

CLEARANCE CHECKLIST

Inclusion of this checklist is mandatory. Please complete the whole list and private office will remove before putting submission in the box. A submission without it will be sent back.

Note: Contact names provided must have seen and approved the submission.

Finance:

Does this involve any spending or affect existing budgets?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Legal:

Does this include legal risk, a court case or decisions that can be challenged in court?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Communications:

Could this generate media coverage, or a response from the health sector?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Analysis and data fact-checking:

Does this include complex data, statistics or analysis?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Devolved Administrations:

Will this affect Scotland, Wales or Northern Ireland?

- ☒ If yes, named official:
Gervase Hood, Scotland Office
Nicola Bodell, Northern Ireland Office
Debbie John, Wales Office
☐ No

Fraud:

Have you considered fraud risks?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Commercial:

Does this include commercial or contractual implications?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Strategy Unit:

Does this relate to cross-cutting or longer-term implications for wider DH strategy?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Implementation Unit:

Does this relate to one of the Secretary of State priorities?

- ☐ If yes, named official:
Click here to enter text.
☒ No

Legislation:

Does this include options that may require secondary legislation?

- ☐ If yes, do you have a prioritisation reference number? (*contact Parly or SOPL if unsure*):
Click here to enter text.
☒ No

Duties, Tests and Appraisals:

The following tests apply and have been considered.

- ☐ Secretary of State Statutory Duties, including on health inequalities
☐ Public Sector Equalities Duty
☐ Family test
☐ Other(s) (please specify)
Click here to enter text.

**To: Secretary of State for Health
Chancellor of the Duchy of
Lancaster**

From:

Name Redacted (Department
of Health and Social Care)

Name Redacted (Civil
Contingencies Secretariat,
Cabinet Office)

Clearance: Emma Reed, Department of
Health and Social Care
Clara Swinson, Department
of Health and Social Care
Katharine Hammond, Civil
Contingencies, Cabinet
Office

Date: 20 March 2018

**Cc: Parliamentary Under Secretary of
State for Public Health and
Primary Care
Minister for Implementation**

Copy: Please see Annex B
Private Office Submissions
Copy List

ENHANCING PANDEMIC INFLUENZA PREPAREDNESS

Issue	This submission provides an update on the progress made to enhance pandemic influenza preparedness since the Prime Minister chaired National Security Council (Threats, Hazards, Resilience and Contingencies) (NSC (THRC)) meeting in February 2017. It also seeks agreement for a second phase of work.
Timing	Routine (five working days) For all timing requests, please provide a reason or explanation: Issuing the letter before the end of the month will help to sustain momentum.
Recommendation	To note the progress made, confirm you are content with the proposed work programme for the next 12 months, including a refresh of the 2011 four nation UK Influenza Pandemic Preparedness Strategy, and for a joint letter to be sent to NSC (THRC) members on that basis.

Background

1. A pandemic of a novel strain of influenza is the top risk in the National Risk Assessment. The reasonable worst case scenario (RWCS) of a pandemic could result in up to 50% of the population experiencing symptoms and around 800,000 additional fatalities in the UK. Workforce absence is also likely to be significant with in excess of 20% absence rates at the peak. The Department of Health and Social Care (DHSC) is the Government department with lead responsibility for managing the risk. In February 2017, following a national exercise, the Prime Minister chaired a NSC (THRC) meeting which considered the current state of

pandemic influenza preparedness across Government. It was agreed that planning should be revitalised with a cross-Government programme of work led by DHSC and the Civil Contingencies Secretariat (CCS) in Cabinet Office.

