

# OUTBREAK ENGAGEMENT BOARD

MONDAY, 20TH DECEMBER, 2021

At 2.30 pm

by

VIRTUAL MEETING - ONLINE ACCESS AND ON [RBWM YOUTUBE](#)

## SUPPLEMENTARY AGENDA

### PART I

<u>ITEM</u>	<u>SUBJECT</u>	<u>PAGE NO</u>
	<u>MINUTES - DECEMBER 2021</u>	3 - 8

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## **RBWM Outbreak Engagement Board** **Monday 20<sup>th</sup> December 2021, 2.30pm, Zoom meeting**

### **Board Attendees:**

- Cllr Carroll
- Cllr Werner
- Cllr Price
- Executive Director of Adults, Health and Housing – Hilary Hall
- Communications and Engagement Officer – Louise Page
- Consultant in Public Health – Anna Richards
- School Development Manager – Clive Haines
- Executive Managing Director RBWM, Clinical Commissioning Group – Caroline Farrar
- Head of Communities – David Scott
- Environmental Health Manager – Obi Oranu

### **Additional Attendees:**

- Cllr Johnson
- Cllr Hilton
- Cllr Baldwin
- Cllr Hunt
- Cllr Bond
- Cllr C Da Costa
- Cllr Tisi
- Cllr Cannon
- Cllr Coppinger
- Cllr Stimson
- Cllr Bhangra
- Cllr Rayner
- Cllr Brar
- Cllr Shelim

### **Apologies:**

- Chief Executive – Duncan Sharkey
- Director of Public Health Berkshire East – Stuart Lines
- Head of Housing, Environmental Health and Trading Standards - Tracy Hendren
- Executive Director of Children's Services – Kevin McDaniel
- Communications and Marketing Manager – Louisa Dean

	Item	
1.	Conflicts of Interest	<ul style="list-style-type: none"> <li>• Councillor Carroll declared a personal interest as he was an independent healthcare consultant, infectious disease specialist and vaccines expert and had formerly worked for Sanofi Pasteur. He was currently working as an adviser for the Vaccines Taskforce and Antiviral and Therapeutics Taskforce. Councillor Carroll declared this in the interests of full transparency and to highlight that should for any reason during the meeting, or indeed during future meetings, the Outbreak Engagement Board discussed anything directly related to Sanofi Pastuer's business he would abstain from the discussion and leave the room as required.</li> </ul>
2.	Minutes of the last meeting	<ul style="list-style-type: none"> <li>• The minutes of the meeting were approved, subject to the following additions: <ul style="list-style-type: none"> <li>○ Confirmation to be provided to residents that where rooms being used for council meetings did not have natural ventilation, the air conditioning is fit for purpose and properly checked.</li> </ul> </li> </ul>
3.	Questions from the Public	<ul style="list-style-type: none"> <li>• As we approach a further period of covid plan B restrictions, does the group consider it has given sufficient thought and analysis to the collateral damages, both health and economic harms, caused by restrictions implemented in RBWM since the start of the pandemic? Have you measured these harms to date and projected the impacts any further restrictions and communication of them will cause? Are you fully satisfied we aren't doing more harm than good in the fight against covid in our Borough?</li> </ul> <p><i>We believe that these questions are all ones that will be addressed as part of the national public inquiry launched by the Government and in which the Royal Borough will participate. The impacts of the Covid-19 pandemic are multiple and complex, and it will not be possible to determine the differential impacts of the pandemic versus those of lockdowns quickly and easily at a local level. Significant research and analysis will be needed to answer these questions, supported by the public inquiry which the government has announced will begin in 2022.</i></p> <p><i>However, there are a few things to note:</i></p> <ul style="list-style-type: none"> <li>• <i>The Royal Borough has complied with the Government requirements in relation to restrictions throughout the pandemic.</i></li> <li>• <i>We are aware that footfall in our town centres and businesses were affected during the lockdowns of 2020 and early 2021 but this trend was reversed earlier this year. It inevitably remains a tough climate and the council's economic development team is working closely with businesses to support them.</i></li> <li>• <i>In relation to health, during the first lockdown, when the virus was new and the routes of transmission unclear, coupled with national shortages of PPE and the need to rapidly adopt remote working to protect the public and the NHS workforce, backlogs of care developed. However, services were not closed, and have not closed subsequently. Services have been prioritised at times of the most severe pressure on the NHS to protect those who most needed them including those for whom a delay to care, including people with cancer, would be most harmful.</i></li> <li>• <i>Locally, the NHS has worked to restore services and continues to work to mitigate the impacts and reduce the backlogs of care that have built up, particularly during the first lockdown. It would be inaccurate to wholly attribute these backlogs to the lockdowns rather than the impact of Covid-19 infections themselves, including</i></li> </ul>

