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Nottingham City Council Outbreak Control Engagement Board

Date: Friday, 13 August 2021

Time: 11.30 am

Place: To be held remotely via Zoom - meeting participants will be given access

details. The public part of the meeting will be livestreamed on the Council's

Youtube channel - https://www.youtube.com/user/NottCityCouncil

Board Members are requested to attend the above meeting

Governance Officer: Emma Powley Direct Dial: 0115 87654891

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If you need any advice on declaring an interest in any item on the agenda, please contact the Governance Officer shown above, if possible before the day of the meeting

Public Document Pack Agenda Item 3

Nottingham City Council

Outbreak Control Engagement Board

Minutes of the meeting held at Remote meeting held by zoom and streamed to the County Council Website - via Zoom on 23 July 2021 from 11.00 am - 1.00 pm

Membership

Present

Councillor Sally Longford (Chair)
Dr Hugh Porter
Amanda Sullivan
Councillor Adele Williams
Steve Cooper
Lucy Hubber

Absent

Mel Barrett
Ruby Bhattal
Andrew Errington
Councillor Neghat Khan
Councillor Rebecca Langton
Sara Storey

Colleagues, partners and others in attendance:

Jason Carter – Director University of Nottingham
Professor Nigel Wright - Nottingham Trent University
Paul Dales - Chief Environmental Health Officer
Nick Lee – Director of Education
Emma Powley – Interim Governance Officer

257 Apologies for absence

Councillor Langton Councillor Khan

The Chair welcomed Lucy Hubber, the newly appointed Director of Public Health to the meeting.

258 Declarations of Interests for agenda item 3-7

None

259 Public Minutes

The public minutes of the meeting held on the 25 June 201, were agreed as an accurate record.

260 Nottingham's Local Outbreak Management Plan Update

Lucy Hubber, Director of Public Health - Nottingham City Council, gave an update on Nottingham's Outbreak Control Plan, highlighting the following information:

 There had been some significant change in the environment in which the pandemic was being responded, specifically since the lifting of all restrictions.

- b) Case rates had reached close to 2000 in the last week, with an infection rate of 594 per 100,000 population, the highest rate recorded so far this year.
- c) The highest number of cases in Nottingham being detected was in school aged children aged 12-17.
- d) Whilst the vaccination programme continued, additional measures were in place, specifically asymptomatic testing. There had been increased access to this service, although there had previously been a national shortage of Lateral Flow Tests (LFT) but this had since been resolved. For those people experiencing any symptoms of Covid (even mild symptoms) were urged to get tested.
- e) An 'asymptomatic strategy' was being drafted and would be circulated to the board once finalised.
- f) Work had continued with CCG partners to ensure that people could access LFTs and the vaccination programmes. Residents were being encouraged from multiple agencies to take up vaccination and to use the test kits, not just for their own safety but for the wellbeing of their families and friends
- g) For the lifting of the restrictions to remain, businesses and event holders would need to share the message of the importance of getting vaccinated and/or tested. Nottingham City Council had continued to encourage the public to remain cautious and to protect others by taking protective measures to slow the spread as much as possible; this would save both lives and livelihoods and assist with the economic recovery.

261 Understanding Long COVID

Lucy Hubber, Director of Public Health - Nottingham City Council and Dr Hugh Porter, Clinical Director, Nottingham City Integrated Care Partnership gave an update on Long Covid and highlighted the following information:

- a) Long Covid was an unexpected consequence of the pandemic and was currently defined as someone who had one or more Covid symptoms lasting for a period of at least 12 weeks. Approximately a fifth of people surveyed reported having had a Covid symptom previously, with over a third reporting persistent symptoms lasting at least 12 weeks, a further tenth on those lasting at least 12 weeks and being reported as 'severe'
- b) Long Covid is appearing in all ages, but more so in women. It was also more prevalent in people who are overweight or obese, people who smoke and those living in deprived areas. However, persistent Covid symptoms were lower in people of Asian ethnicity.
- c) Long Covid was a complex and an evolving picture with worldwide research ongoing. Studies have suggested that there are 200 different symptoms listed associated with long Covid.

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- d) Cases of long Covid had been reported not just in those people who had originally been hospitalised with Covid but also in those who had relatively mild cases of Covid. A National Enhanced Service has been introduced to support upskilling and education in primary care until March 2022 and further information could be accessed on the national website www.yourcovidrecovery.nhs.uk.
- e) Long Covid is having a huge impact on individuals and 79 NHS post Covid clinics had been set up across the country offering multi-disciplinary support. With two universities in Nottingham there had been the opportunity to work with them and support and assist with local research into long Covid recovery.

