



Agenda

Notice of a public meeting of North Yorkshire Outbreak Management Advisory Board

To: Councillors Carl Les (Chair), Michael Harrison (Vice-Chair), Andrew Lee, Stuart Parsons, Liz Colling, Mark Crane, Angie Dale, Richard Foster, Dinah Keal, Ann Myatt, Stephen Watson

Amanda Bloor, Jane Colthup, Richard Flinton, Ashley Green, Simon Padfield, Mike Padgham, Helen Simpson, Sally Tyrer, Louise Wallace, Richard Webb, Lisa Winward and Ian Yapp.

Date: Friday, 29th October, 2021

Time: 2.30 pm

Venue: Remote Meeting held via Microsoft Teams

This meeting will be held using video conferencing with a live broadcast to the Council's YouTube site.

To find out more about the North Yorkshire Outbreak Management Plan go to www.northyorks.gov.uk/our-outbreak-plan

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.

Business

1. **Welcome/introduction**
2. **Apologies for absence**
3. **Notes of meeting held on 29th September 2021 and any matters arising** (Pages 3 - 10)
4. **Declarations of interest (if any)**

5. **Notification of Any other business**
6. **Update on the current position in North Yorkshire - Louise Wallace, Director of Public Health**
Given the dynamic situation, the most up-to-date information will be presented at the meeting
7. **Excess Mortality - Louise Wallace, Director of Public Health** (Pages 11 - 16)
Data on excess mortality was requested at the last meeting.
8. **Vaccination Update - verbal update by North Yorkshire Clinical Commissioning Group**
9. **Communications Update - Mike James, Team Leader, Marketing and Customer Communications** (Pages 17 - 24)
10. **Partner Updates (on an exception basis):**
 - Business / LEP
 - Care Sector
 - Healthwatch
 - Local Government
 - NHS
 - Police
 - Office of the Police, Fire and Crime Commissioner
 - Public Health England
 - Schools
 - Voluntary & Community Sector
11. **Next Meeting - Wednesday 24th November 2021 at 2.00 p.m.**
12. **Any other business**

Barry Khan
Assistant Chief Executive
(Legal and Democratic Services)

County Hall
Northallerton

Thursday, 21 October 2021



North Yorkshire Outbreak Management Advisory Board

Notes of the remote meeting held on Wednesday, 29th September 2021 at 2.00 p.m.

THOSE WHO JOINED THE DISCUSSION:

North Yorkshire County Council Representatives:

Councillor Carl Les, Leader, North Yorkshire County Council (Chair)
County Councillor Andrew Lee, Executive Member, Public Health, Prevention, Supported Housing
Councillor Michael Harrison, Executive Member for Adult Services and Health Integration
Barry Khan, Assistant Chief Executive (Legal and Democratic Services)
Louise Wallace, Director of Public Health
Richard Webb, Corporate Director, Health and Adult Services

District Council Representatives:

Councillor Angie Dale, Leader, Richmondshire District Council
Councillor Richard Foster, Leader, Craven District Council
Councillor Janet Frank, Ryedale District Council (substitute for Councillor Dinah Keal)
Councillor Ann Myatt (Harrogate Borough Council)

Other Partners' Representatives:

Sue Peckitt, North Yorkshire Clinical Commissioning Group (substitute for Amanda Bloor)
Jane Colthup, Community First Yorkshire
Ashley Green, Chief Executive Officer, Healthwatch, North Yorkshire
Nicole Hutchinson, representing the Office of the North Yorkshire Police, Fire and Crime Commissioner
Helen Simpson, Chair, York and North Yorkshire Local Enterprise Partnership
Sally Tyrer, Chair, North Yorkshire Local Medical Committee
Ian Yapp, Chief Education Officer, the STAR Multi-Academy Trust

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

Patrick Duffy, Principal Democratic Services Scrutiny Officer (Clerk)
Mike James, Team Leader, Marketing and Customer Communications
Andy Robson, Head of Outbreak Management
Victoria Turner, Public Health Consultant

Apologies received from:

Amanda Bloor, Accountable Officer, North Yorkshire Clinical Commissioning Group
Councillor Liz Colling, Scarborough Borough Council
Simon Dennis, Chief Executive and Monitoring Officer, Office of the North Yorkshire Police, Fire and Crime Commissioner
Councillor Dinah Keal, Ryedale District Council
Lisa Winward, Chief Constable