	Item	
		<p><i>the need to treat people with a Covid-19 infection and the reduction in staffing due to infections and self-isolation. Balancing these requirements is an ongoing challenge for services, which are experiencing higher levels of staff sickness once again in the current wave of infections.</i></p> <ul style="list-style-type: none"> <li>• What percentage of RBWM residents hospitalised with Covid are unvaccinated? It is important to maintain confidence in the vaccine that residents can see its benefits.</li> </ul> <p><i>This data is not currently available, but we understand it is in line with expectations around the efficacy of the vaccines which do not provide 100% protection against infection. However, vaccinations and boosters significantly reduce the severity of impact and likelihood of hospitalisation, and this experience has been replicated locally. The vaccines have significantly weakened the link between Covid-19 infections, serious illness and deaths and remain the best way to protect yourself and your family.</i></p>
4.	Update on Vaccination Programme	<ul style="list-style-type: none"> <li>• The call to action came a week ago and the Primary Care Networks which are the main providers of the vaccination services, have responded really well. The capacity available for boosters has been increased but also for anyone that wants to come forward for the evergreen offer for first and second doses. A number of people have taken up the evergreen offer. What has really helped is that most people do not have to wait for the 15 minutes after the booster but it does depend on the individuals.</li> <li>• The majority of the sites are booked to capacity. The system has deliberately not adopted a walk in approach in order to avoid surges in activity and queuing but also other periods of not having any bookings. People have been asked not to contact their GP practice if they have not had the invitation for the booster, however most of the invitations have gone out now.</li> <li>• Work is being done with the council on targeting particular populations where not enough people have come forward for their booster vaccination and working in particular on some of the minority ethnic populations particularly in Maidenhead.</li> <li>• Depending on how many vaccinations remain to be delivered will direct which days vaccination centres are likely to open over the bank holidays.</li> <li>• 40 new volunteers have signed up and they are critical to the running of the vaccination centres.</li> <li>• Colleagues in London have put together some data to look at adults being admitted with symptomatic Covid-19 in south west London per 100,000. Looking at October to November of this year, a person with two doses plus a booster from more than a fortnight ago were 19 times less likely to be admitted to hospital versus those who were unvaccinated.</li> <li>• No further work has been undertaken locally on the unvaccinated cohorts. There may be some work that needs to be done with particular communities about the barriers to vaccination. Some of the myths around vaccinations remain deeply rooted.</li> <li>• Local services are using trained vaccinators to deliver the programme although it is not a strict requirement nationally. Staff have been redeployed and some have come out of retirement to assist.</li> </ul>

