

# **TRAFFORD PANDEMIC SCRUTINY COMMITTEE**

**15 JUNE 2020**

## **PRESENT**

Councillor D. Acton (in the Chair).

Councillors Dr. K. Barclay, G. Coggins, J. Dillon, J. Lamb (Vice-Chair), J. Lloyd, J.D. Newgrosh, A. New, R. Thompson, D. Western, A.M. Whyte, A.J. Williams and B.G. Winstanley

### In attendance

Councillor Hynes	Executive Member for Children's Services
Councillor Slater	Executive Member for Health, Wellbeing, and Equalities
Councillor Harding	Executive Member for Adult Services
Councillor Carter	Lead Member for Education
Jill McGregor	Corporate Director of Children's Services
Diane Eaton	Corporate Director of Adult Services
Jane Le Fevre	Corporate Director of Governance and Community Strategy
Eleanor Roaf	Director of Public Health
Karen Samples	Director of Education Standards, Quality and Performance
John Addison	Statutory Scrutiny Officer
Alexander Murray	Governance Officer

## **APOLOGIES**

Apologies for absence were received from Councillors Anstee, Shaw, and Blackburn.

## **8. MINUTES**

Councillor Lamb stated that he had been missed of the list of attendees and requested that it be added.

RESOLVED: That, following the above amendment, the minutes of the meeting held 27 May 2020 be agreed as an accurate record.

## **9. DECLARATIONS OF INTEREST**

No additional declarations of interest were made.

## **10. QUESTIONS FROM THE PUBLIC**

No questions were received.

## **11. POST AND PRE DECISION SCRUTINY**

The Chair informed the Committee that the report was for noting unless any Committee Members had questions relating to any of the decisions and no questions were raised.

RESOLVED: That the report be noted.

## **12. HEALTH AND SOCIAL CARE**

The Chair introduced the item and explained that the Executive Members and Officers had been provided with a series of questions relating to this item. The Executive Members and Officers were to provide answers to those questions before giving Committee Members the opportunity for further questions and discussion. The Chair added that if any questions could not be answered at the meeting information could be sent to Members by email at a later date.

The Executive Member for Health, Wellbeing, and Equalities explained that the Director for Public Health had been working to provide answers to the Committee's questions. Due to the wide scope of the questions received the Director of Public Health was going to provide written responses to be shared alongside the minutes of the meeting. The Executive Member for Health, Wellbeing, and Equalities then stated that they would be happy to answer any specific questions during the meeting.

The Chair noted that the main areas the Committee were keen to hear about in relation to health and social care were Track Trace and Isolate, the amendments to the Care Act, the impact on mental health services, and the CQC report regarding learning difficulties and autistic spectrum disorder.

The Director of Public Health gave responses to the Committees questions starting with the disproportionate effect of COVID 19 upon the BAME population. The Director of Public Health stated that it was difficult to know whether the position in Greater Manchester reflected the national position as death certificates did not record ethnicity. This meant that cross matching of information need to be conducted in order to build up a picture of the situation within in Greater Manchester and this work was being undertaken.

A paper had been released which looked into the impact of COVID 19 in relation to levels of deprivation which had been linked to higher rates of death from COVID 19. That paper showed that the situation in Greater Manchester did reflect the national picture. The Director of Public Health had conducted some preliminary work looking at the impact of race by cross referencing deaths by ward against ward profiles and it did look as though the position in Trafford would reflect the National position.

Trafford had been making sure that the services that were being provided such as testing and treatment were being properly followed through to ensure that people were not dying from other treatable illnesses due to the impact of COVID 19 on services. Trafford were working closely with community groups to ensure that the message was reaching everyone within the community and that provisions were in place to facilitate people who needed testing to access it. The Community hubs had been very successful in reaching people and the Council were looking at how they could learn from that success going forward. The Director highlighted the co-design of the hubs which had been a key aspect of their success.

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The Director of Public Health then moved on to the question relating to test track, trace, and isolation system. The national system went live on the 28<sup>th</sup> May and it was expected to monitor around 80% of cases with the other 20% being more complex cases that would be handled at a regional level. Complex in this case meant those who would be difficult to trace through the national system due to lack of access to web or phone based systems or if it was in a high risk setting e.g. schools or nursing homes. The Greater Manchester System went live on the 8<sup>th</sup> June 2020 and while there were some problems the system was continuing to be developed and improved. The Director of Public Health added that by the time a case of COVID 19 was confirmed by the national or regional systems Trafford were often already aware and in the process of dealing with the case.

