

HEALTH AND WELLBEING BOARD

29 June 2020

Commenced: 1.00 pm

Terminated: 2.30 pm

Present:	Councillor Warrington (Chair)	Executive Leader
	Councillor Fairfoull	Deputy Executive Leader (Children and Families)
	Councillor Cooney	Housing, Planning and Employment
	Councillor Wills	Health, Social Care and Population Health
	Steven Pleasant	Chief Executive, Tameside MBC and Accountable Officer, Tameside and Glossop CCG
	Stephanie Butterworth	Director of Adult Services
	Jeanelle De Gruchy	Director of Population Health
	Liz Windsor-Welsh	Chief Executive, Action Together
In Attendance:	Shaun Higgins	Active Tameside
	Chris Rushton	Active Tameside
	Phil Nelson	GMFRS
	Jane Higham	GMP
	Donna Kelly	Jigsaw Homes
	Andrew Searle	Tameside Adult's Safeguarding Board
	Henri Giller	Tameside Children's Safeguarding Board
	Karen James	Tameside and Glossop ICFT
	Jessica Williams	Director of Commissioning
	Debbie Watson	Assistant Director of Population Health
	James Mallion	Consultant Public Health
	Sarah Threlfall	Assistant Director - Policy, Performance and Communications
	Jordanna Rawlinson	Head of Communications
Apologies for Absence:	Richard Hancock	Director of Children's Services

1. DECLARATIONS OF INTEREST

There were no declarations of interest.

2. MINUTES

The Minutes of the meeting of the Health and Wellbeing Board held on 5 March 2020 were agreed as a correct record.

3. LOCAL OUTBREAK CONTROL PLAN

The Director of Population Health submitted a report detailing the Local Outbreak Control Plan for Tameside, which provided a summary of the principles of Covid-19 outbreak management across Tameside including an outline of the key roles and responsibilities across the system, the mechanisms and infrastructure in place and appropriate routes of accountability.

It was reported that the plan was a high level summary of the approach to managing and preventing the spread of Covid-19 in Tameside, which would allow residents and communities to live safely with Covid-19 during the current phase of the pandemic. It included sections on how the approach aligned to national and regional systems, including integration with the Greater Manchester Outbreak Control Plan, which was currently in development, detail of the approaches that were being taken to prevent outbreaks and a description of the systems and steps in place to effectively manage outbreaks that may occur across Tameside. The plan was iterative and would continue to be informed by local circumstances, intelligence, evidence and on-going engagement within communities.

The Board received a presentation, which outlined four principles that supported the approach to the plan:-

1. Utilising existing Public Health systems
2. Adopting a whole system approach
3. Delivery via an efficient, effective and responsive system informed by data and local intelligence
4. Sufficient resources

A diagram illustrating the cycle of outbreak planning was explained to the Board.

The Director of Population Health informed Members that Tameside was one of 11 beacon Councils and would lead the way in formulating actions and implementing and deploying necessary resources in order to deal with any local outbreaks of Covid-19. Best practice and lessons learned would be shared and the Tameside plan would interconnect with the Greater Manchester plan to ensure a consistent approach.

It was highlighted that a preventative approach was key to reduce transmission and avoid outbreaks. This could be achieved by effective communication and engagement with communities, test and trace systems, stringent infection control and use of PPE, providing support to individuals and organisations, use of data and specific planning and risk assessments for high risk settings and groups. Data received from the national Test and Trace system in addition to the Joint Biosecurity Centre was vital in addition to local information gathered from Tameside communities in order to create robust local, real-time data dashboards to enable rapid identification of any hotspots. The practical steps of responding to an outbreak were detailed within the plan. A clear governance structure was in place and local data and intelligence cells collated reports for the Health Protection Board.

The Assistant Director of Population Health provided examples of national and regional scenario planning focusing on identification and the necessary actions taken in response to outbreaks within the care home setting, within the community and within a school. The outbreaks had been complex requiring bespoke approaches and had provided invaluable learning that had informed the planning process for any future community outbreaks.

The Assistant Director of Policy, Performance and Communication outlined the objectives of the ongoing communications strategy for Covid-19. The national messages had been tailored for Tameside to ensure it was relevant to the population with a focus on individual responsibility to help control the spread of the virus. Local data and insight had been utilised to create targeted communication for high risk groups and those with protected characteristics. The three key themes of lifting lockdown, living with Covid-19 and Building Back Better were highlighted and a selection of communications was shown to the Board.

A reactive communications strategy had been developed, that focused on positivity to be delivered in a proactive way, and the key responsibilities of the team, should there be a local outbreak, were provided.

A number of communication channels, such as utilising GP practice text messaging services, were suggested to cascade information to residents. The Assistant Director of Policy, Performance and Communication advised that a large scale distribution list had been created from a variety of sources and a global text message was due to be sent. Members of the Board also suggested that an effective way to engage with specific groups was for a trusted community leader to utilise their existing network channels to distribute information. In addition, producing information in a variety of languages and formats enhanced inclusivity.

Clarification was sought and provided on what constituted an outbreak and it was confirmed that work on domiciliary care guidance was on-going. Concern was expressed around testing within sheltered accommodation settings. It was confirmed that there was flexible testing at a Greater Manchester level.

A discussion ensued around the use of heatmaps. It was reported that the team had recently received information of positive cases that had occurred within the community and were analysing this data alongside local intelligence to gain a better insight.

Members of the Board thanked officers for their work and keeping the community regularly informed. It was agreed that meetings of the Health and Wellbeing Board be held on a more regular basis while the Covid-19 pandemic continued and information presented at Health Protection Board meetings be distributed via email to Members of the Health and Wellbeing Board.

RESOLVED:

- (i) That an additional meeting of the Health and Wellbeing Board be arranged; and**
- (ii) That the content of the Local Outbreak Control Plan be agreed and recommended to Strategic Commissioning Board and Executive Cabinet.**

4. URGENT ITEMS

There were no urgent items.

CHAIR