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NOTICE

OF

MEETING

OUTBREAK ENGAGEMENT BOARD

will meet on

MONDAY, 21ST MARCH, 2022

At 2.30 pm

by

VIRTUAL MEETING - ONLINE ACCESS AND ON RBWM YOUTUBE

TO: <u>MEMBERS OF THE OUTBREAK ENGAGEMENT BOARD</u>

HILARY HALL – EXECUTIVE DIRECTOR OF ADULTS, HEALTH AND HOUSING (CHAIRMAN)

TRACY HENDREN – HEAD OF HOUSING AND ENVIRONMENTAL HEALTH ANNA RICHARDS – CONSULTANT IN PUBLIC HEALTH

DAVID SCOTT - HEAD OF COMMUNITIES

KEVIN MCDANIEL – EXECUTIVE DIRECTOR OF CHILDREN'S SERVICES LOUISA DEAN – COMMUNICATIONS AND MARKETING MANAGER

COUNCILLOR STUART CARROLL

COUNCILLOR HELEN PRICE

COUNCILLOR SIMON WERNER

Karen Shepherd - Head of Governance - Issued: 11th March 2022

Members of the Press and Public are welcome to attend Part I of this meeting. The agenda is available on the Council's web site at www.rbwm.gov.uk or contact the Panel Administrator **Mark Beeley** mark.beeley@rbwm.gov.uk

Recording of Meetings – In line with the council's commitment to transparency the Part I (public) section of the virtual meeting will be streamed live and recorded via Zoom. By participating in the meeting by audio and/or video, you are giving consent to being recorded and acknowledge that the recording will be in the public domain. If you have any questions regarding the council's policy, please speak to Democratic Services or Legal representative at the meeting.

AGENDA

<u>PART I</u>

<u>ITEM</u>	SUBJECT	<u>PAGE</u> <u>NO</u>
1.	APOLOGIES FOR ABSENCE	-
	To receive any apologies for absence.	
2.	DECLARATIONS OF INTEREST	5 - 6
	To receive any declarations of interest.	
3.	MINUTES	7 - 12
	To consider the minutes of the meeting held on 21st February 2022.	
4.	QUESTIONS FROM THE PUBLIC	-
	To consider any questions submitted to the Board.	
5.	UPDATE ON THE VACCINATION PROGRAMME AND HOSPITAL ACTIVITY	Verbal Report
	To hear from the Executive Managing Director (CCG).	
6.	LATEST LOCAL POSITION	Verbal
	To hear from the Consultant in Public Health.	Report
7.	UPDATE ON LONG COVID	Verbal
	To hear from the Executive Managing Director (CCG) and the Consultant in Public Health.	Report
8.	UPDATE ON HIGH RISK SETTINGS	Verbal
	To hear from the Executive Director of Children's Services.	Report
9.	COMMUNICATIONS AND ENGAGEMENT ACTIVITY	Verbal
	To hear from the Communications and Marketing Manager.	Report
10.	ENFORCEMENT AND COMPLIANCE ACTIVITY	Verbal Report
	To hear from the Head of Housing and Environmental Health.	Report
11.	ANY OTHER BUSINESS	-
	To consider any other business.	

FUTURE MEETING DATES 12.

All at 2.30pm:

- Monday 25 April 2022 Monday 23 May 2022
- Monday 20 June 2022
- Monday 18 July 2022
- Monday 22 August 2022Monday 19 September 2022
- Monday 17 October 2022
- Monday 14 November 2022
- Monday 12 December 2022



Agenda Item 2

MEMBERS' GUIDE TO DECLARING INTERESTS AT MEETINGS

Disclosure at Meetings

If a Member has not disclosed an interest in their Register of Interests, they **must make** the declaration of interest at the beginning of the meeting, or as soon as they are aware that they have a Disclosable Pecuniary Interest (DPI) or Other Registerable Interest. If a Member has already disclosed the interest in their Register of Interests they are still required to disclose this in the meeting if it relates to the matter being discussed.

