



# Team Devon Local Outbreak Engagement Board

## Decision and Action log

### TEAM DEVON (LOCAL OUTBREAK ENGAGEMENT BOARD)

Date Thursday, 11 March 2021

#### Present

Councillor John Hart, Councillor Andrew Leadbetter, Councillor Roger Croad, Tony Gravett, Dr Paul Johnson, Councillor James McInnes, Professor Janice Kay CBE, Dame Suzi Leather, Cara Stobart, Sue Wilkinson, Diana Crump, Sean Mackney, Rhys Roberts, Dan Evans, Hannah Reynolds and Councillor David Worden

No.	Decision/Action/Message	Who Will Communicate / action?	When?
20.	<b>Notes of the Previous Board Meeting</b> The notes of the previous Board meeting on 11 February 2021 were endorsed.		

No.	Decision/Action/Message	Who Will action?	When?
21.	<p><b>Urgent Items from the Health Protection Board</b>  The Director of Public Health advised that there were no urgent items for escalation from the Health Protection Board.</p>		
22.	<p><b>Report / Presentation from the Health Protection Board</b>  The Board received a Report from the Health Protection Board on current issues, data and matters for information.</p> <p>Matters included in the Report were as follows:</p> <ul style="list-style-type: none"> <li>- Nationally case numbers had been decreasing (5,296 daily - drop of 20% over the past week), as were the number of deaths and people in hospital, and testing remained very high.</li> <li>- Local Picture: Devon had 180 cases in the past week, (22.4 per 100,000 population with the National average at 61.0). There had been 5 deaths recorded in the last week (0.6 per 100,000 compared to 1.9 nationally).</li> <li>- Trends – age profile: there had been an increase in the 80+ category due to a recent outbreak in a care home.</li> <li>- Across the County – there were some higher case numbers in East Devon due to care home outbreaks.</li> </ul> <p>Further data and information could be found at:</p> <p><a href="#">Coronavirus dashboard and data in Devon - Coronavirus (COVID-19)</a></p> <p><a href="#">Daily summary   Coronavirus in the UK (data.gov.uk)</a></p> <p><a href="#">Interactive Map   Coronavirus in the UK (data.gov.uk)</a></p>		

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	<p>Vaccinations – the uptake rates were very good in Devon across all age groups. Not far off half million first doses being given, with 95% of over 65s vaccinated. In under 65s, ¼ had already been vaccinated (carers, frontline health workers, chronic illnesses). Devon was able to deliver 50,000 first doses per week and second doses were also underway.</p> <p>Learning disability groups – those individuals with a severe learning disability would also receive their vaccination at this stage. There had been some difficulty in determining the severity of individual’s learning disability from GP records, therefore anyone with a learning disability would be vaccinated.</p> <p>Work was continuing to access hard to reach communities by creating COVID-19 Ambassadors and creating films and campaigns around learning disability accessing the vaccine to address any anxieties.</p>		
23.	<p><b>Local and National Updates - Roadmap</b></p> <p>The Board was updated on the Local Outbreak Management Plan (LOMP) being refreshed and resubmitted, to take account of the National Road Map. It was important to highlight that the dates identified within the Government’s Road Map were ‘No Earlier than dates’ rather than written in stone as reopening dates for businesses. There had to be 5 weeks between each step to look at the impact of the relaxation of restrictions, to assess data and case numbers.</p> <p>In Devon, partners were looking at the next 6 – 24 months, understanding that we would not be living in a covid free society for the foreseeable future. The LOMP identified key areas such as:</p> <ul style="list-style-type: none"> <li>- Good surveillance and intelligence, which was essential to manage local outbreaks and any changes to variants of the virus.</li> </ul>		

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	<ul style="list-style-type: none"> <li>- Good test, trace and isolation plans – increased local testing capability, and improved self-isolation plans.</li> <li>- Ensuring businesses, schools, homes etc maintained covid safe requirements for the future e.g. hands, face, space.</li> <li>- Working in partnership to maintain low levels of cases and manage any local outbreaks.</li> </ul> <p>The low rates were positive, however the number of cases had not been decreasing as quickly in the past few weeks and were still above levels seen last summer. It was noted that the number of positive cases included both PCR and Lateral Flow tests being used by businesses, schools and at home.</p>		
24.	<p><b>Vaccinations and Health Inequality</b></p> <p>The Board received a presentation on the mass vaccination inequalities cell (appended to these minutes), which included the following points:</p> <ul style="list-style-type: none"> <li>- Addressing inequalities in uptake across the whole of Devon;</li> <li>- Communications &amp; engagement – insight to inform actions including delivery models;</li> <li>- Focus on socially vulnerable groups;</li> <li>- Regional and national approach to inequalities including a National vaccine delivery plan and SW strategy to increase uptake and equity of access;</li> <li>- Lower uptake was evident in more deprived areas;</li> <li>- In Devon, there was support for those who did not attend/respond to invite; a Vaccine ambassador programme; a Learning Disability, Neurodiversity and Mental Illness Working Group; Homeless &amp; Gypsy, Roma and Traveller working groups; work with care provision cell to support carers, housebound, frontline staff offer and insight work on vaccine hesitancy in staff &amp; promoting uptake; and,</li> </ul>		

