

NORTH YORKSHIRE OUTBREAK MANAGEMENT ADVISORY BOARD

REMOTE MEETING

ON: Monday 21st December 2020

AT: 1.00 p.m.

This meeting will be held using video conferencing with a live broadcast to the Council's YouTube site. Further information on this is available on the committee pages on the Council website - <https://democracy.northyorks.gov.uk/>.

The live broadcast of this meeting will start when the meeting commences. Members of the press and public who would like to view it can do so via the County Council's website. For help and support in accessing the meeting, please contact the Democratic Services Officer responsible for the meeting (see contact details below).

This Board is an informal, non decision-making body and therefore there is no facility for public questions or statements. If you would like to find out more about the North Yorkshire Outbreak Management Plan you can do so from the link [here](#)

The meeting will be available to view once the meeting commences, via the following link - www.northyorks.gov.uk/livemeetings Recording of previous live broadcast meetings are also available there.

AGENDA

NO.	ITEM	LEAD	INDICATIVE TIMINGS
1	Welcome/introduction	Chair	1.00 – 1.05
2	Apologies for absence	Chair	
3	Declarations of interest (if any)	Chair	
4	Notification of Any other business	Chair	
5	Notes of meeting held on 19 th November 2020 and any matters arising ENCLOSED	Chair	

6	<p>Update on the current position in North Yorkshire.</p> <p>SLIDES ENCLOSED which contain data internationally; for the UK; North Yorkshire; and by Districts</p> <p>PLEASE NOTE: The data presented to the meeting will be updated, to reflect the latest available information</p>	Louise Wallace, Director of Public Health and Victoria Turner, Public Health Consultant	1.05 – 1.25
7	<p>Data on Suicide Rates; Suspected Suicides and Drug and Alcohol Related Deaths</p> <p>SLIDES ENCLOSED</p>	Louise Wallace, Director of Public Health	1.25 – 1.45
8	Vaccination Update - verbal update.	Amanda Bloor, Accountable Officer, North Yorkshire CCG	1.45 – 2.10
9	<p>Communications Update</p> <p>SLIDES ENCLOSED</p>	Michael James Team Leader, Marketing and Customer Communications	2.10 – 2.20
10	<p>Partner Updates (on an exception basis):</p> <ul style="list-style-type: none"> • Business / LEP • Care Sector • Healthwatch • Local Government • NHS • Police • PF&C Commissioner • Public Health England • Schools • Voluntary & Community Sector 	ALL	2.20 – 2.25
11	Next Meeting – Wednesday 20 th January 2021 at 3.30 p.m.	Chair	-
12	Any other business	Chair	-

Patrick Duffy, Senior Democratic Services Officer

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Tel: 01609 534546

14th December 2020

OFFICIAL



North Yorkshire Outbreak Management Advisory Board

Notes of a discussion held remotely, via Microsoft Teams, on Thursday 19th November 2020

THOSE WHO JOINED THE DISCUSSION:

North Yorkshire County Council Representatives:

Councillor Carl Les, Leader of North Yorkshire County Council
 Councillor Caroline Dickinson, Executive Member, Public Health, Prevention, Supported Housing
 Councillor Helen Grant (substitute for Councillor Stuart Parsons)
 Councillor Michael Harrison, Executive Member for Adult Services and Health Integration
 Lincoln Sargeant, Director of Public Health
 Richard Webb, Corporate Director, Health and Adult Services

District Council Representatives:

Councillor Steve Arnold, Ryedale District Council (substitute for Councillor Keane Duncan)
 Councillor Liz Colling, Scarborough Borough Council
 Councillor Richard Foster, Leader, Craven District Council
 Councillor Ann Myatt, Harrogate Borough Council

Other Partners' Representatives:

Ashley Green, Chief Executive Officer, Healthwatch, North Yorkshire
 David Kerfoot, Chair, North Yorkshire and York Local Enterprise Partnership
 Julia Mulligan, Police, Fire and Crime Commissioner
 Susan Peckitt (substitute for Amanda Bloor), North Yorkshire Clinical Commissioning Group
 Leah Swain, Chief Executive, Community First Yorkshire
 Sally Tyrer, Chair, North Yorkshire Local Medical Committee
 Lisa Winward, Chief Constable
 Ian Yapp, Head Teacher, Riverside Primary School

In attendance (all from North Yorkshire County Council, unless stated):

Ray Busby, Principal Democratic Services Officer
 Lisa Dixon, Director, Scarborough Borough Council
 Patrick Duffy, Senior Democratic Services Officer (Clerk)
 Faye Hutton, Marketing and Communications Officer
 Mike James, Team Leader, Marketing and Customer Communications
 Victoria Turner, Public Health Consultant
 Louise Wallace, Assistant Director, Health and Integration

Apologies received from:

Amanda Bloor, Accountable Officer, North Yorkshire Clinical Commissioning Group
 Councillor Mark Crane, Leader, Selby District Council
 Councillor Keane Duncan, Leader, Ryedale District Council
 Richard Flinton, Chief Executive, North Yorkshire County Council
 Barry Khan, Assistant Chief Executive (Legal and Democratic Services), North Yorkshire County Council
 Phil Mettam, Humber, Coast and Vale NHS Test and Trace Lead
 Mike Padgham, Chair, Independent Care Group
 Councillor Stuart Parsons, Leader of the Independent Group, North Yorkshire County Council

NO.	ITEM	ACTION
68	<p data-bbox="300 210 1203 241">WELCOME AND INTRODUCTION BY THE CHAIR</p> <p data-bbox="300 277 1203 344">County Councillor Carl Les welcomed Members of the Board and any members of the public or media viewing the meeting.</p> <p data-bbox="300 380 1203 443">He advised that he is the Leader of the Council and Chairs this Board and that:-</p> <ul data-bbox="300 479 1203 981" style="list-style-type: none"> - the main role of this Board is to support the effective communication of the test, trace and contain plan for the county and to ensure that the public and local businesses are effectively communicated with; - decisions of the Board are purely advisory and its recommendations will be considered through the governance arrangements of the bodies represented, which retain their decision making sovereignty; - the papers for this meeting had been published in advance on the County Council's website; and - people can see the names of everyone on the Board and the organisations they represent on the Council's website. 	
69	<p data-bbox="300 1016 1203 1048">APOLOGIES</p> <p data-bbox="300 1075 951 1106">As stated in the attendance on the previous page.</p>	
70	<p data-bbox="300 1142 1203 1173">DECLARATIONS OF INTEREST</p> <p data-bbox="300 1200 804 1232">There were no declarations of interest.</p>	
71	<p data-bbox="300 1267 1203 1299">NOTES OF MEETING HELD ON 19TH OCTOBER 2020</p> <p data-bbox="300 1335 1161 1366">AGREED that these were an accurate reflection of the discussion.</p> <p data-bbox="300 1402 1203 1635">Arising from the Notes, with reference to the Item <i>Update on the current position in North Yorkshire</i>, Councillor Ann Myatt, via the chat facility, queried if the reference to Covid being the leading cause of death worldwide was correct – was it meant to be that it is the leading infective cause of death worldwide? Lincoln Sargeant confirmed that Councillor Myatt is correct; Covid is the largest infectious cause of death.</p>	
72	<p data-bbox="300 1671 1203 1702">NATIONAL RESTRICTIONS: 5TH NOVEMBER, 2ND DECEMBER</p> <p data-bbox="300 1738 1203 1872">Lincoln Sargeant advised that we are in a second lockdown because, once an exponential phase of a pandemic is reached, there is very little that can be done to stop it, other than interrupting interactions between people.</p> <p data-bbox="300 1908 1085 1975">The findings from lockdowns in Scotland and Wales are that behaviour change has to be maintained.</p> <p data-bbox="300 2011 1190 2105">In England, we are still waiting to see the effect of the lockdown, but evidence suggests that in areas with more consensus the numbers of people being infected fall more quickly. It does seem that the</p>	

