

At a meeting of the HEALTH AND WELLBEING SCRUTINY COMMITTEE held in the Council Chamber of the CIVIC CENTRE, SUNDERLAND on WEDNESDAY, 1st DECEMBER, 2021 at 5:30pm.

Present:-

Councillor N. MacKnight in the Chair

Councillors Burnicle, Butler, Haswell, Leadbitter, McDonough and Speding

Also in attendance:-

Dr. Carol Aitken – General Practitioner, GP Alliance

Mr. David Chandler – Chief Officer and Chief Finance Officer, Sunderland Clinical Commissioning Group

Mr. Nigel Cummings – Scrutiny Officer, Sunderland City Council

Ms. Ann Dingwall – Head of Commissioning and Market Oversight, Sunderland City Council

Mr. Philip Foster – Managing Director, All Together Better Alliance

Mr. Yusuf Meah – Public Health Practitioner, Sunderland City Council

Ms. Victoria Muller – Operations Manager, GP Alliance

Ms. Gillian Robinson – Scrutiny, Mayoral and Member Support, Sunderland City Council

Ms. Joanne Stewart – Principal Governance Services Officer, Sunderland City Council

Ms. Gerry Taylor – Executive Director of Public Health and Integrated Commissioning, Sunderland City Council

Apologies for Absence

Apologies for absence were given on behalf of Councillors Heron, McClennan, Potts and M. Walker

Minutes of the last meeting of the Committee held on 3rd November, 2021

The Chairman referred to page five of the minutes and commented that he had sought clarification from the officers if Monkwearmouth Hospital was a listed building and had been advised that it was not and asked that this be included in the minute.

1. RESOLVED that the minutes of the last meeting of the Health and Wellbeing Scrutiny Committee held on 3rd November, 2021 (copy circulated) be confirmed and signed as a correct record, subject to the above amendment.

Declarations of Interest (including Whipping Declarations)

Item 4 – CoVid19 in Sunderland – Update

Councillor MacKnight made an open declaration in the above item as he had a professional interest in the report from the Executive Director of Public Health.

CoVid-19 in Sunderland – Update

The Executive Director of Public Health and Integrated Commissioning and Sunderland Clinical Commissioning Group (SCCG) submitted a joint report which provided the Health and Wellbeing Scrutiny Committee with an update on the Covid-19 situation, including recovery, in Sunderland.

(for copy report – see original minutes)

The Committee were provided with a comprehensive update and taken through a presentation by Ms. Gerry Taylor, Director of Public Health and Integrated Commissioning, which set out the latest public health developments in relation to CoVid-19 across the city, including details on:-

- Key facts and figures in relation to the current situation and Sunderland's experience of the pandemic;
- The autumn and winter plan;
- Public Health advice;
- The vaccination programme;
- The Local Outbreak Management Plan; and
- Testing strategy and contact tracing.

Mr. David Chandler, Chief Officer and Chief Finance Officer, Sunderland CCG, Mr. Philip Foster, Managing Director, All Together Better Alliance and Dr. Carol Aitken, General Practitioner, GP Alliance, provided the Committee with joint presentations which gave updates in relation to performance standards; the All Together Better Alliance winter schemes and current pressures; and the latest position of the CoVid-19 Vaccination Programme.

Dr. Aitken also praised the work of the district nurses and thanked them for their service in vaccinating those residents in care homes and housebound residents with both their doses and booster.

(for copy presentations – see original minutes)

Ms. Ann Dingwall, Head of Commissioning and Market Oversight, provided the Committee with the latest update on the position in care homes in the city and adult social care in general as they headed into the winter period, advising that there had been no major outbreaks in care homes and how they recognised that the care home offer was part of the solution in supporting All Together Better in allowing patients to be safely discharged from hospital.

In relation to pressures the care homes were facing, Ms. Dingwall advised that this was very much around staffing and available resource and retaining social care staff.

They were looking at how they could make working in social care more attractive and sustainable and this would need support from all colleagues in the room.

Councillor MacKnight thanked everyone for their presentations and detailed level of information that had been received, commenting that all the challenges facing services were interlinked in some way and invited questions and comments from the Committee.

