Gateshead Covid-19 Control Plan: May 2022

Introduction - COVID-19 in Gateshead

In February and March 2022, we saw further easing of Covid-19 restrictions in line with the Governments Covid-19 Response ('roadmap' Feb 2021) and moving to the Living with Covid Guidelines (Feb 22). These new steps saw radical changes with relaxation of social distancing rules, isolation requirements, tracing functions, mask wearing and testing arrangements. The below table summarises these changes:

Date	Change in Guidance and Restrictions
21 February	• Removing the guidance for staff and students in most education and childcare settings to undertake twice weekly asymptomatic testing.
24 February	• Remove the legal requirement to self-isolate following a positive test. Adults and children who test positive will continue to be advised to stay at home and avoid contact with other people for at least 5 full days and then continue to follow the guidance until they have received 2 negative test results on consecutive days. • No longer ask fully vaccinated close contacts and those aged under 18 to test daily for 7 days, and remove the legal requirement for close contacts who are not fully vaccinated to self-isolate. • End self-isolation support payments, national funding for practical support and the medicine delivery service will no longer be available. • End routine contact tracing. Contacts will no longer be required to self-isolate or advised to take daily tests. • End the legal obligation for individuals to tell their employers when they are required to self-isolate. • Revoke The Health Protection (Coronavirus, Restrictions) (England) (No. 3) Regulations.
24 March	• Remove the COVID-19 provisions within the Statutory Sick Pay and Employment and Support Allowance regulations.
1 April	• Remove the current guidance on voluntary COVID-status certification in domestic settings and no longer recommend that certain venues use the NHS COVID Pass. • Update guidance setting out the ongoing steps that people with COVID-19 should take to minimise contact with other people. This will align with the changes to testing. • No longer provide free universal symptomatic and asymptomatic testing for the general public in England. • Consolidate guidance to the public and businesses, in line with public health advice. • Remove the health and safety requirement for every employer to explicitly consider COVID-19 in their risk assessments. • Replace the existing set of 'Working Safely' guidance with new public health guidance.

Despite these changes Covid is still prevalent in the community and it is important to maintain local vigilance to prevent and reduce the opportunities for the virus to spread within the community and key settings within Gateshead.

After 2 years of responding to the pandemic we now must look to how we live with Covid and resume our normal daily activities whilst still protecting those most vulnerable to effects of Covid. The introduction of the Covid-19 vaccine programme has been hugely successful in providing protection against the severe effects of Covid, and a continued vaccination programme moving forward will remain a prominent focus in our defence. As we move away from a containment phase we need to refocus our work on addressing the core issues exacerbated by Covid, such as the impact on children and their mental health through missed schooling and reduced social interactions; and the widening of the inequality gap around wealth and health for those most vulnerable. In order to do this we need to review our Covid response, and recognise functions which can be safely stood down allowing for resource to be channelled more effectively elsewhere as we learn to live with Covid.

This Covid Control Plan sets out the next steps for the Gateshead Public Health Team and partners with a focus on living with Covid safely. It aims to protect the health of Gateshead's population from Covid and assure stakeholders, and the public, that efficient and effective arrangements are in place if needed. The Plan remains a dynamic document which will be updated according to learning and experience in dealing with the Covid response. The Public Health Team will keep the Plan under regular review and amend/update according to local, regional and national developments.

Covid-19 Testing

Throughout the pandemic the national testing programme has evolved as our understanding of the virus has increased, and the prevalence and severity threat has changed. Testing has been important throughout the response to help early identification of the virus, allowing people to appropriately isolate and break the chain of spread. The population now has much stronger protection against Covid than at any other point in the pandemic, due to the vaccination programme, natural immunity, access to antivirals, and increased scientific and public understanding about how to manage risk. For this reason, the Government now assesses that it is time to transition to focus its Covid response towards guidance, while targeting protection on individuals who are most at risk from the virus. Therefore, the provision of free universal symptomatic and asymptomatic testing for the general public was removed on the 1st April 2022. Private testing arrangements remain available. The three testing sites in Gateshead which delivered PCR testing were Blaydon Leisure Centre, Grassbanks and Prince Consort Road, they are no longer in operation, although the structures are not planned to be fully removed until July 2022 as part of a national programme.

