



# Director of Public Health Annual Report 2021

COVID-19 - A time like no other  
Working together to support our residents and communities



## Introduction: Director of Public Health

I am delighted to welcome you to my independent Annual Public Health Report 2021 for West Sussex.

**The COVID-19 pandemic has been a time like no other**, and has no doubt been one of the greatest challenges that our country has ever faced. At the time of writing, the pandemic continues, but we are now living with the virus, have been able to regain our freedoms, and are aware of the simple things we can all do to help keep ourselves and others safe, such as keeping our vaccinations up to date, ventilation, washing our hands regularly, and to consider wearing a face covering or face mask in crowded and enclosed places.

COVID-19 infection in West Sussex has had a very significant impact on individuals, families, and local communities; especially those that have lost loved ones during this time. I would like to thank every single one of our residents, our schools, businesses, communities, staff, and partners, for the great efforts, contributions, and sacrifices they have made to help keep West Sussex safe. All of these actions have undoubtedly helped to minimise the impact of the virus on our local population by controlling the rate of COVID-19 reproduction (R), reducing the spread of infection, and saving lives, helping us to progress to the living with COVID-19 phase of the pandemic.

Though this has tested us all in many ways; it's important as well to reflect upon the significant progress that has been made during this time, drawing upon our learning, and building upon it further as we move forward through the pandemic.

A considerable strength in the pandemic response in West Sussex is the utilisation of our whole systems approach, with systems partnership at the heart of it. Working together across the County Council, health and social care, communities and beyond, this approach has enabled leaders and their organisations to further build upon existing collaborative relationships, working collectively to support and protect our local population. This includes supporting a Sussex-wide approach, aligning with public health teams in Brighton & Hove City Council and East Sussex County Council, and the Sussex Resilience Forum (SRF) on the emergency response across the whole of Sussex.

This report will focus on highlighting our whole systems response, the strength of systems partnership within it, and the opportunities to increase this further, including bringing to life examples of how it has worked in practice during this time. It closes with a look ahead to the possible impacts of COVID-19 on health outcomes and inequalities in the county and discusses how we can apply our learning, supporting our residents and communities as we move through the

pandemic and beyond. This work, together with a range of public health activity across the county, will contribute to the delivery of [Our Council Plan](#) and its four priority outcomes:

- 1. Keeping people safe from vulnerable situations*
- 2. A sustainable and prosperous economy*
- 3. Helping people and communities to fulfil their potential*
- 4. Making the best use of resources*

*Underpinned by a cross-cutting theme of tackling climate change*

We will do this in a number of ways, including continuing to respond to, and plan for, emergencies that may present a risk to the public's health. We will also work towards improving health outcomes and reducing inequalities by providing services and information to meet our population's needs.

Finally, it would not be possible to fully convey the depth and breadth of our pandemic response in West Sussex in this report, but I hope it provides some indication, and shines a light on the fantastic, collective efforts and whole-hearted support, throughout this time from staff, residents, communities, and partners. I am inspired by the progress that we have made and will be taking forward our learning throughout this time, building upon the knowledge and experience we have gained and using this to approach any future challenges for our local population.



**Alison Challenger**  
Director of Public Health,  
West Sussex County Council

## Foreword: Councillor Lanzer, Cabinet Member for Public Health and Wellbeing

I very much welcome this independent annual report and its focus on the pandemic response across West Sussex.

As Cabinet Member for Public Health and Wellbeing, Chairman of the West Sussex Health and Wellbeing Board (HWB), and Chairman of its sub-group the West Sussex COVID-19 Local Outbreak Engagement Board (LOEB), I have seen first-hand the benefits of our whole systems approach, working together across the County Council, the wider health and social care system, communities and beyond, to achieve what might have first seemed like the impossible, given the enormous scale and rapid pace required.

We have seen high levels of COVID-19 within and across our communities significantly impacting individuals, schools, businesses, and local areas, but great strides have been made, both locally here in West Sussex and across the country, enabling us to progress to the next phase of the pandemic, living with COVID-19.

Throughout this time, systems, services, and innovations, have been mobilised at great speed, such as the vaccination and testing programmes, and supporting and guiding local businesses to be COVID-secure. Our communities have come together to support each other, and we have endeavoured to protect and support the most vulnerable.

I would like to express my immense thanks and appreciation to all staff, residents, businesses and communities for their huge efforts, during what has been an unprecedented and challenging time for all. Your individual and collective actions and support, have undoubtedly contributed to helping to keep West Sussex safe – thank you.



**Councillor Bob Lanzer**

Cabinet Member for Public Health and Wellbeing  
Chairman, West Sussex Health and Wellbeing Board  
Chairman, West Sussex COVID-19 Local Outbreak  
Engagement Board

## Acknowledgments

With thanks to the following people:

Lead Author: Alison Thomson, Public Health Lead – Partnerships

*Information contributed by: Dr Kate Bailey, Jim Bartlett, Marcus Clack, Jacqueline Clay, Greg Cooper, Tamsin Cornwall, Mark Dow, Craig Franklin, Cheryl George, Shane Gindra, Jenny Hacker, Rebecca Howells, Tom Howell, Rachel Loveday, Daniel MacIntyre, Barry Newell, Kate Oakley, Dr Verity Pinkney, Bevan Rowlands, Dr Richard Tyler, Catherine Wells, Joseph Whitfield, Holly Yandall*

## Timeline and unfolding story of the pandemic

### The COVID-19 pandemic has undoubtedly affected every resident and every community of West Sussex

Across the county we have seen residents and communities supporting each other during this time. From the early days of the first national lockdown, helping to support the most vulnerable and those in need, to the present day, continuing to do the simple things to help keep ourselves and others safe.

**Changing rates of infection during the period March 2020 to April 2022 are illustrated overleaf**, showing the path of the virus, and the timeline of key public health measures implemented to minimise the impact on our local population by controlling the rate of COVID-19 reproduction (R), reducing the spread of infection, and saving lives. Many other actions were also taken by individuals, communities, businesses, and more, including social distancing, ventilation, washing hands regularly, and wearing a face covering.

The successful impact of these measures and actions combined, have collectively contributed to enabling us to progress to the 'living with COVID-19' phase of the pandemic, and regain our freedoms.

