



Guidance for

Developing Local COVID -19 Prevention and Response Plans

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Background

Further to the joint letter sent by the Welsh Government Chief Medical Officer/ Medical Director NHS Wales, Director General Health and Social Services/ NHS Wales Chief Executive and Director, Local Government on the 27th July 2020, Public Health Wales was requested to develop guidance for Local Health Boards and Local Authorities to assist in the development of Local Covid -19 Prevention and Response Plans.

As set out in the letter, Chief Executives of each Local Health Board have been asked to lead this work through Directors of Planning, supported by Directors of Public Health and in partnership with local authority Chief Executives and their Directors of Public Protection.

The letter acknowledges that Local Authorities have been central to the management of the Covid-19 response in Wales and that their role is critical as has been demonstrated in the response to the outbreaks so far.

These Local plans should therefore be prepared on a fully collaborative basis and signed off by each Health Board and their partner local authorities.

Local Health Boards have been requested to work with all partner agencies locally and with Public Health Wales nationally to develop these plans in order to continue to keep the public safe.

The Welsh Government is currently developing a National Covid-19 Public Health Escalation and Response Plan. Local plans will link to this to create a system wide approach. Six principles support effective implementation of an integrated national and local system:

- the primary responsibility is to make the public safe
- build on public health expertise and use a systems approach
- be open with data and insight so everyone can protect themselves and others
- build consensus between decision-makers to secure trust, confidence and consent
- follow well-established communicable disease control and emergency management principles
- consider equality, economic, social and health-related impacts of decisions

This guidance is intended to provide a framework to guide regions on what should be considered for inclusion in their Covid-19 Local prevention and response plan. It is not intended to be an exhaustive or exclusive list. It contains suggested sections and what they should cover, but each region can develop their own plans as long as they include how both prevention and response will be managed at the local and regional level.

These multi-agency Plans should include reference to both the **prevention of and response to** Covid-19 in a variety of settings e.g. health and social care services; care homes; high-risk workplaces, educational settings and in the community. Integrated planning and communications are therefore key to developing prevention, planning and mitigating actions

Suggested sections and content:

There are eight suggested sections for each Local Plan and it would be expected that the plan would outline a clear description of and action plans for work in each of these sections with local and/or regional leads clearly identified along with timelines for completion, if required.

1. Local Planning and Response Structures, Roles and Responsibilities

There is a need for clarity of local structures, roles and responsibilities so that the system can work effectively together with a common understanding of who does what. Each plan should ensure that the roles and responsibilities of all partner organisations involved are explicit, mutually agreed and well understood by all.

Each plan should describe its structure for local decision making and the delivery of its COVID-19 response. This should include an organogram depicting the arrangements. The description should include details of governance, leadership and responsibilities with named leads at local and regional levels. Where the response is broken down in to work streams or subgroups these should also be described.

Each local plan should describe the identified lead with overall responsibility and oversight of the Prevention and Response. It is anticipated that each local authority area will also identify a named lead, who will approve the plan and lead/co-ordinate the local authority contributions. Similarly, it is anticipated that there should also be named leads for work vital to the response such as; surveillance, sampling and testing, contact tracing, cluster and incident management, and communication. These leads should be detailed in the description of each of the relevant sections and included in a summary of response lead roles.

While awaiting the production of the National Covid-19 Public Health Escalation and Response Plan by Welsh Government, each region should describe its proposed escalation process including how it fits in to wider structures such as emergency planning, local resilience fora (LRF), and other partnership structures where relevant (e.g. public services boards, regional partnership boards and the voluntary sector).

If the region has developed a strategic plan for COVID-19 response it should be referenced and included in this Plan.

2. Surveillance

There is a need for early recognition of COVID-19 cases in the local community. This requires sensitive early warning systems provided by good epidemiological surveillance and other national and local information sources, including intelligence arising from national, regional and local contact tracing activity as part of the Test Trace and Protect (TTP) Strategy.

Public Health Wales is providing a range of surveillance information to each region. Welsh Government has established a COVID-19 Intelligence Cell, which is meeting regularly to inform the Chief Medical Officer and the Health Protection Advisory Group (including membership from Welsh Government Civil Contingencies). This group considers updates on incidents and recent

cases from the Health Protection Team areas alongside the Public Health Wales surveillance outputs.

Each region should document how surveillance and data is being used at regional and local levels to inform planning and response.

It should describe how surveillance data are reviewed locally and how the information is used to inform response actions (See also section 3 below) and longer term planning. A lead for communicating data, actions and conclusions into the Welsh Government COVID-19 Intelligence Cell (as advised) and multi-agency partners including the SCG/RCG stood up in each LRF area should be identified.

