



**Report of:** Chief Executive

Meeting of:	Date:	Ward(s):
Policy and Performance Scrutiny	28 January 2021	All

Delete as appropriate	Exempt	Non-exempt
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## **SUBJECT: COVID-19 in Islington – report from the Chief Executive**

### **1. Purpose**

- 1.1 This report updates the Policy and Performance Scrutiny Committee on the approach we are taking as a Council to support staff and residents through the Covid-19 pandemic. This includes on-going work to control the spread of the virus as well progress made on community testing and to support the roll-out of the vaccination programme.

### **2. Recommendations**

- 2.1 To consider the update from the Chief Executive on the Council's response to Covid-19.

### **3. Pandemic management – an overview**

- 3.1 Since March 2020 the **Council's emergency contingency plans** have been routinely revised and updated for each service to ensure there is clarity on operational roles and responsibilities to ensure the effective management of the Covid-19 pandemic in Islington. The Council's command structure at both Gold and Silver levels has remained at the highest alert level to be able to respond to changes from Government and any changes around national and local Public Health guidance. Gold have continuously used the latest epidemiology and national guidance to inform the decision-making process, help prevent and contain the spread of the virus and protect the Islington community and the workforce.

- 3.2 **The Borough Emergency Control Centre (BECC)** continues to sit under the Silver Commander and has remained operational since 16 March 2020 and continues to maintain a 24 hour, 7 days a week contingency and response capability. The BECC remains the first point of call mechanism for the reporting of staff COVID-19 positive tests within the workplace and responsible for PPE distribution across all internal council departments and externally to domiciliary care providers and care homes. The BECC has also undertaken the setup of all Lateral Flow Testing sites within the community as well as ten secondary schools who requested assistance, this also included all special schools and both academies which amounted to 35 booths in total. The initial batch of booths were built by the council's in-house repairs team and the BECC is now managing the ongoing purchasing of materials for a newly designed, rapidly deployable testing booths.
- 3.3 **Islington's Outbreak Control Board** was established in September 2020 and is chaired by the Leader of the Council. Board membership includes several Executive members, senior officers working, colleagues from local NHS organisations, key partners such as the Metropolitan Police and the London Fire Brigade, and a range of representatives from the local community and voluntary sector, and others. The Board provide oversight of the implementation of the Council's Covid-19 Outbreak Prevention and Control Plan and to enhance effective outbreak control through community and stakeholder engagement. Key themes at recent meetings have been on the take-up of testing, the disproportionate impacts of Covid on black and minority ethnic communities, challenging vaccine misinformation, and the importance of clear, consistent and coordinated communications with the local community.
- 3.4 The already established **Fairer Together Borough Partnership** continues to meet regularly and coordinate work as a system to respond to the challenges of Covid-19. Throughout 2020 the Partnership worked together to support the We Are Islington Response. As we move into the vaccination programme the Partnership is coordinating the mobilisation of volunteer stewards for clinics, and the redeployment of staff from the Council, Police and Fire services to support the programme. The Partnership is also coordinating the vaccination cohort lists to ensure the most effective delivery, and comms channels to maximise take up.

## Testing

- 3.5 Access to testing and enabling a fast turnaround of results is vital to control the spread of the virus. In September 2020, the Leader of the Council publicly called on the Government to deliver a local testing site for Islington residents. In response the first site was set up on the Sobell Centre car park and has been operational from 4 October. A second testing site opened within the Finsbury Leisure Centre on 26 November 2020 with plans to expand the testing offer on this site.
- 3.6 On 17 December 2020 the Islington Assembly Hall (IAH) test centre opened to provide Lateral Flow Testing (LFT), with the message that testing is available to those who work out of their home and are in contact with others e.g. key workers. The Vibast centre site in EC1V opened on 5 Jan with The Arsenal Community Hub site, operational on 12 Jan 2021. Slots for LFT testing are booked by Eventbrite, the on-line ticketing booking system or by drop-in for those who are unable to make a booking on-line. Given the level of demand for Lateral Flow

testing, from 16 January 2021 Islington Assembly Hall and the Vibast centre will be open seven days a week to manage demand.

