AT A MEETING of the Hampshire Local Outbreak Engagement Board of HAMPSHIRE COUNTY COUNCIL held remotely on Tuesday, 16th February, 2021

Chairman: * Councillor Keith Mans

- * Councillor Liz Fairhurst
- * Councillor Judith Grajewski
- * Councillor Patricia Stallard

Co-opted members

Also present with the agreement of the Chairman:

Councillor Keith House Councillor Ken Rhatigan Judy Gillow Laura Taylor Councillor Roger Huxstep

66. APOLOGIES FOR ABSENCE

Apologies were received from Judy Gillow.

67. DECLARATIONS OF INTEREST

Members were mindful that where they believed they had a Disclosable Pecuniary Interest in any matter considered at the meeting they must declare that interest at the time of the relevant debate and, having regard to the circumstances described in Part 3, Paragraph 1.5 of the County Council's Members' Code of Conduct, leave the meeting while the matter was discussed, save for exercising any right to speak in accordance with Paragraph 1.6 of the Code. Furthermore, Members were mindful that where they believed they had a Personal interest in a matter being considered at the meeting they considered whether such interest should be declared, and having regard to Part 5, Paragraph 5 of the Code, considered whether it was appropriate to leave the meeting whilst the matter was discussed, save for exercising any right to speak in accordance with the Code.

There were no declarations of interest.

68. MINUTES OF PREVIOUS MEETING

The minutes of the meeting held on 20 January 2021 were agreed as a correct record.

69. **DEPUTATIONS**

There were no deputations received.

70. CHAIRMAN'S ANNOUNCEMENTS

The Chairman noted the encouraging news regarding completed vaccinations within the county.

71. OUTBREAK CONTROL POSITION REPORT

The Director of Public Health shared the weekly update with the Board outlining the current situation in term of managing the outbreak in Hampshire including data on current infection numbers, the position for care homes and death rates across the county.

Members received an update on the national picture and revised scale which confirmed Hampshire rates as being in the lowest categories. Rates were reviewed by ethnicity, age, and areas and overall going down. Work around communications and marketing continues to target and support appropriate action. With the steady fall in rates, the R rate in the Southeast is currently between 0.6 and 0.9 with a continued decrease for ceremonial Hampshire. The all age 7-day case rate of 114 is currently lower than that of England and the Southeast and continuing to fall.

Outbreaks in care homes do affect the rate and the Public Health team look across all districts around the county on a daily basis to review and manage outbreaks in any settings and testing to pick up asymptomatic people to ensure rates continue to fall.

The number of people in hospitals is falling but is still a lot of pressure on the NHS at this time. Southampton continues to accept residents from various areas due to the services and expertise offered by the hospital. Ventilator bed usage rates continue to fall, and hospitals are managing well in terms of critical care needs. Unfortunately, there have been over two thousand deaths and some lag in the reporting.

The current Covid alert level guidance is being followed and a variety of factors have an impact such as the level of compliance with rules, vaccination levels, etc. and careful preparation continues for the easing of lockdown.

Community testing for those without symptoms, subject to approval, will commence from 22 February for front facing workers or those who must travel for work. This will include County Council staff who may not qualify under other programmes. The department is grateful to district colleagues in this partnership approach implemented at a fast pace to find the right venues and staff and currently waiting for approval. Better understanding the asymptomatic condition will help break the infection chain. One out of three people will have Covid without knowing it and everyone taking part in the lateral flow testing will be doing their part to help.

Testing for specific settings and developing bids for groups such as primary school teachers, companies of 50 or more, etc. continues. This will allow for home tests to be used to meet needs of Hampshire population using government funding for the programme.

There has been news of single case of South African variant in the Bramley area, but the risk is low with national restrictions in place. To enable the government and Public Health team to understand how this variant is spreading, surge testing is likely to commence tomorrow door to door with identified postcodes. Tests are expected to arrive on 16 February and walking routes have been designed. Members expressed their thanks and appreciation to the surge testing team in their quick response and adaptability with national testing procedures.

In response to questions, Members heard:

Based on forensic examination of the specific variant case and the movement, a smaller surge testing cohort was appropriate and proposed to the government per Public Health guidelines.

Rates over half-term may be impacted as the virus spreads when people connect, and this will have decreased.