No.	Decision/Action/Message	Who Will action?	When?
	<ul style="list-style-type: none"> <li>- Understanding perceptions of the COVID-19 vaccination through online surveys and focus groups in November and December 2020 – the CCG had sought views of more than 1,800 local people to gain insight and understanding of local perceptions and the likely uptake of the COVID-19 vaccination.</li> </ul> <p>Discussion Points with Board Members included:</p> <ul style="list-style-type: none"> <li>- How the learning and understanding gained from completing this work could be shared with others. Officers had fed back into regional and national groups, including the STP Inequalities group, the Fire Service and other regional groups. They were also looking at how DCC and partners could continue this work in all aspects of future work, looking at how inequalities were addressed and how hard to reach groups could be accessed;</li> <li>- Regional workshop – the LGA had contacted DCC to show case this excellent work. The National Vaccination Programme steering Group – work in South West on equalities was sighted as exemplar to the rest of the country and is being used as best practice; and,</li> <li>- The response to the Vaccination Ambassador programme had been very good and engagement was positive.</li> </ul>		
25.	<p><b>Impact of the Budget - Tourism and Hospitality</b>  Head of Economy and Enterprise presented on the Devon Tourism and Hospitality Impacts / Prospects for 2021 (appended to these minutes), which included:</p> <ul style="list-style-type: none"> <li>- Annual economic decline in 2020/21 would be deeper than originally expected, up to around 13-14%, compared to a projection of 8% decline made in April 2020;</li> <li>- The picture for individual sectors remained mixed. Manufacturing and</li> </ul>		

No.	Decision/Action/Message	Who Will action?	When?
	<p>Construction seemed to be operating well, with purchasing indexes positive. Accommodation, Hospitality and parts of Retail sector continued to be badly affected;</p> <ul style="list-style-type: none"> <li>- The third lockdown would mean that recovery would not now properly begin until the second calendar quarter of 2021, with the local economy not reaching its previous size until Jan-Mar 2023 at the earliest;</li> <li>- Unemployment was currently stabilised at around 5%;</li> <li>- Furlough was protecting Devon at present, with claimant count likely to have been at least double without the support. Hospitality, accommodation and wider service sector had between a third and a half of workforce on scheme. Furlough was now extended to Sept 2021 – with a phasing out approach from July to Sept</li> <li>- There had been a surge of bookings on the back of the PM Announcements on Road Map;</li> <li>- VAT – the temporary hospitality sector rate of 5% had been extended to Sept 2021 – and a 12.5% reduced rate until March 2022;</li> <li>- There was £5bn of ‘restart’ grants funding to help businesses re-start trading safely, including up to £18,000 for hospitality /accommodation/leisure. Up to £6,000 for non-essential retail per premises depending on rateable value; and,</li> <li>- Made in Devon scheme – this was a celebration and promotion of local products, goods and services with a marketing campaign and linked to the Buy With Confidence scheme.</li> </ul>		
26.	<p><b>Police Planning and Enforcement</b></p> <p>The Board received an update on police activity including plans around the easing of lockdown. There were strong operational plans in place to deal with key dates and holidays, such as Bank Holiday and Easter. Looking ahead to summer months, the Police were anticipating a very busy summer for Devon.</p>		

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	<p>The Police would continue to engage in communications across the County for those living in Devon as well as visiting on holiday. They were working closely with partners on the Local Resilience Forum (LRF) and tactical coordination group. The public were still being urged to be cautious despite lockdown easing. There would be an increase police presence on roads especially during holiday season, as well as partnership work around Domestic Violence and mental health response vehicles and potentially Street Wardens if funding allowed.</p>		
27.	<p><b>Schools, Testing and a Safe Return</b>  The Board received an update from the Head of Education, which included:</p> <ul style="list-style-type: none"> <li>- All schools were able to reopen on 8 March to all pupils in primary school and a staggered return to secondary schools;</li> <li>- Lateral flow testing was in place at all secondary schools;</li> <li>- The consent rate from parents was between 90-95% for pupils to undertake lateral flow tests which was very positive;</li> <li>- An 80% response rate from schools showed 84% of pupils of all children returned to school. Of those who were eligible to attend (all primary and certain year groups of secondary), 93% of pupils returned;</li> <li>- In Primary schools, 98% of pupils returned (highest attendance rate ever recorded, even before COVID);</li> <li>- Secondary school pupils, there was 53% attendance (with more year groups due to return over the coming weeks); and,</li> <li>- A lot of pupils were happy to be back at school, and there was support in place for those more anxious to return.</li> </ul> <p>The Board wished to record the amazing work of all schools and staff to step up and implement the lateral flow testing procedures for pupils at secondary schools.</p>		

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28.	<p><b>Public Questions / Other Questions for the Board</b>  The Board discussed the recent outbreak in an East Devon Care Home, despite vaccinations given and were advised that individuals could still catch the virus even if vaccinated, and work was ongoing around outbreak control.</p>		
29.	<p><b>Key Messages to be Communicated</b>  The Board and Head of Communications and Media considered the key messages coming from the meeting.</p> <p>These included:</p> <ul style="list-style-type: none"> <li>• Case numbers continued to fall in all age groups and Devon continued to have one of the lowest rates in the country;</li> <li>• Numbers were now the same as late September last year;</li> <li>• There was low and falling numbers of patients in local hospitals and fewer deaths;</li> <li>• The Vaccination programme was going well and generally proving highly successful with the number of new cases and severity of illness much reduced;</li> <li>• Covid was still in the community however, with continued sporadic outbreaks related to workplaces, care homes and other settings – caution was needed;</li> <li>• Schools had now re-opened for all pupils and the impact would be closely monitored;</li> <li>• Regular testing, using the rapid lateral flow tests, of secondary school pupils, college students and all teachers;</li> <li>• Community (asymptomatic) testing continued to be rolled out across the county for other key workers who could not work from home and parents of school-aged children to access regularly; and,</li> </ul>		