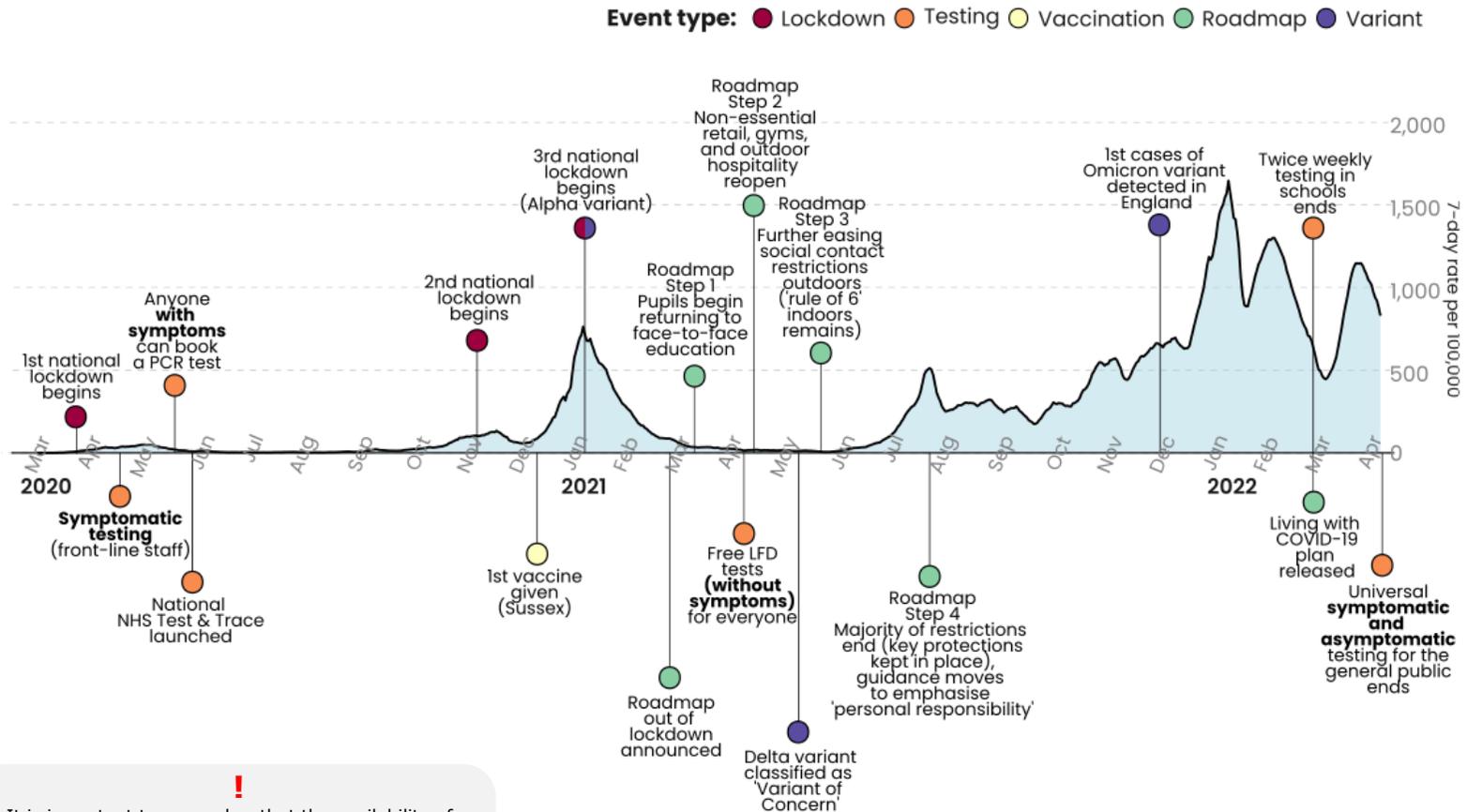
**Between 1 March 2020 and 31 March 2022, 252,100 residents in West Sussex tested positive for COVID-19 at least once - approximately 29.1% of the total population.** However, as testing has varied across the course of the pandemic, this is likely to be an underestimate.

#### What percentage of residents have tested positive?

Between 1 <sup>st</sup> March 2020 and 31 <sup>st</sup> March 2022, 252,100 West Sussex residents tested positive for COVID-19 at least once. This is approximately <b>29.1%</b> of the total population. This is likely to be an underestimate as testing has varied across the course of the pandemic...	<b>England</b>	<b>30.1%</b>
	<b>West Sussex</b>	<b>29.1%</b>
	Crawley	33.3%
	Mid Sussex	30.6%
	Worthing	29.0%
	Horsham	28.2%
	Adur	27.9%
	Arun	27.7%
	Chichester	26.7%

Source: [UK Government Coronavirus data dashboard](#)

Rolling seven day rate of positive episodes of COVID-19 per 100,000 people resident in West Sussex; March 2020 to April 2022



**!**  
It is important to remember that the availability of testing has varied across the course of the pandemic. Many people who have had the virus may not have had a test, particularly if they did not experience symptoms or if they caught the virus when testing was not widespread.

Sources: Various UK Government coronavirus policy/guidance documents and [UK Government Coronavirus data dashboard](https://www.gov.uk/coronavirus-data)

## Working together to support our residents and communities – a whole systems response

**Our West Sussex Public Health team leads the COVID-19 pandemic response across the County Council,** providing specialist public health advice to protect the health of our local population from the virus, improve health outcomes, and reduce inequalities, working at the heart of the whole systems response with local partners, organisations, and communities. This includes supporting a Sussex-wide approach, aligning with public health teams in Brighton & Hove City Council and East Sussex County Council, and the Sussex Resilience Forum (SRF) on the emergency response across the whole of Sussex.

### What is a whole systems response?

A whole systems response involves working collaboratively across the County Council, the wider health and social care system, communities and beyond. Local leaders in West Sussex and across Sussex, their organisations and teams, have built upon existing relationships, working together to respond swiftly at scale to protect and support our residents and communities. Examples include outbreak management, the County Council’s Community Hub, communications, and the vaccination and testing programmes.

### Who do we work with?

We work with a wide range of organisations at local, regional, sub-regional (Sussex), and national level. Everyone has an important role, and an extensive governance structure is in place for the pandemic response, with a multitude of organisations, partners, and agencies working together across the system.



\*NHS Sussex formerly Sussex Health and Care Partnership  
 \*\*UKHSA and OHID formerly Public Health England (PHE)

## Delivering health protection across the county

**Public health specialists work at population level.** Directors of Public Health (DsPH) have a duty to improve public health, reduce health inequalities and improve system wide leadership, across all three domains of public health; health improvement, health protection, and healthcare public health.<sup>1</sup> Much of the public health resource during the pandemic has focused on the health protection domain.

DsPH and their teams have a statutory duty to carry out surveillance and monitoring, programme quality assurance for areas such as immunisation and screening, and to undertake a planning role for their local population, responding to and planning for emergencies presenting a risk to the public's health.<sup>1,2</sup> For example, for immunisation and screening programmes, they work closely with delivery partners to tackle inequalities, including access to vaccination to increase uptake across the local population, and in planning for emergencies, they work collaboratively with key partners and are a member of the multi-agency Sussex Resilience Forum (SRF).

