

Medway Council
Meeting of Health and Wellbeing Board
Thursday, 18 November 2021
3.07pm to 5.54pm

Record of the meeting

Subject to approval as an accurate record at the next meeting of this committee

- Present:** Councillor David Brake, Portfolio Holder for Adults' Services (Chairman)
Jackie Brown, Assistant Director Adults' Services
Councillor Howard Doe, Deputy Leader and Portfolio Holder for Housing and Community Services (Vice-Chairman)
Councillor Gary Etheridge
Lee-Anne Farach, Director of People - Children and Adults' Services
Councillor Adrian Gulvin, Portfolio Holder for Resources
Pat Gulvin, Healthwatch Medway
Councillor Vince Maple, Leader of the Labour and Co-operative Group
Councillor Martin Potter, Portfolio Holder for Education and Schools
Martin Riley, Joint Senior Responsible Officer, Medway and Swale Integrated Care Partnership
Councillor Stuart Tranter
James Williams, Director of Public Health
- Substitutes:** Paula Wilkins, Chief Nurse, Kent and Medway Clinical Commissioning Group (Substitute for Wilf Williams)
- In Attendance:** Kate Ako, Legal Advisor
Emma Banks, Detective Chief Superintendent, Kent Police
Gillian Fargher, Chair, Organ and Tissue Donation Committee, Medway NHS Foundation Trust
Paul Hayden, Clinical Lead of Organ donation, Medway NHS Foundation Trust
Su Irving, Head of Adult Partnership Commissioning and the Better Care Fund
Cinja Jostock, Interim Public Health Officer
Gurgit Mahil, DCEO, Medway NHS Foundation Trust
Rory Patterson, MSCP Independent Scrutineer
Debbie Yau, Democratic Services Officer

450 Apologies for absence

Apologies for absence were received from Donna Marriott, Assistant Director Children's Social Care, Dr Farnaaz Sharief, Medway and Swale Primary Care Network Representative and Wilf Williams, Accountable Officer, NHS Kent and Medway Clinical Commissioning Group who was substituted by Paula Wilkins, Chief Nurse, Kent and Medway Clinical Commissioning Group.

With respect to invited attendees, an apology was received from Dr George Findlay, Chief Executive, Medway NHS Foundation Trust who was substituted by Gurgit Mahil, DCEO, Medway NHS Foundation Trust.

451 Record of meeting

The record of the meeting held on 2 September 2021 was agreed and signed by the Chairman as correct.

With reference to page 12 of the minutes regarding the performance and access disparity among GP surgeries, a board member reiterated that they were keen to see that next steps would be taken to address the problem.

452 Urgent matters by reason of special circumstances

There were none.

453 Declarations of Disclosable Pecuniary Interests and Other Significant Interests

Disclosable pecuniary interests

There were none.

Other significant interests (OSIs)

There were none.

Other interests

There were none.

454 Organ Donation

Discussion:

The Clinical Leader for Organ Donation (CLOD) and the Chair of Organ and Tissue Donation Committee (COTDC) of the Medway NHS Foundation Trust gave a brief overview of organ and tissue donation, the impact of the COVID-19 pandemic on organ donation. They also provided an update on the law change in relation to organ donation and the need to promote organ donation in black and minority ethnic (BAME) communities.

Health and Wellbeing Board, 18 November 2021

Opportunities to indicate consent to donate organs – reference was made to the number of ways in which people could indicate their consent or otherwise to donate organs. It was suggested that better use could be made of opportunities to raise awareness, for example when people were applying for a driving licence. A board member urged the Medway Council to help identify local opportunities to promote donation, for example, during electoral registration. He suggested steps should be taken to improve donation through all possible means. This action was supported by another board member who shared his personal experience of signing up to become an organ donor.

In response, the COTDC highlighted that there were many potential opportunities to increase the number of people consenting to donation. This included through primary care, when GPs had routine consultations with patients. The COTDC reiterated that an important part of this process was to ensure consenting parties discussed their wishes with family members. The CLOD added that a huge amount of publicity work, which aimed to promote the organ donation consent law change in England, had been shelved due to the pandemic. It would be encouraging to see more promotion work done locally.

In response to a request, the CLOD agreed to forward the relevant link under the NHS Blood and Transplant website that detailed how people could become organ donors. There was a suggestion that hyperlinks to the relevant pages might be set up on the Council's website for people to register as organ/tissue donors.

Age limit for organ and tissue donation – in reply to a question on age limit, the CLOD advised that there was no age limit to become a donor for certain organs and the potential to become a tissue donor was higher than becoming an organ donor.

