

## **LEEDS STRATEGIC RESPONSE & RECOVERY PLAN – Coronavirus (COVID-19)**

This plan is a framework for a response and recovery to the coronavirus (COVID-19) incidents, enabling the council and city to be as prepared as possible given the unprecedented challenges, rapidly changing context and the resources and information available. The multi-agency arrangements drive delivery of this plan, combined with the efforts of individual organisations and the community more broadly. It is set within the context of the government's strategy to tackle coronavirus and, within the context of the West Yorkshire Local Resilience Forum (WYLRF) and the West Yorkshire Health Resilience Partnership (WYHRP).

Inevitably, at this stage, the plan is more focussed on response than recovery, but with a clear intent to shift into scenario planning for lifting of lockdown and recovery to a new normal, taking a proactive approach as early as possible given the prolonged nature of this incident.

### **Aims and objectives of this plan:**

- Minimise the effect of the outbreak on the health and wellbeing of the city, especially the most vulnerable.
- To monitor, mitigate or minimise any relevant risks to the council and city from the Coronavirus outbreak to ensure business continuity where possible.
- Provide what support we can to individuals, families and communities and businesses affected, and encourage communities to provide support.
- Follow national guidance and signpost people to relevant advice.
- Recognise and plan for any anticipated impact on service delivery, particularly the NHS and social care, but also other critical services as the situation continues to change.

### **CURRENT POSITION AS AT APRIL 2020**

- The national context has been set by the publication of the government Coronavirus Action Plan on 3 March 2020, with further actions and announcements since then, for example: stricter social distancing measures; shielding; volunteer schemes; implications for foreign travel; a range of funding announcement across most sectors; plans to expand testing; and PPE delivery plans. The World Health Organisation (WHO) declared a pandemic on 11 March 2020.
- An overview of the multi-agency arrangements is provided on the next page, intended to give the best possible coordination and communication on the complex interrelated key challenges and being operated as efficiently as possible. The health and social care arrangements are at the heart of a broader response covering all aspects of the city, with strong links to West Yorkshire arrangements and the national command and control approach. These arrangements are rightly quite dynamic and responsive to what is an ever changing and challenging context, with these under regular review to ensure they are fit for purpose and effective.
- Each action in the plan has a named lead officer within Leeds City Council. These individuals will liaise with other internal colleagues, partner organisations and others as required in order to provide the assurance needed on progress.
- A very regular rhythm of communications is established with public, councillors and MPs, staff and partners.
- The number of COVID-19 cases as reported by Leeds Teaching Hospital Trust are being updated daily on the .gov.uk website COVID-19 cases by local authority. As at 3pm on the 15th April, the latest confirmed figures available at the time of finalising this report, the number of confirmed cases within Leeds stood at 779. As at 5pm on the 15th April the number of confirmed hospital deaths in Leeds stood at 101.

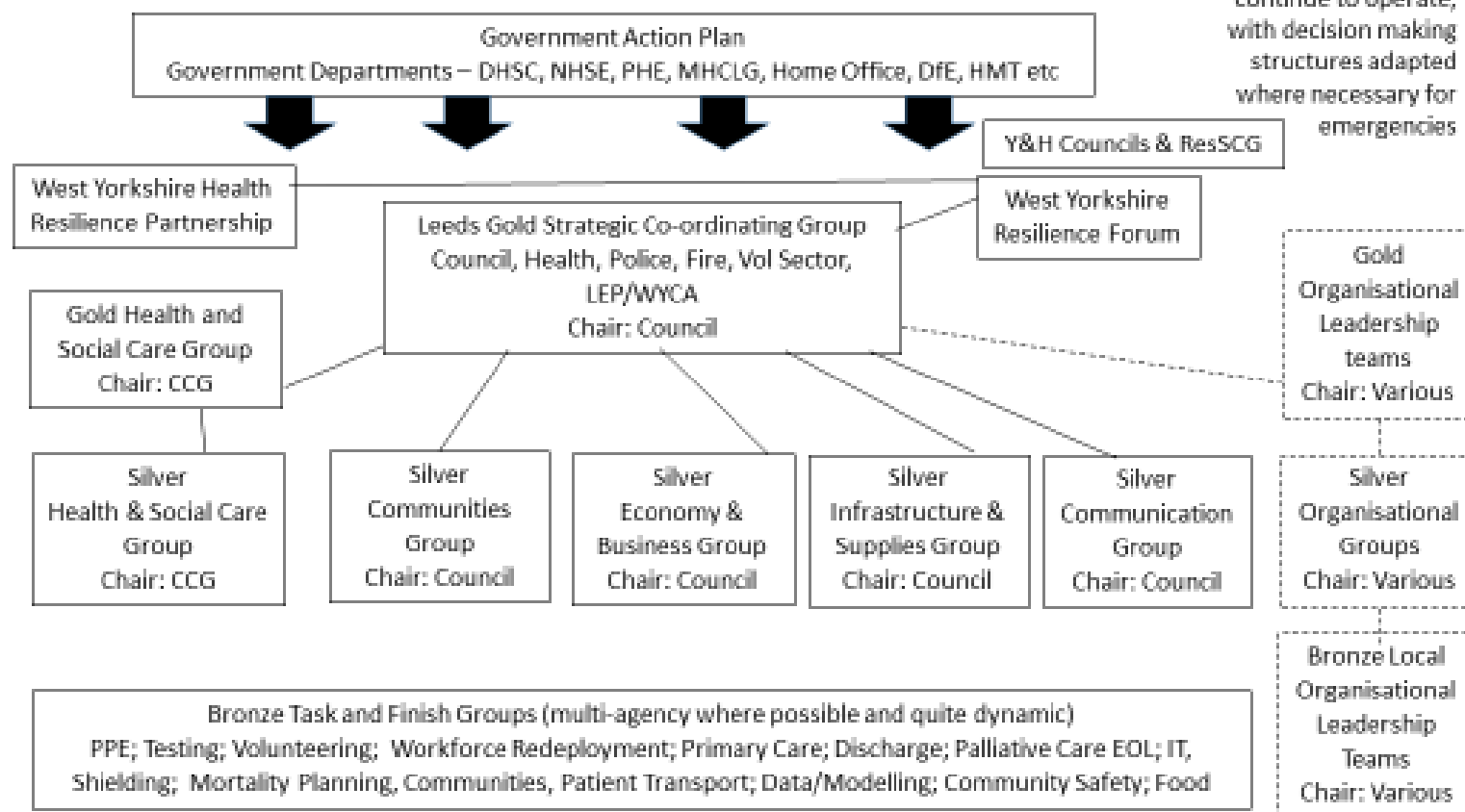
**Leeds COVID-19 Response and Recovery Plan Themes:**