The success of our TTP Programme is central to reducing transmission of Covid-19 as it provides an understanding of who is affected, and why and where Covid-19 infections are occurring. The local plan should describe how it uses the intelligence from TTP to assess whether cases have a defined exposure history, as this may indicate unrecognised transmission.

Plans should also include provision for local epidemiological investigations, including gathering enhanced surveillance information from cases by community-based interviews. Public Health Wales can support with training, development and analysis of local investigation data, but local capacity for this is also required. This will include investigation of cases where there are no clear sources of transmission.

The use of the TTP process and surveillance to identify linked cases and clusters of case and the use of softer local intelligence such as social media and community feedback should be included in the plan.

3. Management of Clusters, Incidents and Outbreaks

It is expected that each regional tier will be adequately resourced to allow the regional response tier to fulfil the roles of: strategic leadership across partners, contact tracing, and response to clusters and outbreaks. Public Health Wales, through a National Health Protection Response Cell, will provide specialist resource to advise on and give appropriate support to complex clusters, incidents and outbreaks.

These arrangements, including named regional and local leads, should be clearly cross referenced in this plan.

Building on the learning from early incidents and outbreaks, there is a need for an agreed approach to the management of clusters, incidents and outbreaks in the region.

Each Health Board footprint area, should have an adequately resourced Multi-Agency Strategic Regional TTP Oversight Group which will provide leadership on contact tracing and situational awareness on emerging clusters and outbreaks, making use of available surveillance intelligence to provide a timely picture of the local epidemiological situation (including incidents involving hospitals and healthcare facilities) to key partners and to the Welsh Government (Covid-19 Intelligence Cell). Local plans will need to reflect these structures and the reporting

arrangements, and include how community and hospital contact tracing arrangements are integrated across the TTP programme.

Each plan should describe how the Local Health Board, local authorities (and other partners) will respond to and manage clusters, incidents and outbreaks within each Locality and region. It should be remembered that Covid -19 affects both hospital (acute and community) and other social care and community settings.

In the first instance, localised enclosed setting incidents/outbreaks or community transmission of Covid-19 should be managed in line with the Communicable Disease Outbreak Plan for Wales 2020 (published 13 July 2020). The Communicable Disease Outbreak Plan for Wales 2020 outlines how the principles of outbreak management including for clusters and incidents should be applied. Part 7 of this plan also describes the link with and activation of agreed civil contingency arrangements.

Any resurgence of Covid-19 infection is likely to comprise multiple, simultaneous incidents and outbreaks so the region should describe its resilience and plan to deal with and escalate such multiple events.

Regional plans should specifically cover the situation where there are coexisting incidents in both the community and hospital settings. In the event of potentially serious public health implications outside a hospital setting arising from a hospital incident, then Section 2.8 of the Communicable Disease Outbreak Plan for Wales, should be referenced for guidance.

It is likely that Wales will experience incidents and outbreaks that will spread beyond the local. Welsh Government are developing a National Covid-19 Public Health Escalation and Response Plan. This will describe the process for escalation of incidents, outbreaks and local flare ups, outline the structures and triggers for significant incidents, outbreaks and describe potential extended control measures.

If multiple complex incidents are reported or surveillance demonstrates a concerning increase in community transmission, there will be a need to call on broader partners including SCG/RCG members and the Welsh Government and the regional plan should describe how and when this would happen in accordance with the Communicable Disease Outbreak Plan for Wales.

In anticipation of a National Covid-19 Public Health Escalation and Response Plan, each plan should seek to describe (based on local risk assessments) the measures that could be potentially put in place and how this would be locally implemented. *Examples could include:*

- expanded communications, with widespread community engagement to reach groups directly affected, delivered in the languages most relevant to the local community; undertaken in coordination with standing Outbreak Control (OCT) and Incident Management Teams, and also in alignment with national communications plans.
- accelerate and expand channels for local sampling and testing,
- enhanced advice and inspection regime for businesses
- targeted closure of certain businesses and venues (for example shops, cafes, gyms, recreation centres, offices, labs, warehouses)
- cancellation of local organised events (for example sporting events, concerts, weddings, faith services)

- restriction of use of outdoor public areas (for example parks, playgrounds, beaches, esplanades, outdoor swimming pools)
- encourage working from home (for example instigating working from home measures where this is feasible)
- actions in school and educational settings including school closure
- local travel or movement restrictions
- bespoke measures for vulnerable people

The approach should describe how and when community control measures are escalated at a local or regional level and when escalation to the Strategic Coordinating Group / Recovery Group is implemented. The approach should also describe how alignment of messages across the regional communications, and linked to and including national communications is maintained, so as to avoid overlap and always ensure timely, accurate and consistent communications.

