

## NORTHUMBERLAND COUNTY COUNCIL

### HEALTH AND WELL-BEING BOARD

At a meeting of the **Health and Wellbeing Board** held in County Hall, Morpeth on Thursday 13 April 2023 at 10.00 a.m.

#### PRESENT

Councillor P. Ezhilchelvan  
(Chair, in the Chair)

#### BOARD MEMBERS

Bradley, N.	Reiter, G.
Brown, D. (Substitute)	Sanderson, H.G.H.
Nugent, D. (Substitute)	Simpson, E.
O'Neill, G.	Syers, G.
Pattison, W.	Watson, J.
Phelps, P. (Substitute)	

#### ALSO IN ATTENDANCE

Ferguson, D.	Deputy Cabinet Member
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#### IN ATTENDANCE

A . Bell	NENC ICB Northumberland Place
L.M. Bennett	Senior Democratic Services Officer
D. Cummins	NENC ICB Northumberland Place
K. Higgins	Employability & Inclusion Manager
P. Hunter	Senior Service Director
P. Lee	Public Health Consultant

#### 140. APOLOGIES FOR ABSENCE

Apologies for absence were received from Graeme Binning, Alistair Blair, Julie Boyack, Rachel Mitcheson, Hillary Snowdon and David Thompson.

#### 141. MINUTES

**RESOLVED** that the minutes of the meeting of the Health and Wellbeing Board held on 9 March 2023, as circulated, be confirmed as a true record and signed by the Chair.

## **142. TOWARDS A COLLABORATIVE APPROACH TO REDUCING INEQUALITIES IN EMPLOYMENT OUTCOMES FOR OUR POPULATION**

To receive a report introducing the topic of 'Health and Work' and providing background information to prepare for a discussion at the Board. The discussion will focus on how organisations represented by the Board can work together to achieve better employment outcomes for those experiencing barriers to work. A copy of the presentation is filed with the signed minutes.

A presentation was given by Kevin Higgins and Pam Lee which set the context of this work and the need for Regeneration and Public Health to work together along with other partners to recognise the relationship between the health and work and reduce inequalities in the labour market. The following key points were made:-

- Post Covid, there was relatively weak employment growth, hard to fill vacancies and a shrinking labour pool. There was a noticeable trend in Economic Inactivity (people not in employment but not looking for work) and an increase in Economic Inactivity due to ill health.
- Data was showing that the labour force was shrinking which was impacting economic recovery. The workforce was also aging.
- Over 1.7 million people outside the workforce (particularly those with disabilities or caring responsibilities) wanted to work but were unable to without support.
- The economically inactive was a diverse group comprising those unable to work due to health/caring responsibilities, those who did not need to work and those who needed help to work.
- Nationally, the numbers of those inactive due to long term illness in the UK was increasing, whereas the trend was decreasing in other countries.
- Northumberland's unemployment rate was relatively low at 4.4%. However, of the economically inactive, 10,000 wanted to work. The main causes of long term sickness were mental health issues, muscular/skeletal conditions and diabetes. Graphs were shown of the trends since 2018.
- The system to improve economic opportunities was split into three areas
  - Anchor institutions – had a key role to play in their recruitment, retention and support practices and using their commissioning and social value powers.
  - Through good quality work – what employers could do through good quality work around improving accessibility and flexibility of work
  - Supporting those needing help to work – a better integration of employment support and health services was critical to ensure people had the support they needed and to meet employer demand.

The Board was invited to consider a number of questions on how to move this area of work forward. The following comments were made:-

- Vacancies could be difficult to fill. Covid had forced employers to think differently and move away from employees having to come into the office. Adaptations could be made to allow those having difficulties with

accessibility to work at home. It was acknowledged that the nature of some posts meant that they were not suitable for flexible or home working.

