LOCAL OUTBREAK ENGAGEMENT BOARD (PUBLIC)

MINUTES OF THE MEETING HELD ON MONDAY, 5 JULY 2021

Present: Councillor Dominic Boeck, Councillor Graham Bridgman (Chairman), Nick Carter, Councillor Lynne Doherty, Councillor Steve Masters, Meradin Peachey, Matt Pearce, Jo Reeves, Andy Sharp, Councillor Joanne Stewart (Vice-Chairman) and Councillor Martha Vickers

Also Present: Martin Dunscombe (Communications Manager), Sean Murphy (Public Protection Manager) and Sarah Rayfield (Acting Consultant in Public Health), Gordon Oliver (Principal Policy Officer)

PART I

172 Minutes

The minutes of the meeting held on 26 June 2021 were approved as a true and correct record.

173 Declarations of Interest

No declarations of interest were made.

174 Covid-19 situational report

The Board considered a presentation from Matthew Pearce (Agenda Item 4) on the Covid-19 Situational Report. Key points were as follows:

- · Case rates were rising in all areas of Berkshire
- Rates were lowest in West Berkshire and highest in Reading.
- Nationally, the rates were doubling every 9 days.
- The latest infection rate for West Berkshire was 101 cases per 100,000 population.
- There had been 133 new cases in the latest 7-day period with two community outbreaks.
- There had been 7,057 cases in West Berkshire since the start of the pandemic this was expected to increase with the move to Step 4 of the Covid Road Map.
- Weekly case rate data from 24th June showed the highest rates among people aged 20-24 (413 per 100,000) and 15-19 (233 per 100,000).
- There were now more cases among men than women this was a change from previous periods.
- Approximately 35 percent of those testing positive displayed symptoms at the time of testing.
- Areas with the highest numbers of Covid cases included Aldermaston, Purley and Tilehurst.

- Hospital admissions to the Royal Berkshire Foundation Trust Hospital remained low. There were three new Covid-19 admissions on 27th June 2021.
- The link between infections and hospitalisations had been weakened but not broken by the vaccine.
- The current ratio of cases to hospitalisation was 1 in 164 cases.
- The majority of Covid restrictions were likely to be lifted on 19th July, with the decision expected on 12th July.
- Under the proposed changes, masks would not be a legal requirement, the limits on numbers attending indoor and outdoor meetings would be lifted as would restrictions on care home visitors. Also, 1m+ social distancing requirements would end.
- The gap between vaccines would be reduced to 8 weeks for people aged under 40.
- The requirement to isolate after testing positive or if contacted by Track & Trace services was staying in place, but there may be exceptions for contacts who were fully vaccinated.
- Further information on schools bubbles was expected to be announced shortly.

The Chairman asked why the rates among people aged 60 years and over varied so greatly between areas - Slough was particularly high. Matt Pearce did not have that information, but offered to investigate.

The Chairman asked in relation to those in hospital with Covid - what were their ages and vaccination status? It was confirmed that very few people were on ventilators as treatments were improving. The age of those hospitalised was generally coming down as the vaccination programme progressed.

Councillor Steve Masters asked about the potential for problems following the removal of restrictions? It was expected that cases and hospitalisations would continue to rise. Whether there would be a change in policy in the Winter was yet to be seen.

Councillor Masters asked if there was any data about long-Covid cases. Matt Pearce explained that it was hard to collect this data as the hospitals tended to only see the most severe cases.

Councillor Masters asked about mask wearing after 19th July. It was emphasised that it would be a personal choice, and the council could support people with making decisions about how to protect themselves and others from Covid-19.

Councillor Vickers asked about the issue of those who were double vaccinated taking greater risks. It was confirmed that they were less likely to get sick or be hospitalised, but it was still possible and they could also spread the virus to others.

Councillor Vickers asked if those in hospital were more likely to have underlying health conditions. Matt Pearce indicated that there was no data available, but it may be gathered in future.

Councillor Vickers suggested the need to encourage a mentality of caring for others rather than individuals considering their own safety (e.g. wearing masks in public places). It was noted that double-layered face masks improved protection.

Meradin Peachey indicated that the Office of National Statistics had estimated 1.5 percent of people had long-Covid, but the problem with measuring long-Covid was that it depended on self-reporting. Most sufferers were over 35 and had underlying conditions.

Also, national data suggested that vaccinated people accounted for around 10-20 percent of hospitalised cases.

It was noted that the number of people in Royal Berkshire Hospital were very low and fluctuated week by week.

175 Vaccination programme update

The Board considered a presentation from Jo Reeves (Agenda Item 5) on the vaccination programme. Key points were as follows:

- Government dashboard for West Berkshire
 - 114,000 1st dose received 84.6%
 - 82,962 2nd dose received 61.6%
 - Very slightly below UK average, but more than neighbouring authorities such as Reading and Swindon.
- In terms of local data: there had been 4 percent increase in the eligible population having received one and two vaccinations.
- 47 percent of people in West Berkshire aged 18-29 had been vaccinated. This
 was up from 26% two weeks ago.
- The take up in the 18-29 age group in Wokingham was 56 percent and 39 percent in Reading.
- The previous two weeks had seen the highest vaccination rate increase amongst the Mixed White/Asian and Mixed Other groups (9 percent each) followed by Chinese (6 percent)
- Amongst at-risk groups, activity had focused on second doses. Second vaccinations of people with serious mental illness now exceeded 80 percent.
- In the most deprived wards the vaccine take up was catching up with other areas, although take-up amongst young people in Greenham was low. Targeted information was being provided to improve the vaccination rates in these areas.
- There was a national push to maximise take-up of vaccination.
- The Kennet Centre was now allowing walk-in vaccinations on Fridays and Saturdays.
- It was confirmed that second doses were being given at 8 weeks.

