

## **Cabinet – 17 June 2020**

### **Walsall's Local Outbreak Plan Governance and Delivery Arrangements**

**Portfolio:** Councillor Stephen Craddock, Health & Wellbeing

**Related portfolios:** N/A

**Service:** Public Health

**Wards:** All

**Key decision:** No

**Forward plan:** Yes

#### **1. Aim**

To set out proposed arrangements for the Walsall Local Outbreak Plan Governance and Delivery Arrangements. These will be developed further as the service develops in light of national guidance.

#### **2. Summary**

- 2.1 On 22 May 2020, Government announced that, as part of its national strategy to reduce infection from COVID-19 it would expect every area in England to create a local Outbreak Plan.
- 2.2 Government expects that by the end of June that local plans, led by the Director of Public Health (DPH), will be produced.
- 2.3 Government requires that a "Local Outbreak Engagement Board" be established to provide political ownership and public-facing engagement and communications for outbreak response. It is proposed that the Health and Wellbeing Board (or sub-committee) act as the "Local Outbreak Engagement Board" and revised Health protection Forum act as the local operational oversight and is responsible for the production of the Outbreak Plan.
- 2.4 Final outbreak plan that covers the seven themes as set out in the national announcement expected to be completed by the end of June, with ongoing development and refinement through the Health Protection Forum.

#### **3. Recommendations**

- 3.1 That Cabinet notes the proposed arrangements for the Walsall Local Outbreak Plan Governance and Delivery methods as set out in the report and Appendix 2.

- 3.2 That Cabinet notes that the Health and Wellbeing Board would act as the “Local Outbreak Engagement Board” and that a revised Health Protection Forum (Appendix 1) has formal oversight of identification of actions to both prevent and manage outbreaks that will require continual and agile updating in light of further guidance and or national and local developments.
- 3.3 That authority for spend of the proposed national funding be delegated to the Director of Public Health, in consultation with the Portfolio Holder for Public Health and the Leader of the Council following consideration by Gold Command emergency planning forum and the Health Protection Forum.

#### **4. Report detail - know**

##### ***Context***

- 4.1 On 22<sup>nd</sup> May 2020, Government announced that, as part of its national strategy to reduce infection from COVID-19 it would expect every area in England to create a local Outbreak Plan.
- 4.2 Government expects that by the end of June, local plans, led by the Director of Public Health (DPH), will be produced. Officer level structures and Member level governance structures will need to be defined and implemented. The aim of the plans should be specifically to prevent and manage local outbreaks of infection.
- 4.3 The announcement states:

“Building on the foundation of the statutory role of Directors of Public Health at the upper tier local authority level, and working with Public Health England’s local health protection teams, local government will build on existing health protection plans to put in place measures to identify and contain outbreaks and protect the public’s health. Local Directors of Public Health will be responsible for defining these measures and producing the plans, working through Covid-19 Health Protection Boards. They will be supported by and work in collaboration with Gold command emergency planning forums and a public-facing Board led by council members to communicate openly with the public.

Cross-party and cross-sector working will be strongly encouraged, and all tiers of Government will be engaged in a joint endeavour to contain the virus, including Local Resilience Forums, NHS Integrated Care Systems and Mayoral Combined Authorities. In two-tier areas, District Councils will be fully involved, particularly given their responsibilities for environmental health. Councils are free to work at wider geographic levels if they so choose.”
- 4.4 These plans build on the Health Protection functions outlined in the Government Guidance *Health Protection in Local Government* that puts important health protection roles at both upper tier local authorities and in Public Health England. To that extent, the Council’s health protection arrangements already exist, including a multi-agency Health Protection Forum chaired by the DPH. However, specific arrangements for addressing COVID-19 outbreaks will need to be stood up against that context of partnership working.

- 4.5 The plans will also require clear links into delivery and deployment of actions to be taken across all Walsall agencies, including local authority, NHS and Police powers and capabilities. This provides a clear need to link strongly to the Strategic Co-ordinating Group of the Local Resilience Forum.
- 4.6 Initial discussions at Officer level have taken place and will continue at pace over the next weeks to develop arrangements to enable an officer led COVID-19 Outbreak Board to be put in place.