- Health & Social Care
- Communities
- Economy & Business
- Infrastructure & Supplies
- Organisational
- Communications

**Aims and objectives:**

- Minimise the effect of the outbreak on the health and wellbeing of the city, especially the most vulnerable.
- To monitor, mitigate or minimise any risks to the city from the Coronavirus outbreak to ensure provision of essential services where possible.
- Provide what support we can to individuals, families and communities and businesses affected, and encourage communities to provide support.
- Follow national guidance and signpost people to comply with relevant advice.
- Recognise the impact on service delivery, particularly the NHS and social care, but also other critical services, if the spread of the virus continues.

**Leeds Multi-Agency Command and Control Arrangements  
COVID-19 – Overview**



**Please note:**  
Governance & boards for all organisations continue to operate, with decision making structures adapted where necessary for emergencies

Item no.	Action	Officer lead(s)	Status / Comments
<b>1. Health &amp; social care</b>			
1.1	Ensuring effective liaison and support between the Council, Local NHS Partners and the West Yorkshire Local Health Resilience Partnership (LHRP), to provide an effective, co-ordinated multi-agency response to Coronavirus (COVID-19), including readiness of the health and social care system, from acute to community, to deal with the anticipated pressures in the system effectively.	<b>Health &amp; Social Care Gold</b> (Victoria Eaton, Julian Hartley, Cath Roff, Tim Ryley)	<ul style="list-style-type: none"> <li>• Health &amp; Social Care Gold command refreshed and established to encompass all aspects of the system. Chaired by the CCG to oversee the local management of the pandemic, with a clear focus on ensuring hospitals have sufficient intensive care capacity whilst maintaining access for continuing, urgent and primary care.</li> <li>• Leeds H&amp;SC Silver established with the ability to call a system level silver command call 8am-8pm 7 days a week</li> <li>• Leeds H&amp;SC Bronze Operational group meeting 3 times a week to manage health and care system at an operational level, chaired by CCG.</li> <li>• System liaising with Public Health England (PHE) and West Yorkshire Health Resilience Partnership (LHRP)</li> <li>• Public Health continue to work pro-actively on surveillance, prevention and control of COVID 19 in Leeds. This work is supporting the health and care system to safely manage COVID 19 outbreaks in the community and to manage system flow.</li> <li>• The Public Health intelligence team are providing specialist support to enable detailed understanding of the current and future impact of COVID 19 on the city, enabling the system to provide a timely and effective response and to inform preparedness planning to meet changing demands.</li> <li>• Public Health is ensuring consistent national public health messages are being used locally. Promoting good mental health advice for the general population (including children &amp; young people) has been developed along with targeted messages for vulnerable groups</li> <li>• Testing for all health and care staff is underway, under leadership from the Director of Public Health. Work is underway to co-ordinate the roll out of this national testing programme for health and social care staff and then broader key workers as capacity expands. LTHT staff are being tested through the pathology laboratory at the LGI.</li> <li>• The Health and Care Gold Command Group has agreed a Personal Protective Equipment (PPE) position for Leeds care home and</li> </ul>