No.	Decision/Action/Message	Who Will action?	When?
	<ul style="list-style-type: none"> <li>• Launch of the NHS home delivery rapid lateral flow test which could be ordered online.</li> </ul> <p><b>Key Public health messages</b></p> <p>No vaccination could be 100% effective and people needed to continue to follow the guidelines:</p> <ul style="list-style-type: none"> <li>• Stay at home as much as possible;</li> <li>• If you really need to go out, stay local and wherever possible and avoid contact with others; and,</li> <li>• Follow the rules around hands, face and space.</li> </ul> <p><b>Hospitals and health service</b></p> <ul style="list-style-type: none"> <li>• Hospital admissions continued to reduce and were now very low;</li> <li>• The Nightingale hospital was on standby but set to close for Covid patients by April in line with national plans; and,</li> <li>• 111 First service was being promoted to help manage non-urgent cases and ensure people get access to care at the right time in the right place.</li> </ul> <p><b>Mass vaccination</b></p> <ul style="list-style-type: none"> <li>• Vaccinations were on track and going well to have all JVEI groups 1-9 vaccinated by end March;</li> <li>• Over 490,000 people in Devon had now received the first dose of the vaccine;</li> <li>• All vaccination centres were moving through the JCVI priority groups as quickly and safely as possible in priority order;</li> <li>• Around 95% of over-65s in Devon had been vaccinated;</li> </ul>		

No.	Decision/Action/Message	Who Will action?	When?
	<ul style="list-style-type: none"> <li>• 80% of health and social care staff had received the vaccine; and,</li> <li>• There was a campaign to reach out to underrepresented groups including BAME communities and people in rural areas.</li> </ul> <p><b>Key public messages</b></p> <ul style="list-style-type: none"> <li>• Being vaccinated reduced your risk of becoming seriously ill from COVID. But you could still catch it and pass it on so everyone must continue to adhere to restrictions and public health guidance;</li> <li>• People needed to book an appointment before turning up at a vaccine centre and let them know if they could not attend to reduce wastage;</li> <li>• The over 65s, clinically extremely vulnerable and unpaid carers could now book an appointment. This could be done online and you didn't need to have received a letter or have your NHS number. You could also call 119 between 7am – 11pm (seven days a week). The online system allowed people to choose a suitable time slot and location.</li> <li>• Otherwise, the NHS would get in touch with you when it was your turn;</li> <li>• You would not be offered a choice of which vaccination you receive – both approved vaccines were rigorously tested, safe and effective; and,</li> <li>• Individuals should not call their local hospital or GP practice about getting the vaccine – the NHS would contact them directly when it's their turn.</li> </ul> <p><b>Care Homes and vulnerable people</b></p> <ul style="list-style-type: none"> <li>• Significant outbreaks in care homes continued to fall and the severity of illness and deaths were much reduced;</li> <li>• Nearly all (93%) of care home residents (93%) and 83% of staff had received the first dose vaccination and were now moving onto to second doses;</li> <li>• Nominated family members could now visit their relatives in care homes;</li> </ul>		

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	<ul style="list-style-type: none"> <li>• There remained a small number of significant outbreaks of concern which were being monitored closely;</li> <li>• The Vaccination programme continued to reach out to housebound and other vulnerable groups; and,</li> <li>• The campaign to boost uptake by health and social care staff was ongoing.</li> </ul> <p><b>Schools and education</b></p> <ul style="list-style-type: none"> <li>• All schools in Devon were now open to all pupils, with secondary schools returning on a staggered basis;</li> <li>• Early indication was that attendance was high (98% in primary schools);</li> <li>• Secondary schools were conducting rapid lateral flow testing of pupils;</li> <li>• There was a high consent rate for testing (90-95%); and,</li> <li>• Children and parents were being actively encouraged to take up the offer of rapid testing including home testing.</li> </ul> <p><b>Local Rapid Testing and Contact Tracing</b></p> <ul style="list-style-type: none"> <li>• A community rapid testing programme for key workers who couldn't work from home, parents of pupils and those supporting vulnerable people continued to be rolled out across the county;</li> <li>• These tests were to help stop the spread of infection by identifying asymptomatic people and getting them to isolate and/or seek an NHS PCR test;</li> <li>• Several sites across the county were now operational plus a number of mobile units;</li> <li>• This testing was picking up positive cases; and,</li> <li>• A local contact tracing service continued to pick up people missed by the national Test and Trace programme.</li> </ul>		

No.	Decision/Action/Message	Who Will action?	When?
	<p><b>Key public message on rapid Lateral Flow Testing</b></p> <ul style="list-style-type: none"> <li>• These were tests to find cases and NOT a test to release. A lateral flow test was useful for picking up asymptomatic positive cases so that people could isolate and not spread to others. A negative test did not give people a green light and they must continue to adhere to national restrictions and public health guidance at all times</li> </ul> <p><b>Policing and enforcement</b></p> <ul style="list-style-type: none"> <li>• There had been a slight increase in reporting of non-compliance;</li> <li>• Planning was ongoing to help manage the safest possible opening up from lockdown, increased recreation and travel/tourism post Easter – including Covid-safe compliance, traffic issues, anti-social behaviour, etc; and,</li> <li>• Working on co-ordinated public messaging campaigns and engagement through the LRF.</li> </ul> <p><b>Business and economy</b></p> <ul style="list-style-type: none"> <li>• There had been a huge impact on tourism/hospitality sector which was a large part of Devon’s economy;</li> <li>• £1.8bn cumulative loss to Devon tourism and leisure economy over the past 12 months;</li> <li>• Working together with the sector on active support programmes;</li> <li>• Significant visitor bookings had been reported for this year; and,</li> <li>• Some friction with host communities was anticipated.</li> </ul>		

