

Healthy and Caring City Portfolio Report

Councillor Karen Kilgour

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Healthy Caring City Portfolio

Introduction by Councillor Karen Kilgour



I am delighted to introduce my annual report as Lead for Healthy Caring City, a portfolio for safe, effective adult social care and public health services, reducing health inequalities so that residents can live as healthily and independently as possible, for as long as possible.

This report contains important information on our progress and plans in a wide range of service areas, demonstrating the breadth and depth of the essential work that the council delivers. I would like to place on record my thanks to our fantastic Health and Social Care workforce and our Public Health workforce for their commitment to deliver day in, day out, despite the growing impact of sustained cuts from central government to our budgets.

We continue to strive towards our manifesto commitment to support the recruitment and retention of care sector workers, including paying carers a real living wage. We want to create lasting change for people and places in poverty, building more equal communities where everyone can thrive.

Our commitment to paying the Real Living Wage makes complete sense to us, both because it's the right thing to do and because valued staff are more engaged and productive. As part of the Council's Real Living Wage accreditation, we have a plan in place to support our commissioned services to become real living wage employers too.

We're making good progress on tackling social isolation by supporting people to be digitally included through access to technology and training; following the success of our travel pilot, our care leavers now receive a travel pass that enables them to access services, education, employment and training, and to travel around the City. I am also happy to share that we are piloting a scheme that gives our 16 to 21 year old care leavers a free gym pass to access leisure activities, increase their social network and support health and wellbeing.

I was thrilled to launch our Anti Poverty Strategy this year. We know that growing up in poverty can have a significant and long-lasting impact on health and wellbeing, and with almost 4 in 10 (38%) children living in poverty across Newcastle, our city-wide action plan 2023-2027 will be instrumental in preventing and reducing the impacts of poverty on our residents and making a real difference over the next 12 months, setting ambitious action for the welfare and wellbeing of our residents, who are at the centre of everything we do.

Councillor Karen Kilgour
Cabinet Member for a Healthy Caring City and Deputy Leader

Introduction

Who we help

We provide essential care services to adults in the city, as well as protecting those at risk of abuse or neglect. This includes older people, people with physical or learning disabilities or autism, people with mental health conditions or cognitive impairments, people who have support needs arising from substance misuse and young adults who have had chaotic lives or been exploited by others. In 2022-23 we had 10,096 requests for support from people who do not already receive social care support from us (591 more requests than last year). In addition, 4,798 people received ongoing long-term support. In 2022-23, we supported:

1661 people aged 18 – 64

3137 people aged 65 and over

2388 with a primary support reason of physical disability

1016 with a primary support reason of learning disability

536 with a primary support reason of mental health

761 with a primary support reason of memory cognition

26 with a primary support reason of sensory support

68 with a primary support reason of social support

About our Workforce

Adult social care represents a large employment sector in Newcastle. Of the **9,800** filled posts in Adult Social Care in the city, **800** are employed by Newcastle City Council, including social workers and care workers¹.

What are people telling us?

In 2022-23 we have seen 5 Adult Social Care outcomes Framework (ASCOF) measures improve, 1 measure stay stable with no change and 2 ASCOF measures decline in Newcastle since the previous survey in 2021/22. 65% of people were satisfied with their care and support services and 60% were satisfied with their quality of life. 47% of people did not try to find information or advice, but we do not know whether this is because they did not need any more information than they had already received or whether there was another reason. Of those who had tried to find information or advice about services 59% had found it easy.

¹ Skills for Care Adult Social Care Workforce Data [My local area \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk)

Almost three quarters (72%) of people reported that they feel safe and 90.7% of people said that their care and support services helped them feel safe, increasing 2.1% since the previous survey. 83% (↑0.9%) of people described their health as fair, good or very good, with a fall in the number of people who said they were experiencing moderate to extreme pain (61%, ↓0.5%). 46.5% of people said they experience moderate to extreme anxiety or depression which has fallen 8.3% since last year. When people were asked about their ability to undertake tasks independently, 80.3% responded that they could manage to feed themselves without any help but only 19.9% could deal with financial tasks and paperwork themselves without help, 1.6% fewer than the previous survey.

The Health-Related Behaviour Questionnaire (HBRQ) is a bi-annual survey completed by school children in years four, six, eight and ten. Pupils are asked complete questions about their health and wellbeing, in addition to basic demographic data. The HRBQ 2022 surveyed 7,396 pupils from 71 schools across Newcastle. Two separate surveys were undertaken, one for primary schools and another for secondary schools. The surveys asked students to answer a range of questions about drugs and alcohol, smoking, safety and violence, the internet, nutrition, physical activity, emotional wellbeing, worries, and COVID-19.

In total, 4,904 primary students (Years 4 and 6), and 2,492 secondary students (Years 8 and 10) took part in the survey. Findings showed positive trends in terms of alcohol consumption, the proportion of students who have ever taken drugs or smoked, nutrition, and perception of physical activity. Areas for improvement include perceptions of drug safety, use of e-cigarettes, internet safety, relationships and sexual health, and mental health and emotional wellbeing. The HRBQ findings are used to inform work across the local authority and wider partners, in addition capturing changes in children's health and wellbeing over time.

In response to engagement with residents, we launched a new online/digital sexual health service. Our residents told us that they wanted to be able to access sexual health services remotely, in addition to the in person clinical services provided. Young people in particular said that they didn't always want to travel to the city centre for routine testing of Sexually Transmitted Infections (STIs) and contraception options which could be ordered online and delivered direct. We now have an established and experience provider of online sexual health service. Equity of access, inclusivity and removing barriers are at the heart of the digital offer.

Key Financial Information

Since 2010, the Council has experienced central government cuts to its core funding of over £335 million and further substantial reductions are expected in the next three

years. At the same time, the unprecedented cost of living crisis fuelled by spiralling inflation adds to these cost pressures and challenges our ability to provide the services our residents increasingly require. Funding for Adult Social Care has been under intense and sustained pressure, with cumulative savings of £71m between 2011-12 and 2021-22, and a further reduction of £4.45m to be made in 2022-23. In addition, we estimate that cost pressures arising from increased complexity, contract inflation and the National Living Wage will exceed £30m between 2022-23 and 2024-25. An overall financial picture of Council services over the next year is set out below and a list of key delivery areas provided by these services is set out in appendix one of this report.

