

Healthwatch Enfield and Public Health Enfield online Q&A session

22nd July 2020

Presenters:

- Duduzile Sher Arami - Consultant in Public Health, Enfield Council
- Mark Tickner - Health & Wellbeing Partnership Manager, Enfield Council
- Dr Andrew Jajja - ST1 Public Health Registrar, Enfield Council

Questions and answers:

Q1 - What support is being given to those who have been shielding and suddenly it's ending/pausing on 1st August. What are the current risks of a second wave a coronavirus!! What support/emotional support being offered to those working within the healthcare system?

A - At the beginning of the pandemic, Enfield council and other community sector organisations developed a support mechanism for those people who were shielding. This included: food parcels, delivery of medication and regular befriending phone calls. The government is going to be pausing the shielding advice as of the 1st August, due to the reduction in circulation of the virus. All the individuals that have received support are being contacted to see what level of support they need going forward and are being signposted to local services such as voluntary sector groups, to get on-going support if needed. For those that need food parcels after the 31st July due to financial difficulties, referrals will be made to Enfield food bank. Face coverings are also being issued to all of the individuals on the shielding list. Anyone who has financial concerns are being referred to the council's assessment service to explore ways in which they can best support them. Those that were receiving befriending calls and still need the contact will continue to receive calls as a commissioned service. If there is a second wave, this service will need to be available and be utilised.

Currently there are low levels of circulation of the virus but there is a risk of a second wave. We have developed a local outbreak control plan considering different settings and communities to enable us to provide a timely response to control future outbreaks.

We are currently working North Mid hospital around their staff wellbeing and they have protocols in place around emotional and physical wellbeing. We have also extended our staff counselling service to all social care staff, including those in working in care homes in the borough. In terms of local authority staff, we have a counselling service available and have extended training around staff mental wellbeing. We also provided a resource for staff and managers around physical and mental wellbeing. The counselling service has also been opened up to care home staff. School staff have been supported by the educational psychology team.

Q2 - Enfield's Test, Track and Trace - how long has it been up and running in Enfield and how is it working? How effective is the tracing and is it making any differences to Enfield's new Coronavirus infection rate?

A - it has now been up and running for a month, it is very early days. The rate of detections in Enfield is running on average at around 2.4 a day. That level has increased slightly over the last 2-3 weeks, due to the partial relaxation of rules about people visiting bars and restaurants. It is still early days, Public Health had always had teams that investigate these things, just not on this scale. Public health have also started regular testing in care homes, initially with care homes for older people, which may increase detections, but this does not mean we are going into a second wave or they need to change the way they are doing things locally. We need to be careful about how we look at the numbers for testing, as the more we test, the more results we will receive. All adults 65+ are eligible for a pneumococcal vaccination. Primary school children, those 65+ and those with certain underlying health conditions are also eligible for a flu vaccination. We do not know when or if there is going to be a Coronavirus vaccine but it would likely be a national program. We are not anticipating a delay in the flu vaccine this year and it will be available from September.

Q 3 - Please can we have pneumonia vaccinations and flu vaccinations for at risk groups as a matter of course?

A - All adults 65+ are eligible for a pneumococcal vaccination (pneumonia), which only needs to be given once (unlike the flu vaccine that is needed annually). Primary school children, children in year 7 in their first year of secondary school, those 65+ and those with certain underlying health conditions are also eligible for a flu vaccination. They are currently putting together a program to maximise the uptake of the flu vaccine among all of these groups. It's very important this year that everyone gets their flu jab.

Q4 - Please can the HBA1C blood tests be resumed urgently and can diabetics be prioritised for the Coronavirus vaccine?

A- The HBA1C blood test is used to establish whether an individuals' diabetes is being well managed, this is a primary care issue, each individual should be in contact with their clinician and/or GP to look at the management of their diabetes. In regards to diabetics being prioritised for the Coronavirus vaccine, we don't know what the national program will look like, however, it does seem sensible to prioritise diabetics and others with long term conditions, but we just don't know what that will look like at this stage.

Q5 - What is being put in place to support the wider public health issues that will intensify as a result of the pandemic e.g. homelessness/ poor housing and poverty as well as digital exclusion?

