# Southwark's Outbreak Prevention and Control Plan (OPCP) – Refresh

Protecting Southwark amidst the novel coronavirus pandemic

Southwark Public Health Division Environment & Leisure

Last updated March 2021







#### **GATEWAY INFORMATION**

Report title: Southwark's Outbreak Prevention and Control Plan

(OPCP)

Status: Public

**Prepared by:** Kirsten Watters, Richard Pinder, Jin Lim

**Contributors:** Sylvia Garry, Richard Pinder, Sarah Robinson,

Chris Williamson, Farrah Hart, Liz Brutus

**Approved by:** Jin Lim, Acting Director of Public Health

Suggested citation: Southwark's Outbreak Prevention and Control Plan

(OPCP). Southwark Council: London. 2020.

Contact details: <a href="mailto:publichealth@southwark.gov.uk">publichealth@southwark.gov.uk</a>

**Date of publication:** 09 March 2021, previous version 15<sup>th</sup> July 2020

#### **CAVEAT**



This document is a live document that reflects emerging threats and guidance as they arise.

Please take note of version control which is indicated by the "Last updated" statement on the cover slide.



#### PLAN ON A PAGE

Mitigate the impact of novel coronavirus on Southwark's population and communities, focusing on those most at risk.

#### **ENGAGEMENT & COMMUNICATIONS**

#### **PREVENT**

- Work with communities and settings to prevent transmission, focusing on those with greatest vulnerability.
- Implement communications and engagement plans which are responsive and reflect current transmission risks
- Support COVID secure workplaces, settings and public areas.

#### **IDENTIFY**

- Embed testing into communities and settings
- Identify contacts, with a robust local test and trace function.
- Support self isolation in contacts and cases including practical, financial and wellbeing support.

#### **CONTROL**

- Outbreak management and advice.
- Containment of variants of interest and concern.
- Supporting the delivery of the NHS COVID-19 vaccination programme.

**INTELLIGENCE, SURVEILLENCE & EPIDEMIOLOGY** 

**TRAINING & CAPACITY BUILDING** 



| Executive Summary                          | 5  |
|--|----|
| 1. Purpose: aim and objectives             | 10 |
| 2. The pandemic and legislative context    | 11 |
| 3. Our framework and governance            | 16 |
| 4. How we will operate                     | 19 |
| 5. Action plan                             | 24 |
| 6. Evaluation, learn and adapt             | 30 |
| Feedback, appendices & further information | 33 |
| Glossary                                   | 41 |

## List of appendices

| Appendix 1:   | Outbreak arrangements   | 36 |
|---------------|---|----|
|               | <ul> <li>Southwark, London &amp; national arrangements</li> </ul> |    |
|               | <ul> <li>LCRC arrangements</li> </ul>                             |    |
| Appendix 2:   | Outbreak identification & rapid response flow process             | 38 |
| Appendix 3:   | Responding to variants of concern (VOC)                           | 39 |
| Appendix 4:   | Test and Trace Southwark - flow process                           | 41 |
| Appendix 5:   | London Testing Strategy   | 43 |
| Appendix 6:   | Inclusion health  | 44 |
| Further infor | mation  | 46 |



# We will protect our population and communities, with particular focus on our most vulnerable groups

#### **EXECUTIVE SUMMARY**

#### CONTEXT

Since the arrival of the novel coronavirus in the United Kingdom in early 2020, a national effort has been underway to mitigate the negative consequences of this pandemic.

**Southwark's Outbreak Prevention and Control Plan** (OPCP) was first published in June 2020. Since then the pandemic and our response have evolved. This revised plan sets out Southwark Council's ambition and approach to providing local leadership and support for the pandemic response. Led by Public Health, but working closely with many council, health service, and voluntary sector partners, in this document we propose both strategic and operational approaches to the challenge of coronavirus.

Across all of our workstreams, community engagement and communication is critical: we will continue to produce and implement an engagement and **communications plan** with the aim of preventing disease (where possible), and mitigating its effects (where necessary).

Our operational response will continue to involve three strands of work: **PREVENT**, **IDENTIFY** and **CONTROL**.

#### **PREVENT**

Our prevention efforts have focused around **engagement approaches** taking an asset-based approach to understanding and anticipating community needs in the borough. As we enter into the next phase of the pandemic response, with the easing of restrictions, we will continue to work with communities with a focus on those most impacted during the first and second waves.

Our **outbreak prevention team** comprising health protection, infection prevention and control advice will continue to work alongside our prevention workstream and with our most vulnerable institutions and communities.



# We will deliver a safe, effective and sustained response for as long as the virus remains

#### **EXECUTIVE SUMMARY**

#### **IDENTIFY**

Accessible and widespread testing is central to our efforts. Southwark residents now have access to a wide array of both symptomatic PCR and asymptomatic rapid testing – which are both directly accessible or provided in the workplace, educational or care and health settings.

We will focus on ensuring public facing workers, those living areas of higher community transmission and those in higher risk occupations find testing convenient and easy to access. We will maintain capacity for surge testing for new variants as required.

We continue to deliver our **local tracing partnership: Test and Trace Southwark (TTS).** The TTS service operates seven days a week and supplements the national NHS Test and Trace efforts in pursuing local residents who have tested positive, identifying exposures and providing advice and support to self isolate, including financial and wellbeing support where needed via our community hub.

#### **CONTROL**

Where incidents and outbreaks arise, the **Incident Management Team(s)** will work with the Institute of Health Protection (LCRC), NHS and other partners to implement control measures and manage communications with the public. We will continue to build health protection and infection prevention and control capacity within settings, with a focus on care and residential settings, schools and workplaces.

#### **CONCLUSION**

We will continue to take an **iterative**, **agile and sustainable** approach to meet the needs and challenges that Southwark's population and communities will face as we move out of the second wave of the pandemic response and into the easing of restrictions.



| Executive Summary                       | 5  |
|---|----|
| 1. Purpose: aim and objectives          | 8  |
| 2. The pandemic and legislative context | 11 |
| 3. Our framework and governance         | 16 |
| 4. How we will operate                  | 19 |
| 5. Action plan                          | 24 |
| 6. Evaluation and improvement approach  | 30 |
| Conclusion & Appendices                 | 33 |

#### **FOREWORDS**

The Coronavirus pandemic is one of the most severe health challenges that faces Southwark's population and its impact will be felt for years to come.

As the Cabinet Member for Public Health, I have worked closely with my Cabinet and Public Health colleagues to protect our population and vulnerable communities. The next 12 months will continue to bring challenges as lock down eases and Autumn approaches.