	<p>momentum of rise is beginning to slow. In North Yorkshire, there are signs that we may be approaching the peak but it is too early to say for sure.</p> <p>When the lockdown ends, it is likely that areas in the lowest Tier will face restrictions that are stronger than was the case in the previous Tier 1.</p> <p>The Chair asked about compliance with the current measures. Lisa Winward advised that very few Fixed Penalty Notices had been issued or prosecutions made. Where these had been necessary, they broadly related to larger gatherings and people refusing to break these up when requested to. This compared to 1,151 Fixed Penalty Notices during the first lockdown, which mostly involved people travelling into the county for lengthy walks, which had been against the spirit of the legislation.</p> <p>There has been a high level of compliance with the current restrictions, with the Force operating, from a policing perspective, on the 4 E's, namely:-</p> <ul style="list-style-type: none"> - <i>engaging</i> with the public where there has been a breach; - <i>explaining</i> the Guidance; - <i>encouraging</i> adherence to the Guidance and, as a last resort; - <i>enforcement</i>, where people fail to follow the guidance <p>In North Yorkshire we have not seen a big departure from compliance; people want to do the right thing.</p> <p>In response to a question from Julia Mulligan, Lisa Winward confirmed that there are certain hot spots and, once people have been reminded of their responsibilities, the legislation will be enforced to protect people's health.</p> <p>Councillor Helen Grant, via the chat facility, asked if the introduction of Marshalls had helped. Julia Mulligan advised that some areas had decided to use funding to deploy Marshalls. The term implies enforcement, but that is the role of the Police. She is happy to support local authority colleagues to support engagement in known problem areas – conversations are on-going.</p> <p>Richard Webb thanked partners and the public for their co-operation. In Scarborough, we are beginning to see a slight improvement in infection rates. The Council's Communications Team and the media had provided extensive coverage to help get the message across.</p>	
73	<p>UPDATE ON THE CURRENT POSITION IN NORTH YORKSHIRE</p> <p>Slides had been circulated with the Agenda containing data internationally; for the UK; North Yorkshire and by District. Elements of the data presented at the meeting had been updated to include the latest information.</p> <p>Lincoln Sargeant advised that:-</p> <ul style="list-style-type: none"> - The number of people who have tested positive and died are probably underestimates. Internationally, there is no indication that the virus is running out of steam - In the UK, there are signs of a plateau, but the descent phase will take longer than the time it took to reach the peak 	

- In North Yorkshire the situation has changed rapidly with the latest rates by District as follows:-

New infection rate per 100,000 population over the last 7 days up to 18th November 2020	
Nationally	263
North Yorkshire	276.5
Scarborough	457
Craven	290.5
Selby	275.9
Harrogate	245
Richmondshire	214
Ryedale	204
Hambleton	190

- There have been an estimated 64 people who have died in Hospitals since 1st September and 245 Care Home deaths to 6th November

Julia Mulligan advised that the City of York Outbreak Management Board, which she is also a Member of, had noted the increase in suicides. Have we looked at this data for North Yorkshire? Lincoln Sargeant said that he could ask for an analysis. Drug and Alcohol data will also be examined.

Sally Tyrer, via the chat facility, added that people presenting with mental health has increased significantly, both in primary care and with Tees, Esk and Wear Valleys NHS Foundation Trust.

NOTED.

Lincoln Sargeant

74 **THEME 4 OF THE OUTBREAK MANAGEMENT PLAN: CONTACT TRACING IN COMPLEX SETTINGS**

Victoria Turner advised that, from 5th November, a local system had been set up, in discussion with Public Health England. This will continue to develop.

Among the points she mentioned were:-

- The national system will continue to follow up cases but if no contact has been made within 24 hours this is handed over to the local authority. In North Yorkshire, trained staff in the Customer Resources Centre, supplemented by specialist support from Public Health, where required, deal with these cases
- The national definition of “failure” is not what people would normally take this to mean i.e. if someone who has no contacts self isolates and does all the right things this will be seen as a “failure” as no people have been contacted
- We have been able to learn from others, to develop how we link in with vulnerable people, for example

	<ul style="list-style-type: none"> - There are some clear benefits to this local contact e.g. we can search our databases for alternative contact numbers that might not be known to the national service - Local contact tracing is part of a wider package and is adding value <p>In response to a question from Ian Yapp, Victoria confirmed that this local work on contact tracing would not take away from the work that is being done with schools.</p> <p>Councillor Liz Colling noted that the number was an 01609 code. Have we the telephony to be able to provide numbers local to the areas? Victoria said she would look into this.</p> <p>Councillor Michael Harrison sought clarification as to circumstances in which the national system cannot inform people that they have tested positive. Victoria advised that the national system can cross reference with the NHS spine but it could still be they do not have, say, a 'phone number or email. Often we have this from our databases.</p> <p>In response to queries from Julia Mulligan, Victoria said that the success rate of local contact tracing is difficult to gauge due to some of the vagaries of the system that she had previously referred to.</p> <p>Lincoln Sargeant updated on the local sites available, with more due to come on stream shortly. In addition, satellite provision allows fast deployment of swabs.</p> <p>He added that testing works best in targeted situations and is not convinced that blanket testing will affect the overall management of the pandemic. Testing works best when there is a fair chance of asymptomatic people being identified in a single setting.</p> <p>Richard Webb, via the chat facility, added that anyone we contact locally is a "success" in that the national system has not been able to contact them.</p> <p>Julia Mulligan commented that there seemed to be a difference in approach between the County Council and City of York Council. Richard Webb advised that the Local Resilience Forum is working through options to achieve the best outcomes and return on investment.</p> <p>Lincoln Sargeant added that the County Council is looking to extend the radius of mobile testing beyond 10 miles to take these to the areas of greatest prevalence. There is, however, good testing capacity within North Yorkshire.</p> <p>NOTED.</p>	Victoria Turner
75	<p>LOOKING AHEAD</p> <p>Lincoln Sargeant reported that an announcement is expected next week on the Tier System and the associated criteria and restrictions.</p> <p>It is clear that a menu of restrictions are most effective. To restrict patterns of spread you need restrictions that send the strongest symbol/message, allied to community engagement and enforcement, as appropriate.</p>	

