

AGENDA ITEM

REPORT TO HEALTH AND WELLBEING BOARD

28 MARCH 2018

HEALTH AND WELLBEING UPDATE

SUMMARY

In accordance with previous decisions made by the Board this report provides a brief overview of discussions at meetings associated with the work of the Health and Wellbeing Board.

RECOMMENDATION

That the report and minutes be noted.

DETAIL

Children and Young People's Partnership – 17 January 2018 – Minutes attached at Appendix 1

Domestic Abuse Strategy

1. Members were provided with an update relating to the Domestic Abuse Strategy and were introduced to the recently appointed Domestic Abuse Coordinator, who would be working with partners to coordinate delivery of the Strategy's Action Plan.

JSNA – Prioritising Topics

2. The Partnership was asked to identify which topics it wished to prioritise, for consideration. It was decided that priority should be given to any areas that involved the vulnerability of children. During discussion, members considered the current JSNA model and the topic specific approach. It was agreed that it was important to ensure that there was flexibility within each topic and links between topics were made, and highlighted.

Other items considered

- Borough wide Conversation
- Health Protection Report – considered by the Board in December.

Children and Young People's Health and Wellbeing Commissioning Group – 6 November 2017 - Minutes attached at Appendix 2

SEND Draft Joint Commissioning Strategy

3. The Group continued its role in helping to develop a SEND Joint Commissioning Strategy. The Board will receive the Strategy at a future meeting.

0 -19 Programme

4. The Group was provided with detail of bids received in respect of 0 -19 services and endorsed proposals in this regard.

Children and Young People's Health and Wellbeing Joint Commissioning Group – 3 January 2018 – Minutes attached at Appendix 3

Alcohol Service

5. The Group agreed an extension and direct award to the existing provider of the Alcohol Service. This would bring it into line with contract timescales associated with the substance misuse contract.

LAC CAMHS Specification

6. A direct award to TEWV was agreed for Looked After Children CAMHS , for a 6 month period, starting 1 April 2018. The six months extension would provide sufficient time to effectively undertake further options appraisal in collaboration with the Hartlepool and Stockton Clinical Commissioning Group.

CAMHS Review

7. An update on the review was provided, which was expected to be completed during April 2018.

Adults' Health and Wellbeing Commissioning Group – 18 December 2017 - Minutes attached at Appendix 4

Integrated Alcohol Services for adults and young people

8. The Group agreed an extension to the current contract, which would allow a comprehensive review of the service and would bring it into line with the substance misuse contract renewal date.

Healthy Heart Check

9. Following a review of the Healthy Heart check service the Group agreed that the core model of provision should be within General Practices.

Adults' Health and Wellbeing Joint Commissioning Group – 24 January 2018 – Minutes attached at Appendix 5

Care Co-ordinator Service - Evaluation

10. Members noted that the Care Coordinator service would continue beyond the pilot period to develop a future model of support, which benefitted health and social care.

Funding of Stroke Association

11. It was agreed that the Stroke Recovery contract be extended, with the Stroke

Association, until the end of May 2018.

Adults' Health and Wellbeing Partnership – 6 February 2018 – Minutes attached at Appendix 6

12. The Partnership received a presentation relating to the North Tees and Hartlepool Foundation Trusts Hospital at Home initiative, which targeted people suffering from COPD, however, it was explained that there may be potential to extend it to frail elderly, nursing and care homes and heart failure.
13. The Partnership approved JSNA topics relating to sexual Health and the Environment.

Other items considered, included.

- BSF Update
- Health Protection Report

Other meetings

Domestic Abuse Steering Group – 6 December 2017 – Minutes attached at Appendix 7.

FINANCIAL IMPLICATIONS

14. There are no direct financial implications arising from this report.

LEGAL IMPLICATIONS

15. There are no specific legal implications arising from this report.

RISK ASSESSMENT

16. The risks arising from the production of this report can be categorised as low.

CONSULTATION

17. The content of the report reflects discussion at various Health and Wellbeing related meetings.

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Children and Young People's Partnership

A meeting of Children and Young People's Partnership was held on Wednesday, 17th January, 2018.

Present: Martin Gray (Chairman) (SBC),

Julia Armstrong (Primary School Rep), Bev Bearn (SBC), Rhona Bollands (SBC), Sarah Bowman - Abouna (SBC), Emma Champley (SBC), Nicola Childs (sub for Jo Heaney) (CCG), Chris Davis (TEWV), Laurayne Featherstone (Catalyst) Janet Mackie (NTHPFT) Cllr Mrs Ann McCoy (SBC) Alastair Simpson (Cleveland Police), Simon White (Secondary School)

Officers: Michael Henderson, James O'Donnell, Rachel Batey, Tanja Braun (SBC)

Also in attendance:

Apologies: Jo Heaney (CCG), Jane Barker (NTHPFT) Priti Butler (The Big Life Group), Diane McConnell (SBC), Toni McHale (Healthwatch), Steve Rose (Catalyst)

1 **Declarations of Interest**

There was no declaration of interest.

2 **Minutes of the meeting held on 18 October 2017**

The minutes of the meeting of the Partnership held on 18 October 2017 were confirmed as a correct record.

3 **Domestic Abuse Strategy**

The Partnership was provided with an update relating to the Domestic Abuse Strategy 2017 - 2022.

Members were introduced to Rachel Batey, who had recently been appointed to the role of Domestic Abuse Coordinator. Part of Rachel's role would be to work with partners to help deliver the strategy's Action Plans.

RESOLVED that the update be noted.

