

Meeting:	STRATEGIC ADVISORY BOARD
Date of meeting:	13/10/2021
Location:	Zoom Meeting
Board members present:	Adrian England (AE) - Chair Mark Smith (MS) - Vice Chair Margaret Lindquist(ML) Wendy Hardcastle (WH) Margaret Baker (MB)
Attendees:	Lesley Cooper (LC) - Manager (Minute taker)
Apologies:	Christine Key (CK) Tony Alcock (TA) Ian Guest (IG)
1.Welcome and Introductions	AE welcomed everyone to the meeting.
2.Declarations	AE declared that he is the Independent Chair of Barnsley Mental Health Forum (BMHF)
3.Minutes from the previous meeting	Approved
4.Matters arising/Action log	None
5.Staff Update	<ol style="list-style-type: none"> 1. LC had sent Board Members an update prior to the meeting outlining some changes for consideration. 2. Staff recruitment on hold until we are sure what skills and positons we need to recruit to. The Board members support this. 3. LC also wanted to explore the possibility of using the premises at Queens Road as it was nearer to the town and may increase footfall. LC to look at cost implications and bring back to the next meeting.
6.Safeguarding	<ol style="list-style-type: none"> 1. MS reported that hoarding was becoming an issue 2. MS proposed that for any future data returns for the Performance Quality Management Assurance sub-group (PQMA) LC be invited along to present. MS also proposed

	<p>that LC presents to the Safeguarding Board once a year during the first quarter an update on training and supervision received by staff, volunteers and champions which relate to safeguarding this will negate the need for quarterly returns. The Board approved.</p>
<p>7. Barnsley Hospital</p>	<ol style="list-style-type: none"> 1. ML has attended 2 Urgent & Emergency Care Board (UECB) meetings and had a 121 meeting with Bob Kirton for which she would like to record her thanks as he was able to clarify parts of the meetings and ensure that ML understood the finer details. 2. SDEC is now open and functioning with full access to CT and MRI scanning. AE pointed out that The Glass Works in Barnsley has just been approved as one of the pilot sites for the new Diagnostic Hubs, but will not have access to CT and MRI scanning which is disappointing. 3. Barnsley Federation are looking to re-instate the GP Service in A&E 4. Residents are being encouraged to use i-HEART service instead of presenting at A&E. Struggling to fill GP slots especially at weekends. 5. The CCG have 26k for new comms. Some of this will be spent to give information on children's respiratory problems as there is expected to be an increase this winter. 6. Paediatrics Emergency Care Unit is now up and running, it is having a positive effect and there has been a significant reduction in admissions. 7. YAS has seen a 30% increase in emergency calls, and they are currently working on a average of 43 mins transfer time. They have a significant number of staff leaving the service or taking time off sick due to pressures. They have recently done a new recruitment drive and hope to have a new pool of staff on-board towards the end of September to help cope with the winter pressures. 8. Mental Health is also suffering from staff shortages due to covid and pressures. There has been a significant increase in referrals for eating disorders and this is reflected nationally, caseloads have doubled and it would be unsafe to accept any more referrals. 9. Social Care, again staffing problems with carers difficult to recruit in the current climate, leading to provider failures and reablement staff being used to fill the gap, this will in turn have a knock-on effect with patients being discharged from hospital. It is also worth noting that staff are currently being lost to better paid opportunities in the retail sector. 10. There are concerns about Primary Cares ability to cope with the added winter pressures, staff are under constant pressure from the press and public to see more patients face to face now the covid restrictions have eased. There is currently a recruitment drive for clinical advisors to