- 3.7 From 18 January capacity for testing across the three sites will be increased to 10,000-14,000 per week. Two further sites are planned to open week commencing 18 Jan 2021 which will increase testing capacity even further. As of 8 January, 3280 people have undertaken LFT testing since 17 December, approximately 3% of those who were tested had a positive test.
- 3.8 Staff working in schools and early years settings are prioritised for a lateral flow test at three community testing centres and can be tested early morning or in the evening. This offer also is available to all Islington Council staff. In the week commencing 4 January, schools were ready to facilitate the testing of secondary school pupils, pupils from special schools and all staff on school premises and this will remain in place for the foreseeable future. The Learning and Schools department continue to meet frequently with headteachers to identify issues and offer support as required in relation to testing and Covid-19 matters.

### **Vaccination roll-out**

- 3.9 We continue to work closely with neighbouring north London authorities Barnet, Haringey, Camden and Enfield, NHS organisations and voluntary and community to deliver the Covid-19 vaccination programme which is the largest vaccination programme in our history. Locally, two primary care-based delivery sites (Hanley & Bingfield) opened in December 2020 and are currently focused on vaccinations for the over 80s. All acute hospitals across the borough now have vaccine supply and are focused on care & health staff and in/out-patients. In addition, roving teams have been launched and are focused on care home residents and staff. A mass vaccination site is ready, based in the Business Design Centre and is planned to go-live in early February. Slots will be accessed via the national booking system.
- 3.10 As part of an initial wave of pharmacy-led community vaccination centres, planning is underway to assess the feasibility of establishing a site at the ARC Centre, managed by two Upper St based pharmacies. If it goes ahead, it would fill a geographical gap in our local provision and also have the involvement of a trusted local community organisation.
- 3.11 In line with national guidance, front-line health and social care workers have been prioritized for vaccination. A number of staff have already received the vaccine and prioritisation is underway for phase 2 to ensure we are best prepared for further vaccines being made available.

### **Communications**

- 3.12 The council has continued to communicate extensively with residents, businesses and staff, using a range of channels to reach target audiences. This has meant responding at pace to last minute changes in Government guidance and playing a proactive role on issues that we know are important to local people, including the call to move all primary schools to online learning immediately after the Christmas holidays. Since early December, broadcast communication has included two additional all household Covid-19 door-drops, refreshed,

highly visible signage and banners in our parks, high streets, estates and council buildings and extensive digital communications including social and email.

- 3.13 We have worked closely with partners and with the community, seeking out trusted voices including healthcare professionals, faith leaders, VCS partners and council staff, to create engaging and shareable video content that has seen high engagement rates across our social channels.
- 3.14 The communications team have worked closely with councillors, council staff, VCS partners and residents, hearing about issues, concerns and myths directly from target community groups and sharing weekly scripts with trusted community voices in recording their own video content or relaying their own communications to targeted groups through hyper local channels, such as Whats app groups. This has proved invaluable in reaching some resident groups who are less likely to engage with council broadcast communications and will continue to play a vital role as the Covid-19 vaccine rollout gathers pace.
- 3.15 We have also taken steps to start communicating how the council will help to 'Rebuild a fairer Islington' once the crisis has passed, with a double page spread outlining plans across 4 priority areas – homes, jobs, community safety and the environment in the Islington Life Winter edition.
- 3.16 When Government guidance has changed, staff all staff immediately heard from the Chief Executive via an all-staff communication and have ensured that frontline staff who many not be routinely reading emails have access to up-to-date information through the website and through emergency staff information recorded phone line.
- 3.17 HR have continued to provide guidance, reassurance and signposting so that staff know how to ask for help and support with their wellbeing through this challenging period.

### **We are Islington and Test and Trace support**

- 3.18 We Are Islington was launched on 21 March 2020 to support residents affected by the Covid Pandemic, bringing together a range of Council, voluntary and community services under a 'single umbrella' of support. The service assists people to access food, fuel and medication, as well as arranging someone to talk to if residents are feeling lonely or isolated, together with a wide range of other practical support. The service operates 9am to 5pm, 7 days a week including bank and public holidays and remained open throughout the Christmas and New Year period.
- 3.19 Since March, We Are Islington have assisted over 15,000 people – including helping almost 4000 to access food, 977 in financial difficulty, 907 with medication support, 321 with fuel support and over 1500 people with other welfare concerns. Demand for services continues, with sustained requests for assistance seen since the start of winter. Between 1 and 14 January, We Are Islington received 646 calls and emails, with requests for support with food, fuel, financial assistance and wellbeing remaining the four main areas of activity.

