

Agenda Item

Adult Social Care and Health Select Committee

12th April 2022

REGIONAL HEALTH SCRUTINY UPDATE

Summary

The Committee is requested to consider an update on the work of the regional health committees.

Detail

Tees Valley Joint Health Scrutiny Committee

1. Middlesbrough Borough Council have been chairing and supporting this Committee during 2021-2022.
2. The Committee held an informal session in February 2022 where a 'setting the scene' presentation from Tees Valley Clinical Commissioning Group (TVCCG) in respect of the North East and North Cumbria (NENC) Integrated Care System (ICS) was given. The Committee also discussed what challenges / opportunities the next 12-18 months presents for health scrutiny at a Tees Valley level, and considered the Committee's forward work programme, including the alignment of individual Local Authority health scrutiny work programmes with the Committee's work programme for 2022-2023.
3. The last formal Committee meeting of 2021-2022 was held on the 18th March 2022 and considered the following items:
 - Minutes of the meeting on the 24th September 2021 (**Appendix 1**)
 - Minutes of the last meeting on the 10th December 2021 (**Appendix 2**)
 - Tees, Esk & Wear Valleys NHS Foundation Trust – Response to recent CQC inspection (slides and summary of main discussion points shared at the last SBC Adult Social Care and Health Select Committee on the 22nd March 2022)
 - Local NHS / Public Health response to COVID-19 (deferred as relevant officers unable to attend due to unforeseen circumstances)
 - North East Ambulance Service (NEAS) Performance Update (**Appendix 3**)
 - TVCCG – Update
 - The development of the North East and North Cumbria Integrated Care System (NENC ICS), the Integrated Care Board (ICB) and the proposed sub-regional Integrated Care Partnership's (ICPs)
 - Opioid prescribing rates across the Tees Valley and actions taken to reduce overprescribing
 - Learning Disabilities Respite Review (**Appendix 4**)

Regarding the NEAS item, the very positive performance in relation to category 1 (life-threatening calls) response times was noted (second best Trust in the country), though continuing challenges around category 2 (emergency calls), 3 (urgent calls) and 4 (non-urgent) response times were outlined (though the Trust remained one of the highest performers for each, and was the best performing for the latter). Demand on the service was seemingly returning to 'normal' following the peak pressures of the COVID-19 pandemic, with the Trust now emerging from the hardest winter it had ever experienced.

Questions were raised around staff training and retention (Members heard that NEAS was over-established on clinical paramedics but had experienced higher turnover with call-handlers), monitoring 'hear and treat' outcomes, handover times between NEAS and Foundation Trusts, and supporting call-handlers who receive abuse (full-time psychologist employed to support staff mental health and updating facilities to allow space for time-out).

4. As part of the well-established rotational arrangements, Darlington Borough Council will be chairing and supporting the Committee during 2022-2023 (note: as things stand, SBC will assume this role in 2023-2024).

Sustainability and Transformation Plan Joint Health Scrutiny Committee

5. Stockton-on-Tees Borough Council (SBC) is represented on this Joint Committee that was originally set-up to consider the Better Health Programme proposals. This statutory Joint Committee was formed by all seven affected Authorities (including North Yorkshire) in order to consider and respond to the planned consultation. These plans were subsequently incorporated into the regional Sustainability and Transformation Plan (STP).
6. Regional NHS planning was being taken forward within the context of the Integrated Care System (ICS). A response to the NHS England / Improvement Consultation on ICS Development (signed off by the Chair on behalf of the Joint Committee) was received on the 29th January 2021 – this was shared with the Council's Joint Committee representatives and the relevant Cabinet Members and Directors.
7. Further to the publication of the Government's Health and Care Bill White Paper, a meeting of the Joint Committee was intended – however, this could not be arranged prior to the purdah period ahead of the 2021 elections.
8. Last month, Durham County Council issued correspondence regarding this Joint Committee. Noting challenges brought on by the COVID-19 pandemic and changes in leadership at Durham, it is intended to arrange a meeting soon after the current 2022 elections purdah period where Joint Committee representatives can meet with the North East & North Cumbria (NENC) Integrated Care Board (ICB) Chief Executive (designate), Samantha Allen, to receive information on progress ahead of ICSs assuming a statutory footing as of the 1st July 2022.

North East Regional Health Scrutiny Committee

9. No meetings are currently scheduled.

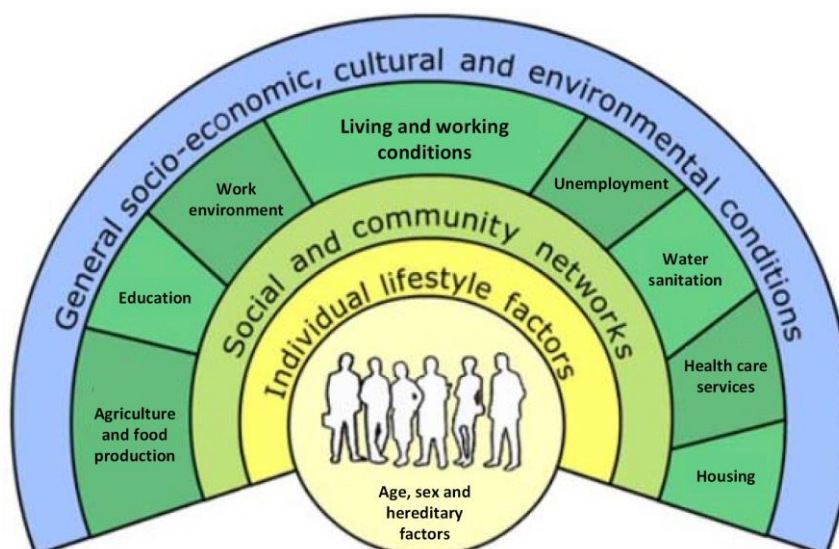
Tees Valley Health Summit

10. On the 31st March 2022, a Tees Valley Health Summit was held with a focus on working together to improve health and reduce health inequalities for people who live and / or work in the Tees Valley. Introduced by the Chief Executive of North Tees and Hartlepool NHS Foundation Trust (and SRO Health Inequalities, NENC ICS), the morning covered:

- System priorities – how they contribute to and influence the ‘place’ agenda (role of ICP and ICB team as an enabler for system engagement at Tees Valley)
- Health inequalities in the Tees Valley – the good story, key challenges and what more could be done.
- Health inequalities – ways of working for the Tees Valley: How can we work together better to reduce health inequalities?
- How will work at Tees Valley support place-based approaches? (breakout sessions)



11. Referencing the 2010 [Marmot Review](#), regarded as the most significant report in relation to health inequalities for many years, attendees heard that smoking remained the single most preventable issue locally, a cardiovascular disease focus could reap significant benefits over the next few years (though would need to be systematic and at scale across all socio-economic ranges, not just targeted at the lower-end), and that it was crucial for organisations to consider the wider determinants of health (below, in green), not just health services themselves.



12. A copy of the presentation slides used at the summit will be circulated once received.

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