4 **JSNA - Prioritising Topics**

Members received a report that detailed some of the work that had been undertaken associated with developing the Joint Strategic Needs Assessment (JSNA).

The Partnership was asked to provide some feedback to identify how JSNA topics would be prioritised for completion.

It was noted that a number of topics had already been completed or had been started. e.g SEN, LAC, CSE, Domestic Abuse.

Members noted that other topics, could, potentially, be added to the list, or topics could be widened. Topic titles could be changed to better reflect content

It was recognized that plans, strategies and commissioning attempted to deliver

answers to multiple issues, many of which were interlinked It was suggested that the current structure of the JSNA did not reflect this complexity. There was concern that the current structure might not allow full consideration of all issues and could result in working in siloes. It was explained that there was flexibility within topics and links were constantly being made between topics. It was important to analyse all interlinked topics.

The Partnership noted that the emerging Children and Young People's Plan would cut across many topics.

Discussion touched on Adverse Childhood Experiences (ACE) and how such experiences could have a seriously negative effect on someone's whole life profile. Data in this area may also highlight resilience factors.

It was noted that some schools held data, across multiple factors, about their cohort of pupils. This enabled them to continuously consider and adapt their strategies. Any data the schools could share, may be helpful to work the Council and other agencies were involved in.

Data Team data to schools on CIN???

The Group did not explicitly prioritise individual topics but it was agreed that there should be some priority given to topics relating to vulnerable children.

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

5 Health Protection Report

Members received a report that had previously been considered by the Health and Wellbeing Board relating to key issues and indicators for Health protection for 2016 - 17.

RESOLVED that the report be noted

6 Borough wide Conversation

Members received a report that provided details of outcomes from the Borough Wide Conversation held with young people of the Borough in July 2017.

It was noted that the outcomes of the conversation had been extremely helpful and details of how services would respond to the information, they'd received, was provided. In addition the outcomes coming from the event would be considered by the Stockton Youth Assembly (SYA), and this would help in the development of necessary actions.

The information received would also feed into the Children and Young People's Plan.

The Police were looking at opportunities to engage with young people and it was suggested that they attend a meeting of the SYA.

RESOLVED that the report be noted

7 Forward Plan

Members agreed a number of amendments to the Forward Plan.

Children and Young People's Health and Wellbeing Commissioning Group

A meeting of Children and Young People's Health and Wellbeing Commissioning Group was held on Monday, 6th November, 2017.

Present: Martin Gray (Chairman), Emma Champley, Jo Heaney and Cllr Mrs Ann McCoy

Officers: Michael Henderson, Jane Smith, Michael Rowntree, Martin Skipsey (SBC)

Also in attendance:

Apologies: Sarah Bowman-Abouna, Jason Harwin, Kate Birkenhead

1 Declarations of Interest

Councillor McCoy declared a personal, non prejudicial interest in item 6 entitled '0 -19 Programme', as she was a member of the Stockton and District Advice and Information Service Board which was referred to in the report. She pointed out that when this issue had been considered by the Board, she played no part in the discussion and left the meeting.

2 Minutes of the meeting held on 5 July 2017

The minutes of the meeting held on 5th July 2017 were confirmed as a correct record.

3 SEND Draft Joint Commissioning Strategy

Members received a report that presented a first draft of a SEND Joint Commissioning Strategy, which was a requirement of the SEND Code of Practice.

Comments on the draft, already received from officers and other groups, was provided. Members discussed those comments and made a number of their own. Details of discussion could be summarized as follows:

- detail would be included in the Strategy, linking recommendations back to the original needs assessment and clearly showing the rationale for those recommendations.

- Priorities 3 and 4 would be combined.

- the Group discussed personal budgets at length and agreed that wording around this needed to be strengthened, considerably.

- Stockton had a Designated Medical Officer and attempts to recruit a Designated Clinical Officer were being undertaken to compliment the role of the Medical Officer.

- further consideration of the narrative, in recommendation xii, relating to data gathering and sharing, would be undertaken with the CCG.

- consideration to be given to including specific reference on how priorities would be achieved. It was noted that there would be an Action Plan underpinning the strategy which would be formulated by the SEND Commissioning Group.

- members recognized the importance of providing alternatives to out of area education and care placements, particularly as it would provide the best outcomes for children. This needed to be clearly reflected under priority 7.

- it was clear that the strategy needed to recognize the role of schools as commissioners of a number of SEND services.

- reference to the Enhanced Schools Model implementation, in priority 8, needed to be remain, though the narrative around it could be amended if necessary.

The strategy would be cross-referenced against the code of practice.

Further work on the development of the strategy was planned with parents, carers and young people.

A revised copy of the draft strategy would be sent to members of the Group in due course.

Ultimately, the Strategy would be signed off by the Health and Wellbeing Board. it was suggested that it also be circulated to the Safeguarding Children's Board.

RESOLVED that the discussion around the strategy be noted and actioned as appropriate.

4 Health Initiatives

Members received a report that provided some detail of successful bids under the health initiatives programme, which was funded by the CCG and managed by Catalyst.

A version of the report, that provided more information around Children's schemes would be circulated to the Group.

RESOLVED that the report be noted.

5 0 - 19 Programme

The Group received a report that provided details of the procurement process associated with the 0-19 Wellbeing Model. It was explained that the tender had been split into three lots and the Group received details of the bids received, together with a recommendation relating to which bidders should be awarded the contract.

Members noted that the procurement process had been robust and transparent and feedback would be provided to unsuccessful bidders.

