

## **HEALTH & WELLBEING BOARD**

### **Minutes of a meeting of the Health & Wellbeing Board held on Wednesday, 10 June 2020 at 10.00 am in Remote Meeting**

**Present:** Councillors A J Burford, S Dillon, D Evans, I T W Fletcher, C Hart, C Jones, J Leahy (Co-Chair), K Middleton (Chair), L Noakes, R A Overton, B Parnaby, S A W Reynolds, J Rowe, K T Tomlinson and P Watling

**In Attendance:**

**Apologies:** Councillors J Baker

**HWB1     Declarations of Interest**

None.

**HWB2     Minutes of the Previous Meeting**

**RESOLVED** – that the minutes from the meeting on the 10 June 2020 be approved by the Chair.

**HWB3     Public Speaking**

None.

**HWB4     COVID-19: CCG Approach to Restoration and Recovery**

The Health and Wellbeing Board received a presentation from David Evans, Accountable Officer for Telford and Wrekin Clinical Commissioning Group on the moving from restoration to system recovery and the new normal following the COVID-19 global pandemic. Mr. Evans provided a verbal executive summary on the following topics which were referenced in the presentation received by the board:

- Framework for planning & managing the stages of the pandemic.
- The 8 tests that Shropshire, Telford and Wrekin must meet.
- The Shropshire, Telford and Wrekin Integrated Care System principles and expectations.
- Capturing innovation.
- Learning captured through triple lens.
- Methods of information gathering to inform learning about impact of changes.
- Timescales for assimilating learning.
- Recovery & new normal governance structure.
- System strengths in response to COVID-19.

Members noted that there had been a reduction in the number of people attending A&E during the COVID-19 lockdown period, resulting in less

unnecessary trips but also the avoidance of legitimate medical emergencies. Members questioned how to get the balance right moving forward. Mr Evans responded by agreeing that A&E had seen at least a 50% reduction in attendance at certain points, and that moving forward the NHS needed to ensure the correct messages were put out so that some behaviour exhibited in the lockdown was retained. He stressed that the public also needed to know that the NHS had been open for business as usual for the last three or four and to still attend if you had a medical emergency.

Members asked about the work that had been done with the care sector in relation to a potential second wave, and provided anecdotal evidence of other good practices that had been taken up by care homes in other areas of the West Midlands. Mr. Evans responded by saying that all patients are tested for COVID-19 before discharge and are told to self-isolate for 14 days. Some challenges were presented for patients receiving continued care in care homes. Some care homes have set up separate wings so that they can take patients returning from hospital can reside there. Mr Evans continued by saying that a particular area of challenge for care homes surrounded the patients returning to care homes who suffered from Dementia and may have unknowingly walked out of that wing and cross infected other patients. Mr Evans concluded by saying he believed that there would be recurrence in the prevalence rate at some point within the next five or six months.

Members were keen to understand why the borough of Telford and Wrekin had seen a lower percentage in deaths in care homes due to COVID-19 compared to other local authorities. Mr. Evans was unsure on the answer for this and indicated that Liz Noakes, Director for Public Health at Telford and Wrekin Council may be better equipped to answer the questions. Ms. Noakes picked up on this question and said that the Telford and Wrekin average was just below the West Midlands average in terms of deaths in care homes due to COVID-19 and that this hadn't been properly investigated yet. However, Ms. Noakes did make reference to three particular points. The first related to the measures that had been taken by the care homes themselves in terms of closing admissions and staffing. The second was a proactive approach to supporting the care homes in the response to an outbreak led by Public Health England, but also support to avoid an outbreak in the first place and finally, a measured approach to discharges. Both Ms Noakes and Mr Evans believed that care homes in Telford and Wrekin needed to be applauded for their response to COVID-19.

Members noted the great work that had been done in the community in partnership with local care providers, and wondered if there could be a commitment that on the relooking of how the borough offers healthcare services across Telford and Wrekin, that more community based partnerships were created. Mr Evans responded by saying that both he and the Telford and Wrekin Clinical Commissioning Group (CCG) were committed to keeping what had gone well in response to COVID-19 and learning from the experiences that didn't. This included a shorter term plan for preventing hospital admission as well as a more co-ordinated and joined up approach for the short, medium and long term approach to the prevention of ill health for the population.

