitment practices can be strengthened to reduce inequalities.
<b>Property</b>	There are no specific implications for estates.
<b>The Equalities Act: is a full impact assessment required and attached?</b>	No - not required at this point An equalities impact assessment has not been carried out. However, the refreshed actions are specifically aimed at reducing health inequalities which include to people with characteristics protected by the Public Sector Equality Duty.
<b>Risk assessment</b>	A risk assessment has not been undertaken, though risk assessments may be needed as part of further implementation.
<b>Crime and disorder</b>	No specific implications.
<b>Customer considerations</b>	The refreshed actions are intended to improve the lives of our residents.
<b>Carbon reduction</b>	No specific implications, though social value considerations should include carbon reduction.
<b>Health and wellbeing</b>	This report is explicitly intending to improve the health and wellbeing of the population of Northumberland and reduce health inequalities
<b>Wards</b>	(All Wards);

## 8. Background papers

[Northumberland County Council Environment Policy Statement](#)

[Northeast Bus Service Improvement Plan](#)

[Northumberland Joint Strategic Needs and Asset Assessment](#)

[Northumberland Inequalities Plan](#)

[Northumberland Local Plan](#)

[Northumberland Climate Change Action Plan](#)

## 9. Links to other key reports already published

Not applicable



**10. Author and Contact Details**

Liz Robinson, Senior Public Health Manager,  
Email: [liz.robinson@northumberland.gov.uk](mailto:liz.robinson@northumberland.gov.uk)

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**Appendix 1 – Update on and refresh of the Joint Health and Wellbeing Strategy theme ‘Tackling the wider determinants of health’ - Actions active in last 5 years**

<b>Priority 1: Housing Tackling fuel poverty by increasing the number of households with access to warm homes</b>	
<b>Commitment</b>	<b>Actions Achieved</b>
<b>1. Tackle fuel poverty through design standards and building control.</b>	<p><b>Adoption of <a href="#">Northumberland Local Plan (March 2022)</a> which includes a number of policies to support the delivery of JHWS priorities including supporting Health and wellbeing and healthy and sustainable homes. Policy HOU 1 (making the best use of existing buildings), Policy STP4 (climate change mitigation and adaptation), policy STP 5 (health and wellbeing), Policy HOU 5 (housing types and mix), policy HOU 6 (affordable housing provision), policy HOU 11 (homes for older and vulnerable people), policy QOP (design principles) make specific reference either to healthy design or low carbon design.</b></p>
<b>2. Promote energy efficiency schemes to public and front-line workers.</b>	<p><b>Energy Redress scheme – EARN (Energy Advice for Rural Northumberland) - Community Action Northumberland</b></p> <p>Advice at events, home visits, and telephone support, and to over 3,000 households provided over 4,000 small energy-saving measures to over 700 households.</p> <p><b>Household support Fund (HSF) &amp; N'land Emergency and Transition Support, Covid Winter Support Grant (CWSG) - NCT in partnership with Citizens Advice Northumberland</b></p> <p>Support with food, energy costs &amp; equipment (£5.2m)</p> <p>CWSG (food / utility bills) 12/20-6/21 - £2.315m spent)</p> <p>DWP HSF (energy / water) 10/21-6/23 - £2.913m spent.</p> <p><b>Developed a network of Warm Spaces and Places - NCT with VCSE partners</b> which complement the network of <a href="#">Warm Hubs supported by Community Action Northumberland</a></p> <p><b>Developed a <a href="#">Warming Homes Information Resource for Professionals</a> - Warm Homes Group (multi agency group)</b></p> <p>Enabled frontline staff to navigate support and advice available for residents, helping residents to stay safe, warm and well at home and provided links to efficiency improvements</p>

<p><b>3. Maximise take up of retrofit measures</b></p>	<p><b>Major Repairs Reserve (MRR)</b>, through the Chronically Sick and Disabled Persons budget - NCC</p> <p><b>Dedicated Housing Occupational Therapist</b></p> <p>560 adaptations to council-owned dwellings, enabling those living with disabilities to remain in their own homes.</p> <p>Additional three one bed accessible 55+ units in Allendale.</p> <p><b>Major Repairs Reserve (MRR), Social housing decarbonisation fund (SHDF), Government funding schemes (LAD SHDF, HUG) - NCC, Registered Providers.</b></p> <p>Improving energy efficiency of housing stock (NCC 783/8563 homes 9.1%)</p> <p><b>Energy Company Obligation (ECO) scheme - Privately owned or privately rented properties, not in receipt of qualifying benefits</b> Improving energy efficiency of homes (324 homes)</p> <p>Allocated funding to reduce health inequalities, increasing capacity of advice services through an Energy Plus pilot for residents with long term health conditions to link them to energy advice and retrofit measures - Integrated Care Board and NCC Public Health</p>
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**Priority 2 Housing - Supporting people to living independently for as long as possible through regulations**

