

**BLACKBURN WITH DARWEN HEALTH AND WELLBEING BOARD
MINUTES OF A MEETING HELD ON WEDNESDAY, 2nd SEPTEMBER 2020**

PRESENT:

Councillors	Mohammed Khan (Chair)
	Mustafa Desai
	Julie Gunn
	Damian Talbot
Voluntary Sector	Angela Allen
	Sarah Johns
	Vicky Shepherd
BwD Healthy Living	Dilwara Ali
Council	Ken Barnsley
	Dominic Harrison
	Jayne Ivory
	Sayyed Osman
	Laura Wharton

1. Welcome and Apologies

The Chair welcomed everyone to the meeting. Apologies were received on behalf of Councillor Julie Slater and Graham Burgess. The Chair informed the board that although all sectors were not present at the meeting due to the current circumstances, the meeting would go ahead despite not being quorate, given the informative and none decision nature of the business to be discussed. The meeting would take place as a briefing meeting for members of the board and partner organisations.

2. Minutes of the meeting held on 9th June 2020

The minutes of the previous meeting held on 9th June were submitted.

RESOLVED – That the minutes of the meeting held on 9th June 2020 be agreed as a correct record and be submitted to the next meeting for formal ratification, along with the minutes of the meeting held on 11th March 2020.

3. Declarations of Interest

There were no declarations received.

4. Public Questions

The Chair informed the Board that no public questions had been received.

5. Better Care Fund Quarter 4 2019/20 Update

Sayyed Osman provided an update on the Better Care Fund for Quarter 4, highlighting the key issues. The Board heard that the overall funding was a significant amount of nearly £14 million which funded a number of different schemes and of those schemes the Local Authority was tracked on four. The presentation showed a breakdown of funding and allocations.

The presentation looked at the Performance update which provided a summary of performance against metrics BCF targets up to Quarter 4, with a narrative summary. It was noted that 2 of the metrics were on track to meet targets, with strategies in place to ensure that targets would be met for all metrics.

Looking at the metrics where the targets had not yet been met, the Board heard that whilst we had generally performed well in Reablement, we had been supporting discharges to ensure people were taken out of a hospital setting in a timely manner, in order to reduce their risk of COVID-19. The increased volume and complexity of people being treated was the main reason for the target not being met.

On the delays of transfer of care metric, the Board heard that this was still a challenging target as the demand had been much greater than what was able to be met. This would continue to be the picture for the foreseeable future especially with winter approaching which would put significant pressure on the system.

The Board looked a case study which highlighted the complexity of issues that we were being faced with and how we were working together through a multi-agency setting to ensure the best possible care for people.

A brief update on Albion Mill was provided by Sayyed, confirming that there would be 35 self-contained units with 75 extra care beds. Of those extra care beds, 50 would be dedicated to older people and 25 would be aligned to special needs. In terms of progress the Board noted that there had a few setbacks but it was hoped that the scheme would be completed by early November.

Discussions took place around how COVID-19 had impacted the installation of disabled adaptations in people's homes. The Board noted that work continued to be done and that extra precautions had been put in place as the people that needed the disabled facilities were likely to be extremely vulnerable. Concerns were raised regarding further delays and it was noted that the possibility of sub-letting contracts to expand the work force in order to allow more disabled adaptations being carried out in a timely manner was being looked into. It was noted that there had been some complex issues emerging as a result of COVID-19 and it was suggested that a more detailed update on this be brought back to a future meeting.

Jayne Ivory informed the Board that it had been similar experience for Children's Services in that there had been delays implementing schemes due to availability of OT's and getting contractors to implement recommendations. It was noted that in some cases, houses could not be adapted and alternative accommodation had to be found, which meant further delays.

RESOLVED – That the update be noted.

5. COVID-19 Update

Ken Barnsley provided an update on the COVID-19 timeline highlighting the testing rate and positivity rate.

The Board heard that during the height of testing we had been achieving 500 tests per 100,000 per day. Since then it had reduced steadily and the figure was currently at 150. It was hoped that with the two mobile testing units (one in Corporation Park and one in Penny Street) and two local testing sites (one by the College and one under construction to be completed in Darwen by tomorrow) that the testing rate would start to increase to better identify cases and contain the spread.