No.	Decision/Action/Message	Who Will action?	When?
30.	<b>Date of Next Meeting</b> Members noted the date of the next meeting as 15 April 2021 @ 11.00am		





Devon

Clinical Commissioning Group

# Mass vaccination Inequalities Cell

Sarah Ogilvie – Consultant in Public Health, DCC (representing the three Public Health teams on the Mass Vaccination Programme Board)

Nellie Guttman – NHS Devon CCG Communications Team

## An introduction to the Inequalities Cell

- **Main areas of focus:**
  - Addressing inequalities in uptake across the whole of Devon
  - Comms & engagement – insight to inform actions inc. delivery models
  - Focus on socially vulnerable groups
  - Escalations and risks
  - Regular challenge to Programme Board and Cells
- **Links to:**
  - Clinical and Operational Cell
  - Programme Board
  - Devon Ethics Group
  - New governance arrangements
  - Regional and national work



# Regional and national approach to inequalities

## National approach:

- National vaccine delivery plan – includes LA role in promoting and supporting vaccine confidence
- Prioritisation paper – based on highest risk of mortality (age highest risk factor)
- National PHE health inequalities group - have published strategy for immunisations - not specific to covid but tools to help approach
- National NHSE task and finish group has developed resources – translated, BSL, audio, easy read, guidance on consent

## Regional approach:

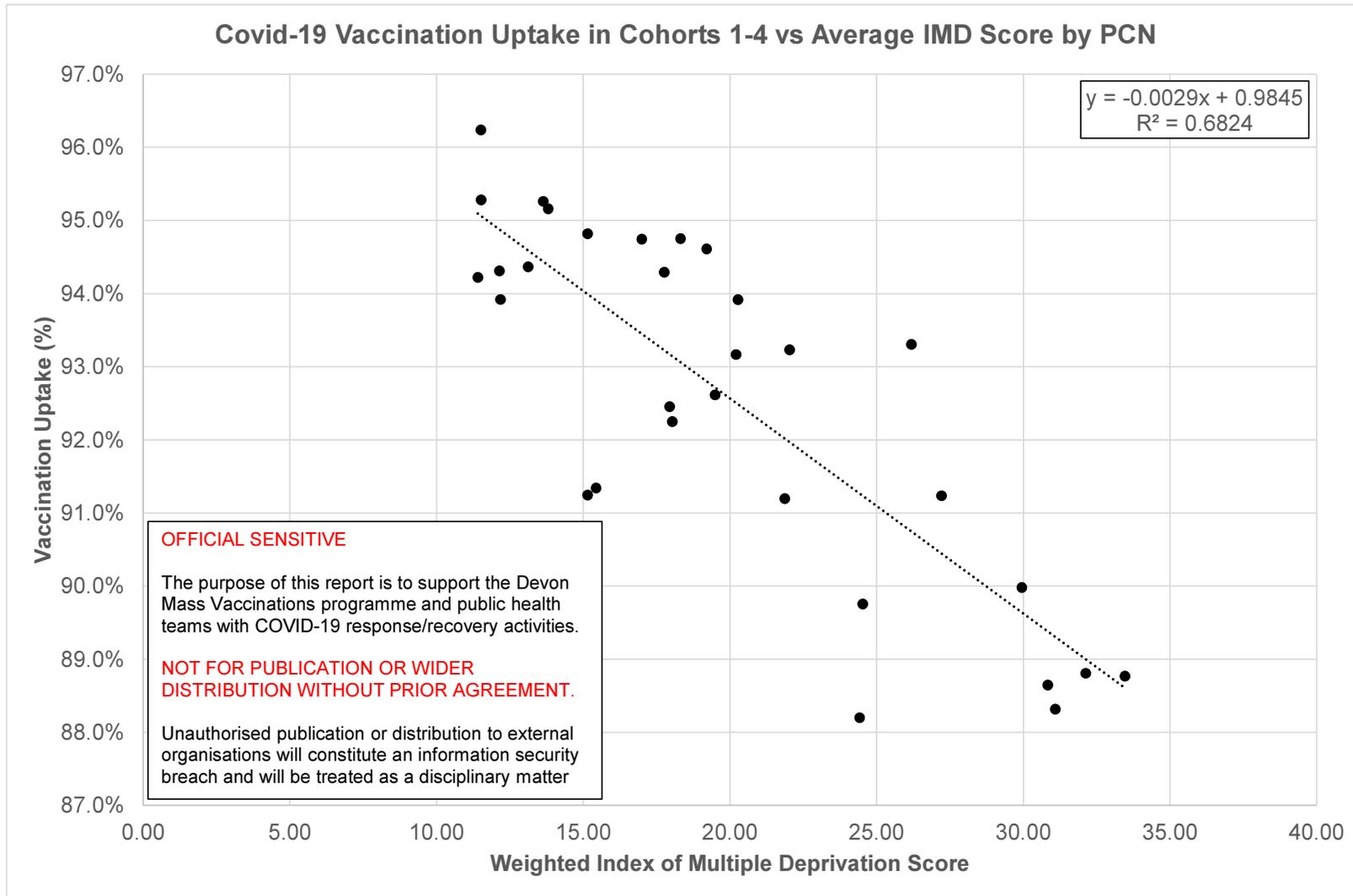
- SW strategy to increase uptake and equity of access:
  - systems leadership
  - supporting local action
  - comms and resources
  - data monitoring and analysis
  - supported by SW regional network and toolkit of resources
  - regional comms and engagement network



