Public Document Pack



Local Outbreak Board (Integrated Commissioning Sub-Committee)

Date: THURSDAY, 12 AUGUST 2021

Time: 9.00 am

Venue: VIRTUAL

Members: Randall Anderson Marianne Fredericks Ruby Sayed

> John Barradell Town Clerk

1. LOCAL OUTBREAK BOARD AGENDA

For Information (Pages 3 - 4)

Agenda Item 1

City & Hackney Integrated Care Partnership Board

Local Outbreak Board Session

Thursday 12 August 2021 09:00 – 09.50 Microsoft Teams

This is also a meeting of the **Integrated Commissioning Board** which is a Committee in-Common meeting of the:

- The London Borough of Hackney Integrated Commissioning Sub-Committee ('The LBH Committee)
- The City of London Corporation Integrated Commissioning Sub-Committee ('The COLC Committee')
- North East London CCG Governing Body City and Hackney ICP Area Committee (The 'CCG Area Committee')

Click here to join the meeting

Chair – Randall Anderson QC

| ltem | ltem | Lead and | Documentation | Page No. | Time |
|------|---|----------------------------------|---------------|----------------|-------|
| no. | | purpose | type | | |
| 1. | Welcome, introductions and apologies | Chair | Verbal | - | |
| 2. | Declarations of Interests | Chair For noting | Paper | 2-8 | |
| 3. | Minutes of the previous meeting & action log | Chair For approval | Paper | 9-14 | 09:00 |
| 4. | Questions from the Public | Chair | None | - | |
| 5. | Vaccinations Program Update Current performance / next steps Young people comms | Siobhan Harper For discussion | Paper | 15-23 24-34 | 09.05 |
| 6. | Data Intelligence | Diana Divajeva For discussion | Verbal | - | 09.30 |
| 7. | Local Outbreak Control Plan Update | Chris Lovitt For discussion | Paper | 35-68 | 09.40 |

Date of next meeting:

9th September 2021, Microsoft Teams









Register of Interests

| Name | Date of Declaration | Position / Role on ICPB | Nature of Business / Organisation | Nature of Interest | Type of Interest |
|-----------------------------|------------------------|-------------------------------|-------------------------------------|---|----------------------------|
| Ann Sanders | 30/07/2021 | Attendee | NE London CCG | Lay Member | Financial |
| | | | Ann Sanders Consultancy | Independent Consultant | Financial |
| Tracey Fletcher | 26/08/2020 | Member | Homerton University Hospital NHS FT | Chief Executive | Financial |
| | | | Inspire | Trustee | Non-financial professional |
| Laura Sharpe | 23/04/2021 | Member | City & Hackney GP Confederation | Chief Executive | Financial |
| Andrew Carter | 13/05/2021 | Attendee | City of London Corporation | Director – Community & Childrens' Services | Financial |
| | | | ADASS | Member | Non-financial professional |
| | | | ADCS | Member | Non-financial professional |
| Helen Woodland | 04/05/2021 | Attendee | London Borough of Hackney | Group Director – Adults, Health & Integration | Financial |
| Sunil Thakker | 30/04/2021 | Attendee | NE London CCG | Executive Director of Finance | Financial |
| Paul Calaminus | 30/04/2021 | Member | East London NHS Foundation Trust | Chief Executive | Financial |
| | | | Partner is a Civil Servant | Department of Health | Indirect |
| Dr Stephanie Coughlin | 09/10/2020 | Attendee | Lower Clapton Group Practice | GP Principal | Financial |

City and Hackney Integrated Care Partnership Board



| | | | BMA & RCGP | Member | Non-financial professional |
|-------------------|------------|----------|---|---|----------------------------|
| Dr Haren Patel | 10/10/2020 | Attendee | Latimer Health Centre | Senior Partner | Non-financial professional |
| | | | Acorn Lodge Care Home | Service Provision | Financial interest |
| | | | Pharmacy in Brent CCG | Joint Director | Indirect interest |
| | | | Hackney Marsh | Joint Clinical Director | Non-financial professional |
| | | | RMOC – NHS England | GP Member | Non-financial professional |
| Jake Ferguson | 30/09/2019 | Attendee | Hackney Council for Voluntary Services | Chief Executive Officer | Financial |
| | | | Voluntary Sector Transformation Leadership Group | Member | Non-financial professional |
| Sir John Gieve | 29/07/2021 | Member | Homerton University Hospital NHS FT | Chair | Financial |
| | | | Vocalink Ltd. 1 Angel Lane, London EC4R 3AB | Non-executive Director | Financial |
| | | | MNI Connect | Member | Non-financial professional |
| | | | Pause (Charity), 209-211 City Road London | Partner is Trustee & Strategic Board Member | Indirect interest |
| lan Williams | 20/03/2020 | Attendee | London Borough of Hackney | Acting Chief Executive | Financial |
| | | | | Homeowner in Hackney | Financial |
| | | | Hackney Schools for the Future | Director | Non-financial professional |
| | | | NWLA Partnership Board | Joint Chair | Non-financial professional |
| | | | London Treasury Ltd | SLT Rep | Non-financial professional |
| | | | London CIV Board | Observer / SLT Rep | Non-financial professional |
| | | | Chartered Institute of Public Finance and Accountancy | Member | Non-financial professional |
| | | | Society of London Treasurers | Member | Non-financial professional |



| | | | London Finance Advisory Committee | Member | Non-financial professional |
|-------------------|------------|----------|---|-----------------------------------|----------------------------|
| | | | Schools and Academy Funding Group | London Representative | Non-financial professional |
| | | | Society of Municipal Treasurers | SMT Executive | Non-financial professional |
| | | | London CIV Shareholders Committee | SLT Rep | Non-financial professional |
| | | | London Pensions Investments Advisory Committee | Chair | Non-financial professional |
| Ruby 1 Sayed | 19/11/2020 | Member | City of London Corporation | Member | Financial |
| | | | Gaia Re Ltd | Member | Financial |
| | | | Thincats (Poland) Ltd | Director | Financial |
| | | | Bar of England and Wales | Member | Non-financial professional |
| | | | Transition Finance (Lavenham) Ltd | Member | Financial |
| | | | Nirvana Capital Ltd | Member | Financial |
| | | | Honourable Society of the Inner Temple | Governing Bencher | Non-financial professional |
| | | | Independent / Temple & Farringdon Together | Member | Non-financial professional |
| | | | Worshipful Company of Haberdashers | Member | Non-financial professional |
| | | | Guild of Entrepreneurs | Founder Member | Non-financial professional |
| | | | Bury St. Edmund's Woman's Aid | Trustee | Non-financial personal |
| | | | Housing the Homeless Central Fund | Trustee | Non-financial personal |
| | | | Asian Women's Resource Centre | Trustee & Chairperson / Director | Non-financial personal |
| Mark Jarvis 0 | 02/03/2020 | Attendee | City of London Corporation | Head of Finance | Financial |
| Honor 1 Rhodes | 11/06/2020 | Member | North East London CCG | Associate Lay Member | Financial |
| | | | Tavistock Relationships | Director | Financial |
| | | | Homerton University Hospital NHS FT | Assistant Psychologist (Daughter) | Indirect |
| | | | Barton House NHS Practice | Registered with GP | Non-financial personal |



| Gary Marlowe | 27/08/2020 | Attendee | De Beauvoir Surgery | GP Partner | Financial |
|------------------------|------------|----------|--|---|----------------------------|
| | | | City & Hackney ICP | Planned Care Lead | Financial |
| | | | Hackney GP Confederation | Member | Non-financial professional |
| | | | British Medical Association | London Regional Chair | Non-financial professional |
| | | | n/a | Homeowner - Casimir Road, E5 | Financial |
| | | | City of London Health & Wellbeing Board | Member | Non-financial professional |
| | | | Local Medical Committee | Member | Non-financial professional |
| | | | Unison | Member | Non-financial personal |
| | | | CHUHSE | Member | Non-financial personal |
| Anntoinette Bramble | 12/08/2020 | Member | Local Government Association | Board - Deputy Chair Company Director Labour Group - Deputy Chair | Non-financial professional |
| | | | JNC for Teachers in Residential Establishments | Member | Non-financial professional |
| | | | JNC for Youth & Community Workers | Member | Non-financial professional |
| | | | Schools Forum | Member | Non-financial professional |
| | | | SACRE | Member | Non-financial professional |
| | | | Admission Forum | Member | Non-financial professional |
| | | | Hackney Schools for the Future (Ltd) | Director | Non-financial professional |
| | | | St Johns at Hackney | PCC | Non-financial professional |
| | | | Unison | Member | Non-financial personal |
| | | | GMB Union | Member | Non-financial personal |
| | | | St Johns at Hackney | Church Warden & License Holder | Non-financial personal |
| | | | Co-Operative Party | Member | Non-financial personal |
| | | | Labour Party | Member | Non-financial personal |
| | | | Urstwick School | Governor | Non-financial personal |



| | | | City Academy | Governor | Non-financial personal |
|------------------------|------------|------------------------------|--|--|--|
| | | | National Contextual Safeguarding Panel | Member | Non-financial personal |
| | | | National Windrush Advisory Panel | Member | Non-financial personal |
| | | | Hackney Play Bus (Charity) | Board Member | Non-financial personal |
| | | | Christians on the Left | Member | Non-financial personal |
| | | | Lower Clapton Group Practice | Registered Patient | Non-financial personal |
| Marianne Fredericks | 26/02/2020 | Member | City of London | Member | Non-financial professional |
| | | | Farringdon Ward Club | Member | Non-financial professional |
| | | | The Worshipful Company of Firefighters | Liveryman | Non-financial professional |
| | | | Christ's Hospital School Council | Member | Non-financial professional |
| | | | Aldgate and All Hallows Foundation Charity | Member | Non-financial professional |
| | | | The Worshipful Company of Bakers | Liveryman | Non-financial professional |
| | | | Tower Ward Club | Member | Non-financial personal |
| Christopher Kennedy | 09/07/2020 | Member / ICB Co- Chair | London Borough of Hackney | Cabinet Member for Health, Adult Social Care and Leisure | Financial |
| | | | Lee Valley Regional Park Authority Hackney Empire Hackney Parochial Charity Labour party Local GP practice | Member Member Member Member Registered patient | Non-financial personal Non-financial personal Non-financial personal Non-financial personal Non-financial personal |
| Randall Anderson | 15/07/2019 | Member / ICB Co- Chair | City of London Corporation | Chair, Community and Children's Services Committee | Non-financial professional |
| | | | n/a n/a | Self-employed Lawyer Renter of a flat from the City of London (Breton House, London) | Financial Financial |
| | | | Member Masonic Lodge 1745 Worshipful Company of Information Technologists | American Bar Association Member Freeman | Non-financial professional Non-financial personal Non-financial personal |

City and Hackney Integrated Care Partnership Board



| | | | Neaman Practice | Registered Patient Renter of a flat from the City of London (Breton House, London) | Non-financial personal |
|---------------------|------------|------------------------------|---|--|----------------------------|
| Rebecca Rennison | 26/08/2020 | Member | Freelance Project Work | | |
| | | | Hackney Council | Cabinet Member for Finance and Housing Needs | Financial |
| | | | Cancer52Board | Member | Non-financial personal |
| | | | Clapton Park Tenant Management Organisation | Board Member | Non-financial personal |
| | | | North London Waste Authority | Board Member | Non-financial personal |
| | | | Residential Properties | | Financial |
| | | | GMB Union | Member | Non-financial personal |
| | | | Co-Operative Party | Member | Non-financial personal |
| | | | Labour Party | Member | Non-financial personal |
| | | | Fabian Society | Member | Non-financial personal |
| | | | English Heritage | Member | Non-financial personal |
| | | | Pedro Club | Board Member | Non-financial personal |
| | | | Chats Palace | Board Member | Non-financial personal |
| Henry Black | 30/07/2021 | Member | NE London CCG | Chief Financial Officer / Acting Accountable Officer | Financial |
| | | | Barking, Havering & Redbridge University Hospitals NHS Trust | Wife is Assistant Director of Finance | Indirect |
| | | | Tower Hamlets GP Care | Daughter works as social prescriber | Indirect |
| | | | NHS Clinical Commissioners Board | Member | Non-financial professional |
| Dr Mark Rickets | 14/01/2020 | Member / ICB Co- Chair | NE London CCG | ICP Clinical Chair | Financial |
| | | | Homerton University Hospital NHS Foundation Trust | Non-Executive Director | Financial |
| | | | Health Systems Innovation Lab, School Health and Social Care, London South Bank University | Wife is a Visiting Fellow | Indirect |
| | | | GP Confederation | Nightingale Practice is a Member | Non-financial professional |
| | | | HENCEL | I work as a GP appraiser in City and Hackney and Tower Hamlets for HENCEL | Non-financial professional |
| | | | Nightingale Practice (CCG Member Practice) | Salaried GP | Financial |
| Helen Fentimen | 14/02/2020 | Substitute Member | City of London Corporation | Member | Non-financial professional |
| | | | Labour Party | Member | Non-financial professional |
| | | | Unite Trade Union | Member | Non-financial professional |