The Chair asked how many cases had been tracked and traced within Trafford. The Director of Public Health stated that since the national system went live there had been over 100 cases within Trafford and 25 of those had been escalated to Greater Manchester. The majority of the escalated cases had been health care workers or people in care homes. There were a few other cases within the area where they were waiting to receive test results.

Councillor Barclay asked how long was it taking to get test results back, what percentage of the people identified by the tracing had been isolated, what support did Trafford Offer to those who were isolated, and how effective was the system. The Director for public health responded to each question in turn.

Local testing was pillar one and conducted by MFT labs and the Council received those tests back in 24 hours. These were mainly tests done for people in high risk groups, care homes, and Health care workers. The National system was not working as well and Trafford had only recently received pillar two data for the first time since the system was set up in March.

The Council only received figures on the number of people that been traced they did not receive information as to what actions had been taken with those people so did not know how many were self-isolating. It was hoped that this would improve as the Greater Manchester system was fully up and running.

The Director of Public Health stated that at the local level the engagement with cares homes, schools, and health care workers meant that there were good levels of self-isolation.

With regards to the support for those who were self-isolating there was not much support being provided as people were able to be supported by family and friends who were furloughed and working from home but this was likely to become an issue locally and nationally as people started to return to work, especially for low paid residents. The Council were looking to tackle this by supporting communities where this was most likely to be an issue, ensuring that they received testing if they were symptomatic, and that the right support was in place for those who needed to self-isolate. The Director of Public Health emphasised that it was important that the Council got the right plans in place and that those plans were co-produced with the communities they served.

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Councillor Lamb asked about the data gathered through track and trace and whether it was detailed enough to enable professionals to look for correlations between the rates of infection and the levels of lockdown that needed to be in place to keep the number for cases at manageable levels. The Director of Public Health responded that it was hoped that would become the case but the system was not providing the data quickly enough or in enough detail at that point. As more comprehensive testing programmes were put in place the quality of the data collected would greatly improve as would the applications of that data.

Councillor Barclay asked whether GPs local knowledge and expertise was being drawn into and utilised by the system. The Director of Public Health responded that as people were being told not to visit their GP with COVID 19 symptoms the level of information they could provide was limited. The Council had recently been given access to data gathered from the 111 service which gave a good indication of what was going on within the area as that was the service people used to enquire about and book tests.

Councillor Coggins asked whether conversations were being held at some level with other countries that had been running similar systems for longer and learning from their experiences. The Director of Public Health answered that this had been happening throughout and one of the main lessons had been that those countries that had outbreaks of similar diseases previously such as SARS were better prepared for the COVID 19 outbreak due to the experience of their populations and governments from those previous outbreaks.

The Executive Member stated that the point about learning from other countries was important. The countries that have done the best have had the most robust tracking and tracing programmes in place which have prevented or reduced the need for lockdown. This showed that tracking and tracing was the way forward and the importance of the work that the Director of Public Health was doing. The Director of Public Health added that tracking and tracing was only possible if the infection rate was kept low enough which was why it was so important for individuals, businesses, and organisations to follow the guidance around handwashing, social distancing etc.

Councillor Barclay asked what size was the team working on Trafford and tracing in Trafford and whether they were coping with the volume of cases they were dealing with. The Director of Public Health responded that in GM most of the tracking and tracing was being done by public health England and GM teams. Trafford was involved in the local hard cases and the team were setting up the programme management and looking at how Trafford link into the GM system. National funding was being made available and Trafford were putting together a plan of how many people they will need to run the system.

The Chair asked if there was anything to add regarding mental health. The Director for Public Health stated that the questions posed by the Committee about mental health were mainly focused upon the services. However, from a Public Health Point of view the Council needed to think about how COVID 19 and the actions taken to deal with it would impact upon the mental health of residents.

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The Chair then moved onto the questions based upon Social Care. The Executive Member of Adult Services stated by addressing the question about the easements to the Care Act 2014. The Committee were informed that the government had introduced a number of easements introduced on the 31<sup>st</sup> March to respond to the COVID 19 Pandemic and manage the pressures on local authorities to deliver services during that time. The Executive Member wanted to stress just how difficult this time had been upon staff working within health and social care and the impact that the pandemic had across all of the services. The response to the pandemic had seen a truly integrated approach taken by health and social care colleagues over the ten weeks since it began.

