

HEALTH AND WELLBEING BOARD
11th November, 2020

Present:-

Councillor David Roche	Cabinet Member, Adult Social Care and Health (in the Chair)
Ben Anderson	Director of Public Health, RMBC
Steve Chapman	South Yorkshire Police
Lesley Cooper	Healthwatch Rotherham
Dr. Richard Cullen	Strategic Clinical Executive, Rotherham CCG
Chris Edwards	Chief Operating Officer, Rotherham CCG
Councillor R. Elliott	Health Select Commission
Jo Hinchliffe	Adult Social Care (representing Anne Marie Lubanski)
Shafiq Hussain	Chief Executive, Voluntary Action Rotherham
Suzanne Joyner	Strategic Director, Children and Young People's Services
Sharon Kemp	Chief Executive, RMBC
Councillor J. Mallinder	Improving Places Select Commission
Dr. Jason Page	Governance Lead, Rotherham CCG
Kathryn Singh	RDaSH
Jacqueline Wiltschinsky	Head of Service Public Health
Paul Woodcock	Strategic Director, Regeneration and Environment
Michael Wright	Deputy Chief Executive, Rotherham Foundation Trust (representing Richard Jenkins)

Report Presenter:-

Kate Green	Public Health Specialist, RMBC
------------	--------------------------------

Also Present:-

Jessica Brooks	Public Health, RMBC
Polly Hamilton	Assistant Director, Culture, Sport and Tourism
Chris Siddall	Team Leader, Culture, Sport and Tourism
Becky Woolley	Policy Officer, RMBC
Dawn Mitchell	Governance Adviser, RMBC

Apologies for absence were received from Gill Hunt (NHS England), Richard Jenkins (TRFT) and Anne Marie Lubanski (RMBC).

117. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

118. NEW MEMBERS - SUZANNE JOYNER AND BEN ANDERSON

The Chair welcomed Suzanne, Strategic Director, Children and Young People's Services, to her first meeting of the Board and Ben Anderson, newly appointed Director of Public Health who would be joining the Authority in the New Year.

119. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no members of the public and the press present at the meeting.

120. COMMUNICATIONS

There were no communications to report.

121. MINUTES OF THE PREVIOUS MEETING

The minutes of the previous meeting of the Health and Wellbeing Board were considered.

Resolved:-

That the minutes of the previous meeting held on 21st October, 2020, be approved as a correct record.

122. UPDATE FROM LOCAL OUTBREAK ENGAGEMENT BOARD

Sharon Kemp, Chief Executive, provided a verbal update on the work of the Local Outbreak Engagement Board as follows:-

- Currently the infection rate, as at 3rd November, 2020, was 505 per 100,000 population. There had not been a reduction but it did appear that the increase might be slowing down to that previously seen
- The Local Outbreak Engagement Board had considered its plan which built on its responses to information i.e. looking at the Incident Management Teams supporting the workplace, business and residents to stay safe. That continued and continued to work with areas that had seen a small number of people testing positive but no significant outbreaks at this particular time
- There was still community transmission but not specific to a workplace; it was general transmission within the community. An impact on local schools was being seen who continued to work very collaboratively and adhere with national guidelines. Staff absence rates were increasing across all agencies but to date no significant Service impacts arising therefrom
- After the national lockdown period, there would be consideration by the Government as to what happened next. If the infection rate was such, then the tiered system would come into play and there would be further discussions with Government officials nearer to the date (2nd December) as to which tier Rotherham and South Yorkshire would go back into if the national tiering system was still in operation

- Work continued on communications and encouraging members of the public with the right message in a friendly way but still getting the message across. There had an increase in enforcement seen, with the support of South Yorkshire Police, with regard to organisations/business that were flagrantly breaking the legislation
- Through the Gold arrangements in Health, colleagues would work with the Government as more information became available regarding mass vaccination. Discussions would take place over the coming weeks with regard to mass testing/whole town testing as well as an opportunity to consider with the Government and from their feedback, what might be available and what was the best fit for South Yorkshire
- As from 5th November the clinically extremely vulnerable individuals would receive a letter through their health system advising them to minimise their contacts as far as possible. The Rotherham Community Hub had never been stood down and continued to provide support for those isolating or clinically extremely vulnerable
- The situation continued to be fast paced in terms of engagement with the Government and good partnership arrangement through the Local Outbreak Engagement Board

Chris Edwards, RCCG, commented that, in terms of the Rotherham response, the Public Health experts were saying that although we might have reached a peak in infection rates it was likely that services would be maintained at the high level for 8 weeks or so and, in terms of partnership, had to make sure that it was working on the assumption the services would be under pressure for a prolonged period.

