

# **CUMBRIA HEALTH AND WELLBEING BOARD**

**Meeting date: 20 November 2020**

**From: Director of Public Health**

## **CUMBRIA PUBLIC HEALTH ALLIANCE UPDATE**

### **1.0 EXECUTIVE SUMMARY**

- 1.1 ***This report gives the Health and Wellbeing Board an update on the development of the Cumbria Public Health Alliance/Outbreak Engagement Board (hereafter referred to as the PHA-OEB) its links to the Locality Forums and the mechanisms for ensuring two-way influence and dialogue between the Board and each locality through agreed strategic aims and locally identified priorities.***
- 1.2 ***This report also updates the Health and Wellbeing Board on the first meetings of the Alliance in its new role as the Outbreak Engagement Board (OEB) held on 26 August, 17 September and 27 October 2020, via Microsoft Teams.***
- 1.3 ***The Board are asked to note that, after taking on the Outbreak Engagement Board role, the PHA-OEB is now meeting on a more regular basis, to ensure that discussions are timely and regular and to ensure a swift response to the evolving situation in the county.***
- 1.4 ***The PHA-OEB items reflected its new dual role. Agenda items included:***
  - ***Public Covid-19 Dashboard (standing item);***
  - ***Communications Planning (standing item);***
  - ***Anti-Poverty Strategy (26 Aug and 27 Oct);***
  - ***Cumbria Testing Strategy (17 Sept);***
  - ***Thriving Communities (27 Oct).***

### **2.0 LINKS TO THE HEALTH AND WELLBEING STRATEGY**

- 2.1 The LGA review of the Health and Wellbeing System clearly identifies the PHA-OEB role in respect of influencing the preventative elements of the Joint Health and Wellbeing Strategy.
- 2.2 The PHA-OEB has had significant input into the Cumbria Health and Wellbeing Strategy and is an integral part of the overall delivery plan.
- 2.3 The PHA-OEB is now receiving regular performance updates in respect of assigned outcomes in the Health and Wellbeing Strategy Delivery Plan, Covid-19 Dashboard and Communications Planning.

### **3.0 RECOMMENDATION**

- 3.1** *That the Board notes this update from the PHA-OEB and any identified plans for future activity.*
- 3.2** *That the Board notes that, where appropriate, each item in this report includes reference to the pertinent section of the Cumbria Joint Public Health Strategy.*
- 3.3** *That the Board notes the agreed scope for the Thriving Communities element of the Covid Recovery Workstream as set out in paragraph 4.16.*

### **4.0 KEY MESSAGES FROM THE PUBLIC HEALTH ALLIANCE – 26 AUGUST, 17 SEPT 2020 AND 27 OCT 2020**

#### Covid-19 Dashboard (standing item)

##### *Pertinent to new roles and responsibilities of the Public Health Alliance*

- 4.1** Most recent update at Week 42 showed a continuing rise in cases, with Barrow having the highest number of new cases for the 7<sup>th</sup> consecutive week.
- 4.2** Barrow, Carlisle and Eden all had figures higher than the national average, with the highest rise in cases in the 45-59 age group; hospitalisations had increased for both Morecambe Bay and North Cumbria CCG areas.
- 4.3** Members noted that there was a slight lag in the data available. Also, the practice of labs processing tests in date order meant that this was limiting the timeframe for contact tracing.
- 4.4** Members raised concerns around the accuracy of some private testing and asked whether data might be broken down further for younger people, specifically under-18s.

