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**Service Director – Legal, Governance and
Commissioning**

Julie Muscroft

The Democracy Service

Civic Centre 3

High Street

Huddersfield

HD1 2TG

Tel: 01484 221000

Please ask for: Richard Dunne

Email: richard.dunne@kirklees.gov.uk

Wednesday 2 December 2020

Notice of Meeting

Dear Member

Health and Adult Social Care Scrutiny Panel

The **Health and Adult Social Care Scrutiny Panel** meeting will take place remotely at **2.00 pm** on **Thursday 10 December 2020**.

This meeting will be webcast live and will be available to view via the Council's website.

The items which will be discussed are described in the agenda and there are reports attached which give more details.

A handwritten signature in black ink, appearing to read 'Julie Muscroft', on a light-colored background.

Julie Muscroft

Service Director – Legal, Governance and Commissioning

Kirklees Council advocates openness and transparency as part of its democratic processes. Anyone wishing to record (film or audio) the public parts of the meeting should inform the Chair/Clerk of their intentions prior to the meeting.

The Health and Adult Social Care Scrutiny Panel members are:-

Member

Councillor Habiban Zaman (Chair)

Councillor Aafaq Butt

Councillor Vivien Lees-Hamilton

Councillor Alison Munro

Councillor Lesley Warner

David Rigby (Co-Optee)

Peter Bradshaw (Co-Optee)

Lynne Keady (Co-Optee)

Agenda

Reports or Explanatory Notes Attached

Pages

1: Minutes of previous meeting

1 - 10

To approve the Minutes of the meeting of the Panel held on 5 November 2020.

2: Interests

11 - 12

The Councillors will be asked to say if there are any items on the Agenda in which they have disclosable pecuniary interests, which would prevent them from participating in any discussion of the items or participating in any vote upon the items, or any other interests.

3: Admission of the public

Most debates take place in public. This only changes when there is a need to consider certain issues, for instance, commercially sensitive information or details concerning an individual. You will be told at this point whether there are any items on the Agenda which are to be discussed in private.

4: Deputations/Petitions

The Committee will receive any petitions and hear any deputations from members of the public. A deputation is where up to five people can attend the meeting and make a presentation on some particular issue of concern. A member of the public can also hand in a petition at the meeting but that petition should relate to something on which the body has powers and responsibilities.

In accordance with Council Procedure Rule 10 (2), Members of the Public should provide at least 24 hours' notice of presenting a deputation.

5: Public Question Time

Due to current covid-19 restrictions, Members of the Public may submit written questions to the Panel.

Questions should be emailed to jenny.bryce-chan@kirklees.gov.uk no later than 10.00 am on 9 December 2020. In accordance with Council Procedure Rule 51(10) each person may submit a maximum of 4 written questions.

In accordance with Council Procedure Rule 11(5), the period allowed for the asking and answering of public questions will not exceed 15 minutes.

6: Impact of Covid-19 on Mental Health Services.

13 - 32

Representatives from South West Yorkshire NHS Partnership Foundation Trust will be in attendance to update the Panel on the implications of the Covid-19 pandemic on its service provision.

Contact: Richard Dunne, Principal Governance Officer Tel: 01484 221000.

7: Covid-19 Update

33 - 50

The Panel will receive an update on the local position and response to the Covid-19 pandemic.

Contact: Emily Parry-Harries Consultant in Public Health / Head of Public Health Kirklees and Jane O'Donnell Head of Health Protection – Tel: 01484 221000.

8: Work Programme 2020/21

51 - 56

The Panel will review its work programme for 2020/21 and consider its forward agenda plan.

Contact: Richard Dunne, Principal Governance Officer Tel: 01484 221000.

Contact Officer: Richard Dunne

KIRKLEES COUNCIL

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL

Thursday 5th November 2020

- Present: Councillor Habiban Zaman (Chair)
Councillor Alison Munro
Councillor Vivien Lees-Hamilton
Councillor Lesley Warner
- Co-optees David Rigby
Peter Bradshaw
Lynne Keady
- In attendance: Helen Barker – Calderdale and Huddersfield NHS Foundation Trust (CHFT)
Jane Close – Locala
Vicky Dutchburn - Greater Huddersfield & North Kirklees Clinical Commissioning Groups
Amanda Evans – Kirklees Council Adult Social Care
Alexia Gray – Kirklees Council
Mike Houghton-Evans – Independent Chair Kirklees Safeguarding Adults Board
Chris Lennox – South West Yorkshire Partnership NHS Foundation Trust
Jane O'Donnell – Public Health Kirklees
Richard Parry – Kirklees Council
Emily Parry-Harries – Public Health Kirklees
Dr Karen Stone – Mid Yorkshire Hospitals NHS Trust (MYHT)
- Observers: Councillor Liz Smaje
- Apologies: Councillor Aafaq Butt

1 Minutes of previous meeting

The minutes of the meeting held on the 24 September 2020 were approved as a correct record.

2 Interests

Dave Rigby declared an interest in item 6 (Winter Pressures) on the grounds that he was an ordinary member of South West Yorkshire Partnership NHS Foundation Trust.

Health and Adult Social Care Scrutiny Panel - 5 November 2020

Cllr Lesley Warner declared an interest in item 6 (Winter Pressures) on the grounds that she was a member of the Calderdale and Huddersfield NHS Foundation Trust Membership Council.

3 Admission of the public

All items were taken in public session.

4 Deputations/Petitions

No deputations or petitions were received.

5 Public Question Time

No questions were asked.

6 Winter Pressures

The Panel welcomed representatives from organisations across the Kirklees Health and Adult Social Care System.

Ms Dutchburn provided an overview of the key points outlined in the submitted report and explained that the pressures on the local health and adult social care system was a rapidly picture.

Ms Dutchburn informed the Panel the winter plans were developed through the A&E Delivery Boards and were based on the acute footprints. Ms Dutchburn explained that both Boards had combined their winter plans with the Covid reset plans.

Ms Dutchburn stated that the plans fully reflected the partnership preparations and focused on three key themes that included safety and prevention, the service response and patient flow.

Ms Dutchburn informed the Panel that the report also included detailed examples of the service provision that had been enhanced this year and new provision such as the Urgent Community Response model that had been recently been developed.

Ms Dutchburn informed the Panel of the work had taken place to maximise capacity in the voluntary sector and explained that the acute trusts were using the third sector to help support people to stay at home.

Ms Dutchburn stated that through the report the local health and adult social care organisations had attempted to evidence how the whole system of partners were working together to support the local population.

Ms Barker stated that system was extremely pressured and explained that the number of Covid and other winter related inpatients in Calderdale and Huddersfield NHS Foundation Trusts (CHFT) hospitals exceeded the planned numbers and as a result the Trust had stopped all planned care to increase capacity for emergency and urgent admissions.

Ms Barker informed the Panel that the Trust had enacted its surge plan with local independent providers so it could increase its capacity for patients requiring access to cancer services.

Health and Adult Social Care Scrutiny Panel - 5 November 2020

Ms Barker confirmed that outpatients and diagnostics services were currently still running but explained that they would be reviewed on a weekly basis.

Ms Barker explained that a key challenge was dealing with the different cohorts of patients, those who were Covid positive, those who were negative and patients where there wasn't a definitive outcome from a Covid test result.

Ms Barker informed the Panel that the Trust had enacted system gold across both hospital sites that was focused on the transfer of care where there was high demand.

Ms Barker stated that bed occupancy was currently running in excess of 90% and was stretching staff resource. Ms Barker explained that it was going to be a challenging winter period and the system as a whole would take decisions based on clinical guidance.

Ms Barker confirmed that to increase capacity the birthing centre in Huddersfield Royal Infirmary had been closed and outlined the steps that had been taken to continue to provide maternity services for the local population.

A question and answer followed that covered a number of issues that included:

- A question on the quality of the surgical activity that would take place in the independent sector.
- Confirmation that surgery in the independent sector would be carried out by CHFT surgeons and anaesthetists and would be required to meet the Trust's safety standards.
- Clarification that for both sites CHFT had only ceased non-urgent surgery and urgent surgery would continue and planned surgery would restart as soon as it was safe to do so.
- Clarification that the future planned reconfiguration of services would provide a dedicated green site and the capacity to continue with planned care.

Ms Close informed the Panel that Locala had all its services running although not all were at full capacity. Ms Close stated that Locala were facing significant pressures due to staff sickness and Covid related absences were far higher than during the first wave.

Ms Close stated that the district nursing teams were currently operating under OPEL level three which meant that the teams were only undertaking urgent visits.

Ms Lennox informed the Panel that South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) were maintaining their partnership approach across the system. Ms Lennox explained that the Trust were experiencing pressures in their acute care and occupancy levels were high.

Ms Lennox stated that the Trust was focusing with partners on flow through the system and they were coping with the increased demand for mental health services that was coming through the single point of access.

Health and Adult Social Care Scrutiny Panel - 5 November 2020

Ms Lennox informed the Panel that the Trust was keeping all its community services open and were working with a balance between face to face and digital solutions.

Ms Lennox explained that the Trust was trying to ensure that access to its services were kept as simple as possible and its pathways clear and effective.

