



North Tyneside Council

Health and Wellbeing Board

Date Not Specified

A meeting of the Health and Wellbeing Board will be held:-

on **Thursday, 13 June 2019**

at **2.00 pm**

in **Room 0.02, Quadrant, The Silverlink North, Cobalt Business Park, NE27 0BY**

Agenda Item

Page(s)

1. **Apologies for Absence**
To receive apologies for absence from the meeting.
2. **Appointment of Substitute Members**
To receive a report on the appointment of Substitute Members. Any Member of the Board who is unable to attend the meeting may appoint a substitute member. The Contact Officer must be notified prior to the commencement of the meeting.
3. **Declarations of Interest and Dispensations**
Voting Members of the Board are invited to declare any registerable and/or non-registerable interests in matters appearing on the agenda, and the nature of that interest. They are also invited to disclose any dispensation in relation to any registerable and/or non-registerable interests that have been granted in respect of any matters appearing on the agenda.

Non voting members are invited to declare any conflicts of interest in matters appearing on the agenda and the nature of that interest.

Members of the public are welcome to attend this meeting and receive information about it.

North Tyneside Council wants to make it easier for you to get hold of the information you need. We are able to provide our documents in alternative formats including Braille, audiotape, large print and alternative languages.

For further information about the meeting please call (0191) 643 5359.

Please complete the Declarations of Interests card available at the meeting and return it to the Democratic Services Officer before leaving the meeting.

4. **Minutes**
To confirm the minutes of the meeting held on 11 April 2019.
5. **Further Report on the Board's Strategic Objectives No.s 4 and 7 "Comprehensive Support for people with Dementia" and "To improve the mental and emotional resilience of the North Tyneside Population."** 1 - 20
To receive an update on delivery of the Board's strategic objectives incorporating delivery of the Children and Young People's Strategy and the Joint Mental Health and Wellbeing Strategy for Working Age Adults and the Mental Wellbeing in Later Life Strategy 2018 – 2023.
6. **Healthwatch North Tyneside** 21 - 38
To consider the trends in the feedback gathered by Healthwatch North Tyneside over the past 6 months.
7. **Primary Care Networks** 39 - 60
To receive a presentation in relation to the development of Primary Care Networks in North Tyneside.

Members of the Health and Wellbeing Board:-

Councillor K Clark

Councillor M Green

Councillor M Hall

Councillor T Mulvenna

Councillor M Wilson

C Armstrong, North East Ambulance Service

C Briggs, NHS England

W Burke

R Burrows, Local Safeguarding Children Board

P Jones, Healthwatch North Tyneside

K Kale, Northumberland, Tyne & Wear NHS Foundation Trust

I Kitt, Healthwatch North Tyneside

D McNally, Age UK North Tyneside

L McVay, Tyne & Wear Fire and Rescue Service

J Old

C Riley, Northumbria Healthcare NHS Foundation Trust

R Scott, North Tyneside Clinical Commissioning Group

K Simpson, Newcastle Hospitals NHS Foundation Trust

P Stanley, Tyne Health

D Titterton, North Tyneside YMCA

A Watson, North of Tyne Pharmaceutical Committee

L Young-Murphy, North Tyneside Clinical Commissioning Group

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ITEM 5

Title: Objective 4 “To improve the mental health and emotional resilience of the North Tyneside population” - update

North Tyneside Health & Wellbeing Board Report Date: Thursday 13 June 2019

Report from : North Tyneside Council

Report Authors: Scott Woodhouse, Strategic Commissioning Manager, Adults Tel: 0191 6437082
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Relevant Partnership Board:

- Mental Health Integration Board
- Mental Wellbeing in Later Life Board
- Children and Young People’s Mental Health and Emotional Wellbeing Strategic Group

1. Purpose:

To provide an update on the following Health and Wellbeing Board objectives:

- a) Objective 4 - To improve the mental health and emotional resilience of the North Tyneside population; and
- b) Objective 7 - Comprehensive support for people with dementia.

This report also includes progress on the delivery of:

- a) North Tyneside Children and Young People’s Mental Health and Emotional Wellbeing Strategy 2016 – 2021;
- b) North Tyneside Joint Mental Health and Wellbeing Strategy 2016 – 2021; and
- c) Mental Wellbeing in Later Life Strategy 2018 – 2023.

2. Recommendation(s):

The Board is recommended to:

- a) Agree progress to date and future work outlined in this report in respect of:
 - the Children and Young People’s Strategy;
 - the Joint Mental Health and Wellbeing Strategy – working age adults; and
 - Mental Wellbeing in Later Life Strategy.
- b) Agree that North Tyneside should be registered as a Dementia Friendly Community and discuss how this should be implemented.

3. Policy Framework

The Joint Health and Wellbeing Strategy includes improved mental health and wellbeing as one of the strategic objectives of the Health and Wellbeing board.

Specifically, this item relates the following priorities in the North Tyneside Joint Health and Wellbeing Strategy 2013-23.

- Improving the Health and Wellbeing of Families
- Improving Emotional Health and Mental Wellbeing

The Health and Wellbeing Board's work plan for 2018-20 also identifies mental health as a priority area and has a high level objective of:

- Improving the mental health and emotional resilience of the of North Tyneside population

4. Information:

4.1 Integrated Care System – Mental Health

The NHS Long Term Plan identifies the need for local NHS organisations to focus on population health through partnerships with local authority-funded services and other stakeholders to implement new Integrated Care Systems (ICSs).

Mental health is one of nine delivery programmes within the overall North East and North Cumbria ICS. Within the mental health delivery programme there are seven priority areas and it is possible to link those to the achievements that this Board would like to see for mental health services and patients / service users in North Tyneside.

- Child health
- Zero suicide ambition
- Employment
- Optimising acute services
- Long term conditions and persistent physical symptoms
- Older people
- Improving the physical health of people in receipt of treatment for a mental health or learning disability condition

The ICSs will be central to the delivery of the Long Term Plan and by April 2021 it is anticipated that ICSs will be covering all areas in the country. As local systems are in different states of readiness there will be national support for each developing system to produce and implement a clear development plan and timetable.

The regional NHS England team is mapping the high level deliverables against the long term plan internally and on completion this can be aligned to the Mental Health ICS output document to ensure consistency. The delivery is reliant on local systems of effective change management underpinned by a continuous service improvement approach. On-going communication, engagement and an evidence based approach is crucial to the success of the Mental Health Delivery Programme in the North East and North Cumbria.

4.2 **North Tyneside Children and Young People's Mental Health and Emotional Wellbeing Strategy, 2016 – 2021**

The Children and Young People's Mental Health and Emotional Wellbeing Strategic Group, chaired by the Director of Public Health, was established in 2015 to oversee the implementation of our Local Transformation Plan and develop the Children and Young People's Mental Health and Emotional Wellbeing Strategy.

North Tyneside's CYP MHEW strategy uses the THRIVE framework and the 3 strategic priorities are:

- I. Promoting Resilience, Prevention and Early Intervention
- II. Improving Access to Support
- III. Services for High Risk and Vulnerable Groups

The priorities are informed by the voices of children and young people. Key progress to date is outlined below, following the themes from the strategy document:

Theme 1: Promoting Resilience, Prevention and Early Intervention

i. Young Person's MH:2K citizen researcher project – Wellcome Trust

27 local young people aged 13-18 were trained to become Mental Health 'Citizen Researchers'. They had over 500 conversations with young people across North Tyneside and the themes that were identified as having the biggest impact on their mental health and wellbeing were:

- Healthy relationships
- Social media and self esteem
- Schools and exam pressure
- Stigma, support and awareness
- Self-harm and suicide

The Council's Participation Team is continuing to work with the group of young people who were involved to take the recommendations forward in a pragmatic way, linking with the Strategic Group and senior leaders to influence plans across the system to address the findings.

i. Emotionally Healthy School Resource Pack

Evidence clearly shows that school-based interventions are one of the most cost effective interventions to promote mental health in young people. [The Emotionally Healthy Schools resource pack](#) was produced to help schools implement a Whole Schools Approach to supporting students' mental health and wellbeing. It was presented as a poster as an example of good local practice at the national Public Health England's conference.

ii. Barnardo's Strategic Alliance

The National charity Barnardo's approached North Tyneside (as one of only 3 areas in the UK) to form a long term Strategic Alliance to improve outcomes for Children and Young People focusing on Mental Health and Wellbeing, with dedicated funding awarded over an 8 year timescale. The strategic alliance will test different innovative models of working which are sustainable, create system change with a focus on prevention and early intervention.

During 2018/19 Barnardo's funded a survey across North Tyneside Schools. Like many other areas in England the data North Tyneside holds on Children and Young People's Mental Health at a local population level is poor. Working with SHEU (the schools and student health education unit) surveys were carried out across our schools in years 4,6,8,10. The results are currently being analysed, but headline findings for North Tyneside when compared to SHEU's national reports include:

Primary (4,6)

- Less likely to live with both parents together
- More likely to have lower resilience, but this isn't seen in the secondary sample.
- More likely to report worrying
- More likely to report fear of going to school because of bullying
- Less likely to say school takes bullying seriously
- More likely to have had nothing for breakfast
- More likely to walk to school

Secondary (8,10)

- Secondary less likely to be happy with life
- Less likely to have high self-esteem
- Less likely to be able to say no to a friend who is asking them to do something they don't want to do.
- More likely to say they have been in a possessive/jealous relationship
- Less likely to enjoy physical activity

Each school that participated will receive an in-depth report with their school's individual results which will enable them to provide appropriate action. The findings will also influence the sessions and input given to schools by the School Improvement Health and Wellbeing lead.

iii. *Mental Health First Aid training in secondary schools*

Having teachers who understand basic mental health first aid (MHFA) is an important step in the process of getting early intervention with young people. Training sessions were delivered during late 2018 for schools in North Tyneside. Teachers and staff received practical advice on how to deal with issues such as depression and anxiety, suicide and psychosis, self-harm, and eating disorders.

iv. *Schools Link Programme*

North Tyneside took part in the Mental Health Services and Schools Link Programme ran by the Anna Freud National Centre for Children and Families and the DfE. A series of workshops brought together Children and Young People's Mental Health Services (CYPMHS), schools and colleges to strengthen communication and joint working arrangements between schools and mental health professionals.

Theme 2: Improving Access to Support

i. Online mental health support – Kooth.com

Kooth.com has been commissioned by the CCG. It is an online service to help those aged between 10-18 years old with any difficulties or concerns they may have. Kooth.com provides an anonymous and confidential service using a mix of counselling, support and advice on a drop in, out of hours and structured sessions.

All counsellors are trained and fully qualified to work with this age group and the service is available 365 days a year with counselling is available till 10pm every night. Initial evaluation of the service is showing good uptake from young people across the Borough, but particularly from those living in North Shields, Wallsend and Whitley Bay.

ii. Specialist Children and Adolescent Mental Health Services (CAMHS) Crisis Referral Pathway

CAMHS launched a new crisis referral pathway which enables head teachers and SENCOs to refer appropriate young people directly to CAMHS to receive timely support. Feedback about this new referral route has been very positive to date.

iii. Mental Health Support Teams in Schools :Trailblazer Application

North Tyneside CCG has submitted an Expression of Interest for North Tyneside to obtain funding from NHS England for Mental Health Support teams (MHST) in schools. Successful sites will be announced in June 2019. MHST will deliver evidence based interventions in or close to schools and colleges for those with mild to moderate mental health issues which are recognised as appropriate within the field of CYP mental health care in education settings e.g. low intensity CBT, including guided self-help and brief parenting work.

iv. Helios – reducing CAMHS waiting times

CAMHS have been provided with some additional funding from North Tyneside CCG during 2019 to support with significant current waiting time pressures, particularly for neurodevelopmental assessments. This is being invested into a Team called Helios who will undertake core CAMHS assessments and interventions using an online /Skype type model of delivery.

