



**Committee and Date**

Health and Wellbeing Board

10 September 2020

**MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 9 JULY 2020**

**9.30 - 11.45 AM**

**Responsible Officer:** Michelle Dulson

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**Present**

Councillor (Chairman)

Councillors Lee Chapman (Co-Chair), Dr Julian Povey (Co-Chair), Dean Carroll, Ed Potter, Robinson, Jackie Jeffrey, Cawley and Evans

**71 Apologies for Absence and Substitutions**

There were no apologies for absence.

**72 Disclosable Pecuniary Interests**

Members were reminded that they must not participate in the discussion or voting on any matter in which they had a Disclosable Pecuniary Interest and should leave the room prior to the commencement of the debate.

**73 Minutes of the last meeting**

**RESOLVED**

That the minutes of the meeting held on 5 March 2020 be amended to include Tanya Miles on the list of attendees and that with this amendment they be approved as a correct record.

**74 Public Question Time**

There were no public questions.

It was agreed to take item 6 Community Resilience Team as the next item as Steve Trenchard, Executive Director of Transformation, was experiencing difficulty accessing the meeting to present the System Update.

**75 Community Resilience Team**

The Chair invited Penny Bason, Community Response Lead, and Clare Featherstone, Culture and Heritage Manager, to speak to their report - copy attached to the signed minutes – which described the work of the Team which was formed to support Shropshire people, in response to the COVID-19 pandemic.

It had been hoped to show a video created by the Community Resilience Team, which demonstrated the way that colleagues across directorates had pulled together to support people, but technological issues had prevented this. It was hoped to share this with Board Members soon after the meeting.

The Community Response Lead highlighted key points from the report including how the Community Response Teams had been pulled together, provided a resource pack on keeping people safe, mapped hundreds of community groups across the county, supplied food and medicine to those shielding or vulnerable, and hot meals for homeless people, and delivered a small grant programme for community groups and town and parish councils.

The Culture and Leisure Manager said the approach of staff and partners had been amazing. The learning from working would provide a lasting legacy in going forward. Staff from the Culture Leisure and Tourism teams involved in the Community Response Team had found it an extremely rewarding experience and now had an understanding of the social care system, public health and vulnerable in the community, which they would not have had otherwise. She personally recognised the contribution of all and particularly the Community Response Lead who had made it all happen.

The Chair gave thanks for a superb report which demonstrated the capacity within Shropshire's communities and the way organisations had risen to the challenge and continued to do so in progressing forward to recovery from the pandemic. He hoped people would continue to be responsible in their behaviour to prevent any further upsurges.

He thought it would be useful to consider to what extent a smart solution could be implemented across Shropshire to share resources with the community and voluntary sector on an ongoing basis to support vulnerable people, without the need for a formal clinical pathway.

The Director of Public Health went on to express her personal thanks to communities, voluntary sector and the community response teams who had done and continued to do such a crucial job, during which so much had been learnt about collaboration. The pandemic had highlighted inequalities and vulnerable communities across the county and the role of the voluntary sector had been crucial in addressing this. The Community Response had built well on the work previously undertaken by the Board in its workshops on community resilience.

Speaking in the capacity of a local Councillor as well as Portfolio Holder for Adult Social Care and Health, Councillor Dean Carroll added his thanks and paid tribute to the excellent work undertaken by the local Community Reassurance Teams. The Portfolio Holder for Children's Services added his gratitude for the invaluable work undertaken, often in very rural areas and in recognising the impact on young people across Shropshire.

**RESOLVED:**

To note the good work of public sector and voluntary and community sector colleagues to support people during the Covid-19 panic

To endorse the considerations for the next phase of the community response to Covid-19.

## 76 System update

David Evans, Chief Officer, CCGs, stepped in to present the report (copy attached to signed minutes) on behalf of Steve Trenchard, Executive Director of Transformation, Shropshire, Telford and Wrekin CCGs, who was experiencing problems accessing the remote meeting. The report covered the restore and recovery phase of the Systems Response to Covid 19, processes in place to address this as a system, and capturing learning and risks and mitigations as part of the restore process.