Ms Stone informed the Panel that Mid Yorkshire Hospitals NHS Trust (MYHT) had seen increasing numbers of patients and were now well above the peak that the Trust had experienced in the first wave.

Ms Stone stated that the Trust had escalated its intensive care and acute respiratory care facilities and had more than doubled these facilities to cope with the numbers of patients.

Ms Stone explained that the Trust was starting to reduce activity so it could concentrate on dealing with emergency cases including cancer. The Panel heard that the reduced activity was enabling the Trust to deploy more staff in acute and emergency care.

Ms Stone outlined details of the work that was being undertaken to maximise the numbers of beds for acutely unwell patients and explained that the situation for staff in the Trust was now starting to feel very different

A further question and answer session ensued that covered a number of areas that included:

- A question on the potential issues associated with the continuation of funding of post discharge care for patients.
- An explanation of the process that would be followed for those patients who required support for a longer period than the NHS funded 6-week discharge period.
- A question on whether there was a local issue with patients being discharged from hospital before their Covid test results were known.
- An overview of the procedures that were followed to ensure that patients were not discharged before their test results were known.
- A question on whether the Council had established a designated care home.
- An overview of the procedures that were in place to deal with Covid positive patients being admitted to care homes.
- A question on the timescales for rolling out the flu vaccination programme to the 50 plus age group.
- Clarification that no timescale for the flu vaccination of the 50 plus age group had yet been announced.
- A concern that the e consult system used in primary care was difficult to access.
- A detailed overview of the processes for accessing primary care.
- A question on the support was being provided to help deliver the priority of prevention and pro-active support to enable people to stay well and independent at home.
- Details of the work that was taking place with the third sector to provide digital equipment that would allow people to access virtual community support.

Health and Adult Social Care Scrutiny Panel - 5 November 2020

- An example of some of the community services that had been stepped back up after the first lockdown that included the mental health crisis café.
- An overview the work being done by SWYPFT to reach people and provide accessible support.
- A question on what was being done to signpost people to bereavement support.
- Details of the work that had been done on bereavement support and other associated services.
- A question on the methods that were being used to contact and engage with those people who were on the mental health service enhanced community pathway.
- Clarification from SWYPFT that they were continuing with their blended approach to engage with people and that people were seen according to their needs including, where appropriate, face to face contact.
- A question on the approach that would be taken by SWYPFT if there was an outbreak of the virus in an inpatient psychiatric ward.
- Details of SWYPFT's operating procedure for dealing with an outbreak in an inpatient ward and caring for Covid positive patients.
- An overview of the work of the Calderdale and Kirklees Recovery and Wellbeing College.
- A concern over the rise in the use of the private sector and the cost to the NHS and the pressures and morale of staff.
- An overview of the challenges facing staff and the added anxiety of having to deal with a second wave.
- The additional support being provided to NHS staff to help their wellbeing and the importance of also providing support to NHS leadership.
- The investment in psychological support for staff.
- The added pressure of staff availability and shortages due to illness and having to self-isolate.
- The importance of keeping NHS staff well informed and feeling safe.
- A question on how well equipped the local community services were in helping to reduce the need for hospital admissions and coping with patients in community settings if the hospitals became overwhelmed.
- An overview of Locala's short term rapid response service.
- A question on what capacity levels would need to be reached before patients were transferred to the regions Nightingale Hospital and details of the protocols that would be followed.
- A question on what discussion were taking place with primary care to help with managing the capacity in hospitals.
- Details of the discussions taking place across West Yorkshire to understand the optimal use of the Nightingale Hospital taking account of the bed and staffing capacity.

RESOLVED –

1. That the report be noted.
2. That representatives from across the local health and adult social care system be thanked for attending the meeting.

7 Covid-19 Update

The Panel welcomed Emily Parry-Harries and Jane O'Donnell from Public Health Kirklees to the meeting.

Ms Parry-Harries presented an update on the local position of Covid-19 that included: details of the number of confirmed cases in Kirklees; the rates per 100,000 in Kirklees compared to neighbouring authorities and England; and a testing update.

Ms O'Donnell informed the Panel that discussions were taking place on establishing a walk-up site at Dewsbury railway station car park although there was still capacity in the built for local testing sites.

Ms O'Donnell stated that work was taking place to winter proof the current testing sites and outlined details of the discussions that were taking place to provide asymptomatic testing for health care staff.

Ms Parry-Harries provide an update on testing in extra care and supported living and care homes.

Ms O'Donnell explained that the testing in extra care and supported living would initially be a one off test for staff and residents but would be reviewed to see if it routine testing should be introduced.

Ms O'Donnell stated that in the second wave public health was seeing a steady increase in the number of cases in care homes and outlined details of the new national guidance on retesting.

Ms O'Donnell informed the Panel of the work that was undertaken by the Infection, Prevention and Control (IPC) Team that included the gathering of data; developing a strong relationship with care homes; details of the support provided following an outbreak; and the guidance for care homes.

Ms O'Donnell outlined the role of the IPC Team in informing the use of national infection control funds; delivering training with care home staff; and the collaborative working with local health and adult social care organisations.

Ms Parry-Harries stated that the situation was changing very rapidly in Kirklees and explained that the effects of the national lockdown would not be felt for a couple of weeks.

Ms Parry-Harries stated that Kirklees had started to see a slight decrease in the numbers of cases in the district and public health was hopeful that this trend would continue.

Ms Parry-Harries informed the Panel that the 6 key messages on how to stay safe and prevent the spread of the virus remained the same and stressed the importance of social distancing.

Health and Adult Social Care Scrutiny Panel - 5 November 2020

Ms Parry-Harries stated that it was important to recognise the hard work of the staff that were involved in the community response and their involvement had prevented an even greater number of infections across Kirklees.

A question and answer session followed that covered a number of issues that included:

- A question on the percentage rate in Kirklees for track and isolate.
- Confirmation that the current rate for tracking people who had been in contact with someone who was Covid-19 positive was 59%.
- Details of the plans for launching a local contact tracing service.
- The increased effectiveness of a local contact tracing service.
- A question on whether public health was receiving sufficient real time patient identifiable data to undertaken local tracing and what support services were available for people who had to isolate.
- An overview of the discussions taking place between Public Health Kirklees and Public Health England on establishing a local contact tracing service.
- Details of the level data that would be received by Public Health Kirklees.
- The advantages of using local people and local numbers for contact tracing.
- The proposal to include a home visiting service to follow up those people who do not respond to the phone calls from the contact tracing team.
- Details of the work of the Community Response Team.
- An overview of the different methods used to communicate test results.
- Details of the process followed to register contacts following a positive Covid-19 test result.
- An overview of the new national guidance on visiting care homes.
- Confirmation that home care staff were tested weekly and that there were currently no plans to increase the frequency of testing.
- A question on whether there was scope to provide unpaid carers with formal identification or documentary evidence to avoid challenge when visiting people they were caring for.
- Details of the work of the Integrated Care System with carers and recognition of the importance of their role that was reflected in the latest guidance.

RESOLVED –

1. That officers from Public Health Kirklees be thanked for attending the meeting.
2. That Public Health Kirklees be invited to attend the next meeting to provide a further update on Covid-19 to include progress of the local contact tracing service.

8 **Kirklees Safeguarding Adults Board 2019/20 Annual Report**

The Panel welcomed Mike Houghton-Evans, Independent Chair of the Kirklees Safeguarding Adults Board to the meeting.

Mr Evans outlined the context to the Kirklees Safeguarding Adults Board (KSAB) Annual Report and explained that in addition to reporting on the progress made that year the Board also had a rolling 3-year Strategic Plan.

Health and Adult Social Care Scrutiny Panel - 5 November 2020

Mr Evans explained that the Safeguarding Board was a strategic partnership that was hosted by the local authority but had a responsibility to be at arm's length from the agencies involved.

Mr Evans provided an update on how the board was operating during the pandemic and the importance of the Board fulfilling its responsibilities to provide scrutiny and oversight on how the partnership was being effective in managing safeguarding issues.

In response to a panel question that it would be helpful if the report included a summary of the key issues that had emerged during the year Mr Evans explained in detail the importance of the section that covered key priorities and achievements.

Mr Evans outlined the approach that the Board was taking to playing a more proactive role that had resulted in the development of a risk register that had helped to identify areas that required more detailed investigation.

Mr Evans informed the Panel that partnership working across Kirklees was very strong and that partners involved in the Board recognised their role to be involved in the challenges faced by the Board as well as representing their own organisation.

Mr Evans informed the Panel of the three key areas that the Board would be focusing on in the current year that included making safeguarding personal, mental capacity assessments and assuring effective practice.

Mr Evans outlined details of the work that the Board undertook in practitioner forums and explained that these sessions had been extremely helpful.

Mr Evans explained that since Healthwatch had joined the Board their input had been extremely helpful as they were able to provide examples of real-life stories and experiences.

Mr Evans highlighted a number of key issues from the latest risk register that included the impact of social isolation; mental health and wellbeing; consequences of shielding; not accessing NHS services or social care support; and exploitation of vulnerable adults.