			<p>community staff, based on the PHE national guidance where there is evidence of sustained transmission of COVID 19 in the community, this is being disseminated to partners by the PPE bronze group.</p> <ul style="list-style-type: none"> <li>• Extensive changes made through partnership working across the local health and care system to cope with the pandemic, including: <ul style="list-style-type: none"> <li>○ Significantly increasing LTHT's intensive care capacity and isolate this for COVID positive patients.</li> <li>○ Converting spaces (such as operating theatres) to become critical care facilities</li> <li>○ Reducing the number of elective (planned) operations to limit the number of people who will need intensive care in recovery from theatre.</li> <li>○ Limiting complex operations to reduce the risk for patients who could be immunocompromised after surgery and also reduce the risk of COVID-19 infections acquired in hospital.</li> <li>○ Changing the nature of GP interaction, shifting from face-to-face service delivery to a model that includes extensive triage and digital / telephone based patient consultations.</li> <li>○ Extensive social care changes to support hospital discharges implemented on 18<sup>th</sup> March 2020, including an additional 120 step-down beds commissioned across the city; and ongoing work to support discharge for Older People's Mental Health Services. Key data demonstrates rapid progress with 165 patients in the bed base for 21 days or longer, compared to 487 patients in January 2020, with 116 people supported to move (by 9<sup>th</sup> April).</li> <li>○ 7-day social work cover in place to support hospital discharge and throughput from step down beds and cover for COVID advice line since 3<sup>rd</sup> April</li> <li>○ Talking Points (face to face advice offer ) suspended on 18th March , replaced by responsive telephony support and prioritisation of home visits within Social work and occupational therapy services</li> <li>○ Additional support offered to people no longer able to access day services from 18th March 2020</li> </ul> </li> </ul>
--	--	--	---

			<ul style="list-style-type: none"><li>○ Guidance developed to support people who lack capacity regards decision to adhere to social isolation rules</li><li>○ Extensive workforce changes to support the actions taken, with clear communications, effective use of ICT, provision of PPE and clear guidance for using PPE</li><li>○ LTHT being the sponsoring NHS Trust for the establishment of the Nightingale Hospital for Yorkshire and Humber in Harrogate. This facility will provide critical care capacity should existing resources in existing NHS Trusts be overburdened. LTHT has provided leadership, oversight and staff to create this new facility within three weeks of initiation.</li><li>● At the time of writing, the actions taken have resulted in good capacity and sufficient well-trained staff at LTHT to provide high quality, safe care for the number of COVID positive patients who have been admitted.</li><li>● LTHT has the ability to cope with further increases in demand and transfer of patients from smaller NHS Trusts across the region.</li><li>● Partner contributions to the work led by Leeds CCG focussing on the wider impacts of COVID, including post COVID rehabilitation; impact on urgent non COVID related conditions; impact of interrupted care on people with long term conditions; and mental health and physical health impacts of the pandemic.</li><li>● Public health support for the GP Confederation and Primary Care Networks with practical support and advice in relation to staying healthy and self-care for both the shielded group and other people at high risk,</li><li>● Ensuring rough sleepers placed into emergency accommodation continue to, or start to receive support and treatment for drug and alcohol issues.</li><li>● Significant work with providers to ensure their readiness and engagement.</li><li>● Written to 12,500 unpaid carers to ensure they are clear about routes to help if needed.</li></ul>
--	--	--	--

			<ul style="list-style-type: none"> <li>• Close links with Citizens and Communities group to ensure effective support from communities, volunteers and Third Sector Leeds</li> <li>• Reorienting volunteering work contracts with the Third sector to enable them to provide this service.</li> <li>• Contribution to the Council's wider response to emergency food provision, including providing information and advice to ensure appropriate support and referrals, influencing the food offer to ensure healthy balanced food availability and developing support resources around food safety, healthy eating, managing waste and recipes.</li> <li>• The PPE challenges facing local services across the system continue to be raised via national channels. See section 2.3</li> <li>• Care homes remain a significant concern for the city, particularly in light of continuing problems with securing PPE supplies. There have been a number of care homes with confirmed cases/outbreaks in Leeds.</li> <li>• The Infection Control team are contacting all Leeds care homes daily to provide regular support. As a result, the Council is confident that the data is increasingly accurate, and that reporting practices are much more consistent.</li> </ul>
<b>2. Infrastructure and supplies impact</b>			
2.1	Work with relevant authorities and agencies to assess and respond to disruption to key infrastructure such as public transport.	<b>Gary Bartlett</b>	<ul style="list-style-type: none"> <li>• Liaison with the West Yorkshire Combined Authority (WYCA) to continue to review changes to Bus and Rail services, link on communications about this.</li> <li>• Updated advice and guidance made available to bus and rail passengers and communicated through all channels</li> <li>• Work to focus on key worker transport, including for Nightingale</li> <li>• Support where needed for pressure points on transport</li> <li>• Overall peak traffic levels have fallen by more than 70% as the crisis has developed.</li> </ul>
2.2	Assess the possible impact on key supply chains and required actions e.g. Catering Services (e.g. school meals), Cleaning services	<b>Sarah Martin</b>	<ul style="list-style-type: none"> <li>• Plans in place and continued liaison with services. No major issues identified at this stage but continually being reviewed.</li> </ul>

