

## **NORTHUMBERLAND COUNTY COUNCIL**

### **HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE**

At a remote meeting of the **Health and Wellbeing Overview and Scrutiny Committee** held on Tuesday, 3 November 2020 at 1.00pm

#### **PRESENT**

Councillor J. Beynon  
(Chair, in the Chair)

#### **COUNCILLORS**

Bowman, L.  
Cessford, T.  
Dungworth, S.  
Hutchinson, I.

Lawrie, R.  
Nisbet, K.  
Rickerby, L.J.  
Simpson, E.

#### **CABINET MEMBER**

Jones, V.

Adults Wellbeing

#### **ALSO PRESENT**

Angus, C.  
Bowers, H. A.  
Bradley, N.  
  
Brown, J.  
McEvoy-Carr, C.

Scrutiny Officer  
Democratic Services Officer  
Strategic and Commissioning Finance  
Director  
Public Health Consultant  
Executive Director Adult Social Care and  
Children's Services

#### **ALSO IN ATTENDANCE**

Nugent, D

Healthwatch

## 118. APOLOGIES FOR ABSENCE

Apologies for absence was received from Councillor E Armstrong.

## 119. MINUTES

**RESOLVED** that the minutes of the Health and Wellbeing Overview and Scrutiny Committee meetings held on 21 September 2020 and 6 October 2020 respectively, be approved as a correct record and signed by the Chair.

## 120. FORWARD PLAN

The latest Forward Plan of key decisions (attached to the signed minutes as **Appendix A**) were noted.

**RESOLVED** that the information be noted.

## CABINET REPORTS FOR PRE SCRUTINY

### 121. REPORT OF THE EXECUTIVE DIRECTOR OF ADULT CARE

#### **DISCRETIONARY GRANTS FOR ADAPTATIONS TO HOUSING FOR DISABLED PEOPLE**

The Cabinet report attached as **Appendix B** recommended the adoption of a policy permitting the discretionary use of the budget for Disabled Facilities Grants (DFGs), to make possible more flexible responses than were permitted within the mandatory national DFG scheme, in situations where this would be a more effective way of achieving the same objectives. Comments made by the Committee will be reported to Cabinet when they consider the report.

Councillor V Jones introduced the report and stated that the adoption of the policy would provide more flexibility to meet the needs of disabled people as at present Northumberland did not have such a policy.

Neil Bradley, Strategic Commissioning and Finance Director informed members as follows:-

- The Disabilities Facilities Grant Scheme was introduced in the 1990s with an allocation each year from Central Government.
- In 2020/21 the grant received by the Council was approximately £2.9 million for Northumberland.
- The scheme which entitled disabled people to apply and receive a grant support for capital improvements to their homes to support living with a disability, had relatively tight criteria for grant allocation and was subject to a statutory means test with a financial limit of £30,000 for grant support.
- The Council hoped to bring in a discretionary scheme in 3 circumstances as detailed in paragraphs 1.2 a), b) and c) of the draft policy .

- A number of rules and conditions were set out in the policy as to how the discretionary support options would be applied to ensure fairness and to protect the use of public funds.

**RESOLVED** that Cabinet:-

1. Adopt the discretionary grants policy attached as Appendix A to the report.
2. Note the funding for grants made under this policy would come from the grant to the local authority for DFGs.