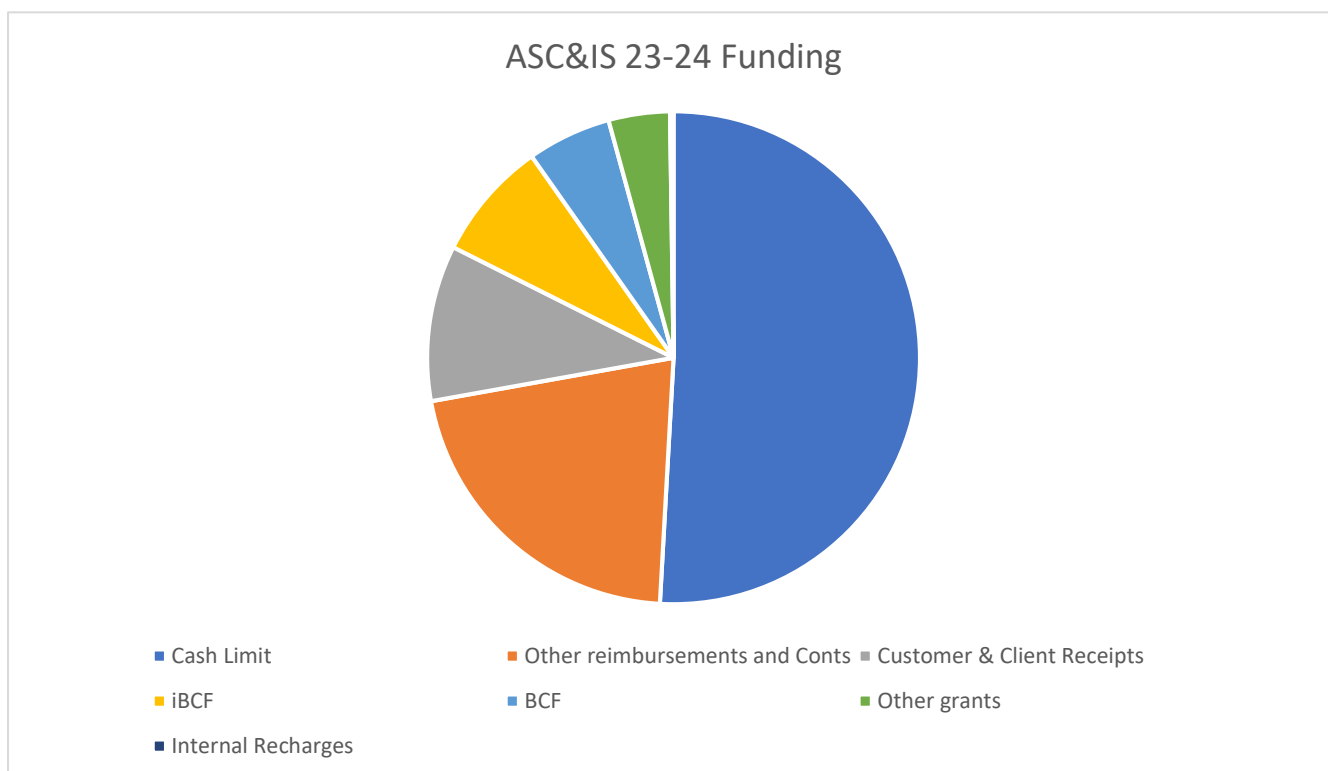
22/23 Outturn	2022-23 Actual Expenditure/Income		
	Expenditure	Income	Net
Service Area			
Adult Social Care			
Better Care Fund	86,493	(11,846,403)	(11,759,910)
Business Finance	3,781,014	(3,686,982)	94,032
Fairer Charging Income	539,474	(5,298,339)	(4,758,865)
Learning Disability	70,251,904	(21,347,954)	48,903,950
Mental Health	13,593,608	(7,620,991)	5,972,618
Older People	72,229,135	(35,300,316)	36,928,819
Other Social Care Services	4,571,273	(1,642,162)	2,929,111
Physical Disability	14,428,025	(5,897,697)	8,530,328
Specialist Services Other	815,015	(278,314)	536,701
Workforce Development	661,641	(32,971)	628,670
Total Adult Social Care	180,957,583	(92,952,129)	88,005,453
Integrated Services	Expenditure	Income	Net
Care Services	14,247,440	(8,259,257)	5,988,182
Supported Employment	467,088	(60,931)	406,157
Commissioning	1,291,160	(592,203)	698,957
Inclusion and Prevention	214,296		214,296
Newcastle Neighbourhoods	235,332	(155,147)	80,185
Total Integrated Services	16,455,315	(9,067,537)	7,387,778
Public Health	Expenditure	Income	Net

Delivery of statutory public health outcomes framework			
Preventative health			
Embedded public health across Council activity	22,191,674	(23,432,510)	(1,240,836)
Promotion of health neighbourhoods			
Covid-related public health infrastructure and community support			
Total	219,604,572	(125,452,177)	94,152,395

In 2022/23 Adult Social Care and Integrated Services had an overspend of £0.421m, due to pressures within commissioning budgets predominantly within older people and learning disability services, offset by underspends within Integrated Services.