Members were assured that the specification of the contract was very strong and would allow commissioners to hold the provider to account.

In terms of governance arrangements it was suggested that a representative from the contracting team should attend governance meetings.

RESOLVED that the report be noted and the proposals, contained in the report, relating to which bidder should be awarded the contract be endorsed.

6 Forward Plan

Members considered the Forward Plan and a number of amendments were suggested.

Children and Young People's Health and Wellbeing Commissioning Group

A meeting of Children and Young People's Health and Wellbeing Commissioning Group was held on Wednesday, 3rd January, 2018.

Present: Emma Champley (Chairman)

Cllr Mrs Ann McCoy, Jason Harwin, Jo Heaney, Tanja Braun (Sub for Sarah Bowman - Abouna)

Officers: Michael Henderson

Also in attendance:

Apologies: Martin Gray, Sarah Bowman - Abouna, Kate Birkenhead

CHW 27/17 **Declarations of Interest**

Councillor McCoy declared an interest in item 7 entitled commissioned looked after children's mental health service, as she served on TEWV's Council of Governors. Cllr McCoy took no part in the discussion or voting on this matter.

CHW 28/17 **Minutes of the meeting held on 6 November 2017**

The minutes of the meeting held on 6 November 2017 were confirmed as a correct record.

CHW 29/17 **Alcohol Service**

Members received a report that provided an overview of the Alcohol Service.

The report suggested that an option to extend the current contract, by 12 months, be taken up, and a direct award of a further 12 months (1 April 2019 to 31 March 2020), be made to the current provider (Change Grow Live (CGL)).

It was noted that during this 24 month period, a comprehensive review of the service model would be undertaken. By undertaking the extension and direct award the contract renewal date would be brought in line with the substance misuse contract. It was felt that this alignment of contracts would create efficiency opportunities at the time of re-procurement.

It was noted that officers were looking at whether any savings could be realised during the extension/ award periods.

It was indicated that performance information relating to the contract would be provided to this Group.

An update on work being undertaken by the Police was provided during consideration of this item:

- Cleveland Divert - This was an early intervention programme and looked to get people into services quicker without criminalising them i.e. there was a conditional offer that individuals would not face criminal charges, if they engaged with specialist services. Work was ongoing to understand what the

demand on services (e.g. alcohol, drugs, mental health) might be and this would be shared with public health in due course. Potential increases in demand may create the need for additional commissioning and there would need to be discussions in this regard.

- there was considerable work being progressed around Adverse Childhood Experiences, particularly in Middlesbrough

It was agreed that a report on Cleveland Divert and the potential demand issues would come back to this and the Adults Commissioning Group.

RESOLVED that:

1. the report be noted.
2. the current Alcohol Service contract, be extended by 12 months, to 31 March 2019 and a direct award be made to Change Grow Live , for a further 12 months, from 1 April 2019 to 31 March 2020.
- 3, performance information and an update be provided to this group, towards the end of the extension and direct award period.
4. a report on Cleveland Divert be presented to a future meeting.

CHW 30/17 SEND Commissioning Strategy

Members received a draft SEND Joint Commissioning Strategy.

It was explained that there were plans to consult with parents, carers and young people. It was also explained that, following the consultation, and any other comments, the Strategy would come back to the Group and the Health and Wellbeing Board for approval.

Actions identified in the strategy would be prioritized and progress against the action plan would be brought to this group periodically.

RESOLVED that the report and discussion be noted and actioned , as appropriate,

CHW 31/17 CAMHS

Members received an update on the CAMHS Service review.

Details of the rationale for the review and the methodology to be used was provided.

Members noted some of the intended outcomes of the review including:

- an understanding of what services were available, which supported families and the wellbeing of children and young people.
- understanding the landscape and ensuring all partners were working collaboratively together, and, if possible, to the same set of outcomes.

In terms of timescales a gant chart had been developed and could be provided to the Group. It was envisaged that the review would be completed in April 2018.

Members were provided with a copy of the refreshed Future in Mind Plan, and discussed some of its new elements.

RESOLVED that the update be noted and monthly updates be provided until such a point is reached, when a written report would be appropriate.

**CHW
32/17** **LAC CAMHS Specification**

Members considered a report that provided options relating to the Commissioned Looked After Children Mental Health Service.

RESOLVED that

1. a direct award to TEWV, for the period of 6 months 1st April 2018 - 30 September 2018 with a revised service specification.
2. a further report be considered at the Group's June meeting.

**CHW
33/17** **Autism Spectrum Disorder**

An update on ASD pathway and waiting list was given.

It was noted that a meeting had been held between the CCG and Council and a number of actions had been identified. TEWV was looking at how the waiting list might be addressed. More meetings were planned in February.

Action plans had been rationalized.

Meetings with North Tees had been held in terms of the diagnostic element of the pathway.

RESOLVED that the update be noted.

**CHW
34/17** **Forward Plan**

Members noted the Forward Plan

Adults' Health and Wellbeing Commissioning Group

A meeting of Adults' Health and Wellbeing Commissioning Group was held on Monday, 18th December, 2017.

Present: Ann Workman(Chairman), Cllr Jim Beall, Emma Champley, Liz Hanley, Paula Swindale

Officers: Michael Henderson, Ruby Poppleton, Tanja Braun

Also in attendance:

Apologies: Sarah Bowman - Abouna, Kate Birkenhead

1 Declarations of Interest

Councillor Beall declared a personal, non prejudicial interest in item 4 'Integrated Alcohol Services for adults and young people as he had a family member who worked for Change Grow Live.