Resolved:-

That the update be noted.

123. REFRESHED HEALTH AND WELLBEING BOARD PRIORITIES AND ACTION PLAN

In accordance with Minute No. 114 of the meeting held on 21st October, 2020, Becky Woolley, Policy Officer, presented the refreshed Health and Wellbeing Board priorities and action plan November 2020-June 2021 with the aid of the following powerpoint presentation:-

Background

- In June 2020 it was agreed that the Health and Wellbeing Board would refresh priorities taking into consideration the impact of Covid-19 and evidence regarding health inequalities

- A development session was held in September 2020 which was facilitated by the LGA. Prior to this session, there was also a period of consultation with Board members and consideration at the Health Select Commission regarding the priority refresh

Outcome of the Development Session – September 2020

- The four aims within the original strategy remained relevant and should still be the overarching outcomes that the Board was working towards
- Covid-19 had led to new cohorts of people being vulnerable. There was a need to continue to develop our understanding of the impact that the pandemic was having on these groups as well as the rest of the population
- Action needed to be focussed around health inequalities and the wider determinants of health
- There should be a targeted focus on a small number of priority areas
- The Marmot principles should underpin the refresh of priorities

The Marmot Review 10 Years On Report was published in February 2020. The key findings were:-

- People can expect to spend more of their lives in poor health
- Improvements to life expectancy have stalled and declined for the poorest 10% of women
- Only the 20-30% least deprived will receive a state pension before they develop a lifelong disability
- The health gap has grown between wealthy and deprived areas
- There are marked regional differences and widening health inequalities between the North and the South
- The slowdown in life expectancy increase cannot for the most part be attributed to severe winters. More than 80% of the slowdown, between 2011 and 2019, results from influences other than winter associated mortality
- 2/3s of those with lifelong disabilities in the most deprived areas have disabilities before they reach pension age
- For males, years in poor health has increased from 15.8 to 16.2 since 2009, for females from 18.7 to 19.4
- It is likely that public sector cuts have harmed health and contributed to widening health inequalities in the short term and are likely to continue to do so over the longer term. Cuts over the period shown have been regressive and inequitable – they have been greatest in areas where need is highest and conditions are generally worse

Covid-19 and the Social Determinants – Impact of lockdown on health behaviours e.g. mental health

- School closures, loss of education, issues with exam results, changes of university provision/availability
- Reduction in commuting, less air pollution

HEALTH AND WELLBEING BOARD - 11/11/20

- Disruptions to health care provision, delays to care, avoidance of care
- Disruption to/loss of culture and leisure activities. Increased use of outdoor space
- Unequal Covid impact
- Care home impacts
- Disruption to community/social interaction
- Public transport impact. Cycling opportunities
- Job losses, furlough, zero hours contracts, changes to work availability
- Changes to homeless, asylum seeker provision. Risk of rent/mortgage problems due to loss of earnings

Refreshed Priorities

Aim 1: All children get the best start in life and go on to achieve their full potential

- Develop our strategy for a positive first 1001 days
- Support positive mental health for all children and young people
- Support children and young people to achieve their full potential

Aim 2: All Rotherham people enjoy the best possible mental health and wellbeing and have a good quality of life

- Deliver the Better Mental Health for All Strategy
- Deliver the Rotherham Suicide Prevention and Self-Harm Action Plan
- Promote positive workplace wellbeing for staff across the partnership

Aim 3: All Rotherham people live well for longer

- Build a social movement to support local people to be more physically active
- Ensure support is in place for careers
- Develop a whole-systems approach to tackling obesity in Rotherham with consideration of the impact of Covid-19

Aim 4: All Rotherham people live in healthy, safe and resilient communities

- Delivery of a loneliness plan for Rotherham
- Promote health and wellbeing through arts and cultural initiatives
- Ensure Rotherham people are kept safe from harm

Cross-cutting Priorities

- Links to the Local Outbreak Engagement Board
- Building the understanding of the impact of Covid-19 on our communities and on health inequalities including
 - Bringing together different pieces of work on health inequalities from across the partnership
 - Engaging with the public on the impact of Covid-19 and health inequalities
- Delivery of Phase 2 of the Joint Strategic Needs Assessment

It should be noted that priorities had been agreed based on an understanding that the response to the pandemic was ongoing, therefore, the Board's approach as a partnership would need to remain as flexible and responsive to emerging needs.