## What do we know already?

- Lower uptake evident in more deprived areas
- For cohorts 1-4 rates of unvaccinated individuals in most deprived areas two times higher
- Inequalities greater in clinical cohorts than age cohorts
- PCNs in Plymouth, Torbay and Exeter experiencing lowest uptake
- Inequalities exist within all PCNS and between population groups





## Current progress in Devon

- Support for those who do not attend/respond to invite
  - Professional toolkit, public facing website, inclusion principles & guidance, individualised support
- Vaccination site inclusion checklist & training
- Vaccine ambassador programme (media work)
- Learning Disability, Neurodiversity and Mental Illness Working Group
  - Pathway for LD, SMI, unpaid carers (support from primary care liaison nurses)
  - Comms and engagement regarding primary care LD register
  - Working with DPT and Livewell regarding outpatient & inpatient offer
  - Pop up / dedicated clinics
- Homeless & Gypsy, Roma and Traveller working groups – roving model development
- Working with care provision cell to support carers, housebound, frontline staff offer
- Insight work on vaccine hesitancy in staff & promoting uptake
- Comms & engagement strategy



## Examples of cell risks and escalations

- Lack of understanding of GP non-reg population
- Data challenges preventing targeted work – data system now provides data on ethnicity and deprivation but ethnicity coding issues
- Ongoing concerns that services are accessed digitally and vaccine uptake/opportunities are promoted online/via social media
  - flagged as particular issue for Gypsy, Traveller and Roma communities nationally
- Evidence social care staff not taking up vaccine due to concerns about pregnancy/fertility although our staff uptake is generally better than other STPs
- Lack of central depository nationally for all resources to be accessed in one place



## Understanding perceptions of the COVID-19 vaccination

- CCG has sought views of more than 1,800 local people to gain insight and understanding of local perceptions and the likely uptake of the COVID-19 vaccination
- Online surveys and focus groups in November and December 2020

### Objectives

1. Prepare for the rollout of the national campaign by identifying **target groups**
2. Understand what **motivates** people to get the vaccination and what barriers there are
3. Identify trusted **sources of information** to ensure most effective channels are used
4. Identify what additional needs may be required to support uptake of the vaccine for people from **BAME communities** and those with **learning disabilities and autism**



# Key findings

## 74% of respondents (1,334) – ‘Adopters’

- Mostly female, aged 45-75 years old
- Want to play their part in combatting COVID-19 and getting back to ‘normal’

## Only 2% of respondents (42) – ‘Resistant’

- All under 65, and predominantly female
- Don’t consider themselves at risk and don’t want the vaccine
- Barriers included needing more assurance and not having enough evidence to convince them

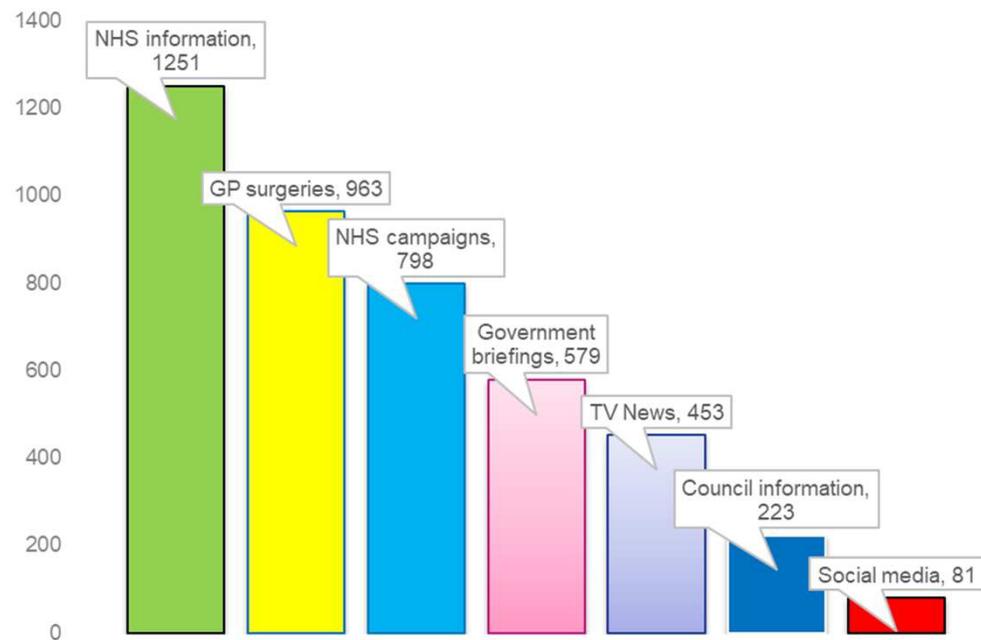
## 19% of respondents (350) – ‘Hesitant’

- Mostly female, aged 46-65 years old
- Hesitation related to personal health conditions and what impact vaccination could have on these
- Some concerns around pregnancy, family planning and breast feeding and long-term effects

## Less than 2% of respondents (31) – ‘Rejectors’

- Age ranges from 26-85 and mix of male and female
- Opposed to vaccinations in general
- Personal experiences, lack of belief in vaccinations or trust due to vaccine development speed

## Trusted information sources



# Focus group findings

## Autism and learning difficulties

- Generally, people feel positive about the vaccine
- Information about what to expect at the vaccination appointment would help allay anxieties
- Delivering vaccinations in safe and familiar environments would support vaccine uptake
- Clear information in accessible formats (e.g. easy read) are required.