	Item	
		<ul style="list-style-type: none"> <li>A question was raised about vaccination centres closing during lunch breaks.</li> </ul> <p><b>Action – CF to speak with the vaccine vaccination service on continuing to operate during lunch breaks.</b></p>
5	Update on the impact of Covid on hospital activity	<ul style="list-style-type: none"> <li>The Covid positive occupancy is slowly rising but as hospitalisations tend to follow two or three weeks after community infections rise, it is unknown what the impact of the Omicron variant has been, or will be, on hospitalisation. Even if the rates are lower, the number of people who are infected now is growing so much, a lower percentage of a high number could have same impact on services in the hospitals.</li> <li>The number of staff self isolating in the hospitals is also rising. 123 staff had covid related sickness last Friday, which had increased by 20 from the previous day. This is a significant increase.</li> <li>The Trust has had to cancel elective surgery on a number of occasions mainly due to not having critical care capacity available for those who need it after operations.</li> <li>Ambulance handovers continue to be challenging.</li> </ul>
6.	Local Position	<ul style="list-style-type: none"> <li>732 cases per 100,000 population. This represents 1,107 cases in the last 7 day period. This is higher than the South East average of 667 cases. The England average is 558.</li> <li>155 cases per 100,000 population for the 60+ age group. This has also decreased by 47% and is lower than the South East and England average.</li> <li>There have been 947 individuals tested per 100,000 population. 11% of individuals tested have tested positive.</li> <li>Early signs suggest the Omicron variant is more transmissible than the Delta variant. It is likely that Omicron will become the dominant variant of coronavirus in the UK. However, it is still too early to know whether the variant causes less severe disease than the Delta variant. The vaccine booster is significantly adding to protection.</li> <li>Weekly case rates at 9<sup>th</sup> December show the highest rates in people aged 10-14 year olds (1,612 cases per 100,000) and 5-9 year olds (1,465 cases per 100,000) and 40-44 year olds (1,265 per 100,000); this may well change as the schools are now on holiday.</li> <li>The winter pressures are starting to impact Frimley Health Foundation Trust (FHFT) hospitals with overall numbers of patients presenting at hospital increasing. This impacts on the operational running of the hospital. This is also the case within Royal Berkshire Foundation Trust (RBFT).</li> <li>The number of Covid-19 patients in FHFT hospitals is increasing with 10 new admissions on 5<sup>th</sup> December. On 7<sup>th</sup> December, 77 patients were in FHFT hospitals for Covid-19 with 10 on mechanical ventilation.</li> <li>The number of daily admissions for Covid-19 patients is also increasing in RBFT hospitals. There were 6 new admissions on 5<sup>th</sup> December. As of 7<sup>th</sup> December, 37 patients were in RBFT hospitals for Covid-19, with 4 patients needing mechanical ventilation.</li> <li>Overall, despite the increase in infections, the mortality rate is in line with what would be expected for this time of year.</li> <li>Over 214,000 people aged 50 and over have now received their three doses/booster Covid-19 vaccination in Berkshire. This equates to 62% of the population, in RBWM it is higher at 71% which is also higher than the England and South East average.</li> </ul>

