

**At a meeting of the HEALTH AND WELLBEING SCRUTINY COMMITTEE held remotely using Microsoft Teams and livestreamed on YouTube on WEDNESDAY, 30<sup>th</sup> SEPTEMBER, 2020 at 5.30p.m.**

**Present:-**

Councillor D. Dixon in the Chair

Councillors Butler, Davison, Essl, Greener, Haswell, Heron, Leadbitter, N. MacKnight, Mann and McClennan

**Also in attendance:-**

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

Ms. Deborah Cornell – Head of Corporate Affairs, Sunderland CCG

Mr. Nigel Cummings – Scrutiny Officer, Sunderland City Council

Ms. Ann Dingwall – Commissioning Manager, Sunderland City Council

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

Ms. Gillian Gibson – Director of Public Health, Sunderland City Council

Mr. Graham King – Head of Integrated Commissioning, Sunderland City Council

Dr Tracey Lucas – Lead GP, Sunderland CCG

Ms. Natalie McClary – Programme Lead, Sunderland CCG

Ms. Julie Parker-Walton – Registered Public Health Specialist, Sunderland City Council

Ms. Gillian Robinson - Scrutiny, Mayoral and Member Support Co-ordinator, Sunderland City Council

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

The Chairman opened the meeting and introductions were made. The Chairman advised that the vice-chairman Councillor Cunningham had recently resigned from the Council due to ill health and took the opportunity to thank him for all of his support and hard work over his years on the Committee and wished him a speedy recovery.

**Apologies for Absence**

There were no apologies for absence submitted to the meeting.

**Minutes of the last meeting of the Committee held on 2<sup>nd</sup> September, 2020**

1. RESOLVED that the minutes of the last meeting of the Health and Wellbeing Scrutiny Committee held on 2<sup>nd</sup> September, 2020 (copy circulated) be confirmed and signed as a correct record.

**Declarations of Interest (including Whipping Declarations)**

There were no declarations of interest made.

**CoVid-19 in Sunderland – Update**

The Director of Public Health submitted a report which provided the Committee with a detailed overview of the CoVid-19 situation in Sunderland.

(for copy report – see original minutes)

The Chairman welcomed Ms. Gillian Gibson, Director of Public Health, who took Members through a comprehensive presentation which provided the Committee with information on the impact of CoVid-19 in Sunderland

(for copy presentation – see original minutes)

Ms. Gibson advised Members of the Committee on the triage and case data that was available for Sunderland up until 27<sup>th</sup> September, 2020 and explained how this compared with other areas in the North East. She provided the Committee with current information on the test and tracing being undertaken and the measures that had recently been put in place for the North East LA7.

Councillor Dixon thanked Ms. Gibson for her presentation and invited questions and comments from the Committee.

Councillor Butler asked what measures were in place to actively monitor the wellbeing of people who were now reliant solely on informal carers, such as friends and family, particularly those who may not be deemed high risk enough to access support packages that were made available to others. He stated that there was evidence of people with degenerative conditions reporting acceleration in their deterioration and he asked if they were continuing to get their needs reassessed.

Mr. King advised that at the moment they were not seeing a huge spike in demand for social care reassessments but that they were playing catch up on some standard review work which had been put on hold during phase 1 of the pandemic. He did think it may be something that could come in the future and as a pre-emptive measure Officers had started up the community hub's again for any residents who may need those support services; helping deliver medications, shopping, etc. but to date they were not seeing the high demand for them as they had previously.

Councillor Butler referred to the spread of misinformation and referred to one of the presentation slides where it referred to CoVid only being mentioned on a death certificate and raised concerns that people were clinging onto such phrases and thinking that therefore CoVid had not caused the death, and that this could be a factor as to why people were not taking the issue as seriously. The Chairman agreed with Councillor Butler's comments and added that Public Health and the NHS were not only fighting the pandemic but also a raft of misinformation that existed around Covid-19 and asked if there were any media messages that need to be spread across the city and if it would be useful to provide these to Members to share on their own social media accounts to try and get the right message out there.

