At a meeting of the HEALTH AND WELLBEING SCRUTINY COMMITTEE held in Committee Room 1 of the CITY HALL, SUNDERLAND on TUESDAY, 28 FEBRUARY, 2023 at 5:30pm.

Present:-

Councillor Butler in the Chair

Councillors Ayre, Bond, Chisnall, Heron, Mann, McDonough, Potts, D. Trueman, Usher and M. Walker

Also in attendance:-

Mr. Mark Cotton – Deputy Chief Executive and Assistant Director of Communications and Engagement, North East Ambulance Service

Mr. Nigel Cummings – Scrutiny Officer, Sunderland City Council

Ms. Lisa Forster – Contract Manager, North East and North Cumbria Integrated Care Board

Mr. Darren Green – Head of Operations (Centre), North East Ambulance Service Ms. Joanne Stewart – Principal Governance Services Officer, Sunderland City Council

Mr. Scott Watson – Director of Place (Sunderland), North East and North Cumbria Integrated Care Board

Apologies for Absence

Apologies for absence were given on behalf of Councillor Speding and on behalf of Ms. Gerry Taylor

Minutes of the last meeting of the Committee held on 31st January, 2023

 RESOLVED that the minutes of the last meeting of the Health and Wellbeing Scrutiny Committee held on 31st January, 2023 (copies circulated) be confirmed and signed as a correct record.

Declarations of Interest (including Whipping Declarations)

Councillor Butler made an open declaration as he may have a professional interest in items on the agenda as an employee of North Cumbria Integrated Care Services.

North East Ambulance Service – Performance Update 2023

The Deputy Chief Executive and Assistant Director of Communication and Engagement of North East Ambulance Service submitted a report, attaching a presentation which provided an overview of activity and performance for the North East Ambulance Service.

(for copy report – see original minutes)

Mr. Mark Cotton, Deputy Chief Executive and Assistant Director of Communications and Engagement and Mr. Darren Green, Head of Operations (Centre) at North East Ambulance Service (NEAS) provided Members with a presentation which covered a wide range of issues, including:-

- Demand and performance;
- Response times performance;
- Hospital performance; and
- Trust capacity.

(for copy presentation – see original minutes)

The Chairman thanked Mr. Cotton and Mr. Green for their informative and thorough presentation and invited questions and comments from Members.

Councillor McDonough referred to the hospital performance figures and asked if it was felt that residents being unable to get GP appointments could be having an impact on the numbers presenting at accident and emergency (A&E). Mr. Green commented that hospital capacity was a challenge and there were issues around the ability of hospitals to discharge patients to community care and it was felt that this was creating more of a burden than lack of GP access, although there was no single specific cause. He explained they had seen a high volume of respiratory and flu related cases which in itself had driven more presentations at A&E and 999 calls.

In a follow up question Councillor McDonough asked if the problems with A&E were rectified, would the ambulance service then have the resource to meet the demands upon them and Mr. Green advised that there had been a lot of pressure on the service during January and February, 2023 but they were now seeing a reduction in the pressure on handovers and an improved performance. They were still seeing a lot of category 2 cases; hence there being work undertaken to reduce the demand; but there had been significantly more demand over the last two to four years and there was still the need to increase the resource they had even as A&E pressures reduced.

When asked why demand had increased, Mr. Green advised that it was difficult to answer that definitively, but it stood to reason that the amount of time some residents had been without healthcare during the pandemic could have the potential for a sicker demographic. Social isolation during CoVid had also significantly affected the mental health of some residents and they were seeing the impact of that on services.

Councillor McDonough referred to suggestions made in 2020 that there was a look to reduce the number of ambulances and replace them with a paramedic car and asked if this was still appropriate. Mr. Green explained that it was about the individual and the clinical capability of the resource. They were seeing a much more diverse need for a primary or urgent care resource and less of the more traditional, quick response ambulance. The service looked to identify the right treatment for a patient and the trend nationally was more towards providing a more specialised resource with the car rather than automatically dispatching an ambulance.

Councillor Heron referred to a television programme that had been based within the ambulance service and urged fellow Committee Members to watch it as it had shown first hand what staff were having to deal with; both the call handlers and paramedics. It raised the issues members of staff were having to deal with and the effect it could have on staff mental health but also highlighted the importance of the help they were being offered.

In response to a query from Councillor Usher, Mr. Green advised that the training for a call handler took on average 10 to 12 weeks. Mr. Cotton explained that they had to ensure they were recruiting the correct people to those positions as they had to have a level of resilience to be able to cope with some of the calls they received. He advised that they took more time at the beginning of the recruitment process assessing candidates to ensure they were the right fit for the position and explained that following the training they ran a buddy system so that new members of staff were not left feeling alone once they started to take calls. Mr. Green also advised that they tried to increase the number of internal applications for people who wanted to join the service from other areas.

