

# Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 26th July, 2017.

**Present:** Cllr Jim Beall (Chairman), Sarah Bowman-Abouna (SBC), Cllr Gillian Corr (substitute for Cllr David Harrington), Cllr Lynn Hall, Tony Beckwith (Healthwatch), Alan Foster (NTHFT), David Brown (TEWV), Steve Rose (Catalyst), Ali Wilson (CCG), Ann Workman (SBC)

**Officers:** Kirsty Wannop, [Minutes – Michael Henderson], Mick Shannon (SBC)

**Also in attendance:** Nathan Duff (Catalyst), Katie McLeod (CCG)

**Apologies:** Cllr Sonia Bailey, Cllr David Harrington, Cllr Di Hewitt, Barry Coppinger, Cllr Mrs Ann McCoy, Sheila Lister, Saleem Hassan, Martin Gray, Fiona Harrison

## **HWB 20/17**     **Declarations of Interest**

There were no declarations of interest.

## **HWB 21/17**     **Minutes of the meeting held on 31 May 2017**

The minutes of the meeting held on 31 May 2017 were confirmed as a correct record.

## **HWB 22/17**     **A Fairer Start**

The Board received a report relating to the 'A Fairer Start Programme' (AFS). The report provided an update on the programme.

The report, amongst other things:

- highlighted developments within the volunteer Champion Programme and, in particular, the fact that referrals into the Champion Programme, by multi-agency partners, had been a key challenge and this would be one of the areas of focus going forward.

- provided key observations from the delivery of training programmes, to support planning of future workforce development models.

- detailed work to improve information sharing and processes across early year's services.

- considered next steps for the programme including the expansion of AFS across the Borough, using lessons learned from the pilot programme.

Board discussion:

- The Board agreed that the pilot had been extremely successful and had tested and refined different ways of working. The lessons learned would be utilised in a number of areas of service delivery.

- Members agreed that the information sharing agreement, brokered for the AFS pilot area, must part of the expansion of AFS throughout the Borough, or its success could be compromised.

- It was noted that hard data indicators, including comparisons with pre AFS data and Borough averages would be available in the coming months.
- It was suggested that numbers of children identified as being school ready had improved during the pilot period.
- Consideration should be given to how the lessons learned, from AFS, could be shared with others.
- The Board was keen to highlight the hard work and positive attitude that staff, involved in the programme, had displayed throughout.

RESOLVED that

1. the report be noted and the learning from the AFS programme be used to inform how relevant services were delivered across the Borough.
2. outcome data be provided to the Board, as part of the evaluation report, early in 2018.

**HWB  
23/17**

### **Improving Diabetes Prevention and Care in Stockton**

The Board received a report that presented the recommendations from the Stockton Diabetes Task and Finish Group that it had established to explore how diabetes prevention and care could be improved.

Members were asked to support the recommendation, which were:

- note the scale of the problem and the projected increase in prevalence of diabetes.
- consider health impact assessments of decisions on urban planning, transport, licensing, schools, leisure and other services.
- consider the development of local healthy schools and healthy town programme to create health promoting settings to promote active lifestyles and physical activity.
- consider the role of wider teams and services in helping to prevent diabetes e.g. evidence-based messages and brief interventions for key risk factors, delivered by teams such as social care.
- primary care to systematically identify patients at risk of or with undiagnosed diabetes through health checks, obesity and pre- diabetes registers, data led identification on practice register considering all groups at risk.
- it was recommended that Board members support multi-agency sign-up to wave 3 (2017) of the National Diabetes Prevention Programme.
- ensure appropriate follow up of patients identified at risk of diabetes through

referral into weight management services or diabetes prevention programme.

- address variation in care of patients with diabetes in GP practices to ensure that all patients have access to good quality basic care.
- ensure that all patients have access to advice and support that is appropriate to their needs through structured education or other information for newly diagnosed patients and information and support at other stages of the disease.
- continue to improve access and uptake of foot care and diabetic eye screening
- ensure access to the right level of care at the right time for all patients through clear referral pathways and criteria between primary care, community specialist service and secondary care.
- develop the capacity and skills of the workforce in primary and community care to manage patients in the community.
- consider integrated care models to provide seamless, high quality care for all patients.

