

NORTHUMBERLAND COUNTY COUNCIL

HEALTH AND WELLBEING OSC

At the meeting of the **Health and Wellbeing OSC** held at NEW meeting space, Block 1, Floor 2, County Hall, Morpeth, NE61 2EF on Tuesday, 31 August 2021 at 10.00 am.

PRESENT

J Reid (Chair) (in the Chair)

MEMBERS

K Nisbet
R Dodd
G Hill
R Wilczek

L Bowman
D Ferguson
I Hunter

ALSO PRESENT

R Hay
J Hillery

Northumberland CCG
Northumbria Healthcare
Northumberland CCG
Northumberland Healthwatch

OFFICERS

C Angus
C McEvoy-Carr

L Morgan
L Little

Scrutiny Officer
Executive Director of Adults and Children's
Services
Director of Public Health
Senior Democratic Services Officer

26 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Homer.

27 MINUTES OF PREVIOUS MEETING

RESOLVED that the minutes of the meetings held on 26 July 2021 and 2 August 2021, as circulated, be agreed as a true record and be signed by the Chair.

28 FORWARD PLAN

RESOLVED that the information be noted.

29 COVID-19 UPDATE: PUBLIC HEALTH/CCG

Presentations were provided by Liz Morgan, Director of Public Health and Richard

Ch.'s Initials.....

Hay, Head of Planning and Operations, Northumberland CCG. (Copies of the presentation filed with signed minutes.)

Members were advised of the following:-

- The amount of infection within the community had been increasing and figures showed that 1 in 70 people were infected at any one time up to 24 August 2021, however this figure was slightly lower in Northumberland.
- Case numbers had started to level off, however numbers had been consistently high in younger people.
- The changes which influenced case rates would include the extent to which people returned to pre-covid behaviour, the levels of unvaccinated people, the reduction in testing since schools had closed and the re-opening of schools which would happen in England next week.
- Admissions were rising nationally, however they had remained steady locally during August.
- Vaccination was to become mandatory from 11 November for care home staff which provided nursing and personal care where all staff would be required to have the vaccine.
- Key messages remained the same as previously advised.
- Northumberland had vaccinated 90% of eligible residents with first doses and 84% with second doses and Northumberland had the highest uptake of both doses in upper tier local authority areas with 70% of uptake across all age bands.
- Just over 15,000 over 18's were still to receive a first dose and of those just under 8,000 were over 50.
- Details of the Vaccine Equity Board and its role were provided along with work undertaken to improve and promote uptake and details of the Northumberland Roving Vaccine Unit which had also been used across the North East in areas of low uptake.
- Information regarding the vaccination of children and young people with the uptake to be monitored by the Health Protection Board.
- Guidance was still awaited regarding the autumn booster programme with processes in place ready to start delivery.
- The reasons for the success of the vaccination programme within Northumberland along with challenges were outlined.

In response to questions the following information was provided:-

- It would be Government who would need to legislate on any restrictions for unvaccinated people. Vaccination was to become mandatory for some care settings and the majority of visiting professionals to those settings which was the first time any vaccination has been mandatory in this Country. The number of people refusing the vaccine was very small and work would continue to make it accessible to all. A significant proportion of the population were still not being offered vaccination i.e. children under 12.
- Whilst there was already a strong uptake for flu vaccinations in the County it was still hoped that numbers would increase with robust plans in place for vaccinations for flu and booster doses for Covid to

Ch.'s Initials.....

be given either together or separately dependent on guidance issued following the clinical trials. Advice would also be provided on which vaccine to be used for booster doses.

- SVOC was the System Vaccination Operation Centre which was based at a Newcastle Hospital and JCVI was the Joint Committee for Vaccination and Immunisation.
- Vaccinations had a significant impact on the number of people being hospitalised due to Covid with estimates that the current programme had reduced the number of cases by around 25 million and hospital admissions by up to 82,000; and had prevented up to 109,500 deaths. The trials of vaccines had looked at preventing serious illness and death however, as these were not sterilising vaccines, then they did not prevent anyone becoming infected. The number of admissions of vaccinated and unvaccinated whilst not at hand could possibly be provided.
- Hospital admissions at the current time were manageable but some mitigations might be required if they were put under further pressure which might include delays to route operations. There had been no information provided on any further lockdown.