Councillor McDonough referred to the figures in the presentation relating to the level of infections and death from CoVid and commented that it had stayed relatively stable since the summer and asked if they were expecting a spike in February similar to the way it had in the previous two years. Ms. Taylor advised that it was difficult to predict at the moment as the work around the vaccination programme should help reduce the number of cases expected to be seen over the winter months and as yet they did not know what the impact of the new variant would be.

Ms. Taylor advised the Committee that during the winter it was more difficult for people to mix outdoors with others so the message remained that residents needed to remain cautious, guidance should continue to be followed and they should look to take up the vaccinations and boosters as soon as they possibly could.

In relation to mask wearing and whether the Council were doing anything locally to encourage local businesses to comply with this, Ms. Taylor explained that it was a slightly more difficult message to circulate as now it was more of a personal choice than mandatory guidance, although her advice as a local authority representative had always been to continue to wear face coverings indoors and in crowded spaces. Given the recent change in guidance that face coverings were mandatory on public transport and in shops and stores they had contacted employers in retail offering support through short animations, which may need some updating and CoVid Marshalls were being brought back on stream and giving out face masks so that they were doing as much as they could to ensure residents were following the mandatory guidance.

Councillor McDonough also commented that there had been some issues with the vaccine rollout in schools and sought an update on the current situation. Ms. Taylor advised that it had been a slightly challenging programme, ensuring that the offer was available to all 12-15 year olds in Sunderland, but it was an ongoing offer so they were organising further visits to schools, and appointments could now be made through the central NHS booking system. They would be working with colleagues to ensure as many young people as possible had the opportunity to be given the vaccination and take up the offer.

Dr. Aitken also advised that young people needed to be three months clear of a CoVid infection before getting the vaccination which could have an impact and slow down the process for some young people receiving the vaccination.

In response to a question from Councillor McDonough as to whether retired doctors and nurses were still being used to deliver the vaccine whilst there were staffing shortages, Dr. Aitken informed the Committee that they were still using retired nurses and she was aware of some nurses who had retired during the pandemic but were still working. She explained that the opportunity for retired staff to sign up was still available through an open advert on the NHS jobs website.

With regards to a question from Councillor Haswell in relation to Public Health advice on the holding of Christmas parties, given the conflicting advice from the Secretary of State for Health and the Deputy Chief Executive of NHS Providers, Ms. Taylor commented that mixing with individuals that you may not usually mix with, particularly in large numbers and/or in enclosed spaces, is something which residents should remain cautious about. The advice Public Health would continue to give would be for people to consider their attendance and how secure they would feel given what arrangements would be in place at any event.

Councillor Haswell referred to the figures in relation to the eighteen week wait increasing and asked if this was through winter trend or an unexpected rise and Mr. Chandler explained that he had referred to this in a positive sense, meaning that more patients were being seen within that timeframe. He agreed that there were a lot more patients waiting and that there was a backlog but the good news was that the figure was reducing and should a patient attend a GP today there was a very good chance that you would be seen within eighteen weeks for start of treatment.

He advised that a lot of treatments now were day surgery and did not require an overnight stay generally and this helped to keep the elective numbers up despite the pressures during winter. The numbers waiting longer than eighteen weeks were large but patients were prioritised so that the more clinical need there was, the sooner a patient would be seen. Mr. Chandler informed the Committee that recently formal approval had been given to an allocation of monies into a programme of care to support those patients who were on waiting lists, whereby they would be contacted and given advice around when they may be seen, etc.

In relation to the move of the Urgent Treatment Care from the Pallion Health Centre into the footprint of the hospital on the 8th December, Councillor Haswell asked when the staff from the fracture clinic would be included in consultation as to where they would be moving to, Mr. Foster stated that he understood that consultation was taking place this week but advised he would get in touch with his Trust colleagues and provide a further, more detailed response to Members through the Scrutiny Officer.

Councillor Haswell referred to recent news that the International Innovation Centre which housed the Nightingale Centre being put back up for sale and asked if this would be an issue given the new Omicron variant and the potential increase in case numbers. Mr. Chandler advised that the mass vaccination site was due to be decommissioned at the end of March, 2022 but explained that this agreement had been made prior to the new Omicron variant.