Advice

2. Our subsequent work has focused on enhancing national arrangements. This sustained collective activity has contributed to enhanced preparedness, although there remains work to finalise national arrangements and properly embed the policies and plans. We have:
 - improved plans of the health sector to flex systems and resources to expand beyond normal capacity levels;
 - developed plans to prioritise and augment adult social care and community health care during a pandemic response;
 - refreshed, and will shortly reissue, guidance for local responders on planning for large numbers of additional deaths. We have undertaken comprehensive analysis of capability across the country which is informing the development of a range of practical and policy measures to drive improvements;
 - updated the planning assumptions for workforce absence and, through work with Lead Government Departments, have stress-tested preparedness for both the peak and duration of absence in critical sectors;
 - agreed the UK Government policy measures for inclusion in a draft Pandemic Influenza Bill to provide legislative flexibilities to support the response to a severe pandemic. The draft Bill will be held internally and taken through Parliament only if required. We have worked closely with colleagues in the Devolved Administrations to seek to achieve a one-UK approach;
 - prepared a comprehensive four nations pandemic influenza health-focused communications strategy; and
 - prepared options to ensure Government thinking is supported by moral and ethical advice.

3. As well as finalising national arrangements, it is important to ensure guidance for the local resilience community is both up to date and streamlined to support the continued enhancement of local preparedness. Proposed activity for the next 12 months centres on:
 - finalising national arrangements, including the delivery of:
 - service-facing guidance to be deployed in a severe and sustained pandemic to support the NHS response pandemic;
 - updated service-facing guidance for the delivery of augmented adult social and community care during a pandemic;
 - an updated Pandemic Influenza Business Checklist, in conjunction with business representative bodies;
 - further guidance on specific aspects of the death management process and possible measures central government could take to provide additional support to local responders;
 - completed internally-held clauses covering both the UK Government and Devolved Administration content and supporting documentation to finalise the UK-wide draft Pandemic Influenza Bill;
 - coherent and planned wider Government communications messages; and

- an expert group to enable Government decision-making to be informed by moral and ethical advice (further advice to be sent to Cabinet Office and DHSC Ministers shortly).
- preparing products to support the continued enhancement of local arrangements including:
 - refreshing the four nation UK Influenza Pandemic Preparedness Strategy 2011 (DHSC led);
 - developing a pandemic influenza Resilience Standard, against which local capabilities and readiness can be better assessed (CCS/DHSC led); and
 - exercising pandemic response plans.

Presentational issues

4. In the next phase of work, there will be a need to share more detail on certain national plans with key external stakeholders, including local resilience forums, regulators and representative bodies. This will be vital to ensure the national plans can be effectively operationalised during a pandemic. More generally, there is likely to be greater interest in pandemic influenza this year as it is the hundred year anniversary of the 1918 Spanish Influenza which killed an estimated 50-100 million people worldwide. There will be a BBC 4 documentary (Contagion) on 22 March.

Risks

5. Work to date has been undertaken with close positive engagement from colleagues in the Devolved Administrations. Further work is, however, required to ensure a joined-up approach, particularly on the draft Bill. We are seeking to assure the cross-UK preparation, while recognising many of the capabilities are devolved. There will be Director level meetings on the programme over the next month to support this¹. The refresh of the 2011 UK Influenza Pandemic Preparedness Strategy should also support this. A meeting of the four health Ministers is likely to be beneficial in due course. Other risks include any significant and sustained crisis response activity which would impact on the timescales for delivery of this programme.

Next steps

6. The work to finalise national arrangements and to support continued enhancement of arrangements by the local responder community will require cross-government input. A draft letter to NSC (THRC) colleagues is provided at Annex A which outlines further cross-Government input needed to maintain and further enhance preparedness. This plan has been developed in conjunction with officials from the named Departments. A further full update will be provided in 12 months' time.

Name Redacted Head of High Consequence Infectious Disease and Pandemic Flu Policy, Department of Health, 0207 210 6218

Name Redacted Assistant Director High Priority Projects
Civil Contingencies Secretariat, Cabinet Office, 0207 276 0731

¹ A meeting with the Welsh Government was scheduled for 14th March but that has been rearranged. A meeting with the Scottish Government is scheduled for 27th March. Potential dates for a meeting with the Northern Ireland Executive are awaited.

