Health and Wellbeing Board Agenda



3.00 pm Thursday, 18 March 2021 Microsoft Teams

In accordance with Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020, this meeting will be held on a virtual basis. Members of the Public can view a live stream of the meeting at:

https://www.darlington.gov.uk/livemeetings

Members of the public wanting to raise issues/make representations at the meeting can do so by emailing hannah.fay@darlington.gov.uk 24 hours before the meeting begin

- 1. Introductions/Attendance at Meeting.
- 2. Declarations of Interest.
- 3. To hear relevant representation (from Members and the General Public) on items on this Health and Well Being Board Agenda.
- 4. To approve the Minutes of the Meeting of this Board held on :-
 - (a) 3 September 2020 (Pages 5 8)
 - (b) 17 December 2020 (Pages 9 12)
- COVID-19 in Darlington –
 Presentation by Director of Public Health (Pages 13 - 34)
- Darlington Carers' Action Plan 2020-22 Report of Director of Children and Adults Services (Pages 35 - 54)
- 7. SUPPLEMENTARY ITEM(S) (if any) which in the opinion of the Chair of this Board are of an urgent nature and can be discussed at the meeting.
- 8. Questions.

The Sinhe

Luke Swinhoe Assistant Director Law and Governance

Wednesday, 10 March 2021

Town Hall Darlington.

Membership

Councillor Clarke, Cabinet Member with Children and Young People Portfolio Councillor Harker

Councillor Mills, Cabinet Member with Adults Portfolio

Councillor K Nicholson, Cabinet Member with Health and Housing Portfolio

Councillor Mrs H Scott, Leader of the Council

James Stroyan, Director of Children and Adults Services

Penny Spring, Director of Public Health

Dr Posmyk Boleslaw, Chair, NHS Tees Valley Clinical Commissioning Group David Gallagher, Chief Officer, NHS Tees Valley Clinical Commissioning Group Michael Houghton, Director of Commissioning Strategy and Delivery, NHS Tees Valley Clinical Commissioning Group

Brent Kilmurray, Chief Executive, Tees, Esk and Wear Valley NHS Foundation Trust Sue Jacques, Chief Executive, County Durham and Darlington Foundation Trust Mike Forster, Operational Director, Children's and County Wide Community Care Directorate, Harrogate and District NHS Foundation Trust

Alison Slater, Director of Nursing, NHS England, Area Team

Steve White, Interim Police, Crime and Victim's Commissioner, Police, Crime and Victims' Commissioner, Durham Police Area

Sam Hirst, Primary Schools Representative

Nick Lindsay, Head Teacher Longfield Academy, Secondary Schools Representative Carole Todd, Darlington Post Sixteen Representative, Darlington Post Sixteen Representative

Rita Lawson, Chairman, VCS Strategic Implementation Group Dr Amanda Riley, Chief Executive Officer, Primary Healthcare Darlington Michelle Thompson, Chief Executive Officer, Healthwatch Darlington Rachel Morris, Head of Department for Nursing and Midwifery, School of Health and Life Sciences, Teesside University

Since the last meeting of the Board, the following items have been sent to the Chair/Members of the Board:-

 Stakeholder briefing - Staff and patients informing Community Equipment Service review, December 2020 If you need this information in a different language or format or you have any other queries on this agenda please contact Hannah Fay, Democratic Officer, Resources Group, during normal office hours 8.30 a.m. to 4.45 p.m. Mondays to Thursdays and 8.30 a.m. to 4.15 p.m. Fridays e-mail hannah.fay@darlington.gov.uk or telephone 01325 405801



Agenda Item 4(a)

HEALTH AND WELLBEING BOARD

Thursday, 3 September 2020

PRESENT – Councillor K Nicholson (Cabinet Member with Health and Housing Portfolio) (Chair), Councillor Clarke (Cabinet Member with Children and Young People Portfolio), Councillor Harker, Suzanne Joyner (Director of Children and Adults Services), Miriam Davidson (Director of Public Health), Michael Houghton (Director of Commissioning Strategy and Delivery) (NHS Tees Valley Clinical Commissioning Group), Jennifer Illingworth (Director of Operations, Durham and Darlington) (Tees, Esk and Wear Valley NHS Foundation Trust), Emma Anderson (Harrogate and District NHS Foundation Trust), Sharon Caddell (Interim Chief Executive & Monitoring Officer) (Office of the Durham Police, Crime and Victims' Commissioner), Sue Jacques (Chief Executive) (County Durham and Darlington Foundation Trust), Dr Amanda Riley (Chief Executive Officer) (Primary Healthcare Darlington) and Carole Todd (Darlington Post Sixteen Representative)

ALSO IN ATTENDANCE – Hannah Fay (Democratic Officer)

APOLOGIES – Councillor Mills (Cabinet Member with Adults Portfolio), Councillor Mrs H Scott (Leader of the Council), Brent Kilmurray (Chief Executive) (Tees, Esk and Wear Valley NHS Foundation Trust), Richard Chillery (Operational Director of Children's and Countywide Care Directorate) (Harrogate and District NHS Foundation Trust), Sam Hirst (Primary Schools Representative), Rita Lawson (Chairman) (VCS Strategic Implementation Group), Michelle Thompson (Chief Executive Officer) (Healthwatch Darlington) and Stephen Cummings (Dean of School of Health and Life Sciences) (Teesside University)

HWBB1 DECLARATIONS OF INTEREST.

There were no declarations of interest reported at the meeting.

HWBB2 TO HEAR RELEVANT REPRESENTATION (FROM MEMBERS AND THE GENERAL PUBLIC) ON ITEMS ON THIS HEALTH AND WELLBEING BOARD AGENDA.

No representations were made by Members or members of the public in attendance at the meeting.

HWBB3 TO APPROVE THE MINUTES OF THE MEETING OF THIS BOARD HELD ON 28 NOVEMBER 2019

Submitted – The Minutes (previously circulated) of the meeting of this Health and Wellbeing Board held on 28 November 2019.

RESOLVED – That the minutes be approved as a correct record.

REASON – They represent an accurate record of the meeting.

HWBB4 RESPONSE TO COVID-19 & LOCAL OUTBREAK CONTROL PLAN

The Director of Public Health gave a presentation to update Board on the response to COVID-19 and on the Local Outbreak Control Plan.

Members were provided with details of the four stages of the response of the Council to the COVID-19 pandemic; the Local Outbreak Plan, which sets out measures to prevent and manage local outbreaks; and the seven themes of the plan were outlined. In relation to Theme 7: Governance, Members were advised that the Health and Wellbeing Board was acting as the COVID-19 Engagement Board.

Details were provided of the communication and engagement in place to prevent local outbreaks; and an example was provided of the Councils corporate branding that was due to be published.

Discussion ensued on partnership working; the importance of clear, consistent messaging to maintain the current position; and the need to focus on the wider health determinants.

RESOLVED – That the thanks of the Board be conveyed to the Director of Public Health for her informative presentation.

REASON – To convey the views of the Board

HWBB5 2020-21 TEES VALLEY WINTER PLAN

The Director of Strategy and Commissioning, NHS Tees Valley Clinical Commissioning Group gave a presentation to update Board on the 2020-21 Tees Valley Winter Plan.