Copies of all documents considered are in the Minute Book

NO.	ITEM
178	<p data-bbox="300 241 1386 275">WELCOME AND INTRODUCTION BY THE CHAIR</p> <p data-bbox="300 309 1386 376">County Councillor Carl Les welcomed Members of the Board and any members of the public or media viewing the meeting.</p> <p data-bbox="300 409 1386 443">He advised that he is the Leader of the Council and Chairs this Board and that:-</p> <ul data-bbox="300 477 1386 954" style="list-style-type: none"> <li data-bbox="300 477 1386 589">- 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; <li data-bbox="300 611 1386 723">- 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; <li data-bbox="300 745 1386 813">- the papers for this meeting had been published in advance on the County Council's website; and <li data-bbox="300 835 1386 954">- the Board comprises, among others, representatives of the County Council; District and Borough Councils; the NHS; Public Health England; Schools; Healthwatch; the Care Sector; and the Voluntary Sector
179	<p data-bbox="300 981 1386 1014">APOLOGIES</p> <p data-bbox="300 1037 1386 1070">As stated in the attendance on the previous page.</p>
180	<p data-bbox="300 1104 1386 1137">NOTES OF MEETING HELD ON 27TH AUGUST 2021</p> <p data-bbox="300 1171 1386 1205">AGREED that these were an accurate reflection of the discussion.</p>
181	<p data-bbox="300 1238 1386 1272">DECLARATIONS OF INTEREST</p> <p data-bbox="300 1294 1386 1328">There were no declarations of interest.</p>
182	<p data-bbox="300 1373 1386 1406">NOTIFICATION OF ANY OTHER BUSINESS</p> <p data-bbox="300 1429 1386 1563">The Chair asked Members if they could advise him, at this stage, whether they had any item of urgent business they were likely to raise under that heading, so that he could ensure there was sufficient time at the end to consider it. No Members indicated that they had any urgent business to raise.</p>
183	<p data-bbox="300 1597 1386 1664">DISCUSSION PAPER - REVIEW OF THE OUTBREAK MANAGEMENT ADVISORY BOARD</p> <p data-bbox="300 1697 1386 1765">Patrick Duffy introduced this, starting that it felt opportune to look at how the Board is functioning now that it is in its second year of operation.</p> <p data-bbox="300 1798 1386 1865">He had liaised with County Council Members about this and, purely for the purposes of the discussion, their views were related:-</p> <ul data-bbox="300 1899 1386 2098" style="list-style-type: none"> <li data-bbox="300 1899 1386 1966">- The feeling is that the Board is working well with no particular areas identified as requiring change <li data-bbox="300 2000 1386 2098">- It is considered prudent to continue to meet monthly so that Members can receive updates on matters such as the Vaccination Booster Programme and because, sadly, we are likely to be in some form of special measures

	<p>/restrictions for some time yet. Therefore, it would be useful to plan ahead for the next twelve months.</p> <ul style="list-style-type: none"> - Remote meetings have worked well and facilitated the attendance of key players. <p>Barry Khan added that the fact the Board is not a formal Committee is probably a strength, as a range of partners have come together and their views have been fed back into each of the sovereign organisations, as required. Having the Board as a Forum has been helpful and there is no need for fundamental review. There is plenty of work for the Board still to do and officers would recommend that remote meetings continue.</p> <p>AGREED:</p> <ul style="list-style-type: none"> a) That the Board continue to meet on a monthly basis with the option to drop a meeting periodically if required. b) That The Board continue to meet remotely.
184	<p>UPDATE ON THE CURRENT POSITION IN NORTH YORKSHIRE</p> <p>Slides were presented by Louise Wallace, which contained data regarding the epidemiology of the pandemic internationally; for the UK; North Yorkshire; and by Districts.</p> <p>Louise Wallace made the following points, in particular:-</p> <ul style="list-style-type: none"> - We are seeing an increase in the daily infection rate that is above the England average. It is being driven by cases in educational settings. Being in excess of the national average is unusual for North Yorkshire. She is hopeful that it will fall back in line in the next few weeks - There is a mixed picture across the districts in terms of numbers and rates - There were nine deaths in the County in one day last week. Every death is sad, but there does not appear to be any particular reason why the number was so high during that week. We will continue to monitor the situation however. - We continue to encourage people to be vaccinated and to get the booster when they are eligible for it. It is clear that the vaccine has had a significant impact on reducing hospitalisations <p>Andy Robson added that there is nothing that is currently causing particular issues. His Team continue to support workplace settings and education settings, which is the area of greatest resource demand. The landscape has changed in that we are now operating in the Department for Education Contingency Framework – Schools are no longer required to report single cases. Advice to schools continues and when a School hits one of the triggers identified in the Contingency Framework, a more detailed package of support is put in place.</p> <p>He added that there is a daily Incident Management meeting for Schools facing challenges with a larger number of cases. The aim is to keep as many children as possible in School.</p> <p>Ian Yapp advised that Schools are now permitted to have full access to classrooms, laboratories, etc. This return to more normal teaching has been very positive. However, cases are impacting on staff availability. Schools are working as well as they can to manage the situation within the Guidance.</p>

