## **Public Health Team, East Riding**



The public sector ethos runs very strongly in public health. Problem solving was done on the ground by motivated people, sacrificing themselves, and that's something that can't be unvalued or taken away.

Guidance has been a problem throughout. The guidance that comes out centrally, I like to think it's not done on purpose, but it quite often undermines what we're trying to do locally... So, all the way through it's been, trying not be too pessimistic, it's been national guidance that we have to make best case scenario of... sometimes fighting against the tide in terms of what that national mandate is in terms of what works public health-wise and what works locally as well.

One of the things we did very early on was we set up a reporting system for businesses, for schools, for social care, and then for internal social, or, council services. Some of that is web-based notification as well. What we did was we sat some of our public health team in those teams so they were actually the link. So we've got that early notification. We didn't rely on information coming from Public Health England, because sometimes that was a day, two days out of date. So, what we were doing, was we wanted to, I suppose our idea was very much around get in early, early prevention, and try and contain as soon as possible.

What are the key points in this story extract?

How does it resonate (or not) with your own experience of the COVID-19 pandemic?