Members were advised that the Winter Plan was part of an annual planning process in collaboration with the South Integrated Care Partnership (ICP) led by the Tees Valley Local AE Delivery Board; there were 4 ICP Winter Plans, those being North, South, Central and North Cumbria which all fed into an overarching Integrated Strategic Partnership Regional Winter Plan; the winter plan timetable was outlined; and the actions to progress the winter plan were summarised.

Reference was made to the NHS Phase III letter which set out the third phase of the NHS response to COVID-19 and came into effect from 1 August 2020; nine themes with 79 elements were in place to deliver the key NHS priorities; and details were provided of the elements of the 'Prepare for Winter' theme, which would be captured within the ICP Winter Plan.

Discussion ensued in respect of the implications of population behaviour on NHS services during the winter period.

RESOLVED – That the thanks of the Board be conveyed to the Director of Strategy and Commissioning, for his informative presentation.

REASON – To convey the views of the Board.

HWBB6 NHS TEES VALLEY CCG FLU VACCINATION UPDATE

The Director, NHS Tees Valley Clinical Commissioning Group submitted a briefing note (previously circulated) updating the Board on the Tees Valley Clinical Commissioning Group Flu Vaccination programme.

RESOLVED – That the update be noted.

REASON – To provide Board with an update on the Tees Valley Clinical Commissioning Group Flu Vaccination programme.



HEALTH AND WELLBEING BOARD

Thursday, 17 December 2020

PRESENT – Councillor K Nicholson (Cabinet Member with Health and Housing Portfolio) (Chair) Councillor Clarke (Cabinet Member with Children and Young People Portfolio), Councillor Harker, Councillor Mrs H Scott (Leader of the Council), James Stroyan (Acting Director of Children and Adults Services), Penny Spring (Director of Public Health), Richard Chillery (Operational Director of Children's and Countywide Care Directorate) (Harrogate and District NHS Foundation Trust), Sam Hirst (Primary Schools Representative), Nick Lindsay (Head Teacher Longfield Academy) (Secondary Schools Representative), Dr Amanda Riley (Chief Executive Officer) (Primary Healthcare Darlington), Michelle Thompson (Chief Executive Officer) (Healthwatch Darlington) and Rachel Morris (Head of Department for Nursing and Midwifery, School of Health and Life Sciences) (Teesside University)

ALSO IN ATTENDANCE – Nichola Kenny (Director of Performance) (County Durham and Darlington NHS Foundation Trust), Jo Murray (Right Care Right Place Delivery Lead (Durham and Darlington)) (Tees, Esk and Wear Valley NHS Foundation Trust), Ken Ross (Public Health Principal) (Public Health), Christine Shields (Assistant Director Commissioning, Performance and Transformation) and Hannah Fay (Democratic Officer)

APOLOGIES – Councillor Mills (Cabinet Member with Adults Portfolio), Brent Kilmurray (Chief Executive) (Tees, Esk and Wear Valley NHS Foundation Trust), Sue Jacques (Chief Executive) (County Durham and Darlington Foundation Trust), Steve White (Interim Police, Crime and Victim's Commissioner) (Police, Crime and Victims' Commissioner, Durham Police Area), Carole Todd (Darlington Post Sixteen Representative) (Darlington Post Sixteen Representative), Rita Lawson (Chairman) (VCS Strategic Implementation Group) and Jennifer Illingworth (Director of Operations, Durham and Darlington) (Tees, Esk and Wear Valley NHS Foundation Trust)

HWBB7 DECLARATIONS OF INTEREST.

Michelle Thompson, Healthwatch Darlington declared an interest in Minutes HWBB10 and HWBB11 below. There were no other declarations of interest reported at the meeting.

HWBB8 TO HEAR RELEVANT REPRESENTATION (FROM MEMBERS AND THE GENERAL PUBLIC) ON ITEMS ON THIS HEALTH AND WELLBEING BOARD AGENDA.

No representations were made by Members or members of the public in attendance at the meeting.

HWBB9 TO APPROVE THE MINUTES OF THE MEETING OF THIS BOARD HELD ON 3 SEPTEMBER 2020

Submitted – The Minutes (previously circulated) of the meeting of this Health and Well Being Board held on 3 September 2020.

It was noted that the meeting was inquorate.

RESOLVED – That the Minutes of the meeting of this Health and Wellbeing Board held on 3 September 2020 be brought to the next meeting of the Health and Wellbeing Board.

REASON – To enable the Minutes to be agreed.

HWBB10 COVID-19 IN DARLINGTON

The Director of Public Health and Public Health Principal gave a presentation updating Members on Covid-19 in Darlington and in doing so reinforced the campaign in relation to Hands, Face, Space.

Details were provided of the five measures used to assess the Tier levels; case detection rates in all age groups; case detection rates in over 60's; rate of cases falling or rising; positivity rate; and pressure on the NHS; that Darlington remained in Tier 3 following the announcement by Government.

In relation to case detection rates, it was reported that cases peaked in the second wave on 15 November with 361 cases per 100k and that the current rate was 197 cases per 100k; and that whilst the rate was still in decline, it was slowing. The 80-89 and 90+ age groups had seen an increase in the number of cases in the last fourteen days, and that this increase was largely attributed to outbreak in care homes. The case detection rates in the over 60's was trending downwards; and the positivity rate in Darlington was currently 9.4 per cent which was higher than the North East and England

In relation to pressure on the NHS, it was reported that the rate of admissions was showing a slight increase; and that bed occupancy and ICU occupancy had peaked in November and was starting to decline.

Members were advised that case rates across Darlington and the Tees Valley had decreased between 1 and 8 December 2020; there was an active outbreak in a care home in Whinfield; and that a multi-disciplinary outbreak control team was in place to monitor outbreaks in Darlington. Members also noted that Care Homes had reported 36 outbreaks since March 2020; and household transmission was the greatest source of positive cases in Darlington.

Following the announcement that the Government had placed Darlington in Tier 3, details were provided on the government guidance in relation to this Tier; Darlington would remain in Tier 3 for at least two weeks until the next review. Reference was also made to the new government guidance regarding the 'Christmas bubble'; the community lateral flow testing, which was underway in Darlington; and the Covid-19 vaccination programme was outlined.

Reference was made to the work of the Public Health team in supporting education settings in Darlington throughout the pandemic; and the work of officers in setting up the community testing site.

Discussion ensued on the vaccination programme; the Chief Executive Officer, Primary Care Network advised Members that the vaccination would be rolled out after Christmas and that the over 80's would be the first to receive the vaccine; GP's would be making contact with the relevant people when the vaccine was available; NHS staff would receive the vaccine once all Darlington residents over the age of 80 had received it, of which there were 5000 residents; and that a robust process was in place to provide the vaccine to care homes residents once national approval had been given.

RESOLVED – (a) That the thanks of the Board be conveyed to the Director of Public Health and Public Health Principal, for their informative presentation.

(b) That the thanks of the Board be conveyed to the Public Health team for their work during the pandemic.

REASON – To convey the views of the Board.

HWBB11 SYSTEM WINTER PLAN SUMMARY 2020/21

The Director of Performance, County Durham and Darlington NHS Foundation Trust submitted a report (previously circulated) on behalf of County Durham and Darlington LADB, updating Members on the System's Winter Plan 2020/21.

