

CUMBRIA HEALTH AND WELLBEING BOARD

Minutes of a virtual Meeting of the Cumbria Health and Wellbeing Board held on Friday, 20 November 2020 at 10.00 am.

PRESENT:

Mr SF Young (Chair)

Mr M Adams, Accountable Officer, North Cumbria Clinical Commissioning Group
Mrs PA Bell, Cabinet Member for Health and Care Services
Mr D Blacklock, Chief Executive Officer - Healthwatch Cumbria
Mrs A Burns, Cabinet Member - Children's Services, Cumbria County Council
Mr C Cox, Director of Public Health, Cumbria County Council
Ms D Earl, Cabinet Member for Public Health and Community Services
Ms K Fairclough, Chief Executive, Cumbria County Council
Mr P Farrimond, Lancashire & South Cumbria NHS Foundation Trust
Mr D Fearnley, Medical Director, Lancashire and South Cumbria NHS Foundation Trust
Mr K Jarrold, Chair - Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
Dr G Jolliffe, Chair - Morecambe Bay Clinical Commissioning Group (joint Vice-Chair)
Mr J Lawlor, Chief Executive - Cumbria, Northumberland, Tyne and Wear NHS Foundation
Mr C Ranshaw, Third Sector Representative
Mr J Readman, Executive Director - People
Mr J Rush, Chair of North Cumbria Clinical Commissioning Group (joint Vice-Chair)
Mrs S Sanderson, Cabinet Member for Schools and Learning
Mrs M Skeer, Chief Constable - Cumbria Constabulary
Ms V Taylor, Eden District Council

Also in Attendance:-

Mr L Conway	-	Chief Executive - South Lakeland District Council
Mrs L Harker	-	Senior Democratic Services Officer
Ms H Horne	-	Chair, Healthwatch Cumbria
Mr D Houston	-	Senior Manager - Health and Care Integration
Mrs F Musgrave	-	Assistant Director - Integration and Partnerships
Mr P Rooney	-	Chief Operating Officer - North Cumbria Clinical Commissioning Group
Ms A Sheppard	-	Strategic Manager - Emotional Wellbeing & Mental Health
Ms A Smith	-	Policy Manager (Housing) - Allerdale Borough Council

PART 1 – ITEMS CONSIDERED IN THE PRESENCE OF THE PUBLIC AND PRESS

84 ROLL CALL FOR MEMBERS OF THE BOARD

All of the above members and officers were present at the meeting.

85 APOLOGIES FOR ABSENCE

Apologies for absence were received from Ms C Donovan (Dr D Fearnley attended as substitute), Mr D Eva (Mr P Farrimond attended as substitute), Mr J Lawlor and Mr M Thomas.

86 DISCLOSURES OF INTEREST

There were no disclosures of interest on this occasion.

87 EXCLUSION OF PRESS AND PUBLIC

RESOLVED, that the press and public be not excluded from the meeting for any items of business.

88 MINUTES

RESOLVED, that the minutes of the meeting of the Board held on 4 September 2020 be agreed as circulated.

89 REVISED TERMS OF REFERENCE

Members received a report from the Executive Director – Corporate, Customer and Community Services which advised of the revised Terms of Reference for the Board which were approved by County Council on 9 September 2020.

The Board noted that the proposed changes to the membership of Cumbria Health and Wellbeing Board reflected changes in the health organisational landscape and the need to ensure the relationship between health and wellbeing and the criminal justice system was reflected. It was explained that the extension of the membership of the Board would strengthen its role in providing strategic leadership and closer integration of health and care in the County at a time when this was critically important.

Members were also informed that as a result of Covid-19 and the introduction of new regulations allowing for meetings to be held remotely until 7 May 2021 consequential amendments were required to the Constitution to allow attendance at meetings by members and the public to be by remote means and for the publication of notices in electronic form. It was explained that those amendments were temporary and would only apply until 7 May 2021.

RESOLVED, that the report be noted.

90 COVID 19: UPDATE

Members received a detailed presentation from the Director of Public Health (Cumbria County Council) which gave an update on COVID 19 setting out the national and local picture.

The Board was informed there had been a substantial rise in cases nationally since September but this was beginning to plateau. It was explained that the number of patients admitted to hospital was also rising nationally but this was more gradual than during the first peak of the pandemic. Members noted the North West had the largest figures for hospitalisation and that mortality was increasing nationally but slower than during the first wave.

The Board was informed that all local areas had seen a rise in cases but they were now stabilising and beginning to decrease, with approximately 200-220 cases per 100,000 population, which was less than the average in England. It was explained that hospitalisation continued to increase creating significant challenges for the local Trusts and that mortality rates were still increasing but were lower than during the first wave of the pandemic.