The announcement by Government determines three sets of functions at local level:

Set of functions	Governance	Identification and Determination of Actions Needed	Deployment of Multi-Agency Capabilities
<b>Proposed Forum</b>	<b>Health and Wellbeing Board (or sub-Forum) to act as “Local Outbreak Engagement Board” and oversee the implementation of the outbreak plan</b>	<b><i>Revised Health Protection Committee</i></b>	<b><i>Strategic Coordinating Group</i></b>
Proposed functions	A member-led Outbreak Oversight / Engagement Board which will provide assurance and governance functions	<p>The identification of actions to <b>both</b> prevent <b>and</b> manage outbreaks. The production of the Outbreak Plan and its continual and agile updating</p> <p><i>It is proposed an Officer Board is constituted both under the Health Protection in Local Government guidance and as a Cell of the SCG to enable integration into existing arrangements</i></p>	While agencies on the Board will have their own capabilities it is likely much more will be needed and the capabilities of the SCG will be crucial here

- 4.7 Arrangements are being developed in more detail with final plans required by the end of June. Multi-agency officer discussions have been convened to assist in their development.

- 4.8 As part of these plans it is proposed that the Health and Wellbeing Board (or a sub-group of the board to be agreed at its next meeting in June) act as the Member Led Board to provide political ownership and public-facing engagement and communication for outbreak response. To this end the Health and Wellbeing Board is being consulted on the best approach to achieve this aim.

### ***Development of the Outbreak Plan***

- 4.9 The government announcement of 22 May 2020 sets out seven themes for the Outbreak Plans. These are mostly in planning and response to Outbreaks. Government also recognised however in its advice to Directors of Public Health on 22 May that plans for prevention of Outbreaks need to be set in the context of existing, as well as new, responsibilities.
- 4.10 Taking this into account and combining with the Government's seven themes means that the Plan will need to have the following priorities:

<b>Theme</b>	<b>Broad Actions</b>
1. Care homes and schools (planning for local outbreaks in care homes and schools)	Ensuring appropriate measures are in place to prevent the spread of infection (eg social distancing, hygiene, PPE, enhanced cleaning etc) across all settings with specific focus on higher risk settings
2. High risk places, locations and communities ( identifying and planning how to manage high risk places, locations and communities of interest)	Settings, places and communities which would be problematic if outbreaks were to occur (Examples range from prisons to retirement homes, migrants, large gatherings, transport hubs and homeless people)
3. Local testing capacity (identifying methods for local testing to ensure a swift response that is accessible to the entire population)	The ability to direct local testing capacity to prevent and manage outbreaks
4. Contact tracing in complex settings (assessing local and regional contact tracing capability in complex setting)	The local role in the national contact tracing system
5. Data integration ( integrating national and local data and scenario planning)	The ability to integrate data flows from national and local for functions ranging from contact tracing and self-isolation to proactively identifying outbreaks in development and provide dynamic early warning with an interface to the national Biosecurity cell
6. Vulnerable people ( supporting vulnerable people to get help to self-isolate)	Ensuring prevention of infection from reaching vulnerable people and extension of shielding support to those self-isolating

7. Local Boards (establishing local governance structures in conjunction with the local NHS and supported by existing Gold Command forums)	Governance, Oversight and Assurance on operational and strategic direction with arrangements for deployment and delivery of actions and capabilities.
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- 4.11 The plan will be supported by a communications and engagement plan to work with and engage local communities to ensure further localised outbreaks are mitigated and stopped quickly.

### ***Council Corporate Plan priorities***

- 4.12 This is a unique situation with the potential to affect all age groups and across all denominations and cultures. As such, the measures taken and the processes in place crosscut all aspects of the Council's Corporate Plan priorities.

### ***Risk management***

- 4.13 In the development of the outbreak management plan, appropriate measures have been taken to ensure the plan has the ability to respond to the ongoing pandemic to meet its aim. Regular review of risks and appropriate responses to those will be overseen through the proposed governance structure to minimise the risk to the local community and to safeguard vulnerable residents.

### ***Financial implications***

- 4.14 In the announcement on the 22 May, £300m in national government funding will be provided to local authorities in England to fund the implementation of local outbreak management plans. The Local authority has received a confirmed allocation of £1,650,559.

