

North Tyneside Health & Wellbeing Board Report Date: 22 September 2022

**Title: Health and Wellbeing
Strategy: Implementation
plan consultation findings
and governance
arrangements**

Report from: North Tyneside Council and North Tyneside Healthwatch

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1. Purpose:

The purpose of the report is to present the findings of the consultation on the implementation plan of the Health and Wellbeing Board's Strategy, Equally Well: A Healthier, Fairer Future for North Tyneside (2021-2025), approve the final implementation plan and agree the governance arrangements for monitoring delivery.

2. Recommendation(s):

The Board is recommended to: -

- a) note the feedback from the findings of North Tyneside's Healthwatch consultation;
- b) approve the final implementation plan based on the findings from the consultation;
- c) endorse the proposed governance arrangements to deliver the implementation plan; and
- d) endorse the proposed mechanism for reporting back progress of delivery against the implementation plan.

3. Policy Framework

The Health and Wellbeing Board has a statutory duty to develop a Health and Wellbeing Strategy (HWBS) under section 116A of the Local Government and Public Involvement Act 2007 which is prepared and published by the Health and Wellbeing Board by virtue of section 196 of the Health and Social Care Act 2012.

The HWBS is North Tyneside's joint high-level plan for reducing health inequalities and improving health and wellbeing for residents.

This item relates to the Joint Health and Wellbeing Strategy 2021-2025, Equally Well: A healthier, fairer future for North Tyneside which was approved by the Board in November 2021 and is available to view by [clicking here](#).

4. Information:

The Health and Wellbeing Board (HWBB) agreed to focus the strategy on the areas that have the biggest impact on people's health and wellbeing:

- The wider determinants of health
- Our health behaviours and lifestyles
- An integrated health and care system
- The places and communities we live in, and with

The draft implementation plan outlined the proposed delivery actions and expected outcomes in Year 1, in addition to presenting the expected longer-term outcomes over the strategy's four-year duration.

As the strategy makes clear attempts to tackle inequalities must be done in collaboration and equal partnership with those affected. The vision and ambitions for the strategy were developed through engagement with a range of partners and, in particular, the Voluntary, Community and Social Enterprise sector (VCSE).

Therefore, it was essential that the draft implementation plan was also agreed by the community. North Tyneside Healthwatch led the process to ensure that extensive consultation with a range of local community groups happened across the Borough, and the findings are outlined in point 4.1.

4.1. Findings from the consultation on the implementation plan

North Tyneside Healthwatch worked on behalf of North Tyneside's Health and Wellbeing Board to gather views from residents and organisations about the implementation plan.

Organisations who wanted to take part in the consultation exercise were able to apply to use small grants of up to £1,000 to support activity to gather feedback and views on the draft implementation plan through consultation events or engagement sessions.

30 organisations/groups participated in the consultation, directly involving over 100 staff, volunteers, and trustees. Over 450 people have been consulted from a broad range of age groups and from all areas of the Borough.

The overall findings of the consultation were broadly positive, with consultees agreeing with the approach of the strategy, particularly the need to look at the wider determinants of health to reduce health inequalities.

Many of the engagement sessions covered one of the 7 specific impact areas within the strategy, highlighted below:

- 1. Give every child the best start in life**
- 2. Enable all children, young people, and adults to maximise their capabilities and have control over their lives**
- 3. Create fair employment and good work for all**
- 4. Ensure a healthy standard of living for all**
- 5. The places and communities we live in and with**
- 6. Our lifestyles and health behaviours**
- 7. An integrated health and care system**

Detailed feedback from the consultation will be provided to the relevant lead partnership groups (see point 4.2) relating to each impact area so that each partnership can look more closely at the specific views gathered, issues raised and consider how the delivery of interventions or support could be improved.

The draft implementation plan has been updated after considering the consultation findings (Appendix 1). The consultation findings strengthened some of the existing actions and identified some additional issues that were missing:

- The cost-of-living crisis is a key challenge that is facing communities and potentially could widen health inequalities. The strategy and implementation plan were drafted before the stark impact of the cost-of-living crisis was fully understood but will affect delivery of ambitions of the strategy. There was also a wide acknowledgement that the cost-of-living crisis does not only affect the most vulnerable residents but many people who are sometimes referred to as 'just about managing' and also local businesses.
- Ensuring that the skills, knowledge, resources, and networks of the VSCE are maximised across all the impact areas and delivery solutions outlined in the implementation plan are truly co-produced.
- There are workforce challenges across the system e.g., recruitment, retention, and retirement which needs to be more explicit the implementation plan.
- Infrastructure challenges and cost around local transport options were highlighted through the consultation which impact on various areas, including being able to get to work or attend appointments.
- There was broad agreement that digital inclusion is an important approach to ensure that residents have the skills and confidence to be online and access information and services. However, some respondents were anxious that too many services are moving online and they would prefer face to face services.

Healthwatch will present further detail about the consultation findings at the Health and Wellbeing Board meeting.

4.2. *Governance arrangements on the delivery of the implementation plan*

As detailed in the strategy, Health and Wellbeing Board members have collective and individual responsibility to ensure that the vision, ambition, and priorities are reflected across the business of their own organisations to support delivery of the implementation plan.

The proposed governance structure outlined in Table 1 will give the Health and Wellbeing Board assurance that each key impact area is being considered by a multi-agency partnership.

