DURHAM COUNTY COUNCIL

At a Meeting of **Health and Wellbeing Board** held in **Committee Room 2**, **County Hall, Durham** on **Wednesday 20 November 2024** at **9.30 am**

Present:

M Laing, Vice-Chair in the Chair

Members of the Committee:

Councillor T Henderson and N Appleby, K Burrows, S Burns, Dr J Carlton, K Carruthers, Prof. C Clarke, C Cunnington-Shore, A Healy, Chief Superintendent I Leech, A Smith, M Stenton and P Sutton

1 Apologies for Absence

Apologies for absence were received from Councillors C Hood and R Bell, and Chief Constable R Bacon, L Buckley, D Dwarakanath, M Graham, S Jacques, F Jassat, J Pearce, A Petty and J Todd.

2 Substitute Members

There were the following Substitute Members: Superintendent I Leech for Chief Constable R Bacon; S Burns for L Buckley; A Smith for M Graham; M Stenton for J Pearce; and N Appleby for A Petty.

3 Declarations of Interest

There were no Declarations of Interest.

4 Minutes

The minutes of the meeting held 24 September 2024 were agreed as a correct record and signed by the Vice-Chair.

5 Election of Vice-Chair

The Vice-Chair in the Chair, M Laing reminded the Board as regards previous discussions in respect of the position Vice-Chair.

He noted that it was proposed, in the absence of the Chair, that the new Vice-Chair would take up the position from the next meeting of the Board in January 2025.

Moved by A Healy, Seconded by Prof C Clarke and

Resolved:

That Dr J Carlton be appointed Vice-Chair of the Health and Wellbeing Board from the January 2025 meeting.

6 Inclusive Economic Strategy Delivery Update

The Board received an update report from the Head of Economic Development, presented by the Regeneration Policy Team Leader, G Martin on the Inclusive Economic Strategy (IES) Deliver Plan (for copy see file of minutes).

The Regeneration Policy Team Leader reminded the Board of the impact and challenge post-COVID 19 in terms of the economy, as well as the long-term challenges the County had faced for decades. He noted that it was important to have a robust evidence base, in order to look to address those challenges, and explained the IES was developed between the Economic Partnership and Durham County Council (DCC). He reminded the Board of the longstanding partnership arrangements that were place, emphasising that the economy was an area that required such a partnership approach. The Regeneration Policy Team Leader noted the IES was adopted in 2023, with a delivery plan based upon the four "Ps", People; Productivity; Places; and Promotion (of the County). The Regeneration Policy Team Leader noted that throughout all of those was 'planet theme', looking at reducing carbon emissions, helping to improve the environment and in turn people's wellbeing.

In respect of 'People', the Regeneration Policy Team Leader explained as regards the Council's allocation of around £30million from the UK Shared Prosperity Fund (SPF), with the strand relating to 'People and Skills' representing around £10million. He added that funding allowed the continuation of DurhamWorks, previously EU funded, as well as DurhamLearn, with an additional fund of around £2.8million from Government in respect of 'Multiply' an adult numeracy programme. He noted there was also communication plans in respect of literacy in addition, as well as work via DurhamEnable helping to support disabled people to gain the skills and confidence to succeed in long term employment, and beyond. The Regeneration Policy Team Leader noted that UKSPF funds were received in three-year allocations, with the current allocation being up to March 2025.

He explained that DurhamWorks had currently reached 98 percent of target currently, with DurhamEnable being at 84 percent of target, with there being independent evaluation of each programme.

The Regeneration Policy Team Leader noted there had been some lag in terms of UKSPF guidance from the previous Government, however, following devolution and the establishment of a new North East Combined Authority (NECA) and a new Government elected in May 2024, the new Government was yet to set out its preferred approach to regional devolution and funding. He added that the total national allocation for the UKSPF was £0.9billion, down from the previous allocation of £1.5billion, and therefore it would be important to lobby as regards ensuring allocations were based upon need.