			<ul style="list-style-type: none"> <li>• Supply and demand of fuel being monitored closely, provision in place should there become shortage of supply</li> <li>• Working closely with our food suppliers- no major issues some issues with failed supply of products but being able to source through low levels of off contract spend.</li> </ul>
2.3	Ensure sufficient PPE available to key services across the city and that guidance is followed consistently.	<b>Cath Roff</b>	<ul style="list-style-type: none"> <li>• NHS system moved to “push” system to provide PPE when stocks low, with some evidence of this working, but still shortages reported periodically, eg gowns.</li> <li>• Cath Roff appointed as city-wide lead for PPE: <ul style="list-style-type: none"> <li>○ with additional capacity attached to her to help with stock control, logistics etc</li> <li>○ with the DPH role to provide guidance based on the national approach</li> <li>○ deployment of LRF emergency supplies against agreed prioritisation framework</li> <li>○ brokering of mutual aid across the city</li> <li>○ awareness raising with the sector on most recent PPE national guidance and its implications</li> </ul> </li> <li>• Extensive work to procure and source PPE for non NHS, including at a city wide level and through emergency provision via the LRFs.</li> <li>• Raised this as the biggest concern locally and nationally with shortages in a range of settings being reported.</li> </ul>
2.4	Establish arrangements for food supply to the vulnerable, working with partners and securing an appropriate facility.	<b>Polly Cook/Lee Hemsworth</b>	<ul style="list-style-type: none"> <li>• Build on existing partnerships and approaches with FareShare, ReThink Food, the Leeds Food Aid network and the supermarkets to extend and provide emergency food provision in the city</li> <li>• Established a facility to provide a central location in Leeds for food storage and distribution, linking fleet vehicles and drivers for food deliveries and collections across the city.</li> <li>• The new food facility estimated they receive an average 250 referrals a day and have dispatched approx. 4,500 food parcels since they opened (inclusive of the Bank Holiday weekend).</li> <li>• Redeploy staff to work both within the warehouse and as delivery drivers</li> </ul>

			<ul style="list-style-type: none"> <li>Both the Covid 19 helpline and the Local Welfare Support Scheme helpline arrange access for citizens to emergency food provision.</li> </ul>
<b>3. Business and economic impact</b>			
3.1	Ensure effective liaison with business, specifically representative bodies to understand impact on local economy (including business confidence) and provide relevant advice or support where possible, including access to government grants.	<b>Eve Roodhouse</b>	<ul style="list-style-type: none"> <li>Emergency structures in place with workstreams covering: Intelligence; business support; communications; administration; and, recovery.</li> <li>Intelligence hub provides a weekly intelligence report based on information collated from across the council (e.g. city centre footfall) and through proactive contact with businesses and business representative groups (e.g. Chamber of Commerce). Weekly meetings are held with business representative groups.</li> <li>City centre footfall has dropped significantly against the level it was at during the same period last year, many days up to 90% less.</li> <li>Business support working with colleagues across the council to ensure delivery of national Government schemes on business rates relief and small business grants schemes and to support commercial tenants and suppliers where required. Also working with WYCA to pivot existing City Region wide business support schemes (e.g. Digital Enterprise) to respond to COVID 19. (Cross reference to 5.4)</li> <li>Communications workstream is ensuring that the Leeds City Council business pages on COVID 19 are regularly updated to include relevant information: <a href="https://www.leeds.gov.uk/coronavirus/business">https://www.leeds.gov.uk/coronavirus/business</a></li> <li>The team is also leading on social media campaigns relating to implementation of small business grants and promoting good news stories (e.g. Herida Healthcare winning contract to supply NHS Nightingale).</li> <li>Businesses across Leeds City Region directed to the LEP as the first port of call: <a href="https://www.the-lep.com/business-support/covid-19-support-for-businesses/">https://www.the-lep.com/business-support/covid-19-support-for-businesses/</a></li> <li>Recovery. At this stage consideration is being given as to the likely key areas of focus which are expected to include: access to finance; innovation; skills, recruitment and retention; and, the role of Leeds Inclusive Anchors and the Leeds £.</li> </ul>