2 Minutes of the meeting held on 29 November 2017

The minutes of the meeting held on 29 November 2017 were confirmed as a correct record.

Members noted that the expression of interest relating to specialist smoking services was being progressed.

3 Integrated Alcohol Services for adults and young people

Members considered a report that provided an overview of the Alcohol Service.

The report suggested that an option to extend the current contract, by 12 months, be taken up, and a direct award of a further 12 months (1 April 2019 to 31 March 2020), be made to the current provider (Change Grow Live (CGL)).

It was noted that during this 24 month period, a comprehensive review of the service model would be undertaken. By undertaking the extension and direct award the contract renewal date would be brought in line with the substance misuse contract. It was felt that this alignment of contracts would create efficiency opportunities at the time of re-procurement.

It was suggested that during the extension/direct award period there may be opportunities to negotiate a reduction in the contract amount, in view of potential efficiencies the provider may be able to realise. This would be looked at further, via the Council's procurement section.

RESOLVED that:

1. the report be noted.

2. the current Alcohol Service contract, be extended by 12 months, to 31 March 2019 and a direct award be made to Change Grow Live , for a further 12 months, from 1 April 2019 to 31 March 2020.

3. Officers investigate opportunities to reduce the contract amount during the extension and direct award periods.

4 Healthy Heart Check Review Update and Commissioning Intentions 2018/2019

Members considered a report that :

- informed the Commissioning Group on outcomes of the service review for NHS Health Checks in Teesside.
- provided an update on 2016/17 activity in Stockton.
- highlight the current contractual position of the NHS Health Check and suggest future contractual arrangements.

Members were provided with recommendations that came out of the service review. These included:

- more proactive marketing of the health checks.
- a potential rebranding to NHS Health Check.
- co operation between local authorities in Tees.
- development of a commissioning and payment model that ensured that people living in the most deprived areas were prioritised and targeted to participate.
- provision of NHS Health Checks within General Practices should be the core model.

Members discussed referrals to lifestyle services and the efforts to increase this.

It was agreed that it was important to, particularly, highlight the services available to people living in the most deprived areas.

It was suggested that the Health Checks could link in with Community Hubs, as the Hubs were developed.

It would important to ensure primary care provided a degree of flexibility in terms of when checks were undertaken, for example, out of hour opportunities.

RESOLVED that:

1. the Council enters into contracts with local General Practices to deliver the NHS Health Check in 2018/19.
2. together with Hartlepool, Middlesbrough and Redcar and Cleveland Borough Councils, the Council continues to commission data management support from NECS.
3. the Council's Public Health Service ensures cost effective provision of NHS

Health Check training, marketing, branding and resource development and provision through cooperation with Hartlepool, Middlesbrough and Redcar and Cleveland Borough Councils.

5 Provider Engagement Event 27 September 2017

The Commissioning Group considered a report relating to two care provider engagement sessions to facilitate a discussion across a number of key topics.

The outcome of the engagement was a commitment to work collaboratively across the sector. A number of specific actions had been proposed and these were provided to the Group. These actions would be progressed by the Integrated Strategy Team during 2018.

A pro forma had been sent to providers, asking them to identify areas of interest that they would like to develop, alongside the Council and partners. There had been a disappointing response to this and officers would send a reminder.

RESOLVED that the report be noted.

6 Clinical Education and Training Programme for Care Homes

Members were provided with details of a scheme delivered by an alliance of organisations known as the North Tees and Hartlepool Education Alliance and comprising:

- North Tees and Hartlepool NHS Foundation Trust
- Tees Esk and Wear Valley NHS Foundation Trust
- Alice House Hospice, Hartlepool
- Falls service, Stockton

The scheme provided education and training programmes aimed at supporting and empowering registered and non-registered staff employed by care homes to make confident, informed decisions around residents' care, resulting in avoidable admissions into hospital and enhancing the residents and staff experience.

A pilot during 16/17 had been very successful and details of reductions in A and E attendances and emergency admissions from Stockton Care Homes were provided. Funding for 17/18 and 18/19 was being requested from the Better Care Fund and the training would expand to include other areas such as skin integrity training, digital technology to record National Early Warning Scores.

RESOLVED that the information be noted.

7 Forward Plan

Member considered the Group's Forward Plan.

A number of suggested changes were made to the Forward Plan.

RESOLVED that the Forward Plan be amended and reviewed further outside

the meeting.

Adults' Health and Wellbeing Commissioning Group

A meeting of Adults' Health and Wellbeing Commissioning Group was held on Wednesday 24 January 2018.

Present: Ann Workman (Chairman) (SBC), Cllr Jim Beall (SBC), Emma Champley (SBC), Sarah Bowman Abouna (SBC), Paula Swindale, (CCG)

Officers: Nigel Hart, Karen Shaw (SBC), Karen Hawkins (CCG)

In Attendance: Martin Skipsey, Lisa Tague (SBC)

Apologies: Kate Birkenhead (NHSE), Liz Hanley (SBC)

1 Declarations of Interest

There were no declarations of interest.

2 Minutes of the meeting held on 18 December 2017

The minutes of the meeting held on 18 December 2017 were confirmed as a correct record.

3 Care Co-ordinator Service – Evaluation by the CCG – December 2017

Members were provided with a commissioner evaluation from NHS Hartlepool and Stockton CCG in relation to the Care Co-ordinator service provided by Hartlepool and Stockton Health (HASH) which commenced in September 2016 and was due to end 31st March 2018. The service had been funded through the Local A&E Delivery Board (LADB) who had recommended that its contract be extended further, subject to CCG ratification.