Ms. Gibson agreed with Members and commented that they probably did need to think about some of that misinformation that was being shared and added that initially they had found that cases were largely within younger people where the virus was presented generally as quite a mild disease but unsurprisingly, as those younger people mixed with family it had rapidly spread to older, more vulnerable age groups and it was really important to get the message out that they were now seeing

people with the serious illness and it was not confined to young people. She commented that she would pick the issue up with communication colleagues as to how best they could circulate more information and ask them to look to involve Members accordingly.

In relation to Councillor Butler's point regarding the recording of deaths, Ms. Gibson advised that in the majority of cases patients may have passed away from a cause that may not be CoVid but in the majority of the cases they were seeing that it had been the view of the Doctor writing the death certificate that CoVid had in some way led towards their death. Ms. Gibson added that it was an important point and they would look to be careful how they phrase this in the future and perhaps state how many people have died 'due' to CoVid alongside those who have died 'with' CoVid.

Councillor Davison referred to the charts contained within the presentation setting out data in relation to testing and noted that there was a high number of cases shown in the South of Sunderland, yet none in the North Sunderland area, and asked if this was due to the test centres being in that area of the city.

In response Ms. Gibson advised that the mobile units were accessible by car so could be accessed by anyone from across the city and although home test kits were available they could prove difficult to get hold of. She referred to the walk-in site mentioned in her presentation and explained to the Committee that this would be based at Johnson Street, near the city centre, but again this would be some distance for a resident to access from the north of the city. Previously identified sites in the north of Sunderland had proven not to be suitable, although she was confident a site had now been found and advised that she would confirm this and report back to Members after the meeting.

Councillor Davison commented further around misinformation being shared and a minister having been on television that morning stating that it had not mattered that the Prime Minister had given incorrect information out in relation to local restrictions as everything was available online, and asked other than it being online how were members of the public given the correct information on the CoVid restrictions. Ms. Gibson advised that there was a communications strategy in place but that one of the difficulties with the latest set of restrictions was that they had not been made aware of what they would entail until very late in the day and therefore it had proved difficult to be able to increase peoples knowledge around them. The communication teams of all seven local authorities were working together to get as much information as possible out to residents through both mainstream and social media resources but added that if any Members had further ideas as to how they could share information further then to contact her directly and they could look into their suggestions.

Councillor Davison commented that they often heard quotes of 'everyone working together' and felt that this was not the case in Sunderland and until there was enforcement, especially on public transport, the virus was going to run rampant in and around the city. The Chairman also stated that he was aware of a recent report in the Times that stated that only 18% of people with Covid-19 symptoms were self-isolating, according to an official survey. The report also stated that only 11% obey when asked by contact tracers to stay at home and asked if this was something we were encountering in Sunderland, which went alongside that which Councillor Davison was referring to. Ms. Gibson responded and stated that they do not collect data in terms of when people are being asked to self-isolate, and that it would have

to be a separate survey, which is where the Times were gathering their information from. Certainly, if people were only self-isolating to those figures as quoted then they would not be able to control the virus so it was really important that people followed the guidelines and self-isolated where needed.

In relation to the test and tracing service, Councillor MacKnight referred to anecdotal evidence that the NHS app service, that was being run in parallel with Public Health England, was not compatible with tests being carried out by Public Health England labs or NHS hospitals as they did not have a code to input to get onto the system that recorded results. Ms. Gibson commented that she would check and advise Members accordingly but she was almost certain that any issue had now been resolved.

Councillor MacKnight raised concerns that the outsourced part of the test and trace function was handing over work to Public Health England and local authorities to undertake, as they had been put out to contract and surely they should take on the workload, and asked what extra pressures this was putting onto services. Ms. Gibson explained that it was always agreed that complex cases would always be referred to Public Health England, but there was a concern now that authorities were not hearing from the test and trace service that there were outbreaks but from actual venues or individuals and commented that they would probably find it more beneficial to have a more localised, regional system than just the larger national one.