23/24 Budget

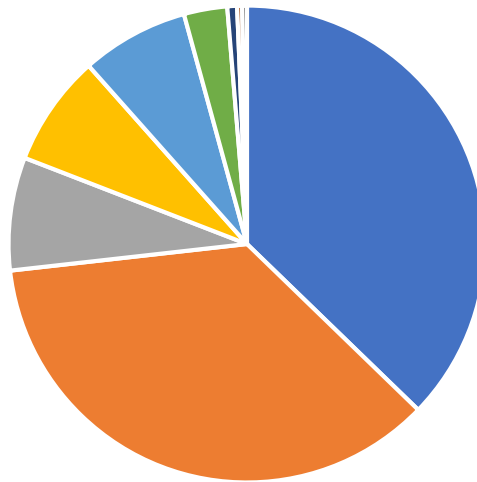
The Adult Social Care and Integrated Services budget for 23/24 is made up of income from several sources:



Cash Limit 50.89%, Other reimbursements and contributions 21.29%. Customer and Client Receipts 10.22%, iBCF 7.83%, BCF 5.51% , Other Grants 4.02%, Internal recharges 0.23%.

Adult Social Care nationally is increasingly reliant on temporary funding, with approximately £29m in 2023/24 from BCF and iBCF. The Adult Social care and Integrated Services budget is split in the following ways:

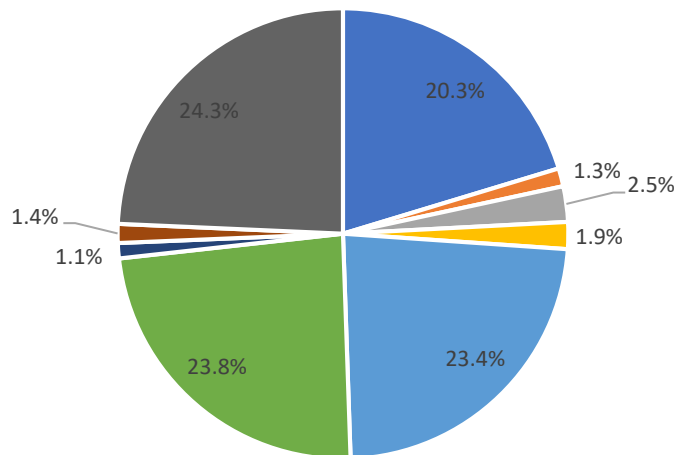
ASC&IS Budget Split



- Older People
- Learning Disability
- Mental Health
- Physical Disability
- Care Services
- Other Social Care Services
- Business Finance
- Specialist Services Other
- Workforce Development

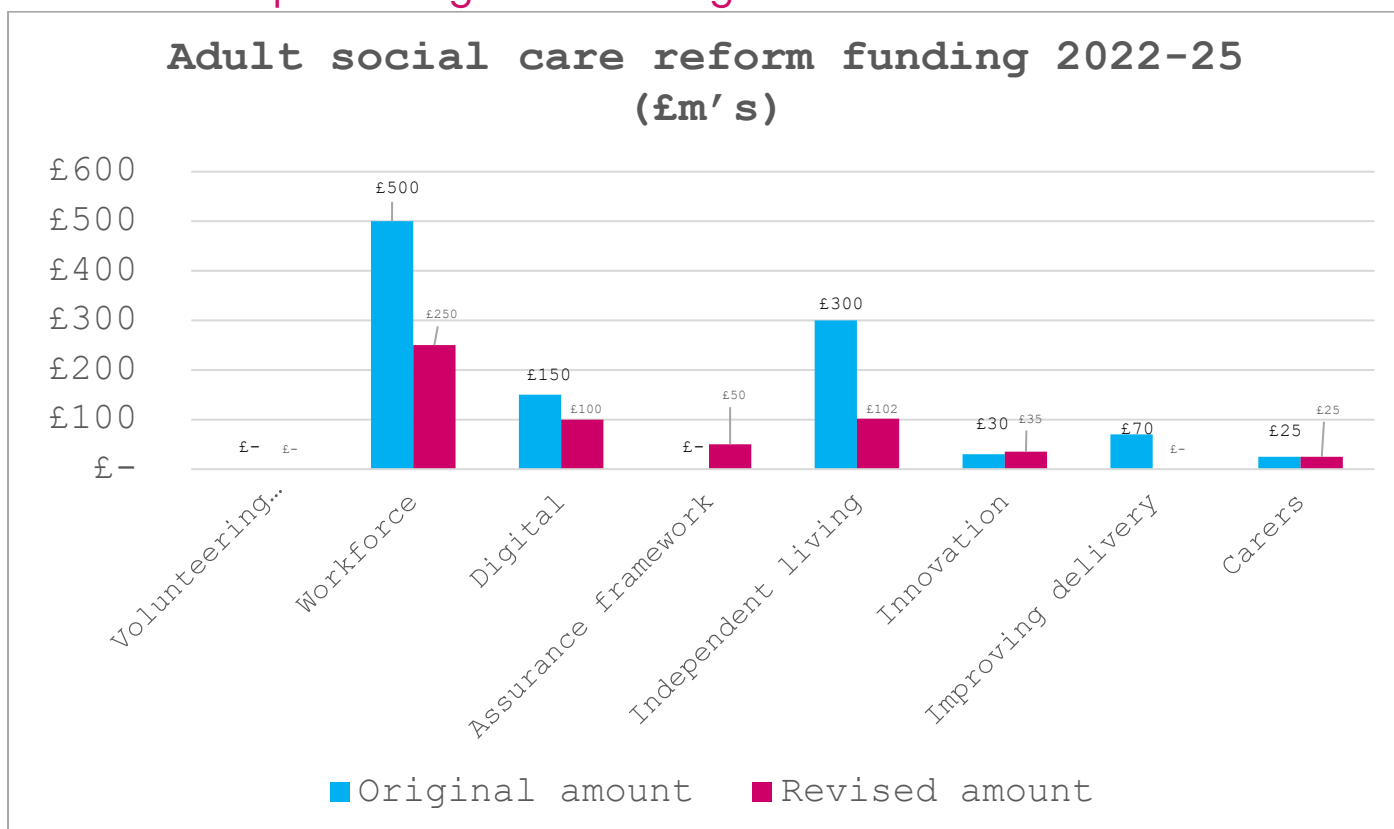
Older People 37.73%, Learning Disability 35.7%, , Mental Health 7.6%, Physical Disability 7.5%, Care Services 7.24%. Other Social Care Services 2.92%, Business Finance 0.66%, Specialist Services Other 0.33%, Workforce development 0.32%.

