# Coventry City Council

# Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at 10.00 am on Wednesday, 2 February 2022

Present:

Members: Councillor J Clifford (Chair)

Councillor J Birdi

Councillor S Keough (substitute for Councillor Skinner)

Councillor G Lloyd Councillor A Lucas

Councillor C Thomas (substitute for Councillor Lancaster)

Other representatives: Eleanor Cappell, Coventry and Warwickshire Partnership

Trust

Andy Hardy, University Hospitals Coventry and Warwickshire

Phil Johns, Coventry and Warwickshire CCG Esther Meininger, University of Warwick Dr Diane Phimister, Coventry University

Dr Sarah Raistrick, Coventry and Warwickshire CCG

Vickie Rybinski, Coventry University

Rose Uwins, Coventry and Warwickshire CCG

Employees:

V Castree, Law and Governance

J Fowles, Public Health
J Grainger, Public Health
L Knight, Law and Governance

Apologies: Councillors R Lancaster, A Masih, E Ruane and D Skinner

D Spurgeon, Co-opted Member

Councillors M Mutton and G Hayre, Cabinet and Deputy

**Cabinet Members** 

Dr Hannah Friend, Warwick University

#### **Public Business**

#### 24. Declarations of Interest

There were no declarations of interest.

#### 25. Minutes

The minutes of the meeting held on 1<sup>st</sup> December, 2021 were agreed as a true record. There were no matters arising.

#### 26. **Integrated Care System**

The Board received a presentation on the development of the Integrated Care System from Phil Johns, Coventry and Warwickshire CCG, who attended the meeting along with Dr Sarah Raistrick and Rose Uwins, Coventry and

Warwickshire CCG. Andy Hardy, University Hospitals Coventry and Warwickshire was also in attendance.

The presentation referred to the national move to bring health and care organisations together into Integrated Care Systems (ICS) and to the legislative proposals by the Government for a new Health and Care Bill, which built on recommendations in the NHS Long Term Plan. This would establish statutory ICS in each STP/ICS footprint. The proposals were continuing to progress through parliament and were currently at committee stage in House of Lords. In Coventry and Warwickshire partners were already working closely together as a Health and Care Partnership and this was development was seen as what was best for the locality. The Board noted that the earliest Coventry and Warwickshire could become a statutory ICS was July 2022.

The benefits of the ICS were highlighted which included breaking down the barriers between organisations; joining up health and care more effectively to make a difference to people's lives; and addressing the "wider determinants of health" such as poor housing or socio-economic problems and bringing the right resources from across organisations to tackle public health issues such as obesity.

The presentation set out the vision for the local ICS: 'We will enable people across Coventry and Warwickshire to start well, live well and age well, promote independence, and put people at the heart of everything we do' and detailed the proposals for how this would be achieved.

The following three layers made up the structure of the ICS: Primary Care Networks, Place and System and an explanation was provided for each layer. Dr Raistrick highlighted the vision in practice for each of these layers. Enabling everyone to keep well was the System approach to engagement. Pooling knowledge and experience between health and local authorities, working as one team to leverage all connections and reach the diverse communities. Reference was made to the successful partnership engagement carried out during the Covid pandemic.

For Place the vision was to provide the best possible care and the example of improving musculoskeletal services in Coventry was highlighted. All partners across Coventry delivering Musculoskeletal (MSK) services were brought together to design a new model of care - patients first saw a First Contact Practitioner, a specialist physio who could access diagnostics and provide specialist assessment, at a local GP practice. Those patients were assessed through a new Multi-Disciplinary Team (MDT) for MSK triage, made up of experts from different specialties. Patients who would benefit from physiotherapy or similar treatments could be redirected to the correct service directly by the triage team so shortening the process and improving patient experience.

The vision for Primary Care Networks was enabling everyone to keep well and the example of pre-diabetes and weight management at Sowe Valley was detailed. To support weight loss and those at risk of developing type 2 diabetes across the Sowe Valley area, the Primary Care Network hired a full-time health coach to offer one to one and group support about diet, exercise and lifestyle. The coach was based at the Coventry Cricket Club, a central location in the heart of the community offering a non-clinical setting within a healthy living setting.

