

City Integrated Commissioning Board
Meeting in-common of the
City and Hackney Clinical
Commissioning Group and the City of
London Corporation

Hackney Integrated Commissioning Board
Meeting in-common of the
City and Hackney Clinical
Commissioning Group and the London
Borough of Hackney

City & Hackney Local Outbreak Board

**Joint Meeting in public of the two Integrated Commissioning Boards and the
Community Services Development Board on
Thursday 12 November
09:00-09.50
Microsoft Teams**

[Click here to join the meeting](#)

Chair – Cllr Christopher Kennedy

Item no.	Item	Lead and purpose	Documentation type	Page No.	Time
1.	Welcome, introductions and apologies	Chair	Verbal	-	09:00
2.	Declarations of Interests	Chair <i>For noting</i>	Paper	-	
3.	Minutes of the previous meeting	Chair <i>For approval</i>	Paper	2-5	
4.	Questions from the Public	Chair	None	-	
5.	Papers for discussion • Covid-19 Update • Finance Report • Local Outbreak Control Plan Update	Chair <i>For noting</i>	Papers	6-15 16-23 24-33	

Date of next meeting:

10 December, Format TBC

Meeting-in-common of the Hackney Integrated Commissioning Board
(Comprising the City & Hackney CCG Integrated Commissioning Committee and the London Borough of Hackney Integrated Commissioning Committee)

and

Meeting-in-common of the City Integrated Commissioning Board
(Comprising the City & Hackney CCG Integrated Commissioning Committee and the City of London Corporation Integrated Commissioning Committee)

and

Community Services Development Board
(Comprising system colleagues from across the City & Hackney geographic area)

Integrated Commissioning Board – Local Outbreak Board Session

Minutes of meeting held in public on 8 October 2020
Microsoft Teams

Present:

Hackney Integrated Commissioning Board

Hackney Integrated Commissioning Committee

Cllr Christopher Kennedy	Cabinet Member for Health, Adult Social Care and Leisure (ICB Chair)	London Borough of Hackney
Cllr Anntoinette Bramble	Cabinet Member for Education, Young People and Childrens' Social Care	London Borough of Hackney
Cllr Rebecca Rennison	Cabinet Member for Finance, Housing Needs and Supply	London Borough of Hackney

City & Hackney CCG Integrated Commissioning Committee

Dr. Mark Rickets	Chair	City & Hackney CCG
Jane Milligan	Accountable Officer	City & Hackney CCG
Honor Rhodes	Governing Body Lay member	City & Hackney CCG

City Integrated Commissioning Board

City Integrated Commissioning Committee

Randall Anderson QC	Chairman, Community and Children's Services Committee	City of London Corporation
Ruby Sayed	Member, Community & Children's Services Committee	City of London Corporation
Marianne Fredericks	Member, Community and Children's Services Committee	City of London Corporation

In attendance

Alex Harris	Integrated Commissioning Governance Manager	City & Hackney CCG
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Anne Canning	Group Director – Children, Adults and Community Health	London Borough of Hackney
Chris Lovitt	Deputy Director of Public Health	London Borough of Hackney
David Maher	Managing Director	City & Hackney CCG
Denise D’Souza	Director of Adult Social Care	London Borough of Hackney
Diana Divajeva	Principal Public Health Analyst	London Borough of Hackney
Helen Fentimen	Member, Community & Childrens’ Services Sub-Committee	City of London Corporation
Henry Black	CFO	NE London Commissioning Alliance
Ian Williams	Group Director, Finance and Corporate Services	London Borough of Hackney
Jake Ferguson	Chief Executive Officer	Hackney Council for Voluntary Services
Jonathan McShane	Integrated Care Convenor	City & Hackney CCG
Jon Williams	Executive Director	Healthwatch Hackney
Matthew Knell	Head of Governance & Assurance	City & Hackney CCG
Paul Coles	General Manager	Healthwatch City of London
Simon Cribbens	Deputy Director, Community and Childrens’ Services	City of London Corporation
Stella Okonkwo	Integrated Commissioning Programme Manager	City & Hackney CCG
Apologies – ICB members		
Other apologies		
Andrew Carter	Director, Community & Children’s Services	City of London Corporation

1. Welcome, Introductions and Apologies for Absence

- 1.1. The ICB for the first 50 minutes was operating in its capacity as the Local Outbreak Board.
- 1.2. Apologies were noted as listed above.

2. Declarations of Interests

- 2.1. The **City Integrated Commissioning Board**
 - **NOTED** the Register of Interests.
- 2.2. The **Hackney Integrated Commissioning Board**
 - **NOTED** the Register of Interests.

3. Questions from the Public

3.1. There were no questions from members of the public.

4. Covid-19 Update

- 4.1. Chris Lovitt introduced the item. There has been several instances in the past few weeks where Covid-19 cases had exceeded the expected rate.
- 4.2. It was generally expected that the figures would be slightly skewed by the lack of availability of testing. There was also a shift in the figures towards more covid-19 cases in the older age groups. The majority of cases, however, remained in the 20-40 age group. This was beginning to be reflected in hospitalisations.
- 4.3. David Maher informed the board that there were currently 50 people in ICU across London with covid-19 infections. This remained flat from last week. There were a further 250 covid-19 patients in acute beds. An area of concern was the capacity of hospitals to provide anaesthetists for the ICU beds. We were also preparing primary care for the winter.
- 4.4. Mark Rickets noted that some areas in the North West were at a prevalence rate of 500 per 100,000. Within London, NEL seemed to be higher than the rest of London and accelerating at a faster rate.
- 4.5. Chris Lovitt responded to a question from Randall Anderson on the
- 4.6. performance of the local test and trace. He stated that the uptake of testing had been high and the positivity rate quite low. We had been working with other partners such as Serco and Deloitte. Serco were aiming to double the amount of testing sites that they operated in London. This was due to be discussed at a project meeting with Serco on Friday 9 October.
- 4.7. The national contact rate for test and trace was below 60% and local results varied - below what would typically be considered a successful intervention. The majority of contacts were male and in wards which had high levels of covid positivity.
- 4.8. There had been an increase in calls to 111 – this was potentially due to a rise in flu infections as well as covid-19 infections.
- 4.9. If cases continued to rise, there could be localized interventions – for example, schools could take independent decisions around closures, mayors could implement what they feel is appropriate and necessary.
- 4.10. In Hackney we had been looking to see if we could gain further contact details for people. This had not involved the voluntary sector purely due to time constraints – it would take longer to pass over details to the voluntary sector. If we move into Tier 3 restrictions, we would need to change our model and recruit more people to deal with this.
- 4.11. Jake Ferguson stated that there had been a program launched to increase investment in the voluntary sector. Cllr Kennedy also added that local contact tracers were not knocking on doors, as it was found that this was not a well-received intervention. Chris Lovitt underscored the need to make sure that the message was clear and consistent – that if people have symptoms they need to get tested, engage with test and trace, and self-isolate.

