

## Team Devon Local Outbreak Engagement Board

**Decision and Action log** 

TEAM DEVON (LOCAL OUTBREAK ENGAGEMENT BOARD)

Date Thursday, 21 October 2021

## Present

Councillor John Hart, Councillor James McInnes, Councillor Roger Croad, Steve Brown, Dr Paul Johnson, Diana Crump, Rhys Roberts, Cara Stobart, Sue Wilkinson and Councillor David Worden

## **Apologies**

Councillor Andrew Leadbetter, Tony Gravett, Dame Suzi Leather, Chris Lindsay and Janica Birch

No.	Decision/Action/Message	Who Will Communicate / action?	When?
52.	Notes of the Previous Board Meeting - 23 September 2021 The notes of the previous Board meeting on 23 September 2021 were		

No.	Decision/Action/Message	Who Will action?	When?
	endorsed.		
53.	Urgent Items from the Health Protection Board The Director of Public Health advised that there were no urgent items for escalation from the Health Protection Board.		
54.	Report / Presentation from the Health Protection Board  The Board received a Report from the Health Protection Board on current issues, data and matters for information.  Matters included in the Report were as follows:  There were rising cases in England and across the South West which currently had rates higher than the England national average – predominantly driven by young people testing positive in secondary and primary schools.		
	<ul> <li>The National Picture showed the case rates were increasing (17% in the past week), with the number of deaths also increasing and gradual increases seen in the number of patients admitted to hospital.</li> </ul>		
	<ul> <li>Local picture – Devon had 3,671 cases in the past week (452 per 100,000) which was in line with the national England rate. Large increases in rates had been seen in the 0-19 age group across Devon, as well as slight increases in all age ranges. Spikes in sixth form and secondary school ages groups had been seen over the summer and</li> </ul>		

No.	Decision/Action/Message	Who Will action?	When?
	into September.		
	<ul> <li>Identification of False Negative PCR cases from a laboratory north of England. During the last 6-7 weeks, 400,000 tests had been sent to the laboratory, and approximately 200,000 were tests from the South West; whilst it had impacted a number of individuals within the South West, the overall numbers were low. Individuals who may have been affected had been identified and contacted; and where necessary new tests had been carried out.</li> </ul>		
	<ul> <li>Schools data - rates in the South West were higher than the national average with increases seen in secondary and primary school pupils. There were concerns around half term and children mixing, and the return to schools after half term.</li> </ul>		
	All data was available on the following maps.		
	UK summary: <u>Daily summary   Coronavirus in the UK (data.gov.uk)</u> Devon Dashboard: <u>Coronavirus dashboard and data in Devon - Coronavirus (COVID-19)</u> Devon detailed age breakdown: <u>Cases in Devon   Coronavirus in the UK (data.gov.uk)</u> Interactive Map: <u>Interactive map of cases   Coronavirus in the UK (data.gov.uk)</u>		

No. Dec	ision/Action/Message	Who Will action?	When?
55. School The the Government on ave in July School Exposured Adams provided around the context of the context	Schools Planning & Admissions Manager updated Board Members on situation in Devon's Schools. The start of term had seen a shift in vernment Policy to maximise the number of children in class receiving et-to-face education. Government had produced a Contingency arbreak Framework, which allowed schools to bring in additional policy to all with increasing case numbers. Schools had been experiencing rising inbers of cases, particularly in secondary education, however Devon attinued to see strong attendance which was above the national erage - currently around 92% in Devon compared to approximately 89% uly 2021.  The cols were able to bring forward measures themselves if they were deriencing a significant rise in case numbers within their school – whilst reking in collaboration with the Local Authority and Public Health team. Editional funds had been secured for schools through the Outbreak magement Fund which had helped staffing issues within schools, and the vision of remote learning for pupils.  The school Transport issues had been experienced around Covid sures, anxiety around fuel, the shortage of drivers and the recent ential stagecoach strike. The Authority continued to manage pressures und the lack of staff and drivers, who had now been included as part of frontline staff eligible for booster jabs and the flu jab.		

No.	Decision/Action/Message	Who Will action?	When?
56.	Local and National Updates The Board heard that the Council had agreed a further £8.5 million package of support for local communities to deal with the ongoing impacts of COVID-19 over the winter and beyond (full details attached to these minutes).		
	It included over £5 million of extra support for schools, colleges and the University of Exeter, £1.5 million additional support for outbreak management in care settings, a £1 million fund for voluntary sector groups to support local community projects aimed at supporting vulnerable people, as well as schemes aimed at young people and rough sleepers.  It was part of the Council's £20 million share of a national Contain Outbreak Management Fund (COMF), which all local authorities accessed, to help manage the pandemic and its impact on local communities.  So far, the funding had been spent on vital elements of the response, such as local community testing facilities and contact tracing; infection prevention and control in care homes and other settings; vaccination outreach assistance; support for youth services, early years and care settings; public mental health support; and rough sleeper support.		

No.	Decision/Action/Message	Who Will action?	When?
57.	NHS Update - Pressures and Vaccination Programmes The Board received update on matters impacting on the NHS and CCG.		
	Current pressures		
	The South West had seen an increase rate in Covid admissions into hospitals, which had been steadily increasing since September, with high predicted rates for the winter season.		
	The Chair of the Devon CCG advised that hospitals could just about cope with 150 Covid beds if other services were cancelled; however projections showed that increasing to 200 covid beds would be more than hospitals could cope with under current resources.		
	All other non-Covid services were experiencing extreme pressures and facing an increase in demand. The NHS was under more pressure now in comparison to last year and previous lockdowns, with the combination of the flu season and Covid cases putting extreme pressure on NHS workers and resources.		
	It was also noted that the number of people waiting for routine operations had also risen significantly, with an extra 2,000 patients now having waited longer than a year for their appointments.		
	Vaccine programme for 12-15 year olds		
	The School immunisation Team had not yet updated the vaccination data on the health records, but was expected to do so by the end of this week.		

<b>)</b> .	Decision/Action/Message	Who Will action?	When?
	However, it was noted that they were still on target to have offered vaccines to all 12-15 year olds by end of November – the uptake was likely to be lower than anticipated, driven by positive test results for Covid as individuals could not have the vaccine for some time after being positive with Covid. Some catch up would therefore need to take place. The Board was advised that the large vaccination sites would be opening up to 12-15 year olds during half term, rather than just waiting for school vaccinations. These included Greendale, Homepark and the English Riviera Centre for vaccination for 12 – 15 year olds from 23 October.		
	Booster vaccine programme		
	With regard to the overall vaccination programme, data showed that there was 2 ½ times more infections in the community than in December 2020, however hospitalisation numbers were half than those seen in December 2020 – therefore the vaccination programme had had a significant impact on the numbers of people being referred to hospital with the virus, especially in over 80 category – which was very positive news. 40% of those individuals in hospital with Covid had not been vaccinated, particularly within the younger age groups.		
	In response to Cllr Bailey's question: The Booster Vaccination take-up had not been as high as hoped. There were plenty of empty slots and enough capacity to give boosters, however there had not been the numbers of people coming forward to receive them. 42% of those eligible had received their booster vaccination, appointments were still available for those 58% who had yet to receive it. Devon County Council and the NHS were working on communications to the community to encourage		

No.	Decision/Action/Message	Who Will action?	When?
	individuals to come forward for their booster vaccine.		
	Flu vaccine programme		
	Up to date data on flu vaccinations was currently unavailable; however it was believed that uptake was lower than this time last year in all groups apart from health and social care workers. This was believed to be due to less availability of vaccines and less ability to deliver vaccines, with the supply not as rapidly available as in previous years. There had also not been the usual national campaign for flu vaccination compared with previous years – affecting overall the uptake numbers.		
58.	Adult Social Care - Pressures and Sufficiency The Locality Director (Care and Health) updated the Board on the sufficiency of the adult care and health provider market in 2021 which identified the most significant market sufficiency issues, including the impact of Covid-19, and outlined actions underway to support and develop the market.		
	The Report highlighted that the adult care and health market was fragile and challenged due to the ongoing impacts of the Covid-19 pandemic and uncertainty linked to Brexit. Market issues that were present prior to the pandemic had been exacerbated and some risks may not be fully understood for many months.		
	Key areas addressed by the Report included Business Resilience, with		

No.	Decision/Action/Message	Who Will action?	When?
	providers facing long-term sustainability issues; Workforce pay and conditions, and increasing vacancy rates; and increasing complexity of need, changing demands and fragile carers.		
	Section 3 of the Report outlined some of the actions to address market sufficiency issues. There were a number of short to medium term actions underway to support providers, summarised below, but detailed project plans, with associated milestones and timeframes for each of these actions were in train, with Section 4 of the Report providing more detail on the issues relating to each sector of the market.		
	<ul> <li>Care Homes - including a care home fee model review, development of specialist dementia and complex care solutions with partners and a review of capacity of care homes for people under 65 with complex needs;</li> </ul>		
	<ul> <li>Personal Care – including implementing new models to meet care needs, consideration of incentives to the workforce, use of agency staff from outside the County to backfill shortages in the short term and the potential of a Teckal to support the market;</li> </ul>		
	<ul> <li>Housing with Support – develop a specification and pricing structure under a new contract, stimulate targeted development of housing, develop short-term crisis support for people with complex needs to enable them to live in their community;</li> </ul>		
	Day service - including developing outreach hubs, use of private dwellings, and test new solutions learning from innovations developed		

