

Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 26th January, 2022.

Present: Cllr Jim Beall (Chair), Cllr Lisa Evans, Cllr Jacky Bright, Cllr Dan Fagan, Cllr Ann McCoy, Cllr Sylvia Walmsley, Martin Gray, Ann Workman, Fiona Adamson, Sarah Bowman - Abouna, James Graham (Sub for Dominic Gardner), Hilton Heslop (Sub for Julie Gillon), Peter Smith

Officers: Michael Henderson, Tanja Braun (SBC)

Also in attendance: Paula Swinburn (CCG)

Apologies: Jon Carling, David Gallagher, Dominic Gardner, Julie Gillon, Jonathan Slade,

HWB 43/21 **Declarations of Interest**

There were no declarations of interest.

HWB 44/21 **Minutes of the meeting held on 17 November 2021**

The minutes of the meeting held on 17 November 2021 were confirmed as a correct record.

HWB 45/21 **Outbreak Management Updates**

The Board was provided with a presentation relating to Covid Outbreak Management.

Key points

Stockton-on-Tees currently had the third highest 7-day infection rate in the North East.

All North East local authorities (including Stockton-on-Tees) had seen an increase in rate, compared to 4 weeks ago.

All North East local authorities (including Stockton-on-Tees) had seen an decrease in rate compared to 7 days ago.

Vaccination uptake in Stockton-on-Tees was higher than the national average.

There had been 10 COVID-related deaths registered in Stockton-on-Tees in the most recent 7 days.

The presentation also provided details of:

- prevailing community transmission.
- a statement from the Scientific Advisory Group for Emergencies relating to the continued threat of Covid and its future management.
- an outlook statement from the World Health Organisation.

- the national picture relating to Omicron
- activity associated with the local response.
- Moving back to Plan A measures and national policy updates.
- A vaccination update
- Communications and engagement

Discussion:-

- There was a significant number of covid patients, being admitted to hospital, who had not been vaccinated, or had only partial vaccination. Precise data in this regard was being compiled by the North Tees and Hartlepool Trust.
- There was a high number of people joining the Virtual Ward who had not been fully vaccinated.
- Omicron was not a mild variant but people who had been fully vaccinated had considerably milder symptoms than those who were not, or only partially, vaccinated.
- It was noted that the vaccines and booster would lose effect and there was research being undertaken, nationally, around this.
- It was anticipated that covid vaccinations would move to the annual vaccination programme and jabs would be polyvariant.
- It was accepted that some of the people who had died, after contracting Covid, had underlying conditions. Many of these conditions were chronic but not imminently fatal, in themselves, and it had been individuals' contracting of Covid that had resulted in their premature deaths.

RESOLVED that the update and discussion be noted.

**HWB
46/21** **Health Protection Report 2020 - 2021**

The Board considered the Annual Health Protection Report, which reported on key issues and indicators for Health Protection for 2020-21 and provided an overview on key issues in 2019-20. It was explained that an annual report for 2019-20 had not been compiled, as a result of the covid pandemic. It was explained that there were four key components to the work of protecting the health of the population:

- prevention;
- surveillance;
- control;
- communication.

The Board also received a presentation that provided some long term context for health protection and some key messages from the last twelve months:-

- Infection prevention and control had been successful!
- There had been good uptake of vaccinations
- There had been low levels of communicable disease, other than covid and syphilis.

Members were concerned at the increases in cases of syphilis and noted the communication work that had been undertaken, particularly with college-age young people.

Measures to protect people, from Covid, had undoubtedly had an impact on reducing numbers of other communicable diseases. It was anticipated that people may continue to observe some measures that would afford them a degree of protection from a range of diseases. This would be positive in terms of business continuity, for commercial and public organisations. Public Health continued to work with settings to reinforce messages.

RESOLVED that the Annual Health Protection report be noted and circulated to the Adults' Health and Wellbeing Partnership and Children and Young People's Partnership for consideration.

**HWB
47/21**

Better Care Fund 2021 - 2022

Members were provided with a report that presented national Better Care Fund (BCF) planning requirements, conditions and metrics. It also presented the BCF draft plans 2021 – 2022 which had been submitted to the NHS England regional Better Care Manager, for initial review and feedback.

It was explained that the initial feedback had been positive, with only one point highlighted where it was felt a performance metric had been overstretched. That performance metric had been amended, and the plan was submitted to NHS England by the deadline of 16 November 2021, but needed to be approved by the Health & Wellbeing Board.

It was noted that there had been additional funding, during Covid, to facilitate quick and safe discharges, from hospital.

