

HEALTH AND HOUSING SCRUTINY COMMITTEE

Wednesday, 3 March 2021

PRESENT – Councillors Bell (Chair), Donoghue, Layton, Lee, McEwan, Newall, Tostevin and Wright

APOLOGIES – Councillor Heslop

ABSENT – Councillor Dr. Chou

ALSO IN ATTENDANCE – Councillors Mrs Culley, Keir (Local Services Portfolio), Tait, Michelle Thompson (Healthwatch Darlington) and Dan Jackson (North East and North Cumbria Integrated Care System)

OFFICERS IN ATTENDANCE – Penny Spring (Director of Public Health), Ken Ross (Public Health Principal) and Hannah Fay (Democratic Officer)

HH46 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

HH47 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST

(1) STRATEGIC FRAMEWORK AND BUSINESS PLAN

RESOLVED – That discussion on this item be deferred.

(2) QUALITY ACCOUNT 2020/21 AND 2021/22

RESOLVED – That discussion on this item be deferred.

HH48 INTEGRATED CARE SYSTEM

The Director of Governance and Partnerships, North East and North Cumbria Integrated Care System gave a verbal update to Members on the next steps for Integrated Care Systems (ICS), following the publication of the Policy paper 'Integration and innovation: working together to improve health and social care for all'.

It was reported that the legislative process would proceed throughout this year and statutory status for ICS was expected by April 2022; all NHS organisations were obligated to develop plans for the next phase of COVID-19 response and service recovery; and that further guidance was anticipated from NHS England.

It was reported that there were 13 Local Authorities in the North East and North Cumbria ICS; the intentions to build on the existing arrangements in each of these areas; that in Darlington there were plans to consider role of the Health and Wellbeing Board and how a partnership board structure may be best set up, with the expectation that the Local Authority and Acute and Primary Care Providers would oversee local delivery with the overall aim of embedding support and strengthening place based arrangements.

Members were informed of the expectation for provider trusts to work in collaboration more formally; and that provider collaboration was well established in the North East.

It was anticipated that the name of the ICS body would be NHS North East and North Cumbria; the ICS would have a triple aim duty to pursue better health and wellbeing, better quality of services, and sustainable use of NHS resources; and the ICS would be accountable for the outcomes and health of the population, with the authority to delegate to a place level.

The ICS would be overseen by a twin board model consisting of an NHS Board, which would be accountable for NHS spend and performance; and an ICS Partnership Board, which would be a forum to agree co-ordinated action, provide direction for the early stages of ICS formation and would be responsible for developing a plan to address the health, social care and public health needs of the system.

Discussion ensued on the role of scrutiny; governance arrangements for the twin board model; the role of the Primary Care Network at a system level; and the involvement of the private sector.

The Chief Executive, Healthwatch reminded Members of the role of Healthwatch in delivering statutory duties for Local Authorities and urged all Local Authorities to give consideration to the role of Healthwatch at a place and system level.

RESOLVED – That the Director of Governance and Partnerships, North East and North Cumbria Integrated Care System be thanked for his informative update.

HH49 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY HELD ON :-

(1) 16 DECEMBER 2020

Submitted – The minutes (previously circulated) of the meeting of this Scrutiny Committee held on 16 December 2020.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 16 December 2020 be approved as a correct record.

(2) 13 JANUARY 2021

Submitted – The minutes (previously circulated) of the meeting of this Scrutiny Committee held on 13 January 2021.

RESOLVED – That the Minutes of the meeting of this Scrutiny Committee held on 13 January 2021 be approved as a correct record.

HH50 COVID-19 IN DARLINGTON

The Public Health Principal gave a presentation updating Members on the Covid-19 situation in Darlington.

In introducing the presentation, the Director of Public Health summarised the position from the previous meeting of this Scrutiny Committee; advised members that a successful community testing programme was now in place; the NHS England Mass Vaccination centre opened at the Darlington Arena on 1 March, with the capacity to deliver 200-300 vaccinations per day; and that the Feethams House Vaccination Centre continued to deliver vaccinations.

It was reported that there were four tests applied at a national level, that must be met for England to progress through the stages of the Governments road map out of lockdown; these were Test 1 - The vaccine deployment programme continues successfully; Test 2 - Evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated; Test 3 - Infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS; and Test 4 - Our assessment of the risks is not fundamentally changed by new Variants of Concern.

Members noted that as of 28 February 2021, 32,214 Darlington residents had received their vaccine; 94 per cent of 70 year olds had received their first dose; and nine out of ten care residents had received their first dose.

It was reported that the bed occupancy rate for County Durham and Darlington NHS Foundation Trust had, since mid-January, started to decline; that ICU bed occupancy rates had also started to decline; and the rates of cases in those aged 60 and over were decreasing and levelling out.

Members were advised of the figures for variants of concern, noting that the number of cases in the UK were very low; there was no evidence to suggest the variants were more deadly or more transmissible; and that 100 per cent of all positive cases that were genotyped showed the Kent variant to be present.

Details were provided on the figures for PCR and lateral flow testing in Darlington; the Department for Health and Social Care plans for test expansion; the four stages of the Road Map were outlined; and reference was made to the Stay at Home Campaign which would continue throughout all stages of the Road Map.

Discussion ensued on the vaccination of housebound residents and the actions taken to improve the uptake of vaccinations by ethnic communities. Members questioned the accuracy of the lateral flow tests and highlighted the need for improved messaging in relation to the vaccination process, particularly for hearing and site impaired residents.

RESOLVED – That the Public Health Principal and Director of Public Health be thanked for their update on Covid-19 in Darlington.

HH51 ANNUAL REPORT OF THE DIRECTOR OF PUBLIC HEALTH 2020 - DARLINGTON: IN THE TIME OF COVID-19

The Director of Public Health submitted a report (previously circulated) to share with Members the Annual Report of the Director of Public Health 2020, Darlington: In the time of COVID-19 (also previously circulated).

The submitted report stated that the Annual Report had been produced as a requirement of the Health and Social Care Act 2012; the subject for discussion was Darlington: In the time of COVID-19; the report discussed the early stages of Covid-19, the North East response, and the local Darlington response; and the Annual Report was written by the previous Director of Public Health, Miriam Davidson.

RESOLVED – (a) That the Annual Report of the Director of Public Health 2020, which had a focus on legacy of the programme, be noted.

(b) That the thanks of this Scrutiny Committee be extended to Miriam Davidson for her work as Director of Public Health for Darlington.

HH52 WORK PROGRAMME

The Managing Director submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme and to consider any additional areas which Members would like to suggest should be included in the previously approved work programme.

Members were advised of the proposal at the Adults Scrutiny Committee to undertake a joint review into the impact of COVID-19 on Adult Services and that a quad of aims would be submitted to this Scrutiny Committee for consideration.

RESOLVED – That the current status of the work programme be noted.

HH53 HEALTH AND WELLBEING BOARD

Members were advised that the next meeting of the Health and Wellbeing Board was scheduled for 18 March 2021.

RESOLVED – That Members look forward to receiving an update on the work of the Health and Well Being Board at a future meeting of this Scrutiny Committee.