	<p>Ian also advised that it has been confirmed that twice weekly testing will continue beyond September for all secondary School pupils and education-based staff. Lateral Flow testing continues, as does asymptomatic testing on site.</p> <p>The vaccination programme for 12 to 25 year olds will make a positive difference. There are some anxieties in education communities, but it will make a positive difference to the current caseload and prevalence.</p> <p>Ashley Green asked if we should be concerned that the case rates are above the national average. Louise Wallace advised that, whilst not being complacent in any way, it is clear that this is currently being driven by school age children and young people testing positive.</p> <p>Councillor Ann Myatt asked whether it was possible to work out how significant Covid is where it is listed as a factor on the Death Certificate for people who have died within 28 days of a positive test. In addition, people are still concerned about Covid and are hesitant to see their Doctor. Therefore, it would be helpful to see what the excess death figure is. Louise Wallace responded that a breakdown of deaths attributable mainly to Covid is not information that she receives but she will see if it is possible to obtain it. Regarding excess deaths, that information is available and she would be happy to bring this back to the Board.</p> <p>Sally Tyrer asked if any consideration is being given to encourage parents with a stronger message about siblings of those that test positive and are self-isolating i.e. if one child is in bed at home suffering from Covid and a sibling is in School, with a risk of contracting it, this can appear bizarre. The balance, of course, is with how important it is to keep children in education. Victoria Turner advised that this is being looked at and would be on based on risk. It will not be a blanket approach, but concentrate on cases where there is high risk of infection from siblings.</p> <p>Ian Yapp commented that Schools would welcome some carefully constructed language around this as they are in a complex position, having to report attendance as either authorised or unauthorised.</p> <p>AGREED</p> <p>a) That Louise Wallace bring back to the Board data on excess deaths.</p> <p>b) That Victoria Turner advise the Outbreak Hub on suitable wording to be used with Schools regarding the management of siblings cases.</p> <p>NOTED.</p>
185	<p>THE GOVERNMENT'S AUTUMN AND WINTER PLAN AND ITS IMPLICATIONS FOR NORTH YORKSHIRE</p> <p>Slides were presented by Louise Wallace, which outlined the measures set out by the Government for autumn and winter.</p> <p>The main defence remains vaccination, rather than lockdown.</p> <p>Plan A identifies actions in five key areas. There are a number of variables, however, such as the emergence of new variants. Winter time is always challenging.</p> <p>Louise outlined the five components:-</p> <ul style="list-style-type: none"> • Vaccination • Test, trace, isolate • Supporting the NHS and Social Care