Mr Evans informed the Panel that another area that the Board was looking at was to identify ways of working that had taken place during the pandemic that could be worth maintaining in the future.

A question and answer session followed that covered a number of issues that included:

- An explanation of the approach that the KSAB would take to dealing with a potential safeguarding issue relating to the discharge of an elderly and vulnerable patient to a care home with known cases of Covid-19.
- An overview of the NICE gold standard on best practice for hospital discharge.
- A question on the process for alerting KSAB to vulnerable adults who may be at risk to themselves or others.

Health and Adult Social Care Scrutiny Panel - 5 November 2020

- A discussion on how the pandemic had made it clearer to identify the implications of those individuals who make choices that other people may consider to be unwise or undesirable.

Mr Evans informed the Panel that the Board had an infrastructure that included a delivery group and three sub groups. Mr Evans explained that one of the most important of these groups was the performance and quality sub group.

Mr Evans stated that the chairing of the sub groups was shared across the partnerships and outlined the additional areas of focus that would be covered by the performance and quality sub group that included section 42 enquires; and looking at the risk register.

Mr Evans highlighted the valuable work from Healthwatch Kirklees that provided real life stories and explained that Healthwatch was producing balanced reports that demonstrated both the negative and positive experiences of people and that this helped inform the Board's work.

Mr Evans informed the Panel that in January 2021 the Board would be recruiting a new independent Chair and this meant that this would be the last time he would be presenting the annual report to scrutiny.

RESOLVED –

That Mr Evans be thanked for the work he had done as the Independent Chair of the Kirklees Safeguarding Adults Board.

9 Work Programme 2020/21

The Panel discussed the 2020/21 forward agenda plan that included the items for inclusion in the meetings scheduled for 10 December 2020 and 18 February 2021.

The Panel was informed that the December meeting would include an item that would look at the impact of the pandemic on mental health services in Kirklees to include a description of South West Yorkshire Partnership NHS Foundation Trust's (SWYPFT) early response to service provision; steps taken by the Trust to mitigate the impact of the pandemic on services; and the impact on demand.

A number of issues were discussed that included:

- Clarification that the discussion with SWYPFT in December would supersede the planned workshop.
- Confirmation that the Calderdale and Kirklees Joint Health Scrutiny Committee was continuing to meet to discuss the plans for the reconfiguration of services at Calderdale and Huddersfield NHS Foundation Trust.
- An overview of the current restrictions on hosting virtual meetings.
- The importance of the panel having sight of the work being undertaken by the Calderdale and Kirklees Joint Committee.
- A request that consideration be given to keeping the option of having a workshop session with SWYPFT.
- A Panel request to receive regular winter pressure updates from the acute hospitals.

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KIRKLEES COUNCIL				
COUNCIL/CABINET/COMMITTEE MEETINGS ETC				
DECLARATION OF INTERESTS				
Health & Adult Social Care Scrutiny Panel				
Name of Councillor				
Item in which you have an interest	Type of interest (eg a disclosable pecuniary interest or an "Other Interest")	Does the nature of the interest require you to withdraw from the meeting while the item in which you have an interest is under consideration? [Y/N]	Brief description of your interest	

Signed: Dated:

NOTES

Disclosable Pecuniary Interests

If you have any of the following pecuniary interests, they are your disclosable pecuniary interests under the new national rules. Any reference to spouse or civil partner includes any person with whom you are living as husband or wife, or as if they were your civil partner.

Any employment, office, trade, profession or vocation carried on for profit or gain, which you, or your spouse or civil partner, undertakes.

Any payment or provision of any other financial benefit (other than from your council or authority) made or provided within the relevant period in respect of any expenses incurred by you in carrying out duties as a member, or towards your election expenses.

Any contract which is made between you, or your spouse or your civil partner (or a body in which you, or your spouse or your civil partner, has a beneficial interest) and your council or authority -

- under which goods or services are to be provided or works are to be executed; and
- which has not been fully discharged.

Any beneficial interest in land which you, or your spouse or your civil partner, have and which is within the area of your council or authority.

Any licence (alone or jointly with others) which you, or your spouse or your civil partner, holds to occupy land in the area of your council or authority for a month or longer.

Any tenancy where (to your knowledge) - the landlord is your council or authority; and the tenant is a body in which you, or your spouse or your civil partner, has a beneficial interest.

Any beneficial interest which you, or your spouse or your civil partner has in securities of a body where -

(a) that body (to your knowledge) has a place of business or land in the area of your council or authority; and

(b) either -

the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or

if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you, or your spouse or your civil partner, has a beneficial interest exceeds one hundredth of the total issued share capital of that class.



Name of meeting: Health and Adult Social Care Scrutiny Panel

Date: 10 December 2020

Title of report: Impact of COVID-19 on Mental Health Services in Kirklees

Purpose of report: To provide members of the Health and Adult Social Care Scrutiny Panel with the context and background to the discussions on the impact of COVID-19 on Mental Health Services in Kirklees.

Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?	No
Key Decision - Is it in the <u>Council's Forward Plan (key decisions and private reports)</u> ?	Not Applicable
The Decision - Is it eligible for call in by Scrutiny?	Not Applicable
Date signed off by <u>Strategic Director</u> & name Is it also signed off by the Service Director for Finance? Is it also signed off by the Service Director for Legal Governance and Commissioning?	No – The report has been produced for information only and to facilitate the discussions on mental health services in Kirklees.
Health Contact	Chris Lennox - Deputy Director of Operations South West Yorkshire Partnership NHS Foundation Trust

Electoral wards affected: None Specific

Ward councillors consulted: Not Applicable

Public or private: Public

Has GDPR been considered? Yes.

1. Summary

- 1.1 The Covid-19 pandemic has had a major impact on the lives of people with mental health difficulties and on mental health services.
- 1.2 Mental health services have faced considerable challenges and changes during the period of the pandemic that have included significant reductions in people's social networks and informal support systems.
- 1.3 The provision of mental health services during the pandemic has been made more difficult as there has been a need to limit face to face contact and make more use of digital technology.
- 1.4 South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) are a specialist NHS Foundation Trust that provides community, mental health and learning disability services to the people of Barnsley, Calderdale, Kirklees and Wakefield.
- 1.5 In line with the Panel's wish to assess the impact and implications of the pandemic on mental health services in Kirklees representatives from SWYPFT will be in attendance to provide details of their response to Covid-19.
- 1.6 Information submitted by SWYPFT is attached.

2. Information required to take a decision

N/A

3. Implications for the Council

N/A

3.1 Working with People

No specific implications

3.2 Working with Partners

No specific implications

3.3 Place Based Working

No specific implications

3.4 Climate Change and Air Quality

No specific implications

3.5 Improving outcomes for children

No specific implications

3.6 Other (e.g. Legal/Financial or Human Resources)

No specific implications

4. Consultees and their opinions

Not applicable

5. Next steps and timelines

That the Overview and Scrutiny Panel for Health and Adult Social Care takes account of the information presented and considers the next steps it wishes to take.

6. Officer recommendations and reasons

That the Panel considers the information provided and determines if any further information or action is required.

- 7 Cabinet Portfolio Holder's recommendations**
Not applicable
- 8 Contact officer:**
Richard Dunne – Principal Governance Officer
richard.dunne@kirklees.gov.uk
- 9 Background Papers and History of Decisions**
Not applicable
- 10 Service Director responsible**
Julie Muscroft – Service Director, Legal, Governance and Commissioning

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Kirklees Health and Adult Social Care Scrutiny Panel



December 2020



**Chris Lennox, Deputy Director of
Operations, SWYPFT**



With **all of us** in mind.

Operational Challenges



South West
Yorkshire Partnership
NHS Foundation Trust

March 2020:

- Government announcement of national lockdown in response to national COVID-19 pandemic
- National shielding programme commenced
- Community mental health services began immediate development of business continuity planning

Challenges:

Estate challenges, including occupancy limits

Establishing plans to manage covid on the wards

IPC requirements

Maintaining contact with people that need it

Higher acuity across new and existing service users

Partner organisations changing practice and impact on SWYPFT

Increased staff absence across all services

With all of us in mind.

Early Response

Gold-Silver-Bronze command structure in place and a focus on OPEL level criteria to inform Business Continuity Planning

Continued to provide assessment, care management and interventions using telephone and ensuring face to face contacts when clinically required.

Established Cohorting Standard Operating Procedures for acute services with clinical pathway operationalised for COVID 19 positive patients. We are managing the care of patients who are covid positive on our wards.

Followed national guidance with local and service specific Business Continuity Plans and Phased Recovery Plans (linked with local providers, alliances and commissioners).

Crisis, IHBT and Mental Health Liaison pathways have continued to operate in full.