Councillor Bond referred to the Care Quality Commission (CQC) report which had rated the service as good in 2018; which now required improvement, and the senior management team had also been rated as good; which was now rated at the lowest rating; with the management structure having completely changed since then. The report set out that there was a disconnect between frontline staff and senior management and that it was felt that there was a blame culture and lack of governance. He went on to ask if the recruitment of the new management structure had been external or if the structure had encouraged internal promotion and how they were going to put right the key issues and concerns raised in the 2022 inspection report.

Mr. Cotton commented that the service had been really disappointed to have received the latest inspection report and that it was in part reflective of a very difficult and challenging last two years which had a significant impact on the service and the NHS as a whole. He advised that they had made changes in the senior leadership which had provided a strong platform but highlighted that they needed to continue to improve their governance procedures; not necessarily the issue of individual leaders.

Since the production of the report six months ago they had already made good progress in improving the service but realised there was further to go. The Committee were advised that new appointments had been made to the organisation, both internal and external, recruiting the best individual with the best experience and skills to take forward the service. He advised that they had already made the decision to include a paramedic representative on the Board and an appointment had been made to the director post who would now have the role and direct responsibility to the paramedic workforce. The Chairman welcomed the appointment and commented that this was a very progressive idea as he felt it was important to include those people from the frontline on the Board.

Councillor Bond asked if future presentations could include information on the CQC inspection report and how issues were being addressed, which Mr. Cotton advised he was happy to include in the future but if the Committee wished to discuss the report in detail it may be better to invite other representatives who would be better suited to respond to any detailed questions.

Councillor Walker referred to ARP response times and in particular category three, which he understood to be urgent cases such as a broken bone, and asked what was planned to reduce response times. Mr. Green advised that category four responses were generally serviced by support from Patient Transport Services (PTS) which were a non-clinical, trained workforce; so it was arguably easier to use that resource in times of pressure whilst the clinical workforce were focussing on the higher priorities, category one to three patients. Also, if category three patients were waiting for a length of time then they may be upgraded and fall into a higher category for a quicker response.

To address the issue, they had undertaken a huge recruitment for call handlers, so they could ensure calls were answered and patients triaged appropriately, and they had also made big strides with the paramedic recruitment whilst utilising a third-party provider to assist whilst that recruitment process was undertaken. The University of Sunderland had also oversubscribed students to the course so that they were able to meet demands and needs more appropriately in the future.

Councillor Chisnall gave a huge thank you to the staff for the work they had undertaken during the pandemic and continued to provide through ongoing challenges. She also asked if during CoVid and the lack of GP appointments it had raised the number of calls into the service and if people were now just used to using the service? She also asked if the service received many repeat calls and in relation to staff turnover, what the rate was like once staff were trained and in position?

Mr. Green commented that it was difficult to determine how many patients used the service as they could not contact their GP but advised that every service had seen a huge uplift in the volume of incidents being reported and the acuity and type of illness that was out in the community had definitely shifted since CoVid. In terms of attrition rates, there was a high rate across the service lines, but this was not always because of the stresses of the role and was more due to the fact that a lot of people joined the service as a gateway to move on to the frontline which had always been their ultimate goal. There were pressures and stresses, but he did not feel that this was more in the call handler roles than any other in the service.

Councillor Chisnall referred to the advertised salary and she considered it low in comparison to other call advisor roles considering the stress and the calls they had to handle and asked if this was seen as an issue. Mr. Green commented that it was an area that was being discussed at Government level, and recent strike action had brought more attention to it, but highlighted that people who joined the service did not do so purely for the salary but for the service that they could provide.

In closing the Chairman gave his appreciation for the work the service continued to do and asked if this could be conveyed to staff and having thanked Officers for their informative presentation, it was:-

2. RESOLVED that the performance information contained within the presentation be received and noted.

Adult Mental Health Strategy Update

The Director of Place (Sunderland) at North East and North Cumbria Integrated Care Board submitted a report which provided the Committee with an update on the work that has taken place to implement the Adult Mental Health Strategy for Sunderland which was approved for publication in June 2021.

(for copy report - see original minutes)

Ms. Lisa Forster Contract Manager, North East and North Cumbria Integrated Care Board, took Members through a presentation providing more detail on a number of topics, including:-

- The four phases of building the strategy;
- The vision;
- The three strategic priorities;
- Delivery of the priorities and progress against them; and
- The next steps.

(for copy presentation – see original minutes)

The Chairman thanked Ms. Forster for her informative presentation and commented that he was happy to see the SARA project being referred to as it was now a focal part of the community in Southwick and it was admirable in getting mental health involved and would hopefully make steps forward for residents of the area.

In response to a question from the Chairman to the demographic of people included in the consultation, Ms. Forster commented that throughout the process they referred back to health inequalities, making sure that they captured the thoughts of the whole community, holding focus groups with the BME community and people who were hard of hearing, etc. to ensure they reached as many diverse groups as they could.

