



North Yorkshire County Council

Outbreak Management Peer Challenge

September 2021

Bespoke Remote Peer Support

When the COVID-19 pandemic emerged and lockdown began in March 2020, the Local Government Association (LGA) suspended the physical delivery of all peer challenge work including the core offer of a corporate peer challenge.

To continue to support councils during this unprecedented period, the LGA rapidly refocused their support and adopted a new remote approach. This new approach does not replace the LGA Corporate Peer Challenge offer.

Background

Context

Yorkshire and Humber (YH) councils, alongside relevant local government and health partners, have been developing, piloting, and adapting a peer-support approach to reflect on, and learn from, fellow authorities' approaches to and experiences of prevention and outbreak management. This work has been commissioned and overseen by the YH COVID 19 Coordination Group. To date, this is the third virtual Outbreak Management Peer Challenge to have been delivered providing high level peer feedback across the full scope of a locality's approach to outbreak management.

Scope and focus

The scope of this peer challenge was to explore North Yorkshire County Council (NYCC's) approach to COVID 19 outbreak management. The peer team looked at:

- The overall plan and approach
- Governance and leadership
- Partnership working
- Resilience and capacity
- Communications and engagement
- Insight driven health response
- Living with COVID 19
- Care settings
- System-wide learning to assist in local government reform progress and future pandemic planning

The peer team

The peer challenge was delivered by a high calibre multi-disciplinary team of experienced officers and political leaders from across the health and local government sector, bringing together a complementary mix of different organisational experience and technical expertise relevant to the full spectrum of aspects that have a bearing on COVID 19 response and recovery. The peers who delivered the peer challenge at NYCC were:

- Phil Norrey, Chief Executive, Devon County Council
- Cllr Izzi Seccombe OBE, Leader, Warwickshire County Council
- Dr Louise Smith, Director of Public Health, Norfolk County Council
- Corinne Harvey, Public Health England (PHE), YH Regional Director
- Ernest Opuni, LGA, Peer Challenge Manager
- Frances Marshall, LGA, Peer Challenge Manager

The peer challenge process

It is important to stress that this was not an inspection. Peer challenges are improvement focussed and tailored to meet individual councils' needs. They are designed to complement and add value to a council's own performance and improvement. The process is not designed to provide an in-depth or technical assessment of plans and proposals. The peer team used their

experience and knowledge of local government and health to reflect on the information presented to them by people they met, things they saw and material that they read.

The peer team prepared for the peer challenge by reviewing a range of documents and information to ensure they were familiar with the Council and the challenges it is facing. The team then spent 2 half days working remotely with NYCC, during which they:

- Spoke to more than 123 people including a range of council staff together with councillors, external partners, and stakeholders.
- Gathered information and views from more than 19 meetings conducted remotely, and undertook additional research and reading.
- Collectively spent more than 126 hours to determine their findings the equivalent of one person spending nearly 4 weeks in NYCC.

This report provides a summary of the peer team's findings. It builds on the feedback presentation provided by the peer team at the end of their peer challenge on Friday 17 September. In presenting feedback to you, they have done so as fellow local government officers and members, not professional consultants or inspectors. By its nature, the peer challenge is a snapshot in time. We appreciate that some of the feedback may be about things you are already addressing and progressing.

Executive Summary

North Yorkshire County Council (NYCC) responded rapidly to the pandemic with a coherent wholeorganisation response, grounded in effective system-wide collaboration. The Council's pragmatic solution-focused approach – which prioritised outcomes over organisational boundaries – has enabled delivery at pace and scale. As the nation now adapts to living with COVID 19, it is timely for NYCC to consider the speed at which its crisis management governance approach transitions to business as usual.

The deepening and re-purposing of existing partnerships across systems to focus on COVID 19 activity has been a key success factor in NYCC's response. Individuals and organisations "cracked on and flexed" to deliver for communities across North Yorkshire. The effective joint operational response between local government tiers - irrespective of the backdrop of local government reorganisation - is testament to this collective effort. Similarly, an inclusive and agile partnership approach to communications utilised local and multi-agency voices to good effect. Moving forwards, communications could be further strengthened through stronger collective ownership across all NYCC departments.

NYCC's proactive and user-led approach to engaging with care home, care settings and care users is a further notable example of the positive impact of NYCC's relationship-based approach. The Council can now build on these positive relationships further by providing assurance around what local government reform means for health and social care to help address concerns around future changes and workforce capacity.