Any Member with concerns about the nature of their interest should consult the Monitoring Officer in advance of the meeting.

Non-participation in case of Disclosable Pecuniary Interest (DPI)

Where a matter arises at a meeting which directly relates to one of your DPIs (summary below, further details set out in Table 1 of the Members' Code of Conduct) you must disclose the interest, **not participate in any discussion or vote on the matter and must not remain in the room** unless you have been granted a dispensation. If it is a 'sensitive interest' (as agreed in advance by the Monitoring Officer), you do not have to disclose the nature of the interest, just that you have an interest. Dispensation may be granted by the Monitoring Officer in limited circumstances, to enable you to participate and vote on a matter in which you have a DPI.

Where you have a DPI on a matter to be considered or is being considered by you as a Cabinet Member in exercise of your executive function, you must notify the Monitoring Officer of the interest and must not take any steps or further steps in the matter apart from arranging for someone else to deal with it.

DPIs (relating to the Member or their partner) include:

- Any employment, office, trade, profession or vocation carried on for profit or gain.
- Any payment or provision of any other financial benefit (other than from the council) made to the councillor during the previous 12-month period for expenses incurred by him/her in carrying out his/her duties as a councillor, or towards his/her election expenses
- Any contract under which goods and services are to be provided/works to be executed which has not been fully discharged.
- Any beneficial interest in land within the area of the council.
- Any licence to occupy land in the area of the council for a month or longer.
- Any tenancy where the landlord is the council, and the tenant is a body in which the relevant person has a beneficial interest in the securities of.
- Any beneficial interest in securities of a body where:
 - a) that body has a place of business or land in the area of the council, and
 - b) either (i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body <u>or</u> (ii) the total nominal value of the shares of any one class belonging to the relevant person exceeds one hundredth of the total issued share capital of that class.

Any Member who is unsure if their interest falls within any of the above legal definitions should seek advice from the Monitoring Officer in advance of the meeting.

Disclosure of Other Registerable Interests

Where a matter arises at a meeting which *directly relates* to one of your Other Registerable Interests (summary below and as set out in Table 2 of the Members Code of Conduct), you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest' (as agreed in advance by the Monitoring Officer), you do not have to disclose the nature of the interest.

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Other Registerable Interests (relating to the Member or their partner):

You have an interest in any business of your authority where it relates to or is likely to affect:

- a) any body of which you are in general control or management and to which you are nominated or appointed by your authority
- b) any body
 - (i) exercising functions of a public nature
 - (ii) directed to charitable purposes or

one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union)

Disclosure of Non- Registerable Interests

Where a matter arises at a meeting which *directly relates* to your financial interest or well-being (and is not a DPI) or a financial interest or well-being of a relative or close associate, you must disclose the interest. You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest' (agreed in advance by the Monitoring Officer) you do not have to disclose the nature of the interest.

Where a matter arises at a meeting which affects -

- a. your own financial interest or well-being;
- b. a financial interest or well-being of a friend, relative, close associate; or
- c. a body included in those you need to disclose under DPIs as set out in Table 1 of the Members' code of Conduct

you must disclose the interest. In order to determine whether you can remain in the meeting after disclosing your interest the following test should be applied.

Where a matter *affects* your financial interest or well-being:

- a. to a greater extent than it affects the financial interests of the majority of inhabitants of the ward affected by the decision and;
- b. a reasonable member of the public knowing all the facts would believe that it would affect your view of the wider public interest

You may speak on the matter only if members of the public are also allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless you have been granted a dispensation. If it is a 'sensitive interest' (agreed in advance by the Monitoring Officer, you do not have to disclose the nature of the interest.

Other declarations

Members may wish to declare at the beginning of the meeting any other information they feel should be in the public domain in relation to an item on the agenda; such Member statements will be included in the minutes for transparency.