City and Hackney Integrated Care Partnership Board



| | | | Governors Prior Weston Primary School and Children's Centre | Chair | Non-financial professional |
|-----------------------|------------|----------|--|--------------------------------------|----------------------------|
| Dr Sandra Husbands | 26/08/2020 | Attendee | Director of Public Health | London Borough of Hackney | Financial |
| | | | Association of Directors of Public Health | Member | Non-financial professional |
| | | | Faculty of Public Health | Fellow | Non-financial professional |
| | | | Faculty of Medical Leadership and Management | Member | Non-financial professional |
| Jon Williams | 02/03/2020 | Attendee | Healthwatch Hackney | Director | Financial |
| | | | CHCCG Neighbourhood Involvement Contract CHCCG NHS Community Voice Contract CHCCG Involvement Alliance Contract CHCCG Coproduction and Engagement Grant Hackney Council Core and Signposting Grant | Contracts Healthwatch Holds with CCG | Indirect |
| Siobhan Harper | 26/10/2020 | Member | NE London CCG / City & Hackney ICP | Transition Director | Financial |
| | | | Sister is lead commissioner for London on criminal justice and mental health at NHSE | | Indirect |

Meeting-in-common of the Hackney Integrated Commissioning Board (Comprising the NEL CCG City & Hackney Area Committee and the London Borough of Hackney Integrated Commissioning Committee)

and

Meeting-in-common of the City Integrated Commissioning Board (Comprising the NEL CCG City & Hackney Area Committee and the City of London Corporation Integrated Commissioning Committee)

and

Community Services Development Board

(Comprising system colleagues from across the City & Hackney geographic area)

Integrated Commissioning Board – Local Outbreak Board Session

Minutes of meeting held in public on 8 July 2021 Microsoft Teams

Present:

Hackney Integrated Commissioning Board

Hackney Integrated Commissioning Committee

| Cllr Chris Kennedy | Cabinet Member for Health, Adult Social Care & Leisure | London Borough of Hackney |
|--------------------------|---|---------------------------|
| Cllr Robert Chapman | Cabinet Member for Finance | London Borough of Hackney |
| Cllr Caroline Woodley | Cabinet Member for Families, Early Years, Parks & Play | London Borough of Hackney |

North East London CCG City & Hackney Integrated Commissioning Committee

| Mark Rickets | Borough Clinical Chair | City & Hackney Integrated Care Partnership / NE London CCG |
|----------------|------------------------|---|
| Siobhan Harper | Transition Director | City & Hackney Integrated Care Partnership / NE London CCG |
| Sue Evans | Lay Member | NE London CCG |

City Integrated Commissioning Board

City Integrated Commissioning Committee

| Randall Anderson QC (ICB Chair) | Member, Community & Childrens' Services Sub-Committee | City of London Corporation |
|------------------------------------|--|----------------------------|
| Marianne Fredericks | Member, Community & Childrens' Services Sub-Committee | City of London Corporation |
| Helen Turnbull | Member, Community & Childrens' Services Sub-Committee | City of London Corporation |

| Alex Harris | Integrated Commissioning Governance Manager | City & Hackney Integrated Care Partnership / NE London CCG |
|----------------------|--|---|
| Andrew Carter | Director, Community & Childrens' Services | City of London Corporation |
| Catherine Macadam | Lay Member | NE London CCG |
| Caroline Millar | Acting Chair | City & Hackney GP Confederation |
| Diana Divajeva | Principal Public Health Analyst | London Borough of Hackney |
| Haren Patel | Clinical Director | Office of the Primary Care Network |
| Jenny Darkwah | Clinical Director | Office of the Primary Care Network |
| John Gieve | Chair | Homerton University Hospital NHS FT |
| Jonathan McShane | Integrated Care Convenor | City & Hackney Integrated Care Partnership / NE London CCG |
| Jon Williams | Executive Director | Healthwatch Hackney |
| Laura Sharpe | Chief Executive | City & Hackney GP Confederation |
| Matthew Knell | Head of Governance & Assurance | City & Hackney Integrated Care Partnership / NE London CCG |
| Philip Glanville | Mayor | London Borough of Hackney |
| Sandra Husbands | Director of Public Health | London Borough of Hackney |
| Simon Cribbens | Deputy Director, Community & Childrens' Services | City of London Corporation |
| Stella Okonkwo | ICP Programme Manager | City & Hackney Integrated Care Partnership / NE London CCG |
| Steve Collins | Acting Chief Finance Officer | NE London CCG |
| Sunil Thakker | Executive Director of Finance | City & Hackney Integrated Care Partnership / NE London CCG |
| Susan Masters | Health and Social Care Policy Lead | Hackney Council for Voluntary Services |
| Tracey Fletcher | Chief Executive | Homerton University Hospital NHS FT |

Apologies – ICB Members

Cllr Bramble (LBH) Ruby Sayed (CoL) **Other apologies** Jake Ferguson Ian Williams Stephanie Coughlin Helen Woodland

1. Welcome, Introductions and Apologies for Absence

- 1.1. The ICB for the first 50 minutes operated in its capacity as the Local Outbreak Board.
- 1.2. Apologies were noted as listed above.

2. Declarations of Interests

- 2.1. The City Integrated Commissioning Board
 - **NOTED** the Register of Interests.
- 2.2. The Hackney Integrated Commissioning Board
 - **NOTED** the Register of Interests.

3. Questions from the Public

3.1 There were none.

4. Vaccinations Update

- 4.1. The item was presented by Siobhan Harper. She noted that primarily, there has been a big push to rapidly increase the offer of vaccination to all adults over the age of 18 particularly in view of the 19th of July deadline and the possibility of lifting restrictions.
- 4.2. There had been concerted efforts to increase our capacity locally in local vaccination centers as well as in community pharmacy. We are continuing to roll out our wide programme of pop up and outreach events as well as offering walk-in appointments. In terms of progress amongst our vulnerable population, we had seen a small but steady increase in uptake.
- 4.3. An issue identified both locally and across Northeast London is in the area of stimulating demand. This was despite a large comms programme targeted at groups with lower levels of uptake. It was also suspected that a lot of younger people felt that Covid-19 was unlikely to cause them serious illness and that the vaccine was not necessary for them. There were also other concerns from people around Covid vaccination and fertility. We are addressing these areas using a community communications perspective.
- 4.4. A priority for the vaccination programme is to ensure our provision is as accessible as possible to remove any barriers. There has been progress around the centralisation of the call and recall functions through a service that the Office of the PCN'S were currently developing and putting in place. Through this service, we aim to provide a local service that will reach in particular, our unvaccinated population in the community.
- 4.5. A planning summit is being arranged for the end of July to think about what will be required to keep the momentum up as we go into winter especially given the scenario of managing an extensive Covid booster programme alongside a flu immunization programme.
- 4.6. Regarding vaccinations in care homes, there is now better access to care homes data. There was also a recognition that the local authority in Hackney had done a huge amount of work to address the issue of vaccine hesitancy as there was now good progress in reducing the number of people who were unvaccinated. There is some work to be done around domiciliary care.

- 4.7. Cllr Kennedy added that the increase in care home vaccinations was due to a lot of engagement work from the Group Director Adults, Health and Integration and her team in the local authority and having individual clinical conversations with care home staff and residents to understand their reasons for hesitancy.
- 4.8. Cllr Kennedy asked if there was official guidance around the interval between first and second doses and whether bringing second doses forward was based on clinician discretion. Siobhan Harper responded that the official policy was a minimum of eight weeks. However there had been instances of second dose vaccinations at less than eight weeks. Mark Rickets clarified that this was just a small number of people walking in without appointments and that generally speaking, many of the people attending sooner than the eight week timeframe had appointments booked for them by their GP, the presumption was not to second-guess the clinical judgment of their GPs. People who walked-in under eight weeks were usually told to book via their GP.

Haren Patel asked what we would do about new admissions to care homes that requested Pfizer. Siobhan Harper responded that she would contact Dr Patel outside of the meeting with a response.

- 4.9. Randall Anderson asked if we were looking at work other boroughs had done to increase uptake among the younger cohort. Siobhan Harper responded that we were looking at learning from the Camden and SE London work and the outreach work that Hackney Council had done.
- 4.10. Marianne Fredericks enquired about the length of time between the first and second jabs, and asked if there was flexibility with those who were going to travel abroad. She also asked what we could do around messaging for young men to encourage them to take up the vaccine. Siobhan Harper responded that we were looking to build on momentum and positive spirit engendered by the recent football news, and other methods of reaching young people. Mark Rickets added that an earlier second dose request was by exception/clinical need and not for reasons such as travelling abroad. One of the main reasons for giving this length of time is that a longer interval between first and second doses conferred stronger long-term immunity.

Siobhan Harper to bring back young peoples' communications plans to next Local Outbreak Board meeting.

5. Data Intelligence Update

- 5.1. Diana Divajeva introduced the item. A steady increase in the number of cases reported for several weeks with the highest increase reported in the young adult group. Incidence rates show an 81% increase in Hackney and 63% increase in the City of London over 200 per 100,000 in Hackney and over 300 per 100,000 in the City of London. There had also been a small increase in hospitalisations but this was in line with national rates. There had, however, been no deaths so far but this could not be ruled out in the coming weeks.
- 5.2. Marianne Fredericks enquired if the increase reported in the City of London was within the residential population or the business community. She also asked if there anything that could be done to bring the clinics set up in the east of London clinic closer to the city to encourage uptake. Randall Anderson added that there had been a plan to get a community pharmacy vaccination site set up in the east of the City. Sandra Husbands responded that the primary increase in the City of London was linked to the residential postcodes in the areas that we cover. However, there had also been an increase in cases and outbreaks being reported in workplaces, both in the City and in Hackney.

Regarding the vaccination clinics, we were aiming to get a new pharmacy approved but we had been told that this may only be possible when the programme opens up for booster doses. The provision of pop-up services was also being looked at.

- 5.3. Cllr Chapman asked if the government strategy of relying on vaccinations to control the epidemic was vindicated by local data. Sandra Husbands responded that national data indicated a weakening of the link between cases and the more severe outcomes like hospitalisations when compared with similar case rates last year.
- 5.4. Cllr Woodley enquired about the effect of this current wave on the health service and staff resilience capacity. Sandra Husbands responded that in addition to the vaccine programme, there were now better treatments for Covid related illness which should see a reduction in the average length of stay in hospital. Mark Rickets noted that that vaccines do not provide 100% protection; there was still a risk, as not everyone would develop the same immune response. Siobhan Harper added that there has been pressure in the NHS in the area of managing waiting times, elective recovery and workforce capacity especially in view of an increase in urgent and emergency work.