Dr. Aitken also advised that they were looking to link up with the Nightingale Centre, the hospital and community pharmacies as GP's could not deliver the vaccination programme themselves. The Centre currently deliver 2,500 vaccinations a week and they were not as limited with the size of their premises as other sites may be. She explained that discussions would be held with everyone involved in providing vaccinations locally to see what everyone can offer to improve the uptake going forward.

Councillor Haswell commented that should the Nightingale Centre close it would be quite a big hit to capacity and asked if the Scrutiny Committee would be able to see

the plan to maintain that capacity going forward beyond the 31st March, 2022 at their January meeting? Dr. Aitken advised that they could certainly feedback the outcome of those discussions at that meeting.

Councillor Burnikell referred to the use of the Moderna vaccine for boosters and asked if there was any evidence that there were potentially more side effects with it than other brands of the vaccine and referred to residents who had advised him that they were concerned around receiving different boosters than the vaccination dose they had received. Ms. Muller advised that this was a common query that they were often faced with and Dr. Aitken explained that the side effect profile for Moderna and Pfizer were quite similar and the reason for the half dose of the Moderna vaccine was due to it being recognised that there were more side effects initially being seen; this ensured that residents were still given the protection from infection but with reduced potential of side effects.

Dr. Aitken went on to advise that she knew that there had been some angst, as people were expecting one brand and receiving another, but explained that they had found themselves in a situation quite recently with stock where they would not be able to give people a choice as the Pfizer vaccination had been reserved for the under 18 year olds.

In response to a follow up question from Councillor Burnikell, Dr. Aitken advised that there was no issue in residents being given a different booster than that of their original vaccination and that the advisory vaccinations to be used for the booster were Pfizer and Moderna. Giving a mix of the vaccinations as a booster was not an issue, although they would continue not to mix the primary course of first and second dose vaccinations.

Ms. Muller advised that should members of the public have concerns then they could go attend any of the walk in centres and have a conversation with a registered healthcare professional onsite who could reassure them before providing their vaccination.

Mr. Chandler commented that all variants of the vaccination had been passed as safe, and were fully tried and tested, and should there have been any concerns these would have been raised through the vigorous testing process. Members could give residents reassurances of this and he also commented that when residents attend for a flu vaccination they had never been concerned over who the provider of that vaccination was and that this vaccination should be no different.

Councillor Butler referred to social care and attracting people to apply for jobs in that field and commented that he felt that pay and conditions was a real sticking point, particularly in domiciliary care where staff were not paid for travel time between resident's homes, which he found a disgrace.

With regards to the move of the urgent treatment centre services, Councillor Butler queried arrangements for car parking, as it had been free at their current site, and was advised that there was a very small facility on the current site that was free but that a lot of patients used the hospital paid parking facility so it was not expected that there would be any material impact on patients and staff.

Councillor Butler referred to the slide within the presentation regarding the North East Ambulance Services (NEAS) and the 'RAT project' and sought further clarification as to what this was an acronym for and was informed by Mr. Foster that it stood for Rapid Assessment Treatment. This referred to when ambulances arrived at hospital and how more clinicians could be in the corridors areas to get that rapid assessment carried out to get patients who were not critical to the relevant space and allow the ambulances to get back out.

In response to a query from Councillor Butler as to how and whether the NHS could differentiate between variants, Ms. Taylor advised that it was possible to identify the variant by the NHS putting a number of PCR positive tests through their straining process. Some of the work currently being undertaken was trying to identify possible and probable cases on the base of contacts and travel, etc. and they and any close contacts would be advised that they had been in close contact of someone who had tested positive for the Omicron variant so that they could take the necessary self-isolation precautions, etc.

Councillor Butler referred to information within the presentation which had stated that 82.9% of the population of the city had been vaccinated with the first dose and asked if this was eligible residents or if this figure also included children and young people who were not able to have the vaccination. The Committee were informed that the figure was of the eligible population only and not inclusive of children. Councillor Butler commented that it was quite worrying that there was that number of residents who had not been vaccinated in the city as he had not realised that it was that high. Dr. Aitken advised that there were approximately 40,000 residents who had not received a first dose, with 4,000 of those having declined, so it left quite a high number of those who had not taken up the offer at all.

