

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 January 2025 at 10.00 a.m.

PRESENT

G. Syers
(Vice-Chair, in the Chair)

BOARD MEMBERS

Arris, J. (substitute member)	O'Neill, G.
Blair, A.	Pattison, W.
Bradley, N.	Porteous, H.
Conway, A.	Sanderson, G.
Iceton, A. (substitute member)	Standfield, P.
Jones, V.	Waring, K.
Mann, C.	Watson, J.
McLeod, V.	

OFFICERS IN ATTENDANCE

Brown, J.	Deputy Director Public Health
Cowell, N.	Public Health Manager
Foden, M.	Stop Smoking Practitioner
Lynch, K.	Senior Public Health Manager
Malone, C.	Communications Lead
Todd, A.	Democratic Services Officer
Yarar, F.	Public Health Specialty Trainee

1 member of the press was also in attendance

39. APOLOGIES FOR ABSENCE

Apologies for absence were received from G. Binning, C. Briggs, P. Ezhilchelvan, V. McFarlane-Reid, R. Mitcheson, R. Murfin, R. Nightingale, M. Purvis, G. Renner-Thompson, S. Williams and K. Whitehouse (substitute member).

40. MINUTES

Ch.'s Initials.....

1

RESOLVED that the minutes of the meeting of the Health and Wellbeing Board held on 14 November 2024, as circulated, be confirmed as a true record and signed by the Chair subject to the following amendment to the 15th bullet point down on page 6. It was agreed that the bullet point should read as follows:

The North of Tyne LPC had met yesterday. At this meeting the PNA risk assessment was discussed, and the committee felt it was not appropriate to publish due to potential risks to contracts. Pharmacy was a depleting market and without adequate funding would further suffer.

41. DEMOGRAPHIC IMPACTS

Dr A. Blair, Executive Medical Director provided members with a presentation on the ageing population and impact on hospital services. (A copy of the powerpoint slides have been filed with the signed minutes).

The presentation covered the following key issues:

- The elderly population in Northumberland looking at the forecasted estimates.
- The need to collectively think about how all partners were to look after the health of the county's population in the future.
- The data produced within the presentation were the ONS figures based on the current population, which was ageing.
- The figures detailed within the presentation did not take into account population growth or extra housing being built in the county.
- Bed occupancy and bed occupancy forecasts up to 2040 based on things staying the same.
- The age groups of those spending time in hospitals.
- The forecast of bed occupancy was increasing year on year.
- From 2025 to 2040 there was a projected 34% increase in the average bed occupancy.
- Hospital site projections until 2040.
- There was little growth in bed occupancy in patients under 75 years old.
- System providers would need to look very carefully at how to cope with the changing demographic. The year 2040 was not that long away.
- It was predicted that, if nothing changed, the Trust would need an additional 242 beds in the next 15 years which was the equivalent of a hospital the size of NSECH at Cramlington.
- There was no funding for a new hospital.
- The ageing population of Northumberland was a collective problem.

Following the presentation a number of comments were made including:

- Members welcomed the presentation which clearly showed that there needed to be changes made to the system. Based on the data collated and forecasting, it could not continue in its current state.
- Recent news publications had highlighted issues faced by healthcare including overcrowding, flow and winter pressures.

- Confirmation that the issue of an ageing population and the impact on hospital services was not a new problem. However, this issue was specific to Northumberland. It was not necessarily a national problem.
- The system would not be sustainable unless the way care was provided changed.
- A cultural shift was needed. The presentation clearly evidenced the forecasted increase in bed occupancy that would be needed by 2040 and the impact on services.
- There were also structural changes needed. 20% of health outcomes were contributed to good homes and 35 % were contributed to material deprivation and poverty. By helping to facilitate more independence in the home could keep older people out of hospitals.
- This was a reality check to start implementing changes needed.
- Northumberland's ageing population was also putting pressure on other areas of services and partners such as adult social services.
- There were established forums who were meeting. It was suggested that these forums be utilised to now start to look in more detail at the reality of how this issue was impacting on all services and where to direct resources.
- There would always be a need for good quality healthcare but not in the way that was currently offered.
- It was stressed that this was not about denying access but providing different ways of caring that were equally effective, but not all in a hospital bed.

RESOLVED that presentation and comments made be noted.

