

Report to Hackney Health and Wellbeing Board

Date: 8 July 2020	
Subject:	Covid-19 response update
Report From:	Kate Dun-Campbell, Public Health Registrar
Summary:	Across City & Hackney we have developed our Local Outbreak Control Plan (see appendix). We are continuing work to support residents in accessing testing and engaging with contact training, working closely with colleagues in the VCS to train 'community champions' to support this.
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Introduction

As the country moves out of lockdown the importance of testing and contacting tracing to control the spread of coronavirus becomes more pressing. Across Hackney Council and the City of London Corporation work is ongoing to support these two important aspects of the COVID-19 response.

Underlying all of our actions is our local outbreak control plan which provides an overview of how we will set up appropriate structures and governance to manage local outbreaks across a variety of settings across our communities. This includes ensuring that residents engage with the process through building trust and ensuring clear messages are delivered in a user friendly way.

Local Outbreak Control Plan

The City & Hackney local outbreak control plan (see appendix) and accompanying action log have been drafted. The plan follows the themes set by national government in addressing 7 key areas for our ongoing management of COVID-19:

1. Planning for local outbreaks in care homes and schools.
2. Identifying and planning how to manage other high-risk places, locations and communities of interest.
3. Identifying methods for local testing to ensure a swift response that is accessible to the entire population.
4. Assessing local and regional contact tracing and infection control capability in complex settings and the need for mutual aid.
5. Integrating national and local data and scenario planning through the Joint Biosecurity Centre Playbook.
6. Supporting vulnerable local people to get help to self-isolate and ensuring services meet the needs of diverse communities.
7. Establishing governance structures led by existing the Covid-19 Health Protection Board and supported by existing Gold command forums and a new member-led Board to communicate with the general public.

The plan will be published on the 1st July, as required by the National Advisory Board on Contact Tracing . Standard operating procedures (SOPs) are very much a part of the local outbreak control plan, particularly in planning for local outbreaks in care homes, schools and other high risk places. These provide information, advice and guidance for local settings to prevent and respond to a case or outbreak of COVID-19, including contact details for a single point of contact (SPOC) within the Public Health Team. The local SOPs also interface with those from Public Health England London Coronavirus Response Cell (LCRC), to ensure a coordinated and joined up response. Local SOPs are based on national guidance and a joint agreement between the Local Authority and LCRC about roles and responsibilities for each. We have completed the first phase of SOPs, prioritising those for care homes, schools, primary care and workplaces. For the next phase we are focusing on community clusters, religious spaces and providing more workplace specific SOPs.

To develop these SOPs we are working closely with our colleagues in Hackney Learning Trust and across the council. The SOPs are based on the most up to date national guidance and will be amended and updated as required going forward, so that they are informative and easy to use.

We have set up a City & Hackney COVID-19 Health Protection Board (HPB), which meets weekly to develop and oversee the local outbreak control plan and to make any amendments to the plan, going forward, as the situation develops. The HPB reports to the council Gold group and also direct to the member-led COVID-19 Outbreak Control Board. The latter has been developed as an addition to the City and Hackney Integrated Commissioning Boards, through amendment of its terms of reference.

Testing

Bentley Road car park is our current location in Hackney for our Mobile Testing Unit. This is providing 3 days per week of access to testing and there are plans to increase this going forward. Work is ongoing to ensure that all residents have access to testing in a timely manner which is key to reducing transmission throughout the community. At the moment a test needs to be ordered either online or using a telephone to call 119. The Testing working group is planning to address some of these issues via our VCS engagement and digital divide work.

Care homes continue to be supported and can access testing via the national portal. In order to ensure that staff in various care settings are supported with swabbing of residents for coronavirus, we are securing extra support for this via the GP Confederation.

Contact Tracing

Local support for the NHS Test & Trace includes working closely with the community and voluntary sector, regarding recruiting and training community champions to work with local groups, to build trust in the process and provide accurate information. The VCS is also playing an important role in providing support for vulnerable people, e.g. HVCS are already providing support to vulnerable individuals who may be self isolating or shielding and they will continue to do so.

Good Practice Network

The Good Practice Network continues to provide a platform for sharing good practice. It has circulated action cards for a range of local outbreak situations. These cards are similar to our

standard operating procedures and are useful tools for ongoing SOP development. They have also produced an assurance framework to assist in development of the local outbreak control plan and will provide additional support if needed.

Financial Considerations

There are no direct financial implications from the report. The Government allocated £300m to Local Authorities to support track and trace services in local communities. The London Borough of Hackney received £3.1m and the City of London received £146k respectively. The funding will be utilised to deliver the City and Hackney Outbreak Control plan which has been outlined earlier in the report. The City & Hackney COVID-19 Health Protection Board (HPB) meets weekly and will monitor the expenditure incurred to ensure that it does not exceed the grant funding available. Monitoring of expenditure will occur through the monthly Overall Financial Position (OFP) report to provide regular updates on spend incurred in relation to this project.

Legal Considerations

There are no immediate legal implications arising from the report.

Appendix

[City & Hackney Local Outbreak Control Plan](#) (DRAFT 25.06.20)

Appendix:

City & Hackney Local Outbreak Control Plan - DRAFT

V 1.0 - 25th June 2020



London Borough of Hackney & City of London Corporation

**Covid-19 Local Outbreak Plan
DRAFT**

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Approved by:	Sandra Husbands		March 2020
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Document History

Version	Date	Amendment	Author
v4	27/03/20	Internal draft for comments	K. Bell
v5	19/0620	Converted to local outbreak control plan	S. Husbands
LOCP v1.0	24/06/20	Local outbreak control plan updated with actions in seven priority areas and appendices	K. Dun-Campbell
v1.1	28/06/20	Reviewed and edited for approval at: LBH HMT Gold CoL Covid-19 'Recovery From' Officer Group	S.Husbands

Exercise Record

Date	Type	Details
TBC	Workshop	Workshop around the plan in relation to scenarios took place as part of X meeting.