- 3.20 During the COVID-19 response, community food projects have formed a crucial part of the food support available in Islington. This has included the provision of hot meals, food parcels and surplus food projects. This approach has served to highlight many residents who remain in food poverty and as such, this service will continue as a key part of the current We Are Islington offer. Our aim is to ensure there is adequate crisis support so that no one goes hungry, whilst also working in partnership with colleagues across the Council and the community, including Resident Support and Income Maximisation, to help tackle the root causes of food insecurity.
- 3.21 The service is also responsible for supporting shielded and clinically extremely vulnerable residents and in March alone, made proactive contact with over 7700 people and almost 1000 other vulnerable residents identified as needing support. This included assisting with shopping, medication and working with local mutual aid and community groups and volunteers to offer wrap around support to ensure residents' basic needs were met. This proactive support has continued to be offered throughout the subsequent national and local lockdowns.
- 3.22 We Are Islington also worked with Children's Services to provide parents with food vouchers and other necessary assistance during the October school holidays. This service was maintained during the Christmas holidays and since the latest lockdown was announced, we have used funding from the Winter Grant to ensure parents and children continue to receive appropriate support.
- 3.23 In addition, in November 2020 We Are Islington launched a local test and trace service to support the national NHS Covid Test and Trace service, contacting residents they have been unable to speak to. The local test and trace service makes contact with residents by phone and where this was not possible, by visits to their homes. So far the Test and Trace service has dealt with just over 1000 Covid positive contact cases, with a significant increase in demand seen during December and into January. To support the test and trace programme, We Are Islington also supports residents to make applications for the Covid 19 Support Payment. This is available to residents that are on low incomes, have been told to self-isolate by NHS Test and Trace and are unable to work from home.
- 3.24 In December 2020, We Are Islington worked with NHS, Adult Social Care and Housing colleagues to design and implement a new Integrated Hospital Discharge Pathway as part of our We Are Islington offer. The new pathway was devised to help ensure vulnerable residents discharged from hospital over the Christmas and New Year holidays returned to a safe warm home, had enough to eat and drink and all their basic needs met - including organising support to prevent social isolation.
- 3.25 Whilst the service was only originally due to be in operation over the Christmas period, due to its success relieving pressure on Adult Social Care and NHS colleagues and supporting some of our most vulnerable residents, each of whom was provided with food hampers, shopping vouchers and other practical support, the service will now continue as a permanent We Are Islington offer. Discussions are also underway to develop a similar offer to further support the NHS by preventing unnecessary hospital admissions and facilitating the recovery of residents in the community.

## **Workforce data and support**

- 3.26 The impact of Covid-19 on the council workforce continues to be monitored with managers reporting to HR and Public Health analysts on the numbers of staff working from home, working on site or unable to do so due to general sickness or sickness related to Covid-19. Staffing data (Sit-rep) continues to report to GOLD 3-times a week. The percentage of staff reported as unable to work reached a high point of 23% on 22 December 2020 remaining near the peak at 21% in early January 2021. By comparison, on 08 December, 9.5% staff were unable to work. The percent of staff reported as working on site has remained approximately 30-40% throughout this period. This reduced to 28.5% on 22 December 2020 as more staff took annual leave for the Christmas break. The percent of staff working from home falls between 48% and 58%.
- 3.27 On average, 80.5% of critical services reported performing as normal. Non-critical services were more impacted than critical services. An average of 66% of services reporting performing as normal and 28.5% of services reporting performing at a reduced service during this period. According to the figures reported on 15 January 2021, approx. 16.5% members of staff have been tested for COVID-19.
- 3.28 All managers are responsible for ensuring they are having Health and Wellbeing conversations with their staff to ensure that they check in on how staff are coping with the further lockdown, whether they have been working permanently on the front line, potentially at fast pace or in traumatic circumstances or sustained homeworking, often where the home environment is not conducive to remote working.
- 3.29 Individual Risk Assessments have been carried out for staff needing to work on-site with referrals to our occupational health provider, Medigold for specialist advice especially for those presenting as clinically vulnerable or extremely vulnerable.
- 3.30 In December, the homeworking equipment portal went live, allowing staff to purchase desks and chairs to support with sustained homeworking.

