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MINUTES

HEALTH IN DACORUM

11 MARCH 2020

Councillors: Beauchamp
Durrant
England
Guest (Chairman)
Hollinghurst
Johnson
Maddern

Officers: Marie Sells PA to the Leader and Conservative Group

Also Attendance:

Prof Jim McManus	Director of Public Health, Public Health Service
County Councillor Tim Hutchings	Cabinet Member for Public Health, HCC
David Evans	Director of Commissioning HVCCG
Avni Shah	Director of Commissioning
Kevin Minier	Chair, Dacorum Patients Group
Dr T Fernandes	Herts Valley Clinical Commissioning Group

The meeting began at 7.30 pm

1 APOLOGIES FOR ABSENCE

Apologies for absence were submitted on behalf of Councillor Bhinder and Councillor Sinha and Edie Glatter.

2 MINUTES

The Minutes of the previous meeting were review and agreed.

3 DECLARATIONS OF INTEREST

Councillor England has recently been appointed as the Public engagement manager for the east of England ambulance NHS Trust.

Councillor Maddern is a member of the new hospital campaign who are involved with the judicial review. Mark Brookes advised that she must not participate in item 6.

4 PUBLIC PARTICIPATION

There was no public Participation.

5 **CORONAVIRUS UPDATE**

Prof Jim McManus and County Councillor Tim Hutchings presented to the Committee.

All the information provided this evening is in the public domain and is taken from official sources.

On December 31 2019 the world health organisation was notified of a novel outbreak of a new form of pneumonia in Wuhan in China, the cases started escalating and it was identified as a CoronaVirus and was eventually call Covid-19.

Today the world Health organisation declared a pandemic, this essentially means there is a global epidemic. This information has a tendency to cause panic however for the UK very little will change. The technical declaration of a pandemic by the world health organisation means states have a legal requirement to coordinate actions and follow certain guidelines, a global epidemic was expected and it is the view of the chief medical officer that the UK are roughly 2 weeks behind where Italy is now. We should bear in mind that Italy has a much older population than the UK and we still have time to start social distancing.

There are 4 main priorities for Government

- Contain - identify cases, contact trace those effected and try and stop the spread
- Delay - asking everyone with symptoms of a cough and fever to self-isolate for 7 days, social distancing
- Research - to identify a possible treatment plan or cure.
- Mitigate - to treat those who require medical intervention

These are the standard fazes of any response to a pandemic.

We are currently moving from containment to delay.

The common symptoms are a fever, a dry cough and fatigue. Less common symptoms are headache, nasal congestion, sore throat, coughing up sputum and a shortness of breath. Very rarely you get a high fever, coughing up blood, the white blood cells decrease and you can get kidney failure.

One of the reasons the death rate appeared so high in China was due to the fact you were only tested if you were hospitalised and those were the most server cases, there could be thousands of people who contracted the virus and recovered but those people were never tested. The full picture still isn't really known.

The assumption is that 81% of people that contract this virus will have mild symptoms, 14% sever, 5% critical and will require hospitalisation and 1 – 2% will die. What is not know is how many people have already contracted the virus or are asymptomatic.

The aim is to flatten the curve and delay the number of people who require hospitalisation, this will ensure the NHS are not overwhelmed and are able to care for those requiring assistance

For DBC there are several things that need to be done:

- Public reassurance, Elected Members are in a great position to help with this
- Business continuity plans need to be in place, it is thought that the peak will be 12 weeks from now, at its worse this could see 80% of people infected with 21% off sick and plans need to be in place to deal with this.
- Delay the spread of this virus to your staff and members as much as possible, ensure.
- Social responsibility, it is the most vulnerable that will be affected by this, people taking responsibility for themselves will ensure the spread is limited to those people.

The advice remains the same, wash your hands, practice good hygiene and be sensible.

Councillor Maddern would like to know if the slides can be shared on social media and with other Councillors and officers. Prof Jim McManus confirmed that they are for public viewing, there is also a link on hertfordshire.gov.uk/coronavirus there is a hub that links to all the NHS and PHA information and directs away from NHS 111 phone calls onto the website.

Councillor Maddern would also like to know what happens if you are in the at risk category. Prof Jim McManus confirms that those in the “at risk” category would need to contact their health care professional for specific advice.

6 WEST HERTS HOSPITAL ESTATES UPDATE

Councillor Maddern is welcome to ask questions as a member of the public but cannot vote.

David Evans from the CCG presented to the committee

As the judicial review is still ongoing David is unable to make comment therefore has nothing to report to the committee. Updates will be provided as and when they can be.

Councillor England would like to know if there is a risk to the funds from the Government if the process doesn't move on. David Evans reassures the committee that at this stage there is no issues, they are awaiting a court date and the process is moving forward.

The Chair requested that this item be kept as a standing item on the agenda.

7 PATIENT TRANSPORT

Avni Shah presented to the committee

The East of England's ambulance service NHS trust came in as an emergency contingency in 2017 and was awarded the contract for a period of 2 years from January 1 2019.

They are responsible for relevant care and support such as escorting frail and vulnerable patients to and from the location at which their care is delivered.

To ensure a safe and effective service is being provided some of the journeys have been outsourced on an ad-hoc basis.

Key Highlights

- Number of complaints have reduced
- 2019 patient survey showed that 89% of patients would recommend the service.
- Staff turnover was a huge issue but as of January 2020 all vacancies have been filled and the retention rate has increased significantly.

It is acknowledged that there are still challenges within the service, delays in transport arrivals and collection times, this is still something that is being looked into and work continues to try and improve these issues.

Looking ahead to 20 / 21 a positive relationship is still being built between HVCCG and EE NHS trust, working with the consortium partners and all the other commissioners.

Councillor Johnson would like to know how many staff are employed by EE NHS trust, A.Shah doesn't have the information to hand but will come back to the group with the answer.

8 FINANCIAL REPORT OF WHHT

This information cannot be provided.

This item will be added to the next agenda

9 **WHHT CQC INSPECTION**

As the interviews are ongoing no comment can be made.

This item will be added to the next agenda.

10 **COUNTY COUNCIL HEALTH SCRUTINY COMMITTEE REPORT**

A report pack has been distributed to the Group.

11 **COUNTY COUNCIL ADULT CARE SERVICES REPORT**

A report pack has been distributed to the Group.

12 **WARD ISSUES**

Councillor Hollinghurst raised the issue that in the male toilets on the first floor there was no soap or hand sanitizer, this was checked directly after the meeting and it was found there was soap in all the dispensers.

Councillor Beauchamp has not received an answer from the CCG regarding the hearing aid battery issue which was raised at the last meeting, a follow up email will be sent to David Evans.

13 **WORK PROGRAMME**

FINANCIAL REPORT OF WHHT and WHHT CQC INSPECTION are to be added to the work programme for the next meeting.

The Meeting ended at 9.54 pm