



15.2. The Board asked whether it would be possible for future reports to contain Key Performance Indicators (KPIs) on health inequalities and tangible examples of how services are developing.

15.3. Mark Stainton, Director of Adult Social Care, said that the ESHSCP has had five workstreams running within it for several years and each has its own work programme. Details of some of these could be included in future reports to help provide specific examples of what ESHSCP is doing. Jessica Britton, Managing Director of East Sussex Clinical Commissioning Group (CCG), added that the ESHSCP is addressing health inequalities by targeting its priorities against the local Joint Strategic Needs and Assets Assessment (JSNAA), to ensure local needs are addressed.

15.4. The Board asked for confirmation that the Sussex Health and Care Partnership (SHCP), once it becomes the statutory NHS Commissioning organisation, will commit to rolling out place-based commissioning in partnership with other organisations.

15.5. Jessica Britton said she welcomed the national direction of travel of developing services at a 'place' level, within the broader benefits of an Integrated Care System, as amongst other benefits, it will be a helpful way of addressing health inequalities locally.

15.6. The Board asked what the specific problems were facing East Sussex in addressing health inequalities.

15.7. Jessica Britton said that from the CCG's work in localities with Primary Care Networks (PCNs), voluntary organisations, and district and borough councils, it is clear there are different health needs in different areas, for example, the urban areas compared to the rural ones and different ways of working with organisations, for example, working with many more, smaller voluntary organisations in the rural areas. This means different services need to be developed that can respond to these different demographic areas whilst still being able to deliver good outcomes for all residents.

15.8. The Board asked how the higher incidence of still births and other poorer maternity outcomes amongst Black, Asian and Minority Ethnic (BAME) communities would be addressed through the ESHSCP.

15.9. Jessica Britton said that maternity is one of the wider system priorities across the whole SHCP and that work in this area includes developing a better understanding of the needs of the population, including the BAME population. More detail of this specific system priority could be included in a future report.

15.10. The Board RESOLVED to:

- 1) Note the progress to date to support our continued collaboration and implementation of the NHS Health and Care Bill in East Sussex and in the context of our Sussex Integrated Care System (ICS);
- 2) Note the progress with our planning activity in 2021/22;
- 3) Endorse our shared Health and Social Care Partnership Plan aimed at improving population health and delivering more integrated care (Appendix 1); and

## 16. EAST SUSSEX OUTBREAK CONTROL PLAN

16.1. The Board considered a report providing an update of the results of emergency planning exercise and the plan to refresh the East Sussex Outbreak Control Plan.

16.2. The Board asked for reassurance that the system was ready this winter for another surge in COVID-19 infections.

16.3. Darrell Gale, Director of Public Health, said the COVID-19 infection rates are significantly higher now than this time last year, however, the demand COVID-19 is making on health services is nowhere near as high due to the success of the vaccination programme in

providing protection to individuals. Nevertheless, the Public Health Team is constantly alert to any small changes in infection rates that look worrying, for example, last December the Team noticed the spike in infections in Kent 10 days before a similar increase was seen in East Sussex and 2 days before it was confirmed this was a new Variant of Concern. The Team also meets weekly with all partner organisations to raise any issues, or hear any they may have. The Director of Public Health added that a COVID-19 surge would happen in the context of wider winter pressures that could also need to be managed, such as seasonal flu, greater demand on hospital services, interruptions to service from poor weather, and fuel shortages.

16.4. The Board RESOLVED to:

- 1) note the report; and
- 2) agree to receive an updated East Sussex Outbreak Control Plan at its 14 December 2021 meeting.

## 17. ANNUAL REPORT OF THE DIRECTOR OF PUBLIC HEALTH, 2020 - A YEAR OF COVID

17.1. The Board considered the Annual report of the Director of Public Health, which is titled '2020 – A year of COVID'.

17.2. The Board asked about the link between deprivation and COVID-19, in particular the link between COVID-19 and BAME communities.

