

Cambridgeshire & Peterborough Local Outbreak Engagement Board

Friday, 30th April 2021

12.45pm

COVID-19

During the Covid-19 pandemic Council and Committee meetings will be held virtually for Committee members and for members of the public who wish to participate. These meetings will be held via Zoom.

Agenda

Open to public and press

1. Apologies and Declarations of Interests (oral)
[Guidance on declaring interests is available here](#)
2. Notes from the meetings on Tuesday 2nd March 2021 (pages 3-11)
and 25th March 2021 (pages 12-20)
3. Public Questions (oral)

Public speaking on the agenda items above is encouraged. Speakers must register their intention to speak no later than 12.00 noon one working day before the meeting
[Registering requests to speak is available here](#)

4. Update on Epidemiology and Response Dr. Liz Robin
(presentation)
5. Test and Trace and COMF grants Spending Commitments (pages 21-28)
6. Any Other Business

The Local Outbreak Engagement Board comprises the following members:

Cambridgeshire County Council – Councillors Hudson & Criswell
Peterborough City Council – Councillors Holdich & Fitzgerald
Director of Public Health, Executive Director: People and Communities, Service Director:
Adults Social Care & Service Director: Communities and Partnership
Clinical Commissioning Group – Jan Thomas, Gary Howsam, and Louis Kamfer
Cambridgeshire District Councils – Councillor Bill Handley
Chair of Cambridgeshire and Peterborough Healthwatch
Acting Police and Crime Commissioner

For more information about this meeting please contact the
Head of Public Health Business Programmes, Public Health Directorate

Name: Kate Parker

Email: kate.parker@cambridgeshire.gov.uk

**NOTES OF THE CAMBRIDGESHIRE & PETERBOROUGH LOCAL OUTBREAK
ENGAGEMENT BOARD MEETING
HELD AT 2PM ON
TUESDAY, 2 MARCH 2021
VIRTUAL MEETING VIA ZOOM**

Present:

Cllr John Holdich	Chairman, Peterborough Health and Wellbeing Board
Cllr Peter Hudson	Chairman, Cambridgeshire County Council (CCC) Health Committee
Cllr Wayne Fitzgerald	Deputy Leader and Cabinet Member for Adult Social Care, Health and Public Health, PCC
Cllr Ray Bisby	Acting Police Crime Commissioner
Wendi Ogle-Welbourn,	Executive Director – People and Communities, CCC and PCC
Val Moore,	Chairman, Healthwatch Cambridgeshire and Peterborough
Dr. Liz Robin	Director of Public Health, CCC and PCC
Adrian Chapman	Service Director – Communities and Partnerships, CCC and PCC
Christine Birchall	Head of Communications, CCC and PCC
Gillian Beasley	Chief Executive, CCC and PCC
Dr. Gary Howsam	Clinical Chair, CCG
Michelle Rowe	Democratic Services Manager, CCC

There was an adjustment to the agenda in that agenda item eight included financial figures paid out for COVID-19 and agenda item six included an update on vaccinations.

1. APOLOGIES AND DECLARATIONS OF INTERESTS

Apologies were received from: Charlotte Black.

There were no Declarations of Interest.

2. NOTES FROM THE MEETINGS ON 10 FEBRUARY 2021

The notes of the meetings on 10 February 2021 were agreed as true and accurate record.

3. ACTION LOG

The Chair introduced the item. The Head of Communications, CCC and PCC updated the group in relation to the faith leaders video, which had been circulated to the Board along with all the faith videos.

4. PUBLIC QUESTIONS

No public questions were received.

5. UPDATE ON EPIDEMIOLOGY AND RESPONSE

The Director of Public Health presented the Epidemiology Review. PowerPoint slides may be found in Appendix 1.

The Local Outbreak Engagement board debated the presentation and in summary, key points raised and responses to questions included:

- The vaccination of older residents had seen a decrease in hospital admissions nationally.
- Members commented that Radio Cambridgeshire had recently communicated about the rate of vaccination for the Cambridge and Peterborough being low. It was felt that it needed to be made clearer to the radio station how the push model worked, and that the rates were dependant on the supply of the vaccine. It was advised that there had been a slowing of the vaccine supply, but once more became available, the numbers would increase. It was also important to note that Cambridge and Peterborough were ranked as the top third Authority nationally to administer the vaccine to residents.
- The Service Director – Communities and Partnerships, CCC and PCC reassured the Board that the team were on track with the vaccination programme and would continue to administer them as quickly as possible when supply was made available.
- The recent large illegal gatherings in Ferry Meadows was responded to by the police. The police would also continue to respond to this illegal activity when required to do so. Plans had also been put in place to prevent such activities occurring during the lockdown period.
- It was important for residents to ensure that they continued to adhere to the social distancing rules and hands, face and space safety measures, especially during the vaccination process.

ACTION

The Head of Communications, CCC and PCC would provide Radio Cambridgeshire with the accurate facts in relation to the administration of vaccine rates.

6. COVID –19 TASKFORCE VISIT

The Service Director, Communities and Partnerships provided an update about a visit from the Cabinet Office task force in relation to the Peterborough, Wisbech and Fenland infection rates.

Key points highlighted included:

- The Peterborough had received a visit from the Cabinet Office Covid-19 Taskforce which was set up and directly reported to No.10 Downing Street. The Taskforce's purpose was to understand the activities being carried out in the community to help reduce infection rates. The Taskforce spent three days carrying out a fact-finding exercise to understand how the Peterborough and Cambridgeshire prevention plan had operated. The visit included what actions were being taken through the LOEB, the police, private and voluntary security sector services, education, community leaders, community groups and the communications team. The programme was amended following the Taskforce feedback and there were some actions as a result of the visit. A report on the COVID-19 Taskforce visit would be presented at the next LOEB meeting.

- The COVID-19 Field Team was made up of senior service military and civil servants. They were open to understand how the transmission prevention plan had operated.

7. ROAD MAP OUT OF LOCKDOWN

The Director of Public Health provided an update on the roadmap of lockdown.

Key points from the update included:

- The four steps to move out of lockdown restrictions.
- The first step of the move out of lockdown restrictions was for schools to open.
- Residents were encouraged to adhere to the plans within the roadmap to ensure the transition out of lockdown.
- Contributions were sought from the Board to communicate the stepwise approach to moving out of lockdown.

The Head of Communications, CCC and PCC also provided an update in relation to the actions being undertaken to support the move out of lockdown with the forthcoming communications approach. Key points included:

- The campaigns currently being undertaken, such as the 'Stand Firm' and 'Be Part of the Solution' campaigns, would be expanded.
- Members were asked to put forward any ideas, contacts, or links they had to enhance the communication messages.

The Local Outbreak Engagement board debated the presentation and in summary, key points raised and responses to questions included:

- Health services general practice was already operational and should be accessed by users as normal. The GP services would be accessed by telephone consultation. The next stage would be to start up system restoration and recovery of other services, and to prioritise those with the highest need. There was also an emphasis for residents to self-care where appropriate. In addition, it was advised that there would be a period of time set aside for health professionals to take a break and recover from the work they have been involved in. The plans for this was underway.
- There had been a massive transition in the way in which the health service operated during the pandemic. This was felt to be a positive way forward.

8. OUTBREAK MANAGEMENT GRANT FUNDING

The Head of Programmes Team, Public Health provided an update in relation to Test and Trace and Contain Management Outbreak Fund.

Key highlights included:

- Grant funds differed depending on the tier level the authority was in.
- The award of grants was made through a finance subgroup of the Health Protection Board made up of senior public health officers, CCG and all district representatives.

