

Winter Planning – Prevention and Control of Winter Infections

To: Adults and Health Committee

Meeting Date: 5 October 2022

From: Director of Public Health

Electoral division(s): All

Key decision: No

Forward Plan ref: N/A

Outcome: Prevention and control of winter infections

Recommendation:

Adults and Health Committee are recommended to:

note the preparations being made for winter infections

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1. Background

- 1.1 The future path and severity of the Covid virus is uncertain. Nationally, resurgences of covid (and other respiratory infections and gastrointestinal outbreaks) are very likely to occur in the winter. It is also possible more severe covid variants will emerge and there may sadly be more hospitalisations and deaths. In Australia, the winter flu season was earlier than expected and had a higher rate of hospital admissions in children than expected.
- 1.2 UKHSA lead on management of outbreaks in higher risk settings and complex outbreak investigation and management. The LAs public health team is expected to conduct minimal COVID-19 specific activities, and as such no additional COVID-19 specific funding has been provided in the public health grant for 22/23. A small covid team is funded till March 2023 (using existing COMF funding) to facilitate transition from pandemic phase to business as usual.
- 1.3 Therefore, the LAs public health team aim is to manage and respond to these risks through more routine public health interventions, without going into the large scale, resource intensive interventions as was done for the period March 2020 - May 2022. As per national direction ([Living with COVID-19](#)), LA public health has returned to supporting outbreak management as they did pre-pandemic, now including COVID-19 alongside other respiratory infections.
- 1.4 Directors of Public Health (DsPH) have an existing statutory duty in planning for, and responding to, emergencies that present a risk to the public's health. DPH will continue to have a vital leadership role in health protection locally and will seek to enable appropriate health protection support.
- 1.5 The LA are taking steps to ensure there are internal plans (Amber and Red) in place to maintain resilience against significant winter infection resurgences or future variants and remains ready to act if a dangerous variant risks placing unsustainable pressure on local systems.

2. Main Issues

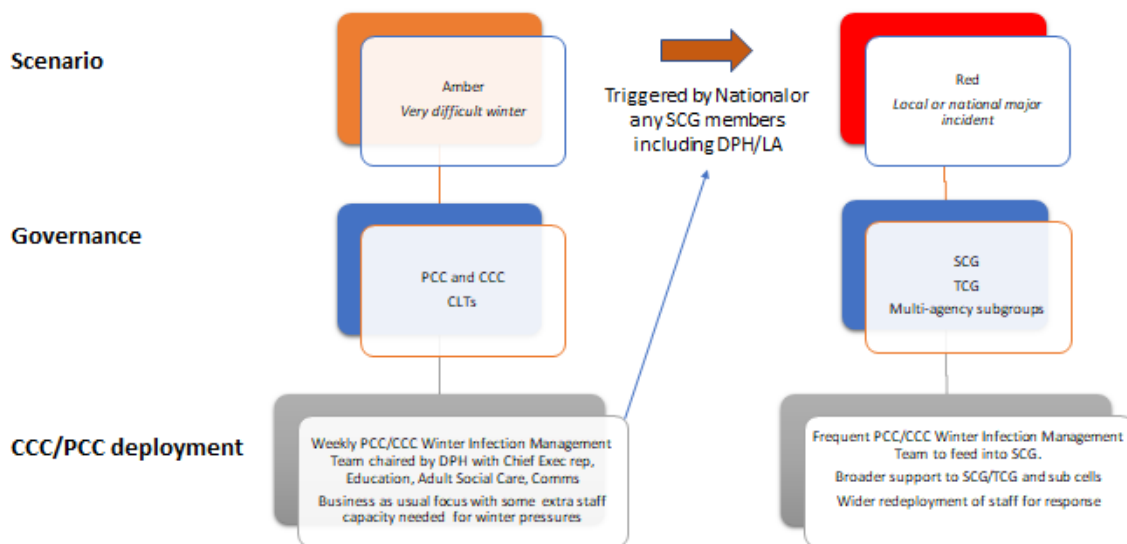
- 2.1 There are two plans proposed
 - **Amber Plan** - Initial step up of the LA response when faced with an extremely difficult winter. BAU is carried on as normal (Appendix 1)
 - **Red Plan** - Major Incident response. BAU affected as significant resources redirected. This could be due to local or national escalation (Appendix 2)

Local Authority Winter Infection Management Team (WIMT)

To ensure the council remains ready to act in a coordinated way if winter infection pressures or a dangerous variant risks placing unsustainable pressure on the system, a Winter Infection Management Team (WIMT) will be established.