There is limited symptomatic testing available for a small number of at-risk groups, they will be contacted directly and advised of how to access tests through a national programme. Ongoing testing regimes remain in place for staff and service users in some Health and Social Care settings, these arrangements vary depending on the setting and are outlined in the national guidance and organised by the employing organisation.

Future Testing Provision: UKHSA are reviewing plans for a small number of Mobile Testing Units to be retained nationally, to provide a contingency measure if need is identified. Gateshead Council have a supply of LFD home testing kits in reserve which can be used in the event of a need for surge testing, this would be managed by Gateshead Council with support of UKHSA Health Protection Team.

Covid-19 Tracing

Alongside testing, another important control function was tracing contacts of those with a positive covid result. Gateshead Council had successfully set up a Local Trace Partnership arrangement working collaboratively with the national Test and Trace system to contact positive cases and identified contacts.

On the 24th February a national decision was taken to no longer contact positive cases or contacts and the tracing function was stopped. Therefore, our local tracing staff team were redeployed to their original roles within the council.

Current national advice sets out guidance for those who test positive and precautions contacts can take to reduce the risk to themselves and other people. Those testing positive for Covid are encouraged to inform their close contacts so that they can follow the guidance. Gateshead Council is following this guidance and supporting employees to adhere to it providing a safe work environment.

Extra guidance and precautions are in place for positive cases and contacts in health and social care settings, often these are based on internal risk assessments and occupational health guidance.

Regional Health Protection Teams are also continuing to support local outbreaks in vulnerable settings. In the case of a resurgence of the virus, a new variant or large outbreak Gateshead Council will work with the Health Protection Team to support a control response in line with their health protection responsibilities outlined in the constitution. In the case of a national resurgence, Gateshead Council will follow national guidance where required.

Covid-19 Vaccination

We know that the vaccine is effective at reducing the risk of mortality and hospitalisation from Covid. The oversight and implementation of the vaccine programme is led by the CCG, working with Primary Care Networks, GPs, the Gateshead Health NHS FT, other NHS bodies and the Council. A specific work programme has been established to achieve equitable uptake amongst the groups where low uptake is more likely.

Since the beginning of the Cvoid-19 vaccination roll-out, Gateshead's system providers implemented five models to deliver the vaccine which ensured equitable access to all from the outset:

1. Five local vaccination centres spread across the borough; using mid-size venues such as health centres and public buildings, led by general practice teams working together in already established primary care networks. Appointments were accessed either through the national booking service or via the patient's registered practice. Centre names; The Bede Centre, Birtley Medical Group, Blaydon, Felling Hub and Rawling Road Practice.
2. Community pharmacies at Lobley Hill & Bensham offered vaccination appointments via the national booking service as well as walk-in appointments.
3. A hub at the Queen Elizabeth Hospital ensured health and care staff and other priority workers could access the vaccine without delay.
4. Mobile delivery of vaccines to people who are housebound or in care homes has been majority led by community nursing teams. During 2021/22 7,307 vaccinations were given to 3,181 care home residents and housebound patients.
5. 'Pop-up' sites using the Council's mobile vaccination unit successfully and frequently reached out to the borough's underserved communities and linked to high footfall areas such as Trinity Square, so people could access the vaccine without an appointment. These sessions were extremely popular, particularly with residents who ordinarily may not have taken the opportunity of the vaccine.

The 2022 Spring booster programme is currently well underway in Gateshead, with the local vaccination sites and pharmacies noted above delivering to all eligible immunosuppressed residents and over 75-year-olds, alongside frequent clinics for those aged 5 to 17 years too.

The Public Health Team have worked with NHS partners to agree recurring vaccination 'pop-ups' in five areas which hold the lowest uptake across the borough (Saltwell, Leam Lane Estate, Wrekenton and Rowlands Gill) – the vaccination bus timetable will run weekly throughout May through to July.

Throughout summer a scaled-down evergreen vaccination offer will be available at all sites and, if required, robust contingency plans are at hand to increase vaccination capacity at sites rapidly and effectively (e.g. extend operational hours/days).

It is the JCVI's view that an Autumn 2022 programme of vaccinations will be indicated for persons who are at higher risk of severe COVID-19; such as those of older age and in clinical risk groups - precise details of this programme will be laid down over the coming months to enable operational plans to be set out in Gateshead in a timely manner.

