

Havering Outbreak Control Plan

Version 1

June 2020

Document Control

Version Number	Change made	Date
1.	Plan published	30 June 2020

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Introduction

This plan sets out the approach to controlling coronavirus outbreaks in Havering. All top tier authorities are required to have such a plan by 30 June 2020.

Our approach is consistent with current national guidance, relevant legislation and learning from the national good practice network. It complements the plans of key partners including Public Health England and the NHS.

Our plan will be subject to regular review and revision to ensure it continues to reflect best practice, our experience of managing local outbreaks and learning from authorities across the country.

Aim

To minimise further harm to residents caused by coronavirus including the direct harm to health caused by COVID-19 and the damaging effects on the local economy and wider wellbeing of residents if a significant degree of 'lockdown' is required to halt a further wave of infection.

Objectives

We will achieve this aim by:-

- Maximising public support for social distancing and test, trace and isolate arrangements for as long as required
- Ensuring that the borough is 'COVID secure'
- Mobilising a timely, effective response to bring local outbreaks to a speedy conclusion should they occur
- Reassuring residents that outbreaks are being effectively prevented and controlled.

Background.

On Thursday 28 May 2020, the UK government launched NHS Test and Trace¹, a national at scale COVID-19 testing and contact tracing programme.

Local outbreak control plans set out how the Council will complement NHS Test and Trace by:

- working with PHE to resolve complex local outbreaks, including outbreaks that require an additional on the ground response,
- providing support to residents who otherwise would be unlikely or unable to safely comply with instructions to isolate.

¹ <https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>

Directors of Public Health are responsible for developing Local Outbreak Control Plans centred around 7 themes:

- Planning for local outbreaks in care homes and schools
- Identifying and planning how to manage other high-risk settings
- Ensuring readiness to deploy mobile testing units to high risk locations
- Assessing local and regional contact tracing and infection control capability in complex settings and the need for mutual aid
- Integrating national and local data and scenario planning
- Supporting vulnerable local people to get help to self-isolate and ensuring services meet the needs of diverse communities
- Establishing governance structures

A Best Practice Network (BPN) comprising 11 local authorities or clusters of local authorities across England was established to work with PHE, the Department of Health and Social Care (DHSC) and professional bodies to develop and test plans and share lessons.

Responding to Outbreaks

Throughout the pandemic, Havering's Public Health and Public Protection teams have worked with other Council teams, local NHS agencies and health protection colleagues at the PHE London Coronavirus Response Cell (LCRC) to support settings across the borough, notably care homes, to reduce the likelihood of outbreaks and bring them under control should they arise. This has been done by, for example, providing advice and training regarding infection prevention and control, facilitating access to PPE and more recently testing of staff and residents.

This work built on existing arrangements to control more commonplace communicable disease threats e.g. outbreaks of seasonal flu and norovirus; legionella and food poisoning. These arrangements require strengthening to reflect the scale, complexity and duration of the coronavirus pandemic; and to integrate with the NHS Test and Trace service that provides a powerful additional tool with which to check the spread of infection.

Going forward, the majority of COVID-19 outbreaks will be identified via the NHS Test and Trace Programme.

The respective roles of the LCRC and local authorities in different scenarios are set out below. In most instances, the LCRC will lead the response with local authority support but in some situations, notably where a cluster of cases is identified in the community or outside a specific setting, these roles are reversed and the Council will establish the Incident Management Team.

Table 1. Role and responsibilities for the PHE London Coronavirus Response Cell (LCRC) and the Council