The refreshed Outbreak Prevention and Control Plan requires close partnerships and strong community engagement. I will work with my Cabinet colleagues and with local people to keep Southwark safe.

I would like to thank everyone – our communities, our NHS, our VCS and local businesses, for their major part they will all be playing in the implementation of this plan – together we are stronger.

#### **CIIr Evelyn Akoto**

Cabinet Member for Community Safety and Public Health

12th March 2021

Protecting the health of residents is a core public health duty and this plan builds on and strengthens our existing plans, partnerships and arrangements.

Local authorities have been given additional responsibilities around supporting testing and contact tracing, supporting vulnerable residents to self isolate and leading on community outbreaks. This plan brings together these existing and new responsibilities under our three core priorities; preventing transmission; identifying cases, contacts and clusters; and controlling outbreaks. Through this work we will ensure we engage with our residents and communities to actively seek their feedback to inform work going forward.

This plan is intended to be a live document and it will be updated as required reflecting changes in local, regional and national guidance.

Jin Lim FFPH

Acting Director of Public Health

12th March 2021



# This document sets out our approach to the pandemic going forward

#### AIM AND OBJECTIVES

The aim of Southwark's OPCP is to continue to mitigate the impact of coronavirus on Southwark's population and communities, providing a robust framework for the delivery of actions, and prepare the way for a safe, healthy and confident return to renewal and post-pandemic life.

In order to achieve this, our refreshed focus will be on:

- 1. Working with local communities, institutions and partners from across sectors to maximise the impact of COVID-19 prevention measures across the borough, recognising the inequitable impact of the pandemic.
- 2. Supporting the implementation of symptomatic and asymtomatic testing within the wider community and within settings.
- Supporting residents who test positive to adhere to self isolation measures through practical and financial support.
- 4. Coordinating with regional and other health protection specialist advice in the management of outbreaks and instituting local control measures as they may be required.
- 5. Supporting the roll out of the NHS COVID-19 vaccination programme, with a focus on tackling vaccine hesitancy and underserved groups.
- 6. Managing a single point of contact for the exchange, management and interpretation of intelligence and other epidemiological evidence with local, regional and national assets (including Public Health England and the Joint Biosecurity Centre and their successor organisations).
- 7. Providing appropriately governed assurance and oversight of how the pandemic is handled in Southwark to local, regional and national stakeholders.
- 8. Using lessons from the pandemic to inform the recovery process and to strengthen local approaches to tackling health inequalities.



| Executive Summary                       | 5  |
|---|----|
| 1. Purpose: aim and objectives          | 8  |
| 2. The pandemic and legislative context | 11 |
| 3. Our framework and governance         | 16 |
| 4. How we will operate                  | 19 |
| 5. Action plan                          | 24 |
| 6. Evaluation, learn and adapt          | 30 |
| Feedback & Appendices                   | 33 |

# HM Government declared the pandemic a Level 4 incident for England's NHS on 3 March 2020

#### THE GLOBAL PANDEMIC

The novel coronavirus (SARS-CoV-2) was first reported in December 2019 in Wuhan, China with the first case of COVID-19 reported in the United Kingdom in late January 2020.

- In March 2020 HM Government instituted a 'lockdown' of all-but-essential business. Since then, some of these constraints have been relaxed in the context of a renewed focus on testing, tracing and isolating infected individuals.
- Local Government has been involved in the acute response to the pandemic since the beginning, in particular by providing relief to individuals at higher risk of disease, by enabling supply of personal protective equipment (PPE) and in granting financial relief to small businesses.
- Local Directors of Public Health were instructed by HM Government to establish local outbreak control plans by the end of June 2020, along with a range of other new duties which included overseeing testing in care homes and leading the local implementation of the national contact tracing programme (NHS Test and Trace).
- Central government funding has been allocated for upper tier local authorities in England to support the public health efforts and partnership approaches relating to supporting local test and trace arrangements and the implementation of the local OPCP including engagement, communications, enforcement and welfare support.



# Local government possessed responsibilities and powers for health protection prior to the pandemic

### **LEGISLATIVE AND ORGANISATIONAL CONTEXT (1 OF 2)**

The legal basis for managing outbreaks of communicable disease (pre-pandemic) is spread across several pieces of primary and secondary legislation, with the associated responsibilities split across a number of organisations and professional groups.

| Legislation  | Responsibilities  | Organisations and professions  |
|--|---|--|
| The Public Health (Control of Disease)<br>Act 1984 | Gives public authorities powers and duties to prevent and control risks to human health from infection or contamination   | Local Authority Environmental Health<br>Officers   |
| Civil Contingencies Act, 2004                      | Sets out the responsibilities of different agencies in responding to major incidents  | NHS organisations, local government and Public Health England  |
| Health Protection Regulation, 2010                 | Provides Local Authorities with flexible powers to deal with emergencies or incidents where infection or contamination present or could present a significant risk to human health. Some powers can be exercised by Justices of the Peace (JPs) only. | Local Authority Environmental Health Team.   |
| Health and Social Care Act, 2012                   | Requires LAs to appoint a Director of Public Health and to exercise functions in relation to planning for and responding to emergencies that present a risk to public health.   | Creation of Public Health England and<br>NHS Clinical Commissioning Groups;<br>move of local Directors of Public Health<br>to local government |

## New legislation confers additional powers and prepares the way for a new legal basis for local control measures LEGISLATIVE AND ORGANISATIONAL CONTEXT (2 OF 2)

Since April 2013, the responsibility for providing day-to-day health protection advice and response has rested with Public Health England's Health Protection Teams (HPTs) having taken over from the Health Protection Agency (following the Health and Social Care Act 2012).

