

Leeds Outbreak Plan – March 2021 – March 2022 (updated August 2021)

This plan has been developed in the context of the detailed plan published in summer 2020, combined with all the learning from the multi-agency working and in the context of the broader [Covid response and recovery plan](#). It takes learning from good practice nationally, from Association of Directors of Public Health (ADPH), and in the context of the latest [national Contain Framework](#). The Leeds approach to prevent transmission of COVID-19 is through intensifying a combination of interventions and measures to **minimise harm, keep people safe, protect vulnerable people and minimise poverty and inequalities**.

Our approach continues to be comprehensive across the whole system and informed by the full range of public health measures from vaccination, infection prevention control, communications, managing outbreaks and preventative activity, including encouraging safe practices and choices.

In particular, the approach adapts to changing circumstances as the pandemic evolves. The transition from summer to autumn and winter presents the risk of increased cases as people spend more time indoors and immunity from previous infection wanes, while the prospect of new variants means there could be a resurgence of COVID-19 in the autumn and winter, coupled with seasonal viruses such as flu and norovirus.

Our focus is to break the chains of transmission and ensure more people choose to take actions to keep themselves and others safe. Living safely with COVID-19 requires a continued proactive harm minimisation approach to reduce the risk of transmission and protect those most at risk to prevent hospitalisations, illness (including Long COVID) and deaths, and reducing the chance of new variants of concern emerging.

The principles of the local outbreak management plan are:

- Being **proactive, preventative and positive**, emphasising what people can do to keep themselves and others safe, recognising that public trust and confidence is key
- Being guided by the **data, intelligence, surveillance, evidence, epidemiology and good practice** to prevent transmission and control outbreaks
- Strengthening our approach to **working with communities**, building community resilience, and targeting work that **prioritises the most vulnerable and socially disadvantaged**
- **Communicating openly** with everybody, promoting good public health behaviours and persuading people to make choices that will keep themselves and others safe.
- **Coproducing solutions** with people, communities, community leaders, and partners to build the confidence and trust of the public
- **Leading collaboratively** to engage everyone, using all resources and tools available, including testing, tracing, supporting to isolate, managing outbreaks and transmission, dealing with new variants, and crucially vaccination
- Using agile and flexible approaches to partnership working to make the most of the resources available, **manage risk and meet the changing circumstances** as the pandemic progresses
- Sharing good practice, **embedding evaluation and learning** to drive continual improvement, drawing on regional and national resources and capacity where required.

Robust use of data & surveillance

- Continually reviewing latest local and national data and using this proactively to guide our approach, including waste water analysis to identify variants of concern and variants under investigation
- Using an early warning system through Public Health to respond to alerts of incidents and outbreaks.
- Being proactive about opportunities to evaluate, learn and understand more about the virus and continually reviewing the effectiveness of interventions
- Being open with data, including signposting people to infection rates and vaccination data and other key indicators, from our website, social media and in stakeholder communications

Vigilant approach to prevent cases becoming outbreaks in care homes, hospitals, education, high risk workplaces and other settings e.g. prisons & hostels

- Preventative approach with all settings about good infection prevention & control to help control the spread of the virus, including the social aspects (e.g. canteens, car share etc.)
- Working with Public Health England, Environmental Health, Infection Prevention and Control, and other partners to put targeted control measures in place
- Using an incident management system to swiftly respond and prevent cases becoming outbreaks, working with the full range of partners to monitor the data and coordinate activity, encouraging use of resources like Action Cards
- Working with care homes to allow safe visits in line with national guidance

- Supporting our education settings to operate safely and key workers to be able to work, implement testing and manage any cases swiftly to minimise the impacts on young peoples' education
- Working with universities to implement testing, support the student population with issues both on and off campus including accessing vaccination, and plan ahead for travel around term times.

Working to minimise community transmission, including in areas with stubborn rates or new variants

- Using local and national data to monitor spread of the virus on a daily basis and any variants of concern, to target additional activity where needed, including door knocking, additional targeted local communications, additional work with settings, targeting of testing, or specific advice about particular types of households.
- Using the skills, knowledge and assets of local councillors, community organisations, local businesses, the third sector and council services to target effective support and to identify and remove barriers to testing, tracing, self-isolating and vaccination
- Enhancing joint working further in areas where infection rates rise, including additional testing for variants where needed and delivering an enhanced response where cases are rising rapidly.
- Working with air-side partners to support compliance with testing and quarantine requirements at ports of entry to prevent community transmission and the importation of variants.

Deliver successful rollout of the vaccination programme across all communities

- Supporting the local rollout of Covid-19 vaccination through an integrated delivery plan for all related developments, including a proactive approach to the longer term delivery model
- Working across our partnerships to put the complex logistical arrangements in place, including different access methods to increase take up through local mobile and roving sites, and supporting the delivery of a vaccination booster programme.
- Debunking myths and encouraging vaccination confidence and take up, using influential community organisations and leaders to have peer to peer conversations and get messages out
- Deliver the [vaccine health inequalities plan](#) to focus on getting higher-risk groups to access vaccination as a priority, use all available data and intelligence to monitor progress and adapt approach accordingly.