ANNEX A - Draft Letter to NSC (THRC) Members

Pandemic Influenza Preparedness

Pandemic influenza is the top risk on the National Risk Assessment. Following a major exercise in late 2016 and a subsequent Prime Minister chaired National Security Council (Threats, Hazards, Resilience and Contingencies) meeting in February 2017, a cross-Government programme was initiated to further enhance pandemic influenza preparedness. Sustained collective activity over the last 12 months has enhanced preparedness but there is more to do. Given the likelihood and impact of this risk, this letter reaffirms the need for continued, concerted activity across Government, in collaboration with Devolved Administrations.

When a pandemic occurs, there will be little or no immunity to the virus in the population, unlike seasonal influenza. The last influenza pandemic (Swine Flu) in 2009 was relatively mild. Health specialists believe that it is a case of when, not if, the next pandemic will occur. It is impossible to predict with any certainty the severity of the next new virus strain or when it might appear, but planning is based on a reasonable worst case scenario of:

- up to 50% the population potentially contracting the pandemic influenza;
- up to 4% of symptomatic patients potentially requiring hospital care;
- around 800,000 additional fatalities in the UK; and
- significant workforce absence levels, in excess of 20% for two to three weeks at the height of the pandemic.

Within the last 12 months substantial work has been undertaken, supported by comprehensive engagement with the local responder community, to strengthen the alignment of plans and activities. This has delivered:

- improved plans of the health sector to flex systems and resources to expand beyond normal capacity levels;
- clear plans to prioritise and augment adult social care and community health care during a pandemic response;
- refreshed, and soon to be reissued, guidance for local responders on planning for large numbers of additional deaths, underpinned by a comprehensive analysis of capability across the country;
- updated planning assumptions for workforce absence and stress-tested plans from Lead Government Departments which have responsibility for particular sectors, covering both the peak and duration of workforce absence;
- confirmed UK Government policy content for a draft Pandemic Influenza Bill, to be held internally and taken through Parliament if required, to support the response to a severe pandemic. We have also worked closely with colleagues in the Devolved Administrations to seek to deliver a one-UK approach;
- a comprehensive four nations pandemic influenza health-focused communications strategy; and
- options to ensure Government thinking is supported by moral and ethical advice.

Next Steps

Consideration of this risk holistically and collaboratively across Government and with the Devolved Administrations is vital. A lot has been achieved, but there is more to

do to both maintain and enhance preparedness to an acceptable level. In the next 12 months, the intention is to:

- finalise national arrangements; and
- prepare products to support the continued enhancement of local arrangements including:
 - refreshing the four nation UK Influenza Pandemic Preparedness Strategy;
 - developing a pandemic influenza Resilience Standard, against which local capabilities and readiness can be assessed.

It is vital that this work continues to be prioritised and resourced by Departments, given the significance and scale of the risk. This cross-Government work will continue to be overseen by the Pandemic Influenza Readiness Board, chaired jointly by the Cabinet Office and Department for Health and Social Care, on which your departments and the Devolved Administrations sit. Key actions for departments are summarised in the attached table. A further update on progress will be provided in early 2019.

Pandemic Influenza Preparedness Next Steps – Key Actions for Departments

Workstream	Output	Lead Department	Supporting Department(s)
Finalisation of National Arrangements			
1- Healthcare	<ul style="list-style-type: none"> Service-facing surge and triage guidance to enable appropriate frontline decisions about patient care during a pandemic, including assessing by likelihood of survival rather than clinical need. 	Department of Health and Social Care	NHS England Public Health England Devolved Administrations
2- Community Care	<ul style="list-style-type: none"> Service-facing guidance for delivering adult social care and community care during a pandemic. 	Department of Health and Social Care	NHS England Ministry of Housing, Communities and Local Government Civil Contingencies Secretariat, Cabinet Office Care Quality Commission Devolved Administrations
3 – Sector Resilience	<ul style="list-style-type: none"> Focused actions arising to further assure the resilience of key sectors. Refreshing the Pandemic Influenza Business Checklist. 	Civil Contingencies Secretariat, Cabinet Office	Department for Education Home Office Her Majesty's Prison and Probation Service / Ministry of Justice Department of Health and Social Care Public Health England Health and Safety Executive Ministry of Housing, Communities and Local Government Ministry of Defence Foreign Office Cabinet Office Government Office for Science Devolved Administrations Department for Work and Pensions Department for Business, Energy and Industrial Strategy <i>All departments are responsible for maintaining and further</i>

