

Doncaster COVID-19 Oversight Board
Tuesday 22nd June 2021, at 3.00pm

Present: Mayor Ros Jones (RJ) (Chair), Deputy Mayor Councillor Glyn Jones (GJ), Councillor Nigel Ball (NB), Councillor Jane Cox (JC), Councillor Mark Houlbrook (MH), Councillor Jane Nightingale (JN), Councillor Andy Pickering (AP) Dr. Rupert Suckling (RS), Chief Superintendent Melanie Palin (MP), Paul O'Brien (Po'B), Fiona Campbell (FC), Anthony Fitzgerald (AF)

Officers: Jon Gleek (JG), Carys Williams (CW), Rachel Wright (note taker).

Apologies: Jackie Pederson (JP), Daniel Fell (DF)

	Action
<p>1. Welcome, apologies and introduction – Mayor Ros Jones</p> <p>Mayor Ros Jones welcomed all those present to the meeting.</p>	
<p>2. Exclusion of the public and press – Mayor Ros 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 – Mayor Ros Jones</p> <p>Mayor Ros Jones noted no questions received from members of the public.</p>	
<p>4. Declarations of interest – Mayor Ros Jones</p> <p>There were no declarations of interest made.</p>	
<p>5. Minutes of the last meeting held on 28th April 2021 – Mayor Ros Jones</p> <p>Minutes of the Doncaster COVID-19 Oversight Board held on 28th April 2021, approved.</p>	
<p>6. COVID-19 National Overview – RS</p> <p>RS began by reminding the board that they last met 9 days into step 3 of the Government's roadmap to recovery, the roadmap had been designed for the alpha variant, and cases of the alpha variant were falling. However, during May and June it was advised there had been an increase in the delta variant that led to the pausing of moving into step 4. That was a result of two of the four national tests not being met. RS explained the two tests not met were insufficient evidence about whether the rates of cases were turning into hospitalisations and putting additional pressure on the NHS, and the other was variants of concern.</p> <p>Members were informed that the rollout of the vaccine continued with regular and consistent lowering of the age range of those invited. All 18 year olds and above were able to book first vaccinations, at the last meeting the age group had been the over 30's.</p> <p>RS noted that the car journeys and road travel were back to pre-pandemic levels.</p> <p>RS thought that in terms of next steps there would be a review of step 4 of the roadmap, the use of face covering and foreign travel. RS felt that it was highly likely step 4 would go ahead, and we would see the end to a number of restrictions towards the end of July.</p> <p>RESOLVED;</p> <ul style="list-style-type: none">• That the presentation be noted.	
<p>7. What the data is telling us - JG</p> <p>JG presented a strategic overview of what the data is telling us, and reminded the board of the 4 Government tests that were data driven at a national level and those were good indicators of what was happening locally. JG described Doncaster's pandemic curve focussing on the uptick in cases most recently.</p> <p>Two maps of the north of England were presented showing the number of cases from one week previous and the current week. The comparison showed the spread and increases in infections</p>	

progressing from West to East.

To put Doncaster's case rates in context JG presented a table of the case rates per 100,000 in areas across England. The majority of areas had significantly higher rates than those in Doncaster, it showed we were placed 112th of 214 local authorities, and our rate was similar to other South Yorkshire colleagues.

As Doncaster's reported cases had gone up significantly over the previous weeks JG looked closer at the age range of those people driving the increase and found that they were between fifteen to early thirties. There had not been a rise in cases in the older age ranges.

JG added that the Incident Management Team had seen an uptick in the amount of incidents clusters and outbreaks that it measures, and that this related to the increase in cases.

Members were updated with the latest hospital admissions and informed they were no significant increases, with only 2 active cases in DBTH. This signified that the vaccination effort had broken the relationship between infections, hospitalisations and deaths.

JG reported there were only 3 deaths throughout May and June where COVID-19 was a factor, which in comparison to the winter months was very different.

In terms of the economy JG advised that footfall in the town centre was back to the same as in the summer of 2020.

Claimant rates in the borough had dipped slightly over the last month, but there were still high levels of claimants on out of work benefits. Youth unemployment figures had dipped but remained very high.

A map of the borough showing the uptake of vaccine was presented by JG and this highlighted some differences in uptake across the borough.

A question was raised about the age range of people in hospital with COVID-19 and Members were informed that some had been younger more recently but generally they were less unwell than those in hospital through last year.

Clarity was sought about the main issues around why people were not taking up the vaccine. AF explained there were different elements to this which were;

- Complacency as the lower the age groups were invited for vaccination less were taking up the offer.
- Hesitancy – some people had concerns with what it entailed, or complications with other health conditions.
- Access – people were less likely to travel to vaccination hubs that had prompted a change of the administration model with more pop up clinics and walk in sessions provided.
- Ability to contact people to book appointments. Work was underway to put out the message to update details and walk in sessions should help.

AF highlighted there would be a big vaccination drive nationally over the forthcoming weekend inviting the public to get their vaccinations.

RESOLVED;

- That the presentation be noted.

8. COVID-19 Health Protection Board Risks – RS

RS drew the boards attention to 3 impacts that were low on the risk register within the report;

- Personal protective equipment – the procurement team were sourcing and investing in PPE very differently.
- Welfare of vulnerable people – no longer concerns on supporting people that need to self-isolate, everyone was receiving support through communities.
- Impact on the health service – however health colleagues were instead busy dealing with day-to-day duties, back log and waiting lists, any increase in COVID cases would impact on this.

RS then noted the risk that were still deemed high;

- Management of outbreaks in high risk setting – further outbreak control meetings in schools.

- Testing because the a-symptomatic testing sites were closing. Local testing sites will now open all day.
- Contact tracing – due to the increase demand in cases, there has been investment in staffing to help manage with contact tracing.

AF added that urgent response cells were kept within the health system because whilst they had seen a decrease in COVID related issues, there was an increase in urgent, primary and secondary care need, along with addition work on waiting lists. Work would be undertaken and modelling to predict the impact on services if COVID cases increased. Additional work and communications with the public on expectations and self-care especially where patients can receive care and treatment as that is not just at A&E.

There were concerns raised that maybe patients could not get in touch with or found it difficult to contact a GP. AF advised peoples experiences of this differ across the borough however work was ongoing with the hospital around the public presenting at A&E rather than a primary care service. AF also acknowledged that the way people receive care had changed since the COVID-19 pandemic with more phone triage systems and telephone appointments for example.

Members questioned whether there was any concerns about people moving around the area more after July 19th and schools closing for summer holidays. RS recognised that during the summer there would be a difference as to how people move around, and there may not be a lot of restrictions. This was compared to last summer when there were fewer restrictions and there was not large increases in cases, RS concluded that he did not expect the summer holidays to pose an increase risk.

RESOLVED:

- That the presentation be noted.

9. Minutes of the Covid Control Board Meeting held on 9th June, 2021 – RS

RS highlighted the key areas from the Covid Control Board meeting which were;

- The work on compliance leading up to step 3 of the roadmap – RS described the work between Council teams and Police, particularly around the upcoming football tournaments.
- Concerns were raised that some people asked to self-isolate were not doing so but the Incident Management Team were not seeing any evidence of that.
- Union colleagues raised the following two points;
 - The importance of and continuing to carry out risk assessments. HSE were also carrying out spot checks across Doncaster businesses and settings.
 - Staff wellbeing in terms of the long periods of time people had been living under restrictions coupled with the delay on step 4 of the roadmap, which will continue to impact on people’s health and wellbeing.

RESOLVED:

- That the presentation be noted.