	<ul style="list-style-type: none"> • Advising people how to protect themselves and others • Pursuing an international approach <p>With regard to supporting the NHS and Social Care, Richard Webb commented that it is going to be a tough winter. We are seeing high levels of need presenting across all areas of Social Care and are constantly operating at a contingency planning level. On the positive side, we are as well-equipped as anywhere to deal with the challenges.</p> <p>Richard also mentioned that if Members are aware of anyone who may be looking to change career, Social Care and the NHS would be delighted to hear from them. They will be welcomed into the fold and supported. This would really assist the situation.</p> <p>Louise Wallace then outlined Plan B, which are the measures that may be required and include measures such as introducing mandatory vaccination only Covid status certification and mandatory face coverings in certain settings.</p> <p>Barry Khan touched on the changes to Regulations which have been extended beyond September 2021. These allow the Council to issue directions; close premises; etc. These are used as a last resort and as part of a proportionate response, allowing the Council to co-ordinate its response and provide one that is proportionate.</p> <p>Other support includes the Education Contingency Framework and the Outbreak Control Plan, which will continue to be refreshed.</p> <p>NOTED.</p> <p>At this stage, the Chair varied the order of the Agenda so that the Communications update be taken next.</p>
186	<p>COMMUNICATIONS UPDATE</p> <p>Mike James made a presentation.</p> <p>He outlined the context of the Respect and Protect Campaign and highlighted the following, in particular:-</p> <ul style="list-style-type: none"> - Message fatigue is an issue - We will push the message that <i>a little kindness goes a long way</i>, which includes the desire to build on the sense of community built up in the pandemic - There are three stages to the Campaign:- <ul style="list-style-type: none"> • changes to Government rules and national messages; • humanising these for digital channels; and • making use of materials in physical places - building on the Team North Yorkshire brand <p>Mike provided in his slides examples of each of the above stages and concluded by referring to the importance of partnerships in maximising the reach of the message. For example, there is a wider partnership approach with Health colleagues to share key campaign messages and consider how these can be fed into some of the wider work around vaccination and flu jabs communications.</p> <p>NOTED.</p>

<p>187</p>	<p>VACCINATION UPDATE</p> <p>Sue Peckitt updated as follows:-</p> <ul style="list-style-type: none"> - The Vaccination Programme continues to progress well - 589,683 people have received a first dose and 557,982 people have received a second dose. - In the younger cohort:- <ul style="list-style-type: none"> • over 60% of 16/17year olds have had their first dose (they are currently receiving just one dose in accordance with the National Guidance); • in the 18-29 year old cohort, over 77% have received their first dose and 65% have received their second dose; and • for 30-39 year olds, over 73% have had their second dose - The Evergreen offer, to people who have so far chosen not to receive the vaccine, remains in place. - The booster programme has commenced. - Wherever possible, attempts are being made to administer the Covid vaccine and Flu jab at the same time for those eligible but, due to supply issues, neither programme will be held up and we will continue with whichever is available. - Re 12-15 year olds who are clinically vulnerable, or living with a clinically vulnerable adult, most of our at risk children have received the dose. - Of the wider 12-25 year old cohort in Schools, the Programme will be delivered by the Children Immunisation and Vaccination Team. <p>NOTED.</p>
<p>188</p>	<p>LOCAL GOVERNMENT ASSOCIATION - COVID OUTBREAK MANAGEMENT PEER CHALLENGE</p> <p>Richard Webb informed Members that this Programme is not a formal Inspection but one of robust challenge.</p> <p>Three weeks ago the Council had been peer-reviewed. The final report is awaited, but feedback so far is has been very positive. The Inspection Team:-</p> <ul style="list-style-type: none"> - picked out the comprehensive nature of our response; - were complimentary about work in schools; community support; care settings and events; - noted high uptake in vaccination and testing; and - were positive about the role of various decision-making bodies and the appropriateness of different levels of leadership <p>This was a positive validation of people’s work and provided useful pointers for future outbreak management.</p> <p>The Chair asked Richard Webb to consider how the final report can best be circulated when it is received.</p>

