

Health and Adult Social Care Scrutiny Board

Monday 29 March 2021 On line virtual meeting

Present: Councillor E M Giles (Chair):

Councillor Piper (Vice-Chair);

Councillors Carmichael, Costigan, Hackett, Hartwell, R

Jones and Kausar.

Officers: Lisa McNally, Director of Public Health;

Katharine Willmette, Interim Director of Adult Social Care

John Taylor, Chair of Healthwatch Sandwell;

Richard Beeken, Interim Chief Executive, Sandwell and West

Birmingham NHS Trust;

Michelle Carolan, Managing Director, Sandwell Clinical

Commissioning Group (CCG):

Jayne Leeson, Chief Executive, Changing Our Lives;

Jackie Taylor, Senior Development Officer, Changing Our

Lives:

Richard Thompson, Pharmacy Lead, Sandwell Better Care

Fund.

08/21 Apologies for Absence

An apology was received from Councillor Jarvis.

09/21 **Declarations of Interest**

Councillor Carmichael declared a personal interest in the matter referred to in Minute No. 12/21 (Covid-19 Update – Part 2: Reopening Day Services for People with Learning Disabilities



















Update) as she worked for a voluntary and community sector organisation.

10/21 Minutes

Resolved that the minutes of the meeting held on 8 February 2021 are approved as a correct record.

11/21 Urgent Items of Business

There were no urgent items of business to consider.

12/21 Covid-19 Update

Further to Minute No. 5/21 (8 February 2021), the Board noted an update on the pandemic position for Sandwell.

Part 1: Vaccination and Care Home Visiting Update

Groups currently prioritised by the Joint Committee on Vaccination and Immunisation (JCVI) for a Covid-19 vaccination were residents in care homes for older adults and their carers (cohort 1, which had commenced December 2020); and adults aged 80+ years along with all frontline health and social care workers (cohort 2, which had commenced 11 January 2021). It was also noted that JCVI guidance would be amended to prioritise individuals with learning disabilities (cohort 6) and unpaid carers.

As of 29 March 2021, 71% of care home staff and 61% of domiciliary care staff had received their first vaccine dose. Around 4,650 staff in Care Quality Commission (CQC) regulated services in Sandwell had received their first vaccine dose.

Whilst uptake in Sandwell was above the West Midlands average, the Board noted the challenges that impacted on uptake and the steps taken to encourage uptake.



















The Board also noted an update on changes to national care home visiting policy, following the publication of updated Government Guidance on Care Home Visiting on 4 March 2021.

From 8 March 2021, care home visiting was allowed in specific circumstances. However, care homes were required to take a number of actions to ensure safe visiting and the Council was proving support on implementation of this guidance, including the development of a local self-assessment tool.

Part 2: Reopening Day Services for People with Learning Disabilities Update

Support had been provided throughout the pandemic in a variety of ways to ensure that service users remained safe and well. In total 5,658 virtual and telephone calls had been made. Personalised activity bags had been provided to enable service users to continue to pursue their hobbies while the centres were closed. Digital group sessions had also been held to ensure people could maintain friendships. Centres had remained closed throughout summer 2020, however, following feedback from clients and their carers, community outreach support had been provided to around 50 people. This number had been reduced to 13-15 people during the 2020 winter lockdown, where there was a risk of either carer breakdown or client hospitalisation.

The overall feedback from telephone conversations with the clients was that they had coped well. However, Changing Our Lives had been commissioned to conduct interviews with service users. Findings indicated that service users with learning disabilities did not miss the day service itself or the activities on offer but missed seeing and talking to their friends. Arrangements had therefore been made to facilitate contact using online meeting software, which service users had adapted very well to.

The findings also showed that service users needed to be better engaged in the types of activities offered to them.

The Service Manager Day Services outlined what the plans were for future provision based on the feedback received from service users. A hybrid model would be introduced, providing centrebased services for those who found it difficult to access community



















support and as part of the weekly offer for all service users, along with a digital offer. Going forward, service users would have a great say over how they wanted to spend their time.

The following was noted in response to members' comments and questions:-

- 38 service users from across the six towns were interviewed by Changing Our Lives. A breakdown for each town would be provided to members.
- Carer needs had been ascertained, and potential risks of care breakdown identified as a result of the 5,000+ virtual and telephone calls made in the last year.
- The needs of carers were often different from those of service users and there would be a challenge to factor the conflicting needs into the transformation plans.
- Carers would be consulted at each stage of the transformation process.
- The service would not become completely digital but would offer a mix of digital, community outreach and day centre support to service users.

