

Healthier Communities and Adult Social Care Scrutiny and Policy Development Committee

Meeting held 26 January 2022

PRESENT: Councillors Steve Ayris (Chair), Sue Auckland, Vic Bowden, Lewis Chinchon, Alan Hooper, Francyne Johnson, Bernard Little, Ruth Mersereau, Ruth Milsom, Garry Weatherall, Alan Woodcock and Dianne Hurst (Substitute Member)

Non-Council Members (Healthwatch Sheffield):-

Lucy Davies

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1. APOLOGIES FOR ABSENCE

1.1 Apologies for absence were received from Councillors Talib Hussain and Abtisam Mohammed. Councillor Dianne Hurst attended as substitute for Councillor Hussain.

2. EXCLUSION OF PUBLIC AND PRESS

2.1 No items were identified where resolutions may be moved to exclude the public and press.

3. DECLARATIONS OF INTEREST

3.1 In relation to Agenda Item 8 (Adult Dysfluency and Cleft Lip and Palate Service) (Item 7 of these minutes), Councillor Vic Bowden declared a personal interest by virtue of her having a long connection with the Service and had served as a Trustee.

4. PUBLIC QUESTIONS AND PETITIONS

4.1 Sharon Milsom attended on behalf of Sheffield Save Our NHS and asked the following question concerning the South Yorkshire Integrated Care Board:

“South Yorkshire Integrated Care Board (SYICB) will take responsibility for all health and care decision making from all South Yorkshire local areas in July.

SYICB membership should (amongst others) include Councillors from each local authority, representatives from Social Care, Mental Health, Public Health, Community Health, Primary Care, Acute Health, Carers and Trade Union

representatives.

Private sector providers of NHS funded health services should be ineligible for SYICB membership.

Will Sheffield City Council support the above proposals to demonstrate there is accountability to the public, patients and staff; to ensure openness and transparency in the SYICB decision making, including public access to Board papers and Board meetings and allow public questions?

Will the Healthier Communities and Adult Social Care Scrutiny Committee ask the Integrated Care Board what is happening with regard to allowing such public access and accountability, and also to determining the composition of that Board?"

- 4.2 The Chair (Councillor Steve Ayris) stated that the development of the ICS had been considered at a previous meeting of the Committee and it had been decided that a Scrutiny ICS Liaison Group be established to monitor how the South Yorkshire Integrated Care System would be introduced and there had been a number of recommendations which had touched on some of the issues raised by the questioner. Councillor Ayris said that the Committee had noted the questions and would raise them at the next meeting of the Liaison Group which was due to be held on 1st February. He also said that he would provide the questioner with a written response.
- 4.3 The Policy and Improvement Officer (Emily Standbrook-Shaw) said that she would forward to Sharon Milsom, a copy of the minutes of the meeting at which the subject of private providers had been raised.
- 4.4 Councillor Ruth Milsom said that a Notice of Motion regarding "Protecting Patients and Staff after NHS Changes" had been put before the December 2021 meeting of full Council and recommendations arising from this had been forwarded to the ICS Board.

5. MINUTES OF PREVIOUS MEETING

- 5.1 The minutes of the meeting of the Committee held on 24th November, 2021, were approved as a correct record.

6. GREEN PRESCRIBING

- 6.1 The Committee received a report on Green Prescribing, which gave a brief outline of community wellbeing (People Keeping Well) and social prescribing in Sheffield, provided examples of green prescribing in Sheffield, and outlined how the NHS was providing funding to assist with green and blue prescribing and the role of the Council's Parks, Woodlands and Countryside Service in managing the green assets/space which directly contributes to the wellbeing of Sheffield's citizens.
- 6.2 Present for this item were Lewis Bowman (Voluntary Action Sheffield), Jon Dallow

(Woodland Project Officer, Sheffield City Council), Emma Dickinson (Commissioning Manager, Sheffield City Council), Sue Pearson (Heeley City Farm), Amy Simcox and one other Officer (Sheffield Wildlife Trust).

