

HEALTH AND WELLBEING BOARD AGENDA



4 December 2023

at 10.00 a.m.

in the Council Chamber, Civic Centre,
Victoria Road, Hartlepool

MEMBERS: HEALTH AND WELLBEING BOARD

Prescribed Members:

Elected Members, Hartlepool Borough Council - Councillors Allen, Harrison, V Nicholson and Young.

Representatives of NHS North East and North Cumbria Integrated Care Board (NENC ICB) Karen Hawkins and David Gallagher

Director of Public Health, Hartlepool Borough Council – Craig Blundred

Executive Director of Children's and Joint Commissioning Services, Hartlepool Borough Council - Sally Robinson

Executive Director of Adult and Community Based Services, Hartlepool Borough Council - Jill Harrison

Representatives of Healthwatch - Margaret Wrenn and Christopher Akers-Belcher

Other Members:

Managing Director, Hartlepool Borough Council – Denise McGuckin

Executive Director of Development, Neighbourhoods and Regulatory Services, Hartlepool Borough Council – Tony Hanson

Assistant Director of Joint Commissioning, Hartlepool Borough Council - Danielle Swainston

Representative of Hartlepool Voluntary and Community Sector – Christine Fewster and Carl Jorgeson

Representative of Tees, Esk and Wear Valley NHS Trust – Brent Kilmurray

Representative of North Tees and Hartlepool NHS Trust - Linda Hunter

Representative of Cleveland Police - Supt Martin Hopps

Representative of GP Federation - Fiona Adamson

Representative of Headteachers - Sonya Black

Observer – Statutory Scrutiny Representative, Hartlepool Borough Council – Councillor Creevy

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

3. MINUTES

- 3.1 To confirm the minutes of the meeting held on 11 September 2023 –
including documentation arising from the meeting



- 3.2 To receive the minutes of the meeting of the Children's Strategic Partnership held on 19 July 2023
- 3.3 To receive the minutes of the Tees Valley Area ICP Meeting held on 8 September 2023

4. ITEMS FOR CONSIDERATION

- 4.1 Healthwatch Annual Report – *Healthwatch Hartlepool*
- 4.2 Director of Public Health Annual Report – *Director of Public Health*
- 4.3 Tobacco Strategy – Progress Report – *Director of Public Health*
- 4.4 Progress Update on the Hartlepool Food Partnership – Healthy, Affordable and Sustainable Food for all – *Director of Public Health*
- 4.5 Pharmaceutical needs Assessment (PNA) 2022 Maintenance Report - *Director of Public Health*
- 4.6 Menopause Work Programme Update – *Director of Public Health*
- 4.7 Oral Health Update – *Director of Public Health*

5. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

Date of next meeting – 18 March 2024 at 10.00 a.m.



HEALTH AND WELLBEING BOARD

MINUTES AND DECISION RECORD

11 September 2023

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool

Present:

Councillor Young, Leader of Council (In the Chair)

Prescribed Members:

Elected Members, Hartlepool Borough Council - Councillor Dunbar (as substitute for Councillor Allen), Councillor Harrison and Councillor Darby (as substitute for Councillor V Nicholson)

Representative of NHS North East and North Cumbria Integrated Care Board - Karen Hawkins

Director of Public Health, Hartlepool Borough Council – Craig Blundred

Executive Director of Children's and Joint Commissioning Services, Hartlepool Borough Council - Sally Robinson

Executive Director of Adult and Community Based Services, Hartlepool Borough Council - Jill Harrison

Representatives of Healthwatch - Margaret Wrenn and Christopher Akers-Belcher

Other Members:

Managing Director, Hartlepool Borough Council – Denise McGuckin

Assistant Director of Joint Commissioning, Hartlepool Borough Council - Danielle Swainston

Representative of Hartlepool Voluntary and Community Sector – Christine Fewster

Representative of North Tees and Hartlepool NHS Trust - Linda Hunter

Representative of Cleveland Police – Chief Inspector Peter Littlewood (as substitute for Supt Martin Hopps)

Representative of GP Federation - Fiona Adamson

Observer – Statutory Scrutiny Representative, Hartlepool Borough Council – Councillor Creevy

Also in attendance:-

Julian Penton, Development Officer, Hartlepower

Neil Atkinson, Managing Director for North Tees and Hartlepool NHS Foundation Trust

Professor Derek Bell OBE, Joint Chair | North Tees and Hartlepool NHS Foundation Trust and South Tees Hospitals NHS Foundation Trust

Fay Scullion, Non-Executive Director

Officers: Claire Robinson, Public Health Principal
Joan Stevens, Statutory Scrutiny Manager
Amanda Whitaker, Democratic Services Team

54. Apologies for Absence

Elected Members, Hartlepool Borough Council – Councillors Allen and V Nicholson
Representative of NHS North East and North Cumbria Integrated Care Board - David Gallagher
Representative of Hartlepool Voluntary and Community Sector – Carl Jorgeson
Representative of Cleveland Police – Supt Martin Hopps
Representatives of Tees, Esk and Wear Valley NHS Trust – Brent Kilmurray and Patrick Scott

55. Declarations of interest by Members

Councillor C Akers-Belcher - appointed to the North East & North Cumbria (NENC) Integrated Care Board as the Healthwatch participant.

56. Minutes

The minutes of the meeting held on 10 July 2023 were confirmed.

The minutes of the meetings of the Children's Strategic Partnership, held on 25 Jan 2023 and 22 March 2023, were received.

The minutes of the Tees Valley Area ICP Meetings held on 31 March 2023 and 2 June 2023 were received.

57. Healthwatch Hartlepool Annual Report 2022-23 *(Chief Executive, Healthwatch Hartlepool)*

It was reported that as the Annual Report had not been circulated, this agenda item would be submitted for consideration at the December meeting of the Board.

Decision

It was agreed that the report would be submitted to the December meeting of the Board.

58. Healthwatch Work Programme 2023/24 *(Healthwatch Hartlepool CIO)*

The Healthwatch Hartlepool Chief Executive, who was in attendance at the meeting, presented the report. Details of salient issues addressed in the report were highlighted including the purpose of the work programme and

approach adopted by Healthwatch Hartlepool. A copy of the work programme was appended to the report.

The Chief Executive responded to questions raised by Board members arising from the report, including clarification regarding the remit of the published Discharge report and access to dentistry and GP services. Following clarification sought regarding the reopening of Sandwell Park Hospital, the Integrated Care Board representative undertook to request the Tees, Esk and Wear Valley Trust to provide an update on the issue to the Board.

Decision

The Healthwatch Hartlepool Work Programme was noted.

59. Final Draft Tobacco Strategy *(Director of Public Health)*

The final draft Tobacco Control strategy for Hartlepool was appended to the report. The draft strategy had been developed with partners and informed by the recent smoking needs assessment, which had been shared with the Board. The strategy outlined how the system would work across the system to make changes to reduce the harms associated with smoking and second hand smoke. A number of stakeholders and partners had been involved in developing the strategy and agreeing the contents.

The draft strategy had informed the development of an action plan, also appended to the report, which set out under each theme the detail of how each priority area would be delivered, who will deliver, the timescales and would be informed by indicators in order to measure success through an outcome framework. Governance of the strategy implementation would be through the Hartlepool Tobacco Control Alliance which would report to the Health and Wellbeing Board.

Board members expressed support of the strategy and debated issues arising from the report. Clarification was sought regarding the involvement of education establishments and Board members were assured that work was ongoing and the establishments had been advised of the support which can be provided.

Decision

The Board agreed the final draft strategy and requested that the process for reporting to the Board should be initially 3 monthly updates, then changing to 6 monthly updates.

60. Pharmaceutical Needs Assessment (PNA) 2022 Maintenance Report *(Director of Public Health)*

The Director of Public Health reported verbally that with regard to the previous quarter, no statements had been issued since the last meeting of the Board.

Decision

The update was noted.

61. Health and Wellbeing Board Refresh Update – Verbal Update *(Director of Public Health)*

The Director of Public Health sought the views of Board members regarding the future structure/format of Board meetings. It was reported that discussions had been held with partners and it was apparent that partners considered that arrangements were currently working well.

Decision

That no changes be made at this time and further consideration be given by the Board once the Health and Wellbeing Strategy has been implemented.

62. Hartlepool Young People's Social Prescribing Initiative - *Partnership of Hartlepool voluntary organisations & the Director of Children's Services*

The Development Officer, Hartlepower, presented the report including the background to the Hartlepool young people social prescribing service. The report updated the Board on the progress and outcomes of the first 20 months of the initiative. Board members were also requested to address the sustainability of the service.

The Board was advised that the service is financially supported by grants from Hartlepool's three Primary Care Networks (staff cost for full time worker) and the National Lottery (staff costs for part-time worker), the PFC Trust (activities budget) and in kind support from the Youth Service (management and administration) and Hartlepower VCS Development Team (co-ordination and facilitation).

The benefits to young people, particularly the impacts on mental health and social engagement, were discussed, in the context of rising demand on mental health services for young people. Board members discussed possible extension of the service and measurement of outcomes. It was noted that the initiative is being evaluated as part of a national research programme into young people social prescribing, led by Exeter University Medical School. It was requested that the outcome of that evaluation be shared with Board Members as soon as possible. Funding implications were highlighted and although views were expressed in support of sustaining the service, it was noted that contract negotiations would not commence until later in the year.

Decision

The update was noted.

63. South Tees Hospital NHS Foundation Trust and North Tees and Hartlepool NHS Foundation Trust Group

Model (*Joint Chair for North Tees and Hartlepool NHS Foundation Trust and South Tees Hospitals NHS) Foundation Trust & Managing Director for North Tees and Hartlepool NHS Foundation Trust*

Representatives of the Foundations Trusts attended the meeting to update the Board on the Group Model concept, the adoption of which had been agreed by both Trusts. The Board was given an update of current and proposed activities, including opportunities and aspirations for developing a broader site. Board members were advised that the infrastructure was in place to develop the ambition for the site which was vital to regional services. Assurances were provided to address concerns at how the Group Model would work; two statutory boards still existed. It was stated that it was not intended to move services to South Tees Trust.

The Board was advised that a grant application had been successful for Net Zero installations generating savings which would be reinvested back into healthcare services. It was highlighted, however, that the majority of changes would occur in the next financial year although all paper work for the health and social academy had been completed.

The success of the urgent care centre, in Hartlepool, was discussed which was considered to replicate the Integrated approach discussed by the Board, earlier in the meeting. It was stated that there were huge opportunities to continue to improve integration with more cohesion already being seen.

CHRISTOPHER AKERS-BELCHER DECLARED AN INTEREST AS A GOVERNOR OF NORTH TEES AND HARTLEPOOL NHS TRUST.

The Healthwatch Hartlepool Chief Executive referred to meetings which he had attended which had referenced investment in the Hartlepool Hospital site. The Chief Executive requested that details of the wider investment and wider vision be presented to a future meeting of the Health and Wellbeing Board.

Concerns that communication with the public needed to improve were acknowledged and Trust representatives advised that arrangements could be made for a tour of the site by a Board cohort; the offer was accepted on behalf of the Board by the Chair.

The Chief Executive, Hartlepool Carers, highlighted that funding for a post in the Trust is due to end and referred to the huge amount of work still to be

achieved. In response, the Managing Director for North Tees and Hartlepool NHS Foundation Trust undertook to discuss the issue following the meeting.

Decision

The update was noted.

Meeting concluded at 11.40 a.m.

CHAIR

CHILDREN'S STRATEGIC PARTNERSHIP MINUTES AND DECISION RECORD

19 July 2023

The meeting commenced at 2.00 pm in the Civic Centre, Hartlepool

Present:

Jim Lindridge, HBC
Danielle Swainston, HBC Assistant Director (Joint Commissioning)
Superintendent Martin Hopps, Cleveland Police
Martin Todd, Changing Futures North East
James Graham, Tees Esk and Wear Valleys NHS Trust
Christine Fewster, Hartlepool Carers

Officers: Kelly Prescott, Projects Manager, HBC
Kate Proctor, Family Hub Manager, HBC
Denise Wimpenny, Principal Democratic Services Officer

1. Apologies for Absence

Apologies for absence were submitted on behalf of Sally Robinson,
Director of Children's and Joint Commissioning Services, HBC
Amanda Whitehead, Assistant Director, Education, HBC
Craig Blundred, Director of Public Health, HBC

2. Declarations of Interest

None

3. Minutes of the meetings held on 25 January 2023 and 22 March 2023

Confirmed.

4. Early Intervention Strategy Presentation *(Assistant Director, Joint Commissioning)*

The Assistant Director, Commissioning reported on the background to the Early Intervention Strategy and sought the Partnership's views on the implementation plan and the following vision and objectives:-

Vision

Hartlepool is a place where every child gets the best start in life so that they can grow up healthy, safety and secure and able to fulfill their potential.

Objectives

- We will work in partnership with families, children and young people to design and deliver services
- We will ensure that we have a highly skilled, passionate workforce who invest in the relationships they have with those they support
- We will make sure that information is readily available and accessible for all families so they can access support when they need it
- We will support families to receive the right support sat the right time to meet their needs
- We will make sure that families know how to, and are empowered to access community support as soon as they need it
- We will all work together to ensure that families have a seamless journey through services

In the lengthy discussion that followed, the Assistant Director, Joint Commissioning responded to issues arising from the update. Clarification was provided in relation to the challenges around funding arrangements and payment by results process, evaluation and feedback arrangements, performance management framework as well as the links to the Family Hub model. It was noted that all children's centres would be rebadged into family hubs, progress of which would be reported in more detail under the next agenda item.

A member suggested utilising a GANT chart to assist the partnership in contributing to the delivery plan. In response to a query as to whether CAMHS could be involved in the development, the Assistant Director, Joint Commissioning explained that the focus was on peri natal mental health therefore work had begun with TEWV Adult Services. However, there was a need to look at the 0-19 services and CAMHS would be included in discussions. Examples of good practice in other local authorities were shared with members which included the use of drop in clinics which enabled children and young people immediate access to support and advice. Partnership Members were advised that whilst funding at present was focussed around 0-2 years, it was anticipated that once the Family Hubs were up and running the wider opportunities around including 0-19 years would be further explored with the involvement of Partnership Members.

In relation to facilitation of community support, a number of comments were made regarding the importance of working with the voluntary and community sector and the need for established links between the community hubs and family hubs. The background to the proposals for the Family Hub in Middleton Grange was highlighted. The benefits of further

developing partnership working with schools, the police and health colleagues was discussed as well as the challenges around engaging with teenagers and hard to reach families. The importance of the need for support structures in schools were also highlighted.

Decision

- (i) That the contents of the presentation and comments of Members be noted and actioned as appropriate.
- (ii) The Partnership supported the implementation plan, vision and objectives.

5. Family Hubs/Supporting Families Presentation

(Assistant Director, Joint Commissioning)

The Family Hub Manager referred to discussions at the last meeting of the Partnership and provided a detailed and comprehensive presentation which updated Members in relation to Family Hubs Programme. The presentation focussed on the following:-

- Update on January 2023 priorities
 - delivery plan has been agreed and developed
 - Transformation Manager in post since February 2023
 - Behavioural insights work underway
 - JSNA ongoing
 - Monthly parent/carer panels in place
 - Marketing and Comms Officer – post not yet filled
 - Project Groups in place and working groups underway
 - performance management framework being developed to report on outcomes
- Transformation
 - Middleton Grange Family Hub branded in March
 - Rossmere, Miers Avenue and Hindpool Close Children's Centres will become Family Hubs from 27 July 2023
 - Children in Care Council have began consultation on making the Family Hubs more welcoming for older children/young people
- Funded Elements of Family Hub Programme
 - Parent Infant Relationship and Perinatal Mental Health
 - Infant Feeding
 - Parenting support and training programme
 - Early language and home learning environment
 - Publishing Start for Life Offer
- How we can work together

In the discussion that followed Members debated issues arising from the presentation and the Assistant Director and Family Hubs Manager responded to issues raised. Clarification was provided in relation to how the programme would be delivered, support available for families in need or in crisis, the various methods of communicating and ensuring access to information and devices, proposals in relation to behavioural insight work to ensure effective engagement with hard to reach families, engagement, marketing and publication proposals together with arrangements in place in terms of sharing good practice.

In finalising the debate, the Chair took the opportunity to place on record his thanks and appreciation to all officers and partners who were involved in developing this initiative and to acknowledge the current town-wide approach and good work that was being done by partners and the community and voluntary sector. The Chair was keen to see information widely publicised to include Elected Members and the Health and Wellbeing Board.

Decision

That the information given be noted and comments of Members be noted and actioned as appropriate.

6. Any Other Items which the Chairman Considers are Urgent

The Chairman ruled that the following item of business should be considered by the Committee as a matter of urgency in accordance with the provisions of Section 100(B) (4)(b) of the Local Government Act 1972 in order that the matter could be dealt with without delay.

7. Children's Services Crisis Care System

The Chair referred to an e-mail he had received regarding the Children's Services Crisis Care system which the Assistant Director agreed to explore following the meeting.

8. Date and Time of Next Meeting

It was reported that the next meeting would be held on 22 September at 2.00 pm.

The meeting concluded at 2.00 pm.

CHAIR

North East North Cumbria Health & Care Partnership



Tees Valley Area Integrated Care Partnership (ICP) Meeting

Meeting held on: 8th September 2023 12pm – 2pm

Held at: Council Chamber, Redcar Civic Centre, Redcar and Cleveland Borough
Council, Ridley Street, Redcar, TS10 1RT

Item No:	Meeting Notes	Action
TVICP/23/22	Welcome and Introductions	
	<p>Councillor Cook, as Chair, welcomed colleagues to the third Tees Valley Area Integrated Care Partnership (ICP) Meeting.</p> <p><u>Present:</u></p> <ul style="list-style-type: none"> • Councillor Bob Cook (Chair) (BC) – Health and Well-being Board Chair & Leader of Stockton Borough Council • David Gallagher (DG) – Executive Area Director (South), NENC ICB • Craig Blair (CB) - ICB Director of Place, Middlesbrough / Redcar & Cleveland, NENC ICB • Alex Sinclair (AS) – ICB Director of Place (Stockton), NENC ICB • Brent Kilmurray (BK) – Chief Executive of Tees, Esk and Wear Valleys NHS Foundation Trust • Craig Blundred (CBlu) – Director of Public Health, Hartlepool Borough Council • Professor Derek Bell (DB) – Chair, North Tees & Hartlepool NHS Foundation Trust / South Tees Hospitals NHS FT • Dr Helen McLeish (HM) – PCN Clinical Director, Darlington PCN • Erik Scollay (ES) – Director of Adult Services, Middlesbrough Council • Councillor Alec Brown (AB) – Joint HWBB Chair – Live Well South Tees Board, Redcar and Cleveland Council 	

	<ul style="list-style-type: none"> • Karen Hawkins (KH) - ICB Director of Place (Hartlepool) NENC ICB • Jane Smith (JS) – Service Lead Strategy Quality & Improvement – Children’s Service, Stockton Borough Council (<i>attending on behalf of Elaine Redding</i>) • Ken Ross (KR) – Public Health, Darlington Borough Council • Lucy Owens (LO) – Voluntary Sector Lead / 3rd Sector, Catalyst Stockton • Mark Adams (MA) – Director of Public Health, Middlesbrough Council / Redcar & Cleveland Council • Julian Penton (JP) - Voluntary Sector Lead/3rd Sector, Hartlepower (Hartlepool) (<i>attending on behalf of Mark Davis</i>) • Mayor Chris Cooke (CC) – Joint HWBB Chair Live Well South Tees Board – Middlesbrough Council • Martin Short (MS) - ICB Director of Place (Darlington), NENC ICB • Dr Jackie McKenzie (JM) - PCN/CD Representative, Hartlepool PCN • Richard Scothorn (RS) – Chair, County Durham & Darlington FT (<i>attending on behalf of Sue Jacques</i>) • Peter Neal (PN) – Voluntary Sector Lead, Redcar & Cleveland Voluntary Development Agency (RCVDA) • Sarah Bowman-Abouna (SBA) – Director of Public Health, Stockton Borough Council • Emma Champley (EC) – Assistant Director, Adult Social Care Stockton Borough Council • Rebecca Morgan (RM) – Project Development Manager / Healthwatch Sub-Regional Co-ordinator, Healthwatch • Shona Duncan – Head of Business Solutions, Tees Valley Combined Authority (<i>attending on behalf of Helen Kemp</i>) • Dr Nick Steele – Bytes PCN Stockton (<i>attending on behalf of Dr Garg</i>) • Rob Harrison – Managing Director, South Tees Hospitals NHS Foundation Trust <p><u>In Attendance:</u></p> <ul style="list-style-type: none"> • Kate Sutherland (KS) – Senior Governance Lead (Tees Valley) NENC ICB • Rebecca Herron (RH) – Governance Lead NENC ICB • Claire Attey (Note Taker) (CA) – Corporate Secretary, NENC ICB • Lynne Pearson (LP) – Corporate Secretary, NENC ICB 	
TVICP/23/23	Apologies for Absence	
	<ul style="list-style-type: none"> • Dr Bharat Kandikonda - PCN/CD Representative – Middlesbrough PCN 	

	<ul style="list-style-type: none"> • Denise McGuckin – Managing Director of Hartlepool Borough Council • Ian Williams – Chief Executive, Darlington Council • Jill Harrison - Director of Adult & Community Based Services, Hartlepool Borough Council • Jean Golightly - Director of Nursing (South), NENC ICB • Kathryn Boulton - Director of Children's Services, Redcar and Cleveland Borough Council • Lynne Walton – Director of Finance (South), NENC ICB • Mark Davis (MD), Middlesbrough Voluntary Development Agency (MVDA) • Carolyn Nice - Director of Adults, Health & Wellbeing Stockton Borough Council • David Jennings – Chair, Tees, Esk and Wear Valleys FT • Dr Deepak Dwarakanath - Chief Medical Officer, North Tees and Hartlepool FT • Dr Dhirendra Garg – Stockton PCN Representative • Elaine Redding – Director of Children's Services, Stockton Borough Council • John Sampson – Managing Director and Chief Executive – Redcar and Cleveland Council • Lisa Oldroyd – Chief Executive and Monitoring Officer, Cleveland Police • Matthew Roche – Councillor, Darlington Borough Council • Mike Greene – Chief Executive – Stockton Borough Council • Miriam Davidson – Interim Director of Public health, Darlington Borough Council • Peter Strachan – Chair, North East Ambulance Service FT • Sally Robinson – Director of Children's Services, Hartlepool Borough Council • Sue Jacques – Chief Executive, County Durham and Darlington NHS FT • Helen Kemp – Business Solutions Director, Tees Valley Combined Authority (TVCA) • Sue Jacques (SJ) – Chief Executive of County Durham & Darlington Foundation Trust • Dr Teik Goh (TG) - PCN/CD Representative, Redcar and Cleveland PCN 	
TVICP/23/24	Declarations of Interest	
	Councillor Bob Cook (BC) reminded colleagues of the importance of the robust management of conflicts of interest and asked individuals to raise any potential conflicts of interest as the meeting progressed. No conflicts of interest were raised.	
TVICP/23/25	Minutes from previous meeting held 2nd June 2023	

