

CUMBRIA HEALTH AND WELLBEING BOARD

Minutes of a virtual Meeting of the Cumbria Health and Wellbeing Board held on Friday, 4 September 2020 at 10.00 am.

PRESENT:

Mr SF Young (Chair)

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 A Gardner, Director of Planning and Performance - Morecambe Bay Clinical Commissioning Group

Ms H Horne, Chair, Healthwatch Cumbria

Dr G Jolliffe, Chair - Morecambe Bay Clinical Commissioning Group (joint Vice-Chair)

Ms K Maynard, Chief Operating Officer - University Hospital Morecambe Bay NHS Foundation Trust

Mr C Ranshaw, Third Sector Representative

Mr J Rush, Chair of North Cumbria Clinical Commissioning Group (joint Vice-Chair)

Mrs L Simpson, Chief Executive, North Cumbria Integrated Care NHS Foundation Trust

Ms V Taylor, Leader - Eden District Council

Ms C Whalley, Assistant Director - Adults

Also in Attendance:-

Mr D Barton - Assistant Director - Education and Skills

Ms N Byrne - Barnardos

Ms L Clegg - Independent Chair, Cumbria SEND Improvement Board

Ms J Hamilton - Clinical Service Manager, Child and Adolescent Mental Health Services

Mrs L Harker - Senior Democratic Services Officer

Mr D Houston - Senior Manager - Health and Care Integration

Mr K Jarrold - Chair - Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

Ms J Johnston - Care Group Manager, South Cumbria Locality

Ms C Otley - Cumbria CVS

Mr P Rooney - Chief Operating Officer - North Cumbria Clinical Commissioning Group

Ms A Sheppard - Strategic Manager - Emotional Wellbeing & Mental Health

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

County Councillor Anne Burns as Lead Member for Children's Services left the meeting for a short time to sign-off a partnership approach with the Regional Adoption Agency which would consist of Cumbria, Durham and Sunderland local authorities.

71 ROLL CALL FOR MEMBERS OF THE BOARD

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

72 APOLOGIES FOR ABSENCE

Apologies for absence were received from Mark Adams, Patricia Bell, David Blacklock (Helen Horne attended as substitute), Aaron Cummins (Kate Maynard in attendance as substitute), Jerry Hawker (Anthony Gardner attended as substitute), Fiona Musgrave, John Readman (Cath Whalley in attendance as substitute), Sue Sanderson, Peter Scott, Michelle Skeer and Mike Thomas.

73 DISCLOSURES OF INTEREST

There were no disclosures of interest on this occasion.

74 EXCLUSION OF PRESS AND PUBLIC

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

75 MINUTES

RESOLVED, that the minutes of the meeting of the Board held on 10 July 2020 be agreed as circulated.

76 SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND) IMPROVEMENT UPDATE

The Board received a report and detailed presentation from Linda Clegg, Independent Chair, Cumbria SEND Improvement Board which provided a strategic update in relation to the SEND Improvement Programme.

Members were informed of the key areas of progress in the delivery of the SEND Written Statement of Action (WSOA), as well as areas that required continued focus. The Board was also provided with an update regarding Ofsted and DfE plans for monitoring and oversight from the autumn term onwards.

The Board welcomed the improvement in trust and confidence and definite step change in terms of engagement with parents/carers together with the many positives in terms of partnership engagement regarding service development. During the course of discussion the importance of the need to engage and connect with parents/carers to maintain their enthusiasm was emphasised by members

Members were informed that the Working Group parent/carer representatives were also able to provide a good account of the progress of their groups which demonstrated how well they were embedded in the work of the groups.

The Independent Chair, whilst welcoming the positive feedback from parents/carers emphasised they could not be complacent and highlighted their commitment and recognition of the importance of regular dialogue.

The Board noted that the main areas of focus were the same as the Improvement Board; including joint commissioning, quality of education, health and care plans and rebuilding trust and confidence of the wider SEND parent/carer community. Members highlighted the importance of joint commissioning to move forward in a positive manner.

