

# SUNDERLAND HEALTH AND WELLBEING BOARD

Thursday 28 September 2023

Meeting held in Council Chamber, City Hall

## MINUTES

Present: -

Councillor Kelly Chequer (in the Chair)	-	Sunderland City Council
Councillor Linda Williams	-	Sunderland City Council
Councillor Fiona Miller	-	Sunderland City Council
Yitka Graham	-	University of Sunderland
Graham King	-	Director of Adult Services, Sunderland City Council
Dr Tracey Lucas	-	North East and North Cumbria ICB
Chief Superintendent Mark Hall	-	Northumbria Police
Gerry Taylor	-	Executive Director of Health, Housing and Communities, Sunderland City Council
Scott Watson	-	North East and North Cumbria ICB
Paul Weddle	-	Healthwatch Sunderland
<b>In Attendance:</b>		
Karen Davison	-	Director of Early Help, Together for Children
Lisa Jones	-	Assistant Director of Integrated Commissioning, Sunderland City Council
Philip Foster	-	Managing Director, All Together Better
Sheila Rundle	-	Public Health Intelligence Analyst, Sunderland City Council
Lorraine Hughes	-	Public Health Consultant, Sunderland City Council
Emma Anderson	-	Head of Therapies, Sunderland City Council
Pradeep Chockalingam	-	Falls Coordinator, Sunderland City Council
Jane Hibberd	-	Senior Manager – Policy, Sunderland City Council
Nic Marko	-	Local Democracy Reporting Service
Liz Highmore	-	Member of the Public
Gillian Kelly	-	Democratic Services, Sunderland City Council

### **HW13. Welcome**

Councillor Chequer welcomed everyone to the meeting and thanked them for their attendance.

### **HW14. Apologies**

Apologies for absence were received from Councillor Bond, Andy Airey, Ken Bremner, Jill Colbert, Lucy Caplan, Robin Hudson and Patrick Melia.

### **HW15. Declarations of Interest**

Paul Weddle declared an interest as a member of the Board of the Local Medical Committee.

### **HW16. Minutes and Matters Arising**

The minutes of the meeting of the Health and Wellbeing Board held on 22 June 2023 were agreed as a correct record.

Jane Hibberd confirmed that all actions on the log had been completed apart from one which had been rescheduled.

### **HW17. Sunderland Joint Strategic Needs Assessment**

The Executive Director of Health, Housing and Communities submitted a report presenting the draft Sunderland Joint Strategic Needs Assessment (JSNA) to the Health and Wellbeing Board.

Sheila Rundle was in attendance to talk to the report and in doing so, reminded the Health and Wellbeing Board that the development of the JSNA was a statutory requirement and was the process by which the Council and the North East and North Cumbria ICB identified the health and wellbeing needs of the wider population. The draft JSNA for 2023/2024 included consideration of the social determinants of health, deprivation, health risks, disease and disability, major causes of mortality and the impact on life expectancy.

The key health challenges identified through the JSNA included: -

- Poverty levels within the city continue to have an impact.
- Children and young people in the city face significant challenges and inequalities across the social gradient of health.
- Smoking, diet, alcohol, substance misuse and physical inactivity lead to poor health outcomes for the city
- Poor mental wellbeing and this also impacts on physical health.
- More people in the city are living with, and prematurely dying from, serious diseases than elsewhere in the country.

- The ageing population in the city has a significant effect on local services.
- Sunderland has higher levels of health risk than England as a whole. This is directly linked to a range of social, economic, commercial and environmental factors.
- Inequalities in the city have a significant impact on health.
- Covid-19 has directly and indirectly impacted on life expectancy and is expected to have a significant impact on premature mortality.
- The cost-of-living crisis is hitting the poorest residents most significantly.
- Responding to health protection (infectious diseases) threats requires prevention work, rapid identification and a swift response to complex cases in high-risk places, locations and communities.
- The wider impacts of climate change and levels of carbon in our atmosphere impact significantly on the local environment and on mental and physical health

The overarching JSNA would be finalised following feedback from Board members and would be published on the Council website and circulated to key partners. The Chair invited comments from the Board.

Councillor Miller commented that in relation to inequalities, studies had shown the cumulative impact arising from this situation. She was concerned about drugs issues and how this was leading to an increase in theft in some areas of the city and how this could be dealt with.

Chief Superintendent Hall welcomed the report from a policing point of view and said that issues around mental health, drugs and alcohol all played into the work of the Police. He was keen to be involved in the next steps and acknowledged that some of the matters highlighted could paint a bleak picture.