	The minutes of the meeting, held 2 nd June, had previously been circulated to members for comment. There were no amendments requested and therefore the minutes were AGREED as an accurate record. Confirmed minutes have also been shared with Health and Wellbeing Boards for information.	
TVICP/23/26	Matters Arising & Action Log	
	<p>Action Log</p> <p><u>TVICP/23/15 – Healthwatch Update</u> Kate Sutherland (KS) explained that feedback was shared with the communications team for consideration around ensuring reports are made easily accessible for partners and they advised they will look to include links to HW sites/reports on the ICB website. The action can therefore be marked as complete.</p> <p><u>TVICP/23/15 – Healthwatch Update</u> KS advised that Enhanced Access to GP Services / Delivery Plan for Recovering Access to Primary Care had been added to the agenda for todays meeting. The action can therefore be marked as complete.</p> <p><u>TVICP/23/15 – Healthwatch Update</u> KS confirmed that Healthwatch work with Youth Focus: North East had been added to the forward planner to come to a future meeting. The action can therefore be marked as complete.</p> <p><u>TVICP/23/18 – Update from JSNA Work</u> It was noted that the presentation had been circulated to members. The action can therefore be marked as complete.</p> <p><u>TVICP/23/20 - Next Steps: Forward planning and future focus</u> A presentation on an overview of the voluntary sector had been added to the agenda for todays meeting. The action can therefore be marked as complete.</p> <p>Matters Arising</p> <p><u>Dental Access Recovery</u> Dave Gallagher (DG) referred to a presentation around Primary Care Dental Access Recovery: First Steps in the North East and North Cumbria (NENC) which was recently presented to the ICB Board and had been circulated to the membership in advance of the meeting. The presentation highlights that NHS England have delegated responsibility to NENC ICB for commissioning dental services from 1 April 2023. There are significant</p>	

	<p>challenges to people accessing dentistry in NENC, and to tackle the challenges the ICB are taking immediate actions to stabilise services, taking a more strategic approach to workforce and service delivery and developing an oral health strategy to improve oral health and reduce the pressure on dentistry.</p> <p>Action: It was suggested that an update around oral health work is provided at a future meeting of this group.</p>	CA
TVICP/23/27	Healthwatch Update	
	<p>The presentation had been circulated to members prior to the meeting.</p> <p>Rebecca Morgan (RM), from the Pioneering Care Partnership (PCP) explained that the PCP is a charity which runs health and wellbeing projects across the North East and have a contract in place with 5 Healthwatches in the North East, 3 of those are in the Tees Valley.</p> <p>Local Healthwatches are funded by and accountable to Local Authorities and hold a statutory position on their respective Health and Wellbeing Boards. Healthwatch work to understand the needs, experiences and concerns of people who use health and care services, and to represent their voices to decision makers so that services are better able to meet the needs of their local communities.</p> <p>In 2022/23 across the Tees Valley, Healthwatch produced 20 reports about the improvements people would like to see to health and care services.</p> <p>One theme which Healthwatch identified as a concern in the Tees Valley was issues around accessing NHS dentistry and the prohibitive cost of private dentistry. Access to a GP was also a theme in the Tees Valley, and Healthwatch South Tees have developed a public resource booklet called 'I need to see a doctor' to support people and answer their queries.</p> <p>Action: The 'I need a Doctor' document will be shared with the group following today's meeting.</p> <p>Other themes identified were access to mental health services, and issues around the quality of mental health services, concerns over pharmacy closures and the quality of pharmacy service, and women's health issues, particularly information around the menopause and services for under-represented communities.</p>	CA

	<p>In partnership with Youth Focus North East (YFNE) Healthwatch across the Tees Valley is working on the development of Youthwatch. Further information on this will come to a future meeting of this group, and this has been added to the forward planner.</p> <p>An in-depth review called 'Growing Older' has been commissioned by NECS to look into the needs of adults in the Tees Valley with a Learning Disability over the next decade and beyond.</p> <p>BC thanked RM for her presentation.</p> <p>DG also thanked RM for her presentation and noted that the key themes identified by Healthwatch provide an opportunity to work strategically across the system.</p>	
TVICP/23/28	Voluntary Sector Overview	
	<p>Julian Penton (JP) delivered a presentation on the Voluntary Sector and explained that the Tees Valley Infrastructure Partnership (TVIP) recognises the need for a single voice and brings together the 5 voluntary development agencies across the Tees Valley together with rural and regional infrastructure bodies.</p> <p>The role of the TVIP is to support and champion the Voluntary, Community and Social Enterprise (VCSE) and wider civil society in promoting community wellbeing and to provide a framework for stakeholders to engage with the VCSE across the Tees Valley.</p> <p>Voluntary development agencies are independent and have a degree of autonomy. They are in place for the benefit of the public and are governed by constitution or rules.</p> <p>Across the North East there is circa 7,500 registered third sector organisations, employing circa 38,000 employees and deploying circa 950,000 volunteers.</p> <p>The activity of the VCSE is across the full health and social care pathway and includes community-based support, preventative services, contracted services and pre and post hospital discharge.</p> <p>Alex Sinclair (AS) asked how a member of the public would find out a list of what voluntary sector organisations are</p>	

	<p>available and JP advised that the public would contact their local voluntary development agency.</p> <p>Mark Adams (MA) noted that as the voluntary sector are full and equal partners work is required around how the system includes the voluntary sector in policy and strategy development. JP noted that the voluntary sector would be very willing to provide their intelligence. Craig Blair (CB) added that voluntary sector colleagues were key in the development of the Tees Valley Plan.</p> <p>Helen McLeish (HM) asked whether there was an equivalent for the Darlington area. JP explained that there wasn't, However Martin Short (MS) provided assurance that whilst there is no infrastructure, there is a voluntary sector group in Darlington which meet on a monthly basis which can be fed into.</p> <p>JP advised that the voice of the community has the potential to shape what services look like for example the Lived Experience Forum which has been set up for people with mental health issues.</p> <p>BC thanked JP for his presentation.</p>	
TVICP/23/29	Recovering Access to Primary Care plan	
	<p>Karen Hawkins (KH) provided an overview of general practice and new national requirements in the Tees Valley and explained that there are 5 Local Authority areas, 78 practices and 14 Primary Care Networks (PCNs) in the Tees Valley which has a population of 723,084.</p> <p>The 78 practices are all independent contractors, and can each determine how they deliver services and explained the different contract types.</p> <p>A Primary Care Network Contract Directed Enhanced Service (DES) was introduced in 2019 which required practices to work at scale in PCNs. PCNs are not statutory organisations but are a grouping of practices working together under direction to deliver a suite of enhanced services.</p> <p>Under the PCN DES from October 2022 each PCN is required to provide 60 minutes of additional general practice capacity per 1000 adjusted population. Practices have the ability to subcontract this. The Investment and Impact Fund (IIF) is a points based scheme similar to the</p>	

	<p>Quality and Outcomes Framework (QoF) which has been redesigned for 2023/24.</p> <p>There have been a number of reports of access challenges to general practice. One reason for this is a high level of staff sickness, and recruitment and retention difficulties. There is a large backlog of care, along with a high level of demand in primary care. Increased call waiting times have caused frustration to patients, and there has been a significant increase in abuse to practice staff.</p> <p>The Primary Care Access Recovery Plan (PCARP) was released by NHS England to address the access issues in general practice. The main focus areas of the PCARP in 2023/24 are to empower patients to manage their own health, implement modern general practice access, build capacity and cut bureaucracy.</p> <p>In relation to PCN Capacity and Access Improvement Plans (CAIP), all 78 Tees Valley practices have been asked to look at patient experience of contact, ease of access and demand management and accuracy of recording in appointment books.</p> <p>Mark Adams (MA) queried where Health Inequalities would fit and KH explained that practices would be expected to look at their population, and work is ongoing with Public Health in relation to population health management.</p> <p>BC thanked KH for her presentation.</p>	
TVICP/23/30	Winter Planning	
	<p>The presentation had been circulated to members prior to the meeting.</p> <p>Craig Blair (CB) noted that the Tees Valley Urgent and Emergency Care (UEC) system remains under significant and sustained pressure. The pressure is created by staffing issues, increased levels of acuity, discharge delays, bed pressures and flow issues. This makes it a complex system problem that requires a system response.</p> <p>The delivery plan for recovering UEC services contains 2 key ambitions to help with system recovery –</p> <ul style="list-style-type: none"> • Patients seen quicker in ED: ambition to improve to 76% of patients being admitted, transferred or discharged within 4 hours by March 2024. • Ambulances attending to patients quicker: with improved response times for Cat2 incidents to 30 minutes on average in 2023/24. 	

	<p>To enable this improvement the NHS is committed to increasing UEC capacity, increasing workforce size and flexibility, improving discharge, expanding care out of hospital and making it easier to access the right care.</p> <p>In terms of the local infrastructure to help manage 2023/24 winter planning there is the Tees Valley Local Accident and Emergency Delivery Board (LADB) which is a system group that collaborates on the integration of high quality services in support off the wider UEC system. The System Control Centre (SCC) help to manage operation pressures on a day to day basis and the Incident Command Coordination Centre (ICCC) in the Tees Valley considers current and predicted capacity and demand pressures to support stakeholders on how to navigate pressures across the TV ICP.</p> <p>The LADB has developed a UEC Highlight Report to pull data from each partner and a supporting narrative to determine key risks. A system resilience template was developed to ensure the system was sighted on risks ahead of winter using Key Lines of Enquiry (KLOE's). From the 66 KLOE's identified 16 were already in place (blue), 36 were on track to be implemented within the timeframe (green) and 14 were on plan but had risks associated with delivery (amber). The amber KLOE's will be discussed in detail in the LADB who will ensure monitoring and delivery against each over the coming months.</p> <p>Historically, additional funding often arrives late and the LADB have implemented a suite of business cases which could be deployed at short notice if requires.</p> <p>The UEC Managed Clinical Network (MCN) is responsible for driving key schemes of the LADB and are currently undertaking a procurement process to commission a standardised UEC model across the North and South of Tees by 1st April 2024.</p> <p>In relation to the spike in the 2 new variants of Covid-19, AB asked whether these were expected in line with national levels and queried whether the vaccination booster programme was available. KH explained that work is underway to implement an accelerated booster programme in relation to both covid and flu vaccinations, predominantly focused for the time being for care home patients, the elderly and vulnerable patient groups.</p>	
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	<p>SBA highlighted the importance of getting key public health messages out for example keeping warm in winter.</p> <p>BC thanked CB for his presentation.</p>	
TVICP/23/31	Tees Valley Combined Authority (TVCA)	
	<p>Shona Duncan (SD) explained that the TVCA was set up in 2016 as a result of a devolution deal with the government with the view of working together with constituent partners to achieve greater economic growth in the Tees Valley.</p> <p>In relation to the skills and employment devolution deal the TVCA has responsibility for the devolved adult skills budget.</p> <p>Another responsibility of the TVCA is the UK Shared Prosperity Funding (UKSPF) of £4.8m which will support local residents to secure jobs, stay in work and progress their careers, including one to one support to help people overcome barriers to work such as skills or health problems. Focus is on wrap around support to mentor people to move towards the labour market and gain work.</p> <p>In terms of employer support, TVCA have a 7 point plan to work with organisations to:</p> <ol style="list-style-type: none"> 1. Scope requirements 2. Understand and agree roles, numbers and timing 3. Draft and agree a recruitment and training plan 4. Work with schools and agencies to raise awareness of opportunities, and holding bespoke careers fairs 5. Work with skills providers to identify and commission training as appropriate 6. Monitor progress of skills development and deliver a pipeline of applicants 7. Pre screen and perform initial interviews to provide candidates ready to recruit <p>Examples of the TVCA adult skills support in relation to health were shared with the group.</p> <p>DG noted that the TVCA are a key system partner.</p> <p>Action: It was agreed that the presentation could be shared with the group following the meeting.</p> <p>BC thanked SD for her presentation.</p>	
TVICP/23/32	Items for future meetings	
	<p>Dave Gallagher (DG) noted that the first few meetings of the Tees Valley Area ICP meeting had set the scene, but the key was to now develop a work programme to focus on how</p>	

	<p>we can play a part in improving the health and wellbeing of the population of the Tees Valley.</p> <p style="text-align: right;">ACTION</p> <p>Items for future meetings:</p> <ol style="list-style-type: none"> 1. Taking forward the 'at scale' work to improve life expectancy highlighted in the previous DPH presentation: <ul style="list-style-type: none"> - Mental Health (Suicide Prevention Joint Post) - Joint learning from approaches during COVID response - Health Checks – approach to identifying risk factors - Local alcohol work – a good example of a local focus sharing learning - Substance Misuse (Joint Drug and Alcohol related deaths work) - Local NHS Trusts – joint working across different geographies. 2. Serious Organised Crime 3. Healthwatch standing item 4. Healthwatch Youth Focus North East 5. Women's Health Strategy 6. NTHFT/STHFT Update 7. Dentistry 	
TVICP/23/33	Any Other Business	
	<p>The Chair noted there were no further items of business advised and thanked members for their attendance and contributions to the meeting.</p> <p>The meeting closed at 2.15pm</p>	
	<p><u>Next Meeting</u> Date: Friday 3rd November 2023 Time: 12-2pm Venue: Centre for Excellence in Teaching and Learning (CETL), Brierton Lane, Hartlepool, TS25 4BY</p>	



31.10.23

Signed: Date:
Cllr Bob Cook (Chair)

Councillor Mike Young
Leader of Hartlepool Borough Council
Civic Centre
Hartlepool
TS24 8AY

Tel: 01429 523500
www.hartlepool.gov.uk
Our Ref:
Your Ref:



Contact Email: leader@hartlepool.gov.uk

13th November 2023

Professor Derek Bell, OBE
Joint Chairman for North Tees NHS Foundation Trust and South Tees Hospitals NHS
Foundation Trust

Circulated via email - derek.bell2@nhs.net

Dear Professor Bell

Group Development and Partnership Agreement

This is a response to the consultation on the Group Operating model for North and South Tees NHS Trusts on behalf of the Health and Wellbeing board at Hartlepool Council.

As a place, Hartlepool has a proud history and is currently undergoing change with development projects and inward investment supporting a number of growth projects. However, Hartlepool faces a number of challenges associated with the health of its population exacerbated by high levels of deprivation and the lingering effects of the COVID-19 pandemic. It is therefore, vital that we have an excellent working relationship with our NHS colleagues who play an important role in improving the health of the population in the borough.

We therefore recognise the complexity of the current healthcare landscape and will welcome any changes that will help with the aim of reducing health inequalities across the Tees Valley and particularly in Hartlepool. We particularly welcome the engagement of partners in developing the clinical strategy and feel that the Health and Wellbeing Board has a critical role in this process. We also encourage you to take note of the local Health and Wellbeing Strategy to support this process.

Place based working is key to developing services and strategies for our population and great strides have been made in developing place based working in Hartlepool. We would seek reassurance that (within management and organisational constraints) this place based focus will continue with the development and transformation of services. As you will be aware Hartlepool residents hold a particular affection for the local hospital and it plays a key role in reducing health inequalities. To date we have had an excellent working relationship at a place level with the trust and we hope to see this continue in the future and to be able to support future developments.

Concerns have been raised by the fact that this reorganisation could lead to an organisation with a large footprint that then lacks local knowledge and intelligence that would influence service delivery. Whilst there are many reasons for facilitating a larger organisation, the needs of local populations are diverse and so engagement on a local level will be crucial to successful implementation of this programme. Recognition that a one size fits all approach may be an organisational facilitator at the expense of local efficacy is crucial.

Reorganising services can often lead to the focus of the organisations moving to the delivery of the reorganisation itself over day to day operating. It would be reassuring to better understand how the process will be managed to ensure that patient care remains front and centre. There will also be uncertainty for staff and that these are often our residents and we need to ensure they are supported and not disadvantaged by this move.

We have welcomed the attendance at the board by your Chair and Chief Operating Officer and will continue to welcome updates from your board and the opportunity to question them as the reorganisation continues. We look forward to you attending the board and being able to have the opportunity to continue to feedback views from Hartlepool.

Yours sincerely

A handwritten signature in black ink, appearing to read 'M. Young', with a long horizontal flourish extending to the right.

Councillor Mike Young
LEADER OF HARTLEPOOL BOROUGH COUNCIL
AND CHAIR OF THE HEALTH AND WELLBEING BOARD

From: BELL, Derek (NORTH TEES AND HARTLEPOOL NHS FOUNDATION TRUST) <derek.bell2@nhs.net>

Sent: 14 November 2023 11:21

Subject: RE: Partnership Agreement Signed by the Leader Cllr Mike Young

Dear Mike,

Many thanks for the letter and your helpful comments and concerns.

Importantly, we understand your concerns and will ensure on-going dialogue going forward and Stacey Hunter as the incoming group CEO I am sure will also be in touch.

Our partnership board is tomorrow and James can provide any feedback to you.

Regards

Derek Bell

HEALTH AND WELLBEING BOARD

4 December 2023



Report of: Healthwatch Hartlepool CIO

Subject: Healthwatch Hartlepool Annual Report

1. PURPOSE OF REPORT

- 1.1 Present and provide the Health & Wellbeing Board with a copy of Healthwatch Hartlepool's published Annual Report for 2022 – 23.

2. BACKGROUND

- 2.1 There is a local Healthwatch in every area of England. We are the independent champion for people who use health and care services. We find out what people like about services, and what could be improved, and we share these views with those with the authority to make change happen. Healthwatch also help people find the information they need about services in their area, and we help make sure their views shape the support they need.
- 2.1 The Local Government and Public Involvement in Health Act 2007, which was amended by the Health and Social Care Act 2012, outlines the main legal requirements of Healthwatch. This is underpinned by many other regulations, which give more detail about how activities should be undertaken.

3. PROPOSALS

- 3.1 Each and every year Healthwatch Hartlepool must publish an Annual Report by 30th June. This is a requirement under the Health & Social Care Act 2012. We articulate how we have been able to champion what matters to people and work with others to find ideas that work. We are independent and we do not represent ourselves, we publish our report as the voice of people. We aim to show we are committed to making the biggest difference to our communities. People's views always come first - especially those who find it hardest to be heard. As the only non-statutory body to have statutory responsibilities both nationally and locally, we have the power to make sure that those in charge of health and care services hear people's voices. As

well as seeking the public's views ourselves, we also encourage health and care services to involve people in decisions that affect them.

4. RECOMMENDATIONS

- 4.1 Members of the Health & Wellbeing Board are asked to comment on and note the Healthwatch Hartlepool Annual Report 2022 – 2023 (Attached).

5. REASONS FOR RECOMMENDATIONS

- 5.1 Local authorities must make provision for the following statutory activities and ensure their local Healthwatch publish an annual report:

- Promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services
- Enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved
- Obtaining the views of local people regarding their need for, and experiences of, local care services and, importantly, to make these views known to those responsible for commissioning, providing, managing or scrutinising local care services and to Healthwatch England
- Making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England
- Providing advice and information about access to local care services, so choices can be made about local care services
- Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England
- Making recommendations to Healthwatch England to advise the Care Quality Commission (CQC) to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about issues.
- Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively

6. BACKGROUND PAPERS

- 6.1 None

7. CONTACT OFFICER

Mr Christopher Akers-Belcher
Chief Executive - Healthwatch Hartlepool
Regional Coordinator – North East & North Cumbria (NENC) Healthwatch
Network

Healthwatch Hartlepool
Greenbank
Waldon Street
Hartlepool
TS24 7QS

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Visit: www.healthwatchhartlepool.co.uk

Together

**we're making health
and social care better**

**Healthwatch Hartlepool
Annual Report 2022–23**



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"In the last ten years, the health and social care landscape has changed dramatically, but the dedication of local Healthwatch hasn't. Your local Healthwatch has worked tirelessly to make sure the views of local people are heard, and NHS and social care leaders use your feedback to make care better."

Louise Ansari, Healthwatch National Director

Message from our Chairman

Hello everyone,

Here we are again, and another year passed since I last wrote about Healthwatch Hartlepool. It has been an extremely challenging year for us all. I firmly believe we have successfully delivered our statutory duties as we transitioned from working under the cloud of the COVID-19 pandemic to where we are now. We have seen ourselves facing more and more engagements and for this we are grateful.



On a positive note, we have continued to engage with residents and our volunteer steering group digitally. Learning throughout the year has confirmed our belief that communication is key and this was confirmed when we published our 'Discharge' report in respect of North Tees & Hartlepool NHS Foundation Trust.

We conducted much more work covering Enter & View activity across 5 residential care homes together with a visit to the Town's Urgent Care facility. We found the Urgent Care facility to be one that everyone involved should be proud of.

We even managed to fit in 3 town wide awareness raising events. These covered Community Mental Health Transformation, Nutrition & Dietetics and Men's Health. Our sincere thanks to North Tees & Hartlepool NHS Foundation Trust and Hartlepool Council's Public Health team for working collaboratively with us in informing residents what services are available across the town.

We again actively celebrated 'World Mental Health' day by collaborating with a host of partners through some very successful engagements. Summer also saw us launch our new Healthwatch Hartlepool website, which is now attracting many more visitors than previously. This is great source of information for sign posting residents to relevant services.

The Volunteer Steering Group remained active utilising monthly face to face meetings in addition to on-line meetings to carry out prodigious amounts of work and increase their own learning by welcoming guest speakers across the spectrum of Health & Social Care.

We found the last year challenging financially speaking. We have been able to weather this situation through judicious buying and prudent money management. We also relocated our premises to Greenbank in the centre of town and now enjoy being an even greater partner to the Voluntary & Community Sector. I must thank all the Board members who give their time unstintingly and are always there to help when needed.

Message from our Chairman

We have all had to welcome the new way of working under the Health & Care Act 2022. My sincere thanks also go to our Chief Executive Christopher and staff team whose roles have had to adapt to the new way of working in respect of the Integrated Care Board but they have certainly risen to the challenge.