The Board drew attention to the statistics regarding the number of excess deaths from all causes in comparison to a five year average which showed that the excess death figures were approximately twice the level of deaths solely attributed to COVID. Members asked if any work was being undertaken as to the extent to which that represented either an under reporting on the deaths caused by COVID or if it was largely due to deaths which were non COVID attributable.

It was explained that the number of excess deaths overall had not been investigated in Cumbria but considered nationally. Officers felt that in the initial phase a number of the excess deaths that were not recorded COVID-related could actually have been as a result of COVID because of the relative immaturity of the testing regime. However as the outbreak progressed, and the testing and attribution schemes became more established, it was more likely that the excess deaths were not as a direct result of COVID, but probably more likely due to the impact of the control measures that were put in place.

Members welcomed the evidence that lockdown measures had reduced the level of winter flu and, therefore, reduced the additional pressures on the system.

Members were informed that testing remained part of the mainstay to the strategic approach to reducing COVID 19. It was explained that future testing plans were being investigated with a view to establishing a number of more robust, permanent and more accessible local sites during the winter season in Barrow, Carlisle and other key towns in the county. The Board noted that local authorities had been invited to express an interest in a lateral flow testing system and that Cumbria was working at pace to put plans in place. It was explained the final strand of the testing strategy was to establish a rapid deployable outbreak response with a hyper mobile unit being pursued for that purpose.

A discussion took place regarding support for domiciliary care and members were informed that lateral flow testing would be controlled locally and that this cohort of people, and possibly school staff, would be at the top of the list for weekly tests.

The Board then received an update on contact tracing which it was felt was working exceptionally well in Cumbria. Officers explained this was set up in the middle of May, ahead of the national contact tracing system, and approaches were being formalised with the Department of Health, through a local Contact Tracing Partnership, to reduce duplication and ensure there was data consistency. Officers emphasised how critical access to the national system was to enable local contact tracers to have the ability to provide individuals with an identification number which would allow them to access the national support grants if they were isolating and on a low income.

Members were informed this was a substantial piece of work and following an initial meeting every effort was being made with the Department of Health to quickly gain access to the appropriate system. It was explained that in order to undertake this local contact, training was being increased with support being provided to district council teams along with the provision of a central team to follow up contacts and advise on self-isolation.

The Board received an update on the vaccination planning and was informed that preparation work was underway for when the vaccines in development could be delivered. It was explained the intention was for primary care to primarily lead on this programme with an initial focus being on care home residents and staff together with NHS staff and that discussions were taking place at national level regarding other prioritised groups.

A concern was raised regarding the lack of inclusion of care support workers who worked in the community supporting people in their own homes, reablement and supported living and asked when vaccine capacity would be available to them.

Officers explained that to-date no vaccines had received regulatory approval but assured members that the NHS was fully prepared for the vaccine when it was available, highlighting the enormous logistical challenge this would bring. It was explained that prioritisation was being led nationally by the Joint Committee on Vaccination and Immunisation with every endeavour being made to make the best local interpretation to offer support to a range of frontline staff. It was agreed that further information would be circulated separately to the Board.

A discussion took place regarding the disproportionate effect of COVID on people with learning disabilities and how Cumbria dealt with this. Officers acknowledged concerns drawing attention to the challenges of access to testing but explained that when lateral flow testing was in place this would be applied to that group of people. It was explained that discussions were ongoing with the Department of Health to ensure all centres were accessible for everyone.

A concern was raised regarding the lack of reference to the availability of the COVID vaccine for all school staff. It was explained that the prioritisation had been determined nationally and, although schools did not appear at present, this had not yet been finalised.

During the course of discussion an issue was raised regarding the lack of contact with schools regarding the flu vaccination this year. Officers explained there had been challenges regarding the national supply of the vaccine but confirmed that vouchers for the vaccination would be made available to all schools in the forthcoming week.

In conclusion, the Board was informed that following the end of the current lockdown on 2 December there would be more national dictation of tiers, including any relaxations for the Christmas period. It was felt if a vaccination was available early in the new year there may be improvements in the Spring but highlighted vaccinations may take a long time to administer, therefore, there may need to be ongoing controls for the next 8-12 months.

The Chair, on behalf of the Board, expressed thanks and appreciation to everyone involved.

91 COVID RESPONSE: HOMELESSNESS AND HEALTH

The Board received a report and detailed presentation from Cumbria Housing, Homelessness and Wellbeing Group which highlighted the work that had been undertaken to protect the health and wellbeing of the homeless population during the pandemic.