The Chair thanked them both for their updates and explained that she was aware of people who, as consequence of long Covid, had been left unable to work due to the debilitating nature of their symptoms.

The Chair welcomed Lisa, a resident of Nottingham, who had suffered from long Covid. She explained that she had caught Covid in April 2020, at a similar time to her 16 year old daughter. Lisa's symptoms were relatively mild when she first got Covid. However, these became increasingly worse over the weeks and by the third week she developed a number of more severe symptoms including chronic fatigue, nausea and heart palpitations which lasted for months. After five months off work, she returned to work, but the brain fog and fatigue had made it extremely difficult; the brain fog had left her sometimes unable to read and concentrate and despite having a phased return it had become increasingly more difficult to work.

Lisa's 16yr old daughter had initially suffered from moderate symptoms, including difficulty with breathing and other respiratory issues. The narrative at the time was that children did not get long Covid, but she had continued experience breathlessness, heart palpitations and fever. Her daughter has since struggled with tics, loss of appetite and continued breathlessness.

It was noted that Lisa was receiving post Covid support but her daughter was not able to access any support due to the continued narrative that young people/under 18ys could not get long Covid.

The Board thanked Lisa for sharing her experience and expressed empathy with her current situation.

It was suggested that the Council through business engagement could pass on messages and advice to ensure employers understand the complexities of long Covid for those returning to the work place.

262 Universities preparation for the new academic year

Jason Carter – Director University of Nottingham and Professor Nigel Wright - Deputy Vice-Chancellor at Nottingham Trent University updated the Board. The following points were highlighted:

- Since the lifting of restrictions, the Department for Education (DfE) had issued guidance to Universities and the approach of the universities would align with that of the DfE
- b) There has been a strong campaign around vaccinations for both staff and students. Students were being asked to get vaccinated prior to the commencement of the new academic year, and would be tested on their arrival and requested get a weekly Covid test. Staff were also being asked to get tested on a weekly basis in order to maintain a controlled environment for both staff and students.
- c) There had been ongoing work with partners in Public Health to ensure a consistent approach across the university sector and isolation support was being offered for students who receive positive test results
- d) Both universities would be requesting people continue to wear face coverings and would encourage the use of outdoor space. There will also be extensive communications campaign setting out expectations that anyone with symptoms of Covid do not circulate and there would be a continuation of the universities reporting mechanism so we can keep track and respond appropriately.

In response to questions asked the following information was given:

- e) For students coming to the Universities there would be testing facilities on campus and outside of the campus the will be continued support for community protection officers.
- f) In the previous year, there had not been a testing programme at the University and students would be required to get tested prior to their arrival and again once when they have arrived at the city. Students who have been offered placements at the University had been written to requesting that they get vaccinated and tested prior to them arriving on campus. It was explained that there had been a number of students who had not been eligible for their second jab due to them being under the age of 18.
- g) Dr Hugh Porter explained that there had been continued partnership working between the universities and NHS services to ensure access to vaccinations and testing facilities. There had been some logistical concerns due to a number of students from overseas who had been given different vaccines to those distributed in England.

263 Local COVID-19 Vaccination Plan Update

Sarah Carter gave an update on the Local Covid vaccination plan and highlighted the following information:

a) Uptake of vaccines had been slowing down and there has been an increase in the transmissions. Focus has been on convenience, coverage and engagement. Some key areas have been identified where additional activity and and engagement would be delivered.

- b) In addition to booked appointments there had been more than 1300 walk-ins over the week. A number approaches had been taken to engage with communities where there had been a low vaccination updated including mosques, text messaging and the Covid vaccination bus.
- c) All adults can still get a first vaccination, it being an evergreen offer and reminded that the second jab could boost your protection against the Delta strain by two and a half times- with a further booster vaccine programme starting in September 2021
- d) It was noted that in Nottingham City, over 220,000 of the eligible cohorts had received their first dose vaccines as listed below:

(Those having received their second vaccine in bold).

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18-24 = 49.5 % (11.9%)
25-29 = 46.1 % (14.9%)
30-34 = 71.3 % (26.3%)
35-39 = 75.1 % (35.6%)
40-44 = 83.4 % (55.1%)
49-49 = 83.2 % (68%)
50-54 = 88.3 % (82%)
55-59 = 93.8 % (88.5%)
60-64 = 95.2 % (90.5%)
65-69 = 89.7 % (87.3%)
70-74 = 98.7 % (93.6%)
75-79 = 98 % (95.9%)
80+ = 88.7 % (86.1%)
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e) It was noted that anyone eligible can walk in to a site to get their vaccination at all of the 9 sites across Nottingham and Nottinghamshire. The Board welcomed the emphasis on the Forest Recreation Ground which had been one of most successful sites. Residents who were not vaccinated were encouraged to get their jabs as soon as possible.