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RBWM Outbreak Engagement Board

Monday 21st February 2022, 2.30pm, Zoom meeting



Board Attendees:

- Cllr Carroll
- Cllr Werner
- Cllr Davey
- Executive Director of Adults, Health and Housing Hilary Hall (chair)
- Head of Communications Louisa Dean
- Executive Director of Children's Services Kevin McDaniel
- Executive Managing Director RBWM, Clinical Commissioning Group Caroline Farrar
- Communications and Engagement officer Louise Page
- Intelligence & Strategy Officer (COVID-19) Marc Connor

Additional Attendees:

- Cllr Baldwin
- Cllr Hunt
- Cllr Singh
- Cllr Bhangra

Apologies:

- Chief Executive Duncan Sharkey
- Director of Public Health Berkshire East Stuart Lines
- Consultant in Public Health Anna Richards
- Head of Communities David Scott
- Head of Housing, Environmental Health and Trading Standards Tracy Hendren
- Cllr Price

	Item	
1.	Conflicts of Interest	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 had been 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 this business he would abstain from the discussion and leave the room as required.
2.	Minutes of the last meeting	There were no matters arising.

	Item	
3.	Questions from the Public	I understand for Omicron, vaccine protection starts to wane after about 10 weeks. What is going to happen to those people whose vaccine protection has started to wane?
		The Joint Committee on Vaccination and Immunisation (JCVI) which advises the government has recently published a report on the adult COVID-19 booster vaccination programme and the Omicron variant. This is a good source of factual information. JCVI statement on the adult COVID-19 booster vaccination programme and the Omicron variant: 7 January 2022 - GOV.UK (www.gov.uk).
		The report highlights that thus far, the booster programme has provided high levels of protection against severe disease from COVID-19 (both Delta and Omicron variants) across the population. The latest data from the UK Health Security Agency (UKHSA) indicates that while protection against mild symptomatic infection appears to wane substantially by about 3 months after the booster dose, protection against severe disease (hospitalisation) is well maintained in older adults (see Monitoring reports of the effectiveness of COVID-19 vaccination). This data underlines the importance of booster vaccination and the additional protection obtained against the Omicron variant.
		For those with a severely weakened immune system, a booster (4 th dose) is available from 3 months after your third dose. <u>Booster dose of the coronavirus (COVID-19) vaccine - NHS (www.nhs.uk)</u> .
		The COVID-19 vaccines are safe and effective. They give you the best protection against COVID-19. Walk In vaccination opportunities are now available, please look at the link for your local clinics' opening times. <u>Vaccination clinics Frimley Health and Care</u>
		 Looking at the latest healthcare statistics for Frimley Health NHS Foundation Trust on the COVID-19 Government Dashboard (updated on 10 February 2022), why is the number of patients in hospital currently much higher than during the month leading up to Christmas Day 2021 (see graph)? The latest 7-day average is 173.0 compared with an average of 71.9 over the month to 25 December 2021.
		Infection rates locally have been high throughout this period and we know that hospital admissions lag infection surges by two to four weeks, so this difference is entirely predictable. It is worth emphasising that the Omicron surge is not over, it is impacting very severely on the hospital and there are increased waiting times for planned care once again. Just because restrictions have eased does not been anything has changed in our daily