#### Communications Planning (standing item)

##### *Pertinent to new roles of the Alliance as the Outbreak Engagement Board*

- 4.5** Members raised the following issues, reflecting concerns raised by Cumbrian communities:
- Ensuring that GP surgeries opening times and current appointments for appointments were clearly communicated to local communities and further communications efforts were needed;
  - Lack of day services and respite for vulnerable people and their carers due to the impact of Covid;
  - Mental health and signposting to services in light of the impact of Covid;
  - Accessing flu jabs in rural areas, with transport issues and the added anxiety of travelling on public transport;
  - Supporting schools to provide the appropriate responses when panic arises around children showing possible symptoms of Covid;
  - School transport with children returning to education in September but many services not operating until October;
  - Clarification on whether vulnerable people who are non-verbal can attend hospital with their support person to assist their communications;

- How best to shape messaging to young people around the importance of social distancing and socialising, to protect older people in the community;
- Discussions have been ongoing around getting direct engagement with the public through the use of community forums;
- Ensuring that public engagement involves marginalised groups will be key;
- There was evidence of unofficial messages being put out into the public realm through flyers in local areas, which was brought to members' attention.

Anti-Poverty Framework for Cumbria (26 Aug and 27 Oct meeting)

*Pertinent to the Joint Public Health Strategy themes of Poverty, Obesity and Transport*

- 4.6 The impact of the pandemic has meant a sharp increase in people unable to afford food, doubling of the number of benefit claimants and Bank of England predictions that the economy would take until 2022 to return to pre-Covid levels of recovery. Against this backdrop, it has been decided to establish a poverty framework for Cumbria.
- 4.7 The pandemic has meant existing inequalities have been magnified, whilst new vulnerabilities had been created, for example where whole areas of the economy had suffered due to Covid restrictions (eg: tourism and hospitality).
- 4.8 Members raised and noted the following points:
- Financial issues needed tackling as soon as possible, to prevent further difficulties spiralling;
  - The Communications Team at Cumbria CVS meeting to prepare information on debt advice, benefit support and links to mental health support;
  - There were issues for people with disabilities returning to the job market and for carers needing financial assistance;
  - Mental health inequalities was a key issue for both CCGs to be addressing;
  - Areas of progress and focus needed to be identified for the poverty framework going forward;
  - The PHA-OEB scheduled an update on this item at their October meeting.
- 4.9 At the October meeting members learned that the Here To Help campaign had been launched, with details on the County Council website and that DEFRA monies was being used for local food-based initiatives via Area Managers.
- 4.10 A reference group for the Strategy was now meeting monthly bringing together advisory groups, academics and public sector agencies. The recovery plans would now be reviewed by local partners to see how they can build the impact of poverty into their plans.
- 4.11 Barrow and South Lakes had declared poverty emergencies in the current pandemic.

### Testing Strategy (17 Sept meeting)

- 4.12 The draft Cumbria Testing Strategy was presented, with feedback and comments invited.
- 4.13 The Strategy outlined the proposed testing arrangements for Cumbria, in preparation for the winter months.
- 4.14 Fixed testing sites were planned for Barrow, Carlisle, Penrith, Kendal and West Cumbria as the core 'Pillar 2' provision. Confirmation of a new testing site in Carlisle was asked for, as soon as this had been confirmed, as the current site is located on a car park that is prone to flooding in the Autumn months.

### Thriving Communities

- 4.15 Members considered a report on Thriving Communities as a priority for the Covid recovery, building on the community response to Covid.
- 4.16 The PHA-OEB agreed the approach set out in the report. In particular, the PHA-OEB agreed that the focus of the programme is on three areas:
- Building on the community response during Covid: maintain this momentum; identify enablers to support this work and address any barriers to community activation.
  - Identify those areas where Covid has had an adverse effect on the future sustainability of the VCFSE sectors and investigate actions to mitigate the impact.
  - Rethink the relationship between the VCFSE and formal sectors. Looking at the way that interactions, including financial can be optimised for greatest system impact.
- 4.17 Underlying all of this work will be the refresh of the Community Compact.
- 4.18 Further work is now underway to engage with a wide set of stakeholders to further define the scope of the programme and begin to identify appropriate actions.

**Colin Cox**  
**Director of Public Health**

*November 2020*

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#### **APPENDICES:**

None

#### **BACKGROUND PAPERS:**

No background papers

Author: Victoria Milbourne  
[vic.milbourne@cumbria.gov.uk](mailto:vic.milbourne@cumbria.gov.uk)  
Tel: 07919 298793