Delivering local testing capacity within the overall national framework

- Providing mobile, drive-through and walk-to testing sites to meet the needs of local communities (e.g. language, travel, opening times), responding to areas with need for more testing – including symptomatic and asymptomatic testing and where there is a variant of concern
- Additional local activity such as more communications or door knocking to increase testing where testing rates fall
- Influencing the national programme to ensure accessibility, reliability and effective turnaround times
- Ensure clarity of communications on testing and self-isolation requirements, given the different requirements for those who are fully vaccinated or under 18.
- Encourage everyone to access twice-weekly lateral flow device testing and support testing in education and workplaces

Increasingly deliver more local contact tracing as the national system changes focus

- Further develop a local contact tracing service to replace some or all of the national system which aims to reaches more people, using our local knowledge, building on the local system already in place, including harnessing all settings to help on contact tracing and encouraging people to use the NHS COVID-19 app
- Ensuring our local contact tracing offer is available in community languages and reflects the needs of our diverse communities.
- Making use of our public health and other local expertise in contact tracing, and acquiring additional resources where possible
- Ensuring that people who are asked to self-isolate are able to access the support they need, including self-isolation payment, welfare support, befriending, shopping and delivery of medicines, by joining up across council services and our partners.
- Drawing on local community leaders and using intensive actions like door-knocking in communities to reach and engage more people
- To work with PHE on the enhanced contact tracing toolkit

Supporting people to make safe decisions and businesses to operate in Covid-safe ways, and enforcing where required

- Encouraging and supporting people to make choices that will keep themselves and others safe, such as hand washing, testing, self-isolating when required, getting vaccinated and wearing a face covering in high-risk settings
- Providing on-the-ground Covid Marshals to support businesses to operate in a Covid-safe manner and provide reassurance for the public for day and night time economies
- Encouraging and supporting businesses to embed basic infection prevention and control measures into their operating procedures, including using resources such as the customer confidence toolkit where appropriate
- Developing a process for delivering safe and successful events
- Where necessary due to serious breaches, using local authority powers to impose restrictions, requirements or prohibitions on individual premises, events and public outdoor places

Providing support to vulnerable people and those who need to self-isolate and targeting poverty and inequalities

- Working with our partners to minimise the impact of the pandemic on older and vulnerable people and increase the resilience of this cohort through delivery of a detailed over 60s harm minimisation plan
- Issuing payments to people who need financial support to self-isolate
- Providing support through the Local Welfare Support service (0113 3760330), with our community hubs providing support for those who are self-isolating or vulnerable in every ward
- Providing support to people who are clinically vulnerable to Covid-19, with advice, reassurance, and signposting to support
- Delivering community engagement plans in key wards, identifying local needs and co-producing appropriate interventions with local elected members, community leaders, faith leader and other local actors, with a strong focus on developing community resilience.

Having effective resourcing, governance and communications to support delivery and continued development of the plan

- Ensuring there are resilient teams across all public health functions and developing capacity for enhanced response ready to be deployed at short notice. Keeping a continued focus on workforce wellbeing through the protracted pandemic response.
- Regularly adapting the multi-agency governance arrangements to lead our response to, and recovery from, the pandemic, including planning ahead, learning, anticipating issues & risks
- Outbreak Control Boards bringing together key stakeholders to influence the approach to managing the pandemic, along with regular governance arrangements
- Using all communications methods to reach people, adapting and targeting key messages in response to the latest evidence about where and how the virus is spreading
- Working with other local authorities, the health system, the West Yorkshire Local Resilience Forum and the Core Cities network to influence national policy direction

Implementation and Governance

The detailed implementation of this outbreak management plan is covered in a range of operational plans and service plans, including extensive liaison with a very large range of settings across the city, such as more than 150 care homes, more than 250 education settings and numerous workplaces, for preventative activity. This is all delivered and overseen by the Leeds multi-agency Covid-19 response and recovery arrangements (see below), with the Director of Public Health at the heart, along with the Health Protection Board, the Strategic Coordinating (Leeds Gold) Group and Outbreak Boards, all reporting to the Council's Executive Board. A comprehensive review of the city's multiagency response has been undertaken to inform our response to future crises as well as to take forward best practice into business as usual, with the outcomes reported to Executive Board.

Progress is monitored regularly through a range of measures from daily checking of infection rates and other measures, through to a weekly Incident Management Team (IMT) meeting for community transmission as well as regular IMTs for specific settings outbreaks. All meetings across the multi-agency arrangements discuss progress on implementation, issues and opportunities and this results in a report each month to the council's [Executive Board](#), which includes a comprehensive dashboard of the latest data and analysis across all areas of the Response and Recovery Plan. Additionally, members, MPs and partners receive regular written updates covering the current position, actions and key messages to share. Regular bulletins are sent to partners, staff and the public to report on progress and issues, as well as calls with specific sectors. More detailed plans are in place for many areas, for example increasing vaccine uptake and tackling health inequalities, which are also reported via Executive Board and other routes as described. We continue to closely monitor progress in delivering this plan using the following key metrics, but also broader issues covered in the dashboard:

- Infection rate and test positivity rate, and particularly the rate in the over 60s

- Number of vaccinations given
- Vaccine uptake in key groups
- Patients in hospital and critical care
- Mortality
- Cases and outbreaks in settings
- Testing rates
- Self-isolation payments
- New Covid-19 variants

