

Covid-19 Scrutiny Committee 16 July 2020

The meeting can be viewed via [Live stream meeting link](#)

Questions and responses were submitted by members of the committee via teams meeting chat function during the Covid-19 Scrutiny Committee. This was a meeting of the Overview & Scrutiny (OSC) and the Health Scrutiny Committees (HSC).

A glossary of abbreviations is included at the end of this document.

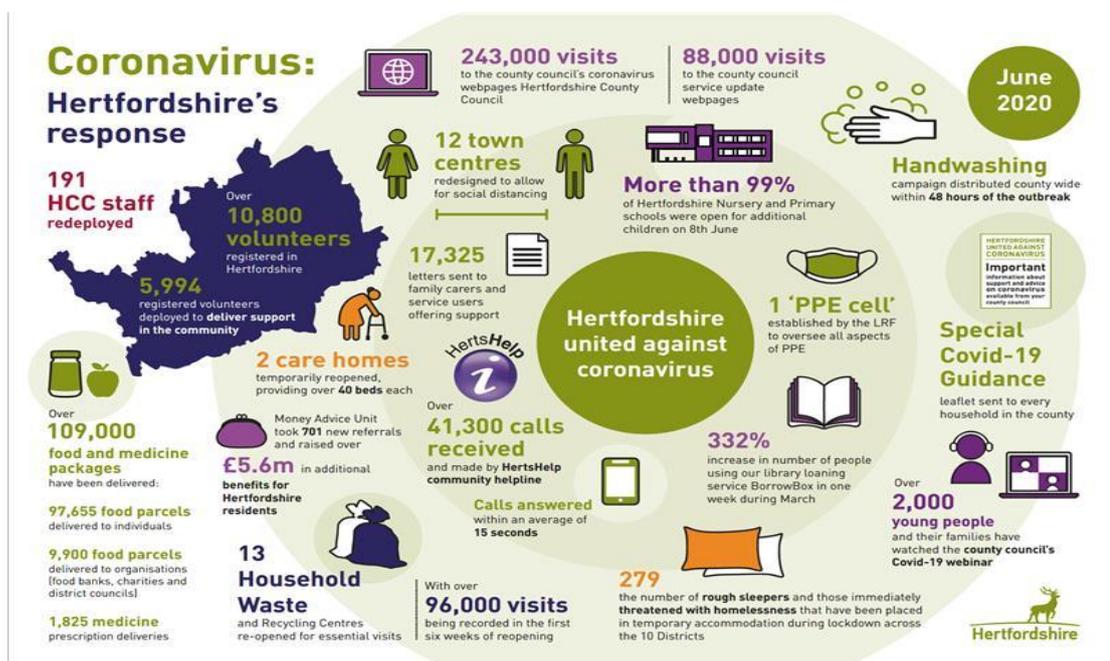
1. Public Health

- 1.1 Members would like to know what is planned to reassure and inform residents in the face of sensationalist, scaremongering media reporting?

The local outbreak plan details how Hertfordshire would respond to a localised outbreak of COVID-19. The plan sets out how organisations would work together to prevent, manage and contain outbreaks of coronavirus and protect our residents. Here is the link to the [Local Outbreak Plan](#)

*Extra testing has been contracted for **any** setting (school, home, workplace) which needs it to manage outbreaks and respond to them. It is for all settings not solely for schools and includes academies. No one is charged for the testing Public Health provides*

In addition, officers shared the following infographic that succinctly shows the sort of response HCC and partners have undertaken in response to the pandemic.



- 1.2 Are officers confident that there is sufficient capacity within the school nursing service to undertake the work required, given the emphasis on the important role of school nurses when pupils return to school, particularly in relation to picking up mental health and emotional wellbeing issues?

To ensure capacity additional staffing will undertake covid testing to enable school nurses to focus on their key functions.

- 1.3 What are the risks for academies that have chosen not to commission school nurses?

Academies and other state sector schools can access the public health nursing service, including school nursing, without charge.

