Central Bedfordshire

great lifestyles

Director of Public Health Report 2020 / 2021

Understanding the Impacts of Covid

Central Bedfordshire July 2021

Director of Public Health
Introduction from Vicky Head

The Covid-19 pandemic has had a far reaching and significant impact on us all, but it has not affected us equally. Where we live, how we live and the jobs we do continue to shape our chance of catching Covid-19 and our ability to isolate to stop the onward spread to others if we do become infected. For those who become ill, our age, gender, ethnicity and underlying level of health all influence our chance of becoming seriously unwell or dying. These health inequalities, which have always been there, have been brought into sharper focus by Covid.

The impact of Covid-19 on our wider health and wellbeing has been profound too. Loneliness and isolation have been acute for many during lockdown. Education has been disrupted. Families have been unable to visit loved ones in care homes or in hospital. Planned medical care has been delayed for many. Many of the longer term impacts of Covid are yet to be felt, and the pandemic will likely continue to shape and influence how we live and work for years to come.

Yet, despite the challenges and loss, we have also seen tremendous compassion, community spirit and resilience. People have gone out of their way to support others, there have been acts of enormous generosity, and individuals have sacrificed personal freedoms to protect each other. Public services, the NHS and businesses have moved fast to adapt to the new context, bringing changes that – in many cases – have made residents' lives easier. Society has mobilised to deliver vaccinations at unprecedented scale and speed, providing us with a route out of restrictions.

As we start to come out of lockdown, it is important that we work together to maintain and build on connections with and between communities, which will be vital for future health and wellbeing. Engaging with under-served communities and linking people and services back together will be a key area of focus in the coming year.

My Annual Report this year focuses on the direct and indirect impacts of Covid and takes the opportunity to reflect on the experiences of our communities over the last year. To help tell the story, we have included case studies from Public Health and other community organisations.

The report aims to:

- describe the impact of COVID on population health and communities and identify key areas of inequalities;
- to recognise and celebrate community action during the pandemic, and the scope to grow and sustain new ways of working;
- set the foundations of a 'building back fairer' approach to underpin future work.

Central Bedfordshire Covid-19 Snapshot

Key Covid-19 statistics for Central Bedfordshire between January 2020 to May 2021

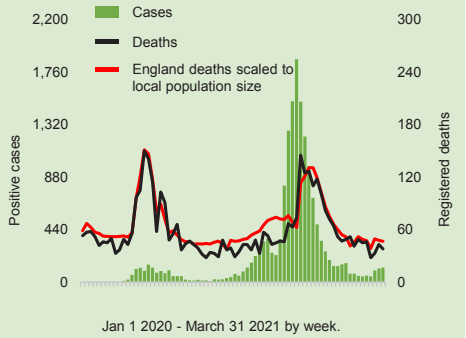
Local COVID-19 Summary

January 1 2020 - May 31 2021

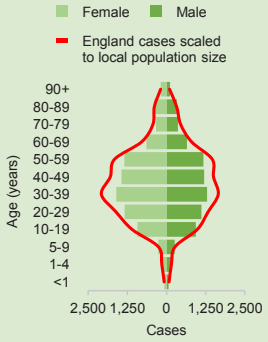
ONS Population 288,648

Total test results recorded	Total COVID-19 positive cases	Total COVID-19 hospitalisations Bedfordshire NHSFT 01/08/2020 - 31/03/2021	Total deaths registered involving COVID-19	Adults vaccinated with at least 1 dose	Adults vaccinated with 2nd dose
951,035	16,413	24,124	659	171,784	110,108

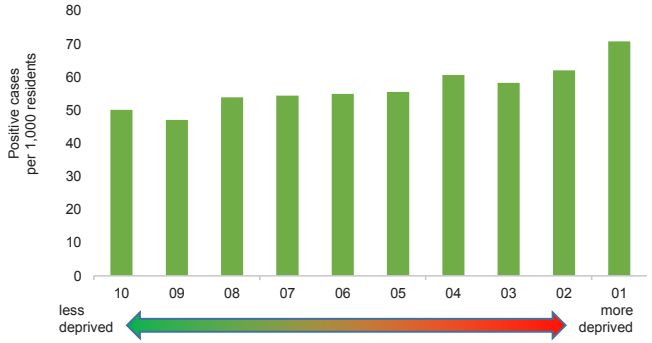
Number of COVID-19 cases and deaths by week



