

MEDWAY HEALTH AND WELLBEING BOARD

2 SEPTEMBER 2021

COVID-19 LOCAL OUTBREAK MANAGEMENT PLAN BRIEFING

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Summary

This report will provide an update on the Local Outbreak Management Plan (LOMP) including top-level outcomes of recent stress tests made since the last update was presented to the Board on 17 June 2021.

1. Budget and Policy Framework

- 1.1. As part of the Department of Health and Social Care's COVID-19 response and recovery strategy, Upper Tier and Unitary Local Authorities in England were mandated to develop a COVID-19 Local Outbreak Management Plan (LOMP) - formerly known as the COVID-19 Local Outbreak Control Plan - to reduce the spread of the virus within the community.
- 1.2. On 25 February 2021, Department of Health and Social Care (DHSC) requested that the Local Outbreak Management Plan be updated to reflect the changed landscape of the pandemic and to consolidate the best practice that has emerged locally in its first year through the creation of a Best Practice Document. The objectives of these updates are outlined below:
 - To ensure that updated fit for purpose local outbreak management plans is in place across England
 - To identify any additional support Local Authorities may need from national or regional teams, particularly in relation to surge activity to detect new variants
 - To identify good practice and local and regional level– most particularly in respect to Non-Pharmaceutical Interventions (NPIs) that can be used to reduce/prevent transmission of the virus and use this learning to inform regional and national policy

- To ensure there is effective governance and clarity on roles/responsibilities at all levels of response
 - To ensure Local Outbreak Management Plans reflect cross-cutting considerations, such as inequalities
 - To provide ongoing assurance and justification of the need for financial support from the Contain Outbreak Management Fund (COMF) and self-isolation fund
- 1.3. The current Medway [Local Outbreak Management Plan](#) last updated 16 April 2021 is publicly available on the Medway website. Revisions and updates to the LOMP are currently underway and are being informed by the [COVID-19 Contain Framework](#), recently updated on 30 July 2021. The contain framework sets out how national, regional, and local partners will work with each other, the public, businesses, institutions, and other local partners in the community to prevent, contain and manage COVID-19 outbreaks.
- 1.4. Local authorities receive additional funding from central government through the Contain Outbreak Management Fund. This funding is directly allocated to support delivery of the objectives set out in the Contain Framework.

2. Background

2.1. ***Responding to the Rise in Cases Nationally and Locally***

- 2.1.1. Rates of COVID-19 in the UK and Medway have increased since the Medway Health and Wellbeing Board last convened. This increase in cases has been accredited to a variant of concern (VOC) namely the Delta variant which has been shown to demonstrate increased transmissibility of COVID-19. However, with a sufficiently high proportion of the population vaccinated and evidence to suggest that vaccination reduces the risk of acquiring infection, getting as many people vaccinated as possible will enable the country to return to a level of normality. There will however be a need to still be conscious of the potential risks posed by COVID-19 and have the capability to provide a proportionate response if required.
- 2.1.2. England is current in Step 4 of the National Roadmap. On 5 July the Government published the ['Moving to Step 4 of the Roadmap'](#) which sets out the essential actions that everyone should take to protect themselves and others while prevalence is high as we transition towards learning to live with COVID-19. This Step has seen the end of all legal limits on social contact, the reopening of nightclubs, large events, and performance venues. This step additionally has seen the removal of limits on weddings and other major life events. The decision to move to Step 4 was taken on the basis of an assessment of the four tests established by central government. These were:
- The rollout of the national vaccine programme continues successfully
 - Evidence showing vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated

- Infection rates do not risk a surge in hospitalisations and therefore do not put unsustainable pressure on the NHS
- Assessments of the risks is not changed fundamentally by new Variants of Concern

2.1.3. The move to Step 4 of the National Roadmap has marked a new phase in the Government's response to the pandemic, moving away from stringent restrictions on individuals' day-to-day lives, towards advising people on how to protect themselves and others. Central government has set out additional steps to manage the risks associated with the move to Step 4. These include:

- Reinforcing the country's vaccine wall of defence through additional booster jabs and increasing uptake in areas where vaccine coverage is low
- Retaining proportionate test, trace, and isolate plans in line with international comparators
- Managing risks at the UK border and supporting a global response to reduce the risk of variants emerging globally and entering the UK
- Retain contingency measures to respond to unexpected events

2.1.4. Since the start of the coronavirus pandemic and initial control measures used to reduce transmission of the virus, there have been significant changes to circulating strains affecting local communities. To date, four major Variants of Concern (VOCs) have shown signs of transmission within the population; most notably VOC B.1.1.7 (first potentially identified in Kent in December 2020). This variant became the dominant form of COVID-19 in circulation nationally. Two subsequent variants, first identified in South Africa (VOC B.1.351) and Brazil (VOC P.1), have also been sequenced within UK borders. They are monitored closely due to their potentially vaccine resistant qualities. All novel variants have shown signs of being more transmissible and potentially more deadly compared to the original COVID-19 pathogen. The most recent VOC (B.1.617.2-Delta) was first identified in India on 21 April 2021. This variant is now the dominate circulating strain in the UK. No surge testing for new variants has been required or undertaken in Medway. Detailed information on new variants can be found on the [website for the Centres for Disease Control and Prevention \(CDC\)](#).

2.1.5. In addition to current National Spring Roadmap, the Director of Public Health (DPH) continues to take several other measures to limit the spread of COVID-19 in Medway including:

2.2. ***Asymptomatic Testing***

2.2.1. Medway Council continues to provide a flexible and dynamic mode of testing comprising a hybrid model of outreach, home direct online testing, and community pharmacy access. These alternative, more holistic models have enabled Medway to better serve the needs of its community. All Medway Residents are able to access testing in more convenient ways, including

online home test kits, workplace testing, and pharmacy collect options. Multiple pop-up sites and a new collection-only site located in ME1 1EW Rochester are also available to meet local requirements. This has led to greater efficiencies within the testing programme, facilitating a reduction of fixed sites from 5 in Medway to 1. The exact address of this permanent testing site is:

- The Student Hub (The Deep End), North Chatham Maritime, Chatham, ME4 4AG

2.2.2. This initiative is operating in accordance with a framework provided by the Department of Health and Social Care. The testing programme initially prioritised hotspot areas where disease transmission was highest. As the disease was brought under control, access was rolled-out to those unable to work from home. The programme is now ubiquitous as mentioned in Section 2.2.1 above. All Medway residents are encouraged to undertake symptom-free testing twice per week in line with government guidelines.

2.3. ***The Vaccination Programme***

2.3.1. The management and roll-out of the vaccination programme is the responsibility of the Department for Health and Social Care (DHSC). Medway Council is working closely with stakeholders from the DHSC to support them in meeting their vaccination targets for the local area. To date, this programme has offered vaccination to the following key groups identified by the Joint Committee on Vaccination and Immunisation (JCVI):

- All residents in a care home for older adults and their carers;
- All those 80 years of age and over and frontline health and social care workers;
- All those 75 years of age and over;
- All those 70 years of age and over and clinically extremely vulnerable individuals;
- All those 65 years of age and over;
- All individuals aged 16 years to 64 years with underlying health conditions which put them at higher risk of serious disease and mortality;
- All those 60 years of age and over;
- All those 55 years of age and over;
- All those 50 years of age and over
- All those aged 18 and over*

2.3.2. As set in the prioritisation list in section 2.3.1. above, the first phase of the programme has been completed. *Currently, the programme is at phase 2 where the vaccine is being offered to those aged 18 and above in England. From 4 August 2021, all 16- and 17-year-olds are also advised to receive their first dose of the Pfizer-BioNTech vaccine. Work is currently underway to ensure all those aged 16/17 are offered and take up vaccination, before returning to an educational setting following the summer break. Children aged 12 to 15 with specific underlying health conditions that put them at risk of severe COVID-19 are advised to receive two doses of Pfizer-BioNTech

vaccination with an interval of 8 weeks between doses. All conditions are currently listed in the [Green Book](#). Anyone who, for whatever reason, was missed in priority groups 1-9 (section 2.3.1) is also being offered the vaccine.

- 2.3.3. On 30 June 2021 the JCVI has been asked to consider the option for a potential COVID-19 booster programme for 2021 to 2022 by reviewing the emerging evidence on the need for and timing of an additional vaccine dose. The JCVI's interim advice is that any potential COVID-19 booster programme should be offered in 2 stages from September, starting with those most at risk from serious disease. This includes care home residents, people aged over 70, frontline health and social care workers, clinically extremely vulnerable adults and those who are immunosuppressed. In stage 2, groups to be offered a booster dose include all adults aged 50 years and over, all adults aged 16 to 39 years who are in an influenza or COVID-19 at-risk group and adult household contacts of immunosuppressed individuals. This is in order to maximise individual protection and safeguard the NHS ahead of winter. All groups would also be eligible for the annual flu vaccine and are strongly advised to have the flu vaccine.
- 2.3.4. From 16 August 2021 as part of Step 4 of the Government's COVID-19 roadmap, individuals who are identified as a contact of a confirmed case of COVID-19 in England, will be exempt from the legal duty to self-isolate if they meet one of four exemption criteria:
- Individuals who have been vaccinated in line with an MHRA vaccine and recommended schedule at least 14 days prior to contact with a positive case
 - Children and young people under the age of 18 years and 6 months
 - Clinical trial participants: those who have taken part in- or are currently taking part in- an MHRA approved COVID-19 vaccine clinical trial
 - Medical exemptions: those who can evidence that they cannot be vaccinated for medical reasons
- 2.3.5. Vaccines are currently delivered by two types of vaccination sites:
1. Vaccination centres – using large-scale venues such as football stadiums; accessed via a national booking service
 2. Local vaccination services – made up of sites led by general practice teams collaborating via pre-established primary care networks and pharmacy teams through community pharmacies.
- 2.3.6. All vaccination delivery options are available in Medway.
- 2.3.7. As of 20 August 2021, 47,460,526 people in the UK have been inoculated with their first dose of vaccine. While in Medway as of 20 August 2021, around 182,936 people have received their first dose of vaccine with second doses at 157,266.