The Local Outbreak Engagement board debated the presentation and in summary, key points raised and responses to questions included:

- Enhanced support for vulnerable people bids had been agreed in principal but a financial amount had not been allocated to date. This was because the right level of support had been provided.

9. ANY OTHER BUSINESS

The Chairman announced that Dr Liz Robin was due to retire from her role as Director for Public Health and thanked her for her contribution and work across both Councils.

The Chief Executive advised that the job advert and processes were underway to appoint to the position of Director of Public Health for Cambridge and Peterborough.

Epidemiology Review

Cambridgeshire & Peterborough

10th February 2021

Contacts for queries:

Emmeline Watkins: Emmeline.Watkins@peterborough.gov.uk

PHI Team: PHI-team@cambridgeshire.gov.uk

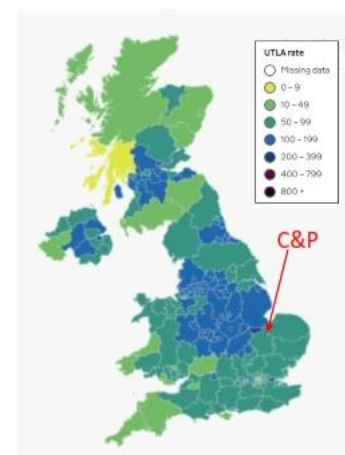
OFFICIAL

Positive cases, hospital admissions and deaths are all decreasing at a national level.
Peterborough remains one of the areas with highest rates

UK Summary

Estimated R number

0.6 to 0.9 with a daily infection growth rate range of -6% to -2% as of 26 February 2021.

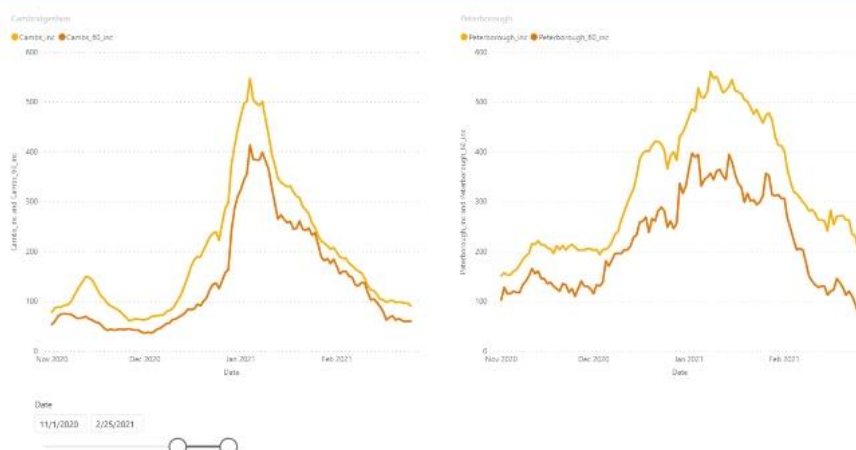


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Source: Coronavirus.gov.uk, data updated 09 Feb 2021

Case rates have fallen in Cambridgeshire and Peterborough but are well above rates last summer

UTLA incidence



Recent case numbers in Peterborough affected by an outbreak at HMP Peterborough

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Cases to

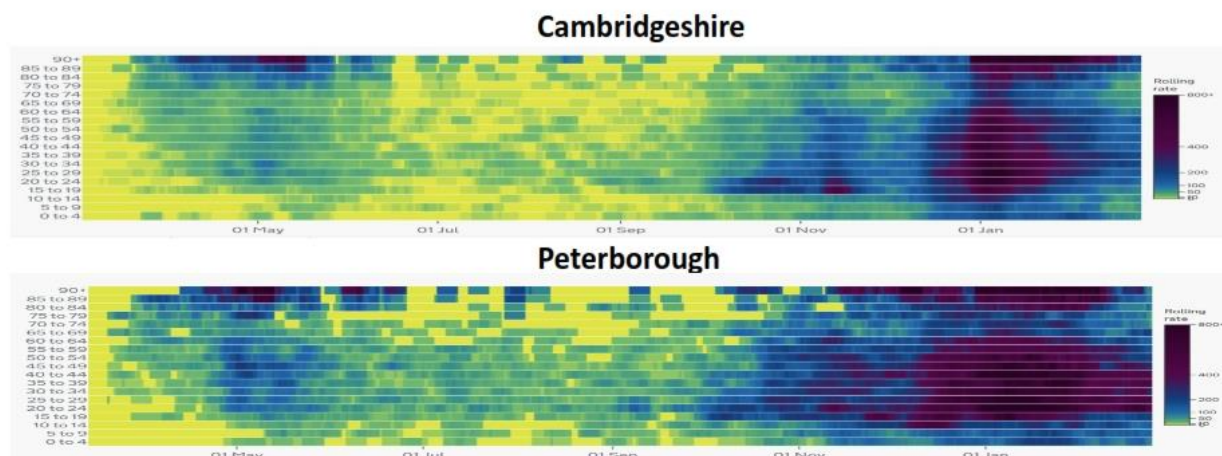
Peterborough and Fenland have some of the highest case rates nationally, while Cambridge, East Cambridgeshire and South Cambridgeshire have below average rates

Incidence and Positivity data								
Area	Provisional surveillance adjusted weekly incidence (cases/100,000) & trend vs previous 7 days		Weekly Incidence (cases/100,000) & trend vs previous 7 days		7-day change in case rate (%)	Weekly incidence - 60+ years (cases per 100,000) & trend vs previous 7 days		Positivity Rate (%) & trend vs previous 7 days
Data to date	25-Feb		23-Feb		23-Feb	23-Feb		23-Feb
Cambridge	68	↑	60.1	↓	-14.8%	27.9	↓	2.1%
East Cambridgeshire	53	↓	71.2	↑	3.2%	21.2	↓	3.0%
Fenland	214	↑	226.8	↑	13.8%	120.8	↓	7.3%
Huntingdonshire	98	↓	106.2	↓	-12.5%	85.9	↓	4.4%
South Cambridgeshire	45	↓	45.3	↓	-32.1%	22.4	↓	1.8%
Peterborough	205	↓	235.3	↓	-16.9%	110.7	↓	8.5%
EAST OF ENGLAND	-	-	88.4	↓	-20.2%	60.7	↓	3.7%
ENGLAND	-	-	107.8	↓	-16.2%	73.1	↓	4.6%

NOTE: Provisional adjusted weekly incidence rates are subject to change with the inclusion of additional cases on subsequent days. Figures are rounded to nearest whole number to account for possible minor discrepancies with national data.

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Case rates remain highest in the working age group and elderly population – higher numbers in 50+ and 60+ in Peterborough

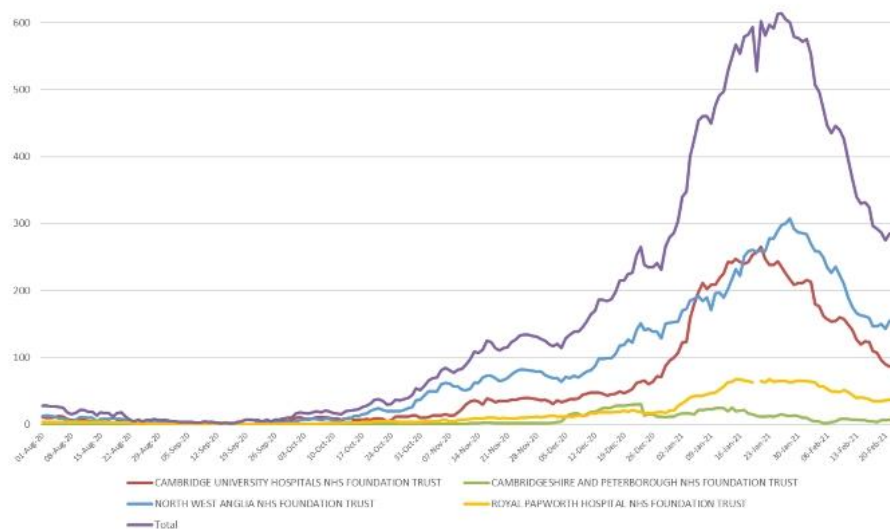


Rate of people with at least one positive COVID-19 test result (either lab-reported or lateral flow device) per 100,000 population in the rolling 7-day period ending on the dates shown, by age. Individuals tested positive more than once are only counted once, on the date of their first positive test.