	Setting						
	Care Settings	School and Early Years	Workplace	Health Settings	Prison/ custodial institutions	Homeless and/or hostel	Community Cluster
London Coronavirus Response Centre	<ul style="list-style-type: none"> - Receive notification from Tier 2 - Gather information and undertake a risk assessment with the setting - Provide advice and manage cases and contacts, testing and infection control - Provide information materials to the setting - Recommend ongoing control measures - Convene IMT if required - Provide information to DsPH and advice/recommendations for ongoing support - Communicate and coordinate with other LAs, regions, developed administrations and internationally as required. 						<ul style="list-style-type: none"> - Receive notification from Tier 2 - Support Local Authority in their risk assessment of and response to an identified community cluster
Local authority response	<ul style="list-style-type: none"> - Prevention work and respond to enquiries - Support wider aspects of the response, such as support for any vulnerable contacts who are required to self-isolate, as per London's 6 Point Plan and national 7 themes of outbreak management plans - Follow-up and support the setting to continue to operate whilst managing the outbreak, including, if required, support with infection prevention and control measures and PPE access - Participate in IMT if convened by LCRC - Organise testing and Mobile Testing Unit deployment as required - Local communications e.g. briefings for Cllrs, local press inquiries, comms with the public - Liaise with CCG, GP's and other healthcare providers to provide ongoing healthcare support to setting 						<ul style="list-style-type: none"> - Receive notification from Tier 2 - Convene IMT - Provide support to community which may include translated materials, support to self-isolate, advice and enforcement - Liaise with the local CCG, GP's and other healthcare providers - Local communications (e.g. Cllr briefing, local press inquiries, comms with public)

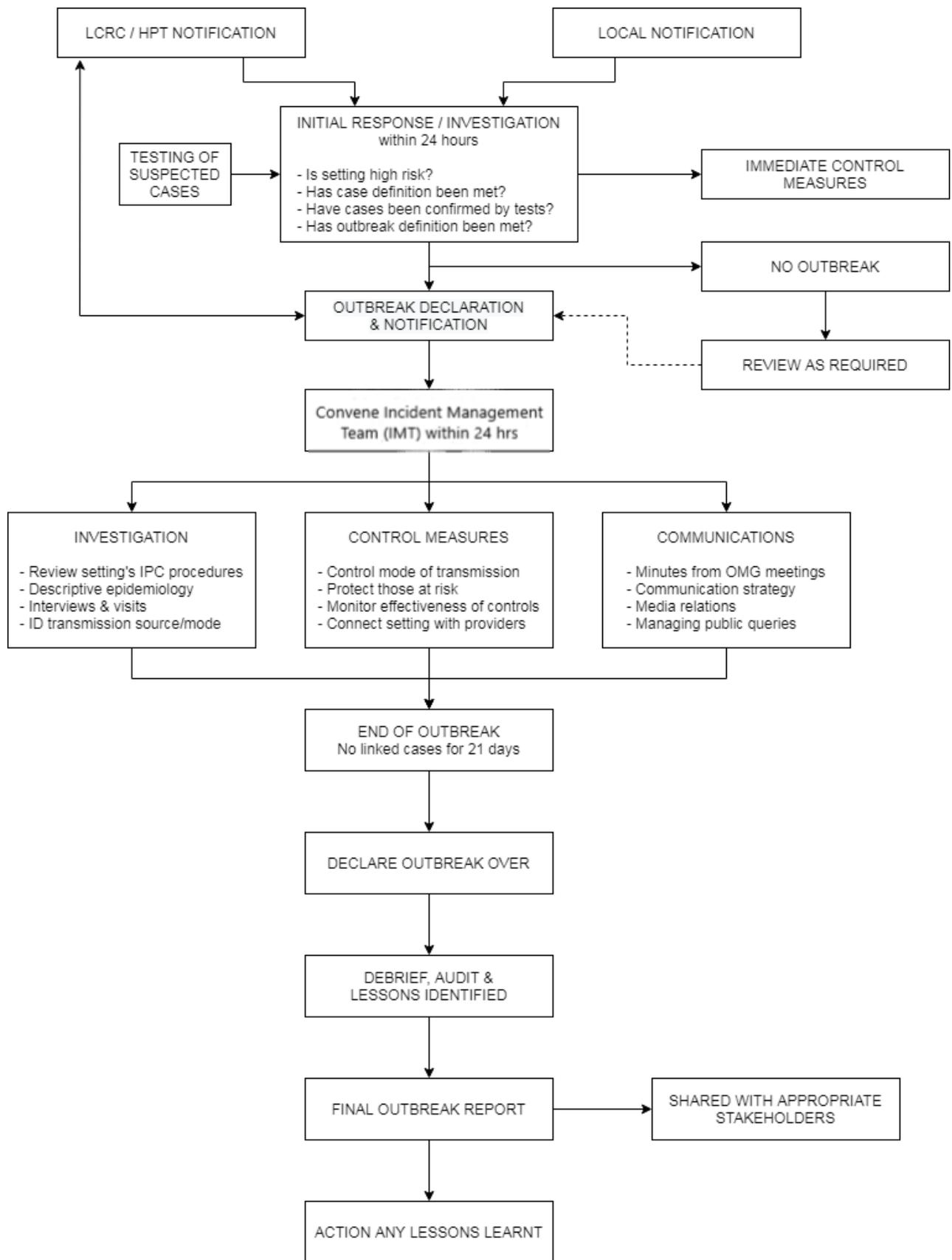
Irrespective of setting, the response will be guided by Standard Operating Procedures (SOPs) that set out the functions required and the organisations responsible.