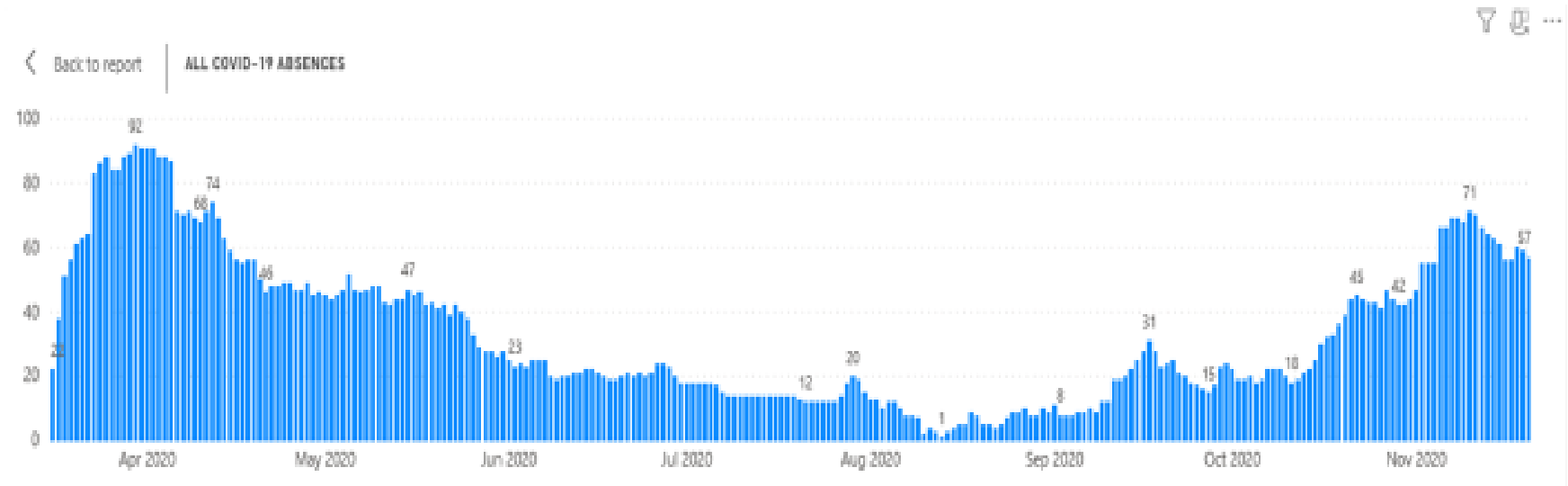
Implementation of Red, Amber, Green system to identify priority visits (i.e. Red = service users in an acute phase and contact to manage this is essential, Amber= service users with moderate risks who we may relapse if contact is not maintained, Green= low risk / routine contact.

Ongoing staff resource challenges:



South West
Yorkshire Partnership
NHS Foundation Trust

Staff absence peaked in the first wave. Absence is now nearing those levels in the 2nd wave across the Calderdale and Kirklees BDU:



Steps toward recovery – how we are adapting

Continue to deliver services safely, in line with guidance. All buildings risk assessed to ensure safe clinical space is available and optimised, and work areas are assessed as Covid secure.

Mapped our demand and capacity going forward to take account of current, projected and potential including suppressed demand.

Increased use of digital interventions e.g. video conferencing - we will look to retain this as appropriate.

Continue to promote IAPT, specifically to those who are clinically vulnerable and have been most affected by restrictions.

Build on partnerships with helplines providing mental health support to the general population e.g. 24/7mental health helpline, staff support line, grief and loss service.

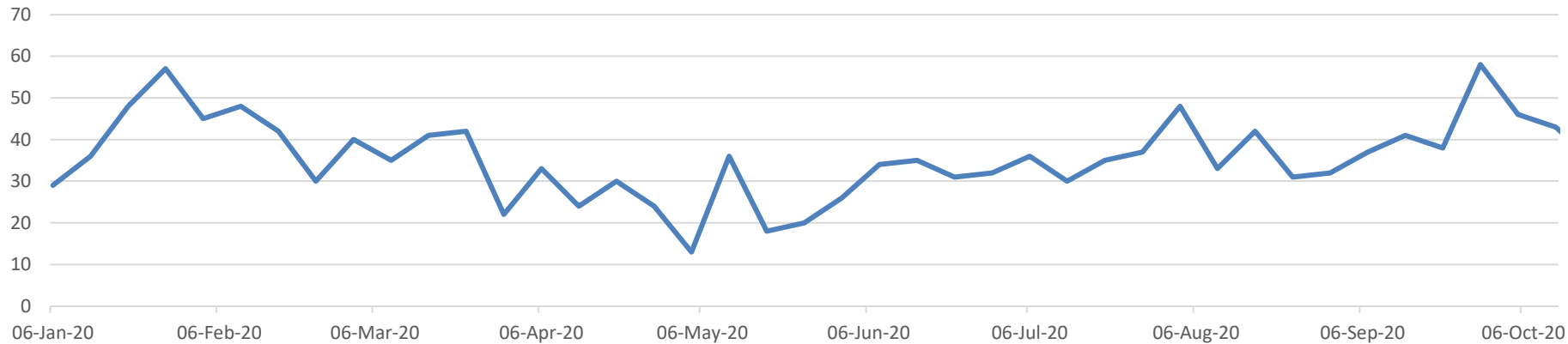
Develop and strengthen the creative community offer led by Recovery Colleges, Creative Minds and our wider partners.

Demand for Services



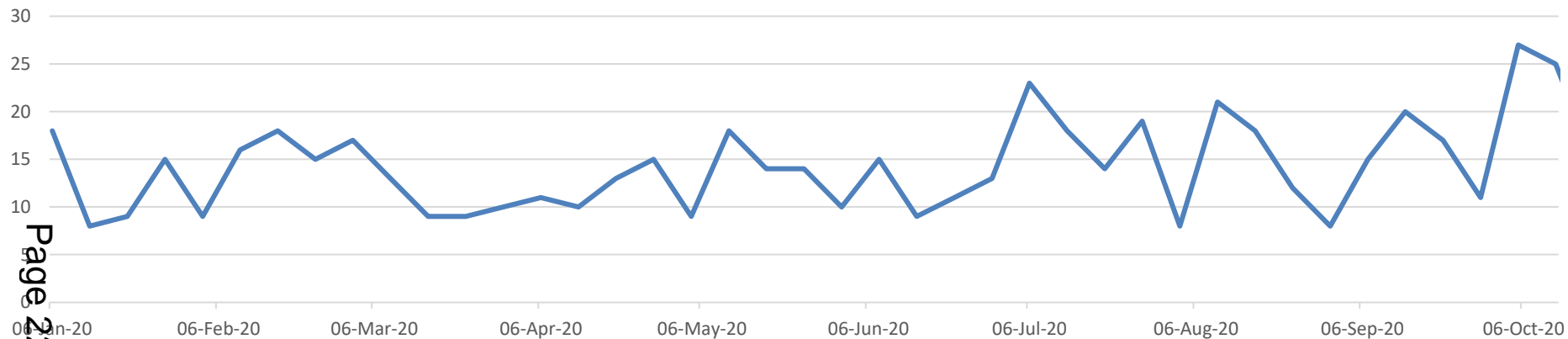
**South West
Yorkshire Partnership**
NHS Foundation Trust

Kirklees Core Teams - Referrals Received



Referral rates into community Mental Health services vary week on week, some increase, particularly in Core between April / May and October.

All Kirklees Enhanced Referrals Received



Approach to outbreaks on the wards



**South West
Yorkshire Partnership**
NHS Foundation Trust

At the outset of the pandemic, the Trust establish an inpatient Standard Operating Procedure (SOP) to support the management of a patient/patients with potential, possible or confirmed COVID 19.

This standard operating procedure (SOP) applies to all Mental Health & Learning Disability inpatient units within South West Yorkshire Partnership NHS FT (SWYPFT). It is relevant to both registered and unregistered staff who are permanent, temporary, bank and agency staff who may come into contact with patients either possible or confirmed with COVID-19.

Principles of the SOP are that during the COVID-19 pandemic, all in-patient wards will aim to provide:

- Comprehensive, safe and effective in-patient assessment and treatment services for people with severe mental illness
- Enhanced levels of IPC measures to minimise the risk of spread of COVID-19 to patients, staff and the wider community
- Enhanced levels of physical health care monitoring and intervention, including that required to assess and treat COVID-19 symptoms
- Support to carers and relatives of patients to remain in contact
- Comprehensive discharge planning including crisis and relapse prevention
- Mental health promotion
- Psychological support with the impact of covid-19 including with social distancing, lockdown and anxiety regarding mortality.

