



Local Outbreak Engagement Board

15 December 2021

Time 10.30 am **Public Meeting?** YES **Type of meeting** Partnership Boards
Venue MS Teams

Membership

Councillor Ian Brookfield (Chair)	Leader of the Council
Councillor Jasbir Jaspal	Cabinet Member for Health and Wellbeing
Emma Bennett	Executive Director of Families
Katrina Boffey	Assistant Director of Strategic Transformation, NHS England & NHS Improvement - Midlands
Tracy Cresswell	Healthwatch Wolverhampton
Ian Darch	Wolverhampton Voluntary Sector Council
John Denley	Director of Public Health
Marsha Foster	Director of Partnerships, Black Country Healthcare NHS Foundation Trust
Yvonne Higgins	Acting Chief Nurse, Royal Wolverhampton NHS Trust
Adrian Philips	Consultant in Communicable Diseases, UK Health Security Agency
Councillor Wendy Thompson	Opposition Leader
Dana Tooby	Ethnic Minority Council - Wolverhampton Equality and Diversity Partnership
Paul Tulley	Wolverhampton Managing Director, Black Country and West Birmingham CCGS

Information for the Public

If you have any queries about this meeting, please contact the Democratic Services team:

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Tel/Email Tel: 01902 554070 email:shelley.humphries@wolverhampton.gov.uk
Address Democratic Services, Civic Centre, 1st floor, St Peter's Square, Wolverhampton WV1 1RL

Copies of other agendas and reports are available from:

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Some items are discussed in private because of their confidential or commercial nature. These reports are not available to the public.

Agenda

PART 1 – Items open to the press and public

Item No. *Title*

MEETING BUSINESS ITEMS - PART 1

- 1 **Apologies for Absence**
- 2 **Notification of substitute members**
- 3 **Declarations of interest**
- 4 **Minutes of the previous meeting** (Pages 1 - 4)
[To approve the minutes of the previous meeting as a correct record.]
- 5 **Matters arising**
[To consider any matters arising from the minutes of the previous meeting.]

ITEMS FOR DISCUSSION OR DECISION - PART 2

- 6 **COVID-19 Situation Update**
[To receive an update on the current COVID-19 situation.]
- 7 **Winter Preparedness**
[To receive a verbal update on Winter Preparedness.]
- 8 **Wolverhampton COVID-19 Outbreak Control Plan December 2021 - Playing Our Part: Relighting Our City** (Pages 5 - 18)
[To approve a winter refresh of the Local Outbreak Control Plan.]
- 9 **Other Urgent Business**
[To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chair are matters of urgency.]
- 10 **Dates of future meetings**
 - 17 February 2022
 - 20 May 2022

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	<h2 style="margin: 0;">Local Outbreak Engagement Board</h2> <h3 style="margin: 0;">Minutes - 17 September 2021</h3>
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Attendance

Members of the Local Outbreak Engagement Board

<p>Councillor Jasbir Jaspal (in the Chair) Tracy Cresswell Ian Darch John Denley Councillor Wendy Thompson Dana Tooby</p> <p>Paul Tulley</p> <p>Brenda Wile</p>	<p>Cabinet Member for Health and Wellbeing Healthwatch Wolverhampton Wolverhampton Voluntary Sector Council Director of Public Health Opposition Leader Ethnic Minority Council - Wolverhampton Equality and Diversity Partnership Wolverhampton Managing Director, Black Country and West Birmingham CCG Deputy Director of Education</p>
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In Attendance

<p>Madeleine Freewood Shelley Humphries</p>	<p>Stakeholder Engagement Manager Democratic Services Officer</p>
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- | <i>Item No.</i> | <i>Title</i> |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | <p>Apologies for Absence
 Apologies were received from Councillor Ian Brookfield, Emma Bennett, Marsha Foster, Adrian Philips.</p> |
| 2 | <p>Notification of substitute members
 Councillor Jasbir Jaspal attended in the Chair for the Leader, Brenda Wile attended for Emma Bennett.</p> |
| 3 | <p>Declarations of interest
 There were no declarations of interest made.</p> |
| 4 | <p>Minutes of the previous meeting
 Resolved:
 That the minutes of the meeting of 26 May 2021 be approved as a correct record.</p> |
| 5 | <p>Matters arising
 There were no matters arising from the minutes of the previous meeting.</p> |

6 **COVID-19 Situation Update**

John Denley, Director of Public Health delivered the COVID-19 Situation Update with supporting presentation.