Healthwatch Hartlepool would be nothing without our volunteers. We couldn't carry out the much-needed work without them, thank you. Their task over the next year will be to monitor our newly published work programme.

I am hoping it will be onwards and upwards in the next year and look forward to seeing you all at our next AGM.

Jane Tilly | Healthwatch Hartlepool Chairman



healthwatch

10
years

About us

Healthwatch **Hartlepool** is your local health and social care champion.

We make sure NHS leaders and decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.



Our values are:

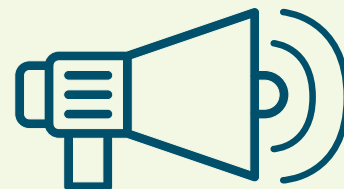
- **Listening** to people and making sure their voices are heard.
- **Including** everyone in the conversation – especially those who don't always have their voice heard.
- **Analysing** different people's experiences to learn how to improve care.
- **Acting** on feedback and driving change.
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

Year in review

Reaching out

1221 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.



150 people

came to us for clear advice and information about topics such as mental health and the cost of living crisis.

Making a difference to care

We published

7 reports

reports about the improvements people would like to see to health and social care services.

Our most popular report was

Hospital Discharge



Health and care that works for you

We're lucky to have

30 Volunteers

We're funded by our local authority. In 2022-23 we received

£116,150









We currently employ

4 staff

None of whom are full-time, who help us carry out our work.



How we've made a difference this year

Spring	 <p>Collaborated with the Council's Audit & Governance committee to examine the accessibility of services.</p>	 <p>We hosted an information event covering the topic of Nutrition & Dietetics. This was in partnership with Public Health & North Tees & Hartlepool NHS Foundation Trust.</p>
Summer	 <p>We launched our new website and now have an annual reach of over 5000.</p>	 <p>We visited both Stichell House and Warrior Park Residential Homes to examine the quality of care and dignity afforded to residents.</p>
Autumn	 <p>We launched our new project of Youthwatch across the Tees Valley with Youth Focus North East.</p>	 <p>We marked International Mens day by hosting a Mens Health Matters Event at Hartlepool College of Further Education. We focused on wellbeing and the need for screening. We also supported the Mental Health Forum in celebrating World Mental Health Day.</p>
Winter	 <p>We worked alongside the new Integrated Care Board to examine the 'Waiting Well' campaign and examined the North Tees & Hartlepool NHS Trust draft Quality Account.</p>	 <p>We arranged 6 focus groups to examine discharge from hospital as part of our research into patient experiences when leaving Hospital.</p>

10 years of improving care

This year marks a special milestone for Healthwatch. Over the last ten years, people have shared their experiences, good and bad, to help improve health and social care. A big thank you to all our Healthwatch Volunteers that have stepped up and inspired change. Here are a few of our highlights:

How have we made care better, together?

Vaccine confidence

As a key participant in the work of Covid Champions we shared the most up to date information with our volunteers and across our network helping to combat COVID-19 & promote vaccinations.



Dual Sensory Loss

Healthwatch Hartlepool and other Local Sensory Impairment Group Partners listened to the lived experiences of Hartlepool residents which led to a new Sensory Impairment Plan for Hartlepool.



NHS Dentistry

Healthwatch England confirmed there has been some progress in the reform of dental contracts and saw an additional £50 million made available to improve access to NHS dentistry. The insight from Healthwatch Hartlepool and the wider network has been a vital part of making that happen.



GP Access

Thanks to people sharing their experiences of accessing GP's, we have helped the Integrated Care Board (ICB) identify the problems patients constantly experience and pushed for improvements.



Community Mental Health

We collaborated with all Tees Valley Healthwatch organisations to work with Tees, Esk & Wear Valley Mental Health Trust that led to the reshaping of community based mental health services.



10 – Celebrating Success

On Wednesday 8th March 2023 fourteen local Healthwatch from across the North East & North Cumbria (NENC) came together to celebrate its 10th birthday. The fourteen Healthwatch work collectively across the NENC Integrated Care System (NENC ICS) region to add value and service user voice to the changing health and social care landscape.

Staff past and present, Board members, volunteers and partner organisations came together to share in the success that Healthwatch has achieved to date.

Since the commencement of Healthwatch there has been a strong commitment to ensure that the voice of service users and the public remains embedded in the decision-making process of health and care services, championing the views of those that access services to ensure service delivery and changes made promote the best wellbeing outcomes for individuals, carers and families.

With the introduction of the Integrated Care Board (ICB) it is recognised that only through partnership working, meaningful engagement and combined resources will we make a positive difference to the health, wellbeing, and care of the communities we represent.

The event provided an opportunity for reflection of the journey of Healthwatch so far. The trials and tribulations, the growth, the changes and more importantly the successes that demonstrated the passion that remains with us on our journey to change.



10 – Celebrating Success

The day was hosted by Christopher Akers-Belcher – Chief Executive of Healthwatch Hartlepool. Christopher is also the Regional Coordinator for the North East & North Cumbria Healthwatch Network. Throughout the day guest speakers spoke of their own experience and involvement with Healthwatch and shared their vision and hopes for the future.

Jennifer Clark and Delana Lawson from Healthwatch England presented detail of our vision, mission and values, providing reference to our changing world with its challenges and opportunities and building on our success with three key objectives.

1. To support more people who face the worst outcomes to speak-up about their care and access the advice they need.
2. To ensure care decision-makers act on public feedback and involve communities in decisions that affect them.
3. To be a more effective organisation and build a stronger Healthwatch movement.

10 – Celebrating Success

"What an incredible way to mark 10 years of Healthwatch in the region. It was a privilege to be invited to join in.

I am as ever blown away by the passion, dedication, and talent of Healthwatch volunteers, boards and staff members. People working within limited resources to create real changes in people's lives. This Healthwatch region has moved deftly towards becoming a truly effective collaborative in a way other regions have struggled to do. It was clear to me how the Healthwatch is valued by the ICB, providers and partners. Personally, this is my home region, where I started my own Healthwatch journey, and I couldn't be prouder of how far you have all come in the last decade. I look forward to seeing what the next decade brings."

Jenny Clark

Deputy Head of Engagement and Sustainability, Healthwatch England

"Thank you so much North East. What a fabulous day, well done to you all. You have set the standard for celebrations and collaboration nationally. I heard some interesting conversations throughout the day and during the networking session and am looking forward to the implementation of ideas we should take forward as a region."

Delana Lawson

**Quality Assurance & Regional Manager (North East, Yorkshire & Humberside)
Healthwatch England**

"I'd like to thank the various Healthwatch organisations across Tees Valley for inviting me to the 10th anniversary event. I'd particularly like to say thank you for the opportunity to talk about the collaborative work that we have undertaken to ensure the patient voice is at the heart of the Community Mental Health Transformation Programme that is now underway. I am looking forward to the continued input of Healthwatch as we progress with the agreed changes in our local communities, and I very much welcome their continued support to understand and address the key health inequalities that impact upon access, effectiveness, and experience of our mental health services."

Dominic Gardner

**Care Group Director MHSOP / AMH, Durham Tees Valley Care Group
Tees, Esk and Wear Valleys NHS FT**

10 – Celebrating Success

We were delighted that Claire Riley from the NENC ICS was able to attend the event and share with us her ambition for the future of health and care services. With the ICS transformation underway Claire spoke of her desire to ensure insight and feedback from the public was used at both a national and local level. Claire welcomed the opportunity she has had to work alongside Healthwatch and is looking forward to continued collaboration that will support system wide planning and service delivery.

Claire acknowledged there will be challenges and 'hard conversations' along the way and that positive system change will only be achieved through meaningful partnership working. Claire welcomed the opportunity to answer questions raised and provided honest feedback on the challenges ahead, with a determination to ensure positive outcomes for health and care services.

"Thank you for inviting me to join the Healthwatch 10-year celebration. It is important to celebrate the great work of the Healthwatch teams and the impact this has had on patients, carers and the public. Now we have the opportunity to learn from this work and ensure the voices of our communities are at the heart of health and care services."

Claire Riley
Executive Director of Corporate Governance, communications and involvement,
NENC ICS





Healthwatch Hero

Celebrating a hero in our local community.

Bernie Hays – Healthwatch Volunteer

Bernie is an exceptional individual who has become an integral part of the Healthwatch Hartlepool family. We always say Healthwatch exists for everyone and there is no fixed membership but rather people should become involved depending on our work programme and the topics that they feel most passionately about. Bernie has embraced our ethos and believes wholeheartedly that by being involved we can together create change. We cannot thank him enough for the dedication he has shown to Healthwatch Hartlepool and his immense contribution within our Volunteer Steering Group.

Bernie's story:

"I first heard about Healthwatch when I registered as a carer for a family member and started to receive their monthly newsletter. At that time, I was working towards my retirement with the NHS. As a volunteer I have been able to help people have their say on health & social care. It has also enabled me to be part of a team, developing new skills and gaining experience from other health professionals and outside agencies.

With other members of the team, I have completed a number of 'Enter & View' visits to Care Home settings, listening to the views of people whom are in Residential Care and rehabilitation beds awaiting to return back home. It has also given me the opportunity to speak with family members and their carers. It has given me the opportunity to write reports on the outcome of the visit.

Most recently I have been part of the team looking at discharge planning from hospital. Meet and greet with hospital staff, patients and families, hoping to make hospital discharge safer and smoother from admission into hospital to discharge back into the community. Each month we have a Volunteer Steering Group and meet up to discuss any health and social care matter.

We also have an online monthly (coffee morning) and a guest speaker is invited. Discussing a number of topics: including, Mental Health, Drugs and Alcohol, Safeguarding and any other Health and Social Care needs. So if you want to develop new skills and meet new people:

Become a volunteer and help your community improve health & social care."



healthwatch

10
years

Celebrating Heroes in our local community.

The Hartlepool Lived Experience Forum has championed the co-production & the active involvement of people with lived experience of mental illness (including carers/families) in the transformation of Community Based Mental Health services across Hartlepool and the wider Tees Valley. It is widely accepted that such involvement in the design of services has been shown to empower service users, increase the quality and efficiency of services and improve clinical outcomes.

Teesside Community Mental Health Transformation

Lived Experience Representatives – These include Tees, Esk & Wear Valley (TEWV) NHS Trust Involvement members: Sophie, Sandra, Michael, Aaron TEWV staff and partners within the community who have been instrumental in the reshaping of Community Mental Health Services across Teesside, sharing their lived experience & insights because they wish to make a difference to others.

"We are now in year 3 of the Teesside Community Mental Health Transformation. We became involved in the project as it was a great opportunity to use our lived experiences to help influence positive change. As part of the project, we have been involved in the design of the new model for community mental health services and our input has helped shape the direction of travel. We work alongside the NHS, Statutory Services, Local Authority and Voluntary, Community and Social Enterprise (VCSE) as equal partners, working towards a shared vision/goal."

"It has been really empowering being involved in this work, it has supported my own wellbeing, increased my confidence, gave me purpose and lots of great experience".

The aim of the Tees Valley Community Mental Health Transformation:

- Working with partners and people with lived experience to improve care and support for people in the community.
- To deliver a new community based mental health offer that improves the lives of people with severe mental health problems.
- To work in close partnership with all stakeholders, including service users and carers to design and deliver personalised care.
- To meet the diverse needs of the local population – going beyond treating symptoms to improve wellbeing.
- To ensure people don't fall between the gaps in services and get timely access to the care they need.

"A critical part of this work is building trust, good relationships and feeling safe to challenge. We really value our relationships as lived experience representatives and we are peer support for each other. Maxine Crutwell, Community Transformation Programme Manager, recognised the importance of the lived experience voices from the start of the programme and ensures we are always involved as key partners and our voices/thoughts/opinions are heard and recognised, beyond any tokenism. Maxine has a true understanding of co-production/co-creation and is focused on a person-centred approach. It's not always easy, change takes time, but we all support each other as one team."

Healthwatch Hartlepool would also like to recognise the immense amount of work & leadership provided throughout the journey of Community Mental Health Transformation by Maxine Crutwell - Programme Manager (Community Transformation Tees Valley) Tees, Esk & Wear Valley Mental Health Trust.

Celebrating Heroes in our local community.

Peer Support

As part of the Community Mental Health Transformation, the NHS England Framework recognises the importance of lived experience and have allocated funding towards expanding the peer support workforce. Belinda Brooks, TEWV Peer Support Lead for the Teesside Community Mental Health Transformation has been pivotal in moving this forward, using her own lived experience and working collaboratively with lived experience representatives, TEWV staff and Local VCS organisations across the Tees Valley to understand how best to utilise this funding in co-producing the service specification for delivery of 121 place-based peer support across the Tees Valley. There is also work ongoing looking at creating a Peer Support Network.

The Hartlepool Lived Experience Forum

"The Forum was created to ensure that people with lived experience/carers/families are at the heart of all future mental health services and are able to support delivery in a peer role, having knowledge and experience that can help to make services the best they can be, which is key to drive the Community Mental Health Transformation.

Supporting people with lived experience to have a voice and say, in how services are delivered to them/for them will enable people to become an active participant in their recovery."

Do you, or someone you care for, have lived experience of poor mental health? Use your knowledge and experience to help transform adult mental health services in Hartlepool? If you would like to come along to the next lived experience forum, you would be more than welcome.

The Hartlepool Lived Experience Forum is facilitated by Catherine Wakeling - Starfish Health & Wellbeing; Leigh Trimble - Red Balloons; Belinda Brooks - NHS; Sophie & Sam - Lived Experience Representatives all of whom have their own experience of living or supporting loved ones with poor mental health. The Forum is hosted by Trevor and Angela - LilyAnne's café and supported by Tony Leighton - Healthwatch Hartlepool.

We are really grateful that these organisations & individuals agreed to setup the lived experience forum in Hartlepool, they are really passionate about what they do and really want to embed lived experience voices at the heart of all service design. It is built on a strong foundation of team working, trust and relationships and is a great example of partnership working and co-production within the community and a new way of working, really focusing on the needs for the individuals and ensuring everyone's voices are heard.

The Lived Experience Forum is a really friendly, supportive and safe environment, where people with lived experience can speak openly and honestly without judgement, to use their experience/expertise/insights to help improve community mental health services going forward. Building a strong foundation of trust, confidence and mutual respect. The lived experience forum approach is very proactive, its focused on how we can make services better for people, understanding the barriers and looking at ways to overcome them and explore different ways of working.

The direction of this group will be led by the lived experiences voices. They have a really positive approach/energy which is reflected in the group, it is an amazing collaborative approach all working to the same goal. It is really important that we manage expectations, things won't change overnight, but our voices are so much more powerful together. The group also really valued coming together with peers who also have lived experience.



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years

Celebrating Heroes in our local community.

Feedback from people who have attended the lived experience meeting:

"It is amazing to come together, feeling that our experience is valuable and will make a difference to others."

"At first I was not sure about it (The Forum) but I feel connected to others by our experience"

"It was difficult to speak at first, but now I have been to a couple of sessions, people help me to feel safe, to speak and talk about my experience."

"Well Done, I think you steered us really thoughtfully and I was very moved by all of the stories and sharing"

"I found it really brave of them to speak, it made me feel I can speak too."

"Being able to be part of the Hartlepool Lived experience Forum has encouraged me to speak and see I have knowledge that can help others. It has given me the courage to attend other community meetings and share my views."

We would like to show our appreciation for everyone who have been involved in the lived experience forum to date, for giving their time voluntarily to make a difference for others, we look forward to working with you all going forward. Everyone involved is determined to ensure people with lived experience feel valued, respected and most importantly have a voice.

The Forum will learn and adapt as we go along. It will continue to grow; it will keep evolving and learning based on feedback from the group. This will ensure that lived experience voices are at the heart of all services.

It is so important that service users/carers have a voice. We always need to understand different perspectives and ensure that we are representative of our communities, if you require any further information or wish to become involved, please contact Tony Leighton at Healthwatch Hartlepool on telephone number 0800 254 5552 or Catherine Wakeling at Starfish 01642 672987. There is no pressure, you can come to the meeting and listen. If you prefer, representatives could give you a call, meet 121 or send you a copy of the questionnaire. We are completely flexible, you can get involved as much or as little you would like, there is no pressure. Any contribution is greatly appreciated. Your wellbeing is priority. We can meet anyone before the meeting and offer support during and after the meeting. We would welcome any new members with lived experience to the group.

"Everyone involved is working together as one system to meet the needs of the individual and transform services"



Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to services and help them improve.

Advocating for better Hospital Discharge

Healthwatch Hartlepool recognises that many people in Hartlepool are significantly affected by health inequalities and high levels of ill-health. The delivery of supportive and appropriate hospital discharge services are vital and play a major part in ensuring patients experience and subsequent recuperation are maximised.

In March 2023 Healthwatch Hartlepool published our comprehensive report in respect of Hospital Discharge following consultation across the town and at North Tees hospital. Patients, Families, Carers, Care Homes & Care providers were all given the opportunity to participate complemented by visits from Healthwatch Hartlepool to the Discharge Hub.

Our survey and consultations highlighted the following key areas:

Our findings demonstrate that significant strides have been made in many aspects of the discharge process since our previous investigation in 2014. Most noticeable of these is the progress that has been made in developing integrated working practices which have resulted in a much-improved collaboration between health and social care stakeholders in the discharge pathway.

The co-location of health and social care staff, the development of the Integrated Discharge Team and ISPA have all contributed to the development of closer working relationships and understanding of the various challenges and complexities different partners face in the delivery of an effective, patient centred discharge experience. Also, the development of services such as the Community Respiratory Service have ensured a seamless transition into post discharge patient support and ongoing condition based treatment.

Further to this, the continued use of SystmOne and the adoption of the OPTICA system, a secure Cloud application, which tracks all admitted patients and the tasks relating to their discharge in real-time through their hospital journey has greatly enhanced the potential to plan and co-ordinate patient discharge. It also enables up to date information to be shared and utilised by partners from all sides.

However, our research also shows that there are still challenges to overcome. Our investigation has shown that a significant number of patients do not feel involved in the planning of their discharge and in some cases, arrangements have not been fully discussed until they are about to leave hospital. Some patients have told us that they were given little information about their forthcoming discharge and subsequent care arrangements, whereas others have said that they and their families were fully involved in planning their discharges from the early stages of their admission.

As so often is the case, communication is the key to a successful discharge, ongoing patient recuperation and minimising the chance of re-admissions. Work has already started to identify improvements to patient communication through the North Tees & Hartlepool (NTH) and Emergency Care Improvement Support Team (ECIST) improvement project "The 4 Patient Questions" which is looking at ways of improving consistency of information given to patients during non-elective inpatient stays.

Advocating for better Hospital Discharge

Communication must be sensitive to the needs of the patient. If a patient is Deaf, interpreter support must be made available at all stages of the discharge planning process in order to ensure that the patient is involved in and aware of their discharge arrangements. Support must also be provided to patients with neurological conditions such as dementia to ensure they are aware of what is happening and helped at key times to avoid undue stress and anxiety. Family members and carers are key partners in such cases and should also be kept regularly informed and involved. Johns Campaign already provides the framework around which good practice can be developed.

Some patients have reported delays in changes to care packages being implemented post discharge and long waits for equipment and adaptations. A particular area of concern are the long waits which some reported for OT assessments, again leading to delays in the introduction of much needed adaptations and equipment.

Communication issues are also highlighted by care homes and domiciliary care providers. Information often reported to be limited around patient discharge processes and arrangements. In order for care homes to be ready and prepared to receive residents back to their home adequate notice is needed to ensure paperwork is completed and changes to medication and care packages are implemented immediately and safely.

The homes also expressed concerns that there had been occasions on which they were worried about the fitness of a resident to be discharged back to the home, again emphasising the need for good communication in the run up to discharge. Finally, some homes raised concerns about lack of clarity around medication changes in discharge letters and DNAR's not being returned with the resident, again highlighting the need for improved communication.

Visits to the Discharge Hub left us questioning the suitability of the current location. The staff and volunteers all provided excellent care and with the provision of snacks and drinks efforts have been made to make the patient stay as comfortable as possible. However, the design and co-location with cardiac patients is not appropriate and the long-term location of this service needs to be reconsidered. Patient dignity is paramount at all stages of their stay in hospital, and instances were observed during our visits in which the layout of the Hub limited the ability to deliver to the highest standard.

Many patients who attended the Discharge Hub, reported long waits for medication and transport. Timely availability of medication still appears to be a significant cause of extended stays in the Discharge Hub, and on one of our visits we observed the nurse on duty having to go to pharmacy to collect a patient's medicines. One would hope that the enhanced virtual planning tools which are now available and improved co-ordination could to some degree help ease these long-standing issues.

Advocating for better Hospital Discharge



Key findings from patient/family questionnaires

- A high number of patients reported that their discharge arrangements had not been discussed with them or family members until their actual day of discharge and patients reported that they had received no information about discharge procedures or what would happen on their return home during their stay in hospital.
- 25% of patients reported that they had waited over 2 hours in the Discharge Hub before being formally discharged and able to return home.
- The main reasons given for delays at the Discharge Hub were having to wait for medication, having to wait for transport or having to wait for both medication and transport issues to be resolved.
- Patients reported that they had found their stay in the Discharge Hub to be uncomfortable, and said that it lacked privacy as confidential discussions could be overheard.
- 35% of patients reported that they considered the supply of medication they had received when discharged to be insufficient and, in several cases, not immediately available.
- Several patients reported delays in post discharge OT visits and subsequent delays in receiving necessary equipment. This led to some patients reporting that they had to purchase equipment privately as they were unable to wait for the OT visit and assessment.
- Feedback on post discharge care and support arrangements were variable, and patients said that new care and support arrangements were not immediately actioned following their discharge home.
- It was reported that interpreters are not always present to assist Deaf patients to participate in their discharge planning arrangements and vital information, such as discharge letters are not provided in a format which is accessible to Deaf patients.
- Overall, patient rating of their discharge experience varied considerably, with 37.5% of patients rating the experience as excellent or good, and 37.5% of patients reporting their experience as being poor or very poor.
- A similar picture emerged regarding experience of post discharge health/social care with 25% of patients rating the experience as excellent or good and 25% of patients reporting their experience as being poor or very poor.

"People are given a discharge letter with a landline telephone number so they cannot make contact if they have any health problems following discharge. Hospitals are not routinely booking BSL Interpreters for discharge so the Deaf patient do not understand what information they must follow because this is only explained in English."

Advocating for better Hospital Discharge

What difference will this make?