42. REPORTS OF THE CABINET MEMBER FOR TACKLING INEQUALITIES

42.1 Report on the Joint Health and Wellbeing Strategy theme 'Adopting a whole system approach to health and care'

Members were provided with an update on progress by system partners against the actions of the theme of 'Adopting a whole system approach to health and care' that were refreshed in the updated Joint Health and Wellbeing Strategy 2023-28. (A copy of the report and powerpoint slides have been filed with the signed minutes).

J. Brown, Deputy Director Public Health provided members with a presentation and highlighted key matters including:

- In October 2023, the Health and Wellbeing Board received a report on achievements against the theme of 'Adopting a whole system approach to health and care' of the Northumberland Joint Health and Wellbeing Strategy 2018-28, which proposed amendments to priorities, actions, and indicators and evidence of achievement for this theme.
- In May 2024, the Health and Wellbeing Board subsequently approved the refreshed Northumberland Joint Health and Wellbeing Strategy 2023-28 which included changes following comments of Board members and further stakeholder involvement.
- The three priorities for the theme were updated and now included:
 - Priority 1 – Refocus and prioritise prevention and health promotion.

Ch.'s Initials.....

- Priority 2 – Drive integrated, coordinated, personalised care, and user and resident involvement in the health and (social) care system.
- Priority 3 – Ensure access to, experiences of, and outcomes from services that contribute to health and wellbeing are equitable.
- This theme was 'owned' and monitored by the Northumberland System Transformation Board.
- Fundamental to this theme was an understanding of what a whole system approach means to all.
- Understanding the relationships within and between different parts of the system, such as the impact availability of domiciliary care can have on hospital discharges or the multiple factors that influence healthy weight.
- Partnerships between those people who draw on care and support, paid and unpaid carers, and citizens to improve services.
- Developing shared meaning and purpose between stakeholders before moving to action and local evaluation.
- Building and maintaining trust and effective relationships between people, communities and organisations including those without a specific health or social care remit.
- Progress against the refreshed actions for this theme were demonstrated both quantitatively and qualitatively within the report.
- The report did not seek to summarise all activity being undertaken by system partners. Instead, some key achievements, plans for the future, and opportunities for development were outlined.

Following the presentation a number of comments were made including:

- Members welcomed the report, and the list of progress and achievements made against the theme.
- Along with the many achievements there were still opportunities for development.
- Northumberland's alcohol specific deaths and suicide rates were higher than the national average.
- It was advised that alcohol specific deaths were on an upward trajectory from 2022 but in 2024 we were now seeing a fall in numbers. The new fall in numbers could be attributed, in part, to a combination of coordinated activity and strategic partnership working using existing funding and new funding from the supplementary substance misuse treatment and recovery grant. The grant had helped to address a number of needs, including improved referral pathways between prison and community treatment, increased community prescribing in more rural areas, a mobile harm reduction service, and an inpatient detox unit.
- Although there were indications that alcohol-related deaths may be starting to decrease, alcohol-related hospital admissions in Northumberland remained considerably higher than in England.
- Plans for the upcoming year included the development of a system-wide Alcohol strategy, focusing on prevention and community asset-based approaches.
- CNTW had specialist services where they would offer education and advice regarding alcohol and drugs.
- A request was made for a future meeting of the Board to look at the whole system wide approach to alcohol and what was being done in

Northumberland. It was agreed that this be added to the Board's work programme.

- The link between alcohol and drug misuse and children being placed in care.
- A concern that the suicide rate in Northumberland remained higher than in England, and appeared to be increasing locally, regionally, and nationally.
- Wider determinants such as poverty, debt, misusing drugs and alcohol, mental health conditions and difficult life events were all risk factors for suicide.
- People living in the most deprived areas of England had a higher risk of suicide than those living in the least deprived areas.
- A personal account of a family member affected by suicide.
- The need to change the stigma surrounding suicide.
- It was noted that a considerable amount of work was ongoing on mental health promotion and suicide prevention. An Adult Public Mental Health & Wellbeing Strategy was planned for development in 2025/26, and the Northumberland Suicide Prevention Strategy and Action Plan was to be refreshed.
- There was great work taking place in Blyth to bring together GPs and Primary Care Networks in listening to patients. A suggestion that the family hub in Blyth could be utilised to further help support the work of the theme and support local families.
- The need for all partners to continue to collectively use their voice to inform decision making at both a local and national level.
- A thank you for the achievements and progress made against the actions of the theme.
- Board Members offered their support to help inform the work of the alcohol strategy and the overall Joint Health and Wellbeing Strategy from their respective services.

