

HEALTH AND WELLBEING BOARD

Thursday, 19 June 2025

PRESENT – Councillor Roche (Cabinet Member with Health and Housing Portfolio) (Chair), Councillor Mammolotti, Lorraine Hughes (Director of Public Health), Councillor Harker (Leader of the Council) (Leader of the Council), Councillor Tostevin, Jackie Andrews (Medical Director) (Harrogate and District NHS Foundation Trust), Joanne Dobson (NHSE/I Locality Director for North East and North Cumbria) (NHS England, Area Team), Carole Todd (Darlington Post Sixteen Representative) (Darlington Post Sixteen Representative), Rachel Morris (Head of Department for Nursing and Midwifery, School of Health and Life Sciences) (Teesside University), Andrea Petty (Chief of Staff) (Durham Police and Crime Commissioner's Office), Michael Conway (Mayoral and Democratic Officer), Katie McLeod (Deputy Director of Delivery) (NHS Darlington Clinical Commissioning Group), Deborah Robinson (St Teresa's Hospice) and Jenny Steel (County Durham and Darlington NHS Foundation Trust)

ALSO IN ATTENDANCE – Councillors Curry (Cabinet Member for Adults) and Holroyd

APOLOGIES – Martin Short (Director of Place - North East and North Cumbria Integrated Care Board) (North East and North Cumbria Integrated Care Board), Dean Lythgoe (Principal, St Aidan's Academy) (Secondary School Representative) and Councillor Mrs Scott

HWBB1 DECLARATIONS OF INTEREST.

There were no declarations of interest reported at the meeting.

HWBB2 TO HEAR RELEVANT REPRESENTATION (FROM MEMBERS AND THE GENERAL PUBLIC) ON ITEMS ON THIS HEALTH AND WELL BEING BOARD AGENDA.

No representations were made by Members or members of the public in attendance at the meeting.

HWBB3 TO APPROVE THE MINUTES OF THE MEETING OF THIS BOARD HELD ON 13 MARCH 2025

Submitted – The Minutes (previously circulated) of the meeting of this Health and Well Being Board held on 13 March 2025.

RESOLVED – That the minutes are approved as a correct record

HWBB4 PREGNANCY AND EARLY YEARS - HEALTH AND WELLBEING STRATEGY DEEP DIVE

The Portfolio Holder for Children and Young People introduced Board members to the report which aims to facilitate meaningful discussion regarding Pregnancy and Early Years priorities as identified in the Joint Local Health and Wellbeing Strategy.

The report is intended to support a deep dive review into the thematic priority of pregnancy and early years, with a focus on:

- a) Agreed priorities

- b) Related performance indicators
- c) Health inequalities
- d) Stakeholder engagement
- e) Key actions taken and / or planned
- f) Issues of concern or risk
- g) Ask(s) of Health and Wellbeing Board partners

Officers highlighted the ambitions of the report and gave thanks to those who were involved in its production. Data on smoking in early pregnancy was presented to Board members with Darlington tending more positively than other North East regions but similar to national averages.

Board members were provided with a presentation covering the various areas of the deep dive, which included:

- The reasons why smoking during pregnancy is an important public health issue, such as lower birth weights and miscarriages and sudden infant death being 3 times more likely to occur.
- The drivers and results so far, including 727 fewer antenatal complications, 154 fewer missed appointments and 109 fewer non-scheduled overnight stays in hospitals.
- The actions of CDDFT to reduce smoking in pregnancy
- The focusses of the 0-19 service
- Delivery rates at Darlington Memorial Hospital by ward – showing a synergy with the deprivation map
- Age group analysis and variations
- Inequalities
- Tobacco dependency treatment service referrals
- Opportunities available, including closer working with partner organisations and stop smoking support before pregnancy

Discussions took place including the Chair highlighting that pinpointing inequalities remains the first step in an effective strategy and praising officers on the work conducted and data gathered thus far.

Further discussions included how to progress from this point – with officers informing Board members that they are currently utilising data to share across the trust and working with sexual health teams. In terms of using data effectively, targeting specific patient groups is taking place, such as diabetic women. “Listening events” focussed on areas with highest tobacco dependency will now take place in Darlington

A Board member informed those present that the “Bump, Baby and Beyond” scheme is present and would be willing to collaborate.