Each Board member was asked for their comments on the refresh which are summarised as follows:-

- Culture and Leisure Services welcomed the refreshed document. There was to be a joint workshop in January with the Cultural Partnership Board. There were real opportunities particularly around the 3 other actions within the plan around physical activity, delivery of the Rotherham Together Programme, which had received a fantastic response already, and the targeted work with communities through the Library Service. The Arts Council England had announced a new fund to support Social Prescribing which built upon the fantastic work that Rotherham had been doing in this area already. Culture and physical activity could help with lot of work around the important work around Mental Health and loneliness
- Really like the idea of having a theme per Board meeting and involving those looking at services for. A good opportunity to consider a subject in a different way
- Rotherham CCG were longstanding supporters of Social Prescribing and would provide assistance to support and enhance/expand
- The Kings Fund recently produced a new report on the impact of Social Prescribing
- Voluntary Action Rotherham was developing a Rotherham Arts Council bid for Social Prescribing and was happy to talk to partners about what that might look like
- Theme 4 – the Strategic Director of Regeneration and Environment was content with the actions contained therein
- The plan demonstrated that Public Health was part of everyone's daily life and is a real testament as to how everyone is working together and trying to get the issues sorted for the Rotherham population
- RDaSH felt it was really positive how the Board had moved from 4 priorities to 3 and focussing efforts on the true priorities for the Board
- South Yorkshire Police felt that the priorities were more than appropriate going forward for the next 12 months

- CYPS was supportive of what was included within Aim 1
- TRFT was supportive of the document

Resolved:-

(1) That the refreshed Health and Wellbeing Board priorities and action plan November 2020-June 2021 be approved in principle.

(2) That Becky Woolley be notified as soon as possible of anyone who wished to be part of/Chair the Healthy Weight Group.

ACTION: All Board Members/Becky Woolley

124. HEALTH AND WELLBEING BOARD PRIORITY AIM 2: ALL ROTHERHAM PEOPLE ENJOY THE BEST POSSIBLE MENTAL HEALTH AND WELLBEING AND HAVE A GOOD QUALITY OF LIFE

Kathryn Singh, RDaSH, presented the following powerpoint presentation:-

- Priority 1 Improving mental health and wellbeing of all Rotherham people
- Priority 2 Reducing the occurrence of common mental health problems
- Priority 3 Improving support for enduring mental health needs (including Dementia)
- Priority 4 Improve the health and wellbeing of people with Learning Disabilities and Autism

Priority 1 – Improving mental health and wellbeing of all Rotherham people

- Better Mental Health for All/Covid-19 (C19) Mental Health Group
 - C19 and Mental Health Group established
 - Action plan been drafted for whole life course
 - PH Lead worked with CYPS on the survey to school age children, first distributed in the summer and repeated this autumn
 - Work between LD and Public Health (RMBC) to look at staff wellbeing, staff and manager wellbeing guides produced in the summer and shared with other partners
 - Promotion of public Mental Health information across all partners including employers signed up to BeWell@Work
- RMBC has produced a guide on befriending for Rotherham Heroes and this was being used as part of their induction and has been shared with voluntary and community sector partners
- The Five Ways to Wellbeing campaign messages will be used to encourage people to look to access things to address loneliness for themselves and to look out for others

Priority 2 – Reducing the occurrence of common mental health problems

- Launch of ieso digital IAPT service in October 2020 to anticipate demand surge for common mental health conditions completed
<http://www.iesohealth.com/en-gb>
- Launch of <https://rotherhive.co.uk/> in May 2020 a portal to access psychological support
 - Debt section developed October 2020
 - Professional section now in development
 - Half a million site hits to date
- CAMHS Transformation Plan now refreshed and renamed the Rotherham Social Emotional and Mental Healthy Strategy with action plan and partnership forum established

