



Wolverhampton Covid-19 Outbreak Control Plan

Our Journey So Far: Living with Covid-19

March 2021

[wolverhampton.gov.uk](https://www.wolverhampton.gov.uk)

CITY OF
WOLVERHAMPTON
COUNCIL



Brian Lunt from Wednesfield has created a piece of artwork outside of his home to show his support for the NHS at New Cross Hopsital after they saved his wife's life

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Foreword

We have come a long way since the first local case of Covid-19 was identified in March 2020 and our first Wolverhampton Outbreak Control Plan was published in June 2020. As we move into the next phase of the pandemic and learn to live with Covid-19 for the longer term, our priority remains the same – to save lives and reduce the spread of infections.

At the end of 2020, we saw a new and more transmissible variant of Covid-19 begin to spread quickly locally and across the country. This surge in infections combined with the traditional winter pressures we see at this time of year created a greater strain on our local health and social care system than ever before. The continued commitment and passion of our multiagency partnerships, and the skills and expertise of their teams, has meant we have successfully overcome this challenge, but we must all remain vigilant.

We have seen how quickly transmission can cross area boundaries and recognise our regional and national partners as key to help keep the virus under control.

We have learnt that some variants of Covid-19 are of particular concern because they pose a greater threat to the public's health. These variants require an especially swift response. Locally we have not yet had to deploy these measures but stand ready to do so if necessary and we thank our regional neighbours for the learning they have shared.

The introduction of the Covid-19 vaccine and its successful rollout, alongside reducing infection rates, is paving the way for the safe and gradual reopening of society and the economy. It is crucial that we all take up the vaccine when we are offered it; every person who has the vaccine helps reduce the impact of the virus on themselves and our city.

Continuing to take a careful and cautious approach to living with Covid-19 as lockdown eases is critical to avoid a further surge in infections. Individuals, communities, businesses and workplaces alike must maintain good habits that minimise transmission. This will enable us all to return to a more normal way of life.

Our refreshed Covid-19 Outbreak Control Plan sets out how, together, we will continue to protect and support our city, further informed by the learning we have gained over the last nine months.

It provides an update on progress achieved during this period, reflects recent changes to national guidance and looks forward to how we collectively ‘reset, recover and relight’ through the next stages of the national Roadmap, embedding our place-based approach co-produced with local people and communities.

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Andy Beard
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Introduction

Every Local Authority has an ongoing statutory responsibility to have a plan in place to respond to emergencies as part of our existing duty to safeguard and protect the health of our local population.

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 publication of the Government's Roadmap for exiting national lockdown, the accompanying refresh of the Contain Framework and an increasing focus on Variants of Concern have highlighted the importance for us to review and update our plan to ensure it remains fit for purpose.

Within the context of this refreshed landscape, the aim of the Wolverhampton Outbreak Control Plan continues to be 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.

The Outbreak Control Plan pays close attention to the Contain Framework principles underpinning the effective implementation of an integrated response by:

- Ensuring the primary aim continues to focus on making the public safe and saving lives.
- Building on public health expertise and using a systems approach.
- Being open with data and insight so everyone can protect themselves and others.
- Building consensus with our key partners and local communities to secure trust, confidence and consent.
- Following well-established emergency management principles.
- Continuing to consider the equality, economic, social and health-related impacts of decisions taken to respond to Covid-19 in our city.

One of the most stark features of the pandemic so far has been the impact that Covid-19 has had on particular communities and groups, including people from Black, Asian, and Minority Ethnic communities, people living in more deprived areas, those working in higher risk occupations, people living in overcrowded conditions and / or who have relevant, pre-existing health conditions.

The Outbreak Control Plan also seeks to highlight inequalities exposed or amplified as a result of Covid-19 so that we might better target support to these communities and ensure no-one in our city is left behind.

Journey of COVID-19 in Wolverhampton



30 Jun

Wolverhampton COVID-19 Outbreak Control Plan published

01 Jul

City of Wolverhampton Council invest **more than £140,000** to **improve infection prevention** and control measures in educational settings

02 Jul

Residents encouraged to download Royal Wolverhampton NHS Trust COVID-19 **Care Assistant app** offering free information from NHS doctors and clinicians



07 Jul

Delivery of **free Council food parcels** to shielding and vulnerable city residents extended until 1 August



28 Jul

First asymptomatic pop up **'walk through' Covid-19 test centre** at Graiseley Strengthening Families Hub opened used as blueprint for national community testing model

28 Aug

Nearly **100 employees** at Marston's volunteer to take part in a **pilot coronavirus testing programme**



16 Sep

New local **'Book a Test' phone number** made available for employers if they want support to get their employees booked in for a Covid-19 test



08 Oct

Public Health support provided to schools leads to reduction in number of pupils and teachers having to self-isolate - **dropping from over 3,000 to 500 in two weeks**



30 Oct

1,118 businesses, including shops, restaurants, pubs and hairdressers across the city have passed inspections carried out by 17 Covid Support Advisors. **'Covid Compliant' green ticks** issued to businesses which are following the rules to keep customers and staff safe