Members endorsed the proposed service changes as a platform for consultation with service users and requested a further report following the completion of the consultation.

Part 3: Covid-19 cases in Sandwell and City Hospitals

The number of patients admitted to Sandwell and City hospitals had increased rapidly during January 2021 up to a peak of 426, which amounted to 40-50% of the total bed capacity of the Trust at the time. As of 26 March 2021, 67 patients were in Trust hospitals with Covid-19, which amounted to approximately 10% of the Trust's hospital bed capacity.

1190 people had now died from Covid-19 within Sandwell and West Birmingham hospitals since the start of the pandemic in March 2020.

The Interim Chief Executive outlined the clinical pathways for admission of COVID and other patients.



















Maternity continued to see patients in community locations and at hospital sites, whilst general outpatient activity was conducted via mix of virtual (video or telephone) and face-to-face for more urgent types of consultations.

Planned surgical and diagnostic procedures had been significantly reduced over the last few months, however, surgery activity had resumed on 22 March 2021. Urgent diagnostics and surgery had continued at Trust hospitals as well as in some private sector hospitals.

Regular contact had been maintained with staff who were shielding. All staff had now been offered the Covid-19 vaccine. The Sandwell Hospital Hub had stepped down its vaccine clinic on 12 February 2021, having completed over 7,000 first dose vaccinations. It reopened on 23 March 2021 for second doses.

Monitoring and review of all potential cases of hospital acquired Covid-19 would continue. Masks were mandatory for patients and staff when in shared areas or in a room with another person.

Mental wellbeing had been offered to staff, including confidential counselling and a wellbeing sanctuary. Giving staff time to recover after this wave of the pandemic was deemed vital in ensuring that the Trust could restore services and tackle waiting lists. It was noted that before the pandemic waiting times were to a large degree minimised through discretionary efforts of staff, including overtime working on weekends. This was not deemed a sustainable assumption and plans to recover services would need to strike the right balance between patient needs and staff needs in terms of recuperation.

The Trust would be reintroducing limited visiting from mid-April, and further easing would occur in mid-May in line with national lockdown restrictions easing. Every hospital in the Black Country and Birmingham system would be following the same timelines for easing the restrictions.

The following was noted in response to comments and questions:-



















- Point-of-care testing was in place for immediate test results for every inpatient requiring admission to the emergency department. Elective and day care admission inpatients were tested using PCR swabs. Tests were repeated at days 3 and 7 of inpatient admission. Lateral flow testing was used only as a last resort in the emergency department.
- Incident of patients being discharged after testing Covid-19
 positive were treated as serious and investigated by senior
 medical practitioners and escalated to the Health and Safety
 Executive where necessary.
- Long Covid clinics had become nationally mandated and deemed good practice.

Part 4: Covid-19 update – Sandwell and West Birmingham Clinical Commissioning Group (CCG)

Primary care had continued to operate in Sandwell, although some sites had closed or were operating remotely. Face-to-face surgery appointments were taking place subject to need and prior risk assessment.

Primary care had been supporting the vaccination programme. The eight Primary Care Networks (PCN) in Sandwell had collaborated with four local vaccination sites, namely Brasshouse Community Centre (Smethwick), Lyng Community Association (West Bromwich); Portway Lifestyle Centre (Oldbury), Whiteheath Medical Centre (Rowley Regis). From 22 February 2021, Tipton Sports Academy had also begun operating as a large-scale vaccination centre.

The Borough had achieved an uptake of over 90% for the most vulnerable cohorts (cohorts 1 and 2). Strong collaboration with the Public Health team through the Local Vaccine Board had contributed to this. The Healthy Sandwell Team was on hand to contact people who had any concerns about the vaccine and local champions promoted vaccination in the community. Public clinics, where teams were going out into local community centres, also proved effective in increasing local uptake.



















The following was noted in response to comments and questions:

- Those at risk but who were not extremely clinically vulnerable should book their vaccination through the GP.
- Residents could get vaccinated at all pharmacies which had signed up. The national booking system showed all vaccination site locations, including pharmacies.

13/21 White Paper – NHS and Social Care Reform

The Interim Director of Adult Social Care delivered a presentation on the Department of Health and Adult Social Cars (DHSC) legislative proposals for a Health and Care Bill, published on 11 February 2021.

The rationale behind the White Paper proposals were to seek more integration between health and care services, embed local collaboration and remove some of the main barriers to partnershipworking.

