

Health and Wellbeing Board

Thursday, 30 June 2022

Present: Councillor K Clark (Chair)
Councillors J Kirwin, J O'Shea and P Richardson
Wendy Burke, Director of Public Health
Jacqui Old, Director of Children's and Adult Services
Julia Charlton, Healthwatch North Tyneside
Paul Jones, Healthwatch North Tyneside
Birju Bartoli, Northumbria Healthcare NHS Foundation Trust
Charis Pollard, Newcastle Hospitals NHS Foundation Trust
Steven Thomas, Tyne & Wear Fire & Rescue Service
Karen Murray, Northumbria Police
Yvonne Probert, Age UK North Tyneside
Vacancy, North Tyne Pharmaceutical Committee
Cheryl Gavin, Voluntary and Community Sector Chief Officer Group
Dean Titterton, YMCA North Tyneside

In attendance: Mark Hall, Northumbria Police
Dan Jackson, North East and North Cumbria Integrated Care Board
Jackie Loughton, Rachel Nicholson, Behnam Khazaeli, Chris Woodcock,
Suzy Cooke, & Michael Robson, North Tyneside Council

Apologies: Councillors C Burdis
Lesley Young-Murphy, North Tyneside NHS Clinical Commissioning
Group
Helen Steadman, Newcastle Hospitals NHS Foundation Trust
Claire Wheatley, Northumbria Police
Dawn McNally, Age UK North Tyneside

HW1/22 Appointment of Substitute Members

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

Karen Murray for Claire Wheatley, Northumbria Police
Charis Pollard for Helen Steadman, Newcastle Hospitals
Yvonne Probert for Dawn McNally, Age UK North Tyneside

HW2/22 Declarations of Interest and Dispensations

Councillor J Kirwin declared a registerable personal interest in relation to the Integrated Care System as he was employed by Pancreatic Cancer Action, a national cancer charity engaged in lobbying organisations such as the ICS.

Councillor K Clark declared a registerable personal interest in relation to the Joint Health and Wellbeing Strategy as she is an Employee and Director of the Justice Prince Community Interest Company which was concerned with tackling inequalities in health.

HW3/22 Minutes

Resolved that the minutes of the previous meeting held on 4 April 2022 be confirmed and signed by the Chair

HW4/22 North East and North Cumbria Integrated Care System

The Board received a presentation from Dan Jackson, the Director of Governance and Partnerships of the North East and North Cumbria Integrated Care Board (ICB), to provide an update on the introduction of the ICB's operating model. He described the ICB's strategic aims, its key functions and details of its governance arrangements. Particular reference was made to how some functions would be exercised at scale and others at place.

The Board were also presented with details of the whole system Integrated Care Partnership (ICP) which would be built up from four smaller locally sensitive ICPs. The North of Tyne and Gateshead ICP would be co-terminus with four local authorities, Gateshead, Newcastle, Northumberland and North Tyneside and it would be responsible for delivering the ICB's priorities and those agreed by local Health and Wellbeing Boards. Work was underway to transition to, stabilise and evolve place based governance arrangements which would involve a single person accountability for delivery of a shared plan at a local level, agreed by the relevant local authority and ICB and the adoption of 'Place Boards' by Spring 2023. In the meantime, place-based working would continue and the new arrangements would seek to incorporate and not disrupt existing arrangements.

Following the presentation, the Board examined in more detail how the ICB would engage and communicate with service users. It was stated that whilst there would be no immediate significant changes in funding and outsourcing of services, as the organisation matured it may review and adapt its ways of working. The Board indicated that it would monitor the functions to be delegated to the place-based arrangements to ensure that local decision makers had control over a fair share of resources to deliver its priorities in North Tyneside. The Board highlighted the need to develop a broad provider collaboration beyond hospital trusts and including for example residential and home care providers. The ICB's arrangements for engaging with the community and voluntary sector were noted and reference was made to the financial risks facing the ICB related to the increase in costs and social care reform.

The Board recognised the work of the North Tyneside Clinical Commissioning Group over recent turbulent years and thanked its officers for the successful partnership working which had led to several positive inspections. The Board hoped that these positive relationships and arrangements could be maintained in the future to serve the people of North Tyneside in the best possible way.

Resolved that the update on the introduction of the North East and North Cumbria Integrated Care Board's operating model be noted.

HW5/22 Healthwatch North Tyneside

Paul Jones, Director of Healthwatch North Tyneside, presented an update on the activities undertaken over the past six months highlighting the key themes to emerge from this work.