Theme 3: Services for High Risk and Vulnerable Groups

v. CAMHS Local Transformation Plan (LTP)

The transformation of children and young people's mental health is led locally. This means local professionals from across the NHS, public health, children's care, education and youth justice working together with children, young people and their families to design and provide the best possible services for their locality. North Tyneside's LTPs is led by the CCG and outlines in detail how it will improve mental health services for children and young people. This was refreshed in Jan 2019. The CCG is currently carrying out a review of the local CAMHS service with input from across the system.

vi. DfE Pilot: Mental Health Assessments of Looked After Children

The DfE has selected North Tyneside as one of the 9 pilot sites to carry out a 2 year trial a more in depth Mental Health Assessment of Looked After Children. North Tyneside will continue to use the Strength and Difficulties Questionnaires with carer, teacher and child (if over 11) but in addition to this, will also be using a range of tools to gather a more comprehensive picture of looked after children's mental health and a better understanding of the carer's perspective on their relationship with the child or young person.

vii. Criminal Justice Enhanced Case Management approach: Trauma Recovery Model

Young people in the criminal justice system have a disproportionate amount of childhood and adolescent trauma. The Strategic Group were successful in obtaining funding (£60,000) from NHS England which was used to train a range of local practitioners working with young offenders and their families in an Enhanced

Case Management approach, which is based on the Trauma Recovery Model (TRM).

Key challenges and areas of development for the coming year

North Tyneside's Children and Young People's Mental Health and Emotional Wellbeing (CYP MHEW) strategy considers community led change where everybody recognises the part they can play to build resilience and mental wellbeing.

The key challenges and priorities for the coming year include:

- Our approach is based on the evidence base of what works to protect, prevent and support mental health and wellbeing in Children and Young People. However, currently there is no good national dataset to measure impact. We are developing a local key indicator data set and the bi-annual SHEU surveys will provide trends and comparable data on the picture of mental health in our population.
- Striking the right balance between commissioning services for high risk and vulnerable groups and those with mental health disorders, whilst working to achieve the broader priorities of universal services, building resilience and prevention, alongside early identification and intervention through the Barnardo's Strategic Alliance work programme.
- Embedding a system wide workforce development approach across professional groups to enhance the understanding, capability and embed evidence based practice to support young people's mental health effectively across the system.
- Managing the waiting times particularly for neurodevelopmental assessment
- Developing a PBS (Positive Behavioural Support) approach for schools to prevent challenging behaviour more effectively through de-escalation and distraction techniques prior to crisis management.
- Producing an autism whole life course strategy with a clear action plan

4.3 North Tyneside Joint Mental Health and Wellbeing Strategy 2016-21 Working Age Adults

The Board will recall, this strategy was agreed at a meeting on 16 June 2016.

This is a multi-agency strategy across the Local Authority and the NHS and is supported also by partner agencies and organisations.

In order to achieve the overarching objective of improving the mental health and emotional resilience of the working age population in North Tyneside, the following six achievements have been identified by the Board:

1. Reduction on the pressure on secondary mental health services by investing in early intervention and preventative work.
2. Reduction in the numbers of people in crisis presentation in A&E and crisis team as they are receiving appropriate services.
3. Reduction in suicide rate in NT to align with England average.

4. Improvement in recovery rates and reduction in return rates.
5. Improvement in physical health care and reduce mortality in people with serious mental illness with the CQUIN Target 17/18.
6. Promotion of good wellbeing and mental health across the partnership and with the public.

This update report will look at each of these areas and show the Board progress that has been made and the impact this has had.

(1) Reduction on the pressure on secondary mental health services by investing in early intervention and preventative work.

The Local Authority continues to promote and support people to access a range of services and groups independently of Adult Social Care.

The SIGN North Tyneside network continues to develop from strength to strength as well as access to a wide range of information and advice through the MyCare website <https://mycare.northtyneside.gov.uk>

We continue to support people to live independently in the community, even if they have a mental health issue.

The advice and information on offer continues to go from strength to strength in the form of MyCare and the SIGN Directory. The most recent Adult Social Care user survey highlights the offer ranked as third best in the country.

The Authority has recently let a new social prescribing contract and a key part of this is to support people with lower levels of mental health problems and supports the preventative agenda to keep people out of mainstream mental health services and help people to help themselves by supporting access to a range of activities.

Active North Tyneside is a part of the overall social prescribing offer and also has a wider remit of supporting people with their physical and mental wellbeing and feel the benefits of living a longer and healthier life. The aim of Active North Tyneside is to get the residents of North Tyneside to move more and live more by being physically active every day. Better physical health does have a positive benefit on mental health and wellbeing.

North Tyneside Talking Therapies Service

This is a community based service which offers people in North Tyneside help if they experience depression, and anxiety. It also offers support which meets the national criteria for Improving Access to Psychological Therapies (IAPT). People can be referred to the service by a professional but the service also operates on a self-referral basis.

There are 4 national standards by which the CCG is measured:

1. % people entering psychological therapies
2. % proportion of referrals that have finished a course of treatment that waited less than 6 weeks to enter treatment

3. % proportion of referrals that finished a course of treatment that waiting less than 18 weeks to enter treatment
4. % overall rate Movement to Recovery (MTR)

The targets for 2018/19 were made more challenging as it was required that the percentage of people entering into psychological therapies would increase. However, we can confirm that for the year 2018/19, the North Tyneside Talking Therapies Service exceeded this target as well as all of the other national targets.

Work is also being undertaken to employ primary care mental health workers in GP Practices. This is currently being piloted in the North Shields and Wallsend GP Network areas. It is expected that this will increase the offer of support for people with mental health needs and ensure timely and appropriate referrals/signposting to other services.

(2) Reduction in the numbers of people in crisis presentation in A&E and crisis team as they are receiving appropriate services.

The North Tyneside Crisis Concordat work is ongoing and is focussing on specific, agreed work areas. Currently this is mainly on the mental health crisis pathways.

The CCG continues to commission liaison psychiatry services provided by Northumberland, Tyne & Wear Mental Health Trust and is available 24/7 at The Northumbria Hospital, Cramlington, A&E Department. Another liaison psychiatry service is commissioned by the CCG for older people provided by Northumbria Healthcare Trust, and is based at North Tyneside General Hospital. This service is mainly ward based although there are very close links with the A&E based service to ensure smooth handovers between the services, where appropriate. Feedback about both services continues to be extremely positive from patients, carers and hospital Trust staff.

As part of the recommendations from the Crisis review carried out by North Tyneside Healthwatch, North Tyneside CCG has commissioned a new service called Together in a Crisis. This is a non-clinical response to people identified as being in crisis in which poor mental health is a component but for whom a statutory response is not immediately required. To ensure safe triage and assessment of risk, all referrals to Together in a Crisis in the initial stage will be via the NTW Crisis Team.

The Crisis Team provided by NTW Trust is now co-delivering a crisis response across North Tyneside and Northumberland, the service was previously across North Tyneside and Newcastle areas.

As part of CCG Operating Plan Guidance for 2019/20, those CCGs who do not currently have a plan for managing people who are classed as high intensity users of A&E services, are required to produce a Plan through the national Rightcare scheme. North Tyneside CCG is currently developing such a scheme. It is anticipated that many of the people identified as a high intensity user of A&E will have mental health and/or addiction needs. We will consider how the needs of the identified cohort of people can best be met, whether that is through enhancing existing services or reconfiguring services.

In addition, we continue to see low levels of delayed transfers of care for North Tyneside people in in-patient mental health beds in the NTW Trust area. There was a recording issue with some of the reported numbers in mid 2018/19 but this has now

reduced to expected levels. In March 2019, there were no delayed transfers of care recorded and reported.

(3) Reduction in suicide rate in NT to align with England average.

We are working with our partners to achieve the national 10% reduction in suicide rate by 2020/21 and to ensure that North Tyneside's rate is in line with the England average.

In presenting data on suicide, three year rolling averages are used to compensate for annual fluctuations due to small numbers. Statistically, between 2006-12 the North Tyneside rates have been significantly higher than the England rate and then our rate reduced to being lower than the England rate 2012-2015. However, the latest national data shows that North Tyneside's suicide rate per 100,000 of the general population has increased again (12.5 suicides per 100,000) and we are statistically higher than the England rate (9.6) but not different to the North East Region rate (10.8). For more detail see [PHE Suicide Prevention Profile for North Tyneside](#)

Under the leadership of the Council's Director of Public Health a suicide prevention task group was established in 2014 with representation from North Tyneside CCG, Northumbria Healthcare Foundation NHS Trust (Psychiatry of Old Age service, A&E and CAMHs), Northumberland Tyne and Wear Mental Health NHS Foundation Trust, Northumbria Police, H.M. Coroner, Samaritans, MIND and DWP. The group is currently mapping suicide prevention activity across the system to refresh the annual multi-agency action plan for 2019/20.

In addition, the local group is feeding into regional suicide prevention work that is being carried out across the Integrated Care System (branded as Every Life Matters) and the Integrated Care Partnership (ICP). The ICP covers Northumberland, North Tyneside, Newcastle and Gateshead. Funding (440K) has been awarded by NHS England to carry out real time suicide surveillance, postvention support, training and awareness raising across the ICP area throughout 2019/20.

(4) Improvement in recovery rates and reduction in return rates.

The CCG is working with the Commissioning Support Unit and other CCGs to identify areas where we wish to improve performance reporting. North Tyneside CCG has identified that we wish more detail on the performance of the Community Treatment Teams. The CCG and NTW Trust have begun to work together to analyse the needs of this particular service and in recognition that the CCG has provided additional funding for the service on a recurrent basis from 2019/20. We wish to improve access to the service and to strengthen the offer available to people who may not be ready to engage in therapy but need to receive a level of service to meet their mental health needs until they are able to engage in therapy.

Individual Placement Support – National funding has been received by NHS England to develop a project aiming to improve access to employment opportunities for people with mental health needs. The project is currently being established and a recruitment process is underway. When established, this service will be available to people in North Tyneside. However, the CCG already funds employment advisor support workers to help people with employment issues and this service is accessed via the North Tyneside Talking Therapies Service. When the ICS is established, we expect

both services to liaise closely with one another to maximise opportunities for people in North Tyneside and to prevent duplication of service provision.

Recovery colleges are designed to help people get involved in learning and education. This can include accessing courses and workshops as a student, becoming involved in the development and delivery of courses and supporting others to learn. The courses are aimed at people who have experienced mental health problems, have cared for someone experiencing mental health problems. All students have support from a peer support worker whose role is to ensure that they get the most from involvement with the college.

North Tyneside CCG has commissioned VODA to deliver the Recovery College in North Tyneside. Progress to date includes:

- Recovery College worker has been recruited
- Venue has been identified – Linkskill Centre
- Training has been identified for workers who will be delivering the courses
- Steering group is being established
- Plan is to go live in September

(5) Improvement in physical health care and reduce mortality in people with serious mental illness with the CQUIN Target 17/18.

This is no longer a CQUIN target within the NHS but it is still a standard that the NHS collates and analyses. This is specifically in relation to those people with a severe mental illness and who are supported to access physical health support through primary care services or also through secondary services.

For the period ending 31 March 2019, the standard was that at least 50% of people in this category would have a comprehensive physical health check in the preceding 12 months. The physical health check includes checks against the following areas:

- Alcohol
- Blood glucose
- Blood lipid
- Blood pressure, BMI weight
- Smoking

For England the reported percentage is 30.3% and for the North it was 35.1%.

For North Tyneside, the reported percentage is 46.2% for 2018/19, which is in the top 15% of reported CCG returns across England. This means significantly more people are getting their physical health checked in North Tyneside than elsewhere. However, this is below the standard and, additionally, the target is being increased in 2019/20 to 60%. The number of health checks to be provided will also expand from 6 to 12. The CCG is therefore working to develop a scheme to ensure that primary care practitioners will provide the physical health check to eligible patients. The CCG is also working with other CCGs and NTW Trust to ensure that the same health checks are being provided to people who are receiving secondary care mental health services.