17.3. Darrell Gale explained that the report shines a light on how COVID-19 has exacerbated some of the health inequalities in East Sussex and shown that those facing poorer socio-economic outcomes bear the brunt of the disease. Further work will be needed to measure and understand the structural inequalities that mean BAME communities are affected more than the general population, even those who are more affluent. The reasons for this may include such drivers as expectations that BAME employees work certain shift patterns or roles in the health and care sector that result in their increased exposure to the virus compared to their peers.

17.4. The Board extended its thanks for the work in relation to COVID-19 but also recognised there was much still to do.

17.5. Darrell Gale welcomed the gratitude but reminded everyone that the pandemic was not yet over, and that it was not clear what the impact would be of the winter period, even if everyone was better prepared than last year.

17.6. The Board RESOLVED to endorse the Annual report of the Director of Public Health, 2020 – A year of COVID.

## 18. SAFEGUARDING ADULTS BOARD ANNUAL REPORT

18.1. The Board considered the East Sussex Safeguarding Adults Board (SAB) Annual Report 2020 – 2021.

18.2. The Board thanked Graham Bartlett for his six years as Chair of the SAB and wished him well in his future endeavours. The Board welcomed Deborah Stuart-Angus as the next Chair of the SAB.

18.3. The Board asked whether the issue of Kendal Court had been looked at by the SAB.

18.4. Graham Bartlett said that the SAB has been aware of the issues in Kendal Court for as long as East Sussex County Council has been aware and has been in contact with the Chief Executive, Director of Adult Social Care, and Head of Safeguarding. The SAB has looked on two occasions whether what is happening in Kendal Court would fit within the remit of a Safeguarding review and both times the view has been taken that it did not meet the threshold or criteria of a review. Furthermore, a review would not be an efficient enough way of resolving the issue, given how long they can take to complete, and there are other ongoing methods of

resolving it that would be more effective. The SAB remains abreast of the situation and one of its board members is from Healthwatch, which has reviewed the conditions at Kendal Court, so there is considerable knowledge of the issue on the Board.

18.5. The Board RESOLVED to note the report.

19. HEALTH AND WELLBEING INEQUALITIES OF RESIDENTS AT KENDAL COURT, NEWHAVEN AND HOMELESS PEOPLE ACCOMMODATED BY BRIGHTON AND HOVE CITY COUNCIL IN TEMPORARY ACCOMMODATION IN EAST SUSSEX

19.1. The Board considered a report providing an update on the ongoing welfare concerns for unsupported homeless people placed in Kendal Court and other temporary accommodation in the Lewes and Eastbourne areas by Brighton and Hove City Council. The Board also heard a verbal update on the latest situation from the Chief Executive of East Sussex County Council, and a presentation from Healthwatch on the results of their latest inspection.

19.2. The Board discussed the need to resolve the issue as soon as practicable; the importance of informing neighbouring authorities when placing vulnerable people into their temporary accommodation; the risk this could have on availability of temporary accommodation for vulnerable residents in East Sussex; and whether it was acceptable for a local authority to place vulnerable residents who require additional care outside of their jurisdiction.

19.3. The Board RESOLVED to:

- 1) Note the additional information and ongoing concerns set out in this report and the actions taken to try and address them;
- 2) agree that the Chair of the Health and Wellbeing Board writes again to the Chair of the Brighton and Hove Health and Wellbeing Board (BHHWB) to request that Brighton and Hove City Council (BHCC) urgently resolve the inequalities experienced by the vulnerable adults that it has placed at Kendal Court and elsewhere in Lewes and Eastbourne by fulfilling its statutory health and welfare responsibilities; and
- 3) agree to receive a further update report on the situation, at its next meeting on 14th December 2021, to include further options for escalation if the current issues have not been satisfactorily addressed.

20. WORK PROGRAMME

20.1. The Board considered its work programme

20.2. The Board RESOLVED to agree its work programme.

The meeting ended at 4.10 pm.

Councillor Keith Glazier (Chair)