<p><b>Commitment</b></p>	<p><b>Actions Achieved</b></p>
<p><b>1. Consider needs of older/disabled people to live independently</b></p>	<p>Empty three-bedroom wardens house in Allendale, have been converted to create 3 one-bed units for residents over 55. The Housing Occupational Therapist continues to work closely with the teams delivering all improvement works to the Council's housing stock to ensure that the needs of the tenants are considered and included within the work specifications where possible. Four further properties are anticipated to be completed in the next 18 months, providing a further 42 flats across Bedlington, Morpeth, Berwick and Alnwick. October 2023 70 people are currently seeking independent living accommodation.</p>
<p><b>2. Use Local Plan to create healthier places</b></p>	<p>Adoption of the <a href="#">Northumberland Local Plan</a> in March 2022 included Strategic Policy (STP) 5 – Health and wellbeing (P57) and TCS 6 – Hot Food Takeaway (P115), supporting initiatives aimed at improving health and wellbeing. The <a href="#">guidance for application</a> requires all applications to provide a <a href="#">Healthy Planning Checklist</a>, and large-scale major applications for 100 or more residential dwellings/housing units or 10,000sqm (non-residential) floor space or minerals and waste applications to provide a Health Impact Assessment.</p>

<b>3. Maximise Disabled Facilities Grant take up</b>	Since January 2022, the MRR has funded around 560 adaptations to council-owned dwellings through the Chronically Sick and Disabled Persons budget, which includes the installation of 74 level access shower installations as well as major works to create additional living space to 3 homes.
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**Priority 3: Increasing the number of people with long term health conditions moving into and sustaining work.**

<b>Commitment</b>	<b>Actions achieved</b>
1. Continue to develop opportunities to integrate employment and health services	<p>Employment and Skills Partnership established to improve coordination of employment support system and health services.</p> <p>Development of Combined Authority and ICB (Integrated Care Board) Work and Health Strategy which is recommended for inclusion in Northeast Mayoral Combined Authority work programme.</p> <p>Delivery of the Work and Health Programme (branded Better Working Futures) through Northumberland Skills Employability Team.</p>
2. Employer focused interventions to improve recruitment/retention of people with long term health conditions	<p>Mange examples from individual employers including Northumbria’s Community Promise and Bernicia Housing.</p> <p>Employed Engagement Coordinator in Advance Northumberland to support employers to develop inclusive recruitment processes.</p> <p>The Better Health at Work Award supported by TUC and Public Health have resulted in 135 Northumberland workplaces covering 80112 employees achieving the award (33 Bronze, 26 Silver, 16 Gold, 12 Continuing Excellence, 48 Maintaining Excellence and 13 Ambassador Employers.</p> <p>The North of Tyne Combined Authority Good Work Pledge seeks to improve employer practices in supporting people with health conditions and disabilities. However, still requires greater focus to increase reach. 129 businesses accredited in the North of Tyne area, 12 are in Northumberland.</p>
3. Support carers into work/sustain work.	<p>Employment support delivered through partnerships (Bridge Northumberland, North of Tyne Working Homes etc.) supported economically inactive people, including those with caring responsibilities, into training and work.</p> <p>Return to Work Carers project, funded through Combined Authority, delivered by Carers Northumberland. Employment supported integrated with wider carer support.</p> <p>Individual organisations HR practices and carers policies.</p>

4. Support over 50s into work/sustain work.	No activities are commissioned specifically for this age group, but many service users of this age will access commissioned employment programmes delivered in partnership to 2023 (Bridge Northumberland, North of Tyne Working Homes) included support for 50+ (as do mainstream national commercial programmes – Restart, Work and Health Programme etc)
5. Support users of Mental Health and therapy services into work	<p>Mental Health Trailblazer (Individual Placement and Support in Talking Therapies) ran until 2019, during this time 1,450 people received support with their employability and skills while receiving talking therapies. Over 270 had moved into employment by the end of the project. Since the end of the pilot the learning has been taken forward as part of the Work &amp; Health Strategy (see point 1) and we are awaiting further info regarding national roll out.</p> <p>CNTW (Cumbria, Northumberland, Tyne and Wear) continue to deliver IPS (Individual Placement Support) in secondary care.</p> <p>Coordination of employment support with VCS wellbeing and therapy services (Cygnus Support etc.).</p> <p>Review of employment support and mental health services integration evidence and options as part of the North of Tyne Work and Health strategy. It is anticipated the strategy will be taken forward with ICB and Northeast Mayoral Combined Authority.</p>
6. Actively engage with employers to promote good work	<p>North of Tyne Good Work Pledge (See point 2 above)</p> <p>Advance Northumberland – recently appointed employer engagement lead – promote Good Work Pledge and support employer recruitment and retention practices.</p> <p>Early discussions with Major Employer Forum to share good practice, identify support required and improve standards.</p>
7. Progression from low wage economy	<p>Regeneration initiatives such as Borderlands Inclusive Growth Deal, Energising Blyth, Ashington Town Deal and Rural Investment Plan</p> <p>Deliver skills and training for residents that meets their ambitions and supports Northumberland’s business future workforce needs e.g., Energy Central Campus, Skills for a low carbon economy.</p>