Covid-19 Data and Intelligence

Information is essential to enable us to understand progress, identify gaps and inequalities in uptake, inform the action we need to take to deliver the programme effectively, and provide assurance to system leaders and the local community. Gateshead's daily dashboards/reporting has been stood down in favour of weekly reports based on below noted components:

- Omicron typically being less severe i.e., inpatients typically not requiring ITU/RSU
- Mortality significantly lower
- National policy changes i.e., ceasing of national testing arrangements
- Surveillance feeding advice rather than enforcement (limited to no powers due to policy change)

However, although formal reporting doesn't take place daily, health protection surveillance specifically for Covid is now part of business-as-usual daily activity, with escalation points via Director of Public Health and the Gateshead Public Health Senior Management Team should they be required. Due to national policy changes & testing changes (1st Apr) testing/cases are now highly likely to be underreported therefore not representative of 'real' world picture. Therefore surveillance in the future will focus on:

- ONS & REACT study estimates of prevalence
- Modelled prevalence / incidence
- ONS Mortality data
- UKHSA / NHS vaccination uptake data
- Local NHS and partner intelligence

Combined these sources of data should enable us to monitor outcomes of Covid while maintaining a less detailed picture of local case numbers/rates. Where we have stood down reporting, the processes will be maintained to enable a rapid stand up should the need arise. Surveillance is shifting from initiation/ transmission to outcomes.

Outbreak Control Plans

During the peak of the pandemic the Public Health Team were supporting the Health Protection Team to investigate and manage some local outbreaks, in line with locally agreed guidance. As prevalence has decreased and outbreaks reduced, along with a reduction in control measures, the Health Protection Team no longer need this support, they will lead on any local Covid outbreaks identified. In line with our health protection duties as a local authority we will work closely with the health protection team to support their investigations where required, mirroring the arrangements pre-pandemic.

We are also working to create a new Health Protection Board within the Council to support management of local outbreaks of Covid or other infectious or diseases of concern. If there is a resurgence or new variant, then we will escalate our processes as required and in partnership with the Health Protection Team and national guidance.

Schools and early year settings: During the pandemic, the Public Health Team worked very closely with schools and early year settings to support them and prevent the transmission of COVID-19. These settings were deemed high risk due to the shared spaces and the frequent close contact between children and young people who often find social distancing much harder.

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There is a diverse range of school and early year provision in Gateshead:

- Early Years provision is split into childminders (99), day nurseries (32), out of school care (30 - note some of which are on the same site/under the same management as some of the day nursery provision), pre-school playgroups (22). We also have 2 Jewish independent nursery school provision and 4 private Jewish nurseries plus a small number of childminders. Early years settings in the borough are supported by the Councils Early Help Team who have excellent working relationships and regular contact with managers and settings.
- There are 67 primary schools with a capacity of 15,299 places
- 10 secondary schools with capacity of 11,920 places (9 of which are academies and one independent, 7 special/alternative provision and 1 FE college. Some of our primary schools offer nursery provision for children over the age of two during term time and within school hours.
- 7 independent Jewish Schools and colleges with around 1250 students, providing education for children aged 5-16, plus colleges for older children and young people. These include boarding establishments.

State schools are supported by a School Improvement Service led by the Director of Education Schools and Inclusion and the Strategic Director of Children, Adults and Family Services with excellent working relationships and regular contact with schools headteachers and managers.

In line with the principles for local investigation and risk assessment, Lead Officers from Public Health have been working closely with the Education Service and directly with schools to provide support on implementation of national regulations, Covid secure measures, isolation and testing. As the National Living with Covid Strategy has been implemented there is no longer any specific Covid guidance for Schools and early years settings and they now follow national government guidance for the public.

In terms of managing infectious diseases all settings have been sent the link to the Health Protection in Schools Guidance. Settings are also required to have a general risk assessment, and this will incorporate any measures for helping to manage Covid e.g. hand hygiene, ventilation. Public health advice can be obtained by these settings through an online reporting tool where required https://www.gateshead.gov.uk/covid19schoolschildcare. Due to the changes in the guidance from 1 April 2022 we envisage that these enquiries will be limited as these settings adapt to learning to live with Covid. However, the online reporting tool will remain available in case settings need support with an outbreak.