264 Board Member Updates

Steve Cooper – Nottingham Police updated the Board and highlighted the following information:

- a) Since the lifting of the restrictions, there would more emphasis on returning to 'Business as Usual' for the force.
- b) The number of Fixed Penalty Notices issued was slightly above the national average and other core cities; however it was not considered that this was particularly significant or disproportionate.
- c) The Police were anticipating the first weekend of unlock and had worked with licensed premises in preparation of the first weekend without restrictions. The first week has been well managed and explained that a number of premises

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- and transport providers had made wearing of face coverings a condition on entry into their stores/transport service.
- d) The Police would continue to support the vaccination centre and also continued to work alongside the two Universities.

The Chair thanked the Police for their input and it was noted that it was likely that they would not be required to attend outbreak meeting in the future

Paul Dales, Chief Environmental Health Officer Nottingham City Council, gave an update on the work of the Environmental Health Team since the last Board meeting.

He highlighted the following information:

- a) The team had continued to work with colleagues at Public Health England and had been reviewing premises and prioritising those with a significant staff cases.
- b) Since the withdrawal of the Covid regulations, Environmental Health had no enforceable powers to intervene on enforcement matters.
- c) The Environmental Health Team would align alongside the Health and Safety Executive (HSE) in dealing with businesses and controlling risks in the work place. There will be a focus on work activity when the risk of transmission is above normal rates.
- d) Continued guidance would be offered to businesses on ventilating work places. The government and HSE website provided guidance and information about how businesses can improve and achieve good and advised of the necessity to check that mechanical ventilation systems are used properly

Nick Lee – Director of Education, gave an update and highlighted the following information.

- a) When last reported at the meeting on the 23 June 2021, there had been 927 pupils self-isolating. Figures from the 16 July indicated that 3496 school aged children were self-isolating with 261 pre-school children out of education across around 120 different bubbles.
- b) Very recently, those figures had decreased and this was attributed to a number of schools having broken up for the summer holidays.
- c) 148 teaching staff unavailable due to infection/suspected infection/selfisolating. Overall attendance of the 66 schools averaged 70% and during non Covid times was about 95%.
- d) The rules changed around the process of identification of Covid cases from school- based decisions to the NHS test and trace. There were a number of difficulties for schools during the transition period but it was hoped they would be embedded by September when the schools re-opened.
- e) The DfE guidance for step 4 had been issued for the return of pupils in September and it was noted that some of the measures imposed during Covid had been very positive with efforts being made to continue with these.

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- f) Parents and schools will be encouraged to continue with protective measures, which could be achieved by influencing through relationships; should an outbreak occur efforts would be made to mitigate the risks and some of the previous requirements could be re-instituted to prevent further infections.
- g) The Board thanked the teachers and all support staff for their hard work during the pandemic.

Amanda Sullivan, Nottingham and Nottinghamshire CCG updated the Board and highlighted the following:

- a) There had been a significant rise in cases and in those being admitted to hospital. The majority of people being admitted were those who had not been vaccinated or had just received a single dose of the vaccine.
- b) Depending on the modelling, the peak may not be visible for a number of weeks and there is already significant pressures on the hospitals. Efforts were still underway to get people accessing their routine care but this was proving to be very challenging situation.
- c) People were still being urged to come forward to get vaccinated especially amongst those with underlying health conditions or other vulnerabilities.
- d) Approval had very recently been given to administer the vaccines to 16-18yr olds with a range of health conditions and children aged between 12-15yr who were vulnerable (e.g suppressed immunity) which were balanced around risk and benefits
- e) There was a different age group being admitted to hospital compared to previous waves as vaccination rates were now much higher in older people. A much younger cohort of people were now being admitted

265 Exclusion of the public to move into the confidential section of the meeting

The Board agreed to exclude the public and move into the confidential section of the meeting.

266 Declarations of Interest for agenda items 11-15

See confidential minutes.

267 Private Minutes

See confidential minutes.

268 Situational round up

See confidential minutes.

269 Universities preparation for the new academic year

See confidential minutes.

270 Education Update

See confidential minutes.

271 Local COVID-19 Vaccination Plan Update

See confidential minutes.

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