12 Nov

Community-led walk through site opened with the support of the local Guru Nanak Gurdwara as part of a Government backed testing pilot specifically for people without symptoms of Covid-19. **Around 3,000 people access the site over the 2-and-a-half-week pilot**



07 Dec

Wolverhampton's Covid-19 mass testing centre open to the public at the Council's Civic Centre – **with just under 800 people seen in first 3 days**



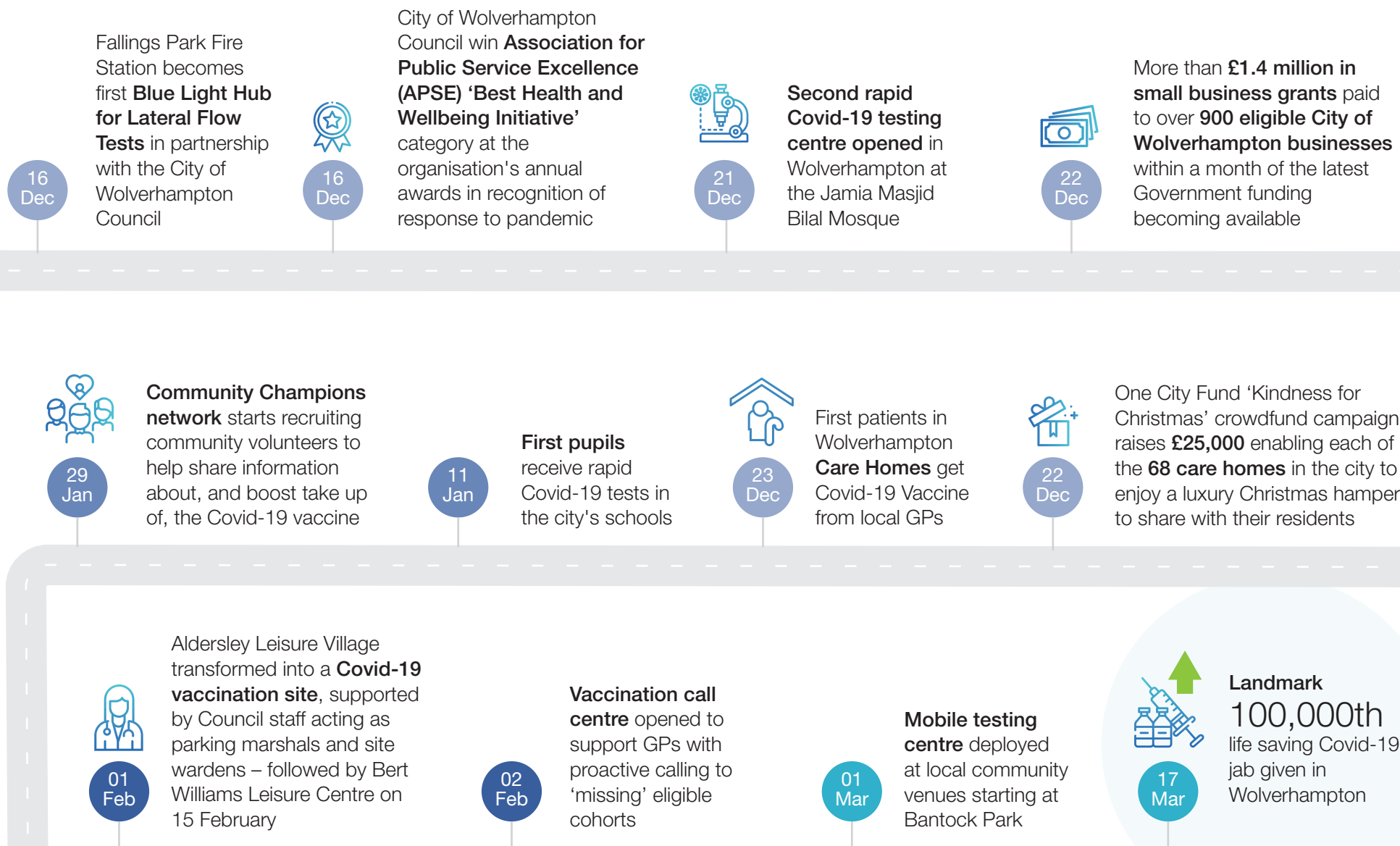
11 Dec

Local Contact Tracing enhanced



14 Dec

First local residents receive **COVID-19 vaccine**



What we've learnt so far

SHARED OWNERSHIP

Shared ownership by executive local partners enabled our response to be implemented consistently, effectively and at scale across the health and social care system and wider economy.

This collective contribution and experience has enabled the partnership to grow in strength and shaped future shared outcomes.

This approach has led to the successful management of complex large clusters and outbreaks through multiple peaks in infection during Spring and Winter 2020/2021, and delivery of a local General Practice led vaccination programme that focused on equity of uptake through the provision of extra support for residents who needed assistance to obtain their vaccination.

SHARED CULTURES

Whilst all partners have had to develop rapid organisational responses to specific situations associated with the Covid-19 pandemic, as a system we have shared the learning from these experiences to optimize deployment of resources across the city effectively, evaluate impact, and shape our collective approach to future challenges by using our local system capital.