Some of the easements meant that Councils no longer had the duty to carry out assessments or reduced the detail of assessments and reduced their duty support carers. The Executive Member for Adults stated that Trafford had not moved from stage one of the easements which meant that in many ways it was business as usual. One of things that Trafford had put in place was an increase in discharge to assess capacity. This had enabled the Council to move people out of hospital much quicker to an alternative setting where detailed assessments can take place which has freed up hospital beds needed for those suffering from COVID 19.

The easements of the care act were time limited and there were a number of checks and balances in place to ensure the easements were only used when necessary. The Executive Member for Adult Services explained the different people and Boards that would be involved if Trafford were to move to the other stages of easements.

Councillor Lloyd asked whether the easements were to be in place for two years and whether the Council were going to have a backlog of assessments once the lockdown was lifted. The Corporate Director of Adult Services responded that it was up to two years with 6 month break clauses which could be used to rescind the amendments by the government. Trafford did not have any backlogs and were able to provide the majority of support digitally but were still having face to face visits where necessary. The main concern was around the levels of staff in care homes if the track and trace required large numbers to self-isolate and Trafford were working closely with providers to be prepared for that.

The Corporate Director of Adults added that the new guidance for hospitals, which came out at the same time as the easements, enabled people to move out of hospital to a home without having a choice of their preferred home. The patient does still have the opportunity to choose where they go long term but that choice was made once they had been moved to a care setting rather than in a hospital setting. All of the placements were paid through the NHS so no one was being charged and that would stay in place until new guidance was issued.

The Executive Member for Adult Services responded to the groups question about the CQC Report Regarding Learning Difficulty and Autistic Spectrum Disorder. She informed the Committee that people who had learning disabilities were generally at a higher risk and likely to have underlying health conditions. Trafford had done a lot of work around shielding people at higher risk and people in supported living settings had restrictions on who could visit in place. The

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Executive Member for Adult Services noted the exemplary work of staff in these and other care settings across the borough where some staff had actually moved into the care setting to minimise the risk to residents. The day services the Council usually provided had to close due to lockdown but this put more strain upon family carers. While there was emergency respite facility in place none emergency respite services had also been closed. The Committee were informed that all of the staff members in those services were receiving the same support and equipment as staff in care homes.

The Corporate Director of Adult Services added that five deaths in learning disability services over March and April, which was not necessarily higher than normal. A review was conducted for each person who died as part of the LeDeR process. Nothing of concern had been raised at that stage but more would be known at the end of the review process. The Council were working with providers on a daily basis to reduce the risks for staff. The Corporate Director of Adult Services spoke of the great work that the providers were doing during the unprecedented times.

Councillor Holden asked about the discharge to assess beds and whether testing was in place to stop infection spreading into care homes. The Corporate Director for Adult Services responded that there was an agreement that had been in place since March with MFT that all patients would be tested prior to them being sent to the discharge to assess beds. While this was not perfect it provided reassurance for care homes. The care homes were still isolating those who came from hospital and wearing PPE when working with those residents until it was clear they did not have COVID 19. Testing was also in place for those who were moving from their own home into a care home.

The Executive Member for Adult Services then addressed the Committee's question regarding mental health services. The Committee were informed that the Council's Adult Mental Health Services were operating as usual and they had a daily review of referrals, inpatients, and discharges into the community. The biggest area of concern was around the face to face contacts with people when supposed to be avoiding contact. This had been addressed through providing staff with PPE and training on infection control. There were helplines available across Greater Manchester for those who were known to mental health services and for those who were not engaged with services.

The Executive Member for Adult Services recognised that there was going to be a lot of work to be done after the pandemic as there would be issues around trauma, bereavement, and grief. The situations that had been seen in care homes were very traumatic and the Council had to be ready to provide support to those who had been through that.

The Mental Health transformation Board was being re-established and would be looking at moving away from crisis management to prevention and how to keep communities well and how do people live well at home.

