

To: Council

Date: 30 November 2020

Title of Report: Public addresses and questions taken in Part 2 of the agenda – as submitted by the speakers and with written responses from Cabinet Members

Introduction

1. In this section of the meeting, Council hears addresses and questions from members of the public about motions on Part 3 of the agenda or that do not relate directly to matters for decision.
2. Addresses made by members of the public to the Council, and questions put to the Cabinet members or Leader, registered by the deadline in the Constitution, are below. Any written responses available are also below.
3. The text reproduces that sent in the speakers and represents the views of the speakers. This is not to be taken as statements by or on behalf of the Council
4. This report will be republished after the Council meeting as part of the minutes pack. This will list the full text of speeches delivered as submitted, summaries of speeches delivered which differ significantly from those submitted, and any further responses.

Addresses and questions to be taken in Part 2 of the agenda.

1. Address by Janet Phillips – in support of motion 16a on Improving coronavirus testing and tracing

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Liz Peretz, Isabel Tucker and I have been campaigning throughout the pandemic with We Own It and Keep Our NHS Public for local testing and tracing that is run and carried out by our public health authorities. These are the bodies with the necessary expertise and experience, and the vital community knowledge. At the same time, we've been calling for the misleadingly named 'NHS' Test and Trace to be shut down. In our view, it has been not only a scandalous misuse of public money, involving corruption and cronyism, but a disastrous failure as far as bringing the virus under control is concerned.

Though expert after expert has repeated the message that testing, to be effective, needs to be located within our communities, it soon became clear that the Government would rather go on tinkering with 'NHS' Test and Trace, in an attempt to 'fix' it, than close it down, and transfer funding to local authorities. But, in our view, 'NHS' Test and Trace cannot be fixed because its model is fundamentally flawed. The only way to fix testing and tracing in the UK is finally to hand the money and the work over to our local public health bodies.

In recent months, the Government has talked about more local involvement, but so far that has meant passing the names of people who test positive and whom 'NHS' Test and Trace fail to contact to local councils – in many cases, several days after their tests. Paid staff – as in the local contact-tracing operation set up by our own DPH and City Council – as well as teams of volunteers in other parts of the country, have been doing wonderful work reaching most of the people handed over to them. And they are then in a position to provide information on how to self-isolate, as well as support. In effect, though, these local operations are just mopping up for 'NHS' Test and Trace. The information on contacts traced needs to be fed back into the central system. So far, our local bodies have had no influence over the shape and scope of the programme of testing and tracing.

Many councils have recognised the foolishness of the current set-up, and have been frustrated by not being able to do more. We decided that the way forward was for local authorities to show that they are serious about wanting proper local operations in order to really make a difference – that a loud clamour for funding and resources to be diverted to local authorities might finally get the Government to see sense and take the necessary action.

We are delighted that, as a result of our discussions, Craig Simmons, Louise Upton and Andrew Gant have proposed a cross-party motion to the Council, which, if passed, would enable the first steps to be taken towards gaining higher-level support to push the Government (perhaps in partnership with other local authorities) for the means to set up a fully-fledged local programme of testing and tracing. We urge you all to vote in favour of this motion.

But time is of the essence. Some might think that with several vaccines now looking effective, including the one developed in our own city, and the rolling out of vaccination imminent, it is too late to be bothering now to fix the testing and tracing mess. It could, however, be many more months before everyone who needs to be vaccinated is vaccinated. In that time, especially if adherence to basic social distancing and hygiene break down, there will be more illness, more strain on the NHS, more economic loss and more deaths. Having good testing and tracing could prevent much of this.

And another reason for getting testing and tracing right now is so, hopefully, we have it right for the future: so the message is clear that this work belongs always with our public health bodies – not with private companies that come forward with no expertise but, we believe, rake in handsome profits while failing to even do properly what they've been contracted to do. Fixing local and public testing and tracing now would be a significant victory against those who want to outsource more of our health services. With Brexit proper only weeks away, and the danger of all manner of new trade deals, the matter of keeping our NHS public is also one of urgency.

What could a good locally-run testing and tracing operation do?

- Decide who should be tested, where and how
- Choose which groups should have access to repeated testing, whether they have symptoms or not, for example, health workers, care workers, teachers or students
- Use local public labs for a cheaper and faster turnaround of results
- Provide financial and moral support to people who need to self-isolate
- Address issues of inequality, and how they contribute to transmission and self-isolation problems; provide special accommodation for those who are not able to self-isolate effectively in their own homes
- Deploy fast tests in specified situations
- Involve GPs
- Encourage collaboration between different institutions, to create economies of scale and greater efficiency
- Develop a strategy for reducing infection throughout Oxfordshire to zero.

So, please vote for motion 16a. Once passed, the real work will begin. We would urge you then, without delay, to begin discussions with our DPH and the County Council, and together to start mapping out what a local operation would look like, to set in motion the preparations for the local testing and tracing programme we hope we will all soon have.

Thank you.

The Cabinet Member for a Safer, Healthy Oxford, Cllr Louise Upton, will give a verbal response

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