All cases by age and gender

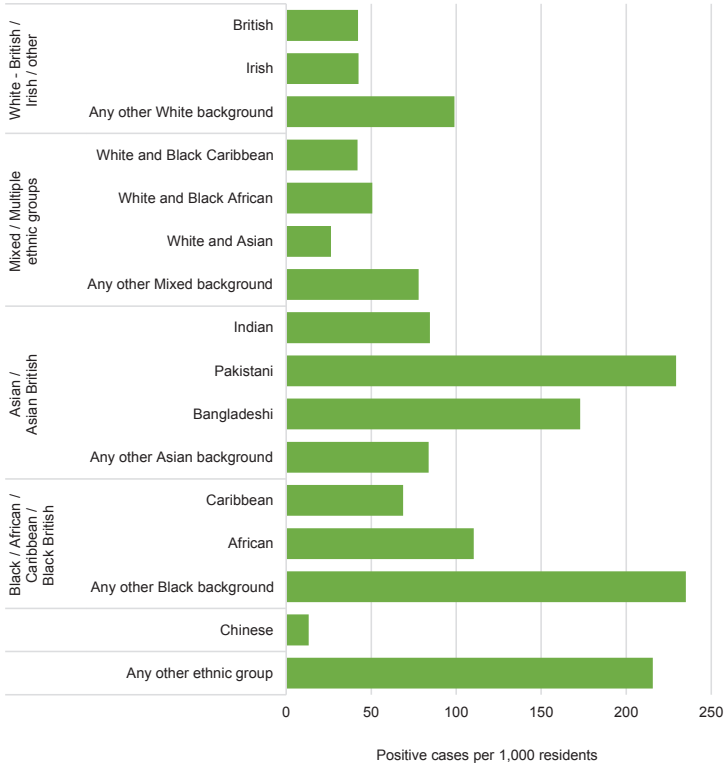


Total cases per 1,000 residents by neighbourhood deprivation

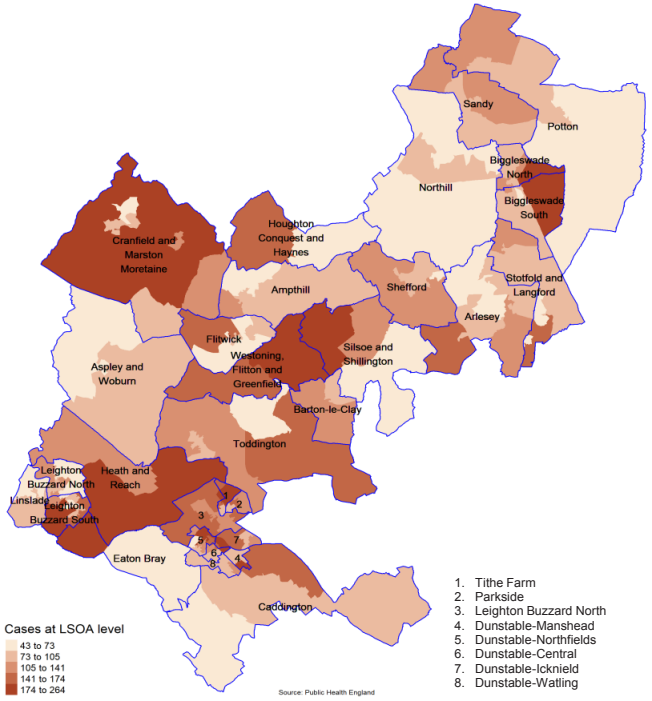


COVID has had a major impact across Central Bedfordshire with cases in all age groups and wards. However as the data shows, overall, the areas with higher levels of deprivation have had higher rates. This is likely to be due to a combination of factors including people working in occupations which put them at higher risk of infection, housing conditions which make it harder to self-isolate effectively and higher levels of health conditions which make people more vulnerable to infection. Generally women have had higher rates of infection which may be in part due to occupational risk but also they may be more likely to test.

Total cases per 1,000 residents by ethnic categories



Total cases by lower super output area (LSOA)

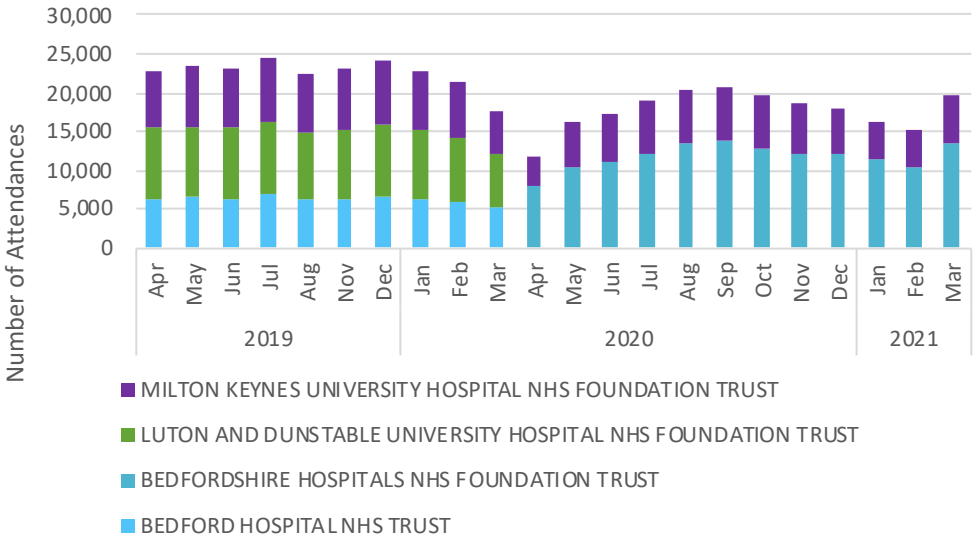


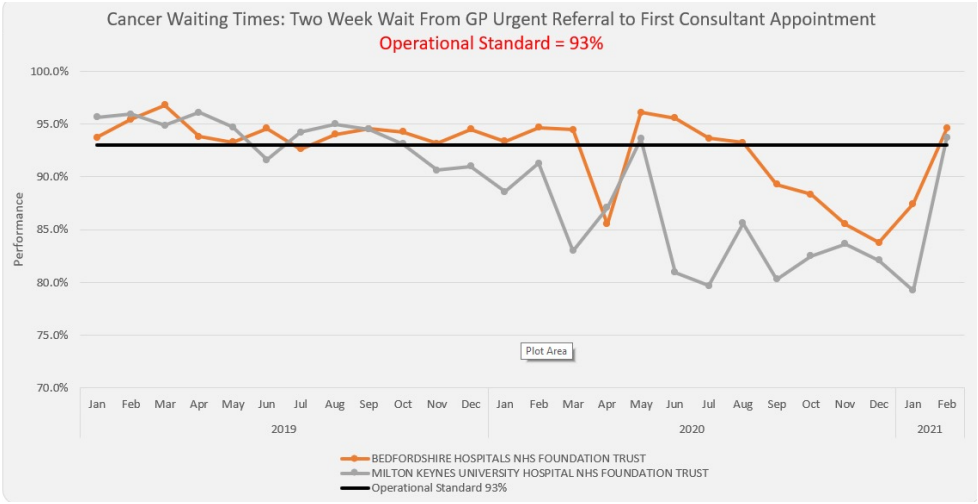
The data by ethnic categories shows considerable disparity. The 'any other ethnic group' is a broad grouping and we cannot be certain who has categorised themselves in this way