FOREWORD

The current Coronavirus pandemic has underscored the importance of working together, in partnership, to respond to outbreaks of infectious disease. In particular, it has highlighted the importance of having a clear plan and of everyone being aware of each others' roles and responsibilities in the event of a pandemic.

We already have the Pandemic Flu Plan. This COVID-19 Local Outbreak Control Plan has been written to ensure that we have clarity on operational roles and responsibilities for each responding service and organisation, in response to local clusters, outbreaks or cases in high risk areas, communities or settings within the City of London and/or Hackney. This local plan supports and is supported by national and regional plans and national guidance. In developing this plan we have drawn on learning from elsewhere, both nationally and internationally, as well as the specific work of the London-wide Chief Executives Group.

Signature (after sign off)

Dr Sandra Husbands
Director of Public Health City of London and London Borough of Hackney

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1. INTRODUCTION

Covid-19 was first identified in Wuhan, China, in December 2019 and has since spread to many countries. The City of London Corporation and the London Borough of Hackney have had plans in place for many years, to respond to an outbreak of an influenza-like-illness (ILI). Our local response to Covid-19 builds upon a comprehensive pandemic influenza plan that was developed to respond to outbreaks of various intensities and has been routinely revised and updated. In addition, since the beginning of the outbreak, a lot has been learned about the epidemiology, spread and containment of this infection and that learning has informed development of further guidance.

Local authorities (public health and environmental health teams) and Public Health England (PHE) have the primary responsibility for the delivery and management of public health actions to be taken in relation to outbreaks of communicable disease, through local Health Protection Partnerships (sometimes these are called Local Health Resilience Partnerships) and local memoranda of understanding. These arrangements are clarified in the 2013 guidance Health Protection in Local Government¹. Therefore, it is imperative that local authority develops a plan, in collaboration with Health Resilience Forum partners, to enable us to prepare effectively for local outbreaks of Covid-19 and work together to manage them.

1.1 AIM

Building on the pandemic influenza plan, the aim of this document is to set out City and Hackney's Local Outbreak Control Plan (LOCP) for working with national and regional partners, to combat Covid-19, including infection prevention and control measures; coordinating testing; supporting contact tracing and providing help to vulnerable people who need to self isolate. This document should be reviewed in conjunction with the relevant national guidance from the UK Government and expert agencies such as Public Health England (PHE).

1.2 OBJECTIVES

The main objectives of the Covid-19 plan are to:

- Coordinate activity to prevent and mitigate the spread of SARS-CoV-2, ensuring an integrated response
- Identify early and manage clusters and local outbreaks of Covid-19 effectively

¹ Protecting the health of the local population: the new health protection duty of local authorities under the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013

- Outline the governance arrangements to enable that effective response
- Ensure there is sufficient local capacity to deal with the pandemic, in terms of specialist expertise (from Public Health and Environmental Health); Covid-19 testing; contract tracing; communications; community engagement; infection control; and support for vulnerable people
- Collate and integrate data from multiple sources to support local decision making
- Communicate openly and honestly with key stakeholders, including local communities, key local leaders (e.g. head teachers, religious leaders, business owners, etc.) and local and national politicians
- Work with the community and voluntary sector, to support effective communications with local communities and develop capacity to support testing and contact tracing locally

1.3 PRINCIPLES

The City and Hackney LOCP is grounded in the principles for health protection set out in the joint statement from the Association of Directors of Public Health, UK Faculty of Public Health, Local Government Association, Public Health England, the UK Chief Environmental Health Officers Group,

The prevention and management of the transmission of COVID-19 should:

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

2. COVID-19

SARS-CoV-2 is a novel coronavirus, which had not been recognised in humans until December 2019, in Wuhan, when it caused an outbreak of respiratory illness. Because it had not infected humans before and the population had limited immunity to it, SARS-CoV-2 spread rapidly. The virus quickly began to spread from China around the world, leading the World Health Organization (WHO) to pronounce it a Public Health Emergency of International Concern at the end of January 2020. As a result of continued spread between and within countries, WHO declared a pandemic on 11 March 2020.

Covid-19 is the name given to the illness caused by SARS-CoV-2. The symptoms of Covid-19 are most typically fever, a dry cough and loss of taste and/or smell. It can also, in some cases, cause fatigue and shortness of breath. Many people will have

very mild or no symptoms at all. Whilst the majority of COVID-19 infections are mild, some individuals become very unwell and require hospital admission. Mortality rates from Covid-19 are highest among people who are older (over 70 years); those with underlying health conditions - particularly diabetes and high blood pressure; and people from some minority ethnic backgrounds .

2.1 THE UK RESPONSE

The UK Government in the response to Covid-19 was described in four stages, as below:

Contain	Detect cases early; identify and self-isolate all close contacts; prevent spread within the population.
Delay	Slow the spread of the disease; reducing the peak number of cases; pushing the peak away from the winter season when demand on the NHS is highest.
Research	Understand the nature and spread of the virus; develop innovative responses to diagnosis, treatment and prevention.
Mitigate	Minimise the impact of the disease by providing the best care for people affected, supporting clinical staff and hospitals to maintain their activities; and minimise the impact on public services and the economy.