			<ul style="list-style-type: none"> <li>Administration includes supporting all workstreams but also accepting offers of support from key partners anchor institutions (offers such as free car parking and spaces in halls of residents for key workers etc.). Our sister city of Hangzhou has provided Leeds with 10,000 surgical masks.</li> </ul>
<b>4. Citizens and communities impact</b>			
4.1	Assess the impact on key services and plans for events (e.g. related to areas below) to understand implications for service delivery and plan/communicate accordingly e.g. Schools, Care homes, Commissioned services, Community Hubs, Leisure centres, Waste services.	<b>Helen Freeman/ All Chief Officers</b>	<ul style="list-style-type: none"> <li>Business Continuity Plans are being continuously reviewed with the pandemic response continuing for a protracted period. Key issues are gathered and clarified with relevant government department.</li> <li>With lockdown, focus shifted to work out how to follow national guidance with the aim of maintaining essential services whilst ensuring staff and public safety.</li> <li>Maintained provision for key workers across schools and nurseries</li> <li>Maintained access to food for FSM children through parcels, vouchers or the early help hubs</li> <li>Assessed services against clear framework and maintained communications with key stakeholders and the public about the implications and the alternatives for access (cross reference to 5.2 for approach)</li> <li>Approaches to range of services has changed, all communicated through the daily update and on the website, for example: <ul style="list-style-type: none"> <li>Housing repairs and home visits</li> <li>Planning</li> <li>Street cleansing</li> <li>Refuse collection – no longer collecting garden waste</li> <li>All museums, leisure centres, attractions closed, with some offering online engagement</li> <li>Libraries closed</li> <li>Retained 4 community hub sites for urgent appointments</li> <li>Reduced number of schools and children’s centres open to provide access for key worker children</li> <li>Children’s Homes staying open</li> </ul> </li> </ul>

			<ul style="list-style-type: none"> <li>○ Care homes open, but 27 (as at 9 April) with outbreaks that are being managed</li> </ul>
4.2	Monitor community tensions and providing community reassurance through regular channels e.g. faith and community leaders, responding appropriately when required.	<b>Shaïd Mahmood</b>	<ul style="list-style-type: none"> <li>● Partnership arrangements in place and being used to promote messages of reassurance and to be aware and respond to any issues which may arise.</li> <li>● Particularly focused with faith sector on death management issues</li> </ul>
4.3	Ensure effective liaison with the third sector (VCFS organisations) to understand impact and provide advice and support to ensure a coordinated and safe approach to the use of community capacity.	<b>Cath Roff/Shaïd Mahmood</b>	<ul style="list-style-type: none"> <li>● Guidance shared with third sector representatives.</li> <li>● Volunteering scheme with Voluntary Action Leeds has been launched allowing people to provide community care and support in a co-ordinated way that keeps everyone safe. Once signed-up volunteers will receive training and then be matched with opportunities locally to help. Over 8,000 volunteers identified</li> <li>● Structured approach – tier 1 are DBS checked; tier 2 are for other services where DBS not required; with tier 3 focussed on community and citizen led activity, using an Assed Based Community Development Framework and approach, promoting and nurturing a range of activity across the city, including friendliness, neighbourliness, role of civil society, and making connections – ‘Socially Connected whilst Physically Distant’. Crucially this reduces demand on both formal volunteering and services as communities and neighbours come together to take action to support each other.</li> <li>● LCC helpline has been launched to enable members of the community to make contact and be matched with a local volunteer.</li> <li>● Letter provided and name badges sorted.</li> </ul>
4.4	Recognising the community understanding role of Councillors, ensure appropriate information is provided to elected members to enable them to support the community in their wards.	<b>Shaïd Mahmood</b>	<ul style="list-style-type: none"> <li>● Daily communication issued to all councillors with relevant guidance and information related to local impact including cases in Leeds, LCC service disruption, food provisions, shielding and volunteering updates, economic impact report. Signposting to national guidance and advice remains ongoing.</li> <li>● Ward level Facebook pages have been established to encourage communication and share important messages.</li> <li>● Ward level organisations in place and supported by VAL and some LCC capacity to ensure effective during this crisis</li> </ul>

4.5	Ensure that there is access to a coronavirus helpline to provide support, help the vulnerable meet needs and signpost to other services where appropriate.	<b>Lee Hemsworth</b>	<ul style="list-style-type: none"> <li>• Helpline established and operating, with staff working from home, taking an average of 300-400 calls per day. Support being provided to call-handlers from range of multi-agency colleagues within Health and Social Care.</li> <li>• Staff on the Helpline triage the support customers needed and task out to Adult Social Care, the food distribution warehouse or the 33 lead volunteer organisations.</li> <li>• Work on-going with DIS to ensure the line remains resilient and able to cope with increased demand expected as a result of city-wide leaflet distribution.</li> <li>• Staffing implications have meant other, non-priority lines within the Contact Centre have closed, but that has been communicated.</li> </ul>
4.6	Ensure that support is provided to the shielded cohort as outlined in the guidance, including distribution of food provision	<b>Tony Cooke/Polly Cook/Lee Hemsworth</b>	<ul style="list-style-type: none"> <li>• The NHS has identified a number of medical conditions that would most likely result in severe illness requiring admission to hospital as a result of Coronavirus. Because of this high risk of complications, it is proposed that individuals with these conditions take significant measures to shield themselves from contracting the virus through strict social isolation for a period of 12 weeks.</li> <li>• It is estimated that 14,000 – 15,000 people in Leeds fall in this category of very high clinical risk.</li> <li>• Following the release of government guidance around shielding, processes are being established to ensure emergency food provisions, phone support and signposting is provided to those in need (lead by Chief Officer Health Partnerships).</li> <li>• Each person on the list who has expressed a need for help and support is contacted directly either via text, email or phone call and the helpline number is provided for them to call should they need help.</li> <li>• A multi-agency approach has been taken to ensure that people will have access to the support they need through this period.</li> <li>• A dedicated helpline number has been established in Leeds to help coordinate matching people with the support they need.</li> <li>• Coordination of work on financial inclusion.</li> </ul>