6. Local Outbreak Management Plan

- 6.1. Sandra Husbands introduced the item. She informed members about the change in the community testing programme from the asymptomatic lateral flow testing to a process of using community collect where people can collect test kits from local pharmacies or the PCR test sites. This would target areas where uptake of and access to testing had been low.
- 6.2. Cllr Kennedy said that the issue of the government ending the availability of free lateral flow testing by the end of the month was raised in the media by a radio announcer. However, a government official called in to correct this by saying that the government is yet to confirm what will be happening with the free lateral flow testing after the end of the month.
- 6.3. Jon Williams asked if there would be a local comms approach with regards to the potential removal of restrictions and social distancing on the 19th of July. Sandra Husbands responded that we had anticipated that restrictions would be removed at some stage but that there was less clarity on what the government would announce regarding measures such as face masks as the legal requirement to wear face masks was not the same as advising people to wear face masks. She added that, we will continue to update our local communications and engagement plan as well as using continue to use our community champions.
- 6.4. Mayor Glanville enquired about the capacity within our comms teams to capture the nuances around mask-wearing and local messaging. He also asked about the profiling of new variants, as there was typically a 6-8 week lag between new variants arising and being detected. Sandra Husbands responded that using local comms messaging had been effective throughout the pandemic. However, there had been problems with the national media misinterpreting government guidance. In terms of genome sequencing of new variants, the many cases linked to variants in London had led to the creation of increased capacity in sequencing labs which has decreased the time between a case being detected and its genome being sequenced.

7. Any Other Business

7.1. There was none.

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City and Hackney Local Outbreak Board / Integrated Care Partnership Board Action Tracker

| LOBJun-1 | Homeless vaccinations data to be brought back as part of regular local outbreak board reporting. | Siobhan Harper | Jun-21 | Aug-21 | Complete. | |
|-----------|--|--------------------|--------|--------|--------------|-------------------|
| ICPBJun-2 | Proposals for a senior / intermediate-level manager working group on the anchor alliance to be brought to City & Hackney | Jonathan McShane | Jun-21 | Aug-21 | | |
| | Health and Wellbeing Boards. | | | | | |
| ICPBJun-3 | Jon Williams and Jake Ferguson to discuss working with the social value exchange outside of the meeting. | Jake Ferguson | Jun-21 | Aug-21 | | |
| LOBJul-1 | Dr Haren Patel asked what we would do about new admissions to care homes that requested Pfizer vaccines. Siobhan | Siobhan Harper | Jul-21 | Aug-21 | | |
| | Harper to respond to Dr Patel outside the meeting. | | | | | |
| LOBJul-2 | Siobhan Harper to bring back young peoples' comms plans to next Local Outbreak Board. | Siobhan Harper | Jul-21 | Aug-21 | Complete. | Item due to be su |
| ICPBJul-1 | Cllr Woodley, Sandra Husbands and Angela Bartley to discuss simplification of language in the inequalities tools and | Sandra Husbands / | Jul-21 | Aug-21 | In progress. | |
| | resources pack outside of the meeting. | Caroline Woodley / | | | | |
| | | Angela Bartley | | | | |
| ICPBJul-2 | Update on investment underpinning inequalities tools and resources to be brought back to ICPB. | Anna Garner | Jul-21 | Aug-21 | In progress. | |

e submitted to August Local Outbreak Board

City and Hackney Vaccination Programme

Current Performance and Next steps on Phase 3 Planning Local Outbreak Board Update



City and Hackney Integrated Care Partnership – North East London Integrated Care System

OFFICIAL

C&H vaccination snapshot by cohort (as of 10th August)

| Cohort | Cohort Description | Cohort Size | First Vaccination | % Vaccinated | Fully vaccinated | % Second Vaccination | | WoW Change 1 st doses (%) | WoW Change 1 st doses (#) | WoW Change 2 nd doses (%) | WoW Change 2 nd doses (#) | |
|--------|--|-------------------------------------|----------------------|-----------------|---------------------|-------------------------|----|--|--|--|--|--|
| 1 | Older adult residents in a care home | 318 | 287 90% | | 277 | 87% | | 1% | 2 | 1% | 2 | |
| 2 | 80 years of age and over | 5,166 | 4,349 | 84% | 4184 | 81% | | 0% | -5 | 0% | 2 | |
| 3 | 75 years of age and over | 4,008 | 3,394 | 85% | 3282 | 82% | | 0% | 10 | 0% | 11 | |
| 4 | 70 years of age and CEV | 20,911 | 16,526 79% | | 15487 | 74% | | 0% | 17 | 0% | 55 | |
| 5 | 65 years of age and over | ars of age and over 7,131 5,792 81% | | 5574 | 78% | | 0% | 1 | 0% | 5 | | |
| 6 | 16-64 years of age and at risk of COVID | 26,864 | 18,611 | 69% | 16655 | 62% | | 0% | 67 | 1% | 96 | |
| 7 | 60 years of age and over | 6,657 | 4,932 | 74% | 4660 | 70% | | 0% | 19 | 1% | 31 | |
| 8 | 55 years of age and over | 10,304 | 7,370 | 72% | 6837 | 66% | | 0% | 13 | 0% | 30 | |
| 9 | 50 years of age and over | 12,739 | 9,014 | 71% | 8247 | 65% | | 0% | 13 | 0% | 21 | |
| 10 | 40 - 49 years of age | 39,761 | 24,132 | 61% | 20705 | 52% | | 0% | 98 | 2% | 414 | |
| 11 | 30-39 years of age | 73,802 | 41,420 | 56% | 27670 | 37% | | 1% | 229 | 9% | 2,238 | |
| 12 | 18-29 years of age | 58,795 | 29,175 | 50% | 10373 | 18% | | 1% | 320 | 8% | 742 | |
| | Totals Cohort 1-6 | 64,398 | 48,959 | 76% | 45,459 | 71% | | 0% | 92 | 0% | 171 | |
| | Totals Cohort 1-9 | 94,098 | 70,275 | 75% | 65,203 | 69% | | 0% | 135 | 0% | 251 | |
| | Totals Cohort 1-12 | 266,456 | 165,002 | 62% | 123,951 | 47% | | 0% | 784 | 3% | 3,647 | |

Source: NEL Covid vaccination dashboard: Invite & uptake coded in Primary care

C&H vaccination uptake compared to other NEL boroughs

| Borough | Total eligible population | First Dose | % | Second Dose | % |
|------------------|---------------------------|------------|-------|-------------|-------|
| 🗄 Barking | 171,032 | 107,297 | 62.7% | 85018 | 49.7% |
| 🗄 City & Hackney | 266,456 | 165,002 | 61.9% | 123951 | 46.5% |
| Havering | 220,029 | 171,219 | 77.8% | 142738 | 64.9% |
| 🗄 Newham | 339,317 | 202,081 | 59.6% | 148353 | 43.7% |
| 🗄 Redbridge | 264,717 | 184,202 | 69.6% | 153221 | 57.9% |
| H Tower Hamlets | 294,129 | 188,841 | 64.2% | 129789 | 44.1% |
| 🗄 Waltham Forest | 254,168 | 161,739 | 63.6% | 128232 | 50.5% |
| Grand Total | 1,809,848 | 1,180,381 | 65.2% | 911302 | 50.4% |

Vaccination of homeless people and asylum seekers (during July 2021)

| City of London | Next Steps |
|--|--|
| Homeless: 11 first doses, 6 second doses | Forward Plan to be developed by Find & Treat and also establish progress on vaccinating Gypsy, Roma, |
| Hackney | Traveller population |
| Homeless: 2 first doses, 2 second doses IAC: 34 first doses, 27 second doses | Regular meeting between Find and Treat Team and C&H Inequalities Programme Manager |

Work to improve uptake across our communities

Community Outreach Team

Focus on:

- Updating/simplifying our comms to push walk-ins
- On-street (and business in-reach) engagement to direct people to local walk-in clinics across all areas

Dedicated Outreach Team for on-street engagement

- Review current resource and gap analysis
- Collaborative engagement with Testing Team

Outreach Clinics

- In reach/outreach within GP Practices with low uptake
- Evening clinics within specific areas to meet the needs of the communities
- Larger vaccine events in coordination
 with LVS
- 2nd dose Community clinics planned in areas of high footfall
- Round 2 of Community Grant Funding – forOutreach Engagement teams

Insights

- Evaluation of 1st round of clinics and build on what has work well and what needs to improve
- CYP champions to support with future engagement and outreach events

Springfield, Cazenove, Woodberry Down , Stamford Hill West. Clissold Park

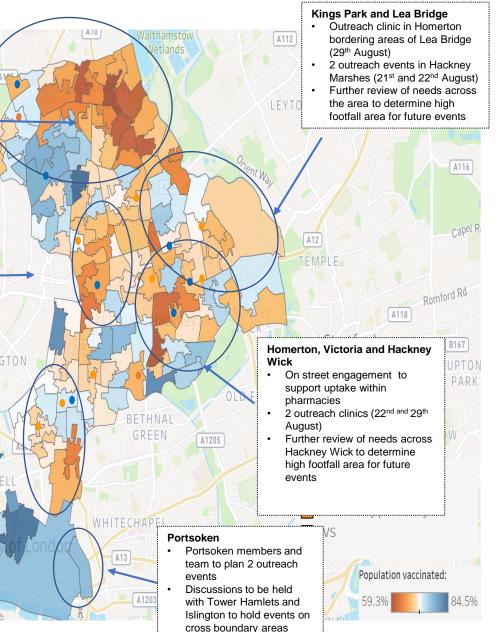
- 2 evening clinics at Clapton Common (18th and 19th August)
- Further clinics to be planned for OJ population post holiday season
- Outreach clinic in Woodberry Down (8th September)
- Outreach Clinic Clissold Park(18th September)
- Supporting Springfield PCN with Phase 3 Booster Programme

Dalston, Shacklewell, Stoke Newington,

- Outreach clinic at Gillett Square (7th August)
- Outreach clinic at Ridley Road Market (1st September)
- Joint clinic with Testing Team at a school in Stoke Newington(Sept)

Hoxton East and Shoreditch, Hoxton West

- 2 outreach events in Shoreditch Park (14th and15th August)
- Daily clinics running at St Leonards until 9th August and beyond is demand is high
- On street engagement to support uptake within pharmacies



Proposed C&H delivery model for Phase 3

| Delivery channel | Offer Flu | Offer Covid (Booster) | Offer Covid (Evergreen) | # of Sites |
|---|--------------|--------------------------|----------------------------|--|
| GP Practices | \checkmark | X | X | c.40 |
| LVS | \checkmark | \checkmark | \checkmark | 2 |
| Community Pharmacies (1) | \checkmark | \checkmark | \checkmark | c.10 |
| Community Pharmacies (2) | \checkmark | X | X | Тbс |
| Hospital Hubs | \checkmark | \checkmark | \checkmark | 1 |
| Outreach (housebound on/off DN caseload) | \checkmark | \checkmark | \checkmark | Central mobile team (to be defined) + GPs |
| Outreach – lead provider <u>Barts</u> | X (?) | \checkmark | \checkmark | Barts team exclusively + C&H medical lead |
| Outreach lead provider <u>LVS</u> | \checkmark | \checkmark | \checkmark | LVS + GPs |

Comms becomes even more critical in Phase 3 given the different delivery channels and vaccination options

Timing of eligibility for Covid and flu vaccinations do not perfectly align, highlighting the need for integration between delivery models

Due to the +26 week rule post 2nd COVID vaccination, there will be cohorts that are eligible for flu, but not booster during different months within Phase 3. The priority is to accelerate the rate of individual vaccinations rather than wait for eligibility of both flu and covid booster. This reduces the amount of co-administration that we are likely to see. Please use the table below as *draft for discussion only*

| | Aug | Sept | Oct | Nov | Dec | Jan | | | |
|---|--|--------|--------|--------|--------|--------|--|--|--|
| 1. Eligible for covid booster | | 8,575 | 23,832 | 25,670 | 20,554 | 16,573 | | | |
| 2. Flu | | 33,4 | 480 | 22,320 | | | | | |
| 3. Evergreen (1st dose) | 8,581 | 8,581 | 8,581 | 8,581 | 8,581 | 8,581 | | | |
| 4. Evergreen (2nd dose based on 1st already done) | 17,031 | 17,031 | 17,031 | | | | | | |
| 5. Evergreen (2nd dose based on 1st not yet done) | | | 7723 | 7723 | 7723 | 7723 | | | |
| 6. Children's offer (12-15 years old) | Awaiting details from CEG on cohort size | | | | | | | | |

Assumptions (to be validated):

- Eligible for covid booster numbers calculated based on +26 weeks from 2nd vaccination (for those who had in CP, LVS, Elsdale, or outreach). As we get to the later months a % will not be from cohorts 1-9, and therefore not in scope of Phase 3. Of the numbers shown, 85% are City and Hackney residents. Assumption has been baked in that 10% of C&H residents have been vaccinated at mass vax sites, and will need to be vaccinated locally in Phase 3.
- 2. Based on assumption that <u>60%</u> of all 1-9 cohorts will get vaccinated (56k of 93k). Of this, 60% will be vaccinated in Sept and Oct, and the remaining 40% in November until mid December in line with JCVI deadline.
- 3. Evergreen (1st dose) based on vaccinating the rest of the C&H unvaccinated population to reach a total of 80% uptake
- 4. Evergreen (2nd dose based on 1st already done) based on 90% uptake of those who have had a 1st vaccination but not yet had 2nd vaccination (phased over 12 weeks)
- Evergreen (2nd dose based on 1st dose not yet done) based on 90% uptake of 2nd doses for those who are set to have 1st doses (based on +8 weeks between doses)

Note – Evergreen figures based on dashboard from 20/8. This needs to be refreshed based on latest dashboard.

