

KENT COUNTY COUNCIL

HEALTH REFORM AND PUBLIC HEALTH CABINET COMMITTEE

MINUTES of a meeting of the Health Reform and Public Health Cabinet Committee held in the Council Chamber, Sessions House, County Hall, Maidstone on Tuesday, 5 September 2023.

PRESENT: Mrs P T Cole, Mr P Cole (Vice-Chairman), Ms K Grehan, Peter Harman, Jenni Hawkins, Mr J Meade, Mrs L Parfitt-Reid, Mr D Ross, Ms L Wright, Mr R G Streatfeild, MBE and Mrs L Game (Chair)

ALSO PRESENT: Mr D Watkins

IN ATTENDANCE: Dr A Ghosh (Director of Public Health), Mrs V Tovey (Public Health Senior Commissioning Manager) and Mr D Westhoff (Democratic Services Officer)

UNRESTRICTED ITEMS

271. Apologies and Substitutes
(Item 2)

Apologies were received from Mr Kennedy, Ms Hamilton and Mr Beaney.

272. Election of Chair
(Item 3)

1. Mr Ross proposed, and Mr Shonk seconded that Mrs Game be elected Chair of the Health Reform and Public Health Cabinet Committee. No other nominations were received.
2. RESOLVED that Mrs Game be duly elected Chair of the Health Reform and Public Health Cabinet Committee.

273. Election of Vice Chair
(Item 4)

1. Mrs Cole proposed, and Mr Shonk seconded that Mr Cole be elected Vice Chair of the Health Reform and Public Health Cabinet Committee. No other nominations were received.
2. RESOLVED that Mr Col be duly elected Vice Chair of the Health Reform and Public Health Cabinet Committee.

274. Declarations of Interest by Members in items on the agenda
(Item 5)

There were no declarations of interest.

275. Minutes of the meeting held on 11 July 2023
(Item 6)

RESOLVED that the minutes of the meeting held on 11 July 2023 were correctly recorded and that a paper copy be signed by the Chair.

276. Verbal updates by Cabinet Member and Director
(Item 7)

1. The Cabinet Member for Adult Social Care and Health, Mr Dan Watkins, provided a verbal update on the following:

Suicide Prevention – The Hope Community Art Exhibition, where art representing hope was used to raise awareness for suicide prevention, went on a regional tour following its launch at Margate's Turner Contemporary. The exhibition had been organised by the Kent and Medway Suicide Prevention team, local artists and community groups it had also been co-produced by those who had experienced poor mental health. After the launch in July, it had visited Maidstone, Chatham and Tunbridge Wells. The exhibition aimed to highlight the help available to anyone living with suicidal thoughts urges to self-harm or the loss of a loved one who had taken their own life. Mr Kennedy, one of the Councils mental health champions, spoke at the launch event. Mrs Bell, the former Cabinet Member for Adult Social Care and Public Health, had visited the Maidstone event. Mr Watkins then gave a list of support options provided by the Council including:

- Release the Pressure – [Release the pressure - Kent County Council](#)
- Live Well Kent and Medway – [Welcome | Live Well Kent](#)
- Every Mind Matters – [Every Mind Matters - Kent County Council](#)

Weather Warnings - Mr Watkins noted that a yellow heat health alert had been put in place for early September. Mr Watkins added that the alert was required as vulnerable people were at increased risk and local NHS services expected to be under increased pressure. It was said that Members were encouraged to share awareness information provided through the Councils social media channels.

Bird Flu Restrictions – Mr Watkins said that the last of the control measures in Elham, Folkstone and Hythe had been lifted, which had previously been in place since July 2023. The 10-kilometre surveillance zone, which restricted the movement of birds and bird products without special permission, had also been lifted. Mr Watkins noted that the risk of avian influenza to public health was low, but encouraged residents to help reduce its spread by not touching dead or sick birds with their bare hands and if they find one or more dead birds of prey, swans, geese, ducks or 5 or more dead gulls or wild birds of any species to report it to the Department for Environment, Food and Rural Affairs (DEFRA).

