

Open Report on behalf of Andy Gutherson, Executive Director - Place and Senior Responsible Officer for Covid-19 Recovery

Report to:	Overview and Scrutiny Management Board
Date:	27 August 2020
Subject:	Covid-19 Recovery Update

Summary:

This report provides an overview of the partnership approach and governance arrangements to manage Lincolnshire's recovery from the Covid-19 pandemic.

The significant disruption created by Covid-19 has forced authorities and communities to change their behaviours and routine working practices, which although unsettling, has demonstrated what is achievable through collaborative working and the Council and its strategic partners aim to ensure that such positive outcomes are maintained to help inform future service delivery to improve our services.

As well as serious implications for people's health and public services, Covid-19 is having a significant impact on the economy and the recovery approach will need to be considered against an uncertain economic backdrop. This issue is compounded by increases in demand in areas of service activity such as social care teams, wellbeing services, infection control etc.

Actions Required:

The Overview and Scrutiny Management Board (OSMB) is invited to:

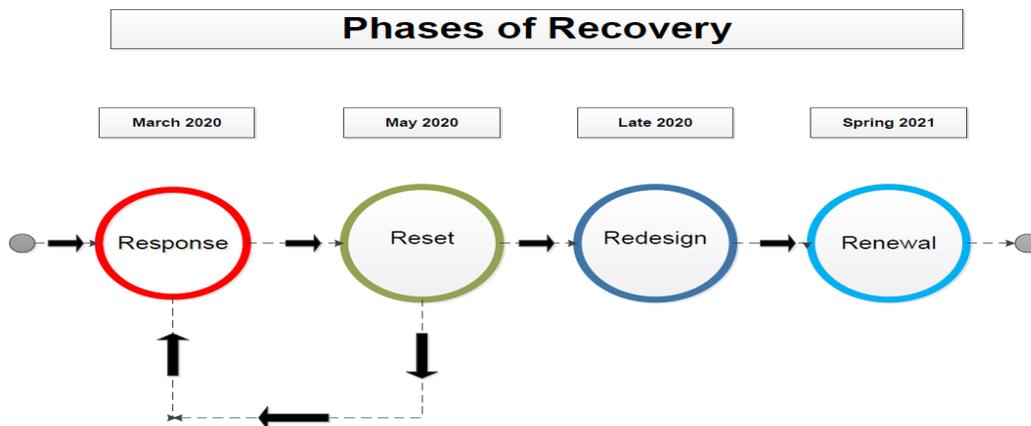
- 1) Consider the report and provide feedback on the points raised.
- 2) Agree when a subsequent report should be scheduled for a future meeting to allow the Board to monitor the progress of the Council's recovery.

1. Background

Introduction

1. At the Board meeting on 02 July, consideration was given to a report which provided an overview of the partnership approach and governance arrangements to manage Lincolnshire's recovery from the Covid-19 pandemic.

2. Members were advised that as well as serious implications for people's health and public services, Covid-19 had impacted on the economy and the recovery approach would need to be considered against an uncertain economic backdrop, which was compounded by an increase in demand in areas of service activity such as social care teams, wellbeing services and infection control.
3. OSMB requested that a further report be prepared for the August meeting and this paper sets out the progress and activity of the Recovery Partnership (RP) since then, highlighting the challenges we face and the threat, risk and harm we must mitigate.
4. Recovery under the Civil Contingencies Act 2004 is defined as:
'the process of rebuilding, restoring and rehabilitating the community following an emergency'.
5. As discussed previously, the three phases of recovery were set out for the Board. To that end, we are still in Phase 1 (Reset) of recovery, which is the stabilisation element of this emergency. The RP is assisting in the easing of lockdown, supporting the restart of the economy and ensuring the continued wellbeing of our community.



6. Over the last eight weeks, Lincolnshire's Local Resilience Forum (LRF) has transitioned from response to recovery and remains one of the first to achieve this transfer of governance from the LRF to the Lead Authority (Lincolnshire County Council). The LRF continues to be held in high regard as an effective and efficient partnership.
7. As expected, the response groups and associated governance have reduced although a small number of cells continue to be active in supporting the partnership (Appendix A).
8. Elements of service delivery that stopped / reduced during the early stages of the emergency have begun to be reinstated in line with the recovery objectives and a comprehensive recovery and renewal plan has been approved by the Recovery Coordination Group (RCG).

9. As before, the key to reset, redesign and renewal continues to be a concerted effort from all partners and the public to maintain the 'R' value below 1. The public health measures introduced to mitigate the transmission of Covid-19 including social distancing, Test & Trace and supply of Personal Protective Equipment (PPE) continue to minimise the spread of infection and risk to life within Lincolnshire.
10. As of the 12 August the figures for Lincolnshire are 2,582 Confirmed Cases, 26 cases in the last 7 days. To date there have been 148 Covid-19 deaths in a hospital setting and 323 total Covid-19 deaths with 2 deaths occurring in the last 7 days. 71,234 Pillar 2 tests (predominantly from drive through, mobile and home testing, including care home residents and staff) have been carried out to date in Lincolnshire, 7,429 in the last 7 days, up to and including 9 August.

Government position

11. To assist with local decision making the Government are providing a national alert level. The Covid-19 Alert Level will be determined primarily by R rate and the number of coronavirus cases. We are currently at level 3 which means whilst the virus remains in general circulation, with localised outbreaks of Covid-19 still "likely" to occur, the downgrading means the transmission of coronavirus is no longer considered to be "high or rising exponentially".



12. Since 4 July, it means we have seen the gradual easing of restrictions have taken place, and Lincolnshire's pubs, restaurants and holiday sites have been able to slowly reopen as planned.

Governance Arrangements

13. The Recovery Coordination Group (RCG), chaired by the Executive Director of Place, Andy Gutherson, is working in partnership to establish a common understanding of the impact of Covid-19.
14. The Partnership continues to identify the threat, risk and harm presented by the infection (highlighted later in this report). With this improved understanding of the risk, a number of recovery action plans have been approved by the RCG to inform how we rebuild locally. These plans will be monitored and owned by the RCG, working closely with Elected Members, District Councils and voluntary/community groups to ensure the needs of communities are captured.
15. The RP is working hard in identifying problems and vulnerabilities in our community, which may require priority attention and feeding them back to the relevant recovery cells, in addition to disseminating credible information

and advice back to the community, supporting community cohesion and providing public reassurance.