Ken informed the Board that when testing was at a very high level, the positivity rate was at 2% and this increased to 7% around the middle of August. Since then the positivity rate had remained around 4.5%. With testing coming down and positivity rate being same this was giving us a really good indication that things weren't changing dramatically. The Board heard that the number of actual daily cases for the past three weeks had been hovering around 10 cases a day, with Blackburn with Darwen being 4th on national watch list.

Ken informed the Board that as the quality of the data was improving, we were starting to get all of the testing data compared to the first stages when the only data available was the number of those who tested positive. In summary, Ken updated the Board that positivity rates were much higher in the age groups of 20-29 and 30-39 across the Borough. The Board heard that the testing profile matched the profile of the population which meant that most people were being tested.

The positivity profile was very different, with positive tests across the Borough being dominated by South Asian residents, in comparison to the testing and the profile of the Borough's population. The Board also heard that deprivation was a big risk factor with almost 90% of positive cases in the last 14 days were in deprived areas.

The Board were informed that the testing rates in the 8 interventions wards did not differ much from other wards despite the 8 intervention wards having significantly more cases. This showed that overall the testing profile geographically across the whole of the Borough was good. The Board heard that the 8 wards identified as needing intervention had positivity rates of 290 cases per 100,000 in Bastwell and Daisyfield down to 74 cases per 100,000 in Audley and Queens Park and at the time the cut off figure was 60 so the wards not identified as needing intervention, fell below that.

A key feature of COVID-19 was the geographical concentration which was driving the current testing strategy. Ken explained that the recent data was split into lower super output areas (LSOA), which were the small areas where community testing would now be focussed. Each LSOA consisted of approximately 500 / 600 houses and 1500 / 2000 people and it was evident that extreme concentrations of COVID-19 cases were in some of these LSOA areas.

Ken informed the Board of the work being undertaken by the Incident Management Group. The number of cases in key sectors such as care homes and supported living had in recent months increased. It was also highlighted that much of the transmission would appear to be community and household transmission meaning that a number of cases were linked to a workplace but the transmission took place in the household. There had also been a number of incidents in places of worship and work was being undertaken to ensure risk assessments were up to date.

Despite a large number of cases, this hadn't translated through to hospital activity. At the height of pandemic there were more than 130 admissions and that was now down to 4.

Dominic Harrison provided an update on the national picture looking at the cumulative incidence rates specifically at those under 18 years of age. Blackburn with Darwen were now 2nd highest in the Country.

Dominic updated the Board on Local Authority Areas of Interest, which contained the areas with the highest weekly incidence rates. These areas were currently under investigation by local public health protection teams with testing access in these areas was being increased. These areas were also associated with workplace outbreaks which had subsequently contributed to the increase of infection rates. It was noted that with the continuation of rising cases, especially as we approach winter, the Government would have to bring in other control measures nationally.

The Board heard that the slight benefit for us was having already gone through a lot of control mechanisms and got our systems honed and improved in terms of how we control high rates and outbreaks. We were in a stronger position now by the fact we have had higher rates and have been managing those.

Dominic informed the Board that community testing would be starting this week and it was expected that there would be a rise in positivity rates in the intervention areas within the next week or so.

Discussions took place that messages concerning restrictions needed to be clear and consistent across the Borough. It was anticipated, that despite everyone's best efforts and comprehensive risk assessments, as schools returned we would see another spike in numbers. Jayne Ivory informed the Board that to date 4 schools had returned. So far attendance was at 94% with children being delighted to be at school.

Councillor Desai raised concerns about the testing rate decreasing whilst positivity rates were increasing. Dominic informed the Board that this could be a result of behavioural decay in the population as they became dubious about the consequences of testing. The majority of the population were compliant and following guidance. Dominic also highlighted that the laboratory capacity in the UK was affecting the ways people could access the booking facility online. When the laboratories were at full capacity, the option to book a test online was removed despite Blackburn with Darwen being a priority.

Discussions also took place around incentives for people on low incomes isolating. The Board heard that a case had been made for people on zero hour contracts, low incomes, or self-employed being able to claim money if they needed to stop working so that they could isolate. The Government had set up a pilot scheme, and the details of this were on the website.

The Chair raised concerns that the majority of GP appointments were taking place over the phone rather than face to face and asked Dominic Harrison to raise this with the CCG.

RESOLVED – That the Board note the update.

Signed.....

Chair of the meeting at which the Minutes were signed

Date.....