189	<p>PARTNER UPDATES</p> <p><u>Business – Helen Simpson</u></p> <ul style="list-style-type: none"> - Concern about the fuel situation and the impact on people’s ability to get to work. - Waiting to hear about sources of funding. - Some skills shortages – the LEP is trying to assist. <p><u>Ashley Green, Healthwatch</u></p> <ul style="list-style-type: none"> - Covid is no longer the Number 1 reason for the public contacting Healthwatch. This is a positive development. Contact is now more around access to services. <p><u>Care Sector – Richard Webb</u></p> <ul style="list-style-type: none"> - Re mandatory vaccination, about 380 staff - across a total of 20,000 in the Sector - have not opted to receive the vaccine. Redeployment and other options are being examined. - Fierce competition in the labour market between hospitality; retail and care. <p><u>NHS – Sue Peckitt</u></p> <ul style="list-style-type: none"> - Still significant pressures, particularly in Primary Care and Emergency Urgent Care. - Number of Covid inpatients has reduced in the last week, but there are still 113 in Hospital with Covid. - Primary Care is still open and providing access to patients – worth stressing, given some of the recent coverage. - Much higher demand than has been seen before. <p><u>Voluntary and Community Sector – Jane Colthup</u></p> <ul style="list-style-type: none"> - Working closely with colleagues in other sectors on workforce planning and development and communications - Holding a Funding Summit on 30th September re BCSE <p><u>Public Health England</u></p> <ul style="list-style-type: none"> - Richard Webb asked the Board to note that Public Health England will be replaced on 1st October 2021 by the UK Health Security Agency and the Office for Health Improvement and Disparity. He thanked PHE colleagues, from whom the Council has received great support and wished the staff well in their new roles.
190	<p>NEXT MEETING</p> <p>The Chair confirmed that the next meeting will be on Friday 29th October at 2.30 p.m.</p>
191	<p>ANY OTHER BUSINESS</p> <p>There was no other business to consider.</p>

The meeting concluded at 3.12 p.m.

PD

This page is intentionally left blank

Public Health Intelligence

Page 11

Outbreak Management Advisory Board – 29 October 2021

Excess Mortality

Data pack produced: 19 October 2021

Produced by: Colin Bainbridge

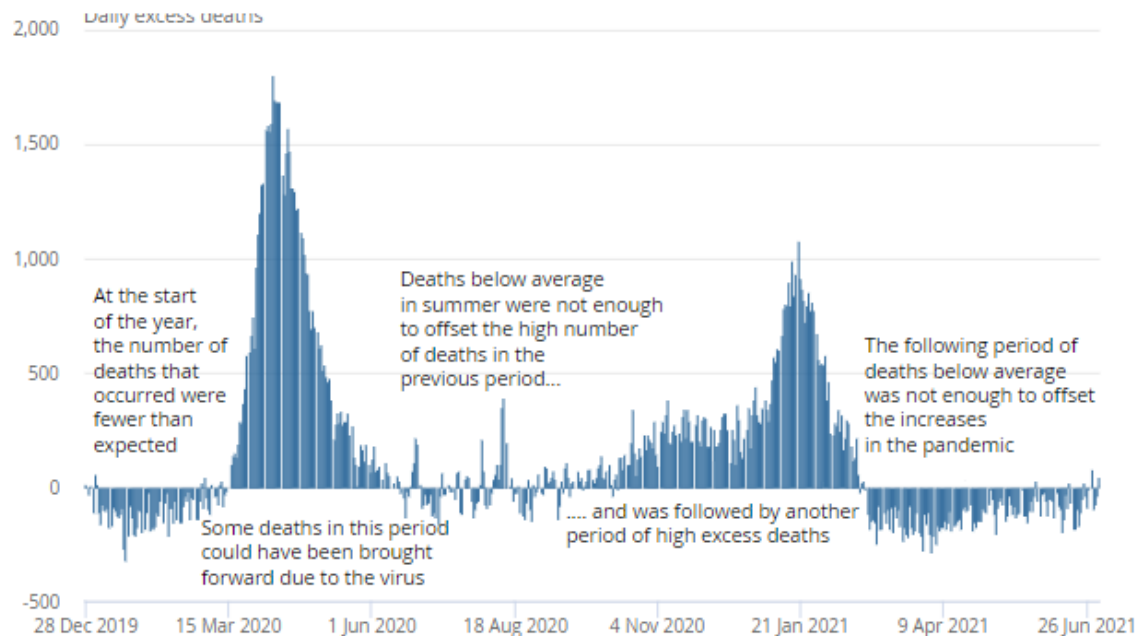
Agenda Item 7

Excess Mortality – England and Wales

Last refreshed	15/10/2021	Data source(s): ONS	Office for National Statistics
Descriptor	Weekly excess mortality from all causes in North Yorkshire.		
Key points	<ul style="list-style-type: none"> • In England and Wales, from week ending 3 January 2020 to 2 July 2021, there were 97,981 excess deaths (compared with what we would expect in a non-pandemic period) • We have seen periods of large numbers of excess deaths during wave 1 and wave 2. After each wave we have seen periods where daily deaths were below the expected number, but these periods were not enough to offset the high number of excess deaths during wave 1 and wave 2. 		