The presentation provided a chart of how the governance arrangements could work for the Integrated Care System including the place of the Scrutiny Board and the Health and Wellbeing Board.

The presentation concluded with the next steps which involved ongoing work to establish strategies and governance, in collaboration with the population and stakeholders, with the aim the Integrated Care Board and Integrated Care Partnership coming into being on 1st July 2022 and the statutory powers transferring from the Clinical Commissioning Group to the Integrated Care Board.

Andy Hardy, UHCW, outlined his support for the development of the Integrated Care System which was the best way forward for patients and their outcomes.

Members questioned the representatives on a number of issues and responses were provided, matters raised included:

- How would the ICS improve efficiency in the health system
- Would the ICS contribute to the aim of enabling people to remain in independent living in their home for as long as possible rather than going into care
- Information about equality and inclusion in the new system
- The need to improve the process of patient discharge from hospital to the home environment with the right medical community support package in place
- Concerns about the availability of out of hours pharmacy services in relation to patients requiring prescriptions; delays at the hospital pharmacy that can delay patient discharge; and the need for a 'one Coventry' approach
- Concerns about the costs to residents of healthy eating items as compared to the costs of unhealthy foods
- Concerns about residents/ patients who don't have access to IT and a reference to the Connecting Sherbourne IT project.

#### **RESOLVED** that:

- (1) The contents of the presentation be noted.
- (2) A report on how inclusion is being addressed and progressed within the Integrated Care System to be submitted to a future meeting.
- (3) A report on plans to improve the system to ensure patients fit for discharge can leave hospital without delay, knowing that the appropriate support package has been put in place to be submitted to a future meeting.
- (4) Details about the Council's IT project 'Connecting Sherbourne' be circulated to the health partners.

## 27. Mental Health and Suicide Prevention Transformation Programmes

The Board considered a briefing note of the Director of Public Health and Wellbeing which provided an update to the Board on the progress made on the recommendations of the scrutiny review undertaken on suicide prevention and the

subsequent task and finish group report on mental health support for students. The note also updated on the implementation of the Coventry and Warwickshire community mental health transformation programme 2021-2024.

Dr Diane Phimister and Vickie Rybinski, Coventry University, Esther Meininger, University of Warwick and Eleanor Cappell, Coventry and Warwickshire Partnership Trust, attended the meeting for the consideration of this item and the Board received presentations from both universities regarding their mental health support for students and viewed a video on the NHS Community Mental Health Transformation.

The briefing note referred to the Coventry Suicide Prevention Strategy 2016-19 Forward Plan. In January 2020 the Health and Wellbeing Board reviewed the delivery of this strategy and approved a refreshed action plan for 2020-21. Reference was made to the funding secured from NHS England to respond to prevalence rates in the city and the most recent suicide data showed that the rates in Coventry dropped slightly from 2017–2019 at 10.6 per 100,000 (England 10.1) to 2018–2020 at 10 per 100,000 (England 10.4).

Legacy activity from the strategy and NHS England funding programme had now been devolved to the Coventry and Warwickshire suicide prevention steering groups. Local strategies, partnership arrangements and action plans were currently being reviewed. Consultation with the respective Coventry and Warwickshire suicide prevention multi agency steering groups during November and December 2021 identified that many of the partners were duplicating resources in both areas, consequently it was recommended that a single Coventry and Warwickshire Suicide Prevention Strategy be developed. Proposals for this joint strategy were outlined.

The briefing note referred to the student mental health support at Coventry University. Over the last 2 years the University had been part of a local system response set up to improve access to University, community, and NHS mental health support for students. The University implemented a Covid response and contributed to the delivery of mental health and suicide prevention plans across Coventry and Warwickshire. A health and wellbeing strategy and a recently refreshed mental health strategy drove the Universities approach. As part of this, the University had submitted a funding bid to the Office for Students last year to develop and expand culturally appropriate mental wellbeing support for international students and those from minority ethnic backgrounds (57% of the student population). Information was provided on the current wellbeing services which provided access to counsellors. Reference was made to the work of the team of mental health advisors.

