



Report of the Director of Public Health

Report to Executive Board

Date: 18 March 2020

Subject: Update on Leeds City Council's preparations for Coronavirus (COVID-19) outbreak

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Has consultation been carried out?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Will the decision be open for call-in?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Summary

1. Main issues

- This report provides an update on Leeds City Council's preparations for the (COVID-19) outbreak, which began in December 2019 and presents a significant challenge for the entire world, but national and local health and social care systems have planned extensively over the years for an event like this, and the UK is therefore well prepared to respond in a way that offers substantial protection to the public. The work at a local level is being done within the context Government's action plan with the broad phases of the national approach, which includes four stages: contain, delay, research, mitigate.
- The Leeds Health and Social Care system has been refreshing its plans since the outbreak began, in line with national guidance, with all council services recently engaged in the planning and refreshing business continuity plans.
- Please note that this is a fast moving incident with the situation changing daily and being heavily reported in the media. An updated report will be provided closer to the date of Executive Board.
- At this stage, the council and the city are as well prepared as possible given the resources and the information available, with established regular updates for councillors, MPs, staff, partners and the public.

2. Best Council Plan Implications (click [here](#) for the latest version of the Best Council Plan)

- The proactive approach to dealing with COVID-19 in the city will be aimed towards it not impacting on the council and the city's ambitions.

3. Resource Implications

- At this stage, there are no direct resource implications relating to this report, but this is something being kept under close monitoring.

Recommendations

Executive Board is requested to:

- 1) Note the national context and the local approach to prepare the council and the city's response to the Coronavirus (COVID-19) outbreak.
- 2) Note that because of the fast moving context, there will be an updated report issued closer to the Executive Board meeting date.

Purpose of this report

- 1.1 This report updates Executive Board on the preparations that the Leeds Health and Social Care system and Leeds City Council, working with broader partners, has been making in response to the cases of Coronavirus (COVID-19) in Leeds. The Leeds response is set within the national context and the West Yorkshire Health Resilience Partnership and West Yorkshire Resilience Forum arrangements.

Background information

- 1.2 The current novel coronavirus (COVID-19) outbreak has presented a significant challenge internationally ever since the new strain was first identified in Wuhan City, China in December 2019. Since then, there have been a number of cases identified across the world including the United Kingdom.
- 1.3 On 30 January 2020, the World Health Organisation (WHO) declared the outbreak of Coronavirus a "Public Health Emergency of International Concern".
- 1.4 On 10 February, the Secretary of State for Health and Social Care, Matt Hancock MP, announced the introduction of a set of strengthened legal powers to increase protections against the Coronavirus outbreak in England. The Health Protection (Coronavirus) Regulation 2020 have been introduced to keep individuals considered by public health professionals to be a reasonable risk of spreading the virus, in isolation.
- 1.5 On 2 March 2020, the Prime Minister chaired a meeting of the government emergency COBR committee on the coronavirus outbreak. Following this meeting, the government published the Coronavirus Action Plan on 3 March 2020, containing countermeasures taken by the health and care system across the UK to respond to the Coronavirus outbreak. The precise response to coronavirus will be tailored to the nature, scale and location of the threat in the UK, as the understanding of this develops.
- 1.6 The Plan also includes information on the government's four stage strategy to respond to Coronavirus: Contain, Delay, Research and Mitigate. The government

has also recently increased its public awareness campaign to prevent and slow the spread of Coronavirus. The campaign will appear in a range of media/advertising platforms.

- 1.7 On the 5 March 2020, a statutory instrument was made into law that adds COVID-19 to the list of notifiable diseases. This change in law requires GPs to report all cases of Coronavirus to Public Health England. The Chief Medical Officer announced the first death of a patient in the UK with Coronavirus on 5 March 2020.
- 1.8 Numbers of cases are being updated daily on the following two links by NHS Region on [COVID-19 cases by NHS Region](#) and on [COVID-19 cases by local authority \(upper tier or unitary\)](#). As at 6 March, Leeds has three confirmed cases, all of whom have travelled and had minimum contact.