Members approved the plan and it was agreed that, in addition to the sign off of the draft plan the Board would receive a report showing how funds were being used and how the Plan was working.

RESOLVED that

1. the national BCF planning requirements, conditions, and metrics be noted and the BCF Plan submitted to NHS England, be endorsed.
2. going forward, in addition to the sign off of the draft plan, the Board would receive a report showing how funds were being used and how the Plan was working.

**HWB
48/21**

Adult Social Care Strategy 2021 - 2025

Members considered a report that presented the Adult Social Care Strategy 2021-2025.

The Strategy described the responsibilities that the Council had in the provision of adult social care and how the Council discharged its duties.

It identified the importance of connection with other Council strategies and key stakeholders and described the consultation that occurred in the development of the Strategy.

Most importantly it affirmed that, fundamental to everything that we do in adult social care was having the person we were providing care for at the centre of our care with their wellbeing and their welfare our priority.

Four priorities were identified:

- Priority One – To provide support to people to prevent, reduce or delay the need for on-going support and to maximise their independence;
- Priority Two - To ensure people can get the right level and type of support at the right time;
- Priority Three – To develop and support our staff and to support providers of adult social care to develop and support their staff;
- Priority Four – To work with, and within, communities.

An annual action plan would be developed to ensure implementation of the priorities identified.

RESOLVED that the report be noted and the action plan be presented to a future meeting.

**HWB
49/21 Update: Local Health and Wellbeing Intelligence System and Health Inequalities approach**

Member considered a report that provided an update on the discussions around place-based arrangements for collecting and using intelligence and evidence across the health and wellbeing system in Stockton-on-Tees and how this supported and steered collective work to address health inequalities.

The Board had previously agreed the establishment of two groups (a Health and Wellbeing System Intelligence Group and an Intelligence Working Group) to support to ensure a coordinated approach to collating, interpreting and using collective intelligence and evidence across the health and wellbeing system in Stockton-on-Tees, to inform and shape priorities, decisions and actions to improve health and wellbeing and address health inequalities.

The Groups, agreed by the Board, aimed to use a range of tools that existed to support and enable their work, including the Joint Strategic Needs Assessment (JSNA) and population health management (PHM) as an arm of healthcare public health. They also supported and shaped Integrated Care System (ICS) activity locally – the ICS infrastructure continued to evolve.

It was explained that a range of work and discussions had been progressed

since previous papers to the Board, and a summary of these discussions was provided to the Board.

RESOLVED that the report be noted and updates on progress be provided to future meetings.

HWB 50/21 Alcohol Strategic Group Update - Presentation

Members considered a presentation about the Alcohol Strategic Group and work to reduce alcohol related harm in Stockton on Tees Borough.

The presentation covered the following areas

- Alcohol Harm Reduction Action Plan
- Mobilising Integrated Substance Misuse Service and Family Carer Service
- COVID impacts on consumption
- Additional funding for service developments
- Strategic links with Integrated Care System (ICS)

Discussion:

- It was suggested that the Group should look to increase dialogue with supermarkets, and other outlets, to encourage responsible pricing of alcohol. It was noted that the introduction of a minimum unit cost would contribute to responsible pricing.

- The normalisation of dangerous drinking behaviour needed to be changed in order to reduce harm within the population, long term.

RESOLVED that the update and discussion be noted.

HWB 51/21 Integrated Care System and Integrated Care Partnership Updates

Members were provided with an update on the Integrated Care System (ICS).

Members noted that there was a national three months delay in the introduction of ICSs meaning that CCGs would continue until 30 June 2022 and Integrated Care Boards would not become statutory NHS organisations until then. There would representation drawn from local authorities.

It was noted that this provided some challenges but, also, provided more time for arrangements to be develop locally. Discussions in this regard would begin soon and it was anticipated that there would be a continued local place role for Health and Wellbeing Boards.

RESOLVED that the update be noted

HWB 52/21 Members' Updates

Members provided updates to the Board:

The Council's People Select Committee had recently completed a review of Disability Inclusive Borough. It was suggested that this be circulated to Board

members.

Tees, Esk and Wear Valleys Mental Health Foundation Trust would provide a presentation, to a future meeting of the Board, on work undertaken, in response to outcomes from a CQC inspection. This was likely to be provided following consideration by Tees Valley Joint Scrutiny Health Committee, in April.

It was suggested that a presentation on support to the care sector provided by partners be considered for a future meeting.

HWB
53/21

Forward Plan

The Board noted its Forward Plan.