## Focus group findings

### Black Asian and Minority Ethnic communities

- Generally, people are keen to receive the vaccine
- Some concerns around vaccine safety and the testing/development process
- Hesitancy stems from a lack of trust in the system and the drug companies and potential unknown long-term side effects on their children
- Recognition that community champions would support increased uptake of the vaccine



## Recommendations

1. **Promote national vaccination uptake campaign** – focus on ‘getting back to normal’ and ‘combatting COVID-19’
2. **Utilise trusted sources of information** e.g. Devon vaccination briefing
3. **Support for those with learning disabilities** – produce tailored materials to reassure individuals and carers
4. **Support uptake amongst the BAME community** – engage with communities to understand anxieties, develop ‘vaccine champions’ and identify clinical leaders from BAME communities



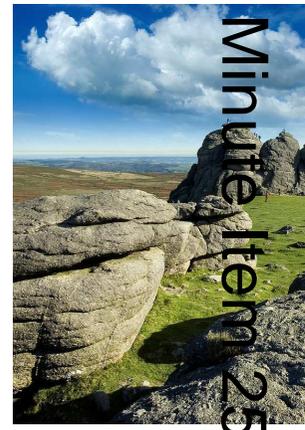
# What now?

## Implementing the recommendations

Promote national vaccination uptake campaign	Utilise trusted sources of information	Support for those with learning disabilities	Support uptake within BAME communities
Social media campaign	NHS website and social media campaign	Easy Read information about the vaccine	Ensuring access to translated materials
Marketing campaign	NHS Newspaper	A film about what to expect when you have your vaccine	Outreach work, engaging with local faith groups and community leaders
National and local resources	Weekly Vaccination Bulletin and webinars		Developing Vaccine champions, specifically from diverse communities - 5 with more people coming forward
			Working with media to encourage people to come forward for vaccination



# Devon Tourism and Hospitality Impacts / Prospects for 2021



# Devon visitor economy pre-pandemic



## Devon total economy Devon, including Torbay and Plymouth 2018:

- £25bn (larger than cities of Edinburgh, Glasgow or Manchester)

## Visitor Economy (2019)

- Total staying visitor nights: **24m**
- Total day visits: **30m**
- Total visitor related spend Devon: £2.5bn
- Total tourism supported business turnover: **£3.5bn**
- Total employment supported: **60,244 FTE**
- % of all employment: 10+%

## SW Peninsula figures (2019)

Total visitor related spend: £7.3bn

Contains Ordnance Survey data.  
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# GVA and Growth – Key Messages

Annual economic decline in 2020/21 will be deeper than originally expected, up to around 13-14%. Compare to a projection of 8% decline made in April 2020.

Early indications however that impact of third lockdown not as severe as March / April period. Whilst will slow recovery, many business demonstrating a degree of adaptation this time around.

Picture for individual sectors remains mixed. Manufacturing and Construction seem to be operating well, with purchasing indexes positive. Accommodation, Hospitality and parts of Retail sector though continue to be badly affected.

Recovery in 2021/22 and beyond expected to be slightly quicker than originally forecast, with vaccine roll out going well and some uncertainty removed around BREXIT.

However, third lockdown will mean that recovery won't now properly begin until second calendar quarter of 2021, with the local economy not reaching its previous size until Jan-Mar 2023 at the earliest

Business cashflow and stability still extremely difficult in some sectors. Half of all hospitality, accommodation and other service sectors business coping with less than 3 months cashflow.

# GVA and Growth – Key Messages

Unemployment currently stabilised at around 5%. Redundancy levels also relatively stable. Youth employment rates rose in January – against the national picture, and Torridge and North Devon saw rises in over 50 claimant count – against national trend.

Much of this stability however due to furlough, with around 12% of workforce on the scheme in January

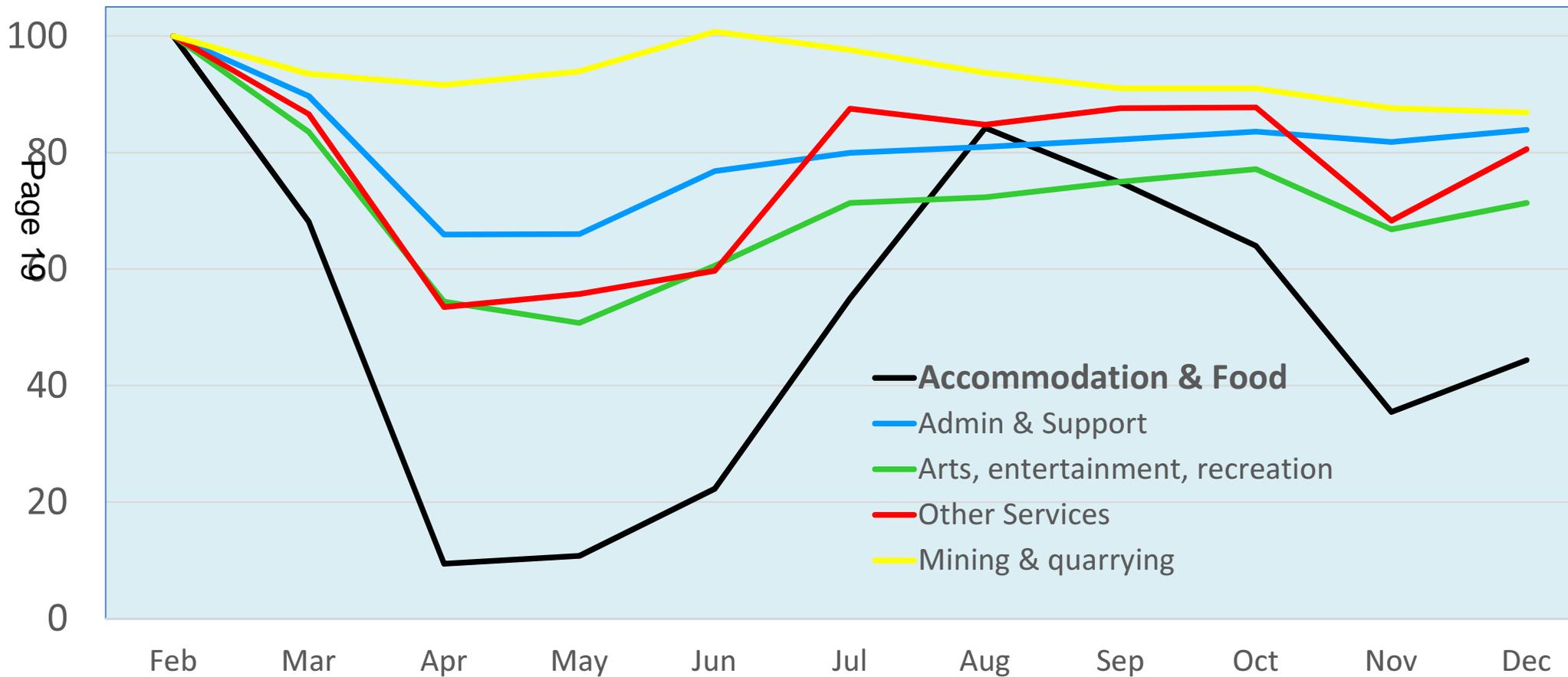
Furlough is protecting Devon at present, with claimant count likely to have been at least double without the support. Hospitality, accommodation and wider service sector have between third and a half of workforce on scheme.

