

SUNDERLAND HEALTH AND WELLBEING BOARD

Friday 30 September 2022

Meeting held in the Council Chamber, City Hall

MINUTES

Present: -

Councillor Kelly Chequer (in the Chair)	-	Sunderland City Council
Councillor Louise Farthing	-	Sunderland City Council
Councillor Dominic McDonough	-	Sunderland City Council
Acting Chief Superintendent Barry Joice	-	Safer Sunderland Partnership
Graham King	-	Director of Adult Services
Dr Tracey Lucas	-	
Patrick Melia	-	Chief Executive, Sunderland City Council
Gerry Taylor	-	Executive Director of Health, Housing and Communities, Sunderland City Council
Martin Weatherhead	-	Chair, All Together Better

In Attendance:

Scott Watson	-	Director of Place, NENC ICS
Vanessa Bainbridge	-	Independent Chair, Sunderland Safeguarding Adults Board
Paul Weddle	-	Vice-Chair, Healthwatch
Lisa Jones	-	Assistant Director of Integrated Commissioning, Sunderland City Council
Karen Davison	-	Together for Children
Sheila Rundle	-	Senior Public Health Intelligence Analyst, Sunderland City Council
Kaye Chapman	-	Public Health Lead, Sunderland City Council
Jane Hibberd	-	Senior Manager – Policy, Sunderland City Council
Chris Binding	-	Local Democracy Reporting Service
Gillian Kelly	-	Governance Services, Sunderland City Council

HW14. Welcome

Councillor Chequer welcomed everyone to the meeting and advised that Dr John Dean had stepped down as Chair of Healthwatch Sunderland and Debbie Burnicle had been appointed as his replacement. On behalf of the Board, the Chair looked

forward to welcoming Debbie and would write to John to thank him for his valued contribution during his time as a Board Member.

Board Members were advised that it was planned to bring a report to the December meeting on the membership of the Board, however there was a need to appoint an interim Vice-Chair until the new membership arrangements were formalised. The Chair proposed that Dr Lucas be invited to act as Vice-Chair on an interim basis.

The Board RESOLVED that Dr Lucas be appointed as interim Vice-Chair of the Health and Wellbeing Board.

HW15. Apologies

Apologies for absence were received from Ken Bremner, Lucy Caplan, Jill Colbert, Dr John Dean, Dr Yitka Graham, Councillor Fiona Miller and Lisa Quinn

HW16. Declarations of Interest

There were no declarations of interest.

HW17. Minutes and Matters Arising

The minutes of the meeting of the Health and Wellbeing Board held on 11 July 2022 were agreed as a correct record.

The Board were advised that the Council would take forward the Mental Health Concordat by the end of the year.

HW18. Sunderland Safeguarding Adults Board (SSAB) Annual Report 2021/2022

The Independent Chair of the Sunderland Safeguarding Adults Board submitted the Board's Annual Report for 2021/2022. Vanessa Bainbridge, Independent Chair was in attendance to talk to the report.

It was a statutory duty for an annual account of the work of the Board to be presented to the Health and Wellbeing Board and it was noted that the work of Sunderland Safeguarding Adults Board (SSAB) focused on the strategic priorities identified in its Strategic Delivery Plan 2019-2024: -

- Prevention
- Local Areas of Risk
 - Self-Neglect
 - Mental Capacity
 - Homelessness
 - Complex adults risk management (CARM)

- People at Risk/Vulnerable/Complex Cases who don't meet statutory thresholds
- Domestic Abuse
- Suicide Prevention

Vanessa directed Board Members to the Foreword to the report as an executive summary of the work carried out during the year and she acknowledge the work of the Safeguarding team during what had been an extremely challenging year coming out of the Covid pandemic. It had been anticipated that there would be more safeguarding referrals and demand post-Covid and this had indeed happened.

The SSAB was meticulously looking at data and using the National Insights Programme as a check and balance for the data and would seek further assurance if demand continued to rise.

Over the last year, the SSAB had worked to strengthen the governance of the group and this had led to the inclusion of the homelessness agenda in the Board's terms of reference and an increased ability to look at complex needs. The local authority had taken the lead on the performance information collected by the SSAB and partners had been asked to interpret what that data meant.