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coronavirus.data.gov.uk

Number of in patients in hospital with Covid-19 in CUHFT and NWAFT continues to decline



As at 23/02/2021 there were 275 positive cases in Local Acute Trusts:

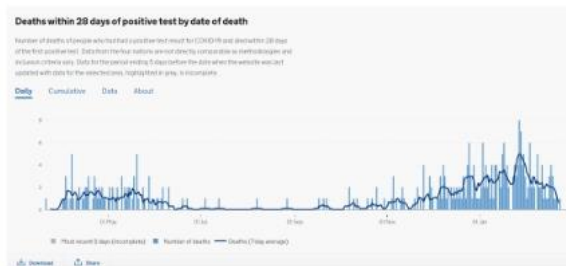
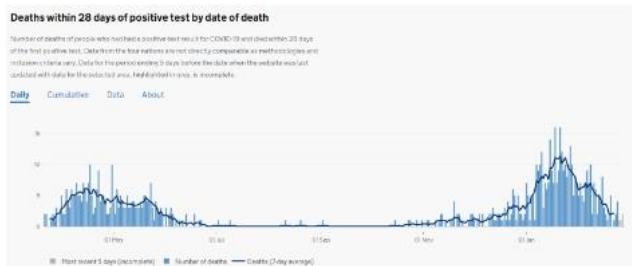
- 153 at North West Anglia (Peterborough City Hospital and Hinchingbrooke)
- 80 at Addenbrookes,
- 37 in Royal Papworth
- 5 in CPFT.

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Recent decrease in Covid-19 mortality in both Cambridgeshire and Peterborough

Cambridgeshire

Peterborough

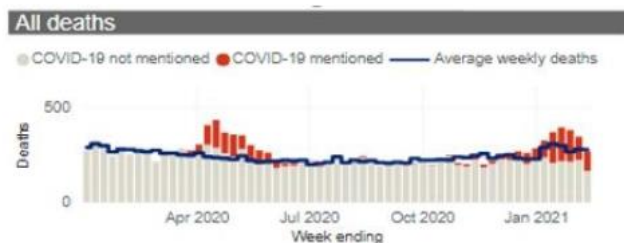


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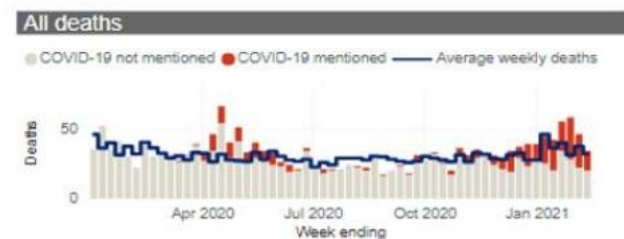
coronavirus.data.gov.uk

Number of all cause deaths has been above the 2015-19 weekly average during both the first and second wave of the pandemic

CAMBRIDGESHIRE



PETERBOROUGH



Source: Deaths registered weekly in England and Wales, provisional.

ONS <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/weeklyprovisionalfiguresondeathsregisteredinenglandandwales>, analysis by PHE.

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Key response actions (1)

- Daily surveillance of cases, hospital admissions and other relevant information through our Surveillance Cell
- Generic and targeted communications and engagement to support lock down measures, test and trace and other Covid safety measures.
- Local preventive, rapid response, enforcement and support interventions co-ordinated through district/city level Covid-19 'Gold' groups.
- Outbreak prevention and management through the Cambridgeshire Peterborough outbreak management team and its education, workplace, care home, and vulnerable groups cells.

Key response actions (2)

- Community Rapid Testing for people without symptoms who leave their homes regularly, with sites in all districts/cities in Cambridgeshire and Peterborough
- Local enhanced contact tracing to reach cases not contacted by the national Test and Trace system
- Support for the clinically extremely vulnerable and for those self isolating at home, through county-wide hub and local arrangements.
- Successful roll out of the Covid-19 vaccination programme through hospitals, Primary Care Networks, large scale testing centres, and a small number of pharmacies.

**NOTES OF THE CAMBRIDGESHIRE & PETERBOROUGH LOCAL OUTBREAK
ENGAGEMENT BOARD MEETING
HELD AT 1PM ON
THURSDAY, 25 MARCH 2021
VIRTUAL MEETING VIA ZOOM**

Present:

Cllr John Holdich (Chair)	Chairman, Peterborough Health and Wellbeing Board
Cllr Steve Criswell	Cambridgeshire County Council
Cllr Peter Hudson	Chairman, Cambridgeshire County Council (CCC) Health Committee
Cllr Bill Handley	District Council Representative
Cllr Wayne Fitzgerald	Deputy Leader and Cabinet Member for Adult Social Care, Health and Public Health, PCC
Wendi Ogle-Welbourn,	Executive Director – People and Communities, CCC and PCC
Val Moore	Chairman, Healthwatch Cambridgeshire and Peterborough
Dr. Liz Robin	Director of Public Health, CCC and PCC
Adrian Chapman	Service Director – Communities and Partnerships, CCC and PCC
Kate Parker	Head of Public Health Business Programmes, CCC and PCC
Jan Thomas	Accountable Officer, NHS Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)
Daniel Snowdon	Democratic Services Officer, CCC

1. APOLOGIES AND DECLARATIONS OF INTERESTS

Apologies were received from Ray Bisby – Acting Police and Crime Commissioner, Dr. Gary Howsam – Clinical Chair CCG, Louis Kamfer – Chief Finance Officer CCG, Gillian Beasley - Chief Executive, CCC and PCC and Charlotte Black – Service Director Adults and Safeguarding, CCC and PCC.

There were no declarations of interest.

2. NOTES FROM THE LOCAL OUTBREAK ENGAGEMENT BOARD MEETING HELD ON TUESDAY 2 MARCH 2021

The notes from the meeting on Tuesday 2 March 2021 would be taken to the next meeting of the Board as this was a special meeting.

3. PUBLIC QUESTIONS

No public questions were received.

4. UPDATE ON CAMBRIDGESHIRE AND PETERBOROUGH LOCAL OUTBREAK MANAGEMENT PLAN

The Director of Public Health delivered a presentation on the Cambridgeshire and Peterborough Local Outbreak Management Plan. Presentation slides may be found in Appendix 1.

This special meeting was being held to allow discussion of the updated Local Outbreak Management Plan which was due to be submitted regionally and nationally by 26 March. This was in response to the updated 'Contain' Framework published on 18 March.