**Priority 4: Ensuring local transport policy delivers on providing resilient, flexible, and sustainable transport options across the county, particularly rural areas.**

<b>Commitment</b>	<b>Actions Achieved</b>
<b>Improving Equity of Access to Public and Community Transport</b>	<p><b>Northumberland Line</b> is projected to open to passengers in 2024. The construction of the line has created nine new apprenticeships for local people and 93 full time equivalent local jobs so far.</p> <p><b>Public and Community Transport Health Needs Assessment</b> ongoing (Mapping of current services, holding focus groups within</p>

	<p>communities, review of other models of public and community transport national and internationally) Completion target Dec 23.</p> <p>In March 2023, NCC agreed to participation in Northeast Enhanced Bus Partnership and Scheme which is a statutory partnership between local Transport Authorities, and bus operators which identifies a clear vision for bus service improvements and the standard to be met by local authorities and bus operators. This was necessary to unlock significant national funding to support new ticketing products and local bus service improvements and improved reliability and speed of bus routes, demand responsive transport in rural areas, park and ride schemes, and improved customer information.</p>
<p><b>Increase children and young people's active travel.</b></p>	<p><b>Transport behavioural change activity</b></p> <p>The <b><u>Schools Go Smarter initiative</u></b> promotes sustainable and active travel to teachers, children and parents. Schools are provided with support and information via the Councils website and monthly newsletters.</p> <p>NCC continue to support and fund school travel plan engagement via <b>MODESHIFT STARS</b> which is a national school's awards scheme that recognises excellence in schools moving to cleaner and greener ways to travel. Allendale Primary School won North East Primary School of the year in 2022 and <u>Stannington First School in 2023</u>. 3 schools have silver accreditation (52 hold this nationally).</p> <p>Schools are encouraged to take part in national events e.g., Walk to School Week, Bike Week, Walk to School Month, The Big Pedal as well as local events such as Love Northumberland and bespoke activities with individual schools.</p> <p>Parents are also engaged in discussing family travel habits and practical alternatives.</p> <p><b>Safer Routes to School</b> Programme has delivered 7 school street schemes and other infrastructure improvements around schools.</p> <p><b>Road Safety</b> training is also delivered as part of active travel interventions.</p> <p>NCC continue to fund the <b>Ride Leader Training</b> programme to support schools to develop their own cycling projects.</p> <p>Good practice in schools is celebrated via the <b>Big Northumberland Gear Change</b> Channels.</p> <p>NCC cycle libraries continue to allow schools and community groups free access and extended loan periods of cycles.</p> <p>For Autumn 2023 NCC is launching cycle libraries accessible for residents seeking further educational and employment opportunities, again for extended loan periods.</p>
<p><b>Increase walking and cycling</b></p>	<p>In 2020 Northumberland and Walking Cycling Board have published <u>Our Way</u> which sets out Northumberland's ambition to encourage</p>

**through local infrastructure improvements and behaviour change approaches.**

more people irrespective of their age and background to walk and cycle more. It aims to attract increased investment to support walking and cycling in our County.

Delivery of Local Cycling and Walking Improvement Programme, many of these schemes are at consultation/design phases with delivery between 2023- 2025 -2025 which have included schemes in Ponteland to Callerton, Hexham to Corbridge, Bedlington, Ashington, Bondicar Terrace to South Beach, Blyth Seaton Delaval.

The Big Northumberland Gear Change was launched as a campaign to encourage walking and cycling, the website provides information to residents.

NCC have partnered with Wheels for All to deliver taster events for residents to try adapted cycles and get involved with including cycling opportunities.





## Northumberland County Council

Health and Well-being Board

Thursday, 14 December 2023

### Poverty and Hardship

**Report of Councillor(s)** Cllr Veronica Jones, Cabinet Member for Improving Public Health and Wellbeing

**Responsible Officer(s):** Gill O'Neill, Executive Director for Public Health (DPH), Inequalities & Stronger Communities

#### 1. **Link to Key Priorities of the Corporate Plan**

This report is relevant to the following priorities in the NCC Corporate Plan 2023-26:

- Achieving value for money: Ensuring best use of resources.
- Tackling Inequalities: Working collaboratively to support residents soonest and to greatest effect.
- Driving Economic Growth: Building on strengths and connections to enable residents to see and access opportunities available to them.

#### 2. **Purpose of report**

To update on the progress of the Poverty and Hardship plan.

#### 3. **Recommendations**

Health and Wellbeing Board is recommended to consider and comment on progress described in this report.