Members welcomed the innovation and digital advancements that had been picked up by GP's through the pandemic, but wondered if further detail could be given to the Board about those advancements and a timeline for them to be introduced. Mr. Evans responded by agreeing to bring a plan with details of digital advancements at a later date.

Members referred to the plans for NHS involvement in care homes after COVID-19, and believed that a more radical change could be made with further presence of the NHS in care homes. Mr Evans responded by saying that every care home in Telford and Wrekin had a clear identified clinical lead to provide clinical advice and there were plans for this moving forward. Similarly, Dr Jo Leahy, Chair of Telford and Wrekin CCG said that care homes already received support from the multi-disciplinary team lead by Shropshire Community Health NHS Trust and would continue to provide support. Ms. Noakes added that this is something that was introduced as a project in the Telford and Wrekin Integrated Place Programme.

Members added anecdotal evidence which reflected some challenges faced by a care home in Walsall, which was forced to accept a patient from a hospital but hadn't been tested. Likewise, due to staff shortages and the risk of the spread of the infection, Dementia patients had been locked in their rooms to stop them from wandering around the floor. Mr Evans offered a point of clarity in response to some of the points raised, which was that any patient discharged from a hospital in Telford and Wrekin had to be tested before discharge and that they need to self-isolate in whatever capacity they leave in whether to their own home or to a care home or a in a community hospital and this guidance came out roughly four or five weeks ago.

Members referenced more anecdotal evidence in which an individual in Birmingham with some learning disabilities had seemingly slipped through the net for care as she had been told that she was not bad enough for care and that her Ulcers were not bad enough for the district nurse to visit and therefore not receiving any care. The concern was that individuals in semi-individual environments have ceased to receive any sort of care. Mr Evans was disturbed to hear about the individual and was happy to have a conversation outside of the call but was unsure if it was something that had happened in Telford and Wrekin. He added that some services in health and social care had been suspended and had hoped that some residents hadn't become more vulnerable due to this, but it was something the CCG would need to look into.

Member wished to pay tribute to the multi-disciplinary and multi-agency work that had been exhibited in response to COVID-19 and wanted to credit everyone in Telford and Wrekin for this. However, restoration of services was important, but perhaps more so was the reformation of services to incorporate the good which had been learned during the pandemic and to get rid of the bad. The Member also mentioned that Healthwatch Telford and Wrekin had undertaken several task and finish groups relating to patient experience, which had highlighted that patients were fearful in going to the GP or A&E and

only did out of desperation due to pain. The Member concluded by saying that all members of the board had a duty to push the message that the NHS was open for business as usual. Mr Evans agreed that it was important to push the right message to public regarding GP's and A&E. He followed this by saying that GP's had started giving advice for patients to phone ahead of visiting the GP as they had started to create designated areas for COVID-19 positive patients or suspect COVID-19 positive patients and designated areas for COVID-19 free patients. Mr. Evans concluded that as part of the wider restoration process was to create COVID-19 free sites in the community, some actions have already undertaken such as moving phlebotomy services and urgent care centres out of the hospital.

This item was concluded with the news from a Member in which the Council had received extremely good feedback from the regional panel for its submission for the Council Support Plan. The regional panel had also identified nine areas of good practice which would be recommended to other local authorities.

**RESOLVED** – that the contents of the presentation be noted.

**HWB5 Care Act Easement: Implementation of the Coronavirus Act 2020**

The Health and Wellbeing Board received a report from the Jonathan Rowe, Executive Director: Adults Social Care and Health & Wellbeing, Telford and Wrekin Council on the Care Act Easements 2020 and was presented by Sarah Dillion, Director: Adult Social Care, Telford and Wrekin Council. The report had been published to support the decision making within Adult Social Care in Telford and Wrekin Council in relation to the implementation of the Coronavirus Act 2020 which allowed for some flexibilities of the duties in the Care Act 2014. Ms Dillion reported that Telford and Wrekin Council had rated itself a level two based on the guidance set out in the Coronavirus Act 2020. The main flexibilities were:

- Adjustments to the method of undertaking Care Act Assessments in line with social distancing and non-essential visits.
- Three month suspension of client contribution for all care and support delivered in the community.
- Scheduled reviews of care and support plans undertaken remotely where possible.

