

(Note: These minutes are subject to confirmation at the next meeting of the Board scheduled to be held on 17 November 2016)

Health and Wellbeing Board

15 September 2016

Present: Councillor M Hall (Chair)
Councillors K Clark and A Waggott-Fairley
R Nicholson, North Tyneside Council
H Hudson, North Tyneside Council
J Wicks, North Tyneside Clinical Commissioning Group
P Kenrick, Healthwatch North Tyneside
H Minney, TyneHealth
J Pratt, Tyne & Wear Fire & Rescue Service
L Hodgson, North East Ambulance Service
A Caldwell, Age UK North Tyneside
Also Present
Councillor J O'Shea
J McCallum, Newcastle Hospitals NHS Trust
K Buck and M Robson, North Tyneside Council

HW13/09/16 Chair's Announcements

In opening the meeting the Chair welcomed Hugo Minney to his first meeting of the Board. She also reported on Councillor Green's recovery from recent surgery and thanked all those who had contributed to the success of the Board's action day on healthy weight held on 6 September 2016.

HW14/09/16 Apologies

Apologies for absence were received from Councillors M A Green and L Spillard, J Old and W Burke (North Tyneside Council), J Matthews, L Young Murphy and J Soo-Chung (North Tyneside Clinical Commissioning Group), W Hodgson (Healthwatch North Tyneside), C Keen (NHS England), B Bartoli (Northumbria Healthcare NHS Trust), G O'Hare (Northumberland, Tyne & Wear NHS Trust) and D Titterton (Voluntary & Community Sector).

HW15/09/16 Substitute Members

Pursuant to the Council's Constitution, the appointment of the following substitute members was reported:

R Nicholson for W Burke (North Tyneside Council)
H Hudson for J Old (North Tyneside Council)
J Wicks for J Soo-Chung (North Tyneside Clinical Commissioning Group)

HW16/09/16 Declarations of Interest and Dispensations

There were no Declarations of Interest or Dispensations reported.

HW17/09/16 Minutes

Resolved that the minutes of the meeting held on 16 June 2016 be confirmed and signed by the Chair.

HW18/09/16 North Tyneside Children and Young People's Mental Health and Emotional Wellbeing Strategy 2016 – 2021

The Board received a strategy document which set out North Tyneside's multi-agency approach to promoting the emotional well-being and mental health of children and young people. The strategy had been developed by a multi-agency group and incorporated the findings from a national taskforce and encompassed the local Children and Adolescent Mental Health Service's (CAMHS) transformation plan. The strategy was not solely about services which would risk focusing too narrowly on targeted clinical care, ignoring wider influences and over-medicalising children and young people. The strategy considered community led change where everybody recognised the part they could play to build resilience and mental wellbeing, from young people themselves, parents and carers, schools and colleges, the voluntary sector and health and social care services.

The Board recognised that the strategy had been developed in the context of financial challenges facing those services that support and treat children and young people with mental health problems. The strategy had been formulated to complement the CAMHS transformation plan and proposed changes to the 0-19 children and young people's services and it aimed to shift emphasis towards prevention and early intervention. The Board examined how the strategy and its action plan would be delivered through evidence based interventions and how the action plan would address self harm among young people.

Resolved that (1) the North Tyneside Children and Young People's Mental Health and Emotional Wellbeing Strategy 2016 – 2021 be endorsed; and (2) the Children, Young People and Learners' (CYPL) Partnership be requested to monitor the implementation of the strategy and provide progress reports back to the Board in 6 months time.

(Reason for decision: The strategy gives direction to all partners involved in working with children and young people across the borough to consider how they can build resilience and improve mental wellbeing and help everyone understand and recognise the part they can play to build resilience and mental wellbeing.)

HW19/09/16 Signs of Safety: A Social Work Model for North Tyneside Council

The Board were provided with an overview of a model of social work practice entitled 'Signs of Safety'. Signs of Safety was a tool kit for child intervention work. It included guidelines for child intervention work, a range of tools for assessment, planning and decision making and processes for working with families, children and young people. It focused on how to build a partnership with parents and children where a child was at risk of abuse to strengthen and stabilise their family life. As a result families would feel empowered, there would be fewer referrals, fewer children would be removed from families and practitioners would have greater job satisfaction. The model of practice itself was not sufficient to transform children's services. For this to occur, the organisation would have to change with the practice which would require a culture change in terms of new ways of working, new skills, behaviours and knowledge.

