

## KENT COUNTY COUNCIL

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### HEALTH REFORM AND PUBLIC HEALTH CABINET COMMITTEE

MINUTES of a meeting of the Health Reform and Public Health Cabinet Committee held in the Online on Friday, 20 November 2020.

PRESENT: Ms D Marsh (Vice-Chairman), Mrs A D Allen, MBE, Mr D Butler, Mr A Cook, Mr D S Daley, Mrs L Game, Ms S Hamilton, Mr S J G Koowaree, Mr B H Lewis, Mr P J Messenger and Mr K Pugh

IN ATTENDANCE: Mr Farrell

### UNRESTRICTED ITEMS

**124. Apologies and Substitutes**  
(Item 2)

Apologies were received from Mr Lymer and Mr Ridgers.

**125. Declarations of Interest by Members in items on the agenda**  
(Item 3)

There were no declarations of interest.

**126. Minutes of the meeting held on 9 September 2020**  
(Item 4)

It was RESOLVED that the minutes of the meeting held on 9 September 2020 are correctly recorded and a paper copy be signed by the Chairman. There were no matters arising.

**127. Verbal updates by Cabinet Member and Director**  
(Item 5)

- 1) The Cabinet Member for Adult Social Care and Public Health, Mrs Bell, gave an update on the following issues:-

- **Kent Community Foundation Knock and Check Campaign**

It was reported that KCC was supporting the winter Kent Community Foundation Knock and Check Campaign, which was asking residents to help the most vulnerable during winter months. This tied in with the select committee on social isolation which had made recommendations including raising awareness of social isolation and loneliness. The details of the campaign were available at: [KentCF.org.uk/knockandcheck](http://KentCF.org.uk/knockandcheck)

- **New App Aid Launched for Alcohol Awareness Week (16-20 Nov)**

It was reported that it was Alcohol Awareness Week (16-20 November 2020) and an app had been launched to help residents who wanted to reduce their alcohol intake. Around 300,000 people in Kent were reported to be drinking more than the recommended safe limits and experts had raised concerns around the impact of lockdown on drinking.

- **Flu Jab Vaccinations**

It was reported that the flu vaccination programme was to be expanded and Kent residents were encouraged to get flu vaccines. It was reported that flu kills, on average, 11,000 people in England each year. New research suggested that people infected with both Covid-19 and flu were more at risk of severe illness and death. The full list of people to be called for a free vaccination was available on the NHS website.

- **Covid-19 Community Champions**

A joint project with KCC, Medway Council and NHS Kent and Medway Clinical Commissioning Group was encouraging residents to sign up to become Covid-19 Community Champions. The Champions would share the latest government advice with their local communities and advise other on how to safe in the pandemic. The Champions would receive regular updates on the latest information and advice.

- 2) The Director of Public Health, Mr Scott-Clark and Ms Duggal, Deputy Director of Public Health, gave an update on the response to Covid-19, including the following:-

- **Update**

Across the county there had been an upward trend in cases of Covid-19. There were concerns about Thanet and Swale districts. Work was being undertaken with partners to understand these trends. The Health and Care Cell plugged into strategic command, working with districts, officer and leaders and cabinets of districts. Briefings had been held with all districts or were planned across the county. Work was being done across the Kent border with Bexley, Dartford to align work and coordinate.

A deep dive was being undertaken with Public Health England colleagues both regionally and nationally for Swale and Thanet districts.

The increase in cases had started in the 16-24, younger cohort and then in the working age population, then cases in the older populations had started to increase. This was of concern due to older people experiencing more severe symptoms.

- **Care Homes and enhanced support to the national contact system locally.**

Ms Duggal reported that the pattern had changed with Covid-19 cases in care homes. During the first wave of the pandemic, there was increased risk of outbreaks in larger care homes. However, in the second wave, most care homes that had experience outbreaks had between 20 to 49 residents. Measures had been put into place to support care homes with issues that had been identified. Weekly meetings were taking place with care providers and commissioning to address public health issues. There was a care home cell for escalation of any issues.

There had been good liaison between KCC, Public Health England and the Infection Control teams.

- **Test and Trace**

Test and Trace was a local partnership of KCC and Kent's district councils. Calls handlers were receiving training and would contact people that the national system had not been able to trace. Call handlers would give advice about self-isolation and offer assistance. Where someone was not able to be contacted by telephone, district councils would assist by knocking on doors.

Public Health England agreement was required to begin work on the system and it was anticipated that the system would go live on 26 November 2020.

- **Vaccinations**

All vaccinations that were in the 'pipeline' were still to go through the licensing process. Planning was being undertaken for how vaccinations would be rolled out and advice had been sought about the priority order of vaccinations. It was anticipated that one of the earliest priority groups would be staff and residents within care homes. Work was being undertaken alongside the NHS and through the local resilience forum around the logistics required to roll out the vaccinations.

- **EU Transition**

Work was being undertaken with the Emergency Planning Team and others to ensure the transition is conducted in a Covid-19 secure and safe manner, looking at facilities on truck stop sites and in particular at the sites in Manston and near Ashford.

- **Asymptomatic Testing**

It was being considered how to target testing to areas with higher infection rates and rolling out testing would be a challenging logistical exercise. Military assistance had been used in other parts of the country but it was not anticipated that the army would be able to provide this assistance in Kent.

The lateral flow tests which would be used for asymptomatic testing gave much faster results in around 30 minutes.