A range of SOPs are being developed for use London wide, led by the London Association of Directors of Public Health and the LCRC. These will ensure alignment of the local, regional and national response to outbreak planning. We will localise these, identifying relevant networks, resources and lead officers. Development of local SOPs and associated scenario planning affords an opportunity to gain a shared understanding of the National Test and Trace system; the process for preventing and managing an incident in a particular setting, the required communications and the roles and responsibilities of those involved in managing an incident.

The Director of Public Health (DPH) is the single point of contact (SPOC) for notifications from the LCRC regarding outbreaks in the borough and will decide whether to establish an Incident Management Team (IMT) to agree and coordinate the activities of key stakeholders involved in the management and control of an individual outbreak situation.

The management of the outbreak itself will conform with PHE's Communicable Disease Outbreak Management Operational Guidance (Figure 1).

Figure 1: Outbreak management process



Governance.

Incident Management Teams will report to the Outbreak Control Bronze (OCB), chaired by the DPH. The OCB functions as the Council's COVID-19 Health Protection Board bringing together relevant professional expertise (LCRC, Environmental Health Officers) and decision makers from across the Council and NHS partners. The OCB is responsible for the ongoing development and delivery of the Outbreak Control Plan.

The OCB has reporting lines to:-

- Silver enabling the rapid engagement and mobilisation of the Council as a whole and other statutory partners,
- the Health and Wellbeing Board, chaired by the Lead member for Health and Wellbeing, leading the engagement of the public on behalf of wider health and social care partnership, and
- Cabinet.

The chart following summarises the governance of the Outbreak Control Plan.

It should be noted that the Council's Gold/ Silver / Bronze command structure will remain in place until and unless the threat posed by coronavirus can be managed as business as usual.