He went on to say that he would ensure that his teams were involved in the high harm areas, noting that drugs is a significant concern and the Chief Constable has invested in neighbourhood policing to put local Police on the front foot. It was very important for intelligence to keep coming through to build cases for warrants and other action.

Councillor Miller agreed that action had to happen, there were county lines gangs operating in her area and complex needs and mental health issues that had to be addressed.

Dr Lucas referred to opportunities which were provided for young people in the city and how these could prevent offending behaviour; this could be linked to social prescribing and would involve partners looking at how they could work better together.

Councillor Miller made reference to a recent conference which had detailed different styles of youth work which, although expensive, had been employed in the Gateshead area with excellent results. Graham King noted that the voluntary and community sector element of this work should be passed to colleagues in bodies such as the Community Safety Partnership, LMAPs etc to consider where this might be taken as a system.

Graham also went on to consider what the JSNA might look like in ten years' time, given the movement in the city, and how this could be measured. Sheila Rundle advised that the JSNA Performance Indicator framework was governed by the Healthy City Plan and it was hoped that the work being undertaken would inform that Plan and align the direction of travel.

Gerry Taylor highlighted that the process for the JSNA had been developed so that it was comprised of live, easy to use documents and feedback would be welcomed on this. The JSNA did reflect that some aims may not be achievable in the current economic climate.

Having considered the report, it was: -

RESOLVED that: -

- (i) the findings of the draft Sunderland JSNA be noted;
- (ii) the Executive Director of Health, Housing and Communities be delegated to finalise the JSNA;
- (iii) it be considered whether there were any specific additional topics which needed to be included in this iteration of the JSNA, or any topics for development over the next year;
- (iv) these findings be taken into account when considering the commissioning plans of all partners;
- (v) these findings be taken into account when developing plans for the Delivery Boards and workstreams identified as priorities by the Board; and
- (vi) the continual refresh of the JSNA to ensure emerging needs and challenges are widely understood across the city be supported.

#### **HW18. Annual Report of the Director of Public Health 2022/2023**

The Executive Director of Health, Housing and Communities submitted a report providing an overview of the Annual Director of Public Health Annual Report 2022/2023 which describes the health and needs of the local population, focusing on issues pertinent to communities.

Gerry Taylor delivered a presentation on the report and in doing so explained that this year's Annual Report explored the concept of commercial determinants of health, the impact on health outcomes and recommendations to address them. Unhealthy commodity industries which impact on health had been identified as: -

- Food and drink
- Tobacco
- Alcohol
- Gambling

- Environment including fossil fuels and pollution.
- Formula milk
- Working conditions and benefits

The report recognised that some of the most impactful interventions needed to come at a national and even international level, however a local public health approach would centre on the premise that it was not possible to only focus on the harm caused by commercial determinants on the individual but it that it was necessary to work further upstream and across the system.

The conclusions of the report were: -

- Industries and employers play a significant role in the health and wellbeing of populations.
- Commercial determinants of health overlap with social determinants and public health work viewed through both lenses.
- Benefits of taking action on the root causes of non-communicable diseases will be felt across the whole system.
- Partnerships with industries should be treated with caution.
- Government legislation key to positive health outcomes in areas such as smoking
- Business growth is vital but prioritising the type of growth that supports the city's ambitions is key.

The Chair commented that the report provided a lot of food for thought for the Board and the city as a whole. Scott Watson said that the report was a very good read and noted that he had attended a number of meetings this week which referenced the impact of social media in influencing young people and queried whether there was something which could be done collectively to address this.

Gerry advised that she would speak to the Council's representative on the Public Health Regional Communications Group about the impacts of social media.

Yitka Graham highlighted that extending health determinants to commercial factors gave a unique and innovative lens to reframe and rethink the health needs of the population and felt it would be useful to develop research which could show how this work could make a difference.

Karen Davison referred to the recommendation around e-cigarettes and asked how this could be done whilst the long-term impact of vape use was unknown and young people were choosing e-cigarettes instead of tobacco. Gerry acknowledged that this was difficult as e-cigarettes had a positive impact for those who had been smokers but clearly it would not be the intention for young people to take it up. There was currently a Government debate taking place on this and it was expected that this would provide clarity on the national picture regarding disposable vapes. The local approach to vapes would involve prevention of vaping amongst children, young people and those who have never smoked, whilst supporting those who smoke to quit.