Councillor Williams asked if the Committee hear about work that had already been started before think about the impact of COVID 19. The Councillor was concerned

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that the usual route into mental health services was through GPs but as GP attendance was down during the pandemic that a lot of people who needed help were not receiving it. Councillor Williams then asked that an update be provided on mental health services at one of the Committee's upcoming meetings. The Executive Member for Adult Services agreed with the points made by Councillor Williams and agreed to provide an update on mental health services. The Executive Member for Health, Wellbeing, and equalities added that work had already started with GMMH and an update of the progress of that worked would be shared with the Committee in writing.

**RESOLVED:**

- 1) That the responses be noted.
- 2) That the Executive Members and Corporate Directors be thanked for attending the meeting.
- 3) That written responses to the Public Health questions were to be sent to the Committee when ready.
- 4) That an update on mental health services was to be given at one of the Committee's upcoming meetings.
- 5) That a written update on the progress of work by GMMH be shared with the Committee.

### **13. SCHOOLS AND EDUCATION**

The Executive Member for Children's Services acknowledged the challenging and difficult time. She expressed her gratitude for Council staff working in Children's services, the Council's partners, foster carers, and schools. People had been working around the clock to put support in place and assess risks in a way that had never been done before and at a rapid pace. The Executive Member for Children's Services noted that the questions had been received the Friday before the meeting and thanked the Corporate Director of Children's Services, Director of Education Standards, Quality and Performance, and the Lead Member for Education for the work they had done to put the responses together. The Committee were told that if any of the questions were not covered fully during the meeting that they would be followed up afterwards in writing.

The Executive Member for Children's services informed the Committee that it was for Schools to decide how and when they would reopen. The Council's role in terms of the wider reopening of schools across the borough was one of providing support and guidance for schools to aid them in making those decisions. In May the Prime Minister announced that schools would reopen for nursery, reception, year one, and year six with some face to face contact for year 10 and year 12 pupils. Trafford had recommended that schools prepare to re-open more widely on the 10<sup>th</sup> of June. However, following an announcement regarding the R rate in the North West on the 5<sup>th</sup> June a further recommendation was made for schools to be able to take more time to review their risk assessments.

The Lead Member for Education told the Committee that all schools were opening on the 15<sup>th</sup> June. By the 12<sup>th</sup> June 71 primary schools had reopened and 2006 children were in school. The Council had offered schools more time to prepare if they needed it along with support to review their risk assessments. It was too early

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to say how many children had attended school on the 15<sup>th</sup> June but it was expected to be a large increase as all schools were opening. The Chair requested that the figures for the first day back be given to the Committee and the Director of Education Standards, Quality and Performance confirmed that the data would be shared.

The Lead Member for Education stated that there were expected to be variations in the level of attendance across the borough. It was anticipated that demand would be higher in the South of the borough than the North although the exact picture would not be known until the data was available. The Director of Education Standards, Quality and Performance added that the figures were likely to change on a daily basis as schools would be implementing different rotas and the position was likely to continue to change over the days and weeks following the reopening. Additional guidance had been released by the DFE stating that schools could open to more year groups if they had sufficient resources to do so. The Council had made it clear to schools that all wider admittance was to be done on top of providing places to the children of key workers and vulnerable children.

The Lead Member for Education then moved onto the question regarding childminders. The guidance relating to childminders and schools stated that children should stay in a single setting where possible, which had made things very difficult for childminders. The week commencing 8<sup>th</sup> June 99 out of 239 childminders across Trafford were open but 30 of those had no children, which reflected parent's lack of confidence.

Councillor New had been contacted by childminders saying that schools had been preventing them from collecting children. There were instances where childminders had been looking after children during lockdown but now were unable to do so. The Councillor asked whether anything would change so these situations would not occur. The Director of Education Standards, Quality and Performance responded that in the meetings with head teachers this issue had been raised around managing the risk outside of schools, children coming into schools, and the chances of cross infection. The early year's strategic board was meeting on the 16<sup>th</sup> June and there was a meeting with primary school cluster leads on the 17<sup>th</sup> June. The Committee were assured that this issue would be raised at both of those forums. The Director of Education Standards, Quality and Performance asked that Councillor New provide information as to where this was happening so it could be taken up with the relevant head teachers.