Following the publication of our report the Chairman of North Tees & Hartlepool Foundation Trust invited Healthwatch Hartlepool to a meeting at the Trust with himself and the Managing Director. Healthwatch Hartlepool welcomed their acceptance of the report and the creation of a working group to monitor the learning from our report and implementation of the key recommendations:

1. Communication and involvement of patients in planning their discharge and subsequent post discharge care arrangements happens consistently as per the requirements of the North Tees and Hartlepool Discharge Policy Framework and guidelines contained within the Hospital Discharge and Community Support Guidance (DHSC – March 2022).
2. Improved information outlining the discharge process and post discharge care and support is produced and made available to all patients entering North Tees and Hartlepool Hospitals for non-elective procedures. We recommend that the Wirral NHS Leaflet – Your Discharge Explained as an example of good practice. A copy of the leaflet can be found at Appendix 1.
3. Ensure patients are informed of the availability of post discharge support services such as the Community Respiratory Service that is available specifically for those with breathing difficulties and COPD. This will help to reduce patient readmissions to hospital and facilitate effective recuperation.
4. Alternative/easy read formats should be produced of all discharge related materials and support such as interpreters booked to ensure Deaf patients and patients with other languages and support needs are not excluded.
5. Ensure that the principles of John's Campaign are consistently integrated into discharge arrangements in order to maximise support for patients who are living with dementia and similar conditions.
6. Wherever possible, patient transport and medication requirements should be finalised and in place in advance of the day the patient is due to be discharged.
7. Current operational practices relating to the Discharge Hub and Pharmacy should be reviewed, and the potential to use of Hospital Volunteers to collect medication maximised in order to reduce medication related discharge delays.
8. Unless there is a justifiable reason not to do so, patients discharge should be via the Discharge Hub or Transport Hub in line with national guidance.
9. Consideration should be given to the suitability of the current location of the Discharge Hub, and efforts made to find a more appropriate bespoke location which gives patients a more comfortable and dignified experience.

Advocating for better Hospital Discharge

What difference will this make?

10. Staffing levels should be reviewed together with the wider review of the Discharge Hub arrangements recommended above. Levels of occupational therapy and physiotherapy support should also be at a level which ensures equipment required by patients to assist their recuperation is in place and available when discharged home in order to minimise the possibility of re-admissions.
11. Consideration should be given to improving communication with care homes and care providers to ensure the best possible transfer of care arrangements are always in place. We suggest that a workshop should be considered, at a future Care Managers Forum which is facilitated by Hartlepool Borough Council, focusing on how future communication processes between the Trust and care sector can be developed and improved in relation to discharge and other shared arrangements. Healthwatch Hartlepool are willing to be involved in the design and facilitation of the event if required.
12. That Healthwatch Hartlepool and health and social care colleagues involved in the delivery of the patient discharge pathway meet in six months to review progress.

Advocating for better Hospital Discharge



Firstly, on behalf of North Tees and Hartlepool Foundation Trust I would like to thank Healthwatch Hartlepool, who have collaborated with both the Local Authority in Hartlepool and ourselves, to produce this report, which reviews the current discharge arrangements and processes for patients in Hartlepool.

The Trust welcomes and agrees with the findings including that significant strides have been made in many aspects of the discharge process for our patients since the previous investigation in 2014. Most noticeable of these is the progress that has been made in developing integrated working practices, which have resulted in a much-improved collaboration between health and social care stakeholders in the discharge pathway.

However, as an organisation we recognise that there remain challenges to overcome for patients, their families and carers at all stages of the discharge process. The valuable insights and recommendations alongside information collected during the research process, has already enabled the Trust to develop a comprehensive improvement and development plan, which includes:

- Communication and involvement of patients in planning their discharge and subsequent post discharge care arrangements;
- Improving information outlining the discharge process which will be available to all patients entering North Tees and Hartlepool Hospitals for non-elective procedures;
- Ensuring patients are informed of the availability of post discharge support services
- Providing alternative/easy read formats of all discharge related materials and support such as interpreters booked to ensure deaf patients and patients with other languages and support needs are not excluded;
- Ensuring that the principles of John's Campaign are consistently integrated into discharge arrangements
- Wherever possible, patient transport and medication requirements being planned in advance of the day the patient is due to be discharged;
- Review of current operational practices relating to the Discharge Hub and Pharmacy, exploring the potential to use Hospital Volunteers to collect medication;
- Patient discharge via the Discharge Hub or Transport Hub in line with national guidance;
- Estates review to ensure suitability of the current location of the Discharge Hub;
- Workforce review in support of the Hub
- Review of communication with care homes and care providers to ensure the best possible transfer of care arrangements in collaboration with Healthwatch;

Advocating for better Hospital Discharge

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The improvement plan has already been presented and ratified at the Trust Quality Council chaired by the Chief Nurse and Chief Medical Officer and will be presented to the Quality Committee in July 2023.

Finally, we would welcome Healthwatch Hartlepool, health, and social care colleagues involved in the delivery of the patient discharge pathway to meet again in six months to review progress.”

Neil Atkinson – Managing Director
North Tees & Hartlepool NHS Foundation Trust

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Advocating for better Hospital Discharge



In the last twelve months Healthwatch have supported the health and adult social care system by undertaking a comprehensive investigation into hospital discharge arrangements from North Tees and Hartlepool Hospitals. Moreover, following a detailed analysis and discussion with representatives from the Council's Adult and Community Based Services Department and North Tees and Hartlepool NHS Foundation Trust, Healthwatch have produced a report which includes a series of recommendations regarding changes and developments which are being considered in order to improve care provision and the person's and family carers experience.

Both the Council and the Foundation Trust found the constructive feedback to be extremely valuable in determining next steps and how the broader health and social care system needs to adapt to meet the challenges emerging following recovery from the Covid pandemic.

This is an excellent example of co-production and collaborative working that will deliver real improved outcomes for local people, and the contribution from Healthwatch was much appreciated."

**John Lovatt – Assistant Director (Adult Social Care)
Hartlepool Borough Council**



Positive changes for Deaf people & those living with sensory loss

Hartlepool Borough Council commissioned a strategic Joint Sensory Support Plan for local people who are Deaf, deaf, deafened, blind and partially sighted and those living with combined sight and hearing loss, and for all organisations working with and supporting them. The plan was adopted in 2022.

Healthwatch Hartlepool was a key supporter of the work from its inception. They worked closely alongside the coordinating organisation Hearing Impairment – Visual Impairment UK (Hi-Vis UK) and other partners to create this unique, comprehensive approach to local sensory loss support. Healthwatch Hartlepool also helped ensure local people's views and experiences were always at the heart of the plan.

Healthwatch Hartlepool's contribution included being part of a key sub group which devised and published a groundbreaking report and practice guidance: "Making Sensory Friendly Public Places".

"Healthwatch Hartlepool jointly designed and delivered a pilot training course with Hi-Vis UK for local authority staff in the Council's community facing hubs. This established a learning programme to support and guide staff to make change happen on the ground.

A key aspect of the plan was the establishment of a stakeholder partnership – a forum for the full spectrum of organisations of and for people who are Deaf, deaf, blind, partially sighted, and those living with combined sight and hearing loss.

The partnership includes: Hartlepool Borough Council, Hi-Vis UK, Healthwatch Hartlepool, Hartlepool Vision Support, Hartlepool Deaf Centre, North Regional Association for Sensory Support, Hartlepool Carers, Teesside Local Pharmacies Committee, North Tees and Hartlepool NHS Foundation Trust, Incontrol-Able, Community Led Inclusion Project, 1 Heart – 1 Mind – 1 Future.

The work is ongoing and Healthwatch Hartlepool continue to play a full and active part in this journey."

Bernard Quinn – Chair of JSSP Steering Group

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Positive changes for Deaf people & those living with sensory loss



Another challenging year for Hartlepool, including supporting phase 3 work on the local Mental Health plan. The basis of the work being formed as a result of the Healthwatch local consultation and engagement work. Progress has also been made in taking positive steps to implement the local Joint sensory support plan and local action plan. Healthwatch being key to ensure that the local voice is heard.

Special thanks once again to the staff and volunteers at Healthwatch Hartlepool for their continued support, professional challenge and curiosity.”

Neil Harrison – Head of Safeguarding & Specialist Services
Hartlepool Borough Council



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Joint Sensory Support Plan on a Page



LONG TERM CHANGE

Establish a **Sensory Support Coalition** of public, independent and VCSE organisations to **work together for long term change**.



IMPROVE ACCESSIBILITY

Work with local sensory support organisations to help us **improve accessibility**, co-monitor / co-develop our sensory / Deaf support plans.



RAISE AWARENESS AND SKILLS

Work to develop the sensory and Deaf **awareness, skills, and knowledge** of local health and care services workforce, the independent and VCSE sectors and in the wider community.



IMPROVE ACCESS TO INFORMATION

Work to improve access to information **and to communication support** in health and care services including compliance with the Accessible Information Standard 2016.



RAISE NUMBERS IDENTIFIED & SUPPORTED

Work to increase the number of **people identified and supported** with single and combined sensory loss including carers and parent-carers where sensory loss/Deaf is involved.



IMPROVE HEALTH AND WELLBEING

Work to improve accessibility of **learning, leisure and fitness** services and facilities, wherever these services are provided.



CONTINUE THE CONVERSATION

Consult further to fill gaps in our understanding e.g. carers, **co-create a local sensory support delivery plan**. Continue conversations with stakeholder groups and across the wider community.

Three ways we have made a difference for the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

Creating empathy by bringing experiences to life



It's important for services to see the bigger picture. Hearing personal experiences and the impact on people's lives provides them with a better understanding of the problems.

Healthwatch Hartlepool shared with North Tees & Hartlepool Foundation Trust the experience of 'lung health' patients, attending appointments at hospital. The location of the department within the hospital meant such patients attending had a long walk to be seen. Healthwatch Hartlepool ask if the patient transport facility would allow them to be dropped off closer to their appointment location could be provided. We raised this via the Trust's Quality Account and they introduced a new drop off point and also new signage has been erected to point patients to the nearest entrance for Lung Health when travelling by car, to ensure little walking distance as possible.

Getting services to involve the public



Services need to understand the benefits of involving local people to help improve care for everyone.

Healthwatch Hartlepool is represented on the Governing Body of North Tees & Hartlepool Foundation Trust. Through our work representing the views of the public the Trust approached Healthwatch Hartlepool to undertake further consultation in the community, particularly with the seldom heard. This will fulfil the Trust's strategic aim of 'Putting our population first' and their priority of delivering People-Centred-Care.

Our consultation proactively seeks feedback, involves people at every stage of care, and we will ensure services are accessible and inclusive for all (dementia, learning disability & autism and Mental Health)

Three ways we have made a difference for the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

Improving care over time



Change takes time. We often work behind the scenes with services to consistently raise issues and bring about change.

Over the years Healthwatch Hartlepool has been raising the issue of GP Access and highlighting the problems some residents experience. Healthwatch Hartlepool published a GP Access report in March 2022, outlining key headline areas for improvement which was shared and formally acknowledged by the ICB in June 2022.

Whilst many of the key themes were already identified by the ICB and nationally by NHS England, the ICB valued the report from Healthwatch and has used the recommendations to ensure a continued focus on the work to deliver improved access for our community.

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Three ways we have made a difference for the community

“It’s important for services to see the bigger picture. Hearing personal experiences and the impact on people’s lives provides them with a better understanding of the problems. The ICB is pleased to share that further progress has since been made on these key areas as follows:

- *Telephony access – investment has been made available locally and nationally to support practices move to cloud based technology, with added call back and call waiting functionality to improve the patient experience of making a phone call to their general practice. The data intelligence functionality of cloud-based telephony will also help practices to understand better the demand and to manage capacity accordingly*
- *Enhancing access – new arrangements have been in place since October 2022 offering patients additional appointments on an evening and weekend.*
- *Annual health checks – across Hartlepool, approximately 81% of learning disability health checks were completed, which was an improvement on the previous year. Progress and improvements continue to be pursued led by the Mental Health commissioning team and the clinical lead for LD.*
- *Digital communications – patients who are able to use digital technologies are encouraged to sign up via the NHS App or practice websites to use digital services such as online consultations, electronic repeat dispensing, booking and cancelling appointments and viewing their patient record which can help with test results to minimise telephone calls. All practices are equipped to also use SMS text messaging services and many use this to offer specific appointments to patients to book for things like flu clinics or long term condition reviews*
- *Timely appointments – most practices now offer access to a diverse staffing model of skilled and competent clinicians and allied health professionals, including advanced nurse practitioners, nurse prescribers, physiotherapists, social prescribing link workers, mental health workers and clinical pharmacists in addition to GPs. Appointments will be offered to patients to see the most suitable person for the clinical need which may not always be a GP, at a time clinically necessary for the need. Patients will be advised on first contact with the practice how their request will be managed.*

There is considerable work being undertaken currently as part of the national 'Delivery plan for recovering access to primary care' and the ICB will be pleased to share progress with Healthwatch later on in the year as these plans are developed and implemented.”

Emma Joyeux
Commissioning Lead – Primary Care
North East & North Cumbria Integrated Care Board



Hearing from all communities

Over the past year we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently, to gather their feedback and make sure their voice is heard and services meet their needs.

This year we have reached different communities by:

- Engaging with residents in sheltered accommodation as part of our consultation on hospital discharge.
- Held a weekly drop-in Healthwatch surgery at the town's Central Hub to offer advice & information on all aspects of Health & Social Care.
- Embedded the voices of local people in the crafting of our work programme. Ensured the community have been heard by local NHS leaders and ICB through our Healthwatch Network.

Better care for All

Healthwatch Hartlepool is part of the Hartlepool Health & Wellbeing Alliance. The alliance has been operating over the last two years. Developed from partnerships made during the Covid Lockdowns it meets monthly (with additional sessions to deal with specific issues or challenges)

It is an independent, open and inclusive partnership focused on working collaboratively to improve the Health and Wellbeing of all those living and working in Hartlepool.

It welcomes all voices when making plans and turning them into action. Mental Health to Dentistry, Disability to Digital Support Services, looking at what's working and what's not as well as planning for the future.

There are over one hundred individuals and organisations involved including:

Hartlepool United Sports Foundation, Payout Hartlepool, Changing Futures North East, West View Advice & Resource Centre, PFC Trust, Let's Connect, Something Positive Solutions, Hospital of God/The Bridges, Hartlepool Sport, LilyAnnes, Incontrol-able, Hartlepool Carers, Hartlepool Hospice, Hartlepool Sensory Spot, Families First, Hartlepool Baby Bank, Hartlepool Action Lab as well as institutions such as the local authority, Tees Esk & Wear Valley Mental Health Trust, Social Prescribers, Healthwatch Hartlepool, Hartlepool College of Further Education and Teesside University plus anyone else sharing our values who would like to get involved.

Mental Health Support

Healthwatch Hartlepool is incredibly lucky to have Zoe Sherry as our Mental Health Lead. Zoe not only undertakes this role with passion but is also Chair of Hartlepool's Mental Health Forum and a Governor at Tees, Esk & Wear Valley Mental Health Trust. Zoe brings an unmeasurable amount of skill, expertise, intelligence and knowledge to her role and Healthwatch Hartlepool is most certainly the beneficiary.

"The last year has been different for us in Healthwatch Hartlepool as we pick up the pieces post Covid. Some things are reverting to as they were before the pandemic and at least some Mental Health Forum meetings are again face to face, which I find so much easier and pleasant.

Once again, we were delighted to be able to fully celebrate World Mental Health day in October. This time as there was no access to the Borough Hall we were pleased to have the use of Hartlepool's Town Hall Theatre. This being very central and accessible, proved popular and there was room for all our usual activities.

We were kindly donated refreshments, soup with a bun and unlimited teas and coffees. The tables with our green cloths and the green and purple UNISON balloons made the room welcoming and cheerful. There were many information stands provided by various organisations who have links to mental health and they were busy throughout day.

We had activities and entertainment. There were mindfulness sessions as well as singing and dancing. There was a Zumba class as well as social dancing on the stage, which was very popular. Two choirs, The Blue Rose choir and St Teresa's school choir performed and were well received.

At the end of the day the school choir crocodiled out of the hall with the balloons over their shoulders. A wonderful sight of our children actively involved in celebrating such an important day whilst raising awareness. St Teresa's school also kindly held an art competition this year, the subject this year was 'The Queen' We received a delightful set of art works, with the winner depicting the Queen in a purple outfit with a corgi.

A raffle was held of donated prizes which we hope to repeat this year too. But of course, we could not do this without the support of Healthwatch Hartlepool, Hartlepool Borough Council and our invaluable volunteers. Thank you.

The Mental Health Forum is also looking forward to widening its remit and being involved with the Council's Health Scrutiny function over the coming year. We have been able to book the Town Hall for 10 October 2023 so please support us in any way you can."



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Advice and information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, how to make a complaint or choosing a good care home for a loved one – you can count on us.

This year we've helped people by:

- Providing up to date information people can trust
- Helping people access the services they need
- Helping people access NHS dentistry & GP Services
- Supporting people in finding information regarding vaccinations.



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Your Health. Your Voice.

Healthwatch Hartlepool works collaboratively with the North East NHS Independent Complaints Advocacy service. We signpost residents if they feel they have not had the service they expect from the NHS and want to complain. Over the last year the majority of referrals into this service came from Healthwatch Hartlepool. These NHS complaints cover care and treatment in respect of hospitals, GP's, dentists, pharmacies, opticians and NHS funded care homes.

"The North East NHS Independent Complaints Advocacy (ICA) service enjoys a very proactive relationship with Healthwatch Hartlepool and works closely with the Team supporting any Hartlepool residents with their health complaints.

Working jointly has allowed us to ensure all referrals are dealt with quickly and we are able to share complaints information anonymously on a regular basis to underpin the patient information Healthwatch Hartlepool collect. We also value the opportunity to talk with Healthwatch volunteers to give them some insight into our work".

Sue Ewington – Advocate – North East NHS ICA

Helping residents with the best advice

Healthwatch Hartlepool partnered with Tees, Esk & Wear Valley Mental Health Trust, North Tees & Hartlepool Foundation Trust, and Hartlepool's Public Health team to showcase a number of topics identified within our work Programme.

The first event was a follow-on to our work to shape the future of Community Based Mental Health Services and this was led by Maxine Crutwell – Programme Manager for Community Transformation Tees Valley.

"Very informative, having not known anything about this project before. Really positive to hear about Community Mental Health nurses in GP surgeries and the introduction of hub-based services"

Our second event was led by Vanessa Osborne – Specialist Bariatric Dietician from the Hospital Trust and Craig Blundred – Director of Public Health. The theme was 'Healthy Hartlepool' and covered nutrition and dietetics.

Our final event of the year coincided with International Men's Day and focused on the range of services that is available across Hartlepool to support the life journey of men. The event was not just for men but for those who care for or look after a male in their life whilst raising awareness of the need for screening.



Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.

This year our volunteers:

- Visited the North Tees Discharge Hub as part of their investigation into Hospital Discharge
- Collected experiences and supported their communities to share their views
- Carried out enter and view visits to local Residential Care homes to help them improve
- Visited Hartlepool's Urgent Care facility to learn first-hand why it is commended locally and regionally
- Supported the staff in collecting the most up-to-date information on changes to services such as whether GP appointments were available at a practice
- Undertook training in disability awareness and dual sensory loss

Margaret Wrenn – Chair Volunteer Steering Group

"Healthwatch Hartlepool is 10 years old this year, and like many other volunteers, I feel we are doing very well. We have stepped up our 'Enter & View' visits, training, arranging/attending public meetings on various topics and listening to the concerns of the people of Hartlepool. When COVID-19 started I felt as though everything stopped, but luckily, we were able to have our meetings via zoom, and we kept up with our training by the same method.

Unfortunately, people could not see their GP's face-to-face, or a dentist or visit their loved ones in Care Homes or Hospitals. It was a very difficult time for everyone, especially those with relatives who were dying in hospitals and care homes and were unable to visit or see them at this awful time.

It has been a much better year for Healthwatch Hartlepool. We have continued with our zoom meetings, which is easier for attracting speakers as they don't have to leave their offices but have had face-to-face meetings for our Volunteer Steering Group and Board of Directors.

We have carried out a large piece of work on hospital discharge, which was very well received, once completed.

As usual, many thanks to our great team in our Healthwatch office, who have worked tirelessly over the last year, so that the volunteers could continue what we all regard as vital work within the Town."



Dr Lynne Humphries

I am a relative newcomer to the virtual coffee mornings and cannot always participate in them due to other commitments but always enjoy them. I have had my misgivings about the Zoom format as I would have liked to see people in person but I find it very interesting to have the presentations on my screen at home. The people presenting are always knowledgeable and the information provided about local health actions are excellent.

I particularly liked the Substance Misuse presentation as I know it is a big problem in Hartlepool as elsewhere and I find it useful to pass on information about services such as these to people I know. I am aware that people in this situation do know about the services but for whatever reason do not engage."



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.

📧 www.healthwatchhartlepool.co.uk 📞 07749688795

☎ 0800 254 5552 ✉ yoursay@healthwatchhartlepool.co.uk

Last year's guest speakers at the virtual coffee mornings included:

Alex Gray – Social Prescriber – Social Prescribing Team

Ben Smith – Locality Manager Tees, Esk & Wear Valley NHS Trust

(2 updates, May and February)

Jeanette McGuire – Community Dementia Nurse, North Tees and Hartlepool Foundation Trust

Christopher Akers-Belcher – Healthwatch Hartlepool CEO – ICS/ICB

Judith Chatfield – Cancer Community Development Worker – North East & North Cumbria (NENC) ICB

Neil Harrison – Head of Safeguarding and Specialist Services – Hartlepool Council

Fiona Adamson – CEO – Hartlepool & Stockton Health (HASH) GP Federation

Sue Ewington – Advocate – North East NHS ICA

A further coffee morning ran as a general Healthwatch Hartlepool work programme update meeting without a guest speaker.



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Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Our income and expenditure

Income		Expenditure	
Annual grant from Council	£116,500	Expenditure on pay	£102,837
		Pension Cost	£9,373
Additional income	£4,747	Non-pay expenditure	£16,402
		Office	£8,730
Total income	£121,247	Total expenditure	£137,342

Additional income is broken down by:

- **£4,500 funding** received from the North East & North Cumbria (NENC) Healthwatch Network
- **£30 funding** received from a local voluntary group
- **£216 interest** received from deposit account

Next steps

In the ten years since Healthwatch was launched, we've demonstrated the power of public feedback in helping the health and care system understand what is working, spot issues and think about how things can be better in the future.