Ventilator treatment numbers have fallen. People's needs may vary, and the average time is currently 14 days, with efforts to reduce this time. It will be important to consider the impact that this may have on someone's life in the long term.

Surge testing will be a helpful pilot in learning how implement effectively, should it be necessary again in the future with other variants. Community testing will be similarly helpful in learning to coordinate and work together at all levels together to manage problems and provide quality community testing, alongside other methods.

Members expressed their appreciation that primary school teachers would now receive lateral flow tests but wanted to confirm timescales for extending testing to early years providers and nursery staff as they provide care for many key workers, as well as foster carers. It was confirmed that early year settings will receive tests if they are connected to a school and if not, they will be included in the community testing program being launched on 22 February. Testing for foster carers is being looked at by colleagues and will be addressed to ensure Covid-safe placements for care referrals.

The data shared reflected deaths not just in care homes but inclusive of all deaths across the county.

With regards to the NHS led vaccination programme, progress has been good with teething issues being managed, but the data is not yet public. Collaboration with colleagues continues to ensure effective roll out and good percentages in the first groups being vaccinated while addressing any inequality issues. Working with faith sectors and community leaders to help provide encouragement and support for the vaccines, helps make a difference on

infection rates in the community. Collaboration and review with GP practices helps to pick up on those who may not have showed up initially.

Encouraging all members of the community from all backgrounds will help increase the percentage of vaccine uptake, including educating ethnic minorities who may be fearful or have received misinformation through community leaders, imams, experts, and Primary Care Networks to approach and provide information in a culturally appropriate way.

Local and national work and learning from colleagues who may successfully reached large minority populations is helpful. It has not been a significant issue in Hampshire but the Public Health team has been mindful of communications with CCGs to appropriately target and reach communities and address myths with high profile faith leaders accepting and supporting vaccinations. This work with cohorts will be ongoing and carry-on encouraging uptake, even at a later date.

In supporting the NHS vaccination programme, work also continues with transient and traveller populations to ensure coverage. Encouraging registering with a GP practice and using a mobile model allows the vaccinations to reach them, in a way similar to reaching the homeless populations. Large vaccination centres can be used as hubs to deliver programmes to these communities as well. The County Council continues to connect with all communities, without a fixed model, to roll out programmes quickly and meet community needs. From a local authority perspective, supporting contact with hard-to-reach groups though the Equalities Board with staff working closely with traveller communities to ensure they are hearing from people and leaders they will listen to and trust, alongside BAME, people with learning disabilities, and other hard to reach groups.

The Hampshire Local Outbreak Engagement Board noted the current data and implications.

72. ACTIONS OF THE DIRECTOR OF PUBLIC HEALTH

The Director of Public Health provided updates as noted in the item above regarding community and surge testing.

73. COMMUNICATION ENGAGEMENT UPDATE

The Executive Member of Public Health updated the Board on communications and engagement noting that the Communications team continues to be engaged and active with new developments.

Members heard that the roll out of vaccination programme and stay at home messages continuing with a well-received lock down animation that reached over 700,000 residents. Connect to Support work carried on with children receiving meal vouchers and activities with child focused graphics over half term. Posts about mental wellbeing advice, help for unpaid carers, and signposting for those experiencing domestic abuse remained priorities.

There were 97 media inquiries and regarding the mobilization of the temporary mortuary, care home outbreaks, community testing, etc. With regards to vaccinations, NHS messaging has been amplified - when and what to expect and advice on post vaccination behaviour. Dedicated pages have supported national programme and provided signposting to the NHS information hub. Targeted messages on vaccine hesitancy and awareness of scams have been shared to protect those vulnerable, shielding or socially isolated. Targeted engagement for hard-to-reach BAME, Nepalese, traveller communities continue as well as outdoor media and posters in over 130 strategic points. Upcoming priorities include plans in place with surge testing, the possible return to school, and encouraging young men to wear face coverings. Communications targeting asymptomatic testing and the booking system are ready for launch and preparation continues for event planning ahead of the summer.

Members heard that vaccination for informal and unpaid carers is also starting with the local authority role in managing eligibility and easing access for this group. Communication will go out next week to carers and will be managed carefully with support of practitioners as needed for eligibility, as well as voluntary sector groups engaged.

Members noted that the news has been encouraging and pushing the message to carry on following the guidance in Hampshire communities continues to be a priority.

| The meeting ended at 10:45am. | | |
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| | Chairman. | |