

Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Thursday, 28th August, 2014.

Present: Cllr Jim Beall(Chairman), Cllr Mrs Ann McCoy(Vice-Chairman), Mr Alan Foster, Cllr Ken Lupton, Tony Beckwith, Jane Humphreys, Peter Kelly, Barry Coppinger, Audrey Pickstock, Paul Williams, Ali Wilson

Officers: Margaret Waggott, Jenna McDonald (Law and Democracy); Zoe Greaves, Joanne Heaney (Public Health), Lesley King (Policy, Improvement and Engagement)

Also in attendance: Steve Rose (Catalyst Stockton),

Apologies: Cllr David Harrington, Cllr Steve Walmsley

HWB Declarations of Interest

43/14

There were no declarations of interest.

HWB Draft Minutes of the meeting held on 23 July 2014

44/14

The minutes of the Board's meeting held on 23 July 2014 were confirmed as a correct record and were signed by the Chairman.

HWB Development session - BALANCE

45/14

Members received a presentation from the Director of BALANCE which provided an update on Tobacco Control and Alcohol.

The presentation focussed on the effects of alcohol and tobacco, which had a high degree of similarity.

Key points were highlighted to the Board as follows:

- Alcohol and Tobacco were both addictive and mind altering substances
- 38% of people in the borough admitted to drinking above the recommended limit of alcohol
- Above 90% of those drinking above the recommended limit considered themselves to have been light or moderate drinkers
- Hospital admissions due to alcohol consumption had increased by 5 times in 10 years for the over 65's age range in the borough. The North East had the highest rate of alcohol related hospital admissions.
- There were over 43 alcohol-related crimes recorded every day in Stockton on Tees
- While progress was being made relating to tobacco, problems relating to alcohol were getting worse
- Foetal Alcohol Day was due to take place on 9th September 2014

- Alcohol was the world's third leading cause of ill health and premature death. In England there were over 20,000 alcohol related deaths a year in England alone
- One in five police officers claimed that they had been assaulted 6 or more times by those under the influence of alcohol. Half of violent crime in the Borough was linked to alcohol
- Licensing Laws made it difficult to refuse licenses for local convenience stores selling strong alcohol and cigarettes
- Work had been carried out in Summer 2013 to assess the advertisements for alcohol in the cinema. Results of the work which was carried out showed that 1 in 4 advertisements in the cinema advertised alcohol, even for the viewings rated under 18 years
- More people supported Minimum Unit Price (MUP) than those who opposed, however in Stockton, more people were opposed to MUP
- 99% of people in Stockton considered it unacceptable for alcohol to be sold in children's play areas

Members and Officers discussed what Stockton on Tees and the Health and Wellbeing Board could do to assist and contribute to the work related to Alcohol and Tobacco use in the borough. It was highlighted that campaign work such as Dry January and the Alcohol and Cancer Campaign had been successful in recent years.

The Board was informed that other council's had introduced regulations which stated that alcohol could not be advertised inside or outside of Council owned buildings.

Members agreed that the Health and Wellbeing Board would continue to:

- Build the understanding of tobacco and alcohol
- Support campaigns

Members raised the following points and questions:

Members asked whether there was any evidence to demonstrate that if alcohol was introduced within families at an early age, those individuals would be less likely to be heavy drinkers in later life. The Director of BALANCE informed the Board that no evidence was available to demonstrate this, however statistics were available to show that liver disease had fallen in France and the consumption of alcohol in the Mediterranean continued to decrease.

It was queried if there was any information available on the effects alcohol had on the number of days an individual took off work and the effects which this had on the economy. Members noted that economic figures were included in the information of the absences from work. It was highlighted that BALANCE was carrying out work to engage local businesses in the Better Health at Work Award and the Dry January campaign.

Members discussed the changes in culture in relation to alcohol, some of the key points were highlighted as follows:

- alcohol culture had significantly changed throughout the years. It had become more acceptable to be seen drunk and under the influence of alcohol.

IT was explained that advice and intervention sessions on alcohol consumption were being carried out in GP surgeries across the borough. It was highlighted as a positive that alcohol related hospital admissions were decreasing in Stockton. It was noted that actions which could be taken locally with regards to alcohol consumption were limited.

RESOLVED that it would be beneficial for the Board to have a more detailed report and an action plan brought to a future meeting.

**HWB
46/14** **Healthwatch Evaluation**

Members were provided with a presentation on the Evaluation of HealthWatch Stockton-On-Tees from an Independent Consultant.

Key points were highlighted as follows:

- HealthWatch was confident and in a positive position to carry on moving forward

- Five separate evaluations had been carried out informed by each other

- Considerable activity was taking place which included; community engagement, relationship building and the setting up of new processes

- Changes in sickness absence and personnel in 2013 affected the overall progress and communication with the Council

- Regular relationship meetings were in place

- Based on an online survey, it was highlighted that public awareness of HealthWatch was good and similar across the Tees Valley as a whole.

- Stockton Council and Catalyst had played an important role in raising the awareness of Healthwatch by promoting in magazines.

