

COMMUNITY SERVICES AND LICENSING COMMITTEE

MEMBER REPORT

NAME OF ORGANISATION/BODY	Gloucestershire Health Overview Scrutiny Committee & Gloucestershire Covid-19 Local Outbreak Engagement Board
DATE OF LAST MEETING ATTENDED	HOSC 17 November COVID 19 Board 13 November
BRIEF REPORT	<p>Gloucestershire Health Overview Scrutiny Committee:</p> <p>The links to papers are https://glostext.gloucestershire.gov.uk/documents/q9521/Public%20reports%20pack%20Tuesday%2017-Nov-2020%2010.00%20Health%20Overview%20Scrutiny%20Committee.pdf?T=10</p> <p>I would not print them off as there are over 150 pages.!</p> <p>Key issues</p> <p>1. Discussions underway ref the remit of the committee last year GCC without discussion with District or NHS partners, stripped out the scrutiny responsibility for Public Health and Adult Social Care to a new Communities Scrutiny Committee, which does not have District representation. The argument to do this was to not to have to long agendas and meetings with some danger of items not being given due attention. However, the argument to include all of the above as it used to be is in my view compelling as the issues of adult social care and public health are inextricably linked to NHS services and plans.</p> <p>2. COVID 19 of course dominates the agenda for the NHS.</p> <p>Some headlines approx. 2500 operations were cancelled between March and Sept.</p> <p>A and E capacity very stretched issues include increased handover times from ambulances into A and E i.e. on occasion 4 or 5 ambulances queuing to admit patients, of course while they are doing this they are not available to undertake normal work. Also waiting times for walk in have increased with more and more people having to wait over the target of 4 hours.</p> <p>In terms of delivery of non COVID work i.e. operations etc. they not only have to face the normal winter pressures but a backlog caused by COVID. They are planning to work on 80% capacity for the next 6 months. Some good news the cancer treatment has returned to pre COVID levels, however, they were not reaching national norms then.</p>

The build up to Xmas is expected to be very challenging for the Acute Trust.
Increasing assessment beds is helping as are virtual wards (details in the papers)

Mental Health is also a particular challenge

There has been a 25% increase in eating disorders and suicide rates are rising.

The key services run primarily by the Community and Together trust are endeavouring to put more resources into this key area and the contact details etc are on the website.

This issue is compounded by increased isolation and loneliness. In relation to young people the county has received funding for what is known as “Trailblazer” aimed particularly at working with schools and it is hoped after good reports on the evaluation this will be rolled out across the county

A key issue for Districts and other groups is to widely publicise the support that is available, to also aim to reduce stigma attached.

Have asked if the excellent mental health first aid course which is aimed at non health professionals could be delivered virtually.

Also the important role of Mental Health champions was mentioned be good to get an update/clarity of those here at SDC.

Flu Vaccination this programme has been rolled out and is being delivered by primary care (mainly GPs) cannot emphasise enough the importance of getting a flu jab (see below for info on wider COVID vaccination issues)

So in summary the NHS particularly the Acute Trust i.e. Gloucester Royal and Cheltenham Hospitals are under enormous pressure. Many of the lessons from the first wave have been learnt and put into practice, staff of course are very stretched and it is no longer a “short term crisis”. The public are encouraged to only use A and E if its “Life or Limb” and use other sources of support i.e. GPs, Pharmacies, 111 if at all possible first.

Gloucestershire Covid-19 Local Outbreak Engagement Board:

Sadly am not permitted to share the papers of the above Board they do contain what is viewed by Government as sensitive information. There has already been one leakage, which caused a big problem with further Data sharing from national to Local sources. The boards primary responsibilities are to advise on overall communications strategy and plans, and to give oversight on the implications of measures being taken to fight the pandemic. Am permitted and have regular dialogue to share with the Leader, Chief Executive and Head of Environmental Health

We in Stroud now have the highest rates in the County, sadly it seems there is no specific cause ie a specific large employer site that has caused it, we do know some care homes have been hit again. The other factor is the national lockdown has as yet not had any real effect and the numbers should start to tail off the weekend 21/22 Nov.

Some key points to take into account

The COVID virus that is active now is different to one that was in existence in March

Vaccinations will help but will be limited in their availability and prioritised to target groups e.g. over 85s, Care workers, NHS staff etc. GPs are now being approached to deliver the vaccinations. However, it's not until next Summer that it is felt we may turn the corner so to speak. A big issue which all efforts must be made to counter is the negative propaganda i.e. anti vaxxer support and information. This is something SDC can and should play a leading role in countering the false hoods that are being communicated on social media and elsewhere. It cannot be emphasised enough that are some groups of i.e. pregnant women and other with some medical conditions cannot have the vaccine. These groups rely on the rest of the community developing a herd immunity. COVID kills and can have lasting lifetime effects.

In terms of what more can be done the emphasis has to be on repeating possible in different ways the core messaging of handwashing and social distancing. Not just within the workplace etc BUT everywhere. There is a growth of course in people being fed up with the measures and a degree of complacency which has to be tackled.

In terms of national policy without being too negative, as yet we have no knowledge of what will happen after the current national lockdown date of Dec is reached. Will it be extended? There is talk of revisiting the criteria for the tiers and possibly a new tier 5.

	<p>One positive message is that in terms of Track Trace and Isolate the message that we locally can and would make a big difference here appears to now being heard. The experience of Swindon points to far higher contact rates locally than via the national scheme. Shortly Gloucestershire will be having a pilot which will be focused on Gloucester City the area with highest actual numbers (not rates per 1000)</p> <p>Conclusion</p> <p>We should also recognise the work of our that our community and voluntary groups have undertaken they really have made a huge difference and will continue to have a vital role to play.</p> <p>If members have any specific questions, please email to democratic services at GCC and feel free to cc me in. They are very good at ensuring the right people are engaged in answering your queries.</p> <p>So in finally still very challenging times, compounded by the Winter and normal increases in respiratory problems and of course flu.</p>
REPORT SUBMITTED BY	Cllr Steve Lydon
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