The UK launched its own coronavirus strategy and moved into the delay phase of the epidemic on 12 March 2020, with efforts being taken to slow the spread of the disease and to reduce the impact on front-line services, particularly the NHS. Since then, social distancing policies have been in effect, to reduce the number of people being unwell and requiring hospital treatment at the same time.

A UK-wide lockdown was announced on 23 March 2020 to reduce transmission and to allow hospitals to prepare to treat patients requiring support. As the lockdown phase of the response to the coronavirus pandemic is lifted, and more interaction is seen within our communities, effective and timely testing and identification of contacts will be vital to further contain transmission of the virus and to control local outbreaks.

On 28 May 2020 the executive agency, NHS Test & Trace, was launched, to oversee delivery of testing and contact tracing. The system identifies those who are infected and helps contain and control any further spread of the virus, through local isolation, as the national lockdown measures are eased. Test and Trace provides testing for those with symptoms of Covid-19 and contact tracing for those who test positive. Those who are identified as being infected with SARS-CoV-2 (cases) via the test are advised to self isolate for 7 days and are asked to identify people who they have had relevant contact with (contacts), during their infectious window (from

around 48 hours before the case starts showing symptoms). Contacts are followed up by NHS Test and Trace to advise them about self isolation, symptoms to look out for and how to get help, if they should deteriorate.

This system is managed centrally and local authorities are charged with developing local outbreak control plans to complement Test and Trace at local level, led by Directors of Public Health. A Local Government National Advisory Board (the Advisory Board) has been set up to provide support to local authorities to develop their plans. A good practice network of 11 groups of local authorities has also been established, to develop and rapidly share effective practice for local outbreak control and also feed back to government. The Advisory Board coordinates this network.

A survey carried out on behalf of the Greater London Authority has found that less than half of Londoners would know how to get tested for COVID-19 and those who are over 65 or from minority ethnic backgrounds were least likely to know how. We are also aware that many residents may struggle with understanding the rationale behind the Test and Trace service and may not trust what they are being asked to do. Compliance with the system is essential for this to work and for coronavirus transmission within our communities to be stopped. We recognise that factually correct, up to date, easy to understand messages are crucial for helping people to engage with the system, as well as the importance of community engagement and effective communications. Therefore, these elements are given priority within this plan.

3. GOVERNANCE ARRANGEMENTS TO RESPOND TO COVID-19

A multi-agency response, via the Local Resilience Forums and Local Health Resilience Partnerships, is being taken to implement the local outbreak control plan (the plan), in line with guidance from the Government and national agencies, including the Advisory Board.

This is a dynamic plan and may be subject to change, in response to changing outbreak conditions, scientific evidence and government and other national guidance. It will be reviewed regularly, to ensure the actions are those that are most likely to be effective. It is supported by an action plan (Appendix 1).

The plan covers the seven themes suggested by the Advisory Board (Appendix 2):

1. Preventing and managing outbreaks in specific individual settings (e.g. schools, care homes, etc.)
2. Preventing and managing outbreaks in other high-risk locations, workplaces

and communities, e.g. religious settings, certain minority communities, business premises with multiple tenants, etc.)

3. Deploy local testing capacity optimally
4. Deliver contact tracing for complex settings and cohorts, including developing a plan for surge capacity and mutual aid
5. Access to the right local data to enable the other 6 themes and prevent outbreaks
6. Supporting vulnerable people and ensure services meet the needs of diverse communities
7. Governance, communication and engagement - local boards ensure local actions are taken to contain outbreaks and communicate with the general public

Testing capacity and contact tracing in complex settings have been combined in this plan, for ease of reading.

The Plan supports multi-agency working to support infection prevention and control and respond to local outbreaks of Covid-19. In addition to the City of London Corporation and Hackney Council, the following partners are actively involved in developing and implementing the local plan:

- City and Hackney Clinical Commissioning Group (CCG)
- Homerton University Hospital Foundation Trust (HUHT)
- East London NHS Foundation Trust (ELFT);
- Emergency services (including City of London/ Metropolitan Police, Fire and London Ambulance Services);
- City and Hackney GP Confederation
- Hackney Voluntary and Community Services
- Volunteer Centre Hackney

City and Hackney also recognises the huge benefits that the community and voluntary sector (CVS) provide to the area and the valuable role that they have been and can continue to play at this time. Community groups have been engaged in providing food and other support to vulnerable people and families during the lockdown. The sector is also important in supporting residents who have mental health or other complex social needs, related to lockdown or self isolation. The CVS will continue to play an integral role in delivering the local outbreak control plan, including supporting local communications and community engagement.

City and Hackney belongs to the London Good Practice Network (GPN - one of the 11 national networks), led by Camden Council. The London GPN is leading development of practice in four areas: supporting vulnerable communities; engaging with diverse communities (by ethnicity or other forms of diversity); transport hubs;

and data integration. Learning from the network is being disseminated across London, as well as fed back to the Advisory Board.

3.1 HACKNEY COUNCIL AND CITY OF LONDON CORPORATION

Both the City of London and the London Borough of Hackney have their own command group arrangements to ensure both a coherent local response to Covid-19 and to assess the impact on public services and their local populations.

- GOLD: Responsible for strategic decisions, allocation of resources and overall delivery of the Council/ Corporation's response.
- SILVER: Responsible for tactical decisions and implementation of the strategy set by Gold.
- BRONZE (Borough Emergency Command): Responsible for operational activities, including communications, the delivery of public services and business continuity.

Command groups are responsible for overseeing communication with external agencies, the public and community groups; delivery of Business Continuity Plans across all service areas; and managing the provision of temporary mortuary facilities.

