



Northumberland County Council

HEALTH AND WELLBEING BOARD

9^T H JULY 2020

Draft Northumberland COVID 19 Outbreak Prevention and Control Plan

Report of: Cath McEvoy-Carr Executive Director of Adult Social Care and Children's Services

Cabinet Member: Cllr Veronica Jones - Adult Wellbeing and Health

Purpose of report

1. To present the Council's draft COVID 19 Outbreak Prevention and Control Plan and the role of the Health and Wellbeing Board and the County Emergency Committee in decision making, assurance and oversight.

Recommendations

2. The Health and Wellbeing Board is invited to:

- Comment on the draft local COVID 19 Outbreak Prevention and Control Plan;
- Agree its role in being the body responsible for the delivery of the plan as reflected in the proposed delegation;
- Delegate to the Director of Public Health, Chief Executive of the Council and the Chair of the Health and Wellbeing Board authority to amend the plan in the light of emerging evidence, changing guidance and operational pressures.

Link to Corporate Plan

3. This report is linked to the 'Living' priority included in the NCC Corporate Plan 2018-2021.

Key issues

4. Every local authority in England is required to have a local COVID 19 Outbreak

Control Plan published in the public domain by 30th June 2020. There is no direction that this needs to be the final plan.

5. The Northumberland COVID 19 Outbreak Prevention and Control Plan outlines how local knowledge, experience and expertise will be used to prevent outbreaks and manage the virus over time as part of the national Test and Trace programme. There is to be a clear focus on prevention. Guidance from DHSC outlines seven themes which are expected to form the basis of any plan and the Northumberland plan expands those themes to provide more detail, outlining what we already have in place and where some of the gaps are. The plan will need to be an iterative document to accommodate emerging evidence, thinking, political decision making and changing place based systems and processes.

6. There are three Boards that are required to provide governance for the plan:

- A COVID 19 Control Board which is responsible for authorising and delivering the plan. This is being delegated to the Health and Wellbeing board through an amendment to the ToRs;
- A COVID 19 Health Protection Board to oversee the development and implementation of outbreak prevention and management plans. This is a new board which will be chaired by the Director of Public Health;
- A member led Communications and Engagement Board which will be a subgroup of the H&WB to provide public facing communications and engagement and the development of a robust communications and engagement strategy.

7. The whole plan will be underpinned by the development of a surveillance dashboard using public health, wider council and external stakeholder data and intelligence. Legal advice and the support of the community hub and Northumberland Communities Together will also be key enablers.

8. The Government has committed £300M for local authorities in England to develop and implement COVID 19 control plans. Northumberland's allocation is £1.528M.

Background

NHS Test and Trace

9. NHS Test and Trace brings together four tools to control the virus:

- Test. Increasing the availability and speed of testing;
- Trace. The introduction of the NHS Test and Trace service to identify any close recent contacts of positive cases and alert those most at risk of having the virus who need to self-isolate;
- Contain. A national Joint Biosecurity Centre that will work with local authorities and public health teams in PHE, including local Directors of Public Health, to identify localised outbreaks and support effective local responses, including plans to quickly deploy testing facilities to particular locations;

- Enable. Government learning more about the virus, as the science develops, to explore the further safe easing of infection control measures.

10. The NHS Test and Trace service has been in place since 28th May. There are a number of components to this:

- Individuals who are symptomatic need to self isolate (along with everyone else in their household); get themselves tested; and if positive, share details of close, recent contacts and places visited, either online via a secure website or on the phone with one of the NHS contract tracers;
- Individuals who test positive through other mechanism e.g. whole care homes testing, who may not be symptomatic self isolate and follow the same process as above;
- Contacts identified through the process above respond to text, email or phone call and comply with advice; self isolate for 14 days; get themselves tested if they become infected.

NHS Test and Trace service is therefore one strand of an overall approach for the management of COVID 19 outbreaks.

11. The lockdown has had the effect of suppressing transmission of the virus but at considerable cost to the economy and as a result, government focus has shifted to mitigating the impact of this. However, the lifting of restrictions needs to be done in a way which can continue to suppress transmission. NHS Test and Trace is a scaled up, industrial version of the contact tracing processes that have been in place since 2013 and which have required a close working relationship between PHE and LAs to manage any outbreak or incident and ensure that actions are taken to prevent the spread of infection. What is different now, is that the success of NHS Test and Trace in suppressing transmission is reliant on high levels of public engagement and compliance with the advice and guidance from both the government and PHE.