The key findings and outcomes of the 2 year pilot were summarised. This included confirmation that 4,012 patients had undertaken an assessment and received a care plan via the service from September 2016-August 2017, which had exceeded the initial target. 35 patients were also now in receipt of a personal health budget, and this was increasing each month. 852 patients had also been signposted to appropriate voluntary and community sector services as part of their care plan thus providing additional support mechanisms outside of the formal Health and Social Care services offered.

Members welcomed a clearer pathway to service delivery being established addressing both duplication and any gaps in provision and referenced the importance of inclusion within the pathway of carers, particularly that provided by informal carers. It was also acknowledged that decisions made elsewhere regarding the commissioning of community assets needed to match our future needs. The CCG would endeavour to undertake further work to identify from existing carer data any emerging themes of what community assets were required, and what referrals were being made to the VCS.

RESOLVED that:-

1. The report be noted.

2. Approval be given to continue beyond the pilot period to develop a future model of support which benefits health and social care
3. The future model be specific to learning in Hartlepool and Stockton- on-Tees uniquely and also supports a 'hub' MDT, person-centred care and support approach within each locality
4. LADB extend the funding for a further two years to allow the service to develop in supporting the challenges of local delivery, including the STP.
5. The future work of the CCG in identifying the future need for community assets be noted.

4 BCF Delivery Group Update – January 2018

Members were provided with an update from the BCF Delivery Group and were invited to comment on the format of future updates to this Group.

Reference was made to the work being undertaken to understand why the BCF metrics for Reablement and care home admission were not currently being achieved and it was requested that the results of this work be shared with both the Corporate Director of Adults & Health and the Cabinet Member.

The Commissioning Group was happy to receive future BCF Delivery Group updates in the format provided.

RESOLVED that:-

1. The update report be noted and the format used be approved for future reporting to this Group.
2. The results of the work being undertaken to understand why the BCF metrics for Reablement and care home admission were not currently being achieved be shared with both the Corporate Director of Adults & Health and the Cabinet Member.

5 Review of Funding for the Stroke Association

Consideration was given to a review of the service received from, and funding provided, to the Stroke Association who currently received £38,000 per annum from the carers strand of the Better Care Fund to provide the Stroke Recovery Service Stockton.

The aim of the service was to provide information, emotional support and practical advice to stroke survivors, their families and carers. The current 3 year contract was due to expire on the 31st March 2018.

A full service review was last carried out in 2014 which concluded that the service was of a high quality and contributed greatly to improving the life and ability of stroke survivors to live independently and reduced the need to access

health and social care services. Since this time the service had benefitted from additional resource provided by the Martin Lewis Foundation and had continued to receive satisfactory reviews with the most recent being carried out in July 2017.

RESOLVED that the Commissioning Group:

1. Note the work being undertaken by the Stroke Association's Stroke Recovery Service Stockton; and
2. Approve an extension of the contract until the end of May 2018 in order to allow the Service to be reviewed alongside other elements of the Better Care Fund's work stream on Prevention which are being reviewed at that time.

6 Advocacy Hub and Advocacy Service 18/19

Members were appraised of the current Tees Advocacy Hub and Tees Advocacy Service delivered by Redcar & Cleveland Council on behalf of both Stockton and Middlesbrough Councils. Delivery of the service fulfilled requirements introduced by the Mental Capacity Act 2005; the Mental Health Act 2007; and the Care Act 2014.

Each of the contracts were due to end on 30th April 2018 and 31st May 2018 and this Council funded the Framework whilst the Hartlepool and Stockton on Tees Clinical Commissioning Group funded the Hub.

The Commissioning Group were presented with 3 options for the future delivery of the Framework. The preferred option (3) proposed was to procure Advocacy services via a one year framework, with an option to extend for 1 x 12 months in partnership with Redcar and Cleveland Council (Middlesbrough Council once confirmed) In accordance with the Contract Procedure Rules. Redcar and Cleveland council have agreed to lead on the process. Procurement via a framework would allow for value for money to be achieved as the providers would be evaluated on quality and cost. As part of a revised framework, providers not currently on the framework could be encouraged to take part in order to increase capacity and choice. The situation would be reviewed post 30/04/19 with consideration of the planned regional approach to Advocacy on the NEPO work plan. This option supported collaborative working across commissioners, encouraged a choice of providers, and offered value for money.

RESOLVED that Option 3 for the future delivery of the Tees Advocacy Framework be approved.

7 Forward Plan

Members considered the Forward Plan including items still to be scheduled. It was agreed that each of the leads be contacted to establish when their item was expected.

Reference was made to what was to be included within the Care Home Update report due in February. It was suggested that a regular Stockton Care Home

Meeting be established to include AW, PS, EC, RP & MS to discuss the wider Care Home agenda, particularly given that 25% of our Care Homes required improvement. This should include consideration of domiciliary care also and would link with our existing work with providers. .The Care Home Update to this Group could then reflect these discussions.

A number of funding decisions and recommendations were expected to be made during February and a summary of these was suggested as being useful for this Group in March, along with a Briefing Note from the Integration Board.

RESOLVED that the Forward Plan be amended and discussion noted/actioned.

Adults' Health and Wellbeing Partnership

A meeting of Adults' Health and Wellbeing Partnership was held on Tuesday, 6th February, 2018.