- A Distinct Identity had been created within the public which set HealthWatch apart from LINKs.

- There was reasonable capacity for gathering and providing information but less capacity for strategic engagement across Health and Social Care Providers and Commissioners

- HealthWatch staff engage across a wide landscape of organisations and forums as well as engaging with community groups and networks, Health Commissioners and providers

- HealthWatch Board was conscious that its skill set was more around social care and community rather than health and it was trying to address this
- Support offered by other fields in the health and social care system would be beneficial to HealthWatch
- Healthwatch had not produced much output to date, however, work was in hand and Stakeholders were cautiously optimistic of the developments in both profile and influence
- A common complaint from commissioners was that HealthWatch was not visible and making its mark with the Council, community, organisations and partner organisations
- Volunteers were a major resource within HealthWatch
- HealthWatch was reasonably well embedded in the wider voluntary and community sector

Members and Officers raised the following points:

- Members heard that HealthWatch was managing systems accurately and making positive changes.
- It was highlighted that the public should be encouraged to complain about Health Services where necessary
- The role of Healthwatch was to understand the nature of complaints and not actually to deal with the complaints as such

It was highlighted that it would have been useful to be provided with an insight to the levels of complaints which Healthwatch received

Members agreed that a lot of hard work had gone into the Healthwatch report and evaluation.

RESOLVED that the report be noted.

**HWB
47/14**

Better Care Fund

Members were presented with a report on the Better Care Fund (BCF) which provided an overview of the new information requirements for the BCF and changes to the assurance process and timeline. The report included the updated Stockton-On-Tees BCF plan and performance pot.

It was explained that the previous £1bn Payment for Performance framework had been revised so that the proportion of the £1bn that was now linked to performance was dependent solely on an area's scale of ambition in setting a planned level of reduction in total emergency admissions (i.e. general and acute non-elective activity). The national planning assumption was that this would be in the region of a 3.5% reduction against the baseline detailed in the technical guidance. If this was achieved, it would equate to a national payment for

performance pool of c.£300m. The remaining c.£700m would be available up front in 2015/16 to be invested in NHS commissioned out-of-hospital services. The Board was now required to propose and sign off their own performance pot based on their level of ambition for reducing emergency admissions.

The BCF project team had reviewed the revised planning and technical guidance and had benchmarked the BCF plan that was signed off by the Health and Wellbeing Boards in April 2014 against what a 'good' plan should look like which was described within the guidance. A revised plan had been developed and this was provided to the Board and it was asked to review and sign it off, together with the performance pot for the Stockton-on-Tees Better Care Fund.

Members agreed the revised plan, including the proposed performance pot.

RESOLVED that:-

1. the changes resulting from the revised BCF guidance be noted.
2. the revised assurance process and timeline be noted.
3. the revised BCF planning templates be approved for submission to the NHS Local Area Team and National BCF Task Force by 19 September 2014.
4. the proposed performance pot, based on the Boards level of ambition for reducing emergency admissions be approved.
5. delegated authority be given to the Corporate Director of Children, Education and Social Care, in consultation with the Chief Officer, NHS Hartlepool and Stockton CCG and the Chairman of the Health and Wellbeing Board to make any necessary changes to the BCF planning templates, that were required, prior to submission.

**HWB
48/14** **Development Session - Self Harm**

RESOLVED that the item be deferred to a future meeting.

**HWB
49/14** **Urgent Care Strategy**

Members of the Board were presented with an iteration of the 5 year strategic plan for the Urgent Care Strategy (UCS).

It was highlighted that the UCG strategy had been developed to underpin the 5 year strategic and 2 year Operational Plans for NHS Hartlepool and Stockton-On-Tees Clinical Commissioning Group (CCG).

The Board noted that:

- Discussions had taken place around changing urgent care into planned care
- National work had taken place in order to listen to and receive feedback

- the Urgent Care model had to be easily understood and accessible.
- A focus on strategy was said to increase capacity in primary care and in the community which would also contribute to the delivery of high skill and expertise
- Work was in place to ensure that a more effective service was delivered with a higher level of communication.

The following points were raised by Members of the Board:

- Members agreed that they were happy with approaches which had been taken with the UCS
- The resource element of GP Services was of concern

Members of the Board were in support of the strategy and agreed that the opportunity should be taken to make services more responsive. It was highlighted that it would be beneficial to have an officer from the Primary Care Team in attendance when this matter was considered at any future meeting.

RESOLVED that the report be noted.

**HWB
50/14** **Forward Plan**

Members were provided with a forward plan which presented information on upcoming meetings through to March 2015.

The Board was informed that the Local Safeguarding Children Board scheduled for December 2014 would be rescheduled,

RESOLVED that the Plan be approved.

**HWB
51/14** **Chairman's Update**

The Chairman of the Board updated Members on various subjects as follows:

- Stockton Health Centre was undergoing a review as part of the review to access GP services, The Chairman highlighted that it was important for Members to make a response where appropriate

RESOLVED that the update be noted