The submitted report stated that members of County Durham and Darlington LABD had been compiling the System Winter Plan 2020/21 for the last few months; that the plan was based on each organisations recovery and reset plans following the first wave of COVID-19; contains a combination of mitigations; and that work was ongoing to develop further mitigations and mutual aid responses across the ICP and ICS footprints, working with NHS England and the North East Commissioning Support Unit.

The report outlined the key objectives of the winter plan; reference was made to the initiatives in place to manage and mitigate anticipated system pressure which included optimising capacity, optimising the uptake of flu vaccination, task and finish group to roll out the latest discharge practice guidance; and support packages for the health and wellbeing of staff and members of the public.

Details were provided of the key risks; the plan aimed to mitigate these risks should they materialise at unprecedented levels; and the escalation and regional oversight processes in place were outlined.

Discussion ensued on the process of discharging COVID patients from the hospital.

RESOLVED – (a) That the plan be received.

- (b) That the increased levels of risk in relation to the winter period, given the combination of winter pressures and COVID, be noted.
- (c) That the ongoing work to agree mutual aid responses across the North East and Cumbria Integrated Care System (ICS), and that the rapid response of LADB partners to the release of new guidance, be noted.

REASON – To assure the Board that a System Winter Plan has been put in place to protect services over the winter period and that there is robust daily oversight.



Health and Wellbeing Board COVID-19 in Darlington 18th March 2021

Penny Spring
Director of Public Health



7

Test 1

The vaccine deployment programme continues successfully.

The Four Tests



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.

Only when the Government is sure that it is safe to move from one step to the next will the final decision be made.

Decisions will be based on four tests.

Test 4



Our assessment of the risks is not fundamentally changed by new Variants of Concern.

Roadmap: Key Points

- From 8th March, there is a plan for restrictions start to lift.
- To ensure a safe exit from lockdown restrictions will be eased in four steps with restrictions being lifted across the whole of England at the same time.
- These steps will be informed by the data to avoid the risk a surge in infections, hospitalisations and deaths.
- There will be a minimum of five weeks between each step: four weeks for the data to reflect changes and for these to be analysed; followed by one week's advance notice of further easements.



Wash Hands

Keep washing your hands regularly.



Cover Face

Wear a face covering over your nose and mouth in enclosed spaces.



Make Space

Stay at least one metre away from people not in your household.

Stay at Home Campaign

Throughout all stages in the Road Map a national campaign will continue to reinforce key messages for the public to maintain vigilance. This campaign will cover topics such as:

- Safe behaviours
- Ventilation
- Wearing a face covering where appropriate

STAY HOME > PROTECT THE NHS > SAVE LIVES

Stay at Home Campaign





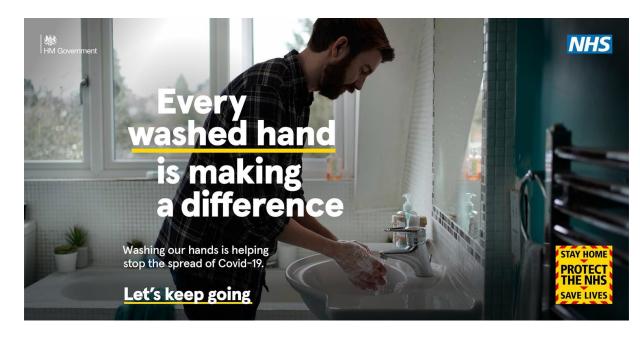


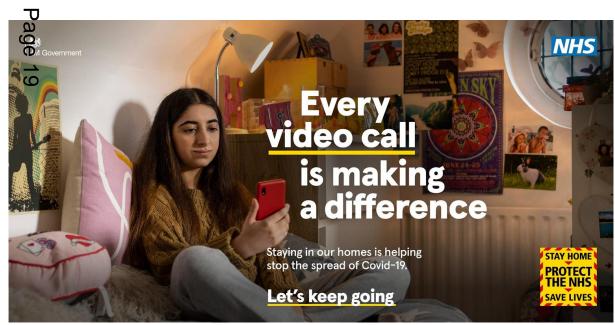




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Darlington Situation Report

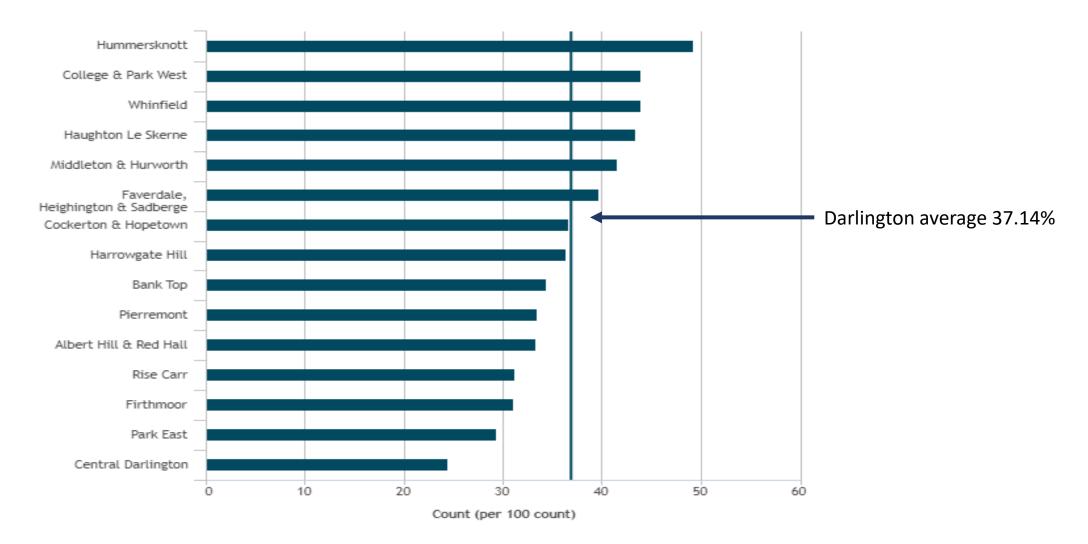
Test 1: The vaccine deployment programme continues successfully

In Darlington (as of 11th March)

- 34,489 vaccines have been given.
- 94% of all those aged 70 years have received their first dose of vaccine
- 9 out of 10 residents in care homes have received their first dose of vaccine.
- 37.14 per cent of all adults (16+years) have had their first dose of vaccine.
- Uptake is varies between areas from 24.48% in Darlington Central to 49.21% in Hummersknott
- Second doses of vaccines to start this month.
- Vaccination sites include:-
 - Feethams House manned by local GPs
 - Mass Vaccination Centre Darlington Arena
 - Cockerton Pharmacy West Auckland Road

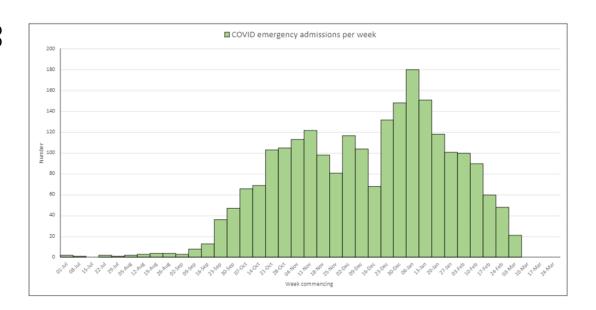
Percentage Of Darlington Residents Who Have Received a COVID 19 Vaccine by Medium Super Output Area