Present: Ann Workman,

Cllr Jim Beall, Dave Turton, Emma Champley, Steve Pett (Sub for Julie Parkes), Jane Edmonds, Alan McDermott, Steve Rose, Paul Whittingham (Sub for Paula Swindale), Christine Cooke

Officers: James O'Donnell, Tanja Braun, Gemma Mann, Paul Taylor, Kirsty Wannop

Also in attendance: Catherine Monaghan, Belinda Peckett, Julie Auffret,

Apologies: Julie Parkes, Paula Swindale, Sharon Barnett, Chawla Girish, Graham Clinghan, Dominic Gardner, Margaret Waggott

1 Declarations of Interest

2 Hospital at Home

Members received a presentation regarding the Hospital at Home initiative.

The presentation provided :

Background to the service
Patients journeys
key performance indicators
added value
where next
patient experience

Hospital at Home delivered care at home for patients with exacerbations of COPD. The trust provided a full package of care to those referred.

Members noted the positive experiences reported by patients, their confidence in the service and preference over a hospital admission.

It was noted that there was potential to extend the model to frail elderly, nursing and care homes, heart failure.

Discussion:

- it was suggested that this presentation should be delivered to the STP Prevention Board.

-the vast majority of cases of COPD were linked to smoking, so any work the partnership could do to reduce this would impact significantly on the number of incidents.

- Patients' assessments considered if social care referrals were required.

- the trust worked with Carers of patients with COPD to help them understand the condition and manage it

- there was an increasing number of people accessing personal budgets and the Hospital@Home Team received training around Integrated Personal Budgets.

- Members discussed the clinical benefits versus financial issues associated with the initiative.

- it would be important to strengthen links with social care, care homes etc.

- reference was made to the early intervention work on loneliness and isolation and how there should be links with this work and Hospital @Home. Links with fuel poverty had been established.

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

3 HWB Development Day Feedback

Members received a report that detailed outcomes and next steps following a development day held by the Health and Wellbeing Board in December.

The session was set in the context of 'Think Community, not services'. Its aim was to develop the ability of the Board to create a shared understanding and commitment to the Board's strategic priorities over the next five years.

Attendees agreed that more open discussion about how Board issues sat with their organisation's current priorities and pressures would further develop trust among Board members and their ability to work together on key priorities.

Board members also discussed where barriers to achieving aims may exist and how these could be overcome. The main outcome was an agreement that the Board's agenda should have fewer items, with a focus on a smaller number of shared priorities and a limited section for 'business' items e.g. items that come to the Board more as a matter of process rather than to ask Board members to work together to problem-solve.

Details of the next steps were provided:

- The Director of Adults and Health, Director of Public Health and Consultant in Public Health would work further with Change and Transformation to use the outcomes of the session to help frame the Strategy and its priorities.

- The development of the Strategy would continue through this work, with consultation and engagement across a range of stakeholders. The refreshed Strategy would set out key strategic issues where the Board could have most impact, working together across the health and wellbeing system.

A further Board development session would be arranged when appropriate.

RESOLVED that the update be noted.

4 JSNA - Sexual Health , Environment

Members received JSNA templates which had been completed for :

Sexual Health
Environment

As well as highlighting any potential gaps in the information, conclusions and strategic direction contained in the JSNA topics, members were asked to consider how their organisations, individually and/ or collectively could support any plans/activity identified.

Sexual Health - Discussion

- it was considered that there were opportunities for partners to assist in raising awareness of prevention and screening services. and there could be further consideration of this.
- the North Tees Hospital offered to assist with providing information that might help to target certain groups.
- current spend on topics would be aligned to strategic action plans.
- period poverty was dealt with under the poverty JSNA topic.

Environment - Discussion

- it was pointed out that air pollution regulations, coming into force in 2020, meant that partners needed to
- members discussed the impact that the built environment could have on people's mental and physical health. Further discussion around this would take place outside the meeting.

RESOLVED that:

1. the discussion be noted /actioned as appropriate.
2. the topic templates be approved for uploading to the live web site.

5 BSF Update

Members were provided with a high level update on BCF and were asked to identify what information they would like to see going forward.

A high level update would be provided quarterly to the Partnership, for information.

RESOLVED that the update be noted and further updates be provided, for information, on a quarterly basis.

6 Learning Disabilities Partnership - Minutes

Members considered the minutes of the Learning Disability Partnership Board held on 6 December 2017.

Members noted that public health and NHS England were developing a plan to improve screening rates and it was agreed that a strand of that should relate to people with learning disabilities.

It was noted that the minutes referred to the implementation of an Accountable Care Partnership across health and social care. It was explained that Stockton Borough Council had not signed up to such a Partnership.

Reference was made to the recent decision made by the CCG relating to Respite Care and Short Break Opportunities for people with learning disabilities and their carers. It was queried what the next steps in this process would be and an update would be sought on where discussions would take place.

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

7 Health Protection Report

Members received a Health Protection Report that had previously been considered by the Health and Wellbeing Board.

Discussion:

- on key statistics, and where it would be helpful, the England Average would be included in future reports.

- consideration would be given to providing comparators based on similar areas to Stockton.

- it was agreed that public health would work with partners to improve uptake of flu vaccination.

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

8 Forward Plan

Members considered the Forward Plan.

Consideration to be given to including winter planning on the Forward Plan

It was noted that Catalyst had appointed Sara Dalton, as Health and Wellbeing Programme Manager.

Domestic Abuse Steering Group

A meeting of Domestic Abuse Steering Group was held on Tuesday 6 December 2017.

