

## **AGENDA ITEM**

### **REPORT TO HEALTH AND WELLBEING BOARD**

**29<sup>th</sup> January 2020**

#### **REPORT OF DIRECTOR OF PUBLIC HEALTH / DIRECTOR OF COMMISSIONING, STRATEGY AND DELIVERY**

## **PREVENTION WORKSHOP UPDATE**

### **SUMMARY**

A prevention workshop was held in November 2019, on behalf of the Health and Wellbeing Boards in Stockton-on-Tees and Hartlepool (organised by HAST CCG and working jointly with SBC Public Health and Hartlepool Public Health). The aim of the workshop was to coordinate a discussion across key partners, to help align prevention priorities and clarify pieces of joint working on these across the system. This paper summarises the outcome of the workshop and proposes next steps.

### **RECOMMENDATIONS**

The Health and Wellbeing Board is asked to:

1. Consider the outcome of the workshop
2. Consider proposed next steps

### **DETAIL**

1. Earlier prevention is a priority for a range of organisations and is a key principle of the Health and Wellbeing Board. A prevention workshop was held on 11<sup>th</sup> November 2019, on behalf of the Health and Wellbeing Board (organised by HAST CCG and working jointly with SBC Public Health). The aim of the workshop was to coordinate a discussion across key partners, to help align prevention priorities and clarify pieces of joint working on these across the system.
2. The workshop was arranged across the North Tees and Hartlepool footprints, to maximise the learning across the two areas. It was agreed that Directors of Public Health would feed back from the workshop to the Health and Wellbeing Boards. This paper summarises the outcome of the workshop and proposes next steps.
3. The workshop was attended by a range of partners including SBC Public Health and Adult Services, HAST CCG, North Tees and Hartlepool NHS Foundation Trust, Hartlepool Public Health, Catalyst, Tees Esk and Wear Valleys NHS Trust, Hartlepool and Stockton Health Federation and Darlington Borough Council (for shared learning purposes).
4. Priorities to be considered at the workshop were selected by a working group across SBC Public Health, North Tees and Hartlepool NHS Foundation Trust and HAST CCG.

The priorities were selected as tobacco, alcohol and obesity on the basis set out as follows i.e. strategic fit across the key organisations attending the workshop. The working group was careful to focus the proposed priorities on prevention rather than on disease.

5. In November 2018 senior system leaders and stakeholders worked with the ICS Prevention Board to review its priorities and agreed two priorities:
  - Treating tobacco dependency as part of Smokefree NHS
  - Reducing alcohol related harmThese fit with the priorities of the Stockton-on-Tees Health and Wellbeing Board.
6. Smoking, alcohol consumption and unhealthy diet are also included in Public Health England's ICS plan; and the NHS Long Term has ambition on services for smoking cessation, adult weight management and alcohol care teams. Primary Care Networks are also currently in early development supported by the CCG, providing a timely opportunity to engage with this part of the health and social care system around prevention. The PCNs will receive intelligence packs based on the JSNA and on the Population Health Management system, which will also highlight tobacco, alcohol and obesity as key issues around prevention.
7. The workshop commenced with a presentation outlining the importance of focusing on a system-wide approach to prevention in the context of life expectancy and healthy life expectancy gaps and health inequalities. It highlighted the role of the Health and Wellbeing Boards in driving the work forward at strategic level; and of the NHS Long Term Plan in articulating the important role of the NHS in the prevention agenda.
8. The summary notes from the three group discussion sessions are appended to this paper. The obesity group has since met again to discuss the action plan and add further detail, which is currently being written up.
9. It is proposed that the actions identified through the group discussions are progressed in the following ways on the behalf of the Board:
  - The Alcohol Strategic Group considers the actions around alcohol and reports back to the Board on progress, in-line with its existing agreed reporting mechanisms.
  - Consideration is given to a Tobacco Alliance as proposed in another paper at the January 2020 Board meeting and if agreed, this group picks up the actions around tobacco and reports back to the Board in-line with agreed reporting mechanisms.
  - As obesity has not been identified as a key strategic Board priority for this year, it is not proposed that a separate group is set up around this work. Instead it is proposed that the individuals identified in the action plan are tasked with progressing the actions and the DPH reports back progress in 6 months' time (June 2020), including agreement on where each of the actions should sit e.g. travel / journey planning would sit well within the physical activity framework action plan, brought to the December 2019 Board.
10. The following next steps are also proposed:
  - That an update on how the 'system' is working around prevention should be brought back to the Board in 6 months' time (June 2020), as a follow-up to the workshop.
  - That as Primary Care Networks (PCNs) develop, their role in supporting the Board priorities is explored, as well as how they can work alongside the Board in a way that minimises duplication across the system; and maximises the knowledge and expertise inherent in their unique membership. It is proposed an item is brought back to the Board on this at an appropriate time point.

### **FINANCIAL IMPLICATIONS**

There are no current financial implications. Any future financial implications of proposed work will need to be considered by the relevant organisations, though many of the gains from the workshop will be enabled by improved joint working without a financial cost necessarily attached.

### **LEGAL IMPLICATIONS**

None noted.

### **RISK ASSESSMENT**

No specific risks identified.

### **COUNCIL PLAN IMPLICATIONS**

The work to shift attention and resource to earlier prevention across the system will support achievement of the Council Plan's health and wellbeing outcomes.

### **CONSULTATION**

The JSNA as well as needs assessments at local and regional level formed the basis for many of the issues discussed in the presentation session. Consultation and engagement are an inherent form of the needs assessment process. As further work is developed to deliver the action plans, further specific consultation and engagement is likely to be needed.

**Name of Contact Officer:** Sarah Bowman-Abouna  
**Post Title:** Director of Public Health  
**Telephone No:** 01642 524296  
**Email address:** [sarah.bowman-abouna@stockton.gov.uk](mailto:sarah.bowman-abouna@stockton.gov.uk)