This process has included partners:

- Working as learning organisations
- Driving a culture of innovation
- Committing to continuous improvement

SHARED INFORMATION

Since early in the pandemic, when testing was not widely available and data flows were not established, the approach to surveillance continually evolved to meet a series of advances and challenges.

The level of information sharing that the Coronavirus Act 2020 allowed has been transformational. We have been able to evaluate the reliability of multiple data sources, triangulating information from different parts of the system, and used data to assess the impact of the pandemic on health inequalities.

Partners have demonstrated that data can be shared safely and used strategically to take a city-wide view of the issue for the benefit of Wolverhampton residents which should continue long into the future.

SHARED TRUST

Throughout the pandemic, our communities and voluntary sector have demonstrated great strength and leadership, supporting residents to access trusted information in many different formats, enabling support for vulnerable residents, helping people to be digitally included and learn new skills to access resources, as well as organising and co-producing activity through various forums and groups.

City food banks, powered by local volunteers and with the support of many partners including local business and the Council, have come together to ensure resilience of supply.

Already established positive working relationships between statutory and non-statutory multi-agency boards and partnership forums have been further strengthened, supported by regular meetings and dialogue.

A crowdfunding platform has allowed residents to contribute to a 'One City fund' enabling residents to donate directly to trusted local groups delivering activity in their communities.

SHARED GOALS

The nationally recognised local community testing programme has been successful in Wolverhampton, largely due to the buy in of and ownership from key community leaders and faith groups.

Through collaboration and co-production, we established asymptomatic testing sites in the heart of local communities that were run by trusted community leaders.

This approach enabled barriers to be removed and acceptance in regular testing increased due to the trusted position of our community leaders.

When empowered, the strength and resilience and impact of communities is powerful. We must continue to nurture these vital relationships with our communities and support them to recover and grow.