2. Dr Ghosh provided an update on the following:

Covid-19 Update

- Dr Ghosh noted that Public Health continued to monitor national data on the number of cases, hospital admissions and, when applicable, the number of deaths. An escalation through each data point would be a cause for concern, but that was not occurring at this time. It was said however that there had been an increase in the number of cases but was starting from a low base. In Kent, the number of cases had gone increased by 201 over the last 7-day period compared with the previous 7 days, an increase of 6.9%.
- It was noted that the United Kingdom Health Security Agency (UKHSA) had confirmed a new Covid variant called BA.2.86, which had been detected in London. A risk assessment had been completed by the UKHSA and still much was unknown about the variant, but the number and size of mutations were of concern. It was said that due to the new variant, waning immunity and increased indoor mixing as winter begins the Secretary of State for Health and Social Care had asked NHS England to bring the vaccination programme forward and accelerate delivery of the programme, this would now begin, for both Covid-19 and flu, on the 11 September 2023.
- Dr Ghosh said that case rates in Kent would continue to be monitored closely as far as the data allows.

Suicide Prevention

- Dr Ghosh noted that 10 September 2023 marked World Suicide Day, and the suicide prevention team were working on awareness campaigns. A 24-hour text line was available and awareness was being raised by Release the Pressure.
- It was noted that on 6 September 2023, a major workshop would take place working with the national government to bring stakeholders together to encourage them to work closely to get better access to treatment and recovery services for substance misuse. It was said that several plans were in place to increase the numbers in the services including re-design of the website to enhance accessibility. A new employment and recovery programme would support those in recovery to get back into work. A targeted outreach campaign on drug and alcohol deaths had begun in Thanet and Canterbury.

Drug Deaths – Dr Ghosh said the number of drug-related deaths had increased nationally and in Kent. The committee were informed that the South-East was at risk from the threat of adulterated heroin, formed by a group of chemicals called Nitazenes and manufactured in laboratories across Europe. Not much is known about synthetic drugs other than they are far more addictive than the original substance. It was said that there had been two confirmed deaths from Nitazenes in Kent. To counter this a local drug information unit had been set up which worked closely with local and national enforcement, police and providers.

Core20PLUS5 – Dr Ghosh said the Core20PLUS5 agenda was the NHS framework for tackling health inequalities. It was noted that the 20 refers to the 20% most deprived in a geography and the 5 group was defined locally. Public Health was supporting the Integrated Care Strategy (ICS) and Integrated Care Board (ICB) in the definition of the plus groups with partner organisations. It had been adopted that Gypsy, Roma and Traveller communities were to be one of the priorities as part of the 5 group.

Family Hubs

- Dr Ghosh noted that Public Health had supported the development of the Family Hub tester sites in Margate and Sheerness, through programmes of training, presentation of resources, tools to use with families and a supervised toothbrush programme for oral health.

- Following the development of the business case and evaluation of bids providers had been procured for co-creating an Infant Feeding Strategy, which would help develop insights into barriers to breastfeeding, engaging with dads and partners and co-creating Perinatal Mental Health and Parent Infant Relationships Strategy.

Sexual Health – It was noted that Public Health was supporting the ICB in the development of a Women’s Hub, with funding from NHS England of £595,000 over two years. It was hoped to develop a network that prioritises women’s health targeting certain areas including sexual health for older people and menopause. A new premise had been identified as a single location for integrated specialist sexual health services in Margate, due to open in October 2023.

Lifestyle Interventions

- Public Health was working closely with the ICB and the NHS to develop an adult weight management pathway. It was noted that there was a block on the capacity of the pathway, which would need to be looked at differently going forward.
- Public Health was in the process of developing an ageing well strategy, informed by the WHO Healthy Age approach.