Figure 1: The number of deaths below average was not enough to offset the number of deaths above average during the pandemic

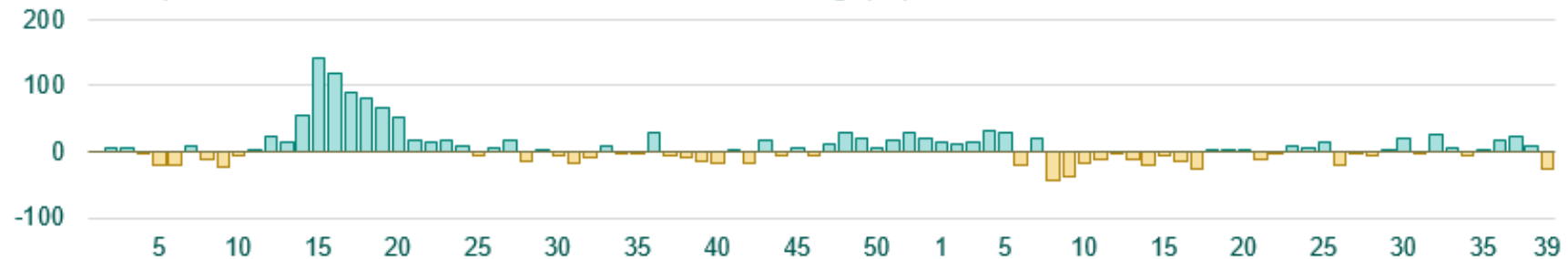
Number of excess deaths occurring on each day, from 28 December 2019 to 2 July 2021 and registered by 18 September 2021



Excess Mortality in North Yorkshire

Last refreshed	15/10/2021	Data source(s): ONS	Office for National Statistics
Descriptor	Weekly excess mortality from all causes in North Yorkshire.		
Key points	<ul style="list-style-type: none"> • Peak excess mortality in North Yorkshire occurred in week 15 2019/20 with 141 deaths in excess of the 5 year average (2015-2019). • In week 39 2020/21, the most recent week for which data is available, there were 25 fewer deaths than the 5 year average. • The 5 year average for the weeks of the pandemic indicates 11,347 expected deaths. 11,906 deaths have been recorded – an excess of 559. 		

Excess deaths (2020 and 2021 deaths minus 2015 to 2019 average) up to 1 October 2021



Greater than the 5 year average

Note - values for deaths occurring for the most recent week are likely to be lower than the final values due to the time lag in reporting.