It was identified that Wolverhampton case rates were 50th highest in the country which was similar to Black Country counterparts. It was highlighted that the vaccine had reduced transmission by a small amount. Cases had reached a plateau in Wolverhampton and the aim was to reduce it back down to former low levels.

It was noted that the current focus was on learning to live with COVID rather than allowing the population to become complacent or forget about risks. 'Hands, face, space' was a continued message as well as urging people to get vaccinated to ensure the virus did not have the significant impact it did in the early days of the pandemic.

It was reported that efforts had continued in public engagement to encourage vaccine uptake and a great deal of work in collaboration with the Black Country and West Birmingham CCG had been taking place to maintain these efforts.

Resolved:

That the COVID-19 Situation Update be received.

7 **COVID-19 Strategic Coordinating Group Update Report**

John Denley, Director of Public Health presented the COVID-19 Strategic Coordinating Group Update Report and highlighted salient points. The report provided a summary of recent progress relating to the delivery of the local COVID-19 Outbreak Control Plan.

In response to a query around vaccination uptake for carers, it was confirmed that this had improved from 50% to around 90%. There had been several different reasons for vaccine hesitancy, ranging from fears around side effects, conspiracy theories or fertility issues to false assumptions that people had missed their opportunity to have the vaccine. It was reiterated that, despite misconceptions, receiving the vaccines was a far safer method than contracting COVID to gain immunity.

A query was raised on communicating the message for vaccine uptake in 16 – 17-year-olds and if this age group were able to use the mobile vaccination sites. It was clarified that 12 – 15-year-olds who were clinically vulnerable themselves or who lived with family who were clinically vulnerable were due to be able to receive the vaccine. In terms of the vaccine buses, it was noted that staff required additional qualifications and Disclosure and Barring Service (DBS) checks to work with young people of this age therefore these arrangements were being explored.

It was suggested that arranging for pharmacies to administer COVID booster vaccines would encourage uptake as well.

The importance of providing the public with the information to make the right decision was acknowledged as well as that organisations needed to continue to promote 'hands, face, space' as well as continual testing and vaccinations.

Resolved:

That the COVID-19 Strategic Coordinating Group (CSG) Update Report be received.

8 **Educational Settings Update**

Brenda Wile, Deputy Director of Education delivered the Educational Settings Update with accompanying presentation. The presentation provided a high-level update on the impact of COVID 19 on Wolverhampton schools including information on infection rates, testing and attendance.

Settings had responded by putting numerous precautions in place, such as holding events which would normally involve larger groups mixing as virtual events. The infection rates were higher than in June however the information was useful to determine how many year groups were affected.

It was noted that schools returning had coincided with many people returning to work therefore there was risk of cross-infection within households and to be mindful of this as winter and the flu-season approached.

It was noted that the vaccine programme for 12 – 15-year-olds had been approved and efforts were now engaged in working with schools and partners organisations on how to deliver the programme.

Thanks were extended to the Council's public health and education teams for working together and for approaching Wolverhampton schools so promptly.

Resolved:

That the Educational Settings Update be received.

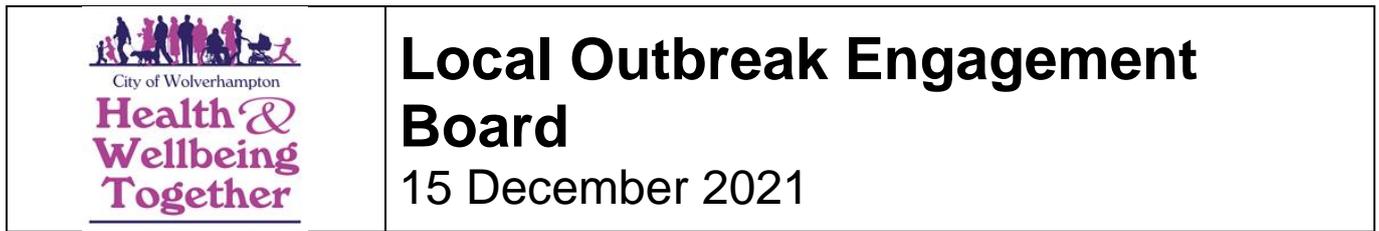
9 **Other Urgent Business**

There was no other urgent business.

