

**Minutes of a meeting of the Health and Social Care
Overview and Scrutiny Committee held on Thursday, 16
February 2023 in Committee Room 1 - City Hall,
Bradford**

Commenced 4.30 pm
Concluded 7.10 pm

Present – Councillors

| LABOUR | CONSERVATIVE | LIBERAL DEMOCRAT | GREEN |
|--|---------------------|-------------------------|-----------------|
| Jamil Humphreys Godwin Wood A Ahmed | Coates | Griffiths | Whitaker |

NON VOTING CO-OPTED MEMBERS

Trevor Ramsay
Susan Crowe

Healthwatch Bradford and District
Bradford District Assembly Health
and Wellbeing Forum

Apologies:
Helen Rushworth

HealthWatch Bradford and District

Councillor Jamil in the Chair

29. DISCLOSURES OF INTEREST

No disclosures were received.

30. MINUTES

That the minutes of the meetings held on 6 October 2022 and 19 January 2023 be signed as correct records.

31. INSPECTION OF REPORTS AND BACKGROUND PAPERS

There were no requests received to view background papers.

32. REFERRALS TO THE OVERVIEW AND SCRUTINY COMMITTEE

No referrals were received.

33. RESPIRATORY HEALTH IN BRADFORD DISTRICT

Respiratory disease as an important cause of ill health and early death in Bradford District. The District performs relatively poorly compared to other areas in England. Recognising this, partners across the District, including the local authority and NHS, have prioritised respiratory health with the aim of improving health outcomes and reducing inequalities.

The report of the Director of Public Health (**Document “W”**) provided an overview of respiratory health in Bradford District and outlined what partners were doing to improve outcomes for people in the District. This was an update of a previous paper presented to this committee on 22nd November 2018.

The Senior Health Protection Manager was in attendance and with the invitation of the Chair, gave a synopsis of the report. He explained that respiratory disease is a leading cause of dying early in Bradford district. Over 500 people die each year from respiratory disease and 25% of these deaths are preventable. The rates of asthma and chronic obstructive pulmonary disease (COPD) in the district are higher than the national average. Outcomes are linked to deprivation and the wider determinants of health with higher rates of hospital admissions from those living in most economically deprived wards.

Respiratory health is an NHS priority – it is one of the priority areas of the Core20PLUS5 approach to support the reduction of health inequalities which is implemented locally by Bradford District & Craven Health and Care Partnership. Bradford Council has implemented public health measures targeting determinants of respiratory health like the Clean Air Zone and the Tobacco Control Alliance.

Proceeding the presentation, a question and answer (Q&A) session ensued:

- What strategy was being considered to tackle inequality?
 - Regionally, the WY Integrated Care Partnership was committed to implementing the NHS CORE20PLUS5 approach to reduce health inequalities. This approach defined a target population (the 20% most deprived as defined by the national Index of Multiple Deprivation) and five clinical areas that required accelerated improvement. Chronic respiratory diseases were one of the key clinical areas, and the focus was on increasing uptake of COVID-19, flu, and pneumonia vaccines to reduce COPD exacerbations and hospital admissions in adults.
- What was the major concern for poor respiratory health in deprived communities?
 - Indicator of quality of care for patients with asthma was the assessment of second-hand smoking status. Exposure to tobacco

smoke as linked to poor control of symptoms and more asthma attacks and this assessment could trigger actions to support family members to stop smoking. There was an increase from 63% in 2020/21 to 73% in 2021/22 in the proportion of patients where such assessment was recorded in Bradford – still, these rates were higher than the national average; and,

- Did other factors impact on poor health?
 - Factors that impact on people’s ability to adapt to the cold may also impact their ability to reduce exposure to respiratory infections, for example through reduced ability to maintain good respiratory and hand hygiene. Particular groups at risk included severe mental illness, dementia and other causes of cognitive impairment, disabilities, being bed-bound, being very young and including drug and alcohol dependencies.

Resolved:-

- (1) That the report be noted and that a further update, to include information on Covid-19, be presented in 12 months’ time; and,**
- (2) That officers be thanked for the informative report.**

Action: Director of Public Health

34. UPDATE ON THE PERFORMANCE OF THE PUBLIC HEALTH 0-19 CHILDREN’S SERVICE (CURRENTLY HEALTH VISITING, SCHOOL NURSING AND ORAL HEALTH SERVICES) FOR BRADFORD DISTRICT

The report of the Director of Public Health (**Document “X”**) set out in brief the demographics of the population of Children in Bradford District, then went on to discuss the Public Health 0-19 Children’s Service and give an update on the recent performance of the service. The paper comprised:

- Demographics
- The Healthy Child Programme
- The Public Health 0-19 Children’s Service in Bradford District
- Performance of the Public Health 0-19 Children’s Service
 - Health Visiting
 - School Nursing Developments 21 - 38
 - School Nursing Performance
 - Workforce

The Director of Public Health presented the report. She explained that early support in infancy and childhood was known to improve life-long health and wellbeing. The Public Health 0-19 Children’s Service in Bradford consists of Health Visiting, School Nursing, and Oral Health promotion, and delivered the national evidence-based Healthy Child Programme. This was aimed at improving the health, wellbeing and development of children aged from birth to the age of 19, and up to the age of 25 for young people with Special Educational Needs and/ or Disabilities (SEND). This paper provided an overview of the Health Child Programme and update on the performance of the current service, including

progress against the recent additional investment.

Proceeding the presentation, a question and answer (Q&A) session ensued:

- How would this be resourced financially?
 - The total Public Health financial envelope for Public Health 0-19 Children's Services in Bradford was £11,784,281 per annum. This as fully funded by the Public Health Ring-Fenced Grant and recurrently available. It was anticipated that NHS pay uplift would be funded through a specific increase to the Public Health grant and would be passed to the provider organisation where appropriate. The Contract end date was 31 March 2024 with an option to extend by a further 12 months;
- How would the team be funded?
 - This team was originally established by BDCFT and funded from non-recurrent monies within the service. The investment from Public Health enabled the team to be retained on a permanent basis;
- What was the core objective of the Vulnerable Children Information Team?
 - This team are responsible for providing Public Health nursing input to acute Strategy Discussion meetings for children at risk of immediate and significant harm. This is a statutory requirement which previously the service had struggled to meet. It involves responding to meeting requests, reviewing a child's clinical record, attending the meeting and contributing to the multi-agency decision-making to regarding a child's safety. Clinical records are then updated. The Vulnerable Children Information Team also work to provide detailed and timely responses to Social Workers requesting health information;
- What was the impact of Covide-19 on the service?
 - Bradford District Care Foundation Trust (BDCFT) held the current Contract for the Public Health 0-19 Children's Service since 1st August 2019. The new Contract was in early stages of delivery and transformation when the Covid-19 pandemic was declared, resulting in a significant impact on plans and delivery. The Service had experienced other challenges during the current contract, including a reduction in overall value of the contract in 2019, increasing safeguarding needs, and staffing challenges caused by recruitment issues and a national shortages of experienced health visitors and school nurses. This all led to significant challenges for the service in delivering some core public health and health promotion activities; and,
- Information on the workforce was sought?
 - There had been significant workforce challenges in the School Nursing and Health Visiting service, in particular with the recruitment of Band 6 School Nurses. This had been exacerbated by a National shortage of qualified staff and an older workforce profile in Bradford, meaning that a number of colleagues had retired. To mitigate this risk, the Service had focused on recruitment, retention and resilience. As a result, additional skill mix into the service with posts now ranged from Band 3, Community Nursery Nurses (Band 4), Staff Nurses (Band 5), School Nurses and Health Visitors (Band 6).

Resolved:-

That the report be noted and that a further performance update be presented in 12 months' time.

Action: Director of Public Health

35. HOSPITAL DISCHARGES AND INTERMEDIATE CARE

The Government have announced two grants relating to assisting the NHS with patients who are delayed in hospital in 2022/23. When receiving a budget related item in December 2022, Corporate Overview & Scrutiny Committee suggested that Health Overview & Scrutiny Committee received a report on how these monies were to be spent.

Bradford & District performs well when benchmarked with similar areas and in the NHS Yorkshire and North Region - and has a well-respected in-house council provision to enable people to leave hospital, when clinically ready.

In parallel, financial pressures within the council and the NHS had led to health and care partners to begin a joint review of our 'intermediate care' offer – which assisted people on a short-term basis to either prevent a hospital admission or expedite a hospital discharge.

The report of the Strategic Director, Health and Wellbeing (**Document “Y”**) updated on how the Government grants were anticipated to be spent, an analysis of current health and care intermediate care offer and detailed on how the review would progress.

Resolved:-

That the information in the report be noted.

36. HEALTH AND SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME 2022/23

The report of the Director of Legal and Governance (**Document “Z”**) presented a draft work programme 2022/23 for adoption by the Committee.

No resolution was passed on this item

LEAD: Overview & Scrutiny Lead

Chair

Note: These minutes are subject to approval as a correct record at the next meeting of the Health and Social Care Overview and Scrutiny Committee.

THESE MINUTES HAVE BEEN PRODUCED, WHEREVER POSSIBLE, ON RECYCLED PAPER