EAST SUSSEX HEALTH AND WELLBEING BOARD

MINUTES of a meeting of the East Sussex Health and Wellbeing Board held at Council Chamber, County Hall, Lewes on 19 July 2022.

MEMBERS PRESENT Councillor Keith Glazier (Chair)

Councillor Carl Maynard, Councillor John Ungar, Councillor Rebecca Whippy, Councillor Mrs Pam Doodes, Ashley Scarff, Mark Stainton, Darrell Gale, Alison Jeffery, John

Routledge and Dr Jane Padmore

INVITED OBSERVERS PRESENT Councillor Emily O'Brien, Councillor Andy Batsford,

Councillor John Barnes MBE, Becky Shaw and Geraldine

Des Moulins

1. <u>MINUTES OF MEETING OF HEALTH AND WELLBEING BOARD HELD ON 1ST MARCH 2022</u>

1.1 The minutes of the meeting held on 1st March 2022 were agreed as a correct record.

2. <u>APOLOGIES FOR ABSENCE</u>

- 2.1 The Chair welcomed the following new invited observers:
 - Councillor Emily O'Brien, Lewes District Council
 - Councillor Andy Batsford, Hastings Borough Council
- 2.2 The following apologies for absence were received from members of the Board:
 - Councillor Trevor Webb
 - Councillor Pam Doodes, Wealden District Council
 - Alison Jeffrey, Director of Children's Services
 - Sarah MacDonald, NHS England South
 - Siobhan Melia, Sussex Community Trust
 - Joe Chadwick-Bell, East Sussex Healthcare Trust
- 2.3 It was also noted that two NHS Sussex representatives had not yet been appointed.
- 2.4 The following substitutions were made from members of the Board:
 - Becky Shaw substituted for Mark Stainton
 - Ashley Scarff substituted for Jessica Britton
- 2.5 The following apologies for absence were received from invited observers with speaking rights:
 - Mark Matthews, East Sussex Fire and Rescue Service

3. <u>DISCLOSURE BY ALL MEMBERS PRESENT OF PERSONAL INTERESTS IN</u> MATTERS ON THE AGENDA

3.1 Cllr Rebecca Whippy declared a personal interest in items 5 and 7 as the provider of services supporting children with special educational needs.

4. <u>URGENT ITEMS</u>

4.1 There were no urgent items.

5. <u>EAST SUSSEX HEALTH AND SOCIAL CARE PROGRAMME - UPDATE REPORT</u>

- 5.1 The Board considered a report providing an update on progress with the East Sussex system integration and related areas of collaboration. This included the arrangements for the new Sussex Integrated Care System (ICS) and statutory bodies that came into force on 1 July and subsequent amendments to the HWB terms of reference agreed by the Council on 12 July, and a refresh of the Board's Strategy 'Healthy Lives, Healthy People', which provides the overarching strategic framework for the work of health, social care and the wider system for the population of East Sussex.
- 5.2 The Board asked why the cardiology service may not be provided from the Eastbourne District General Hospital (EDGH) in future, subject to the outcome of the review process, when a new hospital is planned for the site.
- 5.3 Mark Stainton, Director of Adult Social Care, advised the timeline for the Building for our Future hospital programme to deliver new hospital buildings is several years, whilst the HWB Strategy is for 3+2 years. This means the NHS will have needed to make clinical decisions around the provision of cardiology and ophthalmology services before any new hospital will have been built. He advised the cardiology and ophthalmology reconfigurations are being reviewed by the Health Overview and Scrutiny Committee (HOSC).
- 5.4 The Board asked whether the new Special Educational Needs and Disability (SEND) strategy will ensure children's neuro-diversity is recognised with their Education, Health and Care Plans (EHCPs).
- 5.5 Alison Jeffrey, Director of Children's Services, said East Sussex County Council (ESCC) and the NHS organisations in East Sussex are committed to improving their joint working around Children's Services. There are proposals that NHS Sussex is assisting ESCC to resource that are designed to improve the response to children who are neuro diverse and try and ensure they receive more help sooner. It is important SEND needs are captured in EHCPs and schools are supported to assist children who are neuro diverse, even those without an EHCP.
- 5.6 The Board asked whether discharge to assess will continue to be provided.
- 5.7 Mark Stainton confirmed that discharge to assess will remain as a core element of the range of services offered to assist patients who are medically fit to leave hospital and require ongoing social care.