Members were informed of areas for consideration including how parents/carers and young people could be involved in the Education, Health and Care Plan quality assurance process, and also the need for a focus on the large cohort of children and young people with SEN support needs who did not have a formal plan, to ensure their needs were met. Officers explained this was a focus of one of the working groups reporting to the Board and would monitor progress in addressing this issue.

The Board's attention was drawn to the impact of COVID 19 which continued to be a significant factor influencing work. Officers highlighted this challenge had been met with energy and commitment which had resulted in a number of new initiatives and approaches, however, progress in some areas remained impacted. It was explained that partnership working would continue to respond to the immediate and longer term impacts of COVID.

Members were informed that outstanding work had been undertaken in both north and south Cumbria to reduce waiting times. Officers highlighted a positive example of co-production which involved parent/carer representatives working with 'My Time' service to review the suitability of patient leaflets for the SEND population and assess whether enough was being offered regarding reasonable adjustments when families were struggling to access the service.

In conclusion the Independent Chair welcomed the progress which had been made and acknowledged areas which still required additional work, but assured members that this was being addressed. During the course of discussion the good collaborative work was highlighted together with the continued need to engage with parents/carers.

The Chair of the Board thanked officers for a positive report and welcomed a further update at a future meeting.

RESOLVED, that the update provided in relation to the SEND improvement programme of activity including the progress made and the areas that require continuing focus be noted.

77 COVID 19: UPDATE ON CUMBRIA RESPONSE

The Board received a joint report from the Executive Director – People, Cumbria County Council, Chief Operating Officer – North Cumbria Clinical Commissioning Group and Chief Officer - NHS Morecambe Bay Clinical Commissioning Group detailing work that had continued to take place to ensure that the response to COVID 19 had been managed to minimise the impact of the people and communities of Cumbria. The Director of Public Health emphasised that this had been a substantial and significant event which had not yet ended.

Members were informed that since last reporting to the Board the response structures had changed. It was explained that the Strategic Co-ordination Group had been stood down with the Local Resilience Forum structures now focussing on recovery with the Strategic Recovery Coordinating Group (SRCG) being activated on 18 June. It was explained this would facilitate and enable recovery of Cumbria from the COVID-19 pandemic, focusing on the impacts at community and countywide level.

The Board noted that in addition, from 1 August 2020, the NHS had moved from National Incident level 3. However, both of those response mechanisms were on standby to be reactivated if changed circumstances would indicate that they were needed.

A discussion took place regarding the impacts on primary care and the current priority for practices to deliver this year's expanded flu programme in context of depleted primary care capacity, social distancing restrictions and concerns about a possible 'second wave' of COVID 19. It was explained that innovative ways were being considered to maximise vaccination uptake this winter which included the possibility of drive-through vaccination centres to escalate Cumbria's campaign to tackle flu whilst limiting the risk of spreading coronavirus. Officers highlighted this was a live piece of work in terms of planning and implementation of the local flu campaigns.

During the course of discussion attention was drawn to the negative media publicity regarding GPs during the pandemic. Members were informed that GPs had continued to work relentlessly during the pandemic and had experienced a 210% increase in the number of telephone/remote consultations since the first two weeks of March 2020.

Members were informed that general practice activity had returned to business as usual, levels and practices were maintaining the total triage and digital options for assessing patients where appropriate. It was explained there remained to be limitations in returning to full capacity due to continuing infection prevention control measures but further estates work was underway with practices to support a return to usual capacity and patient flow in time for winter. There were concerns raised regarding the capacity available to deal with the continued pandemic together with winter pressures.

Officers emphasised that the collaborative response from councils, health organisations and other partners across Cumbria had been phenomenal and ensured the NHS had not been overwhelmed and care homes did not run out of personal protective equipment.

The Director of Public Health, whilst providing assurance about the activity that had taken place to date around COVID, highlighted it was imperative that the real current fragility of the Health and Care sector in the face of potential second wave, changes in health seeking behaviours, IPC constraints and reduced capacity, amongst other pressures were recognised. It was acknowledged there was a need for activities to ensure stabilisation in light of those ongoing issues that continued to have an impact.