Implementation of the Signs of Safety model would involve 2 years of strong and focused activity in learning, leadership, organisational alignment and meaningful measures supported by trainers and consultants to be purchased from the Signs of Safety company in what had been demonstrated to deliver substantial transformation. An implementation programme in a similar sized authority had cost approximately £150,000 over 3 years. The Signs of Safety company were in the process of submitting a bid to the government for innovation funding to develop its work in partnership with 10 local authorities. The Council had expressed an interest in being involved in the bid which could lead to 50% reimbursement of the local authority's costs.

The Board discussed the resource implications of implementing new methods of working whilst at the same time maintaining existing levels of service which would have to be carefully considered in formulating any delivery plan. It was stated that access to the system via the Front Door and the assessment pathways would not change but the methods of assessment would be enhanced. Implementation of the Signs of Safety model would not require further investment in information technology as the existing systems would be compatible.

Resolved that (1) the proposed implementation of the Signs of Safety model of social work practice in North Tyneside and the required commitment from all partner agencies to fully embrace its methodology for full implementation be acknowledged; and (2) the Children Young People and Learning Partnership be requested to lead on the development of the Signs of Safety model in North Tyneside and report progress in 12 months time, or earlier if significant progress is made in that time.

HW20/09/16 Fire as a Health Asset

John Pratt, the Area Manager: Service Delivery, of the Tyne & Wear Fire and Rescue Service gave a presentation in relation to the fire service as a health asset. John began by explaining how the service had transformed itself from being responsive to high levels of demand to being more focussed on prevention which had led to improved performance and efficiencies. This had been achieved through gaining an understanding of those factors that led to an increase in the risk of fire deaths occurring such as, single middle aged people who drink or smoke at home, very elderly people and localities with known patterns of incidents.

The mapping of these factors had enabled the service to target its resources to areas and individual households considered to be high risk. The Board were presented with details of the range of preventative work undertaken by the service including Home Safety Checks, joint working with CareCall, the Safety Works programme for schoolchildren, universal fire safety education for years 1 and 5 and selected year 8, and Safe and Well Visits, a pilot scheme in Newcastle funded by public health to provide advice, intervention and signposting with regard to slips, trips and falls.

The Board were presented with a map which showed those wards where the higher number of Home Safety Checks had been undertaken. When this map was compared with a map showing the numbers of accident and emergency attendances it was apparent that both fire and health services were dealing with the same areas of greatest risk.

The Board's attention was drawn to those aspects of the health and wellbeing agenda where the fire service could potentially contribute to preventative strategies, for example those targeted at children and young people, smokers, alcohol, falls and dementia. It was suggested that joint working between the fire and health services could derive joint benefits in terms of data sharing to improve risk profiling and targeting of resources, two-way referrals and signposting which would contribute to the aspiration that every contact counts and help deliver shared priorities including those contained in the Joint Health & Wellbeing Strategy.

The Board welcomed the presentation which had demonstrated the importance of appointing a representative of the fire service to the Board and had highlighted a range of exciting opportunities to enhance the borough's preventative strategies in relation to health. Members explored in more detail the pilot project established in Newcastle whereby the fire service undertook Safe and Well Visits, funded by public health, to provide advice, intervention and signposting with regard to slips, trips and falls. It was stated that the information to target such a service existed in North Tyneside but there was not a co-ordinated approach to delivering support and advice to older people at risk. Members also commented on the level of trust that the public had in the fire service which enabled the service to gain access to people's homes which may not otherwise be accessible to health and social care agencies.

The Chair thanked John Pratt for his presentation and she hoped that partners would engage with the fire service to seize the opportunities outlined to the Board.

HW21/09/16 The Impact of an Ageing Population: Report of the Association of North East Councils

The Board received a report produced by a task and finish group established by the Association of North East Councils in relation to the impact of an ageing population. Councillor J O'Shea, who had chaired the group, attended the meeting to introduce its findings and recommendations. They were focussed on two aspects that were regularly cited as being critical to the health and wellbeing of older people: promoting healthy age and tackling loneliness and isolation. The Board were invited to consider what action, if any, should be taken in response to the report.

The Board noted that many of the recommended actions contained in the report were already in place in North Tyneside including social prescribing, volunteering and befriending services. Despite previous attempts to draw these strands of work together as part of an overarching older people's strategy, there remained a need to co-ordinate this work so that it could be better targeted at those in need, help transform services and redirect resources towards prevention and inform revisions of the Joint Strategic Needs Assessment. It was suggested that the recommendations contained in the ANEC report be given further consideration to assess the extent to which they were already in place in North Tyneside and identify any gaps in provision which may require further work.

Resolved that (1) the report of the Association of North East Councils in relation to the impact of an ageing population be noted; and
(2) the recommendations contained in the ANEC report be given further consideration and a gap analysis be prepared to establish the extent to which the suggested actions are already in place in North Tyneside, identify any gaps in provision which may require further work and the outcomes be reported to a future meeting of the Board.

