

**JOINT HEALTH AND WELLBEING BOARD**

A meeting of the Joint Health and Wellbeing Board was held on 4 June 2020.

**PRESENT:** Councillors M Adams, A Barnes, C Blair, K Boulton, B Cooper, Mr M Davis, D Davison, A Downey, Mr D Gallagher, D Gardner, S Johnson, S Kay, M Lanigan, J Lowe, M Milen, M Ovens, P Rice, M L Smiles, Ms C Smith, D Tomlinson, J Walker, K Warnock and L Westbury

**OFFICERS:** C Breheny  
J McNally  
APearson

**APOLOGIES FOR ABSENCE** S Butcher, S Graham, I Holtby, C Martin, T O'Neill, S Page, T Parkinson, J Sampson, Mr A Tahmassebi, .

**DECLARATIONS OF INTERESTS**

There were no declarations of interest.

**20/1 MINUTES OF THE LIVE WELL SOUTH TEES BOARD HELD ON 12 MARCH 2020**

The minutes of the Live Well South Tees Board held on 12 March 2020 were agreed as a true and accurate record.

**20/2 THE IMPACT OF COVID-19 ON SYSTEM DELIVERY**

Mark Adams, Director of Public Health delivered a presentation to the Live Well South Tees Board on Covid-19: Impact on Delivery of Health and Wellbeing Priorities.

The aims of the presentation were to:

- Understand the impact of COVID-19 on the priorities of the Board and delivery of the Joint Health and Wellbeing Board Strategy.
- Describe the system response to COVID-19.

The Director of Public Health explained the Covid 19 response structure to the Board detailing the multi agency response and Middlesbrough Council's response as an example.

The Board were advised that Redcar and Cleveland Council had issued £21.5 million in business grants and Middlesbrough had issued £22.7 million. The Board heard that Redcar and Cleveland Council had delivered 3900 food parcels and Middlesbrough had delivered 1900 food parcels. In terms of attendance at school there was 2.64% in attendance of which 12.3% were deemed as vulnerable children and in Middlesbrough 3.2% in attendance with 8.1% deemed as vulnerable.

The Board heard that the incident rate based on tested cases per 100,000 of the population at that point in time was 677 for Middlesbrough and 423 for Redcar and Cleveland. There had been 197 deaths in Middlesbrough and 94 in Redcar and Cleveland. The Board heard that Middlesbrough had the 4th highest rate per 100,000 in the country with Gateshead, North Tyneside and Sunderland above Middlesbrough. The Director of Public Health advised that the biggest risk factor of dying from Covid is age, the mortality rate of those dying in James Cook Hospital in their 70's was 45% and 55% for people in their 80's. The peak of deaths was in mid April and has since started to slow down since then. It was advised that we had not seen a large number of deaths in the BME community in our area. The Board heard that ONS - mortality rate of the poorest is twice that of the wealthiest (55.1 vs 25.3 deaths/100k). This is linked to overall health as health is socially profiled, the poorer you are the more co-morbidities and health conditions a person is likely to have. People are also less likely to be in a job when they can work from home such as supermarket workers and healthcare workers so are more likely to become infected and come into contact with more people.

The Director of Public Health informed the Board that there were multiple surges with Covid - 19 and advised that the surges do not happen in a particular order they overlap and interlink: The Director of Public Health stressed that the impact of Covid 19 was not just infection or people dying it has a raft of other impacts to consider.

#### 1st Wave

- Immediate mortality and morbidity of Covid - 19

#### 2nd Wave

- Impact on resource restriction on urgent non Covid conditions

#### 3rd Wave

- Impact of interrupted care on chronic conditions

#### 4th Wave

- Psychic trauma
- Mental illness
- Economic injury
- Burnout

The Director of Public Health informed the Board of Unintended consequences of Covid - 19 which included:

- Delay in presentation
- Reduced routine management of long term conditions
- Reduction in planned care
- Effect on screening programmes
- Lower levels of immunisation
- Mental Health
- Changes to coping behaviours - Increase in alcohol consumption, drug misuse and smoking prevalence.

The vision and themes of the Live Well South Tees Board is to "Empower the citizens of South Tees to live longer and healthier lives"

#### Key themes

1. Inequalities - Addressing the underlying causes across local communities
2. Integration - across planning, commissioning and service delivery
3. Information and Data - data sharing, shared evidence, community information, and information given to people

Addressing the underlying causes of inequalities would include:

- Tackling worklessness and addressing underlying health issues
- Tackling poverty, financial inclusion and welfare reforms
- A coordinated approach to tackle fuel poverty
- Violence prevention
- Promoting good mental health and emotional well-being
- Inclusive growth and maximising the benefits of economic development for all communities
- Healthy lifestyles
- Developing resilient communities

The Director of Public Health advised that it was estimated that 32.3% of workers in Tees Valley have been put on furlough, with 15.8% made redundant which would cause significant

stress and anxiety on our residents.

The Director of Public Health stated that sectors that will struggle to survive in our area include retail, transport, hospitality and leisure. These sectors employ a lot of young people so it could have a significant impact on youth unemployment.

