

Team Devon Local Outbreak Engagement Board

TEAM DEVON (LOCAL OUTBREAK ENGAGEMENT BOARD)

Thursday, 12th November, 2020

A meeting of the Team Devon (Local Outbreak Engagement Board) is to be held on the above date at 11.00 am.

AGENDA

- 1 Apologies for Absence
- 2 Notes of the Previous Board Meeting (Pages 1 10)
 To receive the notes of the previous meeting on 8 October 2020.
- Urgent Items from the Health Protection Board
 The Director of Public Health or their representative to report.
- Report / Presentation from the Health Protection Board
 A Report from the Health Protection Board on current issues, data, trends, age profiling and matters for information.
- NHS Pressures
 Chair of Devon Clinical Commissioning Group to present the issues and key messages.
- National Picture and update on current Lockdown

 The Director of Public Health to update on national context and guidance, to include an update from the Chief Executive on the national Contain Capacity Planning Programme.

7 Communications and Engagement

To consider the current communications activities in relation to:

- Young People and social media campaign an update from the Head of Communications and Media
- **People of Working Age** an update from the Director of Public Health
- Clinically Extremely Vulnerable, to include the work of District Councils, Town and Parish Councils and the Voluntary and Community Sector update from the Head of Communities.

Members of the Board to contribute as appropriate to each discussion area.

8 <u>Enforcement - Current Work and Plans</u>

A representative from Devon and Cornwall Police to update on enforcement practices and future planning.

9 Hate Crime and Community Tension (Pages 11 - 16)

A Report from the Voluntary Community and Social Enterprise representative on Hate Crime and Community Tension during the pandemic, (attached).

10 Public/Members Questions for the Board

11 Key Messages to be Communicated from the Meeting

The Board and Head of Communications and Media to consider any key messages to be communicated.

12 Date of Next Meeting

Scheduled for 10 December 2020 @ 11.00am

Membership

Councillors J Hart (Chair), A Leadbetter (Vice-Chair), R Croad and J McInnes

Co-opted Members

D Crump (VCSE DSP Rep), T Gravett (Healthwatch), Dr P Johnson (Devon Clinical Commissioning Group), J Kay (Deputy Vice Chancellor of University of Exeter), Dame S Leather (Independent Chair of STP), S MacKney (Petroc), Dr Louise McAllister (Devon Community Resilience Forum), Councillor J Pearce (South Hams District Council), R Roberts (Visit Devon), S Sawyer (Chief Constable of Devon & Cornwall Police), C Stobart (Devon Association of Local Councils (Towns & Parish Councils)) and S Wilkinson (Devon Federation of Small Businesses)

Access to Information

Any person wishing to know any further information about the meeting including minutes, reports or background papers should contact Karen Strahan or Stephanie Lewis on 01392 382264.

Internet

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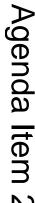
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Team Devon Local Outbreak Engagement Board

Decision and Action log

TEAM DEVON (LOCAL OUTBREAK ENGAGEMENT BOARD)

Date Thursday, 8 October 2020

→ Present

Councillor John Hart, Councillor Andrew Leadbetter, Councillor Roger Croad, Tony Gravett, Councillor James McInnes, Professor Janice Kay CBE, Dame Suzi Leather, Councillor Judy Pearce, Chief Supt. Dan Evans, Cara Stobart, Sue Wilkinson, Diana Crump, Nora Corkery, Sally Parker and Sean Mackney

Apologies

Rhys Roberts, Sean Sawyer, Jo Hooper and Louise MacAllister

No.	Decision/Action/Message	Who Will action?	When?
	It was pleasing that the summer months saw no cases from internal tourism. The main issue had been those returning from international travel, but generally, this had been contained. The Director of Public Health said that thanks needed to be expressed for the excellent compliance of Devon people residents and communities.		
	With the reopening of schools, the response from both schools and parent / carers had been excellent with a real commitment to safe working and teaching.		
	Notwithstanding the above, there was a move towards a second phase with recorded increases in the virus. However, rises were more significant in other parts of the country with the South West still reasonably low in comparison.		
	The Consultant in Public Health then presented the latest information from the COVID-19 dashboard (https://www.devon.gov.uk/coronavirus-advice-in-devon/coronavirus-data/) which again showed the rise in infections. Locally, there had been 549 cases in Devon, but no deaths in previous week.		
	The Board also showed the position in Exeter with 394 infections in the last 7 days and also the figures for other District areas, which although low, had started to steadily rise. In terms of Exeter, the numbers of infections were greater in the St James and Pennsylvania areas, which had a greater prevalence of student halls and residencies.		

