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| MEETING: | Overview and Scrutiny Committee - People Achieving Their Potential Workstream |
| DATE: | Tuesday, 3 November 2020 |
| TIME: | 2.00 pm |
| VENUE: | VIRTUAL |

MINUTES

Present

Councillors Ennis OBE (Chair), Carr, T. Cave, Fielding, Frost, Daniel Griffin, Hayward, W. Johnson, Makinson, Mitchell, Newing, Tattersall and Williams

1 Apologies for Absence - Parent Governor Representatives

No apologies for absence were received in accordance with Regulation 7(6) of the Parent Governor Representatives (England) Regulations 2001.

2 Declarations of Pecuniary and Non-Pecuniary Interest

Councillor Newing declared a non-pecuniary interest in Minute number 4 as she works for the NHS. There were no further declarations of pecuniary or non-pecuniary interest.

3 Minutes of the Previous Meeting

The minutes of the meeting held on 13th October were received. The minutes of the 'Call in' Meeting of the Committee held on the 26th October, 2020 will be published on the website in draft once prepared and will be submitted for noting to the meeting to be held on the 1st December, 2020.

4 Public Health and Covid 19

Members were invited to consider a report of The Director of Public Health, and the Executive Director, Core Services. The aim of this report was to inform the Overview and Scrutiny Committee (OSC) about the Public Health approach to COVID-19 in Barnsley. The report provided an overview of the role of the Public Health Team and current knowledge about COVID-19, described measures to prevent and manage COVID-19 in Barnsley; work to identify and mitigate the impact of COVID-19 together with a summary of ongoing challenges and future plans.

The following witnesses were welcomed to the meeting:-

Julia Burrows, Executive Director - Public Health, BMBC
 Carrie Abbott, Service Director, Public Health & Regulation, BMBC
 Alicia Marcroft, Head of Public Health (Children and Young People), and Head of Service Public Health Nursing, BMBC
 Helen Watson, Public Health Registrar, BMBC
 Dr Kirsten Vizor, Public Health Registrar, BMBC

Dr Andrew Snell, Public Health Consultant, Barnsley Hospital NHS Foundation Trust

The Executive Director of Public Health, BMBC, reminded Members of the Committee of the gravity of the situation and the challenges it presents. Dr Andrew Snell delivered a brief but bleak presentation, reporting that in England we are now seeing between 50,000-100,000 new cases daily. The Barnsley case rate stood at around 496 for the 7 days to 28th October and remains high across the Borough. The spread of COVID-19 in Barnsley has been across all of Barnsley, affecting all areas, all ages and all groups. This is ahead of, but similar to, the regional and national situation and serves as a reminder that everyone has a part to play in reducing transmission and harm. It is anticipated that a multiple burden will be seen throughout the winter, not least because of indirect harm and other challenges such as unemployment (particularly amongst young people); impact on the BAME communities and those with less secure financial situations and/or physical and mental health problems.

In the ensuing discussion, and in response to detailed questioning and challenge the following matters were highlighted:

TESTING AND CONTACT TRACING

Members expressed concern at the perceived inadequacy of the current testing and contact tracing systems. Members were reassured that the local testing capacity has now increased. Turn-around times for testing are improving (with a mean time of 39 hours) with some test results back within 24 hours. A local testing system was introduced at the end of August to complement the national service, however there is no local access point for local testing facilities, and the national portal and national booking system must be used. The recently increased capacity means that the additional tests are now showing as available.

A live follow up service from 26th October is geared up to contact and support local people with Covid-19 and also picks up those 'lost' by the national service. A new text messaging service starts tomorrow (4th November 2020) and will include emails, calls and visits to positive cases, offering support and advising on isolation. In addressing concerns about people not engaging with the follow up service, it was noted that West Yorkshire found that a local person/local phone call is more effective (than national calls) and helps to reassure people that this is not a scam. Text messages sent out to Barnsley residents will include the phone number of the follow up system so that residents know who they are being contacted by.

Some older people may not have access to smartphones and apps (and therefore the NHS Covid-19 app). There is no failsafe mechanism for contacting everybody and keeping them informed but attempts are made to communicate in many formats. People are asked to leave details when at a restaurant/workplace etc. and businesses are obliged to collect information for track and trace purposes.

Antibody testing was available for NHS and social care staff as part of a study. However, it was reiterated that antibody testing is not useful for behaviour change, which is the best way to tackle the virus. Nonetheless, national research is underway to explore antibodies and vaccine development, which cannot be done locally.

