

Meeting	City of York Outbreak Management Advisory Board
Date	17 March 2021
Present	Councillors Aspden (Chair), Runciman (Vice-Chair) and Myers Sharon Stoltz - Director of Public Health, CYC Amanda Hatton - Corporate Director of People, CYC Marc Bichtemann - Managing Director - First York Lucy Brown - Director of Communications - York & Scarborough Teaching Hospital NHS Foundation Trust James Farrar - Local Enterprise Partnership Prof. Charlie Jeffery - Vice Chancellor and President, University of York Julia Mulligan - North Yorkshire Police, Fire & Crime Commissioner Stephanie Porter - Director of Primary Care, NHS Vale of York CCG Lisa Winward - Chief Constable, North Yorkshire Police
Apologies	Ian Floyd - Chief Operating Officer, CYC Siân Balsom – Manager, Healthwatch York Phil Mettam – Track and Trace Lead for Humber, Coast and Vale, NHS Vale of York Clinical Commissioning Group Mike Padgham – Independent Care Group Alison Semmence - Chief Executive, York CVS Dr Sally Tyrer – General Practitioner, North Yorkshire Local Medical Committee
In Attendance	Claire Foale - Head of Communications, Customer Services and Digital, CYC Fiona Phillips – Assistant Director of Public Health, CYC Dale Weston – Principal Behaviour Scientist, Public Health England

111. Declarations of Interest

Board Members had no interests to declare.

112. Minutes of the Meeting held on 10 February 2021

There were no matters arising from the previous minutes. The Board signed off the minutes as an accurate record of the meeting held on 10th February 2021. The Chair confirmed that all actions on the action log had been completed or were ongoing.

The Chair reported that Action 20 was being progressed as the Mental Health Summit had been arranged for 26 March. Tim Madgwick had agreed to facilitate the session and a feedback follow-up report.

113. Update from the PHE Behavioural Insights Team

Dale Weston, a Principal Behavioural Scientist, gave an update around the work that he, his team and the communications team had been progressing with the council. They worked to better understand the barriers and facilitators on issues the council would like people to engage with.

Dale also reported that they were helping businesses to prepare for the re-opening of the city. Good practice and learning from elsewhere in the country would be shared locally. Dale added that they would be holding public outreach sessions and focus groups with business representatives and the public to better understand their thinking.

A further report would be presented at a future meeting of the Board.

114. Communications and Engagement Update

Claire Foale, Head of Communications at City of York Council, gave a presentation on the continued messages and engagement carried out by the council. Claire outlined the communications plan which ran alongside the outbreak management plan.

Claire reported that two Facebook Live Q&A sessions had been held since the last meeting. One was around the introduction of the Covid road map and the other was around the return of students to schools. Social media had also been used to inform parents on how to safely return their children to school. Claire added that the recent My Covid

Story that was shared was about a case study from a teacher and their Covid experience.

Claire reported that Public Health England (PHE) had started their three month behavioural insight trial in York. There had been focus groups established with businesses, especially those with outdoor spaces, queues or managed spaces (e.g. Museum Gardens) to understand their experience of how people had been behaving. Suggestions would be gathered from the industry focus groups and would help inform the programme of work. Claire added that Covid safe behaviours had continued to be promoted throughout lockdown for the reopening of the city.

Given that high footfall in December had corresponded with high transmission, Sharon Stoltz thought the behavioural insight work would be very useful going forward. The city wide approach with the communications team and PHE was a real opportunity to come together as a city to give confidence to businesses and residents that we were making York as safe as possible.

The Board noted the update and the progress on the PHE behavioural insight project.

115. Current situation in York

Fiona Phillips, Assistant Director of Public Health at City of York Council, gave a brief update on the rate of local cases and various other factors. She informed the Board there was currently an average of around nine new cases every day in York.

Fiona reported that the 10-19 cohort had the highest number of cases. She attributed this to the return of students to school. The increased testing of this group had led to more cases being found. Fiona explained that the aim was to identify all asymptomatic students before they went back into the school environment. 27 positive cases had been found across all of the school testing. The students testing positive and their families had to isolate, which avoided 27 school bubbles being sent home in the process. The second week of testing had continued on 8 March, when a further 14 positive cases had been found. Fiona explained that although this had impacted the school setting, it was not as bad as it could have been.

Fiona reported that the 111 triage information received had been helpful in understanding where the cases were heading. She

presented the 111 triage figures, which were mapped closely to the cases. Through data analysis, the 111 data could indicate whether there would be an increase in cases and illness. Hopefully due to the vaccine, symptoms and illness would decrease.

Fiona explained that the data had shown a lower vaccine uptake in less affluent wards. Deprivation was a key factor that influenced the uptake of the vaccine. The Board discussed whether more information could be gathered on this to better inform our plans. Utilising the local champions was suggested as a way to share messages in more hard to reach areas.

Sharon Stoltz flagged that there was already a Vaccine Inequalities group that could present potential actions to drive forward vaccine uptake. It would also help the Board understand the potential barriers and actions we could take to improve the service.

The Board noted the update and presentation. It was agreed that a further report be presented to the next Board meeting on 7 April setting out the approach for addressing inequalities in the uptake of the vaccine.

116. Update on the Covid-19 Vaccination

Stephanie Porter, Director of Primary Care for the NHS Vale of York CCG, gave an update on the vaccination programme that had been delivered in York. She explained that the Askham Bar vaccination site ran a regional service from the national booking system. It was reported to be operating smoothly. This site had been supplemented by the district hubs and pharmacies. Stephanie reported that, from reflecting on the death rates, the vaccination programme seemed to be having its desired effect, especially since 95% of residents and staff of care homes had been vaccinated.