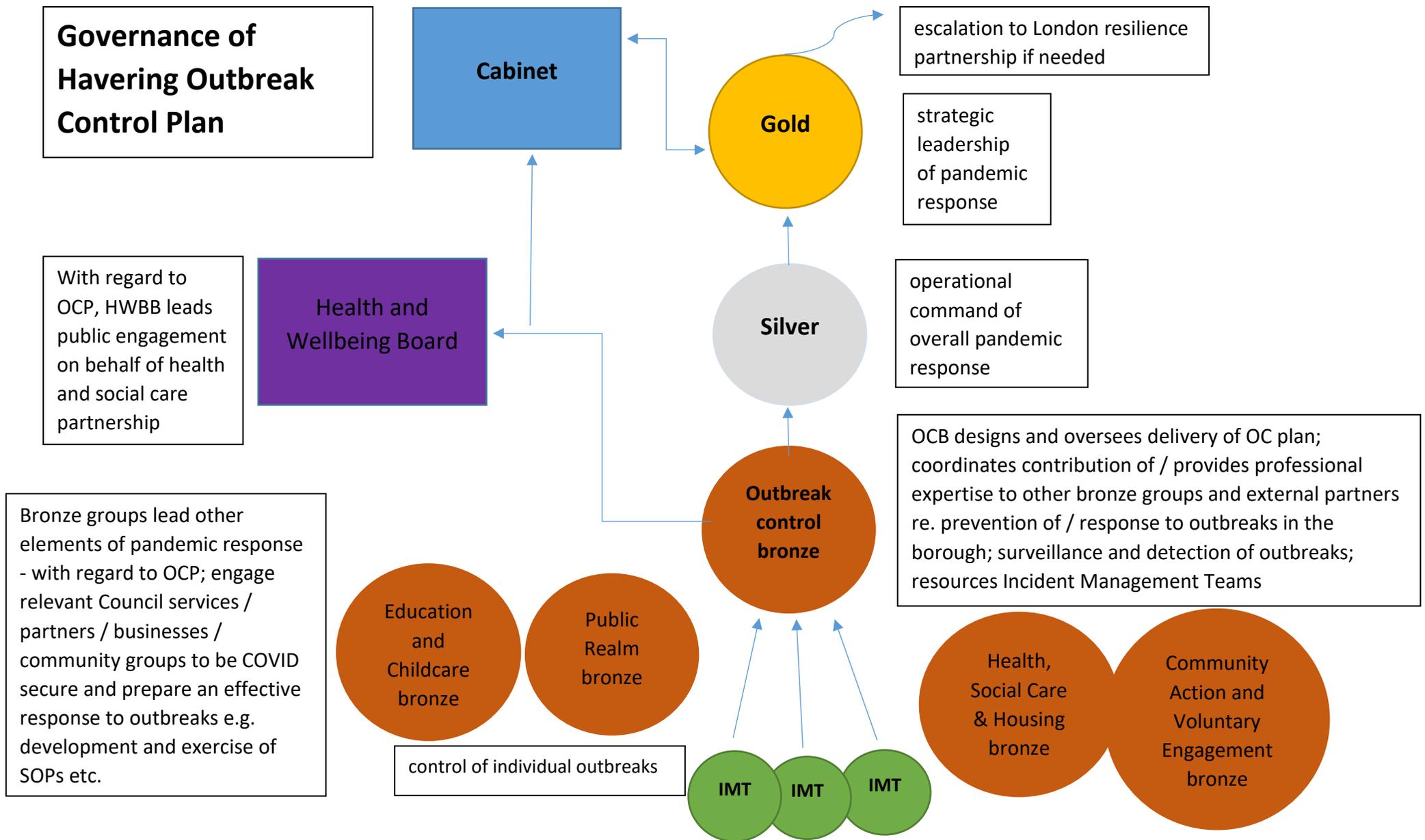
Escalation

The Chair of the IMT will escalate any evolving/complex/high risk situations that require ongoing/intensive input due to scale, vulnerable residents being at risk, media interest or a high profile location to the OCB or direct to Silver if time dictates (subject to the agreement of the DPH).

At the same time, the DPH will advise the Leader of the Council and the Lead Member for Health and Wellbeing (Chair of the Health and Wellbeing Board).

The Health and Wellbeing Board and Borough Resilience Forum will be updated regularly.

The closure of premises will take place only if absolutely necessary, and ideally voluntarily. An Enforcement Policy will be published that sets out our approach and the legal powers available to the Council.



Further development of the outbreak control plan

The threat to the health of local residents posed by the coronavirus is on a scale never before experienced. Unsurprisingly there is a need to strengthen the capability and capacity of the borough as whole.

The action plan, which is summarised in Table 2 below, strikes a balance between mounting an effective response to outbreaks and putting in place a comprehensive prevention programme to minimise the likelihood of outbreaks occurring in the first instance.

The government pledged a one off sum of £300 million to assist local authorities to develop and implement local outbreak control plans. These monies have now been allocated in proportion to the Council's share of national public health funding i.e. less than the national average and much less than many other London Boroughs. The total allocation to Havering Council is £1.02m. Proposals for the use of these monies to deliver the stated plan are outlined in Table 3.