- 5.8 The Board asked what the reasons are for the performance in Emergency Departments (ED).
- 5.9 Mark Stainton said that there are several reasons including that demand for ED is higher than it was two years ago; there are staff recruitment and retention issues exacerbated by COVID-19 outbreaks that compromise staff availability; and the flow of patients who are medically ready for discharge is also not as swift as it could be at times given the exceptional challenges with the independent sector care market, particularly home care. Discharge to Assess has helped alleviate many of these issues around patients who are medically ready for discharge, as they can be moved to home care or block purchased care homes where the necessary assessments can be carried out. The outbreak of hot weather is also likely to increase demand through greater cardiac and respiratory issues.
- 5.10 The Board asked whether future iterations of the Strategy should factor in adaptations to extreme weather under the challenges section.
- 5.11 Vicky Smith, Programme Director East Sussex Health and Social Care Transformation, agreed it would be helpful to add extreme weather events to the challenges section in future versions of the strategy. Cllr Keith Glazier, Chair of the Board, also agreed that it could be useful to include in the future and provided assurance that such plans were already in place. ESCC, for example, has activated its service plans for helping the most vulnerable residents through the level 3 weather warning. This includes making contact with those at highest risk, advising carers to contact GPs with health concerns and sharing the latest public health advice. Other public organisations such as Sussex Police, East Sussex Fire and Rescue Service and the district and borough councils have released similar information. Darrell Gale, Director of Public Health (DPH), added that people most at risk of overheating in hot weather are those in single aspect flats, new builds, and on converted properties. Future Public Health strategies would include adaptations to buildings as a way of mitigating against climate change. He added Public Health has a small team supporting the Town Deal in Hastings to look at health inequalities and help get green jobs into Hastings to help deliver the Borough Council's own building adaptations.

5.12 The Board RESOLVED to:

- 1) note the contents of this update and the work that has taken place to respond to recent national and local developments, including the updated Health and Wellbeing Board terms of reference (Appendix 1); and
- 2) endorse the refreshed HWB Strategy 'Health Lives, Healthy People 2022 2027' (Appendix 2)

6. <u>DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2021/22</u>

- 6.1 The Board considered a report on this year's Director of Public Health (DPH) report on Work, Skills, and Health ahead of wider dissemination and an update on previous and future DPH reports.
- 6.2 The Board asked whether the increasing number of older people working beyond retirement age is a cause for concern due to the increased likelihood of it impacting their health.
- 6.3 Darrell Gale said that one of the great health inequalities in the county is that some people in poorer communities do not reach retirement age without suffering serious health

problems and die before they receive a pension, whilst some in wealthier areas of the county enjoy 10 or more years of healthy retirement. Given the number of old people in East Sussex, valuing their experience and integrating them into plans to develop a vibrant economy is very important. Utilising and encouraging older people's entrepreneurship is particularly beneficial, as the economy is based on small and medium-sized enterprises.

- 6.4 The Board asked whether public sector organisations should be encouraged to report their response to the DPH report.
- 6.5 Darrell Gale agreed it was a good idea and would follow it up with larger organisations such as those in the NHS. He added the report contains a brief summary of actions against recommendations in the last two reports, so responses from other organisations could be included in this section too.
- 6.6 The Board asked how the importance of volunteering to a person's mental health could be promoted, particularly in rural areas where Voluntary, Community and Social Enterprise (VCSE) are declining due to the aging population and the lack of replacement volunteers.
- 6.7 Darrell Gale agreed VCSE suffer from a lack of volunteers. Employers should look at the work life balance of their staff to make sure they have time to volunteer at a younger age and use their workplace skills in a voluntary setting. He agreed volunteering had a lot of health benefits and can help people looking for better or new employment by developing a wider set of skills.
- 6.8 The Board asked whether the term Black, Asian and Minority Ethnic (BAME) should be replaced with more granular details of particular ethnic groups.
- 6.9 Darrell Gale said he knew the label is problematic and far more inclusive terms are needed. There is a need to work with all groups to describe the similarities and difference between people of different social, ethnic and religious groups, as their backgrounds can affect their health outcomes, without it appearing tokenistic.
- 6.10 The Board asked whether East Sussex Wellbeing at Work Award is being rolled out to district and borough councils.
- 6.11 Becky Shaw, Chief Executive of ESCC, confirmed that ESCC has been promoting the Award with the boroughs and districts and other employers.
- 6.12 The Board RESOLVED to thank the Public Health team and note this year's annual DPH report.