The Chair, on behalf of the Board, thanked the Director of Public Health and his Team for the work they had undertaken to date.

RESOLVED, that the work which has been undertaken across partners in Cumbria to respond to the COVID 19 pandemic be noted.

78 COVID 19: HEALTH AND WELLBEING RESPONSE

The Board received a joint report from the Executive Director – People, Cumbria County Council, Chief Operating Officer – North Cumbria Clinical Commissioning Group and the Chief Officer - Morecambe Bay Clinical Commissioning Group which detailed the progress that had been made regarding the impact of COVID on the wellbeing of the people of Cumbria.

Members were informed that at the last meeting of the Health and Wellbeing Board a number of overarching aims had been agreed to minimise the impact of COVID in health and wellbeing, address health inequalities, ensure that high quality health and care services continued to be delivered and also to learn from the COVID experience in working towards a better health care and wellbeing system. It was explained that in order to deliver those overarching aims there were two main areas where the impacts of COVID required ongoing work: Pillar 1 – Addressing the Impact of COVID on the Wellbeing of the People of Cumbria and Pillar 2 – Stabilisation and Recovery of the Health and Wellbeing System.

The Chair drew attention to the use of the term 'Pillar' which was also used with regards to test and trace, therefore, to avoid any confusion it was agreed that the terminology would be look at.

a Pillar 1 - Addressing the Impact of COVID on the Wellbeing of the People of Cumbria

Members were informed the evidence of impact of the COVID-19 pandemic on children and young people's emotional wellbeing and mental health was still emerging and it would be some time before the full extent was known. It was explained there were strong indications that the pandemic had resulted in a negative impact on the emotional wellbeing and mental health of many children and young people in Cumbria. It was noted that some services and schools staff in contact with young people had also reported a decrease in anxiety as a result of not having to attend school and enjoying time at home with their parents or carers and families.

The Board was informed that intelligence was continually being collated regarding the impact of COVID on the emotional and mental health and wellbeing of young people and evidence was still emerging. It was highlighted this whole system response to the pandemic had continued.

It was explained that work was currently being carried out to support schools as they returned. Officers were working closely with DfE and a number of other organisations to ensure training was available to schools returning for the Autumn Term.

Members were informed there were now two mental health support schemes in the county; one in Furness which was at the end of its developmental phase with approval recently being received for a similar scheme in Carlisle and it was hoped this would be fully operational within a year. Officers explain it was anticipated further funding would be available in the Autumn and the Authority would actively pursue further teams in Cumbria to provide mental health support.

The Board received an update on the successful jointly commissioned 'My Time' service which targeted mental health support and surveyed schools staff about concerns relating to supporting the emotional wellbeing of returning pupils. It was explained that this had moved to a successful on-line service during the pandemic.

Members were informed that the Children and Adolescent Mental Health Service (CAMHS) jointly triaged with the My Time service and this had made a significant difference to their referrals.

The Board welcomed the latest data regarding the significant reduction in CAMHS waiting times which indicated that at present the average waiting time was three weeks in West Cumbria and four weeks in the East. It was explained this was due to a number of factors, highlighting the significant support received from the Specialist Mental Health Trust since moving into Cumbria, Northumbria and Tyne and Wear in October and close working with the SEND agenda.

During the course of discussion it was suggested that a further update on the CAMHS service be made at a future meeting of the Board which would include details of the impact the service was having.

The Board was informed it had been agreed by the respective North Cumbria and Lancashire and South Cumbria Children and Young People Emotional Wellbeing and Mental Health Partnership Boards that a COVID Addendum would be produced for both existing Local Transformation plans and would be made available to the Board once they were finalised.

Members then discussed the financial hardship being experienced due to COVID 19 which included a sharp increase in people who were experiencing food poverty and a significant increase in the number of benefit claimants.

A discussion took place and a concern was raised regarding the negative media coverage which young people had received during the pandemic and how this had affected other generations and made them fearful of leaving their homes. Officers agreed this was an issue and concern but informed members that the County Council, in conjunction with all partners, was drawing together a communications strategy to highlight the positive issues which were emerging.