Services are currently facing unprecedented challenges and tackling the backlog needs to be a key priority for the NHS to ensure everyone gets the care they need. Over the next year we will continue our role in collecting feedback from everyone in our local community and giving them a voice to help shape improvements to services.

We will also continue our work to tackling inequalities that exist and work to reduce the barriers you face when accessing care, regardless whether that is because of where you live, income or race.

Top three priorities for 2023-24

1. Learning Disability & Autism Project – Growing Older, Planning Ahead
2. Dentistry
3. Work with North Tees & Hartlepool NHS Foundation Trust to reach areas of the community they currently do not hear from



Statutory statements

Healthwatch Hartlepool CIO
Greenbank, Waldon Street, Hartlepool TS24 7QS
Charity Number – 1165402

Healthwatch Hartlepool uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making

Our Healthwatch Board consists of 6 members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Throughout 2022/23 the Board met 6 times and made decisions on matters such as reviewing our Governance Framework and ratifying the submission of our Operational Questionnaire to Hartlepool Borough Council.

We ensure wider public involvement in deciding our work priorities.

Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of using services. During 2022/23 we have been available by phone, email, provided access via our website and through social media, as well as attending meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website www.healthwatchhartlepool.co.uk

Responses to recommendations

We had no providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to Healthwatch England, so no resulting reviews or investigations were required.

healthwatch

10
years

The way we work

Taking people's experiences to decision makers

We ensure that people who can make decisions about services hear about the insight and experiences that have been shared with us.

In our local authority area for example we take information to Hartlepool's Health & Wellbeing Board and Audit & Governance committee that has responsibility for Health Scrutiny. We also share our work with the Council's Adult and Community Based Services committee.

We also take insight and experiences to decision makers in the North East & North Cumbria (NENC) Integrated Care Partnership (ICP). For example we hold a position at the Tees Valley Area Integrated Care Partnership and at Place we attend the NENC Integrated Care Board Hartlepool Place sub-committee.

While all Healthwatch across the region have worked together informally for many years, recent funding from the ICB has enabled this Network to formalise working arrangements through an Operational Protocol, so that it can systematically represent the views of service users, families and carers with partners across the Integrated Care System. Local intelligence is collated across each of the four sub-regional areas and shared at Area ICP meetings.

At regional level, the Healthwatch Regional Coordinator (Christopher Akers-Belcher) represents service-user voice from across the region at the NENC Integrated Care Partnership Strategic meeting, System Quality Group, Primary Care Strategy & Delivery sub-committee and the Healthy & Fairer Advisory Group. The network of local Healthwatch has also been commissioned to undertake additional research to ensure local opinions are represented in the ICB's work priorities, including focus groups for the Waiting Well, and consultation around the development of the ICB strategy.

We also share our data with Healthwatch England to help address health and care issues at a national level.

healthwatch

10
years

Enter and view

This year, we made 6 Enter and View visits. We made 9 recommendations or actions as a result of this activity.

Location	Reason for visit	What you did as a result
Stichell House Residential Care Home	Post COVID-19 learning	Wrote a report with recommendations – the care home reinstated regular residents and relatives' meetings. They also developed a regular newsletter for family members.
Warrior Park Residential Care Home	Review progress since last visit	Wrote a report with recommendations that include: For there to be more activities on both floors and actively encourage use of outdoor space. Employ new coordinator and encourage staff to take-up training opportunities.
Urgent Care Centre Hartlepool	Identify examples of good working practice	Published our report to celebrate the work undertaken & encourage the trust to pass on the good practice whenever and wherever possible
Charlotte Grange Residential Care Home	To review progress and change since our last visit	Published our report and referred our findings to the Local Authority. Requested that the improvement of the general condition of the home be a priority to the new owners.
Elwick Grange Residential Care Home	Covid concerns and gain insight into the current quality of care	Published our findings and confirmed to the Local Authority we were impressed with the home.
West View Lodge Residential Care Home	To gather feedback from residents & rehabilitation patients together with family members	Published our report and strongly recommend that the home gets rid of the odour in the corridors of the Croft unit.

66

"From an Adult Social Care perspective, the work of Healthwatch Hartlepool over the last year is invaluable to Hartlepool Borough Council in a number of ways.

Having a different view is always important, but the key to this is getting the view from an impartial experienced organisation who understand the focus of what care providers are trying to deliver, but at the same time can provide a critical eye where needed.

Having this happen and then getting the feedback from these 'enter and view' visits to care homes is incredibly useful and I hope we continue to receive this intelligence so that we can continue to help shape and improve how we deliver services across Hartlepool."

*Trevor Smith | Head of Strategic Commissioning (Adults)
Childrens & Joint Commissioning Services*



healthwatch

10
years

Healthwatch representatives

Healthwatch Hartlepool is represented on the Hartlepool Health and Wellbeing Board by Christopher Akers-Belcher – Chief Executive and Margaret Wrenn – Chair Volunteer steering Group. During 2022/23 our representative have effectively carried out this role by presenting our reports & findings, participating in the review of the town's pharmaceutical needs assessment, assisting with the review of the Health & Wellbeing Strategy, promoting the need for ambitious targets around the health checks and health plans required by residents living with autism or a Learning Disability.



On behalf of the Audit and Governance Committee, I would once again like to thank Hartlepool Healthwatch for its commitment to the work of the Committee. 2022/23 continued to be a very challenging time for all areas of service provision and Healthwatch has been an essential source of local views, comments and concerns for the Committee.

Healthwatch has this year contributed to the Committee's scrutiny of Quality Accounts across provider Trusts and complaints, via the Independent Complaints Advocacy Service. The area of most significant support this year has, however, been around the provision of evidence to support the Committee's in depth investigation of the accessibility of council services to people with disabilities and long term conditions. Healthwatch actively promoted resident and stakeholder surveys, welcomed the Committee to speak in person to its volunteers and as an extension to usual engagement processes was instrumental to the completion of a 'mystery shopper' exercise.

As we move into the new municipal year, the knowledge and experience of Healthwatch members will continue to be essential in supporting the activities of the Audit and Governance Committee in effectively scrutinising the challenges facing health service provision.

We look forward to working together over the coming year."

*Councillor Rob Cook
Chair Audit & Governance Committee (2022/23)*

Healthwatch Hartlepool is represented on the Tees Valley Area Integrated Care Partnership and the North East & North Cumbria (NENC) Hartlepool Integrated Care Board (ICB) Place sub-committee by Christopher Akers-Belcher – Chief Executive.

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HEALTH AND WELLBEING BOARD

4th December 2023



Report of: Director of Public Health

Subject: DIRECTOR OF PUBLIC HEALTH (DPH) ANNUAL REPORT

1. PURPOSE OF REPORT

- 1.1 To update the Board on the theme of the 2023 DPH annual report

2. BACKGROUND

- 2.1 The DPH Annual Report is an important vehicle for providing advice and recommendations on population health to both professionals and public – providing added value over and above intelligence and information routinely available.
- 2.2 The requirement for the Director of Public Health to write an Annual Report on the health status of the town, and the Local Authority duty to publish it, is specified in the Health and Social Care Act 2012.
- 2.3 The 2023 report follows on from the previous 2022 report which explored data, and first hand views from a number of local residents, in relation to three key stages of life: “the best start in life”, “living well” and “living well in later life”.

3. PROPOSALS

- 3.1 This year’s report will look at people of working age and will focus on work, skills and health looking at economic opportunities in the town, employment opportunities and will also focus on work we are doing to improve health and wellbeing in workplaces covering three areas:
- Economy and Health
 - Work and Health
 - Opportunities for employment

3.2 The report will take a similar format as the 2022 report and will include a range of videos for each of the three areas.

3.3 The report will be shared with the Board

4. RISK IMPLICATIONS

4.1 None noted

5. FINANCIAL CONSIDERATIONS

5.1 None noted

6. LEGAL CONSIDERATIONS

6.1 The council is required to publish the DPH report annually.

7. EQUALITY AND DIVERSITY CONSIDERATIONS (IMPACT ASSESSMENT FORM TO BE COMPLETED AS APPROPRIATE.)

7.1 None noted

8. STAFF CONSIDERATIONS

8.1 None noted

9. ASSET MANAGEMENT CONSIDERATIONS

9.1 None noted

10. ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS

10.1 None noted

11. RECOMMENDATIONS

11.1 To note the progress and content of the 2023 DPH annual report

12. REASONS FOR RECOMMENDATIONS

12.1 Ensures compliance with the statutory duties under the Health and Social Care Act 2012 for the Director of Public Health to produce a report and the Local Authority to publish it.

13. BACKGROUND PAPERS

None

14. CONTACT OFFICERS

Craig Blundred
Director of Public health
Craig.Blundred@hartlepool.gov.uk

HEALTH AND WELLBEING BOARD

4th December 2023



Report of: Director of Public Health

Subject: TOBACCO STRATEGY – PROGRESS REPORT

1. PURPOSE OF REPORT

- 1.1 To share with the Health and Wellbeing board progress against the Tobacco Control strategy Action Plan (Appendix 1) for Hartlepool.

2. BACKGROUND

- 2.1 The draft strategy and action plan was shared with the Health and Wellbeing Board (HWBB) in September 2023 and it was agreed an update on progress would be presented to the board in December 2023 and thereafter every six months.

3. PROPOSALS

- 3.2 Below is a summary of key deliverable between September and December 2023 against the Tobacco Control Strategy Action Plan (**Appendix 1**) which include further detailed information:

Priority 1- Building infrastructure, skills and capacity for local tobacco control delivery.

Utilise the support of Fresh partnership website www.fresh-balance.co.uk in the development of the Alliance to ensure we have access to the latest tools and resources

- Themed sessions have been delivered to alliance members, namely vaping, communications and illicit tobacco sessions.

Priority 2- Priority 2. Advocacy for evidence based policies and legislation to achieve a Smokefree 2030 and to minimise influence of the tobacco industry

Identify and support locality champions to support the delivery of key tobacco advocacy priorities.

- Invites shared for September 27th Champions Forum Event – a number of alliance members attended and slides of the event shared to all alliance members.
- Smoking updates / toolkits circulated to Alliance members.

Priority 3- Reducing exposure to tobacco smoke and normalising smokefree environments

Share training resources and campaign materials on the dangers of second hand smoke with Hartlepool Tobacco Alliance for use by frontline staff to deliver standardised messages.

- Standardised resources distributed to Alliance members for Stoptober activities. Links to regional and national campaigns for Stoptober in use to compliment local activity. Local communications via social media channels, Hartbeat and press reports have shared quotes from Hartlepool smokers who have successfully stopped smoking

Priority 4 - Year round, media communications and education

Provide topic specific training sessions for professionals

- Themed sessions have been delivered utilising expert support on Vaping, communications and illicit tobacco – all well attended by alliance members and wider community reps.

Provide professionals across the locality system access to online training to support behaviour change from the National Centre for Smoking Cessation and Training (NCSCT). This includes core competencies required to support a quit attempt.

- NCSCT training links have been shared amongst Alliance staff members, social prescribers, clinical networks and waiting well team. Register of staff who have completed the training developed.

Priority 5 - Supporting smokers to stop and stay stopped and also to reduce harm

Develop services that target those most at risk and focus our support on priority groups not already supported by existing NHS pathways.

- Develop a support offer of 4 week vape kit and behavioural support to targeted groups – Patients who live in the top 1-3 IMD areas eligible for a NHS health check and smoke, patients who are part of a lung health pilot within a GP surgery and patients who are part of the waiting well pilot, awaiting elective surgery. Vape pilot commenced August 2023.
- Currently 45 people have accessed support from the Community Navigators service with 31 (69% of total) setting quit dates and successful 4 week quitters 6 (19% of quit dates)

Work to continue the decline in the proportion of smokers in routine and manual occupations in Hartlepool. Work with colleagues delivering the maternity pathway to look at how we provide ongoing support to new mothers, partners and their families to ensure they are given continued support to stop and remain stopped following delivery. Develop a stop smoking offer for people who access substance misuse services.

- Vape pathfinder expression of interest submitted (October) which will target vulnerable and those needing extra support to stop smoking. The offer will include free vapes, access to digital app and behavioural support via telephone, face to face and / or text message for 4 weeks plus.
- Recent government proposals has allocated further funding to Public Health to develop further stop smoking support to enhance current provision paper going to Finance and Policy Committee setting out proposal for funding.

Priority 6- Raise price and reduce illicit trade

Develop an illicit tobacco plan with partners to coordinate action using the 8 key strand for addressing illicit tobacco (enforcement of underage sales, illicit tobacco).

- An Illicit tobacco session was held in October raising awareness of the issue in Hartlepool, the session included details of the recent proposals by the government to strengthen enforcement activity. Group discussions and suggestions for priority actions were captured to develop a partner approach action plan to tackle illicit tobacco.
- Fresh facilitating regional response to consultations on illicit and access to tobacco products including vapes.

Priority 7- Tobacco and nicotine regulation including reducing tobacco promotion

Work with Licensing/Trading Standard to ensure ongoing compliance monitoring around all tobacco regulations as well as age of sale, proxy purchasing and point of sale displays.

- Contributions to consultation on measures to reduce the appeal and availability of vapes to children whilst ensuring they remain available to help adult smokers quit.

Priority 8 - Data research and public opinion

Work with education and youth service colleagues to better understand the numbers of young people who smoke/vape to inform approaches and interventions using evidenced based approaches and resources

- Initial session held with Head Teachers to discuss the issues in relation to vapes and how we can support education settings. A follow up dedicated session to be held to look at vapes and substance use to develop a joint approach to support schools and young people.

4. RISK IMPLICATIONS

- 4.1 No risks identified

5. FINANCIAL CONSIDERATIONS

- 5.1 Following the recent Prime Minister announcement further funding has been allocated to Public Health to enhance the provision of stop smoking support a report will go to Finance and Policy Committee setting out proposal.

6. LEGAL CONSIDERATIONS

- 6.1 No risk implications identified

7. EQUALITY AND DIVERSITY CONSIDERATIONS (IMPACT ASSESSMENT FORM TO BE COMPLETED AS APPROPRIATE.)

- 7.1 No equality and diversity issues have been identified, although the stop smoking support will target and aim to reduce inequalities and address those at most risk.

8. STAFF CONSIDERATIONS

- 8.1 No considerations

9. ASSET MANAGEMENT CONSIDERATIONS

- 9.1 No considerations

10. ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS

- 10.1 No considerations

11. RECOMMENDATIONS

- 11.1 That the board note the progress against the Tobacco Control Action Plan

12. REASONS FOR RECOMMENDATIONS

- 12.1 To ensure board members are aware of the work to address smoking related harms in Hartlepool.

13. BACKGROUND PAPERS

Action Plan **Appendix 1.**

14. CONTACT OFFICERS

Craig Blundred
Director of Public Health
Email: Craig.Blundred@hartlepool.gov.uk

Claire Robinson
Public Health Principal
Email: Claire.Robinson@hartlepool.gov.uk

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

1. Building infrastructure, skills and capacity for local tobacco control delivery						
	How	Who	Regional/Local	Outcomes	Timescales/ RAG	July –November 2023
Deliver the priorities of the Tobacco Strategy and action plan through the Tobacco Alliance for Hartlepool with a focus on: <ul style="list-style-type: none"> Reducing health inequalities caused by smoking and support vulnerable groups to be Smokefree Protecting children and young people from tobacco and encourage Smokefree pregnancies 	<p>Work with Alliance partners to: Agree annual priorities based on the action plan.</p> <p>Develop a data monitoring dashboard</p> <p>Work with partners to enhance and develop a support offer for specific targeted groups based on the findings of the needs assessment and evidence base.</p> <p>Use communications targeted at specific groups including; pregnant mums, partners</p>	Public Health, Alliance partners	Local/regional	<p>Reduction in people smoking in the general population</p> <p>Reduction in smoking in targeted groups, I.e. smoking in pregnancy.</p> <p>Increase in numbers accessing support to stop smoking</p>	August – December 2023	<p>Themed sessions have been delivered to alliance members, namely vaping, communications and illicit tobacco sessions.</p> <p>Communication Plan being developed with partners</p>
Utilise the support of Fresh partnership website www.fresh-balance.co.uk in the development of the Alliance to ensure we have access to the latest tools and resources	Access Fresh support around key areas – <ul style="list-style-type: none"> Media campaigns / year round and significant events. 	Public Health, Alliance & Fresh	Regional / Local	<p>Fresh quarterly report</p> <p>Numbers of media campaigns</p> <p>Reach of campaigns – social media, press</p> <p>Numbers accessing website</p>	Reviewed annually	Delivered themed Alliance sessions- Vaping, Communications, Illicit tobacco delivered.

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

	<ul style="list-style-type: none"> Guidance around action planning. Support advocacy planning Support evidenced based practice 					
Use evidence based tool kits with Alliance partners to help with local planning and delivery of actions.	Work with partners to ensure the use of toolkits to assist with their approaches to address priorities.	Public Health, Alliance & Fresh	Regional / local	Audit results of toolkits used in order to understand service improvements	Reviewed annually	Toolkits circulated and information in relation to vaping and children and young people
Share national, regional and local updates and develop opportunities to share knowledge and practice across systems in Hartlepool	Share updates with partners via email distribution Use workshops, alliance events to share practice and learning within the locality.	Public Health & Smoking Alliance	local	Increased numbers of partners attending workshops	Reviewed annually	Information circulated to all Alliance members and wider partners including national consultation information
Audit smoking pathways, documentation and data across stakeholders, Alliance partners and communities	Develop a robust process for data/ information collection and analysis.	Public Health & Alliance partners	Local	Data shows quality service provision Case studies used for client experience audits.	August – December	
Work with partners to enable them to complete CLeaR assessment tools relevant to their service areas, to include maternity, drugs and alcohol, , illicit tobacco and mental health services to identify improvements for service delivery	Agree timescales with partners for completing the following CLeaR assessments – <ul style="list-style-type: none"> Maternity Drug and alcohol Illicit tobacco 	Public health & Alliance partners	Local	Clear assessments completed within timescales	2024 - 25	

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

	<ul style="list-style-type: none"> Mental health services 					
Work with partners to agree and implement a collaborative approach to enhance existing stop smoking support in particular the pathways for staff, in patients and mental health services, in line with the NHS Long Term Plan.	<p>Identify gaps in current service provision for targeted groups.</p> <p>Develop a support offer to address service provision gaps</p> <p>Develop specific vape offer for targeted adult population</p>	Public Health & service providers	local	<p>Increased provision of support for people wanting to stop smoking including vape offer</p> <p>Increase in the numbers of quit attempts</p> <p>Increase in numbers of people achieving 4 week quit attempt</p> <p>Numbers of people achieving quit at 12 week review</p>	August 23 – April 24	<p>Vape offer now available see Priority 5</p> <p>Development of stop smoking support see Priority 5</p>
Priority 2. Advocacy for evidence based policies and legislation to achieve a Smokefree 2030 and to minimise influence of the tobacco industry						
	How	Who	Regional/Local	Outcomes	Timescale/RAG	
Utilise support from Fresh to work with Hartlepool Tobacco Alliance members to ensure there is an understanding of tobacco industry influences and how to avoid interference	<p>Work with Fresh deliver dedicated session to increase partner understanding of Tobacco industry influences</p> <p>Share Fresh communications with</p>	Alliance & Fresh	National, regional & local	<p>Partners have increased knowledge.</p> <p>Mechanism for recording incidents is developed</p>	Reviewed annually 2023-24	

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

	partners to ensure a consistent approach					
Ensure there is continued vigilance around the tobacco industry and frontline groups and that we adhere to Article 5.3 as set out within the framework Convention on Tobacco Control (FCTC)	Share updates amongst partners and front line services. Deliver a dedicated session on tobacco influences	Alliance & Fresh	National, regional & local	Partners have increased knowledge. Incidents are shared amongst partners for awareness	Reviewed Annually 2023-24	Information shared with partners
Identify and share local case studies on action on tobacco and encourage the sharing of “real people” stories to bring to life the human side of tobacco control.	Develop Template for detailing case studies. Case studies shared as part of Tobacco Control Alliance agenda Invite community reps to Tobacco Alliance meetings to share their lived experiences	Alliance	local	Case study portfolio collected across service provision. Numbers of people with lived experience attending events	April 2024	Stoptober case studies shared
Identify and support locality champions to support the delivery of key tobacco advocacy priorities	Partners to identify local reps to participate in the Making smoking history forums.	Alliance/ Fresh	Local/ regional	Good practice shared and service quality improves Numbers of representatives from Hartlepool attending regional Making Smoking History Champions Forum	September 2023 and reviewed quarterly	Attendance at event by Alliance members and wider community reps for Hartlepool.