4. Sampling and Testing

Each Prevention and Response plan will need to be complemented and informed by the local arrangements for sampling and testing.

In addition to this therefore and as set out in the Welsh Government 'Testing Strategy' 1 , each plan will need to consider and identify the methods for local sampling and testing to ensure a rapid response that is accessible to the entire local population and takes into consideration the unique characteristics of the communities in the local area.

There is a need to have effective individual and mass sampling and testing arrangements which are responsive to the circumstances of the region. To be effective testing has to be easily accessible and have a quick turnaround, ideally less than 24 hours to initiate TTP. It is acknowledged that laboratory processing will not be in the control of Health Boards in all instances.

The Welsh Government 'Testing Strategy' outlines sampling and testing priorities and can be used for adaptation to your local communities and populations. The region should describe its planned response for sampling and testing, including how it will access and mobilise testing structures (CTUs) for dealing with incidents in settings or localised areas of high incidence. It should also include how it will proactively encourage testing for those with symptoms amongst its population.

5. Prevention

There is a need for a proactive collaborative approach to prevention with a continued focus on identifying and protecting the most vulnerable people in society disproportionately affected by COVID-19 as defined by age, ethnicity and social status.

¹ https://gov.wales/covid-19-testing-strategy-html

The plan should describe the approach to risk assessment based on local knowledge. To ensure that you are sighted on all risks in your area. The Welsh Government has requested that you consider the Wales Covid-19 Risk Assessment undertaken by military liaison colleagues. Please liaise with the LRF Coordinator for your area to obtain these.

The region should describe how information from partners is triangulated to identify key places, sectors that may be at higher risk of transmission such as schools, large workplaces, hospitality industry and other places where large numbers of people congregate and the steps being taken to mitigate risks as far as possible.

The region should confirm how it will work with their key partners and sectors such as hospitality industry, schools, universities etc, to ensure that the local infrastructure is prepared and able to contain the virus, preventing/reducing any potential escalation, incidents and outbreaks.

Other areas for consideration, when scenario planning has completed, include developing plans for mass vaccination in readiness for a COVID-19 vaccine; and plans to maximise the routine influenza vaccination programme to limit impact on the NHS.

6. Mitigation and Control

There is a need to reinforce the primary control measures (social distancing, hand washing, respiratory etiquette and enhanced cleaning regimes) in order to combat the spread of COVID-19.

Working with high risk premises and industries should be included in the plan e.g. care homes, holiday parks, meat processors and food manufacturers, schools, universities.

Working with local communities will be essential and the plan should outline how collaboration using existing local community networks and partnerships with the voluntary sector can be used. Although there is legislation available to respond to non-compliance of the primary control measures it is envisaged that there will be the need for persuasion and reinforcement of rules in settings and communities. The plan should describe, how and who would be deployed for the persuasion and reinforcement activities.

Arrangements and responsibility for the use of existing enforcement powers, should the need arise, should also be described.

7. Communication

There is a need for ongoing clear and effective communication which is coordinated between all sectors and with national activity.

The region should describe how it will:

 Achieve consistency of messages across multiple incidents/outbreaks within the region, consistency across regional borders and with national messaging, including alignment to 'Keep Wales Safe' messages. · Avoid creating new campaigns where national frameworks exist, including 'Keep Wales Safe' and 'Test, Trace, Protect'. Regional communications teams should tailor materials as appropriate to their local audiences, however greater impact will be achieved through

consistent alignment.

Use a range of local, regional channels to deliver focussed messaging to areas of greatest

Use a range a local, regional channels to deliver targeted communication in the event of

incidents

· Evaluate how its communications drive increased knowledge, confidence and

compliance in local communities

There should be a multi-sectoral communications strategy developed and the communication

action plan should give a clear indication of which organisation leads on each element.

8. Implementation, Review and Learning

Once developed and approved the Local Covid-19 Prevention and Response Plan should be implemented fully. All decisions to employ additional control measures and restrictions to

respond to emerging situations should be based on the six principles outlined above to ensure they are balanced and proportionate. There should be a regular review of the plan through

regional structures to assess effectiveness of implementation or the need for change. It is also expected that the plan will be reviewed in response to emerging regional issues (e.g. any mass

gathering event) where there is potential impact on case numbers.