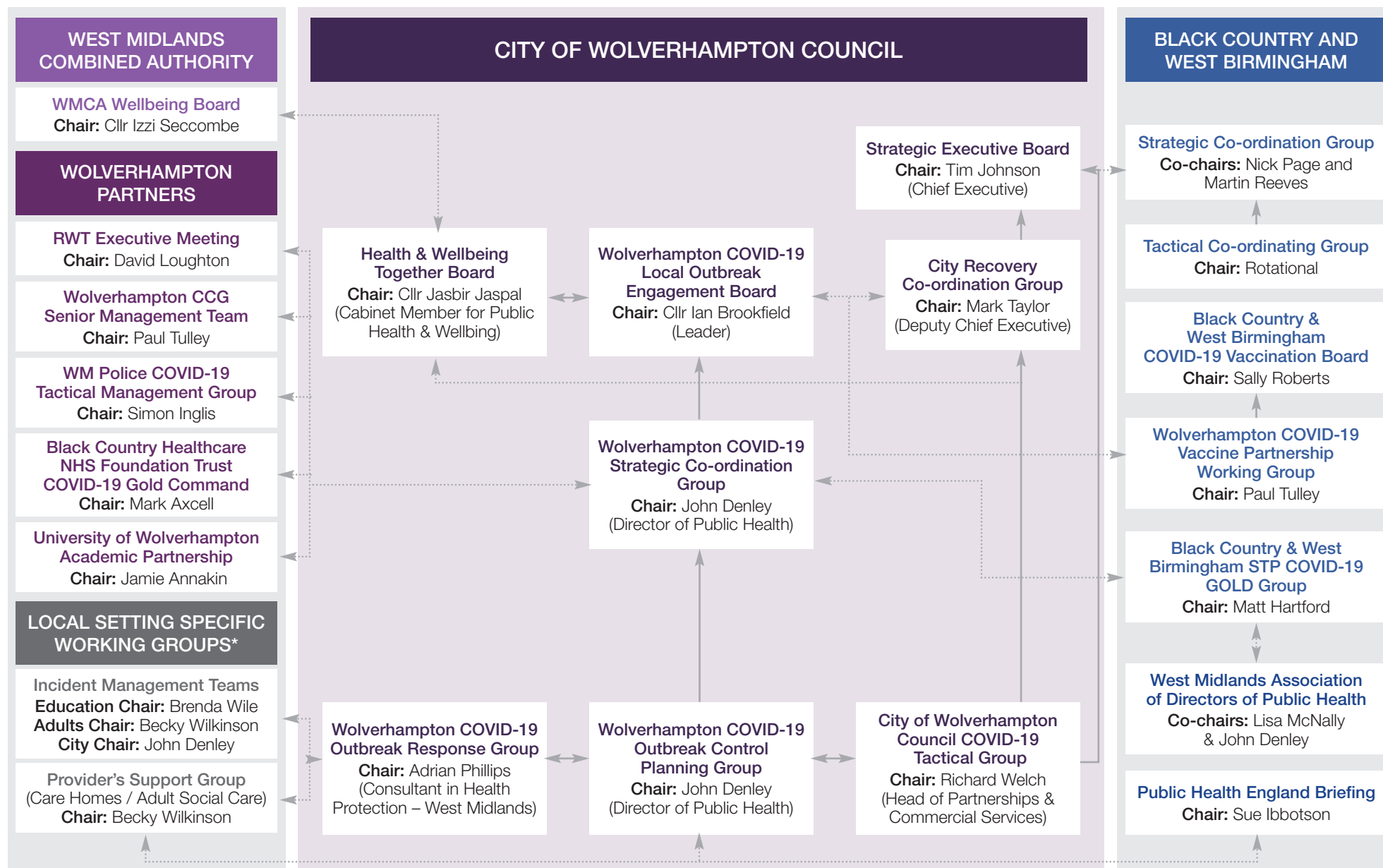
SHARED CAPACITY

The demand on capacity across the system required us to support key partners in areas of work that was not anticipated on such scale. During this time, the request for general public health support evolved into requiring more specialist public health involvement.

One area impacted by this shift was the original surge rota for outbreak management. This was replaced with a dedicated team with specialist public health and infection prevention knowledge.

The journey of the pandemic so far has required us to adapt and refocus quickly and sometimes significantly. The flexibility of our model has enabled and encouraged this which must be maintained through the next phases of the Roadmap.

Our local arrangements

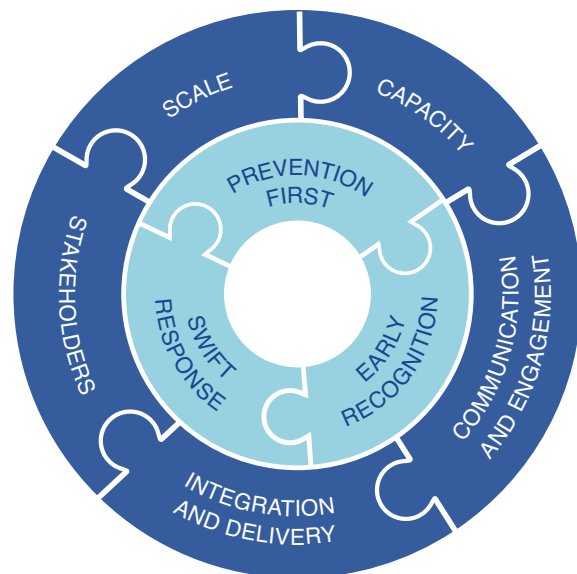


*Other working groups / partnerships – as required

Our refreshed plan

Our plan provides the framework for our response to Covid-19 incidents and outbreaks that occur in our city.

It is structured around a set of themes defined by the Local Government Association and the Department of Health and Social Care, and based upon principles which have informed our approach throughout the pandemic:



Managing the response to Covid-19 is very dynamic. Continuous reflection and improvement are critical as we learn more about the virus and the factors influencing enduring transmission.

We have also seen a significant evolution of the core tools available to support our response. This includes the expansion of the Covid-19 testing programme, the development of a local Test and Trace function to compliment the NHS system, and the roll out of the Covid-19 vaccination.

As a result, we have refined the themes of our plan to ensure that it reflects the latest developments both nationally and locally:

Theme 1: Care homes and educational settings

Theme 2: Higher-risk settings, communities and locations (including compliance and enforcement)

Theme 3: Community testing

Theme 4: Contact tracing

Theme 5: Data integration and information sharing

Theme 6: Vulnerable communities (including support to self-isolate)

Theme 7: Interface with the vaccine roll out

Theme 8: Governance and local boards

Theme 1:

Care homes and educational settings

Our approach:

Through effective multi-agency working, settings are provided with consistent and coordinated support to enable them to navigate the fast changing Covid-19 legislative landscape.

Local guidance and support through an array of communication methods has provided timely help to settings to support infection prevention controls, positive case identifications, outbreak management and local testing arrangements – all aimed at reducing transmission within settings.

In care homes, since June 2020 we have:

- Strengthened partnership working between health and social care partners through weekly engagement to discuss and issues, data / intelligence sharing, outbreak management and support planning for care sector.
- Streamlined data sources to provide a real time view enabling responses to outbreaks and to support needs across care providers.
- Focussed support to care providers during outbreaks through a multi-disciplinary approach involving Public Health England and other key agencies across the health and social care system.
- Deployed Infection Prevention Fund money to ensure care providers are adequately resourced to implement infection prevention measures and avoid risk of failure due to financial instability.

- Held regular interactive forums with care providers to advise on emerging guidance and policy.
- Encouraged and supported the implementation of routine Polymerase Chain Reaction (PCR) and Lateral Flow Testing (LFT) for Care Home staff and residents, and more recently Supported Living staff.
- Provided bespoke Public Health vaccine information sessions to care providers where vaccine hesitancy in staff was a particular concern.
- Advised on government policy with local interpretation and implementation, including policies around care home visiting and testing.
- Provided frontline NHS/Social Care and Care home staff with access to CCG commissioned digital therapies for sleep, anxiety, stress and bereavement.

