

Scrutiny Briefing Note

The Communities Scrutiny Panel have asked to monitor progress on the following issues. This briefing contains the latest position as at 11th September 2020.

Subject: Covid-19 Strategic Recovery Plan – Update Report

- 1.1 At its meeting on 15th July 2020, Cabinet considered and approved the Council's local strategic recovery plan.
- 1.2 At the sub-regional level, under the auspices of the Humber Local Resilience Forum (LRF) a Humber recovery co-ordinating group (RCG) has been overseeing sub-regional plans for recovery. At the local level, a recovery task group (RTG) has been formed. Chaired by the Deputy Chief Executive, the group has ably developed the strategic recovery plan, with weekly reports monitoring progress of delivery across the following themes/workstreams, each led by a Director or Assistant Director:
 - Local economy and business support (including a “green” recovery)
 - Adult social care and protection of the vulnerable
 - Children, families and schools
 - Environment and regulatory
 - Community resilience and engagement
 - Financial resilience, reform and renewal (including organisational development)
 - Public health and health protection
 - CCG Union
- 1.3 The attached recovery plan, an iterative document, sets out the approach to recovery, identified risk and areas of focus as the Council and the borough moves through this continued challenging period. The overarching strategic aims are to facilitate and support local economic recovery, support and sustain local community resilience, support the health and care system, maximise digital capability, support workforce wellbeing, remain focused on prevention and effective outbreak management and build as much financial resilience organisation and Borough) as possible.
- 1.4 The RTG has undertaken a weekly review of the recovery plan since it's approval by Cabinet on 15th July, with regular reports to the Council's Leadership Team to provide assurances on the pace of recovery progress, whilst identifying controls and further actions to mitigate risk factors. The strength in oversight has been proportionate given the emergency circumstances, and now reporting has moved to weekly thematic oversight at Leadership Team – ensuring the Joint Chief Executive and Directors are fully appraised of the recovery progress.



- 1.5 The Strategic Recovery Plan Update Report provides a current position statement (as at 11th September 2020) on the recovery progress achieved, and any issues or potential risks, not only to organisational recovery, but also to recovery of the Borough.
- 1.6 Collaboration, engagement and partnership across the public, private and voluntary sectors remains essential. Such engagement continues via the Development and Growth Board, the Voluntary and Community Sector Alliance and, from a system wide perspective, the Place Board.
- 1.7 The Council's primary strategic objectives of stronger economy and stronger communities remain as relevant as ever. The Recovery Plan has evolved as circumstances have changed and new challenges and opportunities arisen. This is not a plan captured in a tablet of stone, which is particularly relevant given the recently imposed lockdown restrictions. This situation remains volatile and as such the plan and actions are flexible to respond accordingly. As the local economic, social and environmental impact of Covid-19 becomes clearer over time, the Recovery Plan will be regularly reviewed to ensure fitness for purpose, relevance and focus enabling the Council and the Borough to respond to significant challenges as best as reasonably practicable.

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Strategic Recovery Plan – Update Report

Date: 11th September 2020 - update for Communities Scrutiny Panel

Workstream	Summary of progress – key milestones achieved	Risks/issues to delivery of actions and impact on the borough	Actions to mitigate risks	PPE risks/issues	Further actions
Financial Resilience	<p>Individual workstream action plans progressing</p> <p>Finance – Business partners working with SMTs to review budgets and commissioning plans. Focus on next week – establishing budget process for 2021, updating MTFP, and completing Income, Fees and Charges return. Technical accounting opps being explored</p> <p>Workforce Covid secure buildings – on track with risk assessments of operational buildings, roll out of CV19 secure return training modules (1133 completed all modules so far) Managing remote teams, remote meetings, working remotely and holding remote</p>	<p>Capacity Pace Finance Second wave Political support/buy in</p>	<p>Review of priorities and individual team workplans Programme of decisions/milestones Regular review and monitoring of financial impact, alongside identification and delivery of short/medium/long term actions Team will meet fortnightly</p>	<p>None identified</p>	<p>LT to pull together savings opportunities 5/10/15% Impact of latest Govt announcements (fees and charges) P5 monitoring, preparing P05 MHCLG return which will inform refresh of MTFP and opening gap LT discussion required 15/9 to assess development and impact of “options” for saving</p> <p>Further Civic trial planned for 24th Sept to enable larger re-opening of the building</p> <p>Review of corporate processes required to deliver sig change programme underway inc capacity to deliver.</p>