Education – a suggestion was made that similar presentations on organ donation be delivered to the Medway Education Partnership whereby all school heads and Educational Trust leaders would be invited to attend. The COTDC expressed appreciation for such an opportunity which she and the CLOD would be pleased to attend. Following a question as to whether hosting briefing sessions in places of worship had been considered, the COTDC advised that they had presented at the Medway Diversity Forum which gave access to a wide forum of people from the BAME groups. It was accepted that although some of these communities/groups were very supportive and would disseminate information on organ donation, it might help to increase the number of donors if there were local community champions advocating donation within them.

Decisions:

The Health and Wellbeing Board:

- a) noted the progress of organ donation in the UK; and
- b) agreed to use appropriate opportunities to publicise this particular initiative.

455 Medway and Swale Health and Care Partnership - Engaging Stakeholders

Discussion:

The Senior Responsible Officer (SRO), Medway and Swale Health and Care Partnership (HaCP) introduced the report. He highlighted that a Memorandum of Understanding had been developed for partnerships working with statutory and voluntary organisations. They had developed a co-production methodology and had a new framework now in development.

Next 12 months – noting that the report was about engaging stakeholders in HaCP's programme of work over the next 12 months, a question was asked whether the tasks listed in 'Next steps' under section 5 would be completed in 12 months' time. In reply, the SRO explained that the work was briefly paused during the first phase of the pandemic. Efforts were now being made by colleagues to collaborate with residents to re-start the service. As the development framework was the contentious part, the progress would depend on how that was developed and agreed within the time scale.

Patient voice – as regards ways to ensure the voices of at-risk adults and children were heard, the SRO advised there were a lot of patient groups. Instead of relying on them to come forward as in the past, colleagues in voluntary organisations and different sectors would reach out to them with a view to aligning membership to ensure patient voice was represented.

Engaging the public – a board member shared his experience of the difficulties in engaging the wider public who had no understanding as to how the NHS worked (beyond their own GP surgery), nor any knowledge of the wider NHS transformation programme. The SRO explained that the current NHS transformation programme involved a wide array of local providers, i.e. Medway NHS Foundation Trust, Medway Community Health, and GP primary care networks. The HaCP adopted a proactive, open and collaborative approach, with consistent communications and engagement across partner organisations.

Decision:

The Health and Wellbeing Board noted the report, in particular the 'Next steps' outlined in section 5 of the report.

456 Medway Safeguarding Children Partnership Annual Report

Discussion:

The Chief Nurse, Kent and Medway CCG and MSCP Executive Chair (Chief Nurse/CCG) presented the report and highlighted the key achievements during 2020-21 when the Medway Safeguarding Children Partnership (MSCP) focused on embedding and refining the partnership arrangements whilst responding to the COVID-19 pandemic.

Health and Wellbeing Board, 18 November 2021

Former inmates – concern was raised about influence, if any, on social/probation services provided to former inmates of youth detention centres currently residing in Medway, or steps taken to keep them on track for the sake of safety to relevant parties. The Director of People highlighted the statutory obligation and overarching responsibility of the Council in this respect. For example, the supervision given to social workers on the need to keep an overview of the destinations of these young persons. The Chief Nurse/CCG stressed that part of the independent scrutiny was to ensure the partnership had oversight of security arrangements.

Medway children and families – clarification was sought on Medway's performance that there were 134 children subject to a child protection plan at the end of March 2021, compared with 463 in April 2020. This was lower than Medway's statistical neighbours. The Director of People advised that MSCP's statutory partners had worked closely together and improved their practice in relation to parents of children in need. This meant the number of children subject to a child protection plan was greatly reduced.

In response to a question related to growth in secure accommodation demand, the MSCP Independent Scrutineer advised that as evidenced in the past 18 months, growth was due to rising local demand from local families, despite there being some inevitable movements across boundaries. The Director of People agreed with a board member's observation that young people seeking secure accommodation across boundaries in Medway mainly came from London boroughs. The member considered it proper for Medway to take responsibility for the provision of secure accommodation for young people from outside Medway administratively and not financially. A view was made that there were reciprocal demands for Medway children to move out of Medway into secure housing in other areas.

Section 11 audits – in reply to a question about the training taken up by the education sector under Section 11 Audit, the Chief Nurse/CCG advised that many agencies were compliant on most of the Section 11 standards and the MSCP had converted all training to virtual courses for them to continue during the COVID-19 pandemic.