Our plan is to:

- Continue to support specialist settings and those dealing with an outbreak.
- Continue to support care settings to increase vaccine uptake within staff through steady and consistent flow of credible information and direct engagement.
- Carry out proactive infection and prevention audits to ensure high standards are maintained within care settings.
- Develop a residents' vaccine plan for winter, to include flu and Covid-19 vaccinations.
- Continue infection prevention training for staff to ensure skills and knowledge are maintained ahead of winter.

In schools, since June 2020 we have:

- Provided high quality, coordinated and consistent support to educational settings. A multi-agency working group was established, comprising senior representatives from Education, Public Health, HR, Health and Safety, Communications, and School Nursing.
- Reinforced and simplified government guidance relevant to educational settings and provided regular communications through bulletins, weekly drop-ins and engagement sessions.
- Made and disseminated local policy decisions where they have been required, based upon available guidance and evidence. For example, the routine testing of staff and pupils following a previous positive Covid-19 test.
- Carried out surveillance of cases, clusters and outbreaks across educational settings and provided infection prevention guidance and support where positive cases have been identified.
- Maintained provision of the local Schools Helpline offering guidance and support to settings and receiving positive case notifications.
- Established priority access to community testing (PCR and LFT) for education staff (and their wider households) to ensure routine testing can be accessed in a timely manner, supporting the safe opening of early years settings and schools to vulnerable children and children of key workers.
- Developed and delivered a package of training, support and resources to enable the effective implementation of onsite testing for secondary school and college pupils and staff from early January.
- Provided local guidance on how to effectively and efficiently upscale testing provision to enable the safe return of pupils from early March 2021 in order to comply with Department for Education requirements.
- Deployed a team of volunteer 'Test Operatives' from the Council to support the testing requirements required to re-open.
- Trained schools to effectively contact trace within their settings to reduce levels of transmission.
- Provided enhanced testing and contact tracing support to less confident educational settings in partnership with the Royal Wolverhampton NHS Trust School Nursing Service.
- Continued to keep senior leaders from schools, colleges, early years settings and trade unions abreast of key developments in current and emerging guidance, national and local intelligence, feedback on cases, clusters and outbreaks and advice on any action required as a result.
- Maintained oversight of attendance and addressed issues relating to vulnerable pupils.
- Ensured families of pupils not attending school were supported through the provision of quality Free School Meals.

- Provided infection prevention and control advice and guidance to early years providers when infection rates in the city were particularly high.
- Assisted schools with the management and improvement of parental compliance with Covid secure measures particularly during drop off / pick up times with support from our Covid Support Advisors.

Our plan is to:

- Continue to provide strategic and tactical support with guidance, legislation, testing and positive case management with the oversight of Education Incident Management Team.
- Continue to monitor case and transmission rates and provide clear infection prevention and control advice, guidance and intervention where required.
- Monitor 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.
- Maximise the awareness and uptake of the Community Collect home testing arrangements for households, childcare and support bubbles of nursery, school and college pupils and staff.



Oliver Edwards hands over his swab after becoming the first student at Our Lady and St Chad's Catholic Academy to have a rapid Covid-19 test

Since June 2020, in partnership with the University of Wolverhampton, we have:

- Completed a series of comprehensive ‘Stress Test’ exercise activities ensuring all campus facilities, learning environments and university halls of residence remain COVID secure.
- Provided students and staff with easy to access testing facilities for those with and without symptoms of Covid-19.
- Developed a case management process for reporting and contact tracing those testing positive for a Covid-19 to reduce risks of onward transmission on and around campus.
- Provided strategic leadership for cross campus approaches to testing and compliance.
- Worked with colleagues from Walsall and Telford Public Health to ensure consistent messaging and approach across all three University of Wolverhampton campuses.

Our plan is to:

Continue our existing “Stress testing” approach of campus facilities, learning environments and university halls following national updates on return of wider student cohorts to campus post April 12th.

Previous ‘Stress Test’ activities were based around key aspects of DfE Guidance for Higher Education: reopening buildings and campuses. These will continue as the focus of risk assessment activities once available.

The “Stress Tests” will also incorporate recommendations and actions arising from the University’s internal business continuity audit, the focus of which is lessons learned throughout the Covid-19 pandemic. The audit is due to be completed in late Spring 2021.

Additional assurance work will include:

- Review of case management pathways
- Review of weekly case management meetings
- Review approaches to cross campus testing and compliance
- Updating audit framework for existing processes and procedure commencing from April 2021 onwards.
- New partnership approach to management of compliance in student accommodation across the city commencing March 2021
- Event planning and management- including multi-agency review of any event proposals
- Business continuity planning based on lessons learned to date
- Incident response planning (outbreaks/variants).
- Further develop plans with the University to provide capacity to support where possible, delivery of the local surge test plan.

Spotlight on care homes and educational settings

Care Home Partnership

The response to Covid-19 challenges in the care sector has been addressed through effective collaborative working, which encompasses a breadth of partners across the health and social care system.

Joint training sessions have been delivered to care providers by Public Health, Royal Wolverhampton NHS Trust and other key NHS partners. Training ensures care providers receive a wholesome package of support including training for staff, advice on guidance and policy, as well as acute outbreak management.