1. Direct Health Impacts of Covid-19

The Direct Health Impacts of Covid-19

A&E Attendances by Hospital Trust





Hospital Care

The impact of the pandemic on acute care cannot be underestimated and we are still working to understand the true extent of this. As the NHS rapidly redesigned service delivery at a pace and scale we could not have imagined, many appointments and treatments were cancelled or postponed. Over the last year we have seen significant falls in use of Accident and Emergency and also hospital admissions for urgent conditions including strokes and heart attacks.
As early as April 2020, the British Heart Foundation reported the number of people being seen in hospital with a suspected heart attack had halved since the beginning of March 2020.

Whilst NHS guidance clearly stated 'essential and urgent' cancer treatment must continue, we know that there has been considerable disruption to diagnosis, screening and surgery.
In addition anecdotal evidence suggests that patients may be waiting longer to contact health services meaning that patients are presenting at A & E more acutely unwell.

Primary and Community Care

Those in need of less urgent care and those living with chronic conditions have seen GP services dramatically changed and a move to remote triage assessment before gaining access to a GP. In order to free up capacity, some routine procedures including health checks for the over 75s and routine medication reviews have been able to be deferred. Understanding the impact of the changes will be a critical part of the recovery process.

GP practices have been able to mobilise online and virtual services, however we do not know how effectively patient contact has been managed and how many patients have not come forward to seek help for what may be serious conditions. More recently, as restrictions have eased, GPs are reporting a 25% increase in demand.

Whilst people have been urged not to avoid seeking help for non Covid-19 conditions, it is likely that early detection of cancers will have fallen either due to a reluctance to come forward or because of the inability to refer to hospital for tests. This reluctance to access care is likely to result in a significant cohort of patients with unmet needs who will not be included in recorded backlog figures.

Despite public and GP communications, GP referrals are significantly lower than expected and are earlier in the year were only at approximately 80% of 2020 volumes. There will be a potential increase therefore in unmet needs and we may see a potential surge in healthcare demand post-Covid. Increased demand for care in the community.

2. Health Inequalities

Topics:

- Children and Young People
- Drugs and Alcohol
- Obesity, Food and Physical Activity

Children and Young People

The cumulative effects of the school closures will be more acute inequalities in educational attainment and this could lead to worse outcomes throughout life which in turn could lead to poorer health

The case load for young people with Eating Disorders has increased by 91% in January 2021 compared to January 2020

Risk factors associated with abuse and neglect have worsened over the last year e.g income and employment insecurity, mental health

On the 20th of March 2020, schools in England closed except for vulnerable pupils and children of key workers. National exams were also cancelled for 2020 and 2021. Remote learning became the norm during the periods of national lockdowns in addition children and young people lost their usual routines including walking to schools, clubs, PE and school meals and some are spending more time doing sedentary activities including an increase in screen time, consuming more calories and eating more unhealthy food.

These changes have caused unprecedented disruption and the COVID-19 pandemic has also exposed pre-existing inequalities for children and young people including

- Increased maternal anxiety during pregnancy
- Challenges associated with isolation, including reduced access to face-to-face services and support, and reduced insight into home environments
- Food and fuel poverty
- A decrease in pupils returning to schools due to anxiety and vulnerabilities
- A higher number of families choosing to home educate children
- Increased volume and complexity of safeguarding referrals
- Additional pressure on the children and young people workforce
- People from ethnic minorities are less likely to seek perinatal mental health support and more likely to be affected
- People from ethnic minorities are more likely to suffer severe effects of COVID-19 (admissions to intensive care) and less likely to seek early medical help

During the coronavirus pandemic we have seen both increasing numbers and increasing acuity of children and young people suffering crisis. This has included an unprecedented surge in the numbers of children and young people presenting with eating disorders. Contributing factors include isolation from peers during school closures, exam cancellations, loss of motivating extra-curricular activities; an increased use of social media with young people concentrating on unrealistic ideas of body image; being required to self isolate; worries about families' economic problems; illness or death of loved ones, and fears about contracting the virus.

Following the first lockdown there was a surge in mental health referrals when children and young people went back to school. It is expected this surge will continue, adding further pressure on services across the system.

Drugs and Alcohol

Misuse of drugs and alcohol can have a number of negative impacts across society, with a strong association between socio-economic position, social exclusion and drug and/or alcohol related harm.

Living in more deprived areas, with lower resources, poorer incomes and reduced social capital mean greater risk of harm. Alcohol and Drug related deaths are highest in neighbourhoods of greatest deprivation

Those drinking at levels which are likely to cause health harms are unlikely to access services, for a number of reasons, including not recognising that their drinking behaviour is causing them ill health.

Evidence indicates that alcohol consumption increased during the Pandemic and provisional ONS figures show deaths caused by alcohol hit a new high of 7,423 deaths in 2020, an increase of 19.6% on the previous the year. This is the biggest total recorded since records began in 2001, with rates of male alcohol-specific deaths being twice those seen for women.

