



North Tyneside Council

# Health and Wellbeing Board

3 March 2021

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

on **Thursday, 11 March 2021**

at **2.00 pm**

This meeting will be conducted using video conferencing technology and streamed live on the Council's YouTube channel.

<b>Agenda Item</b>	<b>Page(s)</b>
<p>1. <b>Apologies for Absence</b> To receive apologies for absence from the meeting.</p>	
<p>2. <b>Appointment of Substitute Members</b> 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.</p>	
<p>3. <b>Declarations of Interest and Dispensations</b> 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.</p> <p>Non voting members are invited to declare any conflicts of interest in matters appearing on the agenda and the nature of that interest.</p>	

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

4. **Minutes** 5 - 8  
To confirm the minutes of the meeting held on 10 December 2020.
  
5. **Better Care Fund** 9 - 12  
To confirm the continued operation of the Better Care Fund in 2020/21 in line with national conditions.
  
6. **Commissioning Intentions 2021/22** 13 - 16  
To consider the Council's and the Clinical Commissioning Group's commissioning intentions for 2021/22.

**Members of the Health and Wellbeing Board:-**

Councillor Margaret Hall (Chair)  
Councillor Muriel Green (Deputy Chair)  
Councillor Matt Wilson  
Councillor Tommy Mulvenna  
Councillor Karen Clark  
Wendy Burke, Director of Public Health  
Jacqui Old, Director of Children's and Adult Services  
Richard Scott, North Tyneside NHS Clinical Commissioning Group  
Lesley Young-Murphy, North Tyneside NHS Clinical Commissioning Group  
Julia Charlton, Healthwatch North Tyneside  
Paul Jones, Healthwatch North Tyneside  
Christine Briggs, NHS England  
Michael Graham, Newcastle Hospitals NHS Foundation Trust  
Claire Riley, Northumbria Healthcare NHS Foundation Trust  
Kedar Kale, Northumberland, Tyne & Wear NHS Foundation Trust  
Susannah Thompson, TyneHealth  
Craig Armstrong, North East Ambulance Service  
Richie Rickaby, Tyne & Wear Fire & Rescue Service  
Dawn McNally, Age UK  
Andy Watson, North Tyne Pharmaceutical Committee  
Cheryl Gavin, Voluntary and Community Sector Chief Officer Group  
Dean Titterton, YMCA North Tyneside

**Members of the Adult Social Care, Health and Wellbeing Sub-Committee, as listed below, have also been invited to join the meeting:**

Councillor Trish Brady  
Councillor Joanne Cassidy  
Councillor Joe Kirwin  
Councillor Nigel Huscroft  
Councillor Cath Davis  
Councillor Alan Percy  
Councillor Paul Richardson

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## Health and Wellbeing Board

**Thursday, 10 December 2020**

Present: Councillor M Hall ( Chair)  
Councillors M Green, T Mulvenna, W Samuel and M Wilson  
Wendy Burke, Director of Public Health  
Jacqui Old, Director of Children's and Adult Services  
Lesley Young-Murphy, North Tyneside CCG  
Julia Charlton, Healthwatch North Tyneside  
Paul Jones, Healthwatch North Tyneside  
Claire Riley, Northumbria Healthcare NHS Foundation Trust  
L Long, Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust  
S Thompson, TyneHealth  
K Soady, Tyne & Wear Fire & Rescue Service  
D McNally, Age UK North Tyneside  
C Gavin, Voluntary and Community Sector Chief Officer Group  
D Titterton, YMCA North Tyneside

In attendance: J Harland, Northumbria Healthcare NHS Trust  
A Paradis, North Tyneside CCG  
S Woodhouse, North Tyneside Council  
M Taylor, North Tyneside Council  
M Robson, North Tyneside Council

Apologies: Councillors K Clark  
K Kale, Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust  
R Rickaby, Tyne & Wear Fire & Rescue Service

### **HW39/19 Appointment of Substitute Members**

Pursuant to the Council's constitution the appointment of the following substitute members was reported:-

Councillor W Samuel for Councillor K Clark  
K Soady for R Rickaby (Tyne & Wear Fire and Rescue Service)  
L Long for K Kedar (Cumbria, Northumberland, Tyne & Wear NHS Trust)

### **HW40/19 Declarations of Interest and Dispensations**

There were no declarations of interest or dispensations reported.