### What is the Sussex Resilience Forum (SRF)?

Hosted on behalf of all partners by Sussex Police, the SRF brings together councils, emergency services, utilities, and other essential public/voluntary services across Sussex to work together to prepare for, respond to, and recover from emergencies.<sup>3</sup>

Throughout the pandemic, we have drawn and built upon our key partnerships, working collectively to support and protect our population, such as, preparing for surge testing with the SRF and partner agencies. Fundamental to this, has been a Sussex-wide approach with the Sussex DsPH (Brighton & Hove, East Sussex, West Sussex) and their teams, working in partnership to manage the pandemic response across Sussex.



<sup>1</sup> Reference: Department of Health & Social Care (DHSC). [Directors of Public Health in Local Government: Roles, Responsibilities and Context. January 2020](#) (PDF) [Accessed: 28/12/22]

<sup>2</sup> Reference: Association of Directors of Public Health. *What is a Director of Public Health?* October 2016. Available: <https://www.adph.org.uk/wp-content/uploads/2016/10/Role-of-a-Director-of-Public-Health.pdf> (PDF) [Accessed: 28/12/22]

<sup>3</sup> Reference: Sussex Police. *Preparing for an Emergency – Sussex Resilience Forum.* Available: <https://www.sussex.police.uk/srf> [Accessed: 28/12/22]

## Local response to COVID-19 – national Government requirements

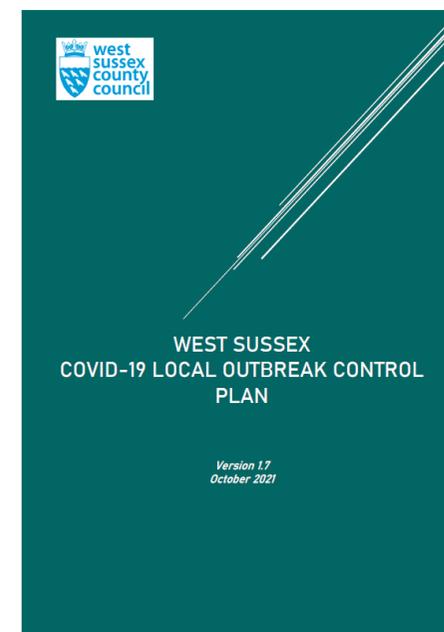
**Additional statutory duties and responsibilities for local authorities were put in place to respond to COVID-19 in local areas**, with Directors of Public Health (DsPH) in two-tier areas like West Sussex, working closely with district and borough council colleagues to ensure joined-up tracing, support for self-isolation, and enforcement.<sup>4</sup> These duties were removed in Spring 2022, though DsPH still retain their statutory health protection duties.

### West Sussex COVID-19 Local Outbreak Control Plan

In accordance with national guidelines, we developed a COVID-19 Local Outbreak Control Plan for West Sussex, which aims to improve the speed of response at a local level. The plan outlines how local, regional and national organisations and responses will work together as an interdependent system to prevent and contain the spread of the virus.<sup>5</sup> It is driven by the Director of Public Health through two key Boards, in collaboration with the County Council's Strategic Management Group:

- COVID-19 Health Protection Board
- COVID-19 Local Outbreak Engagement Board

A COVID-19 Health Protection Board Operational Group was also formed as a sub-group of the COVID-19 Health Protection Board, to support it in operationalising the plan.



<sup>4</sup> Reference: UK Health Security Agency (UKHSA). COVID-19 contain framework: a guide for local decision-makers. Updated 7 October 2021. [Guidance withdrawn 7 April 2022] Available: <https://www.gov.uk/government/publications/containing-and-managing-local-coronavirus-covid-19-outbreaks/covid-19-contain-framework-a-guide-for-local-decision-makers> [Accessed: 28/12/22]

<sup>5</sup> Reference: West Sussex County Council. West Sussex COVID-19 Local Outbreak Control Plan Version 1.7 October 2021. Available: [https://www.westsussex.gov.uk/media/14432/local\\_outbreak\\_control\\_plan.pdf](https://www.westsussex.gov.uk/media/14432/local_outbreak_control_plan.pdf) (PDF) [Accessed: 28/12/22]

### **West Sussex COVID-19 Health Protection Board**

The Board has strategic oversight of health protection regarding COVID-19 across the county, including prevention, surveillance, planning and response, to ensure the needs of the population are met.

### **West Sussex COVID-19 Local Outbreak Engagement Board**

The Board supports delivery of the Local Outbreak Control Plan, providing political ownership and public-facing engagement and communication for COVID-19 outbreak response. It is a sub-group of the West Sussex Health and Wellbeing Board.



### **West Sussex COVID-19 Health Protection Board Operational Group**

As a sub-group of the West Sussex COVID-19 Health Protection Board, the Operational Group supports them in operationalising the Local Outbreak Control Plan, including monitoring intelligence/surveillance, and supporting escalation activities, working at 'operational' level.

## Working collaboratively across the County Council and beyond

Our Public Health team is central to leading our local COVID-19 public health response, providing specialist public health advice and guidance to the County Council, the health and social care system, district and borough councils, and beyond, to protect the health of our local population from the virus, improve health outcomes, and reduce inequalities. Significant public health resource has been allocated, with a COVID-19 response team meeting each working day (online), over a two-year period, to manage the response, and regular meetings continuing to take place, as we progress through the living with COVID-19 stage of the pandemic. Our work is wide-ranging, spanning many areas:



Daily data review



Reviewing available modelling and assessing impact(s)

Working with local and regional stakeholders including the UK Health Security Agency (UKHSA), NHS and Department of Health and Social Care (DHSC)



Engaging with care sector, education, childcare and children's social care settings to embed infection prevention and control measures, providing support, advice and guidance when experiencing outbreaks




Responding to correspondence and enquiries



Implementing national policy at local level



Working with the NHS to tackle inequalities, including access to COVID-19 vaccinations to increase uptake, with district and borough councils to engage with local businesses and ensure COVID-secure events, and with health and community partners to increase access to testing