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

Priority 3. Reducing exposure to tobacco smoke and normalising smokefree environments						
	How	Who	Regional/Local	Outcome	Timescales/RAG	
Develop a locality strategic approach to reducing exposure to tobacco smoke and normalising smoke free environments using briefings and support from Fresh.	Develop a new plan for smoke free places, particular around young people, for example - <ul style="list-style-type: none"> Education settings Parks Sports clubs Work places . 	Alliance / fresh	Local / regional	Locality smoke free plan agreed for delivery by partners Reduction in exposure to second hand smoke identified in key environments	January – April 2024	
Share training resources and campaign materials on the dangers of second hand smoke with Hartlepool Tobacco Alliance for use by frontline staff to deliver standardised messages.	As part of Alliance communications strategy – Resources will be shared in the locality. Dates agreed for coordinated approach to deliver campaigns	Fresh, Alliance partners, wider communities & work places	Regional / local	Standardised materials accessed by partners Coordinated approach to campaigns delivered across localities.	Reviewed annually	Standardised resources distributed to Alliance members for Stoptober activities. Links to regional and national campaigns for Stoptober in use to compliment local activity. Local communications via social media channels, Hartbeat and press reports have shared quotes from Hartlepool smokers who have successfully stopped smoking
Work with partners to ensure workplace policies on smoking are up to date and they recognise	Work with partners to review smoking policies are up to date and reflect evidence based	PH BHAWA lead, Alliance partners. ? Regeneration	local	Increased numbers of places with effective up to date work place policies.	2023-2024	

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

Vaping as a means to help smokers quit.	<p>practice for supporting stopping smoking</p> <p>Identify areas of good practice and share with partners and workplaces.</p>	Team/ business forums		<p>Reduction of smoking in the work place</p> <p>Increased support/opportunities for people wanting to stop smoking</p> <p>Increased campaign promoting stop smoking support in workplaces monitored through the BHAWA</p>		
Utilise the Better Health at Work Award (BHAWA) framework to ensure the effectiveness of their smoke free policies and share training resources on the dangers of second hand smoke.	<p>Engage with workplaces as part of BHAWA framework to review and audit current work place policies around smoking/vaping.</p> <p>Share resources and good practice approaches to tackle second hand smoke in the work place.</p> <p>Share information about stop smoking support across Hartlepool</p> <p>Identify proposals to develop a workplace</p>	PH lead for BHAWA & work places	local	<p>Increased numbers of work places with effective smoke free policies.</p> <p>Increased support/opportunities for people wanting to stop smoking</p> <p>Increased campaign promoting stop smoking support in workplaces monitored through the BHAWA</p> <p>Workplaces in the locality will be smoke free</p>	2023-2024	

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

	stop smoking support offer					
Priority 4. Year round, media communications and education						
	How	Who	Regional/Local	Outcome	Timescales/RAG	
Include communications as a key part of the Alliance utilising support from Fresh to inform the development of a coordinated local communication plan.	<p>Host a specialist communication session for partners supported by Fresh</p> <p>Work with Tobacco Alliance partners to develop a communications strategy.</p> <p>Agree a communications plan across Hartlepool</p>	Comms rep for alliance / alliance & public health	Local/ regional	<p>Specialist comms session delivered with local input.</p> <p>Communications strategy with action plan agreed</p> <p>Standardised material used.</p> <p>Regular campaigns delivered across locality partners.</p> <p>Newsletter developed sharing service updates and good news stories.</p>	August – April 2024	<p>Communication lead identified to attend Alliance meetings.</p> <p>Session facilitated by Fresh re: communication</p>
Organise themed discussions for locality partners, with support from Fresh to map and develop communication channels which will amplify regional campaigns by ensuring that toolkits are shared with partners and local messaging	Link with Fresh to hold a themed session on communication to promote awareness of tool kits available Map existing local communication methods to identify development	Public Health, alliance partner's & Fresh	Local / regional	<p>Local communication strategy and action plan developed</p> <p>Communications messages promoted through a variety of channels</p>	August – April 2024 review annually	Communication session held for Alliance Members

Tobacco Control Strategy Action Plan 2023 – 2028 (Reviewed Annually)

mirrors that of mass media campaigns.	opportunities for new communication channels. Develop a communication strategy and action plan for delivering messages that mirrors national mass media campaigns.			Local communications, campaigns mirror mass media campaigns.		
Ensure the Fresh campaign website www.freshquit.co.uk to be included in all relevant public facing communications.	Include www.freshquit.co.uk is shared for public information.	Communication lead & Alliance	local	All communications will include www.freshquit.co.uk	Reviewed annually	
Provide clear guidance to professionals and public on the use of e-cigarettes/vapes including: <ul style="list-style-type: none"> • Use of e-cigarettes/vapes as an approved harm reduction technique for adults who are current smokers • The potential risk of continued nicotine addiction. • Advice and information relating to the use of vapes in children and young people. 	Support partners in the use of tool kits, share latest reports and evidence for wider dissemination regarding vaping. Hold specialist sessions on vaping for all partners. Share link with partners and recommend further learning by accessing on line specialist modules on vaping available at the National Centre for Smoking Cessation and Training (NCSCT)	Alliance partners Fresh	Local, regional & national	Numbers of people accessing themed sessions Register kept of training accessed and completed Audit of current school support and support plan agreed	Reviewed annually	Learning resources and tool kits shared to all education settings/ youth services/ 0-19 services on Children and young g people vaping (March 23 & July23) Meeting with Head teachers to look at work in relation to support schools and young people vaping – further dedicated session to be held Vaping information session for

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	Share specific resources with education and youth settings and look at providing dedicated sessions identifying additional support needs					professionals delivered Training links sent to social prescribers – Hartlepool Clinical networks and hospital waiting well team – August 2023
Provide topic specific training sessions for professionals.	Agree sessions for specific areas, utilising expert support to deliver for example <ul style="list-style-type: none"> • Vaping • Communications • Illicit tobacco 	Tobacco Control Alliance & fresh	Local & regional	Sessions delivered – face to face & remote numbers attending sessions Numbers of sessions delivered annually	Reviewed annually 2023-24	Themed sessions have been delivered utilising expert support on vaping, communications and illicit tobacco – all well attended by alliance members and wider community reps.
Provide professionals across the locality system access to online training to support behaviour change from the National Centre for Smoking Cessation and Training (NCSCT). This includes core competencies required to support a quit attempt	Share NCSCT on line training link, stating it is as a mandatory required baseline for providers delivering support to stop smoking. As part of SLA with partners, maintain register of training accessed – baseline and specialist modules	Tobacco Control Alliance All partners providing stop smoking support	National & local	All staff providing stop smoking support have completed NCSCT on line training Register of staff who have completed the training maintained	Reviewed Annually	NCSCT training link shared amongst alliance members. Register of staff who have completed training developed

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Agree an events calendar and deliver year round media and communications, to help to motivate smokers to stop and also to stay stopped.	<p>Agree a calendar of events as part of the Tobacco control communication strategy.</p> <p>Use different communication channels to maximise reach to motivate smokers to stop and stay stopped.</p> <p>Plan and distribute campaign materials whilst engaging with local communities,</p>	Tobacco Control Alliance	local	<p>Calendar of events promoted across partners.</p> <p>Resources shared, using accessible methods for different groups</p> <p>Case histories, photographs, filming of events used to capture and share successes.</p>	August -April 2024 communication plan reviewed annually.	Planning and resources shared for Stoptober to wide audience through a range of mediums
Ensure that key pieces of work, including locality media campaigns, are evaluated as appropriate and learnings are implemented to improve delivery in the future	Fresh to share campaign evaluations quarterly as part of their quarterly reporting	Fresh	Local/ regional	Quarterly report from Fresh shared with Alliance	Quarterly	Ongoing reporting/contracting monitoring with Fresh to share evaluation of local campaigns

Priority 5. Supporting smokers to stop and stay stopped and also to reduce harm

	How	Who	Regional/Local	Outcome	Timescales/RAG	
<p>Develop services that target those most at risk and focus our support on priority groups not already supported by existing NHS pathways.</p> <p>Target work to support those with smoking related conditions</p>	<p>Using the needs assessment to identify those groups most at risk to target resources/ service developments.</p> <p>Develop a support offer of 4 week vape kit and</p>	Public health, alliance	local	<p>Resources targeted at service gaps not covered by current service pathways for stop smoking support.</p> <p>Vape pilot offer developed and active</p>	Offer to be developed throughout 2023- 2024	A support offer of 4 week vape kit and behavioural support developed to targeted groups - Patients who live in the top 1-3 IMD areas eligible for a NHS health check

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<p>particularly in relation to cancers, cardio vascular disease (CVD) and chronic obstructive pulmonary disease (COPD)</p> <p>Work to continue the decline in the proportion of smokers in routine and manual occupations in Hartlepool.</p> <p>Work with colleagues delivering the maternity pathway to look at how we provide ongoing support to new mothers, partners and their families to ensure they are given continued support to stop and remain stopped following delivery. Develop a stop smoking offer for people who access substance misuse services</p>	<p>behavioural support to targeted groups –</p> <ul style="list-style-type: none"> • Patients who live in the top 1-3 IMD areas , are eligible for a NHS health check and smoke • Patients who are part of a lung health pilot within a GP surgery • Patients who are part of the waiting well pilot, awaiting elective surgery. <p>Be part of the national pathfinder for the Vape Swop to Stop project. At risk groups identified for priority support include -</p> <ul style="list-style-type: none"> • 0-19 service (adult offer) to support the maternal pathway • People who access substance misuse services • People who access housing provision. • People with a diagnosed mental health illness in the community. • People accessing primary care. • HBC staff 			<p>from 1st August to targeted groups.</p> <p>Swap to stop pathfinder project commenced 2023</p> <p>Reduction of smoking in groups most at risk</p> <p>Increased provision of support for people wanting to stop smoking including vape offer</p> <p>Increase in the numbers of quit attempts</p> <p>Increase in numbers of people achieving 4 week quit attempt</p> <p>Numbers of people achieving quit at 12 week review</p>		<p>and smoke, patients who are part of a lung health pilot within a GP surgery and patients who are part of the waiting well pilot, awaiting elective surgery. Vape pilot commenced August 2023.</p> <p>Further GP practice added October 2023</p> <p>Vape pathfinder expression of interest submitted (October) which will target vulnerable and those needing extra support to stop smoking. The offer will include free vapes, access to digital app and behavioural support via telephone, face to face and / or text message for 4 weeks plus.</p> <p>Recent government proposals (October23) has allocated further</p>
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	Analyse data/information from targeted areas for key learning to inform future planning of services and opportunities					funding to public health to develop further stop smoking support to enhance current provision. – to be developed
Communicate the evidence base for vaping and help facilitate discussions and understanding around this with local partners using resources and support form Fresh.	Ask partners to use shared Fresh publications/ resources and links to NCSCT specialist vaping modules. Invite partners to Vaping themed sessions with Fresh supporting	Public Health, alliance, Fresh	Regional & local	Increased sharing of Vape resources and training materials shared. Dedicated Vaping session held for partners. Dedicated work to look at supporting education and youth settings	Reviewed annually	Session held for wider partners
Encourage all partners to adopt an evidence based approach to vaping and cascade approved resources aligned with regional position statement(s) and key messages	Partners to use shared Fresh publications/ resources and links to NCSCT specialist vaping modules.	Public health, alliance and Fresh	National, regional & local	Vaping resources and training materials shared.	Reviewed annually 2023-24	Circulated
Priority 6. Raise price and reduce illicit trade						
	How	Who	Regional /local	Outcome	Timescales/RAG	
Develop an illicit tobacco plan with partners to coordinate action using the 8 key strand for addressing	Partners to attend specialist session on illicit tobacco to raise awareness of the issue	Trading standards, public health, alliance	Local	Specialist session held facilitated by Fresh and local enforcement team.	2023-24	An Illicit tobacco session was held in October raising awareness of the

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illicit tobacco (enforcement of underage sales, illicit tobacco) http://www.illicit-tobacco.co.uk/strategicframework/index.html .	Work with trading standards colleagues and wider partners to assess needs and gaps and develop an action plan to tackle illicit tobacco in Hartlepool including licensing processes			Illicit tobacco plan developed monitored by Tobacco Control alliance Review of licensing processes to look at illicit tobacco/vape use		issue in Hartlepool, the session included details of the recent proposals by the government to strengthen enforcement activity. Group discussions and suggestions for priority actions were captured to develop a partner approach action plan to tackle illicit tobacco.
Use local data to target activity in geographical areas as well as population groups, e.g. using data to target illicit tobacco supply, illegal tobacco sales and high smoking prevalence. Provide support to trading standards colleagues' in partnership with Fresh to inform their approaches to addressing illicit trade.	Gather data, local intelligence with trading standards colleagues and wider partners including licensing processes Agree areas to target activity to address illicit tobacco as part of the illicit tobacco plan for Hartlepool	Trading standards, public health, alliance partners (police)	Local	Activity targeted at specific population groups and geographical areas. Activity data monitored for reoccurrence of illicit trading Number of representations made in licensing process	2023-24	
Deliver a dedicated themed session for the Alliance around illicit tobacco use.	Work with Fresh to develop a session about illicit tobacco	Public Health, Fresh & Trading standards	Regional & local	Illicit tobacco session	Reviewed annually	Illicit Tobacco Session held October 2023
Support the work of Fresh and ASH to recommend that Government toughen vape regulation.	Fresh information and support requests shared with Tobacco Control Alliance	Tobacco control alliance	Regional and local	Local input into national consultation and guidance	Reviewed Annually 2023-24	Circulation of national consultation opportunities

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Priority 7. Tobacco and nicotine regulation including reducing tobacco promotion						
	How	Who	Regional/ local	Outcome	Timescales/RAG	
Work with Licensing/Trading Standard to ensure ongoing compliance monitoring around all tobacco regulations as well as age of sale, proxy purchasing and point of sale displays.	Public health to use a standard operation procedure to support licencing / trading standards departments with licensing and illicit tobacco compliance	Public health, trading standards / licensing	Local	Support given to licensing / trading standards to ensure compliance of all tobacco regulations through licensing process	August - April 2024	<p>Licensing SOP developed for alcohol license applications to be reviewed in terms of illicit tobacco and vape regulations. Actions from recent government proposals concerning raising the age of sale for cigarettes by one year every year from 2027 to be included.</p> <p>Participation encouraged to all alliance members, wider community, schools, in the consultation on measures to reduce the appeal and availability of vapes to children whilst ensuring they remain available to help adult smokers quit.</p>
Share compliance monitoring data, outlining trends and risks and maintain effective links with	Trading Standard representative to share compliance /	Trading standards	local	Awareness of local issues amongst partners.	August – April 2024	

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regulatory colleagues, providing advice and guidance to partners and working collaboratively to share best practice.	monitoring data at quarterly alliance meetings	Tobacco Control alliance		Agreement tackle issues collaboratively using best practice. Compliance of Tobacco regulations increase s across the locality.		
Ensure local attendance of public health and regulatory representatives to the six monthly online Fresh Tobacco Crime and Regulation Forum meetings where regulatory issues are discussed and best practice shared.	Trading standards Tobacco Alliance rep to attend forums	trading standards / Tobacco Control Alliance	Regional & Local	Trading Standards rep to feedback to Alliance meetings -	Reviewed annually	Attendance at meetings agreed
Alert Trading Standards and Fresh if situations arise where involvement of tobacco companies maybe suspected.	Process developed and agreed by Tobacco control alliance members for alerting involvement of tobacco companies.	Fresh, Trading standards & Alliance	Regional & local	Process used by Tobacco Control Alliance members to escalate situations where involvement of tobacco companies maybe suspected. A register of notifications will be kept to monitor trends / risks.	2023-24	

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Priority 8. Data research and public opinion						
	How	Who	Regional/ local	Outcome	Timescales/RAG	
Use clearly defined data to ensure we are using targeted approaches to address health inequalities	Data from needs assessment, inequalities data, and local data is used to identify approaches for service provision..	Public Health, Public Health data analyst, Tobacco Control Alliance, OHID	Local / regional / national	<p>Increased support offer including vapes</p> <p>Increased targeting of services at to reduce inequalities</p> <p>Decrease in the numbers of people smoking</p> <p>Increase in numbers starting a quit attempt</p>	2023 – 2024 to inform service delivery	See Priority 5
<p>Use qualitative insight work led by Fresh on attitudes towards tobacco, with a particular focus on exploring motivations for behaviour change, to inform local campaign development. This will also include understanding the needs of people who smoke and routes and barriers to quitting.</p> <p>Utilise findings from public opinion surveys, which monitor behaviours, attitudes, policy support linked to Tobacco to inform local campaigns.</p>	<p>Share insight findings with Tobacco Control alliance from Fresh to shape campaign development and delivery of messages.</p> <p>Share public opinion surveys and intelligence linked to tobacco behaviours. Ask Tobacco control alliance partners to consider the findings when planning events / campaigns.</p>	Fresh, Tobacco Control Alliance and community champions	Local/ regional	<p>Tobacco Control Alliance members will use the findings to develop and target messages as part of public facing campaigns as part of the communication plan.</p> <p>Campaigns will be delivered using recommendations for greatest reach, understanding and engagement.</p>	2023-24	

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	Share local insights / intelligence from service user provision, local campaign evaluations and community champions to contribute to planning of campaigns.			Campaigns will be delivered at appropriate times, settings and be accessible for all.		
Work with Fresh to share key pieces of research on a broad range of topics with local partner's and also work collaboratively with key academics on the evaluation of the delivery of stop smoking support	Look for research funding opportunities to work with academics to understand the barriers and facilitators and service model for stop smoking support to maximise engagement and impact on smoking habits,	Fresh, Public Health Tobacco Control alliance	Local , regional , national	<p>Research funding secured to develop a research study to understand barriers, facilitators and a service model for stop smoking support in Hartlepool.</p> <p>Findings from the study will inform future service development.</p> <p>Service provision shows an increase in numbers of those accessing support to stop smoking.</p>	2024-2025	
Work with education and youth service colleagues to better understand the numbers of young people who smoke/vape to inform approaches and interventions using	Audit education settings using questionnaires to understand the numbers of young people who smoke /	Education, trading standards, Smoking Alliance	Local/ regional	<p>Data reports show the numbers of young people taking up smoking / vaping.</p> <p>Analysis of questionnaires to be</p>	August – April 2024	Feedback from Youth Groups positive in using the tool kit with youth groups across Hartlepool

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evidenced based approaches and resources.	<p>vape. Extend to youth groups</p> <p>Share Fresh toolkits and resources about young people and vaping / smoking.</p> <p>Develop an audit to understand the use of the toolkits within education and youth settings. Sharing recommendations for future developments.</p> <p>Work with education settings and youth settings to understand the needs and support required</p>			<p>shared with Tobacco Control Alliance and support action plan developed.</p> <p>Tool kits shared March and July to education and youth settings.</p> <p>Analysis will detail experiences and recommendations for future resources targeting education settings and youth groups around vaping / smoking.</p>		<p>Further dedicated session with Head Teachers to support their role in supporting young people who currently smoke/vape</p>
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HEALTH AND WELLBEING BOARD

4th December 2023



Report of: Director of Public Health

Subject: PROGRESS UPDATE ON THE HARTLEPOOL
FOOD PARTNERSHIP: HEALTHY, AFFORDABLE
AND SUSTAINABLE FOOD FOR ALL

1. PURPOSE OF REPORT

- 1.1 To update Health and Wellbeing Board on progress on the development of the Hartlepool Food Partnership

2. BACKGROUND

- 2.1 Development of a Sustainable Food Partnership in Hartlepool was expressed as a priority within senior leadership at the council. It was recognised that developing a Food Partnership may have short term benefits (e.g. maximising affordable food distribution during the cost of living crisis) through synergies with existing food, poverty and sustainability groups.
- 2.2 The Partnership would also have longer term benefits to Hartlepool's residents and economy through increased availability and consumption of local, healthy, affordable and sustainable food.
- 2.3 Positive discussions took place between council and VCS colleagues, and Hartlepool Food Council expressed interest in leading development with the support of partners. On December 15th 2022 CMT approved development of a partnership based on the Sustainable Food Placesⁱ model.

3. HARTLEPOOL FOOD PARTNERSHIP PROGRESS SO FAR

- 3.1 The partnership agreed initial funding to develop the partnership and produce a Hartlepool Food plan. This included funding for a system-wide event (£5K from the Joseph Rowntree Foundation) and coordination of the partnership

(£3.75K from HBC Public Health and £3.75K matched funding from the PFC Trustⁱⁱ).

3.2 Since then progress includes:

- Establishment of a steering group and vision: healthy, affordable and sustainable food for all in Hartlepool
- Further development of the partnership through inviting key people & organisations to be part of the Food Partnership
- Ongoing communication with stakeholders, via the new Hartlepool Food Partnership websiteⁱⁱⁱ, social media^{iv}, email newsletter^v and a survey^{vi} of community priorities regarding food, as well as existing services such as Hartlepool Now, Hartlepool Life and Hartbeat^{vii}
- A Full day System-Wide Event in May⁵ where co-production of the Hartlepool Food Plan commenced
- An Open Forum in June for feedback on a one-page summary draft food plan with deep dive into one of the growing food themes, which attracted 25 people and included an outside speaker from Barefoot Kitchen
- An Open Forum in September regarding children's nutrition. This forum included sharing of local good practice and discussion of key issues, with more than 20 people attending. A children's subgroup of the partnership is being considered, given the significant interest in this area and the importance of childhood experience of food for children's whole lives. Meetings would include opportunities for members to share good practice and collectively come up with solutions to issues
- Supporting the Fairtrade Town renewal application
- Quick wins identified, including:
 - Sharing information on affordable food (e.g. sharing low/no cost food leaflet³)
 - Sharing newly identified opportunities for growing in schools/allotments (e.g. in the Food Partnership newsletter⁵ and Hartlepool Life^{viii}) and personally connecting people who can offer mutual support
 - Mapping of food providers with the aim to support people looking for local healthy supply of food (e.g. caterers, public and Holiday, Activities and Food Programme providers) and exploration of other available food data

3.3 The system-wide full day event was a key milestone and was attended by more than 50 people. Representation included people from various council departments, VCS, schools, colleges, universities, local community groups/residents and farming. The event involved collective identification of ideas, challenges and opportunities around healthy, affordable and sustainable food production, supply, consumption and surplus. Key themes were identified, with suggestions on addressing emerging themes discussed in more detail by attendees.

3.4 These themes were a key output of the system-wide event and formed the basis of the Food Plan. A one-page version of the plan has been refined further, following feedback at the Open Forum on 27th June 2023.

3.5 Themes in the Hartlepool Food Plan include:

- Supporting local food growing, to increase access to local healthy food, increase physical and mental health and build knowledge and skills
- Working with local businesses and supply chains to facilitate residents' access to local, affordable, healthy and sustainable food
- Encouraging and enabling children, and people of all ages, to eat nutritious, sustainable food, by understanding what helps, and addressing any barriers (including availability, cooking facilities, skills and opportunity)
- Creating and celebrating a good food culture, by using inclusive existing or new events, with good food, bringing together different cultures and generations
- Establishing effective local food governance, with involvement in the Food Partnership open to all (facilitated by regular open forum meetings, newsletter and co-production of key plans) and particular focus on ensuring engagement from key stakeholders. The Food Partnership Terms of Reference includes key principles, such as evidence-based, non-stigmatising, collaborative action that is proportionate to need (thereby reducing unfair inequalities).

3.6 It was agreed that the Fairtrade Steering group would become a subgroup of the Hartlepool Food Partnership given the overlap with sustainability, and mutually beneficial opportunities to share expertise and reach more people and organisations. A member of the Food Partnership steering group (from HBC Public Health) is providing representation at the Fairtrade steering group, assisting with promotion of involvement and preparation of the renewal application.

A variety of communication methods have been used to promote involvement in Fairtrade and school, business, church and public representation at the steering group. These include several face-to-face meetings (e.g. mentions at the Food Partnership open Forum and Head Teachers meeting), emails to key contacts for sharing, mailing lists, newsletters and HBC and Food Partnership social media.

More than 20 churches were contacted via Churches Together, all schools have been contacted via the head teacher email mailing list, 350 community and public sector staff have been contacted via the Sector Connector Newsletter mailing list and around 500 businesses have been contacted via the Business News Newsletter from the council's economic development team. Recent activity has resulted in some new interest in steering group membership.