10 **Dates of future meetings**

- 15 December 2021 at 10:30 am
- 17 February 2022 at 11:00 am
- 20 May 2022 at 11:00 am

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Report title	Wolverhampton COVID-19 Outbreak Control Plan December 2021 Playing Our Part: Relighting Our City	
Cabinet member with lead responsibility	Councillor Ian Brookfield Leader of the Council	
Wards affected	All wards	
Accountable director	John Denley, Director of Public Health	
Originating service	Public Health	
Accountable employee	Madeleine Freewood Tel 01902 550352 Email madeleine.freewood@wolverhampton.gov.uk	Governance and Partnership Lead, Public Health
Report has been considered by	Wolverhampton COVID-19 Strategic Coordinating Group	30 November 2021

Recommendation for decision:

The Local Outbreak Engagement Board is recommended to:

1. Approve a winter refresh of the Local Outbreak Control Plan.

1.0 Purpose

- 1.1 Every Local Authority has an ongoing statutory responsibility to have a plan in place to respond to emergencies to safeguard and protect the health of its local population.
- 1.2 The COVID-19 Outbreak Control plan sets out our collective commitment to preparedness, outlining how we will work together to prevent, contain and manage outbreaks through the ongoing COVID-19 pandemic. The increasing focus on preventing and reducing winter pressure for our NHS has emphasised the importance of updating our plan to ensure it remains fit for purpose.
- 1.3 The multi-agency Wolverhampton COVID-19 Strategic Co-ordinating Group (SCG) is responsible for overseeing the development and implementation of the Plan on behalf of the Local Outbreak Engagement Board (LOEB). This enables the LOEB to fulfil its primary duties to provide oversight, assurance and scrutiny of:
 - plans and actions to prevent and manage outbreaks of COVID-19 in Wolverhampton
 - the Test and Trace response in Wolverhampton
 - the Local Outbreak Plan communication strategy, with the aim of building trust and participation across all communities in the City.

2.0 Background

- 2.1 Every Local Authority is required to produce and publish a thematic Local Outbreak Control Plan specific to COVID-19. The aim of the Wolverhampton Outbreak Control Plan is to:
 - Reduce the spread of COVID-19 infection and save lives
 - Help as many people as possible return to normal life, in a way that is safe, protects our health and care systems and supports our economy to recover.
- 2.2 Wolverhampton first published its Outbreak Control Plan in June 2020, supported by a governance structure including the creation of a 'Local Outbreak Engagement Board' (LOEB), a sub-board of Health and Wellbeing Together.
- 2.3 Following the publication of the Government's Roadmap on 22 February 2021, a refresh of the Department of Health and Social Care 'Contain Framework' and an increasing focus on Variants of Concern, Local Authorities were asked to review and update their Local Outbreak Management Plans in coordination with partners by March 2021 in order to ensure they remained fit for purpose.
- 2.4 As part of the collective efforts to prepare the City and system for winter 2021 pressures the SCG has made the pro-active decision to undertake a further update of our current plan.
- 2.5 Whilst fortunately the numbers of COVID-19 patients in intensive care have reduced and the COVID-19 mortality rate is lower than this period last year, critical challenges exist.

Primary and secondary care are facing immense pressure to address the backlog of non-COVID-19 appointments and surgeries, further adding to capacity issues across the system. Alongside this, health partners are engaged in recovering their services from the difficulties of the past eighteen months. The impact of the new Omicron variant is still unknown.

- 2.6 Undertaking an update of our Local Outbreak Control Plan at this time allows us to build upon the progress made to date, whilst preparing the City for future challenges and ensuring our local health services do not come under unmanageable pressure.
- 2.7 The presentation of the refreshed Local Outbreak Control Plan replaces the usual Wolverhampton COVID-19 Outbreak Control Plan progress update report for this meeting.
- 2.8 Emerging risks continue to be monitored in relation to the current Local Outbreak Control Plan. As of 3 December 2021, there are no red risks to be escalated to the Local Outbreak Engagement Board.