The significant benefits gained from new agile ways of working brought about by the pandemic are recognised across the local government and health system. The rapid development of a strong multidisciplinary outbreak team and additional investment in the Quality Improvement Team (QIT) exemplify this transformational impact. Continued investment in health protection will be important to capitalise on these advances and skills, as well as respond effectively to future challenges. There is a desire - particularly from the workforce - to sustain the flexibilities and empowerment this has brought. Developing an approach for embedding the transformative, collaborative, and

empowered ways of working across the system will be imperative to fully realise this aspiration. This learning can then inform the design of the new Council, as well as business as usual.

Fantastic individual - and collective - leadership and commitment have been a feature of Team North Yorkshire's response to the pandemic. Despite considerable fear, people walked towards this risk to provide the best for the people of North Yorkshire. It will be important to create space for staff to reflect, recharge and celebrate what has been achieved, as experiences have left many "carrying scars". These experiences are compounded by significant fatigue and uncertainty about future organisational changes and the ability to adapt to the future pandemic response. Bringing together efforts around organisational resilience will help NYCC to mitigate uncertainties, risks and further support staff welfare.

As we move into autumn, now is an opportune time to widely articulate and engage staff in a medium-term contain strategy for coming winter (and beyond) focusing on living with COVID 19. Considering how to make most effective use of intelligence to evaluate outcomes and inform this strategic planning will ensure it is both a strategic as well as an operational tool. There could be further benefits from considering how system-wide ownership of this strategy could sit within the Integrated Care System (ICS) governance framework.

NYCC is rightly proud of - and should celebrate - what it has achieved at such pace in incredibly challenging and turbulent circumstances. As NYCC and its Districts and Boroughs navigate the next stages of the pandemic, they do so whilst simultaneously managing transition to a unitary structure. This is likely to bring issues such as resilience, wellbeing, and capacity into even starker focus than for other authorities. There is nevertheless optimism that closer operational collaboration and achievements during the pandemic can provide a positive foundation to build on for the changes and challenges to come.

Recommendations

Overall approach and Living with COVID 19

- Widely articulate and engage staff in a medium term contain strategy for the coming winter (and beyond), articulating what 'living with COVID 19' looks like for NYCC This this will support contingency planning, minimise uncertainties and bolster efforts to maintain public engagement.
- 2. Consider how system-wide ownership of this strategy could sit within the Integrated Care System (ICS) governance framework

This will help engender collective and system ownership, ensure it fits into the new ICS governance framework and that health protection has a strong place within it.

Governance and leadership

3. Consider the speed at which a crisis management governance approach should transition to business as usual and the factors that influence that Agreeing clear milestones will enable a managed return to the previous democratic decision-making processes.

Communications

4. Encourage clear ownership of - and investment into - communications across all Council departments. Maintain a focus on developing and delivering clear and consistent messages of what North Yorkshire's post pandemic aspirations are. Ensure that these messages are shared by the council and its various partners at a time of change for North Yorkshire as a place. This will further strengthen the quality and balanced output across

departments which will be important in continuing public engagement in public health messages.

Insight-driven health response

5. Consider how to make most effective use of intelligence to evaluate outcomes and inform 'living with COVID 19' strategic planning

By considering high-level place-based objectives alongside operational considerations this will support 'whole place' strategic planning.

6. Continue investment in health protection, building on lessons-learned and the valuable skills developed

This will enable NYCC to adapt to future stages of the pandemic by sustaining valuable population-based health knowledge, skills and capacity.

Resilience and capacity

- 7. Create space for staff to reflect, recharge and celebrate what has been achieved This will support both personal and organisational resilience and recovery.
- 8. Bring together efforts around organisational resilience

This will mitigate uncertainties, risks and further support staff welfare.

Care settings

9. Provide assurance around what local government reform means for health and social care

By building on learning of what has worked well in increased engagement with care users, this will provide clarity and help mitigate users' concerns.

System-wide learning

10. Develop an approach for embedding the transformative, collaborative, and more empowered ways of working

This will ensure learning from across the pandemic response informs the design of the new Council as well as business as usual.

