



OUTBREAK CONTROL ENGAGEMENT WORKING GROUP

Friday 11th September 2020

At 3.00pm

Remote Teams Meeting

(Teams invitation has been sent)

Membership

Councillor Moore (Chair of the Health and Wellbeing Board) (Chair)
Councillor Thomas (Mental Health Champion)
Councillor Harrison (Children in Care Champion)
Denise McGuckin (Hartlepool Borough Council)
Dr Tim Butler (form NHS England)
Michael Houghton (NHS Tees Valley Clinical Commissioning Group)
Lesley Wharton (North Tees and Hartlepool NHS Trust)
Craig Blundred (Acting Director of Public Health, Hartlepool Borough Council)
Sally Robinson (Hartlepool Borough Council)
Sharon Cooney (Cleveland Police)
Jill Harrison (Hartlepool Borough Council)
Tony Hanson (Hartlepool Borough Council)
Ed Turner (Hartlepool Borough Council)
Christopher Akers-Belcher (Healthwatch)
Julian Penton (VCS – Hartlepower)
Reverend Michelle Delves - Faith Representation
Jacqueline Mckenzie (Primary Care Network)*
Fiona Adamson (GP Federation)*
Graham Trory (Primary Care Network)*
Carl Parker (Primary Care Network)*

* To rotate

Items

1. Apologies
2. Notes from the meeting held on the 27th July 2020 (attached)
3. Coronavirus in Hartlepool - Update Presentation (*Acting Director of Public Health*)
4. Outbreak Control Plan – Verbal Update (*Acting Director of Public Health*)
5. COVID-19: Prevention Communications / Reset Health Campaign (*Communications and Marketing Manager*)

6. Communications Verbal Update:
 - i) Local Authority
 - ii) NHS Partners
 - iii) Voluntary and Community Services
 - iv) Healthwatch
 - v) Faith Groups
 - vi) Police
7. Any other business
8. Date of next meeting - 9th October 2020 (3.00 pm)

HEALTH AND WELLBEING BOARD (OUTBREAK CONTROL ENGAGEMENT WORKING GROUP) 27th July 2020

The meeting commenced at 1.30 pm and was an online remote meeting in compliance with the Council Procedure Rules Relating to the holding of Remote Meetings and the Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority Police and Crime Panel Meetings) (England and Wales) Regulations 2020.

Present:

Gill Alexander (Chief Executive, Hartlepool Borough Council)
Councillor Thomas (Mental Health Champion)
Councillor Harrison (Children in Care Champion)
Denise McGuckin (Hartlepool Borough Council)
Dr Tim Butler (form NHS England)
Dr Nick Timlin and Michael Houghton (NHS Tees Valley Clinical Commissioning Group)
Lesley Wharton (North Tees and Hartlepool NHS Trust)
Craig Blundred (Acting Director of Public Health, Hartlepool Borough Council)
Peter Graham as substitute for Sharon Cooney (Cleveland Police)
Jill Harrison (Hartlepool Borough Council)
Ed Turner (Hartlepool Borough Council)
Christopher Akers-Belcher (Healthwatch)
Julian Penton (VCS – Hartlepower)
Dr Jacqueline Mckenzie_(Primary Care Network)

Also in attendance:-

Officers: Dean Langstaff, Public Health Intelligence Analyst
 Joan Stevens, Statutory Scrutiny Manager
 Amanda Whitaker, Democratic Services Team Manager

As the Chair, Councillor Moore, had submitted apologies for the meeting, the meeting was chaired by Gill Alexander, Chief Executive, Hartlepool Borough Council.

1. Apologies for Absence

Councillor Moore (Chair of the Health and Wellbeing Board), Sally Robinson (Director of Children's and Joint Commissioning Services), Supt Sharon Cooney (Cleveland Police), Tony Hanson (Assistant Director, Environment and Neighbourhoods), Fiona Adamson (GP Federation), Graham Trory (Primary Care Network) and Carl Parker (Primary Care Network)

2. Terms of Reference

A draft terms of reference document for the working group had been circulated prior to the meeting. On presenting the document, the Acting Director of Public Health highlighted the following omissions from the document:-

- The requirement to appoint a Vice-Chair of the Working Group
- That the Chief Executive, Hartlepool Borough Council, is a member of the Working Group and should, therefore, have been included in section 2 – membership. It was noted, however, that following the retirement of the Chief Executive, the membership would change to include the Managing Director, Hartlepool Borough Council.