Planning for the second dose of vaccines had started, with correct vaccines being matched up to the relevant residents to ensure the same type was administered. The younger groups were starting to be given the vaccine as we moved onto the 50-59 cohort. It had been harder for those of working age to get an appointment, as there was a greater demand for the most desirable out of office times.

Sharon Stoltz, Director of Public Health at City of York Council, reported that she had been contacted by residents about reports the vaccine supply might be slowing down. Stephanie informed the Board that vaccines were moved across the Humber, Coast and Vale

patch to make sure they were available for the all priority cohorts in all areas. Stephanie confirmed, however, that she had received notification today of the vaccine availability slowing down in the next 2-3 weeks.

Julia Mulligan, North Yorkshire Police, Fire and Crime Commissioner, asked whether there had been any consequences seen from the reporting of fake news. This was after reports of blood clotting related to the vaccine had been seen. Stephanie confirmed that York's vaccination centres had not seen any effects from this. She also cited numerous official statements which detailed that concerns around blood clots and vaccines were not borne out by the evidence. Stephanie agreed with Julia's sentiment, explaining that it was crucial to make sure we understand why people were not coming forward for vaccination.

The Board noted the update.

117. Lateral Flow Testing Strategy for York

Fiona Phillips gave a presentation on the Lateral Flow Testing Strategy for York. The paper in the agenda pack set out the key ways of accessing lateral flow tests (LFT). All testing programmes had been designed with the aim to make access to testing easier for a wide group of people. The Board were presented with three options.

The first option was to continue with the current approach to testing. This meant we would continue to offer testing through our three community sites, and let the other initiatives through workplaces and community collect roll out.

The second option was to move to a model of community collect, ensuring that all communities were covered. This would provide more locations from which people could collect their tests. It would also mean that we would not have a dedicated testing site to test specific groups like students, meaning all tests would have to be self-administered at home.

The third, most preferred, option was a mixed approach whereby our test centres could offer tests for those who want them, as well as providing community collect for people choosing this route. The test centres could also offer a demonstration of testing, or the ability to answer questions from people wishing to do home testing but needing more guidance. Fiona added that we were still unsure whether pharmacies would be joining this offer.

Marc Bichtemann stated that in his experience, he expected there would be some challenges to setting up the test collect system in some workplaces. He preferred the third option of the mixed offer but suggested that a workplace test collect be set up. This would enable whole workplaces to be tested while not having to set themselves up as a site with the necessary precautions and facilities. As we were still awaiting the guidance around the test collect model, Fiona was unsure whether this would be possible but thought it could be possible if a workplace presented with a high amount of cases.

Sharon Stoltz informed the Board that planning for surge testing was now a requirement. Since local Covid identification and response was reliant on the local authority, the council carried out the testing while the national government determined which area it was delivered in. We would be given 24 hours to respond to their notification with intensive testing in the identified area. Sharon thought that the testing model of option three would provide the flexibility to be able to rapidly respond if surge testing was needed.

The Board agreed with the suggestion of option three and noted the update.

118. Verbal Update: Refresh of the Outbreak Control Plan

Sharon Stoltz updated the Board on the peer challenge that had taken place last week. She reported that the formal feedback was expected by the end of the month. Once the feedback was received it could be presented to the Board on 7 April 2021 for discussion.

Sharon informed the Board that the Outbreak Control Plan had been signed off last year after being presented to the July meeting of the Board. This plan now had to be reviewed to account for changes in national policy and lessons learned over the past year. The plan had to be shared with Department of Health and Social Care (DHSC) as part of the assurance process for local delivery of outbreak management. Sharon proposed that the refreshed plan be submitted to DHSC as a draft. His draft plan would be presented to the Board in April for consultation and comment, with final sign-off by the Board at the meeting on 19 May 2021.

The Board noted the update.

119. Update from Sub-Group: Universities and Higher Education Establishments

Professor Charlie Jeffery, Vice Chancellor and President of the University of York, informed the Board of the recent meetings that had taken place focusing on the return of college students from 8 March. He explained that this had been supported through the onsite testing facilities. Very few positive cases had been found and the situation had not moved past the critical point.

Charlie reported that the university summer term started on 1 April and would bring a substantial return to in-person teaching. It would involve 30-40% of students from the University of York, transforming the campus into a busy place. Charlie reported that the student surveys were useful and informed our plans that students wanted more time with their course mates. A lot of outdoor activity for students to meet their clubs, societies and course mates had been organised, to mitigate the risk of socialising. An additional four covered outdoor spaces had also been installed to facilitate some of this.

The Board noted the update.

120. Items for the Next Agenda

The Chair confirmed that there were three standing items for all future agendas:

- Current Situation in York
- Communications and engagement
- Updates from Sub-Group/ Task and Finish Groups

The following were also agreed for the April agenda:

- Formal feedback from the Peer Challenge
- Draft of the refreshed Outbreak Control Plan
- Update from the Vaccine Inequalities Group

As there was no standing agenda item for updates from partners, the Chair asked partners to flag anything they want to discuss with Tracy Wallis prior to the meeting.

121. Dates of Future Meetings

The agreed dates of future meetings were as follows:

- 7 April 2021
- 19 May 2021

The Board discussed changing the scheduling pattern but everyone agreed that it should continue to meet on a monthly basis.

122. Any Other Business

The Board had no other business to discuss.

Cllr K Aspden, Chair

[The meeting started at 5.30 pm and finished at 7.07 pm].