Developing communications to engage with residents and communities

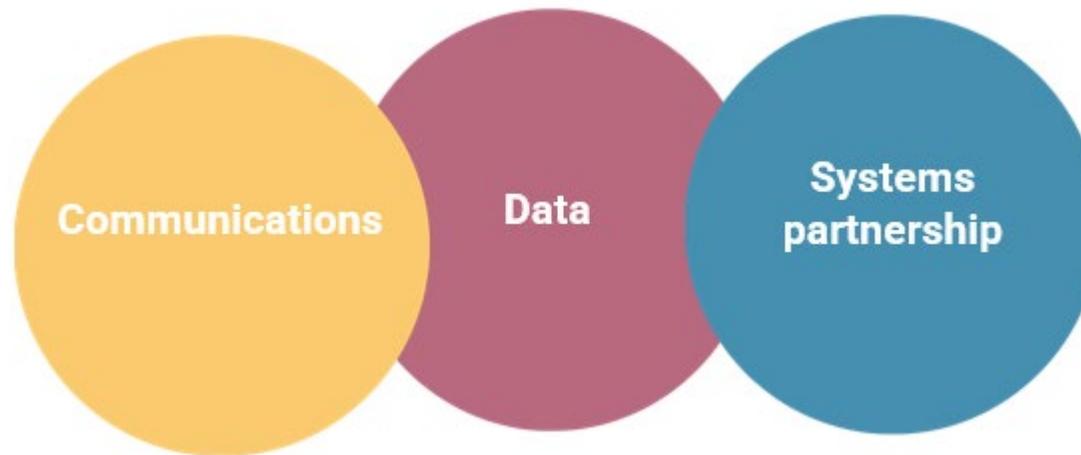


Leading on programme delivery including the COVID-19 testing programme, and Local Tracing Partnership (LTP)

## Engagement, dialogue, and partnership

**Engagement, dialogue, and partnership is at the core of our pandemic response**, with organisations, partners, and agencies working closely together to implement systems, processes, and structures, often at pace throughout the county, to support and protect our residents and communities.

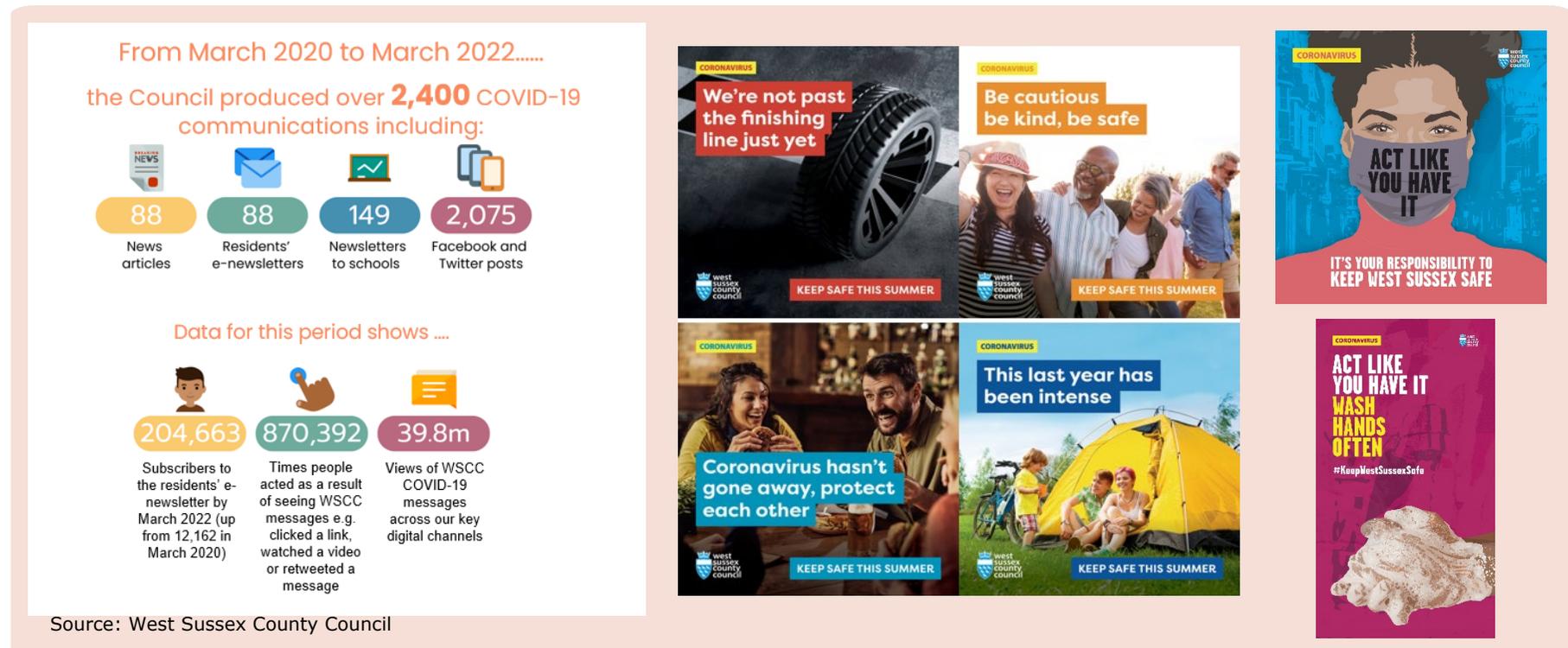
The next section focuses on three key areas integral to this approach; communications, data, and systems partnership, highlighting how they interlink, and providing some fantastic examples of what has been achieved within and across our communities.



## Communications

Throughout the pandemic, we have had a strong focus on communications, disseminating national messages at a local level through multiple communication channels, working collectively with partners and stakeholders across the local health and social care system, district and borough councils, and neighbouring local authorities.

Through utilising this approach, we have ensured continuity and alignment of messages, providing communications activity on digital platforms, as well as a range of communications to local businesses, and out of house advertising such as supermarkets, digital posters, and banners, increasing engagement and reach with our residents and communities on key communication areas, such as “hands, face, space and fresh air,” vaccination, and testing.



## The power of data

**Data is fundamental to the pandemic response;** it has been shared and analysed in a way that has never been seen before in managing pandemic response within public health, the wider emergency response, and the public domain. Real-time, high-quality data and information (health intelligence) has been vital to inform action and lead to better outcomes, by ensuring quick and appropriate decisions in response to increasing cases or local outbreaks.

### Why is data important?

Data is central to the study of disease; by gathering information about the disease, identifying links in place and time, analysing impacts and potential impacts, often referred to as 'modelling', it enables scientists, epidemiologists, public health specialists, and others, to mitigate the risks, contain the contagion (contagious disease), and limit the spread, where possible. This approach is standard practice within public health and health protection, to protect the health of the population, and has been amplified due to the scale of the pandemic.

### What data is available? How is it used?

Availability and access to data grew substantially from the early days of the pandemic, with access to records of tests and cases becoming available to local public health teams in summer 2020. This allowed for any links of cases to other settings, such as care homes and schools, to be identified and acted upon to contain outbreaks and spread of infection within these settings and across our communities.