	<p>The key question for North Yorkshire is whether restrictions should be applied by district or sub-district level and across the whole county or on a district-by-district basis.</p> <p>Responding to a question from Councillor Liz Colling, Lincoln Sargeant said the general approach has been to apply restrictions over a larger area.</p> <p>Richard Webb mentioned that he understood there could be a move away from a regional approach and that there is likely to be a clearer escalation and de-escalation route with the new Tiers, but the detail is awaited.</p> <p>Councillor Richard Foster, via the chat facility, indicated that Craven District Council would prefer to work district-by-district on new Tiers that will follow lockdown.</p> <p>Councillor Liz Colling said Scarborough Borough Council's response would depend on conditions around the National Tiers and there are a lot of people who travel from Scarborough to Ryedale and York for work and education, but her preference would be for district level.</p> <p>Councillor Ann Myatt felt that some people who test positive might not comply with isolation requirements – so how much reliance can we place on testing and contact tracing? Lincoln Sargeant commented that test and trace is most effective when numbers are low. A pattern for viruses is that often people are not aware of anyone they know who has tested positive and wonder what the fuss is about. By the time an exponential increase of cases has been reached, the pandemic has taken hold.</p> <p>Julia Mulligan asked what plans are in place for managing potential spread of the virus by students returning home for Christmas. Lincoln Sargeant said the County Council is working with Coventry University (Scarborough Campus). The numbers of students testing positive has fallen and he is confident that they will act responsibly.</p>	
76	<p>COMMUNICATIONS UPDATE</p> <p>Mike James took Members through this Item. Slides had been circulated with the papers for the meeting.</p> <p>He highlighted that:-</p> <ul style="list-style-type: none"> - the communications response is managed by the Local Resilience Forum Communications Group, which meets weekly and who are in constant contact between times; and - a new set of materials has been produced for the current restrictions and all core messages have been updated and shared across media platforms <p>Examples of digital/press/marketing, to convey messages, were shared, together with how baseline materials are presented. Recent work in Scarborough has looked at areas of concern and targeted communications activity undertaken.</p> <p>Looking ahead, it is important to counter “message fatigue”. This will include liaison with the Cabinet Office and developing “trusted voices” to convey messages to people, rather than people having to come to us.</p>	

	<p>Councillor Liz Colling thanked the Communications Team and partners for the work done in Scarborough and asked if we are ready to apply this work if required in other parts of the county. Mike James confirmed that a framework is in place that can be tailored to particular areas.</p> <p>In response to a question by Ian Yapp, Mike James advised that work with the Youth Council has found that young people favoured physical marketing in places where they are. Also, seeing other people in their lives following the rules is a big factor. Therefore, getting the message out to parents is crucial.</p> <p>Lisa Winward advised partners that there has been a surge in anti-social behaviour of young people outside of school hours. Therefore, any messages that partners can get out would be appreciated, as this behaviour is impactful on the wider community.</p> <p>Richard Webb advised that messages for schools could be included in the “Red Bag” (which is the official communication method for sending information to Schools). Partners should contact Mike James or Stuart Carlton (Corporate Director for Children and Young People’s Service) about this.</p> <p>Sally Tyrer, via the chat facility, commented that, in terms of the covid vaccine, it will be really important, from a communications perspective, to ensure the message gets out about the safety of the vaccine if/once it is licensed.</p> <p>NOTED</p>	
77	<p>PARTNER UPDATES</p> <p><u>David Kerfoot, Business</u></p> <p>Referred people to the website for all of the latest information – www.businessinspiredgrowth.com</p> <p><u>Care Sector</u></p> <p>Richard Webb provided an update in Mike Padgham’s absence.</p> <ul style="list-style-type: none"> - A number of designated discharge beds for people with Covid have been brought on stream - Insurance cover for Covid is a big issue for providers - His Directorate (Health and Adult Services) are working with the Sector on outbreak management and is providing support <p><u>Ashley Green, Healthwatch, North Yorkshire:</u></p> <ul style="list-style-type: none"> - Continuing to see a lot of traffic on their website and over the ‘phone - Acting as a conduit to help get information across <p><u>Sue Peckitt, NHS</u></p> <ul style="list-style-type: none"> - Increased numbers of cases putting pressure on all NHS Services 	

	<ul style="list-style-type: none"> - Hospital admissions increasing, but less take up currently of Intensive Care Unit beds due to the use of non-invasive ventilation - Re reports that some Hospitals are struggling with oxygen, this refers not to a lack of oxygen but to issues caused by needing to deliver it at a higher flow, which is causing pipes to freeze - being addressed - Seeing a much higher take up of the flu vaccine this year - Being asked to step up preparations for a vaccination programme from early December, on a phased basis, with over 80's; Care Home residents and staff; and Healthcare workers in the first phase - Identifying potential sites for vaccine to be administered with key partners <p>Julia Mulligan referred to the huge ask on Primary Care staff, whose welfare is important too, so anything partners can do to support NHS colleagues would be good. When will we be able to get information to people as to how the vaccination programme will work? Sue Peckitt advised that national information is awaited, but she will share it as soon as it is received.</p> <p><u>Ian Yapp, Schools</u></p> <ul style="list-style-type: none"> - Schools want – and need – to be open. Work with partners is helping to ensure this – appreciate the support of health partners - A number of staff are self-isolating - An increasing number of students are being taken off the school roll and being formally educated at home, which is a concern - Messaging about community transmission is not being received with the seriousness that it should <p><u>Leah Swain, Community First Yorkshire:</u></p> <ul style="list-style-type: none"> - Staying in touch with national discussions about volunteers assisting with mass testing and vaccination and learning from the Liverpool experience, where volunteers were sought but then not used - Liaising with Clinical Commissioning Groups about vaccination for front line VCS staff and volunteers. For example, if Community Transport drivers need to get people to vaccination sites should they be a priority to receive the vaccination? <p>NOTED.</p>	
78	<p>NEXT MEETING</p> <p>Monday 21st December at 1.00 p.m.</p>	ALL TO NOTE
79	<p>ANY OTHER BUSINESS</p> <p>There was no other business to consider.</p>	

The meeting concluded at 3.40 p.m.

