Contain Outbreak Management Fund Update June 2022





Funding for Outbreak Management

Test and Trace Grant £2.6m

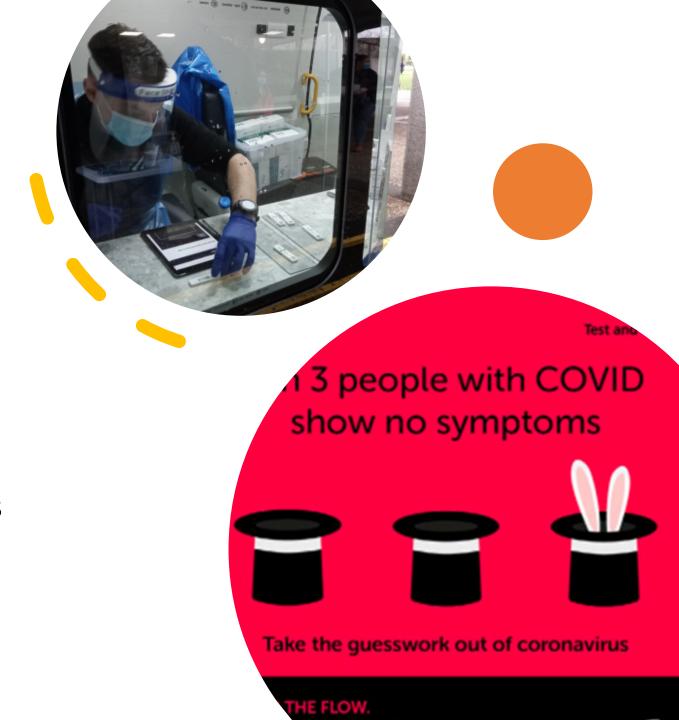
Contain Outbreak Management Fund £22m

Community Testing Grant £2.5m

Self-Isolation Support Grant £1.2m

Main Programmes

- Community Testing and Outreach
- Contact Tracing Service
- Response Hub funding
- Communications and Marketing
- Behavioural Insights
- Vaccination uptake programmes with a focus on health inequalities
- Self-isolation support grant programme



Test and Trace Team

- Fixed sites in Exeter, Tiverton and Barnstaple
- . 5 mobile vans
- August 2021 the team started supporting outreach vaccination
- Tracing team exceeded regional and national rates with local teams and a local number reaching 46% of cases within 24 hours



Compliance ~£5.2m

- Care home support for infection prevention and control (IPC)
- Wider IPC resources including web based support and community infection staffing capacity
- Agency Staff to support homes in outbreak
- PPE and uniforms
- Tactical response team to support providers
- Proud to Care support
- Grant to DCT to support compliance
- District funding and District Liaison role

Support for wider vulnerable groups ~ £1.3m

- Rough Sleepers Programme
- Exeter covid safe house
- Mental Health Training
- Freedom Community Alliance Rough Sleepers support
- St Petrock's Homeless Response Winter Adaptations
- North Devon Housing for Vulnerable People
- Rough Sleeper Support Torridge
- Health and Recovery Lead Gabriel House
- CoLab Exeter Refurbishment of safe meeting space out of hours

Support for education outbreaks ~£5.7m

- Funding direct to Schools for covid safe measures
- Protecting our College Community –
 Funding for Further Education
- Exeter University Outbreak Interventions
 Project
- Health and Safety team secondment

Targeted interventions ~£4.9m

- VCSE grant award
- Research Food Insecurity (Smarter Devon)
- Young Person Targeted Support (Youth Service)
- Outdoor Spaces to engage with Young People (Youth Service)
- Emotional Health & Wellbeing Service
- Childrens Service (PHN) Specialist Perinatal & Infant Mental Health (PIMH) SUPPORT
- Family Intervention Team / Early Help
- Wellness and Self Care School Groups
- Additional Staff Speech and Language & Occupational Therapy Services
- Reduce Health Inequalities for Afghan Refugees
- Early Help Connectors/Family Intervention Team
- Multidisciplinary approach to providing innovative and enhanced support to parents/carers as well as children
- Dental Health Care for those affected by Covid-19

Case Study: Outreach vaccination

Impact

- People with limited means / time could access vaccines without the need to pay for travel to Barnstaple
- The clinic is located opposite a café that runs projects and provides support to homeless and people with complex lives. As a result, a lot of vulnerable people were engaged with over time and got access to vaccines and other services that the team wrapped around the clinics.
- 49,279 vaccines at 463 outreach clinics
- ~ 30% vaccines given are still first and second dose



Case Study: Self isolation Support

Mobile phone provision for rough-sleepers

Provision of mobile phones has been invaluable to staff in helping to engage with and reduce health and other risk for vulnerable clients, as well as helping them to maintain social links. Clients struggle to hold onto mobile phones and being able to provide one 'on the day' is essential.

One female rough sleeping client was referred by Clocktower GP after having her phone stolen the night before. She and her partner did not have accommodation together and he had been placed into shared house.

There was subsequently a +ve case in the house, requiring her partner to isolate as a close contact. She experiences severe anxiety and panic attacks when she cannot communicate with him. Her partner's concerns regarding her health and welfare needs meant that if he couldn't contact her, he would have been highly likely to abandon his accommodation to be with her. Providing the phone and credit meant they were able to stay in contact during his isolation period, which he successfully completed.

Lone females are also particularly at risk when sleeping rough. Having a mobile phone helped her to feel safer, knowing that she could call 999 if she felt at risk from others.

Case Study: Devon and Cornwall Chinese Association



- The Chinese community were worrying about their visa/residency status.
- The team met with the Chinese leaders explained to them their rights and addressed their worries. To meet community needs, a focused 2hr slot for people to attend a vaccine centre/pop up clinic with Chinese volunteers who walked through the process with people having their jabs.
- To alleviate concerns about immigration status, the DCCA coordinated bookings for vaccination clinics. The DCCA scheduled the vaccines, worked with individuals to make travel arrangements, and relied on DCCA staff and volunteers to interpret and support people at the clinics.

Case Study: Grant and Infrastructure Funding



"Devon Communities Together is accepting applications for large grants between £10,000 and £25,000 to increase the support for people over the coming winter months in response to the covid pandemic".

"Smaller grants of up to £300 are being administered by Devon Voluntary Action (DeVA) and Living Options Devon is administering an Equality and Diversity Fund, with grants from between £5,000 - £20,000".

- Campaigns, additional capacity and resources CAB and Young Devon
- Further report to follow...

Next steps...

Every grant and spend tells a story!

- Continue to support outreach vaccination and response for those most impacted by covid or least likely to be fully vaccinated
- Conclude some programmes where funding has been extended or rolled over and is still needed. For example, the care sector, VCSE, some workplaces, inclusion health programmes and surveillance and response
- Evaluate the impacts and outcomes and ensure learning is taken forward in new ways of working
- Finalise the year end budget and returns