➤ **Jake Ferguson to provide Liz Huges' contact details to Chris Lovitt.**

- 4.12. Marianne Fredericks questioned our ability to scale things up quickly, due to the nature of the virus and the propensity of infections to increase exponentially. Chris Lovitt stated that the modelling had been largely accurate thus far. There had been one day in which 70 cases were ostensibly recorded but this was due to a national data glitch.

4.13. The City Integrated Commissioning Board

- **NOTED** the report.

4.14. The Hackney Integrated Commissioning Board

- **NOTED** the report.

5. Local Outbreak Control Plan

- 5.1. Chris Lovitt stated that comms around this was still ongoing. There would likely be a nationally-announced change in the way restrictions were announced. There had been good engagement with local religious leaders but also high rates of transmission in those areas. However, the messaging had been relatively strong – if further restrictions were announced, local faith organisations would be a key priority in terms of messaging.

5.2 The **City Integrated Commissioning Board**

- **NOTED** the report.

5.3 The **Hackney Integrated Commissioning Board**

- **NOTED** the report.

6. Update from the Health Protection Board

- 6.1. This was submitted for information.

7. Finance update

- 7.1. Chris Lovitt noted that if we received more calls from test and trace there may be a concurrent budgetary pressure, but this had not yet happened. There was potential for this to be a problem with the combined effects of flu and covid-19 this winter.
- 7.2. Mark Rickets cited Tower Hamlets' pilots for GPs to do testing and social prescribers to do contact tracing. Chris Lovitt noted that in Tower Hamlets there had been interest from GPs and PCNs in a European model where there would be a "hot zone" within a GP practice. There had been some resistance from the DHSC on this point.

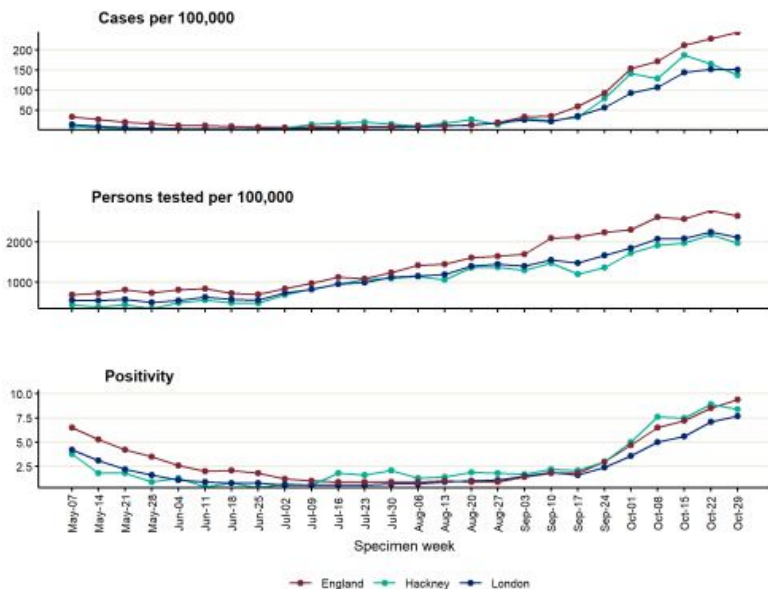
COVID-19 update to the Local Outbreak Control Board

Prepared by the City and Hackney Public Health Team
10 November 2020

For up-to-date figures please see <https://hackney.gov.uk/coronavirus-data>

There has been a reduction in Hackney incidence, positivity and testing rates with all three rates now being in line with London average and lower than England average

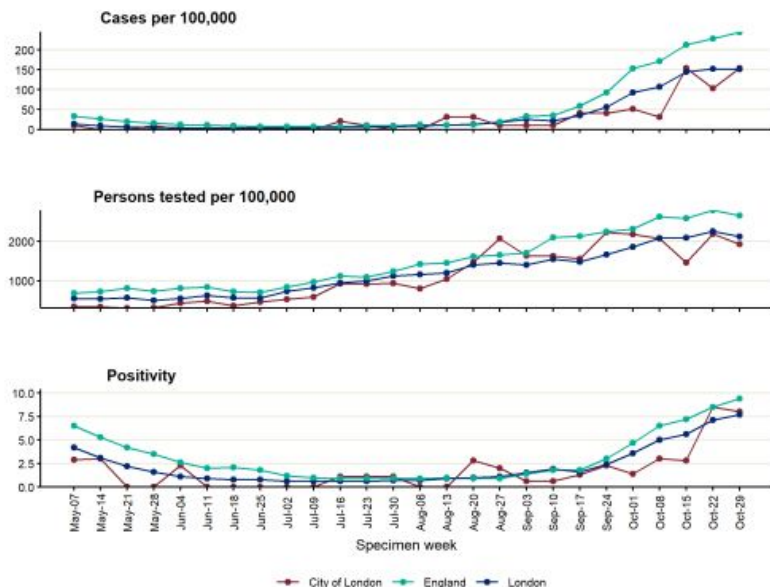
Incidence, testing and positivity rates in Hackney, by specimen date (May 5 to November 4 2020)*



- Hackney's incidence rate has significantly reduced over the last weeks and is now similar to the London average.
- According to the latest seven day period (October 29 to November 4), Hackney COVID-19 incidence fell at 137 cases per 100,000 population; this is lower than the previous week (165 per 100,000).
- The rate of testing in Hackney has decreased along with London testing rates since around the middle of September to 3,657 tests per 100,000 in the latest fortnight (October 26 to November 8). This is lower than the England average of 5,172 tests per 100,000.
- Hackney's positivity rate appears to have stabilised around 8% in recent weeks and is now in line with the average for London.
- Currently the overall positivity rate for Hackney is 7.4% (2.5% in Pillar 1 and 10% in Pillar 2).