Key planning areas for Phase 3

Getting to a sustainable delivery model:

- Recognising that the timelines for flu and covid do no align in terms of supply and delivery and national priority to ensure flu delivered before winter at same time as delivering booster over 15 weeks
- Current insights are that some people concerned about having co-administration of flu and covid vaccinations
- · Need to plan for some co-administration as part of a mixed model of delivery
- Recognising that there are some unknowns and that this is still a test year for both booster and Flu operationally and that Business as Usual may not be until 2022

How do we ensure a more integrated whole population delivery model?

Things that all providers need to be collectively responsible for to ensure an integrated approach:

- Signposting to other services
- Booking into other services (e.g. GP booking in covid vaccination at LVS if had flu vaccine at the practice)
- Workforce (sharing, training and development, possibly involving the workforce enabler)
- Managing supply (and providing clear visibility of stock and opportunities for mutual aid)
- Keeping central team updated about the offer (opening times, vaccines offered, etc)
- · Sharing activity data so that we can centrally manage demand and capacity
- MECC (Make Every Contact Count)

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Key planning actions for Phase 3

Outreach (to housebound vulnerable patients)

- Development of mobile vaccination team to provide flu/covid to housebound, care homes and other vulnerable groups requiring home service, working alongside district nursing where they are already vaccinating their known caseload)
- GP Confederation to be lead provider proposal pending

Outreach (mobile vaccination team for pop-ups)

- Development of local mobile vaccination team to provide pop-up clinics as part of inequalities and aligned to engagement / community outreach team
- Lead provider to be Office of PCNs (LVSs)

Health and care staff vaccination

- HUH will operationalise their Hospital Hub by 6 September 2021. Further work required about their role as hospital hub and scope of the vaccination programme in terms of health and social care staff
- Barts Health will operationalise their Hospital Hub in September 2021. Further work required about their role as a hospital hub and scope of the vaccination programme in terms of health and social care staff
- Further work and agreement necessary to develop a more integrated approach to flu jabs for health social care staff proposal pending

Estates

- Discussions with HUH regarding impact on community health service provision with continued use of John Scott Health Centre as a Local Vaccination Site
- Work required to determine long term future solution to north based LVS site

Key planning actions for Phase 3

Communications and engagement

Delivering a combined evergreen vaccine programme, booster programme and flu programme, in addition to other coronavirus work and health priorities, will mean very complex communications and engagement that needs clear strategic priorities and direction. We will need to:

- Focus on where the local health system can add value to communications by targeting areas and patient groups with low-take up, through culturally competent messaging (rather than repeating national messaging)
- Provide simple, clear, and accurate information about operational delivery, and when and how residents can book their vaccine
- Coordinate communications, engagement, outreach and operational delivery so that targeted work to tackle hesitancy or reach underrepresented groups translates into actual booking/delivery of vaccines
- Ensure communications reach communities where they are, rather than expecting them to come to us
- Be clear about communications roles and responsibilities across all responsible organisations

This will require a clear strategy that is being developed across the CCG, Council and other health partners throughout August.

| Title of report: | Update on Communications plan for COVID-19 vaccinations: |
|---------------------|--|
| | Young People |
| Date of meeting: | 12 August 2021 |
| Lead Officer: | Siobhan Harper |
| Author: | Amy Wilkinson, Jayne Taylor & Nadia Sica |
| Committee(s): | City and Hackney Outbreak Control Board |
| Public / Non-public | Public |

Executive Summary:

This paper outlines a response to a request for an update on the communications plan for Young People in order to increase uptake of COVID-19 vaccinations.

This communications plan is aimed at 18-25 year olds and subsequent to its development the national booking system has opened for 16-17 year olds, and local plans are being implemented to vaccinate a small cohort of 12-15 year olds through our local vaccination sites, as per national guidance. An additional update on delivery of vaccinations to these cohorts is attached, and the communication and insight plans are currently being developed and expanded for these groups.

Recommendations:

The Local Outbreak Control Board is asked to:

• To **NOTE** the report;

Strategic Objectives this paper supports [Please check box including brief statement]:

| Deliver a shift in resource and focus to prevention to improve the long term health and wellbeing of local people and address health inequalities | \boxtimes | |
|--|-------------|--|
| Deliver proactive community based care closer to home and outside of institutional settings where appropriate | | |
| Ensure we maintain financial balance as a system and achieve our financial plans | | |
| Deliver integrated care which meets the physical, mental health and social needs of our diverse communities | \boxtimes | |
| Empower patients and residents | \boxtimes | |

Specific implications for City







To consider communication routes for young people that are appropriate and effective for City of London Young people, and discuss, given the mobile nature and numbers of CoL young people outside the corporation.

Specific implications for Hackney

To consider communication routes for young people that are appropriate and effective for Hackney's diverse communities of Young people, and discuss.

Patient and Public Involvement and Impact:

A significant amount of insight has been done across the system at a local and regional level with young people and their families in order to understand the potential barriers to uptake of vaccinations. This work is ongoing, across a range of communities, and will be extended to younger cohorts.

Clinical/practitioner input and engagement:

Our C&H vaccination clinical leads and CYP clinical leads have had input to plans as they have been developed.

Communications and engagement:

A partnership communications and engagement working group is in place to steer and deliver this work, reporting directly to the City and Hackney Vaccination Steering Group.

Comms Sign-off: Jayne Taylor

Equalities implications and impact on priority groups:

There are significant issues with vaccine hesitancy among younger groups generally, combined with the hesitancy we have seen in some of our City and Hackney older communities. This makes uptake in this group particularly challenging.

Safeguarding implications:

Consent to vaccination and safeguarding training is covered in the updated Green Book for younger groups, and safeguarding training is mandatory for vaccinating up to 18 year olds, along with enhanced DBS checks and paediatric first aid training. Communications will need to take account of recommendations.

Impact on / Overlap with Existing Services:

This work is part of wider communications work as part of the C&H Vaccinations Delivery Plan







Main Report

1. Background and Current Position

1.1 This report provides an update on the range of insight and communications work currently being carried out and in development in response to the expansion of and subsequent relatively low uptake of COVID-19 vaccination in younger cohorts in City and Hackney.

1.2 Currently, all people from the age of 16 years and up are universally eligible to receive an offer of COVID-19 vaccination (under 18s can only receive the Pfizer BioNTech vaccine as authorised by the MHRA). In addition, those aged 12-15 years with specific vulnerabilities and those of this age who are household contacts of individuals of any age who are immunosuppressed should also be offered the Pfizer vaccine.

1.3 Whilst the JCVI has only recently approved vaccinating under 18s (end of July and early August with mobilisation of the offer currently being operationalised locally - please see the detailed briefing on CYP attached to this paper for further details), the offer for over 18 year olds has been live for some time with low levels of uptake being observed in Hackney and the City of London since the outset.

1.4 As of the most recently available data, we continue to record considerably higher incidence rates of COVID-19 in 20-39 year olds than any other age group set against the lowest uptake of vaccination compared to other age groups in City and Hackney. Furthermore, the take up of vaccination in this cohort in Hackney and City currently ranks as the lowest in England.

2. Approach

The reasons for low uptake within this age cohort are varied and complex. In order to increase uptake, these reasons need to be understood and addressed. This is being achieved by carrying out insight work with the affected cohorts and by deploying appropriately targeted and tailored public health messages based on the insights found via assets and channels known to reach young people. This work has been undertaken across the City and Hackney system as a partnership approach, under the leadership of the LBH communications team. In addition, a regional communications strategy has been deployed specifically targeted at this cohort.







3. Local Engagement, Insight and Communications Work

3.1 A significant amount of insight work has been carried out across the system at a local and regional level with young people and their families in order to understand the potential barriers to uptake of vaccinations. This work is ongoing, across a range of communities, and will be extended to younger cohorts.

3.2 In addition, a wealth of secondary data already exists, on the attitudes, barriers and enablers to vaccine take-up, which has been summarised (see appendix) which has informed the local approach.

3.3 Live data on vaccine take-up shows that Hackney has the lowest vaccination rates in the country, amongst the 18 to 24 age cohort. The data also shows the lowest vaccination rates among Black residents (25%) compared to (59%) amongst the White residents. The ethnic subgroups with the lowest vaccination rates among 20 to 24 year olds as of 26 July were: Black African and Caribbean, Chinese and those from 'other' ethinic backgrounds which is likely to include Orthodox Jewish young people from North Hackney.

3.4 Please see the attached report for an overview of the work insight and communications work that has been undertaken to date (see appendix).

4. Future Communications Plan

A programme of messaging and events has been planned and is being continuously updated as further events come online. The 'Young people: Covid-19 vaccine communications, engagement and outreach' plan can be seen in the appendix.

5. London Level Communications

NHSEI has also been delivering a programme of engagement and communications work at London level for younger adults, which includes the following highlights from the previous week:

- More than 20 national and regional media outlets covered the pop-up vaccination clinic at Heaven nightclub on Sunday, including BBC National, BBC Breakfast and the Sun. Ru Paul's Drag Race UK star <u>Baga Chipz</u> also attended and got their vaccine.
- The Mayor of London and Night Czar for London Amy Lame also supported the NWL pop-up at Heaven at the weekend across his <u>social media channels</u>.
- National and regional broadcast media covered vaccination at the Emirates Stadium on Saturday.
- YouTube have added our <u>"Got a Problem" video</u> to their YouTube Spotlight Playlist, a channel with 2 million+ subscribers. This is thanks to Word on the Curb and their relationship with YouTube.







- Work on a second piece of content with Word on the Curb to encourage young Londoners to take the vaccine is underway. This will be advertised to 18-25 year olds across Snapchat and TikTok when ready.
- The GLA and PHE London continue to provide grants for community engagement 'Health Conversations' events with young Londoners about their health, wellbeing and taking the covid vaccine. Events are to take place w/c 23 August and NHSEI are leading on the branding of the week.
- Greenwich NHS Trust was shared, along with their reasons for taking the vaccine.
- PHE and the national NHSEI flu and covid comms teams met to discuss planning for the national integrated communications campaign for phase 3, including flu vaccination and covid booster jabs.

City and Hackney plans will continue to be aligned with regional plans.