The Infection Prevention Service from the Royal Wolverhampton NHS Trust has been instrumental in supporting care providers, predominantly residential settings, to manage cases of Covid-19, whether that be single cases, clusters or outbreaks.

Working with the Trust, intelligence has been shared daily to understand emerging cases and outbreaks. This has facilitated early interventions including testing staff and residents to identify and isolate new cases.

The wider partnership has heavily relied on the expertise and knowledge of the Infection Prevention Service to provide day to day operational advice to care providers. It is one of the key successes in limiting and reducing the impact of the pandemic in our most vulnerable residents.

Education Incident Management Team

The Education IMT has provided an effective multi-disciplinary decision making forum to enable a dynamic response to a fast-changing landscape. The ability to swiftly flex and deploy interventions based on feedback and experiences in schools, review the ever-changing guidance and ensure schools were equipped to respond accordingly has been vital. Using data, local feedback and guidance, this support continued to evolve ensuring the safety of children, young people and staff which has been greatly appreciated by our education community.

Feedback from local cases and outbreaks has allowed key infection patterns in educational settings to be identified and understood. Mitigations for settings have then been advised and implemented to help to reduce the risk of Covid-19 and prevent onward transmission.

To support the commencement of the Department for Education lateral flow testing strand in schools, the IMT oversaw the development and delivery of local bespoke training to settings and identified additional resources for schools to ensure they were fully and safely equipped for implementation.

In the run up to schools re-opening in March, further workshops were held with Secondary School Headteachers to provide logistical and planning assistance for the implementation of the return to school testing programme. The IMT also ensured additional resources were made available for schools who were finding staffing on site test arrangements challenging.

Theme 2:

Higher-risk settings, communities and locations

Our approach:

To work with individuals, settings and communities to embed good habits to reduce transmission are adopted using the 'Engage, Educate, Encourage, Enforce' model. Occasionally it may be necessary to enforce control measures in relation to an individual, setting or wider community.

In Autumn 2020, following the success of the Education IMT, a Business IMT group was established. This included representatives from Environmental Health, Public Health and Enterprise.

Additionally, a 'City IMT' was established with representatives from business forums and networks. Members of this group proactively support the activity of the 'Business IMT', extending the reach into local businesses. Involvement of City IMT is imperative given 97% of businesses in Wolverhampton are small and medium enterprises, having fewer than 50 employees. As the Government's Roadmap progresses and non-essential businesses prepare to reopen, all businesses, regardless of size, need to be supported to remain Covid secure and communicate their efforts to customers.

Since June 2020, with these forums, we have:

- Identified high risk settings based on risk criteria and provided ongoing infection prevention support to these settings.
- Delivered universal guidance to all businesses to support the Covid secure agenda.
- Promoted and proactively signposted the lateral flow testing offer to increase testing uptake amongst business settings.
- Developed a priority booking platform for businesses to encourage their employees to routinely test at community test centres.
- Developed recognition schemes for Covid secure compliance and Covid-19 testing for businesses.
- Established a multi-functional contact centre to provide a one stop shop offer to support businesses.
- Conducted proactive and reactive visits to business premises undertaken by Trading Standards, Public Health and West Midlands Police colleagues to support settings to comply with legislative requirements.
- Developed a multi-agency collaborative approach between Public Health, Environmental Health, Health and Safety Executive and PHE to conduct risk assessments and promptly respond to outbreaks.
- Conducted themed webinars targeted to high-risk settings to ensure businesses continue to operate safely.
- Provided resources, assessment tools, support and advice to workplaces including financial support for self-isolation.
- Developed an emergency accommodation pathway to support vulnerable individuals of no fixed abode to self-isolate.

Specifically, regarding compliance and enforcement, we have:

- Established the Covid Joint Enforcement Team comprising of Environmental Health, Public Health and West Midlands Police to tackle persistent compliance breaches and issue fixed penalty notices, prohibition notices and licence revocation applications where deemed necessary.
- Introduced the Covid Compliance scheme for businesses supported by Covid Support Officers who have conducted over 2500 Covid compliance checks alongside encouraging members of the public to follow Covid-19 guidance.
- Conducted weekly joint enforcement patrols to identify any breaches of legislation and supported West Midlands Police with thematic 'Days of Action' across the city at key hotspot locations including transport hubs, retail and public open spaces.
- Effectively used multi-agency communication channels to positively provide updates on enforcement activity to encourage further community compliance.
- Engaged with thousands of members of the community via bespoke police patrols and by responding to calls from the community regarding breaches of the regulations. Providing accurate advice where appropriate and issuing fines where necessary.

- Taken an intelligence-led approach to proactively engage with employers who are not adequately supporting employee self-isolation measures. The strengthened regulations have enabled conversations with these employers and allowed the correct action to be taken promptly and effectively.