Tobacco Control – It was said that there was a new Kent, Young People and Vaping website launched, which would provide information to the public on the facts of vaping and would signpost to school resources. The webpage can be viewed here: [Vaping: The facts - Kent County Council](#)

3. In response to comments and questions from Members, it was said.

(a) Asked by a Member if the Public Health team were just monitoring the COVID-19 data or beginning to actively prepare response measures. Dr Ghosh said they were reviewing the guidance and escalation triggers so that they were prepared to ramp up measures if required. But were currently at a new stage of living with COVID-19 and are actively monitoring the data available from proxy indicators. It was noted that if an escalation was noticed the response would be national rather than county-based and plans were in place ready. Mr Watkins added that preventative methods were being actively considered including the distribution of vaccinations from 11 September 2023 to ensure the safety of residents if a new variant was of more concern.

(b) Asked if greater COVID-19 testing could be done in hospitals to get more data on the unfolding situation with the new variant Dr Ghosh said that Public Health were working closely with UKHSA and that PCR testing was being done in hospitals with genetic testing done on a sample of the results to monitor new variants. It was said that if the new variant of concern were to become more prominent it would be picked up by this testing regime.

(c) A Member asked about a statement made by the Director for Public Health in Cornwall and if Kent was to expect an announcement for residents to exercise caution. Dr Ghosh said that COVID-19 messaging would be proportional to the regional context and would work closely with the Council’s communications team to support this.

(d) Asked about the situation regarding Nitrous Oxide Dr Ghosh said work was ongoing with colleagues across the Council and would provide more detail at the next meeting.

277. 23/00075 - Family Hubs - Star for Life, Perinatal Mental Health and Parent Infant Relationship Interventions
(Item 8)

Wendy Jeffreys, Consultant in Public Health, was in attendance for this item.

1. Mr Watkins gave a brief overview of both Family Hubs – Start for Life decisions that were being presented at the meeting. It was noted that the funding was from the central government to expand the county's offer in perinatal mental health and infant feeding.
2. Wendy Jeffreys then provided further details. The importance of early parent and infant bonding was highlighted, and the funding would be used to train and support the workforce in attachment theory, trauma-informed practice and response and parent infant relationships. There would also be measures to support cases where an intense need was required. It was said that there was a lack of local data on the level of need and work was ongoing to assess this. Nationally 15% of babies in the general population required specialised parent infant relationship interventions. It was said there would be a co-creation of a parent and infant relationship and perinatal mental health strategy which the Council did not currently have but was a Department for Education requirement. Ms Jeffreys said that this work would be implemented as part of wider children's and young people's strategies which were currently being developed.
3. In response to comments and questions from Members, it was said:
 - (a) A Member said that there was limited detail for the £3 million figure and how this had been calculated as it worked out at around £60 per child affected by disorganised attachment. It was asked that further detail be provided on the extent of the problem and the effectiveness of the funding. Dr Ghosh said the funding was nationally prescribed but would be used to build on work already ongoing. For context, it was noted that The Public Health grant is about £49 per person. It was said as part of the funding Public Health would continue to monitor and gain further understanding of the extent of the problem and effectiveness of the interventions. Ms Jeffries said that the extent of the need was unknown at this time, but more would be understood as the programme progressed. It was noted that this was the case nationally and not just in Kent. It was noted that the current focus would be on early interventions up to the age of 2, but in the future interventions for older children would also be considered. The Member asked that a report could come back to update on the progress and effectiveness of the programme.
 - (b) A Member welcomed the report and the funding, as further research was needed in this area. It was noted that a review of how effective the interventions were would be helpful to inform future decisions.
 - (c) It was recommended that a report would come back in 12 months on the progress of the programme.
 - (d) During the meeting it was noted that the figures in the report did not match. After the meeting, it was confirmed that the correct figure was £3,051,809.
4. RESOLVED, subject to the above, the Health Reform and Public Health Cabinet Committee agreed to:

- i. APPROVE the service workforce development in regard to low to moderate perinatal mental health and parent-infant relationships, as detailed in the report.
- ii. APPROVE the required expenditure to deliver this activity via Family Hub Grant Funding up to £3,051,809 for the period ending April 2025.
- iii. DELEGATE authority to the Director of Public Health, in consultation with the Cabinet Member for Integrated Children's Service and the Cabinet Member for Adult Social Care and Public Health, to take necessary actions, including but not limited to allocating resources, expenditure, entering into contracts and other legal agreements, as required to implement the decision.