Comms & insight highlight report – Covid vaccination programme across City and Hackney

| Project Director | Jayne Taylo | or | Period | 20/07/2021-27/07/2021 | Pro | ogramme Manager | Alice Beard/ Tar | a Hudson/ Helen Turnbull | | | | |
|--|---|---|--|--|---|--|---|---|--|--|--|--|
| Highlight achievements from last wee | k | Prioritie | * | Future planning | | | | | | | | |
| Regular updates to LBH webpag beginning of June it's had 45,945 Community champions – 1 e-new Regular promotion via social of v pop-ups and clinics for vaccination Paid for social promotion for 3 ph (Spring, Silverfields, Murrys) to s on-street engagement to increas 17/07 3 Covid pages of <u>Hackney Life</u> st 110,000 homes, including FAQs focus groups <u>Press release</u> on 19 July rule cha Full page advert in <u>Hackney Citit</u> to homes and businesses Full page advert in Hackney Life homes JCdecaux bus stop sized posters across the borough Event for businesses attended by businesses online part focus on v for staff Social round up: 16 tweets, 1 new instagram posts, 8 facebook pos Press: 1 press release, 2 pieces | 5 unique visits wsletter various ons harmacy sites support se demand on eent to from youth anges izen, delivered sent to all s to go up y 120 vaccinations xtdoor post, 6 sts | • • | and ethnic minority H Widespread comms Instagram, Twitter) | elop targeted communications for heritage communities) - see slice a across all local channels includ vaccination uptake amongst all a ge uptake of the second dose of weeks between doses vaccine concerns throughout me hational messaging and campaig walk-in events leaflets and social out further vaccine clinics with po munity champions content (Hack er 2 week digital advert campaig | les below for more ing local/ council p adults COVID-19 vaccina essaging ins/ events al posts sters, web updates kney Service Centr | information publications and social ation and s, press release, wide re clinic/ community ou | media (e.g. ranging social utreach) | Behavioural insights project (with LBH Change Support Team) to test different messages about vaccines with younger cohorts Need to have a Orthodox Jewish question and answer in person event after holidays end on 8 August (18 July-8 August is not possible for this community). Vaccines should also be offered at this event if possible Hatzola run PLEASE NOTE: NHSE is spending £1.2 million on advertising over the next three weeks in London to promote vaccines | | | | |
| Project Key Risks | | Impact a | and Mitigation | | | | | | | | | |
| People who have had covid-19 infections reportedly saying they don't need a vacci already have antibodies; Questions about vaccines | ine as they | Clear information about natural immunity vs. vaccine; Clear information about boosters from the outset - has anything been decided at national level? | | | | | | | | | | |
| People not knowing about Bocking Stree Scott sites as not on NBS | et and John | Need to | have Bocking Stree | t and John Scott on national boo | oking system | | | | | | | |

Examples of most clicked through social media campaign materials







Example from the toolkit co-produced with young people in Hackney



'Life after lockdown' animation and COVID-19 facts as a GIF animation

Examples of national social media campaigns (TikTok and YouTube)

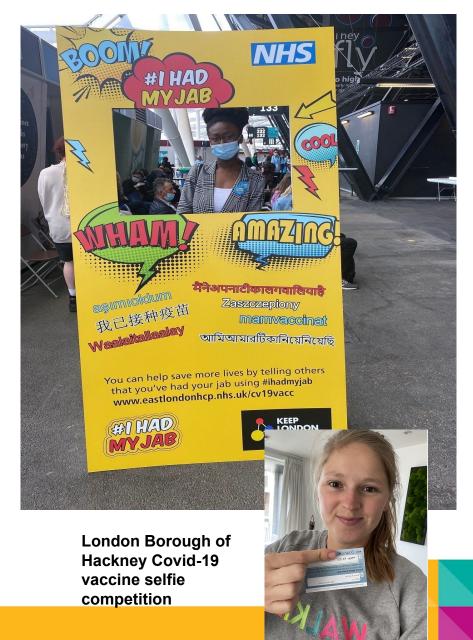


Let's Not Go Back

algo which he fight hearted







Covid-19 vaccine insight summary

Focus on young people (18-25)

| What we are | recording |
|-------------|-----------|
|-------------|-----------|

- Covid-19 vaccine community insight recorded since January 2021 in a central database; weekly summary produced
- Sources include surveys, online events, focus groups, community feedback and national reports
- Focus on cohorts experiencing inequity in terms of access to the vaccine
- Information recorded includes:
 - Date & source of information
 - Ethnicity, JCVI cohort and other characteristics when known
 - Barriers, enablers and attitude to vaccine when known

Why are we recording this

• Insight can be to drive up vaccine uptake by informing communications and engagement approaches, outreach activity and the wider vaccine programme

Our focus during July-August is on

- Young people (18-25) testing key messages informed by insight; using existing VCS grant scheme and seeking additional resourcing where gaps identified
- Older residents and CEV
- Ethnic heritage groups experiencing vaccine inequality (Black African, Black Caribbean and Black British as priority)

| Barriers | Enabler/motivators | Adaptations to approach | Channels | | | | |
|--|--|---|--|--|--|--|--|
| Low perceived risk; Worries about the side effects and safety (fertility a key concern) Misinformation and mistrust; criticism & scepticism around government & authority Inertia; feeling tired; feeling neglected and forgotten Anti vaxx as counter movement; Practical barriers: time & resource, loss of income, technical barriers; Nuanced and particular barriers related to different ethnic heritage groups | Ease of access; less than 30 min to get to the clinic; Digital natives; smartphones no.1 platform Emotion: Want to go back to normal and enjoy life; protecting their family; fear of missing out (FOMO); Can be very health conscious; holistic view of health; mental health and stress as key health concerns; self-care & self-improvement as motivators; Trust NHS more than government, and individual healthcare professionals more than the NHS; Want to know the facts; Trust Pfizer vaccine more than other options; Value social and ethical consciousness; want to see cultural representation and | Acknowledge concerns; share factual information from trusted sources; enable walk-ins and conversations with clinicians and GPs; Use public figures and influencers with genuine interest: e.g. George the Poet, Sideman and Joe Wicks Be honest and clear; be relevant without being "cringey or fake"; use memes, stills, GIFs Frame vaccine in the context of being able to go back to normal, feel balanced and reduce stress; Tailoring the VCS scheme to reach into younger cohorts; | "Use young people to speak to young people" A letter to YP; Young system influencers & youth parliament VCS; educational settings Social media (Instagram, Twitter, TikTok, Snapchat, Facebook); meme pages YouTube, Spotify, Amazon, Netflix Sources: LBH Toolkit for engaging with young people; NHS London &Curbsights report; Barriers and facilitators to Covid-19 vaccine uptake in young people by PHE; GLA report on vaccine insight (18-34); feedback from C&H young system | | | | |
| | diversity | | influencers | | | | |

Ages 18-29 communications report vaccinations

We have gained insight from focus groups run by Camden Council, filmed and shared with Hackney, as well as local insight from young people in Hackney collected by La Braya. We are also using national insight data for this age group.

What are we being told:

- Young people wanted to hear answers to their concerns and questions from a trusted source like a doctor, medical professional, graduate or trainee. They do not want to hear from very famous influencers or celebrities whose lifestyle does not align with theirs or do not have genuines interest in the topic
- Young people are scared that the vaccine will make them infertile
- Many young people have had Covid-19 so don't see the point in getting the vaccine
- People with zero hour jobs are worried about the vaccine side effects meaning they will miss a days off work
- Young people wanted to see their peers get the vaccine first to see if they felt safe taking it
- There was confusion on the fact there were different types of vaccines, were AZ and Pfizer the same? Do all vaccines cause blood clots?
- They want to access the vaccine at sites walkable to their homes
- They want a simple way to book an appointment or to just walk-in
- They want to know why they should take the vaccine, what is the point?
- Most of our Orthodox Jewish community are aged under 30 and are a specific key target group for vaccinations
- Some young people feel the vaccine is being forced onto them and find all the promotion around it 'weird' and it is their choice whether they want to take it or not
- Young people have also told us that they find all the messaging around the vaccine confusing/conflicting

What we are doing:

- We created a <u>communications plan</u> for this cohort
- Using the insight we have learned from the <u>Young People's Engagement Toolkit</u> to inform our comms/approach
- Every month the Council has delivered a publication to 110,000 homes in the borough with at least 3 pages on Covid-19 content. In the July edition we included a FAQ section from Dr Husbands answering the most common questions that came in the youth focus groups
- We added more FAQs to our vaccine webpage
- We did a one week targeted digital advertising campaign aimed at 18-29 year olds which resulted in: 3,429 click throughs to the national booking system, 158,397 impressions of the adverts which included 10 second GIFs answering FAQs
- In our next advertising campaign we are using the <u>most popular creatives</u> with this age group
- We have done daily organic social media posts across Twitter, Instagram and Facebook crafting our content based off insight

- Our Orthodox Jewish community are mainly aged under 30, so we are doing weekly adverts in the Orthodox jewish press on vaccinations, and having community meetings to help encourage uptake and answer questions
- We have placed three full page adverts in the Hackney Citizen on vaccinations, this paper has a younger 'hipster' readership
- We are doing individual paid for facebook and instagram adverts promoting individual walk-in clinics using geolocation and age criteria. E.g. Murrays Pharmacy clinic advert had 1,964 impressions at a cost of £10
- We do two e-newsletters a week to Hackney residents with covid-19 vaccine stories each time
- We have on street advertising including 320 correx boards advertising national booking system, JCdecaux bus stop sized adverts, posters on council notice boards
- We are working closely with a group of young people to gather updated and real time insights about their thoughts towards the vaccine. We are also working with them to test out different key messages/comms messaging.

| PROJECT TI | TLE Y | oung People (18-25) | | TEAM: YP and engage | | | | | | | | | | | | | | | | | | | | | |
|--|-------------------------|---|--|----------------------------|----------|--------|---------|------------------------------|--|--------|-------|---------|--------|--------------------------------|------|---|------------|-----------|-------|------------------------------------|----|----------|--------|----------|---|
| PROJECT M/ | ANAGER N | IA | | TIMEFRAI | ME: 2.8. | - 27.8 | 3. | | | | | | | | | | | | | | _ | | | | |
| Strand | | DETAILS | Lead | | Week 1 (| w/c 2 | August | t) | | Week 2 | 2 (w/ | ′c 9 Αι | ugust) | | | N | /eek 3 (w/ | c 16 Augu | ıst) | | | | Week 4 | 4 (23 Au | gust) |
| | | | | 2 | 34 | 5 | 67 | 8 | 9 | 10 11 | 12 | 13 | 14 1 | 5 16 | 6 17 | 18 | 1 | 9 2 | 20 21 | 22 | 23 | 24 2 | 25 26 | 27 28 | 3 29 |
| | | YP insight review completed | consultation &engagement team / | Done | | | | | | | | | | | | | | | | | | | | | |
| | | YP uptake data by LSOA | LBH PH analytics - Abigail | Done | | | | | | | | | | | | | | | | | | | | | |
| | | YP grant scheme (PHASE 1) - EXISTING GROUPS | ICP/Bev | Review cur activity tow | | | groups | | Programme currently funded until September 2021. Plan to tranform into dedicated community outreach and engagement team focused on boosters and flu jabs beyond Sept 2021. | | | | | | | | | | | | | ent team | | | |
| YP grant scheme (PHASE 2) - NEW GROUPS WITH YOUTH FOCUS - TBC | | | ? | Scoping loo and VCS gr | | | | | al Grant proposal to VSG | | | | Gra | Grant materials ready & launch | | | | | | Application stage | | | | | |
| 1 | Engagement & insight | Pop up /LFT events (Parks, educational settings, youth hubs etc.) | | | | | | LFT @ Shoreditc h Park | | | | | | | | Charedi event at Clapton Commo | event a | at n | | Morningside Community Centre | | | | | The Round Chapel Old School Room |
| | | Walk-ins (Pharmacies, LVSs, St Leonard's) | Rozalia, Yogandra, Marvin. Alex C Healthwatch | | | | | | | | | | | | | | | | | | | | | | |
| | | Young Public Reps& system influencers | Healthwatch Hackney / Sallv. | | | | | | | | | | | | | | | | | | | | | | |
| | | VCS and Community Champions | Kate, Jess, Sabana | | | | | | | | | | | | | | | | | | | | | | |
| | | BSL online Q&A | Claire - TBC | | | | | | | | | | | тво | : | | | | | | | | | | |
| | | TP online Q&A nosted by a local influencer and a clinician (Tehseen, Dr | La Braya? | Speak to D meeting for | | | a planr | ning | | | | | | | | | | | | | | | | | |
| | | Exsiting communications assets in use (WESTCO, NHS) | Alice, Tara | | | | | | | | | | | | | | | | | | | | | | |
| | | New assets shared (Camden) | Alice, Tara | | | | | | | | | | | | | | | | | | | | | | |
| | | Targeted assets: Charedi YP Outdoor: JC Decaux, | Tara | | | | | | | | | | | | | | | | | | | | | | |
| | | correx boards | Alice, Tara | | | | | | | | | | | | | | | | | | | | | | |
| | | Digital: LA websites | Tara, Helen | | | | | | | | | | | | | | | | | | | | | | |
| | | Digital: Social media | Tara, Helen | Daily socia channels p | | | | all council aid for | | | | | | | | | | | | annels on vaccine | | | | | |
| | | Digital: Immunologist video on YP FAQs (PAN | London Councils / Jen | | | | | | | | | | | | | | | | | | | | | | |
| 2 | Communicatio | Digital: Fertility Q&A video | NHSCV | Share on s | ocial | | | | | | | | | | | | | | | | | | | | |
| | ns | Print: Local media (Hackney Today/Life, | Tara, Helen | Full page H | leimshie | adver | t | | Full | page H | eims | hie ad | vert | Full | page | Heimshie | advert | i | i | | | | | ····· | |
| | | Print: Letter to YP | Tara | DONE | | | | | | | | | | | | | | | | | | | | | |
| | | Print: Leaflets | Tara | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |

| Title of report: | Covid-19 Local Outbreak Management Plan update |
|------------------|--|
| Date of meeting: | 12 Aug 2021 |
| Lead Officer: | Dr Sandra Husbands, Director of Public Health |
| Author: | Emmanuel Ross, Business Support Officer |
| Committee(s): | Local Outbreak Control Board |
| Public / | Public |
| Non-public | |