### **HW41/19 Minutes**

**Resolved** that the minutes of the previous meeting held on 17 September 2020 be confirmed and signed by the Chair.

## **HW42/19 Future Care: Place Based Transformation Plan**

The Board considered the final draft of North Tyneside Place Based Transformation Plan August 2020 – March 2022. The plan had initially been developed to describe a partnership response to future service delivery to the period March 2022, recognising the impact the COVID-19 pandemic has had, and continues to have on the needs of our population. The initial response, together with the current work programme of the Future Care Programme Board was developed further to reflect the health and social care aspirations across the borough for the next 2 – 5 years. The plan and the subsequent work plan had become the North Tyneside Place Based Transformation Programme: Future Care work plan.

The key programmes of work included in the plan included:

- Population Health Management & Prevention, including addressing Inequalities
- Implementation of the North Tyneside Children & Young People Plan
- Improving support for carers
- Living Well Locally in North Tyneside, including transformation of community provision
- Community Mental Health Transformation
- Ageing Well In North Tyneside including frailty, falls services and mental health provision for older people
- Continue Digital transformation
- Roll out of Covid-19 vaccines

The Future Care Programme Board would monitor and assure its delivery as well as report on outcome measures to the Health & Wellbeing Board.

Members welcomed the comprehensive and coherent Plan which had been based on the strong foundation of collaboration and partnership working in North Tyneside and engagement with stakeholders including Healthwatch and the CCG Patient Forum. It would be important that the work plan did not duplicate work already underway but rather identify gaps where services could be better integrated. Board members examined in more the support that would be available to ensure that all sections of the community would be able to access services following digital transformation.

**Resolved** that (1) the plan be noted and the comments of the Board be taken into account in finalising the plan;

(2) the cohesiveness of the plan with the priorities of the Health and Wellbeing Board be noted; and

(3) the program areas for the Future Care Programme Board (FCPB) which is made up of partner organisations working on behalf of the Health & Wellbeing Board and residents be agreed.

## **HW43/19 Children & Young People's Plan 2021-25**

The Board considered the draft Children and Young People's Plan 2021-25, 2025 developed and owned by the Children and Young People's Partnership Board.

The vision contained in the Plan was ““Making North Tyneside an even greater place for children and young people to thrive; where all, including those who are vulnerable, disadvantaged or disabled, are ready for school, ready for work and life, cared for and supported.” The Plan included outcomes based on the

five I's:

I am safe- free from harm and abuse

I am healthy – choosing healthier lifestyles

I have opportunities – living the life I want

I have a voice – an active citizen with influence

I am happy – resilient and enjoying life

The Board were presented with details of the priorities associated with each outcome.

Members of the Board were invited to make any individual comments on the content of the plan to officers prior to its approval by the Partnership and the Council.

The Director of Children's and Adult Services, Jacqui Old, thanked the Clinical Commissioning Group, the Police, schools and those children and young people who had been involved in a strengthened approach to developing the Plan in a form with simplified priorities and in language that made sense.

The Board discussed how the Council and its partners sought to provide a holistic approach to children's services.

Officers described how performance in children's services was monitored, evaluated and benchmarked and scrutinised by OFSTED who were satisfied that North Tyneside were one of the top performing areas.

It was suggested that whilst the important role of parents and families in the lives of children and young people was recognised and valued in practice, this could be given more emphasis in the Plan.

Reference was made to the wide variety of activities to encourage young people to live healthy lifestyles delivered by a range of organisations that could be brought together under the successful Active North Tyneside brand.

A member also asked for clarity and consistency about the use of the term specialist mental health services in the plan.

**Resolved** that (1) the draft Children and Young People's Plan 2021-25 be noted;  
(2) the comments set out above be given consideration prior to the plan being approved by the Children and Young People's Partnership Board and Council;  
(3) any member of the Board with additional comments refer them directly to the relevant officers.