Ms. Dillion concluded by summarising that the main impact that had been undertaken by Adult Social Care in response to the coronavirus was the suspension of day services for individuals with learning difficulties but have continued to maintain contact and provided some services virtually as well as temporarily suspended respite care at Lakewood Court residential home but have continued to provide some care with individuals where required and a delay on minor works on equipment and occupational therapy.

Members wanted some clarity as to when it could be expected that the emergency regulations would be suspended and the flexibilities reversed. Ms. Dillion responded by saying that biggest area of concern was the daytime support for individuals with disabilities while social distancing measures are in place. Work is being done to assess the types of support they can offer, but daytime support cannot be resumed until social distancing measures are relaxed.

Members asked what was the learning to take away from the alternatives types of support that has been offered and whether there was an invest to save strategy that could be implemented. Ms Dillion agreed that the learning was an important conversation to have as well as the conversation with individuals and their families about what a new offer of support could look like with the use of new technology.

Members also believed that it was important to be mindful that some people over the age of 50 didn't need additional care from the Council. Ms Dillion responded to this by saying that calls to individuals led the direction of what was required, including that of minimal support. She added that Adult Social Care have worked closely with Wellbeing Independent Partnership to inform the individual about things in the community to support them if they wanted.

**RESOLVED** – that the contents of the report be noted.

**HWB6 Health & Wellbeing Strategy Refresh Proposals 2020/21-2022/23**

The Health and Wellbeing Board received a report from Liz Noakes, Director for Public Health. Telford & Wrekin Council detailing the Health and Wellbeing strategy refresh proposals for 2020/21-2022/23 in the context of the COVID-19 pandemic. The Board originally received and agreed the draft proposals in February 2020 however the full nature and scale of the COVID-19 pandemic could not have been imagined at the time. Therefore, within the recovery, reform and reset context for the council and partners, it provided a unique opportunity to re-imagine and re-invent the health and wellbeing agenda for the future. An additional health protection priority was added which focused on the prevention and reduction on infectious diseases in the community. Therefore the proposed priorities were:

- Continue to develop, evolve and deliver our Telford & Wrekin Integrated Place Partnership (TWIPP) Priority Programmes:
  - Building community capacity and resilience.
  - Prevention and healthy life styles.
  - Early access to advice and information.
  - Integrated care and support pathways
- Have a priority focus to drive progress on tackling health inequalities
- Set a priority call to action to improve emotional and mental wellbeing
- Ensure we protect people's health as much as possible from infectious diseases and other threats.

One Member queried that the report did not make reference to the ageing population that Telford has and wondered if this has been addressed. Ms. Noakes responded by saying that the Health and Wellbeing refresh strategy was an all-ages strategy and referenced a later agenda item which surrounded the support for the elderly population of Telford and Wrekin.

**RESOLVED** – that the reset strategy proposals be approved.

**HWB7 Single Strategic Commissioner for Shropshire & Telford and Wrekin CCG - Update Report**

The Health and Wellbeing Board received an update report on the Single Strategic Commissioner for Shropshire, Telford and Wrekin Clinical Commissioning Group from Alison Smith, Director for Corporate Affairs, NHS Shropshire CCG and NHS Telford and Wrekin CCG, and was presented by Dr. Jo Leahy, Chair of NHS Telford and Wrekin CCG. The purpose of the report was to provide an update on the application process for creating a Single Strategic Commissioner across Shropshire and Telford and Wrekin. The Health and Wellbeing Board was asked to note that the application for dissolution of the two existing CCGs and proposal to create a single CCG from April 2021 was made on 30th April 2020.

Members were concerned surrounding the number of sites that would be used by the CCG moving forward. Dr Jo Leahy responded by saying that the experience from the COVID-19 pandemic is that individuals can work effectively from home and that moving forward there will be more remote working so that the site will become less important.