	<p>relieve some of the pressure. CCG is looking into a publicity drive to show the public the current challenges being faced by GP Practices.</p>
8. Carers	<ol style="list-style-type: none"> 1. Barnsley Carers Strategy 2021-2026 is currently going through the approval stages and it is hoped to be signed off shortly. 2. It has been agreed to hold fortnightly meetings until the end of January. 3. There needs to be regular reminders that our “unpaid” carers currently save the state over £530 million a day.
9. Cancer Care	<ol style="list-style-type: none"> 1. ML was unable to attend the September meeting for the Living with Cancer and Beyond project, apologies were sent. 2. WH attended the Behavioural Insights Group meeting on behalf of ML. Very interesting meeting, talked about the decline in people presenting with cancer symptoms during covid and how new ideas were being put forward to try and get people to come forward. There are 3 sites in Barnsley which are being used to “nudge” people for example it could be a volunteer at a foodbank who notices that one of the regular clients had been coughing for a few weeks so they could start the conversation “Oh you’ve had that cough for a weeks now and it doesn’t seem to be getting any better - perhaps you need to see a GP” There will also be a referral process in place so these people can be fast tracked to a GP appointment.
10. Mental Health	<ol style="list-style-type: none"> 1. MS in now a member of the Crisis Care Group at ICS level, 6 task and finish groups will be set up from this. There are different definitions as to what is a Mental Health Crisis which some Mental Health providers feel an Emergency Department should use. These would restrict Mental Health Crisis to a crisis which only results in a detention of a person to an inpatient unit. This is not the definition used in Barnsley or by SWYFT, whereby a Mental Health Crisis could range from issues that can be resolved as Social Prescribing, through Primary Care, community mental health through to inpatient 2. It is felt that Sheffield will not open the section 136 suite if they don’t have an inpatient (S140) bed and this then impacts on the other towns Doncaster, Rotherham and Barnsley S136 beds. 3. 12 new mental health nurses are to be recruited to share between new Mental Health Response Vehicles (MHRV). Between 1 and 4 in South Yorkshire. 4. Hull is currently engaged with a pilot for the new MHRV, at present this is with additionally trained paramedics with no access to patient notes. YAS are trying to complicate the

	<p>pilots but this has been pushed back. The chosen design for the vehicle is a people carrier with a separate driver compartment, it will have panic strips fitted and central locking - it is a fab specification but there is an 8 to 10 months lead time before it goes to YAS for their marking up.</p> <ol style="list-style-type: none"> 5. Barnsley has changed the way it operates the S136 suite and this is working well using business continuity arrangements The Intensive Home Based Treatment Team is providing cover from 8pm to 8am daily. This is not a long term solution. A Police telephone triage system is now in place, in the first ten days, it has resulted in three possible S136 detentions not being made. 6. Children & Young People non-medical place of safety currently being set up and run by Chilypep. 7. Adult mental health crisis café, not sure if this has gone out to tender yet as there was no representation from Barnsley CCG at the last meeting, nor if it will operate for more than one night a week. 8. The Mental Health Strategy has been presented to the Health and Wellbeing Board - this has been accepted going forward and members are able to write and ask for clarification on certain points if required. 9. There continues to be problems with Crisis Care and it is not right that residents are transported to hospital via a police car. Need to work on providing the right transport and destination as S136 or hospital Emergency Department isn't always the right place for the person to be.
<p>11. Future Plans</p>	<ol style="list-style-type: none"> 1. LC talked through the future plans mentioned in her report which included looking at staffing and skills over the next few weeks. There are also some engagement activities and ideas including <ul style="list-style-type: none"> • Healthwatch service relaunch in each of the 6 neighbourhoods • Pop up activities at the 2 Community Shops (Goldthorpe and Athersley) • Increased presence on social media • Drop in clinics at Queens Road 2. LC to look at budgets with a view to updating the technology and promotional items - staff are currently using their own laptops and mobiles. 3. LC currently talking with Healthwatch England regarding a piece of commissioned work with NHSE&I on carers and discharge to access.
<p>12. Integrated Care system(ICS)</p>	<ol style="list-style-type: none"> 1. Plans for the new structure are continuing at pace, there are 3 tiers to how the ICS will operate <ul style="list-style-type: none"> • System - South Yorkshire wide • PLACE - Barnsley • Neighbourhood - Ward level

	<ol style="list-style-type: none"> 2. The Government has issued 888 pages of guidance which are currently being worked through. 3. Healthwatch Barnsley currently have a good relationship at PLACE and System level. 4. South Yorkshire are the first ICS to select a CEO, details are not yet in the public domain but AE can confirm the preferred candidate is from out of the area. 5. Pearse Butler has been appointed as the Independent Chair of SY&B ICS and designate Chair of the new SY ICS from April 2022. 6. The Barnsley Place Agreement (version 10) lays out the rules for the partnership going forward. The Board unanimously accepted the agreement.
13. HR and recruitment	1. Covered in staff update
15. Any other business	1.NA
9.Date of Next Meeting	Wednesday 10 th November 2021 @ 10.30am via Zoom

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