## **HW44/19      Healthwatch North Tyneside: Update and Insights**

Paul Jones, the Director of Healthwatch North Tyneside, presented an update on its work and an overview of the key issues local people had raised with Healthwatch including:

- The challenges faced by people accessing digital services;
- The development of the Living Well North Tyneside service directory;
- People's experiences of dementia and memory services;
- People's experiences of access to GPs and primary care;
- An information campaign about what local services are available;
- Carers experiences during the Covid-19 pandemic;

Healthwatch were currently undertaking research into pharmacies and deliveries, maternity and early years services and waiting times for treatment. The key issues to emerge from the feedback received from users were in relation to co-ordinated care and hospital discharge, mental health support and people's experiences of having a relative in a care home.

The Board examined in more detail proposals to replace the SIGN North Tyneside directory with the Living Well platform and how this would be resourced and kept up to date.

**Resolved** that the report from Healthwatch North Tyneside be noted.

#### **HW45/19 Covid-19 Update**

The Director of Public Health, Wendy Burke, and the CCG's Chief Operating Officer, Lesley Young-Murphy, provided the Board with an update on the impact of Covid-19 in the borough.

The Board were presented with a statistical analysis of infection rates, numbers of people in hospital and deaths in North Tyneside. The Board were also presented with details of the vaccination programme to be delivered from three vaccination hubs to be located at The Parks, The Oxford Centre and The Langdale Centre from 21 December 2020.

Title: Better Care Fund

## North Tyneside Health & Wellbeing Board Report Date: 11<sup>th</sup> March 2021

**Report from :** North Tyneside Council & North Tyneside CCG

**Report Author:** Kevin Allan, Programme Manager, (Tel: 0191 643 6078)  
Integrated Care for Older People

### 1. Purpose:

This report confirms the continued activity of the Better Care Fund (BCF) in 2020/21, in line with national conditions.

### 2. Recommendation(s):

The Board is recommended to note the continued operation of the Better Care Fund in line with the national conditions.

### 3. Policy Framework

This item relates to the following objectives of the Joint Health and Wellbeing Strategy 2013-23:

- To continually seek and develop new ways to improve the health and wellbeing of the population
- To shift investment to focus on evidence based prevention and early intervention where possible
- To reduce the difference in life expectancy and healthy life expectancy between the most affluent and most deprived areas of the borough;
- To shift investment to focus on evidence based prevention and early intervention;
- To build resilience in local communities through focussed interventions and ownership of local initiatives to improve health and wellbeing; and
- To integrate services where there is an opportunity for better outcomes for the public and better use of public money

### 4. Information:

The Better Care Fund is a programme spanning both the NHS and local government which seeks to join-up health and care services, so that people can manage their own health and wellbeing, and live independently in their communities for as long as possible. It has been in operation since 2015/16.

In previous years, a Better Care Fund plan has been approved by the Health and Wellbeing Board. The most recent plan was approved by the Board on 12<sup>th</sup> September 2019, and covered the period April 2019-March 2020.

In the early stages of the COVID-19 pandemic, Government advised that BCF policy and planning requirements would not be published and that they should prioritise continuity of provision, social care capacity and system resilience and spend from ringfenced BCF pots based on local agreement in 2020 to 2021, pending further guidance.

This approach was confirmed on 3rd December 2020 with the publication of the “Better Care Fund: policy statement 2020 to 2021” by the Department of Health and Social Care and the Ministry of Housing, Communities & Local Government.

The policy statement set out the following national conditions for the BCF in 2020-21

1. Plans covering all mandatory funding contributions have been agreed by HWB areas and minimum contributions are pooled in a section 75 agreement (an agreement made under section 75 of the NHS Act 2006).
2. The contribution to social care from the CCG via the BCF is agreed and meets or exceeds the minimum expectation (see paragraph 9).
3. Spend on CCG commissioned out of hospital services meets or exceeds the minimum ringfence (see paragraph 10).
4. CCGs and local authorities confirm compliance with the above conditions to their Health and Wellbeing Boards.

### **Compliance with the National Conditions**

1. “Plans covering all mandatory funding contributions have been agreed by HWB areas and minimum contributions are pooled in a section 75 agreement (an agreement made under section 75 of the NHS Act 2006).”

