

25 April 2022

Agenda Item: 6

REPORT OF DIRECTOR OF PUBLIC HEALTH

LIVING SAFELY WITH COVID-19 IN NOTTINGHAMSHIRE

Purpose of the Report

1. Inform Committee of arrangements for managing local outbreaks of COVID-19 including deployment of the COVID-19 Response Team in line with outbreak management priorities identified in national guidance, and arrangements for overseeing the wide-ranging health protection functions exercised by organisations in Nottinghamshire.
2. Update Committee on the 2021-22 year-end expenditure of the Contain Outbreak Management Fund and the plan for allocating it in 2022-23 to reduce the vulnerability of communities arising from COVID-19 and other viruses.
3. Recommend the disestablishment of the Council's COVID-19 Local Outbreak Control Engagement Board and authorise the Director of Public Health to determine the need to re-establish such a Board or equivalent in future if circumstances require it.

Context

4. The uptake and effectiveness of vaccines against severe illness associated with COVID-19 have resulted in the reduction of complications, hospitalisation and deaths arising from infection with COVID-19.
5. As a result, the Government published *COVID-19 Response: Living with COVID-19* in February 2022, in which it set out its intentions to protect and support people by enabling society and the economy to open up, whilst continuing to support the NHS and social care sector. National guidance covering a wide range of settings and topics related to COVID-19 has been updated in line with the intentions set out in *Living with COVID-19*.
6. From the outset, *Living with COVID-19* emphasises that the global pandemic is not over and underlines the advice of the Government's Scientific Advisory Group for Emergencies (SAGE) that there is considerable uncertainty about the path that the pandemic will now take in the UK. It is likely that we will see further waves of transmission due to changes in immunity and/or the emergence of new variants, but the scale, timing and severity of any further waves is uncertain. Over time, it is likely that COVID-19 will become a predominantly winter seasonal illness, with some years seeing larger levels of infection than others. However, this may take several years

to occur and for the present time, there continues to be significant numbers of cases and fluctuating levels of people hospitalised.

National strategy for COVID-19

7. It is in this context that *Living with COVID-19* and the associated national guidance identifies that the Government's objective in the next phase of the pandemic is: "to enable the country to manage COVID-19 like other respiratory illnesses, while minimising mortality and retaining the ability to respond if a new variant emerges with more dangerous properties than the Omicron variant, or during periods of waning immunity, that could again threaten to place the NHS under unsustainable pressure".
8. Key pillars of this strategy include:
 - a) Ongoing surveillance (but without the timely signal previously provided by a whole-population symptomatic testing programme), coupled with the ability to respond to future emergencies by reintroducing widescale vaccination and testing.
 - b) Protecting groups who are most vulnerable through vaccination and targeted testing.
 - c) Encouraging safer behaviours through public health advice and through response arrangements which are in common with longstanding approaches of managing other respiratory illnesses.
9. *Living with COVID-19* has also heralded a move away from deploying regulations and requirements and an increasing emphasis on public health measures and guidance.
10. In terms of outbreak management at a local level, the Government has revised COVID-19 outbreak management advice and frameworks to set out the support that local authorities and other system partners (such as Local Resilience Forums, UK Health Security Agency (UKHSA) regional health protection teams, the NHS and others) can expect from regional and national stakeholders, and the core policy and tools for contingency response. The explicit expectation is that local and regional management of COVID-19 will be: "using existing health protection frameworks".
11. Therefore it is expected that UKHSA's local health protection team will retain responsibility and the necessary capacity to lead on the management of outbreaks of COVID-19 and other communicable disease hazards. It should be noted that, in her 24 February letter, UKHSA's Chief Executive has underlined to Directors of Public Health that UKHSA's local health protection teams will be: "asked to focus their [COVID-19] outbreak investigation activities on high-priority and complex cases. This may mean some settings will no longer receive the same level of reactive support as they did previously."