Decisions:

The Health and Wellbeing Board noted the report and expressed appreciation in relation to the ways that various organisations worked together.

457 Update on Learning Disability and Autism Strategy

Discussion:

The Assistant Director Adults' Services (AD/AS) updated members on current progress of the Kent and Medway All Age Learning Disability and Autism Strategy.

Health and Wellbeing Board, 18 November 2021

Adult Education facilities – in reply to a board member’s question, the AD/AS stressed that adult education facilities were exactly the type of service needed to provide the required mental health support and that it could be through leisure and adult education care under direct payment. A member concurred with her view and suggested that this type of activity was what was required and was also financially sensible.

Direct payment – there was a concern about the new measure of direct payment as it might impose greater difficulties for users to access required services. The AD/AS explained that a lot of work had been done prior to the pandemic to mobilise a cultural change from traditional service delivery to direct payment. This enabled greater flexibility in particular to ways in which equipment could be provided.

Employment – it was stated and agreed that people with learning disabilities (LD) had a right to an ordinary life, however some people were subject to discrimination. People should be made aware of the richness and diversity that existed within the population of people with LD. The AD/AS concurred with this viewpoint and agreed more could be done to help people with LD and autism, for example, by providing tailor-made and continuous employment support to help them become independent.

Autism – a board member considered the data that suggested people experienced ‘poor support with mental health’ might not reflect the true picture as the survey was carried out during the pandemic when many people were having some mental health issues. The AD/AS advised that there needed to be more awareness of autism in health, social care and education. It was important that analysis was done to determine the impact of the pandemic on the mental health of people with LD in the future. He also requested an update on the support available to a person who was diagnosed with autism in older age. The AD/AS undertook to provide further information on the latter point after the meeting.

Decisions:

The Health and Wellbeing Board noted the report and recorded appreciation for the work being done for these groups of people.

458 Better Care Fund

Discussion:

The Director of Public Health (DPH) presented Medway’s Better Care Fund (BCF) Plan for 2021/22.

A board member considered that the idea behind the BCF plan was a paradigm shift for people in later life. The option to receive health care services electronically and remotely to their home was a welcome innovation. He suggested tackling the resultant challenge of social isolation through adult learning activities made available in the community. Another board member

Health and Wellbeing Board, 18 November 2021

gave support to the BCF plan and hoped that the final plan contained measurable and identifiable objectives that local people would be able to easily interpret.

The BCF plan set out the financial challenges the Health and Care system in Medway faced. Elaboration was sought, for example, on staff pay levels and resources aligned to paid/unpaid care services. The DPH explained that the aim of the BCF was to meet local needs, with the wider system bridging any gaps in health or care delivery through pooling resources to deliver services for local people. The Senior Responsible Officer added that the BCF offered opportunities to fund things slightly differently, allowing long-term plans and prevention to be taken forward.

Decisions:

The Health and Wellbeing Board

- a) noted the report and gave support to Medway's BCF Plan 2021/22; and
- b) agreed to bring the new Plan to a future meeting to enable the Board to reflect on its content and set direction for the BCF Plan in 2022/23.

459 Use of Technology in Health: Lessons Learned during the Pandemic

Discussion:

The Director of Public Health (DPH) briefed members on some of the ways the Council and in particular the health and social care system in Medway adapted and transformed its services during the COVID-19 pandemic. He highlighted that work was underway to inform the Council digital inclusion strategy which would set out ambitions and actions that needed to be taken in Medway to ensure digital inclusion,

Face-to-face contacts - There was a view that while the pandemic had accelerated the digital agenda through 'collaborative working', some parts of the community who were vulnerable might still benefit from in-person interaction. The Assistant Director Adults' Services (AD/AS) advised that people with learning disability and autism were unable to attend the day care centre during the pandemic and related activities were carried out through Zoom/ MS Teams. For example, social care assessments which were not complex could be conducted digitally. Going forward, the mode of social care delivery would likely be user-based, balancing the use of assistive technology and the need for in-person interactions to counteract social isolation.

Supporting our partners – With reference to social prescribing initiatives implemented prior to the pandemic most of which were conducted face-to-face, information was sought on the list of organisations that had secured bids of up to £3,000 under the digital funding pot which was set up as part of the Interreg funded social prescribing project. The DPH referred to the digital infrastructure including the better-connected websites across Medway which had been set up

Health and Wellbeing Board, 18 November 2021

to enable the public to access services and support. The way in which this programme had been established enabled the Council to measure the effectiveness of support provided and determine whether needs of residents and associated outcomes met each other. The DPH reflected on a number of projects by way of example. Further information on this work could be provided if necessary. The Chief Nurse/CCG gave an example of the collaborative work between the CCG and local authority in relation to tackling health inequalities and specific addressing unintended teenage conceptions.