- Paid employment was very important for a person's self-worth but this should also be good quality jobs with good wages.
- Employment and health were important areas which needed to be looked at as part of the wider determinants within the Joint Health & Wellbeing Strategy (JHWS). It was important to work with the 10,000 who wanted to return to work to encourage them back. Board members all represented large organisations and it was their corporate social responsibility to look for ways to help people back into employment.
- It was suggested that each member discussed with their organisation with a view to coming back to the May meeting with robust answers to the questions to identify what was being done and the commitment to go further. Comments should be sent to Kevin Higgins or Pam Lee.
- Within Northumberland's Primary Care sector there were at least 40 different employers with which to discuss their corporate responsibility to make good decisions around recruitment and to best serve their communities. Was it fair or legal to recruit preferentially from somewhere where you may give the maximum benefit to the community? There would be discussions at the Primary Care Collaborative.
- People's lives were very complex and maybe there should be discussions with people who had already been helped or not helped by interventions.
- It was important to know whether what was being done was working, and if it was not working, so that it could be changed.
- How could the challenge be made achievable and targeted at cohorts of health and focus efforts on the 10,000 wanting to return to work? Recruitment strategies could be worked on to change the focus of recruitment and find the interested parties. Was there a correlation between younger people who were not entering the workforce and health and did this further refine how the problem was looked at?
- A breakdown of the figures into mental illness and physical illness would be helpful as the solution to get people back into the job market could differ between them. It was possible there was a 'benefit trap' currently, as there were plenty of applications for jobs but then few applicants actually attended the interview.
- Northumberland County Council was committed to tackling inequalities but there was still much work to be done. A clear and simplified action list would be helpful to see what work needed to be done, what had been done to see where a difference had been made.

**RESOLVED** that

- (1) receive the contents of the report be received and the recommendations of Northumberland's Inclusive Economy Joint Strategic Needs Assessment (JSNA) noted.
- (2) Board Members discuss with their respective organisations and feedback to a future meeting of the Health & Wellbeing Board.

Ch.'s Initials.....

*Health & Wellbeing Board, 13 April 2023*

### 143. JOINT HEALTH AND WELLBEING STRATEGY – THEMATIC AREAS REVIEW AND NEXT STEPS

To receive a verbal update and presentation from Gill O'Neill, Executive Director of Public Health, Inequalities and Stronger Communities to update Members on the next steps in the refresh of the Joint Health and Wellbeing Strategy (JHWS). A copy of the presentation is filed with the signed minutes.

The following key points were raised:-

- Four thematic areas of the JHWS had been identified and groups set up to review each. Inequalities Plan Compact had been signed by Member.
- Membership of the Board had been reviewed and expanded to include the Fire & Rescue Service, the Police and Northumberland County Council Regeneration.
- **Best Start in Life**
  - Working on strategic governance review of the Children's Strategic Partnership and the Health & Wellbeing and the interface
  - Family Hubs aimed to ensure that every child had the best start in life. Northumberland had trailblazer status. This was not just early years but 0 – 19 years.
  - On track to produce on set of common purpose core indicators later in the year.
- **Empowering Communities**
  - This was a complex area with many forums involved such as the VCSE Liaison forum, Thriving Together Inequalities Taskforce and NCT Partnership Board and Thriving Communities Sub Group.
- **Wider Determinants**
  - Three key areas; employment, housing and transport.
  - A new Executive Director would soon be in post and it was hoped that there would be more specific actions towards the end of the year.
- **Whole Systems Approach**
  - Integration of health and social care. The membership and terms of reference of the System Transformation Board had been refreshed. There would be consideration of the interface between the Health & Wellbeing Board and the ICB Place Board.
  - A time limited working group would be set up to ensure progress and this would be aided by the new stability with the appointment of Executive Directors in Northumberland and the ICB Place Based Strategy coming online. It would be important to avoid duplication where possible.
  - By June 2023, each thematic area should have reviewed actions in the current plan and provided an update on achievements and proposed 'refreshed' actions/indicators.
  - By August/September 2023 a report highlighting work done to date, proposed new actions and refreshed indicators should be produced. The aim would be to publish the refreshed JHWS by the end of the year.

**RESOLVED** that the presentation be received.

#### **144. POPULATION HEALTH MANAGEMENT**

To receive a verbal update and presentation on Population Health Management from Alan Bell and David Cummins, NENC ICB Northumberland Place. A copy of the presentation is filed with the signed minutes.