Several areas remain more vulnerable. Northern Devon and Torbay / Teignbridge more exposed to issues than other places. Furlough however shielding the worst impacts.

andemic hits

# VA by sector – 5 most impacted sectors UK

Feb = 100



# Furlough – England vs Devon end of 2020

## in England with highest percentage of employees furloughed

	CJRS Percentage of Employees Furloughed	Reason	Rank (out of 312)
keland, Cumbria	21.6%	Tourist Area	1
, London	19.7%	Accommodation & Food?	2
mbria	18.2%	Tourist Area	3
, London	18.1%	Accommodation & Food?	4
v, London	18.1%	Accommodation & Food?	5
	17.6%	Gatwick Airport	6
ndon	17.6%	Accommodation & Food?	7
	17.3%	Tourist Area	8
ondon	17.1%	Accommodation & Food?	9
ndon	17.0%	Accommodation & Food?	10

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## Devon – Comparison of Percentage of Employees Furloughed

Area	CJRS Percentage of Employees Furloughed	Reason	Rank (out of 312)
Torbay UA	17.3%	Tourist Area	6
South Hams	16.2%	Tourist Area	7
North Devon	14.9%	Tourist Area	10
East Devon	14.5%	Tourist Area	11
Teignbridge	14.2%	Tourist Area	12
Torrige	13.6%	Tourist Area	13
Devon	13.5%	On aggregate – tourism	14
West Devon	13.3%	Tourist Area	15
England	12.5%	NA	16
Exeter	11.7%	NA	17
Plymouth UA	11.0%	NA	18
Mid Devon	10.5%	NA	19

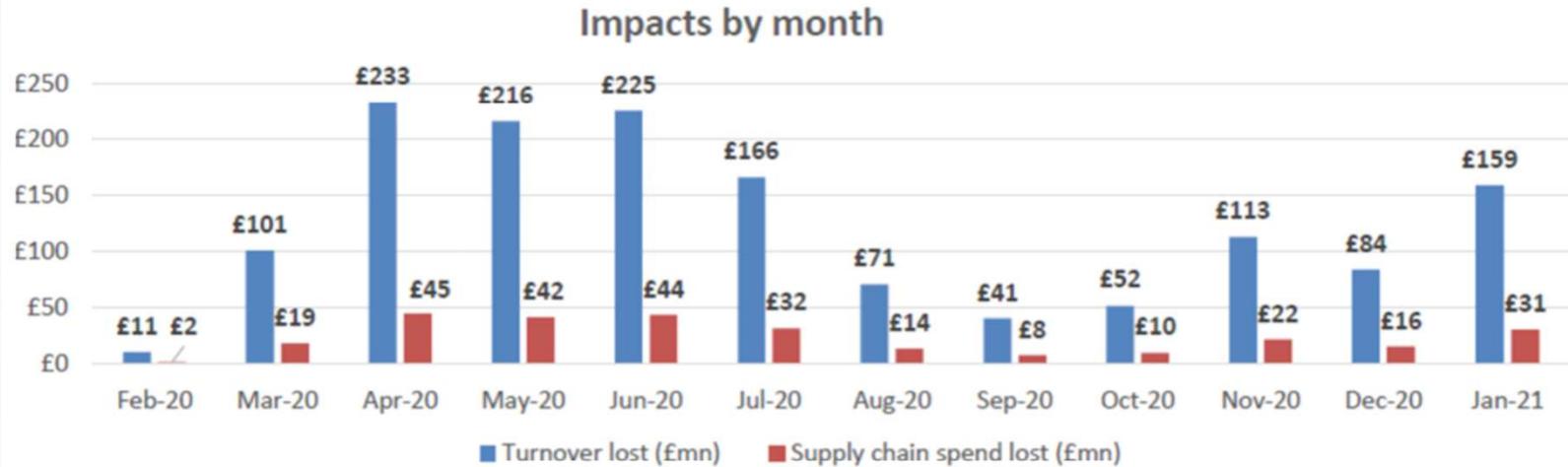
# Businesses with <3 months cashflow - UK