Local outbreak management

12. Arrangements for managing outbreaks of communicable disease are described in Public Health England's¹ East Midlands Outbreak Management Plan, which sets out the roles of the responsible parties and the key processes.

¹ UK Health Security Agency (UKHSA) is the successor organisation to Public Health England and Directors of Public Health are advised that, for the time being, any local health protection duties and processes previously undertaken by PHE are currently the responsibility of UKHSA.

13. As the successor organisation to Public Health England, UKHSA has responsibility for providing specialist health protection and public health microbiology services and ensuring that there is coordinated management of incidents and outbreaks. More specifically, the Plan states that normally this includes:
- a) Responding to and managing outbreaks and incidents;
 - b) Responding to cases, enquiries and providing specialist health protection advice;
 - c) Surveillance and epidemiological investigation of outbreaks;
 - d) Providing leadership for health protection issues;
 - e) Advice on the requirement for and sourcing of prophylactic treatment and immunisation for all health protection incidents.
14. The plan sets out the responsibility of the Director of Public Health (DPH) for the Local Authority contribution to health protection matters, including preparing for and responding to incidents that present a threat to public health. This includes working with the East Midlands Health Protection Team to provide local leadership in responding to communicable disease incidents and outbreaks.
15. In relation to areas covered in the plan, the DPH should:
- a) Be the person to whom Elected Members and senior officers look for leadership, expertise and advice on outbreaks of disease and health emergency preparedness.
 - b) Work through the Local Resilience Forum to ensure effective and tested plans are in place for the wider health sector, to protect the local population from risks to its health.
16. In regard to COVID-19 more specifically, the latest national guidance identifies that the outbreak management priorities to which local authorities should contribute include:
- a) Continuing with COVID-19 outbreak management in settings identified to be high risk.
 - b) Supporting outbreak investigation and management in other settings as needed.
 - c) Supporting a range of settings to reduce the risk and impact of outbreaks (now including COVID-19 alongside other respiratory illnesses).
 - d) Engaging with communities to support public health messaging and behaviour change, including work with local partners, employers and with vulnerable people in their community through tailored and targeted communication. This includes continuing to promote positive behaviours that can reduce the transmission of respiratory and other viruses.
17. It is this latest guidance together with other existing frameworks which provide the parameters for planning the outbreak management activities to be undertaken by Nottinghamshire County Council in 2022-23.

Priorities for the COVID-19 Response Team

18. The move to *Living with COVID-19* has resulted in a rapid change in current outbreak management activity within the COVID-19 Response Team located in the Public Health division. Consequently, the team is now able to refocus its activity to align with the outbreak management priorities identified in national guidance. This will mean that Nottinghamshire County Council is able to deploy the COVID-19 Response Team to strengthen resilience and protection against a range of hazards, whilst retaining the capacity to contribute to local outbreak response if the scale of an emerging threat requires it.

19. Therefore, current activity includes:

- a) Review of lessons/learning to update COVID-19 operational plans covering scenarios such as the rapid re-implementation of targeted testing.
- b) Work with groups and communities at higher risk from COVID-19, including community engagement and promotion of health and wellbeing.
- c) Develop a flexible resourcing plan to make best use of the COVID-19 Response Team throughout 2022-23, allowing for periods of low activity and potential surge response.
- d) Produce an exit plan for COVID-19 Response Team, ensuring required ongoing activity can be delivered within core business.

20. Some opportunities to free up capacity have been identified. Where this is the case, officers have been assigned to support recovery and resilience for service areas most impacted by COVID-19, ensuring this continues to meet the criteria set out for the use of the Contain Outbreak Management Fund. Examples include:

- a) Development of a County Council webpage to promote wellbeing at work, incorporating *Living with COVID-19* messages, alongside general health and wellbeing promotion.
- b) Supporting a review of the County Council employee flu vaccination programme. The review findings will be used to work with individual teams to understand reasons for vaccine hesitancy and improve engagement to increase vaccine uptake.
- c) Extension of outreach clinics to promote NHS health checks to vulnerable groups (e.g. rough sleepers) who would not routinely access traditional NHS services. This will encourage general health improvement for those most at risk of COVID-19 and other health conditions.
- d) Review of the Community Infection Prevention and Control Service to address lessons learned over the course of the pandemic and develop proposals to strengthen and sustain the service over the long-term.