Representatives from various, internal local authority departments are involved in these groups, including from Corporate, Emergency Planning, Human Resources, Adult Social Care, Children and Young People's services, Education (including Hackney Learning Trust), Policy and Strategic Delivery, Environmental Health, Housing and Communications. The City and Hackney Public Health Service provides expert advice and support to all command groups.

3.2 LOCAL SYSTEM GOVERNANCE

The Advisory Board suggests three levels of governance at local level:

1. A Covid-19 Health Protection Board - already established and meets weekly (for terms of reference, see Appendix 3)
 - a. oversees development and delivery of the plan
 - b. has oversight of working groups, including:
 - i. Care homes & settings
 - ii. Testing
 - iii. Contact tracing
 - iv. Volunteers recruitment and training
 - v. Covid-19 intelligence and data integration
 - vi. other groups mobilised, as necessary
 - c. focused on infection prevention and control and provides expertise;

- d. chaired by the director of public health
 - e. Leads development and delivery of local plans (DPH) & links directly to regional PHE team (London Coronavirus Response Cell - LCRC)
 - f. Wider NHS resource mobilisation to support programme delivery (e.g. infection control)
 - g. Financial control
 - h. Regional / national escalation where needed
2. Local Strategic Coordination Groups (Gold) - stood up in March 2020
 - a. Delivers swift resource deployment (e.g. mobile testing, local testing)
 - b. Owns connection with Joint Biosecurity Centre, Whitehall & COBR
 - c. Link directly to Local Resilience Forums (LRFs);
 - d. support to maintain momentum & minimise impact of resources displaced; consider support for areas struggling to cope
 - e. link to regional strategic coordination group
 3. Local Outbreak Control Board (LOCB) - the Integrated Commissioning Board is being adopted as the LOCB. The LOCB will meet monthly, as an extension of the ICB, through amendment of its terms of reference (Appendix 3). Its functions are to:
 - a. Provide member accountability and oversight of the Local Outbreak Control plan
 - b. Provide public-facing delivery oversight of NHS Test and Trace locally
 - c. Ensure regular and timely communications to the public are provided
 - d. Act as liaison to Ministers, as needed

Figure 1, below, illustrates the relationships between these groups, the existing working groups and the reporting lines/accountability.

3.3 LOCAL LOCKDOWNS

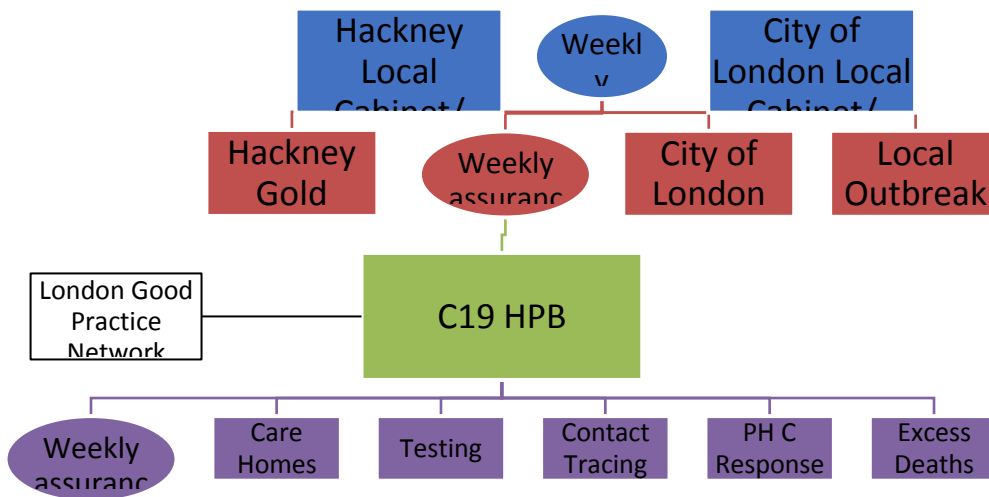
Advice and guidance from the UK Government is awaited on exactly what powers have or will be conferred on local authorities to implement local lockdowns, in the event of a serious local outbreak of SARS-CoV-2. In the meantime, the existing powers under Health and Social Care Act 2012 and the amended Public Health (Control of Disease) Act 1984 and associated regulations, as well as powers held by Environmental Health Officers (EHOs), make provision for the Director of Public Health to work with the “proper officer” from PHE and/or local EHOs, in the event of a local outbreak, to:

- detain individuals who pose an infectious risk to the population (DPH); or

- close premises that pose an ongoing infectious risk to the public (EHOs)

This section to be revised as new guidance becomes available.

Figure 1. City and Hackney Local Outbreak Control Plan Governance Structure and Reporting



3.4 LONDON-WIDE HEALTH PROTECTION RESPONSE

LCRC has pulled together a pan-London health protection team (HPT) in response to the pandemic and agreed roles and responsibilities with local authority DsPH (table 1), to ensure a coordinated response. This joint agreement between PHE and local authorities (Appendix 4) describes the actions and responses from LCRC and local authorities, to prevent and respond to local outbreaks of Covid-19, working with NHS Test and Trace.