% of total PH grant allocation



- General Fund
- Public Health Leisure
- Public Health Literacy
- Wider Determination & Wellbeing
- Harm Reduction & Social Inclusion
- Healthcare Public Health
- Director of Public Health
- Epidemiology & Intelligence
- Fair & Healthy Childhoods

Recent and expected legislative changes



National funding for reform has been reduced. The Department for Health and Social Care has not reduced its expectations of delivery against these ambitions. This may create a burden on authorities to deliver reform from within existing resources. Much of the remaining funding (e.g. workforce) is earmarked for national infrastructure rather than to support local delivery. It is still unclear how much funding will be available for Council's and how much will be issued through competitive bidding. Funding for Care Quality Commission (CQC) assurance is a new addition, however this funding does not appear to be for Local Authorities which is where the burden will lie.

The CQC Assurance Framework came into effect from 1 April 2023, with CQC taking on a new duty to independently review and assess local authority performance, with assurance being sorted that Local Authorities are meeting their duties set out under part 1 of the Care Act 2014. It is a stage rollout with CQC working with 5 pilot authorities between April and September 2023 to test their proposed assessment approach. Formal assessments begin in September 2023, with the aim of all local authorities being assessed within two years. The assessments will look at four themes, with 'I' and 'We' statements sitting under each theme. Outcome reports and rating will be publicly available, in the same way as current regulated services.

Tackling Poverty in Newcastle

Following the publication of the Anti-Poverty Strategy in March 2023, we are developing a city-wide action plan 2023-2027 to prevent and reduce the impacts of poverty on our residents. This builds on existing efforts by our staff, partners, and communities, and sets ambitious actions to address the causes of poverty and improve the welfare and wellbeing of our residents.

The cost-of-living support service, brought in to support residents struggling with the cost-of-living crisis during the winter of 2022/23, saw over 20,000 online and telephone requests for support and signposting for welfare and wellbeing interventions during the winter period. Due to this success, the decision has been made to continue to run this service throughout the winter of 2023/24. We are also continuing to work with and support partners across the city to build our network of Wellbeing Hubs, which were an essential part of last year's cost-of-living response.

Delivery of the Partnerships for People and Place (PfPP) part-funded project with the West End Foodbank was completed, which sought to better understand and break the link between safeguarding and poverty. We worked across departments and across the local system to tackle these issues together. The initial focus was on Elswick, Benwell and Scotswood, where both wards have high levels of deprivation and safeguarding concerns, but also wards with excellent public services, vibrant voluntary and community sector organisations, and close knit and diverse communities which provided great potential. We found that when we join up better at a local and national level, we help address the serious issues of poverty and safeguarding risks, but also provide much greater opportunities for fulfilling lives for the people living here. This is currently being developed into an ongoing way of working following the end of the project, providing a place-based approach to respond to financial exclusion, prevent homelessness, and reduce the risk of abuse or neglect across the whole city.

Supporting our workforce

People with care and support needs should receive personalised and high-quality services to enable them to enjoy fulfilled lives in their own homes and communities. Consistent care should be available to all, irrespective of age, location, or circumstance.

High quality care and support services are dependent upon a highly skilled and valued workforce, appropriately rewarded for their work and the vital impact that it has on people's lives. To build and develop a workforce which makes this vision a reality we believe there are clear priorities which must be included in a national workforce strategy for adult social care some examples include: Investment in training,

qualification and support, Career pathways and development and the expansion of and the workforce in roles which are designed in coproduction with people who draw on care and support, and in roles which enable prevention, support the growth of innovative models of support.

Carers Update

In our last carers survey, carers fed back that they were finding it difficult to find information and advice. We took this feedback on board and thought about the carers services that we contract for in Newcastle.

It was clear that carers wanted information that was more easily accessible and reflected the communities in which they lived. We tendered for a new contract to provide support to carers in Newcastle. We ensured that the new service reached out into all areas of Newcastle, and actively engaged with communities. Newcastle Carers won the contract and now do extensive outreach into Newcastle neighbourhoods. This means they are better equipped to liaise with local services, to see what is happening across the city, and therefore provide relevant information, advice, and support. Newcastle Carers also provide us with regular updates and examples of the great work they are doing with carers.

Collaborative Newcastle

Collaborative Newcastle has been a key feature of the city's health and social care strategic and operating context since November 2020. It provides a governance and delivery structure to support the Local Authority with its NHS partners to take forward local priorities that create better outcomes for local people. Work is now underway to review our arrangements to help us continue to move forward on this important agenda. To learn more about the work of Collaborative Newcastle, visit [Collaborative Newcastle | Health, Wealth & Wellbeing](#)

Health and Social Care Integration – Integrated Care System (ICS)

The North East and North Cumbria **Integrated Care System (ICS)** is a partnership of organisations including local councils, voluntary and community services that provide health and care across our region. Its wide range of functions include promoting integration of health and care services, improving people's health and wellbeing, and reducing health inequalities. In Newcastle, the ICB Newcastle Place Plan is informed by the local priorities of health and social care partners in the city.

Safeguarding Adults

Liberty Protection Safeguards – The Department for Health and Social Care have announced that the proposed changes to the Deprivation of Liberty Safeguards current process which was known as the Liberty Protection Safeguards will not be implemented during this parliamentary period. As there is no implementation date for these changes all preparation has been stopped until after the next general election.

Multi-Agency Safeguarding Hub (MASH) – The Adult Social Care workforce continue to be front and centre of responding to the increased safeguarding adults activity in Newcastle. Social Workers and their Team Managers are responsible for screening all 20,257 safeguarding adults referrals received and co-ordinating the 8,335 Section 42 Enquiries that were undertaken in the year; assessing risks and ensuring there are plans in place to reduce or eliminate those identified risks. Additional resource has been put into the Adult MASH to assist with the continued increase in safeguarding adults concerns being referred, whilst exploring alternative operating models.

