NHS GREATER GLASGOW AND CLYDE

Minutes of the Meeting of the
Public Health Standing Committee
Via Microsoft Teams
on Wednesday, 21st October 2020

PRESENT

Mr J Matthews in the Chair

Mr P Seaman
Ms F Tudoreanu
Prof L de Caestecker
Mr I Ritchie
Mr F Shennan

IN ATTENDANCE

<table>
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<tr>
<th>Name</th>
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<tr>
<td>Dr E Crighton</td>
<td>Deputy Director of Public Health</td>
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<td>Dr A McDevitt</td>
<td>GP</td>
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<td>Prof J Brown</td>
<td>Chairman, NHSGGC</td>
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<td>Ms J Grant</td>
<td>Chief Executive</td>
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<td>Ms F Moss</td>
<td>Head of Health Improvement &amp; Inequality, Glasgow City HSCP</td>
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<td>Ms L Long</td>
<td>Chief Officer, Inverclyde HSCP</td>
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<tr>
<td>Dr B von Wissmann</td>
<td>Consultant in Public Health</td>
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11. WELCOME AND APOLOGIES

Apologies for absence were intimated on behalf of Ms AM Monaghan and Ms S Millar.

The Chair welcomed Ms Flavia Tudoreanu and Mr Frank Shennan to the Committee.

NOTE

12. Declarations(s) of Interest(s)

The Chair invited those present to declare any interest in any of the items being discussed. There were no declarations of interest made.

NOTE
13. **Minutes of Previous Meeting:**

The Committee considered the minute of the Public Health Standing Committee meeting of on Wednesday 29th January 2020 [Paper No PHC(M)20/01] were approved as an accurate record.

**APPROVED**

14. **Matters Arising**  
   **(a) Rolling Action List**

The Committee considered the Rolling Action List [Paper No. 20/10]. Members were content to approve the recommendation that two actions were closed.

In addition, Prof de Caestecker updated on the following actions:

- **Minute 4 – Drug Related Deaths Summit**
  A number of actions for UK and Scottish Government have been taken forward by the Drug Deaths Task Force. A further update will be provided at a future meeting and this action would remain ongoing.

- **Dr McDevitt** asked if there was any data showing the impact of drug deaths in the community, during COVID-19. Prof de Caestecker advised that work was ongoing to work closely with colleagues within Drug and Alcohol Services. Ms Moss advised that there was data available and agreed to share the data with the Committee.

- **Minute 7 – Update on City Vision Development**
  The Committee agreed that this action would remain ongoing for discussion at a future meeting.

- **Minute 9.3 – Identification of Public Health Scotland Representative**
  It was agreed that this action would remain ongoing, until such times as a representative had been nominated.

**NOTED**

15. **COVID-19 UPDATE**

The Chair welcomed Dr Beatrix von Wissmann, Consultant in Public Health, to the meeting. Dr von Wissman provided a presentation on the incidence of COVID-19.

The presentation showed Committee members a number of graphs which highlighted different data spikes for the first and second wave of COVID-19. The data had been broken down into individual Health and Social Care Partnerships (HSCPs) and into which type of cluster they originated from. This highlighted that the household and social cluster was by far the largest cluster of cases.
It was estimated that the reproduction rate (R rate) in Scotland was between 1.3 and 1.6, with an estimated doubling time for Scotland being 8 – 10 days. There was an estimated 96 – 347, per 100,000 people, new daily infections. It was highlighted that patterns had been recognised with the number of contacts falling during the October holidays for NHSGGC schools.

Prof de Caestecker highlighted aspects of the public health response which included staff and staff household testing, testing of care home residents and staff, and the Test and Protect Programme. Analysis of data and looking closely at clusters was a large part of work. Work was ongoing with Environmental Health colleagues and Local Authorities who have helped visit premises, school and halls of residence to provide guidance to these groups.

The Directors of Public Health in Scotland had been given new responsibilities to work with care homes and work alongside the Directors of Nursing, to help understand the epidemiology in care homes and support care homes to respond to the ongoing challenges and to assist them to interpret and implement the continuously changing guidance.

It was advised that the Scottish Directors of Public Health had been very active with daily meeting with the Scottish Government, twice weekly national care home meetings and formed part of the team providing advice to the First Minister.