### ***Legal implications***

- 4.15 In the further development and implementation of the Outbreak Management Plan, further legal powers may be developed and or devolved from central government to each upper tier local authority. Central government would follow due process for this and engage appropriately, in which the authority would follow.
- 4.16 The Leader of the Council and the Cabinet will have overall oversight of the plan through the current structures as set out in Appendix 2 Governance of the Outbreak Management Plan
- 4.17 The current remit of the Health and Wellbeing Board provides for the Board to Improve accountability of social and healthcare to the public; through strong oversight, ensure that agencies deliver better health and wellbeing for children and adults in Walsall; and eliminate duplication of resources by working together effectively and efficiently. The Health and Wellbeing Board is not subject to political balance requirements.
- 4.18 The Revised Health Protection Forum facilitates a co-ordinated strategic approach to health protection issues in Walsall, act as conduit to the Health and

Wellbeing Board providing assurance of local plans in relation to outbreaks and provide operational oversight and delivery in relation to outbreaks of SARS CoV 2.

### ***Procurement Implications/Social Value***

- 4.19 It is not anticipated any large procurements in the mobilisation of the outbreak management plan will be needed.

### ***Property implications***

- 4.20 It is not anticipated any large property implications in the mobilisation of the outbreak management plan will be needed.

### ***Health and wellbeing implications***

- 4.21 The key aim of the outbreak management plans will be control the COVID-19 rate of reproduction (R), reduce the spread of infection and save lives. In doing so help to return life to as normal as possible, for as many people as possible, in a way that is safe, protects our health and care systems and releases our economy.

### ***Staffing implications***

- 4.22 To fully implement the Outbreak Management Plan, staff from the authority and / or partners would need to be deployed and trained. Current Pay Policy Statement 2020-2021 on flexible working and overtime will be used to inform any overtime payments.

### ***Reducing Inequalities***

- 4.23 The COVID-19 pandemic has affected our diverse communities differently across the borough. The Outbreak management plan aims to reduce the spread of infection and save lives. In doing so help to reduce inequalities across the borough.

### ***Consultation***

- 4.24 Due to the urgent nature of the response to the COVID-19 pandemic and the requirement to work in partnership, ongoing engagement and consultation with key partners is taking place.
- 4.25 As a courtesy, the views of the political group leaders on the Council have been sought on the proposal for the Health and Wellbeing Board (sub-committee) to act as the Local Outbreak Engagement Board. The Leader of the Labour Group has asked that a briefing be sent to the Group leaders after each meeting to keep them informed. The Leader of the Liberal Democrat Group has expressed a view that, given the situation, each opposition party should be represented.

## **5. Decide**

- 5.1 The development of the plan has been based on the national guidance and joint learning from the pandemic both locally, nationally with partners' ie Public Health England and internationally. Circumstances are changing frequently and therefore

the plan will continue to adapt following any new information, learning and action on an ongoing basis.

## **6. Respond**

- 6.1 The development of the outbreak management plan is well underway. It outlines the key requirements and actions needed to implement the plan. The revised Health Protection Forum will oversee refinement of the operational delivery. Public engagement, oversight and assurance for the outbreak management plan will be through the Health and Wellbeing Board as set out in the report.

## **7. Review**

- 7.1 Regular reviews of the Outbreak management plan will be undertaken through the governance arrangements as set out in the report and or if the Government issues new guidance or changes its strategy.

## **Background papers**

Appendix 1. Proposed revised terms of reference for Health Protection Forum

Appendix 2. Proposed governance of Outbreak Management Plan

## **Author**

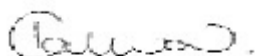


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29 May 2020



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29 May 2020

## **WALSALL HEALTH PROTECTION FORUM TERMS OF REFERENCE**

Revised May 2020

### **PURPOSE**

The purpose of the Walsall Health Protection Forum is to:

- provide an accountability framework for a number of existing partnership groups with a health protection remit and support the establishment of new groups where appropriate. The Health Protection Forum will receive assurance from the following:
  - Public Health England
  - Walsall Clinical Commissioning Group
  - Local Health Resilience Forum
  - Health Care Associated Infection Steering Group (infection control)
  - Sexual health
  - NHS England - Screening and Immunisation Team
  - Environmental Health
  - Pollution Control
  - Drugs and Alcohol services
- facilitate a co-ordinated strategic approach to health protection issues in Walsall
- receive assurance from the subgroups regarding
  - Appropriate strategies/plans and testing arrangements
  - Progress against outcomes
- review all significant incidents/outbreaks to identify lessons learned and to make recommendations to commissioners/providers/partners regarding necessary changes
- receive and review risk registers from all subgroups, make recommendations to subgroups regarding mitigating actions and to commissioners where appropriate
- encourage continuous quality improvement in health protection services in Walsall
- provide health protection input into the JSNA
- To act as conduit to the Health and Wellbeing Board providing assurance of local plans in relation to outbreaks of SARS CoV 2 in Walsall through the local Health Protection partnerships (2014 *Health Protection in Local Government* guidance)
- To provide operational oversight and delivery in relation to outbreaks of SARS CoV 2 in Walsall.