Mr Evans explained how some services had been shut down quickly or rapid changes made in the way they were delivered at the outset of the pandemic. With winter approaching, very careful planning would be needed to restore services and a framework had been developed for restoration which involved consideration and sign off at Bronze, Silver then Gold tiers. The framework would include consideration of safety and PPE supplies, impact on staffing, and impact on other organisations.

A clear agreement was in place to restore services, however, to allow social distancing, 200 beds had been lost throughout the system and this along with a backlog caused by drops in diagnostic and theatre capacity would impact on time taken to get back to pre-pandemic condition. He reported that Social Care and Health colleagues had been working more collaboratively and collegiately than ever before and system leaders were committed to continue working this way into the future.

The Chair asked to what extent that innovation in the use of digital technology during the pandemic could be taken forward and whether this could help free up capacity in conventional clinical environments.

Mr Evans explained that it was intended to progress with this positive change, however, a balance needed to be struck between risk in ability to assess patients and using technology in this way. Dr Povey explained that remote consultations took up more time than normal face to face consultations.

Dr Povey emphasised the importance of getting the message to the public that GP services and emergency care were open and available and that they should not be reticent about seeking help if needed. The Chair felt if it could be useful for the Health and Wellbeing Board to help get this point across.

Lynn Cawley, Healthwatch, offered the support of Healthwatch in getting this message out. The Healthwatch April and May report had shown that people had not been seeking help as they thought surgeries would be very busy, and others had not wanted a telephone appointment.

Ros Preen, Community Health Trust, reported that technology had been made available to all providers at the outset to support patients gain access using video technology. The Community Health Trust intended to continue to make use of this into the future and although not a panacea, it had been a considerable help over the last months.

The Board noted that GPs were nonetheless as busy as they had ever been, and activity levels had been rising over the last four weeks throughout health and social care. Hospitals were at 80 – 85% of pre-Covid admission levels.

The Chair thanked Mr Evans for stepping in to present the item. The Board looked forward to a further update at the next meeting.

## 77 Mental Health

Gordon Kochane and Jo Robins, Consultants in Public Health, introduced their report and gave a presentation (copies attached to signed minutes) which provided an update on the prevention and resilience work which had been taking place during the Covid-19 Pandemic.

Mr Kochane outlined the key activities that had been implemented by the Mental Health Resilience and Prevention Group which had been set up early in the pandemic period.

Jo Robins referred to the work of the Children and Young People Task and Finish Group. A gap in supporting young people's mental health pre CAMHS referral had been identified. Training was being made available to teaching staff to prevent children from being passed between organisations and teams. An opportunity had arisen to work with Leeds University Action Research Project to bid for work with schools particularly in relation to Covid19 and preparation for returning to school. This would give a base line for all schools re mental health and wellbeing of children.

Jo Robins also spoke to slides provided by Jo Oliver, HR Officer, Shropshire Council, who had been unable to access the meeting. These covered the importance of being able to talk openly about mental health and feeling part of an organisation. The Yammer Groups at Shropshire Council had been well used, and these had really helped open up conversations about mental health and linked people together.

Heather Ireland, Mind, had been unable to access the meeting but the slides she had provided referred to the close liaison established with Shropshire Council throughout the response to Covid-19. The work and reach could not have been achieved without this vital partnership work. The restructuring of Shropshire Mind activities during the pandemic had allowed Stress, Anxiety and Wellbeing Zoom sessions. Feedback from these sessions had been excellent indicating they had provided invaluable support for anxiety and stress issues. Even though lockdown was lifting there was still a need for these.

Tanya Miles, Assistant Director Social Care and Health, commented on the fantastic partnership work which had brought mental health to the front and centre of the response to lockdown. She expressed thanks for all the partnership had achieved.

In response to a question, Jo Roberts agreed that support for parents and young people over the summer holiday would be needed and it might be that the Zoom sessions could be adapted for young people. The Big White Wall would also be available to them. The Group was giving a lot of thought to support for young people and asked for endorsement and support of the Health and Wellbeing Board in its work.

The Director of Public Health commented on the amazing work undertaken and confirmed that mental health would always be a priority for the Board and the Public Health Team, with the aim of achieving equal parity for mental and physical health. The launch of the

Big White Wall would be very exciting and partnership working would continue after Covid to deliver a lot more.