A - The local authority is working closely with the Clinical Commissioning Group (CCG), NHS and third sector organisations to address health inequalities that have been highlighted during the Coronavirus pandemic. For example, we are working across these teams to house and address the health and wellbeing needs of rough sleepers. They have been identifying rough sleepers that are clinically extremely vulnerable and are shielding and reaching out to their GP's to get medical reviews where appropriate and asking them the feed into their housing plan, we have also

been working with pan-London groups to offer a full health questionnaire led by clinicians and GP's, plugging rough sleepers into local services such as substance misuse, sexual health and primary care services, where needed. In Enfield, one the major challenges is getting people registered with a GP. We have been able to facilitate registration for rough sleepers so now over 90% of our rough sleepers are now registered with a GP. We are also scoping practical measures for addressing health inequalities in the borough moving forward. We also have the poverty commission recommendations and action plan which we will be working towards.

Q6- What's the risk of children going back to school, getting Coronavirus and passing onto their parents or grandparents etc.?

A - There is growing body of evidence that children may transmit the virus less than adults. All schools will be adhering to infection control guidance as carefully as possible, however part of our local outbreak control plan is specifically centred around schools in the case that there is an outbreak and we would also be working very closely with Public Health England to manage this. There are key infection control measures that schools will be implementing, plans to minimise the level of contact groups at school will have and well as risk assessments and test, trace and track if a pupil or staff member develops symptoms to the virus, in addition to putting the outbreak control plan in place within a school setting. Public Health England would also be involved in any outbreak control. In September when pupils go back to school, we will also be entering flu season and Coronavirus symptoms are very similar to the flu. The rationale for bringing all the children back to school in September is that currently the level of infection that we have in our community is very low and are aware that not having education can have a detrimental impact to their wellbeing and the educational achievements. We can't take the risk away, but all the infection control measures are all about reducing the risk and where a case does occur managing it in a very timely and effective manner.

Q7 - Will local BAME communities get additional support given they are more at risk? If so what kind of support is being considered?

A - Two Public Health England reports addressed health inequalities and Coronavirus. Both Enfield Council and the Clinical Commissioning Group (CCG) intend to make health inequalities a core component of our activities moving forward. The reports on BAME communities show they are more vulnerable, as they are more likely to be in people facing roles, therefore more likely to be exposed to the virus e.g. working for TfL, the NHS, taxi drivers or in care homes. This group is also more likely to suffer from diabetes and hypertension which the virus take advantage of. You also need to factor in that these roles are usually irregular hours which means that individuals cannot access primary care as often as they would like. Public Health England are looking at making changes to the primary care offer to make it culturally competent, this will be a significant transformation in the way we do things but will take some time. In terms of what was discussed at the wellbeing board in the context of equality of accommodation, the nature of jobs these are societal changes that will take a while. In the context of the second

wave of Coronavirus, there are certain things we can do, it is important for those in the BAME community who are eligible for a flu jab to get one, and if you have any underlying health concerns or conditions to see your doctor in order to address these before a second wave takes place.

Q8 - Can the council consider some kind of letter or confirmation if a resident has learning disability or autism, or other disability or health problem, so can't wear a mask, that they can show if challenged?

A - The current guidance does note that there are certain people might have medical conditions that do not allow them to wear a mask and those people should be exempt from wearing a mask. For example, children under 11 years old do not need to wear a mask. Wearing a mask is about protecting others around you, not ourselves. As far as this being challenged and people asking for written confirmation, or a letter from their GP, it is something we could explore. In terms of shopping, the metropolitan police had said they're not going to policing face covering compliance in shops, though TFL have started putting pressure on commuters to wear their masks. Public Health Enfield will need to investigate exemptions and how it is working on public transport.

Q9 - Now local authorities will have the power to impose a local lockdown, what criteria are you going to use to make that decision?

A - We are working with our neighbouring boroughs to look at the new powers that local authorities have and how we implement them will very much depend on the nature of the situation that arises. For example, if something is happening in Enfield it is likely to be reflected in our neighbouring boroughs. Public Health England have stressed that they refer to the outbreak control plans, if rates start to increase, but at the moment levels as very small. Their response to an event, would depend if there is an outbreak where it was, what it looked like, can individuals self-isolate and limit transmission. The Public Health team is also learning from other areas like Blackburn but are following the advice provided by Public Health England.

Q10 - What actions are being made to ensure the deaf community are getting the same messages around how to keep safe, along with everyone else?

A - We recognise that this a challenge and we welcome the opportunity to work closer with Healthwatch Enfield moving forward to address this. The learning disabilities team at Enfield Council have put together some easy read booklets, Public Health England have also produced some easy read guidance which is very visual and might help to explain things for the deaf community and people with learning disabilities. But they do recognise that there is more that needs to be done.

Q11 - I'm blind and have been struggling e.g. where someone would help me cross the road people now don't want to come near me to take my arm and help, what support is being considered to help people like me?