	No.	Decision/Action/Message	Who Will action?	When?
		In terms of the University, cases had started to rise approximately two weeks previous, however there was swift action by both public health and the university, in particular the HALO testing system which had given a head start to what was likely to happen. Currently there were mobile testing units at the university campus to add to the capacity already in place. The Board stressed the importance of the dashboard being promoted more widely so that members of the public knew how to locate and access the figures and data, all of which were updated daily.		
Page 4	4.	Local and National Updates The Chief Executive highlighted that there had been lots of discussion on national position and what the next steps might be, however, the national picture was fast changing. Proposals were being discussed to designate parts of country under different watchlist levels, potentially 3 tiers. However, the criteria were not		
		yet known. There could also be a number of measures to support public compliance, for example, a marshals scheme and self-isolation payments, but all remained to be seen alongside a new national framework. Moving forward, the next two weeks were a critical time and it was hoped the local actions already taken would be sufficient enough to avoid further restrictions and / or lockdowns, particularly in the Exeter area.		

No.	Decision/Action/Message	Who Will action?	When?
	 Members asked questions in discussion as follows: care homes, the visiting guidelines and whose decision is was to set the criteria; joint working with adult social care and the daily review of the current position in care homes; the potential for cross contamination, for example, cleaning contractors; and correspondence with the University regarding student jobs, particularly in the care sector. 		
5.	Update on the Return to Schools The Head of Education and Learning (Devon County Council) presented the current position in Devon School's following their return in September. There were 93% of pupils attending school (the national rate being 90%) and for those with ECHP's, the figure was 87% (the national being 84%). The figure for those pupils with social workers was the same as above at 87%. There were confirmed cases of COVID-19 in 15 schools in Devon and those affected schools were detailed in the presentation slides (appended to these minutes).		

No.	Decision/Action/Message	Who Will action?	When?
	timetabled day and a maximum of 30% occupancy in the majority of places.		
	Other actions included 29 physical alterations such as ventilation, risk assessments, screens installed, sanitiser units, increased cleaning regimes, more online, blended with in-person teaching, masks, desks cleaned before and after classes and QR codes on desks for easy identification.		
	There were also a number of preventative measures for students in halls and houses as well as the additional support measures for welfare as well as practical issues such as food and laundry.		
	The University had an advisory group which mirrored Sage and there had been extensive discussion with both staff, trade Unions and the Students Union. The University also welcomed the engagement with other partners including the Council and Public Health.		
	Mr Sean McKay representing the Further Education sector echoed much of what had been said and confirmed to the Board that the organisation for return to college had been planned for many months, supporting students and striking a balance between sustainable learning but in stable and safe manner.		
7.	Community Support and Plan's The Head of Communities (Devon County Council) had circulated a briefing paper prior to the meeting which reported on the 'Team Devon' work to develop, co-ordinate and (with a wider set of VCSE partners) deliver		

No.	Decision/Action/Message	Who Will action?	When?
	the community area to a set of specific circumstances and numbers of cases).		
9.	 Key Messages to be Communicated The Board and Deputy Head of Communications and Media considered the key messages coming from the meeting. These included; a message to the community to continue to be careful and keep up the good work; remember hands, face and space; keeping younger people safe and supporting their wellbeing; there wasn't any room for complacency and social distancing was the key to success; and the importance of continue to work together. 		
10.	Date of Next Meeting Members noted the date of the next meeting as 12 November 2020 @ 11.00am		

Team Devon: Report on community tensions from the DCC Equality Reference Group

November 2020

At its October meeting, members of Devon County Council's Equality Reference Groupⁱ reported increases in community tensions and calls to helplines since lockdown restrictions eased. Alongside requesting police data on hate crimes, members of the group were invited to complete a survey:

Name of organisation responding:	Intercom Trust
Which diversity characteristic do you cover?	LGBT+ (Lesbian, Gay, Bisexual and Trans people)
Number of incidents reported to your organisation since March.	We have had 45 incidents reported in the six months between April and Oct 2020 and 18 referrals through the Victim Care Unit.
How does this compare to previous years? Please provide figures for the same period.	In the 12 months between April 2019 to March 2020 we had 44 incidents and 11 VCU referrals, indicating we have doubled since the pandemic.
Please provide (if you can) any other information about the incidents (i.e. a narrative, brief case studies etc):	Incidents have involved neighbour harassment, assault, abuse and criminal damage.
What do you think is happening, generally?	We have had many reports from clients that they felt more "visible" since lockdown as there have been fewer people on the streets, the requirement to be alone (unless living with others) and public queues for supermarkets etc. Some clients have found new ways of avoiding going out at all. We think that neighbourly tensions have build in areas where people have been locked down in close proximity. We also think that the anti-outsider rhetoric (which was very vocal at times on e.g. social media) has emboldened a social attitude that targets those who appear to be "other".
What do you think could help reduce the number of incidents?	We need to improve confidence in reporting and police response to hate crimes in general. We may also benefit from a push towards community embrace of those who are "other". I would like to see something like a diversity champion publicity / scheme / week in which all those who are against such prejudice and discrimination are made more visible and those who do hold such beliefs can realise they do not speak for the majority.