More data on common exposure sites, variants and vaccination status soon followed, and as it ballooned, we developed ways to process it, adding to the depth and breadth of information available for monitoring and surveillance of the virus. Sharing resource and skills across Sussex local public health teams (West Sussex, East Sussex, and Brighton & Hove), and building upon existing relationships, enabled teams to share information in an efficient and effective way.



## Providing access to data for our residents and communities

We developed an [interactive website](#) which collated all publicly available data together in one place for data analysis, which was increasingly helpful to sign-post residents to when answering enquiries about data and infection levels in local areas. As the website grew, a COVID-19 case data page was created on the County Council’s website providing a weekly ‘West Sussex COVID-19 Data Summary,’ and a link to the [interactive version](#), enabling residents to explore numbers for their local area. As popularity increased, a mobile-friendly version was developed for quick access to figures.

### How has access to data helped our residents and communities?

With a wealth of data available in the public domain, residents, communities, local businesses, and more, have been kept informed of the pandemic as it has evolved. They have been able to use this information to learn about the virus, to risk assess and make informed decisions, to plan for things, such as whether to travel to another area, where to meet up with a group of family/friends, and to perhaps help understand the rationale and need for restrictions in communities when infection levels have been high.

### Why has data been so powerful, what have we learned?

The ability to share data through data-sharing and confidentiality agreements between the County Council and external partners has been fundamental in facilitating expedient responses to outbreaks, mitigating risks, and implementing additional prevention measures where needed. For example, this allowed the public health team to share outbreak data regarding local businesses, with Environmental Health teams in district and borough councils, so they could provide support, advice, and guidance, minimising any further spread of infection throughout their workforces. In some larger outbreak situations, data informed potential delivery of testing and vaccination too as counter measures to contain the virus. Data has also had a key role in helping to target the NHS COVID-19 Vaccination Programme, supporting the most vulnerable and reducing inequalities in our local population.

Showing COVID-19 data for Crawley

Latest rates at a glance

Note, it takes several days for all results to be confirmed after swabs are taken. As such, seven day rates includes the latest seven day period for which data is considered complete. For more information on the data published by the UK government see the [about the data](#) section on seven day metrics.

Area	New cases in the 7 days to 20/01/21	Rate per 100,000 population	Are cases going up or down compared to the last week?*
Adur	260	404.3	↓
Arun	756	470.3	↓
Chichester	454	374.8	↓
Crawley	700	622.7	↓
Horsham	402	279.6	↓
Mid Sussex	478	316.5	↓
Worthing	475	429.6	↓
West Sussex	3,525	408.0	↓
South East region	37,654	410.2	↓
England	236,804	420.7	↓

Source: West Sussex County Council COVID-19 data dashboard

## Data and communications – how have they worked together?

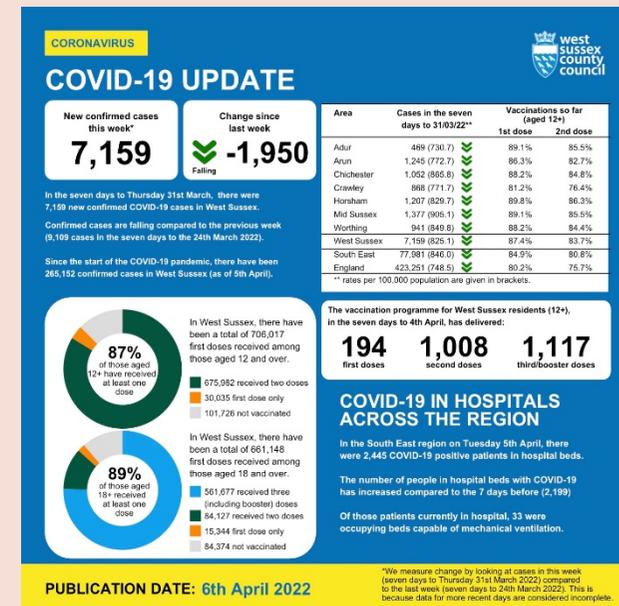
From the early days of the pandemic response, data has been at the heart of communications. For example, the Prime Minister’s daily national press conferences regularly provided the latest data to keep citizens informed of case rates, hospitalisations, deaths, and vaccination rates.

### What have we learned?

By using data to keep the public informed, it has shown transparency and helped to build trust by showing how data (evidence) informed Government policy decisions and actions, which also provided a sound basis and driver for key public health campaigns, encouraging people to stay safe and reduce the risk of catching and spreading the virus.

This has been seen across several areas, such as, adhering to national and local lockdowns, wearing face coverings, and the huge public response to the launch of the NHS COVID-19 Vaccination Programme, and subsequent ‘Get boosted now’ campaign, with more and more people coming forward to take up their offer of vaccination.

The format for communicating key headline data and messages as a ‘call to action’ has similarly been a key component in management of the pandemic response. By having senior, trusted, professionals delivering messages at a national level, for example, the Chief Medical Officer, and trusted Directors of Public Health (DsPH) disseminating them at a local level, it further enhanced engagement with our residents and communities, both taking and including them, on our journey of pandemic response.



Source: West Sussex County Council

## The strength of systems partnership

**Systems partnership is at the heart of our whole systems response to the pandemic.** Over the following pages, we shine a light on some fantastic examples of what has been achieved by the incredible, collective efforts and whole-hearted support throughout this time from staff, residents, communities, and partners. It would not be possible to fully convey the depth and breadth of our pandemic response across the county, but we hope this provides some indication and insight into what has been accomplished by working together. We can build upon the knowledge and experience we have gained and use this to approach any future challenges for our local population.

### Community Hub – help and support for those in need

With the 'Stay Home' order, furlough scheme and advice for clinically extremely vulnerable (CEV) people to 'shield' during the first national lockdown in March 2020, many residents found themselves in need of help or support. To meet this need, the County Council's Community Hub and Community Response Team were rapidly launched, with the service available seven days a week, including bank holidays, and continues to offer support to those in need.

Close work with district and borough councils and other partners enabled the hub to provide flexible and prompt support, and provide a bridge to other services, with onward referrals to Early help and social care services where required, links made with the Citizens' Advice Bureau for energy meter top-ups, and sign-posting to the [West Sussex Wellbeing](#) website for local wellbeing information and services.

In November 2020, the Community Hub expanded to include the **Local Tracing Partnership**, providing additional capacity to the national NHS COVID-19 Test and Trace service.



