

## 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 on Thursday, 21 January 2021.

PRESENT: Mr G Lymer (Chairman), Miss D Morton (Vice-Chairman), Mrs A D Allen, MBE, Mr A Cook, Mr D S Daley, Mrs L Game, Ms S Hamilton, Mr B H Lewis, Mr K Pugh, Mr A M Ridgers and Mr R H Bird

### UNRESTRICTED ITEMS

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

Apologies were received from Mr Butler and from Mr Koowaree for whom Mr Bird was present.

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

There were no declarations of interest.

**136. Minutes of the meeting held on 20 November 2020**  
*(Item 4)*

It was RESOLVED that the minutes of the meeting held on 20 November 2020 are correctly recorded and a paper copy be signed by the Chairman. There were no matters arising.

**137. 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:

Symptom Free Covid-19 Testing

It was reported that symptom-free Covid-19 testing was operational at 19 sites across districts in Kent. Another 5 sites were to open to reach the target of 2 testing sites in each district of Kent by the end of January 2021.

It was recommended for people to undertake testing every 2 weeks, particularly critical workers or those needing to leave their homes regularly. By 15 January 2021, 93862 lateral flow tests had been conducted and 956 tests had come back as positive for Covid-19.

Mrs Bell said that she had taken a test herself at the Ashford Eurogate site. She said that her experience was that the centre operated very efficiently and safely and she thanked Public Health officers, the KCC property team and army personnel for all their hard work.

There were job vacancies at the testing centres and people were encouraged to apply to assist at the symptom free testing sites.

The tests could be booked via: [www.kent.gov.uk/symptomfreetest](http://www.kent.gov.uk/symptomfreetest)

### Better Health Campaign

KCC was supporting the national Better Health Campaign, which encouraged healthier lifestyles, losing weight, quitting smoking and reducing alcohol intake. Information on the campaign was available on the One You webpage.

### NHS Confederation Report – Health on the High Street

The NHS Confederation had produced a report at the end of 2020 called Health on the High Street, which looked at how the NHS could work with local authorities and support high street regeneration. The report considered how information and support could be provided where people are shopping, etc, and looked at using properties on the high street to deliver services.

The report showcased the One You shop in Ashford which had between 400-500 visitors each month prior to the pandemic. The shop was operated by the Kent Community Health Foundation Trust, with funding from KCC and the premises was provided by Ashford Borough Council.

### Smoking Cessation

It had been reported in September 2020 that there was a waiting list for smoking cessation services for the first time due to the pandemic. Third party providers (GP and pharmacy) had ceased their delivery of support as their work was diverted to support the pandemic. Service capacity was increased by offering telephone, digital sessions and the My Quit Route app. The waiting list was reduced to 21 as of the week which commenced 2 January 2021 from 407 in September 2020 and the longest waiting time had been reduced to one week.

There had been 182 referrals in January 2021 and work was ongoing to increase capacity as it was envisaged third party providers would not be able to restart services due to involvement in the vaccination programme for Covid-19.

### Health Visiting Service

In line with the national guidance, the health visiting checks had been put on hold in March 2020 apart from high-risk families. For this reason, there had been a significant drop in performance. A 'catch up' programme has been delivered and take up had been good. It was expected that performance would be as expected for Quarter 3.

### Baby Friendly Services

Kent's children's centres had been awarded 'Baby Friendly' accreditation following an audit conducted by UNICEF which looked at breast feeding support and advice. The audit assessed staff knowledge and skills and families were interviewed about the care

they had received. 100% of clients had reported that they were happy with the support they had received.

2) The Director for Public Health, Mr Scott-Clark gave an update on the following issue:

#### Health and Europe Centre

Work was ongoing with the Health and Europe Centre and a board meeting had taken place on 20 January 2021. KCC were directly involved with projects including the Dwell project, which aimed to reduce the impact of diabetes and work was being undertaken around sexual health.

Some projects had been impacted by the pandemic and work was to continue until around March 2024, funded by the European Union.

### **138. Update on Covid-19 - Advice and Services** (Item 6)

- 1) Mr Scott-Clark, Director for Public Health gave an update on Covid-19 and reported that the infection rates for Kent were just below the average for the south east of England at 486 cases per 100,000 on 16 January 2021. There had been a steady decline in the case rates but case rates needed to continue to reduce.
- 2) Good progress had been made with the roll out of symptom-free testing. Around 1.2% of tests had been positive and these cases had often been in areas with higher infection rates. Rates across the South East had begun to reduce.
- 3) Work had been undertaken over Christmas to manage the situation when the French government imposed new Covid-19 travel restrictions on hauliers crossing the Channel. Testing sites had been put into place for hauliers at Manston and Sevington as well as across the country.
- 4) The Health Protection Board and the Health and Care Cell continued to function. KCC was present at the SCG with wider partners on a daily basis.
- 5) It was reported that KCC commissioned services continued to function. There had been a small amount of redeployment with some of the commissioned services such as health visiting and seconded Public Health consultants were supporting the vaccination programme.
- 6) In response to questions from Members, it was noted:
  - Around 300 Armed Forces personnel had been involved with the set-up of mass vaccination sites in Kent but civilians were to staff sites moving forward.
- 7) It was RESOLVED that the update be noted.