	Item	
		operational realities. There has been an increase in case rates since November, it has only gone down in February.
4.	Update on Vaccination Programme	 The vaccination programme has been relatively quiet. People are not coming forward for the booster at the same rate as previously and some sites had reduced their hours of operation accordingly.
		 Hospital Activity The trust remains in a steady but difficult state. As of last Friday there were 164 patients who had tested positive for covid across the Trust. There have been 20 deaths within the last week which is an increase. There are currently two positive patients in intensive care.
		 There have been a number of outbreaks on the wards, with 14 last week. 134 staff are currently off sick with covid and 49 are in covid isolation. This is a continuing impact on the care that the trust can provide. Over recent months there have been cancelled planned
		operations due to the amount of staff sickness and the lack of beds due to outbreaks within the trust.
6.	Local Position	 772 cases per 100,000 population. This represents 1,168 cases in the last 7 day period. This has decreased by 31% and is in line with the South East average of 743 cases although slightly higher than the England average of 570. All case rates are going down.
		 456 cases per 100,000 population for the 60+ age group. This has also decreased by 24% and is in line with the South East and England average.
		 There have been 505 individuals tested per 100,000 population. 12.3% of individuals tested have tested positive. This is also reducing.
		 The cases are reducing from the peak in December and January.
		 There are still cases in all of the wards across the Borough although case numbers are reducing.
		 On the heat map it shows that the higher case rates in July 2021 were in young adults, however as we move to the Christmas period, it shows all age groups begin to be affected with the older age groups being the last to be affected.
		 The winter pressures are increasing within FHFT hospitals with overall numbers of patients presenting at hospital increasing. The number of Covid-19 patients in FHFT Hospitals is increasing with 19 new admissions on 6th February. On 8th February, 194 patients were in FHFT Hospitals for Covid-19 with three on
		 mechanical ventilation. The number of daily admissions for Covid-19 patients is also increasing in Royal Berkshire Foundation Trust hospitals. There were 17 new admissions on 6th February. As of 8th February, 77

	Item	
		 patients were in RBFT Hospitals for Covid-19, with one patient needing mechanical ventilation. There have been 387 deaths up to the 4th February. Overall mortality rate is 7% higher than last year. Over 286,000 people aged 50 and over have now received their three doses/booster Covid-19 vaccination in Berkshire. This equates to 84% of the population. The vaccination bus was out two weeks ago. There are further dates this week. On 24th February the bus will visit Woodlands Park, on 25th February it will visit Maidenhead Mosque and on 26th February it will visit Cordwallis Road surgery. The test and trace team will also be out on Saturday. There is a correlation between rates and wards, it shows higher case rates within wards with lower vaccination uptake.
7.	Update on Long Covid	Due to staff availability, this item was deferred to the next meeting for a more substantial discussion.
8.	Update on High Risk settings	 Schools continue to have disruption due to absence. There has been a significant fall in numbers, as there have been fewer absences. There have been a number of classes taught on a remote basis, to ensure that young people have a consistent teacher on a particular subject particularly those with examinations coming up. It is hoped that the trend over the last two weeks will continue. There have been no school closures since the last period.
9.	Engagement and Comms	 The vaccination campaign has continued with information on the first, second and booster vaccine. The team has promoted local walk-ins and the return of the vaccine bus. The other campaign that has also been running is 'test don't guess' and also promoting community collection of tests at the leisure centres. Comms have provided information on where to get help for residents with Long Covid. The last campaign running is the business grants, which are available for businesses that have been struggling because of the omicron variant. All of the above messages have been put on all platforms, Facebook, Twitter and Next Door. The Next Door app enables the team to target specific wards which is being used in conjunction with the vaccine bus visiting. The weekly newsletter is still being sent out. There are 53,000 subscribers. Weekly covid champion email is sent out which is shared with 123 people to share within their groups. More comms will be shared once the Government press conference has taken place today on their future strategy for living with Covid.

	Item	
10	Enforcement and Compliance	 There have been no new notifications. The team has continued to carry out the advisory and reactive role that it has been doing throughout the pandemic.
11.	AOB	 With infection rate and the vaccine take up, we would expect a future variant of concern not to emanate from within the UK, but possible globally from another jurisdiction where vaccine rates are lower. As a general rule, it would be expected that future variants of concern could mutate and evolve. The expectation is that as the virus mutates, it should become less severe in terms of its impact on mortality. Anti-viral treatments are also effective with the vaccine, which will help prevent the virus mutating. There are an increasing number of re-infections which is to be expected with this disease. However, if people have been fully vaccinated, the impact on them is significantly lower with milder symptoms.
12	Date of next public meeting	21st March 2022