(11th March 2021)

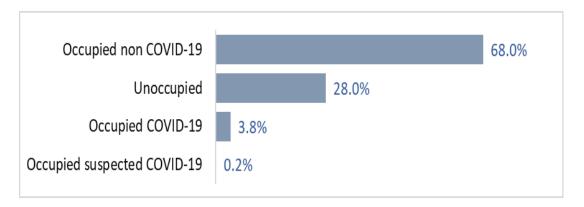


Test 2: Evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated

There have been 21 COVID emergency admissions week ending 9 March 2021



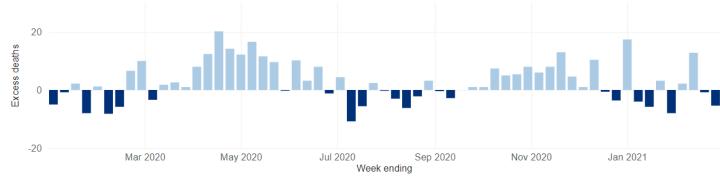
Hospital beds occupied by COVID-19, suspected COVID-19, non COVID-19 and unoccupied



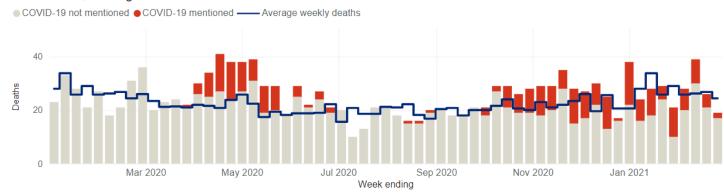
Test 3: Infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS.

Case Detections Rate All Ages



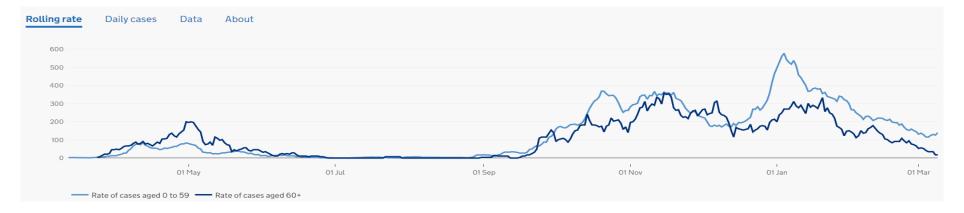


All deaths in 2020 by week, with proportion where COVID-19 is mentioned and weekly average occurrence 2015 to 2019; Darlington

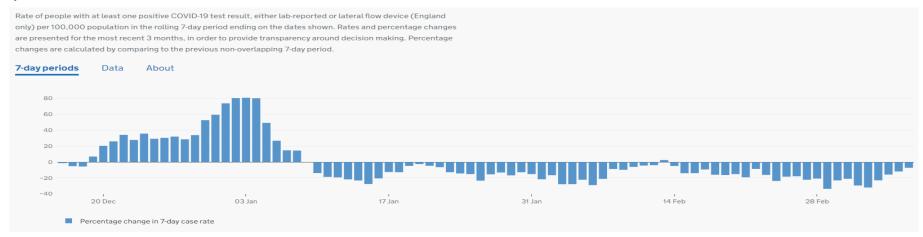


Case Detection Rate Over 60's

The rates in those over 60 in Darlington have increased from the end of December but at a much slower rate than those under 60 and remain lower than the under 60 rate overall



The percentage change in the 7-day case rate is showing a slowing in the rate of new positive case



Test 4: Our assessment of the risks is not fundamentally changed by new Variants of Concern.

Percentage of new positive lab samples with the new variant (S gene target failure) present.

UTLA LTLA hierarchy -	UTLA LTLA hierarchy -	Cases with
UTLA	Area name	SGTF <u></u> ▼
PHE Centre	North East	98.7%
Darlington	Darlington	98.2%
Hartlepool	Hartlepool	97.5%
Middlesbrough	Middlesbrough	99.4%
Redcar and Cleveland	Redcar and Cleveland	100.0%
Stockton-on-Tees	Stockton-on-Tees	98.3%

Local Testing

Testing: Cumulative Totals for Darlington

PCR Tests (Pillar 1&2)

- Total individuals tested= 53,510
- People tested +ve = 7,183
- People tested –ve=46,327

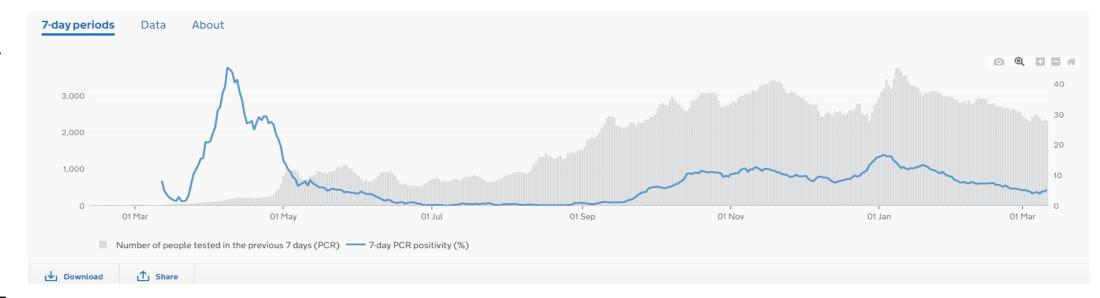
Lateral Flow Testing

- Community Testing (from Dec 14th)
 - Total Tests= 24,553
 - People tested +ve = 357
 - People tested -ve = 24,196
- School Based Testing (staff & Pupils)
 - Total tests = 26,288
 - Total tested +ve = 19
 - Total tested -ve = 26,269

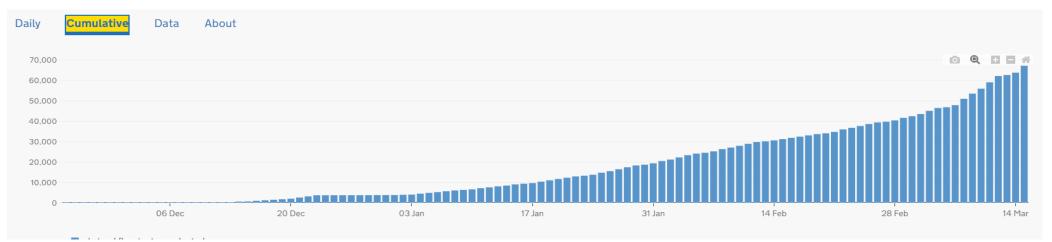
Testing: PCR and Lateral Flow Tests

PCR

'age 28



LFT



Testing: Developments

The DHSC are currently planning an expansion of opportunities for testing in the coming weeks including:-

- Community Collect programme to allow tests to be collected and undertake their own tests at home
- Institutional Testing targeting larger employers (>50 employees) to enable them to undertake testing in their own workplace
- Schools Home Testing parents provided with tests kits to take home and undertake tests at home prior to attending school

COVID-19 Recovery

Next Steps

Developing COVID-19 Recovery Frameworks in the North East

- COVID-19 has presented a unique opportunity to further incorporate health, wellbeing, inequalities and the wider determinants of health within local strategic approaches, such as a recovery framework.
- A recovery framework also offers the opportunity to align this public health approach with other agendas such as economic recovery and climate change.
- In support of this, published recovery plans have been analysed by PHE to identify potential public health practice.