Councillor McClennan commented that she was delighted to see that it had finally been recognised that there was a problem in communication and getting information out to residents, especially where there were shortages of ICT supplies, skills and access to hardware in parts of the city which actually prohibited them from finding out what is going on and asked if any statistical data analysis on the number of people who were accessing the Council's website for updated information was recorded? And also, if we had access to similar data from other key websites to see just what percentage of people were actually accessing information in this way. Ms. Gibson commented that she did not have this information but advised that it could be referred back to the Council's communications team to see if that information was gathered and feedback to the Committee directly.

In terms of locating more outlets for electronic information for residents, Councillor McClennan suggested that the flashing notice boards installed around the city could be used so that people saw them when out and about, similarly a request could be made to access electronic notice boards in Doctor's surgeries, which were currently very much around promoting national campaigns but could be a good source for local information to be shared. Ms. Gibson commented that she did think the communications team were currently using some of the electronic noticeboards but again they could ask them to advise on this further. In relation to GP surgeries, Ms. Gibson advised that they have been given access to some of those message boards and were able to provide information to share on a weekly basis and commented that it may be beneficial to have someone from communications in attendance at a future meeting of the Committee who would be able to provide more information to Members.

Councillor McClennan commented that there was a lot of criticism around the confusion of the messages being passed down from Central Government and that this was a common concern for residents and asked if we had looked at what other countries were doing to share information and whether they were suffering from

similar concerns in sharing as much information or conflicting advice. Ms. Gibson advised that she had not to date looked at what other countries were doing, having been busy dealing with our response, but that when time allowed it could be an area to look into further.

In response to Councillor McClennan's request for more information from the university's around the current situation they found themselves in, with students returning and a number testing positive for CoVid, etc. Ms. Parker-Walton advised that she was working very, very closely with the University of Sunderland, having daily contact with them, and at the present time there were approximately fifty students who had received positive test results, with a large number of those being from the same study courses and two thirds of them living in the same halls of residence.

Ms. Parker-Walton informed the Committee that the University had acted very quickly and had good CoVid measures in place with a single point of contact for the students so as soon as they were symptomatic and were tested positive they were informing the University, who in turn informed the local authority before they were notified by the Health Protection Team so that they were able to act very quickly. Contact had been made with the students who tested positive and they were asked for details of their close contacts so they could be spoken with and asked to self-isolate also, with the welfare team keeping in touch with those students to ensure that they had everything they may need.

Control measures were in place in the halls of residence to reduce further infection and an outbreak control meeting had taken place with representatives from the University and the Health Protection Team and she was ensured that the University were doing what they could not only to support the students but also to contain the outbreak.

In relation to the test and trace system, Councillor McClennan asked what exactly was the issue; what was the need for support and where did the shortfall lay? Was it the number of testing stations, the number of people turning up or the numbers of staff to do the tests and asked exactly what the problem was as this was not clear. In terms of shortfalls for testing, Ms. Gibson advised that the main issue was laboratory capacity, and informed the Committee that both the NHS labs and the national Lighthouse labs were working at capacity but advised that there was a new laboratory due to come on track in Gateshead which would give greater capacity. She was aware that some of the NHS labs had struggled as there had been issues in having the equipment available but not enough consumables.

In terms of the shortfalls in relation to contact tracing, Ms. Gibson advised that she was less sighted on that issue as it was undertaken by a private company so she didn't get to see a lot of information around it.

Councillor Greener raised a concern that some cancer patients were being neglected as they may not be receiving necessary treatment whilst also referring to residents who suffered from depression and how they were ensuring that these patients also received support at this time, as although there was a need to concentrate on CoVid patients, others should not be neglected. Mrs. Gibson commented that during the initial lockdown the NHS had stopped a lot of routine services but they were working to get these back up to date as soon as possible and explained that it was a very fine

balance to stop the transmission of the virus whilst making sure that the measures that were put in place were not having a more adverse outcome on people.

Mr. Chandler gave assurances to the Committee that cancer treatment and patients remained a number one priority for the NHS, and especially for Sunderland, but he was aware that some people were scared to come into hospitals and other sites for treatment and reiterated that they were very much open for patients, that they were CoVid secure and should residents have concerns they should contact their appropriate healthcare professional to discuss this further and not to just stay away.