The plan should summarise the local arrangements for undertaking review and learning, so as to inform local and national structures and capture learning to assist in the development of

practice and the strategic management of risk.

Information on early learning from the initial incidents and outbreaks in Wales was included with

the letter sent by the Welsh Government on the 27th July 2020.

New learning is being shared all the time. This includes learning from other parts of the UK

including from the Local Government Association. This will be shared to compliment this guidance. All partners are encouraged to review and apply such information as it becomes

available.

Submission of completed Plans

The Welsh Government has asked that initial plans are developed and submitted to Public

Health Wales for their comment by Wednesday 12th August.

Plans should be e-mailed to:

PHW.SCSupportGroup@wales.nhs.uk

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Summary Checklist and actions by suggested heading

To assist with your planning and submission, a short checklist has been developed which should be completed.

| Local Planning and Response Structures, Roles and | Responsibilities |
|---|------------------|
| Outline of local structures, roles and responsibilities | |
| Each local plan should describe the identified lead with overall | |
| responsibility and oversight of the Prevention and Response | |
| Structure for local decision making and the delivery of response, | |
| including: | |
| - organogram | |
| - planning and response lead(s) | |
| - governance arrangements | |
| - summary of named leads and their key responsibilities for | |
| each Section of work or workstreams at local and regional | |
| level | |
| Local triggers for escalation | |
| Multi-Agency Strategic Regional TTP Oversight Group in place | |
| which is adequately resourced | |
| | |
| Surveillance | |
| Outline of how epidemiological surveillance informs sensitive early | |
| warning systems for recognition of community transmission | |
| Sources of surveillance data which will be reviewed to inform local | |
| risk assessments and response | |
| Systems for linking cases and for identification of clusters | |
| Protocol for regular Situational Awareness process – which include | |
| hospital and healthcare data | |
| Management of Clusters, Incidents and Outbreak | s |
| Agreed protocol for the management of clusters, incidents and | |
| outbreaks in community and key settings | |
| Have named leads for the management of clusters, incidents and | |
| outbreaks in line with the Communicable Disease Outbreak Plan | |
| for Wales | |
| Have an adequately resourced Multi-Agency Strategic Regional | |
| TTP Oversight Group which will provide leadership on contact | |
| tracing and situational awareness on emerging clusters and outbreaks | |
| Describe how to call on broader partners to respond to multiple complex incidents | |
| The arrangements for escalation to SCG/RCG members and the Welsh Government | |
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| | |

| Campling and Tasting | |
|---|--|
| Sampling and Testing | |
| Local arrangements for sampling and testing | |
| Sampling and testing arrangements for large outbreaks and | |
| incidents if local capacity exceeded | |
| | |
| Prevention | |
| Collaborative arrangements for identifying and protecting the | |
| most vulnerable people in society | |
| Approach to risk assessment based on local knowledge | |
| Identification of key places and sectors that may be at higher risk | |
| of transmission | |
| Consider mass vaccination plans for when a vaccine becomes | |
| available and plans to maximise the routine influenza vaccination | |
| programme to limit impact on the NHS | |
| | |
| Mitigation and Control | |
| | |
| Assessment of primary control measures in key settings and ensure | |
| promulgation of advice related to transmission | |
| Key settings and high risk premises (e.g. care homes, holiday parks, meat processors and food manufacturers, schools, universities) | |
| are identified, assessed and risk mitigation plans developed | |
| Local communities plans outlining collaborations between existing | |
| local community networks and partnerships and with the | |
| voluntary sector | |
| Reinforcement arrangements if non-compliance with control | |
| measures | |
| Plans for enhanced enforcement and communication in response | |
| to escalating incidents | |
| | |
| Communication | |
| | |
| Multi-sectoral communications strategy aligned to national | |
| messages developed | |
| A communication action plan should give a clear indication of | |
| which organisation leads on each element | |
| Description of communications leadership and infrastructure, including names and contact details of key communications leads | |
| for each partner organisation | |
| Summary of the communications channels relevant for | |
| regional/local dissemination, including methods for reaching | |
| specific groups | |
| Summary of key community stakeholders (community groups, | |
| MSs, MPs, special interest groups) along with an identified | |
| agencies responsible for informing and updating | |
| | |

| Implementation, Review and Learning | |
|---|--|
| Implementation timetable of the prevention and control plans with clear milestones and outcome measures | |
| Schedule for review of effectiveness of implementation of plans | |
| Arrangements for undertaking review and learning | |
| | |

Checklist Version 1: 29th July 2020