Members were informed of the work that was being undertaken to address the health and wellbeing of the homeless, rough-sleeping and temporarily accommodated population across Cumbria, together with details of the work which had been undertaken during the first phase of the pandemic, lessons learned and ongoing work in preparation for this winter and beyond to embed and strengthen this approach.

A discussion took place regarding the support available for people who had issues relating to mental health and substance misuse. The Board was informed that this varied across the county but every effort was being made to signpost this client group to relevant services.

Members were informed that part of the homelessness duty was to initially carry out an assessment on individuals to enable the correct support was provided to help prevent the requirement for longer-term high level services in the future. Officers confirmed that engagement would be made with local forums and agencies to ensure they were aware of the services available. It was explained that this group of people could be challenging and highlighted the need to ensure current services were retained and enhanced.

During the course of discussion a concern was raised regarding support for young people leaving care and attention was drawn to the lack of the 'Nightstop Shelters' provision due to the current pandemic. It was explained that discussions were taking place to retain the support but deliver the service in a different way. Members were informed that positive work was being undertaken in conjunction with other agencies to deliver statutory support services to those young care leavers.

The Board welcomed the update and it was agreed any further questions be sent direct to officers.

RESOLVED, that the following be noted:-

- (a) the work that was undertaken during the first phase of COVID;
- (b) the lessons learned in Lancashire and South Cumbria;
- (c) the work that is being undertaken to prepare for winter and the Covid second wave;
- (d) the need to embed and expand the improved system working that has developed as a result of the COVID response.

92 WINTER PLANNING

Members considered a joint report by the Executive Director – People, Cumbria County Council, Chief Operating Officer – North Cumbria Clinical Commissioning Group and Chief Officer - Morecambe Bay Clinical Commissioning Group which set out the steps that were being taken across the Health and Care systems to prepare for the expected Winter pressures, highlighting the interdependencies between the response to COVID 19 and the management of those pressures.

Members were informed that in addition to addressing system flow through the acute and community hospitals, work had also been undertaken to analyse and address the impact of COVID-19 within the wider community, specifically including impacts on unpaid carers and their support over this period. It was explained there was also recognition of the extreme pressures the COVID-19 pandemic had placed on some care providers and the heightened need to monitor and support the care market through this challenging period.

The Board noted that in order to address those issues, considerable work had been undertaken across the North and South Health and Care Systems. It was explained that as a result of the proactive work undertaken, many of the actions in the winter plans incorporated a response to COVID-19, the work to implement the previous Department of Health and Social Care discharge guidance or were part of the rapid improvement workstream already initiated by the system.

Members were informed that North Cumbria had taken a risk based approach when preparing their Winter Plan, highlighting a number of workforce issues which included managing absences. Officers highlighted the partnership working which was being undertaken to ensure hospitals were ready to meet demands and were able to provide care for those with the highest clinical needs.

The Board was informed of the expanded flu vaccination programme with Programme Board oversight to clinically vulnerable, at risk and extended groups with preparations also underway to deliver a COVID vaccine.

Members noted that the current pandemic was having a significant impact on the social care capacity and vital collaborative working with a number of agencies was being undertaken to support and manage this fragile sector. Officers highlighted the priority across the system for 'Home First' and informed the Board of the investment which had been made in home care and interim care beds.

The Chair, on behalf of members and officers, asked that their thanks and appreciation be relayed to all colleagues for their incredible contributions during a very challenging situation.

RESOLVED,

- (1) that it be noted that in order to meet national requirements the following actions have been taken (as set out in section 4.19 of the report):-
 - (a) in both North Cumbria and Morecambe Bay the new discharge arrangements are being introduced;
 - (b) system winter plans have been prepared for North Cumbria and Morecambe Bay and have been submitted through the relevant ICS and Regional assurance processes;
 - (c) in- line with the National Phase 3 requirements, partners across Cumbria have been restoring non-COVID activity since July and have submitted their 2020/21 recovery plans to the ICSs in late September;
 - (d) a consolidated Adult Social Care Winter Plan has been produced and agreed by the County Council;

- (2) to note and endorse the considerable amount of locally initiated improvement work that has taken place to prepare for winter in addition to these national requirements.

93 CUMBRIA PUBLIC HEALTH ALLIANCE UPDATE

The Board received a report from the Director of Public Health (Cumbria County Council) which gave an update on the development of the Cumbria Public Health Alliance/Outbreak Engagement Board (PHA-OEB), its links to the Locality Forums and the mechanisms for ensuring two-way influence and dialogue between the Board and each locality through agreed strategic aims and locally identified priorities.