In Amber variant plan, the expectation would be for the WIMT to meet weekly. If the WIMT meeting frequency changes to daily, that would be a trigger for Red Variant Plan and potential escalation through the CPLRF processes.

Winter infections governance



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3. Alignment with corporate priorities

3.1 Environment and Sustainability

People's ability to heat their house appropriately impacts health outcomes, including from respiratory infections.

3.2 Health and Care

A difficult winter (with regards to Covid-19, other respiratory and gastrointestinal infections) will have significant impact on all health and care settings including acute NHS Trusts and adult social care settings with increased number of people admitted to hospital, outbreaks in care homes and other residential settings and associated difficulties with hospital discharge leading to reduced patient flow. Poor health outcomes from winter infections may impact on the ability to live healthy lives independently for longer. Health and care workforce capacity may also be impacted by sickness absence.

3.3 Places and Communities

Based on existing partnership developed during the pandemic, communities will be key to good communications and supporting those in need in their community.

3.4 Children and Young People

A difficult winter (with regards to Covid-19, other respiratory and gastrointestinal infections) may have an impact on the education of children and young people with disruption of their education due to periods of ill health and the possibility of class closures if staffing is significantly affected by outbreaks. In the case of new variant, disruption to education may occur as in prior pandemic waves impacting on educational opportunities, mental health and safeguarding.

3.5 Transport

A difficult winter (with regards to Covid-19, other respiratory and gastrointestinal infections) may have an impact on transport due to staff shortages resulting from ill health leading to potential transport disruptions. In the case of a new variant response, similar preventative measures may be put in place for public transport nationally as in prior pandemic waves.

4. Significant Implications

4.1 This is an information report – Section 4 is not required.

5. Source documents guidance

5.1 No source documents have been used.

APPENDIX 1 - AMBER VARIANT PLAN (SUMMARY)

- CLT to delegate responsibility to the Winter Infection Management Team.
- The Amber Variant Plan would be managed by the Winter Infection Management Team. and planning/capacity would be internally managed in the LA
- Whilst in the Amber Variant Plan all other aspects of the LA would be working as 'business as usual'.
- The Winter Infection Management Team would meet weekly whilst in the Amber Variant Plan.

Triggers for Amber

- Care Homes having an increase in deaths and patient flow issues from hospital to care homes, due to winter infection outbreaks
- Risk of significant harm (illness and death)
- Escalating number of respiratory issues and not just Covid-19
- When UKHSA health protection team is struggling with capacity

Actions for the Amber Variant Plan

- An advance meeting and prior preparation before moving to the Amber Variant Plan
- Limited capacity at this stage. Support is offered on a risk assessment basis depending on our resources
- If the small COMF funded LA Covid support team becomes overwhelmed, then we would move to the local Red Variant Plan
- Relief contracts to be established with previous members of staff
- Managers to have conversations with staff that maybe redeployed if we moved into local Red Variant Plan. Staff members would not be expected to redeploy in Amber.
- One-off generic information and guidance is provided to all settings.
- Financial and people resources would need to be in place as outlined in the business cases submitted for COMF approval

Who decides when we go into Amber?

- Anyone from the Winter Infections Management Team could trigger Amber

APPENDIX 2 - RED VARIANT PLAN (SUMMARY)

- The LA would work in conjunction with UKHSA and other partners if we were to move to the Local Red/National Red Variant Plans
- The Red Variant Plan would trigger Emergency Preparedness, Resilience and Response (EPRR) and require multi-agency support – SCG/TCG
- The WIMT would meet daily

Examples of Triggers for Local Red/National Red

- Early warnings – new variant of concern impacting Cambridgeshire and Peterborough requiring local multi agency cooperation
- New vaccine escape or more serious illness or severe illness in different cohort
- Covid-19 wave plus flu impacting multiple services requiring multi-agency cooperation
- National triggers
- Risk of harm that is beyond UKHSA capacity

Actions for the Local Red/National Red Variant Plans

- SCG would be called to determine Major Incident
- Regional help would be required
- Mutual aid
- Redeployment of staff in the local authority to enable functional delivery while building up response capacity.
- TCG – would agree for the various Cells to be re-established. There is no longer a Health Protection Board.