The Chairman referred a programme that the Foundation of Light ran; A Game of Two Halves; where he was an ambassador and advised that he had been introduced to a community interest company, Space, who ran a drop in session every Wednesday at the Beacon of Light. This week they had organised a walk to mainly help men who may be struggling with their mental health to discuss any concerns or issues they may have and considered that this would be a good contact for the service. Ms. Forster advised that they ran a mental health newsletter and she was happy to link in with the group to include any details of future events.

Councillor Heron advised that she was Chairman of the VCS Network in the Coalfield area and referred to projects that were being offered in the area such as 'Music for Mind' which had been set up following suicides in the area and raised her concerns regarding the rates of young men taking their own lives.

Ms. Forster agreed that as part of the engagement report they had found that males were difficult to engage with so they were trying alternative methods to reach out to those groups; for example they had ensured that all of the warm hubs would have included raised corner to try and help mental health awareness. She was also a member of the Sunderland Suicide Prevention Action Group and they looked at the

demographics so she could feed that information back and advised that they also had support available for those who had been affected by suicide.

Councillor McDonough asked if within the strategy they had plans for a specific, community-based response to be accessed when someone had taken their own life in an area of the city and referred to a scheme that he was aware of that ran very well in County Durham. Ms. Forster advised that they looked to provide specific guidance and advice, for example they provided a bereavement and grievance service in schools, although it was not specific to suicide. The Suicide Prevention Action Group had a workshop recently and were working to update their action plans and this could be recommended to be included. Mr. Watson commented that it was useful to have received the feedback and if provided with contact details in Durham he could look to have those conversations with them around the service they provided.

Councillor Mann commented that she was glad that separating learning disabilities from autism had been brought up as it had been an issue she had raised a number of times regarding labelling a group together which could result in incorrect diagnosis and treatment and she would be very interested to have a further report back to a future Committee as to how it was developing.

Councillor Mann also referred to the success of the SARA and HALO projects and commented that she would continue to campaign to have them rolled out in her ward and other areas of the city and the community development was essential to getting prevention out around the city and in turn relieve pressure on other services. Ms. Forster commented that there were three hubs in development and they wanted to ensure that these were the right model before expanding further in the city.

In relation to comments from Councillor Mann regarding the crucial transition period from children and young people to adult mental health services, and how from experience it was not working and needed more effort, Ms. Forster advised that there was a review programme in place for the development programme for 2023/24 which she was sure would capture a lot of the issues but she was happy to take any specific queries back to colleagues.

Mr. Watson advised the Committee that there had been a comprehensive plan put in place for Children's Services for the year ahead and he would be happy to ask the Head of Children's Integrated Commissioning to come along to a future Committee to give Members an update with regard to that. It was recognised that there were issues and that those services were not where they would expect or want them to be, and they were keen to drive improvements forward and ensure they were delivering for children and young people in the North East and wider area.

In response to a request for more information around the annual healthcheck from Councillor Ayre, Ms. Forster explained that service users were brought in to check six elements of health such as weight, blood pressure, etc. so they could act upon any abnormalities found. They realised that people with mental health illness were quite hard to engage with so they tried different methods of outreach to include as many as they could.

Councillor Ayre also referred to old attitudes of telling people to just get on with it and pull themselves together, Ms. Forster commented that it had been raised through the

engagement exercise but they were trying to breakdown those barriers and reach out to people so they could engage with services without a stigma being attached to it. Within communities they did as much as they could to educate people and they had found it was more prevalent within the male cohort and the BME community. Through the strategy they wanted to repeat the engagement work in eighteen months time to see if once mental health services were embedded if it was making an impact and changing perceptions and attitudes.

Councillor Mann referred to the assessment procedure for children and young people who had learning disabilities and were non-verbal and commented that it needed some work as she understood it needed to be multi agency but specialists were desperately needed in that area. Ms. Forster advised that she would take the query back to colleagues and get further information for Members as it was not her specialist area.

In closing, the Chairman referred to the dashboard measuring outcomes and asked if a report could be submitted back to the Committee within twelve to eighteen months to provide an update which Ms. Forster advised could be provided.

The Chairman thanked Ms. Forster and Mr. Watson for their attendance, and it was:-

3. RESOLVED that the content of the report and presentation and the progress being made towards the delivery of the Adult Mental health Strategy outcomes in Sunderland be received and noted.

Work Programme 2022/2023

The Scrutiny, Mayoral 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 advising that the report included a number of potential topics to consider along with a draft Scrutiny Work Programme for 2022/23. He informed the Committee that the work programme was a 'living' document and could continue to incorporate emerging issues as and when they arose throughout the forthcoming year.

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

4. RESOLVED that the work programme, including amendments, and the update on topics for review during 2022/23, 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 15 February, 2023.

(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 everyone for their attendance and participation.

(Signed) M. BUTLER, Chairman.