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

	PHE LCRC	Local Authority
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Setting-specific outbreak	<ul style="list-style-type: none"> • Receive notification of outbreak from the setting and/or the Test and Trace system • 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 Incident Management Team (IMT) if required • Contact local authority for information or to request additional support 	<ul style="list-style-type: none"> • Prevention work e.g. proactively sharing guidance & supporting with its implementation • Respond to enquiries • Support vulnerable contacts who are required to self-isolate • Liaise with setting to provide ongoing advice and support for testing, communications, infection control and PPE • Participate in IMT, if convened • Local communications • Liaise with CCG, GPs and other healthcare providers to provide ongoing healthcare support to setting and affected individuals, as appropriate
Community cluster	<ul style="list-style-type: none"> • Identify community cluster through Test and Trace system or other surveillance systems • Support Local Authority in their risk assessment of and response to an identified community cluster 	<ul style="list-style-type: none"> • Receive notification of community cluster from LCRC, or identify community cluster through local data, intelligence and surveillance • Convene incident management team (IMT) • Provide support to community, which may include translated materials, support to self-isolate, advice and enforcement • Liaise with the local CCG, GPs and other healthcare providers, as appropriate • Local communications

4. COVID-19 PRIORITIES FOR ACTION

4.1 PREVENTING AND MANAGING OUTBREAKS IN VARIOUS SETTINGS

To support local outbreak prevention and management, Standard Operating Procedures (SOPs) have been drafted, to be used across a range of settings for prevention and management of outbreaks. These also provide a useful overview of the Test & Trace procedure and highlight the (current) respective roles of Local Authority (Public Health and/or Environmental Health) and the LCRC in supporting this process.

Development of SOPs for certain high risk settings have been prioritised, including:

- [Care Homes](#)
- [Educational Settings](#)
- [Workplaces](#)
- [Primary Care](#)

These are available at Appendix 5.

Further SOPs are being developed, to cover, among other things, community clusters, religious spaces and transport, as well as providing more workplace-specific SOPs, as needed.

The City of London is home to over 23,000 businesses and workplaces, including schools, colleges and specialist workplaces, such as Smithfields meat market. We are urgently developing an SOP

with the emergency planning team to update local business plans to help them to prepare for situations where large proportions of the workforce are self isolating and carrying out a workforce impact checklist to help identify areas which require further support.

The intention is to keep the SOPs open and flexible, so that they can be adapted as guidance is updated and strategies for managing the pandemic change.

A single point of contact (SPOC) will be identified in each setting, to enable effective communication with Public Health or Environmental Health and follow up and support on infection prevention and control and outbreak management, as well escalation, as required. To manage enquiries from all settings there is a designated email inbox and telephone number will be established.

4.1.1 DECLARING AND MANAGING AN OUTBREAK

Two or more linked cases of Covid-19 are considered to be an outbreak, i.e. two (or more) people who have tested positive and are connected by time, location, or person, suggesting a common exposure. For an outbreak to be declared in a care home setting, it is only necessary to have one case test positive. An outbreak would usually be declared by PHE (LCRC). However, linked cases may come to the attention of LCRC and the C-19 HPB in different ways:

- The setting itself may become aware of cases (and follow the SOP), notifying:
 - Commissioners
 - LCRC
 - Public Health SPOC

- LCRC may be notified through the NHS Test and Trace system and notify DPH
- GPs may become aware through test results and notify LCRC & DPH
- Commissioners may notify LCRC and Public Health SPOC/DPH
- Through data monitoring, e.g. exceedance reports may show an increase in positive tests in an area

LCRC usually convenes the incident management team (IMT) for the specific incident and provides specialist advice and support.

The DPH will usually lead the local response to an outbreak within City and/or Hackney. However, this may be delegated to the Lead Consultant in Public Health for Health Protection.

The terms of reference for the IMT will be agreed at the first meeting and reviewed at regular intervals, until the outbreak is resolved. The IMT will report regularly to the C-19 HPB.

A general SOP for management of outbreaks is being developed, to complement the LCRC SOPs (Appendix 6).

4.2 LOCAL TESTING & CONTACT TRACING

4.2.1 Testing

Access to rapid testing and fast turnaround of results is vital to prevent an increase in transmission of SARS-CoV-2 as we move out of lockdown. Testing is currently coordinated at the national level via the NHS Test & Trace Programme. Symptomatic residents can book a test either online at: www.nhs.uk/coronavirus or by calling 119. They can either order a home testing kit, consisting of a nasal/throat swab or can attend a mobile testing unit (MTU). Key workers can access priority testing via the government website.

Residents in care homes and other care settings can access testing for both symptomatic and non-symptomatic residents and staff via a specific national care homes portal. In Hackney extra funding has been secured to support care facilities where staff do not feel confident in performing swab testing themselves. These are mostly mental health and substance misuse services, where care staff may not be used to providing this type of clinical care.

Some vulnerable residents may have difficulty with access to coronavirus testing, particularly those who have no or limited digital skills or internet access. Community Champions (see section 5) will provide support to individuals with booking a test, e.g. by helping them to access the test website or being a trusted person to receive a notice.

The MTU in Hackney is usually located at Bentley Road Car Park and is there once a week for two to three days. The City of London has no MTU at present. Local communications have been developed, to increase awareness of the Bentley Road MTU location and how to access it. Directors of Public Health now have the power to direct the MTUs to new locations to support local outbreak management. A protocol has been developed for this purpose by DHSC (Appendix 7)

4.2.2 Contact Tracing

There are 3 tiers, or levels of the Contact Tracing system in England:

1. Level 1 - PHE specialist health protection teams (LCRC), to manage outbreaks in complex settings alongside local authorities
2. Level 2 - NHS Test and Trace health professionals - provide advice to cases and identify their contacts
3. Level 3 - NHS Test and Trace call handlers provide advice to contacts on self isolation, recognising symptoms of Covid-19 and getting tested, if necessary

For the majority of cases contact tracing is performed by the national NHS Test and Trace Service, levels 2 and 3. The process is described in detail at Appendix 8.

To support this process at a local level

1. Communication - to ensure local people understand and are able to follow advice on how to prevent the spread of coronavirus, including hygiene, social distancing, as well as engaging with Test and Trace
2. Developing easy to follow SOPs, as outlined above
3. Recruiting and training community champions to support communications campaigns and help individuals in need to find support

4.3 DATA MANAGEMENT & INTEGRATION

Ensuring there are timely and reliable data flows between national, regional and local organisations is essential to help control local outbreaks of COVID-19.