The terms of reference were agreed subject to the additions detailed above. With regard to the Vice-Chair, it was agreed that nominations should be submitted by the end of the week.

3. Current Outbreak Situation

The Acting Director of Public Health updated the working group on the current outbreak situation in the Borough. Craig Blundred advised that more test and trace data was now being received from PHE. There had been an increase in cases but it was not yet clear if this was due to increased testing or other issues of concern.

It was intended to continue to monitor data and develop reports which would inform meetings of this Group. The Group considered useful data for future meetings and identified the following:

- Occupations / Sectors - Data not yet meaningful as occupation fields are not always completed. Especially useful for the Group to share data across sectors (i.e. NHS / Community).
- Workplaces.
- Key High Risk Settings.
- Trends / Patterns / Hot Spots.
- Schools.
- Health Care Settings.

The Group was advised that representations were being made in order to improve data received.

An elected member shared community concerns and the balance of providing reassurance whilst still in a pandemic situation was recognised. It was agreed that it was important to find a way to make the public more confident to go out but with a true understanding of the local data (provided in a meaningful way) linked to a maintained emphasis on social distancing and hygiene.

The Chair concluded that the debate had been helpful in terms of moving forward and stressed the importance of having information presented to the Working Group to ensure that the Group was aware of the outbreak situation.

4. Outbreak Control Plan – Update

Gill Alexander referred the Working Group to new local lockdown legislation / powers.

Craig Blundred advised that a HBC and LRF exercise held the previous week had gone well. In testing the HBC OCP a small number of additions had been identified including the following:-

- Inclusion of an escalation criteria for larger incidents.
- Clarification of who declares outbreaks.
- How we communicate with communities and who does that.
- The role of local knowledge.
- Cross boarder responses and the importance of consistency in OCP's for partners who provide services across local authority areas.

It was suggested that best practice in terms of other areas OCP's be explored (inc. Leicester, Blackburn and Darwin). Gill Alexander referred to a presentation by Leicester which it was agreed should be circulated to members of this working group.

5. Communication Plan

Craig Blundred advised that the OCP included a Communication Plan but the role of the Working Group in engaging with the public from both an outbreak and prevention perspective was also recognised.

It was suggested that a mapping exercise be undertaken to identify the role each partner organisation / sector could play in the communication / engagement process.

A review of HBC communication as part of the pandemic response had shown support for:

- The tailoring of a local response (even when it differed from the national position)
- The success of the mix of communication mediums implemented.
- The need to continue the implementation of a population wide message.
- Promotion of healthier life styles as a means of helping reduce the impact of Covid-19 on individuals.
- Further work on ways of improving digital inclusion (including language and other impairments e.g. hearing and sight).
- Use of leaflets had been effective and was to continue in conjunction with other activities.

The Working Group supported the above views and highlighted a number of other key messages as follows:

- The impact of existing health inequalities and the need to emphasise the importance of continuing access to treatment for none Covid-19 conditions. A joined up message is needed across partners (e.g. how to tie into the CCG cancer campaign across the Tees Valley). An additional benefit being that resources could also be shared / optimised.

- The VCS is key to any communication strategy as a link to all communities (including those that are hard to reach).
- Addressing the digital divide is to be key.
- Charities provide a key part in supporting communities. Ways of supporting charities through the impact of Covid-19 need to be explored.
- Need to ensure that when the OCP is enacted with the right partner (relevant to the location and level of outbreak) at the forefront of messaging.
- Need to recognise the impact of mental health and communicate / promote the availability of services (across sectors) as then come back on line following lockdown.
- We should not be promoting social distancing – we should be promoting physical distancing in our messaging.
- The availability of services such as Happy Cactus and Kooth.
- Need to get message out that hospitals are safe!

It was considered that an edition of the newsletter to be used to sign post services and spotlight issues. The following members of the Working Group volunteered to participate in the development of the newsletter:-

- Elected member (as community leaders)
- Healthwatch
- VCS – Hartlepower
- NHS Tees Valley Clinical Commissioning Group
- Primary Care Network
- North Tees and Hartlepool NHS Trust
- Cleveland Police

Ed Turner agreed to progress:

6. Any other Business

None

7. Date of next meeting

It was noted that the next meeting of the Working Group would be held on 11 September at 3pm.

