Implementation of Test & Trace in Birmingham 16/06/2020

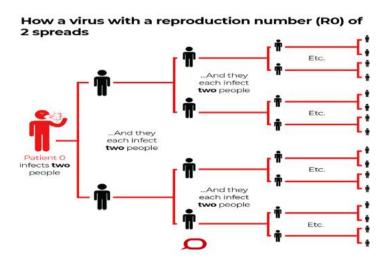
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Phase 2: Test, Trace, Contain, Enable

Test and trace relies on strong communication and engagement with the general public, organisations and partners. The aim is to drive down the reproduction rate and spread of the virus.



National surveillance survey suggests that currently between 0.1% and 20% of the population have been infected by Covid-19 however there is little evidence yet on whether infection generates immunity and if immunity lasts for any duration or impacts on transmission of the virus.



Test & Trace Emerging National Model

Test Enable **Trace** Contain

Test

Rapid testing, at scale, to control the virus and identify its spread

Trace

Integrated tracing to identify, alert and support those who need to self isolate

Contain

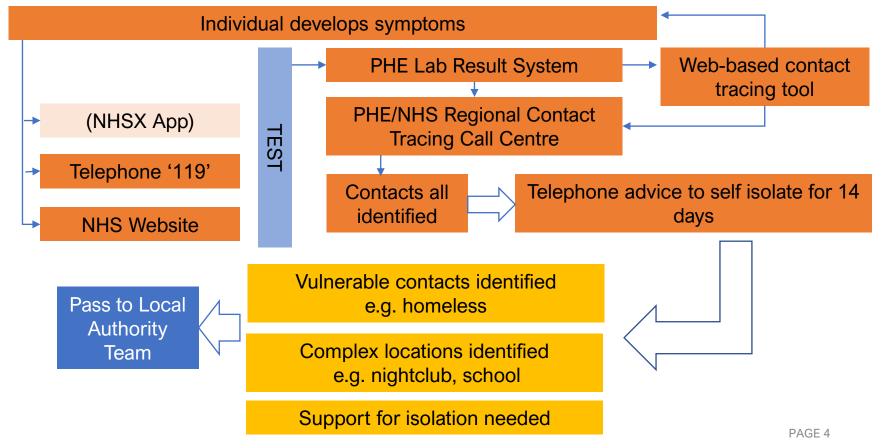
Using data to target approaches to flare ups, at a local and national level

Enable

Improving knowledge of the virus to inform decisions on social and economic restrictions



Simplified model



Local Outbreak Control Plans will have 7 themes

- 1. Care homes & schools: planning for local outbreaks in care homes & schools e.g. defining monitoring arrangements, potential scenarios and planning the required response
- 2. High risk places, locations and communities: identifying and planning how to manage high risk places, locations and communities of interests, including preventative measures and outbreak management strategies
- 3. Local testing capacity: identifying methods for local testing to ensure a swift response that is accessible to the entire population e.g. defining how to prioritise and manage deployment which may included NHS, pop-up testing sites
- 4. Contract tracing in complex settings: assessing local and regional contact tracing capability in complex settings e.g. identifying specific local complex communities, developing assumptions to estimate demand and options to scale capacity.
- **5. Data integration**: Integrating national and local data and scenarios planning through Joint Biosecurity Centre Playbook e.g. data management planning, including data security, NHS data linkages
- **Vulnerable People**: Supporting vulnerable local people to get help to self-isolate e.g. facilitating NHS and local support, identifying relevant community groups, etc. and ensuring services meet the needs of diverse communities
- 7. Local Boards: establishing governance structures led by existing Covid-19 Health Protection Boards in conjunction with local NHS and supported by existing Gold Command forums and a new member-led Board to communicate with the general public.