#### The Coronavirus Act 2020

- The Coronavirus Act was brought forward as emergency legislation designed to facilitate a range of cross-government activity in a time of emergency.
- Within the Act new powers were created for the investigation, isolation and testing of persons suspected of being infected, with roles for both police and public health officers. In London the public health officers are currently named consultants working in Public Health England.
- A number of items of secondary legislation relating to Tiers, international travel, face coverings, restrictions, self isolation and local authority enforcement powers have also been drafted.
- Locally there is a is a close working partnership between the Council's Regulatory Services,
   Community Wardens ,Public Health and the Police to tackle any enforcement concerns.



| Executive Summary                       | 5  |
|---|----|
| 1. Purpose: aim and objectives          | 8  |
| 2. The pandemic and legislative context | 11 |
| 3. Our framework and governance         | 16 |
| 4. How we will operate                  | 19 |
| 5. Action plan                          | 24 |
| 6. Evaluation, learn and adapt          | 30 |
| Feedback & Appendices                   | 33 |

# The focus of our outbreak prevention & control plan has been reviewed as we come out of the second wave REFRESHED PRIORITIES

As we come out of the second wave, with the lifting of restrictions and the roll out of the NHS COVID-19 vaccination programme, our focus will be on:

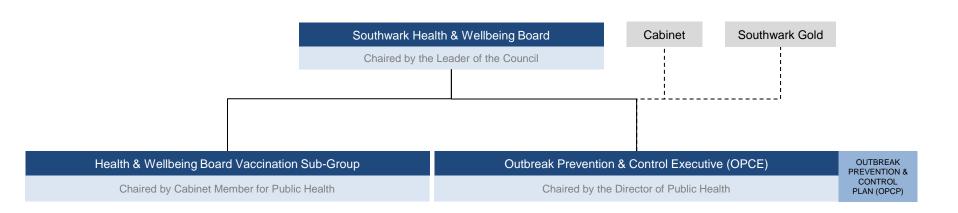
- 1. Adherence to a range of non-pharmaceutical interventions including face coverings, social distancing and respiratory hygiene measures and supporting COVID-secure businesses.
- 2. Supporting testing behaviours across the community and within settings; broadening access to testing, especially to those living in areas of higher community transmission or in higher risk occupations, so testing is convenient and easy to access.
- Continuing a local test and trace function with a focus on timely contact and advice and facilitating support for cases and contacts to self isolate through practical, financial and wellbeing support as required.
- 4. Supporting the roll out of the NHS vaccination programme and working across partners to support equitable take-up in black and minority ethnic communities, reducing vaccine hesitancy and barriers of access.
- 5. Maintaining surge capacity within the Public Health acute response function and the wider council to respond to variants of interest and concern and localised clusters and outbreaks as required.
- 6. Ensuring schools, care and residential settings and other higher risk institutions continue to access local specialist health protection advice and management.
- 7. Using lessons from the pandemic to inform the recovery process and to strengthen local approaches to tackling health inequalities.



# The OPCP will be held by the Outbreak Prevention and Control Executive (OPCE)

#### **GOVERNANCE**

The development and implementation of the Outbreak Prevention and Control Plan (OPCP) will be led by the Director of Public Health and subject to oversight by the Health and Wellbeing Board chaired by the Leader of the Council.



The Outbreak Prevention and Control Executive (OPCE) will bring together senior-level staff from across Southwark Council, NHS and other partners. The OPCE will be responsible for implementing the OPCP including advising major control measures such as local lockdowns.

The Vaccination Sub Board brings together key partners to tackle challenges to vaccine take up and rapid roll out.

Slide 18

# Southwark's Health and Wellbeing Board will provide member-led oversight

#### **OVERSIGHT**

#### **Membership and Leadership**

The Health and Wellbeing Board is chaired by the Leader of the Council. The membership includes the Cabinet leads for public health, community safety, education, children and adult social care, and senior officers of the Council, local NHS Trusts and the VCS.

#### **Oversight function**

- Receive and review reports on activity and decisions from the Outbreak Prevention and Control Executive (OPCE) relating to the implementation of the Outbreak Prevention and Control Plan (OPCP) and stakeholder engagement.
- Provide feedback to the OPCE and the work programmes OPCE supervises within the scope of the OPCP.
- Provide assurance back to the Health and Wellbeing Board and Cabinet, and in so doing, the public that we serve.

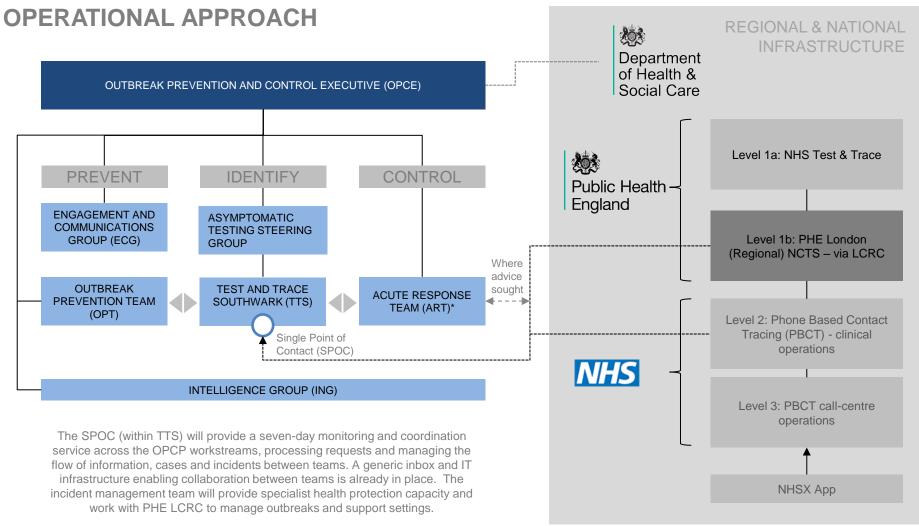
#### Frequency

- Health and Wellbeing Board meets every 6-8 weeks
- Outbreak Prevention and Control Executive meets every 2 weeks
- The Vaccine Sub Group meets every 2 3 weeks (TBC)



| Executive Summary                       | 5  |
|---|----|
| 1. Purpose: aim and objectives          | 8  |
| 2. The pandemic and legislative context | 11 |
| 3. Our framework and governance         | 16 |
| 4. How we will operate                  | 19 |
| 5. Action plan                          | 24 |
| 6. Evaluation and improvement approach  | 30 |
| Feedback & Appendices                   | 33 |

# The OPCE will oversee five workstreams which will scale and provide mutual aid as needs arise



Operational teams / groups



<sup>\* -</sup> The Acute Response Team (ART) will convene an Incident Management Team (IMT) where needed.

# Southwark is working hard to coordinate activity across key partners, and collaborating with stakeholders

**COLLABORATIVE WORKING** 



Key partners











Wider stakeholders:

Southwark, SE London and London



Care home and domiciliary care providers



Schools



NHS provider partners



Other communities of geography and of interest



Voluntary sector



Transport infrastructure and partners

A framework for joint working and shared protocols between the PHE London Coronavirus Response Centre (LCRC) and the public health structures in London Local Authorities (LAs) for managing COVID-19 outbreaks, complex settings and community clusters is being agreed.

