

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 28 September 2023.

MEMBERS PRESENT Councillor Keith Glazier (Chair)
Councillor Carl Maynard, Councillor John Ungar, Councillor Trevor Webb, Councillor Teresa Killeen MBE, Jessica Britton, Dr Stephen Pike, Mark Stainton, Darrell Gale, Alison Jeffery, Veronica Kirwan and Richard Milner

INVITED OBSERVERS PRESENT Becky Shaw

PRESENTING OFFICERS Seona Douglas, Interim Independent Chair East Sussex Safeguarding Adults Board.
Naomi Ellis, Director of Safeguarding & Clinical Standards, NHS Sussex.
Vicky Smith, Programme Director - East Sussex Health and Social Care Transformation.

11. MINUTES OF MEETING OF HEALTH AND WELLBEING BOARD HELD ON 27 JUNE 2023

11.1 The minutes of the meeting held on 27 June 2023 were agreed as a correct record of the meeting.

12. APOLOGIES FOR ABSENCE

12.1 The following apologies for absence were received from members of the Board:

- Joe Chadwick-Bell, East Sussex Healthcare Trust.
- Councillor Andy Batsford, Hastings Borough Council.

12.2 The following substitutions were made for members of the Board:

- Richard Milner substituted for Joe Chadwick-Bell.

12.3 The following apologies for absence were received from invited observers with speaking rights:

- Councillor Margaret Bannister, Eastbourne Borough Council.
- Councillor Paul Davies, Lewes District Council.
- Mark Matthews, East Sussex Fire and Rescue Service.

13. DISCLOSURE BY ALL MEMBERS PRESENT OF PERSONAL INTERESTS IN MATTERS ON THE AGENDA

13.1 Councillor Trevor Webb declared a personal non-prejudicial interest under item 8, Director of Public Health Annual Report, as he is a personal friend of the project manager of The Refugee Buddy Project used as a case study in the report. Councillor Trevor Webb declared a personal non-prejudicial interest under item 9, East Sussex Shared Delivery Plan programme update, as he was part of the People Scrutiny Committee review of the use of ICT and communications in Adult Social Care and Health. Councillor Trevor Webb also declared a personal non-prejudicial interest under item 10, Creative Health Position Paper, as he is a Trustee of One Hastings Community Voice and a member of the Hastings Friendship Group.

13.2 Councillor Carl Maynard declared a personal non-prejudicial interest under item 9, East Sussex Shared Delivery Plan programme update, regarding the East Sussex Community Oversight Board as he is a member of Rother District Council.

14. URGENT ITEMS

14.1 There were none.

15. EAST SUSSEX SAFEGUARDING ADULTS BOARD (SAB) ANNUAL REPORT 2022 - 2023

15.1 The Board considered a report on the East Sussex Safeguarding Adults Board (SAB) Annual Report 2022/23. Seona Douglas, Interim Independent Chair East Sussex Safeguarding Adults Board gave a short presentation on the key points contained within the report, setting out the legal requirements, a summary of the Safeguarding Adult Reviews (SARs) activity and the five priorities contained within the report.

15.2 Board members commented that they were pleased that the issue of transitions for children to adult services, particularly for those with learning disabilities, is mentioned in theme one in the report. Board members also commented on the work under theme two, for women with multiple needs in relation to chronic trauma, drug and alcohol abuse, homelessness, and domestic abuse and the audit of the multi-agency approach to work in this area. It was noted that the Probation Service action on gaining the adults voice and views in this work.

15.3 Seona Douglas responded that although some years ago there was an issue around learning disabilities it is now much more an issue about substance abuse and mental health issues. It continues to be important to make sure the voices of residents and service users are sought and heard. Evidence from Safeguarding Adult Reviews shows this is a national issue particularly for people with mental health issues where they are not being asked their views. There is a continuing need to ensure that questions are being asked to get people's views.

15.4 The Board noted that financial abuse has become more widespread. It asked if someone with capacity who is identified as being financially abused does not want any action taken, whether there are any powers to continue to act, as is the case with the Police and domestic abuse. Also, should there be legislative change to help tackle financial abuse in situations like this where there may be coercive control.