Overall plan and approach

North Yorkshire County Council (NYCC) responded rapidly to the pandemic with a coherent whole organisation response (e.g. joined-up, cross council collaboration, scenario planning, 'stood up' services at pace etc.). It's comprehensive, clear and accessible refreshed Local Outbreak Management Plan has been operationalised with a pragmatic solution-focused approach. This pragmatism is reflected in NYCC prioritising outcomes over organisational boundaries to deliver what is needed for its communities. This has enabled NYCC - alongside its partners - to delivery at pace and scale. The difference between the timey and impactful nature of local responses, in contrast to national approaches, came through strongly.

Key to this success has been system-wide collaboration between and across organisations regardless of discipline (e.g. NYCC, PHE, NHS etc.). NYCC is rightly proud of what has been achieved at such pace and in face of adversity, and there is a strong desire and commitment for these benefits to be sustained and enhanced further. To realise these aspirations, it will be important to develop an approach for embedding the transformative, collaborative, and more empowered ways of working, underpinned by actions to match this commitment.

As we move into the next phase of the pandemic, now is an opportune time to widely articulate and engage staff in a medium term contain strategy - for winter and beyond - focusing on living with COVID 19. This will support contingency planning, minimise uncertainties for staff and bolster efforts to maintain public engagement. Staff at all levels having an opportunity to shape the way forward, as well as time to recover and reflect, will add value and engender organisational buy-in. Involving partners - particularly the voluntary and community sector (VCS) - in shaping this thinking will add significant additional value. In formulating this approach, NYCC may want to consider 'what would success look like for North Yorkshire', 'how would it know it's achieved that?' and how best to use benchmarking and learning from elsewhere. Effective use of intelligence to evaluate outcomes is another aspect which could add value to this exercise. By considering high-level place-based objectives alongside operational considerations this will support 'whole place' strategic planning around living with COVID 19.

Governance and leadership

A strong approach to governance and preparedness is evident across NYCC's activity, with clear decision-making and a culture in which preparedness is valued. This positive approach is mirrored in Cabinet member and senior officer relationships, with strong trust, and a supportive approach evident. Members and officers adapted their roles and approaches to reflect what different stages of the pandemic and organisational response required. As the nation now adapts to living with COVID 19, it is timely for NYCC to consider the speed at which its crisis management governance approach transitions to business as usual to enable a return to former democratic decision-making processes.

Team North Yorkshire's response to the pandemic has been just that – a whole team response. There have been numerous fantastic examples of individual and collective leadership, both within NYCC and across organisational boundaries (e.g. individuals 'stepping up 'and flourishing, mutual support for and within teams etc.). There has been a willingness at all levels to go above and beyond borne out of a sense of collective endeavour and commitment to NYCC's communities.

The significant benefits gained from new remote, flexible and agile working brought about by the pandemic are recognised across the organisation (e.g. enhanced productivity, greater public and member engagement, carbon reduction etc). This is also true of the wider health and local government system where huge value has been felt from multi-disciplinary working across directorates, organisations and professions (e.g. wanting "to keep professional challenge from other organisations"). Staff have welcomed the new freedoms, flexibilities, and empowerment this has brought. There is a shared aspiration for these not to be lost and desire for "continued permission to blur boundaries and get on with it". To sustain, enhance and embed these benefits system-wide, action will now need to follow NYCC's stated commitment. (Overall Plan paragraph refers).

Partnership working

A key success factor in NYCC's response has been the deepening and re-purposing of existing partnerships across place and systems to focus on COVID 19 activity. "Working in partnership [has been] taken to a different level". This is evident through strong operational partnership working in responding to COVID 19 across the system (e.g. Districts/Borough, MPs, PHE, JBC, CQC, blue lights services, health partners, schools/academies, LRF, VCS etc). Partners recognise and huge value of NYCC's role as an enabler, and being solution-focused on what is needed as opposed to organisational boundaries.

Testament to this collective effort has been the effective joint operational response between local government tiers. Districts, Boroughs and the County came together effectively for a common

purpose irrespective of the backdrop of local government reorganisation. An "all in it together" approach has meant that individuals and organisations "cracked on and flexed" to deliver for communities across North Yorkshire. Partnership working at locality level has been a strength throughout the pandemic to date, with the Community Support Hubs being a clear manifestation of this. There is now an opportunity to consider together with partners, how locality partnerships and community wealth building capacity are maintained into the future, including within new local government structures.