The main legislative proposals of the White Paper were:

- Creation of a statutory Integrated Care Systems (ICS) in each area, supporting the health and wellbeing of local populations by looking at wider determinants of health.
- Focus on place level but with local organisations free to make their own place-based arrangements;
- Increased assurance and oversight of adult social care services and data from providers, possibly with model similar to the Ofsted framework for education;
- Provision to allow the Secretary of State to make emergency payments directly to social care providers.
- Increased power of the Secretary of State to direct NHS England on specific public health functions, for example tackling obesity.
- A new standalone basis for the Better Care Fund (BCF), which would remove it from the NHS mandate setting.



















It was noted that Local Government Association (LGA) and Association of Directors of Adult Social Services (ADASS) were both working with the Department of Health and Social Care (DHSC) to influence some of the proposals on adult social care.

The following was noted in response to comments and questions:

- There was concern that Public Health could lose its ability to set local health priorities.
- There was no detail in the White Paper on method of integration between adult social care and the NHS, or on how social care would be funded going forward and provided no detail on the accountability of the proposed partnership arrangements.
- The proposal to create a bespoke tendering service to set health contracts would mean that there would be no opportunity for local scrutiny of health contracts.
- It was not known whether local public health responsibilities would remain within local councils.

(The Chair lost connectivity and the Vice Chair assumed the chairmanship of the meeting).

14/21 Sandwell's Air Quality Action Plan – Health Implications

The Board received a report on Sandwell's Air Quality Action Plan, which had been approved by Council in March 2021.

Sources of key air pollutants and their effects were outlined and their impacts on air pollution. Long-term exposure to air pollution was estimated to kill 1 in 19 people in the UK. It was very rare for air pollution to be cited as the direct cause of death but diseases such as cancer and respiratory diseases would often be caused by air pollution issues. Those with asthma, pneumonia, diabetes and respiratory and cardiovascular diseases were more susceptible to the effects of particulate matter pollution. Deprived populations were also more likely to live in areas with poor air quality and have conditions which made them more susceptible to effects of poor air quality.



















Sandwell had a higher than average emergency hospital admission rate for respiratory illnesses and the second highest diabetes prevalence in the UK.

In 2017 the cost of just one pollutant the NHS and social care was estimated at £41.2 million. This did not include the wider costs to the population.

Air pollution was also linked to mental health problems, including depression, a reduction in intelligence equivalent to a lost school year (exacerbated by Covid-19 impact for schoolchildren) and aggressive behaviour. Children were found to be more anxious and suicidal in areas of deprivation that had worse air pollution. Latest research had identified patterns of higher Covid-19 incidence and deaths in areas with higher levels of air pollution.

In 2005 monitoring had found that national air quality standards in relation to Nitrous Oxide levels were not being met in Sandwell, and consequently, the borough had been declared an Air Quality Management Area (AQMA). As of 2019, there were still seven areas within the Borough where national standards were exceeded.

The Board noted the actions proposed within the Air Quality Action Plan (AQAP) to address poor air quality within the Borough.

The air quality team had been successful in obtaining funding from Department for Environment, Food and Rural Affairs (DEFRA) for a project with faith centres, to provide mobile pollution monitors and screens, along with toolkits to support education on air quality.

21 air quality monitors would places across the borough, spread across the six towns. Community groups, councillors and schools would be supported to utilise them to reach a wide section of the population with messaging about improving air quality.

Air pollution was a public health priority, with 2.5 million cases of non-communicable diseases predicted to be attributable to air pollution by 2035 if particulate matter and Nitrous Oxide remained at current levels



















The impact of Covid-19 had shown that drastic behaviour change was possible in a short space of time and it was hoped that this would be the case for tackling air pollution and climate change as well.

(The Chair re-joined the meeting).

The following was noted in response to comments and questions:-

- The government had brought forward a ban on sale of new petrol and diesel cars from 2030. Stronger regulation around areas such as new-build houses emissions would be desirable.
- It is hoped that the whole of Sandwell would become a smoke-controlled area.
- Only standard level of abatement could be requested from industrial units, so it was difficult to ask factories to reduce pollution by any more than the minimum level required by national legislation.
- The Energy Savings Trust had been asked to produce a report estimating the cost of replacing all Council fleet vehicles with electric vehicles and the Environmental Team staff was looking at the cost of implementing the necessary electric vehicle infrastructure.
- Conversations were also taking place about replacing the current mayoral cars.
- It was hoped that the Covid-19 community champion programme would transition post-Covid to become an air quality and climate change champion programme.

Meeting ended at 7.38 pm

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