(Reason for decision: To give due consideration to the recommendations contained in the ANEC report and to provide the Board with assurance that the existing plans, strategies and services in North Tyneside adequately address the likely impact of an ageing population.)

HW21/09/16 Northumberland, Tyne and Wear Sustainability and Transformation Plan 2016/17 - 2020/21 and the North Tyneside Accountable Care Organisation Updates (Previous Minutes HW06/06/16 & HW07/06/16)

The Board received an update on the development of the Northumberland, Tyne and Wear Sustainability and Transformation Plan (STP), formal interventions regarding the management arrangements at North Tyneside Clinical Commissioning Group (CCG) and the development of a North Tyneside Accountable Care Organisation (ACO).

The STP provided an opportunity to bring together organisations across an area to develop shared plans and priorities to ensure sustainable health and care services for the future by closing the three gaps as identified within the 5 Year Forward View in relation to health and wellbeing, care and quality and finance and efficiency. The Northumberland, Tyne and Wear (NTW) footprint had recently been expanded to include the North of County Durham. The STP would not replace existing plans to improve services in local areas. Instead it would act as an 'umbrella' plan holding underneath it a number of different specific plans to address the challenges.

Early drafts of the STP had been submitted to NHS England in April and again in June 2016. Following submission of the draft plan to NHS England in June 2016 further work had been identified and a new submission date had been scheduled for 21 October 2016. It was anticipated that this version of the STP would be shared with stakeholders to gather their views and inform the next stages. The Board were presented with the key components of the draft STP. It was stated that there would be no changes to services people currently receive without engagement and, where required, consultation.

The Board expressed concerns regarding the lack of public engagement in the STP process. It was stated that the STPs were being developed in accordance with a nationally prescribed process and the plans were currently at a deliberative stage. When final, more definite, plans had been agreed public consultation would be undertaken. The Board also noted the challenges in bringing together a wide range of NHS organisations who previously had been encouraged to develop their own local priorities but were now required to work together to develop a broad common strategy.

The Board had previously received reports in relation to the CCG's intention to establish an ACO as the best option to commission affordable, sustainable and quality healthcare that would meet future needs for patients in the borough. Key partners had entered into a 'Memorandum of Understanding' and committed themselves to undertaking a substantial amount of work to achieve and reach an agreement on the proposed model and future ways of working.

In addition to the ACO work, the CCG was now required to implement the legal directions from NHS England to stabilise the financial and management position of the CCG so that its commissioning capacity could be strengthened in North Tyneside. Despite significant progress, the CCG and its ACO partners had now concluded that the work on the ACO model should pause. It had become apparent that the ambition of establishing the ACO from April 2017 was not realistic. However, all ACO partner organisations remained committed to place based commissioning which would integrate

mental health, physical health and social care services. The ACO model would be given further consideration by January 2017.

It was reported that due to the formal interventions in the CCG, the outcome of the Urgent Care Review had now been subject to additional assurance clearances by NHS England and the matter was likely to be considered by the CCG by the end of September 2016.

Resolved that the progress report on the development of a Sustainability and Transformation Plan, formal interventions regarding the management arrangements at North Tyneside Clinical Commissioning Group and the development of a North Tyneside Accountable Care Organisation, be noted.

HW22/09/16 Health & Social Care Integration Programme Board: Update (Previous Minute HW42/04/16)

The Board received a progress report from the Health and Social Care Integration Programme Board on the four work streams that made up the Integration Programme, namely; SEND Whole Life Disability, New Models of Care, Older People and Mental Health.

Resolved that the progress report from the Health and Social Care Integration Programme Board on its four Integration Programme work streams be noted.

HW23/09/16 North Tyneside Health & Wellbeing Board: A Protocol for Joint Working (Previous Minute HW20/10/15)

The Board had previously approved a written protocol to formalise the framework within which the Board and other relevant bodies would work together to provide shared leadership of the strategic approach to the health and wellbeing of communities in North Tyneside. The intention was that the protocol would be reviewed on an annual basis. During 2016 the Board had taken stock of its status in the light of the peer review carried out by the Local Government Association in 2015 and it had determined its priorities and methods of working for the forthcoming year. To ensure that the Board's protocol was up to date it had been reviewed and revised to reflect the priorities and proposed methods of working for 2016/17. A copy of the revised protocol was presented to the Board.

Resolved that the revised Protocol for Joint Working be approved.

(Reason for decision: The revised protocol will provide an updated framework for shared leadership, reflecting the revised vision, values and objectives of the North Tyneside Health & Wellbeing Strategy at the heart of joint working and provide a plan of how the Health and Wellbeing Board will function over the next year.)