

Wales Pandemic Flu Preparedness Group – Exploratory Meeting
Monday 25th September – 15:00-16:30
Tyddewi, Welsh Government Building, Cathays Park, CF10 3NQ

Attendees

David Goulding (DG)	Welsh Government – Health Emergency Planning Unit
Name Redacted	Welsh Government – Health Emergency Planning Unit
NR	Welsh Government – HSS Delivery & Performance
Alistair Davey (AD)	Welsh Government – HSS Enabling People
Marion Lyons (ML)	Welsh Government – HSS Public Health
NR	Welsh Government – HSS Communications
	Public Health Wales

Apologies

Wyn Price	Welsh Government – EPS Resilience
NR	Welsh Government – EPS Resilience
Stuart Fitzgerald	Welsh Government – HSS Communications

1. Introductions & Background

- 1.1 DG welcomed colleagues and asked all members to introduce themselves. Apologies were noted.
- 1.2 DG explained that in October 2016 WG had participated in the UK Tier 1 Pandemic Flu Exercise Cygnus. During the Exercise a number of key issues arose, particularly in relation to capacity and capability to deal with a surge in social care and the NHS and also excess deaths.
- 1.3 DG said that following the Exercise report, the Cabinet Office and DH was asked to review the UK preparedness for a pandemic and a UK Pan Flu Readiness Board has been established to oversee this review. DG added that he was on the Board along with Wyn Price, Head of WG Resilience Team. At the first Readiness Board meeting it was agreed that supported by five work streams. The WG representatives on the Workstreams are currently:

Workstream 1 – Health - Name Redacted
Workstream 2 - Social Care - Alistair Davey
Workstream 3 – Excess Deaths - Name Redacted
Workstream 4 – Sector resilience -Wyn Price
Workstream 5 – Cross Cutting Enablers -Wyn Price
- 1.4 DG said that he had called this Group together to co-ordinate any outputs from the UK review structure and consider what may need to be undertaken in Wales to implement the review outcomes
- 1.5 DG thought added that he thought there were a number of strategic documents that may need to be changed, following the review, included the UK Pan Flu Framework 2011, LRF Pandemic Flu Guidance, the Wales Response Plan, the Wales HSS Pandemic

Preparedness and Response Plan as well as the UK/Wales Pan Flu Communications Strategy and operational pandemic flu guidance such as to the NHS and social care.

2. Exercise Cygnus Key Learning

- 2.1 DG advised that the post Exercise Cygnus report issued identified some key areas that are under consideration by the Pan Flu Readiness Board, which included the need for a UK Concept of Operations, Legislative changes, likely public reactions to a reasonably worse case pandemic and the lack of capability and capacity in key areas.
- 2.2 JW said that it was important to take account of the history behind certain pandemics including the type of virus and age group susceptibility. Additionally the group had to take account of new emerging viruses and the continued development of a Universal Pandemic Flu vaccine and the ability to rapidly produce antibiotics in the event of an influenza pandemic outbreak.

3. UK Pandemic Flu Readiness Board Structure and Outputs

- 3.1 DG advised that the Boards overall objective was to enhance cross-Government preparedness to an influenza pandemic including a more streamlined, coherent and easily accessible set of actions and activities to be taken by different organisations during an influenza pandemic.
- 3.2 DG added that the Board had an ambitious high-level work plan which would be supported by five key work streams focusing on Health Care Surge and Triage, Adult Social Care and Community Healthcare Sectors, Managing Excess Deaths, Sector Resilience and Cross Cutting Enablers.

4. Work Stream Current Position

Health Care Surge and Triage

- 4.1 DG advised that in [Na]'s absence, he had joined the Workstream meeting that was addressing population triage and NHS surge issues. NHS E is producing modelling information which should be shared with us. He suggested that we would need to consider revisions in our healthcare guidance and added that NHS E had produced a draft guidance which is with ML for comment. JW asked to see the document and ML said she would send him a copy which is Official-Sensitive. .