Table 2. Data Sharing with Local Authorities

Subject	Content	Sender	Frequency
Contact Tracing Update yyyymmdd	Notification of daily contact tracing update by UTLA - daily COVID-19 surveillance reports and exceedance reports	Contact Tracing Cell: data and surveillance Field Service, National Infection Service	Daily

		Public Health England	
PHEC Daily COVID-19 surveillance report	Daily PHE regional report summarising data on laboratory-confirmed COVID-19 cases and reported COVID-19 outbreaks/clusters	PHE London Incident Coordination Centre	Daily
LCRC Daily Data Summary and LSAT data	London Coronavirus Response Cell Daily Data Summary (cases and situations) and LSAT Postcode Data (line listing with postcode, age)	PHE London Incident Coordination Centre	Daily
PHEC Weekly COVID-19 surveillance report	Weekly report summarising data on laboratory-confirmed COVID-19 cases; reported COVID-19 outbreaks/clusters; syndromic surveillance indicators; and hospital and ICU/HDU admissions	PHE London Incident Coordination Centre	Weekly
Care homes COVID-19 Order Report for Local Authorities (contains local data only, not London)	Information for each care home in borough on the following: <ul style="list-style-type: none"> • Registered places • Total no. of residents • Number / % of symptomatic residents • Total no. of staff • No. of tests requested • No. of tests delivered 	DHSC Covid-19 Testing Programme	Twice per week
DHSC testing London dashboard	DHSC pillar 2 testing regional dashboard for London	DHSC Covid 19 team	Weekly
NHS Digital pillar 2 testing dashboard	NHS Digital Pillar 2 Testing Dashboards using current data to provide anonymous counts of Covid-19 tests completed and tests which are deemed void, aggregated by Upper Tier Local Authorities	NHS Digital Pillar 2 Service Team	N/a - dashboard
Joint Biosecurity Centre	TBA	TBA	TBA

Table 2 describes the current data flows regarding COVID-19 cases from PHE to Local Authority. The data flow is supported by a data sharing agreement (Appendix 9). These data and other information gathered locally and from across the subregion are gathered and analysed by the Public Health Intelligence Team (PHIT), in order to

provide routine and timely updates to the C-19 HPB, Gold groups, and LOCB about the current state of the outbreak in City and Hackney. This includes close surveillance of the trends in infection and mortality rates in City and Hackney; investigating clusters; identifying predictive indicators; and producing actionable insight.

The analysis will not only seek to identify general increases in numbers of cases (i.e. a rising epidemic curve), but also to recognize local clusters or outbreaks, in time to take action. The team is developing a secure local dashboard not only for storing these data, but also for making data available to partners and the public, in an appropriate format. This will allow us to use this data quickly and efficiently to inform the local response. We hope in time to extend this dashboard to include more widespread indicators from our colleagues in other council departments, such as domestic abuse figures. We undertake weekly System Intelligence Group meetings to share information between organisations, to facilitate data sharing.

The PHIT is also contributing to the LOCP and Good Practice Network programme by leading on the data integration workstream, working London-wide with PHE and nationally with the Joint Biosecurity Centre.

INSERT TEXT - BRIEF DESCRIPTION OF JBC

5. SUPPORTING VULNERABLE COMMUNITIES

Engagement with local communities, through community and voluntary sector partners, has allowed us to identify key issues for local people that will present barriers to them engaging effectively in Test and Trace. These include lack of trust in the system, lack of technology or access to the internet (digital divide) and language barriers.

We have identified several specific local communities which require additional support, either due to lack of technology or language barriers. Some individuals will find it challenging to understand and engage with the NHS Test & Trace process, for a variety of reasons, including low literacy or poor health literacy; English is not their first language; no internet access; and/or poor digital skills, etc. In order to ensure that a comprehensive support system is in place for all our residents, an online form and helpline have been set up for those most affected by the outbreak in both the City and Hackney. Residents that make contact online or over the phone are being referred to the right services within the Council, Department for Work and Pensions (DWP), independent advice providers or to local community and voluntary groups. To support this, a volunteering hub, drawing on the expertise of the voluntary and community sector, has been established to offer practical and social support to those

most in need. The hub takes referrals from the helpline and online form and has been supporting people during the lockdown period.

As the lockdown eases, Hackney Council and the City of London Corporation have responsibility to support people who are advised to self isolate by NHS Test and Trace and need support to do so. We plan to extend the existing support arrangements for this purpose.

Hackney Council has completed a community impact assessment and equality grid (Appendix 10), to use local data to identify vulnerable members of our community. Information from this will be used to develop support to the community via the Community Partnership Hub (see Appendix 10).

5.1 WORKING WITH VOLUNTARY AND COMMUNITY SERVICES, FAITH GROUPS & HEALTH CHAMPIONS

We have a wide range of diverse communities across Hackney and the City of London. Building on close existing links with the voluntary and community sector (VCS) and faith groups, we are recruiting and training health champions to build on our ability to keep residents informed, provide support to those who are vulnerable and help us to build trust in the Test & Trace process.

We are working with the VCS to develop training for “community champions”, who will provide information to residents and support vulnerable residents who are self isolating or shielding. This will supplement work already being undertaken by the VCS.