All settings are required to have an emergency plan in place detailing what they would do and how they would respond if they needed to take any temporary actions in the event of an emergency. The emergency plan should be generic enough to cover a range of potential incidents occurring during, and outside, normal working hours including weekends and holidays. This should include public health incidents (e.g. a significant infectious disease incident).Emergency planning and response for education, childcare and children's social care settings

Schools and childcare settings are no longer required to report cases of suspected or confirmed Covid (by PCR or LFD) to the NE Health Protection Team or to the Local Authority. They have been advised to continue to contact the NE Health Protection Team if they have the following in their settings:

- They suspect they may have an outbreak of illness (other than Covid)
- They suspect they may have an outbreak of Covid in a SEND school
- They have more cases of illness/absence than usual for their setting
- A hospital admission, serious illness or death that maybe be due to an infectious disease (in children, pupils or staff)
- A cluster of cases where there are concerns about the health needs of vulnerable children, staff or students within the affected group

We will continue to maintain our close working relationships with the schools and early years settings and offer support should it be needed, although this will be on an individual basis and as required.

Care Homes: National Guidance for care homes and other social care settings has been updated into three documents – see below:

- Infection prevention and control in adult social care settings (includes the Infection Prevention and Control: Resource for adult social care and a quick guide for care workers). https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-settings
- Infection prevention and control in adult social care: COVID-19 supplement (includes the COVID-19 supplement to the infection prevention and control resource and a summary of changes). https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-covid-19-supplement
- COVID-19 Testing in adult social care. https://www.gov.uk/government/publications/coronavirus-covid-19-testing-for-adult-social-care-settings

Within Gateshead, day-to-day support for care settings is provided by the commissioning team with infection, prevention and control support provided via Specialist Infection Prevention and Control Practitioner from Queen Elizabeth Hospital.

Care homes report positive covid cases to the North East Health Protection Team who then provide guidance, including on outbreak testing, and assessment of risk where there are 2 or more linked cases. HPT sends a notification of new outbreaks to the covid outbreak inbox which is monitored Mon-Fri by Gateshead Public Health Team. Any notification for a Gateshead care home is forwarded to the commissioning team or Gateshead Council H&S if the home is a Promoting Independence Centre (PIC)

The care homes also update the capacity tracker with positive covid cases which is viewed by the commissioning team. Information about outbreaks in Gateshead care settings is collated and shared in a weekly email via the commissioning team.

Independent Supported Living and Extra Care Settings: In addition to the Care Home settings there are a large and varied number of residential care settings in Gateshead. It is acknowledged that there are similar risks from Covid due to the individual vulnerabilities of residents in these settings and the complexity of the settings. The approaches developed for Care Homes are now mirrored in these settings and following national guidance, along with individual risk assessments given the differing nature of the settings.

The public health team will continue to work closely with care homes and extra care settings to provide advice and guidance when requested.

Healthcare Settings: Throughout the pandemic we have worked closely with Gateshead NHS Trust to prevent the spread of Covid in the community and in hospitals. They are a key part of the Gateshead Covid Outbreak Control Board and we had clear data sharing channels to monitor local prevenance, healthcare capacity and disease severity. The trust have clear infection control guidance outlined by the national and their internal infection control team which they follow, and we continue to work closely with the trust to monitor the local picture regarding admissions, severity of cases, local healthcare pressures and staffing pressures.

Higher risk settings, locations (inc events) and communities: The evidence about safety and transmission of the Covid virus in the workplace indicates that the risk of transmission is most strongly associated with close and prolonged contact in indoor environments. The highest risks of transmission are in crowded spaces over extended periods. The powers available to LAs to respond to Covid outbreaks

therefore are those available to respond to infectious disease outbreaks more generally. DHSC continues to review the legal framework and lessons learned from Covid.

It is no longer incumbent upon employers to prepare and implement a Covid risk assessment. Guidance is available on managing the risk of respiratory infections in the workplace including Covid. Should regulations be reintroduced that require specific actions of employers, enforcement staff in Environmental Health and Trading Standards would resume the role in providing advice, guidance and enforcement functions.