176 Vaccine uptake, hesitancy and inequalities

The Board considered a presentation from Sarah Rayfield (Agenda Item 6) on vaccine uptake, hesitancy and inequalities. Key points were as follows:

- This presentation outlined the work being carried out by the Berkshire West Vaccine Inequalities Programme Board, whose aim was to reduce inequalities in vaccine uptake between different communities and those at greater risk from Covid-19
- Specific objectives of this project were:
 - To Identify and reduce barriers to vaccine access
 - To identify and address vaccine misinformation and fears among local communities in Berkshire West

- To identify community leaders and work within existing systems where in place, or develop Health & Wellbeing Ambassadors where required.
- To facilitate voluntary organisations to support local communities.
- To lay the foundations and build relationships to help address wider health inequalities beyond the vaccination programme.
- There were four main work streams:
 - Data Identification of gaps, evaluation of interventions and weekly reports to local authorities
 - Communications and Engagement Identification of barriers, empowerment of key stakeholders, using a multi-channel approach. Information was gathered on people's reasons for avoiding or getting the vaccine and these views were used to inform the communications being sent out.
 - Health and Wellbeing Ambassadors Identification and training of key influencers;
 - Mode of Delivery identification of alternative options such as community pharmacies, pop-up mop-up clinics, and the Health on the Move Van
 - It was noted that the Health on the Move Van had been used to bring vaccines directly to different communities. It had a capacity for 120 vaccines per day, with appointments booked in advance.
 - Previous locations visited: Two Saints and Lambourn
 - o Future visits:
 - 12th July Central Family Hub, Thatcham
 - 13th July Newbury College
 - Date TBC Paices Hill
- Next steps included:
 - Co-hosting a webinar to address questions about the vaccine
 - Engagement within local communities
 - Promotion of the vaccine amongst younger people
 - Finalising the role of Health & Wellbeing Ambassadors
 - Planning future visits for the Health on the Move Van.

Councillor Dominic Boeck asked why Paices Hill was selected as a scheduled stop for the Health on the Move van as this was not a big population centre. It was pointed out that there was a significant traveller community in that region and the hope was that the van would help improve vaccine uptake in that group.

Councillor Martha Vickers asked if councillors were involved in the identification of community leaders and potential Health Ambassadors? It was noted that the ambassadors were drawn from specific communities where there was a lower uptake of the vaccine rather than sending outside people into those communities.

Councillor Vickers asked whether the Health on the Move van would be used for other kinds of health engagement post-Covid? It was confirmed that the initial plan was just focussed on Covid, but it was possible that lessons learnt could be applied to wider health issues in the future, since the van would be available to the Council for a while.

Councillor Lynne Doherty wondered if the van could be sent to some of the areas of low uptake on a walk-in basis to reach groups who were less likely to actively engage in the vaccination programme such as areas where young people gathered. It was explained that booked appointments were used as the van had limited capacity and a walk-in system might result in people being turned away.

177 Public Protection Partnership Update

The Board considered a presentation from Sean Murphy (Agenda Item 7) on the work of the Public Protection Partnership (PPP). Key points included:

- The PPP had been visiting premises identified as common exposure points to try and identify any connections between cases.
- Amongst event planners, there was growing confidence about the move to Step 4
 and removal of restrictions had been growing and there were more management
 plans and risk assessments being submitted. The PPP was engaging with local
 businesses and events planners regarding the change in regulations and
 precautions to be taken.
- Local contact tracing activity was increasing. The majority of recent outbreaks were in schools, with some in workplaces.
- The work of the Hub had merged with the PPP, with isolation and contact tracing being considered together.
- Engagement with businesses would continue as it was likely there would still be questions about risk management going forward.
- Staff would require updated training when the new guidance on isolation was released.

178 Communications update

The Board considered a presentation from Martin Dunscombe (Agenda Item 8) on Communications. Key points were as follows:

- Recent activity had been focussed on:
 - The Health on the Move Van
 - Changes to community testing arrangements
 - Supporting work on vaccine inequalities and second vaccinations
 - Covid-19 comms to encourage younger adults to get vaccinated
- Future activity would focus on:
 - The move to Step 4 of the Covid Road Map
 - Community testing changes and continued testing
 - Continue to support vaccine inequalities approaches
 - Long Covid and its effects on young people
 - Possibility of autumn boosters for certain groups

179 Future meetings and agenda items

The next meeting was confirmed for 19th July 2021 with a provisional date agreed for a further meeting on 2nd August.

180 Any other business

No other business was raised.

(The meeting commenced at 6.00 pm and closed at 7.05 pm)	
CHAIRMAN	
Date of Signature	