The Steering Group is meeting regularly to complete the Fairtrade renewal application (first meeting held 23rd Oct). The renewal application requires a

description of activities since the last renewal (Sept 2019) and plans/desires for the future. The application will be submitted in December.

4. NEXT STEPS FOR HARTLEPOOL FOOD PARTNERSHIP WORK

4.1 Next steps include:

- Further feedback on the Food Plan from Hartlepool residents and other stakeholders
- Open Forums with deep dives into other key themes
- Creating a social movement and exploration of the feasibility of actions suggested by stakeholders, acting on quick wins/initial steps and sharing successes. Actions suggested by stakeholders so far include, supporting food growing in schools and on unused land, a seed bank, more effective use of food surpluses from allotments or residential gardens, supporting anchor institutions/ businesses/ community organisations to buy good local food by developing connections with local suppliers, maximising access to healthy school meals, exploring the feasibility of reinstating the Hartlepool show, organising “pop up events”, collaborating with existing event organisers and identifying opportunities for encouraging greater access to healthier food in fast food outlets
- Further working with officers across the council and others with expertise in potential actions identified e.g. community and allotment growing, events to celebrate good food culture and engaging with businesses and supply chains. There is some involvement from businesses within the wider partnership, including personal discussion, but representation at in-person events appears to be more challenging
- Becoming a full member of Sustainable Food Places¹ (application submitted on 19th October), which gives access to member-only support and funding campaigns. Applications open twice a year and the eligibility criteria includes 6 months of active meetings of the Food Partnership
- Continued coordination of the Food Partnership and Food Plan implementation (including effective communication). There has been significant interest in the Food Partnership, with many opportunities or actions that could be taken given sufficient capacity. However, coordinator workload and communication needs to date have been greater than anticipated. Costings for future funding have, therefore, been adapted to better reflect coordinator time, communication needs and opportunities to act on areas identified.

5. RISK IMPLICATIONS

- 5.1** Risks are identified and minimised by careful governance from multiagency steering group (including council representatives) and input from the wider partnership.

6. FINANCIAL CONSIDERATIONS

- 6.1 The financial implication for the council is a recurring £25k from the Public Health Grant. Funding for the last 11 months was sourced from Public Health, the PFC Trust and Joseph Rowntree Foundation. Funding for the next 2 years has been recently agreed from Public Health, the PFC Trust and Thirteen Group.

7. LEGAL CONSIDERATIONS

- 7.1 No legal considerations.

8. EQUALITY AND DIVERSITY CONSIDERATIONS (IMPACT ASSESSMENT FORM TO BE COMPLETED AS APPROPRIATE.)

- 8.1 Key principles in our Terms of Reference include reducing unfair inequalities, diversity and inclusion. This is also embedded in what we do. For example, the theme of “Creating and celebrating a good food culture” in the Food Plan includes “using inclusive existing or new events, with good food, to bring together different cultures & generations.

9. STAFF CONSIDERATIONS

- 9.1 Council staff have been involved in the partnership in accordance with relevance to their work areas. Prior funding has also supported a coordinator for a few hours a week.

10. ASSET MANAGEMENT CONSIDERATIONS

- 10.1 The Hartlepool Food Partnership does not own any assets but aims to bring key people together to help ensure best use of resources across the borough.

11. ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS

- 11.1 Improving sustainability of food is a key aim of the Hartlepool Food Partnership.

12. RECOMMENDATIONS

- 12.1 It is proposed that Health and Wellbeing Board :
- Note the progress of the Food Partnership and support its further development.

- Note the continued funding from HBC Public Health (alongside matched PFC Trust funding and funding from other VCS sources) to ensure effective implementation of the Food Plan
- Provide any feedback on additional internal/external sources of funding, Food Plan themes or actions planned

13. REASONS FOR RECOMMENDATIONS

- 13.1 The Hartlepool Food Partnership vision of healthy, affordable and sustainable food for all in Hartlepool aligns well with the Council's vision. The availability of good food and access to activities that support good food is an excellent vehicle for improving health.
- 13.2 Significant progress in the development of the partnership has been achieved in the past months.
- 13.3 Continued cross organisational support will allow the Hartlepool Food Partnership to effectively build on achievements to date and implement the Food Plan to achieve the vision of healthy, affordable and sustainable food for all in Hartlepool.

14. BACKGROUND PAPERS

- 14.1 Hartlepool Food Plan (**Appendix 1**).

- 14.2 Links referenced in report:

Sustainable Food Places at <https://www.sustainablefoodplaces.org/>

PFC Trust at <https://www.thepfctrust.org/what-we-do>

New Hartlepool Food Partnership website at <https://hartlepoolfoodpartnership.co.uk/>

Hartlepool Food Partnership social media at <https://www.facebook.com/people/Hartlepool-Food-Partnership/100090746650143/>

Example of Food Partnership email newsletter (more available on Food Partnership website) with mention in newsletter re full day System-Wide Event in May and sharing newly identified opportunities for growing in schools/allotments at <https://mailchi.mp/6f9428b9bcf0/hartlepool-food-partnership-newsletter-12611104?e=f66c75ccd1>

Survey of Food Priorities at https://docs.google.com/forms/d/e/1FAIpQLSfG_IESF_6ojEYKZBUVoen_S7FgUqfUrCggRDI6t9xNSm0dA/viewform

Hartbeat article re Food Partnership on page 28 at
https://issuu.com/hpoolcouncil/docs/hartbeat_september_2023_digital

Sharing newly identified opportunities for growing in schools/allotments via
Hartlepool Life 12th Jul page 26 at <https://www.hartlepoollife.co.uk/12-july-2023-issue-280>

15. CONTACT OFFICERS

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One-Page Hartlepool Food Plan

1: Supporting local food growing

Support urban food growing (with flexible, inclusive use of unused land and allotments) to increase access to local healthy food, increase physical and mental health and builds knowledge and skills. Initial steps include, supporting development the council's Waverley Allotments site for community use and exploring setting up a seed bank

Support schools to grow food on site and use this as a vehicle for learning. Interested schools so far include St. Aiden's Primary school (growing expertise requested), Hartlepool Sixth Form College and High Tunstall School.

Effective use of food surpluses from allotments & residential gardens. This could be a commercial or social enterprise opportunity and could include mapping of fruit trees and surpluses.

2: Working with local businesses and supply chains

Support anchor institutions*, businesses and community organisations to buy local, affordable, healthy sustainable food by developing connections with local good food suppliers.

Using **procurement, enterprise, logistics and communication skill/opportunities** to improve residents' access to local, affordable, healthy and sustainable food for all Hartlepool citizens

3: Enabling children, and people of all ages, to eat nutritious, sustainable food

Understanding & addressing enablers/barriers to eating nutritious, sustainable food & reducing inequalities (e.g. food availability with instructions, cooking facilities, skills and opportunity, as well as ways of identifying any issues early).

Work with nurseries, primary & secondary schools and colleges to explore food origins, meal preparation & nutritional awareness raising opportunities.

Work with partners to maximise access to healthy school meals with sufficient time to eat

4: Creating & celebrating a good food culture

Using inclusive existing or new events, with good food, to bring together different cultures & generations. Our first steps will be to:

- **Look to reinstate the Hartlepool Show.** Build on successes organising other events e.g. Tall Ships.
- **Organise pop-up events**, e.g. for plant, produce & seed sharing.
- **Collaborate with existing event organisers** to celebrate good food (including food preparation & eating together) & food culture. E.g. Food & Fuel Fairs, Grace Church communal meal, Wintertide festival, Headland carnival, Hartlepool Food Network, Hartlepool restaurant week.
- **Encouraging greater availability of healthier food in fast food outlets**

5: Establishing local food governance

Membership of the Hartlepool Food Partnership will be open to anyone – individual or organisation. Members will be invited to Partnership meetings and to other food-related events as well as receiving a periodic newsletter. Inclusion on an email distribution list will signal membership.

Meetings of the Food Partnership will be held approximately every two months as an open forum. All Partnership members will be invited to attend. Facilitation of meetings will be responsive to numbers attending & the nature of topics for discussion but based on the principle of ensuring that everyone attending can contribute and following the Partnership's terms of reference.

The steering group will take responsibility for developing & supporting the Partnership. This group will collectively be accountable to Partnership meetings and guided by its terms of reference. The steering group will be open to any Food Partnership member or appropriate organisation that wishes to contribute to the group's work.

*Anchor institutions are large organisations whose long-term sustainability is tied to the wellbeing of the populations they serve e.g. council, NHS, schools/colleges, large sports clubs

Hartlepool Food Partnership – Terms of Reference

A Purpose

Hartlepool Food Partnership (henceforth “the Partnership”) will work to enable the people of Hartlepool to have access to healthy, affordable and sustainable food.

B Approach

The Partnership’s work will be based on the Sustainable Food Places approach by:

- Taking a strategic and collaborative approach to good food governance and action
- Building public awareness, active food citizenship and a local good food movement
- Tackling food poverty, diet related ill-health and lack of access to affordable healthy food
- Creating a vibrant, prosperous, diverse and sustainable food economy
- Identifying & developing opportunities with catering & procurement to revitalise local supply chains
- Tackling the climate and nature emergency through more sustainable practices, including minimising food waste.

C Partners/Members

The Partnership will seek to work collaboratively and bring together the following individuals/organisations:

- Hartlepool citizens or organisations with an interest in the Partnership’s goals
- Voluntary & community sector organisations,
- Hartlepool Borough Council
- Food-related businesses with a presence in Hartlepool
- The NHS and other health-focused organisations
- Educational institutions, including Hartlepool College of Further Education, Hartlepool Sixth Form College, Hartlepool’s nurseries, Primary & Secondary schools and local universities

D Objectives

The Partnership’s four primary objectives are to:

1. Facilitate & empower interested individual citizens, voluntary organisations, statutory & educational institutions & businesses to work collaboratively to deliver a sustainable local food environment
2. Promote & enable the growth, production, distribution & sale of nutritious, affordable, sustainable food to all Hartlepool citizens
3. Address food poverty, reducing dependency on foodbanks & food aid and promote dignified healthy food acquisition by Hartlepool citizens.
4. Contribute to achieving a healthier population by helping citizens to achieve a healthy weight and reducing the impact of diet-related/non-communicable ill health

E Principles

Principles include collaboration, evidence-based action (where evidence includes data, research and lived experience) targeted proportionate to need (thereby reducing unfair inequalities), non-stigmatising and non-shaming communication/action (recognising financial limitations can act as a barrier to eating more healthily), transparency, diversity and inclusion.

F Initial priorities

The five priorities for the period up to December 2023:

1. To join the Sustainable Food Places network
2. To consolidate our proposed model of good food governance
3. To analyse & understand Hartlepool’s current food system
4. To publish & begin implementation of the first Hartlepool Food Plan
5. To secure funding for effective implementation of the food plan

HEALTH AND WELLBEING BOARD

4 December 2023



Report of: Director of Public Health

Subject: PHARMACEUTICAL NEEDS ASSESSMENT (PNA)
2022 - MAINTENANCE REPORT

1. PURPOSE OF REPORT

- 1.1 To update the Board in accordance with the process for statutory maintenance of the Pharmaceutical Needs Assessment 2022 (link to PNA - https://www.hartlepool.gov.uk/info/20015/social_care_and_health/768/pharmaceutical_needs_assessment_2022/1).
- 1.2 To report for information recent amendments to [The NHS \(Pharmaceutical and Local Pharmaceutical Services\) \(Amendment\) Regulations 2023](#) (the 2023 regulations) pertinent to applications/ notification of changes to Pharmaceutical Services
- 1.3 To receive notification of applications, decisions or other notice of changes to pharmaceutical services in Hartlepool from the ICB NENC or Primary Care Support England (PCSE) since the date of the last Health and Wellbeing Board Maintenance Report.
- 1.4 To determine approval for publication of any Supplementary Statement to the PNA 2022 required as a consequence of those reported changes to pharmaceutical services.

2. BACKGROUND

- 2.1 The Health and Wellbeing Board (HWB) published its Pharmaceutical Needs Assessment on the 30th September 2022. A link to the PNA is provided in section 1.1.
- 2.2 The HWB are reminded of their statutory duties and responsibilities¹ for maintenance following publication of the PNA 2022 which are, in summary, they must:
 - a) Publish a revised statement of need (i.e. subsequent pharmaceutical needs assessments) on a three-yearly basis, which complies with the regulatory requirements;

¹ To comply with NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, as amended

- b) Publish a subsequent pharmaceutical needs assessment sooner, when it identifies changes to the need for pharmaceutical services which are of a significant extent, unless to do so would be a disproportionate response to those changes; and
 - c) Produce supplementary statements as required, which on publication become part of the PNA 2022. Supplementary Statements explain changes to the availability of pharmaceutical services since publication of the PNA, in certain conditions.
- 2.3 The HWB also has duties related to other regulatory processes managed previously by NHS England, now by the ICB, e.g., applications (from service providers) to provide new or amended pharmaceutical services or to consolidate two pharmacies. In accordance with the recently updated process, there remains a scheme of delegation of authority to the Director of the of Public Health, in consultation with the Chair of the Health and Wellbeing Board and with specialist pharmaceutical advice, for use in the event that it is not possible for any reason to obtain HWB approval, or when the process of consultation on applications is not yet in the public domain.
- 2.4 A PNA Maintenance Report will be submitted to every Health and Wellbeing Board meeting to:
 - a) report any action under delegated authority and seek ratification where necessary;
 - b) seek approval for routine Supplementary Statements prior to publication, including any required update to PNA maps;
 - c) report on decision-making for changes to pharmaceutical services which fall outside of the requirement to publish a Supplementary statement e.g., Changes of Ownership which do not impact on service provision, including any required update to PNA maps;
 - d) report for information, or for decision where necessary, on actions towards meeting the duty identified in 2.2 part a (publishing a revised statement by 1st October 2025)
 - e) report for information, or for decision where necessary, on actions towards meeting the duty identified in 2.2 part b (identifying changes to the need for pharmaceutical services that might require earlier publication of a revised PNA).

3. **CHANGES TO THE NHS (PHARMACEUTICAL AND LOCAL PHARMACEUTICAL SERVICES) REGULATIONS.**

- 3.1 [The NHS \(Pharmaceutical and Local Pharmaceutical Services\) Regulations 2013](#) (the 2013 regulations) set the legal framework for the commissioning of pharmaceutical services in England by ICBs. The 2013 regulations have been amended several times since they came into force on 1 April 2013, and the most recent set of amendments are contained within [The NHS \(Pharmaceutical and Local Pharmaceutical Services\) \(Amendment\) Regulations 2023](#) (the 2023 regulations).
- 3.2 The 2023 regulations amend a number of provisions within the 2013 regulations and for the most part these amendments came into force on 25

May 2023. The latest amendments cover several aspects and are probably the biggest regulatory changes for a decade. The following is a summary of some key changes for information to the Board, as they are likely to impact processes and likely outcomes for pharmacy applications that are pertinent to maintenance of the PNA. These new regulations have been applied by pharmacy contractors in Hartlepool already and the notification of the resulting changes to pharmaceutical services are reported in section 5.

- 3.3 It has for some time been a condition of applying to open a new pharmacy that a ‘need’ for that new pharmacy would be demonstrated. The Regulations have at times included some options to apply for a new contract under certain ‘exemptions’ to this. One of these exemptions was to accept the condition that the pharmacy would open for 100 hours every week, which was available to applicants between 1st April 2005 and 1st September 2012. Additionally, NHS England could neither vary nor remove this “100 hours condition”.
- 3.4 In these 2023 Regulations, pharmacies whose NHS contract was granted under this exemption category may now apply to the ICB for that condition to be removed. The ICB may now grant this ‘easement’ and remove the 100 hours condition, allowing a reduction in the total core opening hours provided from the premises, where certain requirements are met:
- there remain a total of not less than 72 core opening hours
 - any current core opening hours Monday to Saturday between 17.00 and 21.00 must be retained
 - any core opening hours on a Sunday between 11.00 and 16.00 cannot be changed, other than by way of the inclusion of, or a change to, a rest break which:
 - is no longer than one hour, and
 - starts at least three hours after the start of the pharmacy’s opening hours and ends at least three hours before the end of the pharmacy’s opening hours on that day; and
 - the total number of core opening hours on a Sunday cannot be reduced.
- 3.5 The changes to permit adjustment of core hours do not only affect 100-hour contractors. The process to amend 40-hour pharmacy core hours has historically been challenging, but now the ICB can approve such changes:
- to maintain the existing level of NHS pharmacy provision; or
 - to maintain a sustainable level of adequate NHS pharmacy provision
- 3.6 For the avoidance of doubt, the term “40 hour pharmacy” is used to describe any pharmacy that is not, or has never been, subject to the 100 hours condition, irrespective of the total number of core opening hours they may have. The term “100 hour pharmacy” is used to describe any pharmacy that is, or has ever been, subject to the 100 hours condition irrespective of whether they have subsequently successfully applied to reduce their total number of core opening hours. This will be a little odd, and makes documentation of changes important, as the regulations affecting increasing

or reducing opening hours, and introducing rest breaks, will be retained even if the pharmacy changes location or ownership.

3.7 Other amendments in the 2023 regulations include;

- A new ‘notification’ process (as opposed to an ‘application’ process, which is both conditional and longer) has also been introduced for ‘40 hour’ pharmacy contractors who wish to include a rest break into their core opening hours where certain requirements are met. This new option to introduce a rest break for pharmacy staff of up to 1 hour during the normal core hours requires the time taken for this rest break to be added onto the same day’s opening hours elsewhere (i.e. at the beginning or the end of the day).
- Pharmacy contractors who increase the number of supplementary opening hours of their pharmacy premises must now notify the relevant ICB in advance, but there is no minimum amount of notice that must be given; (making it easier to increase hours in a responsive way).
- Pharmacy contractors who wish to reduce, or amend the timing of their supplementary opening hours are still required to give at least five weeks’ notice, though they may now ask the ICB to agree to a shorter notice period.
- The new regulations also create the ability for ICBs to put in place a ‘local hours plan’ where they are satisfied that people in a particular area are experiencing, or are likely to experience, significant difficulty in accessing pharmaceutical services on a temporary basis for an identified period of time.

3.8 It will often take some time for the impact of regulatory changes such as these to be experienced. National guidance to the 2023 regulations encouraged contractors to consider carefully the needs of their patients and the public alongside their business requirements, including the need for rest breaks. The PNA gives a clear direction to patient need which contractors could be minded to consider. However, it is in recognition of the challenging situation facing community pharmacy contractors currently that these changes have been brought. Across the ICB area, 100-hour pharmacies have been making immediate use of the option to reduce their conditional core hours with the inevitable impact on the availability of pharmaceutical services. Hartlepool is no exception as is reported in section 5.

4. **NOTIFICATION OF APPLICATIONS OR DECISIONS MADE BY ICB NENC /PCSE SINCE THE LAST MEETING OF THE HEALTH AND WELLBEING BOARD**

4.1 In accordance with the agreed process for the approval of Supplementary Statements by the HWB, the Board is advised that no new Supplementary Statements have been issued under delegated authority since the last meeting of the Board in September 2023.

4.2 Reduction in core hours, 100-hour pharmacies. Hartlepool has two ‘100-hour’ pharmacies. For more than fifteen years, their opening hours have contributed substantially to securing the availability of pharmaceutical

services in what was historically regarded as the ‘out of hours’ period in primary care i.e., after 6pm in the evenings on weekdays and also at weekends.

- 4.3 Both pharmacy contractors have applied to the ICB to reduce their opening times in response to the new 2023 Regulations. Their previous and updated opening hours, including any supplementary hours are shown in Table 1. for

- Boots, Anchor Retail Park, Marina Way, Hartlepool TS24 0XR
- Boots, Hartlepool Community Health Centre, Park Road, Hartlepool, TS24 7PW

Pharmacy	Days	Previous total Opening Hours	New total Opening Hours	Opening hours now provided as supplementary hours
Boots, Marina Way	Monday	07:30-00:00	09:00-21:00	13:00-14:00
	Tuesday	07:30-00:00	09:00-21:00	13:00-14:00
	Wednesday	07:30-00:00	09:00-21:00	13:00-14:00
	Thursday	07:30-00:00	09:00-21:00	13:00-14:00
	Friday	07:30-00:00	09:00-21:00	13:00-14:00
	Saturday	07:30-00:00	09:00-21:00	none
	Sunday	10:30-16:00	10:30-16:00	15:30-16:00
		Weekly total = 104.5 of which core hours =100	Weekly total = 77.5 hours of which core hours =72 from 25 September 2023	
Pharmacy	Days	Previous total Opening Hours	New total Opening Hours	Opening hours now provided as supplementary hours
Boots, Park Road	Monday	07:00-23:00	09:00-21:00	none
	Tuesday	07:00-23:00	09:00-21:00	
	Wednesday	07:00-23:00	09:00-21:00	
	Thursday	07:00-23:00	09:00-21:00	
	Friday	07:00-23:00	09:00-21:00	
	Saturday	07:00-23:00	09:00-21:00	
	Sunday	10:00-17:00	10:00-17:00	
		Weekly total = 101 all core hours	Weekly total = 79 hours all core hours from 27 August 2023 in a two-step change commencing 10 July 2023	

Table 1. Changes to opening hours of the two 100-hour pharmacies in Hartlepool.

- 4.4 You will see that in each case:
- total core hours exceed 72
 - the core hours requirement on evenings, Monday to Saturday, are met
 - the core hours which were between 11am and 4pm on a Sunday have not been changed and the total core Sunday opening hours have not been reduced. Note for Boots Marina there were previously core hours 10.30 am to 3.30pm with an additional half hour of supplementary hours from 3.30 pm, which the contractor has elected to retain.
 - You will see for Boots Marina a ‘rest break’ has been added Monday to Friday but not on Saturday or Sunday, though ‘breaks’ are currently covered with supplementary hours such that the pharmacy will remain open. Sunday is not eligible for a rest break being open less than six hours. At Park Road, formal rest breaks have not been added into the schedule. This term ‘rest break’ is new to the Regulations in 2023.