Other High-Risk locations and communities: There are many places, locations and communities in Gateshead that are at higher risk of outbreaks characterised due to factors, these might include:

- Confined living spaces and multi occupancy housing
- Underlying vulnerabilities of individuals which include age, medical conditions, ethnicity
- Low understanding of individuals of the risks of infection and the risks of the disease
- Inability of individuals to keep to infection prevention measures
- Poor infection control measures

Over the pandemic we have worked closely with our partners to engage employers, community leaders, interest groups and individuals to identify and understand how to support our Covid response in these settings. This is particularly important knowing what we do about Covid and inequalities, and the likelihood of enduring transmission and lower vaccination/self-isolation in these groups. The Covid Community Champions networks is a group of 300 community individuals/representatives who come together to share information and support knowledge transfer around Covid. The public health team will keep a close working relationship with these networks and draw upon these to raise awareness of the threat and to seek cooperation with control measures if needed in the future.

A focus will remain on protecting those settings known to be at highest risk through local Covid outbreak investigation and management activities, led by the Health Protection Team. In addition, the Government will continue to provide limited symptomatic testing for a small number of at-risk groups and free symptomatic testing will remain available to social care staff.

The council will continue to routinely provide public health messaging and communications setting out advice about sensible behaviours and actions to local residents in line with national guidance.

Vulnerable/At risk groups

Covid affected everyone but there were certain groups of people for whom the virus had more severe clinical effects or disproportionately affected given their social circumstances. The risk profile for Covid is constantly changing and depends on multiple factors including the variant and prevalence. As prevalence decreases and vaccination levels increase the risk of transmission reduces, we need to be conscious that with the easing of restrictions some people may still feel uneasy about resuming their daily activities. As a council we will continue to promote the non-pharmaceutical interventions such as social distancing where possible and taking steps to reduce risk such as well-ventilated rooms or face mask wearing where appropriate. From a clinical perspective those who are at higher risk of developing severe disease from Covid in line with national guidance will have access to symptomatic testing and Covid treatment if they test positive, this is led by the NHS.

During the pandemic community hubs were used as community anchors supporting those who needed help with isolation, food packages and advice. As we move to living with Covid the isolation period has reduced alongside the number of people isolating. Funding support such as the Test and Trace Support Payment has also been withdrawn nationally. As a council we continue to offer multiple support services from financial support and advice, to support with housing or care needs. The customer services team act as a central connector for the council and can direct and refer those in need to the relevant directorate. The Customer service team can be accessed via the phone, online or in person at the Civic. This is the model

used pre-pandemic. There are also multiple ongoing workstreams, including work led by Alison Dunn, around support with welfare and advice which are focused on those socially vulnerable or in need.

Governance

Two boards were established to have oversight of the Covid response in Gateshead:

- **The Gateshead COVID-19 Control Board** is an operational or tactical level board which takes management responsibility for the previous Outbreak Management Plan and overall management of the local response. The COVID-19 Control Board is accountable to the Gateshead Health and Wellbeing. This Board was stood down on the 03/05/20; in agreement from all attendees. The change in guidance, removal of many covid restrictions and declining prevalence and severity of cases within the local health system were all driving factors. It was agreed that should there be a resurgence, large outbreak or variant of concern, the group could be reconvened at short notice and react appropriately. The decision to reconvene the Board would be led by Alice Wiseman, Director of Public Health, Gateshead Council.
- **Covid Coordination Group** is an internal Gateshead Council group which met to discuss the operational aspects of Covid management for Gateshead Council. This was a weekly meeting but has been stood down to once monthly and is being reviewed in June 2022 to consider complete standing down. The meeting is led by Marc Hopkinson, Associate Director, Transformation, System Resilience and EPRR at Gateshead Council. As above, this meeting will be reconvened should there be a change in the Covid picture.

Risk

As we deescalate our response in line with national guidance, it is important we consider the risks and implications of these actions. On balance, it is important that we are able to move away from a reactive state and resume some normal local authority activities which may have been stopped or reduced over the pandemic. We also need to look at the long-term issues Covid has caused and exacerbated, such as a rise in alcohol consumption, increase in mental health stresses and widened inequalities. To support this, we need to ensure that staff are able to refocus their efforts into their normal portfolios of work so resource has been redirected from Covid response to Covid recovery work.