Managing Outbreaks in practice



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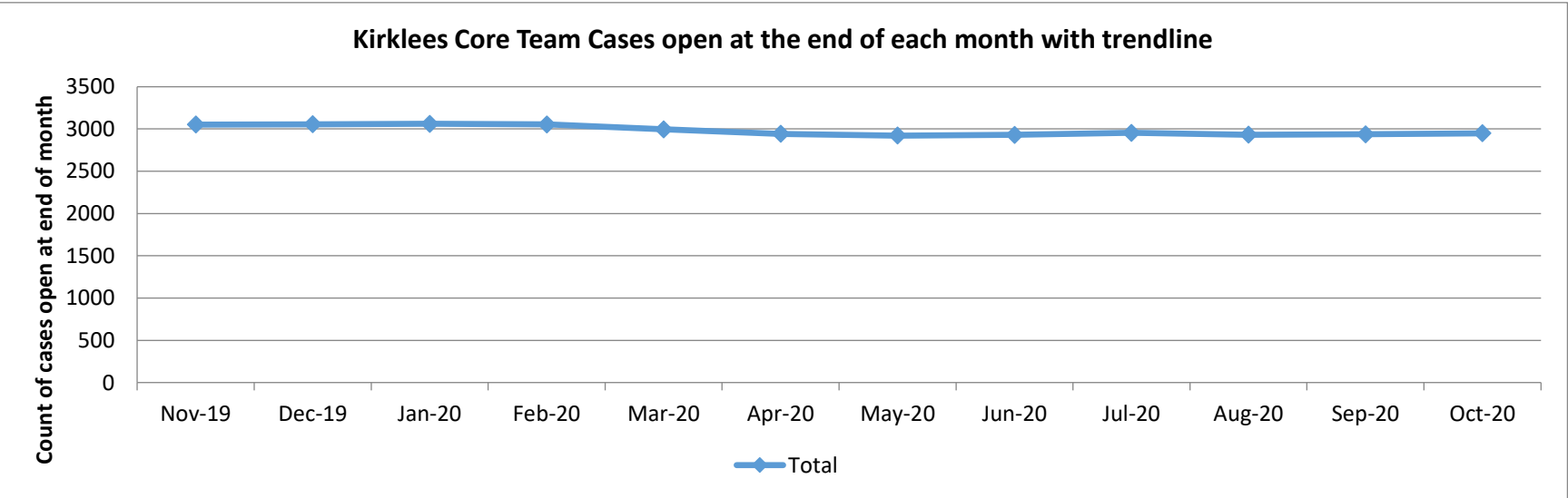
There is a recent example with service users testing positive on both Elmdale and Ashdale and in direct contact with significant numbers of other service users on the ward. The cohorting policy was adopted to allow the wards to remain open as functioning wards and ensure that admissions could continue where possible due to the continuing high demand for mental health acute beds.

- Both wards clinically reviewed the service users that were required to isolate and identified if they could be sent on leave or discharged to complete this isolation, so they weren't restricted to the ward environment.
- The service users that were required to isolate were split into isolation and non-isolation pods - in effect, they were termed as 'households' for the 14day period, this allowed freedom within the pod area and interaction between the isolated service users to minimise the impact of isolation on their mental health.
- The service users who were not isolating on the ward could mix, take leave, and use resources such as the dining room, tea bar and garden.
- As beds became unoccupied, service users could be admitted to 'clean' beds/pods and the pod areas were reviewed daily to allow for the isolation pods to be reduced as service users were sent on leave or discharged.
- Following cohorting, several beds on each ward became immediately/quickly available for admission and continuous clinical review meant no discharges were prevented.
- Virtual visiting was encouraged
- Proactive risk management of service users was utilised to progress individuals to lesser restrictive settings.

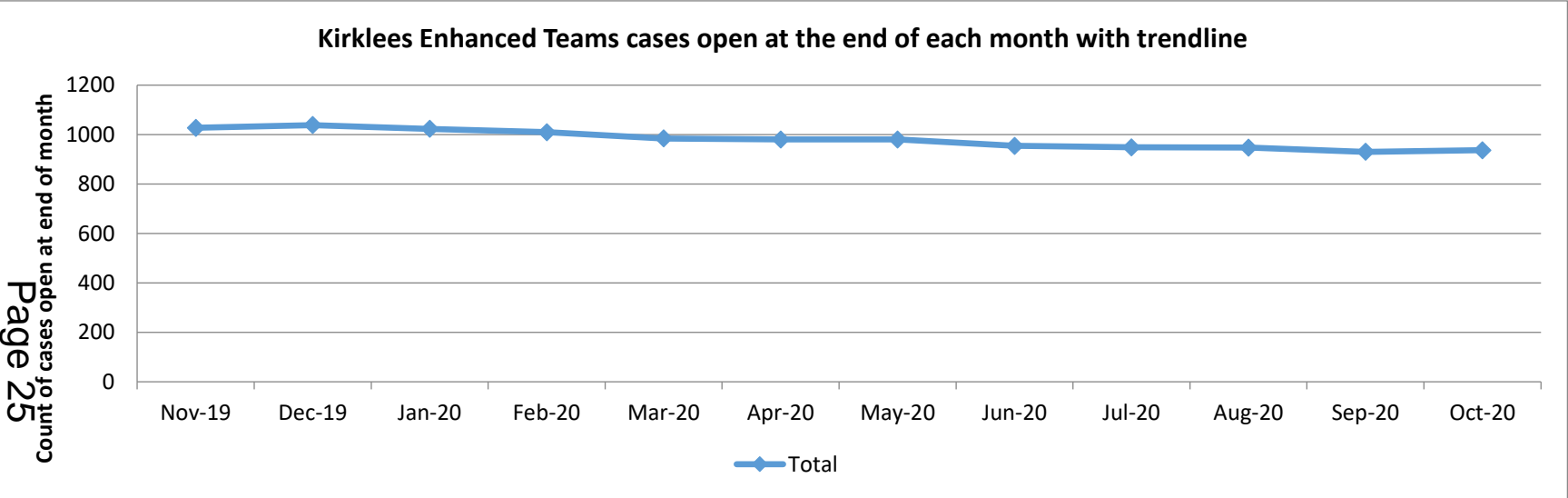
Core and Enhanced Team Caseloads



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Core Team caseloads are approximately the same size now as 1 year ago across Kirklees whilst there has been a slight reduction across Enhanced Teams

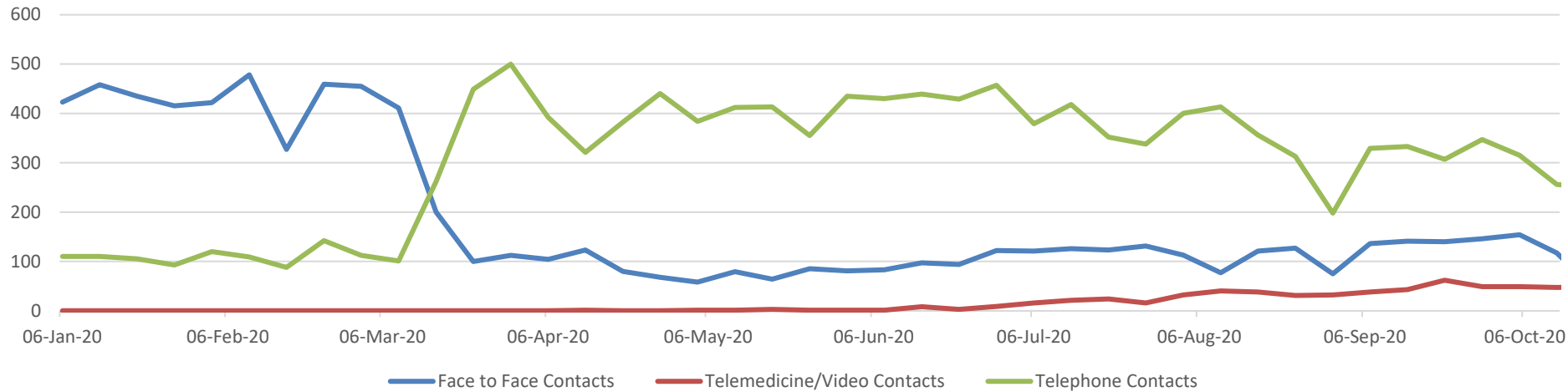


Core and Enhanced Team Contact Method

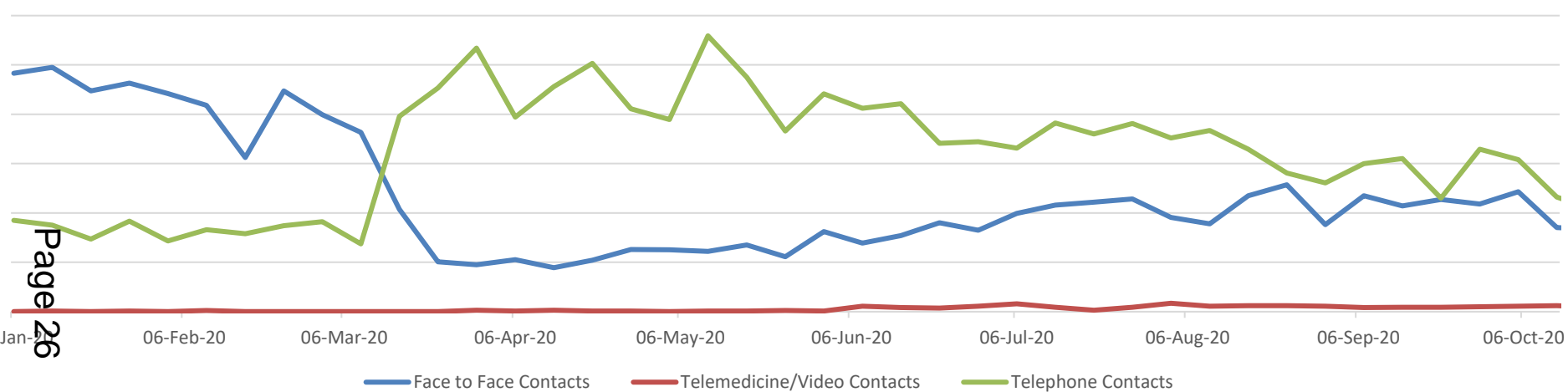


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Kirklees Core Teams Contact Methods