16. As highlighted in paragraph 6, Lincolnshire's LRF formally transitioned from the Strategic Coordination Group (SCG) to the Recovery Coordination Group (RCG). The RCG currently meets every Thursday for 1.5 hours which is replicated at the tactical level with the Recovery Tactical Group (RTG), who meets every Wednesday. These are the formal meetings of the LRF at present.
17. The continued priority for the RP is to provide assurance over how front line services are provided in a way that continues to save and protect life. The strategy will ensure the strategic objectives of the partnership are met and that the threats and risks are effectively mitigated.

Strategic Objectives

18. As part of the on-going due diligence in delivering a successful recovery for Lincolnshire, the RCG frequently reviews its own governance. The Board was informed in July of the strategic objectives that had been implemented, governance arrangements and local outbreak management arrangements, which were all set out in the previous report.
19. As the Reset phase of recovery has progressed, the RP has reviewed and rationalised the strategic objectives. These objectives offer further clarity of leadership and ensure a coordinated and cohesive approach from across the public, business and third sector across the county of Lincolnshire. To ensure that:
 1. To continue to save and protect life, with a clear priority on protecting those identified as vulnerable.
 2. Continue to maximise the safety and wellbeing of our staff, partners and volunteers through regularly reviewing Threat, Risk and Harm.
 3. Ensure arrangements for Lincolnshire reflect local needs and are cognisant of local issues but are aligned to national, and where appropriate international, approaches and timescales.
 4. The environmental impact is assessed, mitigated and managed.
 5. A pro-active and integrated framework of support to businesses is established to ensure Lincolnshire retains economic stability.
 6. Information and media management of the recovery process is co-ordinated.
 7. Procedures are in place to hold debriefs and to capture learning.
 8. Lessons identified and captured are incorporated in any future plans.

Easing of Covid-9 restrictions within Lincolnshire

20. The gradual lifting of lockdown does not mean a return to normal life. We will be living with social distancing measures for an indeterminate period of time and different approaches to delivering services will need to be invested in.

21. The UK Government for its part recognises that a “suppress and lift” strategy can only successfully be delivered through local authorities. Different experiences of the pandemic, even in one region, where there are urban and rural communities suggests the divergence of effective controls are better delivered at the local level.
22. The rate of success in halting this virus is fragile, meaning that close monitoring of infection rates, outbreaks and clusters should become a crucial part of the recovery strategy and rushing ahead to the goal of allowing more public life should be done in small reflective steps.
23. To aid this fragile recovery, the RCG's role is to provide a structure for the partnership to share knowledge and information whilst remaining aligned on shared areas of risk. A key principle for the RCG is to reduce the individual burden on organisations and not create unnecessary work.

Foresight Multi Agency Information Cell (MAIC)

24. Supporting the RCG in sharing knowledge and information is the Foresight Multi Agency Information Cell (MAIC). The purpose of the MAIC is to source, assess, analyse, display and disseminate situational information on the progress of the Covid-19 incident, through the Power Bi Dashboard and the weekly Foresight and Intelligence Report.
25. The Lincolnshire LRF is currently part of the National Foresight Group MAIC Pilot Scheme along with Cumbria LRF. The aim of this pilot scheme is to test the potential for a National to Local Multi Agency Information Cell (MAIC), to scope the possibility of establishing an enduring framework for information sharing at a national level between other MAICs, as well as The Ministry of Housing, Communities and Local Government (MHCLG) and Civil Contingencies Secretariat (CCS).
26. The MAIC work to ensure that all relevant data regarding short, medium and long term impacts of Covid-19 on the key recovery sector of socio-economic issues and foresight focused factors (affected people, social, place, infrastructure, businesses, economy, transport, essential services etc.) is collected to an appropriate level of detail, collated, sanitised and reported as required.
27. This information and intelligence is shared in the form of a weekly report to inform the Tactical/Strategic Coordination Group, Recovery Coordination Group and LRF Partners allowing appropriate and key decision making based on impacts, future considerations, duration and costs etc.
28. In order to achieve this, they liaise with local and national government departments, authorities and other LRF partners to gather intelligence and information and then analyse and disseminate.
29. As such, through the work the MAIC complete, we are starting to see evidence of a second wave in Europe with numerous reports of significant

outbreaks of Covid-19 transmission and local geographical lockdowns. If the events we are seeing follow a similar pathway as the first wave, then the UK could be 3-4 weeks away from seeing our own start of a second wave.

The MAIC has produced two reports in August (Appendix B) and they highlight the following key information for partners:

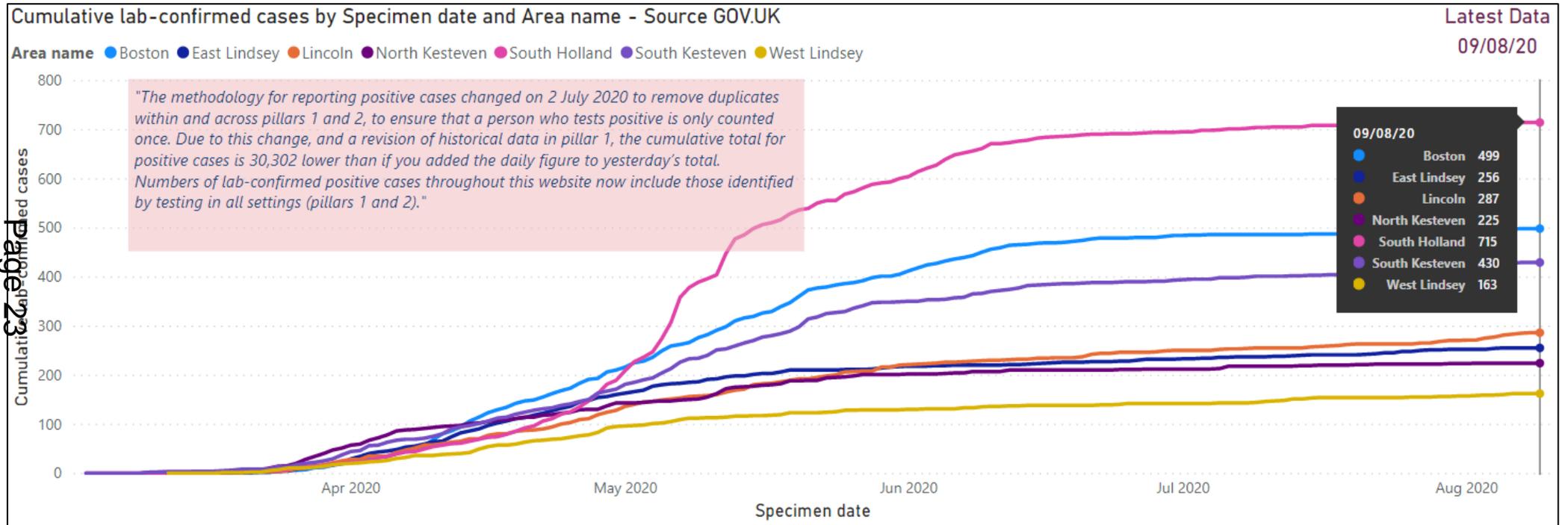
People & Social

30. The number of positive Covid-19 cases in Lincolnshire and Districts to date. Specific focus has been on the end of shielding with reports from the Official National Statistics in June showing that nationally only 58% of clinically vulnerable individuals reported completely following shielding guidance.
 1. Figures on total number of cases identified through Pillar 1 and Pillar 2 are published daily for all positive cases identified by 5pm on the previous day. As of Monday 10 August at 4.01pm there are **2,575 Covid-19 cases in Lincolnshire (residents) to date (+43 since 02.07.20 report)**.
Source: <https://coronavirus.data.gov.uk/#category=utlas&map=rate>
 2. The below graph (Figure 1) shows the cumulative number of confirmed cases by district in Lincolnshire. Currently South Holland has the highest number of confirmed Covid-19 cases in Lincolnshire with 715 and Boston being the second highest with 499.
Source: Lincolnshire County Council Public Health

R Number & Growth Rates

31. **R Number & Growth Rates** – As of Friday 07 August, the national R Number remains at 0.8 – 1.0. Currently the R number in the midlands stands at 0.8 – 1.0, which largely mirrors other regions in the UK which vary between 0.7 and 0.8 to 1.1. The national growth rate has been reported to have slightly increased to -3 to 0. This suggests that although infection rates are still declining, it is at a slightly slower pace over the last seven days.
32. Regional growth rate in the midlands area is increasing ranging from -3% to 0%. Growth rates in multiple other regions (London, North West and South West) across England are back into positive figures, suggesting that the risk of infection is increasing. With significant increases in infection rate across Europe, it is increasingly likely that this trend will continue as UK tourists travel back to the UK from European holiday destinations.
Source: <https://www.gov.uk/guidance/the-r-number-in-the-uk>

Figure 1



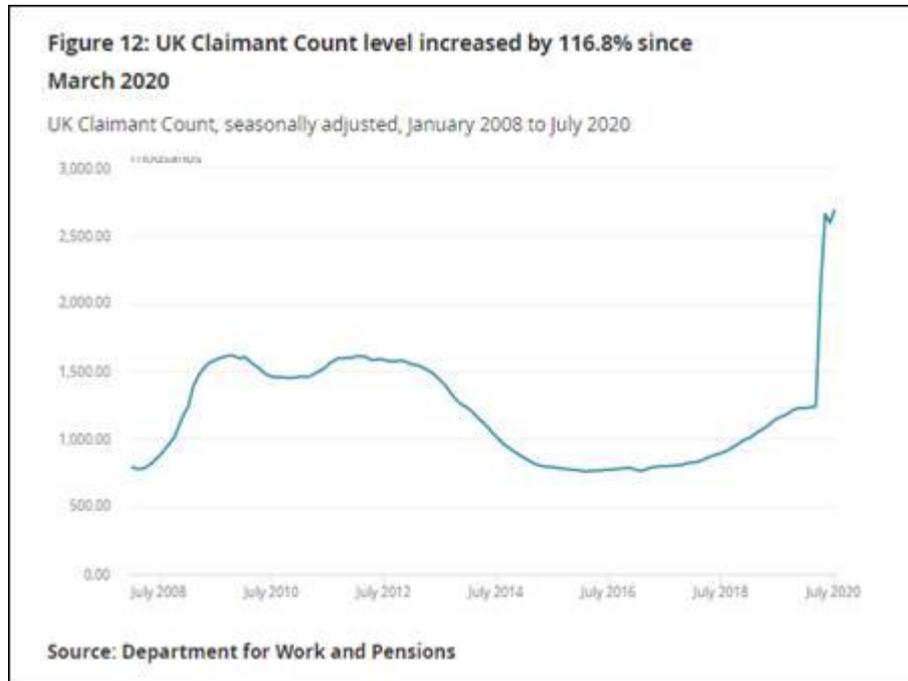
Claimants vs Vacancy's

33. The Institute for Employment Studies has produced approximate statistics noting that there are now 8 people claiming benefits for each 1 job vacancy. This is up by 1.5 people per job from when the crisis began in March 2020. These statistics points to the growing numbers of people who are now situationally displaced and unemployed as a result of the coronavirus.
34. For Lincolnshire, the Greater Lincolnshire Local Enterprise Partnership (GLLEP) has produced some experimental statistics noting that Lincolnshire shows similar ratios 8:1 whereas in North Lincolnshire, it could be as high as 14:1. This unemployment ratio is likely to worsen as the furlough scheme tapers off and some of the companies which are being kept afloat from government stimulus ends. It won't be until Autumn 2020 that the unemployment / employment picture becomes clear. The main factor would be the speed of recovery and whether supply and demand curves can continue to be resilient in the medium-long term.

