
Meeting	City of York Outbreak Management Advisory Board
Date	18 November 2020
Present	<p>Councillors Aspden (Chair), Runciman (Vice-Chair) and D Myers Ian Floyd - Chief Operating Officer, CYC Sharon Stoltz - Statutory Director of Public Health for the City of York, CYC Amanda Hatton - Corporate Director of People, CYC Siân Balsom – Manager, Healthwatch York Marc Bichtemann – Managing Director, First York Lucy Brown – Director of Communications, York Teaching Hospital NHS Foundation Trust James Farrar – Local Enterprise Partnership Professor Charlie Jeffery - Vice Chancellor and President, University of York Julia Mulligan – North Yorkshire Police, Fire and Crime Commissioner Alison Semmence – Chief Executive, York CVS Dr Sally Tyrer – General Practitioner, North Yorkshire Local Medical Committee Lisa Winward – Chief Constable, North Yorkshire Police</p>
Apologies	<p>Phil Mettam – Track and Trace Lead for Humber, Coast and Vale, NHS Vale of York Clinical Commissioning Group Dr Simon Padfield - Consultant in Health Protection, Public Health England Mike Padgham – Chair, Independent Health Group</p>
In Attendance	<p>Claire Foale - Head of Communications, Customer Services and Digital, CYC Fiona Phillips – Assistant Director of Public Health for the City of York, CYC Steph Porter – Acting Director of Primary Care and Population Health, NHS Vale of York Clinical Commissioning Group</p>

64. Declarations of Interest

Board Members had no interests to declare.

65. Minutes of the Meeting held on 21 October 2020, and actions arising

There were no matters arising from the previous minutes. The Board approved the minutes as an accurate record of the meeting held on 18 November 2020 2020.

There were two outstanding actions on the action log. Tracy Wallis advised that these actions should be closed as they had both been progressed.

The Board noted the updates in the action log.

The Board recorded their thanks to Dr Andrew Lee for his involvement in the Board.

66. Current Situation in York

Fiona Phillips, Assistant Director of Public Health for the City of York Council, presented an overview of the local data. A summary of the recent developments was provided in the agenda pack for this meeting. Although the effects of the second lockdown had not yet been seen, the impact of York being put into Tier 2 restrictions was starting to become apparent. There had been a drop off in cases, particularly in the higher education organisations.

Fiona also mentioned how there had been a change to the methodology by which PHE allocated cases to a particular area. This mainly affected the student population, as cases would now be allocated to their university accommodation address. Previously, cases had been allocated to their family home address. With 659 cases having to be reallocated to York, the peak in October was higher than had been thought at the time. The Board was assured that deaths would continue to be monitored. There had been four in the last month, bringing the total number of Covid-19 deaths among York residents to 178. When compared to its regional neighbours, York now had the lowest rate in the Yorkshire and Humber region.

Lucy Brown, Director of Communications for the York Teaching Hospital, gave an update on how the hospital was coping with the current demands around Covid-19. At the time of the meeting the hospital had 71 patients who were confirmed as Covid-19 positive. The York Trust's cases had also

been increasing, but there was a lag before hospital admissions were seen. Admissions were expected to start to peak in the next week. There had been preparations to manage this rise. To help release an increased number of beds, some planned operations had been postponed. In March, the whole NHS had been asked to pause operations, but this time there was a more phased response. The Trust was also working with local independent hospitals to increase capacity. The situation had been increased to a level 4 national critical incident.

Dr Sally Tyrer, GP representative from the North Yorkshire Local Medical Committee, informed the Board that practices were working equally hard under the increased Covid-19 pressures. The backlog of patients caused by phase one was still being managed. Some routine activities would have to be paused, especially since primary care had been asked to take a lead role in delivering the vaccine.

The Board noted the update.

67. Communications and Engagement (including update from campaign task and finish groups)

Claire Foale, Head of Communications at City of York Council, gave a presentation on the continued messages and engagement the Council was carrying out. There were three phases to the communication plan – prevent, respond and management. Some of the regular updates had been replaced with community engagement, by holding Facebook Live Q&A sessions with the public. A session held recently with the Public Health team had received 40,000 views, with over 600 comments and questions.