City of London's incidence, positivity and testing rates are in line with London averages and lower than England averages

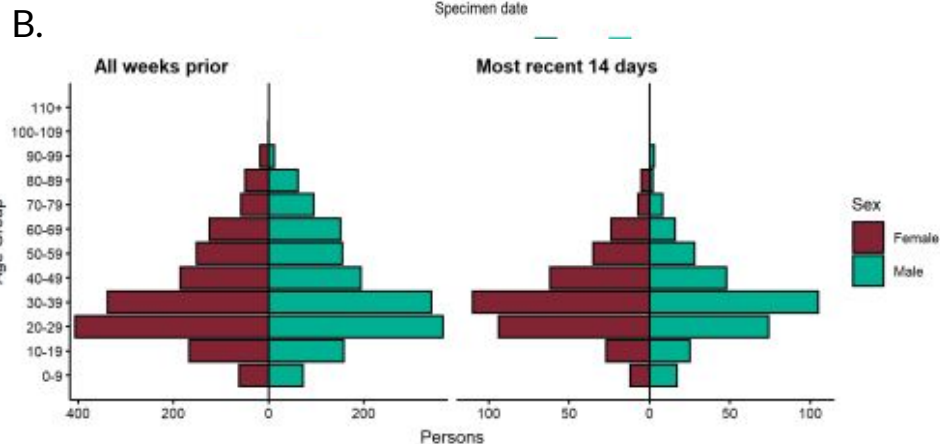
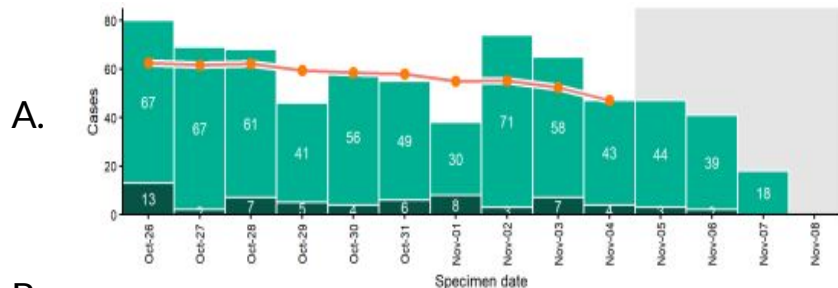
Incidence, testing and positivity rates in City of London, by specimen date (May 5 to November 4 2020)*



- City of London's incidence rate has increased in a fluctuating manner over the last weeks, and is now in line with the London average.
- According to the latest seven day period (October 29 to November 4), City of London COVID-19 incidence increased to 154 cases per 100,000 population from 103 per 100,000 in the previous week.
- The rate of testing in the City of London has decreased along with London testing rates to 3,960 tests per 100,000 in the latest fortnight (October 26 to November 8); this is lower than the England average of roughly 5,172 tests per 100,000.
- City of London positivity rate has increased to 7.3% in recent weeks and is now in line with the average for London.
- Currently the overall positivity rate for the City of London is 7.3% (2.9% in Pillar 1 and 10.7% in Pillar 2).

Most cases in Hackney are now being diagnosed among the residents aged 20 to 40

Daily confirmed Covid-19 cases in Hackney, by specimen date, October 26 to November 8 2020* (A) and cases by age in the last fortnight, up to November 8 (B)

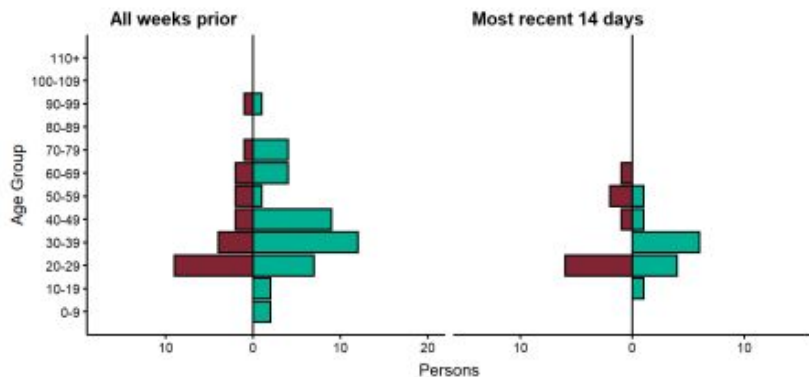


Data source: Public Health England. *4 most recent days subject to reporting delay.

- The average daily number of cases has been on the whole reducing slightly:
 - Around 80 cases/day in the beginning of the period
 - Around 55 cases towards the middle of the period
 - Around 47 cases towards the end of the fortnight period
- The most recent cases continue to be diagnosed among younger age groups, for both genders.
- Recently more cases have been diagnosed among residents aged 30 to 39, which has overtaken the 20-29 age range for both genders.
- Over the last two weeks, COVID-19 incidence rates have either remained stable or decreased in all age groups except residents aged 65 and over: incidence in this age group is about 120 per 100,000 compared with about 100 per 100,000 two weeks ago.

Most cases in the City of London are now being diagnosed among younger working ages

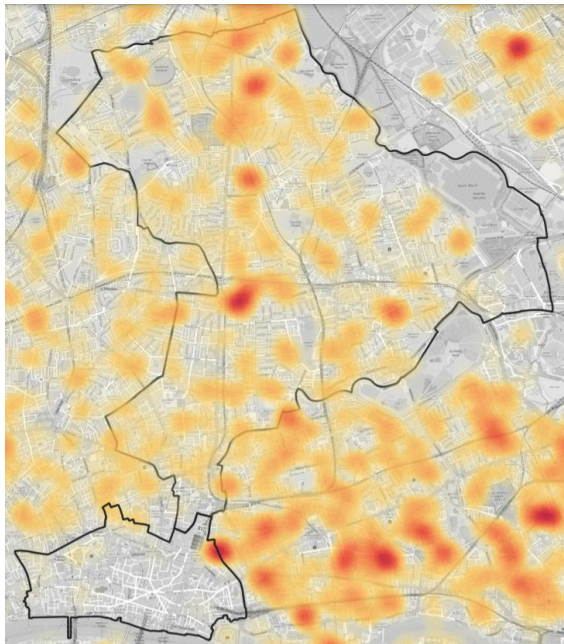
Cases by age in the last fortnight, City of London, up to November 8*



- The average daily number of cases has remained relatively stable:
 - Around 3 cases/day in the beginning of the period
 - Around 3 cases towards the middle of the period
 - Around 1 cases towards the end of the fortnight period
- The chart of daily COVID-19 cases cannot be presented due to small numbers in the City of London.
- The most recent cases continue to be diagnosed among younger age groups, for both genders.
- Due to the small number of cases it is difficult to ascertain an obvious pattern across age and gender: generally a higher number of cases have been diagnosed among males and younger working ages in the City of London.
- Recently more cases have been diagnosed among female residents aged 20 to 29, which is now similar to the male 30-39 age range.