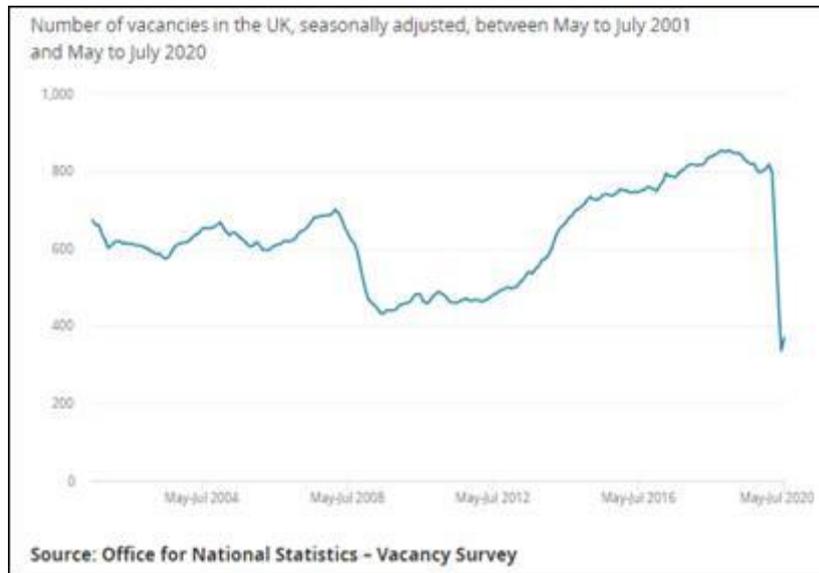
K Shaped Recovery

35. Much has been written regarding the recovery trajectory of the UK. In particular, whether the nation and international partners can enact a 'V' shaped bounce back from Covid-19 which reduced economic activity severely from March 2020 onwards.
36. The latent demand for goods and services for domestic / overseas partners has reduced. Some countries are in the midst of a second wave whereas other areas (South America) are seeing a high spike rendering much of its economic activity to retract. As such, the likelihood of a 'V' shaped recovery is slim.
37. With this in mind, the economists and press are examining whether the UK will move towards a 'K' shaped recovery, whereby the employed continue to recover relatively unaffected (on an upward trend) and the unemployed struggle with financial hardship (diverging and moving downwards), thus creating a two tier system of inequality and contrast within society. It will be telling which way the economy will turn; however, a 'K' shaped recovery will mean that local public services and the wider public support network will be greatly affected as we move towards the Autumn of 2020. The likelihood of the UK understanding this to occur from August onwards with a peak of unemployment in October 2020 as government incentive schemes stop and businesses face the reality of trading in new / uncertain circumstances.
38. There is no defined K-shaped recovery graph that shows the difference between middle class vs the working class and the real time change against the UK economy. The best we can categorise is the push and pull factors which have been exacerbated as a result of Covid-19.
39. Firstly, the main thing which would cause households to move from different social classes would be due to work and relative income. Greater unemployment and a lack of suitable opportunities locally would likely

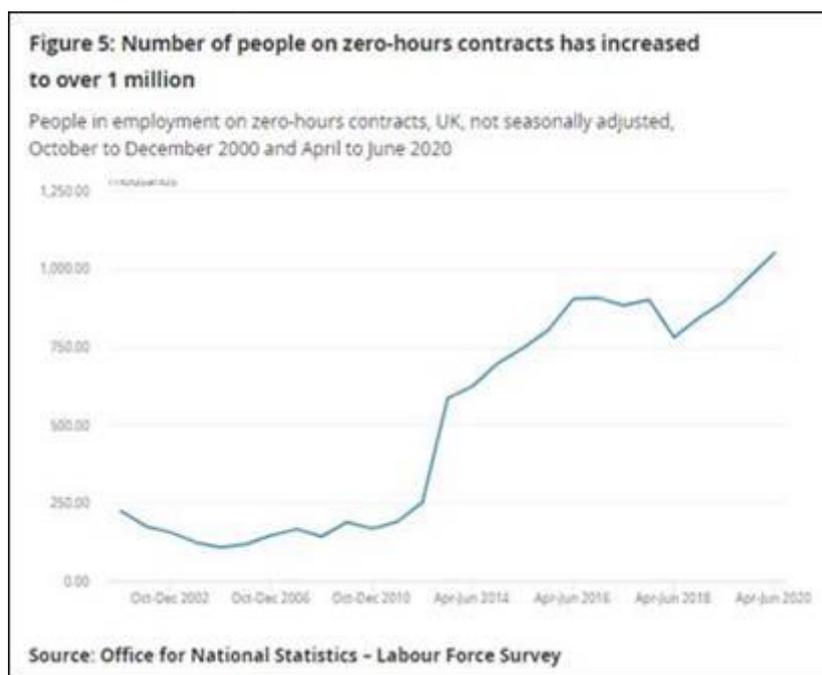
exacerbate the individuals who sit on the K curve. The loss in income from moving between employed to Universal Credit is a 47% fall in disposable income (Joseph Rowntree Foundation). This creates financial instability alongside a lack of employment security. So far, since the start of the pandemic there has been a 1.4 million increase in people claiming Universal Credit (as exhibited below, this is a 116.8% increase in the last 6 months).



40. One of the factors which turning to Universal Credit affects is the potential for the wider household and deprivation measures to be negatively influenced. As partners, the LRF should be alert to the worsening of deprivation by working closely with partner agencies (Citizens Advice Bureau, Homelessness teams and monitoring the demand on local support services). In certain conditions, a collective response working with central government would be required to ensure funding and support is directed appropriately.
41. Tracking vacancies during this period is important to understand how likely individuals now on Universal Credit can move back into employment. In the last few months, vacancies have dropped massively as seen by the ONS graph which shows a stark reduction from a peak of over 818,000 vacancies (December 2019 to Feb 2020) to now at 370,000 (post- Covid-19). This is a 55% drop in available vacant positions in Quarter 1 and Quarter 2 of 2020. This measure is important to provide jobseekers choice and opportunity to move away from social welfare support into more stable employment. The fall in available positions will likely cause greater dependency on the social welfare system and cascade into further requirements on public bodies to provide wrap around support for the increasing numbers of claimants. A quick V shaped recovery would see vacancies increasing at a higher rate providing more opportunities as part of a re-bounding economy. The end of 2020 will be telling to note whether this is achievable.

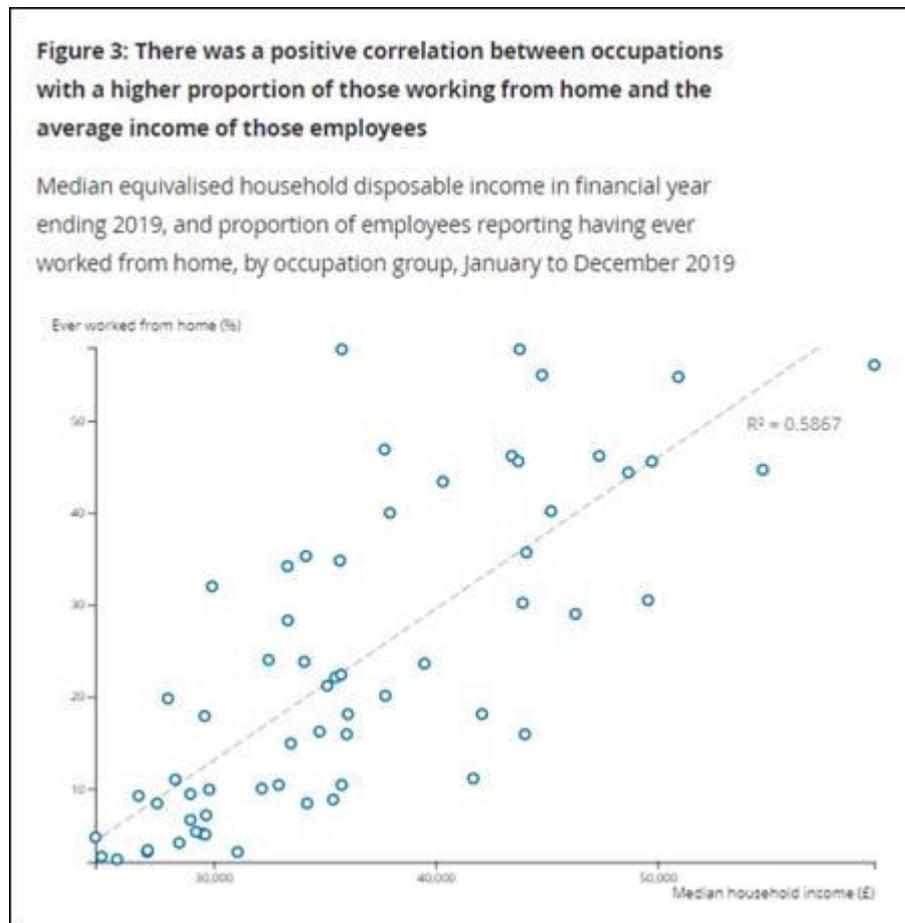


42. It is also worth noting that employment security and equality is important to examine how recovery is occurring. The number of zero-hours contracts is currently on the rise (graph below) which gives current workers less employment stability in the long term. Using these contracts provide flexibility for businesses during the Covid-19 pandemic but does not provide the individual or household unit with gainful long-term employment benefits.

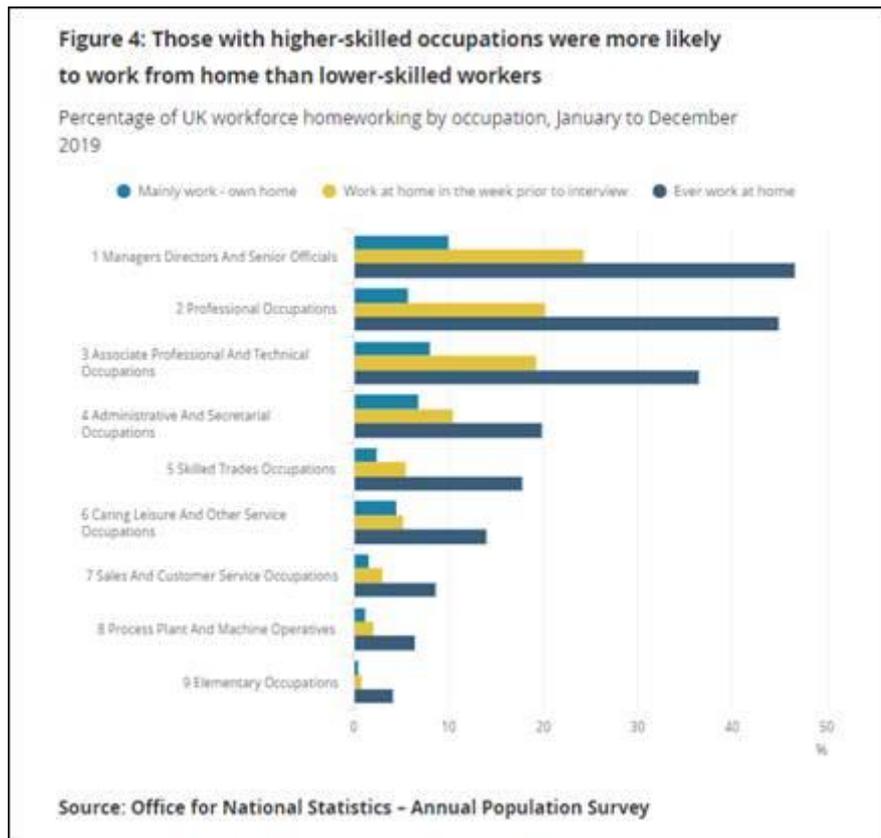


43. Examining this against the K-curve scenario, the type of work an individual can secure, creates a two tier system of inequality. Those who can retain stable employment can benefit from sick pay and more generous support, whereas certain conditions must apply before an individual can claim statutory sick pay under a Zero Hours contract (minimum three months service). Statutory sick pay is relatively low at £96 per week, which is around a fifth of average weekly earnings. People with Covid-19 symptoms and no or little sick pay will face a stark choice between staying at home for two weeks resulting in a large drop in income or be forced via personal circumstances to continue working. Those earning less are also

disadvantaged with the inability to work from home. The graph below from the ONS shows a correlation between median household income vs working from home.



44. Whilst some individuals have been lucky enough to spend this period working at home, others have had no choice but to continue working as normal due to personal circumstances or because they cannot afford not to. Those who work in elementary occupations are therefore more likely to be exposed to the virus due to the inability to work from home. The survey below undertaken in 2019 shows the difference between higher-skilled occupations and those who are lower-skilled which provides a stark difference in their ability to continue working and securing paid employment under Covid-19 conditions.



45. There are already statistics which note that a K shaped economic divide is occurring. Current statistics showing the structural rise in Universal Credit claimants vs available vacancies do not create a favourable environment for stable recovery. Added to this is the ability for the individuals in well paid occupations to continue working as normal with definite protections during periods of absence. Lower paid occupations and elementary roles will have difficult choices to make during times of sickness. Finally, occupation is likely to impact exposure to the virus with lower paid roles being forward facing. Their ability to work from home are at the lowest rates when compared against all other skilled occupations. The pandemic has exacerbated the conditions and structures of work. The Trade Union Congress is calling for a change to avoid an unemployment crisis by examining the ability to deliver higher quality public services and to create a less punitive system of unemployment support.

Local Monitoring

46. According to Google Mobility Data published on 31 July 2020 more people in Lincolnshire are visiting parks, retail, recreational sites and supermarkets than in mid-April. However it is noted from figures 1 and 2 that although people are visiting their workplaces more now than in lockdown, visits are still 40% down from the baseline. This shows the majority of the workforce and organisations in Lincolnshire are still working from home.

Lincolnshire

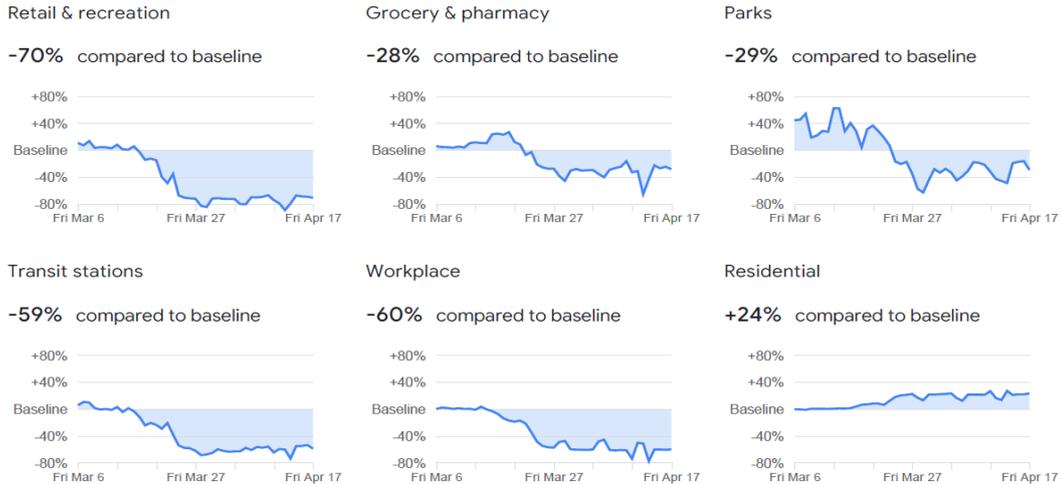


Figure 1: Google Covid-19 Community Mobility Report 17/04/2020

Lincolnshire

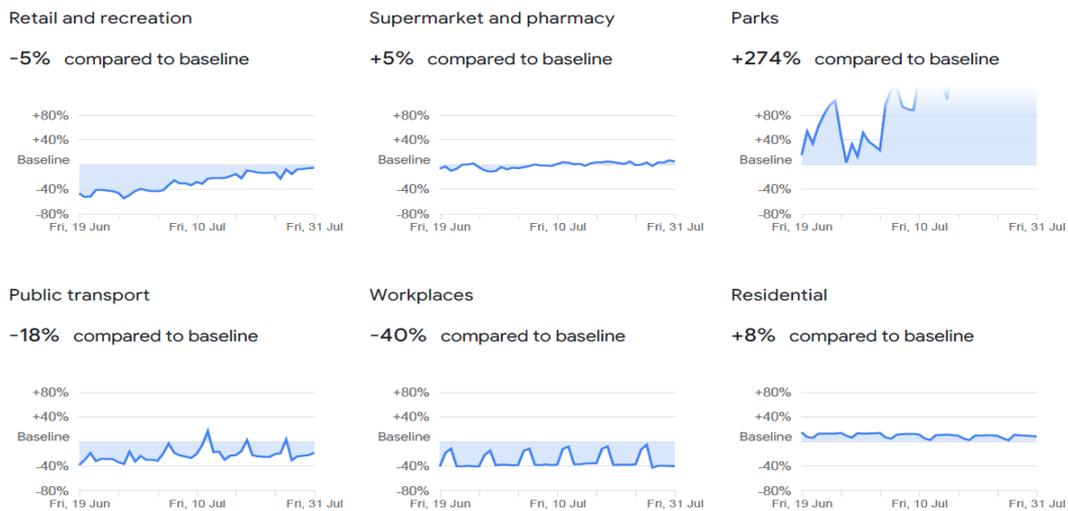


Figure 2: Google Covid-19 Community Mobility Report 31/07/2020

47. At the recovery stage of the pandemic, Google Mobility data is a key tool, similar to a snapshot in time, tracking how response / recovery is progressing within Lincolnshire. Should a second spike occur, we can track relative numbers returning to spaces and places against the current snapshot gathered as part of the Foresight Cell. The same data can also be utilised to track pinch points in recovery for example if large increases are seen in retail and indoor recreational sites, this translates into a cause for concern for the LRF and measures will be required to manage the impacts of overcrowding in confined indoor spaces. The tool is twofold: protect communities during recovery and be utilised to track future easing should lockdown conditions be re-introduced.

Threat Risk and Harm

48. The RCG has a number of key risks which the recovery Strategy needs to relate its milestones to, and in mitigating these risks the RCG will then be able to provide the assurance to all partners. This active approach to risk management through assessing threat, risk and harm ensures that the RCG continues to support and maintain the direction of travel for recovery and allow those risks to flex e.g. the RCG has recently debated an emerging risk in regards the role of the hospitality sector around test and trace. The RCG is aware of an emerging threat around an apparent lax approach to recording names etc. of customers (to support Test & Trace).
49. The RP is implementing a strategy to ensure we are prepared to deal with a second wave and / or local lockdowns. Clearly the emerging data from Europe is a concern; the re-introduction of 14 day quarantine for travellers returning from popular European destinations; increase in self isolation timescales announced (Aug 2020); a lack of national guidance on the release of lockdown for shielded; enhanced northern area restrictions; and localised issues in a range of places, not just Leicester, for example in week commencing 27 July 2020 a caravan park (Shropshire) and food premises (Hereford and Worcester) have been affected by local outbreaks resulting in significant activity by their local LRFs and Local Authority.
50. These incidents make the RP alert to the potential of an outbreak happening in Lincolnshire, especially as both scenarios are within our high risk cohorts; and the tone of Government announcements still indicate that across Europe we are still in the grip of a pandemic, the cause of which is still not fully understood.
51. As well as planning for a local outbreak, we are alive to the consequences of a concurrent incident in Lincolnshire. The LRF is working through how it can maintain a coordination role if concurrent events occur alongside Covid-19, for example Severe Weather, Terrorism, Death of a Monarch, Brexit and seasonal health impacts (winter pressures).
52. In addition, there continues to be high risk areas that the RCG focus on, which could have an impact on Lincolnshire. These are:
 - Impact of easing the Covid-19 restrictions
 - Maintaining Social Distancing in Public Spaces
 - Increase in homelessness in Lincolnshire
 - Economic Shock from Covid-19
53. The threat, risk and harm highlighted above are not the only considerations and must be assessed against the RCG risk register. However they are the most pertinent issues to consider when developing a recovery strategy based on an assumption that there continues to be a risk of a second wave and no nationwide vaccine is available.