The Portfolio Holders for Adult Social Care and Health and Children's Services endorsed all that had been said about the great work and hoped the momentum could be kept up.

Jackie Jeffery, voluntary sector representative, also endorsed all that had been done and stressed the importance of continuing to work in this way, especially if a surge of mental health issues emerged coming out of lockdown. Support would particularly be needed for those who were vulnerable or had no digital access.

The Chairman added his thanks for the excellent work undertaken. He asked about a comment in the action plan about the 24 hour helpline. Mr Kochane explained that this action referred to the Mental Health Trust 24 hour helpline. Information would be sent out to PCNs from the CCGs to clarify that anyone with a mental health concern about themselves or another could call it.

The Chair referred to the Board's discussions about low level interventions for mental health support. Members considered issues around measuring the outcomes of these so the need to continue to fund them could be demonstrated. Officers were confident that outcomes could be demonstrated for this purpose, with many projects having built in outputs.

**RESOLVED:**

**To be aware and recognise the range of activities that have been able to be progressed in a short period of time.**

**To consider whether there are any other opportunities that could be explored supporting the mental health and wellbeing of our residents.**

**78 COVID-19 Health Protection Board**

The Director of Public Health introduced her report (copy attached to signed minutes) which included an update on COVID-19 within Shropshire, the Local Response to Test and Trace and the publication of the Local Outbreak Control Plan 2020. She also provided a presentation (copy also attached to signed minutes) reflecting on the 125 days since the Board had last met.

To date in Shropshire there had been 1,397 cases, and 246 deaths in the community, care home and hospital sectors. Every single case and life had been affected and there had been an impact on every single person.

She explained how the pattern across Shropshire had differed to that of the national one being delayed, longer and flatter. The pandemic had progressed to an outbreak stage and a close eye needed to be kept on the situation - local outbreaks would happen and preparation was needed for a potential second peak.

She referred to the phenomenal collaboration over the last months and the Outbreak Plan was built on this good practice. The Plan was a live one which would be updated and strengthened continually (available from [www.shropshire.gov.uk/local-outbreak-plan](http://www.shropshire.gov.uk/local-outbreak-plan)) The Board considered the increase in number of cases in workplace settings and heard that particular work place settings were more susceptible than others but that spread was sometimes in the communities around that work place setting.

The Portfolio Holder for Adult Social Care and Health thanked the Director of Public Health and her team for the excellent job on the Local Outbreak Plan which had been pulled together very quickly. He emphasised some of the messages which it was important for all to remember – that lock down was easing, not lifting, and every single person still needed to take precautions in order to save lives. He had been made aware of some recent large scale parties which had been held in people’s homes and emphasised that anyone attending and not observing social distancing would not only be putting their own life at risk but other vulnerable people around them.

The Chair also expressed thanks to the Public Health Team for the Plan. The Director of Public Health thanked everyone who had contributed to the plan across the Council, NHS, Community, Voluntary Organisations. Covid had not gone away and the guidelines were there for a reason, she thanked all those who were adhering to the guidance.

**RESOLVED:**

That:

The Board notes the position to date in Shropshire in relation to COVID-19;

The Board recognise that Shropshire Council, alongside all local authorities in England, has been required by the Department of Health and Social Care to develop and deliver a COVID-19 Outbreak Control Plan. The Shropshire Outbreak Control Plan is for local publication and will be one of the Outbreak Control Plans set out to prevent and contain COVID-19 across England;

The Board recognise that the Shropshire Outbreak Control Plan meets the specifications set out by the Department of Health and Social Care, and meets the outbreak control needs of the Shropshire population;

The Board recognise that the plan will be updated as new evidence on COVID-19 emerges and as local systems develop including its associated action plans and risk logs.

**79 Chairman's Updates**

The Chairman reported on correspondence received from NHS England which stated that NHSE and NHSI had removed MSN Health Care Ltd (trading as Severn Pharmacy) based at Unit 53 Riverside Shopping Centre, from the pharmaceutical list for the Shropshire Health and Wellbeing Board area, with effect from 31 May 2020.

**80 AOB**

<TRAILER\_SECTION>

Signed ..... (Chairman)

Date: