

Portfolio Holder Cabinet Member Report for Scrutiny March 2021

1. Update on Community Wellbeing Hub

Activity

Since 20th March 2020 to 19th February 2021 the service has supported over 11, 700 calls into Triage and 69% of calls are resolved at this stage. In partnership with 3SG the Hub has co-ordinated over 3542 volunteer tasks since March 2020 up until 19th February 2021, including 2905 for food, 515 for medication and 122 other activities i.e. electricity top up. To date 3SG volunteers have completed £78, 693.22 worth of shopping to support B&NES residents. 3SG have access to approx. 2126 volunteers who are supporting on average 174 B&NES residents at either weekly or two weekly intervals.

Council Logistics Pod

The Council Logistics Pod at the Hub has completed the following activity since March 2020:

- Total of 639 emergency food parcels delivered in B&NES which has supported 803 individuals. 25% of the boxes delivered were repeats.
- Emergency food boxes continue to be supplemented with frozen meals supplied by the Bath Masonic Hall Trust, Square Meals project. The Trust has raised further funds to continue the project until the end of April 2021.
- Frozen meals have also been supplied to local charities and organisations. Since April 2020 over 38,000 meals have been distributed - 6,000 children's meals supplied by the Ivy Restaurant and 32,000 provided by the Square Meals project.

Supporting Clinically Extremely Vulnerable (CEV)

The Hub was set up in response to COVID-19 but its effectiveness has meant that it will now develop into an ongoing service for joined-up community response to support the wellbeing of residents into the long term.

During the third national lockdown the Hub is again leading on behalf of the Council, the implementation and co-ordinated delivery of the COVID-19 Guidance to local authorities on support for Clinically Extremely Vulnerable (CEV) individuals advised to shield. At the start of the winter lockdown 6,500 CEV individuals in B&NE have been contacted to signpost them to the CWH for support with those registering a support need on the National Shielding Service System receiving a welfare check call and referral to a CWH pod for their required support outcome. To date the CWH has followed up 128 CEV individuals to ensure their basic needs are being met.

Following the recent announcement by the Department of Health and Social Care and the NHS to explain new research that identifies people who may be at increased risk of becoming seriously unwell from coronavirus, the Government has extended the criteria for people who are at higher risk and therefore been added to the CEV list. This is estimated to be an additional 2032 CEV individuals in B&NES shielding until 31 March 2021. The council will write to these newly added CEV individuals offering support from the CWH and offer a webinar to individuals shielding as they are CEV for ongoing advice and support which is planned for 9th March 2021.

As part of the CWH ongoing engagement plan a series of webinars have been developed, the first was held on 19th February 2021 on the vaccination programme. Due to the success of the vaccination programme webinar, which engaged over 50 delegates, dates will now be planned for future webinars which will focus on:

1. Shielding for Clinically Extremely Vulnerable (booked for 4th March)
2. Mental Health
3. Power of collaboration
4. Building back together – volunteering

2. B&NES Council Community Resource Centres and Extra Care Services

Following the successful transfer on the 1st October 2020 of the 3 CRCS and 5 Extra Care Services from Sirona Care and Health to the Council a brief update on progress made during the first five months.

The main area of focus has been on transitional support and embedding processes across all services; staff have been learning the Council processes and we have been ensuring that this has not impacted on the care and support of residents and tenants. This period has not been without challenges but we are working together through these.

During the next few months, the focus will be upon reviewing staff salaries and terms and conditions which we agreed to do as part of the TUPE process. The review will be taken forward during the spring with changes made in July/August for staff if appropriate. At the same time we are progressing a whole service review which is happening in parallel to the terms and conditions review. Other areas of work being progressed include:

- Creating an internal Bank provision
- Developing recruitment, rostering and an on-call system
- Setting out and implementing robust governance
- Preparing for a first CQC inspection which is imminent
- Setting out and implementing a training and appraisal schedule
- Setting out a self-funders policy
- Securing a long-term agreement with the social landlords Curo and Guinness
- Improving the IT provision including WiFi at all sites

3. Covid response - Key points

We are moving to a new phase where the roll-out of vaccination means that we can hope to get out of the past years cycles of lockdowns and relaxations. The new road map is expected to lead to a much more sustainable normalisation. The road map is in cautious stages so that the impact of each relaxation can be measured before going on to the next stage. During this period we are asking people to maintain the rules of social distancing other than where they are specifically noted at each stage.

Levels of Covid and related deaths in BaNES over the course of the whole pandemic have benchmarked relatively low, with all indicators putting us in the “best” tenth of English upper tier authorities, but we have had just under 300 deaths in total with Covid on the death certificate, about half of which have been in care home residents. And, of course many BaNES residents will have struggled socially, economically and educationally during this most difficult year and we will be dealing with consequences of that for a long time to come.

In BaNES we are well on target to vaccinate the top 9 cohorts and then move on to the rest of the adult population, and are not seeing worrying signs of vaccine hesitancy on a significant scale so far. The top 9 cohorts, which include everyone above 50, care home residents, health and social care workers and people with relevant long term conditions, accounted for 99% of the deaths from Covid to date and the great majority of severe cases needing hospitalisation. So assuming that vaccines are as effective as shown in trials, and that new variants don't emerge that greatly change the picture, it should be safe to follow the road map through to the summer when most rules will be removed although even at the end of that there is not yet full normalisation of large scale events.

However, there are things that nationally, and to some extent locally, could impact on this generally optimistic scenario. One is that coverage of vaccine is insufficient and unequal so that some vulnerable groups remain insufficiently protected. This is unlikely to be a major issue locally but we are making efforts to reach all vulnerable groups. Another potential problem is that new variants of the virus emerge, whether homegrown or imported, that are more infectious, more dangerous or less well covered by the vaccine. If this were to happen then BaNES could be as affected as anywhere else.

In order to maximise the safety of coming out of lockdown there is much emphasis on regular testing of a wide range of people who are asymptomatic, but will be mixing with others whether in work, school or other situations. There are also border controls being put in place to minimise chances of importing Covid from abroad and these controls are likely to remain in place for a long time. Capacity is being maintained nationally to manage outbreaks whether caused by existing or emerging strains of the virus, and there will be ongoing surveillance of circulating strains to detect the emergence of variants that may have dangerous characteristics.

To take account of all these issues Local authorities are currently updating their local outbreak management plans (LOMPS) and we are in process of doing that this month.

Other public health activities are going on as usual but the panel should note that on April 1st Rebecca Reynolds, who has worked as a consultant in public health here since 2013, takes over as DPH from Bruce Laurence who is retiring.