We have agreed the following principles for working with the VCS, to support contact tracing in our communities:

- A strong, community-owned communication strategy will be key to ensuring understanding, trust and confidence in the process to support local outbreak control and contact tracing
- A sustained and straightforward communication effort, co-produced with local organisations is crucial and can create a foundation for other key public health messages
- The need to build on the foundation of the current VCS response to the crisis and link individuals who are isolating to existing support in the VCS

- The importance of using community languages and community groups/ volunteers as messengers to reach and engage with diverse communities in Hackney and the City and, in particular, people described as “vulnerable” or with high support needs
- The importance of providing ongoing support to communities/groups and providing up to date information on staying safe from coronavirus, access to testing and contact tracing
- Building trust, conveying messages regarding benefits of testing and contact tracing and responding, where possible, to any data about hotspots or areas of low uptake

Data charter for building trust (Appendix 11)

5.2 DIGITAL DIVIDE

Access to and use of the NHS Test & Trace system is reliant on access to the internet or a telephone. This can disadvantage those who do not have access to these. We have been working with local ICT teams to draw up an agreement with broadband providers to get full fibre connections throughout Hackney Housing stock. A working group has been formed to address and mitigate the divide. Including development of a helpline, online how-to-video guides and support from the VCS. While the City of London has enabled access to free wifi for some residents.

5.3 COMMUNICATION AND ENGAGEMENT

Communication and engagement with residents and community groups is vital, building on principles set out in the Pandemic Flu Plan. There are three important elements of this work, namely:

- I. Reinforcing messages from UK Government, PHE and other national agencies, as the national guidance evolves over time;
- II. Identifying specific risks and issues for community groups with regards to engagement with national or local plans and following guidance; and
- III. Tailored communications with residents who are self isolating - including those who are still ‘shielding’ from the virus - and may need additional support.

The success of Test & Trace is dependent on individuals trusting the information they are given, following advice and engaging with the service, if contacted. Effective communication is key for ensuring this. Our communications plan (see Appendix 12) provides a framework and sets our priorities for engagement with local communities. This links in with our work with the VCS, to ensure correct information and guidance is being accessed and understood across both boroughs.

6. FINANCE & RESOURCES

6.1 FUNDING ALLOCATIONS

DN - include text about amount of allocations

6.2 GOVERNANCE

Add text

6.3 LONDON-WIDE FUNDING

Add text on London-wide proposals, e.g. Find & Treat testing for rough sleepers

7. RISK

Key risks associated with COVID-19 outbreaks in local settings and actions to mitigate them will be outlined in the local Outbreak Management Plan Risk Register. The risk register will be reviewed regularly at the C-19 HPB, with key risks escalated to Gold groups, to obtain support and/or resources to effect the adequate controls. The risk register is available at Appendix 13.

APPENDICES

List of appendices to be inserted

1. Action Plan (1)-
<https://docs.google.com/document/d/1BkFko9S8NUQaMLIWsuCtIwQXEfwKDaKpkIBkRdp9yT8/edit?ts=5ef08f44>
2. Advisory Board hints and tips (2)-
<https://docs.google.com/presentation/d/19Sk33qiJJ4pM1IPKTeFLNrD-s7bNyCMa9Im6xSKrGyk/edit#slide=id.p1>
3. C-19 HPB & LOCB TOR (3) -
4. PHE LCRC - local authority joint agreement (4)- [Joint Agreement](#)
5. Standard Operating Procedures (5) - [Care Homes](#); [Educational Settings](#); [Workplaces](#); [Primary Care](#)
6. Outbreak control management SOP - in development
7. MTU deployment protocol (6) - <https://docs.google.com/document/d/1fv5hA-sNm0h2rbFv9muakw7G4qgwM3sa/edit>
8. Contact tracing (7) -
https://docs.google.com/presentation/d/13b5vooc262ri253jS_gBXXi4wsJW5Et1oMK5kk40XWw/edit#slide=id.p1
9. PHE - LA DSA (9) - <https://app.luminpdf.com/viewer/5ef573f651424100120afb2d>
10. Community impact assessment & equalities grid (10) -
https://docs.google.com/spreadsheets/d/14i2qTGOQV1kZUX6v01vREC0SPU_vwlm-aEjbXKYF1qo/edit#gid=1900758788,
https://docs.google.com/document/d/1iahhobN5PW_gkfd5af2rPfaQT-zEOPyiKT5YhSL0cH0/edit
11. **Data charter for building trust (Appendix 11)**
12. Communications Plan (12) - <https://docs.google.com/document/d/1-VULxkJ2a94-4cfAlZ6MvziJ1laXgcaSryp5mVumnQ/edit>
13. Risk register (13) -
<https://docs.google.com/spreadsheets/d/1AmH99qm8s0LqtBOya3TagJHgKy2s-gJwmNtvEnr4ozk/edit?ts=5eeb7c2b#gid=0>