PD

ITEM 6

Public Health Intelligence

Outbreak Management Advisory Board – 21 December 2020

Data pack produced: 14 December 2020

Produced by: Leon Green, Emel Bagdatlioglu

International

Global situation

The WHO reports:

- 68,165,877 confirmed cases (up 385,477 since last week)
- 1,557,385 deaths (up 6,171 since last week)
- 221 areas/nations with cases

Dashboard accessed 09:35 GMT 10/12/20. Data will reflect different reporting timeframes.

Comparison with Europe

The table to the right shows total numbers and 14-day COVID-19 case notification rate per 100,000.

Based on the 14-day cumulative rate (per 100,000), the UK is ranked 21st for new cases and 16th for deaths.

Total cases in the UK are third highest after France and Italy. Total deaths in the UK are highest in Europe (but subject to variation in death registration practices between countries).

Source: [European Centre for Disease Prevention and Control](https://ecdc.europa.eu/en)

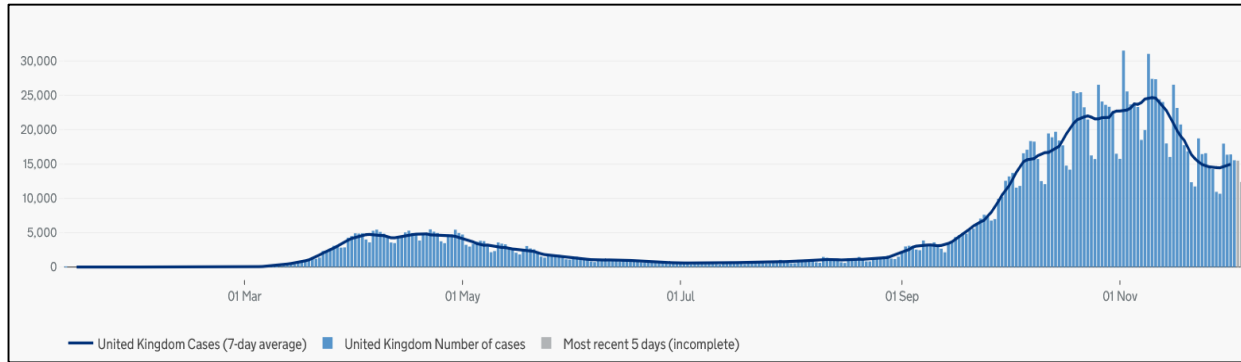
Rank	Country	Cases	Deaths
1	USA	14,972,356	283,994
2	India	9,767,371	141,772
3	Brazil	6,674,999	178,159
7	UK	1,750,245	62,033

Globally, cases now exceed 68 million, with over 1.4 million deaths to date.

The UK has the 7th highest number of cases globally and the 5th highest number of deaths.

Nation	Total to 23/09/2020		14-day cumulative rate per 100,000	
	Cases	Deaths	Cases	Deaths
Luxembourg	38476	360	1199.7	14.2
Croatia	154852	2298	1149.0	20.9
Lithuania	80556	704	1115.3	10.6
Slovenia	87936	1311	1002.3	28.2
Hungary	259588	6280	756.2	22.2
Sweden	297732	7200	702.2	3.8
Liechtenstein	1447	17	641.0	10.4
Austria	305688	3907	590.8	16.9
Bulgaria	168165	5156	554.5	27.6
Portugal	325071	5041	548.3	9.6
Czechia	556927	9136	510.7	15.4
Italy	1757394	61240	501.0	16.5
Romania	524675	12660	484.5	11.8
Cyprus	13286	68	466.6	2.5
Netherlands	569747	9762	443.3	4.3
Poland	1076180	20592	440.1	16.5
Latvia	22104	288	438.1	5.9
Estonia	15510	137	403.9	3.2
Slovakia	119232	1046	398.8	6.2
Denmark	94799	901	375.1	1.8
United Kingdom	1750241	62033	317.3	9.3
Germany	1218524	19932	309.8	6.2
Malta	10699	157	285.1	8.1
Belgium	594436	17507	251.6	12.9
France	2309621	56352	232.5	9.1
Spain	1702328	46646	229.0	6.3
Greece	118045	3194	213.6	12.9
Finland	28242	425	107.9	0.7
Norway	38703	361	103.6	0.9
Ireland	74682	2097	76.5	1.4
Iceland	5506	28	58.3	0.6

UK Cases

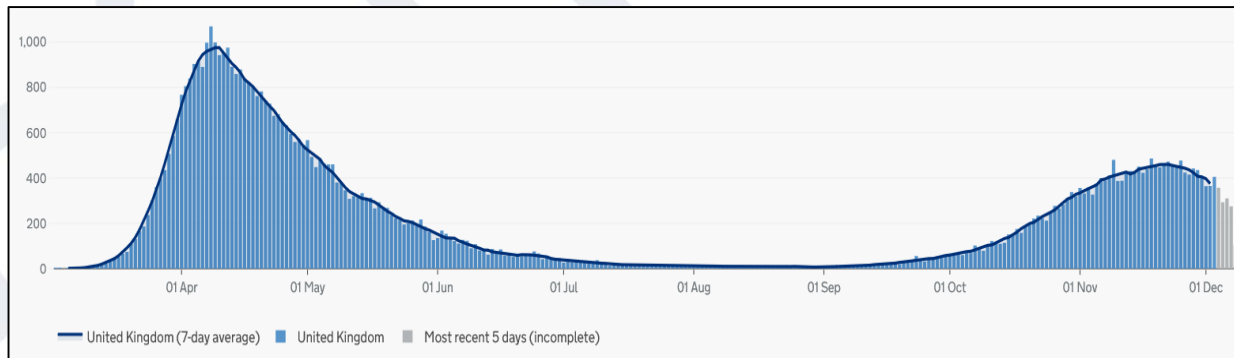


+107,566
since last week

Public Health England data shows there were 1,766,819 lab confirmed cases in the UK (last updated on 9th December), up by 16,578 from the previous day. This is more recent than the data reported by the WHO.

The UK rolling average of daily new cases has increased since September, with the latest average at 14,977 daily cases.

