

Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 28th April, 2021.

Present: Cllr Jim Beall(Chairman), Cllr Lisa Evans, Cllr Jacky Bright, Cllr Lynn Hall, Martin Gray, Ann Workman, Fiona Adamson, Sarah Bowman - Abouna, Jon Carling, Alex Sinclair (Sub for David Gallagher), Dominic Gardner, Barbara Bright (Sub for Julie Gillon), Lisa Oldroyd, Rachel Stephenson (Sub for Jonathan Slade), Natasha Judge (Sub for Peter Smith)

Officers: Michael Henderson, Gareth Aungiers, Aishah Waithe, Gemma McDonald

Also in attendance: Cllr Clare Gamble

Apologies: Cllr Luke Frost, Cllr Ann McCoy, David Gallagher, Julie Gillon, Jonathan Slade, Peter Smith

1 **Declarations of Interest**

Cllr Jim Beall declared a personal/non prejudicial interest in item 4 'Healthy Lifestyles and activity' as he was a member of the Tees Active Limited Board.

2 **Minutes of the meeting held on 31 March 2021**

The minutes of the meeting held on 31 March 2021 were confirmed as a correct record.

3 **Healthy Lifestyles and physical activity**

The Board received presentations relating to Physical Activity in the Borough.

The first presentation, from the Council's Public Health Service, considered:

- Physical Activity and the current COVID guidelines
- Physical Activity Priorities
- Physical Activity Data
- The impact of COVID on Inequalities
- The work of the Physical Activity Steering Group and a proposal to expand its membership.
- Planning and recovery

The Board also received a presentation from Tees Active, a not for profit charitable trust and the Council's strategic partner for physical activity and leisure. The presentation provided details of:

- Tees Active's venues in the borough.
- Online services developed in the last 12 months.
- The impact of community health initiatives that supported the most vulnerable.
- The Active Health and Lite 4 Life Programmes
- The social, economic, and environmental impact of Tees Active's Services
- Investment in facilities and services
- Membership data
- The Moving Forward Together campaign.

Discussion:

- During the pandemic, new routes into the community had been developed and existing routes strengthened e.g. the Voluntary, Community and Social Enterprise sector, the Community Champions Network, engagement with workplaces. It was agreed that these could be used to encourage physical activity across the population.
- Members supported the proposal to expand the membership of the Physical Activity Steering Group and further discussions, around this, would be undertaken outside the meeting, amongst partners.
- Inequalities had widened during Covid and would be a significant challenge, going forward.
- Investing in physical activity services had a positive economic and social impact. Figures, from Sport England, indicated that for every pound invested on community sport and physical activity, in England, an economic and social return on investment, of £3.91, was generated.

RESOLVED that the update and discussion be noted, and a further update and action plan be provided within 6 months.

4 Outbreak Management Update

Members received an Outbreak Management Update presentation, for the Borough:

- Cases were around 26 per 100k pop.
- There had been 3 deaths in last seven days
- There was likely to be increases in cases, as restrictions were lifted
- The vaccination rate stood at 59.4% which was above the North East and England averages.
- The impact of COVID was reducing in hospitals
- North Tees Hospital had delivered over 20,000 doses of the vaccine.
- Members noted the 'swiss cheese' model, which highlighted that no single intervention was 100% effective and a number of interventions were necessary to deal with the virus.
- There were now over one hundred Community Champions, across the Borough, and they were proving to be a valuable resource, providing direct contact with communities.
- Work was being undertaken relating to inequalities, with pop up vaccination clinics targeting communities.
- There was likely to be challenges relating to up take of the vaccine, by younger age groups, as they perceived the risk to them to be low.
- There were six new community testing centres (asymptomatic).
- There were a range of places where people could collect lateral flow testing kits, including community centres, workplaces and pharmacies. Kits could also be ordered online.
- Contact tracing was now being undertaken locally, as part of a pilot, known as Local Zero.

- COVID Marshals were working with a range of businesses and providing support. There was also an enforcement element to the Marshals' work.

RESOLVED that the update be noted.