In relation to depression they were anticipating that there would be an upsurge in demand for mental health services in children and adult services, who had continued to work, sometimes online, during the lockdown. Additional resources were being put into those services, as already budgeted for, but they had been putting additional resources into talking therapies and they would not know whether there was enough resource until the level of demand could be understood fully.

Councillor Haswell referred to the communications strategy which had been discussed and in particular reaching out to older people and those who may not be as digitally confident and commented that they had been discussing this at each of the last three meetings and it was still being raised as an issue. One of his concerns was that smaller community hubs were informing him that they were not being communicated with from the Council with any new rules and regulations in a timely manner and asked why this was the case, as they should be contacted as a priority to help get the message out to their users. Ms. Gibson commented that she would feed this information back to the communications team and ask them to provide a response as she was not really sure as to the reason for any delay.

In response to a comment from Councillor Haswell regarding the options for residents who don't have access to a vehicle and were not comfortable using public transport at the current time to visit mobile sites to get tested, Ms. Gibson advised that in terms of home tests she was not aware what the issues had been but understood that at times there had been difficulties in securing them. She offered to investigate the matter further and gather some national data as to the numbers of people being home tested and what the issues had been in them being circulated and provide this directly to Members.

Councillor Haswell referred to the outbreak of the virus in University's and asked if Sunderland would be looking to follow other areas, such as Scotland, whereby students were not allowed outside of their halls of residence at all or if they would be allowed, for example, to take some daily outdoor exercise. Ms. Gibson commented that the University of Sunderland were being very supportive but unfortunately those who needed to self-isolate should do so at their residence and not leave for any reason for the required number of days. Ms. Gibson recognised that it was difficult for students with no outdoor space and could ask the question but felt that it may be national policy that set the guidance.

On behalf of the Committee the Chairman thanked Ms Gibson and her team for all of the hard work that they were undertaking at the moment and appreciated the amount of work they had and the pressures they were under at the moment and thanked them for the effort they were putting in.

There being no further questions or comments, the Chairman thanked the Officers for their reports and it was:-

2. RESOLVED that the updates provided within the report and presentations be received and noted.

### **Flu Vaccination Programme Update**

The Director of Public Health submitted a report which provided an update to the Committee on the flu vaccination programme for 2020/21 in Sunderland.

(for copy report – see original minutes)

The Chairman welcomed Ms. Julie Parker-Walton, Public Health Specialist, who took Members through the report advising of the national, regional and local approach for the flu vaccination programme for the year 2020/2021, in ensuring that there was an increase in the flu vaccine uptake in the city's most clinically at risk and vulnerable groups. The aim was to achieve the national targets and ambition, with ongoing monthly performance and activity being monitored by the Sunderland Flu Prevention Board.

(for copy presentation – see original minutes)

The Chairman thanked Ms. Parker-Walton for her thorough presentation and commented that obviously this was a much bigger programme than in previous years and asked how they would ensure that there was the capacity to meet the potential demand and also asked if there would be enough supply of the vaccine to meet the potential demand in the city. Ms. Parker-Walton advised that they had the capacity across the system to deliver the vaccination programme as they had the new national pharmacy specifications and the pharmacy voucher programme. There was some nervousness at the beginning as to how many people could vaccinate but through the standing operating procedure a lot of issues around this had been addressed.

Mr. Chandler advised that there was capacity in relation to manpower and with regards to supply informed Members that it was not the case of having the vaccine stored in the fridge for use as it was delivered in phased batches. Supply came through on a consistent basis and those areas that had higher cases of CoVid would be receiving theirs on a priority basis. The good thing was that demand was quite high currently, which meant people were taking up the opportunity of getting the vaccination sooner rather than waiting, which they hoped would continue.

Dr. Lucas advised that they had received a third of their overall flu vaccine stocks to date and they were working on giving them out in additional clinics on a Saturday which a lot of GP practices were doing to ensure that the more vulnerable residents of Sunderland could get their vaccinations as soon as possible. PPE supplies were not an issue and practices had been creative in how they could best manage patients coming into the practices to have their vaccine administered, using one way systems, booking slots, etc. whilst following set guidance and procedures around social distancing.