Executive Summary:

This report provides an update against the Local Outbreak Management Plan and an overview of activities in the following key areas:

- Testing
- Local contact tracing
- Outbreak management, including OIRR, incident management teams, outbreaks & exposures in settings
- Support for isolation, including enhanced isolation pilot
- Community engagement, including community champions
- Communications
- Finance Test & trace and COMF budgets
- Vaccinations will be covered by a separate update

Recommendations:

The **City and Hackney Local Outbreak Control Board** is asked to **NOTE** the report

The City Integrated Commissioning Board is asked:

• To **NOTE** the report;

The Hackney Integrated Commissioning Board is asked:

• To **NOTE** the report;

Strategic Objectives this paper supports [Please check box including brief statement]:

| Deliver a shift in resource and focus to prevention to improve the long term health and wellbeing of local people and address health inequalities | |
|--|--|
| Deliver proactive community based care closer to home and outside of | |

| institutional settings where appropriate Ensure we maintain financial balance | | |
|---|---|--|
| as a system and achieve our financial plans | | |
| Deliver integrated care which meets the physical, mental health and social needs of our diverse communities | Ŋ | Working collaboratively across the whole system, including the community and voluntary sector (and with local businesses) to respond to the local impact of the Coronavirus pandemic |
| Empower patients and residents | | Empowering patients, residents, communities and staff with knowledge and understanding about how to reduce the risk of Covid-19, prevent/reduce the spread of infection and how to respond in the event of a possible/suspected outbreak |

Specific implications for City

None

Specific implications for Hackney

None

Patient and Public Involvement and Impact:

Community, public and patient engagement has been undertaken throughout the COVID pandemic to ensure insight is gained, issues addressed and services changed to reflect identified need.

Local contact tracing: Patients are called for contact tracing purposes but also to connect them with the Welfare Line if needed. This can help support a range of issues that might make maintaining isolation difficult or impossible, especially for vulnerable or socially isolated individuals.

Information is contained in the main report

Clinical/practitioner input and engagement:

The Public Health team provides extensive support via the Covid-19 inbox (Monday to Friday), including consultant support when needed. Local contact tracing receives support 7 days a week and working groups have clinical/practitioner input.

Communications and engagement:

Communications continue to focus on meeting the objectives of the LOMP in particular, preventing and mitigating the spread of Covid-19 to save lives, communicating openly and honestly with key stakeholders, and working with the community to develop capacity to support local testing contact tracing, as well as vaccination uptake. This includes the continued reinforcement of the prevention messages 'hands, face, space' on various channels, amplifying government messages and supporting the work of the GLA and London Councils. In addition, there is ongoing work on specific communications related to key areas of work, with key stakeholders, including the public, care homes, local contact tracing teams and community champions.

Equalities implications and impact on priority groups:

Local contact tracing: Covid-19 is understood to have disproportionately frequent and severe effects on specific high risk groups, who may be the least likely to be contacted by the national NHS Test and Trace team. The local service offers an opportunity to address this inequality both directly, by contacting harder to reach individuals at higher risk, and indirectly by contributing to the national and global fight against the virus.

The Community Champions work and Covid-19 Grant Information programme are targeted at key communities and priority groups.

Safeguarding implications:

All contact tracing staff undertake mandatory safeguarding training, before being able to access the national database to make calls.

Impact on / Overlap with Existing Services:

Potential additional surges in infections may occur during winter and into 2022. As infections rates reduce services will be reviewed to see what can be stepped down or mainstreamed into existing service provision.

FINANCE

The total projected spend for the Test and Trace programme is currently standing at £3.746m. A detailed breakdown of the projected spend for each organization, including details of outbreaks plans agreed to date is shown in Appendix 1 below.

Appendix 1A - Finance Summary for Test and Trace allocation

| lte m | Expenditure Type | Description | 2020/21 LBH Cost | 2021/22 LBH Cost | Total Cost | Comments |
|----------|--|--|---------------------|---------------------|------------|---|
| 1 | Staffing Resources | Programme Manager - assignment commenced in July 2020) | 74,656 | 24,885 | 99,541 | Assumed will be in post till the end of the FY. Cost should be split 80:20 with the CoL. |
| 2 | Staffing Resources | PH Consultant | 30,110 | 31,220 | 61,330 | 80:20 allocation (Chief Officer 3) - starts full time Sept 2021. |
| 3 | Pan-London Outreach Testing - ADPH London | ADPH London Pan-London Outreach Testing - | 13,755 | | 13,755 | Agreed expenditure. |
| 4 | VCS Test & Trace Programme | VCS Test and Trace Programme | 482,871 | 246,354 | 729,225 | £600k of Grants + £68,727 Hackney CVS + 60,474 VCH |
| 5 | IT Software | Tableau software platform for COVID dashboard | 9,408 | 24,592 | 34,000 | Purchased. |
| 6 | Communication Costs | Bereavement leaflet for frontline workers | 170 | | 170 | |
| 7 | Community Covid Helpline - Bikur Cholim | Bikur Cholim Community Covid helpline - (3 months) 13 August to 12 November 2020. | 7,000 | | 7,000 | |
| 8 | Staffing Resources | Keep London Safe Programme (Campaign Manager) | 2,756 | | 2,756 | |
| 9 | Staffing Resources | Customers Services cost agreed for 6 months | 91,575 | | 91,575 | £52k Customers Services cost agreed for 6 months (£1,968 per week) |
| 10 | Communication Costs | Covid Communication Plan | - | | - | Covid Communication Plan - £33k agreed |
| 11 | Communication Costs | Further communications work (internal) £10k. | 10,000- | 33,000 | 43,000- | |
| 12 | Covid Response Team (CRT) | Covid Response Team (CRT) | 81,307 | 8,693 | 90,000 | Start date 1st October 20-31st March 21 (Agreed on 21st Sept 20) |
| 13 | Covid Awareness - Interlink | Interlink Funding for COVID awareness work | 22,500 | | 22,500 | |
| 14 | External Care provision | Electcare Health Emergency support over the weekend | 2,505 | 5,595 | 8,100 | |

| 15 | Welfare Support to Support Self Isolation | Welfare support to support self isolation | 119,944 | 56 | 120,000 | |
|----|--|--|---------|---------|---------|---|
| 16 | Covid 19 Testing (Find & Treat Service) | Covid 19 testing (Find & Treat Service) | - | 5,000 | 5,000 | |
| 17 | Staffing Resources | Local Contact Tracing Proposal | - | 28,752 | 28,752 | |
| 18 | Communication Costs | City and Hackney Coronavirus New Normal Budget (Further communication for residents & businesses) | - | | - | Awaiting confirmation of spend |
| 19 | Staffing Resources | Tableau Data Manager post 1XPO5 for 6 mths - start date 2nd Nov 20 | 10,822 | 27,202 | 38,024 | |
| 20 | Community Covid Helpline - Bikur Cholim | Bikur Cholim Community Covid helpline additional grant 13 November to 31 Dec 2020 | 15,749 | | 15,749 | Helpline adviser's costs for 20 weeks £11,049 and Communications from August to December £4,700 |
| 21 | IT Software | Coronavirus Call Handling Software | 120,000 | | 120,000 | Here to Help |
| 22 | Staffing Resources | Administrative support (forecast is for 3XSc5) for 6 mths | 15,663 | 38,170 | 53,832 | Admin 1: To provide dedicated and full time support to co-ordinate and report on the lifecycle of IMT meetings Admin 2 & 3: To help with day to day tasks and work flexibly on a full time basis over the next 6 months. Excellent organisational, administrative and design skills needed. |
| 23 | Staffing Resources | Senior Public Health Specialist: Health Protection Lead 1XPO10 for 6 mths | 12,035 | 17,595 | 29,631 | |
| 24 | Staffing Resources | Senior Public Health Specialist 2xPO7 for 12 mths (Local Contact Tracing Post & Community Engagement Post) | 30,845 | 104,499 | 135,344 | Management of contracts/relationships for Covid response, lead on testing and community engagement for 12 months |

| 25 | Staffing Resources | Senior Public Health Specialist: Communications 1XPO3 for 6 mths | 14,669 | 13,790 | 28,459 | Strategic oversight of communications across all LOCP workstreams. This role will oversee the work of PH comms officers, ensuring a good engagement strategy is delivered for SOPs across City and Hackney for a minimum of 6 mths. |
|----|--------------------------|--|--------|--------|--------|--|
| 26 | Staffing Resources | IPC Health Protection Support | 70,000 | - | 70,000 | Technical input on infection prevention control to priority settings/partners. Agreed at HPB 1-Feb-21 |
| 27 | Counselling/Tra ining | Group Session Counselling – Covid team support | - | 7,140 | 7,140 | |
| 28 | Counselling/Tra ining | Suicide in safeguarding training | - | 800 | 800 | I |
| 32 | Staffing Resources | winter break planning, extension to Hackney Covid-19 helpline | - | 1,300 | 1,300 | |
| 33 | Communication Costs | Local Contact Tracing Door to door letter drops | 500 | | 500 | |
| 34 | Staffing Resources | Senior Public Health Specialist 1xPO7 (Health Protection Board Lead, 18 Hrs a week) | 13,323 | 4,785 | | |
| 35 | Staffing Resources | Testing operations lead 1xPO7 | 10,476 | 24,382 | 34,858 | |
| 37 | Staffing Resources | Service Designer PO4/5, recruited by ICT, Support to Testing inc. Qmatic booking system, 6 months fixed term | 7,029 | 24,499 | 31,528 | |
| 38 | Contact Tracing | Training for Local Contact Tracers | 7,500 | | 7,500 | |
| 39 | Communication Costs | City and Hackney communications budget for January to March 2021 | - | | - | Awaiting final costings |
| 40 | IT Software | CTAS form payment. This has been set up for up to 1,500 responses monthly at £55.40 pm. Anticipated for three months | - | 166 | 166 | |
| 41 | Staffing Resources | BI project to improve self-isolation and social distancing | - | 22,000 | 22,000 | |