- 6.3 Emma Dickinson stated that in Sheffield there had been a long understanding that health and wellbeing was determined by the circumstances into which people were born, grew, educated, lived and worked, as well as the friendship groups they developed, alongside the medical support received. She said that voluntary sector organisations have worked alongside primary care to deliver social prescribing within the city for over 10 years. Ms Dickinson said that the People Keeping Well initiative was the city's community wellbeing approach, which was jointly funded by the City Council and Sheffield Commissioning Group by approximately £1.5m, to help with projects such as Heeley City Farm, Southey/Owlerton Area Regeneration (SOAR), Manor Castle Development Trust, Darnall Wellbeing, Woodhouse Community Trust and many more. Over the past three years, Primary Care Networks, in partnerships of GP surgeries, had been funded through NHS England to have social prescribing link workers. Green prescribing encouraged people to do more activities outside and connect with "natureness" to improve health and wellbeing. She stated that the Government had agreed to fund seven Integrated Care Systems (NHS) to test and learn about green and blue prescribing, and the South Yorkshire and Bassetlaw ICS had been successful in securing funding to develop an insight into exploring and bringing together opportunities for communities to get involved in their natural environment and there were many projects which had secured grant funding from the ICS.
- 6.4 Jon Dallow stated that the pandemic had highlighted how being outdoors and connecting to nature had contributed to people's wellbeing and more people were using outdoor spaces. He said that the priority of the Parks, Woodlands and Countryside Service was to maintain the asset that Sheffield had as a green city and maximise community value and raise accessibility standards. He referred to the map in the report which showed 800 places that the Service manages on behalf of the city. He said that people now needed to feel confident and safe, and that the natural environment should be part of schools' curriculum. Jon Dallow stated that the challenge for the local authority was to look across the whole of the city, as although many green spaces were available, not all were easily accessible to everyone and there were more toilets and accessible facilities that provide refreshments in the west of the city than in the east. There needed to be levelling up and work was being carried out with communities to help them engage in green spaces. He referred to projects currently underway to bring the network of opportunities together for all communities to enjoy the city's hills, meadows, canals, parks, allotments, river valleys or moorlands and that these spaces were safe, welcoming, accessible and well maintained.
- 6.5 Sue Pearson stated that Heeley City Farm had been established for 40 years and felt lucky that, during the pandemic, managing farms, local care, looking after animals etc. was protected so the farm had been able to carry on working. She said the Farm aligns with people living in areas of deprivation by improving their mental health and wellbeing, as well as people from other countries who, until they had settled status, needed something to do, something to occupy them, to feel engaged and activities at the Farm offered that. She said that there were 45

workers at the Farm as well as regular volunteers and gardeners who manage a range of community gardens and any excess food grown and not distributed through its regular outlets, was donated to food banks. Excess food was also delivered to families in need during school holidays. Another project was Animal Therapy, whereby staff of the Farm take goats into care homes.

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- 6.7 Amy Simcox stated that her organisation had engaged with service users to find out how green prescribing could help them, to discover what helped them and what was available and one of the outcomes from this was the importance of having nature available on the doorstep. She said it was also important for green spaces to be more easily accessible by public transport. The Wildlife Trust was engaged in developing hubs and networks and bringing them together so that they could share knowledge and develop the green prescribing initiative. Ms. Simcox outlined projects that were being carried out around Sheffield and Rotherham using Lottery Funding and she gave instances of how these projects were benefitting people, by making small changes to their lives and connecting them with other people had a huge impact on them.
- 6.8 Members made various comments and asked a number of questions, to which responses were provided as follows:-
- Sheffield Parks, Woodlands and Countryside Service had a number of Land Managers and Blue Space Managers within the city, looking after and developing land space, green space, hubs, sports centres, all of which required toilet facilities and defibrillators, for which some public health funding had been received. He referred to the Better Parks Programme which it was hoped would be able to provide better facilities and concession rates in park cafes. It was acknowledged that due to the natural landscape of the city, it was difficult for all areas to be accessible to all, but technology was having an impact through the introduction of adapted bikes and scooters at some locations.
 - Heeley City Farm boasted a dementia garden and the footpaths have been widened to make the garden more accessible for wheelchair users.
 - Communities in the north-west of the city were engaging in activities to provide funding to purchase defibrillators and make them more readily

available.

- Access to open water swimming was an ongoing conversation mainly due to health and safety. Open swimming used to be available in the lidos at Longley Park and Millhouses Park but these were now closed to the public. The Parks, Woodlands and Countryside Service received annual requests for Crookes Valley Park to be used for open swimming but that was not possible due to risk and capacity. Last year, Yorkshire Water had one tragedy by someone swimming in one of its reservoirs in North Yorkshire, so it was now having to deploy security guards in an attempt to stop members of the public swimming in its reservoirs. Swimming in cold water was a very emotive subject due to the dangers around it, but risks could be addressed through education. It was acknowledged that there was a desire nationally to enable people to swim in open water, but due to the many risks around it, there was no easy solution.
- In order to create open networks, the City Council was working with the Integrated Care System (ICS) in an attempt to use the NHS funding as a launchpad to pull in other investment for green prescribing, but there was no clarity on whether there would be extension to funding. It was clear that stop/start funding was not the way forward, the Council needed to find the best way to build and invest in green prescribing.
- With regard to the infrastructure, Covid had shown the need for green space and connectivity. One of the problems faced by people was that once in green spaces, what do we do when we get there, how do we know what to do or where to go. The City Council had been in discussions with the City Region, and whilst transport planners were working very hard to improve transport links into the city, there was also the need for better transport links for people to access open spaces.
- Last summer, the local authority had the perfect opportunity to deliver outside activities and one of the most oversubscribed events was tree climbing and there was a need to develop connecting to nature events in the city.
- There was a strong drive in Public Health to create more holiday activities for schoolchildren and also to encourage more school gardens and investigate ways of preventing the produce dying when schools were closed.
- People Keeping Well (PKW) was a community-based prevention activity that can help to prevent and delay people needing to access health and social care services. The PKW Partnerships met regularly to consider how they could work together to support the community to live well and tackle local issues. Each partnership was led by a local voluntary sector organisation such as ZEST in Stannington, the Stocksbridge Leisure Centre Age UK, SOAR, Manor and Castle Development Trust, Heeley City Farm, Reach South Sheffield and the Woodhouse and District Community Forum. In the High Green/Chapelton area, projects were being undertaken