The Local Outbreak Engagement board debated the presentation and in summary, key points raised and responses to questions included:

- It was clarified that the meeting was only being streamed on Peterborough City Council's YouTube page due to short notice meaning there was a clash with another Cambridgeshire County Council meeting. A link to the video would be made available on the Cambridgeshire County Council website after the meeting.
- Members requested the Director's assessment of the impact of COVID-19 becoming endemic in the UK on the public, e.g. with regard to annual vaccinations. The Director responded that the virus would need to be kept under control both nationally and internationally. Vaccination was important and already having an impact. Research would emerge regarding the longevity of vaccine immunity and the estimated frequency of new variants which would benefit from a booster vaccine. The frequency of required vaccination had not yet been determined, although this might vary depending on a person's vulnerability. A long-term challenge was 'mainstreaming' COVID-19 alongside responses to other infectious diseases by embedding systems such as Test and Trace. Preventative measures such as face coverings, hand washing and social distancing might continue for some time, as seen in countries that previously suffered from SARS outbreaks. Genetic sequencing would be employed to identify and tackle new variants.
- Members highlighted the importance of the public continuing to behave responsibly as the lockdown eased.
- The Service Director, Communities and Partnerships, highlighted the importance of using the revised Outbreak Management Plan to embed COVID-related ways of working as normal practice going forward. For examples, issues with inequality had been highlighted by the pandemic but were present beforehand and would continue to be present in the future. The plan provided an opportunity to focus on addressing this issue.
- Members queried whether sufficient support was being provided to help people self-isolate. The Service Director, Communities and Partnerships, responded that resourcing was not a limitation and government support had been provided. A Local Discretionary Scheme had been established for those ineligible for national support. Practical support (e.g. dog walking) was provided alongside financial support. There were always improvements that could be made to the accessibility of these services. The easiest way to access information regarding this scheme was to access Cambridgeshire County or Peterborough City Council's websites and search 'Coronavirus', or call the County-wide Hub on 0345 045 5219.
- The response to COVID-19 was being pursued on a county-wide basis across all Councils in Cambridgeshire.
- Members raised concerns that Doddington Hospital had not been permitted to start giving people the second vaccine dose, despite having run out of patients to receive the first dose. The Accountable Officer responded that the hospital had been contacting a large number of people, but that she would raise this issue with them. There were strict guidelines in place preventing the vaccination of cohort 10 at present. There were clinical reasons for the current timing of second doses.

Issues in the national system and Primary Care Networks with finding people to be vaccinated were being addressed through a recent change in the communications strategy whereby people would be invited to come forward for a vaccine, rather than having to wait to be invited. Vaccine take-up had been higher among older age groups.

- Members requested for the Outbreak Management Plan to make it clear that existing work to address inequalities would help mitigate the effects of COVID-19, rather than suggesting the inequalities were only being tackled due to COVID-19. It was agreed that the Director of Public Health would take this forward. The Director added that some people were not coming forward despite the available support due to inequalities, e.g. those on zero hours contracts being fearful of losing their jobs. Targeted support for these people was needed.
- Local vaccination rates were provided by the Accountable Officer as follows:
 - At least 95% for all 70+ age cohorts.
 - 90% for 65-69s.
 - 84% for 60-94s
 - 72% for 55-59s
 - Well over 50% for over 50s

These would be considered excellent rates by the standards of annual flu vaccinations.

- Data suggested that the impact of deprivation and inequalities on vaccination rates was greater among younger age groups. As the vaccine programme expanded, officers needed to invest more time in addressing this. It was important to note that deprivation was the specific aspect of inequality with the most significant link to vaccination rates.
- Members suggested that greater enforcement of COVID-19 measures might be needed, e.g. by reviewing premises licences and reducing venue capacity. The Director of Public Health responded that the Health and Safety Executive, as well as other bodies, had produced good guidance on COVID-19 safety. Both general legislation (e.g. safe workplaces) and COVID-specific upper tier local authority powers could be used to ensure safe public spaces and events. It was expected that powers would become more embedded in national standards in the future, rather than using local judgement, as is the case at present. Enforcement would continue to be important. The Service Director, Communities and Partnerships, added that the 'Contain' Framework continued to emphasise that enforcement was the final sanction, and that all relevant authorities would have the appropriate powers. Work should continue locally to encourage businesses to comply with COVID-19 measures, with enforcement available if necessary. A review had recently been completed of both Councils powers, both COVID-specific and general powers, to ensure they were all understood and being deployed. The conclusion was that the powers were being used but Councils could potentially go further if necessary.
- There were various national pilots of large events, e.g. football matches, which would inform national policy in the future.
- The Local Outbreak Engagement Board unanimously **RESOLVED** to endorse the Cambridgeshire and Peterborough Local Outbreak Management Plan.

ACTIONS AGREED:

1. The Democratic Services Officer to provide a link to the recording of this meeting on Cambridgeshire County Council's website.
2. The Service Director, Communities and Partnerships, to send the Democratic Services Officer links to self-isolation support information for inclusion in the

minutes of this meeting. *This action was completed and the links may be found below:*

www.cambridgeshire.gov.uk/coronavirus
www.peterborough.gov.uk/coronavirus

There is a link to self-isolation support on these pages.

Or to go direct:

<https://www.cambridgeshire.gov.uk/residents/coronavirus/coronavirus-covid-19-support-to-self-isolate>

<https://www.peterborough.gov.uk/healthcare/public-health/coronavirus/self-isolation-payment>

3. The Director of Public Health to amend the Cambridgeshire and Peterborough Local Outbreak Management Plan to make it clear that existing work to address inequalities would help mitigate the effects of COVID-19 rather than suggesting the inequalities were only being tackled due to COVID-19.
4. The Local Outbreak Engagement Board unanimously **RESOLVED** to endorse the Cambridgeshire and Peterborough Local Outbreak Management Plan.

5. ANY OTHER BUSINESS

None.

Cambridgeshire and Peterborough Local Outbreak Management Plan

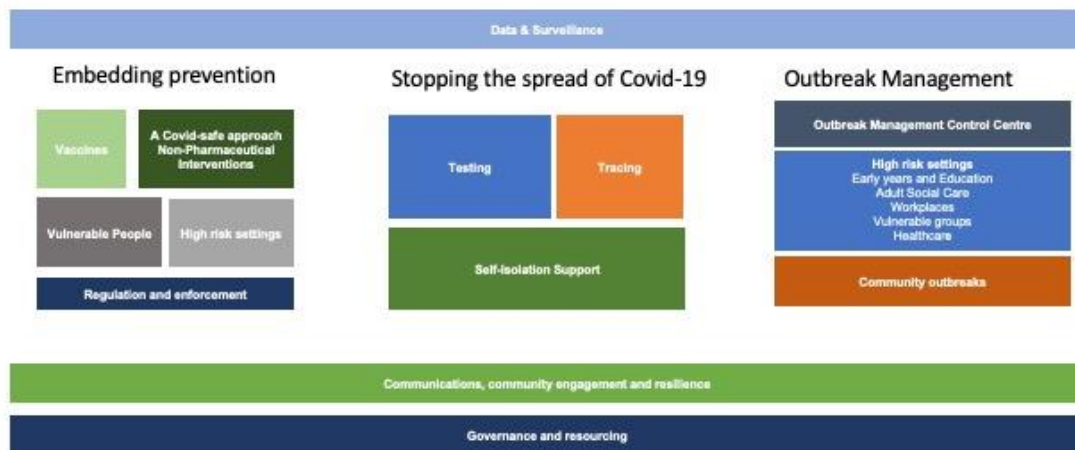
March 2021

Local Outbreak Management Plans (LOMP)

- Our first COVID-19 Local Outbreak Plan was published on 30th June 2020
- It was set in the context of the Government's Contain Framework, first published 17 July 2020
 - this describes how national & local partners work with the public to prevent, contain and manage outbreaks
 - and clarifies local decision-making responsibilities & powers
- Upper Tier local authorities lead local outbreak planning with a wide range of local, regional & national partners