The LCRC group will remain the source of specialist advice (temporarily centralising and replacing existing health protection team arrangements) and there will continue to be close operational working between LCRC and Southwark's public health division in managing cases and outbreaks.

Slide 22

# We adopt a low threshold for taking preventive or anticipatory action, based on available capacity

#### TRIGGERS & CONTEXTS

Community outbreaks and clusters are defined as an increase in cases above expected or two or more cases linked by time, place or person.

- Community clusters are identified by the Joint Biosecurity Centre from: a number of positive tests in a locality or a common site or activity; or symptoms of COVID-19 / requests for tests from a number of people in a locality or a common site or activity.
- Community settings include workplaces, community halls and spaces, faith groups, shops and places of entertainment (including food premises).
- Appendix 2 sets out the process for outbreak identification and rapid response
- Appendix 3 sets out the response to Variants of Concern (VOC)

# Schools, care homes and other residential settings (including hostels)

- 1. LCRC risk assess and provide outbreak control
- LCRC determines if an LCRC-led IMT should be convened
- LCRC notifies SPOC
- Southwark IMT provides support and liaison on local issues and provision of testing

#### Workplaces, communities and commercial venues

- 1. LCRC notifies SPOC
- Southwark risk assess and provide outbreak control with determination of a Southwark-led IMT / informing SE London IMT as needed
- 3. Southwark IMT liaises with TTS and OPCE as required, and can call on LCRC advice



# The Acute Response Team review notifications and act to institute control measures where necessary

#### INCIDENT MANAGEMENT



Notification received





Incident declared by Acute Response Team (ART) with Southwark / and or SE London IMT

# Led by **public** health consultant





Supported by **public health specialist** staff



Actions undertaken by **environmental health** staff



Supported by **communications** staff



**Liaison staff members** and other colleagues where appropriate

Incident Management Team convened





Calling upon specialist advice from PHE





Calling upon specialist advice from NHS (including infection prevention and control)



| Executive Summary                       | 5  |
|---|----|
| 1. Purpose: aim and objectives          | 8  |
| 2. The pandemic and legislative context | 11 |
| 3. Our framework and governance         | 16 |
| 4. How we will operate                  | 19 |
| 5. Action plan                          | 24 |
| 6. Evaluation, learn and adapt          | 30 |
| Feedback & Appendices                   | 33 |

### **ACTION PLAN: PREVENTION**

|                                    | Outbreak Prevention Control Plan   |
|------------------------------------|--|
| Mission & objectives               | Prevent transmission with a focus on communities most at risk.   |
| Priority activities & deliverables | <ul> <li>Continued adherence to public health advice, including non-pharmaceutical interventions.</li> <li>Supporting COVID-secure businesses, settings and public areas, including enforcement.</li> <li>Continuing community engagement and communications with communities most impacted by waves one and two:         <ul> <li>Establish a 'Let's talk about the vaccine' campaign</li> <li>Train 1,000 local people to have informed conversations about the vaccine</li> <li>Use our expansive network of community champions including Community Ambassador programme to target COVID prevention communications</li> <li>Monitor the success of our communications, and adapting our plans and approach accordingly</li> <li>Run a small grants scheme to engage and support community-led prevention projects targeting at-risk groups</li> <li>Continue to help treat and prevent chronic conditions in the most affected groups, and support to reduce this inequality in the long run.</li> <li>Support existing PH initiatives and messages to make sure we focus on social determinants of health to avoid widening inequality.</li> <li>Support the integration of health and social care which provides an opportunity to create a structured, coordinated, and strategic community support approach for people with single or multi-illness and their caregivers.</li> </ul> </li> </ul> |
| Resourcing                         | Chaired by the Director of Public Health, with senior level membership including (but not limited to) Director of Commissioning, Director of Education, Director of Children's' Services and NHS Borough Director, Consultant (Health Protection), Director of Communities, Head of Communications. and VCS.   |
| Rhythm and reporting               | Fortnightly meeting Reports regularly to the OPCE and Health and Wellbeing Board.  Slide 26  |

## **ACTION PLAN: TEST, TRACE AND ISOLATE**

|                                    | Outbreak Prevention Control Plan  |
|------------------------------------|---|
| Mission & objectives               | <ul> <li>Embed testing behaviours across the community and within settings and support cases and contacts to self isolate. Our objectives align with the London Testing Strategy (Appendix 5)</li> <li>To find people who have the virus, trace their contacts and ensure both self-isolate to prevent onward spread</li> <li>Surveillance, including identification for vaccine-evasive disease and new strains</li> <li>To investigate and manage outbreaks</li> <li>To enable safer re-opening of the economy</li> </ul>   |
| Priority activities & deliverables | <ul> <li>Testing</li> <li>Scaling up asymptomatic testing in Southwark through combination of mass testing centres, high street pharmacy provision and community collect, prioritising where transmission risk is higher.</li> <li>Adapting the testing offer to target hard-to-reach groups drawing on community engagement and communications campaigns that resonate and bringing testing closer to Southwark residents.</li> <li>Optimising testing capacity in partnership with DHSC to flexibly respond to local need.</li> <li>Contact tracing</li> <li>The continued development and enhancement of Test and Trace Southwark's effectiveness as a collaboration of Public Health, Call Centre, Housing and Regulatory Services staff. At present the team is working with DHSC to determine engagement of Local-Zero contact tracing programme.</li> <li>Expansion of welfare and other support to facilitate greater adherence to isolation advice across people in Southwark</li> <li>Appendix 4 sets out the test and trace flow process in more detail and Appendix 6 Inclusion Health</li> </ul> |
| Resourcing                         | Chaired by a public health specialist with leadership shared jointly between Communications and Community Engagement. Additional communications capacity has been requested in the TTS Business Case. Asymptomatic testing steering group and programme management.   |
| Rhythm and reporting               | TTS-DG Test and Trace Southwark Delivery Group TTS-PH Test and Trace Southwark Operations Group Weekly Asymptomatic Testing Steering Group (and less frequent stakeholder meetings) Both TTS and Asymptomatic Testing report verbally each fortnight to OPCE and in written form to HWBB  |