The Council's Community Hub and Community Response Team have been in contact with 159,000 residents throughout the pandemic



Over 5,000 food packages were provided to residents across West Sussex, including a wide range of options to meet residents' needs, such as supermarket vouchers, 'Meals on Wheels' deliveries and healthy food parcels

Source: West Sussex County Council

## Local Tracing Partnership – supporting the national NHS COVID-19 Test and Trace service

Launched in November 2020, the Local Tracing Partnership (LTP) was delivered by the County Council’s Community Hub on behalf of both West Sussex and East Sussex public health departments, providing additional capacity to the national NHS COVID-19 contact tracing system. In line with Government policy changes and the ending of contact tracing on 24 February 2022, the LTP ceased as it was no longer required to deliver this service.

### What did the Local Tracing Partnership do?

The Local Tracing Partnership (LTP) service contacted positive cases that the national NHS Test and Trace team were unable to reach within the first 24 hour period, using telephone calls, letters, texts, and emails. The service was provided seven days a week including bank holidays.

### What worked well?

Joint working across the partnership enabled rapid and effective operational support and intelligence sharing between areas, successfully identifying outbreaks and cases needing further investigation. Further value was added by district and borough councils who were able to check for additional sources of contact information where details were incomplete, for example, through Council tax information. By operating from the Community Hub, it was well positioned too, to refer those needing additional support directly into the Hub.

The LTP welcomed invaluable peer support, and sharing of good practice and intelligence from the South East network of LTPs, in addition to the specialist oversight provided by local public health teams, and support from the UK Health Security Agency (UKHSA).

From November 2020 to February 2022, the LTP managed:

-  80,000 cases
-  51,000 telephone calls
-  350,000 text messages
-  187,000 emails
-  3500 letters
-  10,000 hours of talk time with customers (in this time, you could fly around the world 226 times!)

*(Data are for West Sussex and East Sussex combined)*  
Source: West Sussex County Council

## “Everyone in” supporting our homeless population

Under the “Everyone in” directive, the Ministry of Housing, Communities & Local Government (now the Department for Levelling Up, Housing & Communities) required local authorities to provide self-isolating accommodation for their homeless population during the pandemic.

### How was “Everyone in” coordinated in West Sussex?

Partners worked together through the West Sussex COVID-19 Response Group, Homelessness & Rough Sleeping, which includes representatives from the County Council and all district and borough councils across West Sussex. The group continues to meet to provide a pan-Sussex forum to strategically drive and co-ordinate the reformation and recovery plans for services that support our homeless population.

### How many people were supported?

At the height of the pandemic, 246 single homeless people were housed in emergency accommodation in West Sussex; hotels, bed and breakfast establishments, and a holiday camp were the main accommodation provided for this use.

### What about links to other services, were they provided?

Yes. It was important to ensure services to meet this populations’ needs were available. This included local alcohol and drug support services, and smoking cessation, including a pilot e-cigarette programme. COVID-19 vaccination was also offered when available, to support this vulnerable population.

### A pilot e-cigarette programme

Working alongside the “Everyone in” directive, a pilot programme to support homeless people in West Sussex to quit smoking was launched in March 2020, offering e-cigarettes (vapes) as an alternative to traditional nicotine replacement therapy (NRT), in conjunction with behavioural support.

### Aims

With anecdotal evidence suggesting vaping is the preferred support for quitting amongst homeless people, the pilot aimed to improve quit attempts and chances of success within this cohort.

### What did we do?

West Sussex Public health and \*West Sussex Wellbeing, worked together to engage with homelessness charity providers to deliver the pilot. Clients were referred to West Sussex Wellbeing and offered personalised stop smoking support from a wellbeing advisor alongside either a vape (supplied from a local vape shop) or nicotine replacement therapy as part of an evidence based 12-week smoking cessation programme.

### Key findings

From July 2020 to June 2022:

**124** homeless clients engaged in the pilot programme across all Wellbeing hubs, with a 41% quit rate

**96%** of successful quits attributed to vape use alone, demonstrating value of offering vapes as alternative to pharmacotherapy

**Wellbeing Advisors added value** by addressing other health concerns presented by clients, supporting onward referral where appropriate

*\*West Sussex Wellbeing is a countywide programme delivered in partnership with the seven district and borough councils in West Sussex. Focused on Cardiovascular Disease prevention, it provides free support, information, and advice to anyone over 18 who lives or works in West Sussex, working alongside and as part of pathways, to support all elements of health and wellbeing.*

## Managed Quarantine Service (Quarantine Hotels)

To mitigate the risks of international travel during the pandemic, the government implemented a traffic light system rating countries red, amber or green. Arrivals from red list countries were required to quarantine in a managed quarantine hotel for 10 days. With West Sussex home to Gatwick Airport, government quarantine hotels were put in place within the county to meet this need.<sup>5</sup>

### How did the County Council support the Managed Quarantine Service in West Sussex?

#### What was its' role?

Led by the County Council's Communities Directorate, the public health team and directorates throughout the Council, worked closely together as part of a **multi-agency response** providing advice, guidance, and support across many areas.

Examples of the County Council's role are shown in the infographic opposite.



## Early years, schools, colleges, and university

There are approximately 1,000 early years and childcare settings, and a range of education settings in West Sussex, including over 325 schools, 6 colleges, and a university. With these settings at the heart of our communities, the rapid implementation of national COVID-19 government guidance locally to manage outbreaks and reduce further community transmission, was vitally important. This included infection prevention and control measures, testing, and more.

### How did we coordinate this in West Sussex?

Led by our public health team, a children and young people's COVID-19 multi-stakeholder group was galvanised swiftly, with representation from public health (including infection prevention and control, and data specialists), early years and childcare, education, further education, the university, school nursing, social care, and communications. The group aimed to prevent and manage outbreaks of the virus in children and young people's settings, working alongside and supporting educational leaders. The County Council's health and safety team were also actively involved as a key stakeholder.

### What did the group do?

- Analysed the latest data to identify settings with outbreaks and offer specialist advice and support, interpreted national COVID-19 government guidance for early years, educational and social care settings, implementing it across the county, and managed a huge amount of enquiries in relation to these settings.
- Worked closely with the local UK Health Security Agency (UKHSA) health protection team, and regional team.

### How did they do this?

- Developed a data management system to analyse and monitor COVID-19 cases associated with young people and staff at educational, early years, and social care settings.
- When an outbreak was identified, an 'Outbreak Assessment Meeting' was convened to agree and coordinate the activities involved in the investigation, management, and control of the outbreak.
- A dedicated email address was put in place for schools and other settings to submit enquiries and to request specialist infection prevention and control support over the telephone in an outbreak situation.
- Online surgeries and question and answer sessions for early years settings, primary and secondary schools were developed and delivered. Topics included infection prevention and control and preventing and managing outbreaks.
- A regular newsletter to schools was distributed from the Director of Public Health, and the Assistant Director of Education and Skills.



