

# North Tyneside Health & Wellbeing Board Report Date: 17 November 2016

## ITEM 6

Title: 'Health and Wealth – Closing the Gap in the North East': Report of the North East Commission for Health and Social Care Integration

**Report from :** Director of Public Health, North Tyneside Council

**Report Author:** Wendy Burke, Director of Public Health (Tel: 643 5359 )

### 1. Purpose:

This report introduces the report and recommendations of the North East Commission for Health and Social Care Integration and seeks the Board's commitment to implement the recommendations.

### 2. Recommendation(s):

The Board is recommended to:-

- a) endorse the report and recommendations of the North East Commission for Health and Social Care Integration;
- b) consider whether it wishes to make any comments to the Commission on specific recommendations;
- c) request partner organisations represented on the Board to commit to progressing those recommendations that can be taken forward at an individual organisation level; and
- d) agree that partner organisations represented on the Board will commit to work together in partnership to implement the recommendations and that this work should be guided by the Sustainability and Transformation Planning process.

### 3. Policy Framework

This item relates to all those objectives set out in the Joint Health and Wellbeing Strategy 2013-23, but is particularly relevant to shifting investment to focus on evidence based prevention and early intervention wherever possible.

## **4. Introduction:**

- 4.1 The Commission was established as part of the proposed devolution deal agreed between the North East Combined Authority (NECA) and central government in October 2015. In the agreement it was proposed that it should be set up as a joint NHS / NECA Commission to establish the scope and basis for integration, deeper collaboration and devolution across the combined authority's area to improve outcomes and reduce inequalities. NECA and NHS colleagues discussed the detailed scope for the Commission. They recognised that despite having strong health and care services across the region and life expectancy increasing faster than other parts of the country, there are still too many residents suffering from poor health and wellbeing, with many unable to work and trapped in a cycle of poverty and that tackling these issues should be the focus for the Commission.
- 4.2 The Commission was chaired by Duncan Selbie, chief executive of Public Health England, working with Dr Amit Bhargava, chief clinical officer for the NHS Crawley CCG and executive board member of NHS Alliance; Professor Dame Carol Black, expert advisor on health and work to Department of Health and Public Health England and principal, Newnham College, Cambridge; Rob Whiteman, chief executive of the CIPFA; and Tom Wright, chief executive of Age UK and chair of the Richmond Group of leading health charities.

## **5 The Process**

- 5.1 The members of the Commission met on four occasions this year, February, May, July and for the final time on the 26th September and identified three core themes to shape its work:
- A shift to prevention
  - Health, wellbeing and productivity
  - System leadership and governance.
- 5.2 They worked closely with local stakeholders, seeking views from across the region through a call for evidence and holding listening events in each of the seven local authority areas, as well as an event for the voluntary, community and social enterprise sector. This resulted in more than 150 documents being submitted from over 80 individuals and organisations and conversations with hundreds of people with an interest in health and wellbeing and social care. Feedback from this engagement activity informed the report.
- 5.3 The Commission members also worked collaboratively with local health and care organisations, testing emerging thinking with a steering group of representatives of NECA and NHS partners. In addition, the Commission has taken a close interest in the development of Sustainability and Transformation Plans (STP) for the region, which set out how local partners will work together to deliver the NHS Five Year Forward View vision of a more efficient and sustainable health and care system, built around the needs of local populations.
- 5.4 Although in September 2016 NECA leaders decided not to take forward a mayoral devolution model at that time, NHS and NECA colleagues agreed that the work of the Commission remains relevant in driving forward improvements in the health and wellbeing and economic prosperity of the region. In addition, there was a high

degree of confidence that the emerging recommendations could be implemented through existing structures alongside further discussions on devolution.

## **6 Headlines and recommendations ‘Health and wealth: closing the gap in the North East’**

- 6.1 The report says that the NECA area has strong health and care services and has seen the fastest increase in life expectancy of any region in the UK. However, the health and wellbeing gap with the rest of the UK and health inequalities within the region remain high, with behavioural factors and deprivation levels impacting on health and wellbeing. Such poor population health has resulted in an over focus on the treatment of ill health, with an over reliance on health and care services, at the expense of prevention. It also reduces productivity and hampers economic growth which entrench the income inequalities that contribute to poor health.
- 6.2 The Commission was established to cut through the poor health poor wealth cycle described above, with all partners recognising the value of an independent Commission taking a fresh look at the issues and the scope to address these through joint working and a new approach to system leadership. The Commission report sets out a vision for transforming the health and wellbeing of North East residents and in so doing helping to improve the performance of its economy and the prosperity of its people. It is a call to action for leaders across the health and care system in the NECA area.
- 6.3 The action called for needs to be delivered by every part of the system. This report sets out a clear agenda for shifting the priority and resources from response to prevention across the health and social care system and wider determinants of health. It includes suggestions of how the resources shifted to prevention could be invested to deliver improved health and wellbeing. It calls for a much greater focus on supporting people with health conditions to secure and remain in employment, contributing to their own and the region’s prosperity and hence to the wellbeing of future generations. And it challenges leaders to be bold, working in new ways to break down organisational barriers and work for the health and wellbeing of the people of the NECA area.
- 6.4 The Commission recommendations are attached as appendix 1. The full report is included in the meeting papers.  
The executive summary and full copies of the report can be downloaded at [www.northeastca.gov.uk](http://www.northeastca.gov.uk)

## **7. Decision options:**

The report has been referred to a range of health and local authority bodies, including Health and Wellbeing Boards. The Board may take whatever action it considers appropriate in response to the report, however the recommendations set out in section 2 of this report have been formulated in consultation with the Chair and Deputy of the Board and taking into account questions posed by the Commission in referring the report to the Board.

**8. Reasons for recommended option:**

The Board are asked to agree the recommendations set out in Section 2 of the report as in the view of the Chair and Deputy Chair, they provide an appropriate response to the Commission.

**9. Appendices:**

Appendix A – Health and Wealth – Closing the gap in the North East: Executive Summary

(The full report is available on the NECA website [www.northeastca.gov.uk](http://www.northeastca.gov.uk))

**10. Contact officers:**

Wendy Burke, Director of Public Health, 643 2104

**11. Background information:**

The following background documents have been used in the compilation of this report and are available from the author:-

- Health and Wealth – Closing the Gap in the North East: Report of the North East Commission on Health and Social care Integration
- Template Report provided by the Commission

**COMPLIANCE WITH PRINCIPLES OF DECISION MAKING**

**12. Finance and other resources**

There are no direct financial implications associated with the Board's consideration of the report today. However, further consideration would need to be given to the financial implications associated with the implementation of the recommendations by each individual partner organisation.

**13. Legal**

In considering the report the Board should be mindful of its duty under Section 195 of the Health & Social Care Act 2012 to encourage persons who arrange for the provision of any health related services to work closely together.

**14. Consultation/community engagement**

Details of engagement undertaken by the Commission is set out in paragraph 5.2 above.

**15. Human rights**

There are no human rights implications directly arising from this report.

**16. Equalities and diversity**

The Commission's report does not directly address equalities and diversity. The Board and individual partner organisations will need to have regard to their duties under the Equality Act when implementing any of the recommendations contained within the report.

**17. Risk management**

A risk assessment has not been undertaken in relation to the report.

**18. Crime and disorder**

There are no crime and disorder implications directly arising from this report.

**SIGN OFF**

Director of Public Health

Chair/Deputy Chair of the Board

Chief Finance Officer

Head of Law & Governance