Over the last year we have seen different patterns of drinking for those receiving treatment. Some of the heaviest drinking clients have reduced consumption, because they would normally drink with peers, or in groups, and this was, initially, harder to do during lockdown. However, there have been increased levels of reported drinking for those whose drinking was previously less risky, but who drink in isolation or at home.

The move to virtual service delivery during the pandemic has been positive for some people, for example, those who no longer need to make long and relatively expensive journeys to see their keyworkers. Digital exclusion remains an important consideration and those with less 'access' to electronic devices and Wi-Fi could be disadvantaged and potentially unable to access services. In addition, some aspects of delivery are safer and most effective when undertaken face-to-face for example, initial assessments or medication reviews need to be given consideration.

Early in the pandemic, those taking substitute opioids saw a shift away from 'supervised consumption' and the anecdotal feedback has been overwhelmingly positive. Clients have reported feeling more trusted and part of their treatment, releasing them from the time consuming routine of daily pick-ups, which can have great benefits for increasing individuals' social capital in recovery.

Traditional supervised consumption regimes can be inflexible and risk-averse. They can represent a blanket lack of trust in clients or the taking away of ownership of their treatment which can impact negatively on recovery. Drug and Alcohol services initially saw increased engagement during lockdown which provided a window into treatment options for new clients, developing knowledge and relationships to support recovery in the long term. Numbers have subsequently fallen a high point of 152 people accessing treatment in Q1 of 2020 /21 to 96 people by Q3 2020 /21.

Obesity, Food and Physical Activity

Obesity is a complex public health concern. A BMI of between 35 -40 can increase the chance of dying from Covid-19 by 40% and a BMI greater than 40 increases risk by 90%

The number of children in Central Bedfordshire claiming free school meals increased by 19% between January 2020 and January 2021

Whilst some people have used additional spare time to walk and cycle more, generally the pandemic has made us less active as organised sport and leisure services have been heavily disrupted.

COVID-19 has put our health, in particular our diets, in the spotlight.

During periods of lockdown maintaining a healthy diet may have been difficult for some. Purchasing data shows an increase in sales of confectionary, home baking ingredients and alcohol and this, combined with takeaways being one of the nation's only freedoms during lockdown, is expected to negatively impact on obesity rates.

As well as the poor health outcomes, the economic impact of the pandemic has given rise to further food poverty and outright hunger. Those living in the more deprived parts of the Central Bedfordshire are most likely to suffer with both food poverty and be living with obesity, leading to further and more acute health inequalities.

Prior to the pandemic more and more people were accessing support for food and research by the Trussell Trust finds that the devastating effects of Covid-19 have led to thousands of new people needing to use a food bank in their network for the first time. In Central Bedfordshire Foodbanks reported between 20 – 40% increased demand.

Physical activity

Prior to the pandemic, activity levels in England were increasing. Lockdown periods led to unprecedented decreases in activity and as a result, overall the proportion of adults who were active was unchanged compared to last year. 63% of adults reach the Chief Medical Officers recommendations of 150 minutes of physical activity a week which decreases with age, is less in certain ethnic groups and those from deprived populations.

The proportion of children and young people in England reporting they were active over the summer term last year fell by 2.3%, with just over 100,000 fewer children meeting the recommended level of activity compared to the same period 12 months earlier. Despite the lifting of some of the restrictions imposed by the pandemic, sporting activities saw a large decrease in the numbers talking part. However, significant increases in walking, cycling and fitness have limited the negative impact on overall activity levels.

Case Studies – Weight Management and Active Lifestyles

Julie has always used food as a way of celebrating or commiserating as far back as her teenage years. Social occasions and holidays were a worry and finding clothes that she felt comfortable and happy to wear around others was always a struggle.

At a recent asthma check, she shared her concerns about food with her nurse and as a result was referred to the weight management service. She was really pleased to be able to join the service and get the help and support she needed to make positive changes to her health.

So far Julie has lost over a stone through counting calories and this was through lockdown and over Christmas too. Julie has said unlike previous diets, she hasn't felt miserable or struggled either. She has been able to embrace the programme and has made great strides in changing her life for the better.

Julie now goes for a daily walk and is beginning to see changes in her health and her mental health and she is able to wear clothes that before the programme no longer fitted.