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	<p>interviews e-learning modules released. Early warning system for workforce in place for covid cases – linked to risks around second wave Reviewing redeployment arrangements to ensure fit for purpose in the event of a second wave Schools have returned with no major issues</p> <p>ICT On-going review of ICT Strategy – link to new models of working All other actions progressing</p> <p>Assets Mothballing opps reviewed inc service related use buildings, All other actions are progressing</p>				<p>Progressing actions inc development of business case linked to PR/Telephony & MS365 E5 licencing</p> <p>Discussion needed re agile kit requirements moving forward – longer term implications/control of requests , links to PR Cyber security – update going to LT 14/07</p> <p>Workstream action plan progressing inc accelerated PR programme, links to OPE/Union</p>

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	<p><u>Governance and Decision Making</u> All actions progressing, inc review of scheme of delegation</p> <p><u>Operating Model</u> Single conversation with VCS via HI, ongoing work with FG. Discovery project taking place relating to Social Isolation which is testing and shaping the role of data and insights. A blueprint for the potential shape of the operating model and a roadmap for next steps is being developed for consideration by Executive Leadership Team late September/early October</p>	<p>Delivery partner FutureGov contracted to end of September. The blueprint and roadmap will be produced by then, need to ensure there is capacity to deliver on an ongoing basis.</p> <p>SMT/Management review outcome will influence the shape/requirements of the model and any delay could impact on implementation.</p>	<p>Secondment extended to 31/12/20 for key Change Team member.</p> <p>Additional capacity to be identified.</p>		<p>Progressing. Initial report around standing orders being taken to Full Council next week. Ongoing dialogue with Members around potential governance changes. Union Board terms of reference – amendments agreed in principle, subject to UB ratification. Scheme of delegation dependent upon internal reviews.</p> <p>Report to Exec Management Team to be considered ahead of moving forward with further development/implementation.</p>

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Children Families and Schools	<p>Education provision:</p> <p>The DfE guidance states that all schools are to be fully open from September term 2020 and schools must plan for this.</p>	<p>Appropriate risk assessments, based on the H&S and DfE guidance/measures are required.</p> <p>Attendance and parents not sending their children to school w/c 1st Sept. As an example, an increase in those young people educated at home (EHE)</p> <p>Impact of lost education (academically and mental health impacts)</p> <p>The governments expectation is that LA will manage the transport offer (home to</p>	<p>Risk Assessments have been updated with our Maintained School (via H&S team, LA school org team and Engie), to ensure they have the necessary guidance and support to open fully and safely in September</p> <p>Communications plan developed and implemented over the summer to give parents assurance that schools are safe places for their children</p> <p>The DCS has undertaken regular communications with schools on guidance and updates</p> <p>The Inclusion team will work closely with school and parents to ensure that an education offer is available and to assess the impact of any EHE and the overall attendance provision</p> <p>Transport staff both in the LA and within Engie have been working closely together to</p>	<p>None identified</p>	<p>Monitor all guidance released in respect of school arrangements for September 2020 and ongoing.</p>

