Contact Officer: Jenny Bryce-Chan

KIRKLEES COUNCIL

HEALTH AND WELLBEING BOARD

Thursday 20th January 2022

Present:	Councillor Viv Kendrick (Chair) Councillor Musarrat Khan Councillor Carole Pattison Councillor Mark Thompson Councillor Kath Pinnock Mel Meggs Carol McKenna Dr Khalid Naeem Richard Parry Karen Jackson Beth Hewitt Stacey Appleyard
In attendance:	Emily Parry-Harries, Head of Public Health Phil Longworth, Senior Manager, Integrated Support James Griffiths, District Commander, West Yorkshire Police Ryan Hunter, South-West Yorkshire NHS Foundation Trust Catherine Riley, Calderdale and Huddersfield Foundation Trust Diane McKerracher, Locala Rebecca Elliott, Public Health Manager Stewart Horn, Head of Joint Commissioning Carrie Rae, NHS Wakefield, CCG Caterina Westwood, South-West Yorkshire NHS Foundation Trust Emmerline Irving, NHS Wakefield, CCG
Apologies:	Rachel Spencer-Henshall Jacqui Gedman

36 Membership of the Board/Apologies

Apologies were received from Rachel Spencer-Henshall and Jacqui Gedman.

Emily Parry-Harries attended as sub for Rachel Spencer-Henshall.

37 Minutes of previous meeting

That the minutes of the meeting 2 December 2021, be amended to reflect that Dr Khalid Naeem Deputy Chair of the Health and Wellbeing Board chaired the meeting.

38 Interests

No interests were declared.

39 Admission of the Public

All agenda items were considered in public session.

40 Deputations/Petitions

No deputations or petitions were received.

41 Public Question Time

No questions were asked.

42 Covid 19 Update

Emily Parry-Harries, Head of Public Health provided an update on the current position regarding Covid-19 in Kirklees, highlighting key points from data up to 12th January 2022.

In summary, the Board was informed that:

- the data on vaccination uptake by age shows there is a higher uptake in the older population and a lower uptake moving down the age brackets
- work is ongoing to encourage uptake of the vaccine within particular communities, and the vaccination in schools programme continues with the second dose to be delivery on the 10th January 2022. It is a successful programme in schools in Kirklees
- there is a robust vaccination programme being delivered in Kirklees with wellestablished vaccination sites, with well-established roles for the Primary Care Networks, and community pharmacy
- there are a series of pop-ups being delivered in particular communities where there are efforts to improve vaccination uptake
- the Kirklees weekly case numbers have decreased by 40% in the latest week
- Kirklees is ranked 41 (out of 142 upper tier local authorities) with a rate of 1,311 per 100,00 above the England rate of 1,129

The Board was informed that while it is positive that the case number are reducing Covid has not gone away, and the important message is that people should still take care

The Board reiterated that the easing of restrictions does not mean that the virus has disappeared and the messages around hand hygiene, social distancing and mask wearing particularly in crowded spaces are still relevant.

RESOLVED

That Emily Parry-Harries be thanked for providing an update on Covid-19 in Kirklees

43 Health and Care Operational Pressures Updates

Richard Parry, Strategic Director, for Adults and Health and Carol McKenna, Chief Officer NHS Kirklees CCG provided the Board with an update on Health and Care Operational Pressures.

The Board was informed that there has been much publicity about the pressures within the health and care system with the pressures being a combination of the usual winter pressures exacerbated by long standing workforce issues particularly around recruitment and retention. In response to these challenges the integrated care system made available some NHS funding to bring forward to December 2021 the pay uplifts for social care staff to reflect the national living wage due from April 2022.

In addition, there has been high rates of Covid, which has impacted on the availability of the workforce in terms of both residential and home care settings. It is a combination of increased demand and a reduced workforce both short and long term.

There has been joint working across the system, between Kirklees, Calderdale and Wakefield Councils as well as colleagues from Calderdale and Huddersfield Foundation Trust and Mid Yorkshire Hospitals which should help manage some of the system flow pressures. Kirklees Council has led on the commissioning of step-down beds on behalf of the three local authorities that can be used flexibly across all three local authorities.

The Board was informed that staffing pressures are also being experienced by other providers and NHS services remain busy. The challenges being faced are the usual winter pressures seen at this time of year overlaid with the effects of Covid, and staff sickness have been a key factor in the pressures being faced.