(6) For partners and the public to work together to promote good wellbeing and mental health.

The Local Authority and partner agencies use a range of mechanisms and support a number of national campaigns locally to improve mental health and wellbeing across the population including Time to Talk, Mental Health Awareness Week, World Mental Health Day and World Suicide Prevention Day.

The Local Authority, the NHS and a number of partner agencies are part of the Better Health at Work awards that recognises the efforts of workplaces in actively promoting the health of employees. This represents a number of the largest employers working in North Tyneside. Mental health and wellbeing is a key element of the awards.

North Tyneside Council signed up to the award in 2010 and since then has continued to be involved to promote and improve the health and wellbeing of colleagues. The Authority was recently awarded the highest level of award – 'Continuing Excellence Plus'. Its strategic partners ENGIE and Capita are also signed up to the award with Gold and Continuing Excellence levels respectively.

Northumbria Healthcare NHS Foundation Trust has the gold level of the award, NTW – has the maintaining excellence level of the award and the CCG currently has the silver level of the award and is working towards Gold status.

There is very strong evidence that physical activity is one of the most effective ways to improve mental health and wellbeing. The Active North Tyneside programme is a part of the overall social prescribing offer and can support people to improve both their physical and mental wellbeing and feel the benefits of living a longer and healthier life. The aim of Active North Tyneside is to get the residents of North Tyneside to move more and live more by being physically active every day.

4.4 Mental Wellbeing in Later Life Strategy 2018-2023

The aim of the Mental Wellbeing in Later Life Strategy 2018-2023 is to improve mental health and dementia services and support for older people and carers. We want to ensure that there is targeted prevention for people at risk of mental ill health and early intervention for older people with symptoms of mental illness.

Some of the actions identified as part of this work are also relevant to the following Health and Wellbeing Board objectives:

- Number 5 - An integrated approach to identifying and meeting carer health and wellbeing needs
- Number 8 - Reduce social isolation and increase cultural engagement across the population of North Tyneside to improve health and wellbeing

In June 2018 the Health and Wellbeing Board agreed to new reporting and governance arrangements around mental health and wellbeing, which included creating a new Mental Wellbeing in Later Life Board to oversee the actions identified in the Mental Wellbeing in Later Life Strategy 2018-2023.

Unfortunately there was a delay in establishing this board; however members have now been identified and although not all have been able to attend to date, the board now includes representation from CCG; Local Authority including Public Health; Healthwatch North Tyneside; Patient Forum; NEAS; Tynehealth; Northumbria Healthcare NHS Foundation Trust; and Northumberland, Tyne and Wear NHS

Foundation Trust. The Board is chaired by the chief executive of Age UK North Tyneside.

4.4.1 Work undertaken to date

- A mapping of services had been undertaken when the Strategy had been developed therefore the Board agreed that it had a good understanding of what services are currently provided locally.
- Healthwatch North Tyneside have already conducted research with service users and carers on the mental health pathway. This work was reviewed and although there was limited feedback specifically in relation to older people, the information is still useful in this work.
- Consultation with older peoples residential and nursing care providers was held to help us understand the support available in that sector for residents with mental health problems and any issues that they have identified.
- Links have been established with local groups which support carers of people with dementia and mental health problems to ensure their views are represented.
- A review of NICE Guidance in relation to Dementia: assessment, management and support for people living with dementia and their carers – this will be used to progress future work
- A themed workshop with clinicians working in older peoples mental health services was held to gather their views on current services.
- As referred to in the previous section in relation to adult mental health - work is a being undertaken to employ primary care mental health workers in GP Practices. This is currently being piloted in the North Shields and Wallsend GP Network areas. It is expected that this will increase the offer of support for people with mental health needs and ensure timely and appropriate referrals/signposting to other services.

It is recognised that that the subject area is massive, as supporting older people to live well spans a whole range of services including health, social care, housing, community facilities and support provided by the community and voluntary sector.

As many of the actions identified in the Strategy are already being undertaken by the respective organisations individually, it was agreed to use look for ways that the organisations can work together to add value and also use more recent feedback obtained from clinicians, practitioners, service users and carers, to identify a few key pieces of work for the Board to focus on this year.

4.4.2 Key issues identified to date

Feedback from residential care providers:

If mental health professionals are currently involved with an individual there is a route into services for providers; however where mental health professionals are not involved problems can occur.

- Homes would firstly contact the GP. GPs can access the on-call psychiatrist but the response varies – homes have no direct access
- Alternatively route would be to contact 111 who will do an assessment and contact a psychiatrist. However 111 responses differ at different times of the day

The current system puts a lot of pressure on the senior member of staff in a home who often has to spend a considerable amount of time on the phone while they have other residents and responsibilities to consider.

Better links with an out of hours team are needed - an ambulance/admission is not always the best for the person or right route to deal with situation however this is often the only route the provider can take based on the advice provided.

Improved access to a 24 hour on- call service or liaison person with a greater understanding of elderly mental health is needed.

There is an expectation that staff in nursing care will have the level of expertise required to support residents; this places an obligation on the provider to manage training for staff and does not always happen. In particular homes would like more support in relation to supporting people with delirium. Work is needed to increase confidence and understanding in staff, including ways to appropriately support people and therefore reduce inappropriate hospital admissions.

Two types of crisis a) people 65+ with a mental health crisis b) people with dementia - two different routes and not supported by the same team - a clear pathway around supporting someone in crisis is needed.

Problems highlighted after 6pm in relation to access to crisis support for people aged 65+.

Feedback from other sources:

General feedback from clinicians that current services do not necessarily support our aspirations for older people's mental health services and changes are needed particularly in relation to an out of hours response. (Note- The CCG is leading some work to review the model of older people's mental health services in North Tyneside to establish a single model of provision across the borough. The CCG is also reviewing mental health crisis services, recognising that the out of hours response needs to improve)

There is a gap in relation to people with mental health problems living in the community. Carers need to be supported appropriately before crisis is reached (this work is linked to work the Carers Partnership Board is undertaking)

Issues were identified in relation to older people aged 65+ with a new presentation of mental illness who have not previously been supported in Adult Mental Health Services – sometimes there is difficulty in accessing the correct pathway.

Adult Mental Health Services will offer support to people aged over 65 years where this is appropriate to meet their mental health needs. Equally, the Older People's Mental Health Service will support people aged less than 65 years for the same reason and a protocol has been agreed between NTW Trust and Northumbria Healthcare Trust to this effect. However, this is just the first step developing a

seamless service and further work will be undertaken when developing the single service model for older people's mental health.

General lack of data collected in relation to older people's mental health (locally and nationally).

NICE guidelines indicate that people with dementia should have a named care co-ordinator – how is this being addressed locally as unable to verify that this is happening systematically.

Post diagnostic support for people with dementia in the community - concern about the impact of the loss of the Age UK North Tyneside grant funded Dementia/Admiral Nurse Service when funding expires 31 March 2020. (Note: North Tyneside CCG has committed funding for one Admiral Nurse post)

4.4.3 Priorities identified for 2019-20

Using the information gathered to date, the following priorities have been identified by the Board for 2019 – 20:

1. Development of a service which appropriately manages people in the community. New pathways need to be wider than just a psychiatric model of care – need to include physical health and social care.
2. CCG review of crisis support for older people outside of normal operating hours supported by Healthwatch North Tyneside.
3. The North Tyneside Talking Therapies Services is open to all adults, irrespective of age. However, the older population are low users of the service – improve access to Psychological Therapies (IAPT) by older people.
4. Review of post diagnostic support for people with dementia and their carers.
5. Better support for carers; including older carers, which also links in with priority 4.
6. Currently, there are two NHS providers for older people's mental health services. The CCG will be working with both services during 2019/20 to develop a single model of service ensuring parity of access in terms of times and also the type of services available. This work will be supported by a review of the current services by Healthwatch North Tyneside.

4.4.4 Dementia Friendly Communities

Alzheimer's Society is committed to creating a society where people living with dementia continue to feel included. The Dementia Friends initiative, a social action movement to improve public awareness of dementia supports this approach.

Many organisations locally have taken on this challenge and deliver Dementia Friends training to all their staff, often this is delivered by Dementia Champions who have undergone additional training with the Alzheimer's Society in order to deliver this training in a consistent way.

In 2015 using a small amount of funding from Adult Social Care, Age UK North Tyneside and North Tyneside Council worked in partnership to establish North Tyneside as a Dementia Friendly Community (DFC). The funding provided a project manager to oversee the work which was initially focused on the Wallsend area. Wallsend was formally registered as a DFC in 2016, work then began on the Whitley Bay area.

In order to retain the DFC registration an annual assessment is required to be submitted to the Alzheimer's Society. The Alzheimer's Society contacted us recently to advise that due to inactivity in Wallsend and because no further progress has been made they are looking to de-register the area.

A meeting was held with the Alzheimer's Society which included representatives from Cultural Services, Adult Social Care, People Based Commissioning and Age UK. All parties confirmed their commitment to DFC and supporting people with dementia, however due to capacity issues no organisation was able to offer staffing or resources to maintain or grow the work.

Successful schemes elsewhere nationally are dependent on identifying key local people from within the community who can act as a catalyst for people from their area to come together to make the area dementia friendly. To date we have not been able to identify such a person.

Locally a decision now is needed to agree if making North Tyneside dementia friendly is a priority for the Health and Wellbeing Board and if so, how this will be taken forward including funding and resources that will be made available.

If it is decided this is not a priority at the present time there are still some practical actions that can be taken by the Board, these include:

- All Health and Wellbeing Board members to receive Dementia Friends Training
- Encouraging all staff within respective organisations to become Dementia Friends and including this as part of staff induction
- Hold a community event to identify a lead from within the community to take forward this work
- Explore the use of staff volunteer schemes to support dementia friendly communities

4.5 Summary

The report demonstrates the breadth of work across the life course and the progress that is being made in relation to implementing the three strategies. The focus of the work includes a range of approaches from prevention at a population level through to the provision of specialist mental health support for individuals. Evidence based interventions are at the heart of the work to improve mental health across the life course informed by national, regional and local drivers and priorities. The CCG have been rated as "outstanding" for mental health provision and as "good" for dementia provision which provide evidence of a local system that is moving in the right direction, with clear identified areas for where we also need to make improvements.

5. Decision options:

There are a number of decisions options open to the Board:

1. The Board is recommended to agree the recommendations included in this report at paragraph 2 above.
2. Alternatively, the Board may agree not to accept the recommendations and ask Officers to review further and come back at a later date.

Option 1 is the preferred option.

6. Reasons for recommended option:

This will allow Officers from the Authority and other Organisations to progress plans and deliver on the priorities the Health and Wellbeing Board has set for 2018/20.

7. Appendices:

CCG additional mental health spend in 2019/20– Appendix 1

8. Contact officers:

Scott Woodhouse, Strategic Commissioning Manager, Adults
People Based Commissioning Team, North Tyneside Council, (0191) 643 7082

Rachel Nicholson, Public Health Manager (Children), (0191) 643 8073

Susan Meins, Commissioning Manager
People Based Commissioning Team, North Tyneside Council, (0191) 643 7940

Anya Paradis, Director of Contracting & Commissioning, North Tyneside Clinical
Commissioning Group, (0191) 293 1157

9. Background information:

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

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

NHS Long Term Plan <https://www.longtermplan.nhs.uk/>

[NICE: Dementia: assessment, management and support for people living with dementia and their carers](#)

COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

10. Finance and other resources

The strategy documents should not have any financial implications and any expected financial implications of any proposals will be identified within the action plans if these cannot be managed within current budgets

11. Legal

There are no direct legal implications arising from this report.

12. Consultation/community engagement

Healthwatch North Tyneside gathered views from service users, carers, family members, professionals and commissioners in the production of their report 'People's experience of mental health services in North Tyneside'. The findings and recommendations in the report have been used to help shape the strategies and action plans outlined in this report.

