



Minutes

Title of meeting	Pandemic Influenza Co-ordination Group (PICOOG)
Date	26 July 2019
Time	14:00
Venue	1B10/Skype
Attendees	Mary Ramsay (MR, Chair), Gavin Dabrera (GD), Richard Pebody (RP), Eamonn O'Moore (EOM), Deborah Turbitt (DT), Maria Zambon (MZ), NR , Gareth Thomas (GT), George Leahy (GL)
Apologies	Charles Beck (Field Service)

1) Approval of minutes, review of actions and matter arising

The minutes of the previous meeting were accepted as accurate with minor corrections.

Review of actions from the last meeting

Action	Status
Action 6.1: GD to update the document about doing an update for the PHE Pandemic Flu Plan, adding additional clarity about what is expected from PICOOG.	Complete and sent out.
Action 6.2: for PICOOG members to make comments/sense check this (NHSE proposal for how swabbing and virological investigations could be commissioned in the early days of a pandemic), before it goes to the PIPP board. Comments by end of February. Once comments received, go to NHS E, and then to PIPP if they will not take responsibility for funding.	No comments were received but will keep as an action as we are waiting for approval on the NHS-E side. See item 3 for more information.
Action 6.3: MZ to hold offline discussions about assurance of laboratory testing.	See lab update
Action 6.4: Nam to identify who is the most appropriate representative from marketing.	Complete: Name Redacted leads on flu in marketing
Action 6.5: MZ to chase up with Na what happened at the meeting, and is there anything else this group needs to be aware of.	See lab update

2) PHE Pandemic Flu Plan Update (Gavin Dabrera)

GD has prepared a paper on Outline Specific Functions; as this is a draft, the divisions listed in the document are in no particular order. GD thanked those who have already contributed; GD still waiting for a few more sections of PHE to contribute. Noted that the challenge is that some PHE structures have changed significantly since the last PHE pandemic flu plan was published so we have to reorganise the document in that respect (e.g. NIS was formed since the last plan was published). Once the content is agreed in draft form within PICO, the aim is to include a head count of available staff in PHE to have some assurance that we have sufficient capacity to deliver the functions outlined. Once we have more detail on functions, each division will therefore be asked to estimate the head counts required and available to inform whether resource would need to be moved about at the time of a pandemic. This head count will not be published but is important for appropriate internal planning.

There are still some outstanding revisions required to the Communications section and to reallocate some of the immunisation work into Data and Analytical Sciences (DAS). We also need contributions from Finance, Marketing, and the People Directorate. As no one from Finance or the People Directorate attend these meetings, we need to identify individuals from these areas to attend these meetings and contribute to the document.

Action 7.1: [NR] to speak to [Name Redacted] to see where they are up to regarding their contribution to the Communications section of the Outline of Specific Functions document for the PHE Pandemic Flu Plan Update.

Action 7.2: Secretariat to email [Name Redacted] in Marketing for a contribution to the Outline of Specific Functions document for the PHE Pandemic Flu Plan Update

Action 7.3: GD to identify individuals from Finance, Marketing, and the People directorate to attend these meetings and contribute to the PHE Pandemic Flu Update

EOM raised the issue of HR processes in the event of a pandemic response, it will be important for staff from other directorates to support an incident. GL mentioned there has been a similar issue with staff working on EU exit and we could approach HR for some clarification [NR] is leading the EU exit HR processes but [NR] is the overall lead). Apparently, there is a new policy around incident management that explains what terms and conditions can be applied and applies to all staff (except those on medical and dental contracts as the Local Medical Committee (LMC) has not agreed it).

Meeting agreed that we will probably need HR on this group, when we go through the final plan, to confirm that we can identify and redeploy staff onto a pandemic incident.

Action 7.4: MR to write to [NR] to say that we need HR to engage with the pandemic plan and need someone on it to contribute to the plan.