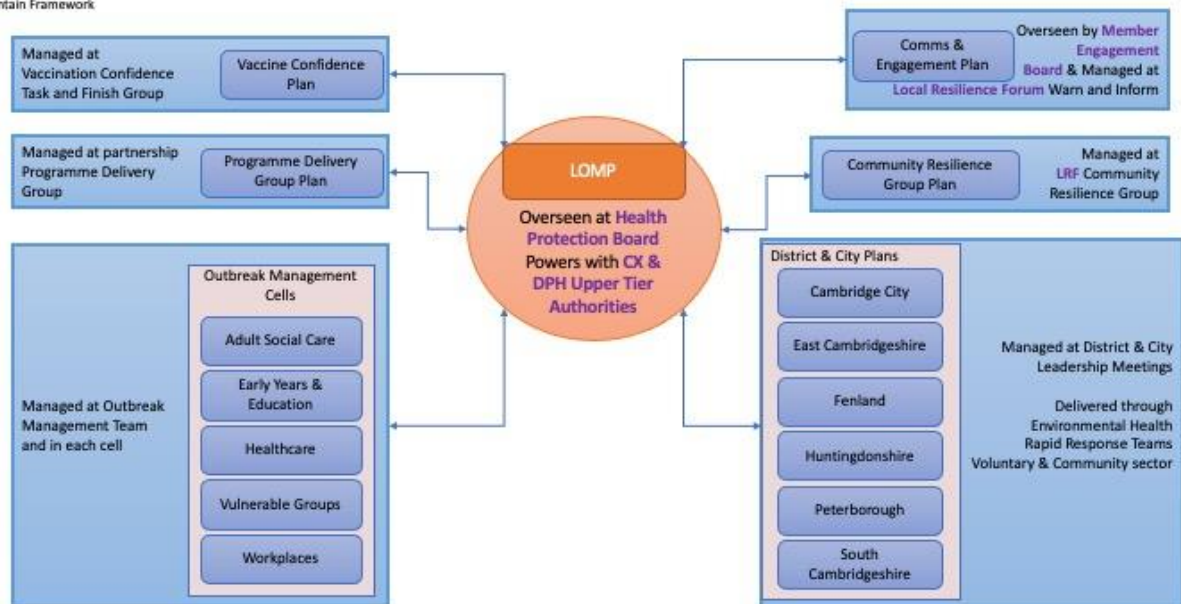
Local Outbreak Management Plan

A consistent approach to address Covid-19, including issues around enduring transmission and new variants of concern



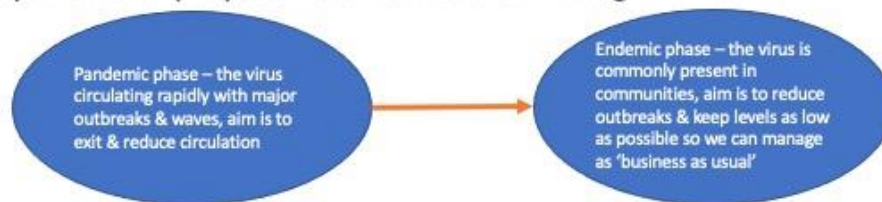
Oversight, Management & Delivery of the LOMP

Governance required by
Contain Framework



Up-dating the LOMP in March 2021

- Ensuring we are prepared to meet the changes & challenges as we move through the 4 Steps in the Government's Roadmap out of Lockdown
- Reflecting the updated Contain Framework
- Focusing on areas where we see persistent, enduring transmission
- Being prepared to respond where we see new Variants of Concern
- Exiting the COVID-19 Pandemic and moving into the Endemic phase or, 'Living with COVID'
- Re-setting our strategies, through our Outbreak Management system, so they are fit for purpose for this move to 'Living with COVID'



Our revised LOMP will.....

- Focus on *prevention*, including maximising the *take up of the vaccine* across all communities and continuing to provide information on *reducing the risks* from COVID-19;
- Ensure that *testing, contact tracing* and *support for self-isolation* works effectively as a national, regional & local system;
- *Respond swiftly to any rises in infection*, including to any new COVID *Variants of Concern*, deploying additional test and trace capacity and ensuring support for self-isolation to break transmission;
- Tackle areas where we see *enduring transmission* working with employers, agencies, employees and our communities to break persistent transmission and reduce infection rates

Throughout our LOMP we will.....

- *Address inequalities* to mitigate against any enduring transmission of COVID-19 in communities and settings at higher risk
- Be prepared to *use the powers* available to us to close settings and locations to help break transmission
- Ensure that our actions are *informed by the latest epidemiology*
- Maintain *high profile communications & engagement* to ensure every individual & every community knows how to stay safe

Our Vision is to have.....

- Sustainable low COVID transmission rates that enable the careful re-opening of social and economic life
- High vaccine uptake especially amongst those at highest risk
- Highly effective surveillance that identifies & suppresses the virus and informs and shapes future actions
- High performing test, trace, isolate & support system
- Strong business, community & individual compliance with COVID-19 measures as they change, and we adapt, to different stages of easing from Lockdown
- Clear understanding across communities of what Living with Covid means
- A recovery plan with our partners to address health & economic impacts

STEP 1 8 March 29 March	STEP 2 No earlier than 12 April At least 5 weeks after Step 1	STEP 3 No earlier than 17 May At least 5 weeks after Step 2	STEP 4 No earlier than 21 June At least 5 weeks after Step 3 All subject to review
EDUCATION 8 MARCH <ul style="list-style-type: none"> Schools and colleges open for all students Practical Higher Education courses 	EDUCATION <ul style="list-style-type: none"> As previous step 	EDUCATION <ul style="list-style-type: none"> As previous step 	EDUCATION <ul style="list-style-type: none"> As previous step
SOCIAL CONTACT 8 MARCH <ul style="list-style-type: none"> Exercise and recreation outdoors with household or one other person Household only indoors 29 MARCH <ul style="list-style-type: none"> Rule of 6 or two households outdoors Household only indoors 	SOCIAL CONTACT <ul style="list-style-type: none"> Rule of 6 or two households outdoors Household only indoors 	SOCIAL CONTACT <ul style="list-style-type: none"> Maximum 30 people outdoors Rule of 6 or two households indoors (subject to review) 	SOCIAL CONTACT <ul style="list-style-type: none"> No legal limit
BUSINESS & ACTIVITIES 8 MARCH <ul style="list-style-type: none"> Wraparound care, including sport, for all children 29 MARCH <ul style="list-style-type: none"> Organised outdoor sport (children and adults) Outdoor sport and leisure facilities All outdoor children's activities Outdoor parent & child group (up to 15 parents) 	BUSINESS & ACTIVITIES <ul style="list-style-type: none"> All retail Personal care Libraries & community centres Most outdoor attractions Indoor leisure inc. gyms (individual use only) Self-contained accommodation All children's activities Outdoor hospitality Indoor parent & child groups (up to 15 parents) 	BUSINESS & ACTIVITIES <ul style="list-style-type: none"> Indoor hospitality Indoor entertainment and attractions Organised indoor sport (adult) Remaining accommodation Remaining outdoor entertainment (including performances) 	BUSINESS & ACTIVITIES <ul style="list-style-type: none"> Remaining businesses, including nightclubs
TRAVEL 8 MARCH <ul style="list-style-type: none"> Stay at home No holidays 29 MARCH <ul style="list-style-type: none"> Minimise travel No holidays 	TRAVEL <ul style="list-style-type: none"> Domestic overnight stays (household only) No international holidays 	TRAVEL <ul style="list-style-type: none"> Domestic overnight stays International travel (subject to review) 	TRAVEL <ul style="list-style-type: none"> Domestic overnight stays International travel
EVENTS <ul style="list-style-type: none"> Funerals (30) Weddings and wakes (6) 	EVENTS <ul style="list-style-type: none"> Funerals (30) Weddings, wakes, receptions (15) Event pilots 	EVENTS <ul style="list-style-type: none"> Most significant live events (30) Indoor events: 1,000 or 50% Outdoor scaled events: 10,000 or 25% Outdoor other events: 4,000 or 50% 	EVENTS <ul style="list-style-type: none"> No legal limit on live events Larger events

Overview of Committed Funding from the Test & Trace and Contain Outbreak Management Fund

To: Local Outbreak Engagement Board

Meeting Date: 30th April 2021

From: Kate Parker (Head of Public Health Business Programmes)

Electoral division(s): All

Key decision: No

Forward Plan ref:

Outcome: To provide an overview to the Local Outbreak Engagement Board of Cambridgeshire and Peterborough's

Recommendation: What is the Committee being asked to agree?