A Complex Adults Risk Management (CARM) process and specific training programme had been established for people who did not meet statutory thresholds and dividends from this approach were starting to be seen. This process had been instigated from the action plan arising from the Safeguarding Adults Review (SAR) resulting from the death of Alan and the SSAB continued to implement learning from that SAR.

The SSAB needed to continue to display professional curiosity and it was good practice to look at processes and improve them. During 2021/2022 there had also been a lot of joint working with the Sunderland Safeguarding Children Partnership on cross over programmes such as domestic abuse and suicide prevention.

Moving into 2022/2023, the SSAB would focus on: -

- Covid recovery
- Driving forward the prevention agenda
- Continuous learning from practice
- Listening to the voice of the service user
- Knowing themselves as a Board
- Understanding of the new ASC framework

The Chair welcomed the case studies included within the report, noting that these humanised what the SSAB did.

Councillor McDonough referred to the Department of Health funded work on suicide prevention which had seen a huge drop in suicide rates in the city, however this project had now come to an end and he queried where this would leave Sunderland moving forward.

Gerry Taylor advised that recruitment was underway for a post to lead this work and although the Department of Health funding had come to an end, it was intended to mainstream this work in the Public Health team. Vanessa noted that one of the reasons SSAB had taken this on as priority was because Sunderland had been seen as an outlier at the time; she was pleased to hear that suicide prevention was being taken on by Public Health.

Vanessa highlighted that Safeguarding Week would take place during the week commencing 21 November and she encouraged Board Members to get involved in some of the events taking place as part of the week. She advised that further information on Safeguarding Week would be issued to partners in the near future.

Having thanked Vanessa for her presentation, it was: -

RESOLVED that the Safeguarding Adults Board Annual Report 2021-2022 be noted.

HW19. Sunderland Healthwatch Annual Report 2021/2022

The Chair of Healthwatch Sunderland submitted an annual report providing the Board with an overview of activity conducted by Healthwatch Sunderland throughout 2021/2022.

Paul Weddle, Vice-Chair of Healthwatch Sunderland was in attendance to talk to the report and in doing so emphasised that Healthwatch continued to work to ensure that patient voices were heard and was particularly active in seeking the views of the disabled and young people. Over the year, almost 1,400 people had shared their experience of health and social care services and over 3,000 had asked for support from the organisation.

Healthwatch communicated in a number of ways including their website and social media channels and had undertaken projects in 2021/2022 including: -

- Delivering the Covid vaccination programme in more accessible venues
- Introduction of baby voucher formula scheme available to families in need
- Introduction of new practices to improve support and care offered to patients from the Bangladeshi community
- Working with Public Health on communications with people with learning disabilities

For the forthcoming year, it was intended to prioritise access to GP services, domiciliary care services and hospital discharges.

Councillor Farthing paid tribute to Dr John Dean's contribution during his time as Healthwatch Chair, highlighting his vigorous challenge at Covid Control meetings around PPE requirements for services. She went on to refer to a recent survey on GP access which would be a useful starting point and noted that the Healthy Start for children was linked to the baby voucher scheme.

Graham King highlighted that he would be happy to be involved in the domiciliary care work and Dr Lucas suggested that the access to GP services would need to be linked in to 111, All Together Better and primary care networks. There was a big programme of work on this and it would be useful to have a patient view.

Dr Weatherhead said that he was aware of the pressures on appointments across all health services and there were fewer GPs but a greater number of secondary practitioners. He added that patient views were to be embedded in any work that All Together Better did.

Councillor Farthing commented that one initial improvement would be for all GPs to enable appointments to be made online, which would free up telephone lines for other matters.

The Chair stated that there was a strong willingness for people to come together to work on this and it was important that Healthwatch could come to the Health and Wellbeing Board and tell Board Members what it needed from them.

Having thanked Paul for his presentation, it was: -

RESOLVED that the Healthwatch Sunderland Annual Report 2021/2022 be noted.