Annex A: List of key contacts

HACKNEY

	Organisation/Service	Pandemic lead	Job title	Email	Telephone
LBH	Emergency Planning	N/A	Duty Emergency Planning Officer	Emergency.Planning@Hackney.gov.uk	020 8356 2366
	Public Health	Sandra Husbands Nicole Klynman	Director of Public Health Consultant in Public Health	nicole.klynman@hackney.gov.uk	020 8356 5013
	Adult Social Care	Amecie Steadman	Business Service and Data Governance Officer	emran.hussain2@hackney.gov.uk	020 8356 1947
	Children and Young People's Services (CYPS)	Ross Tuckley	Business Development and Support Manager	Ross.Tuckley@Hackney.gov.uk	020 8356 5923 07595 359791
	Hackney Learning Trust	Hilary Smith	Head of Strategy, Policy & Governance	hilary.smith@learningtrust.co.uk	020 8820 7036
	Environmental Health	Nilesh Lad Robert Gardner	Business Regulation Team Leader Enforcement and Business Regulation Manager	Nilesh.lad@hackney.gov.uk robert.gardner@hackney.gov.uk	020 8356 8538 020 8356 8567
	Hackney Housing	Sean Roche	Planned Works Manager	sean.roche@hackney.gov.uk	0208 356 6247 07815.713.348 07791.262.350
		Ben Knowles Polly Cziok	Media & Campaigns Manager Director Communications, Culture and Engagement	helen.clarke@hackney.gov.uk Polly.Cziok@Hackney.gov.uk	0208 356 3539 020 8356 3323 / 07545 635766 OOH Press office: 07528 969 363
LOCAL HEALTH COMMUNITY	City and Hackney CCG	Matthew Knell	Head of Corporate Services	Matthew.Knell@nhs.net	020 38163230
	GP Confederation	Laura Sharpe	CEOs	laura.sharpe1@nhs.net	020 7729 7236
	Homerton Hospital	Dr Alleyna Claxton Roz Wallis	Infection Control Doctor & Director of Infection Prevention and Control	Alleyna.Claxton@nhs.net	020 8510 7180

			Infection Control Nurse Consultant and Deputy Direct infections, Prevention and Control	roz.wallis@nhs.net	020 8510 5166
	East London Foundation Trust	Carol Shannon	Deputy Director Infection Control And Physical Health Lead Nurse	Carol.Shannon@nhs.uk	07940 237087
OTHER	London Ambulance Service	Alan Palmer	Emergency Planning & Resilience Officer	Alan.Palmer@london-amb.nhs.uk	07717 808533
	Metropolitan Police	PC Lukas Guichard	North East Emergency Planning Officer	Lukas.S.M.Guichard@met.police.uk ; lukas.guichard@met.police.uk	0207 161 4150 07876 391769
	British Transport Police	Cavita Lapper	B Division Resilience Planning Officer	B-resilience@btp.pnn.police.uk	02079183118
	Hackney Fire Service	Lee Sandy	Group Commander	Lee.Sandy@London-Fire.Gov.UK	0208.555.1200 ext. 58657 07557 800050
	Voluntary Sector rep	Jackie Brett	Director of Communities & Partnerships	jackie@hcvs.org.uk	
	St Joseph's Hospice	Debbie Pegram	Matron	D.Pegram@STJH.org.uk	020 8525 6008
	Faith representatives	Cllr Ian Rathbone Eusoof D Amerat Herzel Gluck	Christian faith Muslim faith Jewish faith	Ian.Rathbone@hackney.gov.uk ee_amerat@yahoo.co.uk rabbigluck@hotmail.com	07890 654 068 07419 985 832
	Local Pharmaceutical Committee	Hitesh Patel	Chief Officer	candhlpc@gmail.com	07736300296
	NHS England (London)	Liz Clark	EPRR Engagement Support Officer	Liz.clark1@nhs.net	07585987802
	Public Health England London	Agnes Jung	Regional Lead EPRR and Sustainability London	Main email: PHEEPRR.London@phe.gov.uk Lead: agnes.jung@phe.gov.uk	020 849 53330 07717667964

				Out of hours: 07623 541132 (Page One paging service leave your message with contact details)	
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Annex B: Contact details for the City of London

	Organisation	Pandemic Flu lead	Job title	Email	Telephone
City of London	CoL Resilience Team	Gary Locker	Head of Resilience	Gary.Locker@cityoflondon.gov.uk	07876 545700 020 7332 1969
	Out of hours city of London control room = 0207 332 3478 / 3896	Ben Morris	Contingency Planning Officer	benjamin.morris@cityoflondon.gov.uk	020 7332 3232
		Sharon McLaughlin	Departmental resilience lead – Community and Children’s Services	Sharon.mclaughlin@cityoflondon.gov.uk	020 7332 3498
		Public Health	Nicole Klynman	Consultant in Public Health (HP lead C&H)	nicole.klynman@hackney.gov.uk
	Human Resources	Andy Liggins	Consultant in Public Health (CoL)	andy.liggins@cityoflondon.gov.uk	07803282998
		Tracey Janson	Assistant Director	Tracey.Jansen@cityoflondon.gov.uk	020 7332 3289
	Community and Children’s Services	Andrew Carter	Director of Community and Children’s Services	Andrew.carter@cityoflondon.gov.uk	020 7332 1650
	People services	Chris Pelham	Assistant Director - People	Chris.Pelham@cityoflondon.gov.uk	020 7332 1636
	Adult Social Care	Ian Tweedie	Service Manager	Ian.Tweedie@cityoflondon.gov.uk	020 7332 3129
Children’s Social Care and Early Help	Rachel Green	Service Manager	Rachel.green@cityoflondon.gov.uk	020 7332 3501	
Housing	Paul Murtagh	Assistant Director - Barbican Estate & Property Services	Paul.Murtagh@cityoflondon.gov.uk	<u>020 7332 3015</u>	
	Liam Gillespie	Head of Housing Management	Liam.Gillespie@cityoflondon.gov.uk	<u>0207 332 3785</u>	
Environmental Health	Tony Macklin	Assistant Director (Public Protection) Assistant Director (Public Protection)	Tony.Macklin@cityoflondon.gov.uk	020 7332 3377	

		Rachel Pye		Rachel.Pye@cityoflondon.gov.uk	020 7332 3313
	Communications	Bob Roberts	Director of Communications	Bob.Roberts@cityoflondon.gov.uk	020 7332 1111
	City of London Police	Emergency Planning Officers	Emergency Planning Officers	emergencyplanningofficers@city-of-london.pnn.police.uk	020 7601 2222