There is also continued engagement and involvement with service user groups and mental health providers in the delivery of the action plan for working age adults.

Particular groups engaged in relation to older people's mental health.

- Dementia Peer Support Group - hosted at The Exchange
- Carers of people with Mental Health problems peer support groups, hosted by North Tyneside Carers' Centre

13. Human rights

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

14. Equalities and diversity

Equality and human rights legislation in the shape of the Equality Act 2010 and the Human Rights Act 1998 both outline the individual's fundamental rights to freedom, respect, equality, dignity and autonomy.

There is a growing and ageing population of older people, however it should be noted that the older population is also now more diverse than ever before and will become more so. The Mental Wellbeing in Later Life Strategy seeks to tackle inequalities which may be experienced by some older people.

15. Risk management

Each partner organisation will be required to undertake its own risk assessment as part of the development and the implementation of the strategies outlined in this report.

16. Crime and disorder

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

CCG Additional Mental Health Funding 2019/20

Health & Wellbeing Board at its meeting on 28 February 2019, received a presentation from Northumberland Tyne & Wear NHS Foundation Trust about the services the Trust provides in North Tyneside. At that meeting, the Mental Health Investment Standard was referenced and it was suggested that the CCG could provide detail of how this funding would be invested for 2019/20.

The 2019/20 Planning & Contracting Guidance for CCGs, requires that:

“...CCGs... increase spend by at least their overall programme allocation growth plus an additional percentage increment to reflect the additional mental health funding included in CCG allocations for 2019/20.”

(section 3.6 NHS Operational Planning and Contracting Guidance 2019/20, 10 January 2019, NHS England and NHS Inspection)

This means that, for North Tyneside CCG, there is a requirement to spend an additional 5.8% of its financial allocation on mental health provision in order to meet the requirements of the Mental Health Investment Standard.

The table below details the additional investment being made by the CCG into mental health services in North Tyneside. It is worth noting that this funding is on top of services already commissioned and no mental health services have been decommissioned by the CCG.

Table 1
Additional CCG Funding in Mental health Provision 2019/20

Service	Provider	Funding Amount	Purpose of Funding
CAMHS	Northumbria Healthcare Trust	£230,000	Investment into Neurodevelopmental and Emotional pathways to create sustainable service and improve access times
North Tyneside Talking Therapies	Northumbria Healthcare Trust	£274,000	To invest in additional staffing necessary to meet national requirements for increased access targets, particularly for people with Long Term Conditions
Adult ADHD/Autism Pathways	Northumberland Tyne & Wear Mental Health Trust	£663,925	To invest in agreed new pathways to improve access and reduce waiting lists

Service	Provider	Funding Amount	Purpose of Funding
Adult Community Treatment Teams	Northumberland Tyne & Wear Mental Health Trust		To improve access times and to provide support for people not able to engage in therapy
Barnardos Counselling Service	Barnardos	£10,000	Bereavement Counselling
Barnardos Sexual Abuse Counselling Service	Barnardos	£10,000	Sexual Abuse Counselling
North Tyneside Recovery College	VODA	£30,000	To re-establish the North Tyneside Recovery College
Together in a Crisis	Mental Health Concern	£60,000	To provide lower level support for people who are experiencing a level of crisis but do not meet statutory criteria for access
Kooth On-Line Counselling	XenZone	£83,000	On-counselling services for children and young people

It is also relevant to highlight that there is a rigorous national process to ensure that CCGs do make this additional investment to achieve the Mental Health Investment Standard requirements. An audit process was already in place for the 2018/19 investment and North Tyneside CCG met the audit requirements for 2018/19.

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North Tyneside Health & Wellbeing Board Report Date: 13 June 2019

Item 6

**Title: Healthwatch North
Tyneside - Updates and
Insights**

Report from: Healthwatch North Tyneside

Report Author: Paul Jones, Director

Tel: 0191 2635321

1. Purpose:

The purpose of this report is to give a progress update on the work of Healthwatch North Tyneside (HWNT), introduce the Health & Wellbeing Board to our new priorities for 2019/20 and provide an overview of the feedback we have received.

2. Recommendation(s):

The Board is recommended to: -

- i) Endorse the work undertaken to date
- ii) Note Healthwatch North Tyneside's priorities and work plan for 2019/20.
- iii) Support Healthwatch North Tyneside by promoting their new information and publicity campaigns.
- iv) Share the report with partners.

3. Policy Framework

This item relates to Objective 4 of the Joint Health and Wellbeing Strategy 2013-2023:

"To engage with and listen to local communities on a regular basis to ensure that their needs are considered and wherever possible addressed".

4. The report:

This report:

- 1. Provides an update on the activities of Healthwatch North Tyneside during 2018/19
- 2. Highlights of the feedback we have received during 2018/19
- 3. Introduces our priorities for this financial year
- 4. Previews our key activities for the next 6 months

We have revised the content and layout of this report based on feedback by service providers and commissioners. Our aim is to make the content more accessible and useful to that audience by providing more of an overview of the key activities and planned work. Alongside this, we are working with commissioners and service providers to give more 'real time' and specific feedback directly to them rather than waiting for a 6 months trends report. Any feedback on our new style and content of this new format would be appreciated.

5. Decision options:

This report is for information only and therefore there are no decision options.

6. Appendices:

The full report is attached to this covering note.

7. Contact officers:

Iain Kitt, Chair, Healthwatch North Tyneside
Paul Jones, Director, Healthwatch North Tyneside

8. Background Information:

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

- Healthwatch North Tyneside uses information gathered from general and specific engagement events, annual survey and the data from our Feedback Centre as the basis for this Trends Report.
- Healthwatch North Tyneside writes reports in relation to specific themes of work which are then shared with providers and commissioners for comment. The Healthwatch Board also receives regular reports including summaries of issues we hear from residents of North Tyneside. All finalised reports are made public on our website www.healthwatchnorthtyneside.co.uk

COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

10 Finance and other resources

There are no known financial implications identified in this report.

11 Legal

There are no legal implications directly arising from this report.

Healthwatch North Tyneside operates under the terms of Section 221 of the Local Government and Public Involvement in Health Act 2007 (as amended by the Health and Social Care Act 2012) to, among a range of duties, promote and support the involvement of people in the commissioning, provision and scrutiny of local health and care services.

12 Consultation/community engagement

Community engagement is at the core of Heathwatch North Tyneside. Feedback from North Tyneside residents is received as part of our day to day function and comes to us via e-mail, telephone, post and face to face. Local people can provide feedback about specific services through our Feedback Centre by either reviewing the service online, completing a form or talking to us. We also carry out regular engagement activities where residents can talk to us about their experiences. HWNT receive comments which include, concerns, points of view, compliments or complaints. When a resident wishes to formally complain about a service a member of the HWNT team directs the resident to the most appropriate support. This report includes a record of findings from of our community engagement and feedback during the period.

13 Human rights

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

14 Equalities and diversity

There are no equalities and diversity implications directly arising from this report.

15 Risk management

A risk assessment has not taken place.

16 Crime and disorder

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

Updates and Insights June 2019



Our year in numbers 2018/19

2513 people told us their experiences of health and social care



1537 people talked to us at events across North Tyneside



We received **3357** pieces of feedback about local services



531 people completed our first annual survey



We signposted people to **49** organisations for advice and support



We helped distribute **4000** mental health support leaflets across North Tyneside



1 new service has been commissioned as a result of our work



Introduction

This report:

1. Provides an update on the activities of Healthwatch North Tyneside during 2018/19
2. Highlights of the feedback we have received during 2018/19
3. Introduces our priorities for this financial year
4. Previews our key activities for the next 6 months

1. Activities during 2018/19

Strategic plan

We produced our new strategic plan for 2018-2021 which was formally launched at our Annual General Meeting on 19 November 2018. The plan lays out what we aim to achieve and how we will do this in an accessible way. It focusses on our core activities:

- Listening to lived experience;
- Providing information;
- Researching key issues;
- Influencing service providers and commissioners and
- Being a robust organisation

The plan reflects the new approaches to delivering Healthwatch activities we are implementing following the retendering of the Healthwatch contract confirmed in March 2018 and significant changes within the Healthwatch Team.

Alongside this, we published 'Our priorities for 2018/19', this set out our work plan and were based on our core activities and the key thematic issues the people of North Tyneside raised with us during the previous year.

Listening to lived experience

Hearing people's lived experiences of the services that they use is the bedrock of everything we do. We talk to local people who use health and social care services so we can understand their experiences and what matters to them. We use this to help service providers and decision makers to improve local services.

During 2018/19, **2,513 people told us about their experiences of health and social care services** by:

- Completing one of our surveys
- Talking to us at outreach and community events
- Talking to us whilst they are using services - for example in hospital waiting rooms.
- Using our feedback centre - using online or freepost forms
- Calling our information line on 0191 263 5321 or emailing us

People gave us **3,357 individual pieces of feedback** about the different services they use - that is an increase of 125% when compared to our 2017/18 figures. We are particularly pleased with this given the changes within Healthwatch North Tyneside.

We are committed to hearing from people from across North Tyneside and from all sections of our community. We make special effort to hear from groups that often don't have their voices heard.

We held 56 events at community venues and services across North Tyneside and engaged with 1,537 different people. Over the coming year we will do more to hear from people who live in the North West of the borough, people receiving care at home and young people.

Our first Annual survey

From September to December 2018 we asked for people's views through our first annual survey - 'What Matters To You?'. We promoted this through our website, social media and engagement events as well as talking to people at their place of work.

We had 531 responses telling us about all of the different services people used, what works well and what could be done better. This really helped us to hear from people we don't usually manage to reach. We are using the information we gathered to feedback to local services and influence our future priorities.

Providing information

We help people find the information and services they need. We talk to them about how to access services, their rights and eligibility criteria, how to give feedback and how to make a complaint or raise a concern.

In 2018/19 we signposted 222 people to services from 49 organisations.

The most common issues people raised with us were:

- getting access to services, particularly support with adult social care
- resolving an issue with their healthcare
- making a complaint about their healthcare
- needing help or support

The organisations we most often signposted people to were:

- North Tyneside Council Adult Social Care Gateway team and MyCare
- Patient Advice and Liaison Service (PALS)
- Independent Complaints Advocacy Service (ICA)
- North Tyneside Carers' Centre
- North Tyneside Citizens Advice

The number of people approaching us for information is lower than in previous years. This is partly due to our staff team's reduced capacity.

We are rebranding and relaunching our information and signposting service in July 2019 with new publicity across the borough to promote our services.

Mental health support leaflet

Working with Launchpad North Tyneside and North Tyneside Community Health and Care Forum, we produced a list of support groups and services that people can refer themselves to for support with their mental health needs. We distributed 4,000 leaflets across the borough and have had some amazing feedback about how useful people have found them.

Other areas in the North East are now looking to replicate this approach.

Researching Key issues

We set out the following thematic priorities in 2018/19:

- Changes to urgent care
- Access to GP services
- Mental health
- Patient transitions

We began investigating ‘what do people in North Tyneside do when they feel poorly?’ because people told us they were worried about the changes to urgent care introduced in November 2018. Our aim, over 18 months, is to get a better understanding of how the entire system works for people who feel they need medical support.

Our plan is to look at each of the key services in turn, identifying, from a user’s perspective, what’s working well and what could be done better, as well as identifying system wide issues.

During 2018/19 we focused on Emergency care and urgent care and began some work on access to GPs. During 2019/20 we will conclude our GP work and work with Newcastle HFT to look at the services they provide. By early in 2020, we hope to have identified system wide lessons and opportunities.

Changes to urgent care

Emergency Department NSECH - Working in partnership with Healthwatch Northumberland and Northumbria HFT, we heard from 309 people over 14 three-hour sessions in the waiting area in the Emergency Department and Paediatrics Emergency Department in November 2018. People told us why they were attending the Emergency Department, what other services they had/tried to access and what they thought could make their experiences of accessing care better.