The Board considered the recommendations and agreed to the establishment of a multiagency group, with leadership from the NHS, and membership from local authority and the VCS, including Diabetes UK. The group would oversee the development of a joint action plan to improve diabetes prevention and care, based on the above recommendations for Stockton.

Members supported the regional strategic direction of the Durham Darlington Tees, Hambleton, Richmond and Whitby STP with a view of working with CCGs and Local Authorities across the STP footprint, towards the implementation of the National Diabetes Prevention Programme in 2018/19.

It was agreed that a joint consultation be conducted, with patients and carers, on diabetes, related health and health care needs and views on current services and proposed changes.

RESOLVED that

1. the report and recommendations from the Stockton Diabetes Task and Finish Group be agreed.
2. a multiagency group be established, as detailed above.
3. a joint consultation, as described above be undertaken.
4. an update report be provided in 6 months.

**HWB  
24/17**      **Performance Update - July 2017**

The Board considered a performance update report on key indicators from the performance monitoring framework for the Joint Health and Wellbeing Strategy delivery plan, at July 2017.

Discussion could be summarised as follows:

- There were concerns about obesity rates and it was noted that children from the most deprived areas were more likely to become, or remain, obese than children from affluent areas. It was explained that the Council's family weight management service and Phunky Foods programme had increased engagement with schools that had higher rates of obesity.
- It was noted that the challenges around obesity rates had been picked up in specifications associated with the 0 -19 services.
- Going forward it was recognised that the issue of obesity required on-going multi-disciplinary work to effect positive changes.
- Breastfeeding rates had increased slightly but remained below the North East rate and well below rates for England. Members recognised the considerable amount of work that had been undertaken over a number of years to improve rates but they remained low. It was agreed that this issue should be highlighted with the Children and Young People's Partnership for consideration.
- Smoking prevalence rates continued to fall and stood at 18.4%, which was just above the England average. Members asked for a breakdown of data into age groups, particularly in terms of young people starting to smoke. It was suggested that FRESH may be able to help with this and the information could be circulated.
- Reference was made to the uptake of health checks, by people with learning disabilities, and it was noted that 51% had received the checks during 2016 -17, which was an improvement on the previous year. However, work still needed to continue to support this trend and improve uptake of immunisations and certain screening programmes.

RESOLVED that the report and discussion be noted/actioned as appropriate.

**HWB  
25/17**      **Pharmaceutical Needs Assessment - Consultation**

The Board considered a report that provided an update on responsibilities and actions related to the Stockton on Tees Pharmaceutical Needs Assessment (PNA) and to notify and provide assurance to the Board regarding the statutory review of the current PNA.

Members would receive a copy of the draft PNA going to consultation and the final draft would be presented to the Board. It was agreed that the final draft would highlight any changes made through the consultation process.

RESOLVED that:

1. the report be received as notification and assurance regarding the responsibility of the Board for maintenance of the PNA, including the need to initiate a full review of the 2015 Pharmaceutical Needs Assessment.
2. the following statement be published on the Council's website, notifying the

relevant authorities of the review:

“Stockton on Tees Health and Wellbeing Board understands its statutory duties in relation to the Pharmaceutical Needs Assessment (PNA) and intends to publish its full review of the current PNA within the required timeframe. Notwithstanding any changes to pharmaceutical services and related NHS services that have taken place since first publication and without prejudice to the assessment of needs described in the existing PNA, the HWB for Stockton on Tees formally reports that the Pharmaceutical Needs Assessment for 2015 is under review i.e. the HWB has commenced a process leading to publication of a revised assessment / second PNA, with a publication date before 25 March 2018.”

3. Board member organisations actively contribute intelligence on changes which might impact on the local needs for pharmaceutical services.

4. Authority be delegated to the Director of Public Health, in consultation with the Chair, to undertake the necessary requirements with regards to publishing the PNA, as outlined in the report.