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		<p>school) from September 2020. Due to schools managing pupils returning to school on a staggered basis, there could be a shortage of transport</p> <p>That there will not be enough public transport available (strategically managed via Engie)</p>	<p>ensure there is enough transport provision, early indications are positive and children are accessing transport and school</p> <p>Grant funding has been accessed via the Department for Transport to assist with any additional transport requirements, both operationally and strategically.</p> <p>Link adviser role established for September to pick up any emerging issues</p> <p>Daily calls now in place with the DfE to monitor schools opening , pupil attendance and to help and support the LA</p>		
	<p>Social care: Front Door – additional administration is in place, Staff workforce slight increase in demand in MASH but the rate of referral and contacts is comparable to what it was last</p>	<p>Unknown demand Rise in Domestic Abuse Hidden Harm Food poverty All remain an issue</p>	<p>We have 2 agency SW and 3 Project teams – 2 are here until Dec 2020 while we launch permanent recruitment - The remaining Project team is working on reduction of CLA and</p>	<p>None identified</p>	<p>Preparation for Ofsted visit assurance – and we have 2 days 28th 29th sept with DfE inspection planned</p> <p>Threshold criteria was signed off by SCP on 30th July and is</p>

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	<p>year. Referral source mainly police or community led. - schools return so workload is being managed. Links to school clusters by the EH hubs will roll out</p> <p>Refocus the Safe Families offer to include those children subject to CP Plan as part of our overall reduction strategy - this has impacted on reduction of CP now losing 19 children in last month to CIN</p> <p>Safer: Community Safety Partnership arrangements working effectively -</p>	<p>Increase of face to face contact and visits this month to manage and increased office presence by management</p> <p>Potential increase in crime/ASB</p>	<p>discharge and funded by Transformation</p> <p>Refocussing the Early Help service to reduce escalation into CSC - this is now in place and will be reviewed for impact</p> <p>Rolled out school offer regarding early help - this will continue</p> <p>Using the 2 Family Hubs to see vulnerable children and this will increase to 4 in Sept 2020</p> <p>Executive meetings now returned to quarterly. Town Centre Group in place, Modern Slavery & Prevent meetings taking place. ASB Team responding to ongoing issues of concern. Night Safe Marshalls introduced into Cleethorpes at weekends for a 3 month period until the end of October.</p>	<p>None identified</p> <p>PPE and RAs in place for family contact</p>	<p>currently communicated to partners on website, webinars and in particular targeted school workshops to help control demand in the system.</p> <p>Returning to BAU via work programme</p> <p>Refreshed CSP Strategy to follow JSIA recommendations</p> <p>JSIA to feature at Council Crime & Disorder Committee</p> <p>ASB incorporated into Scrutiny Work Programme</p> <p>Wider review of Family Contact Service to take place before March 2021.</p>

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	<p>Family Contact Service now providing a phased roll out of Face to Face Contact.</p> <p>Youth Offending Service and Street Based Team – continuing to provide support to Young offenders and respond to ASB and safeguarding concerns via intelligence led targeted patrols.</p> <p>Skills: Virtual support in place from the National Careers Service, YPSS team, partnership with admissions at FE colleges to support transition.</p>	<p>Wider expectation to increase Face to Face sessions with limited safe venue space available currently.</p> <p>Potential increase in crime/ASB</p> <p>Increase in unemployment, particularly 16-24 year olds. People facing redundancy. Knock on effect for families. Furlough ceasing.</p>	<p>Work ongoing to identify a wider range of venues to facilitate family contact. Telephone and virtual contact remains in place.</p> <p>Service continuing to respond to issues of concern, linking up with Humberside Police and wider Children’s Social Care</p> <p>Partnership work with DWP to aid recovery.</p> <p>Employability Wide Forum (wider training provision)</p> <p>SSOW now in place for home visits and face to face work</p> <p>Prioritise collaborative approach to the unemployment situation via multi representative taskforce</p>	<p>None identified</p> <p>Delivery of masks and other cleaning products received at the skills hub</p>	<p>Ongoing BAU</p> <p>Ongoing delivery of services with a move to eventual face to face delivery as per guidance.</p>