| 42 | Staffing Resources | Senior Public Health Practitioner: (Testing Support) | - | 29,554 | 29,554 | |
|----|---|--|----|---------|---------|--|
| 43 | Staffing Resources | Expansion of Covid Response Team to Support Local Implementation of Enhanced Contact tracing. Funding for 2 x EHOs for 12 months respectively (PO4) at a cost of £173K comprising 85% staff costs and 15% non pay costs (with a 10% contingency). | | 172,718 | 172,718 | |
| 44 | Community Covid Helpline - Bikur Cholim | Bikur Cholim Community Covid helpline additional grant 1 January 2021 - 31 May 2021 | - | 22,615 | 22,615 | |
| 45 | Behavioural Insights | Behavioural Insights to drive up local contact tracing success rates in City & Hackney | 60 | 3,940 | 4,000 | |
| 46 | Communication Costs | Additional communications funding to support vaccine take up | - | 38,000 | 38,000 | Agreed to fund £38k on 22nd Feb 21. Content to be approved by the Vaccination Steering Group. 80:20 allocation between LBH:CoL |
| 47 | Contact Tracing | Surge testing. To ensure routine genetic sequencing with subsample to monitor and suppress the spread of coronavirus and better understand new variants | - | 40,050 | 40,050 | |
| 48 | Staffing Resources | Covid Response Team (CRT) | | 90,000 | | Extending the current arrangement to fund three EHOs for 6 months (PO4) from the 1st April 2021 - 30th September 2021. |
| 49 | Staffing Resources | City and Hackney Public Health Intelligence Team (PHIT) | - | 67,280 | 67,280 | |
| 50 | Staffing Resources | Single point of access (SPOA) and Navigation Networks | - | 99,044 | 99,044 | |
| 51 | Staffing Resources | Local Contact Tracing (LCT) 6 month contract extension | - | 153,168 | 153,168 | |

| 53 | Communication Costs | Coronavirus communications from April to June 2021 | | 55,000 | 55,000 | |
|----|------------------------|--|---|---------|---------|--|
| 54 | Vaccine Equalities | Community-led approach to increasing COVID-19 vaccine uptake / addressing vaccines inequalities | - | 43,828 | 43,828 | |
| 55 | | Prevention and Promotion Fund for Better Mental Health 2021/22 | - | 123,765 | 123,765 | |
| 56 | Staffing Resources | Community Champions/Covid-19 Information Grants Communications Officer funding. The costs for a 1 FTE PO3 Communications Officer, for 6 months (July-December 2021) | - | 22,740 | 22,740 | |
| 58 | Communication costs | Additional comms funding | | 16,000 | 16,000 | |
| 59 | Staffing Resources | 1 FTE PO3 Communications Officer, for 6 months (July-December 2021) | | 26,262 | 26,262 | |
| 61 | Staffing Resources | Strategic Consultation & Engagement lead (PO5) | | 31,527 | 31,527 | Agreed at HPB 22 Jun 2021 50% of the salary costs for a Strategic Consultation & Engagement lead (PO5), to lead the delivery of consultation & engagement activity related to the Covid-19 pandemic; within the Communications, Culture and Engagement directorate |
| 62 | Staffing Resources | 4 x PO2 Community Support Managers | | 163,706 | 163,706 | 4 x PO2 Community Support Managers to replace the staffing provider (IF Crew) site managers currently in place for 9 months |
| 63 | Staffing Resources | LCT Community Support Manager (PO4-37) LCT Community Support Practitioner (Scale2-04) + overtime | | 122,833 | 122,833 | Agreed a HPB 6 July 2021 |

| 64 | Staffing Resources | Various non-staffing costs inc Motor vehicle hire, parking fees, public transport, ICT devices inc. mobile phone and wifi dongle, training, BPSS checks and recruitment costs and 16.4k contingency | | 65,894 | 65,894 | |
|----|------------------------|--|------------|------------|------------|--|
| 65 | Staffing Resources | Service designer PO5 contract extension (6 months) to support critical public health workstreams | | 29,000 | 29,000 | |
| 66 | | Developing Here To Help to continue to support Hackney residents | | 91,000 | 91,000 | |
| 10 | Communication Costs | Communication Costs | 156,846 | | 156,846 | Covid Communication Plan - £33k agreed |
| 67 | | Misc | 6,675 | | 6,675 | |
| | - | | £1,430,750 | £2,131,397 | £3,562,146 | |

Appendix 1B - Finance Summary for City of London Corporation

| lte m | Expenditure Type | Description | 20/21 CoL Cost | 2021/22 CoL Cost | Total Cost | Comments | |
|----------|--------------------------|--|-------------------|---------------------|------------|--|--|
| 1 | Staffing Resources | Programme Manager - assignment commenced in July 2020) | 18,664 | 6,221 | 24,885 | Assumed will be in post till the end of the FY. Cost should be split 80:20 with the CoL. | |
| 2 | Staffing Resources | PH Consultant - CURRENTLY VACANT (1 year fixed term contract) | 7,403 | 7,805 | 15,207 | 80:20 allocation (Chief Officer 3) - commences on 1st July 20 to 30th June 21. | |
| 28 | Counselling/Tra ining | Suicide in safeguarding training | - | 200 | 200 | Agreed at HPB 14 Dec 2020 split 80:20% Col | |
| 29 | Communication Costs | City Matters for Covid 19 Wrap Around | 16,000 | | 16,000 | First wraparound (Nov 20, Dec 20) | |
| 30 | Communication Costs | City Matters for Covid 19 Second Wrap Around | 16,000 | | 16,000 | This was agreed at HPB on 07th Dec 20 (Jan 21, Feb 21) | |
| 36 | Communication Costs | City Matters for Covid 19 third Wrap Around | 8,000 | 8,000 | 16,000 | Agreed at HPB 11-Jan-2021 (Mar 21, Apr 21) | |
| 45 | Behavioural Insights | Behavioural Insights to drive up local contact tracing success rates in City & Hackney | - | 1,000 | 1,000 | Agreed at HPB 15-Feb-2021. Split 80:20 | |
| 46 | Communication Costs | Additional communications funding to support vaccine take up | - | | - | Agreed to fund £38k on 22nd Feb 21. Content to be approved by the Vaccination Steering Group. 80:20 allocation between LBH:CoL | |
| 47 | Contact Tracing | Surge testing. To ensure routine genetic sequencing with subsample to monitor and suppress the spread of coronavirus and better understand new variants | | 10,012 | 10,012 | Agreed at HPB 1 Mar 2021. One-off activity over 5 days (12 hour shifts). Only activated if there are cases of Variants of Concern (VOC). Should a VOC be found within Hackney and not the City, LB Hackney will fund the surge testing operation, and vice versa if a VOC is found in the City and not Hackney. Should a VOC be linked to postcodes across the City and Hackney boundaries, then the cost of surge testing will fall to both the City and LB Hackney, who then share the financial responsibility to fund all aspects of surge testing. | |
| 49 | Staffing Resources | City and Hackney Public Health Intelligence Team (PHIT) | | 16,820 | 16,820 | Agreed at HPB 8 Mar 2021. 10:20 split. In the absence of Sandra and Chris the paper will be tabled at Covid-19 Operational Working Group on Thursday Instead for approval | |
| 52 | Communication Costs | City Matters for Covid 19 fourth Wrap Around | | 16,000 | 16,000 | Agreed at HPB 22-Mar-2021 (May 21, Jun 21) | |
| 55 | | Prevention and Promotion Fund for Better Mental Health 2021/22 | | 30,941 | 30,941 | Agreed at HPB 8th June 2021 | |

| 56 | Resources | Community Champions/Covid-19 Information Grants Communications Officer funding. The costs for a 1 FTE PO3 Communications Officer, for 6 months (July-December 2021) | | 5,685 | 5,685 | Agreed at HPB 8th June 2021 |
|----|------------------------|--|---------|----------|----------|-----------------------------|
| 57 | Communication Costs | Continuation of City Matters wraparounds | | 16,000 | 16,000 | Agreed at HPB 8th June 2021 |
| | | Total: | £66,066 | £118,685 | £184,751 | |

COVID-19 Local Outbreak Management Plan – Update to Local Outbreak Control Board







Page 49 Summary

This report provides an update against the Local Outbreak Management Plan and an overview of activities in following key areas:

- Testing
- Local contact tracing
- Outbreak management, including OIRR, incident management teams, outbreaks & exposures in settings
- Support for isolation, including enhanced isolation pilot
- Community engagement, including community champions
- Communications
- Finance Test & trace and COMF budgets
- Vaccinations will updated separately

Page 50 Testing

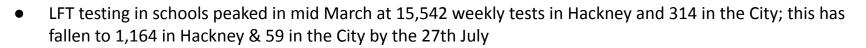
Symptomatic (PCR) Testing

• Symptomatic PCR testing will continue to be provided by the Government free of charge until further notice

- Hackney has 3 Local Testing Stations (LTS), these are open from 8am 8pm, residents can book or walk in. An additional mobile testing unit operate on Hackney Marshes on an ad hoc basis
- The City has <u>one LTS</u> which is open 8am to 8pm
- Operation Eagle (providing genomic sequencing for all PCR tests across all London boroughs) has ended but targeted waste water testing for variants of concern is continuing.
- Over the last fortnight COVID cases have reduced from levels approaching the peak of wave 2 high, the ending of most legal restrictions on the 19th July reinforces the need for consistent messaging around getting a PCR test if symptomatic, however mild and regardless of whether vaccinated is clear and consistent.
- It remains a legal requirement for anyone who tests positive following a PCR test to self-isolate for 10 days.

Page 5 ত্ৰু **Testing cont.**

Asymptomatic (LFT or rapid) testing



- LFTs from testing centres also peaked in mid March with 2,265 weekly tests in Hackney and 40 in the City, this fell to 1,312 in Hackney but increased to 321 in the City by the 27th July-
- From the 1st July national strategy on asymptomatic testing has changed to focus activities to encourage greater testing in communities that are under served or disproportionately impacted by COVID. Twice weekly testing for everyone is still recommended and home testing kits are available by post or collection from local collection points including community pharmacies & vaccination pop up sites
- Reflecting the national change a City and Hackney Health Protection testing team has been set up to deliver community collect (home rapid tests) and mobile assisted testing
- Community testing jobs have been promoted via Hackney Works and HCVS to advertise and recruit for the new team.





- Overall Hackney residents tend to PCR test in a LTS over ordering home PCR tests
- In the week ending 18th July 2021 Hackney test site registered 4,789 PCR tests within a LTS. In the same week Hackney residents registered 2,264 home PCR tests
- Over the last quarter weekly number of PCR tests has increased from 3,331 per week to 9,685
- Approx 15% PCR tests have no ethnicity data recorded- white ethnic groups make up 48% of all PCR tests, 17% from other, 12% black, 4% mixed and 4% Asian
- Overall in the City residents tend to test with home PCRs than test in a LTS
- Over the last quarter weekly number of PCR tests has increased from 533 per week to 1,477
- In the City approx 17% PCR tests have no ethnicity data recorded- white ethnic groups make up 57% of all PCR tests, 12% other, 8% from Asian, 3% black, and 3% mixed

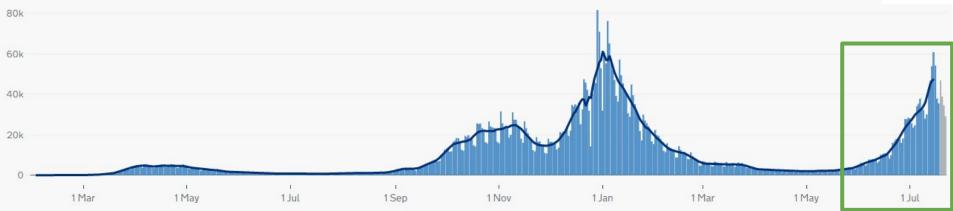
වූ හා The groups we are focusing Community Testing outreach on

- 1. Those who work in occupations with high exposure risk
- 2. Those who live in multi-generational and high occupancy households
- 3. Black, Asian and minority ethnic groups
- 4. Religions, faiths including the Charedi and nationalities where there have higher rates of COVID
- 5. People with disabilities or impairments (such as those in supported living)
- 6. People with dependencies on drugs or alcohol in contact with services
- 7. Gypsy, Roma, Traveller Communities
- 8. Low income households Residents
- 9. People experiencing homelessness and rough sleepers Rough Sleepers
- 10. The elderly (who may or may not also fall into one of the above categories)

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Local contact tracing (LCT)

- Upto the 28th July Hackney's overall contact tracing cases completion rate stands at 84%
- Rapidly increasing COVID infections from 10,000 cases on 19th June to 54,674 the 17th July required changes to local priorities to ensure high quality contact tracing continued. Changed included:-
 - Target 30 cases a day & rapidly return cases exceeding local capacity back to national team- this included a total of 90 suspected Variants of Concern returned between 12th -27th July
 - Mobilising part time call agents from other helplines for LCT day shifts bringing the team daytime capacity to 3 full time (1 new joiner) and 2 to 4 part time call agents on most days from Mon to Fri
 - Do a maximum of 5 call attempts for non-responsive cases then return cases to national team



Local contact tracing cont.