Mental Health Offer

54. The Lincolnshire Mental Health and Wellbeing Draft Universal Offer is an all age, whole population approach to personalised care from partners in the Lincolnshire Partnership NHS Foundation Trust (LPFT).
55. This draft offer is about achieving better mental health for all. The priority within Lincolnshire is the promotion of mental wellbeing and prevention of mental ill health.
56. An overview is provided for the Board (Appendix C) for information only at this point.

Schools

57. It is the Government's plan that all pupils, in all year groups, will return to school full-time from the beginning of the autumn term. The Government has stated that returning to school is vital for children's education and wellbeing and that it is important for the economy for parents and carers to be able to return to work and school closures have restricted this.
58. Schools have been told they should not put in place rotas. They should carry out risk assessments and consider how to reduce contacts and maximise distancing between those in school wherever possible. This may include grouping children together in 'bubbles', avoiding contact between groups, arranging classrooms with forward facing desks and staff maintaining distance from pupils and other staff as much as possible. In secondary schools, the groups are likely to need to be the size of a year group to enable schools to deliver the full range of curriculum subjects and students to receive specialist teaching. At primary school, schools may be able to implement smaller groups the size of a full class.

Home to School Transport

59. There is an agreed plan in place for providing home to school transport from September. This will allow the Council to still fulfil its statutory obligations as well as comply with government guidance.
60. Generally transport will be available as normal for entitled pupils although we are strongly encouraging children not to use dedicated school transport or public transport unless necessary. Where possible, all children should walk or cycle to school or college. Where this is not possible, driving a child to school will be an option. Parents are being encouraged to keep school areas as safe as possible by parking away from schools and walking the final part of the journey.
61. Increased infection prevention control measures are in place although these rely on the compliance of children and young people to have good hand hygiene, socially distance where possible, wear face coverings as advised etc.

62. There are plans in place for dealing swiftly with any suspected or positive cases although it important to note that only children that are well should be travelling to school.
63. Lincolnshire does not have a large supply of spare vehicles and so the flexibility is not available to move children from public transport onto other dedicated school transport, stagger timetables or transport pupils only in their school's bubbles.

Scenario Planning

64. In the last eight weeks, the RP has delivered two exercises which explored planning assumptions around preparations for an outbreak in a large geographical location and response to an outbreak at a caravan site. These exercises were attended by over 30 different partner organisations and we received very positive feedback. In addition, these exercises were completed before the scenarios became reality elsewhere in the UK (Leicester, Greater Manchester, Aberdeen and a Shropshire caravan site). These exercises and subsequent reports have been shared with MHCLG at their request, as exemplars of best practice.

Strategic and Tactical Training for LCC Officers

65. In addition the LRF focussed its activity since the Board meeting on 02 July, and the RP and Emergency Planning (EP) teams have supported Lincolnshire County Council (LCC) in other recovery activity.
66. During August, LCC has implemented a new command rota in order to discharge its duties under the Civil Contingencies Act 2004 (CCA 2004) as a Category 1 responder. As part of the changes, all Strategic and Tactical commanders who were new to the rota or required an update, took part in a virtual training session held by the LCC Emergency Planning (EP) team. In total there were 18 Strategic and 40 Tactical who did the training.
67. The team, based at the newly refurbished County Emergency Centre (CEC), are running catch up sessions throughout September for three more strategic and 10 tactical commanders.
68. New and experienced commanders on the revised operational rotas will continue to get the full support of the EP advisors, who are also available on the duty rota.

National Debrief

69. Within Lincolnshire we also host the National Foresight Group (chaired by Shaun West, Lincolnshire Police) at the CEC which has enabled the LRF to be at the forefront of national planning assumptions and to influence this group's activities on more than one occasion.
70. One example of that is the involvement of two of our senior Emergency Planners, Ian Reed & Sue Whitton. They have been Subject Matter Experts

(SME) and co-authors of the national Covid-19 Pandemic Second Interim Operational Review Report, produced by the National Foresight Group and Nottingham Trent University.

71. This report is being used to inform central government and MHCLG and has been shared with all other LRF's. Ian and Sue have also been asked to perform the same roles as part of the third review taking place in September.

Wellbeing Services

72. A Step Down and Step Up model has been drafted for the Wellbeing Service (WBS) which will allow them to respond to local outbreaks, local lockdowns, or full countywide lockdowns. This process has been agreed by the Adult Care and Community Wellbeing (ACCW) Departmental Leadership Team (DLT) and will consist of:
- WBS can manage the triage of support needs of the clinically extremely vulnerable that access support via the Customer Service Centre (CSC) Covid-19 helpline.
 - Proactive communications are being planned to ensure this cohort are clear on what support is available.
 - WBS can deploy emergency food support as a last resort. Food supply has been sourced external to the WBS, with storage being worked through.
 - British Red Cross can deploy food packages and welfare checks, with support from the Community and Volunteer Cell (CVC) if stepped back up again during a countywide lockdown.
73. There is a paper due to go to the LCC Corporate Leadership Team week commencing 17 August to finalise the arrangements for allocating the DEFRA grant (circa £820k) which is aimed at supporting this cohort, which will have clear links to the WBS response.

Local Outbreak Management Arrangements

74. Lincolnshire County Council (LCC), as the lead public health authority for Lincolnshire, is developing systems to ensure that the responses to the current and next phases of the Covid-19 pandemic are well managed and have appropriate political leadership and oversight.
75. A key step in preparing for this is the agreement of a local Covid-19 outbreak management plan amongst key partners by the end of June 2020. The aims of the plan are to minimise the spread of the virus in the community and provide reassurance to the public and stakeholders.
76. The Director of Public Health (DPH) retains primary responsibility for the health of their communities. This includes being assured that the arrangements to protect the health of the communities, which they serve, are robust and are implemented.

77. During the current pandemic, Lincolnshire has been an area of relatively low transmission of the disease. Lincolnshire has a robust, well established health protection system, which has forged links with all seven district Environmental Health Departments. A range of proactive and reactive public health measures have been undertaken to save lives and reduce the number of cases. Lincolnshire's Local Resilience Forum has responded quickly to co-ordinate the functions of all the partner organisations. All these measures have contributed to keeping the level of transmission of the virus low in our county.
78. The latest national guidance stresses the key role of local political oversight and leadership to Covid-19 outbreak management. A Local Outbreak Engagement Board (LOEB) has been set up, which has political representatives from LCC and the district councils, non-executive representatives from the Clinical Commissioning Group (CCG) and NHS providers, Healthwatch representative and the Police and Crime Commissioner.
79. A Covid-19 Health Protection Board (HPB) has also been set up. This Board has senior officer representatives from all the relevant public sector organisations. The HPB provides advice to the LOEB.
80. From a Public Health perspective Lincolnshire is at the bottom of the epidemic curve, however we continue to be mindful of local outbreaks or the risk of a second wave. We are currently seeing an average of three positive cases a day (over a rolling seven day average), and through the combined effort of our communities it appears Lincolnshire's efforts to reduce transmission are proving successful.