3.0 Winter refresh of the Local Outbreak Control Plan overview

- 3.1 For consistency with previous iterations of the plan the report is structured using the following thematic headings:

- Care homes and educational settings
- Higher risk settings, communities and locations
- Community testing
- Contact tracing
- Data integration and information sharing
- Vulnerable communities
- Vaccine rollout
- Governance and local boards

In addition, the plan also provides an update on communication, resourcing and any additional challenges in delivering our plan.

- 3.2 For each thematic heading the report provides progress since March 2020 and identifies next steps to respond to winter pressures. A high-level summary of progress since March 2020 is provided below. An overview of next steps will be provided at the board meeting on 15 December 2021.

4.0 Care homes and educational settings

- 4.1 Care homes – since March we have:

- Continued to support Care Homes across all aspects of COVID-19. The multi-agency partnership continues to meet on a fortnightly basis to bring together all key policy developments and to identify areas of support the care sector require, the multi-

agency group ensure the support cuts across the health and social care system appropriately.

- Responded to outbreak management via the public health team working in conjunction with the infection prevention service based within the Royal Wolverhampton Trust and UK Health Security Agency. The infection prevention service act as a first port of call to provide advice and guidance on any single, cluster or outbreak cases across all care homes in Wolverhampton. The service continues to provide proactive audits and education and training to all care settings. Resultingly, care homes have seen a marked decrease in COVID cases, which has reassuringly led to reduction in severity of illness amongst residents, this is undoubtedly attributable to the roll out of the vaccine programme and through maintaining high standards of infection prevention.
- As a system supported the Primary Care led vaccination roll out in care homes to ensure residents in particular are vaccinated as soon as possible. Second doses were administered between March and April 2021 and the booster vaccination roll out commenced in November 2021. In November 2021 the mandatory vaccination for care homes came into effect, care homes have been supported during the last few months to prepare for this regulation and to mitigate impact from potential loss of staff.
- Enabled residents to receive the flu vaccination alongside the COVID-19 booster. A service has also been commissioned to help increase staff up take of the flu vaccine by offering a pharmacy-based service within the care home setting.
- Supported staff within care homes. City of Wolverhampton Council Adult Social Care have commissioned a pilot occupational health service which provides a range of support for both the mental and physical wellbeing of care home staff across Wolverhampton.
- Prepared for the increased risk of infectious diseases during winter months, by undertaking a multi-agency simulated exercise, in conjunction with UK Health Security Agency, to ensure readiness across the system to respond and manage complex outbreaks.

4.2 Schools, since March 2021 we have:

- Provided high quality, coordinated and consistent support to educational settings through the continuation of a multi-agency Incident Management Team, comprising senior representatives from Education, Public Health, HR, Health and Safety and Communications.
- Reinforced and simplified government guidance relevant to educational settings and provided regular communications through bulletins, weekly drop-ins and regular engagement sessions for challenging topics.
- Provided weekly support and updates to trade unions on COVID-19 including information on case rates, government guidance and local health advice
- Made and disseminated local policy decisions where they have been required, based upon available guidance and evidence. For example, the routine wearing of face coverings in communal areas in secondary schools and the precautionary PCR testing for staff and pupils absent with non-typical COVID symptoms.
- Maintained proactive surveillance of cases, clusters and outbreaks across educational settings by establishing a local online reporting system.

- Maintained provision of the local Schools Helpline offering guidance and support to settings.
- Provided incident management support including risk assessment, health protection guidance and an enhanced testing offer where outbreaks have been identified.
- Mobilised local support from School Nursing service to support asymptomatic testing to ensure the safe return of pupils in September 2021.
- Developed and delivered training for schools on lateral flow testing, vaccinations, contact tracing, infection prevention and control and flu vaccination
- Worked in partnership with secondary settings to maximise the uptake of the 12–15-year-old vaccines.
- Monitored levels of home testing amongst school staff and pupils and support schools to maximise participation in the routine testing programme to keep their settings safe.