With an increase in quarantine fatigue starting to be seen in the community, different campaigns had been complementing the usual public health messages. The ‘we’ve got it covered’ campaign highlighted the importance of using face coverings to help the public avoid becoming complacent. Key events like Christmas were also being used to reiterate public health messages.

Letters had been used to communicate with both the business and education sectors. With the recent developments on business grants, these letters had been a valued mode of communication. Parents had also have found the letters helpful in keeping their children safe, especially with the return of children to schools.

With the recent developments in testing, there needed to be more communications about it. Claire shared an animation that had been

developed locally to help people understand the testing procedure. The guidance had been vastly simplified to encourage people to answer the phone the first time. Subsequently, the contact tracing system would be able to contact more people.

The Board agreed to receive quarterly updates in future on the emotional and wellbeing campaign sub-group. The Board noted the presentation and all the great work that had been completed by the communications team.

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

Charlie Jeffery, Vice Chancellor and President of the University of York, gave an update from the Universities and Higher Education Establishments Sub-Group. He reported that the University of York's cases had decreased to 55 and York St John University were now reporting only ten cases. The positive cases in higher education establishments had also decreased, with very low numbers now being reported.

Forward planning for the end of the academic term had started, with a focus on the return of students to their family homes. The higher education students had been recommended to move back home in the travel window between the 3rd-9th December. The last day that the university would provide consequential support if a student presented as positive would be the 9th December. This would still enable students to get home for Christmas once they had completed their two week of self-isolation. Most students were expected to be picked up rather than using public transport this year. A package of support was also being organised for the usual 1000 students that stayed on campus over the holiday season. The contents of the support package would be dependent on the Covid-19 restrictions of that time.

Both universities had expressed their interest in hosting the new testing sites. With the roll out of the new lateral flow tests, this would allow universities to manage their outbreaks a lot more effectively as the test yielded a result within an hour. The sports hall had been identified as the new testing site and staff were currently being recruited to support this. A new robust booking system was also currently being developed.

In order to reduce the risk of transmission from a student's university accommodation to their family household, two tests would be given two days apart, to give absolute assurance before moving. The same risk would be met as the students moved back into their university accommodation, although the increased testing capability would mitigate

this risk as much as possible. The local contact tracing system would also help in this regard.

Self-isolation fatigue was another concern of the university, especially since it was linked to financial income as students would not be able to continue their part-time jobs. The Chair advised the Board to jointly review the topic of financial support. He agreed to write a letter to the Department of Health and Social Care on the behalf of the Outbreak Management Advisory Board.

The Board noted the update from the sub-group.

69. Verbal Update on Contact Tracing

Fiona Phillips updated the Board on the work progressed regarding contact tracing. Since the last meeting, the system had been operational for four weeks. 76% of the 225 cases that were received had been successfully contacted. This percentage had decreased because the national system was previously only passing on cases where no attempt had been made to contact the people concerned. At that point the team was successfully contacting 90% of referrals, but since then the national system had improved. The team now only received referrals of people who were hard to contact. If a person was not able to be contacted, a follow up visit to their registered address would be carried out to offer advice and gather any relevant information.

There had been good arrangements established with both universities around contact tracing their own students as well as through the local system. This had demonstrated the reasons for having a local service, as organisations were able to work in partnership to achieve the results aimed for. Moving forward, the aim was to expand the capacity of the service to enable us to take on more responsibility from the national system.

The Board noted the report and expressed their thanks to the Public Health Team for establishing the local contact tracing system.

70. Covid-19 Testing Proposals

Sharon Stoltz, Director of Public Health, City of York Council, outlined the different proposals for additional testing capabilities. The Department of Health and Care had asked local authorities to take more responsibility for this locally. Testing was especially important for the hard to reach communities that would struggle to get access to a testing site in the city centre. Sharon welcomed any suggestions on how this could be supported by the organisations' members.

Fiona Phillips explained the differences regarding the various tests that were currently available. The PCR tests were reliable and had been used for the majority of the Covid-19 period so far but it took at least 24 hours to receive the results. The LAMP tests provided a much quicker result but had a slightly higher rate of false negatives. Due to speediness of the test, both hospitals and universities were looking into this method. The lateral flow tests were a new testing technology that was currently being used to pilot mass testing in Liverpool. The accuracy of this test relied on it being administered and evaluated by a health care professional. This method would also require a follow up PCR test to confirm the results. No test was 100% accurate and due to the novelty of the virus, there was no gold standard to which tests could be compared.