Deaths



+2,884
since last week

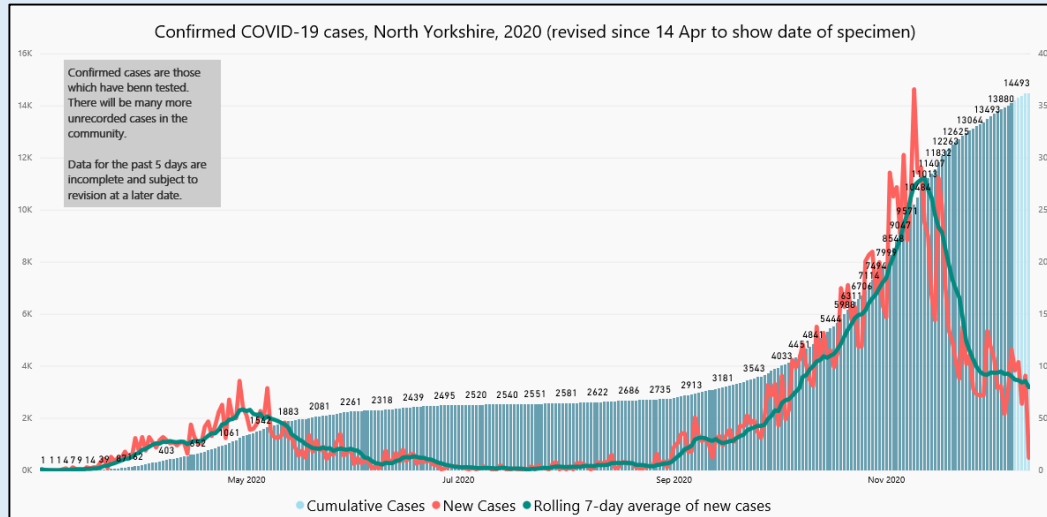
There have been 62,566 deaths recorded in the UK (last updated on 9th December), up by 533 from the previous day.

The UK rolling average of daily deaths has increased since September, with the latest average at 375 daily deaths.

PHE revised the presentation of deaths to include all the deaths of people who have had a positive COVID-19 test result from a Public Health or NHS laboratory within 28 days of death. The data do not include deaths of people who had COVID-19 but had not been tested, people who were tested positive only via a non-NHS or Public Health laboratory, or people who had been tested negative and subsequently caught the virus and died. Deaths of people who have tested positively for COVID-19 could in some cases be due to a different cause.

North Yorkshire

Cases

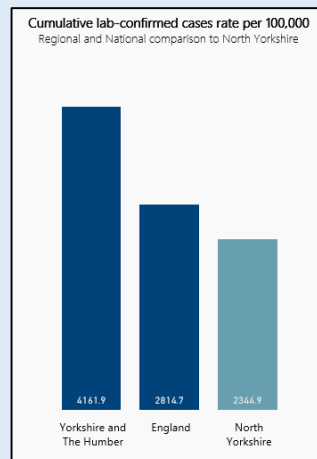
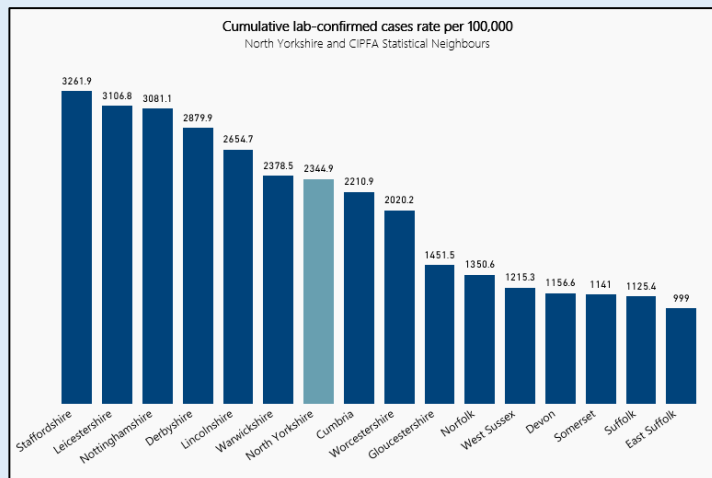


Cases

At 12th December, there have been 14,493 positive tests since 3rd March.

There have been 1,206 new cases reported in the past two weeks. The weekly rolling average of new cases is 80 per day, allowing for incomplete data in the most recent days.

Rates



Rates

Compared with 15 other statistical neighbour local authority areas, North Yorkshire is ranked 7th, with 2,344.9 cases per 100,000 population. The areas with the lowest rates are in Suffolk and South West England.

The North Yorkshire rate is lower than both the England and Yorkshire & Humber rates.

Epidemic-long infection rates

Last refreshed	10/12/2020 (daily)	Data source(s)	NYCC Dashboard via PHE
Descriptor	Total number of people with at least one lab-confirmed positive COVID-19 test result since the start of the pandemic (crude rates per 100,000 population for North Yorkshire).		
Key points	<ul style="list-style-type: none"> • The rate of cases in North Yorkshire is lower than England. • Scarborough has the highest rate amongst the county's districts and Ryedale the lowest. • Compared with authorities with the top 10 highest rates in England, all North Yorkshire's districts are lower. 		

Area	Cases	Rate per 100,000
Craven	1,414	2,474.50
Hambleton	1,785	1,948.80
Harrogate	3,782	2,351.50
Richmondshire	1,047	1,948.60
Ryedale	784	1,415.70
Scarborough	3,140	2,887.20
Selby	2,252	2,485.10
North Yorkshire	14,204	2,298.20
England	1,531,761	2,721.3

Area	Cases	Rate per 100,000
Blackburn with Darwen	10,221	6,827.80
Oldham	15,338	6,468.70
Rochdale	13,313	5,985.70
Manchester	32,475	5,874
Merthyr Tydfil	3,435	5,694.10
Bradford	30,504	5,651.20
Bolton	15,742	5,474.50
Bury	10,354	5,421.20
Salford	13,865	5,356.70
Newcastle upon Tyne	16,214	5,354.30

7-day infection rates for districts

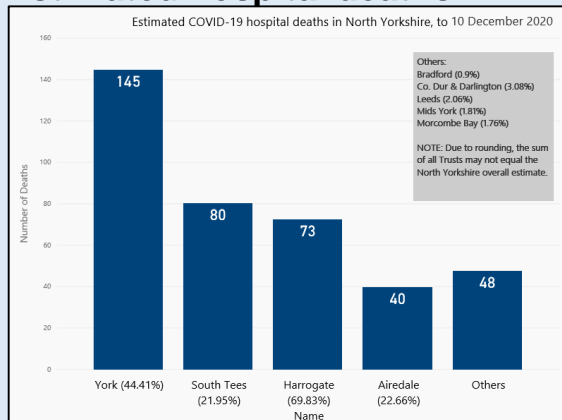
Last refreshed	10/12/2020	Data source(s)	NYCC Dashboard via gov.uk
Descriptor	Number of people with one lab-confirmed positive COVID-19 test result in 7 days of data published on the gov.uk website that aligns with PHE daily briefing dates (crude rates per 100,000 population).		
Key points	<ul style="list-style-type: none"> • The rates here omit the two most recent days of data but better aligns with the latest county-level data from Public Health England's daily briefing. • The total number of cases excludes the most recent days and is lower than the overall count elsewhere in this document. • Scarborough has the highest rate of new cases (over the past 7 days) in North Yorkshire. • Scarborough has seen the highest number of cases in the past 7 days. • Scarborough has a higher cumulative rate than England. 		