- a) Identify areas of the Local Outbreak Management Plan that the board would like further updates on?
- b) To note the current activity around outbreak management and understand some of the future challenges

Officer contact:

Name: Kate Parker

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1. Background

- 1.1 Cambridgeshire County Council and Peterborough City Council receive a Contain Outbreak Management Fund (COMF) grant from the DHSC to support costs associated with the ongoing public health and outbreak management costs of tackling COVID-19. The COMF funding that has been awarded up to March 2022 between the two authorities is £21.7M. Prior to the COMF grant we also received £3.5M from the National DHSC Test and Trace Grant. Both Local Authorities allocate these grants under emergency powers.
- 1.2 Allocations of both grants are made through consideration of business cases submitted to the Health Protection Board Finance sub-group. This is chaired by the Director of Public Health and has representation from Cambridgeshire County Council and Peterborough City Council Public Health, Finance and Customer Services and Digital Transformation Directorates, the Clinical Commissioning Group and a District Council representative (on behalf of the District City Councils). Urgent allocations can also be made by the Director of Public Health and Chief Executive of Cambridgeshire County Council and Peterborough City Council at the internal Test and Trace Gold meetings.
- 1.3 The purpose of this report is to share with the Local Engagement Board how the grant funding has been used in Cambridgeshire and Peterborough to deliver the Local Outbreak Management plan and what support has been put in place in response to Covid-19 pandemic. Appendix A shows a detailed breakdown of the programmes and area of spend that the grants have been used for.

2. Main Issues

- 2.1 The purpose of the Contain Outbreak Management Fund is to support delivery of the Local Outbreak Management Plan (LOMP) for Cambridgeshire and Peterborough available on [C&P Local Outbreak Management Plan](#)

2.1.1 Outbreak Control Centre

The Cambridgeshire and Peterborough Outbreak Control Centre provides leadership for the management of Covid-19 through daily review of surveillance information, interpreting it to inform advice and actions on Covid cases, clusters, outbreaks and community spread. The Outbreak Control Centre supports setting specific cells, for example the Workplace cell and the Education cell, to prevent and manage outbreaks. The Test and Trace and COMF grants have funded additional staff to operate the Outbreak Control Centre and its cells.

2.1.2 Communication & Campaigns

The Local Outbreak Engagement Board has been fully briefed on the range of activities the communication team have led on in regard to supporting lockdown, tiers and roadmap communications. This has involved digital and social media, traditional print, as well as broadcast media and supporting community engagement. The Test and Trace and COMF grants have been used to fund additional staff and campaign materials. Campaign work has included ~BePartOfTheSolution videos, Cancel Covid youth Campaign, #ThisDependsOnUs Covid prevention campaign, Now We're Talk mental health campaign and various other promotional activities around the communication for our Lateral Flow testing roll out and the development of the vaccine campaigns.

2.1.3 District & City Council Support

Both grants have provided the district and city councils with funding to support the delivery of their local outbreak action plans. This has included activity around community marshals, support officers for reopening and resilience, specialist support packages, partnership work with local third sector organisations to support those self-isolating or shielding and provision of small grant schemes for hyperlocal community organisations and wider community engagement with minority groups.

2.1.4 Testing

Most testing for Covid-19 is funded nationally through the NHS Test and Trace Service. The local Rapid Testing LFT programme has received funding until June from a separate DHSC grant. The Test and Trace and COMF grants have been used to fund additional local contracts for PCR testing to enable a rapid and flexible response to outbreaks, and for expenses which the local authority is expected to meet such as renting sites for mobile testing units.

Our community rapid testing programme which started in February 2021, as of the week of 8th April 2021 had completed 56,405 LFT tests across its fixed testing sites, pop-ups, vulnerable groups and workplaces.

2.1.5 Contact Tracing Team

The Cambridgeshire and Peterborough Contact Tracing team started working in November 2020. Its delivery model reflected the learning from the Peterborough Enhanced Contact Tracing Pilot, which commenced in the summer of 2020. The Team follows up positive Covid test cases who the national Test and Trace Call Service has been unable to contact. The current case load is around 50 cases per week the highest number of cases coming from Peterborough and the second highest number coming from Fenland. This reflects the current epidemiology. The percentage complete is now at 86% which surpasses the national target of 80% complete.

The team is now piloting 'backwards' contact tracing - bringing together information in order to identify the original source of clusters of cases and therefore identify a wider range of contacts.

2.1.6 Support for Self-isolation

The isolation support service went live on 18th January 2021, the role of the service is to make two outgoing calls to all cases and contacts, one at the outset of the isolation period and one at the end. The aim being to limit the spread of the virus by removing any barriers to isolation. The service has received 1,892 inbound calls up to March and supported individuals through the provisions of information, advice, prevention social isolation and ensuring compliance with the legal requirements of self-isolation.

2.1.7 Cambridgeshire & Peterborough Hardship Fund

Additional to the national scheme, Cambridgeshire County Council and Peterborough City Council have been running a hardship fund to support residents during the pandemic. Over

the past months we have received 170 applications (75 CCC/ 98 PCC) of which 105 have been approved and we are waiting on further information for the remaining 65.

2.1.8 Vaccination support

While the Covid-19 vaccination programme is funded and managed by the NHS, the COMF grant has been used to fund additional activities to maximise vaccination uptake. This includes the provision of safe Covid compliant transport options to vaccination sites for vulnerable members of the community, funding of staff, and communications materials to support the joint Vaccine Confidence Plan across the NHS and Local Authorities.

3.0 Future Investment and Priorities.

The COMF grant contains our funding allocation for Cambridgeshire & Peterborough City Council until 31st March 2022. Going forward, the COMF will be need to continue funding a robust infrastructure of prevention, testing, contact tracing, outbreak control, and support for vulnerable individuals and settings, to ensure the day to day delivery of the Local Outbreak Management Plan and to maintain local control of Covid rates. This will need to include a robust local response to emerging issues such as variants of concern and areas of enduring transmission. Work is in progress to fully map the funding requirements for core Covid-19 prevention and management and delivery of the LOMP through to March 2022.