The briefing note also highlighted the student mental health support at Warwick University referring to the recent restructuring of its wellbeing services to better meet needs which were implemented for the 2019-20 academic year. This investment in student wellbeing was £2.7m with the review and re-structure responded to feedback from students. The benefits of the restructure were detailed. In addition, a Wellbeing Strategy had been approval by the University Council on 20 May 2020. It was now in the second year of implementation and had a strong focus on Prevention and was published on the university website. The Board were informed that the average spend per student was approximately £90.

Information was provided on the POD Community Connections Project which was funded by NHS Charities Together. The project involves 1:1 intensive work by a dedicated worker with students (18-25) in secondary mental health services for up to 40 weeks, funded for 12 months from September 2021. The project had been effective because the officer sat within The Pod team so had a supportive professional infrastructure, a unique knowledge base, an established working relationship with sector experts, and authentic connection with the City. The impact and outcomes of the project were summarised.

The briefing note provided an update on the Coventry and Warwickshire Community Mental Health Transformation Programme, a ground-breaking, once in a generation transformation programme of Adult Community mental health services for the locality. Key principles were a new community-based offer to include greater access to psychological therapies, improved physical health care, employment support, personalised and trauma informed care, medicines management and support for self-harm and co-existing substance use, enabling individuals to have greater choice and control over their care, and to promote meaningful recovery. Key patient cohorts were those with a Severe and Enduring Mental Illness (SMI) who needed Early Intervention in Psychosis (EIP) and complex mental health difficulties associated with a diagnosis of 'personality disorder', mental health rehabilitation and adult eating disorder. The project outcomes were highlighted as follows:

- The new model would provide people with SMI with easier and faster access to services delivered at neighbourhood level by a range of partners across health, social care, and voluntary, community and social enterprises (VCSE).
- Access to care would be broadened, moving away from risk, diagnosis, and care clusters, to quicker access to interventions.
- The model would be trauma informed.
- Waiting access time standards would be established to aid and promote recovery.
- People would not need to repeat their story as integrated care records would be core to the model.

Further information was provided on the partnership working and additional developments included in the programme.

The presentation for the representatives from Coventry University provided an overview of the student mental health support; highlighted progress with services that were commissioned with reference to other mental health services in the city (enabling pathways to be identified and transition between services smoother); set out additional training being given to academic and pastoral staff; informed about how admissions policies enabled the identification of existing mental health issues specifically as part of the admissions process to allow for the support to be provided; reported on the additional focus on international students' mental health and wellbeing; and outlined how the findings of the Task and Finish Group were being reflected in the mental health and wellbeing strategies. Progress and examples were provided for each of these areas.

The presentation from the representative from Warwick University provided a profile of the university; referred to the review, restructure and implementation of wellbeing services between 2018-2020; detailed the wellbeing strategy including

strategic priorities; informed of prevention work as detailed in the safer suicide strategy and action plan; highlighted the support available to students; and provided additional information on the safer suicide strategy and action plan.

Members questioned the representatives and officers on a number of issue and responses were provided, matters raised included:

- Details about how the Universities could find out about the mental health of international students
- What were the early signs to look out for indicating a student might be having problems
- Were tutors trained to spot the warning signs
- The causes of depression
- What was the approximate percentage of students with mental health problems
- How successful were the support measures in enabling students suffering with their mental health to complete their degrees
- How did local GPs cope with the numbers of students experiencing mental health issues.

#### **RESOLVED that:**

- (1) The proposal to develop a single Coventry and Warwickshire Suicide prevention strategy by the Autumn of 2022 be endorsed.
- (2) The progress to date on the work to support student's mental health led by Coventry and Warwick Universities, and supported by projects such as the PODs community connections for 18–25-year-olds in secondary mental health services be noted.
- (3) The progress against the implementation of the community mental health transformation programme be noted.
- (4) The contents of the presentations from Coventry and Warwick universities, and the video from CWPT be noted.

### 28. **Work Programme 2021-2022**

The Board noted their work programme for the current municipal year.

#### 29. Any other items of Public Business

There were no additional items of public business.

(Meeting closed at 12.05 pm)