The Better Care Fund Partnership Board, including senior representatives from the Authority and the CCG, have continued to oversee the implementation of the BCF plan and have updated the Section 75 Agreement to cover 2020-21.

2. “The contribution to social care from the CCG via the BCF is agreed and meets or exceeds the minimum expectation (see paragraph 9).”

The minimum expectation requires the CCG to contribute £11,096,836 to social care. This requirement has been met.

3. “Spend on CCG commissioned out of hospital services meets or exceeds the minimum ringfence (see paragraph 10).”

The minimum expectation requires the CCG to contribute £4,950,544 on NHS-commissioned Out of Hospital services. The actual contribution is £5,575,182, hence this requirement has been met.

4. “CCGs and local authorities confirm compliance with the above conditions to their Health and Wellbeing Boards “

This report is intended to serve the purpose of confirming compliance with the above conditions to the Board.

## **The BCF in 2021/22**

The policy statement confirmed that the BCF will continue in 2021/22:

- The iBCF grant will continue in 2021 to 2022 and be maintained at its current level (£2.077 billion). The Disabled Facilities Grant will also continue and will be worth £573 million in 2021 to 2022.
- The CCG contribution will again increase by 5.3% in line with the NHS Long Term Plan settlement.
- The Policy Framework and Planning Requirements will be published in early 2021.”
- The BCF Partnership Board continues to review the content of the BCF Plan. Once BCF planning guidance is published relating to 2021/22, the Health and Wellbeing Board will be asked to consider and approve a revised BCF Plan covering that period.

### **5. Decision options:**

The Board may either:-

- a) Note the continued operation of the Better Care Fund in line with the national conditions, or
- b) request relevant officers, in consultation with the Chair and Deputy of the Board, to undertake further work to make changes to BCF Plan.

### **6. Reasons for recommended option:**

The Board are recommended to agree option a). The continuation of the Better Care Fund presents an opportunity to take forward the principles of the Health and Wellbeing Strategy. The BCF funds support a wide range of services which are already in operation and which are important to the health and wellbeing of the people of North Tyneside.

## **COMPLIANCE WITH PRINCIPLES OF DECISION MAKING**

### **7 Financial Implications**

The financial implications of the BCF Plan are already embedded in the financial plans of the Authority and the CCG.

### **8. Legal Implications**

The NHS Act 2006, as amended, gives NHS England the powers to attach conditions to the payment of the Better Care Fund Plan. In 2016/17 NHS England have set a requirement that Health and Wellbeing Boards jointly agree plans on how the money will be spent and plans must be signed off by the relevant local authority and clinical commissioning group.

**9. Equalities and diversity**

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

**10. Risk management**

The Better Care Fund Partnership Board regularly reviews risks to the delivery of the BCF Plan.

**11. Crime and disorder**

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

## North Tyneside Health & Wellbeing Board Report Date: 11 March 2021

Title: Commissioning  
Intentions 2021/22

**Report from:** Law & Governance, North Tyneside Council

**Report Author:** Michael Robson (Tel: 0191 643 5359)

### 1. Purpose:

This report introduces the presentation of the Council's and the Clinical Commissioning Group's commissioning intentions for 2021/22 and provides the Board with an opportunity to form an opinion on whether the Council and the CCG have taken proper account of the Joint Health & Wellbeing Strategy in formulating their commissioning intentions.

### 2. Recommendation(s):

The Board is recommended to:

- a) note North Tyneside Clinical Commissioning Group (CCG) and North Tyneside Council's commissioning intentions for 2021/22; and
- b) consider whether it wishes to form an opinion on whether the Council and the CCG have taken proper account of the Joint Health & Wellbeing Strategy in formulating their commissioning intentions 2021/22 and report this to the CCG and/or Council.

### 3. Policy Framework

This item relates directly to delivery of the vision, objectives and priorities contained within the refreshed Joint Health and Wellbeing Strategy 2013-23.

### 4. Information:

On an annual basis North Tyneside Council and North Tyneside Clinical Commissioning Group (CCG) present to the Board their respective commissioning intentions for the year ahead.