## **Public Health Impacts**

- 3.31 Islington came out of the second lockdown in early December with an average of around 250 confirmed cases of COVID19 per week, and a positivity rate on testing of 5-6%. This was in stark contrast to the summer after Islington came out of the first lockdown, when on average there were around 10-15 confirmed cases per week and a typical positivity rate on testing of around 0.5% in the borough.
- 3.32 Confirmed infections began to increase again immediately the second lockdown ended, which we now know was in part linked to a new, more infectious variant of COVID19 which was becoming dominant across London at that time. Confirmed infections rose rapidly through December, reaching a range of c. 1800 – 2000 per week and a positivity rate on testing of 25% or higher over the Christmas week and the first week of the New Year. The true underlying rate of infection would have been much higher: at least a third of infections are non-symptomatic, and so unlikely to be identified by symptomatic testing,

for example; and surveys of underlying infection rates at that time were finding 1 in 30 Londoners had the virus.

- 3.33 **At the time of writing of this report, the cumulative effects of moving into Tier 4 restrictions prior to Christmas, the unknown impact of instruction not to mix households over Christmas, and then the move to the third national lockdown at the start of January, have resulted in a significant decline in confirmed infections.**
- 3.34 During the second week of January, confirmed cases fell to just under 1,400 with the positivity rate declining to 18.5%. Compared to any time other than the Christmas/New Year period, these rates remain extremely high, but the most recent data does provide encouraging signs that measures have been able to begin to get this more infectious variant of COVID19 under control.
- 3.35 Unfortunately, experience from the first lockdown and other areas which have had high surges of cases, indicates that the peak pressure on hospitals follow roughly two to three weeks after the peak in the general communities and the risk of care home outbreaks peak around three to four weeks later.
- 3.36 To date, the number of deaths among residents during this current surge in infections has been lower than during the first wave last spring. The cumulative number of deaths since March had reached 182 reported by 10 January 2021, with 11 deaths reported in the most recent fortnight. Hospitals report that more patients have recovered and been able to return home during this wave, but with the very significant increase in admissions of seriously ill people with COVID19 at all local hospitals, the number of deaths will sadly inevitably increase.

### **Preventing and mitigating disproportionate impacts**

- 3.37 We continue to take action to prevent and mitigate the disproportionate impact of COVID 19 on Black and minority ethnic communities. The findings of a whole council review of actions were reported to an all members briefing on 24 November 2020. Monitoring data on outcomes and uptake of services by ethnicity has been at the core of our actions. Ethnicity data was not available for all deaths in wave 1 of the pandemic but we have subsequently implemented recording of ethnicity on death certificates.
- 3.38 We undertake live analysis of the uptake of PCR testing against positivity of tests by ethnicity. This has enabled us to target our engagement with all communities in a timely manner particularly those showing high positivity and low testing rates. The analysis of hard data was enhanced by invaluable community insights and focus groups shaping the response, engagement and messaging with our communities
- 3.39 Weekly key messages get prepared on hot topics for community members and faith leaders to create content and share information. These include videos, graphics on social media, imams' Zoom speeches at prayers and newsletters. A new toolkit and scripts were rolled out for community members to create and share their own video content in community languages to be shared on whatsapp and social media. Regular proactive communications with black and minority ethnic communities and faith communities is in place through VCS bulletins as part of the 'Local Outbreak Control - Communities Engagement Plan' with follow up calls.

- 3.40 Covid-19 Health Champions (CHCs) are trained and supported to help protect communities and keep residents safe by spreading the latest and most up to date guidance and encouraging people to implement the right measures. A total of 96 Covid-19 Health Champions have been recruited in Islington from a range of diverse backgrounds, including; Mutual aid groups and VCS organisations ( 23 CHCs); Black and Minority Ethnic Communities ( 10 CHCs ) and faith groups (10 CHCs). CHCs have been proactively sharing the communication and resources from our weekly updates with those in their communities via email , WhatsApp and verbally. They attend weekly drop-in sessions and so are able to feedback information about how different communities are responding to latest covid-19 guidance/ notify us of any issues. Champions have produced videos including in Bengali which have been shared via WhatsApp and Twitter.
- 3.41 A range of virtual training is now in place for frontline staff and volunteers to better support residents. These are actively targeted at black and minority ethnic voluntary sector organisations and faith leaders, including: Mental Health awareness; Bereavement support; Suicide prevention; and Making Every Contact Count/ Good Conversations in challenging times.
- 3.42 A Social Connectedness Network is now in place to improve access to the 65 organisations delivering social connections support and to reduce social isolation, with a focus on inequalities. A briefing of support services has also been developed and disseminated to partners. A resident-facing leaflet is also being disseminated, it has been translated into community languages.
- 3.43 Pre-existing strong relationships with the community have paid dividends – the VCS network of organisations and Faith Forum supported by Islington councilors who local knowledge and connections has been invaluable have stepped in and work with WAI and mutual aid groups to support communities.