Members also received an update on the first meetings of the Alliance in its new role as the Outbreak Engagement Board (OEB) held on 26 August, 17 September and 27 October 2020.

The Board discussed the Anti-Poverty Framework for Cumbria which was pertinent to the Joint Public Health Strategy themes of Poverty, Obesity and Transport. Members were informed that a reference group for the Strategy was now meeting monthly bringing together advisory groups, academics and public sector agencies. It was noted that the recovery plans would now be reviewed by local partners to determine how they could build the impact of poverty into their plans.

Members were informed that a report on Thriving Communities had been considered as a priority for the COVID recovery, building on the community response to the pandemic. It was explained that the PHA-OEB had agreed three areas for the focus of the programme and further details would be made available at a future meeting. The Board noted the community response during COVID and welcomed the desire to maintain this momentum; identify enablers to support this work, address any barriers to community activation and to rethink the relationship between the Voluntary Community Faith Social Enterprise Sector and formal sectors which would include looking at the way that interactions, including financial could be optimised for greatest system impact.

RESOLVED, that the following be noted:-

- (1) the update from the PHA-OEB and any identified plans for future activity;
- (2) where appropriate each item in the report includes reference to the pertinent section of the Cumbria Joint Public Health Strategy;
- (3) the agreed scope for the Thriving Communities element of the COVID Recovery Workstream (as set out in paragraph 4.16 of the report).

94 CUMBRIA LOCAL TRANSFORMATION PLANS: EMOTIONAL WELLBEING, RESILIENCE AND MENTAL HEALTH OF CHILDREN AND YOUNG PEOPLE

The Board received a report from the Executive Director – People (Cumbria County Council), Chief Operating Officer - North Cumbria Clinical Commissioning Group and Chief Officer - Morecambe Bay Clinical Commissioning Group which the two Cumbria Local Transformation Plans covering Cumbria.

Members were informed of the growing research into the impact of the COVID pandemic on demand for mental health support services for Children and Young People and considered the evidence, which highlighted the negative impact on the emotional wellbeing and mental health of many children and young people in Cumbria. During the course of discussion concerns were raised regarding the impact this had on teaching staff who were supporting both parents and pupils and asked whether additional support could be made available in schools during the pandemic. Officers acknowledged the increasing pressure on schools and informed the Board that an education resilience programme was being rolled out which could be linked to schools in the future.

During the course of discussion officers highlighted that early help providers would be crucial in the future to provide the necessary support and explained that a significant number of the workforce were being upskilled to ensure support to parents and carers was available.

The Board welcomed the development work and progress around the Outcomes Framework and suggested that members consider qualitative information with a deep dive into the outcomes on mental health issues in the future.

The Chair, on behalf of the Board, thanked the Team and all other agencies working in partnership for their continued support and welcomed a deep dive in the future.

RESOLVED, that

- (1) the approach being taken by those organisations with responsibility for the provision of services and care to promote resilience, provide support for emotional wellbeing, and treatment for mental health conditions of children and young people be endorsed;
- (2) the North Cumbria Local Transformation Plan Addenda be approved and the recommendations of the Morecambe Bay CCG Local Transformation Plan Update report be noted;
- (3) the work undertaken to work towards an integrated outcomes dashboard in relation to CYP emotional wellbeing and mental health enabling robust measurement of the impact of services on the lives of those in receipt of them be noted.

95 2020-21 BETTER CARE FUND QUARTER 2 UPDATE

The Board considered a report by the Executive Director – People, Cumbria County Council, Chief Operating Officer, NHS North Cumbria CCG and Chief Officer, NHS Morecambe Bay CCG which provided an update on Cumbria's Better Care Fund (BCF) for Quarter 2 2020/21.

Members were informed that to date guidance regarding the formal submission of the 2020/21 BCF plan had not been received and an expected date had not yet been circulated. Officers explained it was expected no formal submissions would be required on the BCF until quarter 4 for 2020-21 due to the COVID-19 pandemic response.

RESOLVED, that the report be noted.

96 FUTURE MEETING DATES

Members were informed that a short questionnaire would be despatched to them soon with regards to managing business at future Board meetings. During the course of discussion the Chair suggested that the next two meetings of the Board should start at 9.30 am instead of 10.00 am. It was

RESOLVED, that

- (1) the next Cumbria Health and Wellbeing Board Development day would take place virtually on Friday 22 January 2021 at 9.30 am;
- (2) the next meeting of the Board would take place virtually on Friday 5 February 2021 at 9.30 am.

The meeting ended at 12.30 pm