12. Whilst the core contact tracing elements will be largely managed by the national element of NHS Test and Trace and our regional PHE team, there is a significant role for the council, partners and the public to support the overall programme. Responses at a local level within Northumberland will be led by the Director of Public Health.

13. The Council needs to plan for the management of issues escalated by PHE NE across directorates and partners/contractor organisations which will need a co-ordinated local multi agency response e.g. schools, care homes, prisons, high risk settings such as hostels and refuges. Local communications, both proactive and reactive to the public and partners and handling of media enquiries relating to local issues will also be critical. These will be addressed as part of the Council's COVID 19 outbreak control plan.

COVID 19 Control Plans

14. It is expected that LA outbreak control plans will centre on 7 themes:

- 1 **Care homes and schools**
Planning for local outbreaks in care homes and schools (e.g. defining monitoring arrangements, potential scenarios and planning the required response)
- 2 **High risk places, locations and communities**
Identifying and planning how to manage high risk places, locations and communities of interest (e.g. defining preventative measures and outbreak management strategies)
- 3 **Local testing capacity**
Identifying methods for local testing to ensure a swift response that is accessible to the entire population (e.g. defining how to prioritise and manage deployment, examples may include NHS, pop-up etc).
- 4 **Contact tracing in complex settings**
Assessing local and regional contact tracing capability in complex settings (e.g. identifying specific local complex communities, developing assumptions to estimate demand and options to scale capacity)
- 5 **Data integration**
Integrating national and local data and scenario planning through the Joint Biosecurity Centre
- 6 **Vulnerable people**
Supporting vulnerable local people to get help to self-isolate (e.g. facilitating NHS and local support, identifying relevant community groups etc) and ensuring services meet the needs of diverse communities
- 7 **Local Boards**
Establishing governance structures led by existing Covid-19 Health Protection Boards in conjunction with local NHS and supported by existing Gold command forums and a **new member-led Board to communicate with the general public**

15. There are four principles for the design and operation of local outbreak plans and arrangements, including local plans for contact tracing. The prevention and management of the transmission of COVID-19 should:

- Be rooted in public health systems and leadership;
- Adopt a whole system approach;
- Be delivered through an efficient and locally effective and responsive system including being informed by timely access to data and intelligence;
- Be sufficiently resourced.

16. Agencies are required to adopt a proactive approach to sharing information by default, in line with the Instructions of the Secretary of State, the Statement of the Information Commissioner on COVID-19 and the Civil Contingencies Act.

The Northumberland COVID 19 Outbreak Prevention and Control Plan

17. The Council's control plan is being developed to address the 7 themes. Wrap around teams are being developed or are already in place for priority areas which include care homes/residential settings, educational settings, other complex settings such as hostels and refuges, complex individuals and communities such as the homeless and workplaces and businesses. Each wrap-around team will contribute to the development of a surveillance dashboard, the aim of which is to exploit the expertise we already have in

pulling together complex data sets using business intelligence software to monitor and rapidly identify any increases in the number of cases. The plan will also need to include a focus on caravan parks and caravan dwellers. Each team will also develop detailed prevention and response plans, criteria for escalation and triggers for local control measures. The focus will be on prevention rather than outbreak management.

18. The current relaxation of lockdown is a largely civic agreement between the Government and the population and requires all individuals to comply with the rules. Local communication to create a highly engaged and informed population, a culture of compliance and peer pressure for those who do not comply will be an important consideration and is a priority.

Governance

19. The terms of reference of the Health & Wellbeing Board do not currently have any provision to allow it to undertake consideration of the Control Plan. However, item 19 of the terms of reference allows the Health & Wellbeing Board to carry out 'any other functions that may be delegated by the Council under section 196(2) of the Health and Social Care Act 2012.

This section of the Act provides as follows:

“Other functions of Health and Wellbeing Boards

- (1) The functions of a local authority and its partner clinical commissioning groups under sections 116 and 116A of the Local Government and Public Involvement in Health Act 2007 (“the 2007 Act”) are to be exercised by the Health and Wellbeing Board established by the local authority.
- (2) A local authority may arrange for a Health and Wellbeing Board established by it to exercise any functions that are exercisable by the authority.
- (3) A Health and Wellbeing Board may give the local authority that established it its opinion on whether the authority is discharging its duty under section 116B of the 2007 Act.
- (4) The power conferred by subsection (2) does not apply to the functions of the authority by virtue of section 244 of the National Health Service Act 2006.”