Vulnerable Groups

A health inequalities impact assessment has been carried out by partners across the North East. It identifies vulnerable groups based on a variety of factors, namely their vulnerability to poor outcomes from COVID-19.

Existing frameworks make few references to these vulnerable groups, perhaps due to their framing being in the context of economic recovery.

However, an economic-focused recovery plan may benefit from considering these groups in order to address inequalities and promote equitable economic growth. These vulnerable groups are:-

- People living in care homes
- Older people
- People with underlying health conditions
- People shielding
- BAME communities
- People living with substance misuse
- People working in high risk occupations
- People who are sleeping rough
- Sex workers
- People living in multi-occupancy households/overcrowded households

- People whose first language is not English
- Gypsy, roma traveller groups
- Asylum seeker/refugee groups
- Vulnerable children and young people
- People who are victims of domestic abuse
- Low income families
- People who are unemployed and/or living in economic insecurity
- People living with disabilities
- People living with sensory impairments
- People living with learning disability



Summary

Best start in life	Consider: Investment in childcare settings Digital inclusion Early years development and school readiness	Core principles
Maximising capabilities	Consider:	Consideration of key vulnerable groups listed in the North East Health Inequalities Impact
Creating fair employment	Consider Inequalities in work and pay The role of anchor institutions Employer standards Assessment Assessment	
Healthy standard of living	Consider The impact of the built environment on health The root causes of poverty Proportionate universalism	Proportionate universalism
Sustainable and healthy places Consider Align health and climate change Affordable and sustainable housing Upscaling active travel		Community Asset-Based Approaches
Ill-health prevention	Consider Health in all policies is everyone's responsibility The capacity of the public health system Strategies with named accountability for inequalities	



Any questions?



HEALTH AND WELLBEING BOARD 18 MARCH 2021

DARLINGTON CARERS' ACTION PLAN 2020 - 22

SUMMARY REPORT

Purpose of the Report

1. To provide information about carers in Darlington and to request endorsement of the Darlington Carers' Action Plan 2020 - 22.

Summary

- 2. The 2011 census identifies 11,048 carers in Darlington, 2758 (25%) of whom are providing care for 50 or more hours per week. 197 of these were aged 0-15 and the largest group of carers (37%) is those aged 50-64.
- 3. A national Carers Action Plan for 2018-20 was published by central government in June 2018. This Action Plan outlined the cross-government programme of work to support carers in England and built on the previous National Carers Strategy. It retained the strategic vision for recognising, valuing and supporting carers from 2008, which has been the vision of successive governments.
- 4. Despite a stated intention by government to publish plans for carers post 2020, nothing has been published as yet. In addition, the Covid 19 pandemic has resulted in both national and local challenges, including a further raising of the profile of carers and their needs. Darlington Carers' Strategy Steering Group (CSSG) has therefore developed a Darlington Carers' Action Plan for 2020-22. This is attached as Appendix 1.

Recommendation

- It is recommended that:-
 - (a) Members endorse Darlington Carers' Action Plan 2020 22
 - (b) Members act as champions for carers in Darlington and consider how to support progress of the carers' agenda in Darlington

Reasons

- 6. The recommendations are supported by the following reasons:-
 - (a) To enable Darlington to continue to support carers and to be responsive to the challenges carers face as a result of the pandemic.

James Stroyan Director of Children and Adults Services

Background Papers

Darlington Carers' Action Plan 2020-22 National Carers Action Plan 2018-20 Lisa Holdsworth Ext 5861

S17 Crime and Disorder	There are no implications arising from this report.
Health and Well Being	Carers can experience poor health as a result of their caring responsibilities. Identifying and supporting carers contributes to supporting their health and wellbeing and the health and wellbeing of the people for whom they care.
Carbon Impact and Climate Change	There are no implications arising from this report.
Diversity	Caring affects all groups of people in Darlington
Wards Affected	All
Groups Affected	Carers are the group primarily affected
Budget and Policy Framework	N/A
Key Decision	N/A
Urgent Decision	N/A
One Darlington: Perfectly	Supporting carers contributes to supporting the
Placed	'One Darlington' Healthy Darlington theme.
Efficiency	Research published by Carers UK in 2015 indicates that unpaid carers in Darlington provide support to the value of £224 million.
Impact on Looked After	This report has no impact on Looked After
Children and Care Leavers	Children or Care Leavers.

MAIN REPORT

Information and Analysis

- 7. The 2001 census identified 10,064 carers in Darlington, 2330 (23%) of whom were providing care for 50 or more hours per week.
- 8. By 2011, this number had increased to 11,048 of whom 2,758 (25%) were providing care for 50 or more hours per week. The largest group of carers (37%) are those aged 50-64.

Age	Number
0-15	197
16-24	543
25-34	915
35 -49	2807
50-64	4124
65+	2462

- Darlington's Carers' Action Plan for 2020-22 has been developed by the CSSG as a local response to the needs of carers. It continues to be based on the themes identified in the national Carers Action Plan 2018-20, which remain relevant.
 - (a) Services and systems that work for carers
 - (b) Employment and financial wellbeing
 - (c) Supporting young carers
 - (d) Recognising and supporting carers in the wider community and society
 - (e) Building research and evidence to improve outcomes for carers
- 10. The aim is to ensure the continuation of responsive support to carers in particularly challenging times as a result of the Covid 19 pandemic, as well as to look ahead to
 - the broader needs of carers as the effects of the pandemic ease.
- 11. It should be noted that the pandemic, particularly in its early stages, resulted in a decrease in referrals to both the Carers Support and Young Carers Services, although there are early indications that these numbers are starting to increase again.
- 12. However, both services were adaptable and rapidly developed a remote service offer, which enabled them to continue to support carers throughout. This included the offer of virtual carers groups and events for both adult and young carers: well
 - received courtesy calls for carers aged 70+; setting up a chat facility on the Carers
 - Support Service website; use of facebook pages by both the Carers Support and Young Carers Services.

- 13. The Carers Support Service also sent out hard copy newsletters to those individuals for whom they did not have an email address, in order to ensure that carers who were not online also received information and were not excluded.
- 14. In addition to the continuation of day to day service delivery, funding has also been awarded for a new Carers in Employment Co-ordinator which commenced on 1st January 2021. This post will enable the progression of the agenda of support for carers who combine paid work with their unpaid caring role.

Outcome of Consultation

15. Darlington's Carers' Strategy and Action Plan is developed and monitored by the CSSG taking into account the views of carer members of the group and the wider views of carers as relayed by the Carers Support providers.

This document was classified as: OFFICIAL



Darlington Carers' Action Plan 2020-22

Background

A national Carers Action Plan for 2018-20 was published by central government in June 2018. This Action Plan outlined the cross-government programme of work to support carers in England and built on the previous National Carers Strategy. It retained the strategic vision for recognising, valuing and supporting carers from 2008, which has been the vision of successive governments. It also set out the Government's commitment to supporting carers through 64 actions across five priorities emerging from the carers' Call for Evidence. The actions focused on delivery and tangible progress that could be made in the near future, and gave visibility to the wide range of work that was planned or already underway across government to support carers, their families and those they care for.