Area Name	Population	Cumulative Number of Cases	Cumulative rate per 100,000	New cases over the last 7 days	New cases over last 7 days (all data)*	7-day rate per 100,000	Average Number of new Cases per Day (7 day RA)
England	56286961	1571528	2792.0	101919	91669	181.1	14559.9
Scarborough	108757	3195	2937.7	172	172	158.2	24.6
Craven	57142	1427	2497.3	65	56	113.8	9.3
Selby	90620	2280	2516.0	102	97	112.6	14.6
North Yorkshire	618054	14390	2328.3	591	559	95.6	84.4
Richmondshire	53730	1067	1985.9	43	43	80.0	6.1
Harrogate	160831	3826	2378.9	125	118	77.7	17.9
Ryedale	55380	797	1439.1	40	35	72.2	5.7
Hambleton	91594	1798	1963.0	44	38	48.0	6.3

* The 7-day total includes the latest available data and goes beyond the date range shown. All other data on this page excludes the latest 2 days reported since the latest figures are subject to revision.

Deaths

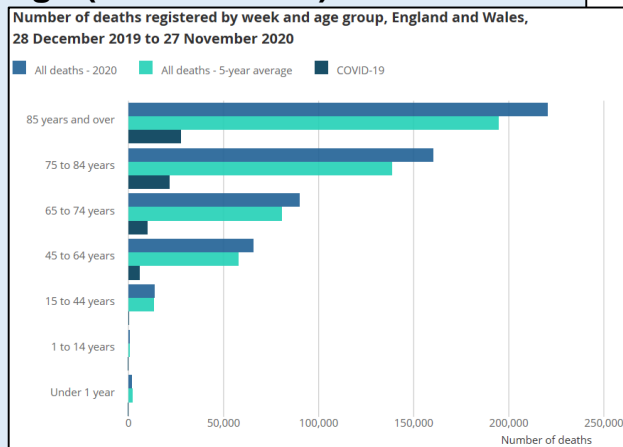
Estimated hospital deaths



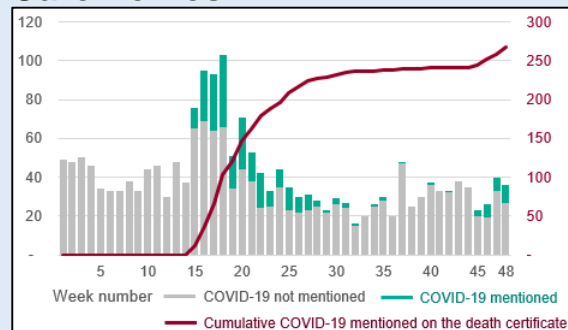
Hospital deaths

Estimates suggest about 386 COVID-19 deaths in hospital for North Yorkshire residents. This has increased by 62 since the last board report. There have been an estimated 128 hospital deaths for North Yorkshire residents since 1st September.

Age (national data)



Care homes



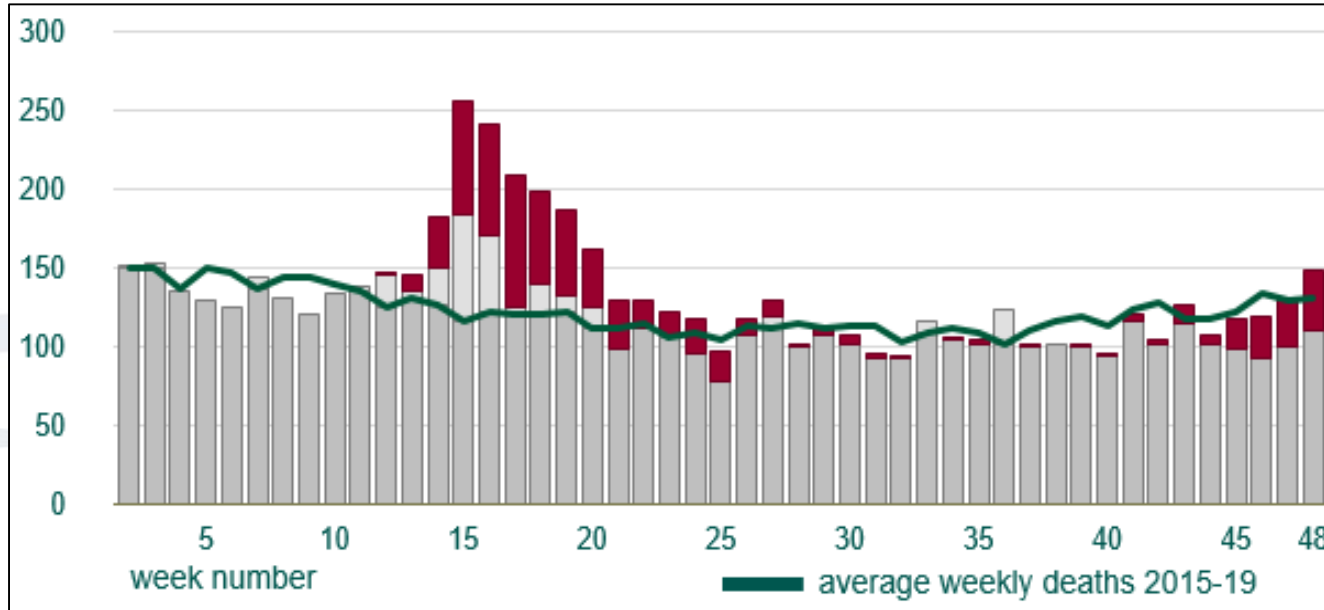
Care home deaths

268 deaths in care homes up to 27 November, up 23 since previous report (to 6 Nov).

Age

Nationally, the number of deaths involving COVID-19 remains higher in older age groups than in younger age groups. The number of deaths up to 27 November 2020 was above the five-year average for all age groups above 14 years, but was below the five-year average for those aged under 15 years.

ONS provisional weekly deaths to 27 Nov.



For week 48, there were 149 deaths reported in North Yorkshire. This is 17 (13%) above the long-term average of 132 for week 48 and 19 higher than week 47 (130 deaths).

There were 39 deaths attributable to COVID-19, 9 more than in week 47. Of the 39 COVID deaths, 27 occurred in hospital and 6 in care homes.