#### **ACTION PLAN: OUTBREAK AND VARIANT CONTROL**

|                                    | Outbreak Prevention Control Plan   |
|------------------------------------|--|
| Mission &<br>objectives            | <ul> <li>Working with the National Institute of Health Protection and the NHS, deliver a specialist response (including infection prevention and control and health protection advice) that proactively identifies and manages outbreaks.</li> <li>Dynamically identify and characterise specific risks arising in communities and settings and work with them to mitigate these risks.</li> <li>Continue to provide targeted support for non-pharmaceutical interventions (social distancing, mask wearing, etc.) across communities and settings with enforcement as required.</li> <li>Work with local community groups to provide guidance and capacity building across Southwark's statutory, voluntary and private sector.</li> </ul>  |
| Priority activities & deliverables | <ul> <li>Ensure there is capacity to investigate and manage VOC/VUI cases and contacts as necessary</li> <li>Establish and lead IMT to investigate and manage VOCs/VUIs cases and clusters with enhanced case and contact tracing, and targeted testing (community or setting focussed) including surge testing where required. Appendix 3 sets out the more detailed response to VOC/VUI</li> <li>Continue to provide local support to settings in managing cases, clusters and outbreaks, supporting regional health protection infrastructures.</li> <li>Provide local support to ensure workplaces and public areas are COVID secure, with regulatory and enforcement action as necessary.</li> <li>Continue to support high-risk settings by facilitating training and IPC liaison</li> </ul> |
| Resourcing                         | Led by a public health consultant with operational resource coming from Public Health, Environmental Health and NHS infection prevention and control.  |
| Rhythm and reporting               | Weekly operational meeting. Reports regularly to OPCE.   |

#### **ACTION PLAN: SUPPORTING NHS VACCINATION PROGRAMME**

|                                    | Outbreak Prevention Control Plan  |
|------------------------------------|---|
| Mission &<br>objectives            | <ul> <li>Support the implementation of the NHS COVID-19 vaccination programme by working across partners and communities to ensure equitable take up.</li> <li>Residents understand the risks that COVID-19 poses to themselves, their families and their community.</li> <li>Residents have confidence that the vaccine is safe and effective.</li> <li>Being vaccinated is made as easy as possible for all residents.</li> <li>Communities and residents feel empowered by engagement approaches and lead on and have participation in shaping communications about the vaccine.</li> <li>Information gaps are filled and misinformation is corrected in an accessible way to all communities.</li> <li>The programme reduces inequalities in vaccine coverage.</li> </ul> |
| Priority activities & deliverables | <ul> <li>Reducing inequalities of access, including a comprehensive programme of outreach to provide and promote vaccination in communities with low uptake</li> <li>Community engagement and communications to address vaccine hesitancy.</li> <li>Using vaccine uptake data to shape our approach.</li> <li>Supporting programme delivery, call and recall to increase uptake and reduce inequality in uptake.</li> <li>Training and capacity development.</li> </ul>   |
| Links                              | Borough Vaccination Delivery Plan Vaccination Strategy Communications and Engagement  |
| Rhythm and reporting               | Weekly operational meeting Fortnightly Strategy Coordination Group Reports regularly to OPCE and Health and Wellbeing Vaccination Sub Board   |

### **ACTION PLAN: INTELLIGENCE GROUP**

|                                    | Outbreak Prevention Control Plan   |
|------------------------------------|--|
| Objectives                         | <ul> <li>Support an intelligence and evidence guided response to COVID-19 within the borough through the development of a hub for intelligence and epidemiology relating to the outbreak.</li> <li>Establish operating procedures for the flow and management of information relevant to managing COVID-19 testing, cases, outbreaks and vaccination in the borough.</li> <li>Identify key monitoring indicators and escalation criteria for reporting to OPCE, HWB, Gold &amp; SE London.</li> <li>Coordinate and respond to queries relating to intelligence and epidemiology.</li> <li>Continue to provide analytical support to the pillars of the outbreak control plan.</li> </ul> |
| Priority activities & deliverables | <ul> <li>Ensure timely testing data is available to stakeholders and work with the Acute Response hub to identify lower uptake of testing and prioritise areas for intervention.</li> <li>Support the analysis of vaccination uptake data to ensure stakeholders can identify and prioritise areas and groups with lower uptake.</li> <li>Identify key risk sites within the borough including schools, care homes and other venues.</li> <li>Continue to monitor acute impact of COVID-19 on different population groups and communities wherever possible.</li> </ul>  |
| Resourcing                         | Led by the Head of Public Health Intelligence with operational resource coming from the Public Health Knowledge & Intelligence Team and wider Public Health Division.  |
| Rhythm and reporting               | Daily operational meeting.  Reports regularly to: Lead Member Briefing, Cabinet & Gold, OPCE, Health & Wellbeing Board,  Health & Wellbeing Board Vaccination Sub-Group, Vaccination Coordination Group, Communication  & Engagement Group.  |

| Executive Summary                       |    |
|---|----|
| 1. Purpose: aim and objectives          |    |
| 2. The pandemic and legislative context |    |
| 3. Our framework and governance         |    |
| 4. How we will operate                  | 19 |
| 5. Action plan                          | 24 |
| 6. Evaluation, learn and adapt          | 30 |
| Feedback & Appendices                   | 33 |

# A range of evaluation methodologies will continue to be deployed throughout the OPCP implementation

#### MONITORING AND EVALUATION APPROACH

#### Formative evaluation and our approach to learning

- A rolling cycle of quality improvement has been initiated by thematic and action plan areas with the whole system OPCP evaluation and learning event taking place in January 2021.
- Additional work is now being undertaken to explore and improve the operations in both ART and TTS.
- A Logical Framework approach to the OPCP's evaluation has been developed to align the monitoring and evaluation work across elements of the plan.
- Lessons are being shared with participation in the London Good Practice Networks.

#### Corporate governance and reporting

- Narrative, output and outcome milestones for the Outbreak Prevention and Control Plan have been proposed for the new Council Plan.
- A minimum dataset for recording and monitoring performance has been developed with the Intelligence Group. This enables on-going performance reporting to OPCE, Cabinet, Health and Wellbeing Board and other governance groups. Various themes have also been considered by Overview and Scrutiny.



| Executive Summary                       |    |
|---|----|
| 1. Purpose: aim and objectives          |    |
| 2. The pandemic and legislative context |    |
| 3. Our framework and governance         | 16 |
| 4. How we will operate                  | 19 |
| 5. Action plan                          |    |
| 6. Evaluation, learn and adapt          | 30 |
| Feedback & Appendices                   |    |

# The OPCE will continue to adapt the OPCP to ensure it best reflects the context, evidence and guidance FEEDBACK AND CONTACT

Despite the current vaccine roll-out, it is likely that population-level control measures will require continual adjustment and will include testing, tracing, NPI (non pharmaceutical interventions), enforcement and strong communications and community engagement

- Enacting local control measures is critical to enabling as much of the population to go about their usual business and interactions as possible.
- The broader economic and societal implications of the pandemic and its control measures will be experienced for many years into the future.