The Regeneration Policy Team Leader noted the importance of engaging with business to help offer 'good jobs', and a living wage, noting the increase in national minimum wage introduced. He noted there were cost of living challenges in addition, with some additional support having been put in place. He explained as regards the work via the Economic Partnership to help bring in more external partners and noted that IES Delivery Plan would be reviewed in 2025, after the Local Government elections and Government's Spring Spending Review, with hopefully clarity at that time as regards funding, the NECA. He added that the IES Annual Report 2024 report would go to Cabinet in January 2025, setting out performance relating to around 150 actions, with many actions being completed or on-track, with the main risk being that of future funding. The Regeneration Policy Team Leader noted that one of the big challenges was that of economic inactivity, especially those long-term sick, with around 28,000 in County Durham, and there needed to be as much support as possible. He explained that inflation increasing would impact further on the cost of living and there were a great many people within the County with caring responsibility in addition. He concluded by noting that it was not a 'one size fits all' approach to support and that funding was critical.

The Chair thanked the Regeneration Policy Team Leader and noted that at a regional meeting with Directors of Adult and Health Services, it had been noted that '10,000 good jobs' would be helpful as people were generally healthier if they prospered. The Regeneration Policy Team Leader noted that the review in 2025 would look at where jobs were created, looking at each parliamentary constituency. He noted that may highlight issues, for example there being more jobs in Durham City and East Durham. He noted that issues such as employment land and inward investment would be important.

The Director of Public Health, A Healy noted there was a lot of individual activities in the space and asked if they could be joined up to be more effective.

The Regeneration Policy Team Leader noted that he would always wish for more activities, including working with the voluntary and community sector (VCS). He noted that discussions at the regional level as regards at what level activities should be, and how to involve the VCS.

K Burrows supported the comments from the Regeneration Policy Team Leader, noting she was a member of the Economic Partnership. She noted there had been a lot of hard work, adding that it was not just the VCS that could help. She noted that small and medium-sized enterprises (SMEs) made up the majority of businesses in the county, alongside a few large anchor employers. She noted that adding health and wellbeing as a priority within social investment could help, aligning the shared priorities with the Environment and Economic Partnerships, and the Health and Wellbeing Board could help get the best 'bang for buck'. She added it was important to record what was happening on the ground, not just new schemes, and remember that most VCS were in fact SMEs. She added that upfront grants for 2-3 years work best, and that reiterated that SMEs made a significant contribution in terms of health and wellbeing.

P Sutton asked as regards metrics for the schemes up to 2035 and asked how we measured 'more and better jobs', with examples of say top three metrics. The Regeneration Policy Team Leader noted the vision was for 'more and better jobs' and this included 'green growth'. He added that there were targets within each industry area, with targets aimed at closing the gap of County Durham performance against England averages. He added that these were monitored over time, adding that employment data varied as the Office for National Statistics (ONS) statistics looked at a smaller set of measures. He noted that Gross Valued Added (GVA) measured productivity, and this had increased post COVID. He noted that the review of the economic base would be considered by Cabinet and the Economic Partnership in January 2025.

Dr J Carlton noted the review in 2025, and objectives linked to health and wellbeing, and asked how the board could engage in that process. The Regeneration Policy Team Leader noted this was planned to be as soon as possible, over summer time 2025, to be concluded and in place by March/April 2026. He added that he would come back with more details in late spring / early summer 2025 with more details. Dr J Carlton noted the need therefore for more health-related metrics within the actual strategy.

Resolved:

That the Health and Wellbeing Board:

(a) Note the progress of delivering the Inclusive Economic Strategy.

- (b) Note the improvements in economic performance but ongoing challenges with long-term health problems that prevent people from working.
- (c) Note the challenges relating to funding and the continuation of activities.

7 Winter Planning Assurance

The Chair gave an update presentation on winter planning arrangements and preparedness (for copy see file of minutes).

The Board noted as plans in place, including a multi-agency winter planning group, with meetings held fortnightly throughout the season. The Chair noted that demand was unpredictable, however, they had seen a 30 percent increase in demand since February 2024 at the University Hospital of North Durham (UHND). He explained as regard the two main strands, Cold Weather Plans and Surge Plans. He noted Cold Weather Plans included practical measures such as gritting, and Surge Plans included looking to manage as many people at home as possible. He noted the structures in place, and regular meetings taking place during the period.

The Chair explained as regards the work of partners and key actions undertaken by each, including GPs providing additional support as Accident and Emergency number increase. He noted that social care was an important area, as well as preparedness by Public Health in looking at infections / outbreak control. He added that partner organisations had been tested with Storm Arwen, and there had been some assurance from that response that training and preparations had worked very well. He explained the work with the Police and Fire and Rescue Service, as well as smaller VCS organisations, in providing support, such as 'welcome spaces' and linking with social housing to help those at risk of homelessness.