Based on what we heard from people who were attending the Emergency Department independently, we produced a number of recommendations that are now being considered by Northumbria HFT, North Tyneside & Northumberland CCGs and NEAS. These actions include:

- System wide opportunities to better support people to get the care they need
- Access to NSECH, particularly public transport
- Changes to the waiting room environment to improve experience and accessibility

A detailed report will be published shortly and shared with the Health and Wellbeing Boards and Overview and Scrutiny committees in North Tyneside and Northumberland.

Urgent Treatment Centre, North Tyneside General Hospital - Working in partnership with Northumbria HFT, we repeated the questions we asked in the Emergency Department in the Urgent Treatment Centre. We heard from 226 people over one week sessions in the waiting area in the Urgent Treatment Centre in February 2019. People told us why they were attending the service, what other services they had/tried to access and what they thought could make their experiences of getting care better. We will be discussing our findings and recommendations with Northumbria FT and other stakeholders in the coming months.

Access to GP services

We launched our survey of people’s experiences of getting access to GP services in January 2019. We have a programme of activity planned for the next 12 months.

Mental health services

Crisis support - We published our report into mental health crisis services in November 2019 and presented this to the Health and Wellbeing Board (November meeting) and Overview and Scrutiny committee. As a result of this work and other patient voice work we funded, North Tyneside CCG has commissioned a new service to support people who are experiencing mental

health needs but do not meet the crisis support threshold - this service started in February 2019. The other actions are being considered by the working age adults mental health board.

Kosmos - We also funded Launchpad North Tyneside and Helen Smith, a local community artist, to bring Mental health service users and decision makers together to talk to each other. The kosmos project focused on sharing experiences and understanding of 'GPs' and 'accessing support whilst waiting for support'. A report of this project will be published in August.

Patient transitions

Our aim with this piece of work was to get a better understanding of how individual patients experience transitions between different services and consider what actions could be taken earlier that would have made their care better. We are keen to work with North Tyneside Council and others, using the CQC's Local System Review model to gather the user's perspective alongside providers perspective of an individual's journey through the health and care system.

Influencing providers and decision makers

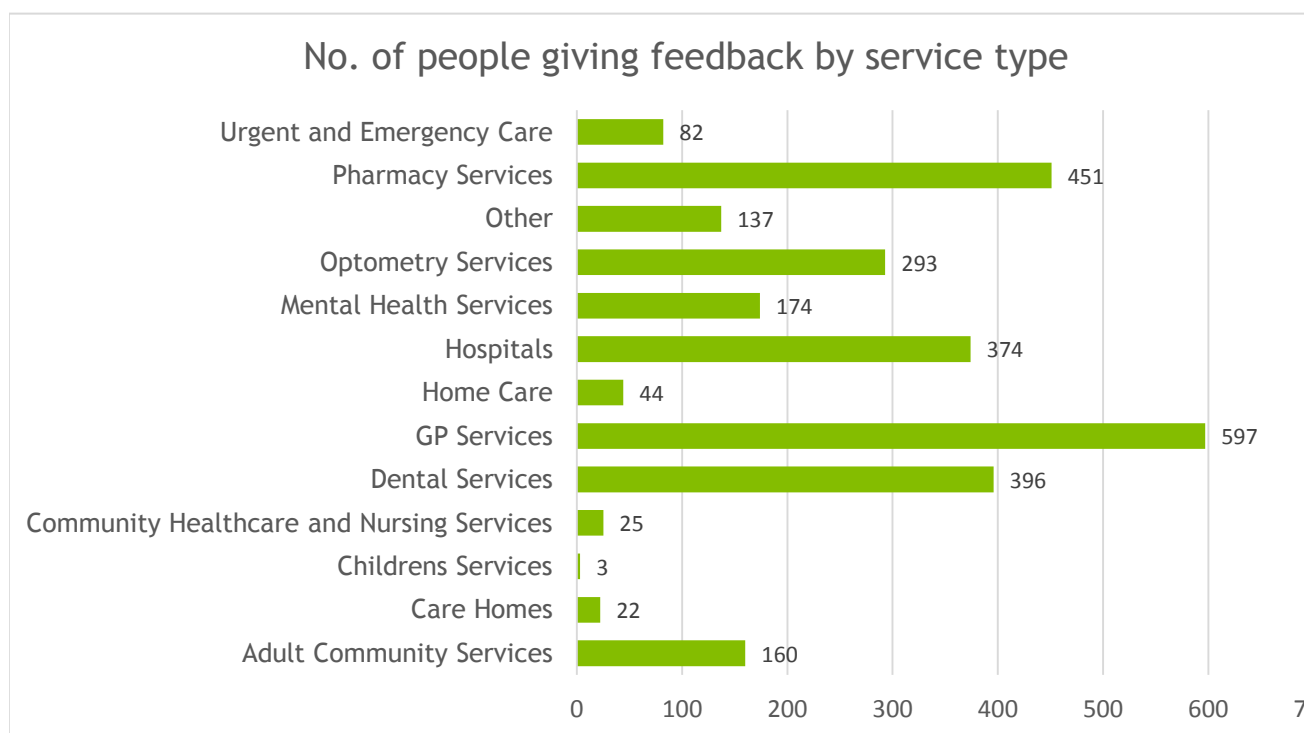
We have begun providing service specific feedback directly to providers on a more regular basis so that actions can be taken quickly. We are discussing with partners how best to share information in a meaningful way.

2. What people have told us

2018/19 was a bumper year for us despite having a difficult transition period during the first 6 months of the year due to staff changes. We heard from more people about their experiences of health and social care than in any previous year. Our annual survey enabled us to hear about a number of different experiences at the same time - making it easier for people to share information with us.

During 2018/19, the number of people telling us about their experiences of different services is shown in the table below. This is based on our general engagement activities and does not include when we have complete service specific research (so, it doesn't include the feedback we gathered in the Urgent Treatment Centre, Emergency Department or through our GP survey as these would skew the figures).

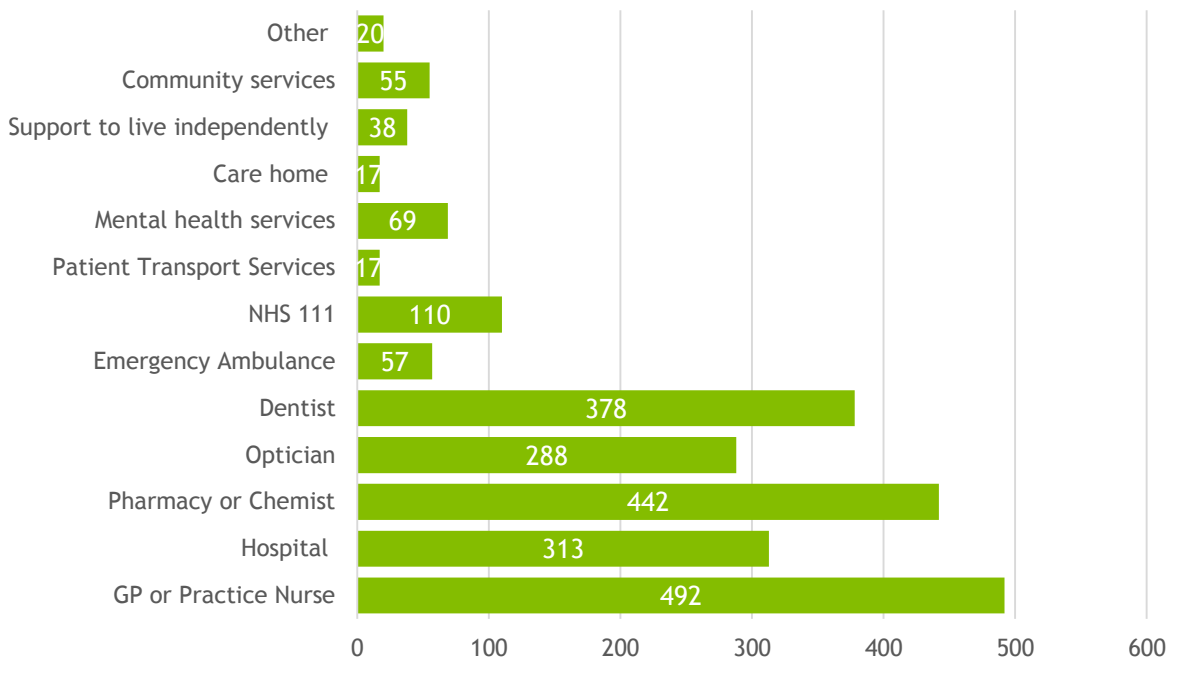
Some of this information was presented as part of the Commissioning Intentions workshop in March.



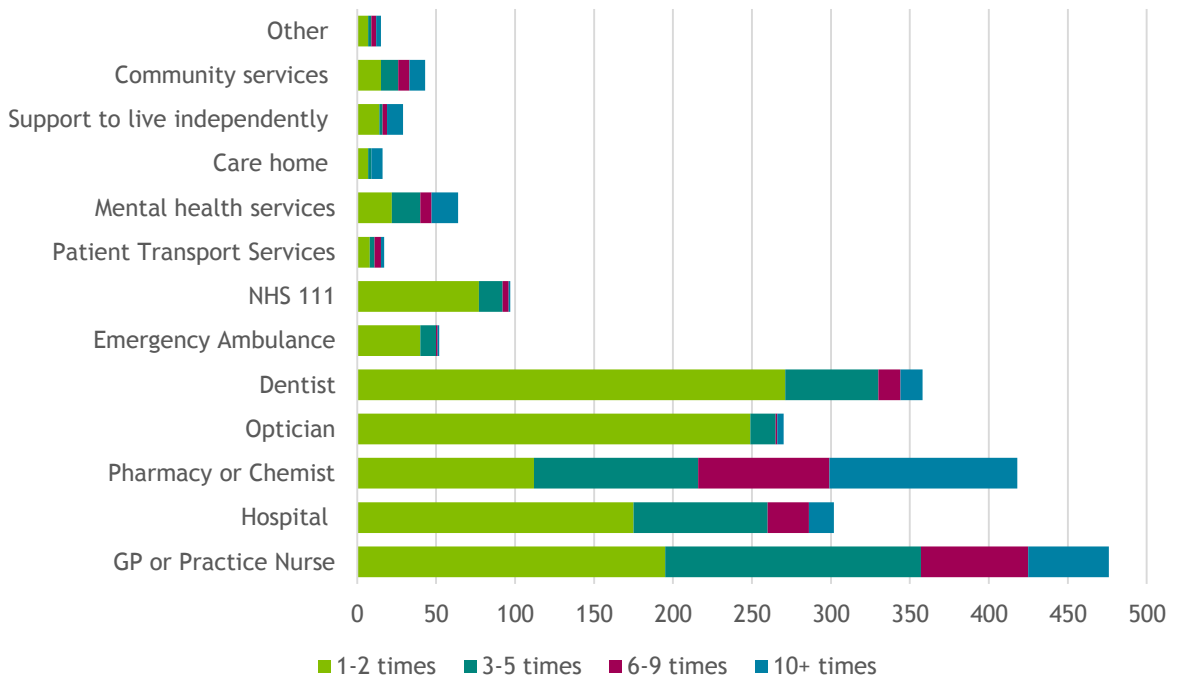
Our different data collection methods give us different types of information and enable us to adapt to the needs of different sections of the North Tyneside population.

Our **annual survey** data gave us a general picture of the services people in North Tyneside are using and asked people to tell us about how regularly they use the service, rate how easy they found it to access the service and asked them rate how good the service was. We also asked people what they thought our future research priorities should be.

HWNT survey What services have you used in last 12 months?