Academies like all schools have free access to all the COVID services provided by public health, and will continue to do so

Information has been provided by the HCC Health & Safety Manager. The links include a risk assessment template and other documents to help schools prepare for September:

- <http://www.intra.thegrid.org.uk/info/coronavirus/>
- http://www.intra.thegrid.org.uk/info/coronavirus/documents/school_risk_assessment_sept%2020_hs_rev1.docx

2. Children's Services

- 2.1 With regard to SEND, a member commented that some families report that their children do not have the capacity/ability to benefit from the online offer and teaching suggestions from special schools or that the parents' time has been too taken up in caring for those children to be able to use those resources. There are also concerns that certain schools are already expressing reservations about re-admitting some children - those who may spit or bite and those who have complex healthcare needs. What alternatives can be offered to those children in September?

Schools have been asked to update their risk assessments and to identify any children that they have concerns about in relation to return to school. Children's Services is working with schools to make sure measures are in place to enable the return to school. Government guidance is clear that PPE is only used if routinely needed but also that school leaders are best placed to make informed judgement and Children's Services are supporting schools in this respect.

Advice from the council is clear that a child who spits as part of their SEND or has personal care needs should be supported to be included in school from September.

- 2.2 A member commented that they believed communication is an issue as not all parents are able to access online Information and were not aware that the Local Offer webpages were being used to provide COVID-19 related updates.

Officers responded that alongside this Children's Services used twitter, parent-carer networks, social media; and case workers and social workers promoted it. Officers asked that if councillors can think of other media that should be using to let the department know as it is keen to reach as many parents and carers as possible, especially as schools return in September

A councillor observed that the message is not reaching parents as yet although the schools' reluctance has reached them and to ask if alternative services be put in place for those with complex healthcare needs as there are cases where the suggestion is that they will also be unable to return.

Officers responded that HPCI will be issuing communications jointly with Children's Services shortly to make sure that parents know that schools are refreshing risk assessments and plans for return to school, and any parent with concerns about this should get in touch with Children's Services via their case worker or helpline. For those children with exceptional medical needs that will not return in full or part in September, schools will need to put in place remote learning to make sure that children continue to learn; and the department will be working with its community therapy services to ensure ongoing therapeutic provision.

- 2.3 How is information about the implementation of a SEND phone line communicated to parents & does this phone service include children without EHCP? Parents must feel they have the help, care & advice when needed.

Officers responded that the helpline was advertised on the Local Offer. Officers also wrote to all schools and through them communicated to parents about the helpline. It was also promoted through twitter and social media, and through the HPCI network.

- 2.4 Question relating to 3.4.2 on page 28. Is the Strategic Partnerships Team keeping a check on housing for victims of Domestic Abuse to ensure safety and avoiding B&B?

The team is working closely with Safer Places, in relation to all forms of safe accommodation for victims, and capacity has increased over the last month. This is in response to our ability to work with the districts and boroughs (through the Accommodation & Recovery Cells), Housing Associations and registered social landlords to provide suitable move-on accommodation more readily for those in a position to leave the refuges.

- 2.5 What is being done to help schools provide meaningful online education, not just to SEND students but across the board? There seems to be huge variability and an increasing risk of increasing inequality.

All schools have needed to put in place online education although there will have been a degree of variation across schools. HCC has commissioned from HfL a Remote Learning Toolkit which is available to schools and includes information, advice, and resources, as well as a regular blog and hints and tips. For vulnerable children including children in care, known to social workers, and SEND, Children's Services have worked with schools to support children into school as well as put in place some targeted online learning resources. The Hertfordshire County Council Virtual School has been providing online support and learning for children in care who have not be attending school, whilst supporting them to return where possible.

Member follow up: their understanding was that many schools were providing very little direct teaching online.

Officers agreed to convey this point to the Assistant Director for schools. It was noted that the department had received some good feedback from parents but accepted that some variation has been in place. Moving forward there is a clear expectation that all children will return to school with only a few exceptions (e.g. children with exceptional medical needs) and officers are working to support schools with their transition plans for September.

