

LOCAL OUTBREAK ENGAGEMENT BOARD (PUBLIC)

MINUTES OF THE MEETING HELD ON MONDAY, 29 MARCH 2021

Councillors Present: Dominic Boeck, Graham Bridgman (Chairman), Shairoz Claridge, Lynne Doherty, Steve Masters, Meradin Peachey, Matt Pearce, Andy Sharp, Joanne Stewart (Vice-Chairman) and Martha Vickers

Also Present: Martin Dunscombe (Communications Manager) and Gordon Oliver (Corporate Policy Support)

Apologies for inability to attend the meeting: Nick Carter

PART I

110 Election of Chairman

RESOLVED that Councillor Graham Bridgman be elected Chairman of the Local Outbreak Engagement Board.

111 Apologies

There were apologies received from Nick Carter.

112 Election of Vice-Chairman

RESOLVED that Councillor Jo Stewart be elected Vice-Chairman of the Local Outbreak Engagement Board.

113 Minutes of the previous meeting dated 15 March 2021

The minutes of the meeting held on 15 March 2021 were approved as a true and correct record.

114 Declarations of interest

There were no declarations of interest.

115 Covid-19 situational report

Matt Pearce provided an update on the Covid-19 situation in West Berkshire, as follows:

Situational Awareness:

- There had been a slight increase in cases in the last fortnight, but numbers were low, so any outbreaks caused significant fluctuations, and there was no cause for alarm.
- 6,725 cases had been confirmed since the start of the pandemic, with 50 new cases in the last week.
- There was an ongoing need to maintain social distancing and other preventative measures.
- Lateral Flow (LF) kits were being distributed widely and would increase the numbers of people tested and asymptomatic cases detected.
- Positive test results had dropped from 3.7% to 1.3% in the latest period.
- There were 31.6 cases per 100,000 population in the population as a whole and just 2.5 cases per 100,000 amongst those aged 60+.
- Most West Berkshire wards had not experienced any cases in the last week.

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Hospital Activity:

- The most recent data showed 3 new admissions to Royal Berkshire Foundation Trust (RBFT) hospitals.
- There were 35 patients currently in RBFT hospitals with Covid-19, of which 6 were on ventilators.

Deaths:

- There had been 2 Covid-19 related deaths in the week to 12 March.
- All-cause mortality was 18% higher than the previous 5 year average since the start of the pandemic – equating to 230 additional deaths.

Vaccinations:

- Approximately 70,000 people had received their first dose of the vaccine.
- In all wards, at least 93% of people aged 65+ had received their first dose.

Long Covid:

- There was still no clinical definition or treatment pathway for long-Covid.
- The definition was where Covid-related symptoms persisted for more than 12 weeks and were not explained by an alternative diagnosis.
- 10% of Covid patients will suffer from long Covid (estimated at 670 people in West Berkshire).
- 60 long-Covid clinics had been set up across the country, including one within the pain management department of the Royal Berkshire Hospital.
- Patients were referred to the clinics by their GPs.
- Since November 2020, 263 referrals had been made to RBFT.
- Asthma was the most common comorbidity.
- The most common symptoms were fatigue, shortness of breath, concentration problems, pain, depression and anxiety.
- Some patients' employment status had changed due to long-Covid.

Eligibility and Access to Asymptomatic Testing:

- LF testing was available to households of nursery and school children, members of support bubbles and childcare bubbles, as well as critical key workers unable to work from home.
- Some workplaces had set up assisted testing sites for their staff.
- The recommendation was to be tested twice weekly.
- It was important for people to be tested to pick up asymptomatic cases.
- Community testing sites were available at four locations across the district.
- Community collection of home-test kits would operate from these four sites from 30 March.
- Home-test kits were also available through the regional centre at Newbury Showground.
- Pharmacy collection points would become available in the coming weeks.
- Workplaces would also be able to provide home-test kits to their staff.
- Online ordering was available - information was provided on the West Berkshire Council website about who was eligible for this.
- A mobile community collect facility was being developed for West Berkshire to serve rural villages.

Councillor Steve Masters asked about the efficacy and accuracy of LF tests. Matt Pearce stated that they were less accurate as the prevalence in the population reduced, but they were good at detecting people with high viral loads. They were cheap, effective and quick

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to complete. He stated that people who had a positive LF test were being asked to self-isolate and book a PCR test at one of the regional testing sites or book online. He confirmed that LF testing was a critical tool, but stressed that they were used to detect asymptomatic cases and if people had symptoms, they must get a PCR test.

Andy Sharp asked if it was still the case that people with a positive LF test still had to self-isolate, even if the subsequent PCR test came back negative. Matt Pearce confirmed that the PCR test result would trump the LF test result.

The Chairman noted that many of those dying from Covid-19 were dying earlier than predicted and asked when the trend would revert to normal. Matt Pearce indicated that there had been a statistically significant rise last April, but from late May onwards the trend had been broadly in line with the five year average. He noted that deaths were dependent on a number of factors, such as the flu season.

The Chairman asked about future demand for adult social care. He suggested that some people would require more care due to long-Covid, but others had died earlier than expected, so these factors would affect future demand for care. Matt Pearce indicated that it was hard to work out the effects - the impact of long-Covid was not yet understood, nor the indirect harms of people not seeking treatment earlier, and population projections would need to take account of those who had died. Meradin Peachey explained that reasons for people going into care were mostly unrelated to Covid (e.g. falls, long-term conditions, and smoking related COPD). She suggested that long-Covid was not causing these conditions - common symptoms included tiredness and difficulty walking and breathing for 6-9 months. She indicated that it was difficult to tell if this would translate into disabilities such that patients could not live at home.