			<ul style="list-style-type: none"> <li>• Categorisation of type of support and clarification of pathway being worked through in advance of more formal approach to launching and promoting this additional mobilisation of community capacity both formal and informal.</li> </ul>
4.7	Ensure that we take an intelligence led approach to deal with emerging or anticipated issues as a result of the impact of coronavirus eg domestic violence, rough sleepers, release of prisoners, managed approach, NRPF	<b>James Rogers</b>	<ul style="list-style-type: none"> <li>• Daily intelligence report introduced and informing prioritisation of resourcing.</li> <li>• Domestic violence being tracked, helplines being publicised regularly and major PR campaign launched</li> <li>• All rough sleepers being offered accommodated and support re food and supplies</li> <li>• Multi-agency work to ensure effective release of prisoners and young offenders</li> <li>• New arrangements implemented re managed approach</li> <li>• Services being provided to those with no recourse to public funds (NRPF) during this pandemic given the public health risks of not providing services</li> </ul>
4.8	Ensure that vulnerable children and young people are safeguarded as far as is possible during this pandemic given that services cannot be provided in the normal way.	<b>Sal Tariq</b>	<ul style="list-style-type: none"> <li>• Tracking of vulnerable people</li> <li>• Social work service maintained but requiring social distancing</li> <li>• Using Early Help Hubs for access to keep track and provide contact</li> </ul>
4.9	Establish a hardship fund in line with government guidance and to meet local need	<b>Victoria Bradshaw/Lee Hemsworth</b>	<ul style="list-style-type: none"> <li>• Processes are in place, including a new on-line form, for citizens to seek a delay in paying their monthly Council Tax payments. Currently up to 3 months payment can be delayed with repayments being recalculated for repayment over the remaining 9 months of the year.</li> <li>• Further work is ongoing to develop the hardship scheme, which in the main will bring support to those on Local Council Tax Support or those who may come into this cohort as a result of the current situation. Options are being developed following liaison with other councils and specialist bodies about the best way to implement the scheme which will be implemented by the end of April.</li> </ul>
<b>5. Organisational impact</b>			

5.1	Ensure joined-up cross-departmental approach to Coronavirus (COVID-19) response within the council, within the context of the emergency management arrangements.	<b>Neil Evans</b>	<ul style="list-style-type: none"> <li>• This Response and Recovery Plan is being used to ensure coherence and consistency as well as compliance with national guidance. The plan is reviewed regularly and updated accordingly.</li> <li>• Multi-agency command and control arrangements in place and within the organisation. More frequent engagement with chief officers so everyone clear about role and expectations and a consistent approach is taken</li> </ul>
5.2	Ongoing assessment of business continuity plans for the council's critical and non-critical services to understand the implications of the relevant scenarios and options for maintaining services.	<b>Mariana Pexton/Andy Dodman/Helen Freeman/all chief officers</b>	<ul style="list-style-type: none"> <li>• In line with expectations of Corporate Governance and Audit Committee, the framework was utilised for Business Continuity Planning</li> <li>• All services have completed an essential service prioritisation exercise to aid decisions and actions on work force redeployment and PPE provision (for example). This prioritisation work will be refreshed at regular intervals.</li> <li>• Recruitment is continuing into care roles and children's homes with fast track training in place.</li> <li>• Extensive work to ensure redeployment to key areas, with use of a skills questionnaire and a redeployment team, to complement lots of informal arrangements where staff are being used across services to help maintain essential services</li> <li>• The delivery of many front line services has been reduced in response to national guidance and messages. Where services are continuing, appropriate measures have been taken to ensure adherence to national guidelines.</li> <li>• Managing expectations of the level of delivery as increasing proportion of the council's workforce is affected (e.g. because of self-isolation or illness) is a key issue of consideration.</li> </ul>
5.3	Identify council service budgets which may require additional financial investment or underwriting as a result of reduced income or increased expenditure. Consider requesting additional funding from government and the most effective use of funding from central government.	<b>Victoria Bradshaw</b>	<ul style="list-style-type: none"> <li>• Systems have been established to capture the impact/potential issues so that these can be reflected in evidence for additional funding requests e.g. business grants, hardship schemes, social care funding etc. (Cross reference to 3.1 on business grants)</li> <li>• A full account of additional costs will be maintained and reported regularly so additional budget pressures can be identified early.</li> </ul>