- 2.6 A member commented on the excellent quality of the risk assessment for schools produced by the council and circulated to officers in advance of the meeting.

Information provided by the HCC Health & Safety Manager. The links include a risk assessment template and other documents to help schools prepare for September:

- <http://www.intra.thegrid.org.uk/info/coronavirus/>
- http://www.intra.thegrid.org.uk/info/coronavirus/documents/school_risk_assessment_sept%2020_hs_rev1.docx **(attached here as an appendix)**

- 2.7 Officers provided the following response regarding questions from members on children's social care:

Regarding the Amendments, whilst Children's Services has taken advantage of the change in regulations that enable visits and reviews to be carried out via video link, it has not taken advantage of any of the relaxations regarding timeliness.

Children's Services social workers have been contacting CLA on a fortnightly basis via WhatsApp and have now reintroduced face to face visiting. Most CLA have now had a face to face visit and the expectation is that face to face visiting will resume the frequency of 4 weekly. This level of contact is much more frequent than the Regulations require.

Statutory Reviews are taking place in line with the existing (unamended) Regulations regarding timescales and the department has recently agreed

that Independent Reviewing Officers can start to have face to face contact with children and young people prior to a Review meeting taking place. Face to face contact with CLA has been carefully reintroduced taking into account any vulnerabilities regarding the child or the carer household.

3. Adult Care Services

- 3.1 A member requested that the terms of reference for the safeguarding report be shared.

*This document was circulated to members after the meeting. **Attached here as an appendix***

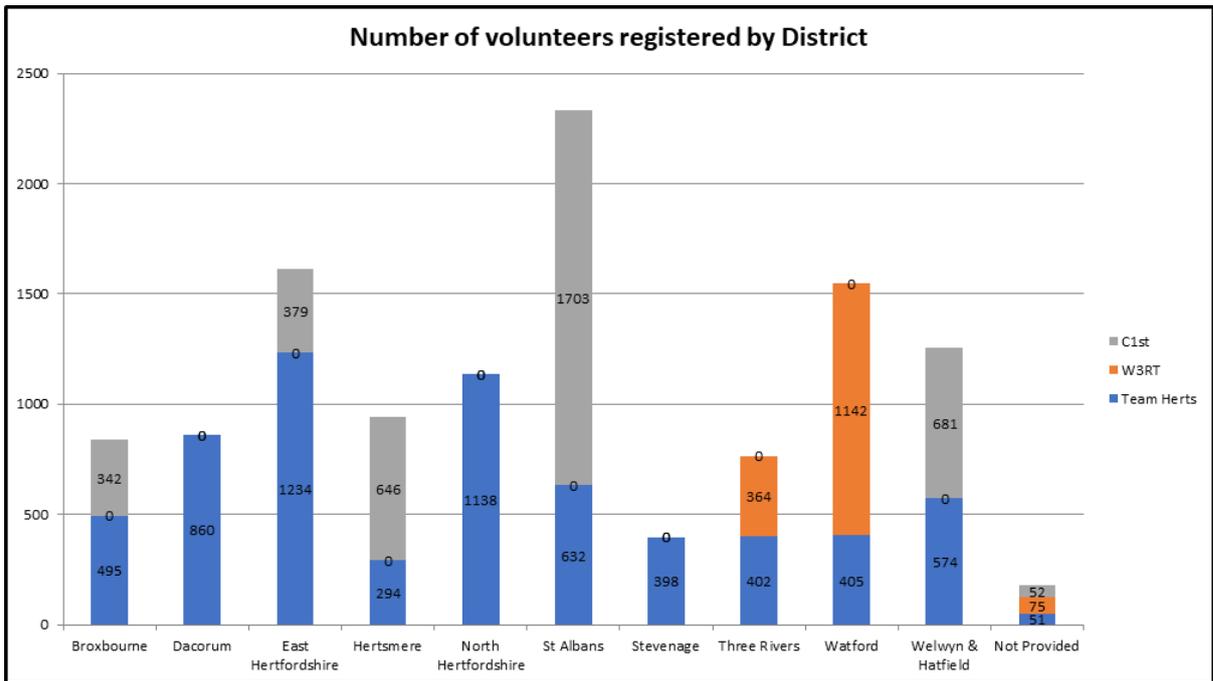
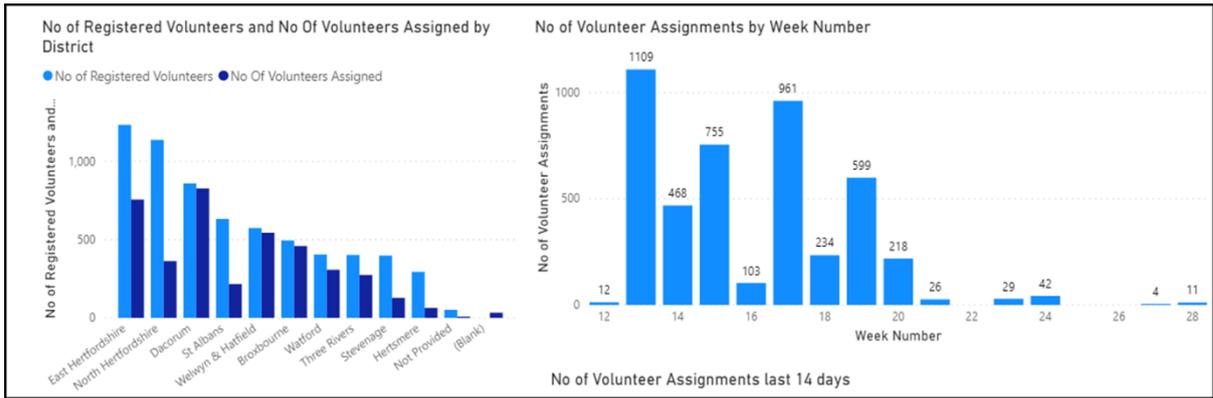
- 3.2 Regarding Operation Sustain a member asked for a breakdown of volunteer numbers per district and confirmation of whether the council is keeping volunteer details on file in case of a second wave.