- 4.5 The HWB must determine if this change to the availability of pharmaceutical services could have bearing on an application to provide pharmaceutical services in Hartlepool and if so, report these changes in a Supplementary Statement to the PNA. Pharmacy opening hours are an important part of any PNA because they describe when all essential pharmaceutical services are available. Increasingly, the NHS is intending to use access to pharmacy for a range of services to support acute, preventive and long term clinical conditions. Access to the current Community Pharmacy Consultation Service by referral from NHS11 does depend on a pharmacy being open to be able to provide that service. Table 2 shows the range of former opening times of the 100-hour pharmacies together with those of the locations of two other contractors whose opening times extend beyond 9-5 weekdays and include service provision on a weekend. As a result of this change there is no longer a pharmacy in Hartlepool open before 8am Monday to Saturday. With earlier weekday/Saturday closing too this extends the days on which and times at which there is no pharmacy providing pharmaceutical services. The impact to Sunday opening times has been largely protected by the 2023 regulation conditions. The other two are 40-hour pharmacies whose opening times are extended by supplementary hours; these supplementary hours could still be lost with just five weeks notice. Only the 100-hour pharmacy opening times are protected by what will now be directed core hours. This change to both 100 hour pharmacies does make this situation more notable.

- 4.6 For information, it is noted that any pharmacy may offer to increase supplementary hours, by informing the ICB.

Name and location	Ward	Day	Opening time	Closing time
Boots Anchor Retail Park Marina Way TS24 0XR	Headland and Harbour	Monday to Saturday	7.30 am 9.00 am	Midnight 9.00 pm
		Sunday	10.30 am	4.00 pm 3.30 pm
Boots Hartlepool Health Centre, Park Road TS24 7PW	Burn Valley	Monday to Friday	7.00 am 9.00 am	11.00 pm 9.00 pm
		Saturday	7.00 am 9.00 am	9.00 pm
		Sunday	10.00 am	5.00 pm
ASDA Pharmacy Marina Way Hartlepool TS24 0XR	Headland and Harbour	Monday to Friday	8.30 am	10.00 pm
		Saturday	8.30 am	8.00 pm
		Sunday	10.00 am	4.00 pm
Tesco Pharmacy Belle View Way TS25 1UP	Burn Valley	Monday to Saturday	8.00 am	9.00 pm
		Sunday	10.00 am	4.00 pm

Table 2. Four pharmacies in Hartlepool with the longest opening times

The Hartlepool PNA is not silent about the value of the former opening times. It states “Having regard to all of the issues, it is considered that both of the 100 hour pharmacies are **necessary** to assure core hour provision of pharmaceutical services to the population of Hartlepool. Their central location is particularly

valuable towards meeting the pharmaceutical needs for essential and other services. This includes those arising from the current Extended Access general practice provision which is co-located with one of them. The 100-hour pharmacies in Hartlepool are now well established as providers of core hours, particularly at evenings and weekends. The HWB would regard any reduction in the range of their opening hours as creating a gap in the availability of necessary services and would wish to maintain the current level. The range of opening hours meets the needs for necessary pharmaceutical services in the area and the HWB does not wish to see any change in the pattern which would result in reduced availability of core pharmaceutical services.

*That is not to overlook the contribution made by the supplementary hours offered by several pharmacies, including those located in supermarkets, but also others open on weekends in particular. For the essential services and also increasingly impactful advanced services such as CPCS/flu vaccination and other NHS (locally commissioned) services such as EHC, these pharmacies do much to provide improvement and better access, including choice for the population of the Borough. As before, all existing contractors may wish to consider their collective response in support of maintaining or improving access to both **necessary** and **other relevant pharmaceutical services** across the Borough, from their existing locations, including via supplementary hours”.*

4.7 The Health and Wellbeing Board are required to consider;

- whether this change to the availability of pharmaceutical services might be relevant to the granting of applications for a new pharmacy or dispensing appliance contractor premises, or changes to pharmaceutical services and
- if it is satisfied that producing a revised assessment would be a disproportionate response to those changes.

4.8 It is suggested that a proportionate response would be for the HWB to publish a Supplementary Statement which describes the change in availability of pharmaceutical services from these two pharmacies. The draft Supplementary Statement is attached at **Appendix 1**, reporting the factual change in availability of pharmaceutical services from each pharmacy. No change to the PNA maps are required.

4.9 Notification of Changes of Ownership. On 26 September 2023, PCSE provided notification of the decision of ICB NENC to approve a change of ownership (COO) for the pharmacy in Seaton as shown below. Date of change to be confirmed.

Pharmacy Address	Previous Contractor	New Contractor (effective date)	Trading name (that the public will see)
68a Elizabeth Way, Seaton Carew, Hartlepool, TS25 2AX	Norchem Ltd (trading as Seaton Pharmacy)	Bestway National Chemists Ltd (tbc)	Well

- 4.10 On 12 June 2023, PCSE provided notification of the decision of ICB NENC to approve a change of ownership (COO) for the pharmacy located at Kendal Road in Hartlepool as shown below. Date of the change was confirmed by PCSE on 22 August 2023.

Pharmacy Address	Previous Contractor	New Contractor (effective date)	Trading name (that the public will see)
15 Kendal Road, Hartlepool, TS25 1QU	Lloydspharmacy Ltd	LP SD Twenty Three Limited (22.8.23)	Kendal Road Pharmacy

- 4.11 On 17 May 2023, PCSE provided notification of the decision of ICB NENC to approve a change of ownership (COO) for the pharmacy located at Wiltshire Way in Hartlepool as shown below. Date of the change was confirmed by PCSE on 1 July 2023.

Pharmacy Address	Previous Contractor	New Contractor (effective date)	Trading name (that the public will see)
84 Wiltshire Way, Hartlepool TS26 0TB	Lloydspharmacy Ltd	Welcome Health Pharmacies Limited (1.7.23)	Wiltshire Pharmacy

- 4.12 Whilst the HWB was must be notified of these changes, Regulations require that there will be no change to the contracted availability of pharmaceutical services when such a COO takes place. There is therefore no requirement to publish a Supplementary Statement to the PNA 2022 for these changes. The change of ownership will be published on the HWB PNA website for information and the key to the map will be updated, though no change is required to the map itself.

5. RECOMMENDATIONS

5.1 Health and Wellbeing Board approve:

- i) Publication of a Supplementary Statement reporting the change to opening hours (and thereby availability of necessary pharmaceutical services) at Boots, Marina and Boots Park Lane.

5.2 Health and Wellbeing Board note:

- i) That no other supplementary statements to the Hartlepool PNA 2022 have been issued since the last reported changes on 10th July 2023
- ii) The change of ownership of three pharmacies at Seaton, Wiltshire Way and Kendal Road Pharmacy referenced in Section 4 above.
- iii) The changes to the Regulations 2023 and the impact on availability of pharmaceutical services.
- iv) Engagement action to understand the experience of people in Hartlepool following the change in availability of those services in described in section 4 and 5.1.

6. REASONS FOR RECOMMENDATIONS

- 6.1 Included in the body of the report.

7. BACKGROUND PAPERS

- 7.1 Pharmaceutical Needs Assessment 2022 (link to PNA - https://www.hartlepool.gov.uk/info/20015/social_care_and_health/768/pharmaceutical_needs_assessment_2022/1)
- 7.2 National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 SI 2013/349 as amended (the 2013 regulations).
- 7.3 The National Health Service (Pharmaceutical Services, Changes and Prescribing) (Amendment) Regulations 2016 as amended
- 7.4 [The NHS \(Pharmaceutical and Local Pharmaceutical Services\) \(Amendment\) Regulations 2023](#) (the 2023 regulations).

8. CONTACT OFFICERS

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Supplementary Statement (DRAFT) Supplementary Statement to Hartlepool Health and Wellbeing Board Pharmaceutical Needs Assessment (PNA) 2022



Date Pharmaceutical Needs Assessment Published: September 2022
Date Supplementary Statement Issued: *TBC subject to HWB approval*

This information updates and supersedes information within the Hartlepool PNA 2022 and should be read in conjunction with that document.

CHANGE TO PHARMACEUTICAL SERVICES - HOURS RECORDED IN THE PHARMACEUTICAL LIST*:

Contractor:

Boots UK Ltd, Anchor Retail Park, Marina Way, Hartlepool, TS24 0XR

The pharmacy will change opening hours as follows:

Pharmacy	Days	Previous total Opening Hours	New total Opening Hours	Opening hours now provided as supplementary* hours
Boots, Marina Way	Monday	07:30-00:00	09:00-21:00	13:00-14:00
	Tuesday	07:30-00:00	09:00-21:00	13:00-14:00
	Wednesday	07:30-00:00	09:00-21:00	13:00-14:00
	Thursday	07:30-00:00	09:00-21:00	13:00-14:00
	Friday	07:30-00:00	09:00-21:00	13:00-14:00
	Saturday	07:30-00:00	09:00-21:00	none
	Sunday	10:30-16:00	10:30-16:00	15:30-16:00
		Weekly total = 104.5 of which core hours =100	Weekly total = 77.5 hours of which core hours =72 from 25 September 2023	

Contractor:

Boots UK Ltd, Hartlepool Community Health Centre, Park Road, Hartlepool, TS24 7PW

The pharmacy will change opening hours as follows:

Pharmacy	Days	Previous total Opening Hours	New total Opening Hours	Opening hours now provided as supplementary hours
Boots, Park Road	Monday	07:00-23:00	09:00-21:00	none
	Tuesday	07:00-23:00	09:00-21:00	
	Wednesday	07:00-23:00	09:00-21:00	
	Thursday	07:00-23:00	09:00-21:00	
	Friday	07:00-23:00	09:00-21:00	
	Saturday	07:00-23:00	09:00-21:00	
	Sunday	10:00-17:00	10:00-17:00	
		Weekly total = 101 all core hours	Weekly total = 79 all core hours from 27 August 2023 in a two-step change commencing 10 July 2023	

*There is a distinction between core hours and supplementary hours for the purposes of maintaining the Pharmaceutical List. However, it is the **total opening hours** which shows the days on which and times at which pharmaceutical services will be available to the public in accordance with the Community Pharmacy Contractual Framework.

These contractors will both continue to be identified as a '100 hour pharmacy'. For the avoidance of doubt, the term "40 hour pharmacy" is used to describe any pharmacy that is not, or has never been, subject to the 100 hours condition, irrespective of the total number of core opening hours they may have. The term "100 hour pharmacy" is used to describe any pharmacy that is, or has ever been, subject to the 100 hours condition irrespective of whether they have subsequently successfully applied to reduce their total number of core opening hours.

It is the opinion of the Hartlepool HWB with reference to the PNA 2022 that the changes to availability of pharmaceutical services as a consequence of changes to core hours of both of these pharmacy contractors together creates a potential gap in pharmaceutical services provision that could be met by a routine application to provide core hours at these times (or longer) before 9am and after 6pm Monday to Saturday and for at least these opening times on Sunday. It could also be met by application or notification by existing contractors in Hartlepool.

No change is required to the map of pharmaceutical services providers in this case.

The map and a copy of the pharmaceutical list for Hartlepool may be found on the Health and Wellbeing Board webpage ([link](#)).

Craig Blundred
Director of Public Health

HEALTH AND WELLBEING BOARD

4th December 2023



Report of: Director of Public Health

Subject: MENOPAUSE WORK PROGRAMME UPDATE

1. PURPOSE OF REPORT

- 1.1 This paper updates the Health and Wellbeing board on the progress made in addressing the challenges posed by the menopause and actions that have been completed to support the motion.

2. BACKGROUND

- 2.1 The menopause is an important women's health issue. Whilst it is a natural process and part of the aging process, the symptoms and effects can vary from mild to debilitating.
- 2.2 The importance of this was underlined by a council motion earlier this year which outlined that on the adoption of the council's menopause policy:

The Council therefore resolves to:

1. Work with partners to promote and educate on the impact and symptoms of the menopause to the wider public, including the challenges it can present to women in the workplace.
2. Ensure that all staff have an understanding of the support available from health professionals and others if they are concerned about symptoms they may be experiencing.
3. To support, continue and expand on the good work of HBC by working with partner organisations to ensure that as many employers across the Borough are 'Menopause Aware', including the need for flexible working, excellent working conditions with good ventilation, access to chilled drinking water and sanitary facilities.

2.3 Menopause Policy

Hartlepool Borough Council launched its Menopause Policy following approval by Elected Members of the Finance and Policy Committee on 10th October 2022 to provide a clear policy with guidance to ensure its workforce are supported. Local trade unions were consulted and positively contributed to the drafting of the policy. A formal launch ceremony to link with the World Menopause Day was held on 18th October 2022 with the Leader of the Council, trade union and chief officer representatives.

As part of its equality agenda, the Council has invested in Menopause training for managers and the wider workforce to raise awareness of the symptoms and what can be done to help employees manage this at work. Since 2022 four awareness sessions have been held with 116 employees attending and two men-only sessions with 22 attending. A Let's Talk Menopause presentation/video is also available on the intranet which is a recording of the online training course.

The Council is currently reviewing the policy following its first year, which was a commitment in the policy. Human Resources Services are currently consulting with trade unions as part of the review. There is also a Health Passport under development (to be approved by ELT) which will enable employees with health conditions including symptoms of the menopause to document adjustments at work agreed with their manager with the ability to carry this forward with them to new posts in the Council.

Awareness raising has been carried out with the workforce so that they are aware of the local women's health hub and the menopause drop in cafes in the borough.

2.4 Better Health at Work Award

The Better Health at Work award is a programme of activity that supports employers across the North East and Cumbria to address health and wellbeing in the workplace. This is achieved through the local awards scheme. Employers and employees benefit through a healthier environment, culture and increased access to information and interventions.

As part of the Better Health at Work award programme in Hartlepool, the coordinator has been supporting businesses in the following way.

- Campaigns,
- Bringing in outside speakers to deliver dedicated sessions on menopause awareness
- Incorporating menopause into work wellness apps with top facts / question and answers sections
- Development of menopause in the work place policies
- Development of processes to allow changes in workplace stations that help with menopause symptoms. The new processes are designed with additional sensitivity and allow rapid access (an

example being getting access to desk top fans from the appliance depts using a rapid access process)

- Doing dedicated men's only sessions to raise awareness/ understanding about the menopause
- Holding wellness days dedicated to relieve menopause symptoms free to staff (available to general public at a small cost)
- Distribution of leaflets and advertising in the workplace the Hartlepool menopause drop in cafes / clinical support that is available to Hartlepool residents

Work will continue through the Better Health at Work award programme to raise awareness and to support business across the borough.

2.5 **Women's Health Hub**

Proposals have been submitted by the ICB for a Women's Health Hub in Tees. Part of the work programme will include menopause and treatment and support. The bid for the hub is pending with the ICB.

3. **PROPOSALS**

- 3.1 That the work on supporting staff in the workplace, both internally and with partners and businesses continues.

4. **RISK IMPLICATIONS**

- 4.1 None.

5. **FINANCIAL CONSIDERATIONS**

- 5.1 None.

6. **LEGAL CONSIDERATIONS**

- 6.1 None.

7. **EQUALITY AND DIVERSITY CONSIDERATIONS (IMPACT ASSESSMENT FORM TO BE COMPLETED AS APPROPRIATE.)**

- 7.1 None.

8. **STAFF CONSIDERATIONS**

- 8.1 None.

9. ASSET MANAGEMENT CONSIDERATIONS

9.1 None.

10. ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS

10.1 None.

11. RECOMMENDATIONS

11.1 That the board notes the report.

12. REASONS FOR RECOMMENDATIONS

12.1 This is an update to the board on the ongoing work around the menopause for Hartlepool residents.

13. BACKGROUND PAPERS

13.1 None.

14. CONTACT OFFICERS

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HEALTH AND WELLBEING BOARD

4th DECEMBER 2023



Report of: Director of Public Health

Subject: ORAL HEALTH UPDATE

1. PURPOSE OF REPORT

1.1 To provide an update on Oral Health in Hartlepool.

2. BACKGROUND

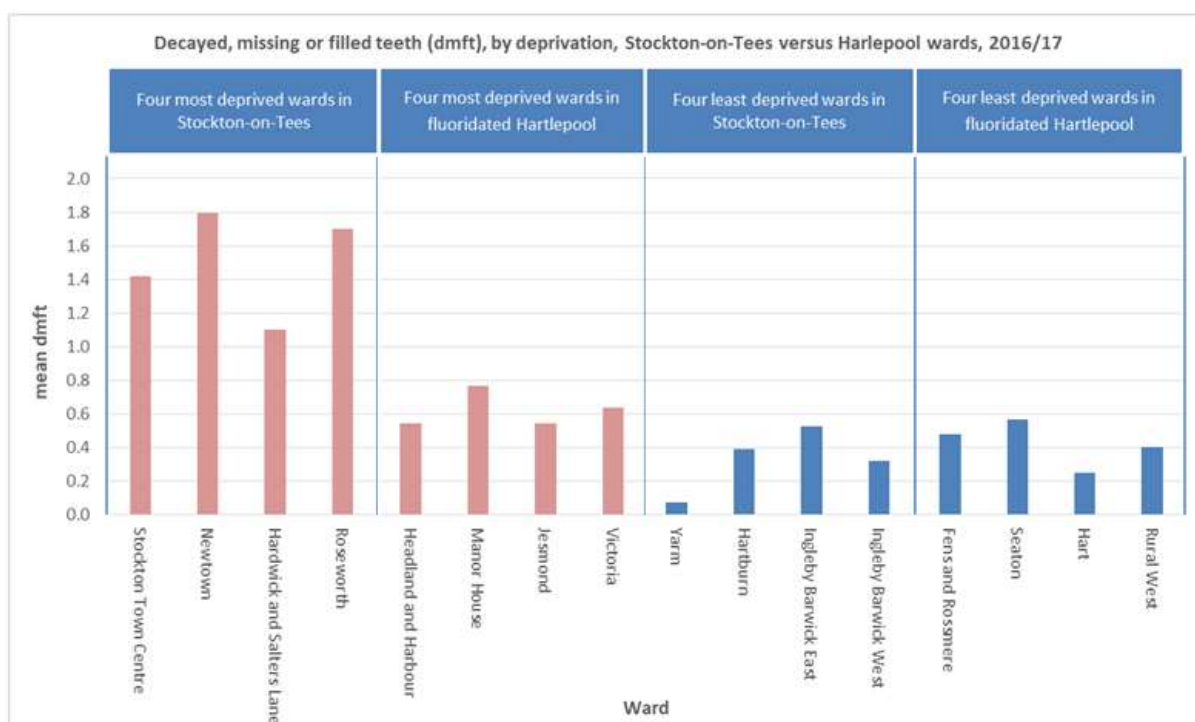
2.1 In December 2022 the ICB developed their system wide strategy “Better Health and Wellbeing for All”. Regional groups contributed to this including oral health. The ICB is currently responsible for commissioning dental services (April 2023) and local authorities are responsible for commissioning oral health promotion. The ICB, working with dental public health consultants have produced a needs assessment for oral health for the whole system. This paper updates the health and wellbeing board on current oral health issues.

2.2 Dental decay in children

Poor oral health in children harms school readiness and leads to time off school for extractions as well as lost sleep through pain and cares of children being required to take time off work to care for children who are experiencing pain. Hartlepool has lower numbers of children with dentinal decay than the England number. This is partly due to the naturally occurring fluoride in our drinking water. Figure one shows the data below for 2007/08 to 2021/22.

**Figure One**

Tooth decay is also subject to health inequalities and the figure below shows that there is a gap between the most and least deprived wards. The comparison with Stockton shows locally the lower numbers of children with tooth decay again. This is currently the most recent data we have. What is again clear is that whilst there is a social gradient with tooth decay, there are clear differences between Hartlepool and Stockton in the number of cases.

**Figure Two**

2.3 Existing Oral Health Work in Hartlepool

- Community Dental Services – provides dental care for people who are unable to access care from a general dental practitioner due to specific needs. Treatment is usually provided on a referral basis. Based in One Life Hartlepool, Park Road, Hartlepool, TS24 7PW.
- Dental Practices – provide NHS and private dental services to the population across various locations in Hartlepool.

- Tees Oral Health Promotion Service – provides tooth brushing scheme to Early Year settings and primary schools. Also provides training for adult social care, residential settings, health visitors, school nurses and family support workers. Based at University Hospital of North Tees.

2.4 Oral Health Needs Assessment

The oral health needs assessment was carried out by NHSE dental public health consultants and the main recommendations for the region are outlined below:

NENC ICB Recommendations	What needs to be done
Addressing Oral Health Inequalities	Supervised tooth brushing schemes Fluoride varnish programmes Levelling up targeting the 20% most deprived areas for new patient access Extension of water fluoridation in the North East
Improving access for: Children (particularly under 2s) Adults New patients	Continue additional access sessions to improve access for urgent care and new high needs patients Promote dental check by one initiative
Improve access to general anaesthetic services (children)	Improve waiting times Reduce travelling and waiting times for children with complex needs
Improving access for older adults living in care home settings	Continue Caring 4 your Smile programme Fluoride varnish programmes for older people
Early identification and intervention for oral cancers	Signposting to stop smoking services and alcohol reduction services
Workforce recruitment and retention	Initiatives to incentivise recruitment Financial enhancements to maintain NHS dentistry sustainability

2.5 Community Water Fluoridation

The Government have adopted Community Water Fluoridation as policy and have identified the North East as initial region of focus for community water fluoridation due to oral health picture and will provide capital and maintenance funding.

The proposed level of fluoridation through the scheme would be 1mg/l. The Chief Medical Officer has outlined the safety of the programme stating that due to weak and conflicting evidence, there is no significant association between water fluoridation and key health harms. PHE water fluoridation health monitoring reports from 2014, 2018 and 2022 support this (OHID, has legal duty to monitor effects of water fluoridation schemes on health - reports every 4 years), plus other international research evidence.

The Government will lead this programme and local authorities have been asked to support this with links to communities and local communications. Timescales are to be confirmed but a national communications approach is

expected late 2023. Hartlepool already has naturally occurring fluoridated water and so it is unknown at this stage whether any properties will be affected. However it is recommended that this is supported given we can demonstrate positive outcomes associated with fluoridated water.

3. PROPOSALS

3.1 None.

4. RISK IMPLICATIONS

4.1 None.

5. FINANCIAL CONSIDERATIONS

5.1 None.

6. LEGAL CONSIDERATIONS

6.1 None.

7. EQUALITY AND DIVERSITY CONSIDERATIONS (IMPACT ASSESSMENT FORM TO BE COMPLETED AS APPROPRIATE.)

7.1 None.

8. STAFF CONSIDERATIONS

8.1 None.

9. ASSET MANAGEMENT CONSIDERATIONS

9.1 None.

10. ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS

10.1 None.

11. RECOMMENDATIONS

11.1 Note the contents of the report.

11.2 Support the actions to improve dental health in Hartlepool and across the region.

12. REASONS FOR RECOMMENDATIONS

12.1 To improve dental health in Hartlepool and across the region.

13. BACKGROUND PAPERS

13.1 None.

14. CONTACT OFFICERS

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