## **REPORTS FOR CONSIDERATION BY SCRUTINY**

### **122. COVID 19 UPDATE**

Members received a verbal update from Dr Jim Brown, Public Health Consultant

- The Prime Minister had recently announced a national lockdown.
- There had previously been a steep increase in the 7-day rates of COVID infection throughout September in Northumberland. This plateaued during October with a small increase towards the end of October.
- In the 7 days up to 31 October, there had been 612 cases, which equated to 191 per 100,000 population in Northumberland.
- The highest numbers had been in the south east of Northumberland and neighbouring authorities, with fewer cases in the north and west of the county.
- Northumberland still had the lowest rate in the north east and lowest positivity rate (8.7%).
- There was a slight reduction in numbers of people being tested.
- There had been an increase in cases in the 16 to 29 year olds, but this had decreased and more worrying there has recently been a small increase in the over 65 and 75 year olds.
- Eleven notifications of outbreaks had been received from care homes last week
- In the majority of care homes, the number of cases was small, and they were managing to prevent an increase in cases with the support of the care homes outbreak prevention and control wraparound group. However, there had been larger outbreaks in 2 homes one of which had unfortunately had a number of deaths.
- There had been a review of the visiting policy for care homes, but this was on hold pending government guidance for the national lockdown.
- Testing was being carried out on professionals visiting care homes for those in close contact with and visiting residents as part of a pilot and this would become a national policy during November; this will move to rapid point of care testing in due course.
- There had still been a number of cases of pupils and staff at schools throughout half term with slightly more pupils than staff. Support had been provided and risk assessments carried out by the Public health team since early September when PHE were overwhelmed and local authorities were asked to undertake this work.
- The Regional Communications Group were developing behavioural insight work regarding concerns with COVID fatigue and complacency, with particular focus on social distancing. Also working with teachers, health care professionals and care staff and a particular focus outside work.

- The Regional Directors of Public Health had proposed to DHSC an integrated Covid hub, which would not only see 80,000 tests daily at the new Lighthouse facility in Newcastle but also a more regional approach to contact tracing.
- There had been a small increase of hospital admissions, but this remained manageable. A large proportion of demand was from non Covid conditions and an increased demand in general practices. Elective care had continued at Northumbria and Newcastle hospitals.

**RESOLVED** that the information be noted.

### 123. COVID RECOVERY REPORT

The report attached as **Appendix C** provided members with the latest update on the impact of the Coronavirus (covid-19) pandemic on the work of the Council. It provided an overview of the Council's ongoing response and recovery initiatives since June. The report was considered by Cabinet on 13 October 2020.

Cath McEvoy-Carr, Executive Director of Adult Social Care and Children's Service provided information as follows:-

- Since the report had been presented to Cabinet on 13 October, there had been significant changes with imminent national restrictions.
- There were still increases of cases following half term holidays and local health teams were providing support with additional advice from the Public Health team.
- Work was ongoing regionally into behavioural insight opportunities to see how can influence behaviour post lockdown with the involvement of Northumberland's Comms Team.
- The outbreaks in care homes had been a concern and Infection Control and Public Health teams were supporting.
- The restrictions on visiting relatives were causing distress and the Council was trying to find ways to safely assist with visiting.
- Northumberland Communities Together were identifying those clinically and extremely vulnerable whilst restrictions were in place.

The following comments were made in response to questions raised by members:-

- Regarding behavioural analysis and flippancy of rules – this would contribute to the further spread of the disease. Behavioural insight work would look at how to influence and shape behaviour to ensure people did adhere to measures. There had been a number of issues around enforcement with licensed and hospitality venues, but enforcement was a last resort. Work continued with care home staff to continue to social distance and the best way to influence people on the front line.
- Testing centres were not controlled by the Local Authority but there were imminent plans for centres at Berwick and Hexham with mobile units in market towns and some mobile testing centres already across the county. The comment regarding vehicles being deployed on a weekly/monthly basis would be fed back to the Department of Health and Social Care.

**RESOLVED** that Cabinet:-

1. Note the ongoing impact of the Coronavirus emergency on the County Council.
2. Acknowledge the continued work undertaken to date by the Council
3. Agree to receive further reports on the work being undertaken by the Council, particularly in the light of new local and national restrictions introduced recently; and,
4. Invite the Overview and Scrutiny Committees to examine updates on response and recovery plans.

**124. NEWCASTLE UPON TYNE HOSPITALS NHS FOUNDATION TRUST – QUALITY ACCOUNT**

Due to technical issues, this agenda item was deferred, and the presentation would be rescheduled to a further date.

**125. WORK PROGRAMME**

Members considered the work programme/monitoring report for the Health and Wellbeing OSC for 2019/20. (Report attached to the signed minutes as Appendix C.)

Members were informed that reports on NEAS Quality Accounts and ideally Newcastle Hospital Quality Accounts and also a report on Northumberland Communities Together.

**RESOLVED** that the work programme be noted.

**126. NEXT MEETING**

The next meeting would take place on Tuesday 1 December at 1:00 pm.

**CHAIR** \_\_\_\_\_

**DATE** \_\_\_\_\_