2. Main issues

- 2.1 The Leeds Health and Social Care system has been refreshing its plans since the outbreak began, in line with national guidance, with all council services recently engaged in the planning and refreshing business continuity plans. A strategic response and recovery plan is being developed. This work is being done within the context of the Government's national action plan [COVID-19 National Action Plan](#) and the West Yorkshire Local Health Resilience Partnership (WYLHRP) and the broader West Yorkshire Local Resilience Forum (WYLRF).
- 2.2 Over and above their responsibilities as Category 1 responder within the Civil Contingencies Act 2004, Local Authorities are required to take certain steps to protect the health of their local population. Directors of Public Health (DPH) have specific responsibilities and duties that arise directly from the NHS Act 2006, the Health and Social Care Act 2012, and related regulations Section 73A(1) of the 2006 Act. This gives the DPH responsibility for exercising their Local Authority's functions in planning for, and responding to, emergencies that present a risk to the public's health.
- 2.3 The Director of Public Health has established the Leeds COVID -19 Oversight, Assurance and Co-ordination Group (COAC) to maintain an oversight of the local Health and Care response to Covid-19. Membership of this group includes the DPH, NHS Leeds CCG, NHS Trusts, primary care, adult and children's social care, independent providers and communication officers from across the system. The group provides co-ordination for the Leeds Health and Care system response, provides assurance to the DPH and local Health and Care partners that the system is responding appropriately, assures that actions are taken across the Health and Care system to implement control measures and identifies pressures, impacts and risks to the Health and Care system.
- 2.4 At an operational level, the Leeds Health & Social Care Resilience Group (chaired by NHS Leeds CCG) has a detailed operational role across agencies to implement actions to contain the outbreak. These actions come directly via NHS England (NHSE) and the DHSC to NHS partners. The governance of this group reports directly into System Resilience Assurance Board (SRAB) and thence NHSE, whilst also reporting into COAC for assurance purposes. An example of this is the '7 asks' from NHS England at the end of February 2020 which included a requirement to establish a home testing service and Leeds level coordination centre.
- 2.5 In addition to this comprehensive work across the Health and Social Care system, the Council is developing a strategic response and recovery plan structured around six key themes - health, infrastructure and supplies, business and economic impact, citizens and community, organisational impact, and media and communications –

with a Cross Council Coronavirus Working Group to drive the implementation of the response and recovery plan with lead officers identified for key actions. This work will draw on the national reasonable worst case planning assumptions and the multi-agency strategy at a West Yorkshire level.

- 2.6 Early work from the cross council group has been on updating relevant service and partnership plans; refreshing business continuity plans with the current scenario to think through implications and options; and extensive communications, with frequently asked questions and support to managers.
- 2.7 Please note that this is a fast moving incident with the situation changing daily and being heavily reported in the media. An updated report will be provided closer to the date of Executive Board, which will contain more detail about the strategic response and recovery plan.

3 Corporate considerations

3.1 Consultation and engagement

- 3.1.1 Engagement has been accelerated in recent weeks responding to the increase in national and local response to the Coronavirus, including between services within the council, with partners, with elected members and with the public. Much of this engagement has been carried out by teams within the council as part of their normal day-to-day business.

3.2 Equality and diversity / cohesion and integration

- 3.2.1 These considerations are already an implicit part of the planning, particularly given the nature of the incident and this will continue, for example with prioritisation of services for vulnerable people and monitoring of potential community tensions.

3.3 Council policies and the Best Council Plan

- 3.3.1 The proactive approach to dealing with Coronavirus (COVID-19) in the city will be aimed towards it not impacting on the council and the city's ambitions. The cross council and partnership way of working, informed by the values, is underpinning this work.

Climate Emergency

- 3.3.2 We are considering the issues and implications for example in areas such as waste management and will report more fully in the updated report that will be issued just before the meeting date.

3.4 Resources, procurement and value for money

- 3.4.1 At this stage, there are no direct resource implications relating to this report, but this is something being kept under close monitoring.

3.5 Legal implications, access to information, and call-in

- 3.5.1 There are no specific legal implications or access to information issues with this report at this stage.

3.6 Risk management

- 3.6.1 The risks related to Coronavirus referenced throughout this report will continue to be monitored through the council's existing risk management processes. For example under two of the main standing risks of "Major incident in the city" and "Major Business continuity issue for the council", but also more generally within all risks. A particular focus here will be the work to review business continuity plans for our critical services, which are reported annually to Corporate Governance and Audit. The COAC group has a role to identify and flag risks to the Health and Care system. These might include e.g. pressures on hospital admissions/ discharges and on intensive care beds/ventilators; pressures on primary care; supplies of personal protective equipment etc. Such pressures would be flagged through SRAB in the first instance.

4 Conclusions

- 4.1 This report provides an initial update on the council's preparations in response to the Coronavirus (COVID-19) outbreak, with a further update due to be issued just before the meeting date. This paper focuses in particular on the proactive approach being taken on the strategic response and recovery work to complement existing comprehensive work within the Health and Social Care System. This work will be done within the context of the national approach and relevant West Yorkshire approaches.
- 4.2 At this stage, the council and the city are as well prepared as possible given the resources and the information available, with established regular updates for councillors, MPs, staff, partners and the public. There is extensive liaison with a range of national and regional colleagues and agencies to ensure that we have the latest information available to inform our plans.

5 Recommendations

- 5.1 Executive Board are requested to:
- Note the national context and the local approach to prepare the council and the city's response to the Coronavirus (COVID-19) outbreak.
 - Note that because of the fast moving context, there will be an updated report issued closer to the Executive Board meeting date.

6 Background documents¹

None.

8 Appendices

None

¹ The background documents listed in this section are available to download from the council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.