

Pandemic Influenza Preparedness – Senior Officials Meeting with Welsh Government, DHSC and Cabinet Office – Cardiff, 14 June 13.00-15.00

Attendees

Attendees from the Welsh Government:

- Frank Atherton - Chief Medical Officer
- ~~Ren Kilpatrick~~ - Director for Local Government
- **NR** - Deputy Head of Community Safety Division, Local Government Department
- David Goulding - Emergency Planning Advisor

Attendees from the Cabinet Office:

- Katharine Hammond, Director, Civil Contingencies Secretariat
- **NR** Assistant Director, High Priority Projects, Civil Contingencies Secretariat

Attendees from the Department of Health and Social Care:

- Emma Reed, Director, Emergency Preparedness and Health Protection Policy
- **NR** Head of High Consequence Infectious Diseases and Pandemic Influenza Policy

National Risk Assessment / H7N9

- **NR** provided an update on the pandemic influenza entry in the forthcoming National Security Risk Assessment (N(S)RA). It was noted that the number of excess deaths will increase as a result of population growth. In addition, mental health impacts will be considered for the first time in the N(S)RA because there is an associated capability requirement. Mental health impacts will now be included for all relevant risks, not only pandemic influenza.
- **Action** – CCS National Risk Assessment Team to share more information with DG on mental health impacts in the forthcoming N(S)RA. *Post meeting note – information shared on 19 June.*
- KH outlined the new style N(S)RA and how the risk matrix of the two products will now be combined. As a result, there will be some shifts in where risks sit on the table. An influenza pandemic is, however, expected to remain a top risk.
- **NR** provided an update on the current risk picture and noted that there have been 1,567 human cases of H7N9 over 6 winters. 45% of these cases were in the fifth wave. The New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) has stated H7N9 is the strain with the most pandemic potential at present. The case fatality rate is very high c. 38%. To date there has been very limited human to human transmission. In the sixth wave there has only been three cases, which may be as a result of the poultry vaccination campaign. Close monitoring continues. In addition, there are further discussions about the impact of the vaccination campaign from an animal health perspective e.g. could it result in the virus mutating. DEFRA has noted that H7N9 has been seen in poultry but not in the migratory wild bird population to date.

- KH updates on the timetable for the finalisation of the new N(S)RA, with the intention to complete towards the end of this year.

Pandemic Influenza Preparedness – Pandemic Flu Readiness Board Programme

- **NR** asked whether any vulnerability mapping had been conducted as part of the sector resilience work. **[Name Redacted]** spoke about the challenge panels and noted that it has been beneficial particularly to clarify response arrangements e.g. around the use of the military / vaccine availability etc.
- DG noted that in the Welsh Government has established a group to consider the outcomes of the UK review and co-ordinate Wales actions to implement any necessary changes in Welsh planning. The group includes Welsh Government officials involved in the UK review, specialist advice from Public Health Wales and the chairs of the Welsh LRF Pandemic Flu Groups.

Products

- DG asked about the outputs from the Pandemic Influenza Readiness Board (PFRB) programme including the 2011 Strategy refresh and plans to update the 2013 LRF guidance.
- The 2011 Strategy refresh is a scheduled year 2 PFRB product. While a refresh of the 2013 LRF guidance is needed, this is not currently scheduled in year 2 of the programme primarily due to resource availability. In terms of timing, there would be limited benefit in refreshing it ahead of the Strategy given the cross-references needed between the two documents.
- KH suggested a co-production model for the refreshed pandemic influenza LRF guidance, including a first draft. KH noted that there have also been discussions with MHCLG about the role they could play in this. It was agreed that the local tier should be involved in the refresh including the MHCLG local tier pandemic influenza group. **[Name Redacted]** noted that there is an aspiration to streamline the pandemic influenza guidance landscape more generally and reduce the volume of documents / guidance so far as possible. DG felt that a refresh of the LRF Guidance offered the best solution to deliver co-ordinated multi-agency planning by local responders so as to collectively address some of the requirements coming out of the workstreams, including surge in health and social care and excess deaths.
- In terms of the process for production of revised 2013 guidance, KH indicated it was likely to need a virtual team with a number of associated work strands.
- **Action** – RK and **NR** to consider how much Welsh Government resource can be committed to the co-production of refreshed 2013 pandemic influenza LRF guidance and when this could be made available.

Ministerial Engagement

- In terms of updating ministers, DG said that Welsh Ministers were being kept informed of progress and had been copied into the letter sent to NSC (THRC) Ministers. Welsh Ministers are aware of the areas being covered by the UK review of preparedness, including developing a draft Pandemic Influenza Bill and a planned revision of the UK Strategy.

- **Action** – DG confirmed that ahead of the next PFRB he is meeting with Welsh policy leads for workstream 1 and 2 of the programme (surge and triage and community care including community health care and adult social care) with the aim of setting out what is to be delivered in Wales. This will take the form of a PID to be discussed at the next PFRB. *Post meeting note – this meeting will take place on 26 July.*

Draft Pandemic Flu Bill

- An update was provided on the Bill timetable including delivery against the timetable that was agreed at the PFRB in early April. DG confirmed that work is currently on track in Wales.
- The operationalisation of the Bill was also discussed, given the express timescales likely to be associated with the Bill's passage. RK noted that some sensitive official level discussions would be needed with the parliamentary authorities in the Welsh Assembly given the usual standing orders associated with Legislative Consent Motions.
- The review mechanism for the Bill was also discussed. The onus will be on each nation and policy area to ensure that they keep the Bill up to date. This will be supplemented by a light touch review c. every 2 years. The review process is yet to be finalised.
- KH noted that a key focus of the year 2 PFRB programme more generally will be to ensure that there is a clear plan for mainstreaming activity and also ensuring plans are tested and socialised as necessary.

Communications

- Now the health focused strategy is nearing finalisation, attention is focused on the year 2 cross government communications piece.
- **Action** – **NR** agreed to identify a single point person who could feed into the cross-Government communications work from a Welsh Government perspective.
- FA asked how surge and triage and moral and ethical considerations would feed into the holistic communications strategy.
- KH noted that advice will be going to Ministers shortly on taking forward the moral and ethical strand. Ministers will have a choice on whether something is done proactively ahead of a pandemic.
- **Action** – **NR** to share Communications project initiation document with **NR**.
*Post meeting note – all PIDS taken to the May PFRB were shared with **NR** on 15 June.*

Sector Resilience

- There was a general discussion about business continuity within organisations during a pandemic, including Welsh Government, taking into account the peak and duration of staff absence.
- **Action** - Welsh Government colleagues agreed that further consideration needed to be given to their business continuity arrangements across Government, as a severe pandemic would affect all aspects.