Differently from the picture in September, new Covid-19 cases are no longer concentrated in the north of Hackney

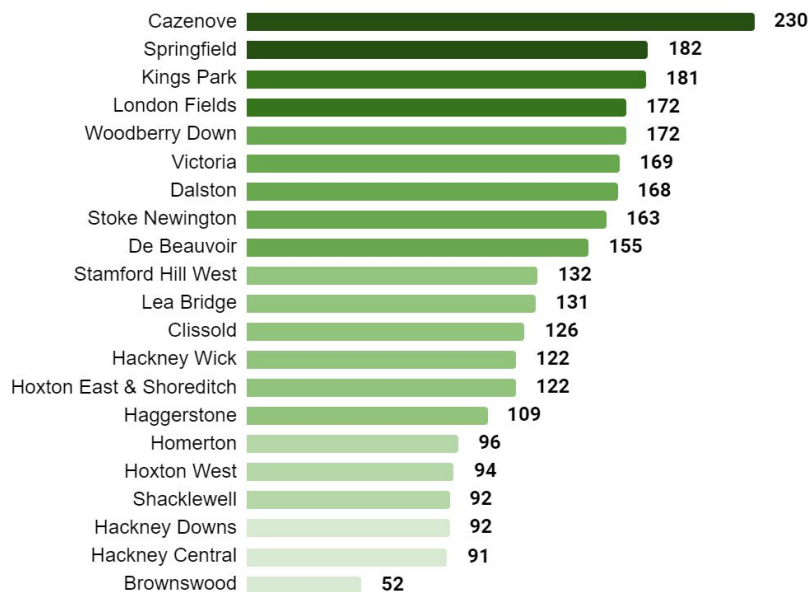
Distribution of COVID-19 cases in City and Hackney between 18 October and 7 of November



- COVID-19 cases continue to be more dispersed across the borough compared with the situation in the beginning and mid-October, when more cases were registered in the north of Hackney.
- Still, a significant proportion of cases are attributed to household clusters, around 28%; this is higher than the average of 22% that has been seen across the course of the pandemic.
- The wards with the highest number of clusters between 26 October and 8 November were Springfield (17 clusters), Cazenove (10 clusters), and Dalston (10 clusters)
- In the City, although Bishopsgate is ranked with the highest rate of cases, Cripplegate and Farringdon Without currently have more residential clusters, at two and three respectively.

Some of the north Hackney wards are still showing relatively high incidence rates compared with the rest of the borough

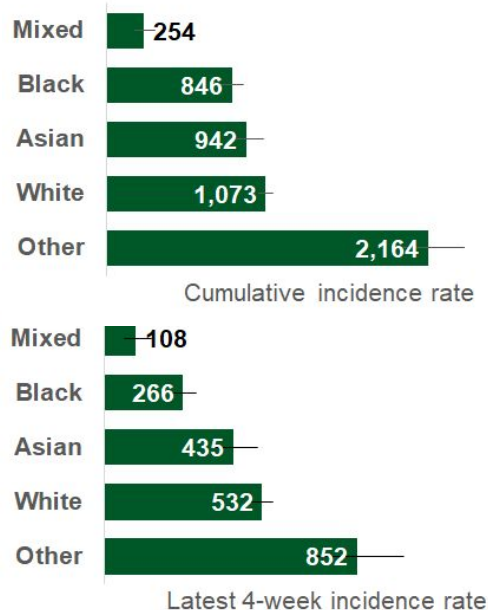
Rate of COVID-19 per 100,000 per week in most recent 7 day period with complete data in Hackney (October 29 to November 4)



- In the most recent complete seven-day period (29 October to 4 November), 15 of Hackney's 21 wards (71%) recorded incidence rates above 100 cases per 100,000 population.
- Cazenove, Stamford Hill West, and Springfield Wards have recorded among the highest incidence rates throughout the pandemic with the rates peaking around the third week of October 2020 - at about 500 per 100,000 population.
- The latest incidence rates show that both Cazenove and Springfield Wards still have the highest incidence rates, although these have reduced considerably compared with October figures; rates in the Stamford Hill West Ward are now significantly lower.
- Cazenove Ward has recorded a seven-day incidence rate above 200 cases per 100,000 population for the past five week periods (1 October to 4 November).
- Over the past two weeks, most other wards showed relatively stable rates.

The highest COVID-19 incidence rates are recorded among City and Hackney residents identifying as Other ethnic group and the lowest - among residents from a Mixed background

COVID-19 cumulative and the latest 4-week incidence rates in City and Hackney, up to 3 of November, by ethnicity

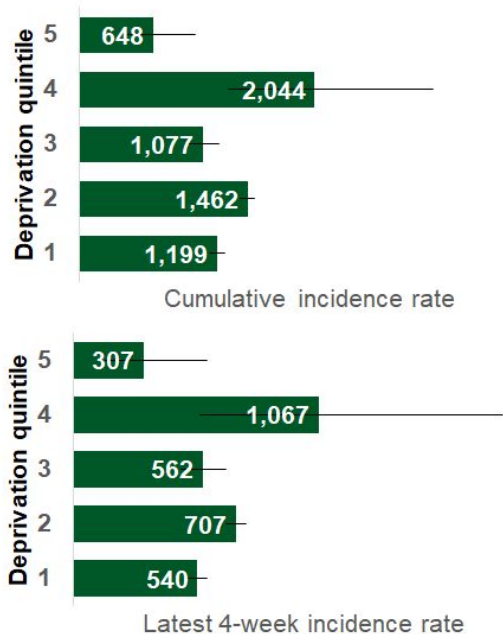


Data source: Public Health England.

- Up until now in the pandemic City and Hackney residents, who indicated that their ethnic group is Other than the four major groups, had significantly higher incidence rates compared to all other ethnicities.
- This pattern is repeated in the latest four weeks' worth of data.
- Residents from a Mixed ethnic background had significantly lower incidence rates compared with all other groups.
- According to all of the data collected so far, there were no significant differences in COVID-19 incidence rates among Black, Asian, and White residents.
- The latest four-week rates, however, were significantly lower among Black compared with White and Asian residents.
- These findings are not an exact reflection of testing rates, as overall, testing rates are significantly higher among White residents and significantly lower among Black and Mixed residents compared with all other ethnic groups.
- Please note, these rates should be treated with caution as around a quarter of all cases and around a half of all tests had no ethnicity record.

Overall, the highest COVID-19 incidence rates are observed in areas falling into second most and fourth least deprived quintiles nationally

COVID-19 cumulative and the latest 4-week incidence rates in City and Hackney, up to 3 of November, by area deprivation quintile (1 - most deprived, 5 -least deprived)



- According to all of the data collected so far in the pandemic, COVID-19 incidence rates among residents living in areas which fall into the national deprivation quintiles 2 and 4 were significantly higher compared with all other areas in City and Hackney.
- Even though the rate in quintile 4 appears to be much higher, the rates in quintiles 2 and 4 did not differ significantly.
- A similar pattern emerged in the latest four-week worth of data, except in this time period the only significant difference in incidence rates was between the most and second most deprived quintiles with quintile 1 (most deprived) seeing a significantly lower incidence rate.
- A relatively high incidence rate in quintile 4 might be a result of significantly higher testing rates among residents living in these areas.
- Testing rates in areas falling into the second most deprived quintile meanwhile were significantly lower compared with quintiles 1 and 3, and similar to quintile 5 overall.