Page

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- Since LCT inception in last Sep, thousands of contact tracing calls were made
- Single complaint received relating to patient's permission of NHS data sharing with LA, complaint satisfactorily answered to residents satisfaction
 - NHS data sharing The COPI (Control of Patient Information) notice 2002 recognises and enables a variety of public sector agencies, to process confidential information and enable the data sharing process, without the patient consent
 - Welfare support Change of process using text messages instead of calls to confirm case's need for welfare service to go live shortly
- There has been a delay the national move to a new national Integrated Tracing System 'ITS'
 - Target early Sep for a revised roll out plan for LA
 - Baseline Personnel Security Standards (BPSS) vetting is underway for future ITS access

Local contact tracing - City of London

Page

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- Up to the 28th July City's overall contact tracing cases completion rate is 84%.
- EHOs in the Commercial Environmental Health Team handle local contact tracing for the City.
 - The volume of calls handled is lower than in Hackney reflecting the low residential population.
 - In the last week of complete data (17th to 23rd July), 51 residents of the City of London were transferred to the NHS Test and Trace system after positively testing for COVID-19. 88% of these had been completed by 28th July.
 - Contact can be time consuming and has on occasion involved door knocking.
 - A welfare referral system has been set up using our City Corporation Contact Centre.
- We have started the required onboarding to ITS; BPSS checks are complete and IT colleagues are on standby for the revised dates.

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Outbreak Management - Outbreak identification and rapid response 'OIRR'

- New process implemented to converge situation alerts coming from various channels iCERT, LCRC/business notifications of situations/outbreaks via Public Health Test and Trace inbox, clusters reports, etc. with attendance of Hackney EHO and City EHO at Covid Situation Review (CSR) meeting 4pm most days of the week to review situations and discuss action required
- iCERT hit a record high of 112 common exposures (or coincidences) for Hackey and 132 for City on 26th July; 110 for Hackney and 77 for City on the 5th. Work refocused on high risk situations and settings necessary during period of high caseloads

| | Postcode description | | | | | | | | Priority metrics | | | |
|---|----------------------|-------------|----------|-------------|----------------------------|---|--------------|-----------------------------|------------------|--------------------|----------------------------|------------|
| | Local authority | HPZone info | Postcode | Description | Last ↓ recorded case | Exposure Group | New cases | Total cases (28 days) | Total cases | Risk Likelihood | Days since last cluster | Work cases |
| • | Hackney Hackney | NA | | | 26/07/2021 | eating out: restaurant | 0 | 3 | 3 | INCREASED | 7 | |
| ۲ | Hackney Hackney | NA | | | 25/07/2021 | retail sector: technology | 0 | 2 | 2 | INCREASED | | 2 |
| ۲ | Hackney Hackney | NA | | | 25/07/2021 | entertainment and day trips: pub or bar | 0 | 4 | .4 | INCREASED | 17 | |
| × | Hackney Hackney | NA | | | 25/07/2021 | shopping: supermarket | 1 | 2 | 2 | LOW | 6 | |

iCERT - Interactive Common Exposure Reporting Tool (illustrative) - identifiable setting data was edited out from diagram

Outbreak Management - Outbreak identification and rapid response 'OIRR'

• A brief summary of situations actioned by setting type for the period 21st June to 22nd July to provide an indication of EHO and LCT efforts expended

| Location | Fitness/Leisure | Hospitality & Hotel | Workplace/ Office setting | Close contact service | HMO/Homeless housing | Total# |
|-----------|-----------------|------------------------|------------------------------|--------------------------|-------------------------|--------|
| City | 1 | 49 | 29 | 0 | 0 | 79 |
| Hackney | 11 | 39 | 9 | 2 | 4 | 65 |
| C&H Total | 12 | 88 | 38 | 2 | 4 | 144 |

- # The count was based on available data & to the best of our knowledge
 - Missing some iCERT days in July PowerBi crush, iCERT not yet refreshed in time for daily 4pm, EHO not available for 4pm due to competing priorities, etc.
 - New process to converge situation alerts (the previous slide), started early July, took a bit of time to embed as BAU
 - \circ ~ Self managed settings e.g. hospitals, care homes, and schools not included in the count
- In view of rising cases in July, review frequency of iCERT has been as and when team capacity allows, i.e. not necessarily daily

Page 50Support for isolation



- DHSC funded, 8-week enhanced self-isolation support trial currently ongoing and now open to all Hackney and City residents until end of August
- Support offer includes funded hotel room for contacts and self-catering apartment for positive cases, Care Package (PPE, PCR etc), tailored IPC guidance and referral to existing support (food, £500 grant), regular welfare calls
- Referral system is working and hotel and apartment have been used
- Uptake is slowly increasing; next promotional push will be in the City

B Community engagement



Community Champions

Newly recruited Community Champions have attended bespoke Making Every Contact Count training, developed based on feedback from Community Champions. The training includes the use of motivational interviewing techniques typically used by health professionals and aims to develop conversational skills in relation to the Covid-19 vaccine.

An externally facilitated Peer Support Session has also be developed and will take place in early August, in addition to Mental Health First Aid training.

The Community Champion forum in July focussed on engaging young people and included a presentation from La Braya Buffong on the Young People's Engagement Toolkit which she has produced.



COVID-19 Information Grants

The final COVID-19 grants round (aimed at supporting smaller voluntary and community organisations) has now closed and 40 applications have been received.

Applications will be assessed and a panel meeting will take place on 10th August to award funding. More information will be provided at the next update.

The Grants Forum in July included key updates on Covid-19 testing and vaccinations.

Targeted Work

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Community Led Outreach Clinics

Achievements to date: (May-July)

- £68k awarded to 14 VCS organisations or networks
- 14 vaccine clinics in 12 locations with 40+ volunteers providing invaluable support
- Over 25 different population groups
- 525 people vaccinated at pop up clinics, spoke to at least 5,250+ providing information and advice
- 471 people vaccinated at John Scott events. Total of 996 people with potential ripple effect/reach through our communities much further.
- PLUS lots of positive communications / promotion...
- Final Community Led Outreach Clinic -18th September 2021

What next?

- 1. Using local staffing to support more pop up clinics at outreach locations
- Need to use our knowledge, skills and existing partnerships to move to medium scale pop up clinics (100+)
- 3. More walk ins at local vaccination sites / pharmacies and promotion
- 4. Dedicated outreach team to be flexible and responsive to support pop up clinics and information stalls
- Continue to increase vaccine uptake, including upcoming booster programme and <u>flu vaccinations</u> (now until end January)

Homeless & Asylum Seekers

Achievements to date: Find & Treat

City

Homeless: 11 first doses, 6 second doses

Hackney

Homeless: 2 first doses, 2 second doses IAC: 34 first doses, 27 second doses

Next Steps

Forward Plan to be developed by Find & Treat and also establish progress on vaccinating Gypsy, Roma, Traveller population

Regular meeting with Inequalities Programme Manager

Targeted work - Outreach Forward Plan

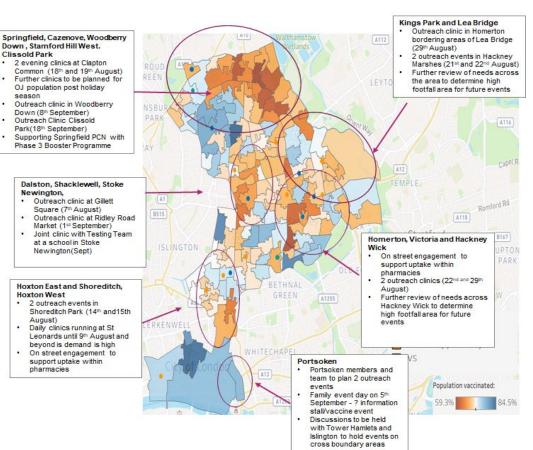
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Outreach Forward Plan

- Focus on •
 - Updating/simplifying our comms to push walk-ins
 - On-street (and business in-reach) engagement to direct people to local walk-in clinics across all areas
- Dedicated Outreach Team for on-street engagement C
 - Review current resource and gap analysis
 - Collaborative engagement with Testing Team

Outreach Clinics .

- In reach/outreach within GP Practices with low uptake
- Evening clinics within specific areas to meet the needs of the communities
- Larger vaccine events in coordination with LVS
- 2nd dose Community clinics planned in areas of high footfall
- Round 2 of Community Grant Funding for Outreach Engagementteams
- Insights
 - Evaluation of 1st round of clinics and build on what has work well and what needs to improve
 - CYP champions to support with future engagement and outreach events



Town Clerk's Communications

Strategy focussing on:

- Meeting the City of London Corporation's overall strategic aim to use communications to preserve life and deliver an effective recovery from the COVID-19 pandemic
- Fulfilling the City Corporation's legal duty as a category one responder to warn and inform the public under the Civil Contingencies Act

Vaccination rollout

- Widespread social media and resident comms to communicate with harder to reach groups, including BAME communities, to encourage take up of vaccines
- Daily posts across City Corporation social media

Testing

- Communicating move of COVID-19 test sites for those who are symptomatic and asymptomatic to 65a Basinghall and Aldermanbury
- Continued push on digital channels for everyone to test twice a week. Informing businesses how they can access tests for staff.

Town Clerk's Communications cont.

Ongoing communications

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Regular social media posts across City Corporation channels on:

- 1. Vaccinations to ensure good uptake of first and second doses
- 2. Testing to highlight 2 testing sites for those with and without symptoms
- 3. Hands, Face, Space and Fresh Air
- 4. COVID Business Recovery Fund
- 5. COVID business accreditation scheme



Town Clerk's Communications cont.

Targeted communications

News releases:

- 1. City Corporation helps businesses build resilience as <u>Square Mile reopens</u>
- 2. City back open for business following lifting of <u>lockdown restrictions</u>
- 3. Two weeks to go: <u>Square Mile SMEs</u> urged to take advantage of City Corporation financial support before deadline
- 4. City Corporation responds to Prime Minister's announcement on easing of <u>lockdown</u> <u>restrictions – July</u>
- 5. City Corporation responds to Prime Minister's announcement on <u>easing of lockdown</u> <u>restrictions</u>

\circ Communications: Town Clerk's Communications cont.

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A four-page <u>City Matters wraparound</u> targeted at City residents and workers. The joint letter from the Lord Mayor and Policy Chair highlighted:

- Getting both doses of the vaccine
- Getting tested
- Hands, face, space, and fresh air
- Support available for City residents



Communications: Hackney Council

Widespread social media, including paid-for advertising, and targeted communications campaign to target younger residents to promote the vaccinatior rollout.

Targeted and culturally competent digital and print communications at Black, South Asian and Orthodox Jewish residents to encourage greater take-up of the vaccine among these ethnic groups, including regular newsletters and Whatsapp messages to Community Champions.

All-channel promotion of major vaccine events, pop-up vaccination events, pharmacy and local vaccine site locations and opening times.

Promotion of continued mask wearing, social distancing and other sensible guidance through <u>press work</u>, Hackney Life and digital communications.



Communications: Hackney Council

Continued print and digital communications on rapid and PCR testing, as well as promotion of the self-isolation pilot to encourage referrals.

Inclusion of key public health messaging in the Council's wider Hello Again, Hackney campaign encouraging safety and caution as the economy reopens with Step 4 of the roadmap.

Specific business communications around Step 4 guidance, including a joint webinar with the City of London and continued promotion of guidance, support and grants available through the Hackney Business Network social media, email and website.

Updates to and simplification of information on the Council's website to ensure accuracy and easy accessibility of key messaging.





- The total projected spend for the Test and Trace programme currently stands at £3.746m.
- A detailed breakdown of the projected spend for each organization, including details of outbreaks plans agreed to date is included in appendix 1 of the cover report