HW20. Update on the North East and North Cumbria Integrated Care System

The Director of Place (Sunderland) and the Executive Director of Health, Housing and Adult Services submitted a joint report to: -

- Provide assurances that the proposed place-based governance arrangements for integrated care in Sunderland would be established by 1 April 2023 in line with national requirements; and
- Provide the Health and Wellbeing Board with an update on the North East and North Cumbria Integrated Care System (ICS).

The Integrated Care System had been on a statutory footing as of 1 July 2022 and the legislation required the ICS to establish committee arrangements between the North East and North Cumbria Integrated Care Board (NENC ICB) and the 13 local authorities aligned to the NENC ICB area as part of the statutory Integrated Care Partnership arrangements (ICP). Sunderland was part of the Central ICP alongside South Tyneside and Durham.

The place-based arrangements for Sunderland were aligned with the administrative boundaries of Sunderland City Council and in January 2022, the Cabinet had approved a proposal to adopt a joint committee arrangement for place-based governance. Sunderland based partners had established a multi-agency Joint Consultative Forum which would oversee the development of a transitional road map for the Joint Committee arrangements. The key short-term actions were the establishment of the shadow joint committee, the terms of reference, membership and chair and to complete the first draft plan by 31 October 2022.

The Integrated Care Partnership had held its first meeting on 20 September 2022 and approved ways of working between the region wide ICP and four area ICPs. The membership of the Central ICP would include local authority partners and patient voice.

Councillor McDonough was pleased to see that elected representatives were part of the structure and thanked the ICB for taking note of the views of councillors.

The Chair noted the Health and Care Alliance and Children's and Adults' Alliance which would support the place-based governance arrangements and queried if Public Health would be involved in these. She asked what would look different for the people of Sunderland.

Scott Watson advised that this was the work which was being done now; the Adults' Alliance was quite mature but there was some work to do in bringing in Public Health and Housing. Lisa Jones was leading on developing maturity matrix and more resource would be devoted to evolving the Children's Alliance to ensure parity between children and adults.

It was hoped that people would see services that they recognised and understood, and which were more embedded in the community.

Gerry Taylor stated that there were some very practical steps being taken; the Living Well Board was developing a housing strategy with a needs based and partnership approach and part of that would come through the Health and Care Alliance.

Philip Foster reinforced what had been said around services being organised at a neighbourhood level around the six primary care networks which was aimed at spending the Sunderland £ better and with less hand offs. People would be supported to live full and healthy lives in the community, and this included services outside the health and social care prism such as SARA and HALO.

Councillor Farthing said that her number one priority was child poverty in Sunderland as this underscored everything else. Family hubs were integrated, and health colleagues had a lot of targets to chase as part of Starting Well. The integration of the transition between child and adult services, particularly in relation to mental health, was also very important.

RESOLVED that the update be noted and the proposed changes be agreed.

HW21. Better Care Fund 2022/2023 Submission

The Director for Place (Sunderland), Executive Director of Health, Housing and Communities and Director of Adult Services and Chief Operating Officer of SCAS submitted a joint report seeking agreement for the sign off and submission of the Sunderland Better Care Fund Plan for 2022/2023 by the Sunderland Health and Wellbeing Board.

Health and Wellbeing Boards were required to submit Better Care Fund (BCF) plans nationally and the 2022/2023 submission consisted of: -

- A completed narrative template
- A completed BCF planning template
- Confirmation that national conditions of the fund were met, as well as specific conditions attached to individual funding streams
- Ambitions and plans for performance against BCF national metrics
- Any additional contributions to BCF section 75 agreements.

Systems were required to set expectations for improvements across the metrics which were aligned to national policy direction. These metrics were: -

1. Proportion of older people still at home 91 days after discharge from hospital into reablement of rehabilitation from 61.4% to 71.4%.
2. Older adults whose long-term care needs are met by admission to residential or nursing care from 1170.1 per 100,000 to 978.2 per 100,000 population
3. Unplanned hospitalisations for chronic ambulatory care sensitive conditions from 280.9 per 100,000 population to 213 per 100,000
4. Improving the proportion of people discharged home, based on discharge to their usual place of residence from 89.2% to 90%

