

## HEALTH AND WELLBEING BOARD

14 September 2023

**Commenced:** 10.00 am

**Terminated:** 11.05 am

<b>Present:</b>	Councillor Wills (Chair)	Executive Member (Population Health and Wellbeing)
	Councillor Fairfoull	Deputy Leader (Children and Families)
	Councillor Sweeton	Executive Member (Inclusive Growth, Business & Employment)
	Councillor Taylor	Executive Member (Adult Social Care, Homelessness & Inclusivity)
	Sandra Stewart	Chief Executive
	Stephanie Butterworth	Director of Adult Services
	Debbie Watson	Director of Population Health
	Anna Hynes	Action Together
	Diane Burke	DWP
	Stephanie Sloan	Tameside and Glossop Integrated Care NHS Foundation Trust
	Tanuj Aggarwal	Greater Manchester Integrated Care Board

### Officers In

<b>Attendance:</b>	Julian Jackson	Director of Place
	James Mallion	Assistant Director of Population Health
	Jane Sowerby	Assistant Director of Education
	Vicki Lawson	Children's Services Consultant
	Anne Whittington	Consultant in Public Health

**Apologies for Absence:** None

### 8. DECLARATIONS OF INTEREST

There were no declarations of interest.

### 9. MINUTES

#### RESOLVED

The Minutes of the meeting of the Health and Wellbeing Board held on 15 June 2023 were agreed as a correct record.

### 10. BUILDING BACK FAIRER, STRONGER, TOGETHER: TAMESIDE JOINT HEALTH & WELLBEING STRATEGY AND LOCALITY PLAN (2023-2028)

Consideration was given to a report of the Director of Population Health / Executive Member (Population Health & Wellbeing), which provided an overview of the new Joint Health & Wellbeing Strategy and Locality Plan for Tameside, which would be in place over the next 5 years (2023-2028). It encompassed the Health and Wellbeing Board's three key priorities and was an ambitious strategy aimed at reducing inequalities and wider determinants of health.

It was reported that with the establishment of the Greater Manchester Integrated Care Partnership in 2022 and previous versions of both the Health & Wellbeing Strategy and Locality plan for Tameside being due for renewal, the Strategy brought both of those documents together in one shared vision across system partners and communities in Tameside. The joint strategy had been developed in recent months, including engagement during the summer of 2023 with a range of partners, Voluntary, Community, Faith & Social Enterprise (VCFSE) stakeholders and members of

the public to make amendments based on feedback received.

The strategy set out the ambitions for improving the health of Tameside residents and reducing the inequalities many communities in Tameside experience. It also explained how these ambitions would be achieved by making commitments across the life course, including a focus on mental health and wellbeing and then building back fairer, stronger and together to achieve these.

The full final version of the joint strategy titled *Building Back Fairer, Stronger, Together – Joint Health & Wellbeing Strategy and Locality Plan for Tameside 2023-2028*, was appended to the report and considered by the Board. A presentation was delivered that focussed on the development of the strategy, details of the consultation process that was adopted and the engagement work that was undertaken, the next steps in delivering on the priorities and objectives identified throughout the strategy and the robust governance structure in place.

The contents of the report were outlined and it was explained that the information was presented visually with infographics of key data around demographics and health challenges in the borough, particularly highlighting the inequalities in Tameside. There was also some context around the 'Tameside journey' in terms of change in the public system in recent years, particularly the health and care system. The importance of alignment to the GM Integrated Care Partnership, as well as the importance of the role of the VCFSE sector was highlighted.

Board members joined the Chair in thanking all those involved with the development of the strategy and praised the amount of engagement and data analysis that had been carried out to ensure a true reflection of the Tameside resident. The Chair provided an insight of her experience as a lifelong resident of Tameside and advised that outcomes would be provided to Members at a Ward level.

The NHS representative commended the engagement with health partners, which demonstrated the collaborative approach. She highlighted that the strategy aligned with their forward plan and had been well received by the Greater Manchester ICB and provider partnerships.

A lengthy discussion ensued and, in response to questions, the Director of Population Health advised that a performance framework would be produced that would be monitored by the Health and Wellbeing Board, the Tameside Strategic Partnership Board and Provider Partnerships. She emphasised that this would not be a short-term piece of work but there were things that could be actioned in both the short, medium and long term and a delivery plan would be produced to identify trends in the data.