278. 23/00076 - Family Hubs- Start for Life, Infant Feeding
(Item 9)

Wendy Jeffreys, Consultant in Public Health, was in attendance for this item.

1. Dr Ghosh introduced the report.
2. Ms Jeffreys gave an overview of the decision. It was said that the enhanced infant feeding provision would continue to be provided by commission provider Kent Community Healthcare Foundation Trust. It was noted that the contract would be varied and the wording would be amended when the decision would be taken by the Cabinet Member.
3. Ms Jeffreys said that the funding would enable the Council to focus on areas that had been neglected and allow greater opportunities for contact to be made with families during times when more support was required. There would also be ongoing work to help better understand the barriers faced by families in more deprived communities. It was noted that the co-creation of the 5-year infant feeding strategy had begun which would be adopted by the local maternity and neonatal system for Kent and Medway. Work was also ongoing to simplify messaging in this area.
4. In response to comments from a Member, it was agreed to bring a report back in 12 months to update on progress.
5. RESOLVED, subject to the above, the Health Reform and Public Health Cabinet Committee agreed to:
 - i. APPROVE the service development for the Infant Feeding Service and wider workforce development, as detailed in the report.
 - ii. APPROVE the required expenditure to deliver this activity via Family Hub Grant Funding up to £1,256,332 for the period ending April 2025.
 - iii. DELEGATE authority to the Director of Public Health, in consultation with the Cabinet Member for Integrated Children's Service and the Cabinet Member for Adult Social Care and Public Health, to take necessary actions, including but not

limited to allocating resources, expenditure, entering into contracts and other legal agreements, as required to implement the decision.

279. Public Health Performance Dashboard - Quarter 1 2023/24
(Item 10)

Victoria Tovey, Head of Strategic Commissioning – Public Health, and Dr Connie Wou were in attendance for this item.

1. Mrs Tovey noted that the overall performance was positive out of the 15 Key Performance Indicators nine were RAG rated Green and one Amber. Five Key Performance Indicators were not available at the time of writing this report.
2. In response to comments and questions from Members, it was said.

(a) The Chair asked what could be expected from the 5 KPIs for which data was not yet available. Mrs Tovey said that they were not aware of any concerns.

(b) Asked about One You Kent and reported inconsistent buy-in from GP's surgeries with some referring several individuals and others none at all. It was also noted that some patients were unaware that they were being referred. It was questioned how this scheme was funded and if it was per individual referred. Mrs Tovey gave an overview of One You Kent and noted that 6 district councils provided the service alongside Kent Community Health Foundation Trust. It was said that there had been national incentives for referrals but they would always expect that they were informed of referrals with consent, it would be of concern if people were not being told about referrals. Mrs Tovey said they would investigate any specific concerns outside the meeting. Mrs Tovey said there could be a review of promotional materials.

(c) Dr Connie Wou gave further information on the weight management pathway and the work being done to improve the service. There was work ongoing to streamline the referral pathway and to ensure that people were aware of referrals. Dr Wou said they welcomed further specific details if there was a concern.

(d) The Chair asked for this to be looked into and Mrs Tovey said it would be and reported back.

(e) A Member raised a concern that the triage process was too long which was discouraging patients from taking referrals and that there were issues with the communication pathways between different agencies.