Despite a stated intention by government to publish plans for carers post 2020, no plans have been published as yet. In addition, the Covid 19 pandemic has resulted in a number of significant challenges to the nation, including a further raising of the profile of carers and their needs.

Darlington's Carers' Action Plan for 2020-22 has been developed by the Darlington Carers' Strategy Steering Group as a local response to the needs of carers and continues to be based on themes identified in the national Carers Action Plan 2018-20, which remain relevant.

- Services and systems that work for carers
- Employment and financial wellbeing
- Supporting young carers
- Recognising and supporting carers in the wider community and society
- Building research and evidence to improve outcomes for carers

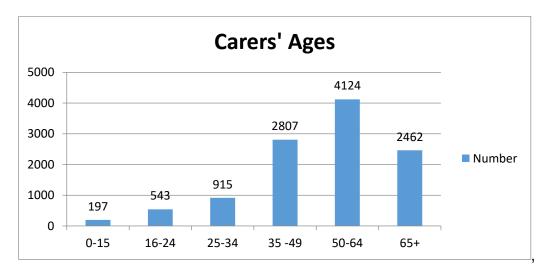
Our aim is to ensure the continuation of responsive support to carers in particularly challenging times.

Demographics

Number of carers in Darlington.

The 2011 census identified a total of 11,004 carers in Darlington, 8389 (76.23%) of whom were of working age.

The age breakdown is shown in the graph below.



Information from Carers UK indicates that 5712 of these were identified as being in employment, either as employees or as self employed.

3168 of those identified as employees were full time and 1729 part time. In addition, 500 were identified as being self employed full time and 228 part time.

2677 were not employed.

Recent research by Carers UK indicates that 1:7 workers are juggling work and care which increases to 1:5 in the NHS.

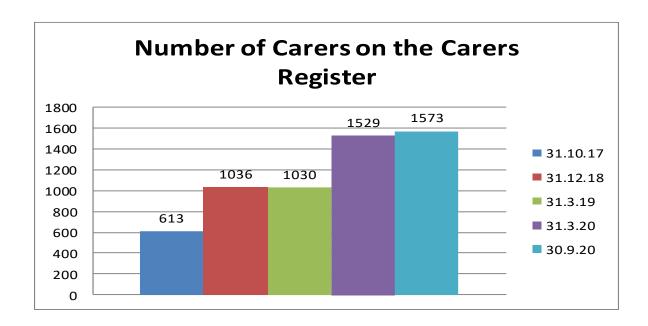
Carers Support Services in Darlington

There are 2 commissioned Carers Support Services in Darlington, one for young carers up to the age of 25 and one for adult carers, including parents of disabled children.

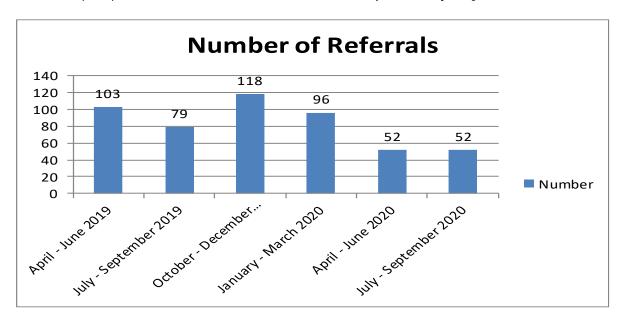
There is open access to both services.

Darlington Carers Support (DCS)

As at 30th September 2020, there were 1573 on the Carers Register held by Darlington Carers Support, an increase of 543 from the number on the register as at 31st March 2019.

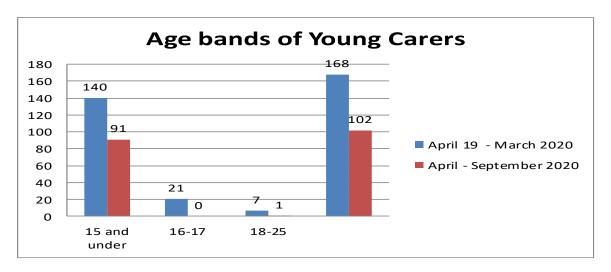


The Service received a total of 396 referrals from 1st April 2019 – 31st March 2020, plus 104 referrals from 1st April – 30th September 2020. It should be noted that referrals from 1st April 2020 have been negatively impacted by the Covid 19 pandemic and in particular by the first lockdown [just over half compared to the number of referrals (182) received in the same timeframe the previous year]

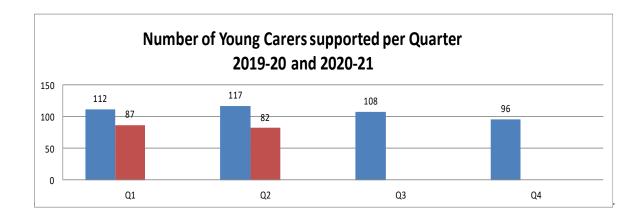


Darlington Young Carers (DYC)

A total of 168 young carers have been supported from 1st April 2019 – 31st March 2020 and 102 from 1st April – 30th September 2020.



The number of young carers supported in the first two quarters of 2020-21 has decreased by approximately a quarter due to the Covid 19 pandemic.



Members of the Carers Strategy Steering Group (as at 30th November 2020). Co – Chairs – Jenni Wood (DCS) and Manager DYC (post currently vacant)

Rosemary Berks	DAD
Kelly Carswell	Darlington Mind
Gill Cree	Alzheimer's Society
Alison Donoghue	Darlington Carers Support
Lisa Holdsworth	DBC Commissioning
Helen Hunter	Age UK North Yorkshire and Darlington
Diane Lax	Healthwatch
Linda O'Neill	Darlington Young Carers
Deborah Robinson	St Teresa's Hospice
Josh Slack	DBC Commissioning

A number of other people also receive minutes but do not regularly attend meetings.

Darlington Carers Strategy Group Carers Action Plan 2020 - 2022

Primary Theme	National Strategy Actions	Progress so far in Darlington	Action Points- to be explored and tasked to members of the group	By whom	Relevant Dates
Services and	1.1 Carer Friendly GP	1.1 Darlington Carer Support (DCS) and Young	1.1a. Attend 6 weekly West	DCS and DYC	6 weekly
systems that work	Surgeries	Carers (DYC) have identified link workers in all GP	End Locality Partnership		
for carers		Surgeries, deliver regular presentations and build	(WELP) Practice Manager		
		on the GP Carers Registers that are held by all	meetings.		
		surgeries. There are also notice boards/a carers			
		corner in all surgeries. All actions reviewed in light			
		of the Covid-19 pandemic. Actions ongoing but	1.1b. Attend the Annual Time	DCS,DYC	Annually
		virtually where required.	Out session and include the		
			Employers for Carers (EFC)		
			information.		
			1.1c. DAD, DYC, DCS to keep	DAD, DYC,DCS	Quarterly
			noticeboards up to date in		
			surgeries.		
			1.1d. All services to update		Annually
			Living Well Directory at least	All Strategy Group	
			annually	Members	
			1.1e DCS attending regular	DCS, DYC	Ongoing
			meeting with Blackett's		
			Surgery and in close contact		
			with other surgeries.		
			1.1f attend new carer leads	DCC/DVC	N.A. math.liv
				DCS/DYC	Monthly
			meeting monthly - Suspended		
			at present	DCC	Complete
			1.1g. DCS met with Dr Ethna	DCS	Complete
			Parker and planning regular		
			engagement with SPLW's		
			team.		