The Chair noted another important aspect was communication, with a lot of messaging via social media, to help the public be aware and prepare for bad weather conditions as an example. He referred the Board to a list of example interventions, highlighting welfare checks carried out by the Fire and Rescue Service and vaccination programmes.

The Head of Early Help, Inclusion and Vulnerable Children, M Stenton noted that it had been three years since Storm Arwen and noted the work of all partners in coming together to respond.

Resolved:

That the presentation be noted.

8 Director of Public Health Annual Report 2024, including the Joint Strategic Needs and Assets Assessment

The Board received an update presentation from the Director of Public Health, A Healy and the Research and Public Health Intelligence Manager, M Flemming on the Director of Public Health Annual Report 2024 (for copy see file of minutes).

The Director of Public Health reminded the Board that the production and publication of an Annual Report was a requirement for Councils and it was over 10 years since Public Health became part of Local Authorities. It was explained that the Report linked to the Joint Local Health and Wellbeing Strategy (JLHWS) with the influences on health and wellbeing, health and social care, healthy behaviours and the wider determinants of health. She added that one aspect was looking ahead at unfair impacts and how they could be avoided.

The Research and Public Health Intelligence Manager noted national primary and secondary care data and that there had been a number of conversations on how to embed looking at the data and knowledge to project in terms of issues within County Durham. He noted the issue of deprivation, impacting within the county, with 86,000, one in five, projected to have a major illness by 2040. He referred to life expectancy graphs, noting the gap for County Durham with the England average, and while life expectancies were increasing, the gap was not shrinking. He noted several other graphs highlighting health inequalities, including cancer, anxiety and depression.

The Director of Public Health referred to work being carried out, including supporting carers, encouraging healthy behaviours such as smoking cessation, healthy weight, tackling anxiety/depression, alcohol consumption, as well as wider determinants of health. She noted the Better Health and Work Award and concluded by noting local ambitions to tackle unfair differences and what mitigating actions that can be put in place to tackle those differences, working together with our communities.

P Sutton noted the conversations of providers and commissioners of services, and the pursuit of efficiencies, noting the example of 'do not attends' with a 'one-strike' and out. He added that those people were the people that we wished to engage with and asked how that was addresses when looking at contracts with providers, in terms of what is best to address need.

The Director of Public Health noted that it was recognised that was an important area, including health literacy, so that individuals understand the importance of their health. She added it was a complex issue and she noted that there were health and wellbeing aspects written into contracts, including in terms of issues such as mental health. P Sutton noted that was a good start, however, there was a journey in being able towards embedding in all provision. The Director of Public Health noted that there were always issues in terms of efficiencies and need, and agreed it was important to look to get that right in contracts. The Director of Delivery, S Burns noted she hoped that commissioning had changed and looked a need more. She added that those who needed help was often different to those that presented, looking at Accident and Emergency attendances and the distances travelled by people, noting there was still some challenges in terms of commissioning.

Dr J Carlton noted that the Joint Strategic Needs and Assets Assessment (JSNAA) group projections were based on the current status projected through to 2040. He added that with interventions, it was hoped that those impacts could be reduced. He noted that there were a complex number of influences on an individuals' health, with the challenge being for the right policy and investment to help. He noted the report identified a number of variables linked to economic and social status and that these were important areas for the Health and Wellbeing Board to monitor closely. He added that he felt the question was how we could invest in terms of the most impact, and to look to help the most vulnerable within our population. The Research and Public Health Intelligence Manager agreed and noted update in the evidence base would be important, as it underpins actions taken. The Chair noted that the data was alarming and that it should be a call to action in terms of feeding into NHS and Government plans. The Director of Delivery noted a whole system approach, NHS, employment, social care and that the impacts rippled out across our communities. The Chair noted that there were also impacts upon on the demands of the Police and Fire and Rescue Service, with their work in relation to protecting vulnerable people. The Director of Public Health noted that partners and the Board would need to look to take onboard the issues accordingly.

Resolved:

That the Director of Public Health Annual Report 2024 be noted.