The Corporate Director of Children's services added that they had attended a meeting with the regional schools commissioner where the issues of interpreting the guidance and the sustainability of the sector had been raised. It was recognised that Trafford needed a flexible wrap around childcare offer but COVID 19 had made more it difficult to provide that offer due to infection control. The Director of Public Health pointed out the importance of having honesty from people regarding their situation. It was better to have flexibility and stability with a known risk than being too strict leading to people not engaging.

The Lead Member for Education concluded the discussion of the topic by informing the Committee that due to COVID 19 it was highly likely the number of



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children eligible for 2 and 3 year old funding would rise due to the increase in deprivation.

The Lead Member for education then responded to the question on the relaxation of key legislation and reasonable endeavours. The Committee were informed that 73% of EHCPs were being completed within the statutory time frame, which was an improvement from 61% the last time the data was collected. All decisions were being made within the six week timescale and no exceptions had been applied so far. SEND was performing as business as usual with all panels occurring with the same frequency and with the same representation across education, health, and social care. All assessments were being completed by educational psychologists and other professionals were available online or via telephone. Peripatetic services, while not working within schools, were working with schools on risk assessments.

The Corporate Director of Children's services stated that Children's services were in a similar position to adult services. There had been amendments to the Children's act and the adoption act and Trafford had not used the freedoms and flexibilities that were available. Trafford had laid out circumstances where the freedoms and flexibilities might be used within an assurance document. The document included the process that the Council would go through in order to sign off the use of those freedoms and flexibilities.

The Director of Education Standards, Quality and Performance made it clear that the panels and decision making process had not changed. Trafford were collating information about the decisions schools had made regarding the delivery of EHCPs. Trafford had sent communications to all schools and SENCOS as to what the legislation meant for pupils in their care. Trafford were also contacting every SENCO to find out whether reasonable endeavours were being used and how they were meeting children's needs.

The Chair stated that he found it reassuring that Trafford were continuing with business as usual. The Chair requested that the Pandemic Scrutiny Committee be informed if there were to be any changes to this position.

The Lead Member for education added that a lot of support was being delivered online with the sensory impairment service and speech language therapists sending packs out for parents. Teachers of deaf pupils were checking in with schools on a weekly basis and other services were still being delivered just not in the traditional way. The Director of Education Standards, Quality and Performance added that Trafford had asked for detail around the therapies that were being offered for children with additional needs. This information would give Trafford a good understanding on the current position of therapy and aid in planning how it would be delivered as more children went back to school.

The Executive Member for Children's services added that the Children and Young Peoples Scrutiny Committee had presented a report to the Executive and the response had been ready for some time. The response had been delayed due to the pandemic and was being updated to reflect what had happened.

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The Executive Member for Children's Services moved onto the response to the questions in relation to children in care. The Council had not reduced the frequency of visits to children in care during the pandemic. Social workers had been flexible and creative in the ways that they had carried out their visits, with as many face to face visits being conducted as possible and others being carried out virtually. There had been a focus on ensuring that the quality of visits was maintained with weekly updates provided through the performance reporting process and two full audits had been conducted.

A clear system of contact and liaison with schools had been established for vulnerable children who should have been attending school but were not. This included decision making around the levels of contact needed with families. The Executive Member stated that this had a positive effect upon the Council's relationship with schools and had opened up a new dialog that the Council would look to maintain and strengthen going forward.

The Council had also been working with the police and the Trafford safeguarding partnership to address concerns regarding new cases as children were not able to present themselves at the usual settings. There were further concerns regarding possible increases in domestic violence during lockdown. The Council had been working with police to ensure incidents were flagged at the earliest opportunity. Plans were being developed to deal with any surges in referrals that may occur once the restrictions were eased and services were resumed.

Councillor Thompson asked whether the council had any predicted figures for the number of new cases that may arise. The Corporate Director of Children's services responded that the Council had seen a decrease in demand up to 30% so that would be the highest increase expected. However, the previous year, which the figures were based upon, had seen higher demand than usual so demand would have been expected to reduce. In addition the proactive work that had been done by the Council's and their partners led the service to believe that demand would not increase by that amount.

The lead Member for Education then moved on to answering the Committee's questions on disadvantaged and vulnerable school children. The Lead Member for education informed the Committee that the full picture of the impact on disadvantaged children would not be available until after they had returned to school. In Trafford there were 251 children with EHCPs in place, 185 children who were supported by social workers, and 237 other vulnerable children. Those children had been prioritised in accessing school places and were being monitored by children's services. Schools had been working to ensure that all children entitled to free school meals had been receiving vouchers throughout the pandemic.