Carers and Safeguarding – Recent Safeguarding Adults Reviews (SARs) have highlighted the need for better identification of carers and the recognition of the risk of harm or harmful behaviours, either intentional or unintentional, as critical to the prevention and protection of individuals. In response to this learning we developed the carer risk assessment tool as a way to support frontline practitioners from all services to identify carers who are, or may be, at risk of harm from the person they are caring for and/or are, or may be, at risk of causing harm to the person they are caring for. The tool is a great example of ensuring consistency in the risk assessment of carers and the person they are caring for.

Prevention and Social Work

Embedded in our safeguarding approach are social work teams who provide first point of contacts with the public:

- Community Health and Social Care Direct
- Hospital Social Work Teams
- Information and advice

A fantastic example of some of our prevention work can be demonstrated through the work our colleagues from Active Inclusion and Safeguarding Adults have been working with the Newcastle (West End) Foodbank as part of our Safeguarding Newcastle Against Poverty (SNAP) project to better understand and break the link between poverty and abuse or neglect. As part of this work, the team have helped the Foodbank launch Newcastle Community Pantry. You can read more about the Pantry here:

[Newcastle Community Pantry](#)

Newcastle Neighbourhoods update

Our approach to developing Newcastle Neighbourhoods emphasises personalised, local support in peoples' own neighbourhoods, supporting local communities and neighbourhoods to lead improvements in their own health and wellbeing which is fundamental to ensuring individuals can optimise their independence and connections, leading to healthy and fulfilling lives. We have continued to strengthen the understanding, knowledge and capacity of Asset Based Community Development (ABCD) and have had the first Alumni of people who undertook this training and the information from this session is providing a platform for informing what and how we approach our ABCD work going forward. We have plans in place for further opportunities to come together to develop, embed, share and celebrate our learning.

We are working alongside our home care providers to develop and embed ABCD into the way they work. We have also ensured ABCD principles and outcome measures have been part of other commissioned activity including Newcastle Carers and the Infrastructure Support for the Voluntary and Community Sector and Volunteering Infrastructure Support across the city. We have begun to look with colleagues from across the Collaborative Newcastle system to identify opportunities for championing ABCD.

We have successfully launched a series of neighbourhood network events in the East and Outer West of the City with plans to develop similar in the Inner West and North. Here our work, spearheaded by our Community Wellbeing Officers seeks to develop networks of connections, organisations, associations, and groups within place-based neighbourhoods to better connect those assets within our neighbourhoods and working with local partners to develop asset-based approaches. The networks have been well attended including representation from the VCSE, LA, ICB, Health, Emergency Services, Faith organisations and local businesses.

The Volunteer Passport delivered by Volunteering Matters went from strength to strength funded via the IBCF this year standardising recruitment and training, enabling organisations and volunteers to share process and mobilise between organisations and remove barriers. The volunteer passport has continued to develop with an increase in take up of both organisations and volunteers with the development of volunteering opportunity roles across the city. The training for Volunteers signing up to the Passport Scheme has been delivered in partnership with Newcastle City Learning and in ways that make it easily accessible to Volunteers. In recent months we have worked to ensure the Volunteer Passport was part of the new contract for the Volunteering Infrastructure for the city which commenced August 2023.

The Better Care Fund

The Better Care Fund was launched in 2015 to join up the NHS, social care and housing services and required Local and Health Authorities to pool budgets and jointly plan how money is spent to best support people. In Newcastle, the Fund helps to enable people to stay well, safe and independent at home, and get the care they need when they need it by funding adaptations to homes, rehabilitation after a stay in hospital, and preventing further hospital admission. The BCF helps to fund key services such as:

- The **Reablement Team**, which provides a range of services at home for people who are recovering from illness or an accident/injury. The service also provides short-term overnight care packages to avoid emergency admissions to either hospital or residential care.
- Our **Community Rehabilitation service at Connie Lewcock** centre, which provides step-up and step-down rehabilitation and intermediate care in order to avoid unplanned admissions to hospital or residential care, and to facilitate earlier transfer from hospital to an appropriate setting.
- **Byker Lodge**, which provides short stay rehabilitative care for older people with dementia when they are unwell and cannot be looked after at home but are not ill enough to need hospital admission.

Improved Better Care Fund Schemes

The Improved Better Care Fund (IBCF) is non-recurrent funding to support more effective ways of working across health and social care which improve people's health and wellbeing, reduce pressures on the NHS and stabilise the social care market. We use IBCF to fund transformational projects that test new ways of working.

In 2023-24, we are using the fund to support initiatives to promote careers within health and social care, as well as helping us scale up our intermediate care offer to improve people's independence and help delay people's need for long term services for as long as possible.

Public Health

I am proud of the work of our Public Health team over the last 12 months, with a particular focus on addressing the inequalities within our population. This has meant we have been able to develop a wide range of analytical products. Some of the key areas of work have been:

Wide range of Strategic Needs Assessments such as the Poverty Needs Assessment and Ethnic Minority Needs Assessments, which were some of the first to have been

completed in such a comprehensive way. They aimed to provide a holistic overview of the various factors that feed into health inequalities amongst these populations.

A comprehensive needs assessment, Drug Market Profile (DMP) which PHEI lead on, in partnership with Northumbria Police. It was an efficient way of working, and the partnership has been useful for other work too. The DMP also had contributions from other organisations (NTaR, social care, prisons) which made it a strong joint product.

Our PHEI team have been leading on the Cost of Living (COL) support programme, by designing the COL data capture system which is used to capture all the online contact and phone calls received to the COL helpline. As well as providing coordination between relevant teams internal and externally. This data capture system then allowed the PHEI team to provide in-depth analysis and the type of support needs residents had and where the biggest demands were in the city in terms of geography and demographics. It also helped us understand which populations were not coming forward for support and where the inequality gap may be widening in our population.