9 Inspection Updates:

a Area SEND Inspection of County Durham's Local Area Partnership

The Head of Early Help, Inclusion and Vulnerable Children noted the inspection of the wider SEND system, including the County Council and NHS. He noted that prior to the inspection, there had been work to ensure an up-to-date self-evaluation, to inform new action plans.

He explained the eight key findings of the review, those being:

- Collaborative leadership is strong. Partnership leaders prioritise SEND.
- Children and young people feel valued, visible, included in their communities and listened to.
- Children and young people build transferable skills so that they can participate in wider activities.
- There is improvement in the length of time taken to complete new assessments, the result of the Local Area Partnership recovery plan.
- Most Children and young people have their needs identified and met early.
- Children and young people with SEND have good attendance and this is improving further.
- Persistent absence from school is reducing, preparing young people well in education, training and employment.
- Parents and carers state that their voice is mostly heard well, some have seen improvements to support and services as a result.

He noted four areas for further improvement: improving the quality of Education, Health and Care Plans; further reduced delays in access to CAMHS; provide access to easily identifiable needs-led services; and to monitor the impact of strategic plans to ensure resources were consistently target where needed.

The Head of Early Help, Inclusion and Vulnerable Children noted key milestones through 2025 and 2026, and noted further information was set out on the Local Area Partnership webpage. The Director of Delivery noted that there was very good partnership working in County Durham, and that all agencies help to respond, an area the inspection team had stated as being very good.

Resolved:

That the report and presentation be noted.

b Adult Social Care Update on the outcome of the Local Authority Assessment by the CQC under the Health and Care Act (2022)

The Chair noted that the report and presentation set out the outcome of the Care Quality Commission's (CQC) assessment of the Council's discharge of its adult social care duties under the Care Act 2014. He explained that the CQC had been on site in June 2024, producing their report in August 2024. He explained that the overall rating was 'good', with strengths identified including: partnerships and boards; mental health; carers; commissioning; and leadership. He added some weaknesses identified included: equality of access and outcomes; assessments; involvement in co-production.

The Chair noted that the final report had been considered by the Council's Cabinet on 16 October 2024, where a service improvement plan had been agreed, and he thanked the previous Corporate Director of Adult and Health Services, Jane Robinson for all her hard work in this regard.

Resolved:

That the report and presentation be noted.

10 Key Campaigns

The Board noted a presentation from the Director of Public Health on the following public health campaigns (for copy of presentation see file of minutes). The Board noted that questions could be directed to the Director of Public Health should any members require additional information on the key campaigns.

Resolved:

That the information contained within the presentation be noted.

11 Better Care Fund: Quarter 2 2024/25 Return

The Board noted the Better Care Fund, Quarter 2 Submission, noting strong work in terms of integration in County Durham, with overall positive metrics. It was noted that the Quarter 2 Reporting Template was approved under delegated authority to meet the submission date of the 31 October 2024 required by NHS England

Resolved:

- That the contents of this report, and the Quarter 2 BCF submission, which was submitted to NHS England on 31 October 2024 (Appendix 2) be noted;
- (iii) That Better Care Fund performance updates at Health and Wellbeing Board be received at future meetings for information.

12 Tobacco and Vapes Bill

The Director of Public Health noted the strong support of the Health and Wellbeing Board of the Tobacco and Vapes Bill, which had not been able to get through Parliament prior to the general election. She noted that the new Government had extended some elements, to include consultation on outside spaces of schools, playgrounds and hospitals. She reminded the Board of aim for a 'smoke-free generation' and controls in terms of the sale of vapes and reducing the attractiveness of those products. She added the first reading had been on 5 November, with the second reading being 26 November. She concluded by noting that she had met with Local MPs, who were very supportive of the Bill, and there was the continued work of Fresh, co-funded by the ICB and Local Authorities in the region.

The Chair noted that it was a 'once in a generation' legislation that would no doubt have a positive impact on the health and life expectancy of those people born now. The Director of Public Health noted the Bill would likely receive Royal Assent next year, then there would be a period in terms of implementation.

Resolved:

That the verbal update be noted.

13 Joint Development Session - Spring 2025

The Partnerships Team Manager, J Bradbrook noted that a group had been established to review mental health governance arrangements, and that this would feed into the Health and Wellbeing Development session scheduled for February 2025. She reminded the Board of a joint development session to be held with Environment and Climate Change Partnership in Spring 2025, with details to be circulated in due course.