Budget summary Cambridgeshire & Peterborough Local Outbreak Control Plan DHS Allocation £3.5m				
Cambridgeshire County Council	£2,493,304		71%	
Peterborough City Council	£1,017,833		29%	
	CCC	PCC	Total	Decision Date
Testing Capacity				
Testing capacity Interim solution with CP CCG to use existing provider for care home testing if needed for complex community outbreaks (prior to securing commissioning arrangements) and where local and national testing routes are not suitable or accessible.	£3,550	£1,450	£5,000	07/07/2020
Testing Capacity surge needed in the case of large or multiple outbreaks including swabbing individuals (commissioned service)	£42,600	£17,400	£60,000	07/07/2020
Long Term Testing Arrangements - commissioned service for surge community testing and complex outbreaks to cover Cambridgeshire and Peterborough.	£113,600	£46,400	£160,000	02/10/2020
Covid-19 Mobile Testing Unit (MTU) Facilities - use of community venues	£29,917	£12,220	£42,137	02/10/2020
Covid-19 Mobile Testing Unit (MTU) Facilities - extension of sites for symptomatic testing April 2021	£102,175	£68,375	£170,550	19/04/2021
GP Testing Pilot - temporary GP led solution in central Peterborough ward for community with difficulty in accessing testing via national routes.		£6,014	£6,014	02/10/2020
Total for Testing Capacity	£291,842	£151,859	£443,701	
Workforce & Training				
Support to District & City Councils - Prevention and outbreak role to enable district councils undertaking emerging responsibilities e.g. covid-19 compliance in the workplace. £150K allocation to each local authority with environmental health responsibilities	£750,000	£150,000	£900,000	07/07/2020
Workforce Training Lead (including extension of initial 3 month contract for a further 12 month period). Covid-19 specific contact tracing training for professionals, general training in identification of contacts, awareness training and training on case management software.	£42,600	£17,400	£60,000	24/07/2020 30/11/20
Public Health Directorate Workforce Public Health Consultant Capacity increase in hours for accredited PH Consultants. Post 1: 0.6wte to 0.8wte for 12 months Post 2: 0.8 wte to 1 wte for 12 months Post 3: 0.54 wte for 8 months Post 4: convert voluntary unpaid post to FT for 12 months Post 5: 0.8wte to 1 wte for 12 months Post 6: 0.8wte to 1 wte for 12 months	£134,900	£55,100	£190,000	24/07/2020
On-call capacity SPOC - management of the on call provision for Single Point of Contact (SPOC) operating 8am to 8pm. Additional hour payments for Public Health Managers for 12 months	£52,896		£52,896	24/07/2020
Infection Prevention Control Training - purchase of specialist IPC training for high risk settings	£3,550	£1,450	£5,000	24/07/2020
Total for Workforce & Training	£983,946	£223,950	£1,207,896	
Outbreak Management				
Outbreak management team to determine strategic response to all complex cases, outbreaks and incidents. Funding will be required for additional staffing capacity.				
Consultant in PH	£71,000	£29,000	£100,000	24/07/2020
PH Incident Outbreak Manager	£42,600	£17,400	£60,000	07/07/2020
Admin support	£28,400	£11,600	£40,000	07/07/2020
Infection Prevention control nurses - IPC nurse for 3 months whilst recruitment to substantive posts	£19,170	£7,830	£27,000	02/11/2020
Infection Prevention Control Nurses - Extension of agency IPC Nurse	£19,170	£7,830	£27,000	21/12/2020
Business support C19 SPOC - additional capacity to manage the outbreak notification centre	£35,279	£14,410	£49,689	02/11/2021
Health Protection Practitioners Following internal workforce capacity review additional capacity was identified in these areas to allow outbreak management team to function (redeployment of staff has been utilised mainly in the contact tracing team)	£121,433	£49,600	£171,033	02/11/2020
Workplace Business Support Management of outbreaks in workplaces required additional Business support due to increased levels for six months	£10,650	£4,350	£15,000	30/11/2020
Total for Outbreak Management	£347,702	£142,020	£489,722	
Infrastructure				
Surveillance Support - Surveillance systems required to ensure robust, accessible and automated data flows and reports.	£21,300	£8,700	£30,000	07/07/2021
Hardware costs and system upgrades - development of case management system for recording positive cases used by public health and wider partners e.g. environmental health	£92,300	£37,700	£130,000	07/07/2020
Total for Infrastructure	£113,600	£46,400	£160,000	

Communications				
Prevention Campaign for 1 year	£142,000	£58,000	£200,000	07/07/2020
Backfill for communications team staff.	£57,092	£23,319	£80,411	07/07/2020
Extension of communication teams staff backfill for 2021-22	£145,550	£59,450	£205,000	19/04/2021
Communication Capacity (rapid testing)	£74,550	£30,450	£105,000	30/11/2020
Total for Communications	£419,192	£171,219	£590,411	
Contact Tracing				
Contact tracing Specialists x3 & Team lead x1 responsibility for contact tracing failed to follow up by national team moved to LA.	£110,050	£44,950	£155,000	30/11/2020
Contact Tracing Operational Manager - responsible for the operations of the contact tracing team	£39,044	£15,947	£54,992	02/11/2020
Additional contact tracers x3 Specialist Contact Tracers to meet demand	£74,400	£45,600	£120,000	02/11/2020
Total for Contact Tracing	£223,494	£106,497	£329,991	
Contingency				
Education staff testing facilities	£300		£300	
Misc	£268	£110	£378	
Travel costs of Peterborough residents to testing sites		£168	£168	
Translation Costs	£64	£26	£91	
Egress encryption for SPOC	£77	£31	£108	
PCC on call costs for Outbreak management cover		£4,257	£4,257	
Legal costs	£362	£148	£510	
Transformation Team Costs	£52,805		£52,805	
Gypsy & Traveller Emergency Site	£29,378	£12,000	£41,378	30/11/2020
Total for Contingency	£83,254	£16,740	£99,995	
Community / Voluntary Sector				
Local Hardship fund Community Support Package for self isolation who do not meet criteria for national test and trace payment or discretionary payments	£35,000	£15,000	£50,000	02/11/2020
Community support to self-isolate extended to March 2021		£15,000	£15,000	
Supporting Vulnerable Groups (Fenland) - recognition of increased rates in Fenland and the challenges around the local infrastructure e.g. access to services, transport and community networks.	£3,038		£3,038	30/11/2020
Total for Community / Voluntary Sector	£38,038	£30,000	£68,038	
Education (Schools)				
Overtime education Cell	£659		659	
Backfill Post Education Cell - Education cell is dealing with outbreak notifications from schools and has redeployed staff into the cell. Support for School Cell 4 months from the Autumn term	£15,200	£0	£15,200	24/07/2020
	£15,859	£0	£15,859	
Grand Expenditure Total of WorkStreams	£2,516,928	£888,685	£3,405,613	