alongside the Parish Councils with structured activities being carried out. Active Travel Sheffield was encouraging people to walk more. The Council was happy to bring its partners to Local Area Committee meetings to give more details of activities available in all areas of the city.

- All activities haven't rolled out everywhere, there was a need for more signposting to build relationships and networks. The City Council does fund according to deprivation levels due to not all areas having the same opportunities.
- As part of the ICS funding, the Wildlife Trust was exploring ways to strengthen what was already in place.
- The ability to use an online directory was not always the answer as some people were digitally excluded and as there was an overkill of printed information, there was a need to co-ordinate all the guides together. AS Sheffield was lucky to have so much green space, the Sheffield Wildlife Trust was planning to have a comprehensive guide available by March, 2022.
- There were 65 "Friends of" groups across the city who were keen to look after green and open spaces but who may not want to be totally inclusive in getting other people engaged and involved in similar activities due to the nature and diversity of what people enjoy and want to do. With the nature emergency in the city, the City Council, by working together with the many voluntary organisations within the city, were hoping to help and educate people to connect with the natural world through nature-based activities, and to learn to value, protect and enhance green and open spaces and the environment.

6.9 RESOLVED: That the Committee:-

- (a) thanks Lewis Bowman, Jon Dallow, Emma Dickinson, Sue Pearson, and Amy Simcox for attending the meeting; and
- (b) notes the contents of the report and responses to the questions raised.

7. ADULT DYSFLUENCY AND CLEFT LIP AND PALATE SERVICE UPDATE

7.1 The Committee received an update on the Sheffield Children's NHS Foundation Trust's current position regarding the Dysfluency (Stammer) and Cleft, Lip and Palate Services for Adults within Sheffield. The report set out the current position, detailed the engagement activities being undertaken and identified the next steps to be taken.

7.2 Present for this item were Kate Gleave (Deputy Director, Commissioning, NHS Sheffield Clinical Commissioning Group (CCG) and Dr. Jeff Perring (Sheffield Children's NHS Foundation Trust) (SCNHSFT).

7.3 The Chair stated that two public questions on this matter had been received and it was decided to hear these before the report was presented to Members.

7.3.1 Kirsten Howels, representing STAMMA (the British Stammering Association)

“We are grateful to the Children’s Trust in Sheffield for overturning their earlier decision to close the stammering service to new adult referrals from January 2022 and for committing to continue to take referrals until there is suitable adult provision in place in Sheffield. We are also grateful to the CCG for inviting STAMMA to join the Task and Finish Group – an invitation which we’ve accepted with enthusiasm.

Although STAMMA is taking an active role in this consultation, the inner workings of the CCG are not easy to understand and the longer-term processes and procedures feels opaque to those not familiar with them. For the purposes of clarity, we have two questions relating to the next steps outlined in the documents pack...

We note that on page 26 of the documents pack for this meeting it states, “Key wider stakeholders also need to be heard to ensure that possible future options can be considered for service delivery”. Who are the “key wider stakeholders” referred to here?

And on page 27, it states “The outcome of the further involvement will enable us to consider appropriate next steps in line with our statutory obligations and moral duties which will lead to the development of possible future options for consideration.” What might such “appropriate next steps” involve?

7.3.2 Kate Gleave responding to the first question and stated that the CCG and its providers had a legal duty to those who use the Service. She said that the key wider stakeholders were teenagers, people who had been recommended to the Service, people with long covid, those working in Primary Care, the wider South Yorkshire area including Rotherham and Doncaster, staff working within the Service, health professionals and Local Area Committees. In response to the second question re “Next Steps”, Ms. Gleave stated that the process that had been followed was robust and the CCG was confident that the data used was comprehensive. To establish appropriate next steps, it was important to find out what the wider cohort needed.