#### **RESOLVED:**

##### **That the Health & Wellbeing Board:**

- (i) Approved the final Joint Health & Wellbeing Strategy and Locality Plan for Tameside (2023-2028);**
- (ii) Endorsed joint sign off from the Tameside Strategic Partnership Board in September 2023; and**
- (iii) Endorsed the development of a specific delivery plan relating to the Health & Wellbeing Strategy, which would be monitored by the Health & Wellbeing Board (with another delivery plan relating to the Locality Plan being produced and monitored by the Strategic Partnership Board).**

#### **11. EARLY HELP STRATEGY 2023-2026**

Consideration was given to a report of the Director of Children's Services / Deputy Executive Leader (Children's) that outlined the establishment of the new Early Help Strategy. The Strategy built on the previous Tameside Early Help Strategies of 2017 and 2020 and had been developed in order to achieve better outcomes for families and to deliver on corporate priorities to ensure children had the very best start in life, gained aspiration and hope through learning and to nurture

resilient families and supportive networks to protect and grow Tameside's young people.

It was reported that the drivers of the Strategy included the recommendations from the Independent Review of Children's Social Care (2022), the Department for Education's 'Stable Homes, Built on Love' strategy and consultation (2023), the Family Hubs and Start for Life programme (2022-2025), the OFSTED Joint Targeted Area Inspection and the SEND review. Building on these insights and best practice, Tameside had also developed a new Thresholds Document ([Tameside Framework for help and support](#)), which would support the delivery of the Early Help Strategy by supporting professionals to identify signs that families needed help and the appropriate level of support required.

The Board were notified that the Early Help Strategy 2023-2026 would reflect and align the approach with these recent changes, strengthening the approach to early intervention, providing families with the right help, from the right place at the right time. The new strategy also acknowledged recent structural changes, which had been made to Tameside Council's Early Help offer including the establishment of targeted family help at Level 3 of the threshold framework where more complex early help cases would be held by Family Help Lead Practitioners who would work with a family as long as needed provided they were making progress.

To help design the framework and priorities behind the Strategy, two in-person workshops were held on the 29 September 2022 and 13 January 2023, which were attended by representatives from Active Tameside, Greater Manchester Police, Children's Social Care, Population Health, Libraries, Adult Social Care, Action Together and Health Services. An online survey was launched for 9 weeks, from 3 March 2023 until 5 May 2023, and was shared widely with a variety of partners and organisations, and gained 133 responses. The survey was also advertised at the launch event for the West Family Hub in Tameside on the 20 March 2023, and in-person consultation events took place with the Youth Council on 3 April and 17 April 2023, SEND Young Person's Council on 25 April 2023, Young Carers Forum on 27 April 2023 and the voluntary sector on 13 April and 3 May 2023.

The draft Early Help Strategy 2023-2026 Strategy was presented to the Neighbourhood Forums throughout March 2023 for feedback and awareness and was also shared with the Early Help Transformation Board, Tameside Community Safety Partnership, Neighbourhood Transformation Group, Executive Safeguarding Children Partnership and Health and Wellbeing Board.

The Board were informed that responses to the consultation were predominantly related to understanding of practice, which would be addressed through workforce development and engagement. Other issues identified related to SEND and would be addressed through the SEND Improvement Group via the written statement of action.

The next steps and implementation of the Strategy were outlined and the Board were advised that the Early Help Partnership, a multi-agency working group, would develop and drive a delivery plan from this Strategy. Additionally, a shorter, young person and family focused guide to Early Help would be developed. The newly appointed Children's Communications Officer would pull together a communications distribution plan to ensure a wide distribution.

## **RESOLVED**

- (i) That the report be noted; and**
- (ii) That the Health and Wellbeing Board endorse the Early Help Strategy 2023-2026.**

## **12. STOCKPORT, TAMESIDE AND TRAFFORD CHILD DEATH OVERVIEW PANEL (STT CDOP) ANNUAL REPORT 2021-22**

The Director of Population Health submitted a report that summarised the findings of the tripartite annual report for 2021/22 of the Stockport, Tameside and Trafford Child Death Overview Panel (STT CDOP), as appended to the report. The three areas were linked together based on

population size and the Chair of the Panel rotated between the three areas with Stockport being the current Chair.