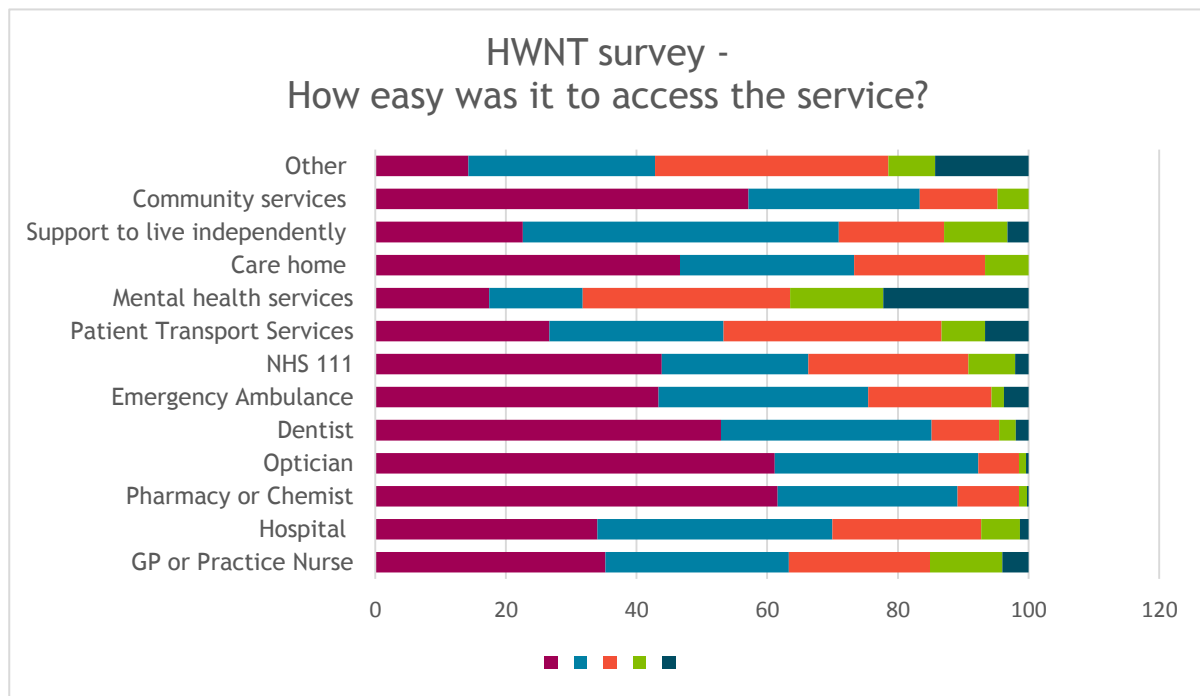
HWNT survey - How often have you used this service?



As we expected, we heard that GP services and also pharmacy services are most often used and used by a greater number of people who participated in the survey.

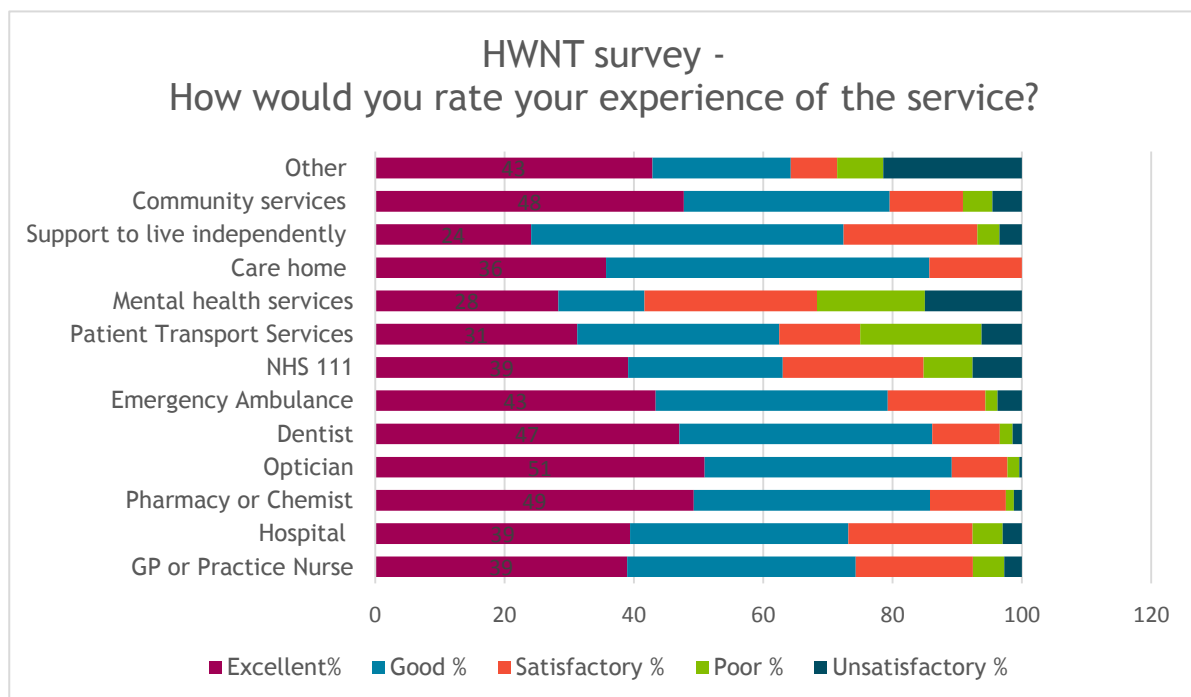
Access

Generally people in North Tyneside find services very easy, easy or satisfactory in terms of access to the services. There are a number of services, used by smaller numbers of people, that appear to have poorer performance in terms of access.



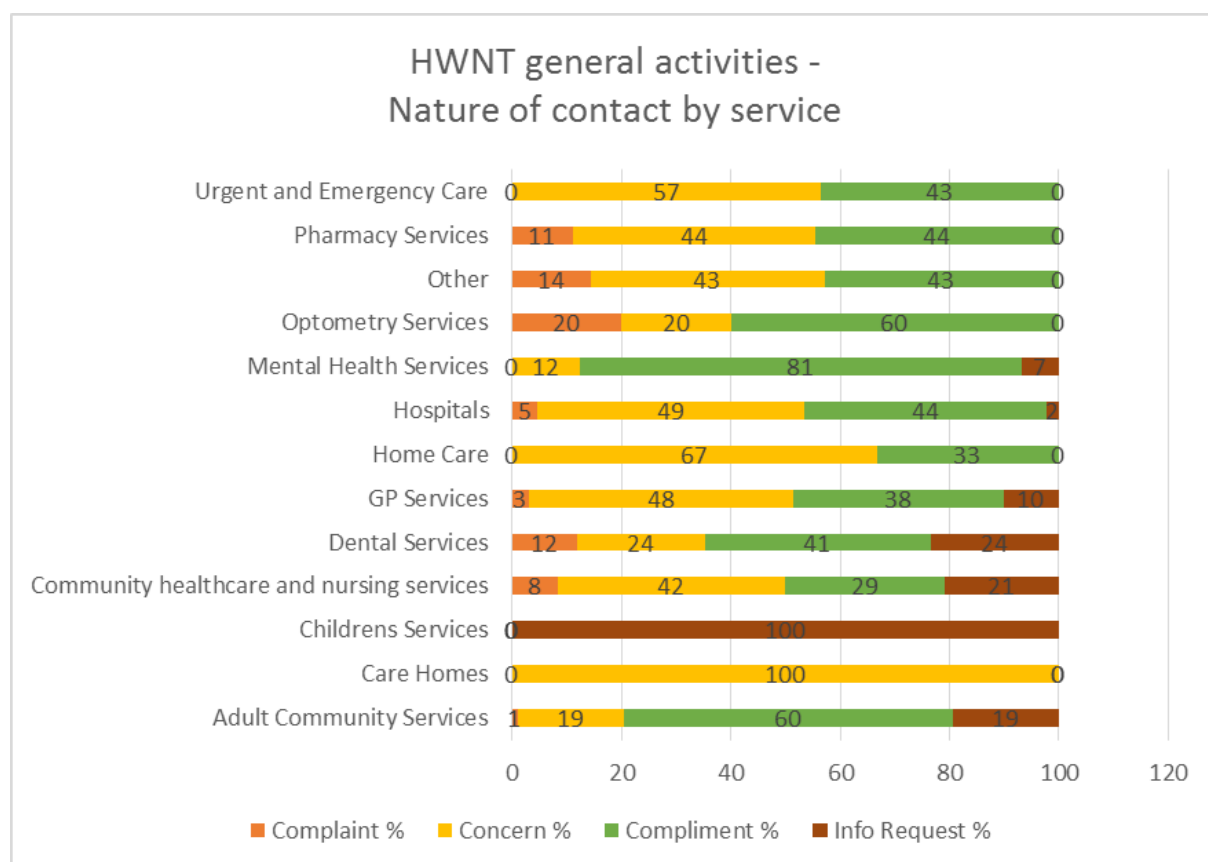
Satisfaction with experience

The picture for services in North Tyneside is positive. The chart below shows what people told us about their experiences. Whilst people were generally very positive, they highlighted potential improvements and issues in the free text boxes provided.



General feedback

When people contact us through our general activities - at an engagement event, using our feedback centre to give feedback, calling our free phone number etc. - we see a difference in what people are saying. In general, when we talk to someone, more concerns are raised.



This difference in sentiment is partly explained by people contacting us to raise concern or when they need help accessing services or making complaints.

Key issues people have raised

Adult social care

We are sharing feedback we hear directly with North Tyneside Council's Adult Social Care Senior Management Team. In June we are presenting them with our findings from the information we gathered in 2018/19. The issues we heard about included a perception of potential cuts and service availability, access to services and quality of care.

Transport

We are hearing more about transport issues both for planned and unplanned events. Getting to the hospitals that service our population have been highlighted as a concern, particularly around public transport, the cost of taxis and costs of parking. We are talking to Northumbria HFT about people's concerns. We will also be meeting with NEAS to discuss what we are hearing and people's experiences of the Patient Transport Service.

GPs and Primary Care

In our Annual survey, 92% rated their experiences of using their GP as satisfactory, good and excellent. However people also told us:

- About difficulties in accessing services - people told us that they often have to wait between 3-4 weeks to get a routine appointment, waiting times are increased if they

request a specific GP or nurse.

- Emergency appointments are usually offered on a first come, first served basis by telephoning at 8:30am - if people are able to call at this time phone lines are often engaged, and it can take multiple attempts to get through - when people get through sometimes all appointments have been fully booked.
- People continue to feel that receptionists act as a barrier to getting appointments.

We have identified that there is a lack of awareness about extended hours GP appointments and the normal appointment times offered are sometimes unsuitable for people who have work or childcare commitments.

These issues will be investigated further in planned GP activity.

Cancer services

Our annual survey highlighted cancer services as being an issue that mattered to the people of North Tyneside. A small number of services users have talked to us about their experiences of cancer services which have been very positive *'so lucky to have the NHS, particularly lucky to have excellent hospitals and university working together on improving treatment, it's a terrific place to be ill'*. We have heard about areas where improvements could be made, and we are looking into these further over the coming months - including screening and post-treatment support.

Older people's mental health services

We have heard concerns about availability of mental health services for older people (65+) - especially crisis support during weekends and out-of-hours. The Mental Wellbeing in Later Life Partnership Board are prioritising this issue and we are supporting their work with service user research.

More generally, we have heard concerns about memory/dementia services - in terms of *"I work within the social care field and there appears to be so many more people who are living with dementia"* and some concerns about support for people with dementia, their carers and loneliness in the community.

Dentistry

We don't usually hear a lot about dentists, but the annual survey helped us understand this better. We have heard some difficulties about accessing appointments and registering at a new dentist. Some people told us *"Have been on denplan with dentist who is retiring - difficult to find good NHS in the area and denplan increasingly expensive"* and *"My dentist has closed, and I've found it hard to find another"*.

Other people have told us about their very positive experiences- *"Dentist at Verne road practice is excellent"* and *"At dentist easy to get appointment"*.

Care at home - podiatry

During this year, we have been engaging more with people living in sheltered accommodation or who have limited mobility, about the difficulties they have in accessing services. Podiatry has been highlighted as an issue for this group with comments about a shortage of podiatrists and delays in being able to access appointments.