2.4. ***Monitoring Events over the Course of the National Spring Roadmap***

- 2.4.1. In light of the easing of restrictions and movement into Step 4 of the Government roadmap, events in Medway are allowed to take place in a COVID-secure manner following a completed health and safety risk assessment that includes risks from COVID-19 and putting measures in place to reduce the risk of transmission. Mass gatherings and events scheduled later in the year will continue to be risk assessed by the Public Health Team and COVID-19 Enforcement and Restrictions Cell.

3. Risk Management

- 3.1. By running stress test exercises on a variety of scenarios related to the LOMP, we aim to minimise the risks associated with similar events occurring by (i) identifying any gaps within the LOMP, (ii) creating awareness of the communication channels that exist between the agencies, (iii) creating awareness of the roles of different agencies, (iv) clarifying the escalation triggers and process, (v) identifying areas where additional support may be required, (vi) identifying any potential challenges and their solutions and (vii) identifying actions that need to be taken and when.

4. Consultation

- 4.1. Stress Testing the LOMP, as described in paragraph 3.1 of the report, has, and continues to be undertaken in consultation with partner agencies across Kent and Medway as well as stakeholders from other local authority areas where relevant. Stakeholders from national agencies are also invited where relevant.

5. Financial Implications

- 5.1. Initial funding was provided through the Test, Track & Trace Support Grant using 2020/21 Public Health allocations as a basis for distribution. Funding continued throughout 2020/21 through the Contain Outbreak Management Fund. The COMF was extended to June 2021 (to cover expenditure incurred during 2021/22) although now encompasses support for compliance and enforcement activities that were previously delivered through alternative grant funding streams. In addition, the DHSC have committed to fully fund the cost of the testing programme until the end of June 2021, with a revised mechanism for claiming the costs of the testing programme from July 2021 onwards.
- 5.2. Monitoring and oversight of expenditure is managed via the Contain Programme Regional Convenor for the South-East. There is a detailed framework that sets out the key areas that can be funded; these will evolve over time and are tailored to local need.
- 5.3. As mentioned in paragraph 1.2, the LOMP updates requested by the DHSC were made to inform how monies from the Contain Outbreak Management Fund (COMF) should be allocated going forwards on a 'greatest need' basis.

6. Legal Implications

- 6.1. Medway Council, under the leadership of the Director of Public Health, has a statutory duty to protect the population's health by responding to and managing communicable disease outbreaks which requires urgent investigation and presents a public health risk.
- 6.2. The legal context for the councils' response to COVID-19 sits within the following Acts:
- The Coronavirus Act 2020
 - Health and Social Care Act 2012
 - Public Health (Control of Disease) Act 1984
- 6.3. As part of the Department of Health and Social Care's COVID-19 response and recovery strategy, Upper Tier and Unitary Local Authorities in England were mandated to develop a COVID-19 Local Outbreak Management Plan to reduce the viruses' spread.
- 6.4. The Health Protection (Coronavirus, Restriction) (Steps) (England) (No.364) Regulations 2021 came into force on 29th March 2021, setting out the National Spring Roadmap and giving the DPH authority to apply step-by-step restrictions, close individual premises and public outdoor places as well as restrict events with immediate effect if they conclude it is necessary and proportionate to do so without making representations to a magistrate. The DPH is required to notify the Secretary of State as soon as reasonably practicable after the direction is given and review to ensure that the basis for the direction continues to be met, at least once every 7 days.
- 6.5. The Government made the decision to move to Step 4 of the National Spring Roadmap on 19th July 2021, removing many of the restrictions previously in force.
- 6.6. [The Health Protection \(Coronavirus, Restriction\) \(England\) \(No.3\) Regulations 2020](#) which came into force on 18 July 2020 will continue to apply until the end of 27 September 2021. These regulations grant powers to local authorities to make directions which respond to a serious and imminent threat to public health. Any direction must be necessary and proportionate in order to manage the transmission of coronavirus in the local authority's area. The regulations contain powers for local authorities to give directions which:
- restrict access to, or close, individual premises
 - prohibit or restrict certain events (or types of events)
 - restrict access to, or close, public outdoor places (or types of outdoor public places) following procedural requirements set out in the regulations.

The powers may be used up to the date of expiry, 27 September 2021. A local authority must review a direction it has issued under the regulations at

least once every 7 days and determine whether the legal conditions stipulated in the regulations for making the direction continue to be met.

7. Recommendation

- 7.1. The Health and Wellbeing Board is asked to note the update presented in the report.

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Appendices

None

Background papers

None