A - They know this is a real challenge and do recognise things do need to be done. For those that have been receiving support locally from Enfield Stands Together (e.g. shopping, medication, engaging with people on the phone), Enfield Council are still carrying on providing support. Also know that the RNIB have a Coronavirus helpline number (0303 123 9999) to help those that are blind or partially sighted to access services. They have also produced some guidance which may be helpful, such as using your cane to alert others that you are blind and may need support.

Q12 - What is the proportion of deaths in Enfield care homes?

A - In England as a whole, the percentage of care home deaths are between 38-42%. In Enfield the percentage is 50%, this is mainly due the very high number of care homes we have in the borough. Another neighbouring borough that also has a high number of care homes is Barnet and they also had very similar number of deaths. Scotland had 50% of their deaths in care homes as well. The levels are proportionate to the number of care homes in the borough.

Q13 - Can you clarify the testing result of the Testing result of the 2.29% in relation to for those that tested positive for Coronavirus? Is this an indication, instead of an absolute?

A - May be people that are asymptotic, e.g. they don't have any symptoms and they are not aware they have an infection so therefore they don't seek testing. So yes, the 2.29% figure is relation to those individuals that have tested positive.

Q14 - Is health taking a joined up approach over litter and overflowing bins, they keep seeing discarded masks and glove on the ground?

A - They have all seen this happening and they would very much encourage people to get face coverings that can be washed and re-used rather than disposable ones. In terms of the use of gloves, that is something that we are not encouraging unless you are in a setting that Public Health England are advising the use of gloves, such as clinical settings. We would not advocate for members of the public to wear gloves and are very aware of the environmental impact this has. The reason they and Public Health England are not advocating the use of gloves is they can become contaminated and cause infection. People not wearing gloves are more likely to wash their hands more frequently. Public health does not have any direct authority of waste disposal and collection, but we are happy to raise this issue with the appropriate departments within the council.

Q15 -How can the community support Public Health Enfield?

A - Many people saying we are between waves, lots of people are planning for a second wave but we don't know if there is going to be one. If there is, it could be quite severe as it coincides with winter flu and we will have two viruses circulating at the same time. We have a little bit of time to prepare and plan for a second wave and they would like is support from the community and local voluntary sector organisations for disseminating messages around Coronavirus going forward. The main thing you can do about Coronavirus is do your utmost best to follow infection control measures to avoid catching the virus. In terms of Public Health and not

getting the virus, the simple messages are around hand washing (which can significantly reduce the spread of the virus), social distancing and test, track and trace. We are constantly trying to reduce the spread of the virus, to keep it contained, then naturally it will die off. It is also very important for the community to get their flu jab this year as the worst case scenario would be the two viruses circulating at the same time. We would like your support to disseminate this message, especially to BAME communities where the effect of the virus can be worse than the rest of the population. It is also important to feedback any issues you feel they need to hear by contacting us directly or via Healthwatch Enfield.

Q16 - whose contacting this group of shielded individuals and how are they going to refer?

A - At start of the pandemic, Enfield Council were provided with a list of shielders through their work in collaboration with the NHS and have been in regular contact with them throughout the pandemic. Many staff at Enfield Council were diverted to contacting individuals instead of their normal jobs.

Q17 - I'm living with someone who is bereaved was struggling with anxiety even before Coronavirus, this had increased their anxiety and they are now scared to go out. Also. If people have had Coronavirus the recovery time can be an issue mentally as well as physically

A- We are aware that this has been a difficult time for many people. For some people, recovery will be a long term thing and they will require the appropriate assessments from clinical and social care perspectives. For anyone on the community that wants to look into general advice on services around mental health they can visit the NHS every mind matters website <https://www.nhs.uk/oneyou/every-mind-matters/> it links to lots of credible services including bereavement, or you can also speak to your GP if you are struggling with your mental health.

Q18 - Knowing what we do about the BAME community being more at risk, will BAME groups get priority for Flu vaccine?

A - They are working very closely with NHS England to make sure the risk groups flu vaccination coverage is as high as possible. We don't commission vaccination programs, this is commissioned by NHS England, so we don't have control other than this. But there is an important message to make sure that the information we get to local communities is culturally competent and that people that are eligible for the flu vaccine know that and know where to get it.

Q19 - How can the public access the medical health risk assessment report on the wearing of masks?

A - Public health will look into this, however they would also like to say that if any individual feels like they have particular health issues that might make them more prone to complications from Coronavirus and are anxious, they should speak to their GP or a consultant to about the issue.