- **Easing of lockdown**

There had been high numbers of infections in Kent and 2 districts were on the national 'watchlist'. There had been discussion about what the tier system would look like coming out of lockdown for Kent and changes to the tier system were anticipated.

3) In response to questions it was noted:

- Concerns were raised about agency care workers with multiple places of work. Agency care workers in homes received infection control advice and asymptomatic testing was going to be introduced for domiciliary care workers.
- There had been publicity around Covid cases in custodial settings on the Isle of Sheppey but it was highlighted that there had been outbreaks in 2 large care homes. However, the majority of cases were in private residences.
- Concerns were raised around Covid-19 cases in deprived areas in the county and challenges around self-isolation.

- School closures were not as a result of instructions from KCC. Individual schools had to make business decisions but were supported to stay open where possible.
- Guidance and enforcement measures were received from central government.

**128. Public Health Commissioning Update**  
(Item 6)

- (1) Ms Tovey gave an update to Members regarding Public Health Commissioning. It was reported that detailed work had been undertaken to achieve a balanced budget for 2021/22. There was work underway to plan for the further wave of the pandemic, more flexible working to meet changing patterns of demand and new ways of delivering services.
- (2) In addition to this, work was continuing on digital approaches to public health.
- (3) It was RESOLVED that the information set out in the report be noted

**129. Response, Restart and Recovery - Sexual Health Services**  
(Item 7)

- 1) Ms Tovey outlined the report regarding the delivery of Sexual Health Services and the impact of the pandemic, the response of services and priority actions needed to support recovery. Sexual Health Services had continued to be provided during the pandemic and progress had been made on projects such as a sexual health hub in Thanet.
- 2) Work had been done to increase use of digital services and the pandemic had accelerated progress. Service users were being triaged remotely and footfall into clinics had been reduced to support social distancing rules. Where a visit to a clinic was not required, service users were managed digitally, such as being sent out tests in the post as required. User feedback had also been positive about services received by telephone or post.
- 3) Some NHS staff had been redeployed on a temporary basis to support critical NHS services and there had also been challenges regarding availability of premises and reduced capacity in buildings.
- 4) There had also been challenges due to some pharmacies and GP surgeries having limited capacity to deliver sexual health services during the pandemic.
- 5) Further work would be undertaken to evaluate the approaches taken during the pandemic and it was anticipated that a mixed model of service would be used in the future as some service users would continue to need access to a face-to-face service.
- 6) It was RESOLVED that the information set out in the report be noted.

**130. Measures to prevent the take up of smoking**  
(Item 8)

- 1) Ms Smith outlined the report regarding measures to prevent the take up of smoking in Kent, including collaborative work being undertaken. Kent was below the national average for numbers of people smoking and it was estimated that around 168,000 people in Kent were smokers. It was reported that these people were less likely to want to give up smoking and it was an entrenched behaviour.
- 2) The rates for smoking in pregnancy were slightly higher than the national average and this was of concern due to the impact of smoking on birthweight and other health implications which arise with the mother.
- 3) The focus of work was on children due to the high proportion of people who started smoking illegally, before they are 18 years old. Also, a consideration was smoking was a factor in health inequalities and perpetuating poverty.
- 4) Work was being done to mitigate the risk factors for smoking uptake in young people. Measures to reduce smoking in adults also affected children as they were less likely to be influenced to take up smoking.
- 5) There was a 'Smoke Free Homes' campaign to raise awareness around the dangers of second hand smoke. The branding of the campaign was being redesigned in collaboration with a primary school in Maidstone and new materials would be disseminated in children's centre, schools and within the housing sector.
- 6) Work was done with Trading Standards to monitor and manage underage sales of tobacco and to reduce the illicit tobacco trade. Tobacco sold illicitly was supplied in smaller quantities and therefore was more accessible to children.
- 7) Information 'theatres' had been going into schools to gather insights on children's views on smoking. It was reported that children had seen smoking as a way of coping with stress and as negative but the feedback had been that they had not ruled out smoking in the future, particularly if friends were smoking.
- 8) Further work was being undertaken in schools via the Schools Public Health Service (SPHS) and the development of School Public Health Plans using data from schools. In addition to schools, prevention and intervention work was being undertaken within youth services via We Are With You.
- 9) The Kent Tobacco Control Alliance was working in partnership on ways of preventing and treating smoking.
- 10) In response to questions, it was noted:
  - Enforcement was important in prevention of uptake of smoking. Trading Standards were working closely with the police and local authorities on prosecution measures for retailers selling illicit tobacco.
  - The importance of smoke free homes was emphasised.
- 11) It was RESOLVED that the presentation be noted.

**131. 20/00105 – Issuing Direction under Health Protection (Coronavirus, Restrictions) (England) (No.3) Regulations 2020 – Hop Farm, Paddock Wood**  
*(Item 9)*

- 1) Mr Scott-Clark introduced the report and advised Members that a multi-agency risk assessment had highlighted concerns about an event at the Hop Farm not being Covid-19 compliant and assurances had been sought. Assurances were provided 4 days later and KCC were able to rescind the order.
- 2) It was RESOLVED that the report be noted.

**132. Report of Decision taken between meeting (20/00095)**  
*(Item 10)*

- 1) It was RESOLVED that the report of decision (20/00095) taken between meetings be noted.

**133. Work Programme**  
*(Item 11)*

- 1) It was RESOLVED that the planned work programme for 2020/21 be noted and agreed.