

Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 28th October, 2020.

Present: Cllr Lisa Evans (Chair), Cllr Tony Riordan (Sub for Cllr Jacky Bright), Cllr Luke Frost, Cllr Lynn Hall, Cllr Mrs Ann McCoy, Martin Gray, Ann Workman, Karen Grundy (Sub for Jon Carling), Michael Houghton (Sub for David Gallagher), Allison Cook (Sub for Dominic Gardner), Barbara Bright (Sub for Julie Gillon).

Officers: Michael Henderson, Peter Bell, Peter Mennear, Tom Young

Also in attendance: Press

Apologies: Cllr Jim Beall, Cllr Jacky Bright, Fiona Adamson, Sarah Bowman - Abouna, Jon Carling, David Gallagher, Dominic Gardner, Julie Gillon, Saleem Hassan, Sheila Lister, Lisa Oldroyd, Anne Sykes

HWB 11/20 **Declarations of Interest**

Councillor Lynn Hall declared a personal non prejudicial interest in item 4 'Outbreak Management Update' and Item 5 'Priorities Action Plan Update' as both items referred to the impact of Covid, on care homes, and her partner was a resident of a local care home and had recently tested positive for the virus.

HWB 12/20 **Minutes of the meeting held on 30 September 2020**

The minutes of the meeting held on 30 September 2020 were confirmed as a correct record.

HWB 13/20 **Outbreak Management Update**

Members received an Outbreak Management update presentation.

The update provided data relating to cases of Covid in the Borough and the Tees Valley for the last seven days, together with cumulative data, for England, in the last 4 weeks. The update also illustrated how the position in the Borough had worsened, over the last 4 weeks, in comparison to other Upper Tier Local Authorities.

The Board noted some key information:

- Stockton-on-Tees had the highest 7-day infection rate, in the North East,
- The Borough had the highest change in infection rate, over last 4 weeks (though all areas were experiencing higher rates than 4-5 weeks ago)
- Some local authorities to the north of the region had seen a reduction in transmission rates for the last 10-14-day period
- Changes resulting from restrictions took at least 15-20 days to show

In terms of transmission it was noted that there was:

- widespread community transmission – no particular hotspots
- household transmission (between / within)
- cases across age groups, including working age adults
- cases and outbreaks across key settings

- increasing impact on care homes and hospitals

It was explained that prevention and response activity continued.

Communication and Engagement with the community was a key part of prevention work and included:

- Repeating and enforcing basic messages and highlighting that Covid could have a serious long-term impact on anyone who caught it.

There had been a recognition that the public was not responding, as positively and actively, to messages as they did at the start of the pandemic and there was an element of 'pandemic fatigue'. It was noted that there was work in progress to have a two-way conversation with communities to understand why this was the case and gain some insight into reasons behind some of the risky behaviours being undertaken.

Discussion: -

- It was suggested that the public needed a goal to work towards and this may assist with the 'pandemic fatigue'.
- Though cases were increasing, it was recognised that, in the authorities to the North of the Region, which had been subject to restrictions earlier than the Borough, there had been a flattening of cases and even a slight drop. It was hoped that this would be the case for the Borough too.
- Members were encouraged to highlight any settings, outside the meeting, that they felt needed additional support.
- There was a query about a slide relating to the relative change in rank of the Borough, with other local authorities, and which authorities the comparison was made with. It was noted that a response would be provided outside the meeting.
- High community transmission was being reflected in increased cases of Covid in care homes. It was noted that there was a multi-agency Care Home Protection Group and dedicated staff working around infection control, PPE, Testing etc. The Council was taking every possible measure to prevent cases in care homes, including work, regionally and nationally, around best practice. The Council had a long-established relationship of trust with providers and there was almost daily contact with them. The use of agency workers had been discouraged, as was the movement of staff between care homes. However, this was particularly difficult to maintain during outbreaks and staff needing to self-isolate.
- The North Tees Trust had seen increased cases over the last few weeks and was still maintaining elective diagnostic and outpatient services, which was increasing pressures. The Trust had worked hard on communications, promoting national messages, locally, and welcomed any joined-up comms with the Council.

- Suggested that hospital admissions be considered for inclusion on the Council's dashboard for North Tees and South Tees Hospitals.

- Members received assurances that the Council had been working with care at home providers to give them support around Covid, including the appropriate use of PPE.

RESOLVED that the update and discussion be noted.

HWB **Priorities Action Plan Update**
14/20

Members noted an update on the Board's Priorities Action Plan, which included some indicative dates relating to when some of those priorities would be considered by the Board.

It was suggested that under the Mental Health priority there should be a reference to the Tees, Esk and Wear Valleys Mental Health Trust, in terms of lead officers.

RESOLVED that the update be noted.

HWB **Members' Updates**
15/20

North Tees Hospital Trust

The local Integrated Care System had allocated £3 million to North Tees Trust for the development of its A and E, to support the Covid 19 preparations, moving into the winter period. The Trust would be improving the patient flow through the department, which would support Covid and non Covid pathways. The project was scheduled to be completed by the end of January next year.

The Trust was planning for winter taking account of Covid and the demands it would create.

The Trust had been involved in a CQC virtual visit in its emergency department relating to Covid. Initial feedback had not identified any areas of concern.

The Trust was hosting the ICS Covid Vaccine Research Study and its Hartlepool site. It was hoped there would be some positive outcomes from this.

Tees, Esk and Wear Valleys Mental Health Trust (TEWV)

Inpatient wards, at Westerdale, Hartlepool had been on hold for admissions for 14 days, as there had been an outbreak of Covid but would be opening to admissions on 2 November 2020.

Bankfields Ward (Health based Respite) was also currently closed to admissions whilst Covid processes were put in place. Aysgarth Ward had not been affected.

TEWV had started work on the Community Mental Health Framework. There would be joint working with partners to see how the Community Mental Health Teams might be refreshed and what this will mean across partnerships and Primary Care Networks.

It was explained that Hartlepool and Stockton Safeguarding Children Partnership had been working with North Tees Trust around how the two organisations interfaced with each other, looking at safeguarding process and therapeutic services etc. The Partnership highlighted some of the excellent work being undertaken by the Trust.

The Catalyst Health and Wellbeing Forum had discussed using Community Partnerships to look at Covid issues, working with the VCSE.

Catalyst was undertaking work to map the VCSE sector, looking at organisations and gaps in services, areas of risk, developing the market and referral routes. It was anticipated that this would be completed by the end of January 2020

RESOLVED that the updates be noted.

**HWB
16/20**

Forward Plan

Members noted the Board's Forward Plan.