Events (including online surgeries and Q&A sessions) held with headteachers



School staff registered to attend events (including online surgeries and Q&A sessions)



We responded to thousands of email enquiries from over 400 different organisations

Source: West Sussex County Council

## Supporting adult care providers

During the pandemic, the focus has been on protecting the most vulnerable from the virus. With over 220 residential and nursing homes, approximately 180 domiciliary care providers, and around 16 extra care providers in West Sussex, we have worked collaboratively across the County Council, with the UK Health Security Health Security Agency (UKHSA), and the NHS, to support and advise adult care providers throughout the county on infection prevention and control measures, the introduction of testing, and vaccination of residents and staff. This has been enormously challenging for the sector, and we thank them for their great efforts, support, and tenacity throughout this time.

### How have adult care providers been supported in West Sussex?

Initial outbreak advice was provided by the UK Health Security Agency, with the County Council providing a wide range of additional support:

- Advice and guidance from the adult social care team offered to care homes in outbreak to help them overcome any challenges, escalating for further support if required.
- Public health infection prevention and control advice
- Multi-stakeholder incident management meetings held to manage outbreaks
- Provision of Personal Protective Equipment (PPE)
- Regular newsletters to care homes to keep them updated on the latest government guidance and signpost to further information and advice
- Verbal briefings regularly delivered at 'Provider Forums'
- Infection prevention and control training offered to providers

Between May 2020 and March 2022....



46 infection prevention and control  
Champion 'Train the Trainer' sessions  
took place for the adult social care  
sector



315 people registered to  
attend the sessions

Source: West Sussex County Council

## Providing Personal Protective Equipment (PPE)

The use of Personal Protective Equipment (PPE) has been vital during the pandemic, particularly within health and social care settings, to minimise the spread of the virus and save lives. Early on, both nationally and locally we were faced with challenges in securing the large stocks of PPE needed to tackle the rapidly spreading virus; by working together, we were able to secure these resources, and implement a local system for ordering, distributing, and storing them, quickly getting PPE to those in need.

### “PPE Working Group”

A multi-agency “PPE Working Group” was swiftly put in place in March 2020 to provide free Personal Protective Equipment (PPE) to those working in social care services to minimise the spread of the virus and save lives.

Managed by the West Sussex Fire and Rescue Service and working closely with partners in the Sussex Resilience Forum (SRF), the PPE Working Group purchased stocks of PPE and implemented a system for ordering, distributing, and storing these resources. By establishing processes and procedures early, the County Council was ready and prepared to build in the national stock of PPE, supporting the national distribution system delivery in West Sussex.

### What was provided?

The County Council provided free PPE to meet COVID-19 needs for non-registered Care Quality Commission (CQC) health and social care providers or individuals who had a need for PPE.

This included, but was not limited to:



## COVID-19 Testing

**National capacity to test people with COVID-19 symptoms (PCR tests) rapidly grew during the pandemic, along with testing for those without symptoms**, with the development of lateral flow devices (LFDs) that provide a result within approximately 15 minutes and don't require sending to a laboratory for processing, as is the case for polymerase chain reaction (PCR) tests. Local infrastructure, distribution and delivery programmes were speedily put in place across the county to meet our populations' needs.

### COVID-19 Testing Sites

Local infrastructure for testing sites across West Sussex was needed to carry out polymerase chain reaction (PCR) testing. We worked collaboratively with the Department of Health and Social Care (DHSC), who are responsible for commissioning and delivering local, regional and mobile testing sites, to identify suitable and accessible sites for our local population. This involved working with district and borough councils and local organisations to access sites, such as car parks, including Chichester College, University of Chichester, and Crawley College.

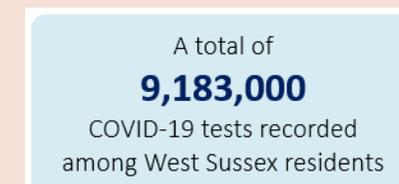
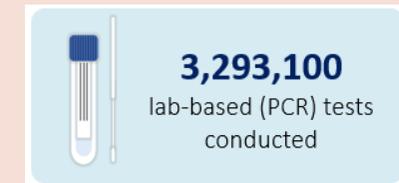
### Sussex-wide Asymptomatic Community Testing Programme

Community asymptomatic testing launched in Sussex in March 2021, with supervised asymptomatic testing initially provided via pharmacies, using lateral flow devices (LFDs), and following the introduction of the Government's universal home testing offer, this pan-Sussex approach was expanded to include 'Community Collect' where home testing kits could be collected from libraries, and a mobile team working in town centres distributed test kits to local residents.

### Targeted Community Testing Programme

This programme focused on distributing lateral flow devices (LFDs) to Disproportionately Impacted Groups (DIGs) and Under Represented Groups (URGs) in West Sussex. By working with charities and support groups who were already engaged with communities, faith groups, homeless services, Street Collect, and through libraries, **a total of 859,562 boxes of LFDs were distributed during the period April 2021 to March 2022.**

As at 31 March 2022 in West Sussex:



Source: [UK Government Coronavirus data dashboard](#)

**Photograph of Regional Testing Centre, Tangmere Airfield, Chichester, West Sussex**



Photographer Chris Mc Gonigall

*Acknowledgement: With thanks to Chris Mc Gonigall for providing the photograph*

## NHS COVID-19 Vaccination Programme

The NHS COVID-19 Vaccination Programme led by NHS Sussex (previously Sussex Health and Care Partnership) commenced in December 2020, with the roll-out of the scheme being recognised as good practice nationally at the end of week two. The programme is led by the Sussex Vaccine Programme Board, with delivery of vaccines in local hospitals, primary care sites and targeted in communities to achieve full reach and coverage for our local people.

### A partnership approach to achieve vaccine equity

To facilitate a wider effective partnership approach to ensure vaccine equity across our communities, each of the three areas in Sussex (West Sussex, East Sussex, Brighton & Hove) set up their own vaccine equity delivery working groups, held weekly, and attended by a range of local partners such as Primary Care Network (PCN) providers, voluntary, community, statutory, and private sectors.

### Aim

The aim of this work is to both make it as easy as possible for people to get their jab or to get advice, and for our vaccine providers to visit specific communities where there may be hesitancy or barriers to accessing the vaccine.