Philip Foster emphasised the importance of developing this work with the NHS and the ICB and having a real partnership to take this forward. Gerry advised that she

would be sharing the presentation and discussion more widely and would be happy to be invited to other meetings to discuss the report and take suggestions.

The Chair noted that the impact of legislation was very important and it was necessary to keep lobbying the Government on issues that could have a positive impact. She thanked everyone for their comments and reminded Board members that they would have opportunities to feed into this work through boards and working groups.

RESOLVED that the Health and Wellbeing Board support the recommendations contained within the Annual Director of Public Health Report 2022/2023 – Commercial Determinants of Health: Whose Choice Is it?

### **HW19. An Oral Health Promotion Strategy for Sunderland 2023-2028**

The Executive Director of Health, Housing and Communities submitted a report requesting endorsement of the Oral Health Promotion Strategy for Sunderland 2023-2028.

Lorraine Hughes was in attendance to talk to the report and explained that the commissioning of dentistry sat with the North East and North Cumbria ICB and the vision of the Oral Health Promotion Strategy was to improve the oral health of all people living in Sunderland. The strategy had five strategic priorities, evidence based and informed by what was known to improve oral health and Sunderland's oral health needs assessment. The priorities were: -

- Promote oral health through healthy food and drink.
- Promote oral health by improving levels of oral hygiene.
- Improve population exposure to fluoride.
- Improve early detection, and treatment, of oral diseases.
- Reduce inequalities in oral health.

The delivery of the strategy would require partners to work together and there were some practical things which should be done and simple messages delivered. The key next steps to support the delivery of the strategy were: -

- a) Establish a local oral health improvement and advisory group to promote oral health messages to the general population.
- b) Increase the number of children and young people who have access to targeted toothbrushing, including the direct delivery of toothbrushes and toothpaste to individual homes.
- c) Establish the oral health requirements of vulnerable groups within the city, including new arrivals from areas where access to dentistry has been significantly limited as a result of war or displacement.
- d) Review the findings of the Sunderland care home audit when complete, to inform local actions.
- e) Ensure that opportunities to promote measures to improve oral health are maximised in local programmes of work.

- f) Establish a supervised toothbrushing programme in special education needs schools.
- g) Establish a targeted offer for children in special education needs schools to have access to the targeted fluoride programme.
- h) Prepare to support the Department of Health and Social Care when it comes to any future consultation on fluoridation of water in Sunderland engaging with communities for their views.

Councillor Williams commented that in the current cost-of-living crisis, families would not go to the dentist because they could not afford it. This was a national picture but it needed to be highlighted because it showed what happened when people were short of money. Dr Lucas added that people would present to health services rather than dentistry with urgent dental conditions because it was free and there was some work that needed to be done in this area to help people to access dental treatment.

The Chair noted that it was a real concern across the city that people were not able to register with NHS dentists and this was proving a barrier to appropriate dental care. Fluoridation had previously been supported by the Board and it would be useful to have an update on that as a preventative strategy.

Lorraine agreed with what had been said regarding access to services and it was necessary to engage with the ICB on this. It was a national issue and the dental contract was being looked at to ascertain how dentists could be incentivised to work for the NHS. She noted that the health visiting service did promote dental registration for children and efforts were made locally to increase registrations but national action was required.

The Government was consulting on fluoridation in the North East and local public health teams would have a role in supporting this. It was expected that the consultation would start before the end of the year.

Scott Watson advised that the ICB had received a presentation in July about short term actions to arrest the immediate decline in dental services and he offered to circulate the presentation to Board Members.

Following consideration of the report it was: -

RESOLVED that: -

- (i) the Oral Health Promotion Strategy for Sunderland 2023-2028 be endorsed;
- (ii) any additional actions, including lead organisation, be identified;
- (iii) representatives be nominated for the local health improvement and advisory group, as appropriate; and
- (iv) progress updates be received on the delivery of the strategy via the Starting Well Delivery Board.

## **HW20. Implementation of a Falls Strategy for Sunderland 2023-2026**

The Director of Adult Services/Chief Operating Officer of Sunderland Care and Support Limited submitted a report updating the Health and Wellbeing Board in respect of activity on falls prevention and the management of falls.

Emma Anderson and Pradeep Chockalingam were in attendance to talk to the report and it was highlighted that the last Falls Strategy was published in 2017 and falls prevention was a priority within the Healthy City Plan. The Ageing Well Delivery Board had sponsored the employment of a Falls Coordinator to reinvigorate the city's management of falls and the Board had been instrumental in moving this work forward.

