

‘Health and Wealth – Closing the Gap in the North East’

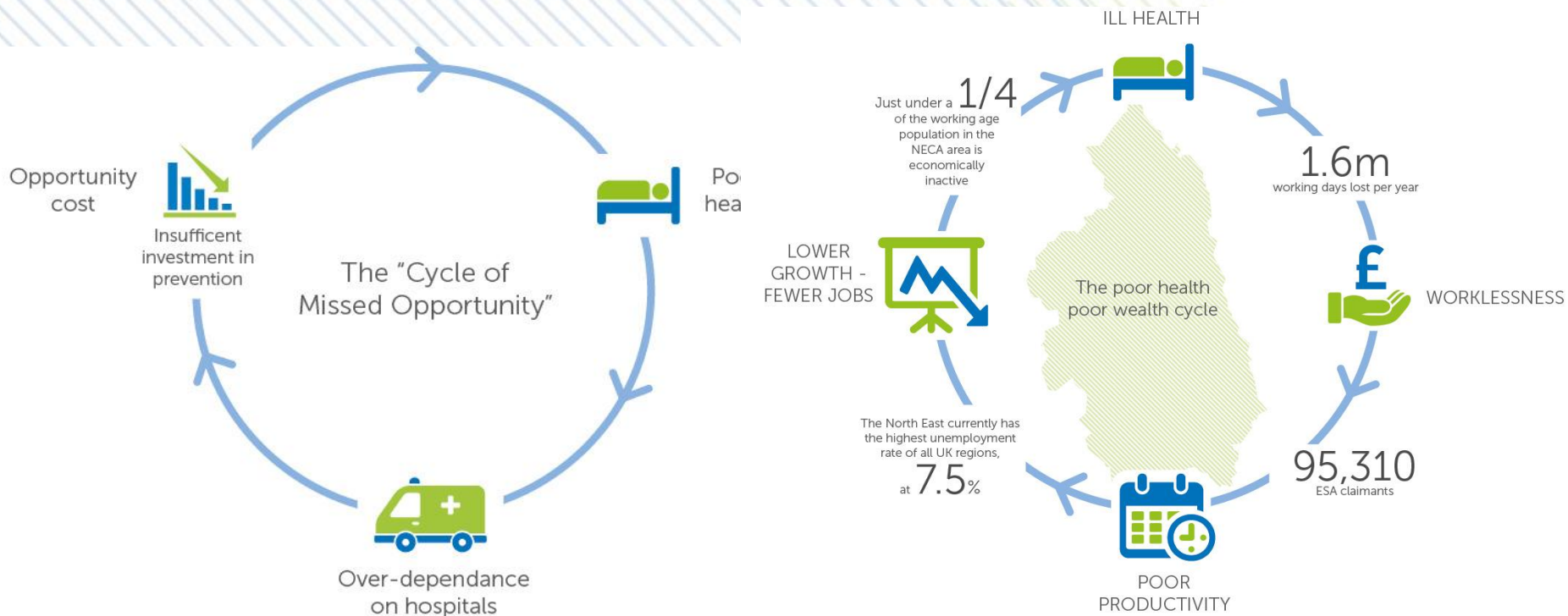
**Report of the North East Commission for
Health and Social Care Integration**

**North Tyneside Health and Wellbeing Board
17th November 2017**

Joint NECA/NHS Commission for Health and Social Care Integration

- Established jointly by the NE Combined Authority and the NHS as part of the proposed devolution deal agreed between NECA and central government in October 2015
- Commission Chair: Duncan Selbie, CE Public Health England
- Commission members: Rob Whiteman, CE CIPFA
Amit Bhargava, CCG Clinical CO, Crawley & Exec Member HS Alliance
Prof Dame Carol Black, Government advisor on health and work
Tom Wright, CE Age UK and Chair Richmond Group of health charities
- Ran from Feb 2016 to end Sept 2016
- Worked closely with local stakeholders, seeking views from across the region through a call for evidence, 7 listening events, local steering group

The focus for the Commission: to break into these vicious cycles



'Health and wealth: closing the gap in the North East'

The report:

- A carefully chosen title - Health and Wealth are two sides of the same coin and closing the health and wealth gap between North East and UK was the Commission's number one priority
- Recognises the strength of health and care assets in the North East and the North East is making faster progress in increasing life expectancy and reducing smoking than any other region of the UK
- But a significant health and wellbeing gap remains
- Identifies 10 recommendations which need to be delivered by every part of the system and through joint working in different geographies and partnerships
- Challenges leaders of health and care organisations to be bold and work in new ways to break down organisational barriers to ensure the health and wellbeing of the people living across the NECA area and the prosperity of the region

Recommendations: A shift to prevention

Recommendation 1: NECA partners should set themselves an ambition to radically increase preventive spending across the health and care systems and wider determinants of health and wellbeing.

Recommendation 2: Public sector partners across the NECA area should integrate preventive action and action to tackle inequalities in all decisions.

Recommendation 3: Increased preventive spend should be assigned to a dedicated investment fund managed on a cross-system basis and bringing together contributions from all partners who stand to benefit from the expected savings, including central government.

Recommendations: Health and Work

Recommendation 4: NECA partners should develop a programme of primary care training to support primary care staff in helping people access the best support to enable them to get back to work as quickly as possible.

Recommendation 5: The Commission recommends addressing mental health at three levels:

- Enhancing leadership skills to create a supportive environment
- Including employment support in Improving Access to Psychological Therapies (IAPT) services
- Developing an integrated employment and health service

Recommendation 6: NECA partners should set a target for the proportion of the workforce working for employers involved in the Better Health At Work Award scheme and the scheme should be the preferred approach for employers to adopt to improve workplace wellbeing

Recommendation 7: The refreshed Strategic Economic Plan and NECA's employment and skills programme should continue to address the importance of in-work progression and job quality.

Recommendations: System Leadership

Recommendation 8: Leaders within organisations will need to look beyond the interests of their own organisations to drive improvement in wellbeing objectives across the NECA area, leading a cultural change to a health and care system in which each health and care £ is used most effectively to support health and wellbeing, independent of the source of funding.

Recommendation 9: Governance system should be established at NECA level to drive forward implementation of these recommendations, bringing together local authorities, Clinical Commissioning Groups, NHS Foundation Trusts and the voluntary sector to progress the health and wellbeing agenda through shared accountability and a focus on implementation and delivery.

Recommendation 10: The NECA area should align financial payment systems and incentives with the overall objectives of the health and care system to improve health and wellbeing and reduce health inequalities.

And finally.....

- The action called for must be delivered by every part of the system
- Taken together the recommendations on should ensure that every NECA health and social care £ is spent as effectively as possible to improve the health, wealth and wellbeing of the people of the NECA area
- The prize is great: closing the gap in healthy life expectancy with the nation as a whole over the next decade would lead to 400,000 additional years of active, healthy life for the people of the NECA area

Copies of the report can be found at www.northeastca.gov.uk