

<b>MEETING:</b>	Health and Wellbeing Board
<b>DATE:</b>	Thursday, 8 October 2020
<b>TIME:</b>	2.00 pm
<b>VENUE:</b>	Held Virtually

## MINUTES

### Present

Councillor Jim Andrews BEM, Deputy Leader  
Councillor Margaret Bruff, Cabinet Spokesperson - Childrens  
Councillor Jenny Platts, Cabinet Spokesperson - Adults and Communities

#### 1 Declarations of Pecuniary and Non-Pecuniary Interests

There were no declarations of pecuniary or non-pecuniary interest.

#### 2 Minutes of the Board Meeting held on 8th October, 2019 (HWB.08.10.2020/2)

The meeting considered the minutes of the previous meeting held on 8<sup>th</sup> October, 2019.

**RESOLVED** that the minutes be approved as a true and correct record.

#### 3 Key points from the Children and Young People's Trust Executive Group held on 12th September, 12th December, 13th February, and 11th June, 2020 (HWB.08.10.2020/3)

The meeting considered various minutes from the Children and Young People's Trust Executive Group.

**RESOLVED** that the minutes be received.

#### 4 Key points from the Safer Barnsley Partnership held on 24th February, 8th June, 2020 and 1st September, 2020 HWB.08.10.2020/4)

The meeting considered various minutes from the Safer Barnsley Partnership.

**RESOLVED** that the minutes be received.

#### 5 Key Points from the Stronger Communities Partnership held on 18th December, 2019 and 20th February, 2020 (HWB.08.10.2020/5)

The meeting considered various minutes from the Stronger Communities Partnership.

**RESOLVED** that the minutes be received.

#### 6 Public Questions

The meeting noted that no public questions had been received for consideration at the meeting.

## **7 Covid-19: surveillance and local response update**

Dr. Andy Snell was welcomed to the meeting to provide an update in relation to Covid-19.

An overview of the pandemic was provided. It was noted that Pillar 1 testing and associated data was first available in hospitals, which was subsequently extended to care homes, More recently Pillar 2 testing had become more widely available and therefore the two were not directly comparable.

Members noted the current 7 day average rate which was around 130-140 cases per 100,000 population. Nationally this figure had been rising steeply since September with numbers doubling every 7-8 days. Clear patterns could be seen between North and South, with the North of the country seeing higher rates. The age breakdown showed higher rates in young people from early September, which coincided with the opening of Universities, but this was expected to be a short-term effect. It was suggested that transmission was occurring in households, with limiting contact in households proposed to control the rise.

In addition to positive cases, the impact on the hospital was noted, with a clear rise in admissions. This had not resulted in increases in deaths due to Covid-19, but this required careful monitoring.

The significant and persistent impact of Coronavirus was noted, which included the secondary impact such as on mental health, alcohol related harm and through delay in residents accessing non-covid related health services.

The importance of washing hands, wearing face coverings and leaving space was stressed, but it was suggested that pandemics do ease over time.

Questions were asked in relation to the treatment of Covid-19 patients and the possible use of Nightingale hospitals. It was suggested that capacity was still available locally, but consideration was being given to how best manage any future increases.

In relation to the complications seen in some patients, who suffered from 'long covid', it was noted that many viral illnesses could have a chronic element and that more would be known about this over time.

Members noted the cumulative impact of Covid-19 and other infections such as Flu. The increased efforts to immunise against the flu early to minimise this and avoid any issues in the immunisations schedule should a Covid-19 vaccine become available were acknowledged.

**RESOLVED-** that the update be noted.

## **8 Creating our Mental Health Partnership**

Diane Lee, Head of Public Health, introduced the item. Members were reminded of previous discussions regarding mental health and the establishment of a Mental Health Partnership.

An initial vision and priorities were noted, but it was suggested that the partnership would finalise these and work towards developing objectives and intelligence/performance measures. The partnership would concentrate its efforts where it could make most difference, adding challenge and holding others to account.

Infographics were shared relating to health across the life-course and it was suggested that similar could be developed with this focusing efforts.

It was suggested that a meeting be convened in January, and Members were asked to put forward nominations to be part of the partnership. It was noted that the partnership would also report into the Health and Wellbeing Board, who would hold it to account.

Members acknowledged the need to ensure the Partnership worked closely with such as the Children's Trust and Safer Communities Partnership.

**RESOLVED:-**

- (i) That the establishment of a Mental Health Partnership be supported, reporting to the Health and Wellbeing Board, with its first meeting planned for January, 2021; and
- (ii) That Members forward nominations to sit on the Partnership to Diane Lee.

## **9 The mental health impact on our employers and employees**

Ches Moulton and Carrie Sudbury were welcomed to the meeting. Members were made aware of the stress risk assessment undertaken with members of Barnsley and Rotherham Chamber of Commerce from 1<sup>st</sup> to 30<sup>th</sup> of September 2020 about stress over the past 6 months due to Covid-19.

