



## **Leadership Board (Extraordinary Meeting)**

Tuesday, 11th October 2016 at 2.00 pm

Meeting to be held in a Committee Room, Civic Centre, Gateshead Council, Regent Street, Gateshead, NE8 1HH

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# AGENDA

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**Page No**

1. **Apologies for Absence (Members)**

2. **Declarations of Interest**

Please remember to declare any personal interest where appropriate both verbally and by recording it on the relevant form (to be handed to the Democratic Services Officer). Please also remember to leave the meeting where any personal interest requires this.

3. **"Health and Wealth - Closing the Gap in the North East": Report from the joint NECA/NHS Commission for Health and Social Care Integration** 1 - 6

4. **Date and Time of the Next Ordinary Meeting**

Tuesday, 15 November 2016 at 2pm at County Hall, Durham.

Contact Officer: Victoria Miller Tel: 0191 211 5118 E-mail: [victoria.miller@northeastca.gov.uk](mailto:victoria.miller@northeastca.gov.uk)

**To All Members**

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## North East Combined Authority

### Leadership Board

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**Date:** 11<sup>th</sup> October 2016

**Subject:** “Health and Wealth – Closing the Gap in the North East”:  
Report from the joint NECA/NHS Commission for Health and  
Social Care Integration

**Report of:** Interim Director Health and Social Care Integration

#### Executive Summary

The North East Combined Authority area has excellent health and care services, and has experienced the fastest increase in life expectancy of any region of the UK. But the health and wellbeing gap with the rest of the UK and health inequalities within the region remain stubbornly high, with lifestyle factors and deprivation levels impacting on health and wellbeing. Poor population health leads to over use of intensive health services and pressures on primary and social care, resulting in a system over-focussed on the treatment of ill health at the expense of preventing it. It also reduces productivity and hampers economic growth, entrenching the income inequalities which contribute to poor health.

The Commission for Health and Social Care Integration was established by the North East Combined Authority (NECA), local NHS and Public Health England in 2016 with all partners recognising the value of an independent Commission able to take a fresh look at these issues and the scope to address these through joint working. This report of the Commission sets out a vision for transforming the health and wellbeing of North East residents and in so doing helping to improve the performance of its economy and the prosperity of its people. It is a call to action for leaders across the health and care system in the NECA area.

#### Recommendations

The Leadership Board is asked to receive the report.

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### 1 Background Information

- 1.1 Members of the Leadership Board will be aware that the joint NECA/NHS Commission for Health and Social Care Integration was established as an independent commission earlier this year and has been looking into how the NHS, councils and other public, private and community and voluntary sector bodies could further develop the work they do together to improve health and wellbeing and reduce health inequalities for the people of the North East, in the context of reduced resources across the system. The Commission have met on four occasions this year, February, May, July and for the final time on the 26th September.
- 1.2 The five independent Commission members bring a range of expertise and perspective from across the care and health system. The Commission was chaired by Duncan Selbie, Chief Executive of Public Health England, working with Dr Amit Bhargava, Chief Clinical officer for the NHS Crawley Clinical Commissioning Group and Executive Board member of NHS Alliance; Professor Dame Carol Black, expert advisor on health and work to Department of Health and Public Health England and Principal, Newnham College Cambridge; Rob Whiteman, Chief Executive of the Chartered Institute of Public Finance and Accountancy; and Tom Wright, Chief Executive of Age UK and chair of the Richmond Group of leading health charities.
- 1.3 The five independent Commission members were joined by four ex-officio members to facilitate connections with the NECA area and national partners. These are Steven Mason, Chief Executive of Northumberland County Council and NECA lead for the Commission (a role fulfilled by Jane Robinson prior to leaving Gateshead Council in July); Nicola Bailey, Chief Operating Officer for North Durham CCG and Durham, Dales and Easington CCG and CCG lead for the Commission; Tim Rideout, Director of Commissioning Operations and NHSI, NHS England for Cumbria and the North East; and William Vineall, Director of Acute Quality and Care Policy at the Department of Health.
- 1.4 The Commission has worked collaboratively with local care and health organisations, testing emerging thinking with a steering group of representatives of the NECA, NHS and Public Health England partners. In developing this report, the Commission has also engaged local health and care stakeholders, seeking views from across the region through a call for evidence and holding listening events in each of the seven local authority areas to gather views, in addition an event organised for the voluntary, community and social enterprise sector (VCSE). What the Commission learned from these conversations and common themes that emerged from this work have influenced the recommendations of the Commission.