However, it is important to recognise that Covid is still prevalent and poses a serious risk to certain groups of our population. Therefore we will take a cautionary approach, following national guidance and closely monitoring the local picture to allow us to appropriate escalate and respond to emerging threats as required. Potential risks include:

- Increase in Covid Prevalence
- Increase in Covid Prevalence: New Strain
- Increase in Severity of Covid disease from a new strain
- Large Covid Outbreak in a vulnerable setting
- Risk to business continuity due to a Coivd outbreak or high prevalence: sickness and staffing from both a system and Gateshead Council perspective
- Risk to business continuity due to a Covid outbreak or high prevalence: Redeployment to support Covid response measures as part of an emergency response

It is impossible to predict what the coming months and year hold in regard to Covid, therefore we need to act cautiously and make informed choices based on the evidence we gather locally and nationally. The risks above are still prominent but after navigating through the first waves of Covid we are now in a stronger position to mobilise a response and escalate actions as needed. We will take our lead from national guidance and the UKHSA; and learn from our past work to ensure we react timely and appropriately.

Communication and Engagement

As the Local Authority, we have an important role in community engagement to reinforce national messaging, encourage compliance, and understand the barriers to adherence to different control measures. This includes using tailored local communications and messaging to bolster national communications and taking a leading role in joint communications at regional and sub-regional level. This has become increasingly important as restrictions are eased. Public perceptions of the threat of the virus are shifting, so we have ensured our communications are tailored appropriately to provide clear information.

Communications is a key element in outbreak management. Providing accurate and timely information to residents, businesses and settings and having the ability to respond to any localised outbreaks quickly and efficiently is essential. We have recruited a dedicated communications professional, who will work as part of the Public Health Team to ensure that positive behavioural change messages are used and that we increase the understanding of all stakeholders, including residents, of how they can play their part in preventing further outbreaks. Our communications are based on the Prevent – Respond – De-escalate model.

We will amplify and supplement the national campaigns with localised materials that make use of well-established channels and relationships. This will be communicated to a wide audience through social media, radio, TV and outdoor advertising and via the local press. We will continue to work with neighbouring local authorities (the LA7 group) and other LRF partners to ensure consistency of messaging across the region and address emerging issues. Language and tone will be persuasive, supportive, community focused and person centric. The EAST framework will be used to present all calls to action as Easy, Attractive, Social and Timely.

Resources - Test and Trace Service Grant/Contain Outbreak Management Fund

Local authorities in England were provided with a Government grant to cover costs incurred in relation to the mitigation and management of local outbreaks of Covid. The grant was used to support 5 key areas of focus and aligned to the operational needs of the plan:

• Surveillance: Rapid identification of clusters and outbreaks, decision making about local prevention actions and community buy in
    • Provision: Strengthen local capacity to provide robust Infection, Prevention and Control advice and support
        • Knowledge and skills: Equip local leaders to take local Covid prevention action
        • Communication and engagement
        • Support for those who need to isolate

Subsequently, the Contain Outbreak Management Fund (COMF) was set up to provide further financial support. This funding has been used to develop and refine our response to the pandemic. This included, but is not limited to:

• Building and maintaining testing capacity
• Providing local contact tracing response
• Supported isolation for identified cases and contacts
• Compliance measures
• Information and communication
• Support for Clinically Extremely Vulnerable
• Support for wider vulnerable groups
• Targeted interventions for populations of interest
• Support for educational outbreak response
• Behavioural insight and COVID-19 experience in communities

As the national measures for Covid have changed, the Grant and COMF funding streams have also ceased.

Next Steps

Moving forward we are still in the early stages of recovery from the pandemic, and as we move our response from a reactive stage to a recovery phase we need to ensure we continue to monitor closely the situation and be able to escalate/deescalate processes quickly. This document summarises the current provisions around outbreak management in line with national guidance and plans required for any future changes.

Aside from outbreak response we also need to carefully plan and look to how we support recovery from Covid which has seen an increase in inequalities and exacerbation of many ongoing issues, such as the mental health crisis. The cost of living is also rising and is another key factor we need to consider in our Covid recovery, especially to those who are socially vulnerable. Our public health team will work with the Council and system partners to address and support these issues with a shift of focus and resources into recovery rather than response.