Any change to the terms of reference of the Health & Wellbeing Board must normally first be agreed by Council, however, as the next meeting of Council is scheduled to take place in early September, urgent approval of the amendment to the terms of reference has been sought and agreed by the Chief Executive using her residual power within the Council’s Constitution. The terms of reference of the Health & Wellbeing Board will now be amended to include the following:-

- To provide oversight and responsibility for the delivery of Northumberland County Council’s COVID 19 Outbreak Prevention and Control Plan.

20. A new COVID 19 Health Protection Board (incident management team) is being established, chaired by the DPH, to collaborate across the Council and the wider system to bring together our local surveillance systems; provide oversight of outbreak and incident management; provide internal governance on the development and implementation of system wide prevention plans; and facilitate data flows across the system. The Health and Wellbeing Board (H&WB) will take on the role of a COVID 19 Control Board, to which the Health Protection Board will be accountable. The H&WB will maintain oversight of the delivery and management of the plan and lead on communication and engagement with the public through a communication and engagement sub group to be chaired by the portfolio holder for adult wellbeing and health. Urgent decisions on control measures which are outside the scope of the Health Protection Board will be taken by the County Emergency Committee via the Council's Gold Command structure.

Summary

21. Containing transmission during the relaxation of lockdown requires robust surveillance processes, rapid testing, identification of cases and contact tracing and the implementation of a variety of control measures to prevent the spread of infection. It also requires a clear understanding amongst our population on the rules and the consequences of failing to comply with the current guidelines at a population level i.e. increased rates of transmission, deaths and potentially a return to lockdown. For those responsibilities which rest with the council, this will be drawn together in a COVID 19 outbreak prevention and control plan.

Appendix:

1. Draft Northumberland COVID 19 Outbreak Prevention and Control Plan

Implications

Policy	Strategic policy implications have been considered in relation to the Council receiving policies from the Central Government and developing policy locally
Finance and value for money	The Council has robust records relating financial expenditure for COVID 19 related activities and these are being reported in line with reporting structures locally, regionally and nationally. The Council has received additional funding for COVID-19, however the longer term financial implications for the Council are currently being considered.
Legal	Legal advice has been obtained from the Head of Legal Services/Monitoring Officer throughout the COVID-19 response.

Procurement	Procurement support has been provided by the Council's Shared Procurement Service including support for the sourcing and purchase of additional PPE.
Human Resources	The Council has operated within its existing policies and procedures as part of its COVID-19 response and has worked with trade union colleagues to develop new policies, procedures and protocols where appropriate.
Property	Property regulations have been adhered to throughout the emergency response with additional support provided for Facilities staff in relation to cleaning regimes as per any additional guidance received.
Equalities (Impact Assessment attached) Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	
Risk Assessment	Risk Assessments have been undertaken for a wide range of Council related activities and these are held centrally for reference purposes.
Crime & Disorder	The Council has maintained regular contact with Northumbria Police throughout the COVID-19 emergency response, paying particular attention to national policy including lockdown arrangements, travel and any anti-social behaviour/crime issues which have been managed locally.
Customer Consideration	Northumberland Communities Together and our Contact Centre/Customer Services colleagues have worked closely to ensure that we have responsive service available to our residents at all times, particularly those in need and who are vulnerable.
Carbon reduction	The Council has continued with its climate change work during the emergency response and this will be monitored.
Health and Wellbeing	This paper is relevant to the health and wellbeing of our residents and our staff and the Council's Director of Public Health has been involved in the Council's emergency response throughout. COVID 19 disproportionately affects those who already live in deprived circumstances and the plan will take all steps to ensure that health inequalities are not perpetuated.

Wards	All
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Background papers:

Report sign off.

	Full name of officer
Monitoring Officer/Legal	Liam Henry
Executive Director of Finance & S151 Officer	Chris Hand
Relevant Executive Director	Cath McEvoy-Carr
Chief Executive	Daljit Lally
Portfolio Holder(s)	Cllr Veronica Jones

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