(f) A Member asked if there was a way to self-refer as this would free up capacity at GP surgeries. Mrs Tovey said there were a lot of individuals that chose to self-refer, especially after public information campaigns. It was also noted that the One You Kent website signposts to self-help resources such as apps and services were provided by third parties such as GP surgeries themselves.

(g) Asked about the KPI target figures and if these were relevant and proportionate to the whole population. It was also asked if absolute figures rather than percentages could be provided. Mrs Tovey said that the services were impacted by COVID-19 with services such as NHS Health Checks shutdown during the period, therefore many of the KPIs

were set in response to this but it was noted that the services had caught up very quickly which was why so many were green. It was said that each year KPIs would be reviewed to drive continuous improvement and many of the KPIs would be changed to reflect this and stretch the providers as much as possible. Mrs Tovey noted that further information on relative performance that was requested could be provided in the next update.

(h) A Member noted that KPI PH15 had dropped under 95%, but that the target had been increased from 30 days to 10-14 days and that the full story behind this effort was not reflected in the data. The Member praised the efforts of the team to achieve this. Mrs Tovey said that they would report the feedback and noted that a decision was taken to push the measure.

(i) Asked by a Member about utilising Kent's social media platforms to promote Public Health messages to reach a wider audience. Mrs Tovey welcomed the idea and would feed it back to the communications team.

(j) Dr Ghosh said that improvement was being made as identified by the green KPIs, as over the previous couple of quarters there had been reds and orange. However, the targets would be increased going forward to ensure continuous improvement.

3. RESOLVED the Health Reform and Public Health Cabinet Committee noted the performance of Public Health commissioned services in Q1 2023/2024.

280. Public Health Service Transformation Update *(Item 11)*

1. Dr Ghosh introduced the update.

(a) It was said that the report gave an overview of an intensive piece of work that would take about a year to complete which was a root and branch review of all Public Health commissioned services.

(b) Dr Ghosh then provided four drivers behind why the work was required, 1) the impact of COVID-19, 2) the changed commissioning environment, 3) the Council's financial position and the real terms reduction in the funding from the Public Health Grant next year and likely going forward and 4) two key contracts with major community health service providers were up for renewal in March 2025.

(c) Dr Ghosh noted the focus of the review would be on value for money, sustainability, alignment, innovation and technology.

(d) It was said that they were currently at stage 1, the data-gathering phase.

2. Mrs Tovey provided a further update on the ongoing progress. A methodology had been employed to ensure that all services were reviewed robustly to fully understand strengths, weaknesses, opportunities and threats. It was said that workshops were being planned with key stakeholders, providers and users to review ongoing work and get ideas for innovations and improvements. Following this options appraisal process would take place. It was said that the transformation aimed to ensure that services were as preventative as possible and would help to reduce health inequalities in Kent.

3. In response to comments and questions from Members, it was said:

(a) A Member expressed concern that the focus on financial savings would lead to the net effect of fewer services for Kent residents. More detail on the impact of the transformation on the population was requested. Mrs Tovey said they would always have to look at value for money and gave some examples of where efficiencies could be found. It was noted that impact on the population information could be provided going forward. Dr Ghosh added that they would always work within the Public Health Grant conditions and the context of an ageing population and the profile of comorbidities changing for the worse. Dr Ghosh said Public Health would be focussed on system-wide prevention interventions and other target areas going forward but efficiencies would be required to fund new opportunities. It was also said that the Council's financial position would affect the operation of Public Health.

(b) Mr Watkins said that the review would identify which programmes were most effective and funding would be directed towards them. Mr Watkins highlighted that this work was vital to responding to the financial strains seen in Adult Social Care and Public Health.

(c) A Member asked that text and email be the default communication method as this was cheaper than post. It was noted that post should remain an option when required for accessibility reasons. Mrs Tovey agreed and said certain services were much more digitalised than others but would aim to ensure it was the case system-wide going forward.

(d) Mrs Tovey said that there would be mixed approach to include those people who did not have digital or online access.