	Item	
		<ul style="list-style-type: none"> <li>• 80% of people across Berkshire aged 18 and over have now received both doses of the vaccine. Within RBWM, coverage is slightly higher at 83%.</li> <li>• The key changes at a national level are around the introduction of Plan B. In summary, the changes are face coverings are required within indoor public spaces, working from home where possible, it is essential that people still test and self isolate, vaccination and booster are very important.</li> <li>• People aged 18 or over can now pre-book a booster dose appointment 2 months after their second dose.</li> <li>• Unless people have a valid exemption, Covid passes will be required for entry to nightclubs and some venues and large events to show you are fully vaccinated, or to demonstrate a negative lateral flow test result in the last 48 hours.</li> <li>• Fully vaccinated contacts of someone with Covid-19 should take rapid lateral flow tests every day for 7 days. If they test positive or develop symptoms, they then need to isolate for 10 days.</li> <li>• The public health team has worked with the CCG and NHS to enhance and target the booster vaccination campaign. Volunteers organised by the local engagement team have delivered 2,500 'golden tickets' to residents last weekend. The areas have been targeted that have had a lower uptake on the vaccine. This will continue through the contact tracing team.</li> <li>• In response to questions, it was noted: <ul style="list-style-type: none"> <li>○ The older age bracket would have had their vaccines and booster earlier, these people are potentially less likely to be infected. In terms of the school age cohort, schools have been hard hit and as these sites have larger numbers accessing them, it would explain why the numbers are lower in the older age brackets.</li> <li>○ People can have their booster 28 days after having covid for adults and 12 weeks for children.</li> <li>○ Within the higher rate areas, there is no specific rationale for this, it just appears to be higher community transmission. There has also been a higher testing rate within RBWM.</li> <li>○ Anyone who has had a positive PCR test should not test again for 90 days. This will be communicated again.</li> </ul> </li> </ul>
7.	Update on High Risk settings	<ul style="list-style-type: none"> <li>• Cases had increased within schools prior to term end, although all schools managed to stay open.</li> <li>• All schools keep classrooms ventilated. The CO2 monitors were distributed by the Department for Education, and the latest information shows that all schools have received them.</li> </ul>
8.	Engagement and Comms	<ul style="list-style-type: none"> <li>• There is community engagement work taking place with particular communities in RBWM.</li> <li>• There are 5 key messages that are being used across all channels regarding the vaccine and covid-19, social media, e-newsletters, community champions, general media and also with in engagement. Protection measures are also being communicated.</li> </ul>
9	Enforcement and Compliance	<ul style="list-style-type: none"> <li>• Since the revocation of the previous set of Covid regulations and government guidance in the summer, environmental health has generally provided a reactive and advisory response around Covid.</li> </ul>

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		<ul style="list-style-type: none"> <li>• Between 13<sup>th</sup> and 19<sup>th</sup> December there has been no direct notifications to environmental health, reflecting the general trend for the past 3 to 4 months.</li> <li>• Three premises required advisory contact, this was to discuss the new covid requirements for visitors to certain settings to provide proof of vaccination status or a negative lateral flow test.</li> <li>• There were follow ups on two confirmed cases of Omicron in a nursery and a care home. These were following on from referrals made by the UK Health Security Agency. These follow ups were for assurance purposes only as they had already received advice.</li> <li>• Relating to the measures that are currently in place, the public must now wear face covering in indoor public places, this is enforced by the police and or the relevant transport operator. For indoor places, signage must be displayed regarding face coverings as a reminder. Within RBWM this is enforced by environmental health.</li> <li>• There is also a requirement now in certain settings and venues for attendees to have proof they have been vaccinated or a negative Lateral flow test. Attendees can demonstrate this by displaying information on the NHS Covid pass app. This is within nightclubs, venues open after 1am with alcohol, indoor events with 500 people or more, outdoor settings with 4000 or more attendees where those attendees are likely to move around or stand, or any settings with 10,000 or more attendees. The operators of these settings and venues can use the NHS covid pass verify app to check attendees and they are required to check 100% of the attendees. Some settings and venues in a limited set of circumstances can use alternative arrangements and check less than 100%, this requires submission of a risk assessment to RBWM but for events held before 31<sup>st</sup> December 2021 they are deemed approved without conditions. After this date any submissions will require approval.</li> <li>• There has been an out of hours response set up to deal with any covid outbreaks reported by the Thames Valley health protection team and if necessary Environmental health can provide the appropriate response and follow up.</li> <li>• Environmental health will respond to any complaints about absence of signage requiring face masks and will advise businesses on this.</li> </ul>
10.	AOB	<ul style="list-style-type: none"> <li>• The homeless within the Borough have been targeted to receive the vaccination.</li> <li>• The agendas will be looked at for next year with the potential of widening the scope of topics discussed at the Outbreak Engagement Board.</li> <li>• The local Outbreak Management Plan has been updated and a link to the summary copy will be distributed to the Board.</li> <li>• Cllr Johnson expressed thanks to the NHS, providers, public health, volunteers, officers and residents for all the hard work around Covid and vaccinations.</li> </ul>
11	Date of next meeting	17 <sup>TH</sup> January 2022