Prevention and screening

A small number of people in our annual survey talked about a greater focus on healthy living, prevention and screening. This was particularly focused on healthy eating, obesity and diabetes and the opportunity to improve 'prevention rather than cure'.

3. Our priorities and work plan for 2019/20

We set our thematic priorities based on what local people have told us matters to them and through discussions with key stakeholders. We share these priorities with North Tyneside's Health and Wellbeing Board and Adult Social Care Health and wellbeing Overview and Scrutiny Committee as well as publishing them.

In February 2019, our Board, volunteers and staff team met to review all of the information we had heard from North Tyneside residents and stakeholders. We also had a presentation from Craig Anderson, North Tyneside Council's Senior Manager - Policy, Performance and Research about local data and demographics. We workshoped our future priorities based on what we heard. In March 2019, The Healthwatch North Tyneside Board agreed the workplan and priorities below.

The aim of all of our work, is to identify what is working well as well as what changes could be made to improve user's experiences of services.

As mentioned in Section 1, we aim to publish an overarching report into 'what do people in North Tyneside do when they feel poorly?' in March 2020. This will pull together the system wide lessons and issues we have identified through our research into urgent and emergency care services, GP services and NHS111.



In addition to the above, Healthwatch North Tyneside has been separately commissioned by North Tyneside council to:

- Provide a lay person's view of meaningful life in each of the care homes in North Tyneside
- Support the council to better understand the user experience of Adult Social care, particularly around customer service experiences.

4. Activities over the next 6 months

We are committed to doing the following between April and September 2019:

Community wide engagement

We are reviewing our approach to engagement with all demographic and geographical areas of North Tyneside to ensure all sections of the community can have their voices heard.

We launched our Young Voices Fund to provide small grants to local voluntary sector organisations to gather and/or respond to the health and wellbeing needs of young people in North Tyneside. In May 2019 we awarded a total of £5,420 to the following local organisations::

- Phoenix Detached Youth Project to: 1) work with others to create a young people's mental health resource similar to Support Groups leaflet. 2) Work with young people to produce a film for GPs and other healthcare professionals about talking to young people about their mental health.
- North Tyneside Carer's Centre to complete an action research project with young carers about their experiences of health and social care.
- DePaul to deliver a mental health event with young homeless people to understand their health issues and support services.
- Barnardo's The Base to work with LGBTQ+ young people to create resources and a campaign about mental health and self-acceptance.

These projects will be delivered over the next 12 months.

Volunteering

Our volunteers are an essential part of our team and we will continue to promote volunteering opportunities in North Tyneside. We have recruited 14 new volunteers since October 2018 and hope to build on our recent successes in recruiting new volunteers and support our current volunteers to continue to develop their skills.

New Healthwatch North Tyneside information

We will be launching our new publicity information/materials, posters and feedback forms across services and community facilities in the Borough. We encourage all members of the Health and Wellbeing Board to support our work by displaying these and encouraging their services to do so.

Older People's mental health

Working with the Mental Wellbeing in Later Life Partnership Board, we will be talking to older people and their carers about their experiences of support from the memory services and their other mental health needs.

Cancer services

We will scope out a future research project by talking to more people about their experiences of cancer services and continuing to develop relationships with stakeholders about opportunities to work together.

Access to GPs and NHS 111

Our volunteers will begin visiting each of the GP practices in North Tyneside to understand user's experiences of getting access to these services. This will be supported by our Borough wide survey which will continue during this period. We will be gathering information about people experiences of NHS 111 at the same time.

Residential care

Our volunteers will be visiting care homes to provide a lay person's view of having a meaningful daily life within each care home. This is part of a separately contracted piece of work for North Tyneside Council.

Mental health support leaflet

Our very successful mental health support leaflet is being revised in partnership with Launchpad North Tyneside. We expect to be ready to distribute the updated versions of this, with a cover designed by a mental health service users, in July 2019.

Annual report

Our annual report will be published on 30 June and will be circulated to all Health and Wellbeing Board members.

NHS Long Term Plan engagement

NHS England commissioned Healthwatch England and the Healthwatch network to carry out specific community engagement activity around the NHS long Term Plan. At Healthwatch North Tyneside we worked with our other Healthwatch organisations across the ICS footprint area to gather feedback from our local communities. The data is currently being collated and will be shared in the coming months.

NHS governance reforms

Engagement of local Healthwatch in the North Cumbria and the North East ICS workstreams is being coordinated by Healthwatch Newcastle. We are beginning to receive information about the different workstreams and will contribute views from North Tyneside when appropriate.

Primary Care Networks North Tyneside

Dr Richard Scott
Clinical Chair North Tyneside CCG

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Agenda Item 7



Primary Care Networks

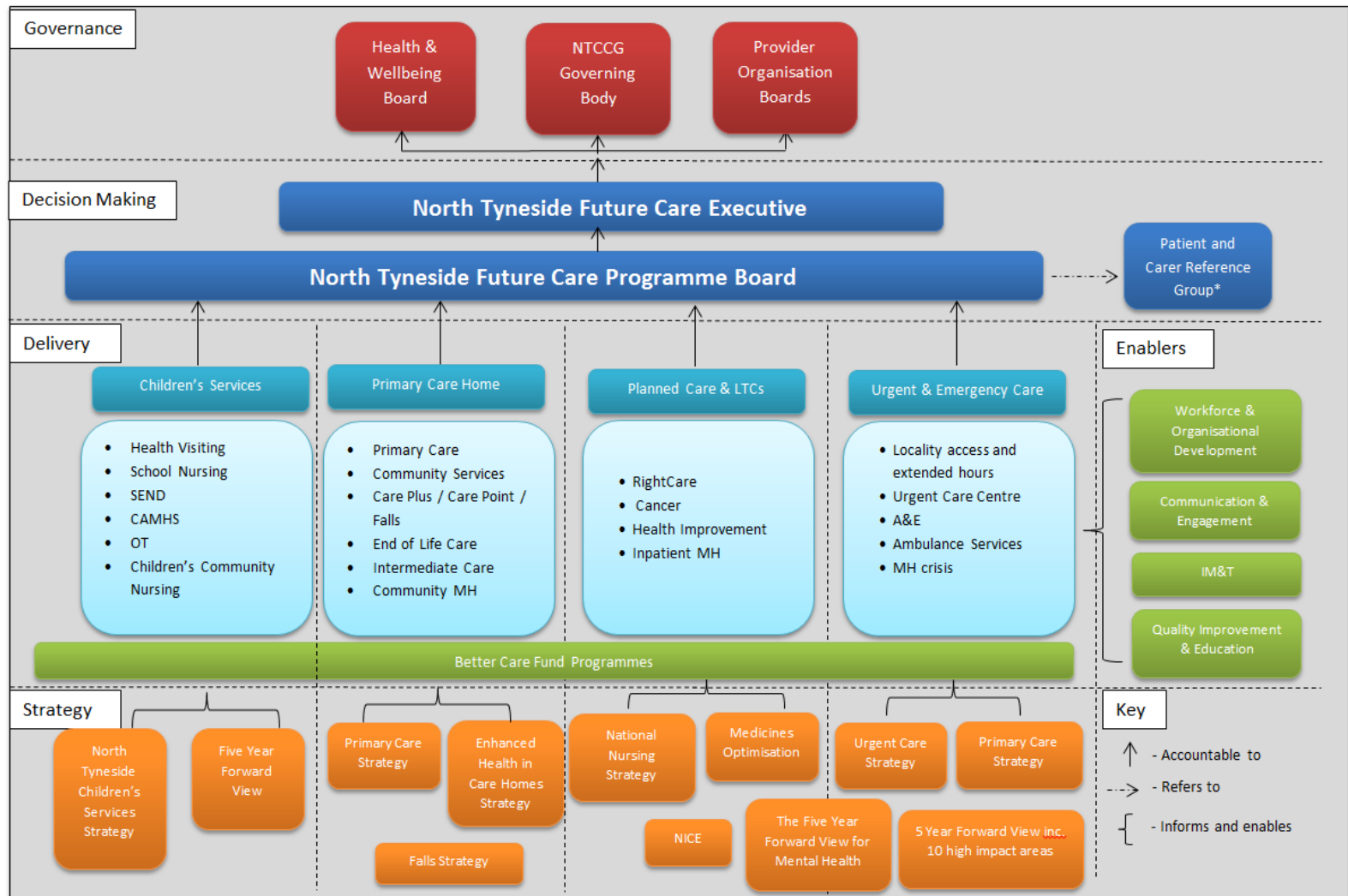
- NorthTyneside place based: Future Care
- Locality journey so far
- Primary Care Networks in North Tyneside
- How they fit with our vision of Primary Care Home
- How all this will benefit patients

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North Tyneside place based working

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North Tyneside

Place Based: *Future Care*

- Providers working together (*Northumbria, NTW, Newcastle, primary care, community services, third sector, local authority*)
- Strengthening primary/ community services
- Hospital by Exception

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- NT place based: Future Care
- **Locality journey so far**

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Primary Care Networks in North Tyneside

- How they fit with our vision of Primary Care Home
- How all this will benefit patients



North Tyneside

27 GP Practices

4 Established GP Localities



North Tyneside
Commissioning Group

North West

- 24% of population
- 64% access NUTH
- Less deprived (IMD 20.1)
- Higher life expectancy

Wallsend

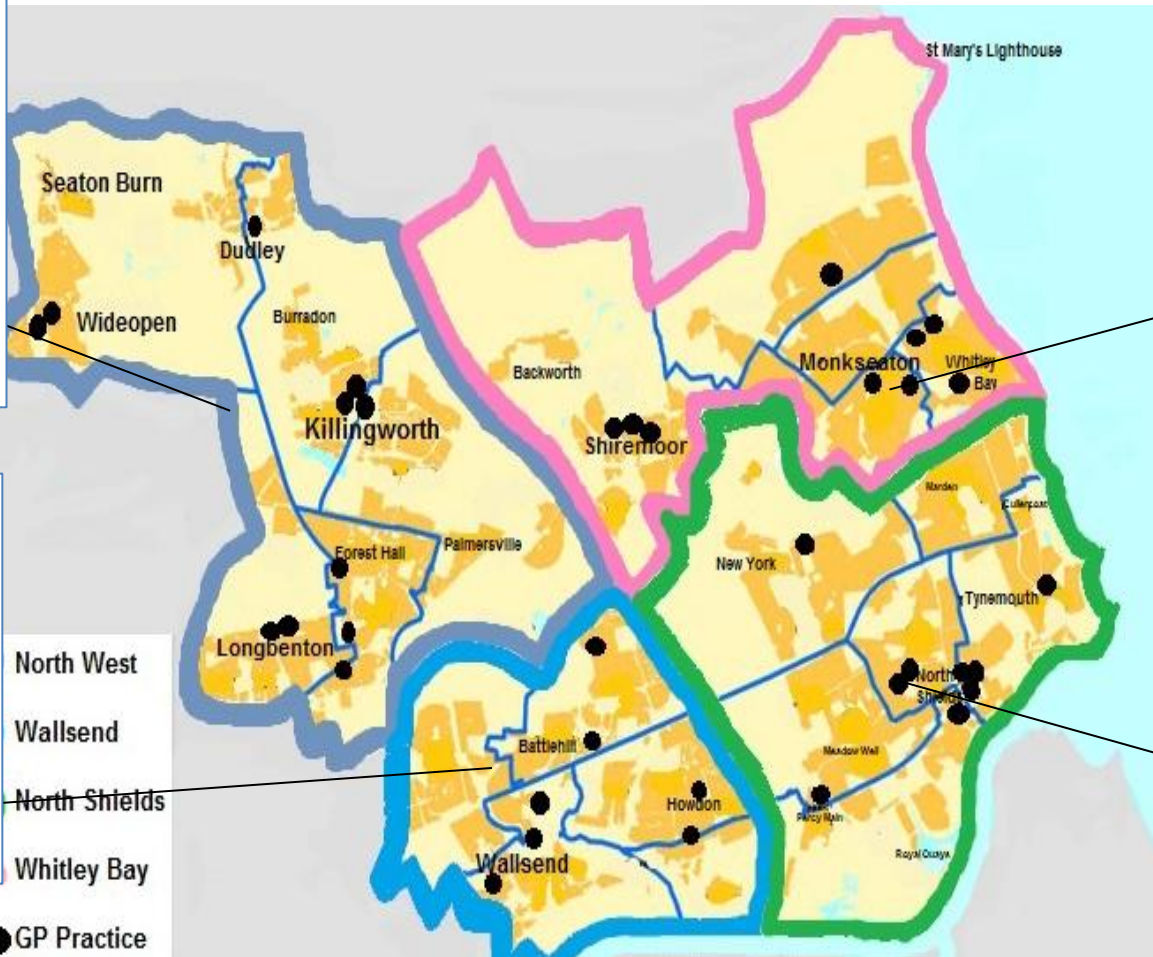
- 22% of population
- 63% access NHCFT
- More deprived (IMD 27.4)
- Lower life expectancy

Whitley Bay

- 28% of population
- 78% access NHCFT
- Least deprived (IMD 14.4)
- Highest life expectancy

North Shields

- 26% of population
- 75% access NHCFT
- Most deprived (IMD 28.4)
- Lowest life expectancy



On 7 January 2019, the NHS long-term plan was published setting out key ambitions for the service over the next 10 years.