Action: ML to send IW a copy of the surge guidance. Any comments on it to be sent to DG

Adult Social Care and Community Healthcare Sector

- 4.4 AD advised that there was currently an issue around who would be the SRO for the social care work stream within the Department of Health therefore progress was slow. He added that within Wales he was trying to establish where there was social care capacity was, but the task was extremely difficult as most of the social care provision was provided by independent companies.
- 4.5 JW said that from a social care perspective the work stream needed to consider how to ramp up capacity and establish what the demographics were of the care centre including the up-scaling and up regulating of the centre.

- 4.6 DG added that it was important for the sector to be included in any future LRF guidance specifying how they would work with the civil contingency structure in the event of a pandemic flu outbreak.
- 4.7 Future work of the Workstream would likely include the creation of guidance on how to deal with increased pressure at a local, regional and national level on the adult social care system and an assessment of the impact on those who receive social care due to absenteeism and additional pressures during an extreme pandemic.

Managing Excess Deaths

- 4.6 DG advised that neither [Name Redacted] nor Wyn Price had been able to join the meeting but he had received a note. The Excess Deaths Workstream would be looking at preparedness and capability to manage excess deaths both at a local level and what the UK government could do to support the management, including a revised central doctrine and guidance for local planners.

Sector Resilience

- 4.7 DG advised that the Sector resilience Workstream was planning on undertaking a review of the stock take returns on the resilience of each of the key sectors and that the 25-30% reasonable worst case was accurate and that departments should continue to review the resilience of sectors on that basis. The group was also planning to look at expanding its knowledge of resilience within certain sectors and to look at critical plans, staff absences issues, cross cutting/devolved/UK legislation and public expectation.
- 4.8 AD added that within the scope of the Readiness Board and associated work streams safeguarding of vulnerable individuals was missing and needed to be reflected within the remit somewhere as the group's progress. DG added this maybe addressed under Workstream 5 where the group would be focusing on the moral and ethical implications of any proposals tabled by the Pandemic Flu Readiness Board.

Cross Cutting Enablers

- 4.9 DG advised that the cross cutting enablers The Workstream would focus on communications strategy for Pan Flu, the need for having available pandemic flu legislation and work on morals and ethics.

5. UK Pandemic Flu Communications Update

- 5.1 [Name Redacted] advised that revisions to the DH communications plan had been on hold since Exercise Cygnus; however the group had recently reconvened following a restructure in the Department Health. He added early thoughts on the revised plan focused around the length of the document being shorter and containing key messages and details of who would do what and when during a pandemic influenza outbreak.
- 5.2 [Name Redacted] said that from a Welsh perspective he would like to include an annex featuring spoke persons details and key messages specific to Wales.
- 5.3 DG emphasised the importance of linking this work into aspects of Workstream 5 and perhaps a discussion with WP, who is the WG contact point for the workstream is needed. DH said that he would liaise with WP prior to the next Workstream meeting.

Action: DH to liaise with WP in regard to the communications plan and impact on the work of work stream 5.

5.4 JW suggested that message percolation should be considered and that any communications plan should take account of potential fake news reports. He added that a high level government social media communication plan was needed which could be personalised for specific regions and demographic specific networks utilised to deliver key messages.

5.5 Nam added that the weekly communications method used during swine flu worked well and was disciplined.

6. AoB

6.1. DG advised that members of the group should take the opportunity to look at the operational guidance currently in place and review whether revisions or new pieces of guidance would be needed following proposals from the Readiness Board. He added that he was taking a strategic approach to the task and that any concept of operations developed would need to be reflected in Wales and at a local level.

6.2 ML and IW said that it was important to build on surveillance obtained during each influenza season to enhance current planning and that cluster modelling and the vaccinating of carers via the Care Quality Commission should be explored.

7. Date of next meeting

7.1 It was agreed that future meetings of the group would be convened as and when substantial progress had been made at a Board or Workstream level.