Mutual aid has been offered within the system and staff have been put in wherever possible to support staff testing for example. Both the acute trusts have largely been able to maintain their planned activities and there has not been the blanket cancellation of activities that has been seen in other areas of the country. It is important to acknowledge how well the system is working together.

The Board was informed that in respect of:

Community Services work is continually being undertaken, assessing the waiting lists and the growth in the waiting lists to ensure that there are no people on the list who are decompensating and therefore at greater clinical risk. This has been vital to how the workforce has been reallocated.

Primary Care Services there are a significant number of practices experiencing positive Covid cases which has resulted in staff absences and self-isolation. There are also people off with stress, exhaustion and are demoralised and this is having an impact on the functioning of primary care. There needs to be a consistent message that all the healthcare system is under pressure and that people should be patient and if the matter is not urgent to wait to give the system a chance to recover.

South-West Yorkshire NHS Foundation Trust the same staff challenges are being experienced. Recently, approximately 10% of the workforce was off work with Covid, which has now reduced to over 4%. While it is improving there are still challenges particularly across inpatient wards where are have been Covid breakouts. There are staff who have been working through it and have burnout, it has been difficult but improving.

RESOLVED

That Carol McKenna, Richard Parry and colleagues from across the health and care system be thanked for taking the Board through health and care operational pressures

44 Trauma Informed Practice in Kirklees

Rebecca Elliott, Public Health Manager and Stewart Horn, Head of Joint Commissioning attended the meeting to provide update on Trauma Informed Practice in Kirklees. Also, in attendance to input into the update, were Catherina Westwood, South-West Yorkshire NHS Foundation Trust and Carrie Rae and Emm Irving from West Yorkshire Health and Care Partnership.

In summary, the Board was informed that the information being presented aims to outline adversity, trauma, and resilience and what this means and to outline some of the work that is being undertaken across the region and the commitment that has been made to develop trauma informed working. Local leaders have signed up to a pledge and are committed to become more trauma informed and to work towards a trauma informed system by 2030. This is not a new concept and there are pockets of good work being undertaken across Kirklees. Last year a mapping exercise was carried out to capture and understand where things are currently.

The Board was informed that the definition of trauma in this context is "trauma represents the broad range of traumatic, abusive or neglectful experiences that people can experience or be subjected to during their lives" (NHS Education for Scotland 2014).

The ambition to be achieved is "to become an all-age, trauma informed organisation by 2030. Our ambition is to develop appropriate and proportionate service changes, both practically and culturally. We want to apply trauma informed practice into all aspects of our work to further prevent hard for out residents and staff."

The Board was given information which highlighted the following:

- As the number of adverse childhood experiences increases, so does the risk of negative health outcomes
- Approximately half of all adults living in England have experienced at least one form of adversity in their childhood

- The impact of trauma is multifaceted in terms of the impact it has on children, not just physically, but socially and mentally and it has long-lasting impact throughout a person's life course
- Connections are being made between people who have experienced trauma and the determinants of health and poor outcomes and the impact this has on their physical and mental health

The Board was informed that West Yorkshire Health and Care Partnership has signed up to becoming a Trauma Informed Responsive System by 2030. The whole system including health, social care, housing, third sector and community initiatives have come together to bring help and hope to people who are at risk of or, who have experience trauma. The Kirklees Director for Public Health has also signed the pledge to become a trauma informed organisation by 2030. Trauma informed practice is a strength-based approach which seeks to understand and respond to the impact on people's lives.

The Board was informed that in terms of governances structure it is a whole system approach. The Programme is led by the senior managers from the West Yorkshire Health and Care Partnership (WYHCP) Improving Population Health Programme, Children Young People and Family's Programmes and the West Yorkshire Violence Reduction Unit (WYVRU). The Chief Executive of Bradford Council is the system executive lead and chairs the West Yorkshire Adversity, Trauma and Resilience (WYATR) Strategy Board. Overall responsibility for the success, monitoring, progress, performance against system agreed performance indicators and evaluation of the Programme, sits with the WYHCP and WYVRU as the lead organisations.

WYATR Strategy Board's formal decision-making group, will manage any third-party providers, monitor, and mitigate slippage identified in the timeline and milestones, and report and escalate risk through the governance structures. The Strategy Board will delegate responsibilities and delivery to the WYATR Network and day to day decision making via the Senior Programme Managers.

The Board was informed that the next steps include:

- Securing additional resources to coordinate the work
- Develop a Kirklees adversity, trauma, and resilience action plan that compliments West Yorkshire ATR strategy
- Develop a steering group that can develop a Kirklees approach to tackling this ambition
- A proposed training development session for senior leaders to further understand the approach

RESOLVED

That the officers be thanked for providing an update on Trauma Informed Practice in Kirklees.

