



COVID Control Board Meeting Notes and Actions

Date Wednesday 2nd March 2022
 Time 15:00
 Location MS Teams
 Chair Victor Joseph

Attendees: Catherine Needham, Simon Noble, Hayley Waller, Carys Williams, Daniel Vieira, Nikki Mell, Rachael Leslie, Emma Gordon, Delano Johnson, Clare Henry, Laurie Mott, Sian Owen, Rachael Carney, Louise Sharp, Jonathan Preston, Kenneth Agwuh, Katie Gillan

Apologies: Lisa Devanney, Andrew Russell, Rupert Suckling, Fiona Campbell, Kevin Drury, Nick Wellington

No	Item	Key Decision / Action	Allocated to
1.	Welcome and Introductions	VJ welcomed all to the meeting.	
2.	Apologies	VJ noted apologies.	
3.	Purpose of Meeting	VJ confirmed the key purposes of the meeting as follows: 1. Responsible for the development, exercising and testing of COVID Control Plan. 2. Provide assurance in terms of the managing of incidents and outbreaks through the daily IMT meetings. The purpose of IMT is to assess cases, clusters and outbreaks, ensure there are effective control measures in place and target preventative activity.	
4.	Urgent Items for Attention	Since the last meeting the Living with Covid Plan has been announced, the key things to note are; <ul style="list-style-type: none"> • There is no longer a legal requirement to isolate if you are positive or a close contact, contact tracing has also ended • Schools are no longer required to test regularly • From the 1st April free testing will only be available to a limited to group 	
5.	Data and Intelligence Update (Laurie Mott)	7 day & positivity rate (for the 18th – 24th February) <ul style="list-style-type: none"> • Doncaster’s official 7-day rate per 100,000 is currently 177.1 • Barnsley’s rate is 233.8, Rotherham’s is 215.5, Sheffield’s is 237.9, Yorkshire & Humber’s is 242.7 and England’s is 332.0 • Doncaster is currently ranked 189th / 214 in the UK, 14th in the region and 139th in England • Doncaster’s positivity rate is currently 9.5% 	



		<ul style="list-style-type: none"> • Day Rate for Ages 60+ years • Doncaster’s 60+ rate is 141.4, Barnsley is 217.0, Rotherham is 177.4, Sheffield is 166.8 , Yorkshire and Humber is 202.6 and England is 258.1 • Doncaster are 143rd highest in England, 14th in the region <p>Prediction in rates</p> <ul style="list-style-type: none"> • Case rates will continue to fall over the week <p>Demographics</p> <ul style="list-style-type: none"> • 60-79s and 80+ ticking up at the moment, higher than this time last year – possibly a link to testing in care settings <p>Hospital activity – figures from DBHT for Doncaster Royal Infirmary:</p> <ul style="list-style-type: none"> • The number of patients being actively treated for Covid is 46 • 2 in ITU; it’s likely that 1 person acquired Covid whilst in ITU • Hospital data halved in the last month <p>The number of deaths with Covid mentioned on the death certificate;</p> <ul style="list-style-type: none"> • 40 in January • 31 in December • The majority were aged 80+ and died in hospital <p>Questions/comments; Good news in terms of direction of travel, rates continue to decrease and hospital numbers are reducing.</p>	
<p>6.</p>	<p>Daily Incident Management Team Update (Hayley Waller)</p>	<p>HW presented the overall IMT log summary;</p> <ul style="list-style-type: none"> • 34 live cases • 3935 closed • 3969 in total • 75.9 7 day rolling average • Settings - 13 businesses (the last business case will close on 7/03/22), 6 Care Home OP, 4 Care Home LD, 4 Supported Living, 2 CCG, 1 Extra Care, 1 Dom Care, 1 Early Years, 1 in-house, 1 Special School • Community – 4 Denaby Main (care homes), 4 Brodsworth and Pickburn (warehousing), 2 Dunsville, 2 Armthorpe, 2 Belle Vue, 2 Kirk Sandall, 2 Thorne, 1 Tickhill, Town Centre, 1 Warmsworth, 1 Woodlands, 1 York Road, 1 Loversall, 1 Mexborough, 1 Moorends, 1 Scawthorpe, 1 Skellow, 1 Bentley, 1 Balby, 1 Edlington, 1 Hatfield, 1 Hatfield, 1 Conisbrough 	



