

## Trafford Covid-19 Public Engagement Board

Wednesday 23<sup>rd</sup> February 2022 – 10:00 a.m. – Virtual meeting

### Present:

Councillor Freeman (Chair)	Executive Member for Covid-19 Recovery and Reform
Councillor Newgrosh	Member of the Health Scrutiny Committee, Trafford Council
Councillor Acton	Chair of the Overview and Scrutiny Committee, Trafford Council
Councillor Welton	Ward Councillor, Trafford Council
Councillor Blackburn	Ward Councillor, Trafford Council
Helen Gollins	Acting Director of Public Health, Trafford Council
Khan Moghal	Chair, Voice of BME Trafford
Andrew Latham	Chief Officer, HealthWatch Trafford
Dorothy Evans	Voluntary, African Caribbean Care Group
Jilla Burgess-Allen	Consultant in Public Health, Trafford Council
Mark Jarvis	Medical Director, Trafford CCG
Ellie Caddick	Covid-19 Communications Lead, Trafford Council
Jamie Oliver	Communications & Engagement Specialist, Trafford Council
Catherine Martland	Outbreak and Contact Tracing Hub Officer, Trafford Council
Danny Zammit	Strategic Neighbourhood Lead, Trafford Council
Beenish Hanif	Health Protection Lead, Trafford Council
Molly Shaw	Governance Officer, Trafford Council
Natalie Owen	Governance Officer, Trafford Council

	Item	Decision / Action	Key Person for Action
1.	Welcome and apologies	Apologies were received from Ben Wilmott.	
2.	Minutes	The minutes of the meeting 9 <sup>th</sup> February 2022 were agreed as an accurate record.	
3.	Membership	There had been no changes to the Membership since the last meeting.	
4.	Update on the current Covid-19 situation in Trafford	<p><b>The Board agreed to note the update.</b></p> <p><b>The following messages were shared with the Board:</b></p> <ol style="list-style-type: none"> <li>1. The rates across Trafford had decreased with rates at 277 per 100,000;</li> <li>2. The rates in over 60s had decreased to 205 per 100,000;</li> <li>3. The positivity rate was 9%;</li> <li>4. Trafford had the second highest rates across Greater Manchester;</li> <li>5. The South and Central wards had the highest rates across Trafford;</li> <li>6. A presentation was shared which outlined the four principles of ongoing advice, key dates and actions being taken in the future;</li> </ol>	<b>All</b>

		<ol style="list-style-type: none"> <li>7. From 24th February, people who tested positive no longer were required to isolate;</li> <li>8. There were still actions that were being taken by the Local Authority to stop the spread of Covid-19 such as vaccination, PPE and surveillance;</li> <li>9. People needed to take additional care (even if vaccinated) by avoiding crowded places, meeting people outdoors where possible, wearing a mask, keeping up with hand hygiene, and working from home if able.</li> </ol>	
5.	10POINT ACTION PLAN		
5a.	Mass Testing	<p><b>The Board agreed to note the update.</b>  <b>The following messages were shared with the Board:</b></p> <ol style="list-style-type: none"> <li>1. That as of Monday, most students and staff in education settings no longer had to test twice weekly;</li> <li>2. That from 24th February, under 18s and fully vaccinated close contacts no longer had to take daily tests;</li> <li>3. From 1st April, the provision of free universal symptomatic and asymptomatic testing would end;</li> <li>4. Symptomatic testing will remain for social care and health care staff;</li> <li>5. That over 80s and the most vulnerable people would be able to have free symptomatic testing;</li> <li>6. Although there was no legal requirement to isolate, the national message was to avoid contact with others and order a PCR.</li> </ol>	All
5b.	Contact Tracing and Outbreak Management	<p><b>The Board agreed to note the update.</b>  <b>The following messages were shared with the Board:</b></p> <ol style="list-style-type: none"> <li>1. There was cases in 9 primary schools, 6 secondary schools and 11 early years settings but none were meeting outbreak thresholds;</li> <li>2. There was very low activity in workplace settings;</li> <li>3. The local Contact Tracing team carried out contact tracing with Level 2 cases and had a completion rate of 75%;</li> <li>4. Support had been given to people across Trafford who were self-isolating.</li> </ol>	All
5c.	Care Homes and Supported Accommodation	<p><b>The Board agreed to note the update.</b>  <b>The following messages were shared with the Board:</b></p> <ol style="list-style-type: none"> <li>1. The outbreaks in care home settings had reduced significantly and at present there was only 2 with</li> </ol>	All

		<p>outbreaks, compared with 28 in January;</p> <ol style="list-style-type: none"> <li>2. All asymptomatic staff should test daily using a Lateral Flow test;</li> <li>3. All symptomatic residents should be tested monthly using a PCR test;</li> <li>4. If a staff member returns to work after testing positive, they should resume routine LFD testing, even within the 90 day window of testing positive;</li> <li>5. Staff who tested positive on a LFD within the 90 day period should start a new period of self-isolation;</li> <li>6. Residents who test positive should isolate regardless of vaccination status, then take LFD tests daily from day 5;</li> <li>7. Residents can end isolation early following 2 consecutive negative Lateral Flow tests, but only if clinical improvement criteria's are met.</li> </ol>	
5d.	Mass Vaccination	<p><b>The Board agreed to note the update.</b>  <b>The following messages were shared with the Board:</b></p> <ol style="list-style-type: none"> <li>1. That the 5-11 year old vaccination programme had been approved;</li> <li>2. Low uptake was expected for this vaccination but it was a travel requirement for most countries which could encourage uptake;</li> <li>3. The emphasis on the 5-11 year old vaccination programme was to allow parents to make informed decisions;</li> <li>4. The current vaccination centre contracts end on 31st March so new arrangements were to be put in place.</li> </ol>	All
5e.	Update and escalations from the COVID-19 Community Engagement Group	<p><b>The Board agreed to note the update.</b>  <b>The following messages were shared with the Board:</b></p> <ol style="list-style-type: none"> <li>1. The team were door knocking to promote the mobile vaccination clinics;</li> <li>2. The team were helping schools to boost the uptake of the 12-15 year old vaccine programme;</li> <li>3. Primary schools were being contacted to deliver sessions to promote covid-safe behaviours such as hand hygiene;</li> <li>4. There was an ongoing art project in schools to highlight young people's experience of the pandemic.</li> </ol>	All

5f.	Communications Strategy	<p><b>The Board agreed to note the update.</b></p> <p><b>The following messages were shared with the Board:</b></p> <ol style="list-style-type: none"> <li>1. The key messages being delivered were: <ol style="list-style-type: none"> <li>a. To get vaccinated;</li> <li>b. Ensure proper ventilation;</li> <li>c. Encourage face coverings;</li> <li>d. Stay at home if you're not well;</li> <li>e. Test if you are symptomatic;</li> <li>f. Catch it, bin it, kill it;</li> <li>g. Hand hygiene;</li> </ol> </li> <li>2. Before 31st March, messaging would still promote getting a PCR if symptomatic;</li> <li>3. A MMR campaign was also running nationally.</li> </ol>	
6.	Public Engagement Board Activity and Feedback	None.	
7.	Any Other Business	None.	
8.	Date of Next Meeting	Wednesday 16 <sup>th</sup> March 2022 at 10:00 a.m.	