The Consultant in Public Health, Population Health advised that child death reviews were a statutory responsibility under the Children Act 2004 and the STT CDOP published an annual report to describe why children who lived within the three areas of Stockport, Tameside and Trafford (STT) died, to learn from the circumstances as far as possible and present recommendations for the future. The data was stored in a consistent format in order to help identify trends over a 5-year rolling period

An explanation of the process was provided, as follows: all cases of child death were referred to the Panel as a notification. An information gathering process took place for each case and when all investigations were complete, the CDOP reviewed and closed the case. Therefore, some cases were closed in a different year to the year in which they were notified hence the disparity in the data.

It was reported that in 2021/22 the Panel were notified of 39 cases (20 or 51.3% in Tameside) and 45 cases were closed by the Panel (13 or 28.9% in Tameside). Just over half of deaths were expected, which was higher than previous years, and was more commonly the case for deaths of infants (i.e. those under the age of 1 year). Approximately two-fifths of cases (38.5%) across STT were infants, which was slightly lower than in previous years where half of child deaths were aged under a year. Low birthweight and prematurity contributed to a high proportion of infant deaths and these factors increased the risk of dying within the first 28 days. Age distribution across other age groups was fairly even at 10-18%.

The Board were informed that around a quarter (23.1%) of STT notifications belonged to a non-White ethnic group, which was in line with the proportion of the child population in these groups. There was a tendency towards higher children death notification rates in more deprived areas of STT but small numbers meant that this trend was not clear. The largest proportion of deaths (33%) were due to chromosomal, genetic and congenital anomalies; the second largest proportion (27%) were due to perinatal/neonatal even and the third largest were cancers and trauma/injuries (16% each). Modifiable factors were identified in 24% of cases, which was fewer than the proportion of 50% in 2019-20. Factors included parental smoking, domestic abuse, parental mental health and parental alcohol or substance misuse.

In response to questions, it was confirmed that the Stockport, Tameside and Trafford Child Death Overview Panel Annual Report for 2021/22 would be presented at the Tameside Children's Safer Partnership and shared with Tameside and Glossop Integrated Care Foundation Trust and other partners in relevant areas.

**RESOLVED:**

- (i) That the report be noted; and
- (ii) That the Health and Wellbeing Board accept the recommendations of the Stockport, Tameside and Trafford Child Death Overview Panel (STT CDOP) annual report for 2021/22 as follows:-
  - i. Health and Wellbeing Boards should continue their work to address the longstanding causes of increased risk of child deaths. These are recurring modifiable factors in recent CDOP cases, and their contribution to child deaths is supported by a broad evidence base. They include:
    - a. Obesity; particularly in children and women of childbearing age
    - b. Smoking by pregnant women, partners, and household members / visitors
    - c. Parental drug and alcohol abuse
    - d. Domestic abuse
    - e. Mental ill health
    - f. Co-sleeping
    - g. Multiple embryo implantation during IVF procedures
  - ii. In line with the recommendations of previous CDOP annual reports, Maternity

- services should
- a. Ensure that all women are supported to access high quality antenatal care from early in their pregnancies.
  - b. Deliver safe, evidence based healthy weight interventions, so that when a women books with the service and she is recorded as not being a healthy weight she is supported to maintain or, if safe to do so, reduce her BMI.
- iii. All CDOP partners should continue working to ensure the robust data recording of protected characteristics as required under the Equality Act 2010.
- iv. The CDOP chair should work with CDOP panel members and the STT Child Death Review Partners on an ongoing basis. This should include (as a minimum):
- a. Reviewing the draft annual report and agree its recommendations
  - b. Providing an update on the actions taken in response to the recommendations in the previous annual report.
  - c. Maintaining an awareness of the cases awaiting panel discussion and responding to any challenges and changes within the management of the CDOP process.
- v. The data used to compile the annual report should be stored in a consistent format to enable a rolling 5-year look back review to identify robust trends and provide a firmer basis for specific recommendations to the health and wellbeing board. This should inform the recommendations in annual reports from 2024-25 onwards.

### **13. DATE OF NEXT MEETING**

**RESOLVED:**

That the next meeting of the Health and Wellbeing Board scheduled for 16 November 2023 be noted.

### **14. URGENT ITEMS**

There were no urgent items.

**CHAIR**