Councillor Dominic Boeck asked if the vaccination had any impact on the prevalence of long-Covid. Matt Pearce did not know of any evidence, but stated that vaccinations reduced hospital admissions and transmission. However, he indicated that long-Covid did not appear to be linked to severity of Covid symptoms.

The Chairman asked about the significance of asthma as a co-morbidity for long-Covid patients. Matt Pearce did not know, but offered to investigate further. He indicated that people with severe asthma were known to be more vulnerable.

Action: Matt Pearce to investigate the links between asthma and long-Covid.

Councillor Masters asked how long-Covid patients were identified (e.g. antibody tests). Shairoz Claridge confirmed that patients did not need to have a Covid test to access post-Covid services, since many patients were not tested in the first wave.

116 Local Outbreak Control Plan

Matt Pearce provided a verbal report.

He indicated that the draft plan was with Public Health England and the Department for Health and Social Care.

He stated that the first Plan was prepared in June 2020. It identified how outbreaks would be identified and managed and the restrictive measures to be put in place in response to outbreaks.

He stated that the plan had been updated in March 2021.

He noted that surge testing would be used to detect variants of concern in the district and isolate those cases as quickly as possible. He explained that 75% of cases in West Berkshire were the Kent variant, but vaccinations may not protect people from other variants as effectively.

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He indicated that the Plan considered the transition to a 'new normal', i.e. keeping on top of local outbreaks, while allowing people more freedoms.

He also noted that the Plan included 'enhanced contact tracing', where the Council would use surveillance and data on individual cases. People with positive tests would be contacted by 'test and trace' and asked about where they had been in the previous 2-7 days to identify settings where Environmental Health visits may be required.

He stated that the vaccination programme was another key element and that it was likely that booster vaccinations would be required in future. He stressed the need for the public to recognise the importance of vaccinations, and to address the anticipated lower uptake of vaccinations amongst the younger age groups.

The Plan also covered testing, with particular support for vulnerable people and those who needed to self-isolate.

Finally, he noted that the Plan addressed issues of governance to ensure that all partners knew how to respond to outbreaks and were aware of the escalation process regionally and with neighbouring authorities.

The Chairman asked if this was the first update. Matt Pearce indicated that the Plan had been reviewed every couple of months, but this was the first time they had been formally asked to review it.

Meradin Peachey highlighted that the main difference between the first plan and the latest version was the recognition of local leadership. She noted that local partners had much better data on local cases, which brought additional responsibilities. She explained that a system had been set up to monitor quality. She stressed the importance of the plans and indicated that there may be an ongoing need for them in future.

117 Communications update

Martin Dunscombe provided a verbal update.

He reported that the recovery roadmap was a key focus, promoting what was / was not possible with the move to Step 1b and subsequent steps. He stated that the Comms Team attended weekly Government briefings so they could plan work around what was coming up. He noted that 'stay at home' had been replaced with 'stay local' and the strap line for the next phase of the campaign was 'hands, face, space, fresh air', reinforcing the message that two households / bubbles of up to six people could meet outdoors only.

He confirmed that communications had also been produced to explain the local Covid testing offer. He noted that this would continue to evolve.

He explained that the website had been updated and the Comms Team was working with local businesses to encourage their employees to get LF tests. They had worked with the Local Enterprise Partnership to get messaging out. Similarly, residents who were out and about for legitimate reasons had been encouraged to get tested.

He highlighted work undertaken with schools, responding to feedback that parents were unclear about how to access LF test kits. The Team had also developed messaging to stress the need for pupils to follow usual social distancing rules outside school.

He also stated that the Covid bulletin was still being sent out and was being opened 40,000 times each week. He confirmed that this would continue throughout the roadmap period (www.westberks.gov.uk/signup).

He noted that future campaigns would focus on transition to Step 2 on 12 April, which involved the opening up of hospitality and further relaxation of restrictions. He indicated that they would be working with local businesses to promote the work they had been

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doing to reopen safely and to promote the local retail offer. He also suggested that there would be campaigns around safe use of parks and open spaces, which would become busier as restrictions relaxed and warmer weather arrived.

He indicated that communications would continue to promote community testing and the new community collect service, with an infographic developed to help explain the options.

Also, as part of the update of the Local Outbreak Control Plan, they were reviewing comms around surge testing and responding to outbreaks.

He indicated that there would be specific work around Ramadan, particularly in relation to vaccination and safe celebrations.

Finally, he highlighted an e-booklet that was being produced to look back at how the local communities had been through the pandemic.

118 Future agenda items

The Chairman noted that due to the Easter bank holidays, the agenda for the meeting on 12 April would need to be published on 31 March. He suggested that a standard agenda would be published initially and final version published nearer the time.

Councillor Lynne Doherty suggested that 12 April was a key milestone and suggested that a local business could be invited to talk about the steps they had taken to make their businesses safe. She suggested that this might reassure residents and help them to visualise what it might look and feel like when businesses reopen.

He stated that LOEB meetings had been confirmed to the end of April. He suggested that meetings be confirmed on a rolling basis for six weeks ahead.

Councillor Dominic Boeck agreed, noting that the final relaxation of restrictions should be in a couple of months and so fortnightly meetings should be continued for the time-being.

119 Any other business

No other business was raised.

(The meeting commenced at 6.00 pm and closed at 6.49 pm)

CHAIRMAN

Date of Signature