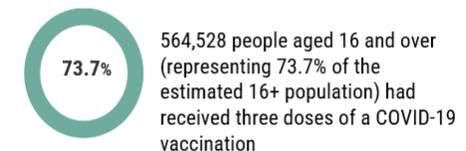
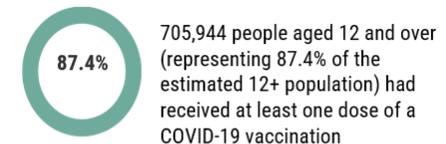
### What did we do?

Informed by up-to-date public health data on area based uptake, vaccination teams delivered a range of targeted interventions in areas where uptake had been lower, such as mobile and pop up sessions, clinics offered in and near workplaces, and outreach vaccine provision to some of our most vulnerable, such as our homeless population, and gypsy and traveller communities. Additionally, a Vaccine Equity Coordinator enabled engagement from some of those in our communities who had fears/barriers to having the vaccine which resulted in a significant increase in people coming forward for their vaccines.

### How did we do?

The West Sussex working group has had considerable success in ensuring vaccine equity across the county:

As at 28 March 2022 in West Sussex:



*Please note that at this stage in the pandemic, only those aged 12 and over were routinely eligible for a COVID-19 vaccination based on their age alone.*

Source: West Sussex County Council Public Health and Social Research Unit

## Events

As part of the pandemic response, Upper Tier Local Authorities (UTLA) like the County Council, were granted powers to close individual premises, public outdoor places and prevent specific events, in response to any “serious and imminent threat to public health”.

### How was this approached in West Sussex?

In collaboration with neighbouring local authorities and district and borough council colleagues, a local process was developed to provide a framework for the application of the powers and assurance that events were planned and run in accordance with COVID-secure guidance.

### What did it involve?

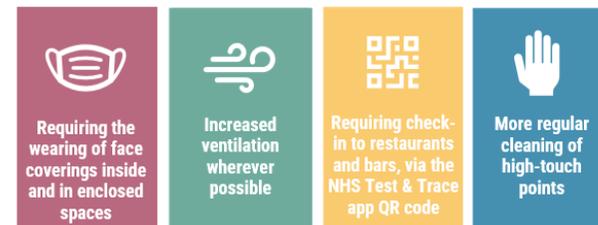
The process built upon the existing and well-established system of Safety Advisory Groups (SAGs) with each district and borough council and involved the use of a COVID-19 checklist for event organisers, which set out issues to consider when carrying out COVID-19 risk assessments, along with recommended mitigations. Our public health team also delivered a webinar to support event organisers and partner organisations involved in event planning to increase engagement and adherence in this sector.

Following the relaxing of COVID-19 restrictions in July 2021, to prevent the transmission of the virus at events during autumn and winter 2021/22, we worked with the Sussex Resilience Forum (SRF) Events Sub-group to develop pan-Sussex guidance for event organisers, providing advice and recommendations to support and enhance the measures recommended by the government.

### Case Study – Goodwood Festival of Speed

The annual Goodwood Festival of Speed was run as a pilot event during the third phase of the government’s Events Research Programme in July 2021. To ensure the COVID-security of the event, we worked collaboratively with the Goodwood Estate and partners including Chichester District Council Environmental Health team, the UK Health Security Agency (formerly Public Health England), and the Department for Digital, Culture, Media & Sport (DCMS).

Higher risk areas were identified for the site and additional COVID-secure measures were implemented, including:



Following the successful pilot, Goodwood continued to implement many of these good practice measures in the planning and delivery of their subsequent large events, including Glorious Goodwood and the Goodwood Revival.

## A time for reflection, learning, and looking to the future

**COVID-19 has been a time like no other;** it has been unprecedented, challenging, and undoubtedly affected every resident and every community of West Sussex. As we move forward, we will learn more about the impacts of the pandemic, our population's changing needs, and how they may be supported. Whilst we have focused on achievements and strengths within this report, we recognise too the immense sacrifices that have been made by our residents and communities and the impact on us all. This is not forgotten, and we thank each and every one of you for your great efforts, contributions and support throughout this time.

### What have we learnt?

- ❖ Working at the heart of our communities, the County Council has responsibility for delivering services such as education, social care, and fire, and has well-established partnerships across the wider local system. This enabled the prompt utilisation of our whole systems approach, providing support, advice, and guidance where it was needed most. The learning throughout this time can be drawn and built upon further in the future.
- ❖ We have worked closely with many areas, such as schools and social care providers, and have a greater understanding of some of their challenges. If we had to stand up a large response again, we have the knowledge and contacts available.
- ❖ Our communities have shown great resilience, with residents keen to be safe, taking individual and collective actions to protect the most vulnerable.
- ❖ Our whole systems response responded at pace throughout the county and across Sussex, with partners and agencies working together effectively on complex issues in times of uncertainty. For example, testing and contact tracing were increased rapidly on a giant scale that has never been seen before, and the local authority took on additional responsibilities, providing an enhanced NHS role supporting the wider system.
- ❖ The public's actions helped not only to minimise the spread of the virus, but also contributed to increasing evidence for managing the pandemic response, for example, improving data by regularly logging test results.
- ❖ We need to continue to ensure care homes are protected, building the resilience of residents and staff.
- ❖ Communications and data have been central to the response, increasing engagement and trust, particularly when asking residents and communities to take action.

### Where next?

- ❖ Public health has had more exposure – it has been on centre-stage – people understand what we do more, and there is an opportunity to still occupy that space increasing engagement to improve the health of our local population and reduce inequalities. Across the whole of this period, our public health services have continued to run where possible, providing support for our residents needs on a range of public health areas.
- ❖ We have increased our cross-council approach, established networks and contacts, and will draw upon them in future work. Likewise, partnership and multi-agency work has strengthened with improved links, for example with district and borough council environmental health teams.
- ❖ The most recent national data suggests that population health has been impacted by the experiences of the pandemic. There is emerging evidence which demonstrates later presentation of disease, and with more complex mental and physical illness than seen previously. It also suggests a disproportionate impact on some population groups; data analysis will identify population need and inform future commissioning practice.
- ❖ Going forward there is a greater understanding of inequalities and some community groups; we can use this to further increase engagement and reach into these communities.
- ❖ Data shows where vaccine uptake has been lower in some parts of the county; we can use this information to target these areas first, identifying any barriers – this can be applied for both the NHS Flu, and COVID-19 vaccination programmes.
- ❖ Communications – our residents and communities are eager for information. The role of the Director of Public Health (DPH) has been more visible and has become more trusted – increased communications have increased engagement; we can build on this moving forward.
- ❖ The County Council's Community Hub has been fundamental to our work as a Council helping and supporting our different communities. This well-known and well-established service could be further utilised in the future to provide information, advice, and guidance on other council services, signposting to further help and support where required.