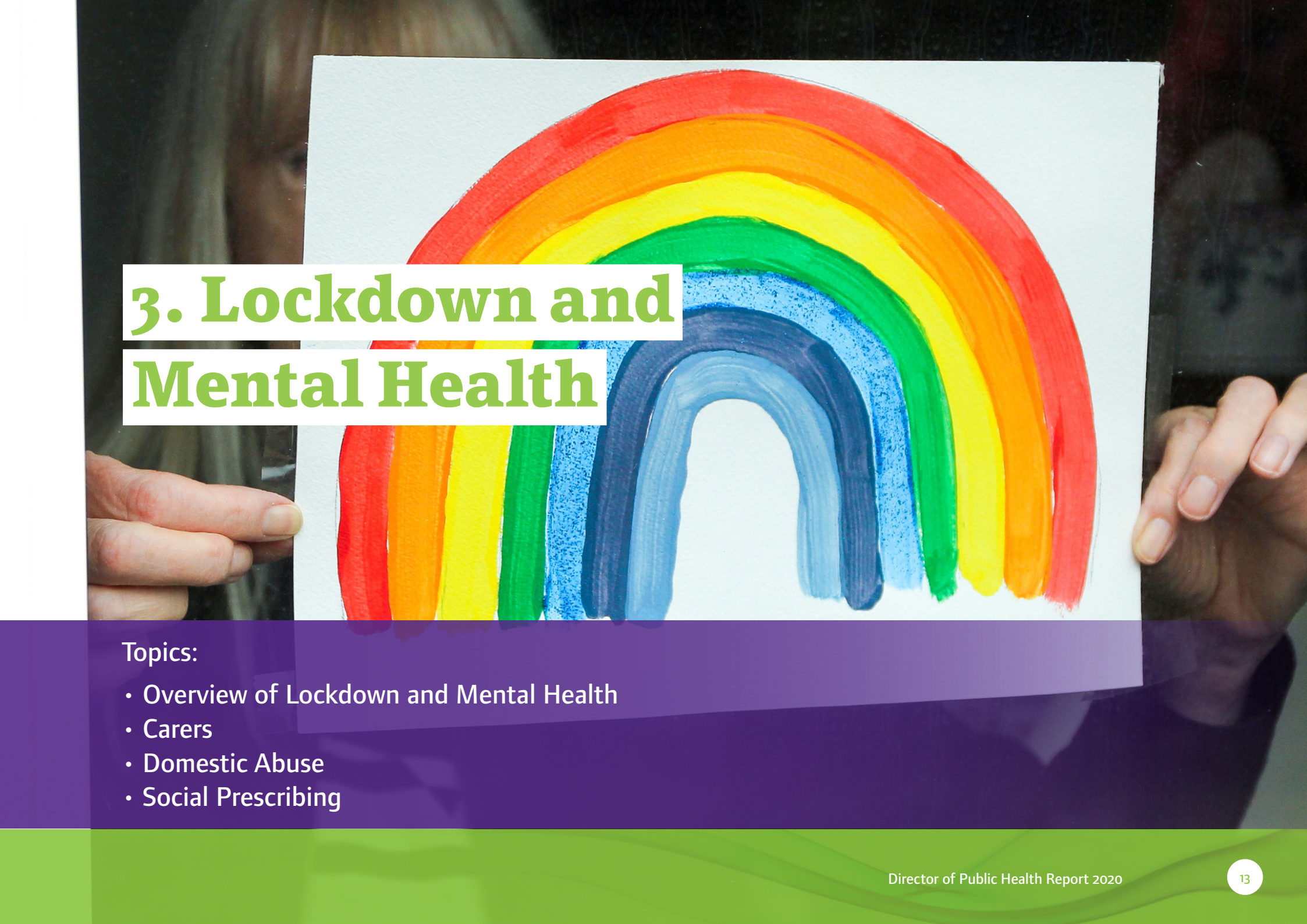
The Active Lifestyles Team provide a range of physical activity programmes and advice designed to give the whole community the opportunity to live healthier and more active lifestyles. Over the last year services have evolved and developed to support residents in an unprecedented time recognising that physical activity has played an integral part of our residents health and mental wellbeing.

Residents have been able to get active via free Facebook live sessions with classes ranging from yoga Pilates, and HIT workouts, to barre ballet style workouts. There have been activities for all ages and abilities, and they have been easily accessible at any hour of the day. An Active Lifestyles YouTube Chanel has also been developed to enable specific classes, sessions and activities to be provided for residents. Out door activities also feature and these include: bootcamps, buggy fitness, walking football and organised walks.

The Active Lifestyles Referral Programme offers support for individuals who wish to improve their current health and wellbeing. The scheme involves having regular consultations over a 12 month period and is tailored to the individuals needs. A personal pathway is designed and programmes or services that appeal to residents and fit in and around their lifestyle are identified.

GP's and professionals can refer patients into the Active Lifestyles Referral Programme by completing a simple referral form. Our Active Lifestyles Coordinators then contact the referral, to start their journey.

The Falls, Strength & Balance Programme is targeted at people who have recently had a fall, or may be prone to falls. Focusing on strength and balance, this 12 week course covers a different topic each week, providing knowledge and understanding of falls prevention, whilst offering chair based exercises to develop strength and balance. The online programme can be accessed at home and has appealed to a wide range of people, all with different needs and for some gave them the opportunity to partake in exercise that they wouldn't have usually done.



3. Lockdown and Mental Health

Topics:

- Overview of Lockdown and Mental Health
- Carers
- Domestic Abuse
- Social Prescribing

Lockdown and Mental Health

The impact of the pandemic on mental health has been significant and wide ranging

Demand for mental health services is expected to rise and Mind BLMK has seen the need for their work increase by 20%

Those reporting depressive symptoms almost doubled between 2020 and 2021 and yet diagnoses of depression fell by almost a quarter

Evidence is building on the wide-ranging impact of the coronavirus pandemic on the mental health and well-being of individuals and communities.

Significant increases have been reported in relation to anxiety and depression due to a range of factors including isolation, loss of income, unexpected bereavement, the break-up of relationships and 'Long COVID' in previously healthy individuals.

Substantial rises in unemployment and heightened concerns that we will enter a prolonged period of deep economic recession all contribute to this. Due to the impact identified there is concern at a national level that rates of suicide and suicidal behaviour may rise, although local data has yet to confirm this position. In addition, the distribution of infections and deaths during the COVID-19 pandemic, the lockdown and associated measures, and the longer-term socioeconomic impact are likely to intensify the inequalities that contribute towards the increased prevalence and unequal distribution of mental ill-health.

Covid-19 is expected to lead to a significant increase in demand for mental health services, with evidence of services already seeing increased referral rates. For public health this will involve steering and supporting work around mental health inequalities, the community transformation programme, Crisis Care, Prevention Concordat, and suicide prevention programme.