Budget summary Cambridgeshire & Peterborough Contain Outbreak Management Fund				
Cambridgeshire County Council	£15,311,438		76%	
Peterborough City Council	£6,482,543		24%	
	CCC	PCC	Total	Decision Date
Local Action Plans (no cross charge applied)				
<u>Peterborough</u> - Local Area Plan implementation including community engagement, Marshals, signage etc.		£336,200	£336,200	30/11/2020
<u>Peterborough Rapid Response</u> - Small grant scheme to support local community organisations through facilitation of community mutual aid activity and assistance for residents required to self-isolate.		£30,000	£30,000	26/01/2021
<u>Peterborough Rapid Response</u> - Call handlers for the Peterborough Local hub (provides emergency support for residents)		£37,710	£37,710	26/01/2021
<u>Peterborough Women's Aid Refuge</u> (Assistance with the provision of Covid secure facilities to support self-isolation)		£9,900	£9,900	26/01/2021
<u>Peterborough PCC Rapid Response</u> - Extension of contracts for Marshals, Parca extensions		£281,095	£281,095	12/02/2021
<u>Cambridge City</u> - Local Area Plan implementation including city centre planning, marshalls, signage	£187,693		£187,693	26/01/2021
<u>South Cambs</u> - Local Area Plan implementation including community support to focus on vulnerable communities, covid community transmission reduction work, mental health programme and digital infrastructure support.	£240,000		£240,000	21/12/2020
<u>Hunts</u> - Local Area Plan implementation with a focus on prevention, analysis of surveillance intelligence and intelligence led response. Resources for communication and analysis.	£97,000		£97,000	12/02/2021
<u>Fenland</u> - Local Implementation Plan including community support and hardship fund for vulnerable groups, prevention and increase compliance support through communication and signage etc.	£152,775		£152,775	21/12/2020
<u>East Cambs</u> - Local Area Plan including support to community groups, enhanced communication, prevention fund, food bank provision etc.	£200,000		£200,000	21/12/2020
<u>Fenland</u> - Implementation of local outbreak management plan for April 2021- March 2022	£540,000		£540,000	02/03/2021
<u>Enhanced Community Support</u> - Establishment of a dedicated vulnerable persons place based delivery team to enhance our work with groups.	£141,900	£412,500	£554,400	02/03/2021
<u>Peterborough PCC Rapid Response</u> - Extension of contracts for Parca until Oct 21 to continue street engagement and covid compliance		£96,005	£96,005	19/04/2021
<u>East Cambs</u> - Extension of support for delivery of Local Action Plan for April 21 - March 22	£422,600		£422,600	23/03/2021
<u>East Cambs</u> - Additional support for Local Action Plan focus on outbreak management infrastructure and enhanced local education campaign.	£60,000		£60,000	12/02/2021
Total for Local Action Plans	£2,041,968	£1,203,410	£3,245,378	
Support for Self-isolation				
<u>Contact Centre enhanced capacity</u> - Follow up calls for residents asked to self-isolate in line with Find, Test, Trac, Isolate and Support framework (costing until March 21)	£492,748	£155,605	£648,353.00	30/11/2020
<u>Contact Centre Extension</u> - continuation of programme through to Sept 21	£586,339	£185,160	£771,499.00	12/02/2021
<u>SCDC</u> - Linked to Local Action Plan but supplementary business case focusing on Self-Isolation local support	£42,500		£42,500.00	18/01/2021
<u>Support for rough sleepers</u> - working with CPFT for mental health provision		£2,733	£2,733.00	23/03/2021
<u>Out of hospital Homelessness project</u> - support during the hospital discharge process	£62,749	£19,816	£82,565.00	23/03/2021
<u>ECDC</u> - Linked to Local Action Plan but supplementary business case for Self-Isolation public health discretionary fund	£40,000		£40,000.00	12/02/2021
Total for Self-isolation	£1,224,337	£363,313	£1,587,650.00	
Contact Tracing / Testing				
<u>Lateral Flow Testing Sites</u> - Site Gritting for five testing centres across PCC and CCC	£4,550	£6,825	£11,375.00	26/01/2021
<u>Contact Tracing Team</u> - Expansion of team following a review of operational model requiring additional staff	£155,610	£49,140	£204,750.00	12/02/2021
<u>Local Testing Site (LTS) - (Peterborough Site)</u> - remedial work for LTS including equipment and improvements to access Lion's Rugby Club		£16,025	£16,025.00	26/01/2021
<u>Health Protection Practitioner</u> - Additional staffing support to manage and advise workplaces on outbreaks. Working across workplace and vulnerable peoples cell (12 weeks initial funding)	£13,456	£4,249	£17,705.44	12/02/2021
<u>Lateral Flow Testing</u> - commission voluntary sector infrastructure organisations to develop a volunteer pathway	£480	£1,520	£2,000.00	12/02/2021
<u>VCS Workforce</u> - Voluntary sector support to mass vaccination for the community volunteer workforce.	£7,600	£2,400	£10,000.00	23/03/2021
<u>Lateral Flow Testing</u> DHSC pilot vulnerable groups extension of Traveller Health Team to full time hours until end March 21	£5,210		£5,210.00	13/01/2021
<u>Lateral Flow Testing</u> - DHSC pilot vulnerable groups extension of Traveller Health to Full time hours until October 21	£15,630		£15,630	23/03/2021
<u>Contact Tracing Team</u> - Fully funded contact tracing team including backward contact tracing and infrastructure upto March 2022	£868,599	£274,294	£1,142,893	23/03/2021
<u>Lateral Flow testing</u> - Extension of staffing contracts for 6 months.	£85,000	£85,000	£170,000	19/04/2021
<u>Rapid Testing (LFT) Set up costs</u> - Establishment of a rapid testing and backward contact tracing services for 12 months	£489,440	£154,560	£644,000	21/12/2020
Total for Contact Tracing	£1,645,575	£594,013	£2,239,588	

Communication Plans				
Communication Campaign - Additional resource business case pending	£73,720	£23,280	£97,000	01/03/2021
Total for Communication	£73,720	£23,280	£97,000	
Specialist Support				
Care home outbreak management - additional staffing support for existing team to manage care home outbreaks	£72,960	23040	£96,000	26/01/2021
Care Home - Provision of Specialist Infection Protection Control (IPC) nurses	£66,120	£20,880	£87,000	26/01/2021
Outbreak management Team - additional business support team capacity to run service over 7 day rota pattern (initial funding from test & trace Grant)	£37,764	£11,925.36	£49,689	26/01/2021
Surveillance PH Advanced Senior Analyst to support additional work from outbreak management (3 months agency support)	£10,260	3240	£13,500	26/01/2021
Surveillance PHI Analyst extension of hours (12 months)	£9,172	£2,896.32	£12,068	26/01/2021
Financial support - Provision of extra support with finances for COMF & T7T monitoring returns	£22,103	£22,102.50	£44,205	23/03/2021
Enhanced Training support - additional training resource for 12 weeks	£20,512	£6,477.55	£26,990	23/03/2021
Food Bank - Provision of re-usable face masks to ensure covid compliance		£3,000.00	£3,000	19/04/2021
IPC Nurse extension - Extension of agency nurse for 6 months	£44,604	£14,085.59	£58,690	23/03/2021
HR business support - Support with level of recruitment activity for Covid programmes	£6,143	£1,939.95	£8,083	23/03/2021
Surveillance - PHI Senior Analyst to support additional work from outbreak management (extended until March 2022)	£37,986	£11,995.46	£49,981	23/03/2021
Communication - Vaccine promotion communication campaign	£73,720	£23,280.00	£97,000	23/03/2021
Core Support - Staffing infrastructure for programme management	£43,710	£5,760.00	£49,470	19/04/2021
IPC Nurses care homes - extension of agency contracts	£44,080	£13,920.00	£58,000	19/04/2021
Financial support Extension - Provision of extra support with finances for COMF & T7T monitoring returns	£18,586	£18,586.21	£37,172	12/02/2021
PH Consultant - To enhance existing provision of public health specialist advice and support focusing on addressing issues around vaccine hesitancy and equitable provision in vulnerable and hard to reach populations.	£21,741	£6,865.68	£28,607	12/02/2021
Total for Specialist Support	£529,460	£189,995	£719,455	
Support Education Outbreaks				
Outbreak Management - Extension of business support posts supporting the C19 Single Point of Contact (April 21- March 2022)	£61,185	£19,322	£80,507	23/03/2021
Education Cell staffing costs (1st April - 31st May 21)	£40,470	£12,780	£53,250	
Education Settings Additional staffing support for outbreak Outbreak management in Education settings	£46,555	£14,705	£61,260	12/02/2021
Total for Support Education Outbreaks	£148,210	£46,807	£195,017	
Lockdown Plus Plan				
Further spend from out of lockdown implementation plan (AC/MO)			TBC	
Vaccination LA Programme - delivery of vaccination project team	£68,400	£21,600	90,000	19/04/2021
Covid Secure Taxi Transportation - Support provision of covid secure transportation including training, screen fitting	£112,000		£112,000	21/12/2020
Mass Vaccination Transport - Covering costs of transporting Cambridgeshire and Peterborough residents aged 80 and over to vaccination appointments	£50,000	£50,000	£100,000	21/12/2020
Total from Lockdown Plus Plan	£230,400	£71,600	£302,000	
Contingency				
LFT Site alterations		£284		
Total from Contingency		£284	£284	
GRAND EXPENDITURE TOTAL TO DATE	£5,893,671	£2,636,186	£8,386,372	