Councillor Heron gave her thanks to her GP practice in Hetton as she had attended

for her own flu vaccination and experienced the process put in place first-hand. She commented that the booking process had been straightforward and on attending there had been a number of people waiting but the practice had ensured that everyone was social distanced and that it was carried out in a safe way.

Councillor Davison asked if it was monitored how effective previous vaccines had been and if it was recorded how many people who had the vaccine then had a dose of the flu as she was worried that they were relying too much on the vaccine and not preparing for the worst case scenario. Ms. Gibson explained that the effectiveness of flu vaccines was monitored and sometimes they would get a good match to the viruses that were transmitting in a particular time but other times the virus would shift during the flu season and would be less of a match in being an effective vaccine. Quite often people can become ill after a flu vaccination but they would be less seriously ill, especially those who have a long term condition, and therefore it was always important that people had their flu vaccine as it would very rarely be completely ineffective so it would always protect them in some way.

Councillor MacKnight stated that it should not be underestimated how important this year's flu vaccination was, as the risk was, with the rise in CoVid cases if this was to coincide with a particularly bad flu season the NHS and local GP practices would not be able to cope with the workload and therefore it was important for the Council and partners to ensure that this message was shared. Ms. Parker-Walton advised that they had set up a flu prevention board for the first time ever, which was very well attended from all partners, and they had been working together since August to raise the importance of the flu vaccination scheme this year. Dr. Lucas commented that one practical message they would like to have circulated is that it would be helpful if people could arrive at practices wearing a loose sleeved top so that it would make access for the professional much easier and kept the process more streamlined and timely.

Secondly, Councillor MacKnight referred back to the sharing of misinformation and the fact that there was a fallacy amongst people in the community that the flu vaccine actually gave people the flu and stressed how important it was to be proactive and get the message out to residents that this was not the case. He asked what the Council could do as a partner with the CCG to quash some of these urban myths?

Councillor McClennan commented that there were sexual sensitivities when dealing with the BME women who may be attending for pharmacies their vaccination as the majority of pharmacists were male and they would require a chaperone to be present. Also, in relation to the comments around the loose clothing to be worn, the ladies in the BME community would need to be made aware of this as they may wear a number of layers under their hijab so it would be helpful if there could be someone in the community to start spreading the word and if the Bangladeshi Centre were informed they could also pass the message on. Ms. Parker-Walton thanked Councillor McClennan for her good points and agreed to follow this up with representatives in the community.

Councillor Dixon also asked how the programme would look to vaccinate harder-to-reach groups such as the homeless, the ethnic groups as touched on by Councillor McClennan, and residents from any traveller sites in the area and the Committee were informed that this was picked up in the local plan as to how the Council worked with priority and vulnerable groups. For example, they had good access into some



of the homeless hostels and the substance misuse service and pharmacists now had the ability to go out into communities to administer the vaccinations but discussions and negotiations still had to be held with the NPC (National Pharmaceutical Council) as to how this would be rolled out.

Councillor Haswell referred to the table in paragraph 3.3 of the report and the target and ambitions for immunisation and overall the response was pretty good but there was a noticeable gap concerning pregnant women, with Sunderland recording 40.5% but regionally 49.1%. He asked what the plan was to increase this and asked if there was any particular reason as to why there was such a gap and if anything else could be done to reach the target of 55%-75%. Ms. Parker-Walton advised that the maternity services were represented on the Board and understood that they needed to increase the number of vaccinations that were being given. There had been work undertaken over previous years and there was a need to understand why pregnant women weren't taking up the vaccination offer and making sure those conversations were being had with pregnant women to raise awareness and increase the uptake in those groups.

Councillor Haswell asked if there were any anecdotal information as to why pregnant women were not taking up the offer of the vaccination and wondered if it was in relation to previous concerns they may have had around the MMR jab. Ms. Parker-Walton commented that she was not aware of anything but they would continue to have those conversations with the maternity services.