Contain Outbreak Management Fund

21. As reported to Committee on 24 January 2022, local authorities received confirmation that the Contain Outbreak Management Fund (COMF) could be carried forward into the 2022-23 financial year. Therefore, this fund will continue to be used to support ongoing and new projects to the end of March 2023.

22. In summary, the current position for the COMF is:

- a) Total fund received by Nottinghamshire County Council - £29,479,916
- b) 2020-21 full year spend was £5,311,448
- c) 2021-22 full year spend is £5,769,508*
- d) Total amount committed in 2022-23 is £9,377,664
- e) Current uncommitted Contain Outbreak Management Fund is £9,021,296. This amount is expected to decrease as we continue to support key areas.

* At the time of writing this report, the year-end accounts are being finalised. It is expected that the figure quoted in 22(c) is an accurate reflection of the final year-end spend.

23. Areas of work that are supported by the COMF include:

- a) Establishment of a school's coordinator who worked with the Schools Aged Immunisation Service (SAIS) and partners to undertake pre-engagement work with schools. Communications, webinars and pre-immunisation information packs were produced for schools to help promote the 12–15-year-old COVID-19 vaccination programme.
 - b) Funding of small community projects to enhance the uptake of the COVID-19 vaccine. Bids have been received from local businesses and the community and voluntary sector to support vaccination for under-served, vulnerable and deprived communities with low vaccine uptake. Examples include on-line resources in specific languages, support with transport and dedicated one-to-one assistance for people with severe mental illness and learning difficulties.
 - c) Funding to support the County Council's Maximising Independence Service for the establishment of 3.5 temporary Community Care Officers, following an increased demand for support due to the impact of COVID-19. Individuals aged over 55 years who would not otherwise receive social care and health support, have received advice and signposting to other key services.
 - d) Funding to modify the Sexual Health Service delivery model to create a larger online testing capacity. This allowed individuals to be able to access the service from their own home and receive appropriate intervention and treatment where face to face provision was limited due to COVID-19.
 - e) Funding to increase the capacity of the Public Health Mental Health and Suicide Crisis Service 'Tomorrows Project,' to respond to increased referrals seen during the COVID-19 pandemic.
24. Proposals for investing the COMF are aligned with the priorities for outbreak management identified in national guidance. They centre on strengthening community engagement and include:
- a) Funding for 3 Community Health Champion Coordinators to be established within the Early Help and Support Team in the Place Department, to develop a network of Community Health Champion volunteers who will improve the health and wellbeing within those communities, including supporting the promotion of the COVID-19 vaccination programme: (estimated funding £178,400).
 - b) Deploy capacity freed up from testing activities into a Health and Wellbeing Team undertaking health promotion in under-served communities. The team will work with other service providers to promote those health and wellbeing services and the COVID-19 vaccination programme, alongside positive behaviours which reduce the transmission of respiratory and other viruses. This arrangement will also enable Nottinghamshire to retain key skilled staff that can be redeployed to support the rapid rollout of targeted testing if the need arises: (estimated funding £430,150).

Governance of health protection arrangements in Nottinghamshire

25. COVID-19 represents just one health protection hazard to people in Nottinghamshire. The health protection functions undertaken to protect people in Nottinghamshire cover sexual health, antimicrobial resistance, communicable disease control including COVID-19, tuberculosis, blood borne viruses, gastro-intestinal infection, seasonal and pandemic influenza, infection prevention and control including healthcare associated infections, vaccination and immunisation, environmental hazards (e.g. noise, food safety and air quality), public health advice regarding the planning for and control of pollution, screening programmes (including

cancer screening, antenatal and newborn, diabetic retinopathy and abdominal aortic aneurysm), and emergency planning.