The deepening of partnerships and closer operational collaboration provides a positive foundation for changes and challenges to come, with greater knowledge, understanding and connections across the local government and health system. To capitalise on this, it will be necessary to consider how to sustain and support these relationships through the restructuring and beyond. One example of this is the question of how to realise the system benefits of the closer working with schools. This could have significant benefits around shared agendas, such as prevention, early identification of children with mental health challenges, addressing inequalities. Reflection, capturing learning and embedding new transformative ways of working, will be key to achieving this. (Overall Plan paragraph refers).

Resilience and capacity

NYCC was able to respond to the pandemic from a financially resilient position. This enabled it to invest vital additional capacity in its public health function, recognising the strains on a relatively small team. It further sought to bolster resilience across place through a proactive approach to mutual aid and redeployment of resources. This has contributed to there being confidence across North Yorkshire's footprint that the system will respond when the need arises. There is a strong understanding of the structural and locality specific factors which have a bearing on recruitment and capacity challenges, which in turn impact on NYCC's ability to respond and recover. This is particularly the case for the care sector where proactive interventions are in train to address this.

The dedication, commitment, and self-sacrifice of the workforce across the period of the pandemic should not be underestimated. Despite considerable fear, people walked towards this risk to provide the best for the people of North Yorkshire. NYCC is proud of the welfare support it has provided during the pandemic. This is borne out in the staff survey results, and in the imminent introduction of a programme around mental health first aiding for elected members. It is important to recognise, nevertheless, the significant impact of these experiences, with staff, elected members, and communities "carrying scars". To support personal as well as organisational recovery, creating space for staff to reflect, recharge and celebrate what has been achieved will be important. This could for example be through corporately supported campaigns to celebrate successes, offering supportive conversations or dedicating time for reflection and recharge.

These experiences are compounded by significant fatigue and uncertainty about the future; both the ability to adapt to the future pandemic response, as well as to organisational changes. In NYCC's case, this involves the parallel pressures of on-going pandemic response, local government reorganisation and national health reforms. Workforce capacity, and maintaining the energy to "the step the response back up again", are risks NYCC is grappling with. Bringing together efforts around organisational resilience - such as plans to support resilience, surge capacity, and maintain skills development – will help mitigate uncertainties, risks and further support staff welfare. Utilising systems to capture processes, knowledge and learning will mitigate against 'single points of failure,' de-skilling, and help to embed new collaborative flexible approach.

Communications and engagement

NYCC's approach to communications has been agile and collaborative. Using a range of internal and external channels, as well as social media, it has been flexible, responsive, and utilised varied local voices to good effect. This can be seen in its multi-disciplinary press conferences, held in conjunction with relevant partners, allowing public messages to be shaped by all organisations. The amplification of local public and service user voices in its communications has been well received (e.g. Respect & Protect). The Council's communications with schools has been particularly valued for being clear comprehensive and in real time. As the pandemic continues to evolve, and with increasing public fatigue, it will be necessary to continually review and refresh communications, adopting new approaches as circumstances require. Clear ownership of - and investment into - communications across all Council departments (and where appropriate partners) will also be important. This will promote balanced coverage and quality across the piece.

Across the pandemic, North Yorkshire's diverse and strong VCS has stepped up to the increased demand to support communities and done so in collaboration with NYCC. This partnership working is evident through the effective and impactful 'standing up' of 23 community support hubs. The alignment of NYCC's Stronger Communities team with localities has been valuable in its outreach and community work in response to the pandemic. This direct experience of working in localities will be valuable learning for the new organisation and provide a good basis for local engagement. With VCS capacity being increasingly finite and 'in demand', it will be important to consider how to maximise this valuable resource and target to best effect in the future.

Insight-driven health response

NYCC's public health response was rapid, with a strong multidisciplinary outbreak team developed at pace through redeployment, skill development and refocusing of activity. NYCC stood up – and closely integrated with Public Health England - services and functions such as surveillance, contact tracing, self-isolation. It built strong links with Environmental Health Officers and oversaw agile deployment of pillar 2 mobile testing units. This was - and continues to be - important in the face of a complex national strategy. Continued investment in health protection and building on lessons-learned and valuable skills developed will be vital to capitalise on these advances and respond effectively to future challenges.

Dependence on national systems for interventions - such as mobile testing and contact tracing – does curtail what is possible in terms of flexibility of local response. With imminent national reforms to health structures, it is timely to consider how NYCC will manage the impact of these on local delivery and resource deployment of key outbreak management functions.