Particular reference was made to the production and distribution of the Living Well North Tyneside booklets to every household in the borough to provide information and advice about local care and health services. The Board were presented with two reports prepared by Healthwatch setting out the feedback received from users of dentistry and pharmacy services. Work had also been undertaken with the North Tyneside Carers Centre to gather feedback from young carers about their experiences over the past 2 years and the key messages were presented to the Board. Healthwatch North Tyneside had published its Annual Report 2021/22 and copies were made available to members of the Board.

Members of the Board examined in more detail the current state of dentistry services in North Tyneside and the pressures caused by a backlog of routine appointments built up during the Covid-19 pandemic and a lack of capacity due to national workforce issues.

It was acknowledged that there was an opportunity for Northumbria Police to work in conjunction with Healthwatch to better understand the patterns and drivers for people experiencing mental health crises, as the Police were often the first responders to such situations.

The Chair welcomed the report and the valuable work of Healthwatch in reflecting the voice of users within the health and social care system. The Board noted the arrangements within Healthwatch to record and monitor the response of service providers to its reports and recommendations. It was suggested that service providers be invited to report to the Board on the action taken to respond to feedback from users.

Resolved that the report from Healthwatch North Tyneside be noted.

HW6/22 First Draft of the Pharmaceutical Needs Assessment 2022-2025

In November 2021 the Board had agreed an implementation plan for reviewing, updating and publishing the Pharmaceutical Needs Assessment (PNA) by the deadline of 1st October 2022. In accordance with this plan the Board were presented with a draft PNA which had been prepared by a steering group made up of representatives of NHS North Tyneside CCG, NHS North of England Commissioning Support, North of Tyne Local Pharmaceutical Committee, Healthwatch North Tyneside and the Council.

An assessment of current pharmaceutical provision in North Tyneside had been undertaken and had concluded that as a whole, there were currently no pharmaceutical needs that cannot be met by existing services. Healthwatch North Tyneside had led a public engagement exercise to gather people's experience of using local community pharmacy services. Overall, the survey results identified that community pharmacies performed well and were delivering to a high standard.

The PNA would now be subject to a statutory consultation period with stakeholders and members of the public between 1 July until 30 August 2022. Consultees would be provided with a link to the draft PNA and a response form including the following questions:

- Do you think the PNA is accurate?

- Do you think there is anything missing from the PNA?
- Do you agree with the conclusions of the PNA?
- Please provide any further comments

Following the consultation, a final draft of the PNA would be prepared taking account of any feedback and presented to the Board in September 2022 prior to publication 30 September 2022.

Resolved that (1) the draft Pharmaceutical Needs Assessment be approved for the purposes of the statutory consultation exercise;
 (2) the proposed statutory consultation process be approved; and
 (3) the final version of the Pharmaceutical Needs Assessment be submitted to the Board at its meeting on 22 September 2022 for approval and publication by 30th September 2022.

HW7/22 Joint Health and Wellbeing Strategy: Implementation and Delivery Progress

In November 2021 the Board had adopted a revised Joint Health & Wellbeing Strategy: Equally Well: A Healthier, Fairer Future for North Tyneside (2021-2025) and subsequently agreed a process of formulating and consulting on an implementation plan to deliver the vision and ambitions of the Health and Wellbeing Board’s Strategy.

Healthwatch North Tyneside had been commissioned to co-ordinate the engagement and consultation through locally based voluntary and community organisations. Healthwatch had intended to have completed the consultation for this meeting but to fully engage local organisations and explain the vision and ambitions of the strategy a longer lead in time was required. Healthwatch had widely promoted and encouraged organisations to get involved with the consultation and they were currently working with 5 local organisations with a further 23 interested in being involved. The revised timescale for the consultation would ensure a wider range of organisations could input their ideas and thoughts into the delivery of the Strategy. In the meantime a wide variety of existing work and activities were continuing to deliver the ambitions contained in the Strategy.

Resolved that (1) a revised timetable for consultation on the implementation plan be approved; and
 (2) lead officers be requested to submit the Joint Health & Wellbeing Strategy implementation plan to the Board in September 2022 for approval, following completion of the engagement and consultation exercise.

HW8/22 National Drugs Strategy: From Harm to Hope

The Government had published its National Drugs Strategy, “From Harm to Hope” on 6 December 2021 and to support this it had later published specific guidance on developing local partnerships released on 15 June 2022. The 3 key strands of the strategy were to break drug supply chains, to deliver a world-class treatment and recovery system and achieve a generational shift in demand for drugs.

Dame Carol Black’s independent review of drugs had set out the importance of developing and improving local collaboration, with joint assessments of local need and planning for delivery. The guidance sets out in more detail the drugs strategy vision for “Combating

Drugs Partnerships” in each locality that span the whole of the strategy; breaking supply, treatment, and recovery, and reducing the demand for drugs.