#### 4. **Forward plan date and reason for urgency if applicable**

Not applicable

#### 5. **Background**

**5.1** The Poverty and Hardship Plan - Section 4.5 of the System Inequalities plan - is Northumberland County Council's response to financial hardship and cost of living pressures.

**5.2** This work aims to keep residents to stay safe and well while enduring cost of living pressures and to prevent further widening of the inequalities gap, supporting the longer-term preventative and proactive measures in the wider system inequalities plan.

**5.3** Previously agreed (HWB OSC 6<sup>th</sup> September 2022 and HWBB 8<sup>th</sup> September 2022) that £1m from the Public Health reserve be available to support the council's implementation of a Poverty and Hardship Plan.

**5.4** The plan was developed and is delivered with representation from key areas of the Council and the Voluntary, Community, and Social Enterprise sector (VCSE). Priorities drawn from Public Health prioritisation exercise: 'aim to reduce inequalities' and 'local need', 'evidence of impact/ effectiveness', and 'prevention'. It includes relevant reports of Holiday Activity and Food investment (£1.02m) and Household Support Funding (£4,960,660)

### **a) Population Health Management funding**

In addition to the Public Health reserves, £1 million was committed to NCC by Northumberland Clinical Commissioning Group (now Integrated Care Board) via section 256 agreement.

**i** £430K allocated to Population Health Management/Health Inequalities Fund for communities (£250,000), and Creative Health Strategic Manager.

**ii** November 2022 System Transformation Board agreed proposals for £570K cost of living funding for;

- Additional Citizens Advice Capacity, including community assessor training to maximise reach into targeted communities.
- Make Every Contact Count wellbeing trainer (2 years funding) - in post since July 2023.
- Additional resources to Energy Pathway support, and targeted energy support to vulnerable households, including assertive outreach campaign with Primary Care.

**iii** Governance: The Section 256 funding and the Poverty and Hardship plan sit within the Inequalities plan and report therein.

### **b) Areas of focus for the plan:**

The poverty and hardship plan focuses on

- hardship support including Household Support Fund, food, fuel and warm homes,
- mitigating the impact of poverty and cost of living on children and young people,
- building resilience in our households and communities.

Northumberland is an asset and opportunity rich county; the plan supports our aspiration that all residents can live their best life. Understanding our challenges and strengths and working together to build solutions is key.

### **c) Working with knowledge:**

The council has access to information and data which can ensure the greatest impact and best value from limited resources available. To maximise this, we have:

**i** Purchased one year of access to LIFT tool (Low Income Family Tracker) that combines a welfare policy analytics engine with local authority data to identify financially struggling

residents, design appropriate interventions, and track the effectiveness of these interventions.

ii Development of a poverty and hardship data dashboard combining mixed source available information to give insights into household expenditure and current costs.

iii The dashboard and LIFT tool allows data, planning and reporting to link together through an inequalities lens to support the best value arrangements across the system, reducing duplication, and building partnership and place based longer term solutions.

**d) Financial pressures on households with low incomes:**

i The impact of inflation which for housing fuel and water peaked at 11.8% in January, food prices rose by 19.2% in June – the highest for 45 years, while inflation is coming down (today 6.7% but long term average is 2.8%) prices are not following at pace. Interest rates remain high at 5.25% affecting residents with mortgages renewing in 2023-24.

ii Average weekly wages at £543 compared to £613 in England and £539 in the North East. Households are spending an average of 16% more on housing, fuel and water, and 27% more on food. Northumberland has a 5.7% unemployment rate (national 3.6%). Around 21,000 households claim Universal Credit (UC).

iii 31% of Northumberland children are living in poverty, two thirds of these live in a working household.

iv There are 11,100 children in Northumberland living in families with UC debt deductions (58% of all children living in UC households), losing an average of £75 per month from their entitlement – or a collective total of £420,000 a month across the county.

v Free School Meal (FSM) entitlement is for families earning less than £14,000 per year on UC, or £16,190 per year on Child Tax or Working Tax credit. Low income is defined as 60% of the median which in the current year is £19,134.00. 10482 Northumberland children are eligible for FSM.

vi Rural residents typically spend between 10-20% more on everyday requirements than those living in urban settings, despite average wages being some 7.5 per cent lower

**e) Household Support Fund (HSF)**

i Household Support Fund is to provide crisis and financial support to households in most need with food, fuel, and essentials. This fund is particularly for residents not entitled to other government support.

ii To date 26,317 households have been supported to the value of £1,523,310.00 from the current HSF award.

14,758 households with children

7,206 households with a disabled person

1,828 households with pensioner

iii By volume most awards were made ahead of school holidays to families with children entitled to Free School Meals (18,997 awards), followed by energy and fuel support (2,818), food support (2,519), and energy essentials and wider essentials (1,983).