In week 48, COVID deaths comprised 26% of all deaths in the county, up from 13% in week 45 and lower than 40% in week 17.

To 27th November 2020, there have been 6,420 deaths in North Yorkshire from all causes and 708 (11.0%) from COVID-19.

30.1% of deaths from all causes have occurred in care homes. There have been 269 deaths in care homes from COVID-19, 38.0% of all COVID deaths.

Data sources

WHO Coronavirus Disease (COVID-19) Dashboard:

<https://covid19.who.int/>

European Centre for Disease Prevention and Control:

<https://www.ecdc.europa.eu/en/cases-2019-ncov-eueea>

Coronavirus (COVID-19) in the UK: <https://coronavirus.data.gov.uk/>

NHS England, COVID-19 Daily Deaths:

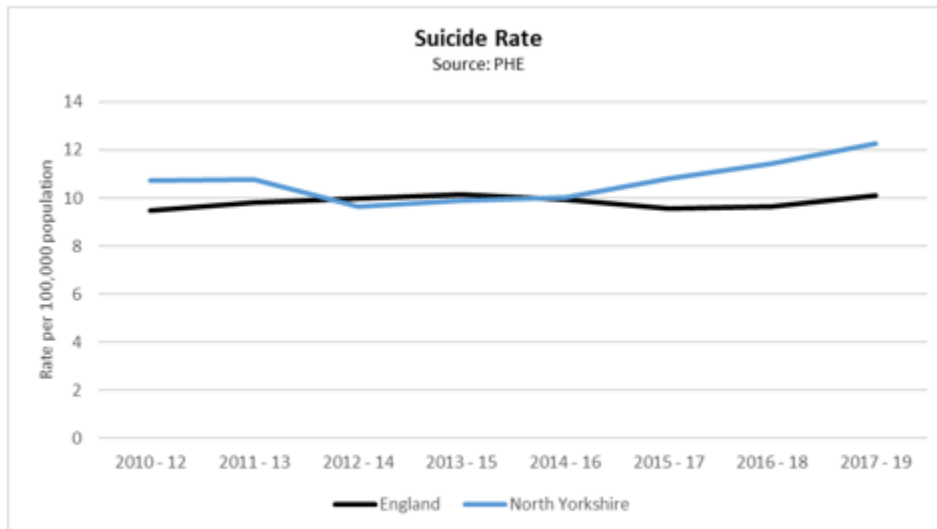
<https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-daily-deaths/>

Office for National Statistics, Deaths registered weekly in England and Wales, provisional: week ending 2 October 2020:

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsregisteredweeklyinenglandandwalesprovisional/latest>

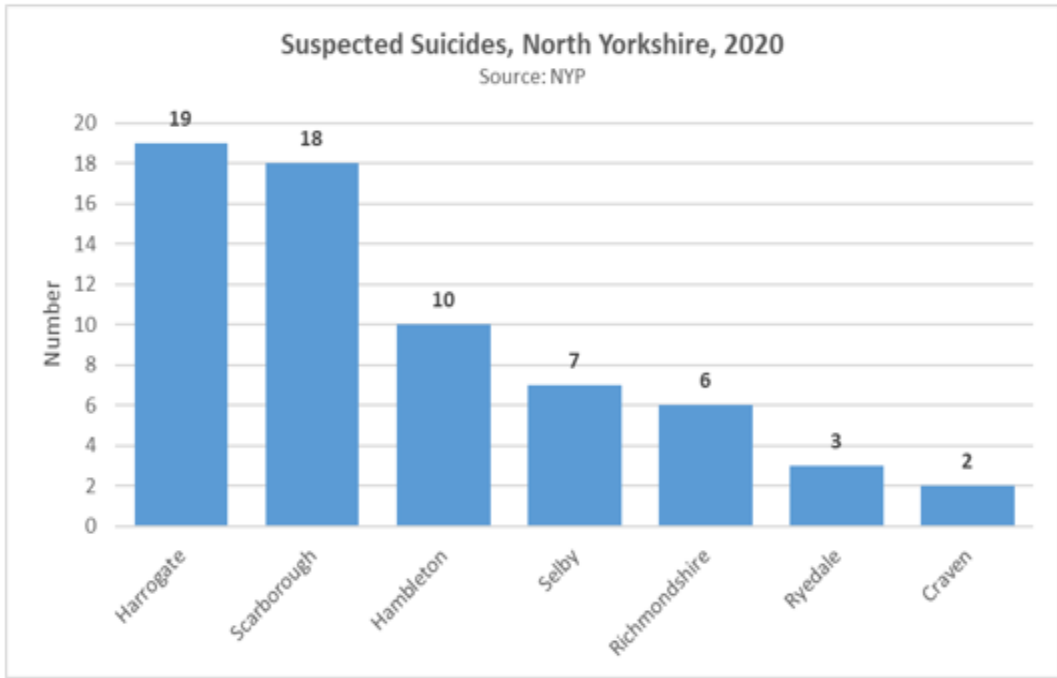
ITEM 7

Information on Suicide Rates; Suspected Suicides and Drug and Alcohol Related Deaths



The chart to the left highlights the suicide rate between North Yorkshire and England.

- Between 2013-15 and 2017-19 the suicide rate in North Yorkshire has slowly increased. In 2017-19 the rate is significantly higher than England.
- Between 2014-16 and 2017-19 the suicide rate in England has also increased, however the North Yorkshire rate is increasing faster than England.



The chart to the left highlights the number of suspected suicides in North Yorkshire from the 1st January 2020 to date.

There has been a total of 73 suspected suicides in North Yorkshire; Harrogate and Scarborough have the highest numbers in comparison to Craven with the least.