The guidance set out the National Combating Drugs Outcomes Framework and a framework for Combating Drugs Partnerships with an identified Senior Responsible Owners (SRO) required for each area. The Framework would provide a single mechanism for monitoring progress across central government and in local areas towards delivery of the commitments and ambitions of the drugs strategy to level up the country.

The Board were asked to consider the implications and considerations required to establish a local Combating Drugs Partnership for North Tyneside and to consider the following questions and provide any comments to Behnam Khazaeli in the Council’s Public Health Team:

- What should the local area footprint be? What do we mean by local? Should the partnership be local to North Tyneside or part of a sub-regional footprint?
- Who will be the SRO for North Tyneside (as well as identifying a partnership lead, public involvement lead, and data and digital lead as set out in the guidance)?
- How will the PCC’s office engage across the force area?
- What should be the governance arrangements for the partnership i.e. where will the group report to e.g., Health and Wellbeing Board or the Community Safety Partnership?
- How does the agenda link to the development of the North East and North Cumbria ICS footprints?

The Board recognised that a great deal of work would need to be undertaken in a short period of time in conjunction with the Police and Crime Commissioner, Northumbria Police, the Integrated Care Board and other local authorities to determine local arrangements.

Resolved that (1) the requirements of the guidance on developing local Combating Drugs Partnerships be noted;
(2) Members of the Board be invited to provide any comments on the questions set out above to Behnam Khazaeli in the Council’s Public Health Team by 2 August 2022;
(3) the Council’s officers work with Northumbria Police and other relevant partners to determine local arrangements for a Combating Drugs Partnership for North Tyneside and a further report on these proposals be submitted to a future meeting of the Board.

HW9/22 The Khan Review- Making Smoking Obsolete

In 2019 the Government set an objective for England to be Smokefree by 2030 meaning only 5% of the population would smoke by then. The Khan Review published in June 2022, found that England would miss that target by at least 7 years with the poorest areas not meeting it until 2044. To have any chance of hitting the smokefree target, nationally there needed to be an acceleration in the rate of decline. The review looked at best international evidence and current national policies and concluded that 15 national recommendations were required.

The Khan Review made 15 recommendations which present a wide-ranging approach to delivering smokefree 2030. They were direct asks of Government with regard to funding, legislation and policy:

1. Urgently invest £125 million per year in interventions to reach smokefree 2030
2. Raise the age of sale of tobacco from 18, by one year, every year
3. Substantially raise the cost of tobacco duties (more than 30%) across all tobacco

- products, immediately
4. Introduce a tobacco licence for retailers to limit where tobacco is available
 5. Enhance local illicit tobacco enforcement by investing additional funding of £15 million per year to local trading standards
 6. Reduce the appeal of smoking
 7. Increase smokefree places to de-normalise smoking and protect young people from second-hand smoke
 8. Offer vaping as a substitute for smoking, alongside accurate information on the benefits of switching, including to healthcare professionals
 9. Invest an additional £70 million per year into stop smoking services, ringfenced for this purpose
 10. Invest £15 million per year in a well-designed national mass media campaign, supported by targeted regional media.
 11. The NHS needs to prioritise prevention, with further action to stop people smoking, providing support and treatment across all its services, including primary care
 12. Invest £15 million per year to support pregnant women to quit smoking in all parts of the country
 13. Tackle the issue of smoking and mental health
 14. Invest £8 million to ensure regional and local prioritisation of stop smoking interventions through ICS leadership
 15. Invest £2 million per year in new research and data

The North Tyneside Smokefree Alliance would consider in detail the Khan Review and develop a set of local actions to be delivered. The Khan Review was very clear that if significant change did not occur, harm would continue to disproportionately spread across communities. Locally the Smokefree Alliance would challenge all stakeholders to do more and go further to achieve the Smokefree ambition.

The Board discussed the need for plain English information and advice about the benefits and risks associated with vaping to tackle commonly held misconceptions. It was suggested that local authorities work together to explore the possibility of introducing Bye-laws to prohibit smoking in more public places. Reference was also made to the benefits of sharing data between agencies to identify areas of high harm, including the effects of alcohol and tobacco, and where a holistic approach and targeted interventions could be directed.

Resolved that (1) the recommendations made within the Khan Review be endorsed; (2) the Chair of the Board write to the Government in support of the review's findings and urging the Government to implement its recommendations; and (3) the Board supports local efforts to implement evidence-based recommendations where practical in North Tyneside.