More than £1m of awards were made in vouchers.

iv Increasing Citizens Advice Northumberland capacity – CAB currently manage £6m+ in debt, in the last year worked with 3,199 clients, more than 1,800 in relation to cost of living.

v A Financial Wellbeing collaborative has been initiated working with the Community Bank, Citizens Advice, and key stakeholders from all sectors. Using the Money and Pensions Services Financial Wellbeing strategy the group will first produce a simple pathway early in 2024 for residents to navigate the financial wellbeing advice and support available across the life course, from education, to savings, debt, credit, and resilience.

#### **f) Warm spaces and pop ups**

The warm spaces network is live ahead of winter with 102 spaces registered and offering a warm and social space to residents across the county, and an additional 50 in the process. In line with Inequalities Plan question 2 - “What can communities do with a little help” - community embedded staff continue to work alongside our warm space network, and others to take forward initiatives that build cohesion and resilience at place.

i Northumberland Frontline and NCC are currently adding the 2023-24 warm spaces to their library and websites.

ii Northumberland Communities Together have worked with housing colleagues, and community partners to plan 111 cost of living information pop ups at venues across the county and using the council’s community action vans. These events will be live on the Council’s website mid-November.

#### **g) Access to fresh and affordable food**

i Food is the highest demand from Northumberland Communities Together (NCT) with a third of weekly calls (average 209) regarding food. Citizens Advice reports similar increases for crisis support managing an average of 1,200 cost of living related issues per month for clients, predominantly crisis and charitable support.

ii NCT work with Northumberland Nourish Food Network, foodbanks, and other food provision to ensure support is sustained while demand remains high, and that insights from this work contribute to future planning for more resilient approaches to food insecurity.

iii Local and household factors affect the cost of living and specific pockets of deprivation influence levels of food insecurity. Well planned local design can address food insecurity, for example, access to advice available, and the type and availability of support, and understanding who is at greatest risk.

iv Across the county 20+ food based resilience building pilot activities are in place including community lunch clubs, breakfast meet ups, growing walls, after school food, homework clubs, and community fridges. We commit to identifying best practice in addressing food affordability and access to healthy food.

v The National Food Strategy recognises the positive role of Local Food Partnerships. Northumberland's food partnership – Nourish - is a cross sector network supporting developments that prevent food insecurity and show good sense socially, economically, and environmentally.

**h) Food insecurity and children:**

i Northumberland County Council committed to continue supporting families eligible for Free School Meals during school holidays issuing HUGG supermarket vouchers to 10482 children/families (3,724 Children with Special Needs and Disability) via schools to the value of £250 per child across the 6 holiday periods (over 2 Household Support award periods).

ii 2024 pilot “auto enrolment” Free School Meals meaning entitlements in place at the earliest time giving families and schools access the national financial support available.

iii Northumberland Holiday Provision (HAF) includes lunch, delivery is local and with more than 9,000 children attending activities or camps in 2022, efficacy rate for Free School Meal children is around 43% - 62% varying per holiday, (the national average efficacy varies from 17% to 32%).

iv Healthy Start vouchers provide families with support towards fruit, vegetables, milk and vitamins. Current uptake is 71% of 2,468 eligible families: LIFT tool informs where best to promote. Targeted awareness raising via partners, leaflets and social media launches in December with uptake tracking.

**i) Warm Homes – Energy Pathways:**

i Fuel poverty is driven by low incomes, high energy prices and energy inefficient homes. Households are fuel poor if after accounting for fuel costs households are left with a minimal income. We also see correlation between fuel poverty and debt.

ii Northumberland Energy Pathway makes up around 30% of the current Household Support Fund projected spend (£1.4m). Residents can access energy support and resilience measures administered by Citizens Advice energy team. More than 800 residents have been supported to the value of £208,941 through income maximisation in addition to projected household savings of £91,715 from energy advice.

iii **Energy Pathway Plus** (Warm Homes on Prescription) prioritises households adversely affected by cold homes for energy efficiency and support interventions. This work is a collaboration between NCT, CAB, Community Action Northumberland, NCC Environment team, Public Health, and Primary Care, including the additional investment from Integrated Care Board (see 4.6)

iv To date a small number of residents have met criteria for the energy pathway plus with additional measures to their homes to the value of £22,601. We expect demand to increase over winter months and with the support of the warm homes network and working more closely with Primary Care for data led intervention (supported from ICB funding).

**j) Giving children and young people the best start in life:**

i For the best start in life children must be able to see and access opportunities available to them. The plan acknowledges the significant support activity across the county but notes barriers to children and young people accessing education, enrichment, and gaining key life skills to build their futures.

## **ii Eat Sleep Play Learn fund**

This funding has four broad categories: eating, sleeping, playing, and learning. 170 awards have been made to date to the value of £29,483 directly benefiting children and young people – most awards are for beds, bedding, clothes, and uniform items.