Name of organisation responding:	Plymouth and Devon Racial Equality Council
Which diversity characteristic do you cover?	Race
Number of incidents reported to your organisation since March:	We have received 61 reports of incidents during this period. Our data base does not easily allow us to break this down, however there was a surge of reports during lockdown and just after.
How does this compare to previous years? Please	The figures for the same period last year was 41, which means that we have seen an increase of around 30% for the same period in 2020.

provide figures for the same period:	
Please provide (if you can) any other information about the incidents (i.e. a	Many of the incidents reported to PDREC during this period occurred at a neighbourhood level and, in a lot of cases, by next door neighbours.
narrative, brief case studies etc):	Ms X, of South Asian origin was referred to PDREC by a social prescribing worker at her GPs surgery because of the high levels of racist abuse she, and her 6 year old daughter, were experiencing. She had contacted her GP because of the affect this was having on her mental health and wellbeing. She said the racist abuse was constant and happened every time she saw her neighbour. She was afraid to leave her flat unless she could be sure that her neighbour was out.
	Ms A is Eastern European, she was walking down the street and a group of people shouted racist abuse at her, telling her to go back to her own country. She was very distressed about this incident, it made her afraid to go out and had a huge impact on her mental health, wellbeing and self-esteem. She was referred to her GP for support. When I met with Ms A she told me that things were getting worse that her colleagues at work did not treat her the same as everyone else and she felt very isolated. She was worried about what was going to happen in the future.
What do you think is happening, generally?	Racist incidents have been on the increase over the past few years, particularly since Brexit. The result of the referendum seemed to 'legitimise racism' as people seem more confident to express their racist views or show hatred. #There has been an increase in nationalist rhetoric nationally and globally, which has increased right wing activity and views. This seems to have been further exacerbated by COVID.
	Initially the hostility was directed towards people who were perceived to be Chinese, but this has increased to anyone who looks different. Research has shown that people from diverse ethnic backgrounds have higher morbidity rates due to COVID, but this is often misinterpreted as more likely to be spreading COVID. I was talking to an African women 2two days ago and she told me that she was in a supermarket over the weekend and people moved away from her, not in a normal social distancing way, but clearly based on her colour and ethnicity. This is a professional and she is telling me that she experiences racism on a regular basis.
	The majority of incidents go unreported to as many people do not see the point in reporting an incident that occurs in the street by someone they do not know. We always encourage people to report via 101 or 3rd Party Reporting, but people tell us that they would spend all their time reporting incidents to the police. We believe that incidents increased during lockdown because people were more forced together even more and it was difficult for people to avoid abusive neighbours.
	In addition to this, frustration and tensions increased in households during lockdown, and in some cases increased hostility towards the 'other'; people who look different. We are concerned that hate crime and racist incidents will continue to rise during the lockdown 2 and as more people face uncertainty about their jobs and face financial hardship.
What do you think could help reduce the number of incidents?	More partnership work between police, housing associations, local authorities and third sector organisation to look at how hate crime can be reduced. An acceptance that racism is a problem and is affecting people's lives and mental health and well-being, rather than a defensive attitude There needs to be a long term strategy that includes intensive anti-racist work in

