

Present: Deputy Mayor Councillor Glyn Jones (GJ), Dr. Rupert Suckling (RS), Damian Allen (DA), Councillor Jane Cox (JC), Councillor Chris McGuinness (CM), Councillor Jane Nightingale (JN), Councillor Andy Pickering (AP), Mel Palin (MP), Paul O'Brien (Po'B), Dolly Agoro (DAg), Fiona Campbell (FC)

Officers: Scott Fawcus (SF), Anthony Fitzgerald (AF) Laurie Mott (LM) Rachel Wright (note taker).

Apologies: Mayor Ros Jones (RJ) (Chair), Councillor Nigel Ball (NB), Councillor Nuala Fennelly (NF), Shayne Tottie (ST), Daniel Fell (DF), and Jackie Pederson (JP).

	Action
<p>1. Welcome, apologies and introduction – Councillor Glyn Jones</p> <p>Councillor Glyn Jones welcomed all those present to the meeting.</p>	
<p>2. Exclusion of the public and press – Councillor Glyn Jones</p> <p>The Board agreed that there were no items on the agenda that the public and press should be excluded from.</p>	
<p>3. Public Statements and Questions – Councillor Glyn Jones</p> <p>Councillor Glyn Jones noted no questions were received from members of the public.</p>	
<p>4. Declarations of interest – Councillor Glyn Jones</p> <p>There were no declarations of interest made at the meeting.</p>	
<p>5. Minutes of the last meeting held on 9th December 2020 – Councillor Glyn Jones</p> <p>Minutes of the Doncaster COVID-19 Oversight Board held on 9th December 2020, were approved.</p>	
<p>6. COVID-19 National Overview – RS</p> <p>RS gave a verbal overview of the significant changes since the last meeting in December 2020.</p> <p>RS reminded the board that at the last meeting Doncaster was under tier 3 restrictions, and like many areas began experiencing an increase in the number of cases. There was the expectation over Christmas/New Year that Doncaster would move into higher restrictions. The whole country moved into national restrictions in January.</p> <p>RS explained there were challenges within hospitals being busy, and an increased number of excess deaths.</p> <p>Members were informed the number of cases in Yorkshire and Humber were lower than that in the rest of the country.</p> <p>RS confirmed since the last meeting COVID-19 vaccines were approved.</p> <p>RS described some unintended consequences of national lockdown such as on mental health and added this lockdown differs from the first in that people were able to meet as part of support bubbles, the NHS was open, and the third sector was mindful of the impacts of lockdown. RS indicated that a decision on the reopening of primary schools was expected shortly.</p> <p>Ahead of the next meeting in February, RS believed there would be further information about the extension of national lockdown until the 8th March.</p> <p>RS concluded the numbers of cases were coming down through lockdown but slowly.</p> <p>Po'B added that the number of people with COVID in schools was higher in teaching assistant's than teachers, therefore what could we do to make the staff feel safe? RS advised that data they had did not indicate that but that it could be a reflection of the sample we had, he added there would be more to discuss as we go forward.</p> <p>DA asked where should we draw balance in terms of duration of lockdown or style and approach to relaxation of measures. RS responded lockdown should be as short as possible but long enough to be effective and whilst in lockdown the aim was to eliminate community transmission,</p>	

and drive down figures by abiding by rules such as hands, space, face, ventilation, self-isolate.

Po'B raised there was a ventilation issue abroad and described an example situation, he felt that it was a concern that guidance was still given out here to make sure places are ventilated. RS advised this was to be taken to COVID Control Board.

RESOLVED;

- That the presentation be noted.

7. What the data is telling us - LM

LM gave a verbal update on what we know locally using various data streams.

LM began by informing the board the 7-day rate in Doncaster was 267 per 100,000, a decline from the last rate reported and he added the 7-day rate for other towns in South Yorkshire were lower than Doncaster's rate. LM advised Barnsley, Rotherham and Sheffield had reported a slight uptick in cases recently.

LM stated the positivity rate in Doncaster had fallen consistently during November, but there had been a slight increase since the last reported rate to 10.5%.

LM noted that hotspot areas in the previous 14 days were Kirk Sandall, Wheatley and two areas in Conisbrough (Conanby and Corn Hill).