Kirklees Enhanced Teams Contact Method



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Recovery College Activity



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- **Joined Calderdale and Kirklees Recovery Colleges together** –best use of resources
- **New website**, procured, designed and operating in full
- **Daily links** texts and emails to learners from end of March to mid August – based on a theme each day (Meditation Mondays, Wellbeing Wednesdays, Physical Thursdays etc.)
- **Produced weekly, now fortnightly newsletter** to keep people connected (highly praised by learners and partners). Printed to those not online and sent via post
- **Advertising partners and community offers** – online courses and relevant projects
- **Survey in lockdown** – called learners with 198 who took part. Questions asked about most pressing needs, our work and use of technology which helped us improve our offer
- **Daily use of social media** – Facebook closed groups created to sit along course content and connect learners (100 people engaged in these groups)
- **Worked with Support to Recovery and Creative Minds** to send 100 wellbeing packs to our learners who were not online -12 packs sent to each learner every 2-3 weeks
- **Created, printed and sent a support leaflet** to learners for both Kirklees & Calderdale
- **Weekly huddle with volunteers** – on Microsoft Teams since lockdown
- **Supported Discover 2020** – Oral histories project - Recorded interviews with people with mental health and how they coped with lockdown – podcasts available
- **Produced physical health magazine** (2 issues)
- **YouTube** – content – poetry, podcasts, vlogs, course content support etc.
- **Change of course design** – online & blended learning. High quality printed workbooks
- **Produced and delivered new courses** with workbooks and course materials sent to homes. Re-started face to face courses (although currently suspended in lockdown 2)
- **Created bank of paid sessional facilitators (with lived experience)**– using Leeds Regional fund monies to deliver blended learning –planning 9 new courses x 8 sessions

Recovery College – some feedback



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Just a note to say a huge thank you to The Recovery College for keeping the home fires burning (nod to VE day there 😊) while we are all away in lockdown and socially distancing. I originally thought that lockdown meant meltdown and the thought of missing my routine of going to work made me feel physically sick.

However Rachel, Matt and the RC team have made sure that the attendees have been kept busy with a daily dose of something different to take our minds off our minds.

Just wanted to email and reach out a bit as to be honest I have really been struggling lately during this period - it's really exacerbated negative mood and feelings. But I wanted to say how much I appreciate the texts every day from RC and also the Keeping Connected newsletters coming through. It's really nice to see them popping up via text every day!

I'd just like to say I am so grateful for the ongoing support from The Recovery College during this difficult time and I feel it is great that courses such as these are available. Thank you so much.

I received the wellbeing packs yesterday, when I opened them I was blown away it also brought a tear to my eyes to now that each pack had been carefully thought about. I'm having to self isolate for 12 weeks and we are now on week nine, I've not coped with it very well at all until my packs arrived. When I'm ready I'll do a piece for the newsletter probable from one of the tasks in the pack. I'd be grateful if you could send me the pack for June too.

Ckrecovery.wellbeing@swyt.nhs.uk

With all of us in mind.

Carers Passport

We launched our new **carers' passports** for both unpaid carers and our staff who are carers for their family, friends and loved ones on 26 Nov:

Celebrating Carers' Rights Day

Thursday 26 November

12:30pm – 2pm

Microsoft Teams



The Carers Passport looks to bring together the good work in the Trust and build on this, giving a clear pathway and formalised structure to access support and information, ensuring all carers receive the equal opportunity for support and partnership working.

The carers passport will be available digitally for partners and key workers to download/print and give out. We are also ordering hard copies for people who don't have access to internet.

We have established a Trust wide Carers Leads Network to further develop the framework and the implementation of the passport via the care planning process. This will help drive our offer and all other aspects of work related to carers.

The Carers Passports will help to:

- Identify carers
- Provide clear co-productive working practices
- Provide clear confidentiality and information sharing procedures
- Tell carers what they can expect from the trust
- Provide clear pathways to advice, support and information

More information: Aboobaker.Bhana@swyt.nhs.uk

With **all of us** in mind.

Local Recovery



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Through this year:

- We have maintained our services to those people in need of crisis care
- We continued to provide face to face visits to those who were identified as clinical priorities within all community teams
- We continually re- evaluated individual risks to ensure that people were getting the right contact to meet their needs (digital exclusions)

As we continue with recovery we are:

- Recommencing memory clinics
- Recommencing psychological therapy face to face groups
- All enhanced and EIP now restoring face to face contact with the majority of service users
- Planned restart for the community clinics within Core



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With all of us in mind.

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Covid-19 Update: Health and Adult Social Care Scrutiny Panel

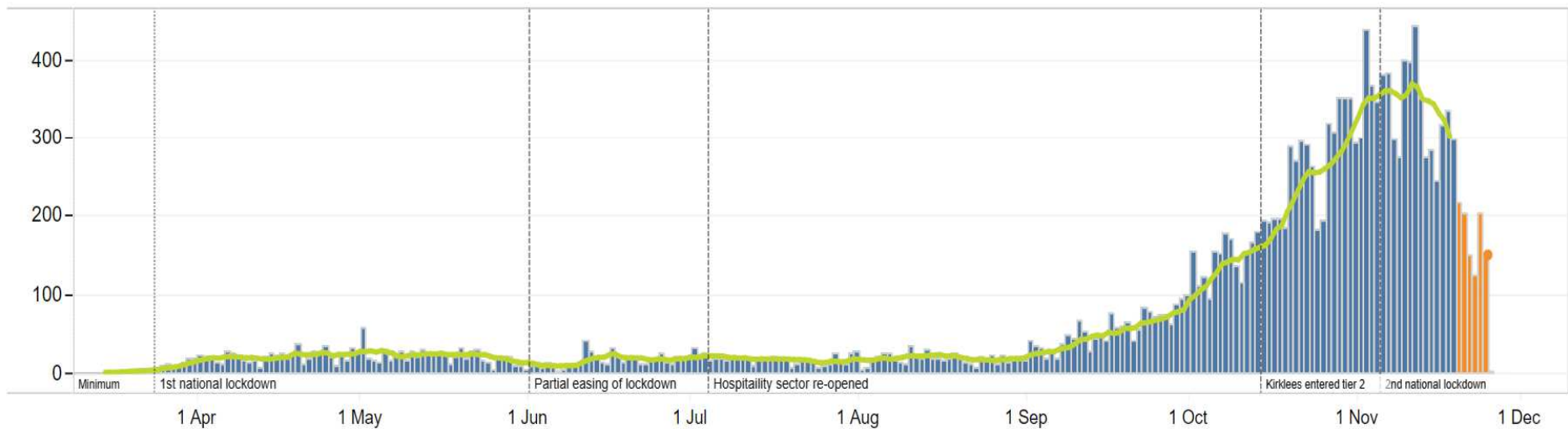
Jane O'Donnell

Prepared: 30th November 2020

Cumulative Position

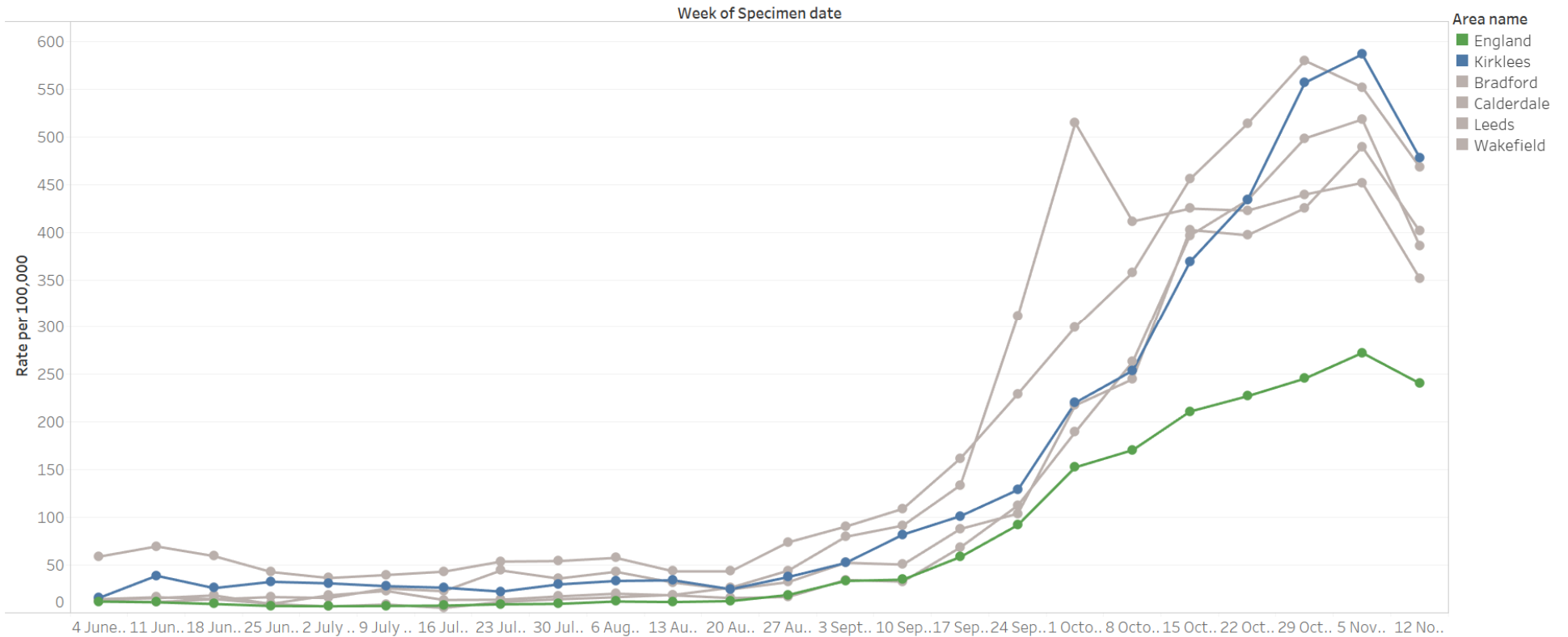
- Number of confirmed cases in Kirklees: 18,550
- Cases in the last week: 1,764
- Weekly Rate: reduction by 27.3%
- Latest weekly rank: 6
- Note: these are correct as of 27.11.2020