Success rates of contacting COVID-19 cases have increased from 73% to 80% since the introduction of Hackney and the City of London's local contact tracing programme

- The NHS Test and Trace system started operating on the 28 of May; between then and 1 November, 3,165 COVID-19 positive residents of Hackney and the City of London had their information transferred to the NHS Test and Trace system;
 - 78% (2,469) were contacted
 - 19% (600) failed to be contacted
 - 2% (50) were in progress
 - 1% (46) were uncontactable
- A higher success rate has been noted since the introduction of Hackney and the City of London's local contact tracing programme on 22 September. Between 25 May and 21 September, 73% of cases were successfully contacted, whereas between 22 September and 1 November 80% of cases were successfully contacted.
- Rate of success ranged by age from around 80% in age group 20-59 to around 58% among residents aged 80 and over; residents over the age of 60 had a higher proportion of cases that failed on follow-up, in general.
- Among the ethnic groups, residents whose ethnicity was unknown had the highest proportion of cases which has failed on follow up (36%); the lowest proportion of failed cases was among White and Asian residents (15% in each group).
- On average it takes residents 2.5 days between becoming symptomatic and taking a COVID-19 test, and further 4.5 days to be contacted by contact tracers.

Title of report:	LOCP Finance Report
Date of meeting:	12 Nov 2020
Lead Officer:	Dr Sandra Husbands, Naeem Ahmed, Mark Jarvis
Author:	Reza Paruk, Financial Advisor (CACH)
Committee(s):	Local Outbreak Control Board
Public / Non-public	Public

1. Executive Summary:

This paper updates the Local Outbreak Control Board with the financial position for the Test and Trace programme budget.

Local authorities in England were allocated £300 million to support local work to prevent and manage outbreaks of Covid 19. The Test and Trace grants were based on the public health grant allocations, and the City of London Corporation received £0.15m, while the London Borough of Hackney received £3.1m. This funding will enable both organisations to develop and implement tailored local Covid 19 outbreak plans. Both grants are being managed by the Director of Public Health, with decisions on spend being overseen by the Covid 19 Health Protection Board (HPB) (which includes finance partners from both the City and Hackney) and scrutinised by this committee.

2. Financial Summary

The total projected spend is currently standing at £1.86m. This is summarised in the table below:

Item Number - Appendix 2:	Expenditure Type:	20/21 Full Year Forecast:	21/22 Full Year Forecast:	Total Forecast:
4	VCS Test & Trace Programme	£389,725	£278,375	£668,100
1,2,8,9,19,22,23,24,25,26	Staffing Resources	£450,646	£111,205	£561,851
5,21	IT Software	£137,000	£17,000	£154,000
15	Welfare Support to Support Self Isolation	£120,000	£0	£120,000
6,10,11,18	Communication Costs	£90,340	£0	£90,340
12	Critical Response Team (CRT)	£90,000	£0	£90,000
28	Other commitments - City of London	£65,264	£0	£65,264
17	Local Contact Tracing Proposal	£28,752	£0	£28,752
7,20	Community Covid Helpline - Bikor Cholim	£22,749	£0	£22,749
13	Covid Awareness - Interlink	£22,500	£0	£22,500
27	City Matters for Covid 19 Wrap Around	£16,000	£0	£16,000
3	Pan- London Outreach Testing - ADPH London	£13,755	£0	£13,755
14	Emergency Support - External Care provision	£8,100	£0	£8,100
16	Covid 19 Testing (Find & Treat)	£5,000	£0	£5,000
Total:		£1,459,831	£406,580	£1,866,411

As additional responsibilities for testing and contact tracing continue to be devolved at a local level, there will likely be further demands on this budget. The HPB will submit regular, monthly finance reports to the LOCB, so that the board can be assured that there is appropriate use of the funds in line with the grant conditions.

A further detailed breakdown of the projected spend for each organization, including details of outbreaks plans agreed to date is shown in Appendix 2 below.

3. Recommendations:

The **City and Hackney Local Outbreak Control Board** is asked to **NOTE** the report

The **City Integrated Commissioning Board** is asked:

- To **NOTE** the report;

The **Hackney Integrated Commissioning Board** is asked:

- To **NOTE** the report;

4. Strategic Objectives this paper supports [Please check box including brief statement]:

Deliver a shift in resource and focus to prevention to improve the long term health and wellbeing of local people and address health inequalities	☐	
Deliver proactive community based care closer to home and outside of institutional settings where appropriate	☐	
Ensure we maintain financial balance as a system and achieve our financial plans	☒	
Deliver integrated care which meets the physical, mental health and social needs of our diverse communities	☐	
Empower patients and residents	☐	

Sign-off:

Dr Sandra Husbands, Director of Public Health

London Borough of Hackney: Naeem Ahmed, Director of Finance (CACH)

City of London Corporation: Mark Jarvis

Appendices:

Appendix 1. Letter: Local Authority Test and Trace Service Support Grant Determination (2020/21) [No 31/5075].

<https://drive.google.com/file/d/1AMwKGbMz9oa5r8zUrlu8RXwdeeROzgh3/view?usp=sharing>

Appendix 2:

Hackney:

Item	Expenditure Type:	Description	2020/21 Forecast	2021/22 Forecast	Total Forecast	Comments
1	Staffing Resources	Programme Manager - assignment commenced in July 2020)	£72,000		£72,000	Post assumed till the end of the financial year. The cost is split 80:20 (LBH/Col)
2	Staffing Resources	PH Consultant (1 year fixed term contract)	£93,659	£31,220	£124,878	Commences on 1st July 20 to 30th June 21. The cost is split 80:20 (LBH/Col)
3	Pan- London Outreach Testing - ADPH London	Pan-London Outreach Testing - ADPH London	£13,755		£13,755	Agreed expenditure
4	VCS Test & Trace Programme	VCS Test and Trace Programme	£389,725	£278,375	£668,100	
5	IT Software	Tableau software platform for COVID dashboard	£17,000	£17,000	£34,000	Purchased
6	Communication Costs	Bereavement leaflet for frontline workers	£1,340		£1,340	