CARE HOMES

74 care homes in Barnsley are supported. There is individual support for care home managers and weekly meetings with SWYFT, Barnsley Hospital and social care to find out challenges, concerns and provide guidance. There is also a weekly bulletin to answer any questions. The infection prevention and control offer comprises training for staff and managers on everything from correct use of PPE to self-swabbing. There is also support from Public Health England during care home outbreaks. It was confirmed that there are no shortages of PPE. Equipment can be obtained locally and through the national portal.

STAFF

It is important that the wellbeing of all staff is supported. A mental health first aid training programme has been commissioned by Human Resources together with a 24hr support number for staff as part of the employee assistance programme. Managers are recommended to have regular 1:1 meetings with staff and there is a whole range of mental health and befriending services. There is a balance to be struck to ensure that mental health services are not overwhelmed due to Covid-19. Many people will have suffered hidden harm throughout the pandemic due to non-Covid conditions. After the early peak, recovery for non-Covid illnesses progressed well.

HEALTH IMPACTS

The longer-term impacts of 'long Covid' in Barnsley are not yet known and are dependent on national research. Intelligence will develop over time - there is a need to monitor those who have tested positive and continue to seek medical advice going forward.

It was reported that the number of new infections and the number of patients in hospital is now higher than in the April peak. The hospital is now very busy and it is challenging to manage the level of demand. There are clear plans across the region to manage hospital capacity. The hospital will be able to provide exact figures around capacity. There are huge pressures on all health services at the moment. GPs are frustrated at not being able to see patients but have tried to shift to a mix of phone calls/video calls and visits where possible. It is likely that this challenge will grow again as winter approaches.

A multi-agency Outbreak Control Board was established in June and is continuously developing and monitoring the Outbreak Control Plan, which is a legal requirement.

Members expressed concern that cancer and non-cancer screening and inoculation programmes will have been affected by the pandemic. It was explained that it is unclear how the latest lockdown will impact, although some screening programmes have continued throughout the summer. The Health Protection Board meets tomorrow and the situation will be updated. Barnsley is part of a wider South Yorkshire Screening and Immunisation Oversight Group (SIOG) and is in regular contact with NHS England and local colleagues. It was highlighted that the influenza vaccination programme is now more important than ever. Barnsley had unprecedented levels of early demand for the flu vaccine, which initially led to appointment delays. However, Barnsley has sufficient NHS funded vaccine for all

those in eligible groups and is leading across South Yorkshire in terms of uptake, which is closely monitored.

Members expressed concern around oral health worsening due to lack of availability of dental services. Members were reassured that the oral health of children has always been a priority and some improvements have been seen. Prevention is more important than dental services and the good oral hygiene message continues to be shared as far as possible, although some nursery toothbrushing clubs have been impacted by the pandemic.

Some hospitality and leisure businesses in Barnsley are aggrieved that although they were fully Covid-19 compliant and had no reported infections they have had to close. It was reiterated that unfortunately it is not possible to pinpoint the source of some infections and no businesses can be 100% sure that their workplace is free from Covid-19 transmission. Any social mixing is a risk, as this is where transmission takes place. When positive test information is received, this is carefully examined on a daily basis and followed up by Regulatory Services when appropriate. Previous clusters have been linked to workplaces and work with Public Health England takes place to make sure nothing is missed.

Numbers of people who may be asymptomatic are not known unless they are tested - population estimates vary from 4% to 50% asymptomatic. People are at their most infectious level 2 days before they develop symptoms (presymptomatic). There may be as many as 1 in 40 people with coronavirus, hence the need to act as though everyone has it and follow the guidelines to minimise risk. Members were aware of instances where parents picking children up from school were not observing the 2-metre rule and were urged to reinforce this message wherever possible.

A vaccine is anticipated maybe early in the new year. This will need to be distributed as quickly as possible and will pose a huge logistical challenge. It is likely to be prioritised, with the most vulnerable and NHS and key workers first. Talks are underway with NHS England colleagues and the Local Resilience Forum as to what a mass vaccination plan would look like.

RESOLVED that

- (i) Witnesses be thanked for their attendance and contribution, and
- (ii) Figures relating to hospital capacity should be obtained and shared with the Committee
- (iii) A Member requested the email contact information to be involved in a research project into Covid drug trials.
- (iv) Feedback to be provided on access to GP appointments during lockdown and to what extent appointments are being done by video calls or face to face.

Chair