The Board then discussed the Poverty Working Group and members were informed that this was the first part of the Framework in the short-term and was continually evolving. It was explained the Working Group had met once and was an open invitation via the Local Community Recovery Groups and included district council representatives. Members were informed that the short-term work consisted of two strands; joint communications regarding access to debt advice which was linked to mental health support and sufficient engagement to ensure the necessary support was available. Officers highlighted the huge amount of work which had taken place over the past six months and confirmed this Strategy would build on that.

Members were informed that the allocation of £500,000 from DEFRA had been received and would be used to provide immediate support for local schemes.

The Board discussed priority 2 which was to build on the community response to COVID by supporting people and communities in Cumbria to thrive, emphasising the valuable support received from the third sector during the pandemic and the importance of this continuing in the future. During the course of discussion members highlighted the need to ensure the appropriate third sector representatives were involved moving forward. Officers assured members that work was being undertaken to ensure diversity in the third sector was captured.

RESOLVED, that the following be noted:-

- (1) the work that has been taken to address the impact of COVID on the emotional and mental wellbeing of children and young people (as set out in section 5 of the report);
- (2) the decision of the Public Health Alliance about the mechanisms it would use to progress work on the priorities which it is responsible for (detailed in in section 6 of the report);
- (3) the work that is being undertaken to address the economic impact of COVID on individuals and families.

b Pillar 2 - Stabilisation and Recovery of the Health and Wellbeing System

The Board considered a 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 detailed the progress that had been made on the stabilisation and recovery of the health and wellbeing system.

Members were informed that building on the overarching premise that delivery should be through existing mechanism as far as is possible, it was agreed that the delivery mechanisms to develop new processes which would support and enhance those pathways out of hospital, and avoid premature admission to hospital and formal social care provision in the first instance were the Accident & Emergency Delivery Board and the Intermediate Care Boards in the North and Morecambe Bay alongside other health mechanisms. It was explained they were best placed and had the right level of representation from all partners to oversee the design, development, implementation and delivery of issues.

The Board considered the number of factors which had contributed to the fragility of the Regulated Care Market which were being addressed to ensure its medium to long-term sustainability.

Members noted the Care Home Sub-Group had continued to focus primarily with supporting the management of the ongoing immediate impact of COVID particularly in view of continued quality and safety, outbreaks, infections, financial stability, NHS discharge pressures and emerging legal and insurance issues impacting on the wider regulated care market. It was highlighted that all of those had to be considered across the Regulated Care sector and not just older adults.

The Board was informed that a number of factors had contributed to the fragility of the Regulated Care Market and were being addressed to ensure its medium to long-term sustainability. It was explained there was a need to be more collaborative and to rebuild confidence between partners. Officers felt the whole sector needed to be redesigned to ensure safety was paramount and processes and ways of working reflected that; this was an opportunity to work together to redesign the sector to capture the positives of COVID whilst being robust enough to guarantee safety.

The Board made reference to a document regarding the Third Phase of NHS Response to COVID 19 (referred to in the report) and whilst acknowledging the challenges and uncertainty across the whole system asked whether providers felt they could meet the challenging targets. The Trusts acknowledged the targets confirming they were working towards achieving them but highlighted the challenges this would bring.

The Chair thanked officers for their report and it was agreed this would be discussed further at a future Development Day.

RESOLVED, that the following be noted:-

- (1) the national requirements set out in the NHS Phase 3 Letter from NHS England/Improvement (referred to at Appendix 1 of the report);
- (2) the work that has been undertaken to develop new models of care (detailed in section 5 of the report);
- (3) the work that has been taken to stabilise and develop the regulated care market (as set out in section 6 of the report).

79 COVID 19: OUTBREAK CONTROL PLAN

Members considered a report by the Director of Public Health sets out the outcome of the Outbreak Control Plan consultation and sought approval from the Board.