4.3 Since March 2021, in partnership with the University of Wolverhampton, we have:

- Provided a leadership role across all University of Wolverhampton (UoW) main campus sites in the region to align Contingency Framework approaches for COVID-19 testing and wider health protection and control measures to protect the health and wellbeing of the university community.
- Reviewed emerging COVID-19 situations on campus, at events, and in university halls of residence at weekly case management meetings. Promoted access to local COVID-19 vaccination provision.
- Acted as strategic lead in forum arrangements to raise and collectively address issues in wider university student accommodation and the night-time economy across the City of Wolverhampton with colleagues from Environmental Health, West Midlands Police, and Housing.
- Reviewed Business continuity plans based on lessons learned to date. Developed new Outbreak Management Plans (OMPs) in line with latest DfE guidance.
- Our UoW OMP outline roles and responsibilities locally, describing our response to variants/ mutations, rising national and local case rates, with agreed thresholds and response for outbreaks on university campus, in university accommodation and /or events, and from international travel in line with Contingency Framework.

5.0 Higher risk settings, communities and locations

5.1 Working with businesses, since March 2021, we have:

- Supported workplace outbreaks and incorporated this within officer site visits and risk assessment reviews, as well as pro-active project work with Licensed Premises to contain the spread of the virus.
- Targeted areas with LFD test kit drops, and have helped to identify close contacts, and self-isolation requirements/compliance.
- Run business support webinars, with an emphasis on outbreak management, including IMT's and multi-agency site visits.
- Supported businesses to access testing provision including a testing support grant, which has seen 264 businesses receive up to £1000. The scheme provided the public

with reassurance that businesses are implementing safe measures to protect employees and customers during the pandemic.

5.2 Holding events, since March 2021, we have:

- Worked with internal and strategic partners as part of the local Safety Advisory Group (SAG) to reduce the spread of COVID-19. Specifically, public health have provided advice to the SAG meetings on all event applications within the City including development of a new Event Risk Reduction Matrix (ERRM) to support event organisers in considering the most productive measures they can take to reduce the risk of their event contributing to the transmission of COVID-19 amongst staff, and visitors from local communities.
- The ERRM has also supported public health recommendations for the running of school events, and wider education meetings for head teachers as well as informing elected members and mayoral event procedures.

5.3 Compliance and Enforcement: since March 2021, we have:

- Supported over 3300 businesses to join the voluntary COVID Recognition Scheme, ranging from Office environments, Places of Worship, Close Contact Services, Licensed Premises and Hospitality Venues. These businesses and services have been provided with officer support from the COVID Business Support Team, based within Environmental Health, reviewing workplace risk assessments, and offering support to achieve legal and best practice requirements.
- Continued to work alongside our colleagues within West Midlands Police, taking a joint working approach to enforcement (CJET Taskforce), and encouraging compliance.
- Served 15 Prohibition Notices, following breaches of business restrictions.
- Issued formal warnings to businesses for breaches of self-isolation requirements.

5.4 Contingency and Bridging Hotels: The Home Office has a statutory obligation to provide support including accommodation to asylum seekers whilst their claims are being considered. In Wolverhampton, the council was contacted by the Home Office in August and advised that a local hotel would be used to house refugees before they are offered permanent accommodation, as part of concerted nationwide efforts to house those fleeing from Afghanistan. Since that period we have:

- Supported partners operating contingency and Bridging hotels in Wolverhampton to open safely and in a COVID-19 secure manner.
- Initially provided day two and eight testing until a permanent solution was put in place by the Home Office for new arrivals into the hotel.
- Established a testing team to visit the hotels on a weekly basis to provide testing for all residents and staff. This model ensures that regular and supported swabbing is available, picking up any cases quickly and isolated to prevent wider spread throughout the hotel population.
- Provided home testing kits to all residents and staff.

6.0 Community testing

6.1 Since March 2021, we have:

- Set up several home testing collection hubs in Wolverhampton, in locations which were convenient for people to collect kits. Local kits are available at the City and Bilston Market, from the LFT walk in centres, some churches and community centres, WV Active leisure centres and some primary schools. Over 34,000 tests have been completed across our walk in LFT sites since the end of March and over 50,000 test kits have been distributed.
- Continued to provide a community lateral flow testing centres across the City utilising range of community venues.
- Responded to a change in Government testing strategy in July 2021 to focus testing on groups under-represented and disadvantaged groups. In response, we commissioned a pharmacy model to provide testing in community pharmacies. Providing a hyper local offer to those who may be vulnerable due to illness or age.
- Set up an on-site pharmacy testing service in selected pharmacies to encourage increased uptake of supervised tests amongst residents. Surrounding businesses were also encouraged to utilise the pharmacy testing service for employees.
- Ensured that PCR testing continues to be available to across the City to ensure that all residents can access a test quickly and locally should they need one.
- Commissioned a drawdown service for PCR and LFT testing to provide clinical provision for urgent testing requirements. This has been particularly useful in responding to testing requirements for designated Home Office new arrival placements.