Councillor McClennan suggested that it may be beneficial to leave flyers promoting the flu vaccinations in places where you would find pregnant women such as the baby department in larger retail stores, e.g. Debenhams, Mothercare, etc. and ask that the staff give out a copy with every purchase made.

There being no further questions or comments, the Chairman thanked the Officers for their reports and it was:-

3. RESOLVED that the updates provided within the report and presentations be received and noted.

## **Winter Planning**

All Together Better Sunderland submitted a report which provided the Committee with an update on the system winter planning for Sunderland.

(for copy report – see original minutes)

The Chairman welcomed Mr. Philip Foster, Managing Director, All Together Better, who took Members through the presentation which provided the Committee with an overview of the winter planning for Sunderland and covered a number of key areas, including:-

- Learning from CoVid-19;
- System Winter Schemes;
- Surge Protocol and Processes; and
- The Role of the Surge Group.

(for copy presentation – see original minutes)

Councillor Dixon thanked Mr. Foster for his presentation and invited questions and comments from the Committee.

Councillor MacKnight commented that during the initial spike of the CoVid virus patients were being discharged from hospital into care homes when having tested positive and asked what arrangements were now in place. Mr. Foster explained that national policy was that people could be discharged from hospital even if they had tested CoVid positive but there were a lot of benefits in getting people back into their own comfortable surroundings. Hospitals ensure that a CoVid test is taken 48 hours prior to discharge and the care homes group have worked closely with care homes so that they are better equipped and can look to isolate people when they are discharged from hospital if needed. Plans are in place so that if a care home is unable to support someone then alternative arrangements can be made but it was important to ensure that the correct risk assessments were carried out and support put into place for each individual resident.

Dr. Lucas advised that each GP practice was now aligned with one or more care homes so that relationships could be built with staff to help get to know the residents and families and their wishes around emergency health care plans and what would be appropriate for each individual. She explained that so much had been learned from the first wave of the CoVid pandemic that they were now much better prepared to help support each resident.

Councillor MacKnight commented that he was really pleased to hear this and that it was reassuring to know that residents could return to care homes with the right support as he felt people made a better recovery at home.

Councillor Dixon commented that there remained a high degree of uncertainty in how Covid-19 will develop over the coming winter months and asked how comfortable the team were that they had covered a number of scenarios; including a potential worst-case scenario, and also asked if there was additional national support for the anticipated winter pressures; including additional resources in PPE and testing kits for care homes and for discharges from hospitals. Mr. Foster advised that nobody knew what was going to happen with CoVid in the future, they had carried out testing and had triggers and different tiers as to what areas and services to step up but it would depend upon external influences, such as whether there was a bad flu season which would cause additional pressure, as well as any other measures placed on the region which may have an effect on things such as staffing levels. They needed to continue to come together to review plans and take appropriate actions and put measures in place where necessary.

Mr. Foster also reiterated that the public had a role to play and take responsibility to follow the measures and help in reducing the transmission of the virus and not to underestimate the importance of how they acted themselves. He advised that people needed to think as though they had the virus and could pass it on and had to be really careful in how they operated on a daily basis.

Dr. Lucas added that the strength of the relationships between partners in Sunderland, working together, was established prior to the CoVid pandemic so they had a couple of years testing how they would respond to a normal winter and its extra pressures which had helped them to address the initial wave of CoVid when it hit and the Committee should be reassured by that.

There being no further questions or comments, the Chairman thanked the Officers for their hard work during these difficult times and their report and it was:-

4. RESOLVED that the updates provided within the report and presentations be received and noted.

### **Annual Work Programme 2020/21**

The Scrutiny and Members' Support Coordinator submitted a report (copy circulated) which sought the Committee's agreement of the draft scrutiny work programme for 2020/21.

(for copy report – see original minutes)

Members having considered the report, it was:-

5. 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 14 September, 2020.

(for copy report – see original minutes)

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

6. 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 contribution to the meeting.

(Signed) D. DIXON,  
Chairman.