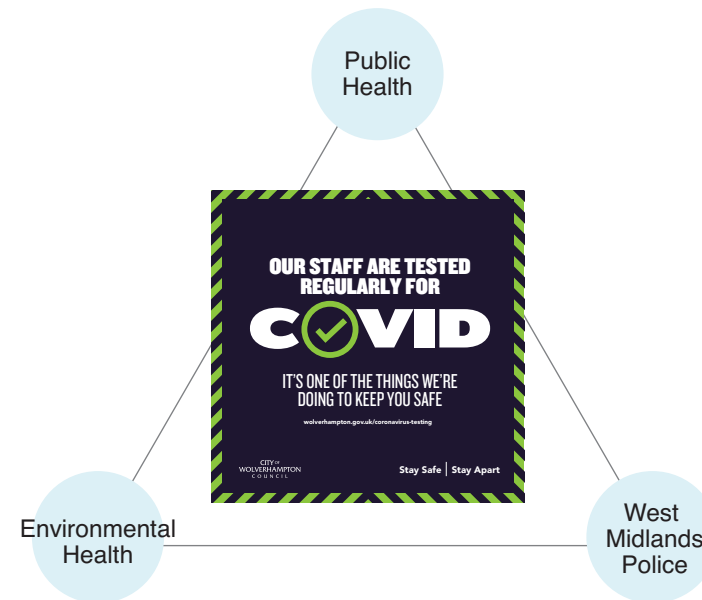


Juicy Fruits, Wednesfield

Our plan is to:

- Continue to support businesses at scale to access routine lateral flow testing, either via the Government's institutional testing offer or by accessing priority slots at community test sites.
- Continue proactive and reactive enforcement activities with West Midlands Police and Environmental Health.
- Support businesses with their internal and external communications to staff and customers showcasing what they are doing to make their establishment 'Covid secure'.
- Proactively support businesses to re-open safely as lockdown eases and continue to collaborate with partner agencies, supporting workplaces to comply with legislation and guidance.
- Continue to support workplaces with outbreak management including practical support for self-isolation.
- Widen the remit of the Covid - Secure scheme to incorporate other venues including faith settings, gyms and close contact services such as hairdressers and tattoo parlours in line with the Roadmap.
- Provide advice and support to the Wolverhampton Safety Advisory Group on the re-opening of events in the city.

As the number of Covid-19 cases reduce we anticipate outbreak management will move to single case management. We may see more people failing to self isolate when infectious. In order to manage this effectively, we will use legislation in the form of Schedule 21, Coronavirus Act 2020. With the support of the police, this will ensure prompt action is taken to screen, assess and where necessary isolate infected individuals, thus protecting the wider community.



Going forward, we will carry out scenario testing, learning from incidents that have occurred over the last 6 months to ensure our management pathways and processes are robust.

The scenarios will look at the support needed to ensure someone can safely isolate and if necessary what laws and legislation may be required should individuals not comply. We will continue to use the same approach as we have to date by encouraging individual to self-isolate and ensure they have access to the resources and services required to do so.

This work cannot be done in isolation and will be a multidisciplinary joint approach between Public Health, Environmental Health, West Midlands Police and Public Health England.

Spotlight on higher risk settings, communities and locations

Workplace testing at Hydrobolt

Prior to the wider roll out of Institutional testing, proactive work was undertaken with businesses to pilot lateral flow testing in the workplace. Pilots were established at three businesses in the city, which were either essential or manufacturing services.

With support and guidance from Public Health these businesses established lateral flow testing on site for their staff. The initial pilots took place over 2 days. All three businesses embraced the testing, participated in the training provided and have continued to test their employees weekly.

Hydrobolt Limited were one of the first businesses to express interest. Testing was completed at the beginning of the shift. The asymptomatic testing found a couple of positive tests amongst their employees. This, however, was positive in re-enforcing the importance and value of regular testing. The employee was able to isolate straight away and prevent any onward spread and large outbreaks.

A representative from Hydrobolt said "The testing has helped us to identify positive cases at the start of a shift and implement quicker isolation measures, instead of people continuing to work and potentially spreading the virus to others."

"We are really glad that we have implemented onsite rapid testing at Hydrobolt; it has helped encourage people to come forward who wouldn't normally have felt the need to have a test as they weren't experiencing any Covid-19 symptoms."

Tackling non-compliant premises

Concerns were raised by West Midlands Police about a severe lack of compliance within a licensed premise in the city centre. The Police raised concerns in relation to capacity, social distancing, failure to record customer information amongst other Covid-19 related measures.

Officers from Environmental Health contacted the business to assess the Covid-19 measures and controls which were in place and provide support to help the business achieve compliance. Despite the extensive support given to the business, officers attended the premises with the Police on two separate occasions and witnessed non-compliance with the legislation. It became evident that the business was not willing to comply with guidance to reduce the spread of Covid-19.

Following further complaints, Officers visited the premises and reviewed CCTV footage, which showed severe non-compliance. It was determined that a direction was necessary to close the premises and protect against the spread of infection. The decision to close was ratified by the Director of Public Health and the premise was subsequently closed in September 2020. Following the issuing of a direction a licence review was held and the premises licence was revoked.

Theme 3:

Community testing

Our approach:

The key focus of community testing in the city has been to engage and empower local communities to lead and deliver testing initiatives. The programme aims to help identify cases as early as possible and stop the onward transmission of the virus, protecting the most vulnerable and reducing the number of infections.