Throughout this we must carefully monitor inequalities arising immediately, and anticipate inequalities likely to arise in the future. Creating a fairer and more equal society is an opportunity that this pandemic poses.

The Outbreak Prevention and Control Executive welcomes all parties in supporting and contributing to our collective effort amidst this challenging time.

We welcome your comments and your feedback at <a href="mailto:publichealth@southwark.gov.uk">publichealth@southwark.gov.uk</a>.

# Southwark's Outbreak Prevention and Control Plan (OPCP) Appendices

Southwark Public Health Division
Environment, Leisure & Public Health







## List of appendices

### Additional information is provided in the following appendices

Appendix 1: Outbreak arrangements

- Southwark, London & national arrangements
- LCRC arrangements

Appendix 2: Outbreak identification & rapid response flow process

Appendix 3: Responding to variants of concern (VOC)

Appendix 4: Test and Trace Southwark — flow process

Appendix 5: London Testing Strategy

Appendix 6: Inclusion health



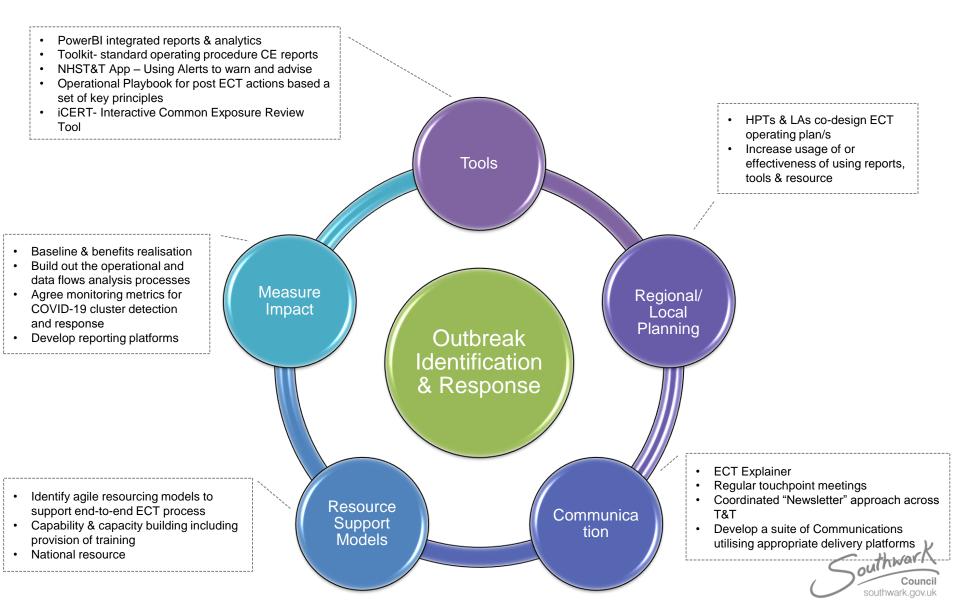
## **Appendix 1: Southwark, London and national roles**

| Level     | Place-based leadership   | Public health leadership  |
|-----------|--|---|
| Southwark | LA CE, in partnership with DPH and PHE HPT to:  a) Sign off the Outbreak Management Plan led by the DPH  b) Bring in wider statutory duties of the LA (eg DASS, DCS, CEHO) and multi-agency intelligence as needed  c) Hold the Member-Led Covid-19 Engagement Board (or other chosen local structure)   | <ul> <li>DPH with the PHE HPT together to:</li> <li>a) Produce and update the Outbreak Management Plan and engage partners (DPH Lead)</li> <li>b) Review the data on testing and tracing and Vaccine uptake data</li> <li>c) Manage specific outbreaks through the outbreak management teams including rapid deployment of testing</li> <li>d) Provide local intelligence to and from LA and PHE to inform tracing activity</li> <li>e) DPH Convenes DPH-Led Covid-19 Health Protection Board (a regular meeting that looks at the outbreak management and epidemiological trands in the place.)</li> </ul> |
| London    | Regional team (PHE, JBC, T&T, London councils and ADPH lead  a) Support localities when required when required on outbreaks or specific cases or enduring transmission or substantial cross-boundary  b) Engage NHS Regional Director and ICSs  c) Link with Combined Authorities and LRF/SCGs  d) Have an overview of risks issues and pressures across the region especially cross-boundary issues | trends in the place )  f) Ensure links to LRF/SCG  PHE Regional Director with the ADPH Regional lead together  a) Oversight of the all contain activity, epidemiology and Health Protection issues across the region including vaccine uptake  b) Prioritisation decisions on focus for PHE resource with Las or sub regions  c) Sector-led improvement to share improvement and learning  d) Liaison with the national level   |
| NATIONAL  | <ul> <li>Contain SRO and PHE/JBC Director of Health Protection</li> <li>a) National oversight for wider place</li> <li>b) Link into Joint Biosecurity Centre especially on the wider intelligence and data sources</li> </ul>  | <ul> <li>PHE/JBC Director of Health Protection (including engagement with CMO)</li> <li>a) National oversight identifying sector specific and cross-regional issues that need to be considered</li> <li>b) Specialist scientific issues eg Genome Sequencing</li> <li>c) Epidemiological data feed and specialist advice into Joint Biosecurity Centre</li> </ul>   |

