

(Note: These minutes are subject to confirmation at the next meeting of the Board scheduled to be held on 8 November 2018.)

## **Health and Wellbeing Board**

**13 September 2018**

Present: Councillor M Hall (Chair)  
Councillors G Bell, K Clark, M A Green and T Mulvenna  
W Burke, North Tyneside Council  
A Paradis, North Tyneside Clinical Commissioning Group  
R Scott, North Tyneside Clinical Commissioning Group  
I Kitt, Healthwatch North Tyneside  
C Riley, Northumbria Healthcare NHS Trust  
N Bruce, Newcastle Hospitals NHS Trust  
A Marshall, Northumberland, Tyne & Wear NHS Trust  
P Iverson, Tyne & Wear Fire & Rescue Service  
R Burrows, Safeguarding Children Board  
C Hearne, Community and Voluntary Sector

### Also Present

H Hudson, S Woodhouse and M Robson, North Tyneside Council  
J Mackey and J Stonebridge, Northumbria Healthcare NHS Trust

### **HW16/09/18 Apologies**

Apologies for absence were received from L Young-Murphy (North Tyneside Clinical Commissioning Group), P Jones (Healthwatch North Tyneside), K Kale (Northumberland, Tyne & Wear NHS Trust), L Robson (Newcastle Hospitals NHS Trust) and J Pratt (Tyne and Wear Fire and Rescue).

### **HW17/09/18 Substitute Members**

Pursuant to the Council's Constitution, the appointment of the following substitute members was reported:

A Paradis for L Young-Murphy (North Tyneside CCG)  
N Bruce for L Robson (Newcastle Hospitals NHS Trust)  
A Marshall for K Kale (Northumberland, Tyne & Wear NHS Trust)  
P Iverson for J Pratt (Tyne and Wear Fire and Rescue)

### **HW18/09/18 Declarations of Interest and Dispensations**

There were no Declarations of Interest or Dispensations reported.

### **HW19/09/18 Minutes**

**Resolved** that the minutes of the meeting held on 22 August 2018 be confirmed and signed by the Chair.

## **HW20/09/18 Northumbria Healthcare NHS Foundation Trust**

Jim Mackey, Chief Executive of Northumbria Healthcare NHS Foundation Trust, attended the meeting to present details of the Trust's Five Year Strategy and its Prevention and Population Strategy.

He began by outlining a range of key issues faced by the Trust over the past 6-9 months including strong performance, but not as good as it had been used to, making sense of national and regional policy and a need to return to the Trust's plans. In the light of these issues the Trust had refreshed its strategy with a focus on patients and staff, out of hospital care, an ambition to be the best at everything it did, the need to spend money wisely, a commitment to be a good partner/corporate citizen, to be innovative, to be engaging and willing to listen and to influence national and regional policy.

Reference was made to the need to reset the operation of the Northumbria Specialist Emergency Care Hospital so that it returned to its function of treating the most seriously ill patients and working within its capacity. The establishment of the emergency care hospital had been the first step of a ten stage process involving the development of new community and preventative services. There were no plans to close North Tyneside General Hospital. It was envisaged that the site would become a community facility hosting services such as primary care and community pharmacies.

Mr Mackey commented on national and regional policy, including the merits of the commissioner provider split, accountable care organisations, the Sustainability and Transformation Plan and an Integrated Care System. Whilst the Trust would monitor and influence wider policy developments it was focussed on local place based delivery of services within the freedoms and resources available to it. Where there were opportunities to work with others on a larger scale the Trust would do so.

During questioning the Board examined in more detail how accessibility to services could be improved, the communications strategy in relation to emergency and urgent care services and how greater integration of health and social care would be required to help address financial pressures and workforce shortages. The Board welcomed the Trust's approach in shifting emphasis from acute hospital based services to developing more community based preventative services.

The Chair thanked Jim Mackey for his informative presentation and answering Board member's questions.

## **HW21/09/18 Strategic Objective No.7, Comprehensive Support for People with Dementia**

The Board received a report on the current provision of support for people with Dementia in North Tyneside and how delivery of the Board's Strategic Objective No. 7, "Comprehensive support for people with dementia", might be taken forward. The strategic objective sought to increase co-ordination of support for pre and post diagnosis for those living with Dementia and to identify and implement a fully integrated Dementia Support Pathway.

It was reported that there was currently no fully integrated Dementia pathway or a comprehensive post-diagnosis support service available in North Tyneside. There were a number of support arrangements that had been developed and details of these services were presented to the Board including those provided by Age UK North

Tyneside in partnership with Dementia UK, who had secured three year funding to provide an Admiral Nurse Service, and the North Tyneside Carers' Centre.

In June 2018 the Health and Wellbeing Board agreed to the establishment of new reporting and governance arrangements around mental health and wellbeing. It had been agreed that there would be three boards responsible for a) children and young people, b) adult mental health and c) older people. Originally the Board's work plan indicated that the Older People's Mental Health Integration Board would be responsible for delivering the strategic objective in relation to Dementia. It was proposed that this responsibility should transfer to the Mental Wellbeing in Later Life Board because this Board was already responsible for the complementary strategic objective (no.4) relating to mental health and emotional resilience and delivery of the Mental Health in Later Life Strategy which included provision for Dementia services. It was also proposed that the three boards would come together once per year to prepare a single progress report to the Board in relation to delivery of the strategic objectives.

The Board sought assurance that the key steps necessary to achieve the strategic objective were being progressed. It was stated that the report to the Board provided a baseline statement from which gaps in provision could be identified and an action plan prepared. It was suggested that once the action plan had been formulated it should be presented to the Board to provide assurance that progress was being made.

**Resolved** that (1) the current provision of support for people with dementia in North Tyneside and possible gaps be noted;  
(2) the Mental Wellbeing in Later Life Partnership Board be responsible for delivery of Strategic Objective No. 7 to coordinate the development of a comprehensive, integrated dementia pathway of support for people pre and post dementia diagnosis and their carers be agreed; and  
(3) the Board receive a further progress report in relation to delivery of Strategic Objective No. 7 once an action plan for its delivery has been prepared.

### **HW22/09/18 Appointment of Member to the Board**

The Board gave consideration to a proposal that a representative of YMCA North Tyneside be appointed to the Board. This would enhance the contribution made by the voluntary and community sector concerned with children and young people to the work of the Board. Based in Church Way, North Shields, YMCA North Tyneside provided a range of services and activities aimed at enabling people to develop their full potential in mind, body and spirit. Dean Titterton, Chief Executive of YMCA North Tyneside, had indicated that the YMCA would be willing to appoint a representative to serve on the Board.

**Resolved** that a representative of YMCA North Tyneside be appointed to the Board.