7	Community Covid Helpline - Bikur Cholim	Community Covid helpline - Bikur Cholim (3 months)	£7,000		£7,000	It was agreed by the Board on 17 August 2020 with some appropriate KPIs to be developed by the service.
8	Staffing Resources	Keep London Safe Programme (Campaign Manager)	£2,756		£2,756	
9	Staffing Resources	Customers Services cost agreed for 6 months	£52,000		£52,000	Cost agreed for 6 months (£1,968 per week)
10	Communication Costs	Covid Communication Plan	£33,000		£33,000	Covid Communication Plan - £33k agreed
11	Communication Costs	Further communications work (internal) £10k.	£10,000		£10,000	Further communications work (internal) for £10k.
12	Critical Response Team (CRT)	Critical Response Team (CRT)	£90,000		£90,000	Start date 1st October 20-31st March 21 (Agreed on 21st Sept 20)
13	Covid Awareness - Interlink	Funding for COVID awareness work - Interlink	£22,500		£22,500	
14	External Care provision	Emergency support over the weekend - Electcare Health	£8,100		£8,100	Agreed on 5th October 20 by HPB
15	Welfare Support to Support Self Isolation	Welfare support to support self isolation	£120,000		£120,000	Agreed on 5th October 20 by HPB

16	Covid 19 Testing (Find & Treat Service)	Covid 19 testing (Find & Treat)	£5,000		£5,000	With the Find and Treat Team - we are the funder of last resort, in case the Home Office does not pick up the funding.
17	Local Contact Tracing Proposal	Local Contact Tracing Proposal	£28,752		£28,752	Agreed by Health Protection Board - There may not be a requirement if staff can be recruited from the redeployment pool (x2 FTE Sc6 for 6 months)
18	Communication Costs	City and Hackney Coronavirus New Normal Budget (Further communication for residents & businesses)	£30,000		£30,000	Agreed by Health Protection Board on 26th October 2020 (£30k LBH, £16k CoL)
19	Staffing Resources	Tableau Data Manager post x1 PO5 for 6 mths	£24,227	£4,405	£28,632	Agreed by Health Protection Board on 5th October 2020 (6 months forecast)
20	Community Covid Helpline - Bikur Cholim	Community Covid helpline - Bikur Cholim additional grant	£15,749		£15,749	Helpline adviser's costs for 20 weeks for £11,049 and Communications from August 20 to December 20 for £4,700
21	IT Software	Coronavirus Call Handling Software	£120,000		£120,000	Agreed by Health protection board on 2nd November 2020 (15 weeks).
22	Staffing Resources	Administrative support (forecast is for 3XSc5) for 6 mths	£44,860	£8,972	£53,832	Admin 1: To provide dedicated and full time support to co-ordinate and report on the lifecycle of IMT meetings Admin 2 & 3: To help with day to day tasks and work flexibly on a full time basis over the next 6 months. Excellent organisational, administrative and design skills needed.
23	Staffing Resources	Senior Public Health Specialist: Health Protection Lead 1XPO10 for 6 mths	£32,584	£6,517	£39,101	Oversight of outbreak control plan delivery, leading operational work and proposing strategic approaches for a minimum of 6 months.

24	Staffing Resources	Project Manager 1XPO7 for 12 mths	£29,048	£40,668	£69,716	Management of contracts/relationships for Covid response, lead on testing and community engagement for 12 months
25	Staffing Resources	Senior Public Health Specialist: Communications 1XPO7 for 6 mths	£29,048	£5,810	£34,858	Strategic oversight of communications across all LOCP workstreams. This role will oversee the work of PH comms officers, ensuring a good engagement strategy is delivered for SOPs across City and Hackney for a minimum of 6 months.
26	Staffing Resources	Senior Public Health Specialist: IPC/Health Protection 1XPO7 for 6 mths	£29,048	£5,810	£34,858	Technical input on infection prevention control to priority settings/partners.
Total:			£1,321,152	£398,775	£1,719,928	

City of London:

Item	Expenditure Type:	Description	2020/21 Forecast	2021/22 Forecast:	Total Forecast	Comments
1	Staffing Resources	Programme Manager - assignment commenced in July 2020)	£18,000		£18,000	Post assumed till the end of the financial year. The cost is split 80:20 (Hackney:Col)
2	Staffing Resources	PH Consultant (1 year fixed term contract)	£23,415	£7,805	£31,220	Commences on 1st July 20 to 30th June 21. The cost is split 80:20 (Hackney:Col)
18	Communication Costs	City and Hackney Coronavirus New Normal Budget (Further communication for residents & businesses)	£16,000		£16,000	Agreed by Health Protection Board on 26th October 2020 (£30k LBH, £16k CoL)
27	City Matters for Covid 19 Wrap Around	City Matters for Covid 19 Wrap Around	£16,000		£16,000	Committed and agreed

28	Other commitments - City of London	Other commitments - City of London	£65,264		£65,264	Plans in development, awaiting further details
Total:			£138,679	£7,805	£146,484	

Title of report:	COVID-19 Local Outbreak Control Plan update
Date of meeting:	12 November 2020
Lead Officer:	Sandra Husbands, Director of Public Health
Author:	Kiran Rao, LOCP Project Manager
Committee(s):	Local Outbreak Control Board
Public / Non-public	Public

Executive Summary:

The purpose of the report is to provide a summary of key areas of development/progress in relation to the Local Outbreak Control Plan. This paper therefore provides a summary of considerations in relation to:

- outbreak management planning- scenario exercises
- standard operating procedures
- testing
- local contact tracing
- care settings
- schools and educational settings
- community grants and community champions programme
- communications
- Hackney Incident Management Team
- finance

Recommendations:

The **City and Hackney Local Outbreak Control Board** is asked to **NOTE** the report

The **City Integrated Commissioning Board** is asked:

- To **NOTE** the report;

The **Hackney Integrated Commissioning Board** is asked:

- To **NOTE** the report;

Strategic Objectives this paper supports [Please check box including brief statement]:

Deliver a shift in resource and focus to prevention to improve the long term health and wellbeing of local people and address health inequalities	☐	
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Deliver proactive community based care closer to home and outside of institutional settings where appropriate		
Ensure we maintain financial balance as a system and achieve our financial plans		
Deliver integrated care which meets the physical, mental health and social needs of our diverse communities	☒	Working collaboratively across the whole system, including the community and voluntary sector (and with local businesses) to respond to the local impact of the Coronavirus pandemic
Empower patients and residents	☒	Empowering patients, residents, communities and staff with knowledge and understanding about how to reduce the risk of COVID-19, prevent/reduce the spread of infection and how to respond in the event of a possible/suspected outbreak

Specific implications for City

Information is contained in the main report

Specific implications for Hackney

Information is contained in the main report

Patient and Public Involvement and Impact:

Local contact tracing: Patients are called for contact tracing purposes but also to connect them with the Welfare Line if needed. This can help support on a range of issues that might make maintaining isolation difficult or impossible, especially for vulnerable or socially isolated individuals.