COVID-19 and drug and alcohol related deaths - nationally

- Deaths related to drug poisonings have been recorded nationally since 1993. Data is reported in an annual report by the [Office for National Statistics](#). The latest report was published in October;
- Nationally, the highest number of deaths were recorded in 2019, but remained broadly similar to the number observed in 2018 which saw the highest annual increase on the previous year;
- New analysis by deprivation shows that, in the last decade, rates of drug poisoning deaths have been higher in the most deprived areas of England and Wales compared with the least – 5.5x higher for >40 yr olds in most deprived areas;
- Deaths by drug poisonings are most marked in Scarborough District in North Yorkshire - 11.9 per 100,000 (8.0 – 16.9 confidence intervals [95%]) compared to 6.2 per 100,000 in Yorkshire and the Humber and 4.7 per 100,000 nationally (2017-2019 data, source: fingertips);
- Alcohol specific and alcohol related mortality are reported on Public Health England's [Fingertips tool](#);
- It's too soon to confirm whether people who misuse drugs and alcohol are disproportionately affected by COVID-19, and/ or whether outcomes are worse;
- Public Health England is currently exploring this – provisional data is expected in early 2021;

COVID-19 and drug and alcohol related deaths - locally

- We have an established confidential enquiry process for all over 18 drug related deaths, and deaths of people who misuse alcohol who are engaged with our specialist treatment service;
- The process was established in 2010 and has evolved – Public Health Team co-ordinates;
- All deaths which meet the criteria are reviewed;
- North Yorkshire Horizons, North Yorkshire Police, North Yorkshire County Council Children and Families Services and Health and Adult Services and Tees and Esk Wear Valley NHS Mental Trust contribute;
- Note: we review every death that meets our criteria, therefore adopt a broader definition than the Office for National Statistics Annual Report
- Annual Report for 2019 is currently being produced; 2020 will be produced in Autumn 2021

Outbreak Management Plan / Covid-19 Communications

Communication Aims

- ✓ Advise and support people with information on restrictions
- ✓ Help reduce the spread of Covid and save lives
- ✓ Support communities and the economy – and a longer term return to business as usual
- ✓ Ensure consistent messaging across North Yorkshire, where appropriate

Communication Principles

- ✓ Key agencies working together, coordinated through LRF communications group
- ✓ Alongside North Yorkshire-wide communications, also now delivering localised activity to deal with particular issues
- ✓ React and evolve to ensure we can use communications as effectively as possible

Recent activity - overview

- ✓ Targeted work to deal with localised issues
- ✓ Digital campaign for the move into tier 2
- ✓ Ongoing media engagement, including LRF press conferences
- ✓ Ongoing display advertising
- ✓ Local contact tracing and local testing communications
- ✓ Community support campaigns
- ✓ Celebration of community efforts

URGENT SCARBOROUGH BOROUGH COVID-19 ALERT

17 November 2020

Dear resident

Coronavirus – Infection rates rising sharply in your area

As you may have heard, the number of Covid-19 cases in the borough of Scarborough has doubled in recent days and is rising rapidly.

It is everyone's responsibility to protect each other and help bring down the rates of infection.

To play your part, it is essential that you and those you live with follow the national restrictions and stay at home:

- Only leave home for food, medical reasons, exercise, education or work
- Do not meet up with other households, even outdoors, except for the permitted reasons set out in the national guidance at gov.uk/coronavirus
- If you have symptoms you must self-isolate and get a test - it's the law
- You must work from home if you can
- Avoid all travel unless essential
- Remember to wash hands, cover face, make space
- Remember that school bubbles do not apply outside school

Additional testing sites will be launched throughout the borough this month. We are asking visitors not to come to the borough at the moment. We encourage everyone to stay at home and exercise in their own local area.

If you are self-isolating and don't have anyone who can help you with shopping and other essentials, call 01609 780780 any day between 8am and 5.30pm and you will be directed to local support that is right for you.

If you have to self-isolate and cannot work from home, you may be eligible for a Test and Trace support payment. Refer to 'support for you' at www.scarborough.gov.uk/coronavirus for more information. If you do not have access to online services, call 01723 232372.

We know we can count on your support and thank you for your cooperation.

Dr Lincoln Sargeant

Director of Public Health for North Yorkshire

Superintendent Mike Walker
North Yorkshire Police



Mike Greene
Chief Executive
Scarborough Borough Council



Richard Flinton
Chief Executive
North Yorkshire County Council



STAY AT HOME gov.uk/coronavirus
northyorks.gov.uk/coronavirus
scarborough.gov.uk/coronavirus
STAY ALERT | CONTROL THE VIRUS | SAVE LIVES



If you test positive for Covid-19 and the NHS Test and Trace service are unable to contact you, it will be our responsibility to speak to you about your recent contacts.

**We will contact you on an 01609 number.
You do not need to contact us.**

We will **NOT** ask you to:

- disclose any personal or medical information
- provide passwords or PIN numbers
- provide bank account details
- make any form of payment
- dial a premium number
- download any software



STAY SAFE
IN NORTH YORKSHIRE



STAY SAFE
IN NORTH YORKSHIRE



Tier 2 – high Covid-19 alert level



Social contact

Only your household or support bubble can meet indoors – stick to the rule of six outdoors.



Travel and transport

Reduce journeys where possible. Avoid travelling into any areas of local Covid-19 alert level of very high where possible.



Working from home guidance

Work from home where possible.



Hospitality

Alcohol can only be served as part of a substantial meal. Pubs and restaurants must shut at 11pm.

We must all act together with simple, precautionary measures to save lives, protect jobs and the economy and ensure schools can stay open

www.northyorks.gov.uk/coronavirus

Skipton local testing sites opening date set

This story was published 7 December 2020

A permanent Covid-19 local testing site is scheduled to open in Skipton on Saturday, 12 December, to support the ongoing expansion of Covid-19 testing.



North Yorkshire County Council

Yesterday at 5:30 AM · 🌐

...

If you've got #Covid symptoms, Government run testing sites are at the following locations over the next few days.

#Harrogate
#Scarborough
#Northallerton... See More



ppGha6SGEnt



North Yorkshire County Council

December 7 at 11:00 AM · 🌐

...

Bedale Community Minibus is has stepped up to help residents who are shielding during the #coronavirus pandemic.

The community minibus service has been delivering prescriptions to those in the community who need to get their medication.

Malcolm Bloor, a member of the organisation, said: "We go to the chemist, the driver shows their ID and they get a box of medication and then drive round delivering it to people in the community.... See More



North Yorkshire County Council

36m · ⚙️

...

We're really looking forward to welcoming you back in the future. But for now please remember that if you live in a tier 3 area, you should not visit pubs, restaurants and hotels in North Yorkshire.

If you do have to travel to North Yorkshire for essential activities, you must continue to follow all tier 3 restrictions.



If you live in a tier three area, you must stick to the tier three rules wherever you go.

That means you should not visit pubs, restaurants and hotels in North Yorkshire



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OFFICIAL

Vaccine communications

- ✓ NHS-led, other LRF agencies supporting key messages
- ✓ Communication priorities based on helping NHS to deliver:
 - Helping reduce demand from people contacting GPs and hospitals
 - Explaining process and speed of vaccination programme
 - Supporting national work to counter misinformation online
 - Supporting national proactive promotion of the vaccination and demographic

Look Ahead

- ✓ Recently agreed Christmas and New Year messaging based on local and national data about message perceptions
- ✓ Ongoing emphasis on using communications to support successful vaccine roll-out
- ✓ Further developing narrative of celebrating efforts, to help us emerge stronger
- ✓ Review of tier messaging after Government announcement

Questions?

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