LM described the situation in hospitals, with 114 people receiving active care for COVID-19. The figures throughout January had been falling consistently but slowly. Some concern is that the numbers of people in ITU remained approximately the same.

LM informed Members the new variant accounts for 56% of our cases and over the last 6 weeks this has increased at same rate as other South Yorkshire areas.

LM presented the number of cases by age group through the second and third wave, this showed a difference in trend and could explain why we haven't seen huge increases in hospitalisations during the third wave.

LM reported the number of deaths recorded on death certificates had been falling since December.

DA questioned why we had not seen huge numbers of the new variant in Doncaster. RS explained Doncaster was under tier 3 restrictions, which kept numbers of cases down, areas living under tier 2 restrictions gave the new variant room to grow.

PoB enquired whether tracking was in place for those cases that have a negative lateral flow test but later test positive on a PCR. RS explained that if someone tests positive on PCR they do track the 48 hours before. RS to take this to COVID Control Board as there had been a lack of data recently and would look at picking up our own tracking.

AF gave a presentation on the vaccine programme, describing the multiagency approach and how it was delivered using the primary care network, across 7 sites.

AF advised that 77.5k people were eligible for vaccination in the first 4 cohorts, 32k had been delivered so far including all older care home residents and staff, 80% of over 80's and some health and care staff.

AF set out the challenges were supply, changing guidance, and occasionally outbreaks in care homes.

AF reported that key messages so far were there had been a great take up and a fantastic effort from staff and volunteers.

DA enquired about the BAME community and vaccine hesitancy and reaching that community. AF advised that an engagement drive was about to start with the BAME network.

DA asked what level of notice the NHS got around redistribution of the vaccine. AF stated about a week's notice.

DA mentioned whether the Tickhill Road site could be used to immunise Social Care staff. AF advised that they are looking to use Tickhill Rd, and possibly some primary care sites.

JC asked for clarification on when adults with learning disabilities would receive the vaccination RS replied that they should look to highest category that they are eligible for, and once the top 4 cohorts are vaccinated, more information will be provided.

RESOLVED;

<ul style="list-style-type: none"> • That the presentation be noted. • Contact Tracing following a positive PCR Test be actioned by a local team to be discussed at COVID Control Board. 	RS
<p>8. COVID Control Plan v7 - RS</p> <p>RS presented the COVID Control Plan v7.</p> <p>RS reminded members that the COVID Control Board had to have an Outbreak Control Plan that was publically available, and the version presented was subject to change. RS highlighted some alterations in this version which were:</p> <ul style="list-style-type: none"> • Section 6 - Vulnerable people places and settings additional resources. • Outbreak management protocols learning from outbreaks and updating approaches. • Section 8 - Community transmission and national tier advice. • Section 9 - Local contact tracing. • Section 10 – Testing; <p>RS reminded Members if you have symptoms, there were testing sites at the airport or park and ride at Woodlands. As a Council rapid testing was available at Mary Woollett for frontline council staff and frontline staff at the Police, Fire Service and Primary Schools. Community testing was set up at Stainforth, Hexthorpe and Conisbrough with additional testing for those with symptoms in the Town Centre and Thorne.</p> <p>RS informed board members that a review of the governance and membership for this board would be undertaken.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> • That the presentation be noted. • Review the governance and membership for the Doncaster COVID-19 Oversight Board. 	RS
<p>9. COVID Health Protection Board Risks - RS</p> <p>RS presented the Doncaster COVID Control Board Threat and Risk Assessment report and highlighted two high-risk areas. The first was impacts of COVID on the health service as there were more people in hospital than in the first wave. RS advised a reduction was expected. The second was testing and contact tracing as there had been changes in testing and also increased contact tracing cases were being received by the local team. RS advised bank staff were employed, and work reprioritised within the public health team so each person gives 2 days a week to contact tracing.</p> <p>RS noted all other risks managed effectively.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> • That the presentation be noted. 	
<p>10. Minutes of the Control Board 6th January, 2021 – RS</p> <p>RS reminded Members that the minutes of the COVID Control Board would be reported to this board.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> • That the presentation be noted 	