We have developed an Alcohol Risk Matrix to support with the Alcohol licensing agenda to help with the data and intelligence needed to support the licensing applications process. Although relatively new, it is a fully developed robust tool, which will be very effective and valuable resource which could be used across various teams to help demonstrate the impact of alcohol on our population.

We have developed a suicide prevention dashboard in coordination with Northumbria Police's data, for the six LAs within the force area which has been running for several years, but as the national agenda is changing there has been interest regionally in replicating the dashboard we have developed. We have worked jointly with partners and other areas to help them understand their population and suspected suicides, which has led to prevention programmes in other areas based on our analysis, with the aim of reducing suicides. The relationship that it has built between NCC and the other LAs as well as the police will help with future projects.

One of the outputs of the pandemic was the development of a Newcastle Health Protection Assurance Board. This was a key aim of the 'Living with COVID' plan and aims to share learning from COVID-19 to make improvements in health protection systems and services for the benefit of residents. It extends wider than infectious diseases and environmental hazards. The board examines specific areas of concern to find system-wide solutions through partnership working. Key areas that are being addressed include, the need to increase childhood immunisation rates across Newcastle, the need to increase testing and screening for sexually transmitted

infections (STIs) across Newcastle, and increase take-up of COVID vaccines in younger, eligible people in Newcastle.

Our Public Health Literacy service aspires to make public health everyone's responsibility, promoting a range of accessible information, training and resources so our residents can make healthier, more informed choices leading to better outcomes and quality of life. Working alongside Connected Voice and Haref we have supported the delivery of Cultural Competency training to staff, volunteers and communities. To date, over 600 individuals from 300 organisations across Newcastle have completed training to improve their awareness of different cultures and religions, and how to deliver services and information accordingly.

The North East Better Health at Work Award scheme continues to support around 60 employers of all sizes across the City to deliver effective employee wellbeing interventions to improve health, wellbeing and resilience across their workforce.

We've had oversight of the COVID Ventilation Grants Scheme, which supports employers to implement safer working conditions and infection prevention measures, which has supported around 30 businesses in Newcastle to the tune of over £300,000.

We have been working over the last 6 months to review and re-shape the Community Health Champions programme established during the pandemic, to develop a more supportive and sustainable model for staff and volunteers, improve consistency of advice and information and better target of specific populations to reduce health inequalities.

Our Wider Determinants and Wellbeing team bring a public health approach to the wider determinants of health, including community wellbeing, poverty, employability, housing, nutrition, food insecurity, active travel, net zero and sustainability, and the promotion of physical activity. We will work with communities and the council's planning, licensing, and housing teams to ensure that we can use all available council levers to improve the health of our population.

Be like Sandra
Be a Community Champion

Our Community Champions are local people who want to make a real difference in their communities. They:

- help share accurate information about Covid-19
- become a Public Health advocate
- get involved in community projects
- help to improve services for the local community

How do I sign up?

Signing up is easy. just visit the link below and complete an online form. A member of our team will then contact you.
www.newcastle.gov.uk/communitychampions
 or phone us on 07929 846353

Make a difference

- Meet new friends and network
- Great for your CV and learn new skills
- Share your opinions and ideas with others



Newcastle has high rates of overweight adults and overweight and obesity in childhood. Public Health are working towards a whole systems approach to healthy weight, physical activity, and nutrition. In Newcastle, we have an established local food partnership, Food Newcastle, which looks at diet-related ill health and access to food, tackling food poverty, building community food knowledge and skills, the local sustainable food economy, catering and food procurement and environmental sustainability. Newcastle City Council was awarded Sport England Core City funding to collaboratively develop, with other public health department portfolio leads, RISE the Active Partnership, Sport England, and wider partners, to ensure we address physical activity needs and reduce health inequalities across the city.

Reducing harmful alcohol consumption remains a priority area for Public Health, which can be done through addressing the commercial determinants of health (this involves targeting the economic, marketing, and regulatory factors that influence alcohol availability, affordability, and accessibility). We have supported the development of the new Statement of Licensing Policy (SoLP), maintaining our involvement and representations for all alcohol licensing applications, continuing to advocate for a

specific alcohol license for public health purposes and tackling the three drivers of harm – availability, affordability and accessibility.

We have worked jointly with Balance Northeast who are commissioned by local authorities in the North East to support reducing alcohol harms at a population level. Balance support advocating for effective national action that is evidence-led. One such area is advocating for implementing a minimum unit pricing policy to establish a price floor for alcoholic beverages.

We have revised our Drug and Alcohol Partnership with a new delivery plan, which is an evidence-based approach to tackling substance misuse. This plan covers a robust range of actions in key priority areas, working alongside range of commissioned specialist drugs and alcohol services with active service, user and recovery involvement. On top of the public health budget for drugs and alcohol, the grants have amounted to over £2.7m of additional funding to tackle this complex area which has included the Supplementary Substance Misuse Treatment and Recovery Grant (SSMTRG), Inpatient Detoxification, Individual Placement and Support, employability, Rough Sleeper Drug and Alcohol Treatment Grant, and an ICS Health Inequalities grant focused on inclusion groups.



We are progressing work in the city to tackle stigma and trauma associated with substance misuse, our recent conference 'Combatting and Responding to Stigma, Trauma, Substances and Domestic Abuse' saw over 300 participants and development of a range of products and continued work between the academics and participants involved to help us take an anti-stigma approach.

Another key area has been supporting the Northumbria Combatting Drugs Partnership force-wide plan to tackle drug supply, prevalence and improve outcomes. One key area has been the development of the Local Drug and Information System (LDIS) across the Northumbria police force area, with the aim to establish an alert system which will ultimately promote harm reduction using evidence, toxicology, expert analysis and qualitative information. Another aim of this information system is to work on reducing drug-related harms and deaths within the city.

Looking ahead

Over the next 12 months, we will continue to work with partners across the City to achieve designation status for Phase VII of the World Health Organisation's (WHO) European Healthy Cities Programme, while making stronger links to the Age Friendly Cities and Ageing Well movement, working with the Elder's Council of Newcastle.