			<ul style="list-style-type: none"> <li>• Extensive liaison with colleagues in other authorities and sector bodies to influence government to support councils</li> </ul>
5.4	Ensure regular engagement with council contractors and suppliers to identify any potential impact or risks to contractor performance.	<b>Victoria Bradshaw/ Commissioners</b>	<ul style="list-style-type: none"> <li>• Liaison across services taking place with contractors and providers so that issues can be captured and responded to.</li> <li>• National advice and support is communicated to suppliers to ensure that a consistent message is circulated.</li> </ul>
5.5	Track impact on council workforce affected by Coronavirus (COVID-19), including a period of staff absence, staff welfare, workplace conditions, intervening and issuing regular up to date guidance as required, so that managers can support individual members of staff.	<b>Andy Dodman</b>	<ul style="list-style-type: none"> <li>• Liaison with trade union representatives and extensive advice to workforce from a health and safety and general employment perspective.</li> <li>• A central reallocation pool has been created. Managers are invited to log where there is supply and demand in their service. Staff will be supported to complete skills surveys to inform redeployment decisions, and all this will be carried out in-line with our values and through engagement with line managers.</li> <li>• Staff volunteers will be identified through the essential services redeployment pool and for staff who are able to work but are not needed to support an essential service, they will be matched where possible to the VAL volunteering roles.</li> <li>• New categories for reporting established and a flexible resourcing plan developed to help respond to business continuity issues.</li> <li>• Strong links developed with anchor organisations and other city employers to support wider resource deployment as and when necessary.</li> </ul>
5.6	Work across the City as a whole to lead and coordinate the delivery of the necessary Digital and Information solutions to underpin the whole City operation through the ONE City approach to Digital and Information. Maintain and emphasise the ONE city approach to continue beyond the crisis. <ul style="list-style-type: none"> <li>• Prioritise use of available resources to maintaining the availability of critical communication and IT systems</li> </ul>	<b>Dylan Roberts</b>	<ul style="list-style-type: none"> <li>• Enabled 9000+ LCC staff to stay safe and work from home at the same time, regularly with more than 8000 users including the contact centre</li> <li>• Rolling out new solutions enabling our GPs and other primary care staff to work from home, provide online consultations and share resources across practices to support the demand</li> <li>• Combining the intelligence from multiple sources to identify hot spots and those most at risk in order to inform a targeted response</li> </ul>

	<ul style="list-style-type: none"> <li>• To make infrastructure changes and arrangements to enable remote working for large numbers of staff</li> <li>• Protect the Council and partners from opportunistic cyber attack</li> </ul>		<ul style="list-style-type: none"> <li>• Providing the collaboration technology and tools to enable the diverse third sector of Leeds to coordinate efforts and enable thousands of new “checked” volunteers</li> <li>• Rapidly developing new web based and social media based solutions to enable new services to give much needed help fast eg business grants</li> <li>• Supporting partners without the necessary skills to upgrade their systems due to massive increase in demand. Enabled VAL to run a payroll for 170+ 3rd sector organisations in the City with a massive increase in “employees” and getting key workers paid.</li> <li>• Our 100% Digital Literacy Leeds and Smart Leeds teams are enabling our third sector to get a significant number of our most isolated people online and connected to family, friends and health professionals, rolling out critical MyCOP App to those at high risk.</li> <li>• An example of the City Digital approach enabling staff and the public, in this case the GP and the patient see tweet <a href="https://twitter.com/rachalate/status/1247582714297016330">https://twitter.com/rachalate/status/1247582714297016330</a></li> <li>• Nominated as one of Matt Hancock’s COVID19 HeathTech Heroes</li> </ul>
5.7	<p>Ensuring accurate and timely intelligence to support effective response and recovery planning through a cross-council/wider system intelligence group to:</p> <ul style="list-style-type: none"> <li>• Share key analysis and headlines;</li> <li>• Identify gaps in data and analysis;</li> <li>• Share capacity and resources;</li> <li>• Provide common/consistent feedback on intelligence issues.</li> </ul>	<b>Polly Cook/Simon Foy</b>	<ul style="list-style-type: none"> <li>• Broader intelligence to support and link to existing arrangements in H&amp;SC system.</li> <li>• Intelligence group established backed up by weekly call to identify issues, fill gaps by joint working and highlight key areas of concern.</li> <li>• Data Mill North and Leeds Observatory promoted as platforms to share data and analysis and to facilitate collaboration.</li> <li>• Range of individual thematic and policy updates shared across the group and a weekly headline summary report established.</li> <li>• Joint working underway on key areas such as COVID19 impact, tracking vulnerable and shielded cohorts, socio-economic insights/impacts.</li> </ul>