Councillor MacKnight referred to the low uptake of the vaccination by pregnant women and asked what strategies had been put in place to try and target them specifically and improve the information they were receiving to increase the uptake and was informed by Dr. Aitken that they had been working with hospital teams and midwives and comparing figures between local practices to see if there were any examples of good practice to share as well as attending webinars to see how the issue was being dealt with nationally. They had linked in and circulated information to midwives to share at their clinics, advising that they would happily look to arrange everything for non-vaccinated mothers to be to take up their doses.

Dr. Aitken stressed that the vaccine was safe for pregnant women and breastfeeding mums and it was important to continue to get those communications promoted.

The Chairman thanked all attendees for their presentations and information provided, and on behalf of the Committee gave a big, heartfelt thanks to all staff who were dealing with controlling the pandemic and thanked them for everything they had done over the last twenty two months, and it was:-

2. RESOLVED that:-

- i) the updates provided within the report and presentations be received and noted;

- ii) that more information on the consultation with the Fracture Services relocation be provided from Mr. Foster for circulation to the Committee; and
- iii) that following discussions around the future of the Nightingale Centre the outcomes be shared with Members of the Committee.

Better Health at Work and the Drive for Wellbeing in the Workplace

The Executive Director of Public Health and Integrated Commissioning submitted a report which provided an update to the Committee on better health at work and the drive for wellbeing in the workplace.

(for copy report – see original minutes)

Mr. Yusuf Meah, Public Health Practitioner took Members through the report which covered:-

- the Better Health at Work Award (BHAWA) in Sunderland;
- the work being carried out to raise awareness of the Sunderland Workplace Health Alliance; and
- the Sunderland Workplace Health model; seeking the endorsement of the Committee of the model.

Councillor Haswell thanked Mr. Meah for the very detailed report and commented that the work undertaken in Sunderland, by comparison to other local authorities he worked with, was dramatically better and was testament to the work the team were doing and the number of uptakes from employers being received.

In response to a query from Councillor Haswell regarding how many employees the 120 business who had signed up represented and also, where Sunderland were by national comparison, Mr. Meah advised that as the businesses were not signed up to an accredited framework or programme it was difficult to get the exact employee figures, whereas with the Better Health at Work award they would know this as that information made up part of the business' submission. They had considered if it would be possible to capture that information through a survey at the workshop next week but at previous attempts it had proven quite difficult.

With regards to national indicators, Mr. Meah advised that there were those that looked at sickness levels and presenteeism within the workplace but in relation to workplace health there were no clear measures so it was difficult to say. He did advise that Sunderland had been consulted when toolkits were being developed and had participated in a national seminar around workplace health, sharing examples of best practice. In relation to a regional picture, Sunderland were placed in the top three places that had good workplace help, though this was only linked to the Better Health at Work Award, rather than the alliance which was more of a Sunderland local model.

Councillor Haswell referred to an article recently published by the CIPD about businesses using resilience and wellbeing training to deter people to committing to activities such as the award and asked what quality checks were being taken to make sure that businesses were engaging fully and taking significant steps to try

and improve people's working lives? Mr. Meah informed the Committee that every business that signed up to the Better Health at Work Award would have to compile a portfolio which was led by a health advocate in their own organisation. This was then supported by Council staff to ensure that the quality criteria set by the regional assessments was facilitated and then submitted for verification to the TUC. The TUC would have a panel which would look at submissions from employers across the region and sign off the portfolio against the relevant level of bronze, silver, gold once they had verified assessments.

Councillor Leadbitter asked how many of the care homes in Sunderland had registered, as over the past few months morale for staff had been very low and to promote this within the care homes could only be beneficial for residents and their families. Mr. Meah commented that the employer's list was contained within the appendix to the report but he knew that not many had signed up and they could do better. The Better Health at Work Award regional offer had recently recruited members of staff to get more uptake in primary care and social care organisations and the alliance had been looking at how they could reach out better to smaller businesses through the Federation of Small Businesses and the Chamber of Commerce.