Members expressed concern, that from a commissioning perspective, Telford & Wrekin and Shropshire had different needs, and didn't want this to be overlooked. For example, the rural deprivation in Shropshire compared to the urban deprivation in Telford & Wrekin. Likewise, members also believed that more money should be directed to community based assets rather than primary care and hospitals. Dr. Leahy cited that the Telford and Wrekin Integrated Place Partnership group would push this area forward and assured the Board that the CCG would be engaged with this.

Members raised concerns regarding the balance of the joint Governing Body as Telford and Wrekin had one GP and two Advanced Nurse Practitioners whereas Shropshire and three GP's. Dr Leahy replied that these individuals were elected from GP practices in their respective areas and that there may have been some political undertones in the election. Dr. Leahy added that she believed that this was a great way of diversifying management at that level of seniority. Likewise, she believed that the individuals elected wouldn't be out powered by GP Colleagues.

Members thanked Dr. Leahy for her work on the Health and Wellbeing Board, and wished her luck moving forward as she left the position of the Chair of the Telford and Wrekin CCG.

**RESOLVED** – that;

a) The actions taken to date on creating a single strategic commissioner for Shropshire, Telford and Wrekin be noted.

b) The feedback outlined in the Engagement report be noted.

**HWB8 Telford and Wrekin Integrated Place Partnership - Health and Social Care Rapid Response Team Update**

The Health and Wellbeing Board received a report on the integration of health and social care in Telford's "place" approach and progress from Sarah Downes, Integrated Place Partnership Manager, Telford & Wrekin Council, Julie Smith, Integration Lead, Telford & Wrekin Council and Tracey Jones, Deputy Executive Integrated Care, Telford & Wrekin Clinical Commissioning Group. The report outlined the progress made by the Telford & Wrekin Integrated Place Partnership (TWIPP) over the last 6-9 months and the difference it had made to residents and the system as a whole. The report gave progress updates to the various projects there were being undertaken by TWIPP. These were:

1) Building Community Capacity and Resilience

- Grant Rounds to develop provisions of additional community groups
- Increased volunteering capacity with the community
- Development of the Personal Assistant (PA) role and support development of a PA+/Micro-provider role.

2) Prevention and Healthy Lifestyles

- British Heart Foundation community blood pressure testing programme
- Living with and Beyond Cancer Programme
- Development of social prescribing role in Primary Care Networks
- Implementation of Telford & Wrekin Smoke Free Plan
- Delivery of whole system approach to reduce obesity

3) Early Access to Advice and Information

- Ongoing development and promotion of Live Well Telford (Information Portal)
- Establishment of Independent Living Centres/Smart House

4) Integrated Care and Support Pathways (including out of hospital)

- Implement the Health and Social Care Rapid Response Team (HSCRRT)
- Rollout of Care Home Team & exploring early intervention team for care homes
- Hospital pathways development – including Pathway Zero
- Development of a telehealth option to deliver care for long term conditions
- Delivery of national service specification for PCN's
- Consolidation and further development of domiciliary care zone model

5) One Estate

- Development of new integrated estates/extra facilities

6) Other TWIPP Deliverables

- Implementation of the Hertfordshire Family Safeguarding Model
- Mental Health – place based approach

The report also focused on the work of the pilot Health and Social Care Rapid Response Team which aimed to:

- Improve the person's experience,
- Reduce avoidable unplanned admissions to hospital or care homes,
- Reduce the number of crisis referrals,
- Optimise follow up care to reduce re-admissions,
- Improve access to a range of community services,
- Happy and productive staff, and
- Provide data and information to support future decision making and service

Members expressed their support for the update they had heard regarding the Health and Social Care Rapid Response Team (HSCRRT) and how it was a good example of the partnerships that was needed in Telford and Wrekin.

Members wondered how the HSCRRT built into the longer term strategy of ensuring that individuals were able to stay in their home, rather than going to the hospital. Ms. Smith responded by saying that the HSCRRT was eleven months work on top of previous neighbourhood based work and that Telford and Wrekin was welded to the idea of place based working. Ms. Smith added that they understood that residents in different areas of Telford and Wrekin had a diverse set of needs, and this is what TWIPP as a place based partnership wanted to be welded to.