Number of daily cases of Covid-19 in Kirklees. **Green line** ◆ shows the 7-day rolling average. Data for the last 4 days is subject to change (coloured **orange** ◆). Annotations show national easing of restrictions.



Current Position

The Kirklees rate is still the highest in West Yorkshire, but rates across the county have fallen



➤ Note: Updates can be tracked here:

<https://public.tableau.com/profile/kirklees.intelligence.service#!/vizhome/CoronaviruscasesKirklees/PublicFacingDashboard>

Covid-19 Testing Update

- **The Extra Care / Supported Living** settings which are providing CQC registered care and have shared living facilities are currently receiving a single round of one off testing as part of a pilot run by Department of Health & Social Care to understand transmission in these settings. As set out in the Covid-19 Winter Plan announced on Monday these high risk settings will move to regular retesting (further information in due course).
- **Domiciliary Care staff** - carers should use the domiciliary testing route. Note that this route is **not for testing care recipients**, only for carers and will be eligible for weekly testing.

Lateral Flow Testing Update

Lateral Flow testing is asymptomatic testing to identify those carrying the virus who do not know. It aims to reach a higher proportion of the population, targeting areas which will have most impact and supports the economy and wider society to return to a normal way of life.

Eligibility

- If testing an organisation, the subject will be the responsibility of the organisation being tested (e.g. an employee/student).
- **The subject will be asymptomatic.**
- The subject will consent to participation in the study.
- The subject will consent to sharing their data with the National T&T programme.

Covid-19 Schools Update

Schools:

- Responding to requests for support and advice from schools on an individual basis – the number of requests have declined, but are still significant, as schools increasingly self-manage issues.
- Receive robust IPC outbreak control/incident management team support in response to positive tests.
- There is an ask to support where required with schools and other provision that remains open.

Covid-19 Provider Update

Other Providers:

- Supporting youth and sports sectors to ensure compliance with the national restrictions and to prepare to restart in allocated tier from 2nd Dec.
- Working with partners to ensure support groups for the vulnerable operate within the national restrictions (ongoing) – DPH guidance issued

Care Home Testing Update

Care Home residents discharged from Hospital

All care home residents being discharged from hospital or interim care facilities to a care home, and new residents admitted from the community, should be isolated for 14 days within their own room. This should be the case unless they have already undergone isolation for a 14-day period in another setting, and even then, the care home may wish to isolate new residents for a further 14 days.

Some residents may have received a positive covid-19 test but be ready for discharge from hospital. A proportion of care homes across Kirklees have been approved as step down care homes due to being able to cohort positive covid-19 residents effectively and ensuring these residents can receive the care and recuperation they need in an acute setting.

COVID-19 Vaccine

- Encourage early flu vaccination to ensure completed prior to covid-19 vaccination.
- Ensure flu and Covid-19 vaccines at administered x days apart
- National campaign and messages targeted
- Place messages will be aligned with national messages but tailored locally
- Key messages will be aimed at take up of the vaccine
- Key messages around how to get the vaccine

COVID-19 Vaccine

- Covid-19 vaccine is two doses which must be administered between 21 and 28 days apart.
- The Covid-19 vaccine programme approach and delivery models will be defined nationally.
- Plan on the basis that the vaccine will be available from the 1st December 2020.
- Sites have been identified for designated delivery, PCN and are now awaiting NHSE approval.
- Call and recall systems will be used to administer the vaccinations.
- Place messages to be aligned with national messages but tailored locally.

COVID-19 Vaccination phases 1 & 2

- Phase 1

- Care Homes
 - As per flu vaccination models
 - Peer Vaccination and care home staff vaccinate residents?
- NHS Staff
 - Peer vaccination models as per flu
- Social Care Staff
 - As per flu vaccination models
- Highly vulnerable
 - As per flu vaccination models
 - Additional roving vaccinators (if required)?

- Phase 2

- Population Vaccination

COVID-19

Community Engagement Including Targeted Engagement

- Visual audit of key areas in North Kirklees. Most targeted areas extremely quiet. All non-essential businesses appeared to be closed as per restrictions. Observation of restrictions compliance and adherence to guidance undertaken outside a North Kirklees school in response to concerns flagged by head teacher.
- Community Safety staff (CESOs) continue to work in partnership with Environmental Services on non-compliance reports and visits.
- Town Centre Support Officers to support Covid engagement, to be rolled out via Huddersfield Business Improvement District (BID). Start date TBC, aiming for first week in December
- Reactive communications are taking place as and when required for situations arising
- Publication of data updates (weekly summaries, weekday daily updates available online)
- Test and trace plan – T&T PR and comms plan review and update ongoing as required
- Schools isolation guide (including schools transport) reviewed and updated as required
- Isolation comms
- Face covering comms
- NHS Covid app comms reviewed and update (including for Council, care home and schools staff)
- Information leaflets for residents

COVID-19 Communications

- Encourage early flu vaccination to ensure flu vaccination is administered before Covid-19 vaccine starts (timelines to be confirmed)
- Ensure National messages are tailored locally
- Expect National campaign messages:
- Key message will be to encourage take up of vaccine (information on safety trials etc.)
- Information about how to get vaccine (timings, bookings, locations)

Immunisation Programme Update

Childhood immunisations are continuing as normal, there are a few extra steps in place to ensure covid-19 safe.

- Appointment times have been extended to 20 minutes
- Redeployed staff are triaging all appointments the day before, both to check they are well and to encourage attendance as we have seen an increase in DNA's
- Staff assisting with waiting rooms and ensuring distancing is maintained
- Locals are assisting some GP practices to provide the immunisations (for those practices who usually carry out their own)

To ensure targeted work is taking place:

- Locals and GPs in North Kirklees are contacting families to assure them about appointments.
- Reassurance provided that vaccinations will be administered in a Covid secure environment

The following statement has also been added to appointment letters:

- Please note that due to COVID 19, appointment times have been extended to allow extra time. Waiting rooms are also being managed to maintain social distancing but we also ask patients to ensure they maintain social distancing advice on arrival. Public Health England Guidance is also being followed with regards to the use of Personal Protective Equipment (PPE).

Flu Immunisation Programme Update

50-64 age cohort

This year with Covid-19 still circulating, flu vaccinations are even more important than ever, and are being provided to those most at risk of serious illness if they contract flu or Covid-19. 50-64s have been included as a flu cohort this year, as 50 is the age at which the risk of hospitalisations for COVID-19 sharply increase, which justifies increasing protection against influenza. Roll out will commence on 1st December.

Schools Year 7

Due to securing additional vaccinations this year school children in year 7 will now be eligible for vaccination. All school age influenza vaccinations will be complete by 15th December 2020.

Flu Immunisation Programme Update

Flu Uptake in cohorts 30 th Sept – 31 st Oct 2020	Uptake
65 and overs	69.4%
Under 65 at risk (GP registered patients)	30.4%
Pregnant (GP registered patients)	31.1%
Age 2 (not in clinical at risk group)	29.5%
Age two (in a clinical at risk group)	29%
All two year olds	29.5%
3 year old (not in clinical at risk group)	29.8%
3 year olds (in clinical at risk group)	32.3%
All 3 year olds	30%

Flu Immunisation Programme Update

Flu Uptake in Hospital Trust staff (Patient facing roles) Provisional Monthly data 30 th Sept – 31 st Oct 2020	Uptake
CHFT 51.2% (51.2%) same time period last year was 41.6%	51.2% (4540 staff – 2223 received the vaccine)
MYHT 5791 – 3210 55.4% last year 4929 (nearly 1000 staff) 60.3%	55.4% (3210 this year compared to 4929 this year – last years uptake 60.3%)

Flu Immunisation Programme Update

School age children: Provisional 30 sept – 31 st October 2020	Uptake
Reception (ages 4 and 5)	15.2%
Year 2 age 6 and 7	15.7%
Year 3 age 7 and 8	16.4%
Year 4 age 8 and 9	15.8%
Year 5 9 and 10	16.1%
Year 6 10 and 11	12.1%
Year 7 (ages 11 and 12)	2.3%

HEALTH AND ADULT SOCIAL CARE SCRUTINY PANEL – WORK PROGRAMME 2020/21

MEMBERS: Cllr Habiban Zaman (Lead Member), Cllr Aafaq Butt, Cllr Alison Munro, Cllr Vivien Lees-Hamilton, Cllr Lesley Warner, Peter Bradshaw (Co-optee), David Rigby (Co-optee), Lynne Keady (Co-optee).