Table 2. Summary of Key Actions by Theme

Theme	Actions	Status (June 2020)
1a Planning for local outbreaks in care homes	Working with care homes, further develop arrangements to prevent infection and respond to cases in care homes, including <ul style="list-style-type: none"> - Regular testing of staff and residents - Continuing support and advice about infection prevention and control - review of admission and discharge pathways 	<ul style="list-style-type: none"> • Awaiting change in national policy • Support in place, working with NHS re. long term solution • Options appraisals underway with other BHR boroughs and NHS partners
1b Planning for local outbreaks in schools.	Working with education providers (schools, early years, alternative education providers), including: <ul style="list-style-type: none"> - further develop arrangements to prevent infection and respond to incidents of single infection and/or outbreaks in educational settings - support schools to comply with latest guidance to enable safe return to school for all children by September 	<p>Standard Operating Procedure agreed and being implemented</p> <p>Awaiting further guidance from DfE</p>
2. Identifying and planning how to manage other high-risk settings	2.1 Develop systematic approach to risk assessment of settings across the borough	Planning underway

	<p>2.2 Proactively engage with settings and communities across borough to be COVID secure and prepared for outbreaks.</p> <p>2.3 Source / develop training / self-help tools to increase community capacity</p> <p>2.4 Monitor compliance with COVID secure guidance across all settings (including non-regulated settings) – focusing enforcement effort on high priority settings</p> <p>2.5 Ensure Council buildings and services are COVID secure, including staff trained in IPC, and PPE supplied where required</p> <p>2.6 Ensure business continuity plans for all Council services include response to individual cases / outbreaks including process for rapid closure / reopening.</p>	<p>Engagement with relevant businesses ahead of each step in lockdown relaxation. Thereafter, move to ongoing programme informed by risk assessment</p> <p>Planning underway, building on training offered to care home staff</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing</p>
3. Ensuring readiness to deploy mobile testing units to high risk locations	<p>3.1 Ensure Mobile Testing Unit can be based in borough whenever available</p> <p>3.2 Ensure mechanism to request deployment of Mobile Testing Unit in event of outbreak is clear</p>	<p>Complete</p> <p>Mechanism in place</p>
4. Assessing local and regional contact tracing and infection control capability in complex settings and the need for mutual aid.	<p>4.1 Expand capacity to prevent / respond to outbreaks for duration of coronavirus pandemic</p> <p>4.2 Test mutual aid arrangements</p>	<p>Outbreak Control Plan and funding agreed, recruitment beginning. In the meantime, outbreak control will continue to take precedence over business as usual activity.</p> <p>Further exercises to test plans across LBH, BHR, NEL, London under development</p>
5. Integrating national and local data and scenario planning	<p>5.1 Continue to interrogate surveillance and other data to inform implementation of Outbreak Control Plan, including inequalities</p>	<p>Ongoing</p> <p>Improve insight as more detailed information is shared.</p> <p>And develop information to share with residents</p>

6. Supporting vulnerable local people to get help to self-isolate and ensuring services meet the needs of diverse communities.	6.1 Provide short-term support to vulnerable residents who need help to isolate. Use systems/relationships put in place earlier in pandemic e.g. distribution hub, support via Havering Volunteer Centre, short term housing offer, signposting to financial support, etc.	In place
7. Establishing governance structures	7.1 Establish Outbreak Control Bronze Group (as part of established Gold / Silver / Bronze structure) 7.2 Present Outbreak Control Plan to Health and Wellbeing Board 7.3 Plan adopted by Cabinet	Ongoing tbc tbc

Table 3: Provisional Spending plan

Activity	Detail	Estimated cost
Public Health / Public Protection / Infection Prevention Control Capacity	Increase capacity (x 8 posts at various grades - ? 7 in PP) to support businesses / community settings to be 'COVID –secure' and to control outbreaks should they occur. Ensure ongoing IPC support to care homes / increase capacity to deliver IPC in schools and other settings	£1074K*
Programme Management	Dedicated PMO to coordinate delivery of OCP across Council	£121K*
Communications and engagement	To support both borough wide and targeted comms	£75K
Training	Develop (online) training and self help aids re. IPC / COVID security for priority business / community settings	£35K
Information analyst	3 month contract to collate information regarding settings / businesses across borough to facilitate risk assessment	£15K
		£1320K

*Assumes all posts filled for full 24 months

Spend over 24 months spread over 3 financial years – 20/21, 21/22 and into 22/23. All posts will be fixed term contracts for a maximum of 24 months with 3 month notice period or via agency.

Value of outbreak control plan allocation is £1.02m.

The requirement for expenditure above the value of the OCP allocation will be agreed with Cabinet by December 2022 and charged against the existing ring fenced Public Health reserve (currently circa £1.0m tbc).