Officers from the Council will present to today's meeting details of the commissioning intentions in relation to public health, adult social care and children and young people. Officers from the CCG will also present details of the commissioning intentions contained within the Future Care: Place Based Transformation Plan. The presentation will be

supported by Healthwatch North Tyneside who will reflect the views and experiences of service users.

In order to avoid duplication, members of the Adult Social Care, Health & Wellbeing Sub-Committee have been invited to join the meeting. The sub-committee exercises the Council's overview and scrutiny functions in relation to health related matters.

The Board have the power to consider whether the commissioning intentions take proper account of the [Joint Health & Wellbeing Strategy 2013-23](#), its [Mid-Point Review 2017](#) and the [Joint Strategic Needs Assessment 2018](#) and it may give its opinion to the CCG and Council if it so wishes.

## **5. Decision options:**

Taking into account the information to be presented the Board may now either:-

- a) note the commissioning intentions and take no further action; or
- b) form an opinion on whether the Council and the CCG have taken proper account of the Joint Health & Wellbeing Strategy in formulating their commissioning intentions 2021/22 and report this to the CCG and/or Council.

## **6. Reasons for recommended option:**

Unless the Board wish to form an opinion and report to the CCG and/or Council, it is recommended that the intentions be noted.

## **7. Appendices:**

None.

## **8. Contact officers:**

Michael Robson, Law & Governance, Tel: 0191 643 5359

## **9. Background information:**

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

- North Tyneside Council Constitution
- Health & Social Care Act 2012
- National Health Service Act 2006
- Report to Cabinet 1 February 2021 in relation to the Council's 2021-2025 Financial Planning and Budget Process

## **COMPLIANCE WITH PRINCIPLES OF DECISION MAKING**

### **10 Finance and other resources**

The financial implications associated with the Council's commissioning intentions have been considered as part of its 2021/22 Financial Planning and Budget Process.

### **11 Legal**

In accordance with Section 14Z11 of the National Health Service Act 2006, the Clinical Commissioning Group is required to prepare a plan setting out how it proposes to exercise its functions and must give a copy to the Health and Wellbeing Board. The CCG must, in particular, provide the Board with a copy of the draft plan or revised plan (as the case may be) and consult it on whether it adequately takes the latest joint health and wellbeing strategy into account.

Section 14Z14 of the 2006 Act enables the Board to give an opinion on whether the commissioning plan published by a clinical commissioning group takes proper account of the joint health and wellbeing strategy and, if it does so, give the clinical commissioning group a copy of its opinion.

Section 196(3) of the Health & Social Care Act 2012 allows the Board to give the Council its opinion on whether the Council, in exercising its functions, has given due regard to the Joint Strategic Needs Assessment and the Joint Health & Wellbeing Strategy.

### **12 Consultation/community engagement**

The Council's 2021/22 Budget Engagement Strategy and approach were agreed by Cabinet on 3 August 2020. Engagement with residents took place over the summer during the Big Community Conversation activity. Due to restrictions with the pandemic, this activity was more limited than the usual annual exercise. However, through the Residents Panel the Authority was able to ask residents for their views on what the priorities should be to enable the Borough to recover from the pandemic. These views and priorities have been considered both in the proposals for the Our North Tyneside Plan and Cabinet's draft Budget proposals as set out in this report. Further engagement on the Our North Tyneside Plan and Budget proposals has taken place during December 2020 and January 2021 in line with the Budget Engagement Strategy agreed by Cabinet on 3 August 2020.

Healthwatch North Tyneside intend to present to the Board feedback they have received from residents and service users.

### **13 Human Rights**

Commissioning intentions must have regard to Human Rights Law including Article 8 of the European Convention on Human Rights the right to respect for private and family life.

### **14 Equalities and diversity**

Commissioning intentions must have regard to the Equality Act 2010 and in particular the Public Sector Equality Duty under that Act. To achieve this specific proposals on how services will seek to meet budgetary requirements will be subject to Equality Impact Assessments.

## **15 Risk management**

The Council's Commissioning Intentions will have been subject to risk reviews and individual project risk registers as part of the Authority's agreed approach to project management.

## **16 Crime and disorder**

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