There are, however, positive developments that have come out of the lock-down measures, many new developments, volunteering opportunities, community resources and innovative programmes to engage with and support local people.

There has been bolstering of local services, particularly during the COVID 19 period, such as increased psychological support for NHS and Social Care staff as well as other voluntary and community enterprise services. The changes that have occurred to how services are delivered to the public during the Covid-19 response has also resulted in new ways of working, such as remote webinars and digital consultations. This has resulted in the release of time to care and increased capacity within some aspects of service delivery, such as talking therapies. The role of the voluntary sector will continue to be vital in supporting vulnerable people in the community and non-statutory services must be supported during periods of high demand.

Unpaid Carers

Those providing care who also have dependent children (sandwich carers) are more likely to suffer mental ill health

In Central Bedfordshire, it is estimated there are over 7, 392 people aged over 65 providing unpaid care.

The care provided by unpaid carers in Central Bedfordshire is worth an estimated £570m per year

Unpaid carers have been hit particularly hard by the pandemic and lockdown. Many have reported feeling isolated and lonely and unable to access support services, putting their physical and mental health at risk. The lockdowns exacerbated this and whilst care organisations linked carers and the person they care for to practical and emotional support, not all were informed of the support available. In addition, some community based support services and day care provision temporarily closed and family and unpaid carers were frequently left to bridge this gap.

Carers have reported concerns about the impact of caring on their relationships with friends and family as a result of their responsibilities. Some carers were able to stay in touch with services or other carers by connecting remotely, some received regular phone calls and practical help, and some carers have now become paid employees via direct payments. Peer and mutual support have been vital for carers to feel less isolated but not all are aware of the support available to them or had the technology or skills to be able to access it.

Carers can find it difficult to access medical check-ups or treatment due to competing demands. The change in consultation style during the pandemic resulted in fewer patients, and therefore carers, attending practices for consultations. This may have reduced the opportunity for healthcare practitioners to identify and discuss potential concerns or problems with carers who were struggling. However, delivering Covid19 vaccinations to eligible patients in their own homes, enabled healthcare staff to identify previously hidden carers and provide them with relevant information. It is important that GPs continue to find ways to reach out to carers registered with their Practice, to ensure they feel supported and safe in the future.

Co-production with carers and the organisations that represent them needed to address the immediate pressures and barriers faced. Carers need access to affordable and suitable care services which meet the needs of the person requiring care. Commissioners need to understand the scale of need and learn from what has helped carers and those they care for so this can inform plans

Social services and the NHS rely on unpaid carers' willingness and ability to provide care and without it they would collapse; the care provided by unpaid carers is worth an estimated £132bn per year. For Central Bedfordshire this equates to £570m per year.

Domestic Abuse

Domestic abuse is a complex issue with close links and interrelationships with mental health and substance abuse. The impacts of domestic abuse are far reaching for individuals, their families and communities and for children and young people these impacts are profound and long lasting

The Bedfordshire Domestic Abuse Partnership (BDAP) coordinates responses to domestic abuse by bringing together the key agencies to protect victims of domestic abuse, prevent domestic abuse from happening, and raise awareness in the community.

During the pandemic, BDAP meet weekly to ensure there were updates on services, referral rates, trends, initiatives, and ensure partnership collaboration. All local support services continued to run during the pandemic and the majority of programmes and 1-1's were carried out via virtual contacts. More recently the support services have started to deliver some face to face work with clients.

Over the last year, we have learnt that is that it isn't always necessary to meet with a client face to face and indeed, some have found it easier to engage with virtual services. For others, it has been more difficult as they have not been able to safely access smart phones or computers because of the perpetrator being in the home. In the future, support services will use a variety of approaches to reach people in need of help.

Early in the Pandemic, National reports of an increase in calls to Helplines was not seen locally and we did not see much of an increase across Bedfordshire Police, Local Authorities, and the voluntary sector. This has changed over recent months and the voluntary sector are now receiving a high number of referrals for support. As lockdown came to an end, organisations were preparing to address an increase in demand and looking to offer more support groups. It is difficult to predict whether there will be a surge in cases over coming months, however BDAP continue to monitor this and will respond accordingly.

The UK National Domestic Abuse Helpline reported a 25% increase in calls since lockdown measures began

Grand Union Housing Group launched a Domestic Abuse and Safeguarding Team at the end of October 2020. The Housing Association has three local domestic abuse refuges, with a fourth opening in Bedfordshire in 2021. The refuges provide survivors with the skills to return to the community, empowering individuals and making them feel safe at home. A unique telecare support service, Life24, for those fleeing from domestic violence is also provided.

From the 6 months that the team have been in place, some headlines are:

- All types of abuse have been seen, and the two most commonly reported are emotional and financial abuse.
- Of the customers that are supported, 70% have children and all are women.
- There has been engagement with one perpetrator who was signposted to access support. The aim is to expand work with perpetrators to prevent the abuse cycle from continuing.
- The Refuges have seen an increase of enquiries throughout the pandemic, with an average of 7 calls a week. Incidents of abuse got worse during this time and levels of risk heightened for the survivor. Phone calls nationally increased to the police to report domestic abuse with a rise in the number of calls coming from men.

Safe Space:

Grand Union is the first housing provider in the UK to launch an online Safe Space to help tackle domestic abuse. The online initiative, which went live in March 2021, aims to help those experiencing domestic abuse – a problem which has only increased due to the lockdowns over the past year.

