

READING BOROUGH COUNCIL

HEALTH & WELLBEING BOARD

9 OCTOBER 2020

QUESTION No. 1 in accordance with Standing Order No 36

Tom Lake to ask the Chair of the Health & Wellbeing Board:

COVID-19

By comparison with the suppression of SARS-Cov-2 in Wuhan, Reading would need about 90 public health workers, control of testing and test data, some isolation away from home, and of course a comparable situation throughout the country.

Can you compare the current resource with these indications?

REPLY by the Chair of the Health and Wellbeing Board (Councillor Hoskin):

Since the novel coronavirus was first identified as a potential threat to the health of people in Reading, we have mounted a comprehensive response. Those at the forefront of this work have a range of roles to ensure the response is effective. This includes our Director of Public Health for Berkshire wide and the team of consultants, specialist and data analysts she leads. It incorporates the Public Health England team for the Thames Valley with their dedicated Berkshire West Consultant and team. Within the Council itself we have our local Public Health and Wellbeing team led by our Consultant.

However, others who do not simply have “public health” in their job title have also been and continue to be central to our response. For example, our Emergency Operations Centre Team and our Environmental Health Officers and Regularity Services Team lead on our work to ensure Reading is a COVID secure town. Partners around this Board have also been instrumental in our response work, obviously NHS colleagues, but also the Healthwatch and the voluntary sector in ensuring things like the One Reading Community Hub have operated effectively and the most vulnerable in Reading are supported at this time. I don’t think it is possible to do a total head count of these individuals and roles, but I am sure it exceeds 90.

In terms of data and testing- we have daily information available to us on the number of people having tests for COVID-19 in Reading, whether they test positive or negative for the disease, allowing us to track the virus ever more closely. Local testing options for local residents are expanding and despite national challenge, we now have a regular Mobile Testing Unit at Prospect Park, and as I have made previous reference to, are working with the University to establish testing on their campus too - for students and local community alike.

It is true that the national outsourced test and trace system is well deserving of being widely described as a shambles with inadequate capacity for testing and the national contact tracing system now, on the most recent figures, failing to reach 31.4 % of the close contacts it receives of the people who have tested positive. Whilst the national test and trace is working better in Reading than much of the country, I have no doubt that a properly resourced local public health co-ordinated system here would have provided a far, far more effective service.

Contact tracing and isolation is coordinated by NHS Test and Trace and across the UK and in many other countries require people to isolated at home, with their household, if they develop symptoms or test positive for COVID-19. The scientific evidence shows as that this is effective in reducing the spread of the virus and pushing the “R” value down as far as possible. The main

issue is my mind is scandalously inadequate financial support for people who have to self-isolate meaning many people cannot afford to and may also lead to people being unwilling to pass on contact information for friends and family who they think could have money problems if they have to self-isolate. The government's own SAGE advisory group estimates less than 20% of people in England fully self-isolate when asked to do so.