Lisa Jones explained that with regard to the local metrics, these had balanced pragmatism with aspiration. The BCF also had two policy objectives for the first time which were enabling people to stay well, safe and independent at home for longer and right care, right time, right place. The priorities within the 2022/2023 plan were: -

- Addressing local health and care priorities aligned to two policy objectives
 - Developing a clear and credible winter plan
 - Developing maturity of local discharge pathways
 - Increased focus on prevention and tackling inequalities
 - Creating a shift towards neighbourhood-level decision-making and delivery
- Building effective place-based governance
 - Development of a transformational road map for place-level integration
 - Supporting intelligence-led decision-making through population health management and increased patient, public and VSCE involvement in place-based arrangements

Gerry Taylor highlighted that the BCF had been in place in Sunderland for a number of years and was a tool to help with further integration going forward and some Public Health primary care services were now part of the BCF. In effect the Health and Wellbeing Board was signing off on things which were already happening.

Dr Lucas referred to the stretch targets and commented that the improvement in older people still being at home after 91 days was very ambitious and would require a lot of investment. Gerry noted that the BCF had been accused of being under ambitious the previous year and had been qualified so it was a case of finding a balance. There was a lot of targeted work around reablement at the present time and it was an ambition to go up into the next quartile.

The Chair asked how responsive the BCF was to changing demands such as the cost of living and wider determinants.

Lisa Jones advised that the Section 75 arrangements were an open door for additional investment going forward and there were some good examples in the BCF such the prevention of cardio-vascular admissions. There was confidence that health inequalities and prevention would be addressed within this. Gerry agreed that a good start was being made on bringing the prevention budgets together and the wider ICB was looking at health inequalities.

The Chair went on to ask how housing could be engaged and Gerry noted that a needs-based housing strategy was being developed and the Winter Plan would also have a housing focus.

Councillor Farthing noted the emphasis on prevention throughout the BCF but did not feel that the agenda for this was clear. The Chair acknowledged this point and said that it might be useful to have more detail on this in the future.

Having considered the report it was: -

RESOLVED that: -

- (i) the process followed in developing the 2022/2023 BCF Plan and key points from the plan, including prior sign-off from the ICB and Sunderland City Council Chief Executive be noted;
- (ii) the proposed BCF planning documentation for submission in-line with national timescales be agreed; and
- (iii) consideration be given to the ongoing requirements of Sunderland's place-based governance arrangements and be assured that the BCF meets both national BCF conditions and local aspirations for place, as set out in the Sunderland Healthy City Plan.

HW22. Joint Strategic Needs Assessment

The Executive Director of Health, Housing and Communities submitted a report presenting the draft Sunderland Joint Strategic Needs Assessment (JSNA) to the Board.

The development of a JSNA was a statutory requirement and local authorities and Integrated Commissioning Boards (ICB) were required to have regard to the relevant JSNAs and Joint Local Health and Wellbeing Strategies (JLHWS) so far as they were relevant when exercising their functions. JSNA was the process by which Sunderland City Council and North East and North Cumbria ICB (Sunderland Place), working in collaboration with partners and the wider community, would identify the health and wellbeing needs of the local population. It provided an insight into current and future health, wellbeing and daily living needs of local people and would inform the commissioning of services and interventions. The JSNA supported a Health in All

Policies approach to the development of strategic priorities, aiming to improve health and wellbeing outcomes and reduce inequalities.

Sheila Rundle was in attendance to deliver a PowerPoint presentation highlighting the key issues within Sunderland and the key high-level challenges in the city which included: -

- Poverty levels in the city
- Children and young people faced significant challenges and inequalities across the social gradient of health
- Smoking, diet, alcohol and physical inactivity lead to poor health outcomes for the city
- People in the city had poor mental wellbeing and this also impacted on physical health
- More people in the city were living with and prematurely dying from serious diseases than anywhere else in the country
- The ageing population had a significant effect on local services
- Sunderland had higher levels of risk than England as a whole; this was directly linked to a range of social, economic and environmental factors
- Inequalities in the city had a significant impact on health
- Covid-19 had directly and indirectly impacted on life expectancy and was expected to have a significant impact on preventable mortality
- The cost-of-living crisis was hitting the poorest residents most significantly

Graham King referred to the new role of Falls Co-ordinator and explained that Sunderland had an unduly high number of hospital admissions for falls and it might be useful for the Co-ordinator to come to a future meeting to talk about the work which was taking place in the city.