The Falls Coordinator had worked with a multi-agency group to develop a strategy founded on the collective ambition in Sunderland to achieve a culture where falls were not inevitable. In 2020/2021 Sunderland had one of the highest falls related emergency hospital admission rates in England and the vision for the strategy was achieving a culture where falls were not inevitable and all services were working together to prevent the incidence of falls. There were eight underpinning principles of the Falls Strategy: -

1. We will work with a set of consistent falls assessment tools that promote a set of shared principles.
2. We will develop a matrix that sets out the falls training that is available in the city and ensure that all training promotes a set of shared principles.
3. We will develop a directory of services that contribute to the management of falls in the city and we will develop a set of model customer journeys that will ensure we make the best use of the resources available to us.
4. We will promote and actively contribute to the development of the preventative offer in respect of falls in the city and we will create connections between preventative and clinical services.
5. We will make evidence-based decisions in respect of the management of falls and we will develop a data set that will inform the work of the Multi-Agency Falls Group.
6. We will promote the use of innovative technology in the management of falls.
7. We will continually raise awareness in respect of falls prevention and falls management, making falls everyone's business.
8. We will strive to achieve excellence in our partnership working with regard to the management of falls.

The Chair expressed her thanks for all the work that had been done on this, noting that there had been really positive engagement and ambition for the strategy.

Councillor Miller commented that she was aware that medication could be a factor in falls and Emma Anderson agreed that this could be a significant issue and pharmacy colleagues were part of the working group; this was high on the priority list for the city.

Dr Lucas stated that there was a big focus on structured medication reviews and the pharmacy discharge hub was used by most practices in the city to ensure that the



correct medication was prescribed. Health teams had been worried and had been proactive on this and she wanted to reassure Board Members that a huge amount of work went on in the background to make sure that medication was appropriate and would not lead to an increase in falls.

Graham King said that it was a very good piece of work and that Pradeep had challenged some thinking in the city and made people realise that falls could be prevented. He highlighted that falls were the highest reason for under 5's attending Accident and Emergency and this was maybe something to look at in the future.

RESOLVED that: -

- (i) Sunderland's Fall Strategy (2023-2026) be endorsed;
- (ii) the delivery of the strategy be delegated to the Ageing Well Delivery Board; and
- (iii) progress updates on the delivery of the strategy be received via the Ageing Well Delivery Board.

## **HW21. Sunderland Winter Planning 2023/2024**

The Managing Director, All Together Better Sunderland submitted a report which provided an overview of the winter resilience plans for 2023/2024 and informed the Health and Wellbeing Board of the winter vaccinations programme for Sunderland.

Philip Foster reported that the evaluation of last year's plan informed the development of the plan for 2023/2024. Each partner organisation would have in place a range of measures to help manage the pressures of winter but it had been demonstrated that organisations were stronger when they worked together.

There had been investment in the transition from hospital to intermediate care centre or home and additional resources for primary care and to meet the needs of homeless people in the city. A rolling programme of vaccinations began on 11 September 2023 and all 38 GP practices in the city had signed up.

Paul Weddle said that he understood some people had wanted to receive vaccines in the last few weeks but they had not been available. Scott Watson explained that 7,000 vaccines were arriving this weekend but supply had been less than ideal this year but primary care staff were working round this. There was a 99.9% uptake in clinics where vaccines were offered but demand was outstripping supply at the present time.

Councillor Williams noted that there were still large numbers of people who did not take up the vaccines offered and she queried if public health guidance was likely to change in relation to Covid or whether it would be treated in the same way as flu.

Gerry Taylor stated that the vaccine programme had been brought forward but there had not been any indication of new national public health guidance. The Public

Health team would work with the NHS and focus on certain areas such as health and social care staff.

Dr Lucas wished to reassure the Board that all GPs worked well together despite the challenges of supply and did everything possible to promote the vaccines.

RESOLVED that: -

- (i) the winter vaccination plan for Sunderland be received and noted;
- (ii) the review of the Winter Vaccination Board to ensure it is fit for purpose be supported; and
- (iii) the update on the development of plans for winter 2023/2024 be received and noted.

## **HW22. Healthwatch Sunderland Annual Report**

The Vice-Chair of Healthwatch Sunderland submitted a report providing an overview of activity conducted by Healthwatch Sunderland throughout 2022/2023.