Work had been done around supporting these children with home learning. The Council promoted the use of BBC bitesize website as well as the Oak National Academy that had been set up by the government for online lessons. In addition, packs had been delivered to children's homes, there had been Zoom lessons where possible, and weekly phone calls had been held with parents and children. There was a problem around children who had not attended school and schools were working on how to get those children back in.

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The Director of Education Standards, Quality and Performance added that the Council were aware of the issue of lost learning and had created additional sub groups with a range of partners focused on teaching, learning, and recovering the curriculum. A lot of work was being planned to improve reading and vocabulary as the Council were aware that the ability gap was going to increase, which would impact on all parts of the curriculum. Trafford were linking in with the work at the GM level and the education endowment fund was producing materials aimed at catching up and rapid improvement programmes that schools could adapt. The Council were focused upon getting children ready to learn and were looking at the impact of the pandemic on children's mental health, including attachment and trauma based challenges that children might have, with educational psychologists providing support for schools. Trafford's approach was to equip schools to deal with lower level issues to prevent them escalating and reduce the demand for mental health services. There was particular concern around the learning that had been lost by year one pupils and work was ongoing at the GM level to look at how to support those pupils.

The Executive Member for Children's services then addressed the question relating to mental health and the waiting lists for the Healthy Young Minds Service. The Committee were informed that the service was still taking referrals and that they had a waiting list of 11 children, who all had telephone assessments booked for June and July. This was a reduction from a waiting list of 105 children in March before the pandemic. The majority of work had switched to remote working but the service was still offering face to face meetings where needed. The Council was putting surge plans in place for the service in case there was an increased demand as the restrictions were reduced. The Kooth online service had been working to support children with mental health issues in Trafford and had expanded their service for children and young people up to the age of 19.

The Corporate Director of Children's services assured the Committee that the Council had a dedicated work stream for response and recovery of mental wellbeing and mental health. While there had been a reduction in the demand for services like Healthy Young Minds online services, including Kooth, had seen an increase in demand. Children's services were working with commissioners and providers to ensure that there was a wide range of offers available. A mapping exercise was underway to review the totality of the Trafford offer to see what the support needs were for different age groups and types of issues. This exercise would identify gaps in service which needed to be addressed to meet the changing needs of children and young people.

The Executive Member for Children's services added that if there were any further questions that they would be happy to come back provide answers at a later meeting.

**RESOLVED:**

- 1) That the Executive Member of Children's Services, the Lead Member for Education Services, The Corporate Director of Children's Services, and the Director of Education Standards, Quality and Performance be thanked for attending the meeting.

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- 2) That the figures for the number of pupils attending school on the first day back be shared with the Committee.
- 3) That Councillor New provide information as to where issues with the collection of Children had happened.
- 4) That the Pandemic Scrutiny Committee be informed if Trafford implemented any flexibilities or freedoms.

#### **14. ITEMS FOR FUTURE MEETINGS**

The Chair informed the Committee that there was to be an agenda setting panel meeting later in the week. The Chair asked Committee Members to contact officers if they had any further questions, topics, or possible recommendations that they would like the panel to consider for future meetings.

Councillor Western noted that there was a quick turnaround for Members to provide their responses for the panel given the large amount of information that had been given. The Chair responded that Committee Members could take longer in their considerations and send them to officers when they were ready but they would not be considered by the panel for the meeting on the 1<sup>st</sup> July.

Councillor Coggins noted that there had been a lot of changes to the active transport network and asked that considered as a topic for a future meeting. The Committee agreed to add active transport as a topic for consideration.

Councillor Lamb suggested that Committee Members should put together a list of the key messages, questions, or information that they took away from the meeting.

Councillor Barclay asked that figures on track and trace be provided at each meeting. The Chair agreed to that and added that school attendance would be another area that the Committee would like regular figures on.

**RESOLVED:**

- 1) That Committee Members are to provide any further questions, topics, or possible recommendations they would like to be consider for future meetings.
- 2) That active transport be added as an item for consideration for future meetings.
- 3) That figures on Track and Trace as well as school attendance should be provided regularly to the Committee.

The meeting commenced at 4.00 pm and finished at 6.04 pm