7.3.3 Isabel O’Leary retired Speech and Language Therapist, Clinical Lead in Disorders of Fluency 1993 to 2021

I am appreciative of the fact that the Children’s Hospital Trust’s Executive Team have decided to re-open the service to adults who stammer and will continue to take referrals as is stated on page 25 “until there is suitable adult provision in place in Sheffield”.

I will be happy to be involved in a Task and Finish Group organised by the CCG in conjunction with the Children’s Trust as I hope we all want to ensure that adults who stammer can receive the best possible NHS Service.

My offer was accepted by the SLT service to return part time from retirement for 3

months in order to see the patients whose referrals had been rejected when the service was closed from April to August 2021. I offered appointments to 15 adult patients according to their expressed wishes. All of these were through telehealth (ie video appointments) as I have been operating throughout the pandemic. I asked for and gained valuable feedback from these patients on various aspects of their experiences both of stammering and the services offered and several of them are happy to speak directly to the CCG.

Previous to the pandemic all people who stammer, whether children, teenagers or over 16s were seen at a community clinic separate from the main Children's Hospital site. This has a waiting area for teens and older people slightly separate from the main waiting area and the clinic rooms are suitable for all ages.

My questions are:

(1) To the CCG and Children's Trust

In the process of looking for the best NHS service to Sheffield over 16s who stammer, can you clarify whether all options will be considered, including the status quo? As the Children's Hospital Trust are quoted on page 26 as being of the view that it is "not in the best interest of adults to be seen in a paediatric setting and care should be transitioned to adult services as per other services" it appears that the status quo is being discounted from the start of this review. Is this the case?

(2) To the Scrutiny Committee

I have found it helpful to have the independent oversight of this Scrutiny Committee throughout this review of the Speech and Language Therapy Service to over 16s who stammer or have cleft lip and palate. May I seek reassurance that this kind of oversight and scrutiny will continue after the transition to the Modern Committee System?

7.3.4 Kate Gleave stated that whilst a review was ongoing to identify gaps in the CCG's and the Trust's knowledge relating to patient experience that would enable the development of a robust involvement plan, all options would be considered, but it was not known whether "status quo" could be an option and the CCG and Trust would only proceed with viable sustainable options. Dr. Jeff Perring stated that the Trust would look at all available options and work closely with the CCG.

7.3.5 The Chair stated that, with regard to the question around Scrutiny, it was difficult to answer as the Council was in the process of reviewing its Governance system and it was not yet known whether or where Scrutiny would sit within that system. He said that a copy of these questions would be put before the Governance Committee. He said that a Working Group had been set up to look at how scrutiny would fit into the new system. The Policy and Improvement Officer stated that the City Council had a statutory health scrutiny function and as such would continue.

7.3.6 Kate Gleave extended an invitation to Isobel O'Leary to sit on the Task and Finish Group and said that she would inform her of the date and time of the next meeting of the Group in due course.

7.4 Kate Gleave presented the report to Members and highlighted a couple of points. She said that the dysfluency (stammer) and cleft, lip and palate services for adults had not ceased and would continue to take referrals until there was suitable adult provision in place in Sheffield. She said that all available information had been reviewed although it was still unclear what people wanted from the Service, but it was clear that there still needed to be a service in the city. Kate Gleave referred to the developing Involvement Plan, which would enable the CCG and the Trust to capture the experience and preferences of people who have used the service in the past, those who are current patients and those who are potential patients.

7.5 Members made various comments and asked a number of questions, to which responses were provided as follows:-

- The Sheffield Children's Hospital was a paediatric trust for children and young people and has been for many years. Work between the Children's Hospital Trust and Sheffield Teaching Hospitals Trust had been carried out to remove children from the adult services and vice versa, so that each Service could concentrate on its core business. It was felt that adults should receive treatment in an adult environment.
- There was a lack of information on all options available, however if the preferred option was "no action" the Sheffield Children's Hospital Trust would look further into this.
- The use of services such as Pathways, Head Injuries Unit and the Neurological Service was a potential option and there was a need to evaluate this as an option.

7.6 RESOLVED: That the Committee:-

- (a) thanks Kate Gleave and Dr. Jeff Perring for attending the meeting;
- (b) notes the contents of the report and the responses to the questions raised; and
- (c) hopes that this matter will continue to be monitored in the Governance system post May.

8. DRAFT WORK PROGRAMME

8.1 The Policy and Improvement Officer (Emily Standbrook-Shaw) gave an update on the Work Programme and Members were asked to identify issues they are interested in taking forward to future meetings.

8.2 RESOLVED: That the Committee approves the contents of the Work Programme.

9. DATE OF NEXT MEETING

- 9.1 It was noted that the next meeting of the Committee would be held on Wednesday, 16th March, 2022, at 10.00 a.m., in the Town Hall.