Present:

Councillor Jim Beall (SBC), Barry Coppinger (PCP), Callum Titley (SBC), Lesley Gibson (Harbour), Sandra Clement (sub for Rosana Roy) (NPS), Steven Hume (SBC), Councillor Ann McCoy (SBC), Councillor Steve Nelson (SBC), Lauranyne Featherstone (sub for Steve Rose) (Catalyst), DI Darren Birkett (sub for DCI Helen Barker) (Cleveland Police), Mandy Mackinnon (SBC), Barbara Potter (Hartlepool and Stockton CCG), Jane King (sub for Dominic Gardner) (CCG)

Also in attendance: Michael Henderson (SBC), Jen Milsom (Cleveland Police)

Apologies: Martin Gray (SBC), Barry Coppinger (PCC), Emma Champley (SBC), DCI Helen Barker (Cleveland Police), Rosana Roy (NPS), Dominic Gardner (TEWV), Lesley Gibson (Harbour), Stuart Harper-Reynolds (NTFT), Steve Rose (Catalyst)

1. Chairman

It was agreed that Sarah Bowman-Abouna be appointed Chair of the Steering Group for this meeting.

2. Declarations of Interest

Councillor Ann McCoy declared a personal non prejudicial interest in item 10 entitled 'Domestic Abuse Strategy Action Plan' as she served on the Board of Governors of Tees, Esk and Wear Valleys Mental Health Trust, which was referred to in the papers.

Councillor Jim Beall declared a personal non prejudicial interest in item 10, entitled 'Domestic Abuse Strategy Action Plan', as he served on the Board of Governors of North Tees and Hartlepool Foundation Trust, which was referred to in the papers.

3. Minutes of the meeting held on 4 October 2017

The minutes of the meeting held on 4 October 2017 were confirmed as a correct record.

During discussion it was pointed out that a number of members had attended a recent meeting of MARAC and had found it very useful. The opportunity to attend future meetings was available to other Steering Group Members.

4. Domestic Abuse Operational/Tactical Group meeting – 29 November 2017

Members considered the minutes of the above meeting and reference was made to some of the key areas. Discussion could be summarised as follows:

- There had been a marginal decrease in the repeat victims' rate.
- Arrest rates linked to a crime had reduced in Stockton to 34%, whereas Middlesbrough's was at 43.6%. Cleveland Police would be looking at the

reasons for this in detail and would report back to the Operational Group.

- There was a challenge around cases that were going into the children's HUB. It was agreed that it was important that cases highlighted all risk factors associated with an incident. It was noted that the Operational Group was investigating this and it was also an area of interest for the Safeguarding Children Board.
- The IOM process was well underway and since the project had started, 3 of the 10 had not committed any offences, which was being seen as positive. It was important that checks were routinely made with victims to ensure that they were reporting offences.
- There was a discussion around the need for Harbour support at Roseberry Park and Steve Hume indicated that he would look into whether this had been taken forward.
- Further to previous discussions, the Steering Group considered the possible link between repeat perpetrators and repeat victims. It was explained that victims were considered to be a repeat victim if they were the victim of more than one domestic incident, within a 365 day period. Victims of multiple domestic incidents, within a 365 day period, would be recorded as the appropriate number of repeats i.e. victims of 3 incidents, within 365 days, would count as 2 incidents, 4 as 3, 5 as 4 etc. In the 12 months ending September 2017 there had been 4,872 domestic abuse incidents reported; 2,209 of these were repeat with a 45.3% repeat rate. The 2,209 repeats were linked to 1081 victims. 1 victim accounted for 36 repeats. To identify the perpetrators responsible for the repeats would need each incident to be manually reviewed.
- It was noted that the police were working with some of the most prolific repeat victims, to provide support. It was noted that most of the calls to the police, from these individuals, were recorded as domestic incidents but no crime was involved.
- It was agreed that it would be important to develop some of the statistical data associated with adult safeguarding and this should be considered at the Operational Group and reported to this Group.

RESOLVED that the minutes and discussion be noted and actioned as appropriate.

5. Peer Mentor Programme Progress

The Steering Group received a report relating to the Peer Mentor training programme.

Members noted the positive start to the programme, particularly in terms of how it was helping to engage and support survivors.

It was agreed that a young person's peer mentor would attend a forthcoming meeting of the Stockton Youth Assembly, if that was possible.

It was agreed that it would be helpful for this group to receive some high level information about some of the experiences of the survivors being supported through the programme. Identification of themes would help the Steering Group in its wider work.

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

6. Domestic Abuse Champions

Members considered a report relating to the Domestic Abuse Champions Network.

The Network comprised professionals who developed environments within their own agencies to help to tackle the complex issues surrounding Domestic Abuse. The Network had been established by the Council and Harbour.

There were Network meetings, every 8 weeks, and there was on going work to increase its membership.

Members were asked to ensure that, within their organisations there was a domestic abuse policy for its employees; a person/ people identified to provide support to staff and identify someone to link in with the Network and attend meetings. Harbour was asked to provide the Steering Group with a breakdown of organisations who were represented at the Network, so that any gaps could be identified.

It was noted that the Network did have links with workplace Health Advocates.

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

7. Operation Encompass

Consideration was given to a report relating to Operation Encompass.

It was explained that, as part of the continued development of Operation Encompass, a focus group with Stockton Schools had been held in October. Invites had been sent to school safeguarding reps, Cleveland Police and the 10 schools with the highest number of Encompass referrals.

Members were provided with a summary of key points and development opportunities, coming from the focus group.