## **MEMBERSHIP**

- Director of Public Health
- Consultants in Public Health
- Public Health England, Consultant in Communicable Disease Control
- NHS England Screening and Immunisation Coordinator
- Screening and Immunisation Lead
- Sexual Health Commissioner
- Drugs and Alcohol Services Commissioner
- Emergency Planning Officer
- Environmental Health Lead
- Pollution Control Lead
- General Practitioner
- TB Lead
- Heads of Infection Prevention and Control
- Health Protection practitioners
- CCG Lead Nurse (or representative)
- Senior Public Health Intelligence Team (analysis/trends)

## **QUORUM**

A minimum of 6 members that should include the DPH and/or Consultant lead for Health Protection, health protection practitioners and representatives from subgroups/work streams (or a suitable deputy).

## **ACCOUNTABILITY AND REPORTING FRAMEWORK**

The group will report to the Health and Wellbeing Board at Walsall Council. The group will also report to the Quality and Safety subgroup of Walsall CCG Board on a monthly basis.

## **FREQUENCY OF MEETINGS**

The group will meet via teams on a monthly basis during the coronavirus pandemic. Ad hoc meetings may be required, should an urgent need arise.

The administrative team of the Director of Public Health will produce minutes.

Meeting papers will be circulated 7 days ahead of meetings, with minutes circulated in a timely fashion to members following each meeting.

## **CHAIR**

The Director of Public Health will chair the Health Protection Forum.

## **REPORTS**

Each subgroup will be expected to submit a short update report 10 days prior to the Health Protection Forum to allow time for collation and circulation to the group.

It is expected that the focus of feedback at the meeting will be on exception reporting.

## **STANDING ITEMS**

Standing agenda items for each work stream/subgroup will include summary of current situation, progress against outcomes, incidents managed and changes made, risks, and suggestions for improvement.

## **ROTATING ITEMS**

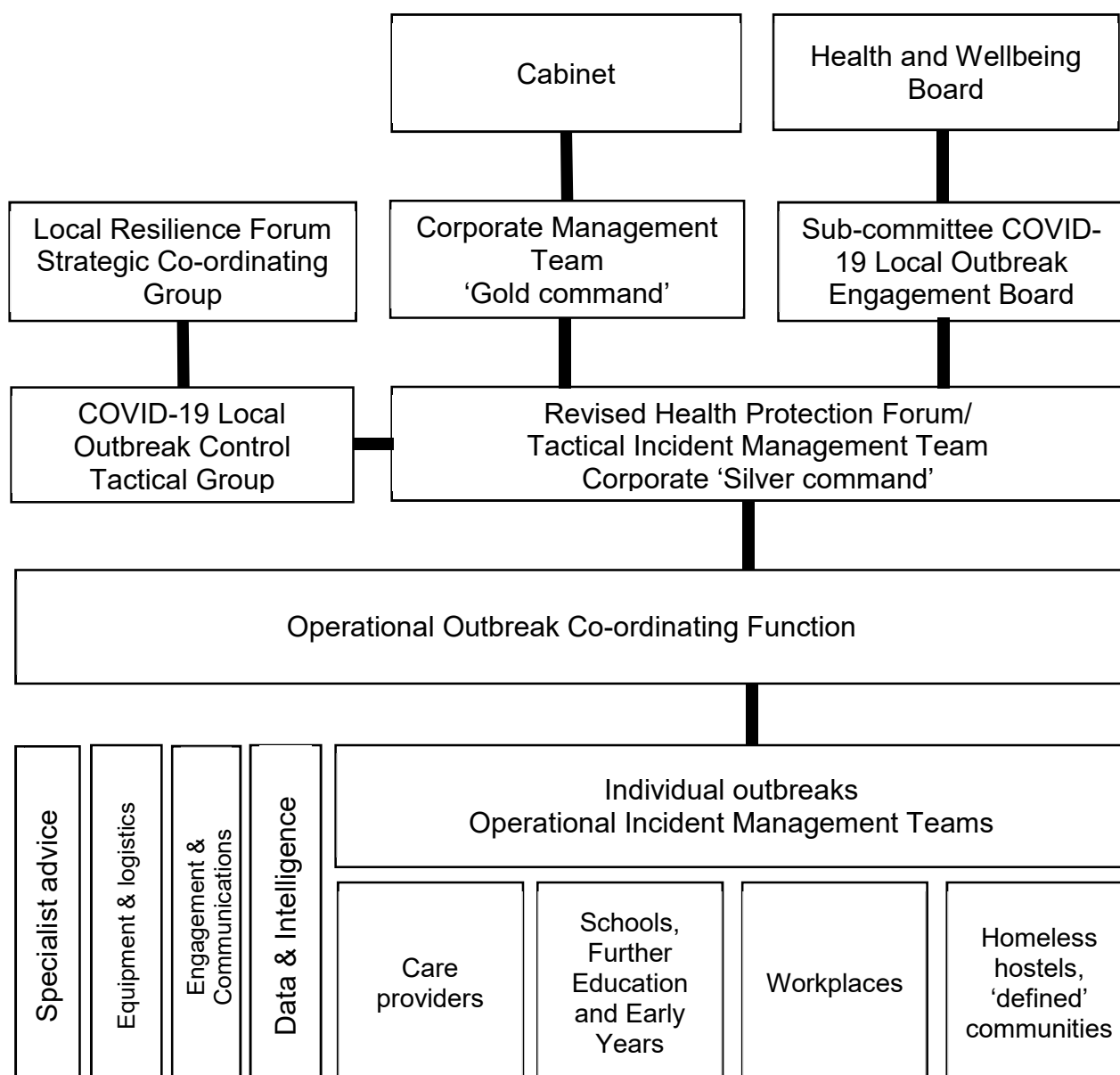
On an annual basis, representatives from each of the work streams/subgroups are expected to present an annual review which will include (in addition to the items detailed above) details of new policies and developments, as well as progress against action plans in existence.