ACS confirmed that it is keeping volunteer details on file. This data is collected and monitored on a fortnightly basis. Please see below for the total volunteers registered per district:

District	Team Herts	W3RT	C1st	Total	%
Broxbourne	495	0	342	837	7.1%
Dacorum	860	0	0	860	7.2%
East Hertfordshire	1234	0	379	1613	13.6%
Hertsmere	294	0	646	940	7.9%
North Hertfordshire	1138	0	0	1138	9.6%
St Albans	632	0	1703	2335	19.7%
Stevenage	398	0	0	398	3.4%
Three Rivers	402	364	0	766	6.5%
Watford	405	1142	0	1547	13.0%
Welwyn & Hatfield	574	0	681	1255	10.6%
Not Provided	51	75	52	178	1.5%
Total	6483	1581	3803	11867*	100.0%

**Please note this includes an additional 1,099 which has been double counted from comms 1st volunteers transferring to Team Herts volunteers, so the top line figures should be 1,099 less and will be in other reports.*

The graphs below display different aspects of this data such as volunteers registered vs volunteers operational per district:



3.3 A member reported that they had received lots of questions from families about when they will be able to visit spouses/parents in residential care and nursing homes - this is causing a lot of anxiety.

We completely acknowledge the stress and anxiety that not being able to visit a loved one in a residential or nursing home during this pandemic has been incredibly difficult to deal with. Today (22 July) the Government has released [guidance](#) for Directors of Public Health and care homes to follow to ensure the safety of residents and staff are not put at risk. The expectation is that each home will be risk assessed to reassure residents and their families that visiting can be conducted safely and will consider factors such as infection symptoms within the home and local community and staffing levels. We are working with Public Health experts and HCPA to develop clear advice and information for care homes and families to offer the necessary reassurance.