Questions were raised with a member stating that 10% smoking while pregnant is still too high and asking what approaches are being taken in clinics with the response that huge variations can be present as smoking is an addiction not simply a change of lifestyle alongside many pregnancies being unplanned. Smoking wasn’t managed as a clinical pathway in the past (like e.g. diabetes). Incentive Schemes are now established and numbers are shown to be reducing. Although officers agree that 10% of pregnant women being smokers is still too high, they are confident it can be reduced.

It was asked as to whether data on the impact of vaping is available with the response that vaping is promoted to smokers and that data is being collected on those who have only ever vaped (without smoking) but is hard to track due to the nature of patient record collation.

A Board member asked as to whether smoking data is tracked following the birth date to determine what percentage of women return to smoking for example. Officers responded that initiatives are in place to try and prevent women from returning to smoking, including gathering data on household members with incentive schemes which also cover partners with everyone in the home being offered CO monitoring. The overall goal is for women to be non-smokers at the start of their next pregnancy should this occur.

It was asked whether alcohol and drugs are also a focus and it was confirmed that a multi-agency approach is present to ensure this. In addition, a Chair for the Tobacco Alliance is currently being recruited with the establishment of the group.

AGREED – Board members noted the content of the update, and the work carried out in the production of the deep dive, offering praise to those involved for the quality of the work produced. Member organisations agree to consider actions that could be taken to better support health during pregnancy and identify opportunities to develop partnership work.

HWBB5 DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2024-2025 ACROSS THE LIFE COURSE: THE HEALTH OF DARLINGTON

The Director of Public Health presented this annual report on the health and wellbeing of Darlington. This year's report provides a snapshot of health across the life course, describing some of the key health issues for Darlington and acknowledging the good work happening across the Borough. The report is based on the framework used within the Joint Strategic Needs Assessment, highlighting health and wellbeing needs across the life course of Starting Well, Living Well and Ageing Well. The report provides a snapshot of key data across the life course and thematic recommendations.

The report covers the areas of:

1. Starting Well, considering the importance of a good start in life
2. Living Well, considering the importance of staying healthy in adulthood
3. Ageing Well, considering the importance of staying healthy as we age

Discussions were held in which members were encouraged to work jointly with the Director of Public Health should there be any areas for which they believe their expertise could be of use.

Questions were asked which included a member querying that 25% of 5 year olds suffer from tooth decay and stating that no more fast-food outlets should be opened in the town. Officers responded that schemes are in operation to combat this including the ICB's Oral Health Strategy, supervised tooth-brushing schemes and Council-led oral health strategies which intend to target the most deprived wards.

It was questioned as to why only 1% of GP patients are listed as suffering from dementia with the response that only those with a full diagnosis are included and this is similar to the national average.

The Chair commended the Director of Public Health for the quality of the report and the depth and breadth of knowledge displayed in all areas covered.

AGREED – The Board members approve the report and the areas covered. Member organisations will identify any areas for which they can be of assistance in delivery of the recommendations and contact the Director of Public Health for such cases.

HWBB6 POLICE CRIME AND JUSTICE PLAN 2025-2029

Board members welcomed the OPCC Chief of Staff who presented the Police Crime and Justice Plan 2025-29. A summary of the role of the Police Crime Commissioner was provided along with how the plan can be linked into the goals of the Health and Wellbeing Board and Council Plan, namely “Best Start in Life”, “Staying Healthy” and “Healthy Places.”

The goals of the plan were highlighted which included targeting the numbers of drink drivers, the recruitment of additional PCSOs, the desire to provide young people with opportunities to thrive, targeting those who look to exploit the vulnerabilities of others, the production of the Youth Police and Crime Plan and working towards creating healthier work environments where possible.

A Board member expressed their gratitude for the plan targeting the use of off-road motorcycles.

AGREED – The Board approved the plan and expressed approval towards the areas of focus highlighted.

HWBB7 DARLINGTON HEALTH AND WELLBEING BOARD FORWARD PLAN

The Chair proposed that the next meeting of this Board will include the items:

1. The Better Care Fund
2. 10 Year Plan
3. First Annual Review of the Health and Wellbeing Board Strategy.

It was also proposed that the December 2025 meeting of this Board will include:

1. Deep Dive on Mental Health

AGREED – Board members agreed the proposed agenda items for upcoming meetings.