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	<p>Childrens Health Provision: School based immunisation recovery plan implemented from June – August.</p> <p>Influenza immunisation plan is in place to deliver in schools from September (Reception to Year 7).</p> <p>Phase 2 implementation of the Healthy Child Programme recovery plan is in place.</p>	<p>There are still some children outstanding that did not attend the sessions.</p> <p>Schools not allowing vaccinations to take place on site. Removal of paper-based consent forms Staff capacity Poor uptake of vaccine across the borough</p> <p>Under identification of child development due to ceasing the 10 and 24 month contact (includes ages and stages questionnaire). Unidentified risks due to limited face to face contact</p>	<p>Sessions will be delivered in Schools in January to catch this cohort up.</p> <p>75% of schools now have sessions booked, other schools to be contacted by 14th September, any issues to be escalated to Head of Service). Electronic consent is going live on 14th September. Further recruitment of immunisation nurses is taking place and training of Health Visitors. Social media campaign to promote Influenza immunisations for children, schools also promoting via their own channels. Letters have been sent to all eligible families.</p> <p>Home visiting has resumed by Health Visitors. Recovery plan details how the Healthy Child Programme contacts will be reintroduced. Working alongside Locality Leads for Early Years to review delivery model of universal 10 and 24 month contacts.</p>	<p>PPE is in place for all contacts in children's health provision</p>	<p>Contingency plan in place should schools close due to COVID, utilising a drive through or community venue model.</p> <p>Influenza immunisation uptake is reported monthly to PHE.</p> <p>Standard Operating Procedure (includes risk assessment and safe system of working) in place.</p>

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	<p>Women and Children’s CCG: Phase 2 of NHS response to Covid currently being implemented across Womens and Childrens health services including: Maternity Paediatrics Complex Care EOL CYP Mental Health services</p> <p>Key milestone achieved: Approval to direct award the expansion of the Mental Health Support Team contract to Compass the incumbent Provider for wave 2. Full coverage of all educational settings to begin mobilising in Q4.</p>	<p>has taken place between March – August. Universal baby clinics not resuming. Families First Practitioners are not yet undertaking face to face or sessions for universal Healthy Child Programme contacts. Under identification of vision problems on school entry.</p> <p>Under identification of vulnerable patients due to reductions due to lockdown and F2F contacts</p> <p>Re-opening of schools and the impact / surge in demand for emotional health and wellbeing services for C&YP and their families</p> <p>Reduction in paediatric bed base due to change to PAU and Covid restrictions on the ward</p>	<p>Health Visitors undertaking heights and weights at core contacts or when clinically indicated as opposed to universal baby clinics. Communication to be sent to all parents/teachers of Year 1 children with advice about vision and who to contact if they have concerns as they have missed screening.</p> <p>Childrens Health Covid oversight, risk and escalation meetings in place</p> <p>All services have detailed risk and business continuity plans</p> <p>F2F contacts with PPE in place based on risk assessments</p> <p>MHST roll out to be phased across all schools</p> <p>24/7 crisis line – all age</p>	None	<p>Continue to mobilise in line with NHSE guidance</p> <p>Further Action: Recruitment of additional workforce/engagement with schools in Q2 and Q3 to further roll out project</p> <p>Continuation of 24/7 crisis line</p> <p>Paediatric Transformation – pathway development work to reduce hospital demand</p>