Through an untraceable online Safe Space via the Grand Union website customers and the wider public can access information on helplines and specialist support services. Online Safe Spaces aim to increase the opportunities for victims of domestic abuse to safely access support while carrying out daily online tasks.

In this latest scheme, Grand Union are partnering with Hestia for the ground-breaking Safe Space support service. Once COVID restrictions are eased, they will explore the possibility of offering a space within our office as a physical safe space where victims of abuse can access support information and a telephone to make a call.

More information on Safe Spaces can be found at https://uksaysnomore.org/safespaces/

Case Study: Social Prescribing

Sue, who is in her mid-20s, was referred to the Community Referral (Social Prescribing) Service by her GP with low mood and social anxiety, which she had experienced since she was at school. Although she had previously been prescribed medication, she was reluctant to try this route again and was keen to explore other options, but she didn't know where to start. Sue admitted that she was unhappy with her body image and had been for a number of years, and this was the reason for her mood and lack of social interaction. She said that she had been unable to really allow herself to think about her feelings before, let alone discuss them with anybody.

Although Sue enjoyed exercise, her negative body image stopped her from taking part so, with the support of the Community Wellbeing Champion, they discussed strategies that she had tried in the past and how she felt about them. She explained that she wanted to make long term changes to her diet and general wellbeing, and her goals were to lose weight and manage her anxiety without medication. Referrals were made to the Council-commissioned weight management service MoreLife and to the Bedfordshire Wellbeing Service, as she felt talking therapies might also help.

Sue reported that the thought of having to think of ways to address her issues by herself was completely overwhelming. She said that with the support of the Community Wellbeing Champion she had been able to break things down into small, achievable steps, which gave her the confidence she needed to engage with the services. When she left the Community Referral (Social Prescribing) Service, Sue was exercising at home 3 times a week and taking part in an online class, which she hoped to join on a face to face basis once lockdown ended. She also reported that exercise was positively influencing her mental health and that her anxiety had lessened.

The impacts of lockdown on mental health have been widely documented and initiatives such as social prescribing have helped to provide support to people during this time.

Social prescribing can help mitigate mental health issues through the use of behaviour coaching techniques. Community Wellbeing Champions (Social Prescribers) help people manage and prevent poor physical and mental illness by building self-efficacy and health literacy. They help people to connect to community groups and statutory services. Evidence shows that one in five GP appointments are for non-clinical reasons and the prescribing of non medical, community or social activities is becoming increasingly common.

Central Bedfordshire has an established Community Referral (Social Prescribing) service which relies on strong partnership engagement and a well resourced voluntary sector. The flexibility of the social prescribing service has been key in the response to the pandemic. Although referral numbers initially declined as fewer patients visited their GP and support services were unable to operate, referral numbers began to recover towards the end of 2020. There has been a significant increase in referrals in early 2021, particularly for mental health support. Through these referrals, people frequently report low mood as a consequence of not having face-to-face social contact, access to family and friend support networks and community activities, and as a result of having to shield or being furloughed.

Going forward, a hybrid model of face to face contact, walk and coach sessions, virtual meetings, telephone and other media platforms will be used to provide support. It has become clear that health coaching can be as effective via the telephone, and alternative models of delivery have made the service more accessible by removing barriers relating to child care, work and transport. As part of the COVID-19 mental health and wellbeing recovery action plan, NHS England and NHS Improvement is refreshing Social Prescribing Link Worker training to include COVID-19 recovery priorities, including new content on welfare and employment support, trauma related recovery, financial wellbeing, and bereavement.

In Central Bedfordshire, there were a total of 672 referrals to the Community Referral (Social Prescribing) Service from April 1 2020 and 31 March 2021. During the first lockdown, numbers decreased and have remained relatively low with a slight increase in October 2020.

4. Partnerships and Connecting Communities

Strong and committed partnership working is at the heart of improving health and wellbeing.
Well-connected, inclusive communities have never been so important. The pandemic has had a disproportionate impact, and where and how we live has influenced this impact significantly. Covid has also changed how we connect with each other and with local services. Building on the positives and good practice can help us bring people and services back together and in turn support how we tackle health inequalities in our communities.

Through Central Bedfordshire Healthwatch surveys, residents have told us the things that are important to them are:

- Learning the lessons from the COVID-19 pandemic
- Build on and acknowledge the role of volunteers and community groups
- Ensuring mental health support is accessible to seldom heard communities
- Addressing health inequalities experienced by people from minority ethnic groups, including healthy living and access to health and care services
- Clear and regular communication about services providing care and treatment
- Ensuring that people who do not have access to digital technology are not excluded from communications

Community Champions

The COVID-19 Community Champions network was established in August 2020

Over 222 local residents have become community champions

The Community Champions have an estimated reach of 26, 000 contacts

In response to the pandemic and rising numbers of infections and deaths, the Central Bedfordshire Council Engagement Board established a network of Community Champions in order to enhance the Public Health Communications campaign. The aim of the champions group is to communicate public health messages amongst family, friends and social networks across Central Bedfordshire.

The Community Champions approach was initiated in August 2020 and within in the first hour of the going live, 40 local residents had registered to be a Community Champion. By collecting key information about location and numbers of contacts along with further mapping it has been possible to understand where potential gaps are and to undertake further work to actively encourage local groups and residents to register as a Champions. By February 2021, 222 residents had been engaged along with community and faith groups and local businesses also supporting Community Champions. It is estimated the Champions now have a potential 'reach' of 26,000 contacts.