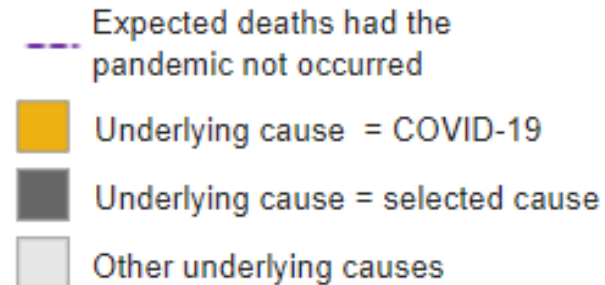
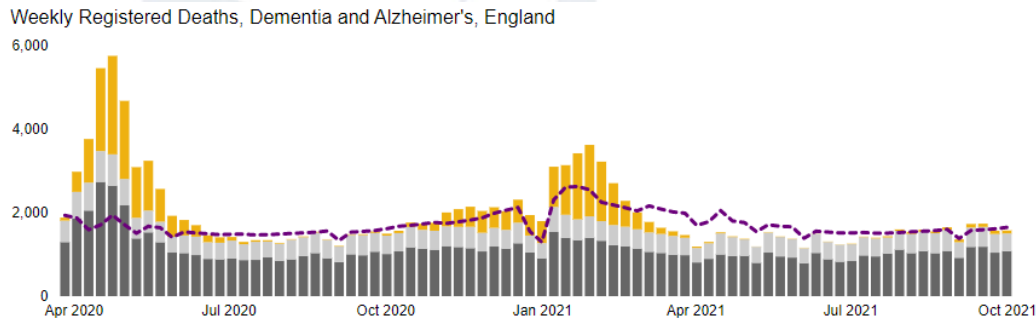
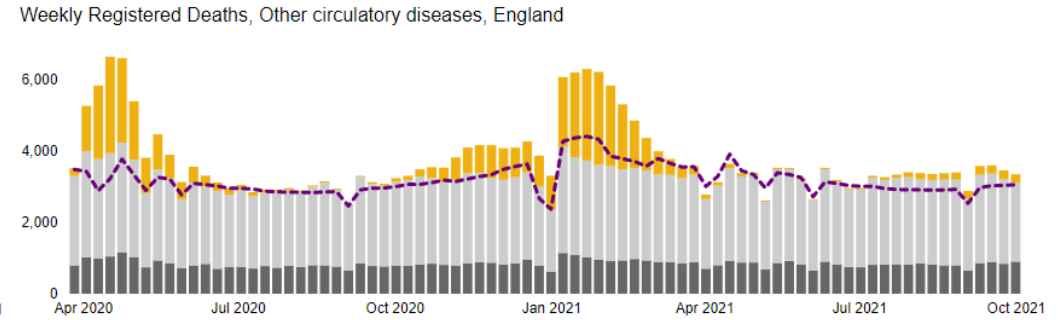
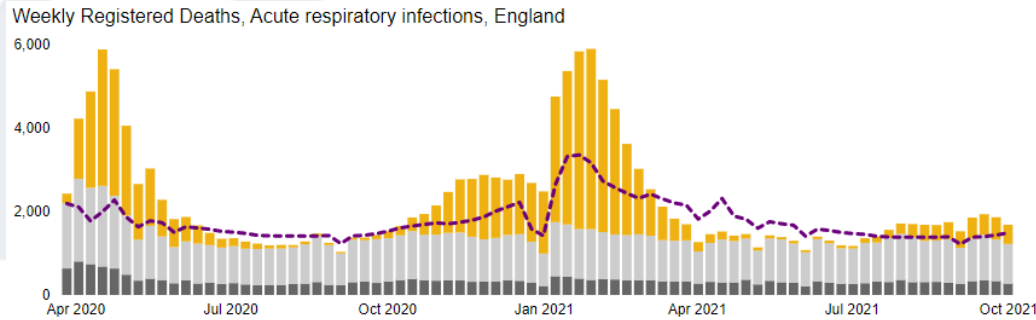
Less than the 5 year average

Data source: ONS Death registrations and occurrences by local authority and health board. Produced by LKIS, Public Health England



Cause of death

Last refreshed	15/10/2021	Data source(s): ONS	Office for National Statistics
Descriptor	Weekly excess mortality by cause of death in England.		
Key points	<ul style="list-style-type: none"> Nationally, Acute Respiratory Infections and Other Circulatory Diseases have been the leading causes of death, where COVID-19 was an underlying cause. In England, Dementia and Alzheimer's accounted for the third largest cause of death, where COVID-19 was an underlying cause, particularly during the first wave of the pandemic. While for some causes of death very high peaks have been followed by lower than expected deaths in subsequent weeks, for Diabetes, deaths have been higher than expected in almost every week of the pandemic. 		