The Board heard that austerity already impacting on life expectancy in our area life expectancy is decreasing. There is an increasing impact of poverty on people in our communities.

The Director of Public Health advised of the numbers of people attending hospital due to alcohol related harm and self harm the numbers differ greatly between our most deprived and affluent wards. The Board also heard that there had been an increase in suicides in our area.

The Board heard that the impact of poverty and health is significant, the Director of Public Health advised the Board on figures relating to child poverty and health in Middlesbrough and Redcar and Cleveland which included:

- 30% of children in Middlesbrough live in poverty and 23% in Redcar and Cleveland
- 32% children have poor dental health and 25% in Redcar and Cleveland
- Attainment almost half of children are behind at age of 5 in Middlesbrough

The impact of increased demand due to poverty will be:

- Increased demand on NHS - primary care, A&E and emergency care
- Increased demand on all-age social care
- This will require a WHOLE system response - it is important that treatment models are not seen as the only solution to this issue
- Impact on housing - increase in tenants in arrears & debt (Mental Health, despair, alcohol etc)
- Increased digital exclusion in the new normal

The Director of Public Health spoke about violence prevention he advised that Middlesbrough has the highest rate of hospital admissions due to violence in the north east and also the highest rate of violent offences in the North East.

The Board heard that there had been:

- An impact on community safety and cohesion
- Increasing domestic abuse
- Impact on anti-social behaviour
- Impact on violent crime

The Director of Public Health informed the Board of the impact on Mental Health which included:

- Direct impacts of Covid-19 and subsequent socio-economic changes are being experienced differently by different sectors of society
- Emerging evidence that people who have had more serious experiences of Covid-19 may also have a neurological impact and/or psychological challenges post ICU
- Impact of bereavement as a result of Covid-19, in addition to bereavement processes for both this group and the broader population disrupted by social distancing measures
- Psychological impacts upon health and social care staff of providing care and treatment to people in this period
- Potential to exacerbate current inequalities experienced by people with mental health problems, and accentuate social factors that contribute to mental health problems:
  - anxiety associated with catching the virus
  - reduction or removal of key elements of social support for people with / at risk of MH issues

- less visibility of safeguarding issues
- increasing levels of unemployment and associated financial issues
- lack of access to educational opportunities

The Board then heard of the impact on healthy lifestyles which included:

- Physical activity & increasing inequality (confusion on guidelines on exercise and distancing)  
Diet
- Alcohol & other coping methods
- Long term future of leisure centres and new models of fitness
- Broadening inequalities (Mental Health, Learning Disabilities)

The Director of Public Health advised the Live Well South Tees Board of the proposed Health and Wellbeing Board approach to support recovery which included:

- Focus on PLACE (not organisations)
- Build common purpose (vision, values, common function) across members
- Shared insight and credible strategies
- Mission-driven & consistent
- Strong, collaborative leadership
- Closer connection to communities

The Chair thanked the Director of Public Health for the comprehensive presentation and stated that poverty in our area had not happened overnight and that the Live Well South Tees Board needed to come together to make a difference going forward to ensure that in a years time the figures around poverty had not increased. The Chair raised concerns over a second spike of the virus and stressed that the track and trace pilot programme that both Middlesbrough and Redcar and Cleveland would be vital in the fight against Covid 19.

As part of the ensuing discussions, the following comments were made:

- Poverty in our area has not happened overnight
- The Live Well South Tees Board need to come together to make a difference going forward and not work in silos
- Digital exclusion is a concern, a bid has been submitted to the Kings Fund which if successful could help to carryout surveys to help understand the scale of digital exclusion in our residents
- Need to learn from the work that is being carried out in the local community during the pandemic and build on this work
- Need an asset based approach
- More people have taken up exercise and people need to be encouraged to continue.
- Build on the community spirit that has emerged through the lockdown period
- What is the new norm around volunteering and how do we build on that and support volunteers.
- A Member raised the issue of young people inhaling laughing gas and shops selling this to young people it was suggested that the Live Well South Tees Board could target shops to encourage them to stop selling to young people.
- The enormous challenges around mental health and the high levels of presentations to services.
- How the Live Well South Board can influence a share of finances from Central Government to support the work of the Board.

Agreed that:

- The Live Well South Tees Board agreed the proposed Health and Wellbeing Board approach to support recovery
- The Live Well South Tees Board identify clear steps with a small number of priorities
- The Director of Public Health will provide the information on poverty and child health for Redcar and Cleveland.
- Mark Adams and Kathryn Warnock will work together to bring together groups to look

at aspects that are impacting on our communities including employment, health and poverty.

- The Live Well South Tees Board needs to capitalise on the enthusiasm that people have found in exercise during the lockdown period.
- A report will be brought to the next meeting of the Live Well South Board detailing the priorities.
- The Health and Wellbeing Executive report will be presented at the next meeting of the Live Well South Tees Board

Date and Time of the next meeting of the Live Well South Tees Board is TBC