Councillor Farthing asked if the majority of falls were in the home or outside; pavements were less likely to be repaired in the current financial climate and therefore may pose an increased risk. Graham noted that data was available for care homes, but he could ask the local health trust if they gathered any further information.

Paul Weddle commented that the JSNA just showed the mountain which was to be climbed and the Chair agreed that the cost-of-living crisis would just make the situation worse.

Councillor Farthing referenced the breast-feeding rates in Sunderland, and it had been very difficult to get the message through on this, with Sunderland seeming to have a culture of bottle feeding.

Gerry Taylor agreed that breast feeding rates were below what partners would like them to be and the outcome of some insights work on this was awaited. Efforts were focused on breast feeding initiation and Dr Lucas suggested that an economic as well as health approach could be taken to address this.

The Health and Wellbeing Board RESOLVED that: -

- (i) the findings of the draft Sunderland JSNA be noted;
- (ii) authority be delegated to the Executive Director of Health, Housing and Adults Services to finalise the JSNA;
- (iii) consideration be given to whether specific additional topics need to be included in this iteration in the JSNA, or any topics for development over the next year;
- (iv) these findings be taken into account when considering the commissioning plans of all partners;
- (v) these findings be taken into account when delivering plans for the Delivery Boards and workstreams identified as priorities by the Board; and
- (vi) the continual refresh of the JSNA to ensure merging needs and challenges were widely understood across the city be supported.

HW23. Sunderland Health Protection Assurance Annual Report 2021/2022

The Executive Director of Health, Housing and Communities submitted a report providing an overview of health protection arrangements and relevant activity across the city during 2021/2022.

The Executive Director of Health, Housing and Communities had a statutory remit to provide assurance to the Health and Wellbeing Board and Sunderland City Council in relation to the health protection of the local population.

There was a robust health protection system in Sunderland and key achievements in 2021/2022 included high uptake of immunisation and screening programmes; the majority of these were at pre-pandemic or heading towards pre-pandemic levels. It was highlighted that screening for bowel cancer was higher than the national average, however, although breast cancer screening was similar to the national level, there was more work to do to get this to pre-pandemic levels.

The report highlighted key achievements and what was needed to make improvements and to empower the city's population to make wise choices in health and to improve uptake rates for all programmes.

Work would continue with partners on infection control in care homes and providing advice and help where necessary. There was also a focus on improving health inequalities and providing appropriate support to refugees and asylum seekers.

Councillor Farthing noted that Sunderland had always been very good at delivering childhood immunisations but she was mindful that transport links had been weakened in the city and this could create barriers for people needing to access services. She queried whether it was possible to build on what been done for communities during the pandemic when services became more localised.

Scott Watson stated that roving clinics were already being considered depending on the uptake of programmes. Dr Weatherhead agreed that the socio-economic situation was having an impact on the uptake of health protection services and this needed to be addressed systematically.

The Chair felt that there needed to be a long-term strategy for screening and vaccination that was continuous and sustainable, and Scott advised that the Cost-of-Living Crisis health group would be looking at this approach.

Dr Lucas noted that breast screening was based in Grindon and it may be worth looking at outreach for this. The Chair added that transport was an underlying issue for so many of these matters and she would be interested to hear about any discussions which were happening on this.

Gerry said that there was a need to continually identify where health inequalities lay and Dr Weatherhead suggested it might be useful to have a reflection on socio-economic status in relation to take up of programmes as this might offer a direction to solutions.

RESOLVED that: -

- (i) the report be noted;
- (ii) the Board be assured that Sunderland had a robust health protection system where partner organisations worked together to protect the health of the population of Sunderland;
- (iii) the Board be assured that the Council's public health team would keep health protection arrangements under review and would seek to make improvements as and when necessary; and
- (iv) the health protection forward plan priorities for 2022/2023 as set out in section 15 of the report be endorsed.