## **LCRC – Southwark Response**

|  | Southwark   | LCRC Health Protection Team  |
|--|---|--|
| Case and contact investigation management  | Receive notifications of cases via national test and trace route Investigate and manage cases and contacts as per local SOPs Escalate to LCRC/HPT if meets criteria as agreed in national test and trace protocols Provide support packages as required   | Receive notifications of cases via clinical leads / local authority leads if meet the criteria as agreed in national test and trace protocols Investigate and manage high risk cases and contacts as per local SOPs  |
| VOCs (or other cases of concern)   | Investigate and manage VOC/VUI etc cases and contacts – at present those lost to follow up Establish and lead IMT to investigate and manage VOCs/VUIs cases and clusters with enhanced case and contact tracing, and targeted testing (community or setting focussed) including surge testing   | Investigate and manage initially VOC/VUI etc cases and contacts Liaise with LA contact tracing for help with no contact cases Investigate and manage any identified settings Advise and support LA IMT to investigate and manage VOCs/VUIs cases and clusters with enhanced case and contact tracing, and targeted testing (community or setting focussed) including surge testing   |
| Enhanced contact tracing (Cluster) investigation and management                        | Investigate, identify priority clusters  Manage clusters as per relevant settings SOPs  Chair IMTs if required  | Overview of cluster identification and management<br>Overview management of priority settings<br>Attend IMTs if required   |
| Settings<br>(care homes<br>workplaces,<br>schools, ports,<br>prisons,<br>homeless etc) | Receive notification of cases and clusters via a number of different routes Investigate and manage cases and clusters in settings. Provide advice and support around contact tracing, isolation, infection control practices, COVID safe environments and testing etc including written resources. Chair IMTs if required Develop and provide communications to stakeholders Liaise with CCG, GPs and other healthcare providers to provide ongoing healthcare support to setting | Receive notification of cases and clusters via a number of different routes Overview and investigate and manage cases and clusters in high priority settings Review and update resources Provide advice and support Provide advice and support around contact tracing, isolation, infection control practices, COVID safe environments and testing etc including written resources. Attend IMT if required Develop and provide communications to stakeholders Liaise with CCG, GPs and other healthcare providers to provide ongoing healthcare support to setting |

## **Appendix 2: Outbreak Identification and Rapid Response Framework**



## Appendix 3: Responding to Variants of Concern (VoCs) RESPONDING TO VARIANTS OF CONCERN (VOCS)

Mutations and variants of the Covid-19 virus can present a significant risk. As well as potentially being more transmissible and leading to more severe clinical consequences for individuals, mutations also present the possibility for Covid-19 variants to more effectively bypass naturally acquired immunity and/or reduce the effectiveness of current vaccines and therapeutics

Local Authorities, alongside and with the support of PHE and NHS Test and Trace at regional and national levels, have a key role to play in the investigation, management and control of COVID-19 variants designated as 'Variants of Concern' or VOCs. The overarching purpose is to restrict the widespread growth of VOCs in the population by:

- 1. detecting, tracing and isolating cases to drive down overall community transmission, and
- 2. case finding additional VOC cases through whole genome sequencing to help assess the risk of community transmission and determine what further interventions and actions are necessary to contain the variant.

All local authorities need to be prepared to quickly mobilise a suite of appropriate measures if a VOC is identified in their Borough, including local "surge" testing, and complemented by action to trace contacts and isolate cases as part of a wider strategy to control overall transmission.

Following the identification of a VOC, PHE London's Coronavirus Response Cell (LCRC) will conduct the initial investigation to gather additional information, complete a minimum data set and establish whether there are epidemiological links to countries of concern. Those VOCs without an epidemiological link will require wider investigation and response, and this will be determined jointly between the Local Authority, on the advice of the DPH, and PHE London's Health Protection Team.

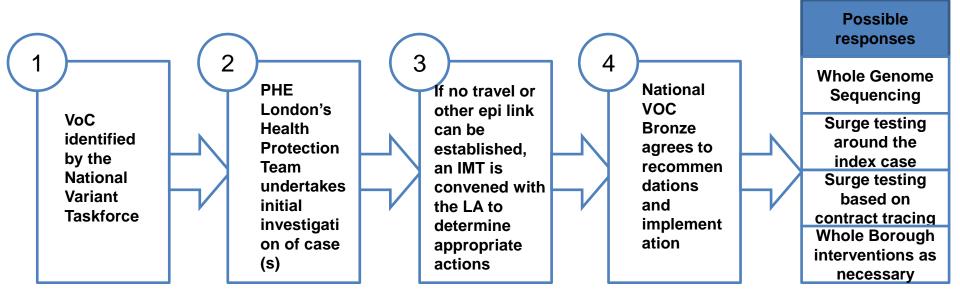
The combination, scale and focus of the tools deployed to investigate and control VOCs will be locally led, informed by the data and risk assessment, current epidemiology, knowledge of the local community and grounded in health protection principles and specialist health protection advice. Plans will need to be flexible and adaptable to different circumstances, such as the geography, communities or settings in scope.

The planned local response to a VOC(s) will need to be reviewed and supported by PHE National VOC Bronze to ensure the response is appropriate to the assessed risk and, critically, that the national support required for implementation of the plan (e.g. whole genome sequencing, surge PCR testing) can be mobilised within available national capacity.

The figure overleaf gives a high level representation of this process, and describes the measures and interventions that the boroughs should consider deploying as part of their local VOC response.

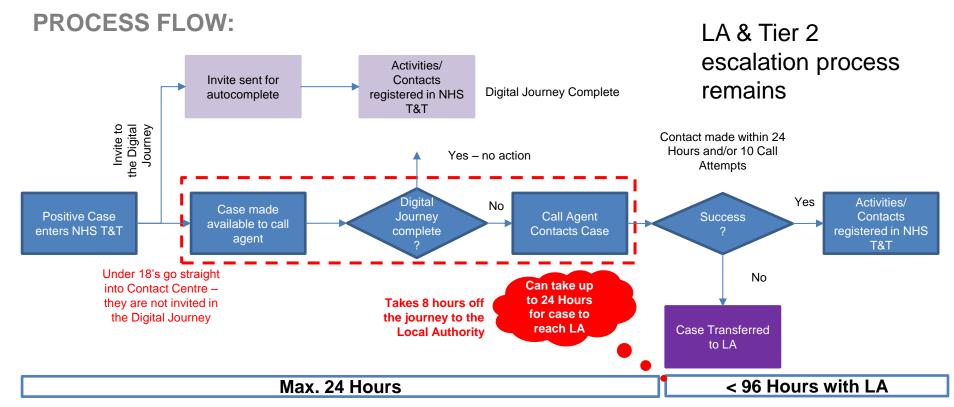
### **Responding to Variants of Concern (VoCs)**

VARIANTS OF CONCERN (VOC) INVESTIGATION AND MANAGEMENT





## **Appendix 4: Test & Trace Southwark (TTS): Local Contact Tracing Partnerships**



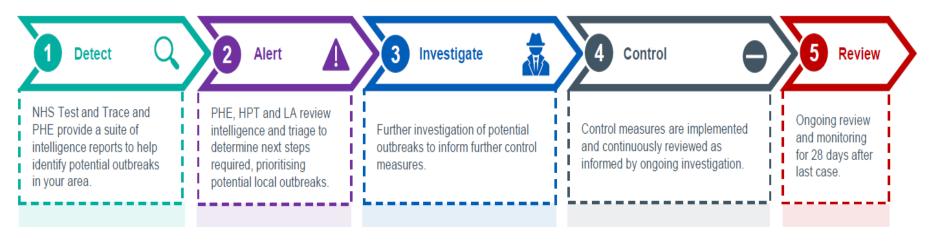
#### In the <u>new</u> process:

- The Index Case record is made available to the National Contact Centre at the same time as the first invite is sent for the Digital Journey
- Call agents will be required to check if the Index Case has completed the digital journey before contacting the case.
- If contact is not made within 24 hours and/or 10 call attempts the Index Case is transferred to the Local Authority...