### **139. Response, Restart and Recovery - Lifestyle Services** (Item 7)

- 1) Ms Tovey, Head of Strategic Commissioning (Public Health) presented an update on how Public Health Lifestyle Services had responded to the challenges presented by the pandemic and how the services had adapted to continue to provide vital services.
- 2) Services had been provided by a variety of providers including Kent Community Health Foundation Trust, district and borough councils, primary care and pharmacies, as well as smaller voluntary and private sector providers.
- 3) The national guidance on Covid-19 had informed decisions on which services should be continued and which ones should be halted. NHS Health Checks were paused in the early part of the pandemic but had been re-started in the autumn.
- 4) Work was undertaken to adapt to the regulations, as many services had previously been provided face-to-face or in groups. New ways of delivering services online were adopted. There were capacity issues for delivery of some services, as providers were diverted to priorities around Covid-19, eg delivering the vaccine.
- 5) There had been national guidance to provide relief payments to support providers with cashflow in the initial 6 months of the pandemic. This was implemented in Kent, however, going forward the Council was only paying for services received.
- 6) Services had made adaptations very rapidly and some services had been more popular than ever using online classes and groups. A number of new services had been launched including a multi-agency wellbeing hub, apps, and live Facebook streams.
- 7) KCHFT developed a video to support and encourage clients who were unfamiliar with digital and new technologies.
- 8) Work was to be undertaken to evaluate the new ways of working that had been used during the pandemic, to collect user feedback and to consider future priorities moving forward. An approach would also be agreed as to how to catch up with NHS Health Checks programme.
- 9) It was RESOLVED that the information set out in the presentation be noted.

**140. Public Health Performance Dashboard**  
(Item 8)

- 1) Ms Tovey, Head of Strategic Commissioning (Public Health) provided an update regarding the Public Health Performance Dashboard. There were some unusual patterns in performance areas that were usually stable, due to Covid-19 and national directives. Some of the impacts had been due to services stopping and redeployment of NHS staff. National deadlines for reporting had also been delayed and therefore, there had been a delay in data being received by KCC.
- 2) A correction was made to the report to clarify that there was only one metric where data was not available, which related to sexual health. 10 KPIs were 'RAG' rated green, 3 were amber and 1 was red. It was anticipated that the Quarter 3 performance would be improved.
- 3) It was RESOLVED that the Public Health Performance Dashboard be noted.

**141. Kent and Medway Specialist Bereavement Service Commissioning**  
(Item 9)

- 1) Ms Tovey, Head of Strategic Commissioning (Public Health) introduced the report regarding Kent and Medway Specialist Bereavement Service Commissioning. Funding had been secured for 2 new services across Kent and Medway for 3 to 5 years.
- 2) Mr Woodhouse, Suicide Prevention Programme Manager said that there was one procurement process for the two services:
- 3) The first was a service for children and young people up to the age of 25 bereaved in any circumstances. This service would provide a specialist level of support, which would include counselling.
- 4) The second was an early intervention service for those who have experienced suicide bereavement. Contact would be made with families within 3 days of the bereavement to provide emotional and practical support.
- 5) An update would be brought to the Cabinet Committee and the services would be in place by the summer.
- 6) In response to questions and comments from Members, it was noted:
  - The two services would be promoted through appropriate channels. The service for children and young people would be promoted through schools, the youth service and other channels to connect with young people.
  - The main referral routes for the service relating to suicide bereavement would be through Kent Police and the Coroner's Service.
  - Many people had been affected by issues relating to bereavement and the commissioning of these services was welcomed.
- 7) It was RESOLVED that the information set out in the report be noted.

**142. Kent and Medway Care Record**  
(Item 10)

1. Ms Spore, Director of Infrastructure introduced the report regarding the Kent and Medway Care Record (KMCR).
2. Mr Day, Data Infrastructure Lead outlined the KMCR presentation and it was noted:
  - KMCR was a way of sharing information with professionals legitimately involved in a patient's care within Kent and Medway. It was part of a wider national shared health and care programme.
  - National standards had been set as to what information could be shared. The system allowed immediate and more consistent information sharing between agencies.
3. In response to questions and comments from Members, it was noted that:

- Only registered professionals with a legitimate interest would be able to access information on the KMCR system. The system was primarily for clinicians' use.
- Further information was sought regarding the communications plan for the roll out and how members of the public would be informed about how their information would be used and shared.
- Reassurances were given about information governance and the security of the system.

4. It was RESOLVED that the information set out in the report be noted.

**143. Draft Capital Programme 2021-24 and Revenue Budget 2021-22**  
*(Item 11)*

- 1) Ms Cooke, Corporate Director, Finance introduced the report and said the format of the Draft Cabinet 2021-24 and Revenue Budget 2021-22 reflected the strategic considerations that were needed, particularly because of the impact of Covid-19 and the role of Public Health in the pandemic.
- 2) Mr Shipton, Head of Finance -Policy, Planning & Strategy reported that the same information had been provided to all Cabinet Committees. It was noted that there had not been confirmation regarding the main Public Health grant from central government and therefore, proposals were based on estimates of what the grants would be. As a result of having only estimates, changes would have to be made either prior to the meeting of County Council or authority would have to be delegated to make the necessary changes on receipt of the confirmation of the grants.
- 3) It was RESOLVED that the information set out in the report be noted.

**144. Work Programme**  
*(Item 12)*

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