# Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 29th January, 2020.

**Present:** Cllr Jim Beall(Chairman), Cllr Lisa Evans, Cllr Luke Frost, Cllr Lynn Hall, Cllr Mrs Ann McCoy, Martin Gray, Ann Workman, Fiona Adamson, Nicola Bailey, Sarah Bowman - Abouna, Barry Coppinger, Karen Grundy (Substitute for Sara Dalton), Shaun Mayo (Substitute for Dominic Gardner), Hilton Heslop (Substitute for Julie Gillon),

**Officers:** Michael Henderson, Mandy Mackinnon, Nathan Duff (SBC), Michael Haughton, Andy Copland (CCG), Simon Smart (PCC Office)

#### Also in attendance:

**Apologies:** Cllr Jacky Bright, Sara Dalton, Julie Gillon, Saleem Hassan, Sheila Lister, Anne Sykes, Dominic Gardner,

#### 1 Declarations of Interest

There were no declarations of interest.

#### 2 Minutes of the meeting held on 18 December 2019

The minutes of the meeting held on 18 December 2019 were confirmed as a correct record.

#### 3 Prevention of Serious and Violent Crime

Members received a presentation that provided :

- an overview of serious and violent crime in the Cleveland Police Force Area.
- prevention and intervention investment, undertaken by the Police and Crime Commissioner, including youth outreach provision, Adult Childhood Experiences and County Lines training, appointment of school liaison and Early Intervention Officers.
- proposed next steps, including:
  - piloting of violence prevention mentors in schools
  - a serious Violence Summit planned for February
  - work with partners to maximize funding opportunities.
  - development of a Serious Violence Strategy.

#### Discussion:

- it was noted that Home Office funding, relating to a number of interventions, ended in March and a review of the work undertaken would take place and be

discussed as part of the planned Summit, in February. Consideration would be given to identifying how successful work might be funded in the future. Feedback from the review could be provided to the Board, or, potentially, the Children and Young People's Partnership, in the Spring.

- planned work, in schools, would be sensitive to other services already in place, or being developed.

- the violence prevention mentors school pilot was still to be identified.

**RESOLVED** that the presentation be noted and further consideration be given to the outcomes from the review being reported to the Board or Children and Young People's Partnership.

## 4 NHS Five Year Operational Care Partnership Long Term Plan (LTP)

The Board received a presentation that provided an overview of the NHS Long Term Plan and plans associated with the North East and North Cumbria Integrated Care System (ICS).

Members were reminded that the North East and North Cumbria ICS was made up of four Integrated Care Partnerships (ICP) and Stockton on Tees Borough was in the 'South' ICP, with Darlington, South Tees, Hambleton, Richmondshire and Whitby, covering a population of 847,000. The presentation also looked at the South ICP plans that had been developed in partnership with local authorities, NHS providers and Clinical Commissioning Groups.

The Board noted that the local South ICP narrative plan constituted the following sections:

-Introduction and explanations of the current system context; including changes to organisational form and the development of Primary Care Networks

-Clear outline of the key aims and objectives of the ICP

-An overview of the challenges faced by the partnership in delivering the above

-A new approach to planning and delivering proactive care through adopting a population health management approach across all partners within the ICP

-Commitments relating to priority areas of change across the ICP during 2020 - 24.

As the NHS Long-Term Plan set out a new way of working it would draw together people and capabilities, resources, activities and leadership to collectively deliver greater value for the whole health and care system and its patients and service users.

This 'revitalised culture of support and collaboration' would be underpinned in the ICS/ICP by a new approach, with a move away from a reliance on armslength regulation and performance management to drive service improvement, towards a collaborative, system-wide approach based on shared accountability and mutual aid.

It was agreed that, only through working collaboratively could faster progress be made on improving population health, and ensuring the ongoing quality, affordability and equitable access to health and care services.

Discussion:

- Members noted that Primary Care Networks would be one of the key players in future collaborations.
- Work would take place on a variety of footprints, as was appropriate. Discussions were taking place with local authorities to identify what could best be provided on a Borough footprint.
- It was suggested that the Tees element of the South ICP could be called the Tees Valley Health and Care Partnership.
- The significant role of the third sector in Stockton on Tees was recognised but funding was likely to continue to have limited availability.
- The Community Pathfinder work would be important in identifying population health initiatives for the Borough.

RESOLVED that the presentation and discussion be noted.

## 5 Reducing Alcohol-related harm in Stockton on Tees

Consideration was given to a report that provided an update on the progress made with regard to the agreed strategic approach to reducing alcohol-related harm in the Borough.

Members noted that the Alcohol-related Harm Strategic Group, established by the Board, in June, met for the first time, in October 2019, with representation from Catalyst, the Council's licensing and public health teams, NHS trust, CCG and the Police and Crime Commissioner's Office.