## **REVIEW**

The terms of reference will be reviewed in September 2020.

### Proposed Governance of Outbreak Management Plan

1. Governance of Local Outbreak Control will seek to ensure that:
  - a) The Local Outbreak Management Plan is supported by all of the partners who may be required to contribute to implementation
  - b) There is robust monitoring of progress of management of outbreaks individually and collectively
  - c) There is multiagency oversight of management of outbreaks and the ability to escalate for mutual aid if necessary
  - d) We can continually reflect, learn and improve
  - e) There is democratic oversight of management of outbreaks, which contributes to effective public communication
2. The components of governance are set out below. It includes revised Health Protection Forum and a COVID-19 Member Led Local Outbreak Control Board.



### **Operational outbreak co-ordinating function**

3. This function provides the operational management of the Outbreak Management Plan. It will primarily:
  - a) Develop and continually review the Local Outbreak Control Plan
  - b) Ensure that appropriate and up to date Standard Operating Procedures are in place for outbreak management
  - c) Oversee management of outbreaks
  - d) Provide assurance about management - and
  - e) To reflect on learning from outbreaks to identify improvements for future management and amend SOPs accordingly and/or identify additional capacity requirements.
4. Membership will include the Council, Clinical Commissioning Group, Walsall Together Partners, Police and PHE. Membership will be reviewed as appropriate.

### **Revised Health Protection Forum**

5. The revised Terms of Reference including membership are shown in Appendix 1. This group will be chaired by the Director of Public Health and aims to:
  - a) Set system-wide framework for Local Outbreak Management Plans
  - b) Provide multi-agency and multi-professional input into development of Local Outbreak Management Plan
  - c) Ensure Local Outbreak Management Plans are consistent with resources available from all agencies
  - d) Provide assurance to the SCG about management of outbreaks - and
  - e) Provide a route for escalation for mutual aid if necessary.

### **COVID-19 Local Outbreak Engagement Board**

6. This group is required as part of Local Outbreak Management Plans. Its outline terms of reference are to ensure:
  - a) Democratic oversight of Local Outbreak Management Plan development and the management of outbreaks collectively
  - b) Effective communication with the public about the management of outbreaks.
7. The Cabinet Member for Health and Wellbeing will chair the group. Membership will be members from the Health and Wellbeing Board as determined by the Board and others as appropriate. Additional members may be invited depending on those parts of the borough worst affected by COVID-19 and membership will be reviewed continually.
8. The group will maintain a close dialogue with the Leader and Cabinet for strategic oversight.