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### 2 Proposals

- 2.1 It is proposed that Duncan Selbie, Chair of the Commission, will attend the Leadership Board meeting on the 11th October to present the report, and engage Leaders and Elected Mayor in a discussion about the key themes addressed in the report. There are some positive messages contained within the report which need to be highlighted including:
- Setting out a vision for transforming the health and wellbeing of North East residents and in so doing helping to improve the performance of its economy and the prosperity of its people.
  - A call for action aimed at local authority leaders, NHS leaders, businesses, voluntary sector organisations and central government. It will urge civic, public service and business leaders to work together to mobilise the system around the objective of improving health outcomes and reducing health inequalities across the life cycle, from school readiness through good and fulfilling employment to healthy and independent old age.
  - The report will call for action that needs to be delivered by every part of the system; and
  - Sets out a clear agenda for shifting the priority from response to prevention across the public sector.
- 2.2 The recommendations set out in the report span areas such as increasing investment and focus in prevention; examples of areas where there could be greater consistency of approach across the NECA area to increase the impact of short, medium and longer term health improvement initiatives; proposing greater action to help people to stay well and in work and to return to work after sickness as quickly as possible; actions to increase the role employers can have in keeping their workforce healthy as part of the drive to grow the regional economy and how leaders across the system could develop their approach to working together in the interest of the NECA area as a whole.
- 2.3 The intention is to share, via a supplementary report, the Commission's report when it is finalised.

### 3 Next Steps

- 3.1 Following the Leadership Board on 11th October where the report will be received, Members of the NECA Leadership Board, each Local Authority and NHS organisation (within the NECA area) will be invited to consider the contents of the report over the following 6 weeks or so, seeking endorsement of the recommendations and commitment to participate in the implementation of the report recommendations.

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### **4 Potential Impact on Objectives**

- 4.1 The recommendations in the report can be implemented through existing structures in parallel with any further discussions regarding the potential devolution of powers. Health and care partners could use their existing powers and resources differently to improve health and wellbeing, and do not require new devolved powers to implement the Commission's recommendations.

### **5 Finance and Other Resources**

- 5.1 The work of the commission to the point of the production of the report has been funded from the NECA devolution budget. There are no direct financial implications for NECA as a result of the recommendation of the report, although there are significant recommendations about prioritising funding for preventative health care activity for Health and Local Authority partners in the NECA area and for the Government in future. Funding for any future work would need to be separately identified.

### **6 Legal**

- 6.1 There are no specific legal issues arising from this report.

### **7 Other Considerations**

#### **7.1 Consultation/Community Engagement**

- 7.1 Members of the NECA Leadership Board have received a range of both formal and informal updates in relation to the work of the Commission. In developing this report, the Commission has worked closely with local health and care stakeholders, seeking views from across the region, in addition an event was organised for the voluntary, community and social enterprise sector (VCSE). The feedback received from these conversations, and common themes that emerged from this work have influenced the conclusions of the Commission.

#### **7.2 Human Rights**

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

#### **7.3 Equalities and Diversity**

There are no specific equalities and diversity implications arising from this report.

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### 7.4 Risk Management

There are no specific risk management implications arising from this report.

### 7.5 Crime and Disorder

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

### 7.6 Environment and Sustainability

There are no specific environment and sustainability implications arising from this report.

## 8 Background Documents

8.1 Commission Framing Document

## 9 Links to the Local Transport Plans

9.1 Not applicable

## 10 Appendix

10.1 Not applicable

## 11 Contact Officer

11.1 Rosemary Granger  
Interim Programme Director Health and Social Care Integration  
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07837893214

## 12 Sign off

- Head of Paid Service ✓
- Monitoring Officer ✓
- Chief Finance Officer ✓

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