SUPPORT: Richard Dunne, Principal Governance Officer.

FULL PANEL DISCUSSION		
ISSUE	APPROACH AND AREAS OF FOCUS	OUTCOMES
<p>1. Financial position of the Kirklees Health and Adult Social Care Economy.</p>	<p>Maintain a focus on the finances of the health and social care system in Kirklees to include:</p> <ul style="list-style-type: none"> • Reviewing any emerging transformation programmes and assessing their contribution to increasing efficiencies and impact on services. • Considering the various Cost Improvement Schemes (CIPs) and their impact on the delivery and commissioning of services. • Impact of COVID-19 on the local health and adult social care economy to include care homes and the implications for their long-term viability. 	<p><u>Panel meeting 24 September 2020</u></p> <p>The Panel received an update on the financial position of key organisations from the Kirklees Health and Adult Social Care Economy.</p> <p>The Panel agreed that a further discussion should be arranged to include an update on the financial impact of the pandemic with a focus on services delivered in the community such as domiciliary care.</p>
<p>2. Community Care Services.</p>	<p>To assess the progress and effectiveness of Community Care Services (CCS) in Kirklees to include:</p> <ul style="list-style-type: none"> • Reviewing progress of the Primary Care Networks (PCNs) to include the impact that COVID-19 has had on patients access to primary medical services. • Looking at the work being done by the networks to assess their local population through a targeted and personalised approach to provide support to people where it is most needed. • Assessing the relationship between the key providers of CCS to include PCNs; Locala; Community Plus; and the Kirklees Wellness Service. 	

	<ul style="list-style-type: none"> • Assessing how well the integration agenda is being implemented through CCCS in Kirklees. • Assessing the impact of CCS in Kirklees in reducing avoidable A&E attendances; hospital admissions; delayed discharges; and reducing avoidable outpatient visits. • Looking at the approach being taken by PCNs to engage with patients in the development of their work programmes and plans. 	
3. Kirklees Integrated Wellness Service	<p>To continue monitoring the development of the service and receive a 12-month update on progress of the service following the last discussions with scrutiny in November 2019.</p> <p>To consider the development of the service in conjunction with the work being done through the Kirklees Health and Wellbeing Plan (2018/2023).</p>	
4. Quality of Care in Kirklees	<p>Receive an annual presentation from CQC on the State of Care across Kirklees to include:</p> <ul style="list-style-type: none"> • A focus on Adult Social Care • The impact of COVID-19 on the quality of care in Kirklees. 	
5. Suicide Prevention	<p>Receive an update on progress of the work being done on suicide prevention since the panel meeting in January 2020 to include:</p> <ul style="list-style-type: none"> • The impact that the pathfinder support workers have had in their work in providing advice, training, and support for men vulnerable to self-harm and suicide. • The impact that the preventative and educational work on mental health that is taking place in schools is having in helping to reduce self-harm and suicide. • The impact of COVID-19. 	

6. Kirklees Safeguarding Adults Board (KSAB) 2019/20 Annual Report	To receive and consider the KSAB Annual Report to include consideration of the Impact of Covid-19 on safeguarding adults during periods of lockdown.	<p><u>Panel meeting 5 November 2020</u></p> <p>The Panel received the KSAB Annual Report 2019/20.</p> <p>The Panel noted the report. The Panel also thanked the Board's Independent Chair who was stepping down and look forward to working with the new Chair who will be appointed early 2021.</p>
7. Mid Yorkshire Hospitals NHS Trust (MYHT) Ambulatory Emergency Care (AEC) Services and Services provided at Dewsbury and District Hospital (DDH)	To receive a written update on the closure of the AEC unit at DDH.	
8. Transforming Outpatient Care at Calderdale and Huddersfield NHS Foundation Trust (CHFT) and Mid Yorkshire Hospitals NHS Trust (MYHT)	To receive a written update on: <ul style="list-style-type: none"> • The programme of change at CHFT. • The work being done by MYHT on its Outpatient Care. 	
9. Yorkshire Ambulance Service (YAS) Response Times	To receive a written update on performance and demand across all areas of Kirklees to include: <ul style="list-style-type: none"> • A focus on response times for categories 1 and 2. • Looking at the variances of performance across Kirklees. 	
10. Kirklees Immunisation Programme	To consider the performance of the Immunisation programmes in Kirklees to include: <ul style="list-style-type: none"> • Details of the local arrangements, structures, and responsibilities for immunisation. • Looking at Kirklees performance compared to national standards. 	

	<ul style="list-style-type: none"> • Details of policies that are in place to ensure that those residents that are 'at-risk' and eligible for vaccination are being targeted to include the approach to engagement with the more deprived communities in Kirklees. • An overview of key challenges and/or risks to the delivery of an effective immunisation programme to include the impact of COVID-19. 	
11. Update on Winter Planning	<p>Update on winter preparations from the Kirklees Health and Adult Social Care sector to include:</p> <ul style="list-style-type: none"> • Receiving details from key organisations across the local health and adult social care section on preparations for winter to include the key areas of focus; • lessons learned from the winter period 2019/20; • feedback and experiences of service users from last winter period; • Details of measures that will be put in place to mitigate any additional pressures created by a resurgence of COVID-19. 	<p><u>Panel meeting 5 November 2020.</u> Representatives from organisations across the Kirklees health and adult social care sector presented their winter plans.</p> <p>A detailed discussion took place that included a focus on the additional pressures created by the pandemic. The Panel was supportive of the measures being taken to mitigate the increasing demand particularly in the acute hospital settings.</p> <p>The Panel is keen to monitor closely the situation during the winter period and has requested regular updates on winter pressures.</p>
12. Development of a local Community Care Package (pilot)	<p>Reviewing the outcomes of a local authority pilot initiative to develop a community care package led by Cllr Murgatroyd to include:</p> <ul style="list-style-type: none"> • Looking at the wider work being done on developing "new models of support in the community" to include reviewing the work on new models of care in people's own home e.g. Colne Valley Care Co-operative, micro enterprises, PAs. 	

13. Mental Health Services Workshop	To arrange a mental health services workshop with South West Yorkshire Partnership NHS Foundation Trust (SWYPFT) to look in more detail at the various support services and redesign of services. Format and structure of workshop to be developed by the panel in conjunction with the Trust.	
14. COVID-19 (To be included as a standing item for the remainder of the 2020/21 municipal year)	To consider the impact of COVID-19 on the local Health and Adult Social Care Economy to include: <ul style="list-style-type: none"> • Looking at the key challenges; pressures; and measures taken to mitigate them. • Assessing the impact on the workforce. • Understanding the budget implications of dealing with the crisis and the longer-term financial impact. • Assessing the work that was undertaken to safeguarding vulnerable adults. • Lessons learned. 	<p><u>Panel meeting 23 July 2020</u> Representatives from CHFT & MYHT presented details of their response to the COVID-19 virus. Input on the current position locally was also provided by Public Health and Healthwatch Kirklees.</p> <p>No specific actions were agreed.</p> <p><u>Panel meeting 24 September 2020.</u> Kirklees Public Health presented an update on the local position and response to Covid-19.</p> <p>The Panel agreed that due to importance of this issue that it should continue to be included as an item on future agenda's.</p> <p><u>Panel meeting 5 November 2020</u> Kirklees Public Health presented an update on the local position and response to Covid-19.</p> <p>The Panel requested that the next update include progress of the local contact tracing service.</p>

<p>15. Effectiveness of smoking cessation arrangements in Kirklees.</p>	<p>To review the effectiveness of smoking cessation arrangements in Kirklees to include a review on how people with complex mental ill health are supported.</p>	
<p>16. Kirklees Care Homes Programme Board</p>	<p>To look at the work of the Board to include the support being provided to the care home sector; the approach to infection control; and the long-term look and shape of the care home market.</p>	<p><u>Panel meeting 24 September 2020.</u> The Panel received an overview of the Kirklees Care Homes Programme that has been developed by the newly established Care Home Board.</p> <p>Actions agreed included:</p> <ul style="list-style-type: none"> • To receive a further report to follow up on progress of the Board to include: a summary section outlining the key issues and actions taken to address them; and more details of the training and support that will be provided to care homes on end of life care plans. • To receive the outcomes of the work that is being done on analysing the care home market.