Decisions:

The Health and Wellbeing Board noted the report and agreed to include an item on the Digital Inclusion Strategy on a future agenda.

460 COVID-19 Local Outbreak Management Plan Briefing

Discussion:

The Director of Public Health (DPH) provided an update on the Local Outbreak Management Plan (LOMP). He set out the current situation including the number of cases nationally and locally, the vaccination programme and also progress made locally in relation to delivering the aspirations of the national Winter Plan and COVID-19 roadmap.

Outbreak Management in Schools – concern was raised that the sudden surge of positive cases of COVID-19 had caused some anxiety among the population. A question was asked about the statistical significance of the data and whether rates would increase. The DPH referred to the modelling that was undertaken to predict the future infection rates. This model drew on a number of indicators including vaccination uptake rates, as well as population demographics. He pointed out that currently the case rates were highest among school aged children. The positive factors were mortality, morbidity and hospitalisations rates were not as extensive as before. Nevertheless, precautionary measures had been taken in order to manage infections and reduce the pressure on the NHS and Social care systems. Media campaigns were being used to promote use of alternative modes of support as well as uptake of seasonal influenza vaccination.

Vaccination Programme – the Board noted that the COVID-19 vaccination programmes in Medway had been rolled out for children aged 12 – 15 years to receive their first dose starting from October 2021. It was acknowledged that many of those aged 16 – 17 years had already received their first dose but more work was required to increase uptake. The Chief Nurse/CCG advised that if children missed their first jab appointment at school, they could receive it at a local vaccination centre. They should try to book online using the national booking system.

There was a concern about the confusing arrangements and whether there was a safety concern if people received their booster dose of COVID-19 and the flu vaccine at the same appointment. The Chief Nurse/CCG explained that both

Health and Wellbeing Board, 18 November 2021

vaccines were safe and had been assured. They could be administered concurrently with a 15-minute observation period between them.

On measures to boost vaccination up-take rates, the DPH stressed that this required additional efforts by disseminating correct messages from trustworthy source to people who had misconception about vaccination.

Concern was raised that some employees of the NHS responsible for administering vaccination were themselves unvaccinated. The DPH reassured members that infection prevention and control measures including testing and face-coverings were taken to keep people safe. The Chief Nurse/CCG considered it important to regularly engage with NHS colleagues to understand any reasons why they were reluctant to be vaccinated and support them to get vaccinated. Given the law changes, all front-line NHS workers would be required to have been vaccinated by April 2022.

The new normal – with reference to the social cost of the huge anxiety caused by local outbreaks of COVID-19 at different times of the year, a board member was concerned about measures to be taken to enable the community to move forward in 2022. The DPH suggested that in general people had adapted well to the pandemic. The current phase with good protection offered by clinical treatments and vaccination meant there was less jeopardy than the original first and second waves. There were good support systems in place and the third sector had proved invaluable. He advised members that in the new year, it was likely that COVID-19 would be an endemic disease, given the advances in science and medicine to protect our population. The Director of People said that the support available to the Medway population was second to none. She shared her experience of witnessing lots of support and reassurance given timely to a local people and the efficiency of the Medway testing programme.

In reply to a question about what precautions needed to be taken over the next 6 weeks to manage this disease over the Christmas period, the DPH explained that events in Medway were allowed to take place in a COVID-secure manner. Appropriate risk assessments should be carried out for any events or activities. Measures to minimise the risk of transmission of the COVID-19 virus included ventilation for indoor events, physical distancing, use of face-coverings and rapid follow-up and monitoring by local and national test & trace. He further advised that if there was an imminent threat to the public health, consideration might be given to invoking additional powers held in line with the Health Protection (Coronavirus Restriction) (England) (No. 3) Regulations 2020. The DPH also undertook to circulate a briefing note on 'Long COVID-19'.

Decision:

The Health and Wellbeing Board noted the update presented in the report.

461 Work Programme

Discussion:

Members noted the work programme report and the list of report items to be scheduled for discussion in 2022 at Appendix 1.

Decision:

The Health and Wellbeing Board agreed the work programme attached at Appendix 1 to the report.

Chairman

Date:

Debbie Yau, Democratic Services Officer

Telephone: 01634 332947

Email: democratic.services@medway.gov.uk