Industry	04/05 - 17/05	27/07-09/08	21/09-04/10	16/11-29/11	14/12-27/12	25/01-07/02
Manufacturing	37.6%	21.3%	23.6%	26.2%	27.6%	27.2%
Water Supply, Waste Mgt	48.4%	31.6%	33.1%	29.0%	32.3%	24.8%
Construction	56.8%	32.3%	32.9%	37.8%	40.1%	38.8%
Wholesale And Retail Trade	41.8%	22.5%	20.2%	24.8%	27.6%	27.8%
Transportation And Storage	49.4%	28.2%	26.6%	26.0%	27.8%	27.6%
<b>Accommodation And Food</b>	<b>66.0%</b>	<b>39.9%</b>	<b>40.1%</b>	<b>48.7%</b>	<b>51.7%</b>	<b>51.3%</b>
Information And Comms	*	19.3%	21.6%	24.8%	24.1%	21.4%
Real Estate Activities	37.8%	21.5%	28.2%	31.1%	26.1%	27.7%
Professional And Technical	46.8%	23.5%	23.1%	24.7%	28.0%	27.8%
Administrative And Support	51.8%	33.6%	34.0%	35.6%	36.7%	35.2%
Education	35.9%	19.2%	24.2%	19.6%	24.2%	23.2%
Human Health And Social Work	35.4%	25.4%	28.7%	27.9%	30.5%	29.1%
<b>Arts, Entertain And Recreation</b>	<b>58.2%</b>	<b>36.6%</b>	<b>25.7%</b>	<b>32.2%</b>	<b>36.0%</b>	<b>37.8%</b>
Other Services			43.0%	53.2%	45.1%	52.8%
All Industries	46.5%	26.8%	27.0%	30.1%	32.1%	31.6%

Source : Business Impact of Coronavirus Survey (BICS)

# Devon, Plymouth and Torbay - tourism sector impacts

## Key results – Economic Impacts Due to Covid by Month 2020



# Forward View on Bookings and Business Confidence



Strong Forward Bookings – Covid Safe Accommodation – more bookings being reported this January than in January 2020 for Air B&B – for example

Surge of bookings on the back of the PM Announcements on Road Map – strong and short lead in for self catering /camping

serviced Accommodation slower, but starting to see significant bookings from July onwards

Coastal areas and National Parks are areas of highest demand

Rising numbers of day visitors being seen and expected across Easter Holidays – 12<sup>th</sup> April onwards

Friction in some locations from second home owners and host communities

Shoulder months a concern for the sector – overseas travel may be a draw and bookings tail off post Summer

Some anecdotal information to show overseas visitors interest – USA in particular – attracted by strength of vaccination programme – coastal and open spaces are most searched for and less interest in Cities

# Issues and opportunities

**When lockdowns end people are going to want a holiday**

**We need business survival for visitors to return to**

**We need to maintain and enhance tourism sector skills and quality to encourage return visits**

**We need a clean, tidy, attractive, functioning public realm for visitors to use and to encourage return visits**

**Interrelated offer – if one anchor business, or attraction disappears it can take others with it and impacts the wider visitor offer**

# National Support – Budget Announcements for the Sector



urlough now extended to Sept 2021 - a phasing out approach from July to Sept (Businesses pay a contribution)

AT temporary hospitality sector rate of 5% extended to Sept 2021 - 12.5% reduced rate until March 2022  
Business Rates – retail, leisure and hospitality – continues discount of 100% until end June 2021 - a 66% discount will continue until the end of March 2022

£5bn of 'restart' grants funding to help businesses re-start trading safely, including up to £18,000 for hospitality /accommodation/leisure. Up to £6,000 for non-essential retail per premises depending on rateable value. Distribution via District Councils.

arts, culture and sports Fund – additional £408m

Traineeships and Apprenticeship support, including increased £3k cash incentive for employers taking on an apprentice and a new flexi-apprenticeship 'Flexi-job' scheme from January 2022 – multiple sector working

Corporation tax rise – for co's with small profits rate will stay at 19%

Unincorporated businesses (not corporate groups) can get relief for up to £2m losses in each of 2020/21 and 2021/22

levelling up fund (£4.8bn) and focus on regeneration opportunity to support infrastructure and support  
Community Renewal (220m) –pilot for replacing EU funds – focus on hard hit communities and places

# Safe Re-opening and Recovery

## Safe re-opening

12<sup>th</sup> April – midway through Easter holidays - first major unlocking for the sector

National Group – beaches and re-opening;

Co-ordinating Task and Finish group across Heart of the South West – Tourism Businesses, DMOs, Police, Health, Town and Parish Councils, local authority partners

Clear lessons from Good Practice Network - focus on support to business and clear communications

Funding support for local areas to support visitor management – apps / tickets for beaches, marshals,

£5bn of ‘restart’ grants – Districts starting to distribute – replace Local Restrictions Grants

Monitoring and ongoing intelligence – monthly survey will seek to capture business confidence and booking levels – time lag – rely on anecdotal feedback for real-time position

## Team Devon Economic Recovery Priorities – Prospectus published last July

Made in Devon – celebration, promotion of local products, goods and services – food and drink and hospitality – marketing campaign and linked to Buy With Confidence scheme; local branding – Made in Dartmoor as an example

Upskilling – piloted set of short courses for sector – rolled out – customer care, accountancy, digital – tourism, hospitality, retail

# Thank you!

