

## Briefing Note - GW

### Covid 19 – Structure to support contact tracing and outbreak management



Since the commencement of lockdown, our Environmental Health team has continued to focus on public health safety and in particular has;

- Provided **advice and guidance** to businesses modifying their operations for reopening
- Played a key role in supporting and enforcing the **business closure** regulations
- **Investigated** complaints associated with business closures, noise and anti-social behaviour.

Over recent times, it has become apparent that the team will need to continue and further develop its role in the fight against Covid. In particular, the team will be required to support the government's development and delivery of a *contact tracing, testing and outbreak management system*. On 23 April, the Government announced that a National Contact Tracing Service (NCTS) would be established as part of a wider test, trace and track approach, which will be aligned to national and local testing strategies. The national contact tracing system is expected to operate at four broad levels:

- **Automatic:** an app-based platform that automatically alerts people to possible contact with a positive case and directs them to testing.
- **Level 1:** *Local systems* for managing the most complex outbreaks, or outbreaks with the most complex implications.
- **Level 2:** Regional teams of health professionals (approximately 3,000) – currently being recruited
- **Level 3:** National teams of call handlers (approximately 15,000) – system outsourced to Serco.

The Cumbria approach to outbreak management is based around the following key elements:

#### Surveillance and case finding

To establish networks that will enable rapid case finding and referral through primary care, schools, care homes, and larger employers in the County. Ultimately, these networks should expand to include a much wider range of community organisations that can provide valuable local intelligence. These networks will identify symptomatic people, advise them to self-isolate, and inform a central contact point to arrange contact tracing and advice provision.

As the national contact tracing service is established and grows in scale and scope, it will feed in to our local surveillance and case finding system and will alert us locally to outbreaks that would best be managed locally.

### **Central contact point**

To establish a central contact point for notification of cases and potential outbreaks. Ultimately, this is likely to morph mainly into the Single Point Of Contact for the national and regional systems to alert us to outbreaks, but initially it will also pick up individual cases. This central contact and co-ordination point will be located within the County Council Contact Centre, with professional support from the Public Health Team.

### **Appropriate data system**

To establish a central shared data system for managing the contact tracing and outbreak control process. In the very early stages of implementation, the NCIC sexual health service contact tracing system will provide a local solution. This will rapidly be enhanced by a bespoke database that will be accessible by a range of partners in order to ensure that cases and contacts are appropriately logged and followed up.

### **Team of contact tracers**

In the immediate term sexual health service staff supported by District Council Environmental Health Officers, and public health staff will undertake contact tracing. In the short term, it may be that this group needs to be supplemented further, with appropriate training provided. In the longer term it is unlikely that this will be sustainable as more staff return to their usual duties; however by this stage the national contact tracing system will be fully embedded so there will be less requirement for local tracing capacity.

### **Access to testing – and the results of testing**

It is unlikely that the testing capacity to manage this system through local channels will be sufficient; ultimately we will therefore be reliant on the national Pillar 5 delivering timely test results. In the early days however it will be necessary to utilise local testing channels in order to get the system established in a timely manner. The existing lab capacity in North Cumbria and Morecambe Bay will be able to integrate their processes with the North Cumbria sexual health services effectively to ensure rapid communication of test results.

### **Capacity to manage and respond to outbreaks**

This work will build on the experience of the existing Outbreak Control Team that is focused on outbreaks in care homes, and on the existing capacity and expertise within Environmental Health Teams, the Public Health Team, NHS Infection Prevention and Control staff, and Public Health England. In the short term, this can be managed within existing resources: however, as with contact tracing, in the longer

term this is unlikely to be possible as more staff return to their mainstream duties. Additional resources totalling 1.7m have been awarded to Cumbria from the national £300 million allocation to support this part of the system and discussions are ongoing in relation to what the funding can support.

The first grant condition states: *In two tier areas, this grant is conditional on upper tier authorities working closely with their lower tier partners and ensuring those partners are given opportunities to deliver the outcomes this grant is meant to support where delivery by those cases, it is essential that upper tier authorities provide sufficient resources to lower tier authorities within the former's allocated funding so that the latter can carry out any responsibilities that they are asked to undertake*

It is clear that EH resources are required to focus on **contact tracing and outbreak control** as well as **business reopening**. Therefore, the team has been temporarily restructured to allow one Senior EHO, Emma Bundock, to become operational lead for contact tracing and outbreak control. In the short-term an agency EHO has been employed supported by two members of the EH team however, this may need to increase should the volume of work increase. This allows the existing SEHO on the Food and Occupational Health team to focus on supporting businesses to reopen safely.

## **Governance structure**

The *Cumbria Health Protection Board* has now been established to oversee the local response to Covid-19 as the focus of that response moves from national command and control with local civil contingencies action led by a Strategic Co-ordination Group, towards a locally-led, longer term approach.

The Health Protection Board will assume the responsibility for setting local health protection strategy and co-ordinating multi-agency action in support of the delivery of this strategy. In addition it will oversee the development of local policy and process relating to testing, contact tracing, outbreak control and scaling up to wider area outbreak management. In partnership with the national Joint Biosecurity Centre, it will be responsible for recommending any more stringent local countermeasures.

The Board will work with a *Member-led Outbreak Engagement Board (using the existing Public Health Alliance)* to establish adequate political involvement with this work and to develop good communications and engagement with the wider public about the local Covid-19 response in order to ensure that there is strong local support for the strategy and measures being adopted.

## **Membership**

The Health Protection Board is chaired by the Director of Public Health and includes appropriate strategic officers from the following organisations:

- Cumbria County Council
- Allerdale Borough Council

- Barrow Borough Council
- Carlisle City Council
- Copeland Borough Council
- Eden District Council
- South Lakeland District Council
- Public Health England
- NHS England
- North Cumbria Clinical Commissioning Group
- North Cumbria Integrated Care NHS Trust
- Morecambe Bay Clinical Commissioning Group
- University Hospitals of Morecambe Bay NHS Trust
- Cumbria Constabulary
- Cumbria Third Sector Network
- Community Emergency Response Groups (represented by CVS)
- National Joint Biosecurity Committee (*NB – unlikely to be able to attend routinely but in principle this link is required*)

### **Sub-structures**

The Board will oversee the work of a range of associated groups, including:

- An **Incident Management Hub** to maintain an overview of all outbreaks in the County. Given the range of outbreaks that might be expected, it is likely that this Hub will subsequently establish sub-groups covering care homes, schools, and wider community settings – this however will be kept under review;
- **Outbreak Control Teams** established as necessary to respond to individual outbreaks that require greater levels of input and action than can be provided by the Incident Management Hub;
- **Testing and Contact Tracing Tactical/Operational Group** to ensure that the contact tracing system is operating effectively; ensure appropriate deployment of local testing resources; and promote good liaison with emerging national testing routes;
- **Multi-Agency Intelligence Cell** which will be responsible for collating and communicating intelligence drawn from national and local data systems and other local networks, supporting case finding and approaches to outbreak control;
- **Strategic Media Advisory Cell** to ensure good public engagement with the work of the Board;
- **IPC Guidance Team** that can both develop standing guidance and provide detailed IPC support in outbreak situations.