We will take a public health approach to addressing the physical, mental, and social well-being of individuals and communities who have been displaced from their home countries due to persecution, conflict, or other reasons. This approach aims to promote health and prevent disease among these vulnerable populations while recognising the unique challenges they face. We want to ensure:

- Access to quality healthcare services, including preventive care, treatment, and immunisations, for RAS and other ethnic minority groups are put in place
- Address barriers such as language barriers, cultural sensitivities, challenges that may hinder access to healthcare through health literacy.
- Accurate data collection

We will launch our new, needs-led Public Health training programme in 2024, including various levels of Health Literacy Awareness training – ensuring health literacy is understood, integrated into organisational culture and ways of working, ensuring that public health information is accessible, easy to understand and doesn't widen health inequalities.

We will review of the Community Health Champions programme, with a view to developing a more consistent offer of training and support for the network, and the

offer of microgrants to support specific projects and campaigns led by volunteer Champions across the City. We will continue our work around Food Active's Healthy Weight Declaration. We will lead a review of the North East Better Health at Work Award and our overall approach to health at work regionally, to ensure this maximises reach and achieves best outcomes, targets the right businesses and sectors to improve health and wellbeing at a population level, and aligns with the ambitions of the North East Combined Mayoral Authority.

We are preparing our Deaths of Despair Strategy, which will respond to issues of suicide and drug and alcohol related deaths. We have revised a Drug and Alcohol Related Death Group to oversee some of this development.

We continue to progress funding opportunities through our 'Small Sparks' initiative utilising a partner as host with grants of up to £200 to bring local people/groups together with ideas decided upon through local neighbourhood panels.

Appendix One

Key Service Area	Statutory / non statutory
<p>Adult social care and integrated services:</p> <ul style="list-style-type: none"> • Reablement service: personalised, short-term service helping people to recover and live independently at home, supporting approximately 1,470 people per year. • Connie Lewcock: short-term support and rehabilitation for up to 23 older people, helping them to return home and to live independently. • Welford Centre: day service for adults with learning disabilities and/or autism, and their carers, including verbal and non-verbal communication, physiotherapy, and positive behavioural support. • Byker Lodge: support for people with dementia who are experiencing a crisis or leaving hospital, enabling them to return home, or to the appropriate care setting safely. • Scrogg Road: short-term rehabilitation and crisis support for up to 16 adults with mental health needs. • Commissioned learning disability and autism support: such as care in a person's own home, and care in specialist housing settings like independent supported living. • Commissioned mental health support: such as practical support at home to help remain independent and short-term residential support with specialist therapeutic care to help alleviate a crisis. • Commissioned older people's support: such as care in a person's own home to ensure they can remain living as independently as possible, care in specialist housing settings like assisted living and residential care homes • Commissioned physical disability support: practical support with day-to-day tasks in the home and community to help people to live independent lives, and supported housing settings such as assisted living. • Adult safeguarding: our team works with partner agencies (e.g. Police and NHS) to respond to approx.. 8,700 concerns each year and ensure people are safe from abuse or neglect. • Community Health and Social Care Direct: the first point of contact with for many people, offering information and advice about adult social care and care and support assessments for approximately 9,500 people per year. • Information NOW: providing information and advice through our dedicated website informationnow.org.uk • Carer support services: providing support to people who care for others to support their wellbeing 	<p>Statutory</p> <p>Non statutory</p> <p>Non statutory</p> <p>Non statutory</p> <p>Non statutory</p> <p>Statutory</p> <p>Statutory</p> <p>Statutory</p> <p>Statutory</p> <p>Statutory</p> <p>Statutory</p> <p>Statutory</p>

<ul style="list-style-type: none"> • Commissioning and procurement: designs and contracts care and support across the city, and ensures quality services are delivered. • Workforce development and complaints: ensures an effective and sufficient adult social care workforce and supporting professional development. Handling all complaints relating to our services, ensuring that learning is used to inform our continuous improvement. • Social care business continuity and risk: ensures robust plans are in place to deal with crises – for example, the Covid-19 pandemic or the unexpected closure of an externally-provided care service. • Social care finance: undertakes financial assessments so that people know how much they will pay towards their care, and leads on finance appointments and deputyships, and ensures care providers are paid for the services they deliver. 	<p>Non statutory</p> <p>Statutory</p> <p>Non statutory</p> <p>Statutory</p>
<p>Public Health:</p> <p>The Director of Public Health is a statutory chief officer and the principal adviser to elected members and officers on all health matters.</p> <p>Prescribed functions:</p> <ul style="list-style-type: none"> • sexual health services – STI testing and treatment • sexual health services – Contraception • NHS Health Check programme • local authority role in health protection • public health advice to NHS Commissioners • national child measurement programme • prescribed children’s 0 to 5 services <p>Non-prescribed functions:</p> <ul style="list-style-type: none"> • sexual health services – advice, prevention, and promotion • obesity – adults • obesity – children • physical activity – adults • physical activity – children • treatment for drug misuse in adults • treatment for alcohol misuse in adults • preventing and reducing harm from drug misuse in adults • preventing and reducing harm from alcohol misuse in adults • specialist drugs and alcohol misuse services for children and young people • stop smoking services and interventions • wider tobacco control • children 5 to 19 public health programmes • other children’s 0 to 5 non-prescribed services • health at work 	<p>Statutory</p> <p>Non statutory</p>

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|---|--|
| <ul style="list-style-type: none">• public mental health• miscellaneous, can include, but is not exclusive to:<ul style="list-style-type: none">• nutrition initiatives• accidents prevention• general prevention• community safety, violence prevention and social exclusion• dental public health• fluoridation• infectious disease surveillance and control• environmental hazards protection• seasonal death reduction initiatives• birth defect preventions• test, track and trace and outbreak planning• other Public Health spend relating to COVID-19 | |
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Appendix Two: Case Studies

Safeguarding

A 48-year-old male who had needs related to mental health and substance misuse. Living in rented accommodation. Neighbours raised complaints with housing provider and police about people coming and going from the property, including young people. Neighbours were scared to tell authorities as the visitors threatened violence. Housing attempted to visit but they couldn't gain access.