**HWB  
26/17**      **Health and Wellbeing Update**

Members considered the following minutes:

- Children and Young People’s Partnership – 19 April 2017
- Adults’ Health and Wellbeing Partnership – 6 June 2017
- Adults’ Health and Wellbeing Joint Commissioning Group – 23 May 2017
- Children and Young People’s Health and Wellbeing Joint Commissioning Group – 5 June 2017
- Tees Valley HWB Chairs’ Network – 27 March 2017
- Domestic Abuse Steering Group – 11 April 2017

RESOLVED that the minutes be noted.

**HWB  
27/17**      **STP - Update on Prevention Workstream**

Consideration was given to a report relating to the prevention workstream of the STP Board.

Members noted that the prevention workstream programme was focusing on the development of key priorities that would close the health and wellbeing gap; ensure the delivery of the NHS 5 Year Forward View and Mental Health Forward View; be based on evidence; focus on areas where a North East approach (as well as local delivery) made most sense. It aimed to provide support and an interface across areas including:

- Primary and secondary prevention
- Increasing Flu immunisation
- Health & Work
- Shifting the spend to prevention
- Embedding Community Centered and Asset Based Approaches (including self-care)
- Making Every Contact Count (MECC), including scaling opportunities for social

marketing, communications and Public Health messages across the NHS.

The Board noted that these areas had clear synergies with the priorities set out in the Stockton-on-Tees Joint Health and Wellbeing Strategy 2012-18.

The workstream had produced a draft action plan to progress the priorities and the focus was initially on the tobacco agenda (including a Smoke Free NHS), and on secondary prevention work.

Discussion:

- Members noted that there would be local actions for Stockton on Tees.
- It was agreed that the high level priorities identified needed to have the greatest effect, across the North East, by using a coordinated approach. That said it was accepted that there were some issues that were a local priority and would be addressed as such.
- It was agreed that Domestic Abuse would be raised, as being a potential element of the primary prevention priority, across the North East footprint.

RESOLVED that:

1. the progress of the STP prevention workstream be noted.
2. the implementation of the workstream's plans locally, be supported, starting with the work around tobacco control and COPD, with an update to the Board provided in 3 months.
3. Domestic Abuse be raised, with the STP Board, as being a potential area of work, on the North East footprint.
4. the synergies between the workstream priorities and local, Stockton on Tees work, be noted.

**HWB**     **STP - General Update**  
**28/17**

A verbal update on the whole STP was provided:

- It was explained that STP dashboards had recently been issued by the Department of Health that provided a baseline view of STPs (copies would be sent to members following the meeting). It was suggested that this was an assessment of where services were in comparison to other services. The dashboard was compiled using a number of indicators, including, hospital performance, patient focus change, transformation, prevention, access, mental health, leadership and finance. Durham, Darlington, Tees, Hambleton, Richmondshire, Whitby had been categorised as outstanding, which was the top category.
- Contentious issues tended to be around hospitals but the STP was more than hospital services and over 90% of interactions with health were at primary and community level and services were being further developed in these areas.

- There was still more work needed in terms of determining any changes to hospital services and discussions with clinicians would be key to this.
- There was a sense that, politically, the STP had moved down the list of government priorities and there was likely to be more time to consider issues.
- It was noted that when an update on the STP had recently been provided to the Tees Valley Health and Wellbeing Chairs' Network, it had been agreed that collaborative work would be progressed on uncontentious areas of the STP and the Board felt this was sensible.
- Reference was made to a consultation event that had recently been undertaken and a brief overview of discussion was provided. It was noted that further information about the event was available on the CCG website. The feedback from such events was extremely valuable and some similar themes were beginning to emerge.

RESOLVED that the update be noted.

**HWB  
29/17**      **Members' Updates**

Reference was made to recently released Clinical Commissioning Group ratings. Hartlepool and Stockton on Tees NHS CCG had been rated GOOD as opposed to OUTSTANDING last year. It appeared that the reduction in rating was due to the CCG not achieving the full level of efficiency saving it had identified.

The Chair referenced the Local Investment Programme and the fact that the Council had received funding to develop a solution to allow an on line tool to share care plans.

**HWB  
30/17**      **Action Tracker**

RESOLVED that the Action Tracker be noted.

**HWB  
31/17**      **Forward Plan**

Members noted that reports on the Better Care Fund and CQC Appreciative Reviews would be submitted to the September meeting.

RESOLVED that the Forward Plan be noted.