NYCC's health protection activity has been underpinned by a strong use of data and intelligence to inform targeted use of resources. As a result, there is now increased insight and understanding of the dynamics of place, from issues such as population health through to local workplaces and businesses. The potential benefits of this are vast, from shaping more targeted service delivery, through to informing system-wide strategic planning for place. Similarly, this strong use of data can be seen in the vaccination programme across North Yorkshire. A public health data-driven model - delivered with collaboration across all partners - has been instrumental in the successful deployment of the vaccination rollout and enabled targeted approaches to underserved populations.

NYCC have reflected on the support provided to individuals required to self-isolate, in terms of timeless, approach and NYCC's role within what in many localities was a district responsibility. Learning from good practice in other authorities in real time would have provided learning to inform NYCC's approach, however, it may not always be possible to do this systematically amid an emergency response.

Living with COVID 19

As the nation navigates what living with COVID 19 means in practice for people, places and health protection, developing a narrative for what it looks like and means for NYCC and its communities will be an important step in shaping the way ahead locally. This can be achieved by widely articulating and engaging staff in a medium-term contain strategy - focusing on living with COVID 19 – for the coming winter and beyond. (Overall Plan paragraph refers). Systematically considering the interconnected aspects of living with COVID 19 at a high level, as opposed to on an issue by issue basis, will strengthen this as a strategic planning and operational tool.

For local areas across the country, balancing health protection and supporting the local economy and local businesses to fully re-open is a delicate line to be navigated. From the evidence available to the Peer Team, it appears this is a balance NYCC has managed to strike. As NYCC continues this path, it can take confidence from having safely managed various situations and events throughout the road map. It can build on what has worked well in creating space post-restrictions to sustain these benefits and shape future planning. North Yorkshire's strong operational response to date puts it in a good position to respond to future spikes or outbreaks. Furthermore, there is an opportunity to capitalise on the positive partnership working with employers and workplaces to prepare to step more fully into the economic recovery space through unitarisation.

Care settings

A proactive relationship-based approach is evidenced in NYCC's proactive engagement with care homes, care settings and care users. The positive impact of this is evident in the strength of the relationships forged during the pandemic with these partners.

The dedication, energy and collaborative team working which has made this possible was evident through a 'willingness to pull out all the stops'. There has also been innovation is service delivery. For example, the additional investment in the Quality Improvement Team (QIT) has had a transformational impact on the ground, including direct vaccination intervention to support struggling care providers and to assist the NHS with vaccine roll-out in care homes. NYCC may wish to consider continuing the additional investment in the QIT and how its future deployment could sustain these advances.

NYCC's 'user-by experience' centred ethos has paid dividends, with care users describing extremely positive experiences of NYCC's support. They reported feeling more engaged, listened to and their views acted upon more than ever before. There were nevertheless concerns about workforce staffing, capacity, and the implications of future reorganisation on care services. To help address these, NYCC can build on learning of what has worked well in increased engagement with users and provide assurance around what local government reform means for health and social care. This collaborative approach is an excellent foundation for the establishment of the Integrated Care System (ICS).

System-wide learning

Responding to the pandemic has resulted in learning, innovation and collaboration across the local government and health landscape in North Yorkshire. The desire for this to continue and advances to be built upon is universal. It is now important to develop an approach for embedding the transformative, collaborative, and more empowered ways of working in the design of the new Council. (Overall Plan paragraph refers).

Collective leadership and system thinking is fundamentally built on good relationships. There is, therefore, optimism that building on achievements during pandemic can provide a positive foundation for the changes and challenges to come. One example of this is the closer working relationships at an operational level between NYCC and its Boroughs/District - forged through the pandemic. There could be further benefits for place-based partnership collaboration by considering how system-wide ownership of this medium-term contain strategy could sit within the governance framework for the ICS. This could help engender collective and system ownership and ensure health protection has a strong place within the ICS.

Local government reorganisation comes against a backdrop of fatigue and organisational change across the local government and health system. In formulating plans for this journey, there would be value in considering how NYCC can support building both confidence and capacity in the medium-term. It is also important to harness the enhanced community engagement and public support engendered through the pandemic, and to sustain and develop this further during future changes.

Final thoughts and next steps

The LGA would like to thank NYCC for undertaking the LGA Outbreak Management Bespoke Remote Peer Support.