(e) The Chair asked for a progress update between stages 2 and 3. Mrs Tovey said they would be happy to update the committee as the transformation progresses.

4. RESOLVED the recommendations were agreed as outlined in the report.

281. Vaping in Kent - with a focus on underage use *(Item 12)*

Dr Connie Wou was in attendance for this item.

1. The Chair introduced the update and gave some remarks on vaping that noted its positive uses but expressed concern that young people saw them as a fashion item due to their price, looks and availability.
2. Dr Ghosh gave an overview. It was noted that there had been an industry-wide move amongst tobacco companies from investing in cigarette products to vapes due to a change in social norms. Dr Ghosh said that vapes required both a legislative and a local approach to prevent adverse effects of vapes on public health.
3. Dr Connie Wou said that vapes were a very effective treatment for smoking but were not without risk. It was noted that there was some evidence of a rise in vape use amongst younger people and some of the health and environmental risks

associated with vaping were detailed. It was noted that Kent, other local authorities and the Local Government Association had all recommended that action be taken on disposable vapes and that the Public Health team were acting proactively with partners and trading standards to tackle this issue.

4. In response to comments and questions from Members, it was said:

(a) Asked for clarification on the figures from the Kent website ([Crackdown on illegal vape sales and more support to stub out cigarettes 'welcome' - News & Features - Kent County Council](#)) which mentioned Department of Health and Social Care funding of £ 3 million, number of smokers in Kent and the cost of smoking-related issues for the county. Wou said they would review the statistics on the website before giving a response. The funding mentioned on the website is for a national initiative.

(b) Members said that the central government should be lobbied to add a tax or levy on vape sales at the point of purchase to cover environmental costs.

(c) Asked that vape purchases be included in challenge 25. Dr Wou said it was being considered but new retailers may not be fully aware of the regulations and would need to make them aware as part of the process. Details on the fine handed to those retailers selling to underage people would be provided after the meeting.

(d) A Member said that teenagers need to be educated on the health risks of vapes and that social media platforms could be the most effective way of communicating this. Another Member added that local sports personalities could be encouraged to raise awareness. Dr Wou said that work was ongoing to provide young people with the right information and was working with schools and parents to circulate this. It was noted that Public Health would work with the communications team to plan how to reach out to young people best.

(e) It was said that a letter should be sent to the Prime Minister to ensure he keeps the pledge to crack down on legal loopholes and aggressive marketing strategies. It was also asked if countywide evidence and data had been supplied to the central government following their call for evidence.

(f) A Member expressed concern that sweet shops were selling vapes and if there was a way for the Council to discourage this. Dr Wou said that trading standards would look into issues such as this as part of their project.

(g) It was said that there needs to be an easy access portal for local people to report illegal sales. Dr Wou said that trading standards would use local intelligence to help crack down on illegal sales, Dr Wou would follow up with them on their plan for how locals can report instances.

(h) Asked if data had or was being collected on the health and financial costs of vaping and if this justified the benefits it brought as a treatment for adult smoking. Dr Wou said that this point would be taken away and reported back.

(i) The Chair asked Mr Watkins what the next steps would be. Mr Watkins said that he would follow up the letter calling for a ban on disposable vapes with the Parliamentary Under-Secretary of State for Primary Care and Public Health and he noted that most of the action would have to be done at a national level. It was said that targeted measures

with schools and trading standards could be taken as outlined by Members. There would be a crackdown on illegal vapes being sold within the county.

(j) A Member asked for an update report to be brought back to the committee.

(k) The committee agreed that it be recommended that the Cabinet Member for Adult Social Care and Public Health, Mr Dan Watkins, follow up with national government partners on the ban of disposable vapes.

5. RESOLVED that the Health Reform and Public Health Cabinet Committee commented on and noted the report.

282. Work Programme *(Item 13)*

The Work Programme 2023/24 was noted.