No.	Decision/Action/Message	Who Will action?	When?
	in the pandemic;		
	<ul> <li>Enabling - improve market oversight and data for monitoring, new contracting arrangements and support workforce recruitment and retention.</li> </ul>		
	<ul> <li>Replacement care - including identifying quick wins for carers support, based on need and develop commissioning strategy to achieve ambitions; and</li> </ul>		
	Workforce (LoveCare programme) - immediate actions with the NHS were being developed to improve career pathways, recruit overseas nurses and develop a bank of temporary staff to help cover gaps, celebrate and value the workforce through Proud To Care and the Appreciative Inquiry (December) and develop an Integrated Workforce Strategy across the Integrated Care System (Oct).		
	Alongside these actions, the four key areas of development required to support the market over the longer-term were highlighted below. Workplans with associated timeframes were in place to deliver these key areas.		
	<ul> <li>Improve workforce recruitment/development through the LoveCare campaign;</li> </ul>		
	Improve responses and solutions to people with more complex needs;		
	Work with providers and District Councils to increase the range of good quality homes across Devon; and		

No.	Decision/Action/Message	Who Will action?	When?
	Develop new and innovative models of service delivery.		
59.	Public Questions / Other Questions for the Board Other questions raised for the Board included;		
	<ol> <li>the number and percentage of children in the 12-15 year old cohort that have been vaccinated each week against Covid by the School Age Immunisation Service Virgincare in Devon since the vaccine was approved on 13th September;</li> <li>the weekly number of primary and secondary school aged children who have tested positive for covid in Devon since 1st August 2021 and please provide the infection rates per 100,000 from this date;</li> <li>how many Devon schools have received CO2 monitors from the Government and what percentage of Devon schools does this represent; and</li> <li>in relation to the waning of vaccine immunity, is there a backlog of Devon residents who are entitled to a booster but have not yet received it? If so what is the level of backlog? What is the weekly rate of Devon residents becoming eligible for the booster in comparison with the weekly rate at which Devon residents are receiving their booster vaccine?</li> <li>Responses were appended to the minutes.</li> </ol>		

No.	Decision/Action/Message	Who Will action?	When?
60.	Key Messages to be Communicated The Board and Head of Communications and Media considered the key messages coming from the meeting.		
	These included that case numbers across the county were rising, and Devon was around the national average with the highest rates in the 10 to 15 year old age group, and a rise in older working adults, likely to be the parents of this age group. The numbers of Covid patients in local hospitals had risen over recent weeks, although deaths remained stable.		
	The vaccination programme continued, with third jabs for immuno- supressed and booster jabs for over 50s. Eligible people were being encouraged to book an appointment to receive their jab. Vaccinations for healthy 12-15 year olds was being rolled out and soon people would be able to book their vaccination online and access local vaccination centres.		
	The remained concerns about ongoing pressure across whole health and social care system with concern over likely impact of flu and other respiratory illnesses during autumn/winter. The <b>Key Public health messages</b> remained that people should continue to be cautious and follow basic public health advice on testing, self-isolation if symptomatic, hands, face, space, and avoid close contact indoors where possible.		
	Other key messages		
	Hospitals and health service - hospitals admissions for Covid had risen, and were adding to extreme pressures already being faced by hospitals and the Ambulance Service and Emergency Departments continued to be under		

No.	Decision/Action/Message	Who Will action?	When?
	pressure		
	Mass vaccination - booster vaccinations had begun for those most vulnerable to Covid-19, all healthy 12-15 year olds would be offered a first dose (Pfizer vaccine), parents / guardians would be asked for consent and 6 in 10 18-24 year olds in Devon were fully vaccinated.		
	Care Homes and vulnerable people - rates among older people were relatively low, with some isolated outbreaks, however, the whole care sector continued to be under pressure. The previous vaccination programme had been highly effective but there were concerns over long term effectiveness hence the winter booster programme.  97% of care home residents and 94% of care home staff had received their second dose of the vaccination.		
	<b>Schools and education</b> - despite higher case rates, school attendance was higher than the England average. There had been an increase in positive cases amongst secondary school-age pupils, in particular the 10 to 15 year old age group and schools were putting in place additional measures to try and reduce the risk of transmission, in addition to the vaccination programme for 12-15 years olds. Some concern remained over schools being a target for anti-vax activity.		
	<b>Local Community Testing and Contact Tracing</b> – the targeted promotional activity in areas of concern regarding vaccine uptake (in Ilfracombe and Exeter), went well and the new programme of targeted mobile community testing and vaccination was continuing, jointly with NHS Devon colleagues.		

No.	Decision/Action/Message	Who Will action?	When?
	Act sensibly now to keep you and your family safe and help NHS over Winter		
61.	Date of Next Meeting Members noted the date of the next meeting as 18 November 2021 @ 10.00am		