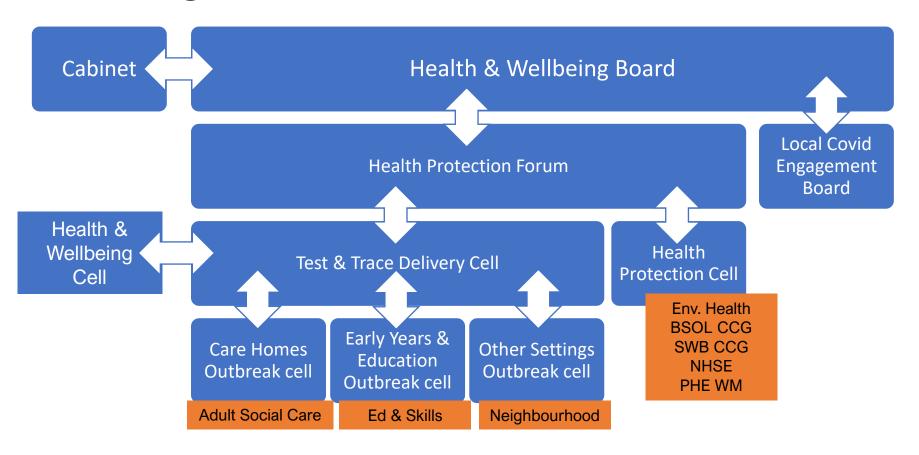


Governance structures

| Tier | Structure | Roles |
|----------|------------------------------------|---|
| Local | Covid Health Protection Board | Responsible for the development of local outbreak control plans by Directors of Public Health |
| | Strategic Co-ordinating Group | Gold emergency planning group to support, co-ordinate and partner with broad local groups to support delivery of outbreak plans |
| | Local Outbreak Engagement Board | Provide political ownership and public-facing engagement and communication for outbreak response |
| Regional | Local Resilience Forum | Coordinate public and emergency services to response to regional emergencies |
| | Integrated Care System | Develop and deliver regional health strategy |
| National | Test & Trace Programme | Develop national test and trace strategy |
| | Joint Biosecurity Centre | Provide data and analytics relating to management of regional infection rates building on PHE's surveillance systems |



Birmingham Outline Governance



Structure Responsibilities

| Structure | Leadership Responsibility | | |
|---------------------------------|--|--|--|
| Cabinet | Leader | Political accountability and oversight | |
| Health & Wellbeing Board | Cabinet Member for Adult Health & Social Care | Protecting and improving the health & wellbeing of citizens | |
| Test & Trace Oversight Group | Leader | Political oversight and public engagement to support t&t rollout | |
| Health Protection Forum | Director of Public Health | Develop and implement local outbreak response plan, multi-agency strategic engagement | |
| Test & Trace Cell | AD for Public Health | Coordination of local t&t response Logging of t&t decisions | |
| Health Protection Cell | PH Consultant | 7 day a week outbreak specialist PH response function | |
| Outbreak response cells PAGE 8 | Relevant Directorate AD + PH Consultant/Registrar | Multi-directorate setting outbreak response team to support surveillance and individual setting response | |

Local Implementation Issues & Risk

| Issue | Risk Level | Mitigation | Residual Risk |
|---|--|---|---|
| Financial allocation unknown currently but response required in short term | Medium High - High impact - Medium probability | Specific budget code in place to track spend on t&t response | Medium - Medium impact - Medium probability |
| PH staff capacity inadequate & burnout risk | High - High impact - High probability | Expanding capacity of the health protection cell drawing on BC cell | Medium - High impact - Medium probability |
| Inadequate testing and infection control response capacity for complex scenarios | Medium High - High impact - Medium probability | Interim solution agreed with BCHCT & Bsol CCG to provide surge capacity until funding clearer | Low - High impact - Low probability |



Responsibilities for enforcement

- Enforcement of social distancing is a policing issue currently, employers are responsible for providing a safe environment for staff and customers under health and safety legislation.
- Isolation due to symptoms is covered through the Covid-19 act and the responsible public health authority sits with Public Health England.
- Isolation where exposure/contact of a case is currently unclear but is likely to be covered under the Covid-19 act with similar powers for Public Health England.
- Awaiting national guidelines on 'local lockdown'



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