15.5 Seona Douglas noted that there had been legislative change to help deal with domestic abuse and the Police can still sometimes find it difficult to take a case to court if someone does not want to co-operate with them. In terms of safeguarding, frontline staff do ensure people are protected from financial abuse and it is not necessarily the case that staff will stop working with people where they do not want to engage. Learning from Safeguarding Reviews means that someone saying they do not wish to engage is no longer a sufficient reason to close a case. There are other routes such as Care Act assessments where professionals can try to provide support to ensure someone is protected. There are also processes, such as multi agency panels, where agencies come together to try and provide wrap around support for someone in order to find a solution. The Care Act is currently being reviewed to consider giving statutory powers of entry to local authority social workers, which is currently being debated in the sector. Local authorities already have a degree of autonomy to work with people to help protect them and Seona was not sure that a change in the law would help, given the need to balance the individual's rights and the use of statutory measures to protect them.

15.6 Mark Stainton, Director of Adult Social Care and Health, added that if someone refuses to engage (as is common in cases of self-neglect) the authority does not walk away from these issues and tries to find a way to work with that person, such as through the multi-agency approach where other professionals may be able to provide help. In cases of coercion and control, the authority tries to triangulate and corroborate what a person is saying by other means. This would include trying to speak to the person on their own in a safe environment away from the person who maybe be attempting to exercise control and offer them a range of opportunities to make their views known.

15.7 The Board asked if a parent wanted to keep a child indoors for cultural reasons and not access education or meet other family members, whether it would be considered to be a safeguarding issue. Alison Jeffery, Director of Children's Services, responded that yes it could be a safeguarding issue depending on the circumstances.

15.8 The Board RESOLVED to note the East Sussex Safeguarding Adults Annual report for 2022/23.

16. SUSSEX LEARNING FROM LIVES AND DEATHS (LEDER) ANNUAL REPORT 2022/23

16.1 The Board considered a report on the Sussex Learning from Lives and Deaths (LeDeR) Annual Report for 2022/23. Naomi Ellis, Director of Safeguarding and Clinical Standards at NHS Sussex introduced and gave a summary of the annual report.

16.2 Mark Stainton commented that there is an overlap between this report and the Safeguarding Adults report and the issues of mental capacity that should be considered by all practitioners. He welcomed the continued awareness raising for referrals of people who are autistic and made a request for some place-based information in future reports which would be of interest to those who operate at a place level (e.g. East Sussex, West Sussex, Brighton and Hove) such as Health and Care Boards. Naomis Ellis responded that place-based information is available and can provide it for the three areas, as well as including it in next years annual report.

16.3 Councillor Webb commented on the positive outcomes contained in the report and noted that some of the themes for improvement appear to cover things that have been an issue over a number of years.

16.4 Darrell Gale, Director of Public Health, outlined that both the LeDeR process and the National Suicide Prevention Strategy talk about people with autism, whereas the East Sussex Suicide Prevention Strategy talks about neurodivergent people which is a wider cohort of people. The LeDeR process will only pick up those people with an autism diagnosis and would not cover those people waiting for an assessment or diagnosis. The Public Health Team would like to work with the LeDeR team to ensure the same quality of data is included in the East Sussex Suicide Prevention Strategy for those people whose deaths are covered by the wider neurodivergent definition.

16.5 Naomis Ellis acknowledged that the LeDeR process uses a narrower definition and anticipated that the number of referrals in the LeDeR report for people with an autism diagnosis will probably increase, as more assessments are completed for people on waiting lists. She outlined that the LeDeR team is happy to link in with the work on suicide prevention and the Public Health Team.

16.6 The Board asked whether practitioners, when carrying out assessments, understand the diversity of capacity that people with autism and those with learning disabilities have to engage with and understand their health issues.

16.7 Naomis Ellis responded that mental capacity and the Mental Capacity Act is something that the LeDeR team need to look at through Safeguarding Adults and how it applies to transitions for 16 and 17 year olds as highlighted in the SAB Annual report. It is important that mental capacity issues are addressed for people with autism and those with learning disabilities. NHS Sussex do hold awareness weeks and bespoke training sessions for professionals to convey the diverse threshold of understanding that exists. As well as bespoke training, bite size training and specific leaflets are also available for professionals.