More funding to tackle racism and support victims.		schools. More funding to tackle racism and support victims.
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Name of organisation responding:	Living Options Devon
Which diversity characteristic do you cover?	Disabilities and Deaf (BSL users)
Number of incidents reported to your organisation since March:	We have received 29 referrals from the Victim Care Unit since March.
How does this compare to previous years? Please provide figures for the same period:	In the same period last year, we have 13 referrals which shows our referrals have more than doubled.
Please provide (if you can) any other information about the incidents (i.e. a narrative, brief case studies etc):	We have mainly supported people with financial abuse, harassment by neighbours, homelessness, arson, criminal damage and hate crime. We are not a specialist domestic abuse service, but we have recently had an increase in these types of referrals for people with disabilities.
What do you think is happening, generally?	We have raised more safeguarding concerns with the local authority in recent months. Where there have been issues within the household such as domestic abuse or self-neglect, lockdown has exacerbated these problems and often by the time people reach our service they are in crisis. We had a recent referral where a gentleman had been the victim of financial abuse by his carer and when he contacted us he'd been left without food or medication for three days and was in a very distressed state.
What do you think could help reduce the number of incidents?	Stronger recognition of a 'code word' to use when someone feels unsafe, for example, I recently saw a hand signal you can give on a video call to indicate that you are experiencing domestic violence which would alert the recipient of the call without your partner noticing. Lockdown is difficult for us all, but this is made all the worse if you do not feel safe within your own home. Food banks have been a lifeline to so many who are struggling to feed themselves or their families as a result of decreased income / job loss due to the pandemic. An outreach service of this kind would be very beneficial to those with mobility issues who struggle to get around and access food banks independently. A strong sense of community and looking out for one another is the most beneficial thing, however this is not always possible when you are experiencing abuse by your neighbours.

Name of organisation responding:	Devon Faith and Belief Forum (Sikh Community)
Which diversity characteristic do you cover?	Religion and belief
Number of incidents reported to your organisation since March (broken down by month if possible):	Average 2 or 3 a month
How does this compare to previous years? Please	Unavailable

provide figures for the same period:	
Please provide (if you can) any other information about the incidents (i.e. a narrative, brief case studies etc):	Due to the visibility of the turban there has been an increase in hate crime.
What do you think is happening, generally?	Due to lack of inclusive multi agency working and usual token work it's very hard to educate the wider public.
What do you think could help reduce the number of incidents?	New innovative ideas and new ideas across the board.

Hate Crime in Devon report

GPMS: OFFICIAL Handling: Public

Between January 2020 and September 2020 there have been 515 Recorded Hate Crimes in Devon.

Whist this is, overall, slightly lower than the previous year, there has been a spike since lockdown easing.

Monthly figures from Devon and Cornwall Police

	Average	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total
2020	57	55	50	50	37	53	54	82	70	64	515
Total											
2019	58	53	61	63	38	80	51	68	55	51	520
Total											

Between January 2020 and September 2020 there was an average of 57 recorded hate crimes per month compared with 58 the previous year.

July 2020 saw a spike in recorded hate crime and the number of recorded hate crimes have continued to be above average since.

A similar spike in recorded hate crime occurred in May 2019, however the subsequent months returned to the expected range.

Hate Crime Type

The table below includes the number of hate crime types identified, not the total recorded hate crime figures. A small number of hate crimes include more than one hate motivator associated. For these crimes each hate crime type has been counted separately.

	Disability	Other/ Unknown	Racial	Religion	Sex or Gender	Sexual Orientation	Transgender
2020 Hate Crime	79	29	271	24	23	106	14
Total %	14%	5%	50%	4%	4%	19%	3%
2019 Hate Crime	46	26	316	31	19	79	19
Total %	9%	5%	59%	6%	4%	15%	4%

The number of racial hate crimes has reduced by 14% (316) when compared to 2019 recorded hate crime figures. Hate crime where a person's disability or sexual orientation is recorded as the motivator has increased when compared to 2019 figures.

Hate Crime Offences

The total number of hate crime offences have remained relatively steady when compared to 2019 figures. Between January 2020 and September 2020 there were 515 recorded Hate Crimes in Devon, with 546 hate crime types identified (a small number of crimes involved more than one type of hate crime such as Racial and Sexual Orientation). In the same time period last year there were 520 recorded hate crimes, with 536 hate crime types identified.

Hate Crime by Sector

The following sectors have been included in this report:

Sector				
Barnstaple Sector				
Coastal & Rural Teignbridge Sector				
Exeter Sector				
Exmouth Sector				
Ivybridge & Kingsbridge Sector				
Mid Devon Sector				
Newton Abbot Sector				
North Devon Sector				
Rural East Devon Sector				
Torridge Sector				
Totnes & Dartmouth Sector				
West Devon Sector				

i The Equality Reference Group supports the County Council's work on equality and diversity by providing advice, feedback, ideas and scrutiny. Membership:

Racial equality representative: Plymouth and Devon Racial Equality Council.

LGB&T+ representative: Intercom Trust (Lesbian, Gay, Bisexual and Trans people).

Disability representative: Living Options Devon/Fusion Partnership (Disabled people and carers).

Gender equality representative: Fawcett Devon.

Older person's representative: Age UK Devon.

Young person's representative: Young Devon.

Religion and belief representative: Devon Faith and Belief Forum.

Trade Unions equality representative.