The Health and Wellbeing Board Chair will write to the Chairs of the respective partnerships to agree the governance and reporting mechanisms. Each partnership will have responsibility for delivering the actions, monitoring progress, and reporting back on the implementation plan to the Health and Wellbeing Board (4.3). They will also be responsible for drafting the implementation plan for delivering the Year 2 actions.

Table 1: Governance Structure

Governance structure as agreed by the LA, ICB and Trust leads for the key priorities within the health and wellbeing strategy						
Best start in life	Maximising capabilities of children, young people and adults	Fair Employment and good work for all	Ensuring a healthy standard of living for all	The places and communities we live in and with	Our lifestyles and healthy behaviours	An integrated health and care system
Leads: Wendy Burke, Janet Arris, Jill Harland	Leads: DCS TBC Janet Arris/Anne Foreman Ruth Auten	Leads: John Sparkes Gary Charlton Ruth Auten/Kate Thomson	Leads: Jacqueline Laughton, Gary Charlton, Jill Harland	Leads: Sam Dand Gary Charlton Jill Harland	Leads: Wendy Burke Gary Charlton Jill Harland	Leads: TBC (ASC) Anya Paradis Ross Wigham TBC
Children and Young People's Partnership	Children and Young People's Partnership	Employability Strategy Group	Poverty Partnership	Safer North Tyneside Partnership Wallsend and North Shields Masterplan Climate Change Partnership Culture Partnership	Tobacco Alliance Healthy Weight Alliance Drugs Alliance Alcohol Partnership	NENC Integrated Care Board Place Based arrangement for North Tyneside (details are yet TBC)

4.3. Monitor progress of delivery of the implementation plan

Key indicators have been selected to measure progress and a dashboard will be developed to monitor progress.

However, it is acknowledged that tackling health inequalities requires a long-term commitment and solely relying on changes in data such as life expectancy will take longer than the life of this strategy.

It is proposed that progress on each of 7 key impact areas be provided to the Health and Wellbeing Board at regular intervals plus an overall annual progress report and a refresh of the implementation plan. A proposed forward plan is outlined in table 2 below. The partnership Chairs responsible for each impact area will coordinate the compilation of the report.

This reporting will supplement the dashboard with localised knowledge, service data and case studies. This will help the Health and Wellbeing Board to understand in the short to medium time the impact of the interventions in the implementation plan.

Table 2: Proposed Forward Plan for Health and Wellbeing Board

Health and Wellbeing Board	Item 1 Progress Update	Item 2 Progress Update
10 November 2022	Best Start in Life	Ensuring a healthy standard of living for all
12 January 2023	Maximising Capabilities of Children, Young People and Adults	The places and communities we live in and with
9 March 2023	Fair Employment and good work for all	Our Lifestyles and Health Behaviours
TBC June 2023	An integrated health and care system	Annual Progress Report and refreshing Implementation plan in Year 2

5. Decision options:

The Board is recommended to: -

- a) note the feedback from the findings of North Tyneside’s Healthwatch consultation;
- b) approve the final implementation plan based on the findings from the consultation;
- c) endorse the proposed governance arrangements to deliver the implementation plan; and
- d) endorse the proposed mechanism for reporting back progress of delivery against the implementation plan.

6. Reasons for recommended option:

Both the strategy and the implementation plan have been out to consultation and existing partnerships are in place to take forward delivery of the vision and ambitions of Equally Well.

7. Appendices:

Appendix 1. Final Implementation Plan and indicators

8. Contact officers:

Rachel Nicholson, Senior Public Health Manager, North Tyneside Council (0191) 643 8073

9. Background information:

The following background documents have been used in the compilation of this report

[Equally Well : A Healthier, Fairer Future for North Tyneside \(2021-2024\)](#)

COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

10 Finance and other resources

Any financial implications arising from the delivery of the implementation plan to delivery Equally Well, North Tyneside's Health and Well Being Strategy will be met from existing budgets.

11 Legal

The Authority is required to prepare a joint Health and Wellbeing Strategy for the Borough through the Health and Wellbeing Board, under section 116A of the Local Government and Public Involvement in Health Act 2007.

Delivering the Joint Health and Wellbeing Strategy supports the Board's duty under Section 195 of the Health and Social Care Act 2012 to encourage partners to work closely together and in an integrated manner for the purpose of advancing the health and wellbeing of the people in the area.

12 Consultation/community engagement

Community engagement on the implementation plan was undertaken during July and August 2022 and led by Healthwatch. 30 organisations/groups participated, directly involving over 100 staff, volunteers, and trustees. Over 450 people have been consulted from a broad range of age groups and from all areas of the Borough.

13 Human rights

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

14 Equalities and diversity

In undertaking the development of the Joint Health and Well Being Strategy and implementation plan, the aim has been to secure compliance with responsibilities under the Equality Act 2010 and the Public Sector Equality Duty under that Act.

An Equality Impact Assessment was carried out on the engagement approach. The aim was to remove or minimise any disadvantage for people wishing to take part in the engagement activity. Direct contact was made with specific groups representing people with protected characteristics under the Equality Act 2010 to encourage participation and provide engagement in a manner that will meet their needs

15 Risk management

Relevant risks have been identified regarding this report, they are currently held on the Authority's corporate, strategic risk registers, they are being reviewed and managed as part of the Authority's normal risk management process.

16 Crime and disorder

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

SIGN OFF

Chair/Deputy Chair of the Board

X

Director of Public Health

X

Director of Children and Adult Services

X

Director of Healthwatch North Tyneside

X

ICB Director

X

Monitoring Officer

X