7.0 Contact tracing

7.1 Our local contact tracing team supports the national NHS Test and Trace team with Tier 2 calls to positive cases. Using a Wolverhampton telephone number and contact information collected by various Council services, this team contacts cases that are unanswered or incomplete with the national team. Since March 2021, we have:

- Continued to deliver 'Local 4' contact tracing model in partnership with the DHSC, achieving an average 88% completion rate against local contacts.
- Received approval to fund contact tracing officer posts until 1 June 2022.
- Completed transfer of contact tracing team to customer services.

7.2 Outbreak Management and Surveillance, since March 2021, we have:

- Used surveillance tools including the COVID-19 Situational Awareness Explorer and iCERT to identify clusters and assess if investigation is required.
- Developed a local system offering closer surveillance of cases in educational settings which allows for earlier identification of potential outbreaks and rapid response.
- Maintained a multi-disciplinary IMT function including Health Protection, Environmental Health and IPC to provide rapid support to investigate and manage incidents, clusters and outbreaks in social care settings, educational settings and workplaces.

7.3 COVID-19 and its interface with other winter viruses, such as norovirus and flu, since March 2021, we have:

- Collaborated with partners from UKHSA, IPC, Black Country and West Birmingham Clinical Commissioning Group, Social Care, Education and Health and Safety to conduct a Winter Planning Exercise to ensure a robust response to winter infections in social care and educational settings.
- Developed and issued winter infections packs to educational settings.
- Worked collaboratively with Education, Vaccination UK and local schools to deliver the annual flu vaccination programme in educational settings including the "Flu Fighters Campaign".
- Negotiated access to bespoke health protection training on winter infections and response for the Wolverhampton Health Protection Team to improve knowledge, skills and ability to respond effectively to emerging situations across a range of settings.

8.0 Data integration and information sharing

8.1 Since March 2021, we have:

- Developed COVID Rates Dashboard to automatically pull in data from <https://coronavirus.data.gov.uk/> and rank by local authority based on COVID-19 rate per 100,000 population. This is used to inform the daily COVID summary table. We created a tool in Excel to improve efficiency when populating the summary table to be shared with Director of Public Health, Strategic Executive Board and Leader of the Council.
- Developed a dashboard to track the number of proactive calls being made to encourage residents of Wolverhampton to take up the offer of the vaccine. The dashboard pulled in information logged by call handlers in a SharePoint site and provided a breakdown of the calls made by Ward, Ethnicity, Age Group, GP, PCN and the reasons provided for declining the vaccine.
- Monitored vaccinations Dashboard that shows the vaccination uptake in Wolverhampton by age group and Middle layer Super Output Areas (MSOA). This also provides uptake comparison figures to all other local authorities (including CIPFA and regional neighbours) and England. This was further developed to include second dose vaccination data.
- Developed a Lateral Flow Testing (LFT) Dashboard to show testing result figures by site, positivity rates and LFT home collection data showing number of boxes collected at each test site.
- Utilised Power BI tools to enable efficient matching of vaccination datasets to provide team with lists for calls, texts and door knocking exercises. The tool also allows us to monitor the number of declines coded by each GP practice and has been further developed to capture outcomes data recorded on a SharePoint site which we can then feedback to GPs to update NHS records.

9.0 Vulnerable communities

9.1 Since March 2021, we have:

- Continued to build the Community Champion Network and increase Community Champions to target those who have been hardest to reach. Community Champions have supported access to vaccines through vaccine pop ups and supported door knocking activity to encourage local uptake as well as provide communications and engagement in various formats.
- Continued to provide food parcels for those who are self-isolating or with financial difficulties, supported by Welfare Rights team.
- Continued referrals to social prescribing team for those who are alone and worried or in need of additional non-financial support.
- Continued to identify and support underrepresented groups to register with a GP through Community Champion engagement and support.