The group discussed the different ways in which local testing provision could be enhanced using the new Lateral Flow Test technology. The options put forward were to use them for 'ring testing (testing all contacts of a case), for targeted testing of high risk communities, or for mass testing of the whole population. The group thought that targeted asymptomatic testing seemed to be the most appropriate use of resource and capacity at the present time.

The group discussed the different delivery models that could be used for targeted population testing. The options presented in the meeting were: a central location; a smaller central location with satellite sites across the city; or a mobile testing unit which could be used to target specific areas of need.

Lisa Winward, Chief Constable for North Yorkshire Police, asked how sure we were that people were keen to take up testing and whether any additional freedoms would be granted to those who tested negative. As testing was not mandated, Sharon explained that it relied on people to follow the guidance and take a test when asked. As for the 'Covid-19 passports', there was not enough understanding to be able to provide this yet. Sharon reported that this was being discussed nationally.

Alison Semmence, Chief Executive of York CVS, asked whether the voluntary sector would be given testing priority. Fiona confirmed that all social care staff, domiciliary care and informal carers would be included.

The Chair endorsed the whole city approach to testing and asked that the expression of interest be submitted. Everyone agreed that it should be a 'hub and spoke' or mobile model. Clarity should also be sought around the required financial support for people self-isolating. The Board noted the verbal update.

71. Covid-19 Mass Vaccination

Sharon Stoltz explained that all vaccines had to meet robust safety standards before they are fully rolled out. Disseminating the right communication around vaccination would need to be a key part of the strategy. Sharon expected vaccinations to be rolled out in a phased approach on a priority basis. Older adults and care home workers would be the first to be eligible, then the 80+ age group and other health and social care workers. Hospitals and care homes would be responsible for vaccinating their own staff. The priority would then go down by age.

Dr Sally Tyrer, a GP from North Yorkshire Local Medical Committee, informed the Board about the preparations being organised in primary care. Practices had been asked to work together, although patients were expected to go to their original practices. Communications would be necessary in order to help people understand this. Sally expressed some concerns about how the trials had been run concurrently rather than in a sequence. Nevertheless, it was important to emphasise that the vaccine was as safe as any other vaccine, after a rigorous trialling process.

James Farrar, of the Local Enterprise Partnership, asked whether any plans had been made regarding the economy over the next 12 months. Sharon replied that she had engaged with business leaders from across the city and received a mixed response. Some advocated higher financial support but others wanted higher footfall in the city.

Julia Mulligan, the North Yorkshire Police, Fire and Crime Commissioner, asked how much of the population needed to be vaccinated to stop the virus from replicating. Sharon explained that the aim was to have 75% of the population vaccinated, which was the same aim as for seasonal influenza. Support would be provided for the frontline workers. This would be discussed at the Local Resilience Forum soon.

The Board noted the update.

72. CVS and Healthwatch York Report: 'What We Did During the Covid-19 Lockdown March-June 2020'

Alison Semmence gave a brief summary of the report included in the agenda pack on the work carried out by York CVS during the first phase of the pandemic. A directory for professionals had been organised; this included 50 organisations. The CVS had been working with the NHS responders to encourage them to refer people to their service.

After carrying out the impact survey it was found that two out of three charities cease to exist over the next 12 months. This was worrying as it had come at a time where demand was up and income is down. Even though we were entering a critical stage, practical support was still being offered.

The Board agreed with the themes highlighted in the report. The Chair and the Director of Public Health thanked the voluntary sector, on behalf of the Board and the council, for the great work they had been doing throughout the pandemic.

73. Agenda Items for the next Meeting

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 Board agreed that economic analysis should be discussed at the next meeting.

74. Dates of Future Meetings

The agreed dates of future meetings were as follows:

- 9th December 2020
- 13th January 2021
- 10th February 2021
- 17th March 2021
- 7th April 2021
- 19th May 2021

75. 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 7.37 pm].