and	d bereavement pport	1.2a. St Teresa's Hospice offers support to family/carers of anyone with a life limiting illness, through end of life care and following bereavement. This includes the provision of 1:1 support, support groups, complementary therapies and specialist support for children and young people.	1.2a Currently all support is virtual. Referrals for social work and counselling are being delivered by phone and Zoom. A carers group is being held online. Complementary therapies are still being delivered but very limited. Support to young people under 12 only delivered via other trusted professionals ie school. Over 12s directly supported but only limited support.	St Teresa's	Until further notice
		1.2b Cruse currently deliver weekly drop in sessions	1.2b Cruse secured funding for Covid support but Healthwatch have feedback that some people don't want to engage through Zoom	Cruse	Ongoing during Covid
		1.2c. DCS offer 6 months support and counselling services1.2d DAD delivering end of life care training to	On hold due to Covid. DAD to update.	DCS	Ongoing
		direct payment employees and personal assistants	l '	DAD	Dec-20
		1.2e Progress with developing links with Darlington Memorial Hospital - Jason Cram and Jenny Steele 1.2f Mind delivering bereavement support via	1.2e Improvement of links and awareness within the hospital		Mar-21 Ongoing
	3 Armed Forces ecialist support	phone line. 1.3a. Age UK North Yorkshire and Darlington (Age UK NYD) have short term covid funding until christmas 2020 and are looking for longer term funding.	1.3a. Two bids submitted for befriending and benefit support awaiting outcome. Secured funding for rememberance day free meals to veterans.	Age UK Veterans Project	Update March 2021
			1.3b. DCS link with Triangle of Care and specialist provision at West Park.	DCS	Ongoing

		exercise of wider local and	Helen Hunter, Age UK to gather this info and feedback	December 2020
1.4. 2020 Dementia Challenge	1.4a. Dementia Friendly Darlington continues to work to ensure that Darlington becomes increasingly dementia friendly. 1.4b. County Durham and Darlington NHS Foundation Trust (CDDFT) are working towards improving the environment for people with dementia and carers, staff training, audit and research to improve services.	1.4a. A Dementia Friendly Communities Coordinator is in post until 31.3.22. 1.4b. CDDFT is part of Dementia Friendly Darlington	Members of Dementia Friendly Darlington Janet Mortimer currently seconded back to wards due to Covid	Mar-22 Suspended
		1.4c Recommission the Dementia Advisor Service from 1.4.21.	DBC	Mar-21
1.5. Carers training and learning opportunities	1.5a. A range of training and learning opportunities is already in place, including training provided by DAD; DCS training i.e. first aid, dementia, "Stress less and relax"; DYC healthy eating training; Alzheimer's CRISP training and Dementia Friends information sessions; Mind self-help course		Strategy Group	Quarterly
		1.5b Alison Donoghue to collate partners key contacts for Carer Training and circulate to Strategy Group	Alison Donoghue DCS	Mar-21
		1.5c. DAD to continue to circulate info on Skills 4 Care funding and Community Foundation funded courses to Carers.	On hold due to Covid	Quarterly
1.6. Improve Social Work practice	1.6a. Awareness raising about the support available to carers has been delivered to all teams by Lisa Holdsworth (DBC) 1.6b. DYC and DCS deliver regular Carer Awareness sessions to DBC staff. DCS agreed with Paige Thomason (Principal Social Worker) to be part of student social worker induction programme, to include work shadowing. Also feeding into Social Care team meetings.	1.6a. Plans are in place to identify a number of Carers Champions in Operational Services.1.6b. Continue to deliver joint	DCS DBC	Mar-21

		online training information sessions to staff at DBC for Carers Rights Day		
	1.6d Improve Carer Awareness of TEWV staff	1.6c Alison to deliver Carer awareness training to West Park staff via Teams.		By Dec 2020
1.7.Continue to enable carers to access Carer Breaks	 1.7a. Carers are able to access carer breaks via a number of routes, including: BCF carer breaks funding (via DAD, Darlington Mind, Age UK North Yorkshire & Darlington and St Teresa's Hospice); Personalised breaks via DCS, DYC as part of their carer support contracts Carer breaks via DBC Adult Social Care if eligible needs are identified following a care and support needs assessment of the person who needs care and support and a carer's assessment of their carer. 	to be allocated. Allocation of	DBC	Mar-21
	1.7b. All partners currently accessing external funding	1.7b. Strategy Group Partners to collate funding secured for breaks and feedback to DYC	DYC	Mar-21
	1.8a. Mind have opened services for younger clients. Continuing welfare calls and delivering activities and counselling over the telephone. Limited art and computers delivered face to face. Finding different ways to deliver activities to ensure they are Covid secure.	1.8a. Continuing to deliver during Covid where ever possible.	Mind	Mar-21
	1.8b. DCS attend Triangle of care meetings with TEWV to influence and develop Carer recognition with this	1.8b. TEWV Carers Conference rearranged for in May 2021	DCS	May-21
1.9. Consultations with Carers to find out if the services and systems work for them	1.9a. Healthwatch's role is to gather information to influence decision making eg Care Home research.	Digital exclusion project, national and local in partnership with NHS England and Healthwatch England. Extensive consultation taking place targeting individuals' experience of using NHS digitally during Covid.	Healthwatch	Mar-21

			Strategy Group to pull together any survey results during 2020 that reflect the Carers' feedback they have gathered and use this to influence external services and systems.	AII	Mar-21
			Mixed feedback received but concern for Carers exhausted by current situation.	MIND	Dec-20
		1.9c. DCS use feedback and consult to find solutions to problems with services. 1.9d. DYC consult on service provision twice a	DCS to survey Carers DYC use Service User	Alison Donoghue	Jan-21 Dec-20
		year. 1.9e Age UK preparing to open day services following feedback. 1.10e The Alzheimer's Society carried out a	Influence surveys for this.	DYC Age UK	Dec-20
		national survey on the impact on Covid19 on people affected by dementia including carers.			
	1.11 Provision of specialist support and information for carers		Recommission the Carers Support Service from 1.4.22	DBC	Mar-22
	1.12 Respond to any requirements identified in any future national Carers Strategies		When identified	Strategy Group members	Ongoing
2. Employment and financial wellbeing	2.1a. Employers for Carers (EfC) membership	organisations and SME employers across County Durham and Darlington	2.1a. Joint EfC membership with Durham County Council to continue for at least a further year. This will continue to support the delivery of support to carers employed by DBC and Durham County Council, health organisations and SME employers across County Durham and Darlington	Membership to be renewed until March 2021	Mar-21
		2.1b. DCS and DYC utilise the EfC resources as part of their current contract	2.1b. DCS and DYC to continue to promote the EfC resources until March 2021 and encourage all GP Practices to sign up to EFC.	DCS & DYC	Mar-21