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Adult Social Care and Protection of the Vulnerable	<p>Agreement of provider sustainability funding going to cabinet on 5th August</p> <p>Preliminary letters re second round of infection control fund have been sent out;</p> <p>Second round of provider sustainability measures agreed by cabinet;</p> <p>Delivery of first round sustainability monies concluded</p> <p>Enhanced budget and activity monitoring</p> <p>Preparation of detailed spec for intermediate care facility underway and negotiations on pricing started</p> <p>Care home testing approach agreed and intelligence re outbreaks working well and</p>	<p>Changes in demand for ASC impact on provider costs and sustainability</p> <p>Providers fail to use the money appropriately and there is a clawback of funding/enhanced risk of infection</p> <p>Provider failure prevents flow through the health and care system, reduced availability of community services leading to increased mortality;</p> <p>Wider caring community needs to be reached with appropriate advice, information and support to prevent/reduce the spread of infection or to ensure that appropriate alternative care is in place</p> <p>ASC budget is not sustainable and there is inadequate funding to support the additional on</p>	<p>Strategic group in place to ensure the delivery of the infection control plan;</p> <p>Fortnightly meetings to review plan</p> <p>Provider engagement through weekly support to care homes webinars</p> <p>Situation reporting and performance reporting data to inform actions</p> <p>Routine market intelligence process is in place</p> <p>Weekly contact between contract officers and providers is taking place</p> <p>Weekly communications bulletin out to providers on all aspects of ASC support</p> <p>Primary care support in place</p> <p>Multidisciplinary team meetings with care homes to proactively plan for infection etc</p> <p>Budget planning group to be set up for ASC</p>	<p>No current issues (would be picked up on capacity tracker and we have contingency supply for ASC)</p>	<p>Second round of infection control funding allocated; residual amount to pay out</p> <p>Infection control return satisfactorily completed with minimal risk of claw back</p> <p>Provider sustainability offer to be made to providers; including out of area payments;</p> <p>Clear backlog of fee uplifts</p> <p>Enhanced nursing offer to deliver support to care homes</p> <p>Budget planning and savings opportunities to be reconsidered</p> <p>Finalise noms agreement and joint venture signed for ECH;</p>

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	<p>reported to portfolio holder weekly;</p> <p>ECH risk mitigations part completed re noms agreement</p> <p>ECH open days in place and comms plan being delivered</p> <p>Work resumed on getting better value from care programme</p>	<p>going costs of COVID; increased loss of income from clients exacerbates the issues</p> <p>ECH risk re first fill and overall demand for Burchester court</p>			<p>Commence detailed planning for next ECH scheme;</p> <p>First fill of Burchester court</p>
Economy and Business Support	<p>- Timelines for restarting any temporary suspended work in place.</p> <p>-Engaging started with LEP's on any needed changes to agreed spend profiles as well as new priorities post COVID-19.</p> <p>-Program agreed and implemented to deliver DfT guidance for reallocation of road space</p>	<ul style="list-style-type: none"> •Business failures may cause reputational risk if not seen to be helping business / some businesses are refused grants •Lack of uptake of SHIIP development opportunities •Further decline of high streets 	<p>Processing remaining non-discretionary grant scheme</p> <p>Collating further business and consumer intelligence by way of survey and process in place for electronic consultations.</p> <p>Action plan in place for reopening High Streets with funding.</p>	None identified	<p>Completion of Masterplan and Investment Plan for Stronger Towns Fund</p> <p>Continue work with partners to take projects to development phase.</p> <p>Start community engagement on several projects as lockdown eases.</p>

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	<p>Scenario Planning with D&G on key sectors in 9 months and 2-3 years.</p> <p>Data gathering complete on labour force and impact on 16-24 year olds.</p> <p>Future High Street Funds Bid submitted</p> <p>Stronger Towns Fund Masterplan progressed.</p>	<ul style="list-style-type: none"> •Social distancing impacting on ability to effectively consult on schemes. •External funders do not extend the timeline for completion. -Longer term impact on approach to night shelters, support and temporary accommodation. 	<p>Marketing arrangements in place for SHIP.</p> <p>Regular partnership meetings with LEPs and other external funders.</p> <p>Project in place to de-risk council owned housing delivery sites.</p> <p>Revised approach to night shelters and temporary accommodation.</p>		<p>Continue to engage Sport England approval of the revised Playing Pitch Strategy</p> <p>Develop an Accommodation Strategy for NELC</p> <p>Adapting to new LEP arrangements</p>
Environment and Regulatory	<p>-Front line services have fully returned to delivering business as usual with added precautions in place</p> <p>-Regulatory Services have returned to normal but with some restrictions in formal enforcement options.</p> <p>-Regulatory checks on COVID security in businesses and public spaces expanded with</p>	<p>-Pressure on front line services continuing above normal levels.</p> <p>-Public challenge of officers returning to enforcement duties.</p> <p>-Some enforcement activities still challenging due to distancing requirements.</p> <p>-Enforcement powers available for business COVID breaches may not meet public expectations.</p>	<p>-Risk assessments in place and additional staff support provided.</p> <p>-Joint working with Public Health and Humberside Police.</p> <p>-Operational plan for additional staffing to support outbreak control plan</p>	Nil	<p>-Review precautions in open space including Cleethorpes once schools are returning</p> <p>-Increased partnership working with Freshney place and Humberside police around face mask requirements.</p> <p>-Review impact of government announcement</p>