Gill Alexander referred to her impending retirement and conveyed her best wishes to members of the working group in their continued collaboration dealing with the pandemic.

Meeting concluded at 2.50 p.m.

CHAIR

COVID-19: Prevention communications / reset health campaign

The Hartlepool COVID-19 Outbreak Control Plan includes information about how we would communicate if an outbreak occurred and how we help residents understand what Test and Trace is; the importance of testing and self-isolation for those who have symptoms; and the importance of self-isolation for those who are contacted by the service.

COVID-19 has affected the whole of Hartlepool for almost everyone, life has had to fundamentally change. But it has also prompted many people to reflect and think more seriously about their health. What's more, people have been surprised by how able they have been to change their behaviour, with lockdown showing many that they are able to make and sustain changes to their lives.

This additional draft communications plan is therefore intended to start a conversation with residents about how they may wish to reset their health.

KEY MESSAGES

- Nearly two thirds of adults are overweight or living with obesity
- Extra weight causes pressure to build up around our vital organs making it more difficult for the lungs to get oxygen around the body
- Extra weight can make it harder for us to fight against diseases like cancer, heart disease and COVID-19
- People living with obesity are twice as likely to be hospitalised with COVID-19
- COVID-19 patients with obesity are more likely to be admitted to intensive care, require advanced treatment and potentially have poorer outcomes, including mortality
- To be a healthy weight, you should aim to have a BMI below 25 and above 18.5
- Lowering your BMI helps lower your risk of diseases like cancer, heart disease and now COVID-19

SECONDARY KEY MESSAGES (NUTRITION)

- If you're trying to lose weight: for a man aim for a maximum of 400 calories at breakfast and 600 for lunch and dinner (plus drinks and a couple of healthy veg and fruit-based snacks in-between). For women this is around 300 calories at breakfast and 400 at lunch and dinner.
- Try to aim for around 1,400kcal a day if you're a woman and around 1,900kcal if you're a man.
- Snack less – no more than twice a day - and go for veg based ones. If you're having packaged snacks go for those with around 100kcal and stick to two a day max.
- Check the 'traffic light' labels and go for foods and drinks with more greens and ambers and less reds.
- When it comes to fruit and veg; the more the better! Get your 5 A Day. They're low in calories.

SECONDARY KEY MESSAGES (PHYSICAL ACTIVITY)

- When it comes to exercise, some is good, but more is better – the more time active you are, the greater the health benefits. Remember every minute counts!
- It is never too late to get active to improve your health, so start small and build up starting from 10 minutes of brisk walking a day

AUDIENCE AND CHANNELS

The following corporate channels can be used to reach our residents.

Audience	Channel
All Hartlepool residents	Hartlepool.gov.uk
	Social media
	Resident newsletters
	Other out of home
	Posters A3 and A4
Media	
Businesses	Town Centres Teams
	Posters, floor stickers and banners
	Business associations and briefings
Community groups	
HBC staff and schools	HBC intranet
	Weekly e-update
Elected members	Weekly e-update
	Member updates

Targeted audiences

The following communities will require a more targeted approach to communications.

This will be developed as we collaborate with community advocates and stakeholders to help effectively reach their communities or service users.

Audience	Channel and information to be developed
Faith groups	We will work with faith group leaders to understand their channels and work with them to develop the messaging. This could include: <ul style="list-style-type: none"> • Holding webinars to provide advice and information • Providing messaging for social media posts, websites, newsletters, WhatsApp groups. • Creating short videos, infographics, posters or flyers, and Q&As relevant to the audience. • Community-led webinars or forums.
BAME communities	Translating materials for people where English is a second language this could include posters, flyers and or Q&As. Short videos led by community leaders can also be an effective means of communication.
Young people (18 – 24)	We'll create social media content that will resonate with our young people. Targeted out of home advertising will also be considered.
Over 65s	We'll work with our VCS partners and community networks to reach our over 65s. Our Hartlepool-wide messaging will also encourage friends and family to work with us to support this group.
People with low levels of literacy or learning disabilities	Materials should be accessible to residents in a variety of formats including easy read. We will work with our voluntary and community groups to identify local networks that can use these materials.
Carers	We will work with Hartlepool's carers to help them to understand and share messaging with people in their care