The following key issues were raised:-

- National, Regional and Local Direction involved building an infrastructure and gathering intelligence and putting the right interventions in place. NHS England had recently released 'Tackling Neighbourhood Health Inequalities' guidance and asking PCNs to establish a Health Inequalities Lead to champion and take direct action at local level. Regionally, data sharing platforms were being looked at and Northumberland was seen as an exemplar. Locally, PCNs would have further resources to deliver local projects.
- Details were provided of local projects being carried out by several PCNs
- **Wansbeck PCN** was focusing on child poverty in the Hirst, Bedlington East and Choppington Ward. A new Children's Link Worker was to be appointed. The new Family Hub was being well used and 'Wellbeing Wednesday' events were being held weekly. A well-attended Wellbeing Event had been held on 21 March 2023 to raise awareness of what was going on and of groups in the community.
- **Blyth PCN** was focusing on under 5s' A & E attendances and the reasons behind them. Rates of attendance had been found to be highest in the Cowpen and Kitty Brewster wards and were predominantly male. Most attended Cramlington NSECH with others going to Wansbeck Urgent Care Centre. A Working Group had been set up involving Public Health, Healthwatch, Family Hubs and Early Health. Invitations had been issued to parents to attend discussion groups, focusing on vulnerable groups.
- **Cramlington & Seaton Valley PCN** was focusing on patients aged 35-65 living in IMD 1 and diagnosed with depression and either CVD/COPD. Patients had been written to and invited to take part in the project including analysing smoking cessation, uptake of vaccine and pulmonary rehab. Data on their A & E emergency attendances was also being analysed. Other areas of focus were NHS health checks, alcohol and learning difficulties.
- **Well Up North PCN** was focusing on obesity and piloting a project on Wooler and Amble. Sessions were being held on food choices, exercise, barriers, calories and labels and relapse prevention. Patients were reporting improved wellbeing in one or more categories such as weight loss and reduce waist circumference.
- Health Inequality – Fishermen project – This had been a successful joint project to engagement with fisherman on the quay side at Amble Harbour. Due to working long and unsocial hours fisherman were usually unable to access healthcare easily.

Ch.'s Initials.....

*Health & Wellbeing Board, 13 April 2023*

The following comments were made:-

- Many of the organisations which made up the Board membership were involved in one or more of the projects mentioned in the presentation. This had provided the environment which enabled project such as these to thrive. The Board's ongoing inequalities work was allowing these projects to have a different 'lens' and taking a slightly different slant.

**RESOLVED** that the presentation be received.

## **145. CORPORATE PLAN REFRESH**

Members received a verbal update and presentation from Philip Hunter, Senior Service Director, on the Corporate Plan refresh. A copy of the presentation is filed with the signed minutes.

The following key points were raised:-

- It was aimed to update the Board on how the Corporate Plan was being developed and redrafted, to give an overview on the three corporate priorities, and to raise awareness of the Corporate Plan with other organisations.
- The Corporate Plan was originally drafted in February 2022 but was now being redrafted because this was good practice and was an opportunity to reflect on and respond to the recommendations in last year's independent governance review.
- The three corporate priorities were Tackling Inequalities, Driving Growth and Jobs, and Value for Money. The slide outlined how the Corporate Plan would drive the organisation through service planning and set the context for budgeting. Tackling inequalities would be embedded across the Council.
- Outcomes and actions for each of the priorities was listed, along with impact on net zero sustainability and climate change
- **Tackling Inequalities**
  - Empowered and resilient communities
  - Children and young people have the best start in life and grow up well
  - Residents live and age well
  - The building blocks of a good life
- **Driving Economic Growth**
  - Thriving places and culture
  - A diverse and resilient economy
  - Skilled people
  - A connected county
- **Achieving Value for Money**
  - The best customer experience
  - Making the best spending decisions
  - Working better, more efficiently
  - Doing more through technology

The presentation on the Corporate Plan refresh was welcomed and it was acknowledged that it was important to align with other organisations. Newcastle Hospitals NHS Trust was refreshing its strategies currently and would welcome discussion with Northumberland as working with partners was a key part of its strategy.

**RESOLVED** that the presentation be received.

**146. HEALTH AND WELLBEING BOARD – FORWARD PLAN**

Members noted details of forthcoming agenda items at future meetings.

**147. DATE OF NEXT MEETING**

The next meeting will be held on Thursday, 13 April 2023, at 10.00 am in County Hall, Morpeth.

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

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