16.8 The Board RESOLVED to note the Sussex Learning from Lives and Deaths Annual Report 2022/23.

17. HEALTHWATCH EAST SUSSEX ANNUAL REPORT 2022-23: TOGETHER WE'RE MAKING HEALTH AND SOCIAL CARE BETTER

17.1 The Board considered a report on the Healthwatch East Sussex Annual report for 2022/23. Veronica Kirwan, Executive Director, East Sussex Community Voice introduced the report and gave a short presentation.

17.2 The Board commented on some points within the report and in particular:

- The engagement with refugees and asylum seekers, some of whom have experienced difficulties accessing medical services as they do not have English as a first language or had access to an interpreter;
- The finding that access to Child and Adolescent Mental Health Services (CAMHS) needs to be improved for children and young people; and
- Access to GP appointments and GP services continues to be a concern.

17.3 Councillor Webb asked whether there is a similar scheme in Hastings and Rother to the one in Eastbourne regarding healthcare access for asylum seekers. Veronica Kirwan confirmed that there is a similar scheme in Hastings and that Healthwatch will be conducting outreach for this service with asylum seekers.

17.4 Alison Jeffery commented that quite a lot of work is being done on the neurodiversity pathways and the services provided by CAMHS by NHS Sussex and partners. If Healthwatch is taking evidence from paediatricians, it may be helpful to talk to colleagues in NHS Sussex and for NHS Sussex to provide a briefing paper as background on the work that is already being undertaken.

17.5 The Chair commented that he will be interested to see the outcomes for the Rye Listening Tour that Healthwatch is undertaking when they become available.

17.6 The Board RESOLVED to note the Healthwatch East Sussex Annual Report for 2022/23.

18. DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2022/23

18.1 The Board considered a report on the Director of Public Health Annual Report 2022/23 which was introduced by Darrell Gale. The report is the last in a series of three, with a focus on loneliness and includes the work that the People Scrutiny Committee did on loneliness.

18.2 The Board thanked the Director of Public Health for a very good and detailed report. It was noted that a Notice of Motion on loneliness several years ago received unanimous Council support and how important this issue was for physical and mental health. It was also noted that some people have not been out since Covid and the impact the Covid pandemic has had on people and how this has contributed to loneliness as they avoid busy places and go out less. It was also noted that loneliness is an issue in both urban and rural communities.

18.3 Councillor Maynard thanked the Director of Public Health for a very detailed and well researched report. He commented that anecdotally there are a number of people both old and young who have not re-adjusted after Covid, and it will be important in the Council's communications activity to promote measures to encourage people, families and friends to go out more and to re-engage with their local communities. Some Parishes can be very good at tackling rural isolation and promoting local community organisations. However, the cost of living increases have also reduced social contact and are contributing to loneliness and isolation as people cut back spending on going out and socialising.

18.4 Darrell Gale summed up by commenting that the impact of Covid is really important and when communities in East Sussex had to self-isolate during Covid they did it very well, but some people have found re-adjusting after Covid difficult. Addressing people's fears about going out more will be important and there may be processes occurring that we do not yet fully understand. There may also be more work to do, for example, for people in care settings who during Covid were not allowed visitors due to strict infection control measures. This will need to be balanced against their human rights to see people and may need to be re-assessed for future pandemics.

18.5 The Board REOLVED to note the Director of Public Health Annual Report for 2022/23.

19. EAST SUSSEX SHARED DELIVERY PLAN (SDP) PROGRAMME UPDATE

19.1 The Board considered an update report on the East Sussex Shared Delivery Plan (SDP), which was introduced by Vicky Smith, Programme Director, East Sussex Health and Social Care Transformation. The report highlights the opportunities to build on the progress so far on integrated care and wellbeing in East Sussex. The report also summarises the scope of the work being undertaken and the development of Integrated Community Teams (ICTs).

19.2 Jessica Britton, Executive Managing Director East Sussex, NHS Sussex commented that a lot of the work on the SDP around the eight work streams is about the integration of teams who work with our communities and is a common thread throughout all the work. There is also a specific action to form networks in communities to tackle social isolation, which supports the work outlined in the Director of Public Health's Annual Report, particularly the recommendations around stewardship, strategy and policy. This will support a greater level connectivity within our communities and help tackle the impact of social isolation on wellbeing.