3 'introduction' sessions were held for the Champions and a further 7 monthly drop in sessions hosted by the Executive Member for Health Wellbeing Communities and Leisure have taken place. A dedicated Community Champions email account is monitored daily and enables the Champions to contact the team to report and raise issues which feed into the communications campaign and activities. Virtual drop in sessions, which attract an average attendance of 25 Champions per session , are an important platform and opportunity for the Champions to raise issues , ask questions and provide feedback on what is and isn't working and where more information is required. This feedback then helps to inform future messaging. The drop in sessions have been a collaborative effort, with regular updates by colleagues from Central Bedfordshire Council, Public Health , the Clinical Commissioning Group and GP's.

Since establishing the network in August 2020, 78 newsletter emails have been sent, the average open rate is 55% which is 25% higher than standard email alerts and the average number of shared views per email is 285.

The Community Champions have played a fundamental and crucial role in the response to the pandemic and as we move cautiously out of the third lockdown we are actively exploring opportunities for ongoing engagement approaches with the Champions.

Case Study: Catalyst Housing Wellbeing Service

Catalyst Wellbeing Team – Connecting Communities

The Counties team at Catalyst Housing work across Bedford, Central Bedfordshire and Milton Keynes.

In April 2020, Catalyst gathered a group of 20 colleagues to form a wellbeing team, to start making calls to customers to see how they were doing and if they needed any support. Since April 2020, they have called customers offering a range of support, including signposting to local external services like befriending and mutual aid groups, as well as food banks and food distribution networks.

Catalyst been able to offer access to emergency fuel and food grants, as well as providing digital devices and intensive training to digitally excluded households.

Customers have also been helped with employment and financial support through specialist teams. The long-term impact of Covid-19 is still being felt by many and Catalyst will continue to offer wellbeing, financial and employment support to all customers.

So far through the Wellbeing team over 3,000 customers have been contacted by the Counties wellbeing team and over 1,400 of these have bee offered advice or support. Over 150 customers have been provided with employment support.

67 people have received regular befriending calls and 193 households received a range of other wellbeing support.

Wellbeing Grant

Catalyst Communities through the counties team provide community grants to support grassroots organisations that exist within their communities.

Almost £100,000 was invested through grants between April – December 2020 via Catalyst Housing Charitable Trust (CHCT) grants and the Customer Support Fund.

12 organisations were supported across the region and these included organisations providing food support, advice services and caring and befriending organisations.

Activity Packs

The youth team at Catalyst have developed and distributed 100s of activity packs since lockdown began. Customers could sign up on line to receive packs delivered. Other packs with lots of information, guidance and lots of fun ideas could be downloaded from the Catalyst website.

Types of Packs distributed:

- Sports equipment
- Arts equipment
- Summer Holiday packs
- Home school equipment

Catalyst partnered with Skillsmax to offer free, independent mental health support to customers through the Covid-19 lockdown.

This partnership is designed specifically to support customers' mental health and help those who may be feeling worried, anxious or isolated due to lockdown or in general.

Through Skillsmax, Catalyst customers in any location can access free, confidential advice over the phone seven days a week, and speak with their highly trained and experienced support team.

Skillsmax is a not-for-profit social enterprise, and to help boost funds at this initial stage of our partnership, Catalyst has awarded a £2,000 grant from its 'Coronavirus Voluntary Sector Support Fund.

5. Delivering Our Future Priorities

Delivering Our Future Priorities

The pandemic has seen our communities and residents face challenges and issues with no easy answers. Through the last year we have worked in partnership to innovate and sustain health and wellbeing services. Many services have shifted to digital and virtual delivery models and this has presented opportunities as well as issues.

As we learn from the last year and look to the future, tackling the impact of the pandemic on health inequalities is an immediate and pressing priority. A resource to help us plan for our future is the Marmot, **Build Back Fairer** report, led by Professor Sir Michael Marmot. The report explores issues around inequalities in death rates, it considers how some groups have been more affected by the pandemic and the effect of measures to contain the virus on inequalities and on our mental health and physical wellbeing.

As we emerge from the pandemic, the Build Back Fairer principles will be important in our approaches to tackling social, economic and environmental inequalities that are damaging our health and wellbeing. The recommendations and principles that Marmot highlights are:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure a healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention

Priorities for Central Bedfordshire

As we start to look forward to the future in Central Bedfordshire and how we address the impacts of the pandemic on our health, the economy and tackle inequalities, we will be working with our partners and stakeholders to deliver our priorities.

Further engagement and detailed planning will follow on from this report as recovery work-streams are established. Taking into account the Marmot 'Build Back Fairer' principles and the local issues for Central Bedfordshire, we have identified the following priority areas for the next year:

1. **Supporting the recovery of emotional and mental wellbeing of our residents**
2. **Delivering a whole system approach to enable people to optimise their health and wellbeing, including tackling issues such obesity and encouraging physical activity**
3. **Taking a partnership approach to mitigate the impacts of COVID and as Anchor Institutions offering employment opportunities, ensuring growth delivers opportunities for all and joining up the health and housing agenda**
4. **Understanding and addressing digital exclusion to local services and support**
5. **Being explicit in future strategies and plans how we will reduce health inequalities**

Over the coming months we will publish further research and information as our insight and understanding grows around the impact of Covid and issues such as Long Covid and Vaccine Reticence.

These resources and data will help inform how we deploy shared resources to achieve the greatest impact for our communities. Only by working together we will re-connect with our communities, ensure that seldom heard voices are listened to and reduce entrenched inequalities.

Central Bedfordshire in contact

Central Bedfordshire

great lifestyles

Find out more

If you would like to discuss anything in this report or would like to find out more about working in partnership with public health you can get in touch with us via e mail:

customers@centralbedfordshire.gov.uk

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