## **iii Holiday Activity and Food Programme (HAF)**

Department for Education funded (£1.02m for Northumberland p/a), HAF is designed to remove pressures from families during school holidays and provide food, and fun, enriching activities for children entitled to Free School Meals. Northumbria University evidenced that every £1 spent on HAF added £11 in wider social benefits for families.

**iv** Securing additional funding from National Lottery Community Fund has enabled Northumberland to expand our community led offer to include children experiencing other barriers such as bereavement, disability, or social and emotional factors.

**v** In 2022 9,965 children and young people attended HAF camps and activities, 883 with Special Educational Needs / Disability over all three holiday periods. To date 5,300 children collectively attended more than 23,000 sessions in 2023. This year Northumberland HAF focused on developing a teen programme (HAF+) to date there have been 6 teenager camps with 1,395 teenagers attending HAF overall.

**vi** Northumbria University's external evaluation of Northumberland's HAF provision documents a well-coordinated programme making significant difference to children's wellbeing, self esteem, and school readiness.

### **k) Mitigating poverty in an education setting:**

**i** Proposals were invited from education colleagues – early years through to Further Education – that responded to local need, reduced inequalities, incorporated prevention, built upon community strengths and offered value for money.

**ii** To date proposals to the value of £177,000 have been funded –

8 school led interventions addressing the inequality gap in attainment and supporting children to stay in school.

3 proposals are out of school activity- rural youth provision, a listening exercise to capture the views of young people in Ashington, and emotional wellbeing programming.

£60,000 for 2 years of Globalbridge support – a CV builder tool effective in showcasing alternative and vocational skills and readiness for work.

**iii Education family support role:** additional capacity to work with children and young people at risk of missing school because of Domestic Abuse, Poverty/homelessness, or matters arising from Protected Characteristics. This role will ensure the soonest continuation of education for the young person.

### **l) Community resilience:**

Local relationships and access to reliable information help residents feel secure and able to manage. Ensuring good information is available, and building resilience, knowledge and capacity in communities builds on Empowering Communities and System Inequalities Plan.

i Cost of Living website published November 2022 and ongoing expansion of Frontline library. 14000 residents have viewed NCC cost of living support, and more than 200 entries on Frontline library with more than 2,000 referrals or signposts made. Frontline is commissioned in partnership with Integrated Care Board (ICB), Thriving Together, and the Council.

ii Citizens Advice community advice model increased to expand support available across Northumberland, including the additional investment from ICB for targeted training to VCSE organisations and Primary Care. Since May in Primary Care this training has benefitted 37 patients from Blyth and Ashington to the value of £127,000 and improved the housing circumstances/prevented homelessness for a further 4 households.

iii Make Every Contact Count wellbeing trainer, funded by the ICB, has been in post since July and to date has attended networks and meetings across the county building confidence in talking about money and finance. Working with the FWB group to add value to the pathway development for residents and to take this work forward with a training plan.

iv Appointed 4 additional locality based fixed term staff to further embed asset-based community development approaches.

**m) Rural advocacy:**

Poverty, work, housing, and access to services are all experienced differently in rural settings. This role, embedded in Glendale Community Trust supports residents, and champions initiatives that serve our rural communities and contribute to the development of rural strategy and Combined Authority to ensure Northumberland's unique situation is articulated in regional policy.

**n) Employability on a page:**

Cross sector employability network to create a live Northumberland wide employment and training pathway in one place – easier to navigate for colleagues and residents. This simple tool will be made available to all partners early in 2024.

**o) Reading for Wellbeing (R4WB):**

Building on the Ann Cleeve initiative the R4WB project workers are being supported by a refreshed steering group to reach into local communities and build capacity in the form of hyper local reading champions for adults and children.

**p) Population Health Management/ Health Inequalities Fund**

As noted in 4.6 £250,000 funding has been allocated to the VCSE sector in Northumberland to support communities to test new activities and interventions that improve health and life chances in Northumberland.

i This process is managed by the Council's VCSE Support Contract holder – Thriving Together. The fund was launched on 4th May 2023 and 10 awards were agreed on 7<sup>th</sup> June by a cross sector panel to the value of £199,755.00. Awards were confirmed to applicants on 15<sup>th</sup> June and delivery period is 1<sup>st</sup> July 2023-31<sup>st</sup> December 2024.

ii Successful proposals were in relation to young people and substance abuse, neurodivergent women, drama for older residents, biking and employability, sensory

impairment, legal advice for life limited patients, health literacy and digital skills, and social isolation.

**q) Poverty and Hardship over coming months**

A reserve of £50,000 is in place to be able to respond to needs arising given the current circumstances. The planning group continue to meet and work the plan monthly, an insights session is in planning for early 2024 for wider stakeholders.