	2.1c. A carers page is available on the DBC	2.1c To be reviewed and		
	intranet	updated annually.	Lisa Holdsworth	Jan-21
_	2.2a. DBC has awarded funding to DCS for a part- time employment Worker for 1 year in the first instance to focus on local employers. This funding may be extended for a further year.	2.2a. DCS to recruit to post. Planned start date is 1.1.21.	DCS	Jan-21
2.3 Job Centre partnership work	2.3a DYC work with the local Job Centres including attending local events for Carers and delivering ongoing training and advice to Job Centre Staff.	2.3a. DYC running online training for job centre staff.	DYC	Ongoing
	2.3b. DCS now has an in house Carer Passport for all staff. Other members of the Strategy Group have flexible work practices. DCS also working on Carer Passport for businesses and link with discount card.	2.3b DCS developing discount card and carer passport for businesses locally	DCS	Ongoing
2.4 Carers Rights Day and Carers Week.	2.4a Strategy group to look at an online event for Carers Rights Day	2.4a Partnership event cancelled due to Covid but DCS holding online question event for Carers.	DCS	Dec-20
2.5 Benefit and grant support	2.5a. DCS and DYC working with the Job Centre to support those Carers claiming Carer benefits. Attending Carer events to promote the services and register new Carers. Delivering training to Job Centre staff regularly and attending monthly drop in with work coaches. DAD support Job Centre with Access to Work issues.	2.5a. Suspended due to Covid	DCS and DYC	ongoing
	2.5b. CAB working with DCS on "Darlo Millions" project CAB/DCS considering bid to extend this work	2.5b. Strategy group members to signpost to CAB	Strategy Group members	Ongoing
	2.5c. Age UK offer benefit support and advice via phone and post at present.2.5d. DCS staff now trained on Turn 2 Us grant	2.5c. Age UK project 2.5d will continue	Age UK DCS	Ongoing
	tool	2.50 Will Colletinue	DC3	Ongoing
 3.1 Schools work- identification	3.1. Deliver training through School Charter to schools to help with early identification of young carers. 3 Amber, 4 red - March 2020 (this is happening through contacting schools and offering to deliver training on a virtual basis)	training and promote the School Charter. 4 additional	DYC	Dec-20

3.2 Awareness raising	3.2a. Deliver training to other relevant agencies to help identify young carers and young adult carers.	3.2a Deliver 8 training sessions annually plus general awareness raising within other	DYC	Ongoing
		presentations. Provide update training as required.		
		During the current COVID-19 pandemic, these are being delivered virtually.		
2.2 Local puthority	2.2. Attand identified level publication advantion	Do catablish link with Jacons	DVC	May 21
3.3 Local authority- Education department	3.3. Attend identified local authority education department events to raise profile of Young Carers across multiple education focused services	Re establish link with Joanna Conway- Safeguarding lead	DYC	May-21
3.4 Target seldom heard and isolated young carers	3.4a. Link with Mind Café Support Worker to engage young carers with emotional wellbeing needs	3.4a. Ongoing	DYC	Mar-21
	3.4b Attend two community focused young people's events with a diverse range of families	3.4b Attend two events per year	DYC	Mar-21
3.5 Target specific referral pathways including carers of family members with mental health and substance misuse issues	3.5. Attend Triangle of care meetings and deliver associated training. Attend meetings with new drug and alcohol service.	Ongoing - The Triangle of Care meetings are currently being held virtually, due to COVID-19. (Meetings with the new drug and alcohol service are planned for Jan/Feb 2021).	DYC	Mar-21
3.6 CAMHs referral pathway	3.6a. Darlington Mind receives referrals from a range of services, including from CAMHs but are not directly part of the CAMHs referral pathway. Weekend DCAFE – Self harm/young people with self-esteem issues Saturday/Sunday 11-2pm	Update required	Darlington Mind	Mar-21
3.7 Transitions from Young to Young Adult to Adult Carer	3.7a. Deliver drop in sessions within Darlington College and Queen Elizabeth Sixth Form College. During the COVID-19 restrictions, these are	3.7a. Disseminate reviewed DYC marketing and deliver a regular drop in at Darlington College and QE and one off events in other providers as necessary. Also continue with internal referral pathways. Helen to pass on a contact to	DYC	Dec-20

			3.7b. Implement the planned changes to the Young Carers Assessment process. The assessment will be undertaken by Humankind and, with consent, will be recorded on the Council IT system. 3.7c Work is ongoing to develop a Young Carers Transition Assessment process.	DBC, DYC DBC. Delayed due to the Covid-19 pandemic.	Dec-20 Mar-21
	3.8 Provision of specialist support and information for young carers		Recommission the Young Carers Service from 1.4.22	DBC	Mar-22
4 Recognising and supporting carers in the wider community and society	4.1 Carer friendly communities	4.1a. Discount card was relaunched in May 2020 by DCS	4.1a. DCS contacting local businessess to get involved with this.	DCS	Mar-21
Society		4.1b However, carers are still not always recognised or referred for support.	4.1b To improve referrals between the Strategy Group partners by sharing information with each other to encourage referrals.	DYC to coordinate	Mar-21
	4.2 Loneliness Agenda	4.2a. All members of the Strategy Group run projects, training, support groups and other events that work to prevent loneliness at present and intend to continue this work.	4.2a. Collate partners projects are reducing loneliness to encourage referrals.	Strategy Group members	Mar-21
		4.3b. DBC Living Well Directory aims to bring all the information together locally on what is available.	4.3b. All groups to encourage use of the Living Well Directory to promote the Local Offer and utilise all available groups and resources to the maximum effect.	Strategy Group members	Ongoing

	4.5. Recognising and supporting hard to reach carers	4.5a. Work is ongoing to raise awareness of the needs of carers of people with dementia in the BAME and LGBT communities. This will also assist with raising the profile of all groups of carers in these communities.	4.5a. Contract extended to 22.4.21. The Dementia Friendly Communities Coordinator remit also includes work with the BAME community. Awareness raising sessions will continue with the Sikh, West Indian and Bangladeshi communities.	Alzheimer's Society	Ongoing
		4.5b. DCS working with GP Practices to launch a support group for Bangladeshi community	4.5b. Alison is attending a monthly meeting with Blackett's Surgery and Cllr Sajna Ali to develop these links	DCS	Ongoing
research and evidence to improve outcomes for carers	5.1a Find out what local research has been gathered i.e. DOH, Local Authority. DWP, Universities, Regional research	5.1a. Need to gather examples of local, regional and national research and evidence any recent research by local voluntary sector organisations i.e. Healthwatch, CAB have students working with them who would be keen to take on some research.	5.1a. Strategy Group to work together to discuss this and plan a way forward. Strategy Group to foucs on this at the September meeting	Strategy Group	Sep-20
	5.1b. National Carers Survey	5.1b. Data available on the National Carers Survey which compares results regionally	5.1b. Group to look at this and decide if any action is needed	DCS	Oct-20
	5.1c. DCS Carers Survey	5.1c- Information on outcomes for Carers accessing DCS service could be used to inform strategy group plans	5.1c DCS Survey due in March 2019. Results to be shared with group	DCS to update	Dec-20
	5.1d Link to the regional survey being developed by the ADASS Carers Network	Delayed due to the Covid-19 pandemic	ADASS working on Carer survey due by end of January	DBC	Mar-21
	5.1e Review what worked and what didn't work during the Covid-19 pandemic and make relevant changes	5.1e. All partners to share their experience of delivering services during Covid	5.1e All partners to communicate plans for delivering services and how they have changed due to lessons learned in Covid.	Strategy Group	Mar-21

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