Historically, services had difficulty engaging him in support and there was limited knowledge and contact from professionals. Police were able to enter the property using force. The property was untidy, broken windows (front and back), furniture piled outside with not much furniture inside, holes in doors/walls, the property had no gas or electricity, drugs paraphernalia and weapons (machetes, knives, acid/ammonia) lying around. It appeared that multiple people were sleeping at the property/using it as a base, numerous mattresses present. There were stolen bikes and motorbikes in the property.

He wasn't able to use his own bedroom or access the rest of his home and he'd barricaded himself into a small box room. In addition, a young person missing from home was found at the property. There were some initial concerns about him having a child in the property, however it quickly became apparent that he was very vulnerable and had no control over the young person being in his home. The young person was being exploited by organised crime groups to be at the property.

The Police made a safeguarding adults referral to Adult Social Care and child concern notification to children's services.

The safeguarding adults enquiry uncovered:

- The perpetrators offered him free drugs outside a local Metro Station and that he felt they were being friendly to him.
- He had invited them into his home but had no idea what he was getting involved in.
- They took over his property and brought dangerous people into his home.
- The perpetrators humiliated him and took all his money off him.

Professionals identified a lead professional and worked assertively, but at a slow pace, so as not to overwhelm him. His immediate financial needs were met, including the use

of food vouchers. There was a need to think about where it was safe for professionals to meet with him to not put him at increased risk from the perpetrators.

The outcome of this intervention enabled:

- An assessment of his needs being completed, with appropriate support in place.
- Links were made with his pharmacy to get his physical health needs assessed and met and allowed a way in for him to access his GP.
- Liaison with Children's Services about the young person to ensure they were protected and safe.
- Police put a harm reduction in place (monitoring of the location, visits in place, informing/liasing with neighbour's cocoon watch, safety work).
- Community safety moved their moveable CCTV cameras to the property – used as a deterrent and to collect evidence.
- Neighbourhood wardens were informed of the concerns and did increased walkabouts near the property.
- All agencies were encouraged to submit intelligence to the Police.
- He was offered a place of safety and a move, but he declined this.
- Mental capacity was assessed around decisions related to contact, care and support, and accommodation and he was assessed as having capacity in all areas but there was recognition of the undue influence that was underpinning his decision-making.

Through him being able to form a trusting relationship with a lead professional, we were able to coordinate the support he needed whilst diverting and disrupting the perpetrators away from his property. There was continued visits from housing, police and social care on a regular basis providing increased support and monitoring. He now receives regular support to manage his needs and is engaging with services which provides continued oversight for any concerns that may arise in the future.

Reablement / Care Services

Mr J age 94 lived in a three-bedroom house with his wife who lived with dementia. Prior to his falls they both lived independently together, with limited support from a cleaner twice a week. They had a stairlift fitted for wife. Mr J was very independent and up until his fall he still drove his car.

Following Mr J's fall, he sustained a hip fracture and was given a wheeled Zimmer frame to support back at home. He accepted a support program from our reablement team to help with his daily routine and meal support. As part of the reablement offer

we set up his Alexa smart speaker to remind Mr J to take his medication and set up smart light bulbs to help reduce falls while going to the bathroom on an evening.

Mr J used to go out to the local shops to get groceries however following his fall he was unable to drive at present he had a neighbour who would get items for him. We helped set up a shopping list onto his Alexa so he could add items onto his list that he may have forgot by the time it come to writing his list for his friend to get them.

We reviewed the support offered and we were able to reduce calls from our reablement team and they only needed a long-term package of care to support with his wife's needs while Mr J was able to use his Alexa for his support.

Holiday Activity and Food programme

Wellbeing Hubs

The cost-of-living crisis is already real for many of our city's residents. Too many people are struggling to make ends meet, with some facing extreme hardship. Inflation and sustained high costs of energy are outstripping wage and benefit increases and putting enormous pressure on daily life. The council is committed to supporting residents through this crisis and will work with other organisations in the city to do the same. Newcastle City Council offers a range of advice and support to help residents through this very difficult time.

Part of this support offer, introduced in December 2022, was a network of Wellbeing Hubs. This network of around 90 organisations provides the opportunity for residents to go to a local resource, based in their local community, to seek warmth, companionship, somewhere to charge phones or other electronic equipment and access food or other services, depending on the individual provider. The Hubs are supported by a range of partners, including voluntary and community organisations, and work closely with the

Feedback from Participants

Staff were awesome and very accommodating to my son's complex needs and anxiety levels.

Everybody made him feel so welcome and they created the breakout space he needed to be able to stay and participate in the session even if it was from a distance at first."

"I would just like to say thank you. All staff are so nice and made you feel very comfortable. The interaction they gave my youngest with autism was so warming"

online Cost of Living service found at [Cost of living support | Newcastle City Council](#), where over 20,000 residents so far have accessed some of the services they require.

Due to the success of the Hubs, the decision has been made to continue to run this service throughout the winter of 2023/24 and are continuing to work with and support partners across the city to build our network of Wellbeing Hubs.

It is already clear that the funding available and support offer via the network of Wellbeing Hubs across the city is having a positive impact:

“The funding we received helped us to provide additional support to those in need and to help people to develop relationships and engage with the community, reducing isolation and loneliness.”

“The funding was able to help us provide hot food and drink and users were happy knowing that they have had something to eat. There were touching stories as well that showed that many families are struggling.”

“We are at full capacity now on a Saturday with children and parents...Residents have been on courses gaining qualifications and one of them has gained a job since and men who are struggling to get back into society are coming to volunteer with us at our food pantry.”



Above: an example of one of our wellbeing hubs in Kenton

Appendix Three: Documents

Link to the Directorate Plan on a Page



ASC&IS Plan on a
Page (1).pdf

Link to the Care Services Annual Report



Care Services Annual
Report 2023 REV2.pdf