Councillor Butler referred to the use of agency staff by organisations and commented that it could cause an issue when members of staff were being paid differently for the same job and asked if we encouraged employers to give staff a full time contract earlier. Mr. Meah agreed that the challenge of agency staff versus permanent staff was a difficult one and advised that they usually saw this in the small to medium enterprises. He informed Members that working with senior leadership teams they were having conversations around staff retention and the offer that they were putting forward, including the social value element. When talking with businesses they asked them to consider what would provide them with more attraction and value in this area so that it enabled them to look at the bigger picture and not just the here and now.

Christmas was a perfect example when agency staff were used to meet the demand in retail and hospitality, but they tried to get a universal message out that all members of staff were the same, regardless of their contract, as the end result should be the benefit of the business whilst getting a bigger health impact of their employees and the population.

In response to a further query from Councillor Butler regarding promoting strategies around exercise and good nutrition, Mr. Meah agreed with comments made that some businesses were really proactive in comparison to others. He advised the Committee that funding had been secured from the Sunderland CCG to support the small and medium sized businesses who may not have the resources of larger organisations but do recruit the higher number of residents of Sunderland. They looked at a number of schemes including the healthy weight declaration, the physical activity offer and working with Everyone Active for manual and low paid workers to provide a subsidised offer, which they were hoping to be able to offer in the New Year.

In closing, Councillor Butler commented that he welcomed the report and offered his help with anything in the future and Mr. Meah advised he was more than welcome to

attend future meetings of the alliance and he would circulate those dates for the Committee Members.

Mr. Chandler advised that from a CCG perspective it was not enough to have fabulous services to treat people and it was just as important to work towards prevention and commented that he thought the Officer had undersold the value of the work undertaken in the community and how crucial they were in maintaining good health in the city and congratulated them in the work they had carried out to date.

In relation to the comment around care homes, Mr. Chandler advised he had a couple of ideas he could share with Officers as to how to get into that market and was happy to support it and have those conversations.

With regards to the awards, Mr. Chandler advised that holding a celebration event would be an ideal opportunity to showcase the work of employers in the city and Mr. Meah advised that pre-CoVid they had held an event which was well attended and businesses looked forward to. During CoVid they had made and shared video's of businesses sharing their success stories which had been well received and they had noticed that it had resulted in a significant increase in recruitment to the third tier of the model.

The Chairman thanked Mr. Meah for his report and the information provided, and it was:-

3. RESOLVED that:-

- (i) the report be accepted as an update on the Sunderland Better Health at Work Award and note the work taking place around wellbeing at work across the city; and
- (ii) endorse the Sunderland Workplace Health Model as set out in section four of the report.

Work Programme 2021/2022

The Scrutiny and Members' Support Coordinator submitted a report (copy circulated) which attached the current work programme for the year and also provided an update on a number of potential topics, as raised by Members, for the Committee's consideration.

(for copy report – see original minutes)

Mr. Cummings, Scrutiny Officer, presented the report and provided an update on the the current position on work programme items in relation to:-

- Accessibility across the city;
- Impact of Decent Homes Standard; and
- GP Access in Sunderland.

Members were informed that the meeting of the Committee due to be held on 12th January, 2022 had now been moved to 5th January, 2022 to allow the Committee to

consider a report on the integrated care systems and place based partnership arrangements before it's submission to Cabinet on 11th January, 2022 and were asked to amend their diaries accordingly.

Members having considered the report and update, it was:-

4. RESOLVED that the work programme be received and noted.

Notice of Key Decisions

The Strategic Director of People, Communications and Partnerships submitted a report (copy circulated) providing Members with an opportunity to consider those items on the Executive's Notice of Key Decisions for the 28 day period from 8 November, 2021.

(for copy report – see original minutes)

Mr Cummings, Scrutiny Officer, having advised that if any further Members wished to receive further information on any of the items contained in the notice they should contact him directly, it was:-

5. RESOLVED that the Notice of Key Decisions be received and noted.

The Chairman then closed the meeting having thanked Members and Officers for their attendance and wishing them a Merry Christmas and Happy New Year.

(Signed) N. MACKNIGHT,
Chairman.