

## NORTHUMBERLAND COUNTY COUNCIL

### HEALTH AND WELL-BEING BOARD

At a meeting of the **Health and Wellbeing Board** held in County Hall, Morpeth on Thursday, 14 December 2023 at 10.00 a.m.

#### PRESENT

Councillor P. Ezhilchelvan  
(Chair, in the Chair)

#### BOARD MEMBERS

Binning, G.	Reiter, G.
Blair, A.	Rennison, S.
Bradley, N.	Sanderson, H.G.H.
Conway, A.	Standfield, P.
Jones, V.	Syers, G.
Lothian, J. (Substitute)	Waring, K (Substitute)
Murfin, R.	Watson, J.
O'Neill, G.	Wilkinson, G. (Substitute)
Paterson, L.	

#### IN ATTENDANCE

L.M. Bennett	Senior Democratic Services Officer
E. Richardson	Senior Manager Specialist Services – Poverty Lead
L. Robinson	Senior Public Health Manager

#### 43. APOLOGIES FOR ABSENCE

Apologies for absence were received from S. McCartney, V. McFarlane-Reid, H. Snowdon and Councillors W. Pattison, G. Renner-Thompson.

#### 44. MINUTES

**RESOLVED** that the minutes of the meeting of the Health and Wellbeing Board held on 9 November 2023, as circulated, be confirmed as a true record and signed by the Chair with the following addition:-

##### **Page 7, 8th bullet point**

That the following be added to the final sentence

Consideration should be given to which communities were not being heard from and which we could connect with better – communities in their widest sense, not just of place, but also communities of interest, experience, identity etc.

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

### TACKLING THE WIDER DETERMINANTS OF HEALTH

Members received a report updating them on the achievements made against this theme and were requested to review and agree priorities and actions for the period 2023-28, to review indicators used to measure progress and comment on national indicators and other measures to understand the qualitative impact of actions.

The report was presented by Rob Murfin, Director of Housing and Planning, Place and Regeneration, and Liz Robinson, Senior Public Health Manager.

The following key points were raised:-

- The 'Tackling the wider determinants of health' theme in the current Strategy included the following four priorities:-
  - Tackling fuel poverty by increasing the number of households with access to affordable warmth' and
  - Supporting people to live independently for as long as possible by maximising the use of building regulations.
  - Increasing the number of people with long term health conditions into and sustaining work.
  - Ensure local transport policy delivers on providing resilient, flexible and sustainable transport options across the county, particularly in rural area.
- The aims relating to the priorities were outlined, along with the success against indicators.
- Covid-19 had re-focused attention on inequalities and the building blocks of a good life. This along with the cost of living crisis had disproportionately impacted on those with lower incomes as a larger percentage of their income was used for housing, food and energy. There was a caveat regarding the data for the Covid-19 period as the Northumberland average masked inequalities.
- **Proposed Changes**
  - Change the name of the theme from 'Tackling the Wider Determinants of Health' to 'Building Blocks of Good Life'.
  - Priorities for housing broadened to include impact on health of wider strategic housing and planning issues and remained 'Healthy Housing and Planning'.
  - Fuel poverty indicator to be supplemented with Energy Efficiency Measures, housing affordability and overcrowding indicators.
  - Closing gap in employment outcomes for people with long term physical and mental health conditions and reducing economic activity linked to poor health/disability.
- **Refreshed Priority 1 - Healthy Housing and Planning**

- Supporting Healthy Neighbourhoods through Planning
- Blyth Deep Dive Housing and Healthy Housing Hub
- Hirst Housing Masterplan Phase One Implementation
- Available, Quality Housing
- **Refreshed Priority 2 – Inclusive Economy**
  - Supporting the economically inactive with long term health conditions to obtain and sustain good quality work.
  - Increase access to Good quality Work.
  - Maximise the economic levers of Northumberland’s Institutions to reduce inequalities.
  - Increase in impactful, volunteering and training opportunities for economically inactive.
- **Refreshed Priority 3 – An Inclusive Transport System**
  - Public and Community Transport is equitable, accessible and appealing.
  - Increase children and young people’s active travel.
  - Ensuring the built environment is conducive to active travel.
- **Measuring Progress**
  - New indicators – affordability of home ownership, overcrowded houses % of properties EPC Band C and above, % economic inactivity rate
  - Retained indicators – fuel poverty, % gap in employment rate between those with long term physical or mental health conditions and overall employment rate, % adults walking for travel at least 3x per week, % adults cycling for travel at least 3x per week.