19.3 Mark Stainton outlined that there is a different format and style to the regular update which reflects the change in approach and that there is now an agreed SDP. The report sets out the agreed boundaries for the Integrated Community Teams, the integrated locality teams and the target operating model for the delivery of the Integrated Care Strategy. The Community Oversight Board in East Sussex will be the key driving force behind the delivery of the ICTs and will include representation from District and Borough Councils, the VCSE Alliance and other organisations as outlined in the governance arrangements. This is the first of the new style of reports and the next report will outline the further progress being made to improve the health and wellbeing outcomes for people in East Sussex.

19.4 The Board asked about the SDP milestone for the Children and Young People's programme plan (SDP milestone ES 5) as residents often raise issues about CAMHS and mental health services. The Board also asked for an update on the integration of budgets and how this is progressing so that they are as well integrated as possible.

19.5 Vicky Smith responded that there are a number of arrangements in place for integrated budgets such as the Better Care Fund and Section 75 arrangements which are reported to the HWB for approval. Currently, refreshed guidance on the Section 75 pooling of budgets is awaited across health and social care. It is anticipated that the guidance will set out expectations for the Integrated Care System in the future for the services that are in scope for pooling and aligning of budgets. There are also discussions being held by the Oversight Board about the delegation and aligning of budgets for services in scope at place level.

19.6 Mark Stainton added that there is £70 million in the Better Care Fund and we are awaiting guidance on the alignment of funding. However, the integration of budgets is more about how we spend the money together for the best effect. For example, it was agreed to deploy the money received for winter pressures as a system, in order to decide how best to spend the money to support services through the winter.

19.7 The Board commented that it would be interested to see how the integration of health and care across East Sussex progresses and what opportunity there would be to share or transfer learning across other areas of activity. Vicky Smith outlined that it will be possible to share learning from the Integrated Community Teams (ICTs) across Sussex through the pan Sussex ICT Delivery Board. There will be the opportunity for the cross fertilisation of ideas at Sussex and place level. Mark Stainton echoed this and added that work will include agreeing a core set of activities for all sixteen ICTs across Sussex, but there will be an opportunity for variation at place and community level to reflect the different needs of the local population.

19.8 The Board RESOLVED to:

- 1) Note the content of the progress report and the proposed footprints to support the development of Integrated Community Teams (ICT) in East Sussex, as described in paragraphs 2.9 – 2.12 of the report and set out in Appendix 4, and endorse their use to enable proof of concept activities to be progressed, and;
- 2) Note that proposals are being explored for a strengthened East Sussex 'Health, Care and Wellbeing Partnership' to reflect the broader role and involvement of Borough and District Councils, and this will be brought to a future meeting of the HWB.

20. CREATIVE HEALTH POSITION PAPER (PUBLIC HEALTH)

20.1 The Board considered a report on the Creative Health Position Paper, which was introduced by Darrell Gale. He also gave a short presentation outlining the background behind the work and the positive impacts on mental health and physiological wellbeing that art and creativity can have.

20.2 Members of the Board commented that it was a very good and interesting report and noted the beneficial impact art and creativity can have on wellbeing and loneliness. The Board also discussed the arts and community-based activities that occur across the County. The Board considered that the report should be compulsory reading for all councillors and were enthused by the work and action plan contained in the report. The Board commented that the arts can be seen as the glue that binds all parts of society and that it is countywide.

20.3 Darrell Gale outlined the expertise and passion in the Public Health Team who were behind the production of the report, which enthuses us all on how we can make the approach to creative health work.

20.4 The Board RESOLVED to:

- 1) Note the briefing and attached Creative Health Position Paper in appendix 1; and
- 2) Support the Creative Health Programmes development.

21. WORK PROGRAMME

21.1 The Board considered the future work programme of the Health and Wellbeing Board. Mark Stainton outlined that there are four items scheduled for the next meeting in December.

21.2 The Chair thanked everyone for the reports that were considered by the Board and acknowledged the huge amount of work that had gone into them and the progress that is being made as a result of all the work that is being undertaken.

21.3 The Board RESOLVED to agree the work programme.

22. ANY OTHER ITEMS PREVIOUSLY NOTIFIED UNDER AGENDA ITEM 4

22.1 There were none.

The meeting ended at 4.16 pm.

Councillor Keith Glazier (Chair)