Priority 3 – Improving support for enduring Mental Health Needs (including Dementia)

- In the initial stages of lockdown there was a delay in implementation of the new Dementia Pathway. This has now been reactivated
- Dementia Pathway Redesign Group established with all key stakeholders
- Data analysis to underpin redesign anticipated end of November
- Rollout of a programme of Herbert Protocol/”This is Me” Workshops by Crossroads
- Throughout the C19 period Rotherham Place has maintained its high performance on the Dementia diagnostic target
- CORE 24 Service continues to be in place and continues to deliver
- SMI LES (Local Enhanced Service for people with Serious Mental Illness) in place and working well
 - Whilst there was an increase of 175 patients on an SMI register between Quarter 1 (1,844 patients) and Quarter 2 (2,019 patients), there was an increase in the percentage of patients receiving a health check from 27.5% to 28.7%

Priority 4 – Improve the health and wellbeing of people with Learning Disabilities and Autism

- Significant investment from RCCG for both All-Age and Children and Young People’s Neurodevelopment Pathways
- Redesign of the Children and Young People’s Neurodevelopment Pathway completed and detailed action plan in place to monitor impact
- Launch of the RDaSH All Age Neurodevelopment Pathway in September 2020
- Reduction of waiting list of Rotherham patients at Sheffield Health and Social Care
- Development of a new asset/community focussed Post-Diagnostic Pathway (Adults) to be delivered by Rotherham Parents Carers Forum
- Successful ICS bids for CYP Key Workers (Learning Disabilities and Autism) and expanding peer support and support for annual health checks for people with Learning Disabilities

Discussion ensued with the following issues raised/clarified:-

- There was massive evidence that supported insomnia and links to mental health. Quite often people whose sleep patterns were very disrupted were prescribed anti-depressants and there was a challenge as to whether that was the right thing to do. Often poor sleep and anxiety was linked to poor mental health which had been exacerbated by the Covid-19 pandemic because of the uncertainty, tension and anxiety
- Reports had been published recently emanating from Manchester where support for Confidential Enquiries into Suicides took place which raised 2 issues. Firstly there was no significant evidence of an increase in suicide as result of lockdown. The numbers were very comparable to what was seen as year on year increase in death by suicide across England. A similar shift in pattern had been seen in Rotherham i.e. increase in the number of women suicides. Secondly, a report had been issued around the reporting of suicides with a cause for consideration was that the reporting of suicides quite often led to duplication and replication and there was some real nervousness of how they were actually reported
- A significant piece of work had been carried out locally in February around the reporting of suicides to which the local media had been invited. Quite often too much detail was reported in the press coverage; there was significant evidence that showed there was imitation as a result of that reporting
- In a second Covid lockdown coming up to Christmas it was really important to be sighted on the sort of campaigns to be run supporting peoples' mental health in a positive way perhaps without too much attention/less focus on death by suicide
- Over the years a change had been seen in Rotherham around females that took their lives by suicide with the method also changing
- However, Rotherham was not dissimilar to other areas in Yorkshire and the Humber. The data from Office for National Statistics this year had shown Yorkshire and the Humber ranking as the highest region for death of females to suicide. It was known from some mental health research during the pandemic that women were reporting more mental health distress – lack of social networks with people they were unable to engage with and also caring responsibilities
- The local response had been the Be the One Campaign, the Board's campaign for suicide prevention and a very proactive approach to engaging with women/getting messages out to women of signpost to support. That message would switch in the lead up to Christmas and the New Year and be to the general population and again follow the

steps of the Be the One Campaign of TLC approach and people being very vigilant

- The voluntary sector had played a huge role in terms of supporting people with their mental health wellbeing and work was taking place to ensure that any training was open to the whole partnership together with the voluntary and community sector
- At the height of the first lockdown real high levels of acuity had been seen in terms of admissions to the in-patient unit and high levels of psychosis
- There had been new demand very much linked to issues of employment and housing. RDaSH was trying to work in a way that recognised that if intervention could be provided quite early and support offered, it would avoid someone getting a much more serious mental health situation. Discussions were taking place with the Chamber of Trade around potential for redundancies/employment issues as to how the Service could work alongside the workplace situation to support employers to offer mental health help and support
- People were contacting the Service requesting post-funeral bereavement support
- The Service could not deliver the sort of services it did without the support of the voluntary sector
- During lockdown, Primary Care was seeing low grade mental health issues that were probably not yet getting to a level that would impact upon full Mental Health Services

The Chair referred to the film that had been made to advertise the 5 Ways to Wellbeing and suggested that it be redistributed through the communications system

Kathryn was thanked for her presentation.