It must be noted that the risk assessments for each care home setting will need to be updated regularly to reflect any changes in national guidance as well as any developments in national or local conditions with regard to infection and transmissions rates.

3.4 Where are we on routine regular testing of care staff regardless of symptoms?

This starts on Monday 20 July and is weekly for all staff and monthly for residents as routine - and more often in the case of an outbreak.

4. **NHS**

4.1 A number of questions were raised regarding data and the following information was provided to address these concerns.

Testing definition: *The national terminology as updated in the latest methodology note can be found here:*

<https://www.gov.uk/government/publications/coronavirus-covid-19-testing-data-methodology/covid-19-testing-data-methodology-note>

Pillar 1: *swab testing in Public Health England (PHE) labs and NHS hospitals for those with a clinical need, and health and care workers*

Pillar 2: *swab testing for the wider population, as set out in government guidance*

Pillar 3: *serology testing to show if people have antibodies from having had COVID-19*

Pillar 4: *blood and swab testing for national surveillance supported by PHE, the Office for National Statistics (ONS), and research, academic, and scientific partners to learn more about the prevalence and spread of the virus and for other testing research purposes, such as the accuracy and ease of use of home testing*

Testing and data sharing i.e. are NHS or private contractors holding on to data

This is complicated. At the time the Committee met private contractors are holding onto data and it is a matter for the Joint Biosecurity Centre. The Director of Public Health was able to confirm that as long as data quality is sorted, and Public Health receives it that is what is what matters.

PPE Availability

The assessment of the SCG across all agencies is that PPE supply is Green. Public Health runs the PPE Cell and provides a weekly update

Pillar 1 *data for England is provided by the NHS and PHE.*

Pillar 2 *data for the UK (excluding Wales tests processed in NHS labs in Wales) is collected by commercial partners (i.e. private laboratories).*

Pillar 3 *data is provided for England by NHS England and Improvement (NHSEI).*

Pillar 4 *data is collected by the NHS, PHE, and individual research study leads for the UK. (One example of this is the SIREN study – which offers*

testing to a large sample of NHS staff to estimate population exposure and try to better understand immunity).

- 4.2 A query was raised as to whether people on the waiting list for EMDASS and their carers were offered any support to help them to manage - in the more difficult situation of lockdown - while that service was closed?

Response from NHS officers (HPFT) below:

For existing / known referrals that had been made but had yet to be assessed service users/carers were contacted and informed about what was happening. They were asked to re-contact HPFT if they felt they needed more support in the immediate period or the health of the service user further declined, and they needed more support. Support was provided on a case by case basis.

For new referrals, GPs were asked to maintain an overview of the service users care, and to re-refer to the service when it was able to accept that referral.

Since EMDASS reopened the service, every service user and their carer, where appropriate, has been contacted to understand their current position and any urgent support requirements. This assessment had informed the prioritisation of service users to be seen. Additional clinics are being held and home visits are being put in place to support the service to see people as soon as possible, and HPFT hope to have seen everyone by the end of September. The service also requires access to CT scans and tests within the acute hospitals to support diagnosis, as this remains a challenge and HPFT is working with both WHHT and ENHT to address.

ACS	Adult Care Services
CLA	Children looked after
EHCP	Education, Health and Care Plan
EMDASS	Early Memory Diagnosis Assessment Support Service
ENHT	East Herts Hospital Trust
HCC	Hertfordshire County Council
HFL	Herts for Learning
HPCI	Hertfordshire Parent Carer Involvement
HPFT	Herts Partnership University Foundation Trust
HSC	Health Scrutiny Committee
ONS	Office for National Statistics
Operation Shield	To support people who have been advised by the NHS not to have no face-to-face contact for 12 weeks.
Operation Sustain	Mobilisation of volunteers to support those self-isolating during covid and/or vulnerable not covered by Operation Shield

OSC	Overview & Scrutiny
PHE	Public Health England
PPE	Personal protective equipment
SCG	Strategic Co-Ordination Group
SEND	Special Education Needs and Disabilities
WHHT	West Herts Hospital Trust