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From: Katharine Hammond Director, CCS

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Mark Sedwill - National Security Adviser

Update - Pandemic Influenza Preparedness

- 1. We are six months into the year-long cross-government programme to enhance preparedness for pandemic influenza, the top risk on the National Risk Register. This work programme, being taken forward jointly by the Department of Health (DH) and CCS, was informed by a major exercise in October 2016 (Exercise Cygnus). It was formally agreed at a Prime Minister-chaired NSC (THRC) meeting in February 2017 (actions summarised at Annex A). The lead government department for this risk is DH.
- 2. This note is intended to:
 - a. update you on progress;
 - b. flag key risks; and
 - c. seek your agreement to write to Sir Chris Wormald.
- 3. The current pandemic influenza work programme is made up of five workstreams, three of which CCS leads:
 - a. <u>Health Care</u> to further improve the plans of the health sector to flex systems and resources to expand beyond normal capacity levels (NHS England / DH led).
 - b. <u>Community Care</u> to understand and expand social care and community healthcare capability and capacity to respond to increased demand (DH led).
 - c. <u>Excess Deaths</u> to ensure sufficient capability and capacity to manage the volume of deaths in a respectful and acceptable manner (CCS led).
 - d. <u>Sector Resilience</u> to ensure that critical sectors have adequate resilience to anticipated levels of employee absence (CCS led).
 - e. <u>Cross Cutting Enablers / Coordination</u> to a) develop a draft pandemic flu bill for response measures, b) develop a more sophisticated understanding of moral, ethical and public expectations and reactions to a pandemic and c) ensure effective communications arrangements are in place (CCS led with the exception of c) which is led by DH Comms).
- 4. There has been good buy-in across Whitehall and also active participation from the devolved administrations. Each of the workstreams has collectively-agreed plans. The majority of the workstreams are on track and are now moving from the scoping and evidence gathering phase into implementation and delivery. There is, however, a lot of work to do between now and the first quarter of 2018 when the programme is due to be completed. The programme is overseen by a Pandemic Flu Readiness Board that I chair with my counterpart at DH (Director of Emergency Preparedness & Health Protection Policy).

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- 5. The current key risk to delivery is the notable resource pressures within DH, which I know was raised in the margins of your meeting with the Chief Medical Officer earlier this month. Recognising pressures caused by the DH restructure, and the huge priority of this risk, CCS has taken a more active role in the programme than would normally be the case. Although the leading DH Directorate (Health Protection) has now brought in a number of new staff which is helpful, there remains a lack of resource committed to the programme elsewhere in the Department. Those gaps are particularly in legal, communications and other policy teams beyond those leading on health protection, including in some of DH's Arm's Length Bodies (ALBs).
- 6. Specifically, this is impacting on the delivery of both the Community Care workstream and also the draft pandemic influenza Bill. Based on work to date, it is envisaged that DH are responsible for over 50% of the content of the draft Bill. My team are working closely with DH colleagues to prioritise legislative asks. In addition, I will emphasise the importance of this work to the new interim Director of Emergency Preparedness & Health Protection Policy at DH. Notwithstanding this, while I expect priority clauses to be drafted for spring, work on the draft pandemic flu Bill will need to extend into summer 2018.
- 7. On that basis, I am seeking your agreement to write to Sir Chris Wormald to help focus his Department's and its ALB's attention and resources on their key risk. On the back of this letter (draft at Annex B), I suggest that you and Chris may then wish to jointly write to Permanent Secretaries of other key government departments to update them on progress and outline next steps, particularly in relation to the legislative workstrand. I am keen to ensure departments are engaging fully in this and thinking creatively and holistically about potential legislative asks that could be needed to support our response to a pandemic.
- 8. I will continue to update you on the overall work programme as we get closer to its conclusion and CCS will consider how we most effectively advise NSC (THRC) on the outcome.

Katharine Hammond August 2017

ANNEX A

Actions arising from NSC (THRC) meeting, 21 February 2017

- The Department of Health and the Cabinet Office's Civil Contingencies Secretariat should take forward the programme of work, working with relevant departments, to include: a draft Pandemic Flu Bill; scalable options for dealing with excess deaths; work on the implications (including legal) of differential decision-making across the UK; consideration of what more radical measures to control transmission might be effective and support departments in fulfilling their responsibility for the resilience of the sectors they represent to the risk of pandemic influenza. Action Department: Department of Health and Cabinet Office working with relevant government departments.
- The Minister for the Cabinet Office should consult with moral leaders and consider what role they might play during an actual pandemic. <u>Action Department:</u> Cabinet Office with Department of Health, Communities and Local Government and other relevant government departments.
- Working with junior ministerial colleagues, within the auspices of NSC THRC, the
 Minister for the Cabinet Office should establish a programme to explore
 preparedness for the remaining groups of the highest risks, without an established
 review process within the existing committee structure. <u>Action Department:</u>
 Cabinet Office with contributions from the relevant government
 departments.

ANNEX B

Draft letter to Sir Chris Wormald KCB, Permanent Secretary at the Department of Health

Pandemic Influenza Preparedness

We are now six months into a year-long cross-government work programme to further enhance preparedness for pandemic influenza, led jointly by the Civil Contingencies Secretariat (CCS) and your Department.

The need for this work was driven by a major exercise last year and a subsequent Prime Minister-chaired National Security Council (Threats, Hazards, Resilience and Contingencies) meeting in February 2017. I know a lot of work has been done in the last six months and I am grateful for the close collaboration between colleagues in the Health Protection Directorate in the Department of Health and CCS.

As this is the top risk on the National Risk Register, I am keen to ensure that this work continues to be given the highest priority, to ensure completion of the actions the Prime Minister outlined at NSC (THRC) earlier in the year.

As the joint work programme has now moved into the delivery and implementation phase, it requires a wider range of input. I am ensuring that this work is being prioritised accordingly within CCS and other parts of Cabinet Office as necessary. Likewise, the same priority will need to be given to the work within your Department, including teams beyond the Health Protection Directorate such as social care and legal. More generally, I am aware of the ongoing cross-government input needed. I propose, subject to your agreement, that we write jointly to permanent secretaries of key government departments to update them on progress, galvanize next steps and reaffirm key milestones.