Local Outbreak Management Plan

81. The Outbreak Management Plan is being reviewed and updated to incorporate learning from Leicester, Hereford and Blackburn local lockdowns, the LRF Skegness Outbreak Exercise and recent Government announcements. The updated plan will be presented to the LOEB at its next meeting.
82. As part of Local Outbreak Management Planning, the Public Health Team have identified all the high risk settings in Lincolnshire.
83. These include 289 care homes, a large number of schools and early year settings, two universities, two prisons and one detention centre, a large number of housing with multiple occupancies, homeless shelters, food processing plants and other workplaces.
84. The most effective way to control local outbreaks is to prevent them from happening in the first place. Hence, the first action of the Local Outbreak Control Plan was to identify all high risk settings and proactively provide those settings with targeted advice to enable them to take steps to prevent infection and therefore cases from arising.

85. Alongside this we also provide advice on the steps to take if a positive case is identified including how to deal with the premises and the individuals and equipment within it.
86. This advice has been captured in a series of action cards, one for each of the high risk settings within Lincolnshire. These action cards help in guiding the responses of individuals within the setting itself and the various professionals who may be called in to co-ordinate or take part in the outbreak response itself. They are regularly updated.

Outbreaks in care homes, schools and early year settings

87. Lincolnshire's approach to outbreak management across these settings has so far been an enhanced version of the business as usual approach, with adaptation to national arrangements, such as the various pillars of the testing strategy. They are managed through a whole system approach in collaboration with Public Health England East Midlands (PHEEM). This approach can be summarised as follows:
 - Notification of outbreaks in care settings and schools to LCC's Health Protection Team (HPT) or PHEEM out-of-hours;
 - NHS Trust outbreaks are being managed by a combination of their infection prevention control teams and occupational health services, requiring little input from other teams;
 - Testing as part of outbreak management has been coordinated by CCG clinical incident command and delivered with a mixed team of LCC and CCG staff for initial testing of suspected cases;
 - Further testing has been delivered through the national Test and Trace Programme.

Further details of outbreak management in these settings can be found in the [Local Outbreak Management Plan](#) within section 4 and the setting specific action cards in the appendix (Page 60 – 63 Early Years and Schools).

Outbreak Guidance

88. Over the past few weeks the government has issued a number of new guidance and regulation documents aimed at containing and controlling any local virus outbreaks. The announcements include giving upper tier local authorities new powers to close venues, premises and public spaces or to cancel events and details on the government's next chapter of the Recovery Strategy.
89. A suite of briefings (Appendix D) provides:
 - an overview of the local outbreak management governance and decision making process.
 - an overview of the new powers being made available to upper tier local authorities through the Health Protection (Coronavirus, Restrictions) (England) (No 3) Regulations 2020.

- a summary of the Contain Framework and Recovery Strategy next steps.

Test & Trace

90. The national NHS Test and Trace Service launched on May 2020. The primary objectives are to control the Covid-19 rate of reproduction (R rate), reduce the spread of infection and save lives whilst enabling an opening up of the economy and a return to some form of normality. This programme is helping in early identification of people infected with Covid-19 and follow-up their contacts in a timely manner.
91. For the seven days between 03 and 10 August there were 7,414 tests carried out at the Showground and using home testing kits, with only 34 positive tests. Testing levels have increased to almost double that when compared to tests completed in July, which is welcomed. As a ratio of positive tests to tests completed, Lincolnshire is operating at 0.5%, the lowest within the East Midlands.
92. Since the Board meeting on 02 July, Mobile Testing Units management has changed from military ownership to private contract as of tomorrow. 15 testing sites have been identified for use within Lincolnshire.

Self-Isolation

93. Changes were announced by the Government on 31 July 2020 and affected the timescale of the self-isolation period, which has changed from 7-10 days. The national history of the disease was 5-7 days between catching this disease and symptoms becoming evident and then a period of 5-7 days of being symptomatic and infectious. As we have understood the virus more, we have realised that it is more likely to be 48 hours to three days before the onset of symptoms, during which time people are going to be infectious. The highest infectivity levels are before the onset of symptoms and then the first few days of being symptomatic.
94. Evidence is now emerging that although it is a small risk the onward transmission is still possible on days 7, 8 and 9 of symptoms. This new literature is why the self-isolation period has been extended in line with WHO guidelines. This is not a negative change of guidance; the guidelines have been amended as our understanding of this virus develops. The 10 day self-isolation period also reflects the onwards transmission around the world as we release our non-pharmaceutical protection measures such as lockdown and distancing.

2. Conclusion

The Council and its strategic partners have developed the appropriate governance arrangements to lead Lincolnshire's recovery from the impact of Covid-19, whilst ensuring arrangements can be flexed to respond to any future spikes in infection rates.

3. Consultation

a) Have Risks and Impact Analysis been carried out?

Yes

b) Risks and Impact Analysis

A full risk register is maintained as part of the RCG.

An Impact Analysis is in place and is a live document which will be reviewed throughout the period of the recovery. This will be further informed by the detailed impact assessment and action plan that is currently being developed.

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	COVID 19 Response Cells still active in the Recovery Phase
Appendix B	B(1) Foresight and Intelligence Report 04-08-2020 B(2) Foresight and Intelligence Report 11-08-2020
Appendix C	Lincolnshire Mental Health and Wellbeing Universal Offer
Appendix D	D(1) Local Outbreak Management - Governance and Decision Making Process D(2) Note on County Council Powers under the Health Protection (Coronavirus, Restrictions) (England) (No3) Regulations 2020 D(3) Briefing Paper - Covid 19 Contain Framework and Next Steps of the Government's Recovery Strategy

5. Background Papers

Document title	Where the document can be viewed
Local Outbreak Management Plan	https://www.lincolnshire.gov.uk/downloads/file/4339/lincolnshire-covid-outbreak-management-plan

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