9.2 Mental wellbeing, since March 2021, we have:

- Reviewed and refreshed our Stay Safe Be Kind (SSBK) digital catalogue of mental health promotion resources and developed a working group to ensure resources are inclusive, and accessible to all groups across the City.
- Secured access to national Better Mental Health Fund resources to promote good mental health and prevent mental ill health across the life course.
- Supported a 'specialist contact exercise' to reach out to people with SMI (Serious Mental Illness) to invite to vaccination.
- Worked with strategic colleagues to ensure vaccination of patients in acute mental health settings.

10.0 Vaccine rollout

10.1 Since March 2021, we have:

- Continued vaccination roll out in the City at pace with over 177,000 first doses of the vaccine administered to residents, and well over 160,000 residents receiving two doses. Those from the most vulnerable groups including 50+ age groups, care home residents and the clinically extremely vulnerable have high levels of vaccine take up. Over 47,000 residents have now received their booster dose, with almost 70% uptake in those eligible to date. Provision is in place via local GPs to ensure all eligible care home residents are offered their booster.
- Bolstered the vaccination offer that is delivered via local Primary Care Network GP led clinics in the City, by the addition of several community pharmacy sites and a host of local mass vaccination sites in neighbouring areas. All of which are now available to residents to book into using the national NHS website, improving access for residents and allowing some capacity to be redirected.
- Continued our support to proactively contact residents who are eligible for vaccine but yet to take up the offer. This is in place via a data sharing agreement with local GPs, allowing us to access patient data and make calls to eligible residents and support

booking into existing clinics in the City. Driven by our commitment to ensure no resident is left behind without a fair and equitable offer, this also provides a vital feedback loop for GPs to code outcomes in patient records.

10.2 Tackling disparities in vaccine uptake, since March 2021, we have:

- Continued to work with communities to understand the complexity behind low uptake in certain parts of the City and among certain community groups.
- Completed enhanced engagement projects with local residents via community champion networks. Utilising a data driven approach to engage with communities with poor uptake via leaflet dropping, online FAQ sessions with local medical experts and trusted members in peer groups, door knocking and engagement with residents and families, plus other key outreach communications with key stakeholders including the use of social media, targeted texts to those within walking distance of a site, and phone calls to encourage people to come forward for vaccination.
- Delivered roving models in partnership with the local NHS to ensure each community had a fair and equitable offer available, including clinics in the substance misuse provider setting, homeless providers.
- Utilised a vaccine bus to target under-represented areas and groups, taking the offer into the heart of those communities and encouraging residents to get vaccinated who were unlikely to have otherwise done so. The mobile vaccination bus ran for a 16-week period, from June – September, completing over 6000 vaccines across our communities.

10.3 Vaccines for 12–15-Year-Olds, since March 2021, we have:

- Established and led on the partnership approach with the CCG, Walsall Healthcare, Vaccination UK and educational settings to deliver the COVID vaccine to 12–15-year-olds in educational settings.
- Provided information to all secondary settings (including independent, special and PRUs) to disseminate to parents/carers enabling them to remain objective in the process of maximising consent.
- Through a risk assessment process ensured all provision in settings was delivered in a safe and effective manner, minimising disruption to settings.
- Offered four virtual parent engagement sessions to allow parents/carers the opportunity to ask local education and health professionals questions about the vaccine.
- Provided support for the vaccine consent process through establishing a local helpline able to support parents with access, terminology or general enquiries.
- Worked with West Midlands Police to ensure schools receive timely support for anti-vaxxer disruption and provided additional security to settings on the day of the vaccines.

11.0 Governance and local boards

11.1 Since March 2021, we have:

- Refreshed our programme management approach to monitor the Local Outbreak Control Plan more robustly.
- Supported the safe reopening of services across the system whilst prioritising residents' safety, in line with the timetable published by Government in the national COVID-19 Roadmap.
- Published a Health Inequalities Strategy for the City. This was developed by the Health and Wellbeing Together Board and aligned to the Wolverhampton Relight our City Strategy and the Public Health Annual Report 2020. The strategy recognises COVID-19 has exacerbated existing inequalities in the City. Going forward we will be implementing and embedding the guiding principles outlined in the strategy across the wider system, including the promotion of the Health Equity Assessment Tool.