26. These are undertaken by a range of organisations including UKHSA, upper and lower tier local authorities, local NHS organisations and NHS England.
27. In Nottinghamshire, outcomes and arrangements related to these functions have been overseen by a Health Protection Board, jointly chaired by the City and County DsPH comprising senior representatives from the organisations responsible for these functions.
28. As part of the recovery from COVID-19, the remit of the group has been reviewed by the DsPH to ensure that its focus and membership reflect the range of health protection hazards and recent reforms to the local NHS and public health system. The revised terms of reference explicitly identify COVID-19 as being within its scope. In Nottinghamshire County, the Health Protection Board will continue to report into the Health and Wellbeing Board.

Disestablishing the COVID-19 Local Outbreak Control Engagement Board

29. The COVID-19 Local Outbreak Control Engagement Board was established in summer 2020 as an informal partnership board. Its purpose was to provide political ownership and governance for the local response, secure local approval to the COVID-19 Local Outbreak Management Plan, and to ensure effective oversight and communication of the Plan, and public facing engagement regarding the response to any outbreaks.
30. There has been no requirement for the Board to meet since July 2021. The local response has been conducted on a 'business as usual' basis, within the protocols of the Local Resilience Forum. The objective for which the Board was originally convened is fulfilled.
31. The implementation of *Living with COVID-19* (with its intention that COVID-19 is managed like other respiratory illnesses) means that this is unlikely to change, on the basis of what is known at present. It is also noted that the renewal of the Nottinghamshire Health Protection Board with a remit that includes COVID-19 provides an effective structure through which to oversee arrangements for local outbreak management.
32. Furthermore, there remains the ability to recreate and remobilise the Board, or an arrangement like it, if for any reason this pandemic or a similar threat were to arise requiring oversight and engagement which was not felt to be best delivered through existing structures.
33. Therefore, it is recommended that the COVID-19 Local Outbreak Control Engagement Board is disestablished.

Reasons for Recommendations

34. Subject to any changes in expected further guidance, Government strategy seeks to move the management of COVID-19 to an approach that is similar to that for other respiratory illnesses, without the need for legal enforcement and other special measures.
35. Existing policies and frameworks together with the renewal of the Nottinghamshire Health Protection Board provide proper arrangements for securing good outcomes and arrangements regarding COVID-19 (and other health protection hazards).

36. The objective for which the COVID-19 Local Outbreak Control Engagement Board was convened is fulfilled.

Statutory and Policy Implications

37. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public-sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability, and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

- 1) That Committee note the arrangements for managing local outbreaks of COVID-19 including the deployment of COVID-19 Response Team in line with outbreak management priorities identified in national guidance, and arrangements for overseeing the wide-ranging health protection functions exercised by organisations in Nottinghamshire.
- 2) That Committee note the 2021-22 year-end expenditure of the Contain Outbreak Management Fund and approve the development of a plan for allocating it in 2022-23 to reduce the vulnerability of communities related to COVID-19 and other viruses.
- 3) That Committee approves the disestablishment of the Council's COVID-19 Local Outbreak Control Engagement Board and authorises the Director of Public Health to determine the need to re-establish such a Board or equivalent in future if circumstances require it.

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Constitutional Comments (CH 24.03.2022)

38. The recommendations fall within the remit of Adult Social Care and Public Health Committee under its terms of reference

Financial Comments (DG 08.04.2022)

39. The value of the COMF to carry forward into 22/23 is circa £18.4m of which £9.4m is current committed spend. This will fund in NCC, 3.5 CCO's in the MIS service, increase the Sexual Health Service delivery model, and increase capacity to the Public Health Mental Health and Suicide Crisis Service. There will also be funding for 3 Community Health Champion Coordinators to be established within the Early Help and Support Team in the Place Department (£178,400) and also to deploy testing staff into a Health and Wellbeing Team (£430,150).

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- None

Electoral Division(s) and Member(s) Affected

- All will be affected