RESOLVED that Health and Wellbeing Board:

- (a) note and comment on progress against the actions of the theme of 'Adopting a whole system approach to health and care' that were refreshed in the updated Joint Health and Wellbeing Strategy 2023-28.
- (b) note comments made regarding further potential and benefits of increased collaboration and integration between sectors and organisations, whether at 'Place' level (Northumberland) or 'Neighbourhood' level.
- (c) an item be placed on the Work Programme to consider in detail the issue of a whole system approach to prioritise prevention and health promotion regarding alcohol.

42.2 Annual report of the Health Protection Assurance and Development Partnership

Members were provided with an update on multi-agency activity of the Health Protection Assurance and Development Partnership in Northumberland. (A copy of the report and powerpoint slides have been filed with the signed minutes).

Ch.'s Initials.....

J. Brown, Deputy Director Public Health provided members with a presentation and highlighted key matters from the Annual Report including:

- Northumberland County Council had a health protection duty under section 6C of the National Health Service Act 2006.
- Health protection was a core role of public health.
- The Director of Public Health's role was to seek assurance that appropriate arrangements were in place, and that these were implemented and were responsive to local health needs.
- Northumberland Health Protection Assurance and Development Partnership (HPADP) was set up in 2023, reporting to this Board in January 2024.
- Details on the purpose and role of the HPADP, which were:
 - to support the Director of Public Health's statutory oversight and assurance role of health protection and provide assurance to the Northumberland Health and Wellbeing Board that adequate arrangements were in place for the prevention, surveillance, planning and response required to protect the health of the local population.
 - to act as a forum where partners used information to identify and agree developments to strengthen the health protection response in Northumberland, with a particular focus on health inequalities.
 - to lead the local strategic response to a significant health protection incident, for example in response to a pandemic.
- The membership of the partnership.
- Key topic areas/scope, including:
 - Prevention and control of communicable diseases.
 - Health and social care associated infections in community settings.
 - Emergency preparedness, resilience and response.
 - Environmental hazards.
 - Immunisation.
 - Cancer and non-cancer screening.
- Key developments for 2024, which were:
 - Northumberland & North Tyneside Local Immunisation Steering Group.
 - Respiratory syncytial virus (RSV) vaccination programme.
 - Maternity vaccination programme.
 - Implementation of the Community Infection Prevention & Control Strategy.
 - Annual revision & sign-off of Northumberland Incident Response Plan.
 - Emergency Preparedness, Resilience & Response (EPRR) competency framework, and training & exercise programme.
 - Northumberland Air Quality Strategy.
 - Screening Inequalities sub-group.
- Key issues for 2024/25, included:
 - Increases in Measles.
 - Increased in Pertussis (whooping cough).
 - Upsurge in Mpox in several African countries.
 - High levels of seasonal influenza.
 - Highly pathogenic Avian Influenza.
- Progress with the Flu and COVID vaccination. Northumberland had a better uptake in this autumn/winter than NENC or England for all at-risk groups.
- Key developments planned for 2025 including:

- Vaccination inequalities sub-group & funding for childhood vaccination inequalities.
- Pandemic preparedness plan – Exercise Pegasus Autumn 2025.

Following the presentation a number of comments were made including:

- Clarification on why the NHS was offering vaccines for RSV to only those aged 75 to 79 and not older adults. It was confirmed that this was because the benefits of the vaccination were not as affective in the over 80s.
- A query as to why the abdominal aortic aneurysm screening had not seen similar or better performance than the national average compared to other cancer and non-cancer screening programmes. It was advised that information on this could be provided following the meeting.
- There were some significant challenges in adult social care regarding flu.
- As demonstrated during the COVID pandemic, Northumberland had strong, effective and valuable working relationships with partners.
- The Health Protection Assurance and Development Partnership was providing assurance that there were adequate arrangements in place for the prevention, surveillance, planning and response required to protect the health of the local population.

RESOLVED that the Health and Wellbeing Board note and comment on the multi-agency activity of the Health Protection Assurance & Development Partnership.