HW24. Covid-19 in Sunderland – Update

The Executive Director of Health, Housing and Communities submitted a report providing an update on the Covid-19 situation in Sunderland.

ONS data outlined that currently 1 in 65 people in England were likely to have Covid, in the North East this was 1 in 55 people. The infection levels had increased in the last few weeks and there were 60 people currently in hospital. This emphasised the need for people to take up the booster when it was offered.

RESOLVED that the update noted.

HW25. Winter Planning 2022/2023

The Director of Place (Sunderland) submitted a report providing an update on the Winter Vaccination Programme and plans to support patients and services over the Winter period.

The winter was always a challenging period but a combination of things were likely to make the forthcoming period extremely challenging for the city. The focus this winter was on keeping people safe and well and this would be delivered through preventive activities to avoid illness, action to deliver services close to home where possible and to reduce the risk of illnesses getting to the point that hospital treatment is needed. When hospital treatment was required, the focus was on ensuring the safe delivery of care, minimising time spent in hospital and supporting people to return home.

The Winter Plan for 2022/23 had been developed based upon: -

- Learning from Covid pandemic
- The review of Sunderland winter schemes undertaken in May 2022
- National and regional guidance and learning

The Winter Plan had included the feedback from the ICS Winter Debrief and 'Testing the Plan' events and shared learning, and good practice from South Tyneside and Sunderland Place systems.

It was highlighted that a post had been funded last year to support people out of hospital with housing issues and there continued to be close working with the public health team for follow up schemes after discharge.

Gerry noted that a lot of these schemes were about people who had already been in hospital but there maybe should be more about keeping people out of hospital initially and Philip agreed that this needed to be driven forward for the long term, rather than just the winter.

Councillor Farthing queried whether a report on the level of funded care could be brought to the Board in the future. Graham King advised that data on this was regularly presented to the scrutiny committee but it was recognised that social care was part of the issue for hospital discharge.

RESOLVED that: -

- (i) the content of the report be noted;
- (ii) the Board note and be assured by the content of the Winter Vaccine Operational Plan (appendix 1);
- (iii) the Board be assured of the governance arrangements for the programme; and
- (iv) the Winter Plan (appendix 2) be noted prior to final submission to the ICB

HW26. Health and Wellbeing Board Delivery Boards Assurance Update

The Chief Executive of Together for Children, Executive Director of Health, Housing and Communities and Director of Adult Services submitted a joint report providing the Health and Wellbeing Board with assurance that the work of the Delivery Boards was progressing in line with their agreed terms of reference, a summary of the key points discussed at their recent meetings and an update on the Healthy City plan grant available to the Delivery Boards.

The Delivery Boards met on a quarterly basis to have oversight of the six Marmot objectives and the nine Healthy City Plan workstreams. An update report would be presented to each meeting of the Health and Wellbeing Board setting out what had been discussed and key issues to take forward.

The Starting Well Delivery Board had discussed the new family hubs initiative, the draft JSNA, place-based integration, the Director of Public Health Annual Report and the Early Help Strategy.

The Living Well Delivery Board had considered the Director of Public Health Annual Report, place-based integration, housing and homelessness strategies, the cost-of-living crisis and community wealth building.

The Ageing Well Delivery Board had received updates on the draft JSNA, resident survey responses analysis and action plan, the Director of Public Health Annual Report, Homes for Healthy Ageing and relationship between older people and city parks.

The Board therefore RESOLVED that: -

- (i) the meeting summaries from the recent meetings of the delivery boards be noted; and
- (ii) it be assured that the work of the Delivery Boards was progressing in line with their agreed terms of reference.

HW27. Health and Wellbeing Board Forward Plan

The Senior Manager – Policy submitted a report presenting the forward plan of business for 2021/2022.

Members of the Board were encouraged to put forward items for future meeting agendas either at Board meetings or by contacting the Council's Senior Policy Manager.

RESOLVED that the Forward Plan be received for information.

HW28. Dates and Time of Future Meetings

The Board noted the following proposed schedule of meetings for 2022/2023: -

Friday 9 December 2022 at 12.00pm

Friday 17 March 2023 at 12.00pm

(Signed) K CHEQUER
 Chair