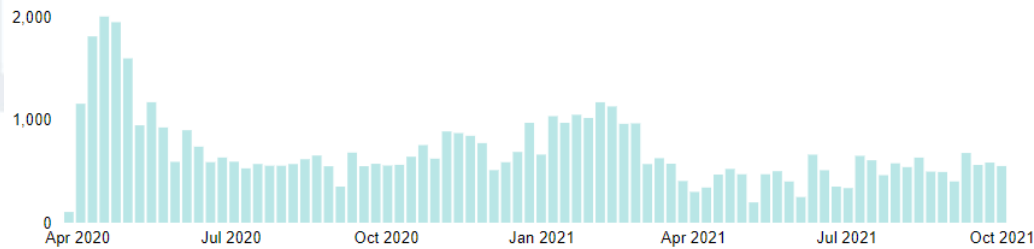


Source: ONS Excess Mortality in England dashboard

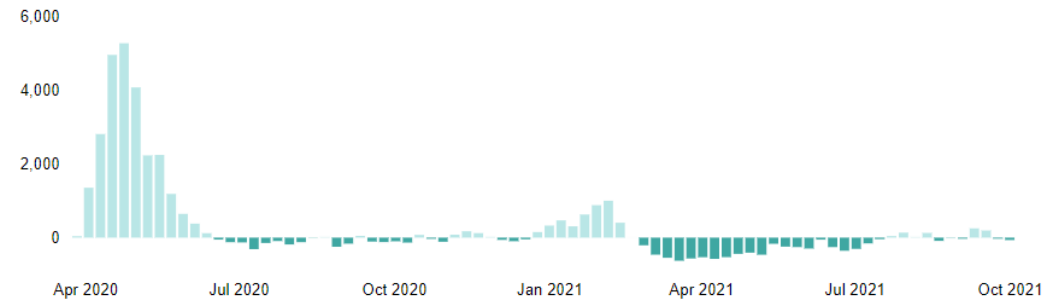
Place of death

Last refreshed	15/10/2021	Data source(s)	OHID
Descriptor	Weekly excess mortality by place of death in England.		
Key points	<ul style="list-style-type: none"> • Deaths in excess of expected numbers have been seen across all settings across England, with the exception of hospices, particularly early in the pandemic. • Excess deaths at home have occurred during every week of the pandemic. • In care homes very high numbers of excess deaths were seen in the first wave of the pandemic and to a lesser extent in the second wave. In the weeks between there were fewer deaths than expected, reflecting the premature deaths of residents with underlying health conditions in previous weeks. • Both the first and second waves of the pandemic saw very high excess deaths in hospitals, with fewer than expected deaths in subsequent weeks. 		

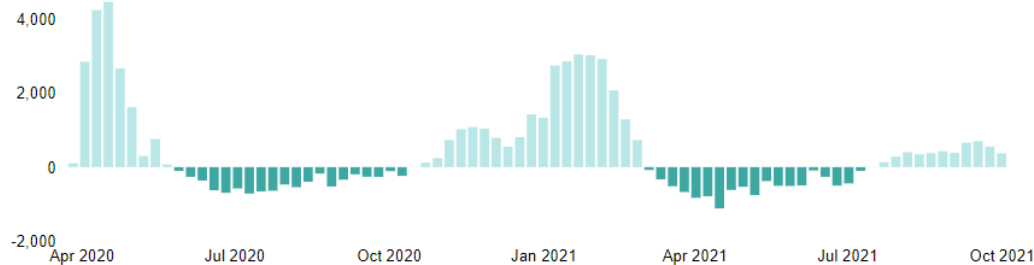
Weekly Excess Deaths by Date of Registration, Home, England



Weekly Excess Deaths by Date of Registration, Care home (nursing or residential), England



Weekly Excess Deaths by Date of Registration, Hospital (acute or community, not psychiatric), England



■ Excess deaths
■ Fewer deaths than expected

Note: Vertical axis scales vary



Data sources

Office for National Statistics, Excess Deaths weekly update

Office for Health Improvements and Disparities - Excess Mortality in England dashboard
<https://www.gov.uk/government/statistics/excess-mortality-in-england-weekly-reports>

Office for National Statistics - Excess mortality and mortality displacement in England and Wales:
2020 to mid-2021

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/excessmortalityandmortalitydisplacementinenglandandwales/2020tomid2021>

ITEM 9

Outbreak Management Plan / Covid-19 Communications

Our working principles



Approaches to help us deal with a developing situation

Page 18

- Ongoing public health behaviours campaign - Respect & Protect
- Re-introducing some measures used previously during emergency response
- Supporting campaigns focusing on related issues

Respect & Protect campaign



Different stages to the campaign

- Stage 1 - the changes to government rules and national messages
 - Stage 2 – ‘humanising’ these messages for digital channels
 - Stage 3 – making use of community assets for physical marketing
-
- Building on existing Team North Yorkshire brand

Town centre visibility

RESPECT & PROTECT each other

Page 20



Increasing comms activity



Re-introducing comms measures to support local response

- Press conference to work alongside media colleagues
- Coordinated sharing of messages across LRF health and social care partners
- Options for targeted local communications, as required

Our working principles



Wider support for other health and social care issues

- Social care recruitment campaign
- Health and wellbeing priority campaigns



each other

Questions?

Page 23

Mike James

North Yorkshire County Council

michael.james@northyorks.gov.uk



This page is intentionally left blank