5 Healthy Schools

Members considered a report that provided an overview of the proposal for the establishment of a Healthy Schools' programme following an initial pilot with a range of schools and set out the accreditation process.

It was proposed that the Stockton-on-Tees Healthy Schools Programme would provide a bespoke offer to schools to engage and work together with their whole school community (staff, parents, carers, pupils, senior leaders and the wider community) to implement sustainable, evidence based whole school approaches across key health and wellbeing themes.

It was explained that schools, which registered with the local programme, would have access to:

- Support, training, and development through established Personal Development Networks to understand and embed Healthy School Principles in their setting.
- A quality assured Stockton on Tees Healthy Schools' toolkit which aligned the programme with Ofsted criteria.
- Supporting good practice documents for each of the key themes of the programme
- A strong network of partner organisations to support implementation of actions identified through a self-evaluation process and light touch accreditation process.

A partnership approach would be taken to resourcing the Healthy Schools' programme. Management and oversight of the programme would be incorporated into the role of the Relationships and Health Education Coordinator, within the Education Improvement Service. In order to add operational capacity and further strengthen the developmental phase of the programme, an additional, temporary two-year Healthy Schools role would be created, using Public Health funding. Public Health nurses, from the 0-19 service, would provide direct support to schools. A toolkit and supporting resources would be made available via the Council's design and system development teams.

It was planned to launch the Healthy Schools programme to schools during the summer term, to introduce the self-evaluation process and enable schools to build this into their planning for the forthcoming academic year. Accreditation review panels would commence from October 2021.

It was anticipated that, following initial rollout and evaluation, the Healthy Schools programme would be able to be adapted to include early years

settings, colleges and higher education institutions.

Discussion

- Members agreed that it would be beneficial to build links between Primary Care Networks and the schools within the community they served.
- Schools were an important asset in the community and the programme had potential to reach into families.
- Members supported the model proposed and noted that it would be reviewed, when appropriate.

RESOLVED that the plans for the Healthy Schools' Programme be endorsed.

6 Adult Acute Mental Health Inpatient Services – Improvement Actions

Members received an update relating to an unannounced Care Quality Commission (CQC) inspection on some of Tees, Esk and Wear Valleys NHS Foundation Trust's adult inpatient wards in January. The Board was provided with a link to the full, published Care Quality Commission (CQC)

It was explained that the CQC had visited five wards, three at Roseberry Park in Middlesbrough, one ward at Cross Lane Hospital in Scarborough and one ward at West Park Hospital, Darlington. Following the visit the CQC had raised some concerns about the risk assessment and management processes, which they felt were complex and difficult to follow.

The Trust had provided assurance to the CQC that effective systems were in place in wards to help keep patients safe - and that further improvements would be made, with work already underway.

Members were provided with details of some of the improvement work that had been completed and was underway. It was explained that the Trust would be spending £3.6 million on recruiting 80 more care staff across its inpatient wards – with further investment planned across wider services, in the future. Significant investment was being made in technology (such as electronic patient record and systems) that would free up staff to spend more time on patient care.

Discussion:

- It was explained that the additional 80 staff, referred to, would support the enhancement of the overall ward structure. Details of how the additional staff would affect the inpatient wards' staff /patient ratios would be circulated to the Board.
- With regard to the electronic patient records, it was noted that the Trust was accelerating the programme for the replacement of the care record system, with a new system that had been developed in conjunction with service users, carers and staff. The new system would be more intuitive and provided access to parts of records for GPs, ambulance staff and

other health professionals. It would also be accessible to patients and to carers, where patient's permission had been given. It was anticipated that the new record system would be in place by April 2022.

- The Trust was committed to dealing with the concerns highlighted by the CQC to reassure the public and support its staff.

RESOLVED that the update be noted.

7 Members' Updates

The Board noted that staff from the Council's Adult Social Care Service would be presenting the Council's 'Well Led Programme' for registered care home and home care managers, to a National Conference of Adult Social Care Directors and senior staff.

8 Forward Plan

The Board noted its Forward Plan and members were encouraged to highlight any items they wished to be scheduled, outside the meeting.