Causes of stress were identified, with workload being the main source, followed by time management and communication. Correspondingly the majority of respondents felt they could not meet the needs of their job, did not have enough time, and many had physical symptoms of stress.

Over half found their job stressful, with around 72% saying their stress levels were moderate, high or very high. Over half also said that they experienced unacceptable levels of stress, with the major factor being workloads. Noted was the link between stress levels and performance, and the need to address causes not symptoms of stress.

Noted in the survey was the impact of work on stress levels respondents identified, rather than of their personal life.

A number of options going forward were proposed to help manage and control stress both by individuals and businesses.

Members raised concerns about the issues the survey highlighted and how they could be supported through Be Well at Work programme and through the Mental Health Partnership.

It was noted that the majority of respondents were female, but that evidence showed high levels of mental health issues, and suicide in males, so suggestions were made as to how reach that demographic.

Members heard how it was difficult to make comparisons with other areas, or prior to covid-19, but qualitative evidence showed that Covid-19 had increased stress across the workforce. Feedback from Chamber Members noted the widespread impact of Covid-19, and the lack of support for sole traders. This included both financial and emotional support.

Members noted the recent staff Pulse Survey in BMBC, and how this would help to identify issues related to stress in the workforce. In addition, the 'Day in the life' campaign would help to highlight mental health issues and the impact of Covid-19.

**RESOLVED** that thanks be given for the presentation.

## **10 National Food Strategy: part one. Our local response to date and next steps (HWB.08.10.2020/10)**

Christus Ferneyhough, Senior Public Health Officer, and Anne Asquith, Commissioning Manager (Healthier Communities), were welcomed to the meeting.

An overview of the National Food Strategy (part one) was provided, which highlighted the flexibility and resilience of the food system throughout the pandemic so far. The main focuses in the strategy were to address the 'cracks' in the system such as children's access to food, and also to maintain high food and animal welfare standards when the UK leaves the EU. Also, within the strategy was an emphasis on healthy weight, especially in light of Covid-19. The link between deprivation and overweight/obesity was noted.

Members noted the recommendations in the report, which included the expansion of the free school meal scheme, and increasing the value of healthy start vouchers. Also noted were the recommendations to ensure food and animal welfare standards remained high in future trading agreements.

Those present heard how locally 65.8% are overweight or obese, and that Barnsley is the 38<sup>th</sup> most deprived local authority in England. However, the significant variations within Barnsley were acknowledged. Noted was the link between improving food access and improving health, including potentially better outcomes for those contracting Covid-19.

Members were made aware of Good Food Barnsley CIC, which was established prior to the pandemic, but access to food had become more of an issue since. It aims to improve food access for all across Barnsley. An Innovation Manager had recently been employed to develop a strategy and deliver the objectives of the partnership. Members noted the initiatives in place such as Food Banks, Community Shops and holiday hunger schemes, and the impact of Covid-19 restrictions on delivering the latter was noted.

Members noted the 'Local Authority Declaration on Healthy Weight' which a number of Councils in the region had signed. Noted were the 16 commitments to make, and the need for the Local Authority to work with partners to deliver against this. If Barnsley was minded to sign the declaration, it was suggested that Good Food Barnsley could act as a steering group.

Those presented noted that the furlough scheme would be coming to an end and the potential impacts on families. Also noted was the potential of a second phase of Covid-19 and winter pressures which may lead to pressure on food capacity. The additional impact that Brexit could also have on food prices, access and quality as also acknowledged.

Assurances were provided that risks had been considered and relevant plans had been put in place to respond to these

A suggestion was made to make Councillors aware of support available in their Ward or Area. It was noted that the Innovation Manager was working closely with Area Council Managers to map support across the borough and identify gaps.

**RESOLVED:-**

- (i) That thanks be given for the presentation and the work in place to improve access to food and promote healthy weight be supported;
- (ii) That the Board receives regular updates from Good Food Barnsley;
- (iii) That the board considers how it can support food access and promote healthy weight.

## **11 A day in the life of: Our new normal**

Julia Burrows, Director of Public Health, spoke about plans to repeat the 'A Day in the Life of' exercise first undertaken in 2017. A snapshot of resident's lives was provided on 7<sup>th</sup> November, 2017, and the exercise revealed a number of clear themes which informed the Public Health Strategy.

It was noted that much had changed since the onset of the pandemic, and it was felt important to capture how people's lives had changed as a result.

The exercise will therefore be repeated as 'A Day in the Life of; our new normal' on 3<sup>rd</sup> November, 2020, and will inform the Health and Wellbeing Strategy. There will be

prompts for respondents to consider, and people will be asked about acts of kindness they may have seen or experienced.

Members noted the launch day of 19<sup>th</sup> October and planned promotion until 3<sup>rd</sup> November, and the hope to analyse all responses by the end of the year.

It was noted that a similar exercise 'What Matters To Me' would be undertaken to include the views of young people.

**RESOLVED:-**

- (i) That the exercise be endorsed; and
- (ii) That Board Members promote the exercise through their networks.

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Chair