## **Enhanced Contact Tracing**

## THE 5 STAGES OF ENHANCED CONTACT TRACING AND BESPOKE SUPPORT



- Improved Common Exposure Reports
- Postcode Incidence Reports
- ICert

Support levers

- Toolkit
- Training to interpret reports
- · Toolkit training
- National Resource
  - Local BasedContact Tracers
- National Resource
  - Local Based Health Professionals
- Mobile Testing Units
- Postcode push-Home Channel

- Regular touchpoint meetings and Comms
- National Resource
   Local Based
   Contact Tracers
- Capability and capacity building
- National Resource -Local Based Contact Tracers



## **Appendix 5: London Testing Strategy**

#### AIMS AND PURPOSE OF TESTING

- To find people who have the virus, trace their contacts and ensure both self-isolate to prevent onward spread
- Surveillance, including identification for vaccine-evasive disease and new strains
- To investigate and manage outbreaks
- To enable safer re-opening of the economy

#### Pillar 1 (NHS Settings)

PCR swab testing and LFD antigen testing in PHE and NHS labs (RT-qPCR, LAMP & quicker testing

- Symptomatic patients that arrive in a hospital setting
- Asymptomatic patients to support infection prevention & control e.g. elective care, inpatient care, mental health, maternity and discharge planning
- Symptomatic NHS frontline staff and in an outbreak situation and household members
- Routine testing of asymptomatic NHS staff and contractors
- Intermittent testing of nonsymptomatic NHS staff e.g. as part of SIREN study

## Pillar 2 (Mass Population/Community)

Mass symptomatic PCR swab testing (RT-qPCR) and asymptomatic VOC surge testing

- 5 Drive-thru Regional Test Sites
- 28 MTUs and 8 reserves available across London for routine testing and surge capacity deployment
- 86 LTS across 32 Boroughs
- Home Testing Kits
- Regular whole care home asymptomatic testing; weekly for staff, every 4 weeks for residents
- CQC-registered domiciliary care provider weekly staff testing

### Pillar 2 (Mass Population/Community)

**Asymptomatic** rapid antigen testing (Lateral Flow Device tests)

- LFD tests delivered through 1,239 asymptomatic testing sites
- New Community Collect programme launches 1 March
- Focus first on parents and bubbles of secondary school children

#### Other settings:

- National pilots/programmes
- Workplaces
- FE students
- NHS staff
- · Private sector testing
- Adult social care:
  - Visitors
  - Visiting professionals
  - Rapid outbreak testing
  - Domiciliary care
  - Extra Care and supported living
  - Personal assistants employed by someone who needs care

### **Appendix 6: Inclusion Health**

#### **LONDON COVID-19 FIND AND TREAT SERVICE (F&T)**

The Find and Treat service, provided by a team from University College Hospitals, is jointly funded by all of London's Local Authorities and the Greater London Authority (GLA) and provide the following for rough sleepers, homeless hostels, hotels, night-shelters, pay to sleep, large houses in multiple occupation (HMOs) and daycentres:

- Outreach testing and contact tracing: Telephone clinical triage and on-site testing triggered by reporting of symptomatic
  cases, testing of contacts and immediate infection control advice on site liaising with the London Coronavirus Response
  Cell (LCRC).
- Variants of concern (VOC): Should VOC postcode surge areas include any homeless or inclusion health settings F&T can support local surge testing.
- **Training and support**: Provision of training for testing and contact tracing for key local staff (e.g. nominated street outreach workers, and others with key trusted relationships).
- **Sentinel screening:** Testing residents and staff of high risk locations (e.g. prioritised based on size, shared facilities etc) to actively monitor the level of asymptomatic carriage. VOC testing data will be collated with sentinel testing.
- Vaccination: Vaccination of the homeless population and support to address wider healthcare needs (NHS funded)

The amount of training and sentinel screening undertaken will vary depending on the quantity of reactive outreach work (the focus since December has been entirely on outreach testing, and outbreak support).

Find and Treat are also funded (via NHSE) to provide outreach testing and contact tracing to **asylum hotels** in London (**funded until end March 2021**).

We are currently working through the **future delivery model needed** (beyond 25<sup>th</sup> June 2021 when current funding ends) in anticipation of continuing infections and potentially outbreaks, particularly as vaccination uptake in this group is challenging.

We will continue to collaborate with local authorities across London to understand and address the ongoing needs for these populations.



## Southwark's Outbreak Prevention and Control Plan (OPCP)

Further information

Southwark Public Health Division

**Environment & Leisure** 







### **Further information**

Key Southwark strategic and operational frameworks have been developed to inform, shape and support the implementation of the Outbreak Prevention Control Plan and recovery. They include:

- Vaccination Strategy and communications and engagement plan
- Community Ambassadors Programme
- Community Covid19 Prevention Grants
- Test and Trace Southwark protocols and operational guidance
- Settings based incident and outbreak management protocols (LCRC)
- Enforcement and deployment weekly plans
- Covid19 Pandemic Inequalities Impact Assessment
- Covid19 Impact: Health Inequalities Framework & Southwark Standing Together Action Plan



## **Glossary**

**ART** – Acute Response Team – provides day to day routine support

IMT – Incident Management Team – convened as required to manage serious incidents or outbreaks

**SEL IMT** – SE London Directors of Public Health meet weekly as a SEL IMT together with SEL CCG leads

LCRC – the London Coronavirus Response Cell – the Public Health England London level health protection service for complex settings and incidents

**OPCP** – Outbreak Prevention & Control Plan

**OPCE** – Outbreak Prevention Control Executive – the outbreak prevention control coordination and operational board with cross Council and multi agency senior officers

**SPOC** – Single Point of Access for contacting Test and Trace Southwark

TTS – Test and Trace Southwark – the local arrangements



# Find out more at southwark.gov.uk/publichealth

Southwark Public Health Division Environment & Leisure