12.0 Communicating our plan

12.1 Since March 2021 we have:

- Continued with our established COVID-19 Communications Working Group (consisting of colleagues from Public Health and Corporate Communications) adopting a collaborative approach with behavioural science theories to communications with internal colleagues and trusted City partners.
- Disseminated timely, accessible and responsive universal communications about how to stay safe, well and follow national guidance.
- Signposted to local support and information using a recognised and trusted City of Wolverhampton Council brand.
- Targeted messages to specific communities, sectors, settings or under-served communities.
- Continued to deliver timely COVID safety messages to stakeholders including our 'COVID's Not Over' campaign which focuses on taking simple steps including 'Hands, Space, Face' to keep safe.
- Provided regular updates on the City's infection rates to encourage positive behavioural change when we saw an increase in our numbers.
- Delivered warnings about the highly transmissible Delta variant and how extra precautions needed to be taken to prevent the spread.
- Delivered multiple localised campaigns encouraging people in Wolverhampton to get tested. The 'Get Up – Get Tested – Get On' campaign used local people in local settings to encourage uptake.
- Shared weekly updates on the location of the mobile testing unit and availability of testing centres across the City.
- Shared regular updates promoting LFT testing in participating community pharmacies and promoted amongst surrounding businesses.
- Worked with local businesses to promote the testing grant scheme – incentivising testing of staff.

- Worked with the CCG to support the successful roll out of the vaccine programme, promoting the uptake of both doses and booster vaccinations.
- Highlighted which vaccines were available from what locations and what days and explained how to book an appointment.
- Delivered targeted communications to eligible unvaccinated residents. Text messages were sent informing people of their nearest walk-in clinic, supplemented by letters, door knocking and phone calls.
- Wrote to thousands of residents to promote vaccine uptake including care staff, parents of 12–15-year-olds and former Clinically Extremely Vulnerable (CEV) Shielding Cohort.

13.0 Financial implications

- 13.1 Government have announced a number of one-off grants to support local authorities in their response to the pandemic. This includes allocations from the Outbreak Control - Test and Trace grant and the Contained Outbreak Management Fund which are ring-fenced public health grants and have to be spent in line with the conditions of grant. In 2020-2021 the Council received a total of £9.3 million from these two grants.
- 13.2 The government has continued to allocate Contained Outbreak Management Fund grant in 2021-2022. Wolverhampton's allocation from this grant in 2021-2022 is £2.2 million, this grant continues to be subject to grant conditions and the submission of monitoring returns. This grant must be spent by 31 March 2022. The Contained Outbreak Management Fund will be used to support the activities outlined in the plan for 2021-2022. The refreshed Local Outbreak Control Plan provides an overview of where this money is being targeted.
[JB/07122021/C]

14.0 Legal implications

- 14.1 Every Local Authority is required to produce a Local Outbreak Control Plan specific to COVID-19 as outlined in the August 2020 national framework:
<https://www.gov.uk/government/publications/containing-and-managing-local-coronavirus-COVID-19-outbreaks/COVID-19-contain-framework-a-guide-for-local-decision-makers>
- 14.2 The Coronavirus Act 2020 provides a legal framework that gives Local Authorities – through Public Health and Environmental Health functions – the primary responsibility for the delivery and management of public health action to control outbreaks of infectious disease.
[SZ/06122021/P]

15.0 Equalities implications

- 15.1 The Local Outbreak Engagement Board is a sub-board of Health and Wellbeing Together. Equalities implications of COVID-19 are being actively reviewed by both boards informed by qualitative and quantitative data.

16.0 Health and wellbeing implications

16.1 The Local Outbreak Engagement Board is a sub-board of Health & Wellbeing Together and health and wellbeing implications of Local Outbreak Plan are kept under review through established reporting lines.

17.0 COVID-19 Implications

17.1 The COVID-19 Local Outbreak Control Plan provides the framework for the City partners to respond to the on-going pandemic.

18.0 Schedule of background papers

18.1 Wolverhampton COVID-19 Outbreak Control Plan
<https://www.wolverhampton.gov.uk/coronavirus-advice-and-information/COVID-19-outbreak-control-plan>

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