Agreed next steps were detailed:

- A task and finish group was working at a Tees level to explore the feasibility of minimum standards for schools, as well as addressing some of the initial concerns, for example how to effectively report issues that had occurred in the school holidays.

- Quarterly meetings would be put in place for Stockton schools, starting in January 2018. It was hoped that these meeting would be develop to include the opportunity to share good practice, as well as highlight issues, encouraging joint problem solving and support.
- The role of additional training and awareness for schools needed to be explored further with possible options provided for discussion at future meetings with schools.
- Encompass data would continue to be analysed through the Domestic Abuse Operational Group, with developments and emerging issues shared with the Steering Group.

During discussion:

- It was agreed that there needed to be a review of all the work being done in schools and how coordinated that work was.
- The Tees task and finish group had produced a set of draft best practice guidelines document and members were provided with a brief summary of its contents. It was agreed that updates on the best practice guidelines would be presented to this Steering Group.
- The Police had appointed an Early Intervention Co-ordinator, working with schools. Reference was also made to the 'through the eyes of the child' initiative where police officers, attending domestic incidents, were specifically mindful of the impact, the incident had on the child. This should generate more information and safer referrals.
- The Operational Group received all data on Encompass referrals and it was particularly monitoring the ten schools with the most referrals.
- There was a request that school governors' awareness be raised with regard to Operation Encompass and particularly the identified safeguarding lead governor. It was noted that this matter was covered in the best practice guidelines.
- It may be appropriate to undertake some awareness raising with school nurses.

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

8. Police Transformation Fund Progress

Consideration was given to a report that provided an update on the progress of the Police Transformation Fund Project. The report included a one page outline

of the proposed whole system approach to Domestic Abuse.

Members were provided with details of some of the actions that had been completed/progressed towards the whole system approach model:

- Development of a business case for a major domestic abuse training programme.
- Improvement work following the review of Operation Encompass to ensure that the scheme remained valued in education and safeguarding teams, and fit for purpose.
- Development of a Domestic Abuse Scrutiny Panel.
- Family Courts advice for DA victims
- Health Services, particularly GPs, had been provided with advice on understanding how they can support safeguarding and victims' rights.
- A review of the MARAC.

There would be a review of the project when funding was coming to an end and consideration would need to be given to whether it, or elements of it, should be maintained going forward, within available resources.

RESOLVED that the report be noted and progress report be provided when appropriate.

9. Training Plan for frontline healthcare professionals and routine enquiries in healthcare settings

Consideration was given to a report that provided an update on the above.

Members noted that domestic abuse training, for frontline professionals, had been arranged and 4 courses would take place during January and February 2018. Details of the learning objectives were provided.

It was explained that frontline staff completed the level two training workshop that was provided by the Adult Safeguarding Board.

It was noted that it was intended to strengthen the role of local healthcare services, in identifying victims of domestic abuse, and the Ask and Act model had been highlighted with all GP practices.

All Practices had the links for the Local Safeguarding Children Board and the Teeswide Safeguarding Adults Board on line training and all information was shared weekly with practice managers.

During discussion

- It was noted that the North Tees and Hartlepool Trust had expanded the range of staff needing level two training, and that training now had to be refreshed every three years, rather than just being undertaken once. This change had had an effect on compliance rates, which had temporarily dropped. However, more staff were being trained and that training was regularly refreshed.

- There was now more face to face training and this was considered to be particularly important for an issue like Domestic Abuse. Harbour delivered a 90 minute training session, specifically around Domestic Abuse, at level two training workshops.
- Members were interested to understand how Domestic Abuse awareness training was progressing with GP practices and it was agreed that details of this should be provided to the Group, including the number of practices receiving training and any issues/barriers. This training was particularly important as referrals from GPs into Domestic Abuse services and Adult Safeguarding was very low. It was suggested that making contact with practice managers was often a more successful route into GP practices.
- It was noted that TEWV staff had not been able to access some of the training referred to in the report. Members agreed that the training should be accessible to all relevant agencies and further discussion in this regard would take place outside the meeting.
- The issue of GPs charging, victims of Domestic Abuse, for certain letters, was raised again and the Group was reminded that this had been considered via the Health and Wellbeing Board. The GP Federation had written to all GPs urging them not to levy a charge for such letters. It was suggested that this continued to be an issue and further discussions around this would be undertaken outside the meeting.
- In terms of referrals to Harbour Services, GPs had highlighted problems with the length of the referral form and suggested that this may be a barrier to referral. Work had been undertaken in this area and the current position would be clarified with Harbour.

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

10. Domestic Abuse Strategy Action Plan

Members were provided with the current Domestic Abuse Strategy Action Plan

It was agreed that the Steering Group would receive an update on national development, such as the drive project.

Specific reference was made to:

- Catalyst producing a plan of action relating to maximising opportunities for the VCSE to work with communities regarding domestic abuse prevention and identification.
- The recent recruitment of a Domestic Abuse coordinator. It was explained that part of her role was to coordinate delivery of the action plan.

- Members suggested that the Action Plan be RAG rated.
- Coordination of work being undertaken in schools needed to be considered outside the meeting. It was noted that a report on this matter was due at the Steering Groups February meeting.

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

11. Forward Plan

Members noted the Forward Plan and further items were identified:

- Issues coming from the Joint Targeted Area Inspection – Childhood Neglect.
- Review of the current Action Plan and development of the year 2 Action Plan – February 2018.
- Steering Group’s Terms of Reference – February 2018
- Best Practice Guidelines for Schools – Operation Encompass

RESOLVED that the Forward Plan be updated.