**RESOLVED** \_\_\_\_\_ – **that;**

- a) The progress set out in the report and the request for a further update report in December 2020 be noted.**
- b) The local, place based work of Telford & Wrekin Integrated Place Partnership be supported and promoted.**
- c) The need for Telford & Wrekin Integrated Place Partnership, to remain a key part of the STP / and emerging Integrated Care System be supported.**

**HWB9 Telford and Wrekin Community Safety Partnership - Domestic Abuse Progress Report**

The Health and Wellbeing Board received a report on the Telford & Wrekin Community Safety Partnership Domestic Abuse from Helen Onions, Consultant in Public Health, Telford & Wrekin Council and Stacey Norwood,

Senior Public Health Commissioner, Telford & Wrekin Council. The report focused on the work of the Domestic Abuse subgroup during the COVID-19 pandemic and then an update on the implementation of the Domestic Abuse Strategy 2019-2021. The Board also received a presentation which summarised the key message of the report, which were:

- The Council and partners had a special focus as part of the COVID-19 response
- There had not be an increase in the number of domestic abuse crimes and incidents but this was expected to rise as lockdown was lifted.
- The Council had committed additional funding for victims through the West Mercia Women's Aid Live Chat Service & the Shropshire Domestic abuse Service which supported people 1:1 and Helpline.
- 'You are not alone' campaign promotion: refreshed web pages, Shropshire Domestic Abuse Service video, social media call to action, supermarkets and NHS settings posters.

Members were wondered if the Council had the capacity in place to deal with the increased number of cases that was predicted to occur when the lockdown ended and worried that the numbers currently being reported didn't reflect the usage due to not being able to report incidents of domestic abuse. Ms. Onions responded by saying that the Council was ready to start commissioning arrangements around enhanced support and perpetrator programs as they already had a service model prepared. Ms Norwood added that the Council was ready to work with schools as they had a package prepared to provide support for individuals who suffered domestic abuse when the children returned to school.

**RESOLVED** – that the arrangements in place to assess the impact of domestic abuse locally in light of the pandemic, the additional support and awareness raising and the further progress made in implementing the Telford & Wrekin Domestic Abuse Strategy 2019-2021 be noted.

#### **HWB10 Mental Health & Inequalities - STP Trauma & Adversity Work Stream Update**

The Health and Wellbeing Board received a presentation on the Sustainability and Transformation Programme (STP) Trauma and & Adversity Work Stream on Mental Health and Inequalities from Steve Trenchard, Programme Director for Mental Health, Shropshire, Telford & Wrekin, Sustainability and Transformation Plan. The presentation focused on the following topics:

- Mental health and inequalities.
- What contributes to poor mental health.
- Long Term Plan ambition.
- System trauma informed approach.
- System approach to raise awareness of adverse childhood experiences.
- Support Offer.
- Health and Wellbeing: Psychological Support.
- Proactive response during COVID-19 outbreak.

One Member queried the use of community based assets for social prescribing before individuals were submitted to trauma informed therapy. Mr. Trenchard responded by saying that this was part of the step care model and that trauma based therapy was about normalising experiences and giving individuals the help and guidance they needed.

One member welcomed the report and the presentation that they had heard in the meeting, but wondered why that this piece of work wasn't a part of the Telford & Wrekin Integrated Place Partnership (TWIPP)? Mr. Trenchard replied by saying that it was part of the TWIPP. Mr Trenchard added that just as he got to the point of signing off the plan for the initial submission, he begun the wider conversation on how to localise parts of the plan. Mr. Trenchard concluded by saying that he has been supportive of investment being allocated to front end services which concentrate on prevention, such as the Calm Café and out of office support, rather than just secondary specialist services.

One Member understood the importance of virtual therapy sessions for mental health support, but stressed the significance in retaining face-to-face sessions in the future. Mr. Trenchard responded by saying he believed that it should be a blended offer, depending on the needs and abilities of the patients.

**RESOLVED – that the contents of the presentation be noted.**

The meeting ended at 12.30 pm

**Chairman:** .....

**Date:** Monday, 13 July 2020