## **4 Implications**

### **4.1 Financial Implications:**

Based on the latest (Month 8) budget monitoring forecast for 2020/21, the council is currently facing total COVID-19 related budget pressures of approximately £59 million (£18 million additional costs and £41 million income losses).

The council has £26m of COVID-19 general Government grant funding to set against these pressures and is currently assuming compensation of £15.7m from the Government's sales, fees and charges loss scheme and £8.8m from the tax guarantee scheme for Collection Fund losses.

This leaves a net COVID-19 related funding gap of approximately £8m in the current financial year. These forecasts were prepared at the end of month 8 and therefore do not reflect London being placed into Tiers 3 and later 4 of COVID-19 local restrictions, or the national lockdown which began on 5 January.

This includes a potential in-year General Fund budget shortfall of £49 million in 2020/21, £11 million Council tax and business rates income losses that would impact the 2021/22 budget and £12 million HRA budget pressures. Any shortfall not funded by central Government would weaken the Council's balance sheet and reserves, which would need to be replenished in future financial years.

Rather than a one-off event that the council's budget is recovering from, it is expected that COVID-19 will continue to have a significant, currently unquantifiable, impact on the council's medium-term budget over and above the amount covered by the Government's COVID-19 support package announced to date.

The COVID-19 support package provides no funding for business rates income losses in 2021/22 and only provides support for sales, fees and charges income losses up until June 2021. It is essential that the council has sufficient annual contingency budget and reserves to boost financial resilience and protect residents. This is reflected in the council's Draft 2021/22 Budget Proposals and Medium-Term Financial Strategy report.

#### **4.2 Legal Implications:**

The Council's response to Covid-19 is in accordance with its statutory functions, including Best Value under the Local Government Act 1999 and the General Power of Competence under the Localism Act 2011, and the modification of its duties and powers by the Coronavirus Act 2020.

#### **4.3 Environmental Implications and contribution to achieving a net zero carbon Islington by 2030:**

In April the council began feasibility and planning for a transport response to the Covid-19 global pandemic. This is because transport for London modelling predicts that, without action, traffic volumes may get much worse than before the crisis due public transport operating at 20% capacity. That's why the Council decided to take early to create more space for local people to walk, cycle, use buggies and wheelchairs as safe alternatives to using public transport since over 70% of households in Islington do not own a car.

As more people may choose to drive as lockdown restrictions are eased, traffic in residential areas is predicted to increase, making streets more dangerous and unhealthy for the people who live on them. Local people have told us that they want their streets to be friendlier places that are easier for everyone to use; to enjoy being outside in clean air; to make it safer for walking, cycling, using buggies and wheelchairs; to relax or play.

Multiple new work streams were identified early on to create space for people to social distance, safe alternatives to public transport and to prevent a car based recovery. In the weeks proceeding the first lockdown social distancing measures were installed to widen footways at key locations across the borough focusing on local high streets to support local businesses by creating space for customers to queue safely and also outside schools with narrow footways.

Further to these initial actions on the 18 of June 2020 the Executive approved the implementation of the People friendly streets programme which includes the acceleration of the School Streets programme across the borough, the delivery of Low Traffic Neighbourhoods and Lorry control on borough roads.

Islington has delivered on these commitments and now has the highest proportion of school streets at primary schools in the UK with 22 delivered between March 2020 and January 2021 bringing the total to 35 School Streets. Islington has also delivered the most substantial low traffic neighbourhoods in the UK since May 2020 with 7 delivered by January 2021 and many more planned. Islington has also delivered major 'pop-up' cycleways including the Pentonville Road to Holloway Road extension of segregated cycleway 38 and delivered York Way in Partnership with Camden.