Information on other areas is contained in the main report

Clinical/practitioner input and engagement:

The public health team is providing extensive support via the COVID-19 inbox (Monday to Friday) which provides consultant support when needed, Local contact tracing receives support 7 days a week and working groups have clinical/practitioner input.

Information on other areas is contained in the main report

Communications and engagement:

Communications continue to focus on meeting the objectives of the LOCP- in particular, preventing and mitigating the spread of COVID-19 to save lives, communicating openly and honestly with key stakeholders, and working with the community to develop capacity to support testing and contact tracing locally. This includes the continued reinforcement of the prevention messages 'hands, face, space' on various channels, amplifying government messages and supporting the work of the GLA and London Councils. In addition, there is ongoing work on specific communications related to key areas of work, with key stakeholders, including the public, care homes and local contact tracing teams.

Equalities implications and impact on priority groups:

Local contact tracing: COVID-19 is understood to have disproportionately frequent and severe effects on specific high risk groups, who may be the least likely to be contacted by the national NHS Test and Trace team. The local service offers an opportunity to address this inequality both directly, by contacting harder to reach individuals at higher risk, and indirectly by contributing to the national and global fight against the virus.

The Community Champions work and COVID-19 Grant Information programme is targeted at key communities and priority groups.

Safeguarding implications:

All contact tracing staff undertake mandatory safeguarding training, before being able to access the national database to make calls.

Impact on / Overlap with Existing Services:

Information is contained in the main report

Main Report

Update Against Key Areas Of The Local Outbreak Control Plan

Outbreak management planning scenario exercises

A second virtual scenario exercise was completed on 5 November. 45 participants attended from the City and Hackney Gold and System Operational Command groups, Primary Care Network leads, the care home working group and other important partners. The aim of the exercise was to test clarity of roles, responsibilities and partnership working to respond effectively to rising tide events with objective review of governance- escalation points, capacity pressures and surge responses. The theme focused on the NHS, health care sector and the winter season. A report will be completed shortly.

Standard operating procedures (SOPs)

The SOP working group is in the testing, review and refinement phase. All SOPs are now reviewed dynamically to reflect significant and frequent guidance changes. The group has been working with a behavioural insights colleague to [develop posters](#) to complement the SOPs and these will be published shortly. The working group have also embarked on reviewing the SOPs to make them more concise and user friendly. Two new SOPs are published, they are a SOP for multiple private, social and supported housing settings and universities and higher education settings.

Testing

Background and Current Position

This month there has been a focus on increasing access to and capacity for testing in the north of Hackney and in the City of London. The sustained high incidence rate of COVID-19 cases in the wards of Stamford Hill West, Cazenove and Springfield is an ongoing concern with current access to testing locally available to these wards through the Mobile Testing Unit (MTU) at Yesodey Hatorah Girls School, on Sundays only. It has been a challenge to find a site big enough and with the access points required to situate a more permanent testing site safely. With this in mind, Sandford Court became the only immediate workable option. On 29 October an MTU opened to provide COVID-19 testing at Sandford Court, in Stamford Hill. MTUs generally operate on a rolling rota and the Sandford Court MTU has been in operation on alternate days from Monday 2 November. The average number of tests MTUs are able to complete a day is approximately 160 tests. The plan is to replace the MTU with a standing local testing site (LTS), which will be in operation 7 days a week from 8am to 8pm, as all local testing sites are.

On 20 October the LTS opened in the Guildhall Yard, in the City of London. The other existing test sites in Hackney are: Hackney Bentley Rd, LTS; Hackney Central, LTS and Hackney Marshes, MTU.

Testing Trends and Issues:

The number of people booking a test across London has started to slow down and LTSs, MTUs, and Regional Test Sites pan London are showing a slight decrease in the number of test kits being registered. Hackney Bentley Road LTS average number of tests a day has decreased from 241 to 230 from 15-26 October. The DHSC is aware of this slight decrease in testing and has confirmed there will be refreshed communications to remind people to test should they start to experience symptoms, however mild. Overall, from the beginning of September, the trend has been for there to be an increase in testing rates in Hackney and the City.

Resistance to some MTUs and LTSs is being experienced across the country and some Hackney residents have consistently voiced their objections to the Sandford Court site. Ongoing engagement with local residents and targeted local communications are underway, along with measures to reassure them that the site is safe.

Local contact tracing service

Local Contact Tracing for the City and Hackney launched on 22 September. The service has been running successfully since then seven days a week. As of 25 October, Hackney received 594 cases to follow up from the national system and successfully completed 242 of them. The City has had three cases so far, two of whom were completed successfully. Hackney and the City of London's contact tracing effort has increased the percentage of COVID-19 cases that were successfully contacted or excluded from contact tracing between 22 September and 20 October from 71% (1,195 cases) to 82% (1,391 cases). The service also provides an opportunity to link residents with local authority support. The recent cyberattack on Hackney Council resulted in a five day period where cases had to be returned to the national team. However, the Hackney ICT team developed a solution within a day, with the delay resulting from the time taken to permit renewed access to the secure national database. The current solution is in operation and fully effective.

The Hackney service is completing training for a second cohort of contact tracers and managers. Numbers in the first weeks of operation have been significantly higher than expected, placing greater demand on the team. The significant expansion of the pool of trained individuals should remedy this. Further, there will be recruitment of two full-time individuals for an initial six month period using funds from the test and trace budget.



The rapid implementation of the service means that systems and processes are simple, and currently limited to spreadsheets. Investigation has been conducted to determine a viable, sustainable, and comprehensive solution to replace this. Currently, a purpose-built system by the Hackney ICT team is the strongest candidate, and provisional proposals have been presented to the Testing and Local Contact System working group and Health Protection Board. The final project plan and costs are being confirmed; if positive, a first version of the software with a limited set of functions to replace spreadsheets will be completed in the next four weeks.

In addition to this work on software development, other priority areas include: strengthening data linkage and communications with environmental health officers to improve responsiveness to outbreaks; and developing training to enhance the skills of our contact tracers.

Care homes and non CQC registered care settings

Where outbreaks in care homes and day centres have occurred, the CCG commissioned GP Confederation swabbing service has supported settings with whole home testing and Infection Prevention and Control (IPC) advice. In order to provide assurance to the Health Protection Board that effective IPC measures are being implemented across all settings, discussion with the CCG IPC lead are aiming to address unmet needs. A care settings audit is underway to support this work by focusing on current IPC practice including what proportion of settings are accessing the CCG IPC training offer.