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	<p>1400 businesses receiving visits to date.</p> <p>-Precautions maintained to ensure safe opening of High Streets and high foot fall public areas.</p> <p>-Improved hand hygiene installed in Cleethorpes resort</p>	<p>-Implementation of local lock down powers would be resource intensive if required.</p> <p>-The need for delivering both COVID recovery work and EU exit preparation work is starting to place excessive pressure on skilled officer groups.</p>	<p>-Weekly national strategic EU exit group and local planning in progress.</p> <p>-Production and distribution of business-focussed Covid advice booklet to 5,500 local businesses</p>		<p>around Covid Marshalls and enforcement</p>
<p>Community Resilience and Engagement</p>	<p>Service issues progressing well.</p> <p>Canvass, registrars, scrutiny - green.</p> <p>Communities: Consolidation of vulnerable data* Food hub exit plan Hardship fund Food coordinator Community Hub/ Simply Connect Volunteering sustainability* Themed community engagement Build community organiser/ asset base VCS and community IT enablement and infrastructure*</p> <p>Majority of actions progressing well – most green some amber*.</p>	<p>Food - uncertain demand Hardship - economic impact uncertain Suspension of evictions and face to face bailiff activity deferred from 23/8 Shielded/isolation</p>	<p>Recovery group convened with relevant officers - meets weekly. Food Hub temporarily relocated Letters and contact calls to households in receipt of national food deliveries. Food coordinator recruited. Hardship funding – allocation of 230k received and VCS engaged. Business grants paid to VCS organisations. Financial hardship and wellbeing leaflet issued August 2020 Covid stewards in place via ERA Data and intel – sector and other orgs engaged, signposting information updated and on SSNEL website.</p>	<p>Nil</p>	<p>Monitor hardship grant take up. Food store to be distributed into the community. Locality assessment and revision to Community Asset Transfer process. Faith/ BAME / VCS webinar engagement. Establish VCS sustainability fund. Contingency planning for future shielding arrangements.</p> <p>Production and distribution of first of 4/5 community advice booklets delivered to all households in NEL.</p>

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Health CCG	<p>Initial submission of Humber Phase 3 plan made – (Acute & Mental Health). Requirement to conclude phase 3 planning by the end of October.</p> <p>Finalisation of finance plan for remainder of the year delayed – still awaiting confirmation from the centre of the CCGs allocation for Oct – Mar. Requirement to have plan finalised by end of October.</p>	<p>Late guidance / having to be done at pace.</p> <p>Focus on acute / MH to date – need to ensure plan is balanced across all sectors. Ability of Acute to delivery the national expectations of “normal”(pre-COVID) levels of activity.</p> <p>Allocations are going to be ICS based. Lot of work to do (within the Humber) to finalise approach.</p>	<p>System working to maximise use of available resource.</p> <p>NEL representation on Humber Planning Team</p> <p>Humber Oversight Management Board key</p>		
Public Health	<p>Front line public health service (Substance misuse / Sexual Health / Wellbeing Service) all continue to provide targeted intervention to the most vulnerable, including virtual service delivery and are starting to provide more face-to-face. All are continuing to adapt operating procedures based on the knowledge they have gained during the past few months and following emerging guidance.</p> <p>The Comeback (recovery community) is now providing a limited drop-in service ensuring</p>	<p>Significant capacity issues within the public health team, particularly at the PH consultant level, within Public Health intelligence and within the Wellbeing Service.</p> <p>Inability to fully deliver against the commitments made in the commissioning template, including statutory responsibilities.</p> <p>Inability to provide full-service delivery for front line services (Sexual Health/Substance Misuse / Wellbeing Service)</p> <p>Contractual issues re: commissioned services, including</p>	<p>Recruitment of posts including PH consultant level, PH intelligence and within the wellbeing service, including recruitment to vacant posts and the development of a bank of wellbeing workers, including support for BAME communities.</p> <p>Re-negotiate timescales for all key projects and continue monitoring the progress of the wider PH agenda through the Public Health Project Log</p> <p>Await NHS / PHE guidance on full-service recovery</p> <p>Continue monitoring service demand</p>	<p>Access/co</p> <p>st of PPE for all PH front-line services (Substance Misuse, Sexual Health and the Wellbeing Service).</p> <p>Some PH programmes within the commissio</p>	<p>Modelling increase expected for drug/alcohol and sexual health referrals for the rest of 2020/21.</p> <p>Identify wellbeing service support required from vulnerable people identified in Outbreak Control Plan.</p> <p>Business case to increase the capacity within IT to push forward the development work required for the LiveWell NEL Website.</p> <p>Vacant wellbeing service posts to be filled.</p>