Prof de Caestecker highlighted the Test and Protect Programme and the daily increasing workload. Recruitment, training and support of new staff was underway. Contact tracers, team leaders, service managers and Public Health Leads had all been identified to assist with this. There was close working with the National Contact Tracing Centre with daily meetings to discuss new cases. Consultant Programme Managers continually manage clusters across a number of complex settings which enhanced the excellent multi-disciplinary working across the whole of the service. There were challenges noted in respect of recruitment of Public Health Consultants however Prof de Caestecker assured the Committee that efforts to recruit Consultants remained ongoing.

Prof de Caestecker thanked the Board for their continued support throughout this challenging time and thanked all of the Public Health Team for their continued efforts throughout the COVID-19 pandemic.

Ms Moss advised that a number of staff from Glasgow City HSCP had been deployed to assist with the Test and Protect Programme. However, there was growing concern about the impact this may have, given increasing demand on other services and consideration would need to be given to how this was resourced, moving forward.

Prof de Caestecker acknowledged the challenges highlighted. Ms Grant assured members that an additional 44 contact tracers had been recruited with 14 in reserve. Additional interview dates had been scheduled for additional recruitment.
Prof Brown wished to note thanks on behalf of the Board, to the Public Health Team and Prof de Caestecker for the continued first class response to the pandemic.

In response to a question regarding the availability of data in respect of the impact of COVID-19 on mental health, Prof de Caestecker advised that Public Health Scotland were undertaking work to develop data sets which showed the impact of COVID-19 on mental health.

The Chair thanked Dr von Wissmann and Prof de Caestecker for the presentation and highlighted the significant ongoing work the Public Health Team continued to provide. The Committee were assured of the actions being taken to address the ongoing response to the COVID-19 pandemic.

**NOTED**

### 16. Social Recovery and Health Inequalities

The Committee considered the paper “Update to Public Health Standing Committee on Social Recovery and Health Inequalities” [Paper No. 20/11], presented by Dr de Caestecker

The paper highlighted the strategic and co-ordinating activity to respond to the pre-existing challenge of inequalities in health that were underpinned by concentrations of poverty. This included the work of the Public Health Oversight Board and the Social Recovery Task Force.

The Committee was asked to note the city wide strategic and co-ordinating activity aimed at utilising remobilisation of services to enhance opportunities to address health inequalities. The Committee were also asked to discuss potential areas of support through Public Health Standing Committee and gaps in terms of areas of work and locality.

The Committee recognised the value of continued focus on addressing health inequalities through social recovery, agreed to include this as a recurring agenda item and would anticipate further updates to future Committee meetings.

**NOTED**

### 17. Closing Remarks and Key Messages to the Board

The Committee agreed that Mr Matthews and Professor de Caestecker would provide key messages to the Board, as follows;

1. The Committee received a presentation which provided an update on the ongoing efforts in respect of the organisation response to COVID-19 and were assured by the information provided.
2. The Committee received a paper which described the strategic and coordinating activities being undertaken to address the pre-existing health inequalities within Greater Glasgow and Clyde. The Committee agreed the value of ensuring a continued focus on addressing health inequalities was crucial and agreed that social recovery would remain a standing item on the agenda for updates to future Committee meetings.

**ACTION:**
- Mr Matthews and Prof de Caestecker to provide key messages to the Board

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<td><strong>Amendment to Remit and Terms of Reference of the Public Health Committee</strong></td>
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<td>The Chair highlighted recent discussions with a number of colleagues, including the Vice Chair, Chairman, Chief Executive and Senior Leadership Team, regarding amendment to the remit of the Public Health Committee to emphasise the emerging challenges and impact of COVID-19 on health inequalities and mental health.</td>
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<td>Whilst the Committee acknowledged that these would represent key priorities for NHSGGC and the Committee moving forward, the Committee agreed that consideration of amendment to the remit and Terms of Reference of the Public Health Committee, would be considered further following the peaks of the pandemic, due to the current demands on the Public Health Team.</td>
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<tr>
<th>19.</th>
<th><strong>Date of Next Meeting</strong></th>
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<td>January 2021 – Date to be confirmed.</td>
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<td><strong>Scheduled of Dates for 2021/22</strong></td>
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<td>All meetings take place on Wednesday’s at 2pm.</td>
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<tr>
<td>20th January 2021</td>
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<td>14th April 2021</td>
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