**6. Options open to the Council and reasons for the recommendations**

6.1 Health and Wellbeing Board is recommended to consider and comment on progress described in this report.

**7. Implications**

<b>Policy</b>	Joint Health and Wellbeing Strategy and Corporate Plan. VCS Liaison Group “Working in and with VCSE in Northumberland” Northumberland Children and Young People’s Plan “Partnership’s hopes and ambitions for young people in the future.”
<b>Finance and value for money</b>	Represents good value for money, ensuring best use of limited resources, and insights for future decision making
<b>Legal</b>	There are no legal issues in relation to this report
<b>Procurement</b>	Compliant with procurement process
<b>Human resources</b>	Input from Public Health, Education, Childrens Social Care, and Northumberland Communities Together staff – within existing roles. Additionally supported by VCSE contract holder Thriving Together (in current roles and contract arrangements)
<b>Property</b>	N/A
<b>The Equalities Act: is a full impact assessment required and attached?</b>	No Addresses wider inequalities including wider determinants of health inequalities. Works to open opportunities, maximise income, and increase information and knowledge sharing. Informs narrative, understanding, and solutions regarding communities and households experiencing poverty and disadvantage



<b>Risk assessment</b>	N/A
<b>Crime and disorder</b>	Inroads to mitigating poverty and working at place level should have positive impact on crime and disorder over time
<b>Customer considerations</b>	Ensuring information and support is appropriate, effective, and accessible to customers, and best value for money is key to this plan
<b>Carbon reduction</b>	Builds on hyper local and local activity, using existing assets
<b>Health and wellbeing</b>	The funding is to improve the health and wellbeing of residents of Northumberland
<b>Wards</b>	(All Wards);

**8. Background papers**

Not applicable

**9. Links to other key reports already published**

- [The Poverty and Hardship Plan - Section 4.5 of the System Inequalities plan](#)
- [Proposals for the allocation of the Public Health ring-fenced grant reserve to reduce health inequalities](#)

**10. Author and Contact Details**

Emma Richardson, Senior Manager Specialist Services - Poverty Lead  
 Email: [Emma.Richardson@northumberland.gov.uk](mailto:Emma.Richardson@northumberland.gov.uk)

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# **NORTHUMBERLAND COUNTY COUNCIL**

## **HEALTH & WELLBEING BOARD**

### **FORWARD PLAN 2023 - 2024**

Lesley Bennett, Senior Democratic Services Officer  
Tel: 01670 622613  
E-mail [Lesley.Bennett@northumberland.gov.uk](mailto:Lesley.Bennett@northumberland.gov.uk)

Updated : 4 December 2023

## FORTHCOMING ITEMS

ISSUE	OFFICER CONTACT
<b>14 December 2023</b>	
<ul style="list-style-type: none"> <li>• Poverty and Hardship Plan – System Working</li> <li>• Joint Health and Wellbeing Strategy                             <ul style="list-style-type: none"> <li>• Wider Determinants</li> </ul> </li> </ul>	Emma Richardson Rob Murfin/Liz Robinson
<b>11 January 2024</b>	
<ul style="list-style-type: none"> <li>• Housing and Health</li> <li>• Family Hubs</li> <li>• Healthy Families Partnership Board/0-19 Service Annual Review</li> <li>• Pharmacy Services - Blyth</li> <li>• Health Protection Assurance and Partnership Board</li> </ul>	Rob Murfin/Anne Lawson Graham Reiter Ashley Iceton Anne Everden Jon Lawler
<b>February 2024</b>	
<ul style="list-style-type: none"> <li>• Public and Community Transport Health Needs Assessment</li> </ul>	
<b>March 2024</b>	
<ul style="list-style-type: none"> <li>• Refreshed Joint Health &amp; Wellbeing Strategy</li> <li>• Director of Public Health Annual Report – Ageing Well</li> </ul>	Gill O’Neill/Luke Robertshaw

## MEETING DATE TO BE CONFIRMED

<ul style="list-style-type: none"> <li>● Sexual Health Strategy</li> <li>●</li> <li>● Urgent and Emergency Care - Strategic Care</li> <li>● Child and Adolescent Mental Health</li> <li>● Pharmacy Update Blyth, Prudhoe, Ashington – NOV/DEC</li> <li>● Safe Haven, Ashington</li> <li>● Healthy Families Partnership Board Update/0-19 Service Annual Review</li> </ul>	<p>Ann Everden</p> <p>Jon Lawler/Russell Nightingale</p>
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## REGULAR REPORTS