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	<p>adherence to social distancing guidelines, masks, etc.</p> <p>GPIP are commencing the new alcohol element of the service week beginning 10th August 2020, in a COVID-19 restricted way.</p> <p>The Carers Centre will be opening in September for appointment only face to face work – this will include those who are supported by the specialist SM worker.</p> <p>The various virtual tools that have been utilised during the lockdown period are being continued as part of the overall offer by all front-line PH services.</p> <p>A bespoke 2-3 month intensive contraceptive offer for women is being developed.</p> <p>GP practices that offer LARC are now offering the service again.</p> <p>Wellbeing Service continues to provide low level Tier 2 Mental and emotional wellbeing support to the Navigo 24 Mental Health Support Line and to the NELC Contact Centre.</p> <p>Smoking cessation service continues to be delivered virtually. NLaG Smokefree Hospitals due to launch in Aug.</p>	<p>availability and accessibility of testing and PPE for all staff and increases in service demand.</p> <p>Changes to health needs and health inequalities due to COVID, including changes in lifestyles and behaviours, eg increased alcohol/substance use, smoking, obesity, low level mental health issues etc – potential to overwhelm PH services, including the wellbeing service</p> <p>Sub-optimal uptake of immunisation and vaccination programmes.</p>	<p>Continue contract meetings</p> <p>Identification of health needs through the rapid Health Needs Impact Assessment</p> <p>Continue to monitor uptake of vaccinations and immunisations and develop strategies to increase uptake where needed, through the Screening and Immunisation Oversight Group</p>	<p>ning template will also require PPE once they recover, eg the over-75 wellbeing check.</p>	<p>Business case for recruiting to additional wellbeing surge capacity in response to potential increased demand on the Wellbeing Service and Thrive.</p> <p>The main shielding patient list will continue to be received and maintained ready for use in any future local or national lockdown.</p>

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	<p>Plans being developed on Smoking Cessation support to in-patients. Any inpatient that smokes will be referred to the wellbeing service for stop smoking support.</p> <p>Modelling of the expected increase in referrals for the wellbeing service has been completed.</p> <p>Some GPs have started to complete NHS Health checks and the outreach programme in the East Marsh is being restarted.</p> <p>PH Intelligence continues to centre on COVID work, including the rapid health needs assessment. Since lockdown, the weekly COVID-19 epidemiology summary for NEL has continued to be produced, which includes a public health update, national and local positive test figures, hospital and care home figures, and the number of deaths. A COVID-19 recovery intelligence briefing is being drafted by the CSSU and PH team and will be ready for comment shortly.</p> <p>All PH programmes within the commissioning template continue to be monitored through the PH processes. Timescales / risks for</p>				

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	each programme have been reviewed as part of this process.				