

KENT COUNTY COUNCIL

HEALTH REFORM AND PUBLIC HEALTH CABINET COMMITTEE

MINUTES of a meeting of the Health Reform and Public Health Cabinet Committee held Online on Wednesday, 23 November 2022.

PRESENT: Mr A Kennedy (Chairman), Mr N Baker (Vice-Chairman), Mr D Beaney, Mrs P T Cole, Mr P Cole, Ms K Constantine, Ms S Hamilton, Mr D Jeffrey, Mr B H Lewis, Mr J Meade, Mr S Webb, Ms L Wright, Mrs T Dean, MBE (Substitute) and Mr H Rayner (Substitute)

ALSO PRESENT: Mrs C Bell and Mrs S Chandler

IN ATTENDANCE: Mr S Collins (Director of Integrated Children's Services (West Kent and Early Help and Preventative Services Lead)), Dr A Ghosh (Director of Public Health), Miss K Reynolds (Democratic Services Officer) and Mr D Westhoff (Democratic Services Officer)

UNRESTRICTED ITEMS

224. Apologies and Substitutes
(Item 2)

Apologies for absence had been received from Mrs L Parfitt-Reed, Mr D S Daley, Mr P Harman and Mr D Ross. Mr H Rayner was present as a substitute for Mrs L Parfitt-Reed and Mrs T Dean was present as a substitute for Mr D S Daley.

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

There were no declarations of interest.

226. Minutes of the meeting held on 20 September 2022
(Item 4)

RESOLVED that the minutes of the meeting of the Health Reform and Public Health Cabinet Committee held on 20 September 2022 were correctly recorded and that they be signed by the Chair.

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

1. The Cabinet Member for Adult Social Care and Public Health, Mrs Clair Bell, gave a verbal update on the following:

- a) There had been a considerable focus on the Council budget for 2023-24. Efforts were ongoing to find savings and efficiencies across Adult Social Care and Public Health while ensuring that all required services were still provided for vulnerable residents.
 - b) Health leaders in Kent had been supporting the national campaign to ensure that those at risk from Covid-19 and flu got their free NHS vaccinations this winter. A new campaign 'Protect your Lungs' had been launched in South-East England to encourage people with breathing and lung issues to be safe during the winter. The Council's annual campaign 'Keep Warm and Well' informed people how they could look after vulnerable people in their communities.
 - c) World Mental Health Day was held on the 10 October, with the theme to make mental health and wellbeing for all a global priority. In Kent 'Release the Pressure' and 'Live Well Kent and Medway' were part of a network of health and wellbeing support services provided by charities to residents that supported the improvement of their mental and physical health. There had been an increase in people who had sought support which had been attributed to the impact of the cost-of-living crisis. Further details about these services are available at: <https://www.kent.gov.uk/social-care-and-health/health/mental-health>.
 - d) On 11 October Mrs Bell hosted a webinar on digital inclusion, in partnership with Cantium and Cognitive Publishing.
 - e) In response to questions from Members it was said that Public Health did not lead on warm banks but were aware of actions being taken in local communities. Colleagues within the Council would be contacted to confirm whether there were any areas where the Council could help coordinate actions or make more accessible the locations of warm banks county-wide.
2. Dr Anjan Ghosh, Director of Public Health, gave a verbal update on the following:
- a) There had been a reduction in the number of Covid-19 cases since the start of November, seen in data from hospitals, the Office of National Statistics Infection Survey and ZOE Health Data. The use of mechanical ventilation beds and weekly deaths had also declined. The effective vaccine programme was accredited with this positive data, with 81% of residents 80 and above and 62% of those over 50 had received their Autumn booster vaccination.
 - b) All local acute NHS Trusts were in Operational Pressures Escalation Level (OPAL) 4, the maximum level of alert, which highlighted the pressure in the system before entering the coldest part of winter.
 - c) On the Manston processing centre, it was noted that Public Health had been working closely with the Home Office and the UK Health Security Agency. An inspection by the Public Health team of the Manston processing centre was to take place on 29 November 2022 which would focus on infection, prevention and control. This would be the third visit. Many residents at the processing centre had been moved out and the site was now operating well below the capacity of 1600.
 - d) The Interim Integrated Care Strategy would be published in December. It was said that this version would be updated over time with further details. Public Health was working with Districts and Health and Care Partnerships to develop action plans informed by the priorities of the Integrated Care Strategy. Dr Ghosh then informed the Committee of the six shared outcomes from the Integrated Care Strategy.
 - e) In response to questions from Members it was said:

- i. That KCC does not have a direct role in the rollout of the immunisation project. Dr Ghosh said that he would raise the concerns regarding long waiting times in the Folkestone area with the relevant people. There had been attempts to integrate both Covid-19 and Flu jabs within the same centres but were found often not be practically feasible.
- ii. There appeared to be some evidence of vaccine fatigue, especially amongst certain groups. A roaming vaccination bus had been sent to improve take-up in targeted areas. It was noted that despite concern of a low vaccine uptake amongst health and social care staff, an improvement had been seen in more recent data.
- iii. It was said that the Manston processing centre was the responsibility of the Home Office. There were no links with local GPs, but medical practitioners were onsite provided by two organisations Medevent and Aeromed, supported by local acute trusts. Dr Ghosh said that he was confident that professional and suitable care was being provided at the site.

3. RESOLVED to note the verbal updates.

**228. Decisions taken outside of the Cabinet Committee Meeting Cycle –
22/00094 Family Hub Transformation
(Item 6)**

1. Mr Stuart Collins, Director Integrated Children Services (Early Help Lead), gave an overview of the report and explained that key decision 22/00094 had been taken in accordance with the process as set out in Part 2 paragraph 12.35 of the Constitution. He noted that Kent County Council had been successful in its application for the Family Hubs Transformations, however, more detailed work was required to progress the development of formal proposals with partners and stakeholders. It was said that there would be efforts to develop full joint working between Public Health and Midwifery services.
2. In response to questions from Members it was said that:
 - i) The Family Hubs programme would be hosted in physical spaces such as Children’s Centres, and youth and community settings. In addition, and to ensure that the programme was accessible and far-reaching, there would be a virtual and a digital offer as well.
 - ii) It was confirmed that KCC was eligible to receive a national grant of up to £10m over the next 3 years, dependent on the specific proposals developed. The Cabinet Member for Integrated Children’s Services said that she would take advantage of any additional funding that becomes available.
 - iii) It was confirmed that the programme would be delivered through a multiagency partnership and that there would be a focus on preventative services, with more details on specific projects forthcoming.

RESOLVED to note that the following decision had been taken in accordance with the process as set out in Part 2 paragraph 12.35 of the Constitution: 22/00094 – Family Hub Model in Kent.

229. Public Health Annual Quality Report for 2021/22
(Item 7)

1. Dr Ghosh introduced the report which described the characteristics that needed to be in place for high quality public health services, the systems that were in place in Kent, noted the learning from incidents and complaints and subsequent developments of services. The key finding of the report was that there were systems and processes in place to promote safe effective services that provide a positive user experience.
2. In response to questions from Members, it was said:
 - i) That attempts to maximise the use of social prescribing will continue.
 - ii) Dr Ghosh said he understood concerns raised over the name of Wellbeing Health Improvement Partnership (WHIP) and would enquire as to the possibility of a name change. However, the name was long-standing.

RESOLVED to consider and comment on the content of the report.

230. Work Programme
(Item 8)

RESOLVED to note the work programme.