			<i>enhancing the resilience of their sectors to workforce absence as a result of pandemic influenza. For critical national infrastructure this will be supported by the annual Sector Security and Resilience Plans.</i>
4 – Planning for a significant increase in mortality during a pandemic	<ul style="list-style-type: none"> Guidance on specific aspects of the death management process. Development of options for additional measures by which central government could provide additional support to local responders. 	Civil Contingencies Secretariat, Cabinet Office (coordinating in the absence of a lead department)	Ministry of Justice Home Office Ministry of Defence Department of Health and Social Care Ministry of Housing, Communities and Local Government Health and Safety Executive Human Tissue Authority Department for Environment, Food and Rural Affairs Devolved Administrations
5a – UK wide draft Pandemic Influenza Bill	<ul style="list-style-type: none"> Prepare / finalise draft clauses covering the UK Government and Devolved Administration content. Prepare supporting Bill documentation. Develop a review mechanism to keep the content up to date. 	Department of Health and Social Care	Civil Contingencies Secretariat, Cabinet Office Department of Education Treasury Ministry of Justice Her Majesty's Prison and Probation Service General Register Office Department of Education Home Office Devolved Administrations
5b - Communications	<ul style="list-style-type: none"> Approved four nations health communications strategy. Coherent and planned cross-Government communications messages during a pandemic. 	Department of Health and Social Care Communications	Devolved Administrations Public Health England Cabinet Office Communications All Other Government Departments
5c – Moral and Ethical Considerations	<ul style="list-style-type: none"> Implement arrangements to provide a moral and ethical advice during a pandemic. 	Civil Contingencies Secretariat, Cabinet Office and Department of Health and Social Care	Ministry of Housing, Communities and Local Government Public Health England NHS England Government Office for Science Devolved Administrations

Products to support the continued enhancement of local arrangements			
	Refreshing the 2011 UK Influenza Pandemic Preparedness Strategy	Department of Health and Social Care	All Other Government Departments Devolved Administrations
	Developing a Pandemic Influenza Resilience Standard for local responders (in England).	Civil Contingencies Secretariat, Cabinet Office and Department of Health and Social Care	Ministry of Housing, Communities and Local Government Public Health England NHS England Devolved Administrations
	Reconfiguring public and local responder facing information / guidance on pandemic influenza on gov.uk and Resilience Direct.	Department of Health and Social Care	Ministry of Housing, Communities and Local Government NHS England Public Health England Civil Contingencies Secretariat, Cabinet Office <i>Some input may be required from other Departments that own current public facing pandemic influenza guidance.</i>

ANNEX B

Name Redacted – Private Secretary to Secretary of State for Health, Department of Health and Social Care

Name Redacted - Private Secretary to Minister for Public Health and Primary Care, Department of Health and Social Care

Clara Swinson – Director General, Global and Public Health, Department of Health and Social Care

Emma Reed - Director, Emergency Preparedness and Health Protection Policy, Department of Health and Social Care

Kevin Dodds - Deputy Director Immunisations and High Consequence Infectious Diseases, Department of Health and Social Care

Name Redacted - Deputy Head of Media and Campaigns, Department of Health and Social Care

Richard Moore - Deputy National Security Advisor

Katharine Hammond - Director, Civil Contingencies Secretariat, Cabinet Office

Stuart Wainwright - Deputy Director, Readiness and Response, Civil Contingencies Secretariat, Cabinet Office

Carol McCall – Cabinet Office Communications, Cabinet Office