		<p>Questions/comments; It was noted that there has been a significant reduction with information coming through to the line list since contact tracing ended.</p>	
7.	TCG Update (Nasir Dad)	VJ updated that there is no update as the TCG has now stood down, the last meeting took place approximately 1/2 weeks ago.	
8.	Outbreak Management (Carys Williams/Clare Henry)	<p>CW presented the key updates for the Living with Covid Plan (please refer to presentation slides for further information);</p> <ul style="list-style-type: none"> • Twice weekly testing in schools removed, continued to be advised for special schools • Legal requirement to self-isolate for positive cases and close contacts has ended, as has contact tracing • Free universal testing for the general public ends on 1st April, still awaiting detail of who will be eligible for free testing • End to voluntary Covid passes for venues and events however this is still available for international travel requirements • Future approach – Risk assessed prioritisation of support to settings, vaccines, outbreak management and response, • Next steps – Continue to review plans and approach, review of communications approach and key messages underway, debriefing and learning reviews • Review of IMT and Covid Control Board – will potentially be able to bring initial recommendations to the next meeting <p>Clare Henry updated the following;</p> <ul style="list-style-type: none"> • contact tracing – this ended on 24th February, individuals who are testing positive at the moment are receiving a text message or email if they have provided details advising them what to do and to let close contacts know etc • PCR testing – a demobilisation letter has been sent, this has limited information but does state that infrastructure may stay on site beyond the end of March 2022 • Local community testing – the team are currently decommissioning test collection sites and assistive testing sites including Mary Woolett Centre, North Bridge and the Wool Market. All sites will be closed by the third week of March. Some stock is still available which is being offered to partners who can use for professional use or it will go into the community/to residents. Beyond the end of March locally we do not have the authority to provide any asymptomatic testing and will no longer have stock in place. 	



		<p>Comments/questions; Acknowledged the great team the work and organisations have done throughout the pandemic</p>	
9.	<p>Threat and Risk Register and Key Updates from Organisations</p>	<p>Threat and Risk Assessment</p> <p>Management of outbreak in High risk settings – Decline is steady, occasional outbreaks remain but numbers are low. Reduce to Medium however noted this is dependent on the information flow going forward</p> <p>Testing – Remain at medium whilst await further guidance on vulnerable individuals/settings</p> <p>Contact Tracing – Now ceased nationally, locally may potentially utilise in an outbreak situation. Remove from the list.</p> <p>Welfare of vulnerable people needing to self-isolate – Keep as low</p> <p>Infection, prevention and control capacity – meeting held this morning re logistics of funding agreement, lead provider, direction of travel etc. Reduce to medium</p> <p>Resourcing of Core IMT – Remain as low</p> <p>Future Waves & VOC Response – Remain as high whilst await further detail nationally</p> <p>Key updates; DBTH – numbers are on a downward trend, some staff members are still testing positive; this fluctuates therefore not relaxing PPE use. CH asked if we know if Pillar 1 testing will still be available going forward; KA confirmed yes, logistics are still being worked out.</p> <p>Nothing further to add.</p>	
10.	<p>Communications (Rachael Carney)</p>	<ul style="list-style-type: none"> Launched a face mask wearing campaign which will run for the next 3-4 weeks, softer approach taken. Radio campaign, bus stops etc also running Working on the Strategy for the next phase; the plan and strategy will be presented to this group in 2 weeks 	
11.	<p>AOB</p>		
12.	<p>Review of Actions</p>	<p>No new or outstanding actions.</p>	



13.	Date and Time of Next Meeting	The next board meeting is scheduled: Wednesday 16 th March 2022 3pm. It is anticipated that this will be the last meeting as the board will move to the Health Protection Assurance Group.	
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