7. <u>HEALTHWATCH ANNUAL REPORT 2021/22</u>

- 7.1 The Board considered a report providing an overview of Healthwatch East Sussex's Annual Report 2021-22 Championing what matters to you.
- 7.2 The Board RESOLVED to:
- 1) thank Healthwatch and Healthwatch volunteers for the variety and quality of their work; and 2) note the report.

8. RESIDENTS AT KENDAL COURT, NEWHAVEN AND HOMELESS PEOPLE ACCOMMODATED BY BRIGHTON AND HOVE CITY COUNCIL IN TEMPORARY ACCOMMODATION IN EAST SUSSEX

- 8.1 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.
- 8.2 The Board RESOLVED to:
- 1) Note the additional information, ongoing concerns and actions set out in this report in respect of Brighton and Hove residents temporarily accommodated in East Sussex; and
- 2) agree to receive a further update report on the situation at its next meeting on 29 September 2022.

9. SUSSEX LEARNING FROM LIVES AND DEATHS (LEDER) ANNUAL REPORT

- 9.1 The Board considered a report on provide an overview of the Learning Disabilities Mortality Review (LeDeR) Sussex CCGs Annual Report 2021-22.
- 9.2 The Board asked how Public Health and the NHS can work together to ensure there is a fuller picture of the reasons for higher suicides amongst people with autism spectrum disorder.
- 9.3 Alison Cannon, Chief Nursing Officer at NHS Sussex, agreed this was an important area to understand fully. The Chief Nursing Officer suggested it be looked at via the LeDeR Steering Group and further details included in the next annual report.
- 9.4 The Board RESOLVED to note the report.

10. <u>EAST SUSSEX OUTBREAK CONTROL PLAN</u>

- 10.1 The Board considered a report providing an update on the latest version of the East Sussex Outbreak Control Plan (OCP)
- 10.2 The Board asked whether the Plan can support the work around other communicable diseases such as monkey pox or seasonal flu.
- 10.3 Darrell Gale explained this is the OCP for COVID-19, however, there are other diseases like avian flu or monkey pox along with seasonal outbreaks of measles, norovirus and flu that could be dealt with through advice from the UK Health Security Agency, knowledge obtained through developing the OCP, and the skills and resources of local Public Health teams.
- 10.4 The Board asked whether, with such high infection rates of COVID-19, guidance for the public on what to consider would be worthwhile.
- 10.5 Darrell Gale said Public Health has adopted a 'Covid Calm' approach over the spring and summer which involves not responding to every rise in cases with action, simply because it is recognised greater harm will happen in the autumn when other diseases and colder weather are present. Some nudging messages have been put out, however, around recognising small

changes people can make to reflect the situation and think about others. the DPH said if these are not reaching people, then further consideration could be given how best to promote them.

- 10.6 The Board asked why more council meetings could not be held online, particularly for more vulnerable members, given the continued infection rates of COVID-19.
- 10.7 Cllr Keith Glazier explained that, following the expiration of temporary regulations that allowed remote meetings, the law prevents meetings from taking place remotely, so committee members must meet in person in order to take decisions. ESCC responded to a Government consultation on the matter requesting the power to determine which meetings should be in person, remote or hybrid however, the Government has not responded to the consultation feedback to date. ESCC, through the Local Government Association and County Council Network, continues to lobby the Government for a response.
- 10.8 The Board RESOLVED to:
- 1) approve the update of the East Sussex Outbreak Control Plan contained in Appendix 1; and
- 2) agree to stop receiving updates of the East Sussex Outbreak Control Plan

11. WORK PROGRAMME

- 11.1 The Board considered its work programme.
- 11.2 The Board RESOLVED to:
 - 1) agree its work programme;
 - request a future report on the Building for our Future hospital programme at the 13th December meeting; and
 - 3) agree to refer the issue of access to NHS Dentistry to the HOSC for consideration.

The meeting ended at 4.05 pm.

Councillor Keith Glazier (Chair)