5.8	Assess the impact on events planning and management to understand implications	<b>Mariana Pexton/Cluny McPherson</b>	<ul style="list-style-type: none"> <li>• Strategic Safety Advisory Group and Major Events Project Board will be used as the forum for this, within the context of national guidance.</li> <li>• A large number of our venues and facilities (including Leeds Town Hall, Carriageworks, and Pudsey Civic centre) have now closed to the public and will remain so throughout March and April.</li> <li>• A number of events due to take place have now been postponed or cancelled. These include the Vaisakhi Parade, 2020 Tour de Yorkshire and Asda Tour de Yorkshire Women's Race, the AJ Bell World Triathlon Leeds, Leeds West Indian Carnival 2020 and the Leeds Young Film festival.</li> <li>• Calendar of events in the city being continually reviewed and complex issues worked through.</li> <li>• Consideration to be given to an event to thank the city's key workers and pay tribute to those who lose their life</li> </ul>
5.9	Ensure other emergency plans are refreshed and invoked as appropriate for the circumstances or refreshed recognising the current context/situation e.g. unexpected deaths, rest centre plan etc.	<b>Mariana Pexton</b>	<ul style="list-style-type: none"> <li>• Unexpected deaths plan has been refreshed</li> <li>• Flexible resourcing plan has been invoked</li> <li>• Work in hand and issues will be raised and resolved as the situation develops.</li> </ul>
5.10	Ensure that governance issues are considered and adapted for a range of scenarios for continuing member and officer business during the outbreak whilst also ensuring good governance.	<b>Andy Hodson</b>	<ul style="list-style-type: none"> <li>• All meetings now facilitated through Skype</li> <li>• Sub delegation schemes have been adapted with an emergency clause to enable alternative officers to make decisions if required.</li> <li>• IT for members has been adapted to ensure they can conduct council business remotely and appropriate kit and training has been offered.</li> <li>• All upcoming council meetings being considered, along with surgeries, in order to give advice.</li> </ul>
5.11	Ensure that our arrangements for death management are handled appropriately and sensitively in line with guidance and excess deaths plan and policy.	<b>James Rogers</b>	<ul style="list-style-type: none"> <li>• Excess deaths plan refreshed and associated policy prepared and agreed</li> <li>• Changes made to burial and cremation arrangements in line with excess deaths plan and policy to keep people safe and protect lives</li> <li>• Proactive liaison with faith sector/leaders, funeral directors and other key stakeholders</li> </ul>



			<ul style="list-style-type: none"> <li>• Agreed development of emergency mortuary provision in line with excess deaths plan</li> <li>• Link with other authorities on excess death plans to ensure that there is capacity and arrangements to deal with anticipated deaths in line with the Reasonable Worst Case Scenarios (RWCS) or other advice given by key national departments (eg Worst Winter Deaths)</li> </ul>
<b>6. Media and communications</b>			
6.1	Capture the scale of enquiries, activity and impact through communications channels. Respond to media enquiries, referring to lead body/organisation where appropriate.	<b>Donna Cox/Danni Clayton</b>	<ul style="list-style-type: none"> <li>• Brandwatch social media monitoring queries on coronavirus and related topics in place. Informs reporting and proactive planning.</li> <li>• Volume of media requests high: prioritising around those that are coronavirus-related or major reputational threats for the city</li> <li>• Proactive media work continuing, informed by strategic direction and monitoring and prioritised around coronavirus handling</li> <li>• Daily media summary incorporating enquiries, proactive releases and social media planning/monitoring produced, helping to feed updates for BCLT, members and MPs and regular partner briefings.</li> <li>• Silver communications leads group established for key partners on Gold Strategic Command that links communications between partners and channels Silver Health Group information (via its health communications leads).</li> </ul>
6.2	Effective liaison and engagement with Public Health to promote communication and information sharing with key services (such as, Schools, Waste services, Higher/further education institutions, Health sector, Social care, Third sector, Faith organisations/leaders etc), the public and workforce.	<b>Sara Hyman</b>	<ul style="list-style-type: none"> <li>• Range of communications issued and specifically advising reference to continually updated national guidance e.g. for schools etc seeking to ensure coherence and consistency on guidance from government.</li> <li>• Communications workstreams established for all key Silver groups – Health, Communities, Business and Infrastructure and Organisational Impact</li> <li>• Sub-groups in place to coordinate Marketing and Campaigns, Digital and Social, Press media and PR and Internal comms coordinating and promoting communication and information sharing with key services and audiences</li> <li>• Digital 24 hour forecast in place for social media and digital channel owners to ensure coordination of messages across council channels</li> </ul>
6.3	Regularly update key stakeholders across the council and city, in particular, elected members	<b>Mariana Pexton</b>	<ul style="list-style-type: none"> <li>• Regular councillor and MP emails being sent, currently on a daily basis, including guidance and signposting to further information,</li> </ul>

	<p>and MPs, CLT, BCLT, COVID-19 (Coronavirus) response working group, schools, updates to Executive Board, stakeholders/partners, workforce etc.</p>		<ul style="list-style-type: none"><li>• Regular all staff emails, and FAQs issued (refreshed when new national guidance is produced).</li><li>• A staff Facebook page has been established to ensure a greater reach out to Leeds City Council staff.</li><li>• Two dedicated webpages created on leeds.gov to host information for residents and communities; and businesses</li><li>• GovDelivery Coronavirus weekly newsletter sent to circa 90k</li><li>• Messages to schools being issued, in line with DfE guidance, from the DCS</li><li>• Leader and Chief Executive monthly communications used to reach broader stakeholders.</li><li>• Communications have been increased to amplify national messages and changes to services via the website, virtual newsroom and Leeds Alert.</li></ul>
--	--	--	--