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“The plan confirms a **£4.5 billion uplift to primary medical and community health services**, trying to make good on the oft-repeated objective to improve out-of-hospital care. In addition, all of England will be covered by integrated care systems (ICSs) by April 2021 and **key responsibilities placed on primary care networks (PCNs)** (these are formed of GP practices typically covering 30-50,000 patients, signing an additional contract as an extension to their current contracts). ”

Extract from The NHS Long Term Plan 2019



What are Primary Care Networks? (PCNs)

- Groups of Practices commissioned to provide primary care services at scale

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30-50,000 patients

- Delivered and Funded via a Contract (DES)
(Between the CCG and the Network)



Network Contract DES

- Offered to all practices as an extension of their core GP contract and goes live on 1st July 2019

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Network Agreement- governance, financial structure, roles and responsibilities of each practice.

- ***DES Specification-***outline the full requirements of the DEs.



What will Primary Care Networks do?

2019/20 there are 3 areas for the DES:

1. Access

July 2019 – Extended Hours Access

2. Clinical Pharmacy

Additional WTE in each network to work across practices

3. Social prescribing

Building on experience of previous schemes



Primary Care Network Workforce

- Clinical Director

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Administration support staff

- Additional Roles

2019/20 – *Social Prescribing Link workers*

2019/20 – *Clinical Pharmacists*

2020/21 – *First Contact Physiotherapists*

2020/21 – *Physicians Associates*

2021/22 – *First contact community paramedics (TBC)*



- NT place based: Future Care
- Locality journey so far

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Primary Care Networks in North Tyneside

- How they fit with our vision of Primary Care Home
- How all this will benefit patients



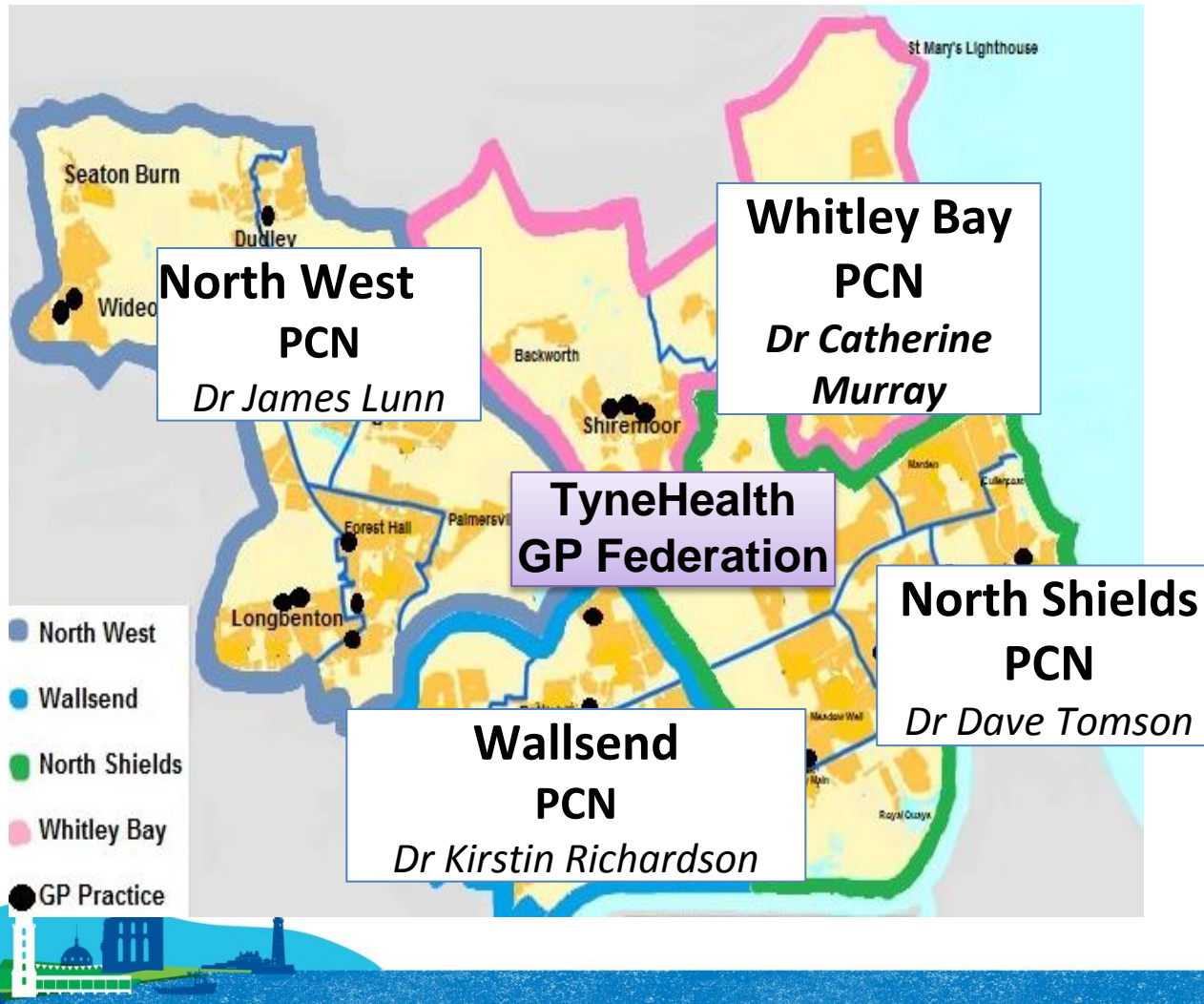
We asked our GPs about PCNs

Essential to know how GPs felt about these to build this bottom up

- Current Locality Footprint?
- PCN Director Role?
- Delivery Mechanism for the Network?



4 Primary Care Networks North Tyneside



Where are we now?

Each of our 4 Primary Care Networks :

- is based on its historic locality footprint (*2 exceptions*)
- meets national requirements for size and format
- has identified a Clinical Director
- has signed the Mandatory Network Agreement
- has submitted the Registration Documents

This means that 100% of NT patients are registered with a practice in a Primary Care Network.



- NT place based: Future Care
- Locality journey so far

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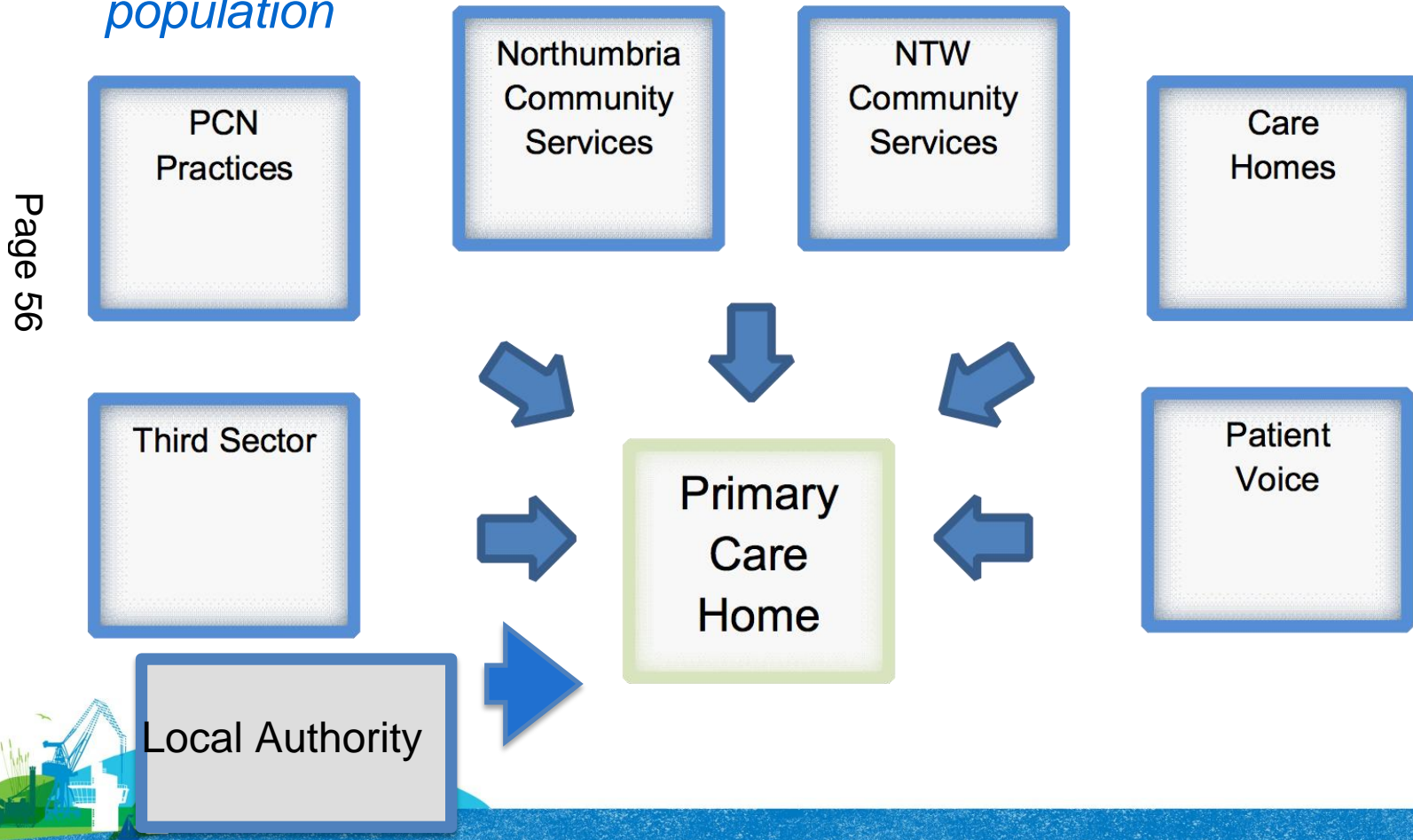
Primary Care Networks in North Tyneside

- **How they fit with our vision of Primary Care Home**
- How all this will benefit patients



Primary Care Home

- Primary Care Home brings PCNs together with other providers to co-produce primary care and community services for their local population*



- NT place based: Future Care
- Locality journey so far

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Primary Care Networks in North Tyneside

- How they fit with our vision of Primary Care Home
- **How all this will benefit patients**



Benefits for Patients?

- More joined up care: *practices, community services, hospital specialists, social care, third sector*

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Easier access to services: closer to home

- More health promotion
- Hospital by exception



Primary Care Networks

Questions/comments/ideas?



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