Paul Weddle advised that Healthwatch had confirmed funding for the next five years and would have a stable team. In 2022/2023 Healthwatch Sunderland:

- had 30 volunteers who provided over 76 days of supporting activity.
- employed six staff.
- received over £160,000 in local authority funding.
- 2299 people accessed advice and information about topics such as how to make a complaint and NHS dentistry.
- 2944 people shared their experiences of health and social care services, helping to raise awareness of issues and improve care.
- published four reports about the improvements people would like to see in relation to their health and social care services. GP Access was the most popular report.

The report set out the outcomes and achievements of Healthwatch over the year and its top three priorities for next year were Hospital Care, Accessible Information and Youthwatch.

The Chair thanked Healthwatch for presenting their report and commended them on their work during 2022/2023.

RESOLVED that the Healthwatch Sunderland Annual Report be received and noted.

## **HW23. Report of the Sunderland Place Committee**

The Chief Executive, Sunderland City Council submitted a report providing the Board with an updated position on the Better Care Fund 2023/2025, including:

- Proposed investment of additional Disabled Facilities Grant funding allocation.
- Proposed approach to agreeing a Section 75 partnership agreement in line with national timescales and requirements.

Lisa Jones reported that it had been confirmed that £353,874 of additional DFG funding had been included in the Better Care Fund and the expenditure plans were set out within the report.

The Sunderland Place Committee had come into being on 19 May 2023 to discharge responsibilities on behalf of the ICB Executive Committee. Sunderland's progress in establishing an effective partnership arrangement at place level had enabled it to support the development of the ICB place-based oversight and assurance arrangement, with Sunderland being the first 'place' in the region to be reviewed under the ICB place-based assurance process.

A summary of the Place Committee's business since May 2023 was included within the report and it was highlighted that the Committee had provided oversight of place-level risk and financial position.

The Chair raised the issue of how the Better Care Fund could be maximised and Lisa commented that there was an element of the plan setting out how inequalities would be tackled, for example homelessness and prevention was assessed as part of Better Care Fund investment.

RESOLVED that: -

- (i) the proposed use of the additional Disabilities Facilities Grant Funding (DFG) outlined in section 3.2 and 3.3 be noted and approved;
- (ii) the proposed approach to the Section 75 development be noted and approval for the sign-off be delegated to the Chair in consultation with the Executive Director of Health, Housing and Communities, Director of Adult Services and Place Director for Sunderland;
- (iii) the proposed assurance arrangements outlined in section 5 be noted and further recommendations be made on how the Board can be empowered through such arrangements to fulfil its statutory duties in relation to the Better Care Fund; and
- (iv) the progress to date in relation to place-based governance arrangements, with specific reference to the role of the Sunderland Place Committee and Partnership Board (in common) be noted and further recommendations be made on how these arrangements can strengthen the contribution of the ICB and Local Authority to the Healthy City Plan.

## **HW24. Health and Wellbeing Delivery Boards Assurance Update**

The Chief Executive of Together for Children, Executive Director of Health, Housing and Communities and Director of Adult Services/Chief Operating Officer of SCAS submitted a joint report providing the Health and Wellbeing Board with assurance that the work of the Delivery Boards was progressing in line with their agreed terms of reference, a summary of the key points discussed at their recent meetings and an update on the Healthy City Plan grant available to the Delivery Boards.

The Delivery Boards continued to meet on a quarterly basis, with the most recent meetings held in September 2023 where all groups had considered the JSNA and the Annual Report of the Director of Public Health. The delivery boards would hold additional workshops and development sessions subject to their business needs.

The Board therefore RESOLVED that: -

- (i) the meeting summaries from the recent meetings of the delivery boards be noted;
- (ii) it be assured that the work of the Delivery Boards was progressing in line with their agreed terms of reference; and
- (iii) the additional projects allocated the Healthy City Plan grant be noted.

## **HW25. Health and Wellbeing Board Forward Plan**

The Senior Manager – Policy submitted a report presenting the forward plan of business for the year ahead.

Members of the Board were encouraged to put forward items for future meeting agendas either at Board meetings or by contacting the Council's Senior Policy Manager.

RESOLVED that the Forward Plan be received for information.

## **HW26. Dates and Times of Future Meetings**

The dates and times for future meetings were as follows: -

Thursday 7 December 2023 at 12.00pm

Thursday 14 March 2024 at 12.00pm

All meetings would take place in the Council Chamber, City Hall, Sunderland.

(Signed) K CHEQUER  
Chair