43. JOINT REPORT OF THE CABINET MEMBER FOR CARING FOR ADULTS AND CABINET MEMBER FOR TACKLING INEQUALITIES

Northumberland Tobacco Control Partnership Annual Update 2024

The report provided an update to Health and Wellbeing Board on Northumberland’s collaborative approach to Tobacco Control during 2024, with a theme of historical progress and ongoing need to create a smoke free generation. (A copy of the report and powerpoint slides have been filed with the signed minutes).

K. Lynch, Senior Public Health Manager provided members with a presentation and highlighted key matters including:

- A historical look-back over the years, showing progress in tobacco control in Northumberland with a showcase of 25 years of the Northumberland Stop Smoking Service.
- Smoking tobacco had been a part of society for centuries, but it was not until the 1950’s that published findings showed that smoking and lung cancer were linked.
- Consideration of children and smoking, the progress made in reducing numbers of children smoking and the changing emphasis to vaping.
- Acknowledging wider tobacco control strategy and the importance of all partners, levers and activities, with concerted effort needed over the next 10-15 years, to achieve 5% smoking rates and create smoke free generations.
- Smoking remained the biggest preventable cause of death and illness in Northumberland, the North East and England, and continued to be the

leading driver of local health inequalities with the greatest harms falling on the poorest and most vulnerable individuals and communities.

- A Northumberland Stop Smoking Service commissioned by Public Health had been in existence for 25 years. At its inception, smoking prevalence was 28-30%.
- Northumberland's prevalence rate had reduced to 8.2% of adults who were smoking in 2023. This was a result of sustained local action, alongside and complementing regional and national activities.
- It was noted that not all the people making quit attempts would be seen in the Northumberland Stop Smoking Service.
- Northumberland's adult (18 years+) population were close to the 5% ambition. If Northumberland were to achieve the same rate of decline as the regional requirement, we would be on track to achieve, if not surpass, the goal.
- Data provided on how smoking had declined due to action taken.
- Information on the 2024 progress and 2025 developments.
- One of the developments was that Northumberland's young person's substance misuse service, Sorted, along with their current offer of supporting young people in relation to illicit substances and alcohol, would also be raising awareness and offering support to young people to become smoke free. A survey of open cases in early 2024 showed that out of 120 open cases, 85 clients using a substance were also vaping either regularly or occasionally. Sorted also reported concerns from partner agencies about problematic vaping affecting children's behaviour.
- The national additional stop smoking grant would be used to launch a focussed 'nicotine' service in 2025 which would support young people to quit smoking and vaping. It was envisaged that once the new service starts Sorted would be able to collect more data regarding vaping for its own and the partnership use, for monitoring and planning purposes to inform future initiatives.

Following the presentation a number of comments were made including:

- The Board celebrated the significant achievements made in trying to achieve a smoke free society and achieve the 5% or less adults smoking in Northumberland by 2030.
- The need to continue to restrict the appeal of smoking and availability to children.
- The number of children using vapes was rising. Most vapes contained nicotine, which when inhaled, was a highly addictive drug.
- Children were using unregulated vapes, vaping drugs, and using nicotine pouches and patches to get high which was very worrying.
- The need for partners to continue to work together to coordinate services and messages that supported each other's activities when it came to smoking and vaping.
- Sorted was one service that had launched a focussed nicotine services to support young people to quit smoking and vaping.
- Planning and monitoring would continue to ensure that as smoking and tobacco habits changed, services adapted accordingly to meet new demand and needs.

- The report demonstrated how by working together and focusing resources change could be achieved.

RESOLVED that the Health and Wellbeing Board:-

- (a) continue its prioritisation of this collaborative work.
- (b) note the development and progress of the Northumberland Tobacco Control Partnership during 2024 and the progression in Northumberland in relation to tobacco use.
- (c) comment on emphases and efforts required for 2025, and to grant authorisation for all partners to proceed.

44. HEALTH AND WELLBEING BOARD – FORWARD PLAN

The Committee reviewed its forward plan for the 2024/25 council year (a copy of which has been filed with the signed minutes).

RESOLVED that the Forward Plan be noted.

45. DATE OF NEXT MEETING

RESOLVED that the next meeting will be held on Thursday, 13 February 2025 at 10.00 a.m.

CHAIR _____

DATE _____

Ch.'s Initials.....