The following comments were made:-

- Countries such as Holland and Belgium had quite aggressive policies for the provision of good cycling networks. These should also be provided as part of developments in the UK and Local Authorities should feel confident in refusing planning permission if they were not included.
- The Government was consulting on a new approach regarding S.106 agreements.
- Some provisions such as cycle paths were obviously welcomed by regular cyclists but it was important to also encourage others who may not already be active.
- There could be a knock-on effect on the price of houses if more community benefits had to be provided as part of planning approval.
- Design of environmental space must ensure that it is safe for the public to use. By planning ahead, the police force could ensure that it had resources in the right place. The police would be happy to work along with planners to ensure this happened.
- The change of name of the theme was welcomed. It was stressed that it was important to avoid the perception that this theme related only to healthcare facilities but instead related to a ‘good life’ in a broader sense. It was the conditions within which people were born, grow, live, work and age that had a much bigger impact on health and inequalities than

healthcare services and health behaviours. Good life included having good health.

- There was a sub population of people including early retirees and a wealthy aging population living in rural areas. Cycling to work etc. was not relevant here and in some rural areas was not feasible for anyone. The occupancy of large houses was also an issue as in rural areas there was often just a token provision of affordable housing. There needed to be affordable, downsizing opportunities. It was acknowledged that there were different issues affecting rural areas.
- Consideration should be given to the indicators beyond the national statistics which may suit Northumberland's population better.

## **RESOLVED**

- (1) to agree to the proposed amendments to the name of the theme, priorities, and associated actions; and
- (2) to note the comments 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.

## **46. POVERTY AND HARDSHIP**

Members were updated on the progress of the Poverty and Hardship Plan. The report was presented by Emma Richardson, Senior Manager Specialist Services – Poverty Lead.

The following key issues were raised:-

- The Poverty and Hardship Plan sat within the Northumberland Inequalities Plan and included funding agreed from the Public Health reserve and Integrated Care Board.
- The plan was produced by a group with representation from key areas of the Council and the voluntary, community and social enterprise sector.
- The Northumberland Community Centred Approach to close the inequalities gap had five principles and three questions:
  - Looking at everything through an inequalities lens
  - Voice of residents and better data sharing
  - Community strengths are considered first
  - Enhancing our services to ensure equity in access to opportunity.
  - Maximising our civic level responsibilities
  - What can communities do for themselves?
  - What might communities need some help with?
  - What can't communities do that agencies can?
- Pressures in households – included impact of inflation on food and energy, interest rates, average wages and spends.
- Working with knowledge – The council had access to information and data to ensure the greatest impact and best value from limited resources, LIFT

tool (Low Income Family Tracker), poverty and hardship data dashboard, reducing duplication and building partnerships and place based long term solutions.

- Poverty and Hardship Dashboard – showed expenditure on a range of commodities as a percentage of total expenditure across income decile groups.
- Understand the needs of residents using a targeted approach – LIFT tool. Identifying most vulnerable families, target support to them and track the change. Tackling problem debt and arrears, supporting families at risk of eviction, understanding how individual households were impacted by policy changes now and in the future.
- Approach to Hardship support – household support fund and other grants, community events, warm spaces and pop ups. Increased Citizens Advice capacity, including community advice, Financial Wellbeing Network and Northumberland Frontline.
- Access to food support and affordable food. Food insecurity and children. Requests for food support remained high. Holiday voucher support to continue, holiday activity and food programme, free school meal auto enrolment.
- Northumberland Energy Pathway – Energy Pathway Plus prioritised households adversely affected by cold homes. A collaboration by a number of organisations. Allocated funding for bespoke support, energy audits and home measures via the Integrated Care Board.
- Giving children and young people the best start. – Holiday and Activity Food Programme and a number of education based interventions.
- Community resilience was at the heart of everything we do.
- **In summary**
  - This work keeps residents to stay safe and well while enduring costs of living pressures with effective well directed support.
  - To prevent further widening of the inequalities gap – building resilience and prevention on to support and crisis intervention.
  - Seed and learn pilots to build working collaborative relationships, and to support the longer-term preventative and proactive measures in the wider system inequalities plan.

A number of comments were made including:-

- There was a recognised potential link between earlier offenders for shop theft and deprivation. First time offenders could be signposted to food banks or other services. Hopefully, this would prevent them from coming to the attention of the police again.
- It was hoped that the two reports / presentations today would help members to see the bigger picture over the next five years for longer term change. It also needed to consider what was being done 'in the now'. There were a number of ways in which work was going on across many communities to mitigate their circumstances whilst the longer term aims were progressed.

- It was useful to see the scale and volume of the work being done and the positive direction of travel, the shared work and collaboration of partners across the system.

**RESOLVED** to note the contents of the report.

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

Members noted details of forthcoming agenda items at future meetings.

**48. DATE OF NEXT MEETING**

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

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

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