<p><b>Regular Reports</b></p> <ul style="list-style-type: none"> <li>● Joint Health &amp; Wellbeing Strategy Refresh Thematic Groups – Update (Quarterly – Apr/July/Oct/Jan)</li> <li>● System Transformation Board Update</li> <li>● SEND Written Statement Update - progress reports</li> <li>● Population Health Management - (Oct/Jan/Apr/July)</li> </ul> <p><b>Annual Reports</b></p> <ul style="list-style-type: none"> <li>● Public Health Annual Report</li> <li>● Child Death Overview Panel Annual Report</li> <li>● Healthwatch Annual Report</li> <li>● Northumberland Safeguarding Children Board (NSCB) Annual Report and Update of Issues Identified</li> <li>● Safeguarding Adults Annual Report and Strategy Refresh</li> <li>● Annual Health Protection Report</li> <li>● Northumberland Cancer Strategy and Action Plan</li> </ul>	<p>Sir Jim Mackey/Siobhan Brown ?? Rachel Mitcheson</p> <p>Gill O'Neill (FEB) Paula Mead/Alison Johnson (JAN) Peter Standfield/Derry Nugent (JULY) Paula Mead (JAN)</p> <p>Paula Mead (JAN) (OCT) Robin Hudson (DEC/JAN)</p>
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<ul style="list-style-type: none"> <li>● Tobacco Control</li> <li>● Healthy Families Partnership Board Annual Report</li> <li>● Annual Report of Senior Coroner</li> </ul>	Kerry Lynch (DEC) Jon Lawler (SEP) Andrew Hetherington/Karen Lounten (JAN)
<p><b>2 Yearly Report</b></p> <ul style="list-style-type: none"> <li>● Pharmaceutical Needs Assessment Update</li> </ul>	(MAY 2024)

**NORTHUMBERLAND COUNTY COUNCIL  
HEALTH AND WELLBEING MONITORING REPORT 2023-2024**

<b>Ref</b>	<b>Date</b>	<b>Report</b>	<b>Decision</b>	<b>Outcome</b>
1	8.6.23	The Community Promise Update	Presentation received.	
2	8.6.23	Health Inequalities – Northumbria Healthcare NHS Foundation Trust	Presentations received	
3	8.6.23	Towards a Collaborative Approach to Reducing Inequalities in Employment Outcomes for our Population.	(1) Presentation received (2) Health & Wellbeing Board survey to be recirculated to Members	
4	8.6.23	Joint Health & Wellbeing Strategy	(1) Report received (2) Summary report to be provided for October meeting	
5	8.6.23	Integrated Care Board – Update	Update noted	
6	8.6.23	Better Care Fund	Retrospective report to be reported to August meeting.	
7	10.8.23	Annual Report of Senior Coroner	Report received	
8	10.8.23	Healthwatch Annual Report 2022/23	Report received	
9	10.8.23	Better Care Fund Plan 2023-25	(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	

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			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.	
10	10.8.23	Notification of Closure of 100 Hour Pharmacy in Cramlington	<p>(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.</p> <p>(2) a second supplementary statement was required to acknowledge the change in ownership of all Lloyds pharmacies in Northumberland.</p> <p>(3) an update report be submitted to the November/December meeting of the Board.</p>	
11	10.8.23	ICB Draft Joint Forward Plan	Report noted	
12	14.9.23	Northumberland and North Tyneside Community Infection Prevention and Control Strategy 2023-28	<p>(1) the new Northumberland and North Tyneside Community Infection Prevention and Control Strategy be accepted.</p> <p>(2) the strategy goals and actions to achieve those goals be approved.</p>	



13	14.9.23	Healthy Weight Alliance	<p>(1) the establishment of Northumberland HWA be approved to bring agencies and communities together to ensure a co-ordinated approach to healthy weight.</p> <p>(2) the Northumberland HWA report to the Health &amp; Wellbeing Board.</p> <p>(3) Responsibility be delegated to the HWA to deliver the Healthy Weight Declaration.</p>	
14	14.9.23	CNTW New Strategy 'With You In Mind'	<b>RESOLVED</b> that the ethos and ambition of the Trust's new strategy be noted, in particular, the commitment to partnership working across the Health & Social Care system.	
15	12.10.23	JHWS Refresh – Adopting a Whole System Approach to Health and Care	<p>(1) Note the achievements described in the report</p> <p>(2) Agree proposed amendments to priorities, actions and indicators or evince of achievement of the theme.</p>	
16	12.10.23	JHWS Refresh – Giving Children and Young People the Best Start in Life	<p>(1) Note the achievements described in the report</p> <p>(2) Agree the proposed amendments to the name of the theme, priorities and associated actions.</p>	
17	12.10.23	Thriving Together – VCSE Sector Update	Presented received.	
18	9.11.23	JHWS Refresh – Empowering People and Communities	<b>RESOLVED</b> that the proposed amendments outlined in the report be approved.	
19	9.11.23	Northumberland Tobacco Control Partnership Annual Update 2023	<b>RESOLVED</b> that the development and progress of the Northumberland Tobacco Control Partnership during 2023 be noted.	

20	9.11.23	Update on Promoting Better Mental Health and Wellbeing in Northumberland	<b>RESOLVED</b> that the wide range of multiagency work which has been undertaken to promote better mental health be noted.	