Resolved:

(1) That the presentation be noted.

(2) That the 5 Ways to Wellbeing be distributed through the Council's Communications system.

Action: Sharon Kemp

125. HOSPITAL DISCHARGE FOR ROTHERHAM RESIDENTS

The Chair reported that the Rotherham Foundation Trust had not had chance to respond to the report by Healthwatch Rotherham. Therefore, the report would not be considered at today's meeting to allow the Trust opportunity to comment and then a decision would be made as to whether the report was submitted to the Board again or to another forum.

Michael Wright, Deputy Chief Executive, TRFT, stated that consideration would be given to the report and an action plan developed to address the issues raised.

126. CARERS PROGRAMME - FRAMEWORK FOR THE FUTURE

Jo Hinchliffe, Service Improvement and Governance Manager, gave the following powerpoint presentation:-

- Rotherham's Adult Social Care Pathway put the person at the centre of everything the Service did
- On 21st October, 2019, a new of working was introduced to ensure a consistent, robust and sustainable Pathway; work with carers was defined via a "sub-pathway" and in March 2020 plans were shared with the Board explaining how the Service anticipated it would deliver a Carers Programme
- The Covid pandemic had had a significant impact on the proposed programme timeline. This had meant that partnerships had to be every stronger to ensure carers were fully supported in the most difficult of situations
- Due to Covid
 - Unpaid Carers Group utilised to be the Carers Programme Project Group
 - Review of the Carer Strategy - reschedule the review work for end of Quarter 2 with a new timeline and resource plan
 - Young Carers – action shifts into Quarter 3
 - ASC Pathway: process mapping/assessments consistency checks – some work has occurred within ASC as a result of Covid
 - Carers Centre – Review/Impact Assessment – Impact Assessments moved into Quarter 2 and building subjected to the council's recovery principles. Need to define the building base offer for carers. The Crossroads Carers Hub demonstrates the support for carers from business partners and the Council
 - Information Officer – scoping work partner conversations – Covid impact needs exploring – different ways of working and engaging virtually

- Assistive Technology – the use of digital tools – Zoom/Teams – has also enabled a wider reach with carers and the Service was capturing the learning within the ASC Digital Solutions Project Group
- Getting things back on track – programme refresh August 2020

Quarter 2 July Aug, Sept 2020	Quarter 3 Oct, Nov, Dec 2020	Quarter 4 Jan, Feb, Mar 2021	Quarter 1 April, May, June 2021
PMO Governance Reset Establish Carers Programme Project Group – reports into ASC Project Assurance Meeting (PAM) 17 th Sep and then into HWBB	Monthly Project Group Meeting with highlight report to PAM: 15 th Oct 19 th Nov 3 rd Dec ¼ highlight report to HWBB	Monthly Project Group Meeting with highlight report to PAM ¼ highlight report to HWBB	Monthly Project Group Meeting with highlight report to PAM ¼ highlight report to HWBB
WS1: Review of the Carer Strategy	Coproduction work for the Strategy	Consultation work for the Strategy	Refreshed Carer Strategy
WS2; Assistive Technology (AT) Requirements for carers feeding into the Digital Solutions Programme	Engagement activity	AT Pathway proposed and out to consultation	AT Carer Offer launch
WSS3: ASC Pathway: Process mapping/assessments consistency checks Young Carers transition work mirrors ASC Pathway	Carer Journey mapping (with all partners) ASC Pathway: Refresh Policy/Guidance for Carers		

HEALTH AND WELLBEING BOARD - 11/11/20

WS4: Carers Centre – Review/Impact Assessment	Carers Centre – future options/consultation	Decision Making	
WS5: Information Offer – scoping work (partner conversation)	Coproduction work (Digital channels)	Consultation linked to the Strategy work	
Routine Activity: Training Programme for carers/staff Support for carers through Covid (Carers Grant) Regular and sustained communications Activity and events (Carers Week/Carer Rights Day)			