Through the delivery of People friendly streets the council has clearly taken the opportunity to build back better by rebalancing many of Islington's streets in favour of more sustainable transport modes. Due to the urgency associated with the public health emergency, these measures have been introduced as genuine trials, whereby consultation has followed implementation. Speedy delivery was required to respond to Covid, but was also driven by guidance from Government and Transport for London. This unconventional approach of project delivery has not been without its problems. Going forward, the process of introducing the PFS programme is being reviewed in the context of continued need to address the ongoing public health emergency and addressing concerns about lack of prior community and business engagement.

#### 4.4 **Resident Impact Assessment:**

The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

Our impact assessment carried out last year highlighted some of these impacts, which were broadly in line with national research and findings about the impact of the pandemic. A brief summary is provided in the table below. In addition, further engagement was carried out by the Public Health Team to understand how residents have been impacted. The findings of our own assessment and engagement have informed our approach and the support provided set out in the various sections of this report. As the pandemic continues the impacts may change and new issues may come to light. We will continue to engage residents to ensure we understand the issues they face and use this to inform our approach.

<b>Black and minority ethnic communities</b>	<ul style="list-style-type: none"> <li>• Higher diagnosis and fatality rates, underlying health conditions, risk of exposure to COVID</li> <li>• Economic impacts – higher rates of poverty, more likely to be in low paid work, self-employment. shut-down sectors</li> <li>• Increased risks of hate crime, DV, use of emergency powers, NRPF</li> <li>• <i>NB: impacts vary for different communities</i></li> </ul>
<b>Older people</b>	<ul style="list-style-type: none"> <li>• Highest risk of death from COVID-19</li> <li>• Wider health risks e.g. cancelled operations, social isolation</li> <li>• Older workers may struggle to get back into work</li> </ul>
<b>Children &amp; Young people</b>	<ul style="list-style-type: none"> <li>• Risk of increased child poverty, food poverty</li> <li>• Vulnerable / SEND pupils not attending schools</li> <li>• Impact on education and employment outcomes</li> <li>• Use of predicted grades in absence of exams – will particularly impact some BAME pupils</li> <li>• Impacts for Islington pupils: impacts on lower performing groups, transitioning year groups, unconscious bias when predicting grades, access to / engagement in online learning</li> </ul>
<b>Men</b>	<ul style="list-style-type: none"> <li>• Higher rates of deaths from COVID compared to women</li> <li>• Men from some BAME communities are more likely to be impacted by shut-down and in poorly paid jobs</li> </ul>
<b>Women</b>	<ul style="list-style-type: none"> <li>• Increased risk of DV as a result of lockdown</li> <li>• Economic / employment impacts – more likely to have caring/childcare responsibilities during lockdown, more likely to be working in a sector that is now shut-down</li> <li>• Lone parents – increased risk of child poverty</li> </ul>
<b>Disabled</b>	<ul style="list-style-type: none"> <li>• Increased risk of COVID</li> <li>• Impacts on mental health and wellbeing</li> <li>• Impacts on employment (disabled people already have lower rates of employment),</li> </ul>

	<ul style="list-style-type: none"> <li>• Impacts of emergency measures on those with MH, and of virtual court trials on people with LD</li> <li>• Face masks communication difficult for Deaf People</li> </ul>
<b>Faith</b>	<ul style="list-style-type: none"> <li>• Access to culturally appropriate food</li> <li>• Information in own language</li> <li>• Issues around bereavement and burials</li> <li>• Unable to come together to pray, worship and provide support and pastoral care</li> </ul>
<b>LGBTQ+</b>	<ul style="list-style-type: none"> <li>• Increased delays for gender reassignment surgery</li> <li>• Increased risk of homelessness, mental health issues</li> <li>• Social isolation</li> </ul>
<b>Other key factors</b>	<ul style="list-style-type: none"> <li>• Deprivation</li> <li>• Occupation</li> <li>• Overcrowding</li> <li>• Living in urban areas</li> <li>• Underlying health issues / co-morbidities</li> </ul>

## 5 Conclusion

5.1 Over the past 11 months, the Council has provided a robust response to the on-going challenges of the Covid-19 pandemic. We have continued to provide good quality core services to residents and will continue to support our workforce through these most challenging of times.

With the increase of testing sites and the roll-out of the vaccination optimism is fast emerging. The council will resume its program of works to rebuild back a Fairer Islington with a focus on addressing the structural inequalities that have come to light throughout this crisis and in line with the budget constraints set out in this report.

Background papers: None

Appendices: None

Final report clearance:

**Signed by:**

15 January 2021

Linzi Roberts-Egan, Chief Executive

Date

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