Members thanked all involved for the work undertaken throughout the pandemic. A suggestion was made that it might increase vaccination uptake if figures were provided on the likelihood of being hospitalised or becoming seriously ill for both vaccinated and unvaccinated.

30 **NORTHUMBERLAND RECOVERY OF GENERAL PRACTICE - COVID-19 2021/22**

A presentation was provided by Pamela Phelps, Senior Head of Commissioning for Primary Care. Information provided included the following:

- Prioritisation during the pandemic which included expanding capacity and maintaining the workforce, supporting clinically extremely vulnerable, continuing routine vaccinations and immunisations and changing the ways patients accessed primary care, with face to face appointments prioritised for those it was clinically appropriate.
- Recovery of General Practice taking into account the views of patients and their experience and consideration of digitally disadvantaged and extended. All General Practices had been asked to provide high level recovery plans. Contracting requirements would change in April and it was hoped to maximise the offer in Northumberland.
- The way in which monitoring was to be provided by the CCG.
- Appointment data both national and within Northumberland providing comparisons on the way in which patients accessed services.

Councillors highlighted difficulties in obtaining face to face appointments with GPs and the timing of appointments with some going straight to hospitals for services. This had been an issue even prior to the pandemic. Digital appointments were not appropriate for all and questioned if the proposed changes would lead to a complete change for patients.

Ch.'s Initials.....

Ms Phelps advised that it would not be a complete change with GP's struggling with demand for appointments, even pre-pandemic, however more patients were accessing services digitally, requesting appointments over the weekend when they became ill with the Practice picking them up on a Monday. Work was ongoing with out-of-hours providers and hospital sites with walk-in centres to make sure the CCG could consolidate the opportunities for patients to be seen, however the continuity of GP records was pivotal. As part of the engagement with patients there was a need for them to understand that face to face appointments would be made when it was appropriate but that there were alternatives. There was no easy fix, but engagement would continue.

Councillor Hill highlighted the pilot with the Paramedic Service which had been ongoing in Berwick. She stated that she had been informed that this would not be continuing, despite receiving excellent feedback from residents, who had stated it was a valuable service. Ms Phelps advised that discussions were still ongoing and that the scheme had been extended until the end of March as that was the only funding available at the time.

In response to Councillor Nisbet highlighting an issue with elderly patients being able to access appointments by telephone, Ms Phelps advised that she was aware of the issue with a specific Practice and would work to facilitate a solution.

Ms Phelps was thanked for the presentation.

31 **COMPLAINTS ANNUAL REPORT 2020/2021 - ADULT SOCIAL CARE, CHILDREN'S SOCIAL CARE, AND CONTINUING HEALTH CARE SERVICES**

Members were advised that the report was being reported both to this Committee and to the Family and Children's Services OSC as it was a combined report, however only the first part was of relevant to this Committee.

James Hillery, Complaints and Customer Relations Manager provided an introduction to the report advising that all feedback was welcomed. Northumberland received very few complaints when compared with the levels of service provided.

In response to a point made regarding the understanding by families of charges which would be incurred for care packages, Mrs McEvoy-Carr advised that the change process was very complex and whilst staff always strived to ensure that messages were clear and concise there were times where families may not have understood the implications. Staff may sometimes need assistance to recognise when this was the case and make sure that there was a full understanding of the implications. A suggestion was made that clear information be left with the family to digest at their leisure and contact details be provided so that additional information could be provided if needed.

The Chair stated that over the three years he considered the number of complaints were at an acceptable level and had not fluctuated greatly when compared with the number of interventions that were undertaken yearly. It was noted that separate reports would be provided in the future.

Ch.'s Initials.....

Officers were thanked for the report.

RESOLVED that the information be noted.

32 **HEALTH AND WELLBEING OSC WORK PROGRAMME**

The Scrutiny Officer advised he had spoken to the Trust in respect of End of Life Care and a report would be provided once the consultation had finished. Councillor Hunter also requested an item on the Berwick Paramedic Pilot and its value before the end of the pilot in March.

RESOLVED that the information be noted.

33 **DATE OF NEXT MEETING**

The next meeting was to be held on Tuesday 5 October 2021 at 1.00 pm

CHAIR.....

DATE.....

Ch.'s Initials.....