The national Flu vaccination programme for older people in CQC registered care homes is being delivered this season by community pharmacists who have begun delivering flu jabs in these settings. There are currently no similar arrangements for other care settings other than staff encouraging residents to access their vaccinations through their GPs or by visiting a community pharmacist.

Schools

Schools and educational settings are being closely supported with case management by Hackney Education, the City of London Department of Community and Children's Services and Public Health, with appropriate and timely IPC advice. Confirmed cases are flagged and tracked by both Hackney Education, the City of London Department of Community and Children's Services and Public Health who continue to provide specialist advice, including at the weekly unions Joint Staff Forum. The termly head teachers' briefing is regularly attended by a Public Health representative who shares updates on local COVID-19 intelligence, the



Schools and Educational Setting Standard Operating Procedure and IPC advice. City and Hackney Public Health Team also provides assurance around support and advice available. Work is also well underway on developing a school's COVID-19 dashboard. Public Health has consulted closely with the Hackney Education and the City of London Department of Community and Children's Services to ensure that the data provided is as targeted and responsive as possible.

Community grants and community champions programme

Hackney CVS are administering a £600k COVID-19 information grant programme reaching out to VCS organisations across the City and Hackney, working with communities disproportionately affected by COVID-19 and those who may have barriers to understanding and receiving Public Health messaging. The programme closed for applications on 26 October and 43 applications were received. Applications are currently being assessed and a grants panel will make its decisions on which proposals to fund on 11 November.

The community champions programme has successfully recruited 49 champions across 21 organisations and training is underway. They are also scoping the recruitment of floating community champions and are in consultation with a range of organisations including Healthwatch City of London, Carers Centre, Peabody Parents Champion Scheme run via Young Hackney. The first Champions Forum has informed updates to the resource pack, as well as information for the Public Health team to tailor messages to specific communities.

Hackney Incident Management Team (IMT) meetings

An incident management team (IMT) is a time-limited working group, convened to provide strategic direction; coordination between agencies; and external assurance, in order to address outbreaks of COVID-19.

Multi-user facility IMT

Two IMT meetings have been held on the 9th and 19th October to discuss an outbreak at a facility for housing recent arrivals. The profile was:

- 229 service users living in the facility, with the majority being single males and single females
- 2 families
- Most residents are young, however some are over 75 years

A small number of cases and contacts had been identified, as one person had COVID-19 symptoms. The facility had called in the Find and Treat team from UCLH, to test the

symptomatic people and identify the contacts, who were all then advised to isolate themselves in their rooms. It was unclear if there were further cases, as mass testing had not been done. It was also unclear what the standard of the facility's infection control procedures was. Public Health commissioned Find and Treat to do rapid testing of all the residents, with the support of language support services, where necessary. Environmental health services were tasked to check on the COVID-19 security and risk assessment of the premises.

Find and Treat interviewed 193 service users and identified 14 additional cases through rapid testing. Therefore, a second IMT was held 10 days after the first. All but one case was picked up by asymptomatic testing. The second IMT highlighted the need for greater clarity on roles and responsibilities in early warning outbreak management, (from informing, contact tracing, communicating results to help people self isolate and then if they refuse to self isolate, the roles and responsibilities for enforcement). The facility temporarily closed to new residents, but has now reopened.

North Hackney IMT

The IMT for the COVID-19 outbreak affecting the communities in Stamford Hill and Seven Sisters is coordinating action between Haringey and Hackney, with the support of Public Health England (PHE). The group has met every 2 weeks since it was first convened on 21 July.

Key issues for discussion between the two boroughs are as follows:

- understanding and comparison of local epidemiology
- location of testing sites in both boroughs to ensure that there is good coverage by both location and days of the week
- joint communications on reducing the risk of coronavirus

Communications

Communications continue to focus on meeting the objectives of the LOCP, in particular, preventing and mitigating the spread of COVID-19 to save lives, communicating openly and honestly with key stakeholders, and working with the community to develop capacity to support testing and contact tracing locally. This includes the continued reinforcement of the prevention messages 'hands, face, space' on various channels, amplifying government messages, and supporting the work of the GLA and London Councils.

In terms of specific recent COVID-19 communications from the City Corporation this month:

- a video and news release were issued on 15 October as London moved into the local COVID alert level: high category;



- a news release was issued in response to the Chancellor's announcement on funding for businesses hit by COVID-19 on 22 October;
- information about the testing centre in Guildhall Yard was communicated to businesses and on social media;
- and a letter was sent to all residents from the Policy Chair and Lord Mayor on 26 October reinforcing public health messages.
- A wraparound on the City Matters newspaper is going out to all residents and businesses on 4 November.
- We are also working to get correx boards placed across the City to highlight the importance of 'hands, face, space'.

Hackney Communications team conducted a focus group with men aged 20-29, which will inform future communications aiming for improved user friendly language and, at the time, intended to generate new ideas on how to approach a possible tier 3 lockdown, using photos and quotes from local people. Further activity from Hackney Communications include:

- continued to promote the government's Tier 2 restrictions on social media, in print publication and by placing an advert in the Heimishe newsheet, with continuation of wide ranging social media across Facebook, Twitter and Instagram.
- A test site has opened at [Sandford Court](#), which has been communicated to press and residents.
- Hackney press releases include [02 October](#), [15 October](#), [27 October](#) as well as a number of responses to press enquiries. Media coverage in [Evening Standard](#), [BBC Radio London](#), German TV, [Hackney Citizen](#), [Hackney Citizen](#), [Hackney Gazette](#), Jewish Tribune, [Local Government Chronicle](#) and [Politics Home](#).
- Targeted communications includes a letter to send to residents in the top 3 affected wards and advertisements in Hamodia and the Jewish Tribune.
- A 4-week 60 site bus poster sized coronavirus poster campaign is currently live across Hackney, advertising 'hands, face, space'.
- A 4 page wraparound on Hackney Life was sent to all homes on the day the tier 2 announcement was made.
- 840 'hands, face, space' correx boards are up on 14 of Hackney's shopping streets.
- 'hands face space' branded merchandise has been ordered: 500 reusable masks and 500 sanitizer bottles and 50 floor sticker 'decals' to remind people of social distancing will be issued in the borough.
- 500 extra plain masks will be issued to the Orthodox Jewish community based on positive feedback.
- 'Remember your face covering' posters have been distributed to community partners, alongside weekly adverts in the 'Heimishe newsheet'.

Finance

A separate and more detailed finance paper is provided.

Supporting Papers and Evidence:

Supporting papers and evidence linked in report