- How we will progress a summary
 - We are mapping the carer experience and ensure the carers programme addresses any gaps
 - We are ensuring effective communication processes are in place to fully support carers
 - We are refreshing our understanding of the profile of carers in Rotherham in the light of Covid-19
 - We are inviting representatives from the Unpaid Carers Group to become members of the Carer Programme Project Group
 - We are continuing to progress the Carers Grant Work

- Other Considerations
 - The Carers Strategy review work began at the end of September 2020 and would result in a new Strategy scheduled to launch June 2021 which still meant the Service was within the timeframe of the existing Strategy lifespan
 - As a result of the response to Covid, some work had occurred around the mapping of services and the ASC Pathway; this would continue and result in a refresh of the Policy and guidance by December 2020
 - As per the Government guidance and in line with Council recovery principles, the Carers Centre was not currently accessible. Work would be undertaken to plot out the recovery activity needed. A strategic review and impact assessment of the facility commenced at the end of September, the findings report due by December 2020
 - To support carers through the Covid-19 crisis, a Carers Information Pack had been produced by the Council and signed-off by partners. This work was being maximised and the Service was looking to expand this approach and think about ways of increasing digital connectivity and skills for carers. This would be alongside all the traditional options for

- sharing and communicating information, advice and guidance
- The programme would be subject to check and challenge via the ASC Project Assurance Meeting and would feed into the Health and Wellbeing Board each quarter

Discussion ensued with the following issues raised/clarified:-

- Pleasing progress with the Unpaid Carers Group which now had representation from the Partners, Forum, Carers Forum and REMA
- It was a difficult piece of work in terms of trying to collate information with regard to the new carers that had been revealed through the pandemic. Meetings had taken place with Age UK, Crossroads and Active Independence, who had formed a partnership called Active Solutions. They all had their own internal ways of capturing who they worked with through their Charity Log; the Council had a Key Performance Indicator for carers as well as work through CCG and Health colleagues. Consideration was to be given as to how the information could be collated from the third sector perspective. There was a need to be smarter as to how the information was captured.
- Of the £50,000 Carers Grant approved by the Cabinet, approximately £23,000 had been issued. There had 123 referrals of which 9 had not been suitable for the Grant but Crossroads Care had referred then onto the Carers Trust Grant

Resolved:-

(1) That the presentation be noted.

(2) That the next quarter progress update include information as to the capturing information with regard to the carer profile.

ACTION:- Jo Hinchcliffe

127. FOOD ADVERTISEMENT

Kate Green, Public Health, gave a verbal report on a regional project that was taking place and requested Board support for Rotherham participating in it.

In January 2020 the Yorkshire & Humber Association of Directors of Public Health Network had agreed to support an advocacy project from the Regional Healthy Weight and Physical Activity Community Improvement Group. This was to support the implementation of a shared ambition of the Local Authority Declaration on Healthy Weight by supporting the reduction of exposure to advertising of food and drink which was high in fat, salt and sugar in the out of home environment, predominantly on local authority-owned advertising space, although potential to expand further if local areas wanted to.

The project had commenced in October and would run until April, 2021. All local authorities across the region have been involved in discussions to date and anticipated to take part. All projects would be evaluated and a report produced upon completion of the project.

Discussion ensued with the following issues raised:-

- Enforcement - The project purely looked at advertising on local authority-owned spaces. There was potential to go wider and possibly include the transport sector. The project was looking to develop guidance protocol for local authorities
- The CCG would in principle support the project but on a practical level would struggle to support due to the call on resources during the pandemic
- The Local Authority would support in principle but needed more information e.g. how many local authority-owned sites did Rotherham have and what impact the lack of advertising that would have
- Given the pressures on the Public Health Team at the current time there needed to be flexibility on how such a project was programmed in and how much time was dedicated to it

Resolved:-

That the project be supported in principle but further information be provided given the current pressures on Services due to the Covid pandemic.

ACTION:- Kate Green to provide further information as to what a project would mean for the Local Authority and health sector

128. ISSUES ESCALATED FROM THE PLACE BOARD

It was noted that the Place Board had assumed command for Gold Command in Rotherham.

There were pressures in the system but no issues to be escalated.

129. DATE AND TIME OF NEXT MEETING

Resolved:-

That a further meeting be held on Wednesday, 13th January, 2021, commencing at 9.00 a.m.