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45 Responding to strategic and current tactical workforce issues in Kirklees

Karen Jackson, Chief Executive, Locala provided an update on responding to strategic and current tactical workforce issues in Kirklees. The Board was informed that some of the current challenges include:

- National shortage for some specialisms there are issues of national shortage of skilled workers, and this presents pressure in the system, in addition to the pressure caused by people being off with Covid and stress
- Differential pay rates across sectors
- Wellbeing of colleagues
- Impact on capacity
- Destabilisation of system provision
- Impact on quality
- Movement of staff within system with no overall growth of capacity

The Board was informed that there has been a great deal of positive work undertaken much of which has been led by the Integrated Workforce Group. This work has been matched with the wellbeing plan across the whole of the West Yorkshire ICS. There has been a programme promoting the sector in schools. There are health and wellbeing initiatives on-going to maintain the wellbeing of staff and volunteers, while supporting flexibility and caring responsibility to enable people to remain in employment and feel supported.

Partners from across the whole of the sector including the third sector had a time out session and develop some proposals including the following:

- Workforce to represent the community of Kirklees
- System agreement Memorandum of Understanding to be developed outlining Kirklees identity, recognition of continuity of service, 'employ to deploy' models, recruitment for system benefit etc, rotational roles.
- Social care different tiers of workforce to deliver differential complexity of demand (e.g. PEG feeds etc) providing the opportunity for professional development and career progression
- Myth busting between partners broaden understanding and develop trust and respect on all sides

The working group's proposals will be presented in more detail to the Kirklees Integrated Health and Care Leadership Board on the 3rd February 2022, and will include how this is going to be resourced and how is it going to be taken forward and held together in coordinated way.

The Board was asked to recognise the extraordinary effort all health and care colleagues as they continue to care for the communities; to welcome the approach of developing a system wide response to strategic and tactical workforce issues in Kirklees and to agree to receive an update on progress at a future meeting.

RESOLVED

That Karen Jackson, be thanked for providing an update on current tactical workforce issues in Kirklees.

46 Kirklees Place Based Partnership & West Yorkshire Integrated Care System Carol McKenna, Chief Officer NHS Kirklees CCG provided an update on Kirklees Place Based Partnership and West Yorkshire Integrated Care System.

In summary, the Board was advised that there has been a delay in the implementation of the new arrangements. The original target date for the move to the statutory Integrated Care System was the 1st April 2022, however the new target date will be the 1st July 2022. In terms of the implications for West Yorkshire, the general view is that there will be no change in the direction of travel and things have already been put in place to transition into the new arrangement.

There are some technical implications of this and colleagues who work in the areas of finance and governance are the ones most likely to affect by this. For example, finance colleagues having to do two-year end process within the space of three months. The CCGs statutory responsibility will continue until 30th June 2022, and the intention is to operate the new arrangement in shadow form from April 2022.

Transition stage

January – March	Continue the development
April – June	Shadow form
July	Go live

The Board was informed that there have been discussions regarding the name of the partnership in Kirklees and creating an identity that can be used in branding and communications. Through the design group that brings together a number of partners, engagement was conducted in November and 60 responses were received. A clear preference emerged that it should be called the Kirklees Health & Care Partnership. The Kirklees Integrated Health and Care Leadership Board approved that recommendation.

Collaboration agreement in Kirklees

- Each place within the ICS is developing a collaboration agreement which all partners will be invited to sign up to. The agreement sets out how partners will work together to deliver the shared vision and how business will be conducted and sets out support for the collaborative principles.
- Effective from 1st July (seeking partner agreement April-June)
- Entering the agreement does not overrule statutory duties or existing governance arrangements of partners
- Work programme is the Kirklees Health and Wellbeing Plan
- Not legally binding but partners will sign in good faith
- Expectation that it will evolve during 2022/23 and beyond

The Board was informed that some leadership appointments have been made and recently announced. Each of the five places will have a nominated place lead and the official title for the post holder will be the Accountable Officer, and the

appointment to those roles have been made. The other appointment has been to one of the Directors of the ICB Board.

The Place Based Independent Chair and independent members of the ICB Committee in Kirklees are currently out for recruitment. The recruitment process is also underway for the four executive members of the ICB in Kirklees.

RESOLVED

That Carol McKenna be thanked for providing an update on Kirklees Place Based Partnership and West Yorkshire Integrated Care System.