Members were informed that under the Regulations the County Council had the appropriate powers to impose directions in specific circumstances. It was explained, however, that wider area restrictions were imposed by specific Regulations made under s45R of the Public Health (Control of Disease) Act 1984 noting that those Regulations were introduced as emergency regulations and apply for a 28 day period initially. It was highlighted that the Council had no power to introduce such a wide ranging lockdown.

The Board was informed that local MPs had played a significant part in decisions regarding wider area local lockdowns that had been undertaken. Members asked that further clarification be sought regarding the involvement of local MPs.

A discussion took place regarding testing and tracing and it was explained that Cumbria's approach to managing COVID-19 was set within the context of the national approach, in particular to testing, contact tracing and decision-making about restrictions on freedom of activity and movement. Concerns were raised regarding testing and tracing and whilst officers acknowledged that this had been challenging explained that this was improving.

Members were informed that mobile testing units in Cumbria would now be regarded as a priority, therefore, would be the last to be switched off for testing. In some outbreak situations mobile testing facilities would be deployed to support larger-scale community swabbing.

The Board was informed that following the consultation feedback a final plan would be adopted by Cumbria's Local Resilience Forum and would form part of the overall Cumbria Emergency Plan framework. It was explained that the Plan would be kept under regular review as the position regarding COVID-19 continued to develop. Officers confirmed that version control would be included on the cover of all documents.

RESOLVED, that the Outbreak Control Plan be approved.

80 HEALTH AND CARE SYSTEM UPDATES

a North Cumbria

The Board received a detailed presentation on the Integrated Care Partnership (ICP).

Members welcomed the availability of third sector and therapy staff at each ICC, increased agile work at boundaries, increasing definition of specific needs for an ICC's constituent population and the increase in technology and equipment to enable improved agile working

The Board noted that future developments included interface with Adult Social Care, exact relationship with primary care networks and the determined movement into public health space rather than delivery of acute needs.

During the course of discussion it was emphasised that the ICP was very much into collaboration and how services could support each other in the future.

b South Cumbria

Members received an update from the Chair of Morecambe Bay ICP.

The Board welcomed the collaboration across practices, new ways of working, working with the third sector, working with councils and the focus on population health, noting the challenges which included developing organisations/limited resources, the day job, national expectations/rapidly moving landscape and limited capacity in partners to engage.

Members welcomed the informative presentation drawing attention to the significant work being undertaken by the ICCs, highlighting in particular the work carried out with local communities in the Barrow area. During the course of discussion concerns were raised regarding the loss of interaction with local communities if there as a move to an ICS.

The Chair thanked officers for their presentations and noted their contents.

81 2020-21 BETTER CARE FUND QUARTER 1 REPORT

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 1 2020/21 and asked the Board to note the submission 2019/20 Quarter 4 performance return (referred to in Appendix 1 of the report) made under the delegated powers due to timing of the submission.

Members were informed that in response to the pandemic, the Cumbria Health and Social Care system had embraced new ways of working, including utilising new technologies, and collaborated closely to enable new programmes of work to be developed at pace, examples of which may help inform development of future BCF plans.

RESOLVED, that

- (1) the contents of the report be noted;
- (2) the contents of the 2019/20 Q4 submission be noted.

82 CUMBRIA PUBLIC HEALTH ALLIANCE UPDATE

The Board received a report from the Executive Director – People (Cumbria County Council) which gave an update from the Cumbria Public Health Alliance.

Members were informed that as part of the Outbreak Control Plan various existing bodies were taking on the additional roles required to co-ordinate and manage the Authority’s response to the COVID-19 pandemic. It was explained that it was felt that as the membership of the Alliance included County Council, six district councils, Cumbria Association of Local Councils, Third Sector, NHS and Healthwatch this was an appropriate body to lead the engagement function.

RESOLVED, that the report be noted.

83 FUTURE MEETING DATES

The Board noted that:-

- (1) the next Cumbria Health and Wellbeing Board Development day would take place on Friday 2 October 2020 at 10.00 am (venue to be confirmed).
- (2) the next meeting of the Board would take place on Friday 20 November 2020 at 10.00 am (venue to be confirmed).

The meeting ended at 1.00 pm