The Group had identified key actions to begin to deliver against the priorities identified in the Board's Reducing Alcohol-related Harm Strategic Framework.. Members were provided with an action plan that detailed progress against priorities and activities.

Members noted the planned work in schools and it was explained that it would link with the Healthy Schools Programme.

Members agreed that the strategic approach was a good example of the partnership working that was needed to tackle complex issues. The Board's involvement demonstrated that partners' round the table viewed this as a priority

and gave officers permission to commit time to it.

Reference was made to the Minimum Unit Price and it was noted that actions, in this regard, had been identified in the prevention workshop that would be taken forward by the Strategic Group.

It was explained that the action plan would be revised for 2020/21, with clear outcomes and performance indicators.

RESOLVED that the update be noted.

## 6 Prevention Workshop Update

The Board noted that a prevention workshop had been held in November 2019, on behalf of the Health and Wellbeing Boards in Stockton-on-Tees and Hartlepool. 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. Members were provided with a report that summarised the outcome of the workshop and proposed next steps.

It was explained that the prevention priorities had been selected as tobacco, alcohol and obesity as they represented a strategic fit across the key organisations attending the workshop. The workshop facilitated three group discussions across the priorities and the summary notes and identified actions, from those groups, were provided to the Board.

It was proposed that the actions identified through the group discussions were progressed via appropriate Strategic Groups, with reports back to the Board, on progress, in-line with agreed reporting mechanisms. Where an appropriate Strategic Group did not exist, for certain actions, these would be progressed through other processes with the Director of Public Health reporting back to the Board, as appropriate.

It was also proposed that an update on prevention should be brought back to the Board and should include the role of the Primary Care Networks (PCNs) in supporting priorities.

RESOLVED that the report be noted and the proposals detailed above be agreed.

## 7 Stockton on Tees Borough Council's Peer Challenge: Health Inequalities

Members considered a report relating to addressing health inequalities and mitigating their effects, in the Borough.

It was explained that, in September 2019, Stockton-on-Tees Borough Council (SBC) hosted a team of Elected Members and senior officers, from other local authorities, together with advisors from the Local Government Association to carry out a Corporate Peer Challenge (CPC).

The CPC recognised the current good practice in the Council and also set out a series of recommendations, one of which was to:

'Seize the chance to fulfil a real place leadership role around health inequalities and accelerate and enhance partnership working.'

It was recognised that many factors, impacting on health inequalities were national policy issues e.g. benefits policies; national minimum / living wage. However, there was also strong evidence for a range of actions that could be taken, locally, to address, or mitigate, the impact of health inequalities. The success of these interventions and approaches was dependent on them being implemented systematically and at-scale. Working with partners would be key to this success.

The Board was provided with details of a refreshed approach to health inequalities, by the Council, which would be rooted in existing work, already in place, but would focus on scaling and implementing best practice in a systematic way. A new Council Plan was being developed to promote a matrixworking approach, across all areas of the Council's business, which fitted with the broad-reaching nature of the determinants of health and health inequalities. For example, work and income, housing, cohesive and safe communities, access to facilities and open space, and early years and education. The relationship between health inequalities and other areas of Council work was often two-way i.e. a healthy population was needed to support economic growth and development; and economic growth provided the circumstances for a healthier population.

It was proposed that a further report be brought back to the Board on how to ensure health inequalities, and their impact, would be considered systematically, and at-scale, across its work and strategic priorities e.g. embedding an approach across all Board organisations; and highlighting the impact of work to address health inequalities through indicators that help tell the 'story' of the Board's work i.e. rather than a detailed performance management framework that could miss the bigger picture.

## **RESOLVED** that:

- 1. The Council's approach to addressing and mitigating the impact of health inequalities be noted.
- 2. A report be presented to a future meeting of the Board on how the approach could help the Board refine its own strategic approach to addressing and mitigating the impact of health inequalities systematically and at scale.

## 8 Health and Wellbeing Update

Members considered the minutes of the Children and Young Peoples Partnership held on 19<sup>th</sup> June 2019 and the Adults Health and Wellbeing Partnership held on 2 July 2019. RESOLVED that the minutes be noted.

## 9 Members' Updates

Members noted that:

- The Better Care Plan 2020/2021 had been approved.
- The Council's Early Years System would be the subject of a Peer Review, in February, and details of outcomes would be reported to the Board.
- Dementia Friendly Premises 3 more certificates had been issued in the Borough
- Seven day GP access, in Stockton on Tees, had been rated as outstanding in a recent inspection. The service was to be expanded.
- Members noted that Steve Rose had stood down as Chief Executive of Catalyst. Board Members wished to record their thanks for the important work Steve had undertaken as Chief Executive and in his role as a member of this Board.

## 10 Forward Plan

Members noted the Board's Forward Plan.