Since June 2020, we have:

- Taken proactive steps to ensure that Covid-19 testing is accessible for both symptomatic and asymptomatic individuals. Between June and October 2020, in partnership with DHSC, five Local Testing Sites for people with symptoms were opened across the city to make testing as accessible as possible to our local communities.
- Worked closely with the Department of Health and Social Care following selection as an early adoption area for asymptomatic testing. This offer allows people without any symptoms of Covid-19 to access testing for the first time. A pilot site was established at the Guru Nanak Gurdwara in Wolverhampton and led the way to the development of many more sites across the city. Working in partnership with the Gurdwara and a group of multi-faith leaders helped to break down barriers to testing, making it both acceptable and accessible to local communities.
- Continued engagement with our local faith leaders and community networks to co-produce a testing programme which meets the needs of local communities across the city. Sites run by local community volunteers and faith groups in familiar locations have been trusted and well utilised, overcoming local concerns and language barriers.
- Developed and delivered a Hub and Spoke Model in December 2020 across Wolverhampton. The city currently has six community Lateral Flow Test sites with the capacity to complete up to 15,000 tests per week. Many of these are in the heart of local communities and are run by volunteers. By March 2021, the community testing programme had completed over 67,000 tests.
- Trained over 300 volunteers and staff as Lateral Flow Test Site Operatives. The face to face training programme provides practical experience in test processing, infection prevention and control measures, ensuring that test procedures are completed to a high level of competency and accuracy.
- Opened a dedicated site to support our Blue light Services, serving West Midlands Fire Service (WMFS) and West Midlands Police staff, making it convenient to access regular asymptomatic testing. The site is staffed by WMFS volunteers.
- Continued to review the testing programme to ensure that it still serves the needs of our communities. In March 2021, Public Health commissioned a Mobile Testing Unit with the aim of bringing testing right to the heart of communities, visiting areas of low testing take up and / or high positivity rates.

- Supported the local introduction of the national Community Collect – Home Testing strand to support local schools to reopen and stay open safely. This has led to a redesign of our onsite provision so that eligible residents are able to conveniently collect their home testing kits, at three local LFT sites.
- Utilised a mixture of social and digital media, leafletting and face to face promotion to promote testing. Translating materials and utilising the language skills of our volunteers and partners has also been welcomed by our diverse communities and removes barriers to testing.



Our plan is to:

Continue to monitor our local community testing programme to ensure it:

- Is responsive to any new arrangements introduced by the national Community Testing Programme.
- Can adapt at pace to deliver new incentives and testing offers to have the widest and most effective reach into our communities.
- Support the Government road map and support Wolverhampton to recover from Covid-19 as we return to 'normal' by continuing to champion the national DHSC and DfE testing strands that compliment the community testing programme.
- Continue to embed testing into business as usual activities, with the ability to step down or increase as required.
- Continue to proactively communicate with key audiences to change behaviour and maintain high levels of testing across the city as part of 'living with Covid-19' and safely returning to our 'new normal'.
- Build on the success of our collaboration with community and faith leaders, and use this knowledge and experience to improve access to testing for other underrepresented groups whilst mitigating areas of concerns, challenging myths and addressing culturally specific concerns, in order to get advice and guidance to a wider number of people.
- Enact our Surge Plan should a variant of concern be located within the city to proactively identify further cases and limit transmission as early and as quickly as possible.

Responding to variants of concern with surge testing

Some variants of Covid-19 are of particular concern because they pose an even greater risk to the public's health. It is vital that we do all we can to stop transmission of these types of variants quickly.

In the event of this happening in Wolverhampton, we will work closely with Public Health England, NHS Test and Trace and West Midlands Conurbation Local Resilience Forum to deploy our local Surge Testing Plan alongside existing testing arrangements, 'hands, face, space' measures and lockdown rules.

The aim of the plan is to enable closer monitoring of the variant to help gain a better understanding of how prevalent it is, whether community transmission is taking place, and to rapidly suppress it where it has been detected.

The plan is based around enhanced, targeted PCR and LFT testing in areas where the variant is first discovered. Every person over the age of 16 will be strongly encouraged to take a Covid-19 test even if they do not have symptoms.

Based on learning from areas that have already deployed surge testing, we estimate that our plan needs to support in the region of 10,000 tests completed. We are confident that our proposed model will provide the capacity to enable us to do this.

Delivery model:

Our plan includes a multi-channel delivery model for access to rapid testing. This includes:

- Booking a test at www.nhs.uk/coronavirus, via the NHS Covid-19 app or by calling 119 for people who have symptoms
- Expanding operations at asymptomatic test sites as required
- Deploying further mobile testing units in target areas for people without symptoms who still need to leave home for essential reasons, such as going to work or to the shops
- Making more home test kits available for people whether they have symptoms or not.



Rapid Testing site, Bantock Park

Communications:

We recognise the importance of engaging with the communities affected as quickly as possible so that we can work together to stop the spread. Our communications plan includes:

- Updating our www.wolverhampton.gov.uk/coronavirus website will provide an overview of the initiative and an up-to-date list of areas targeted for surge testing.
- Highly targeted, locally led communications delivered through tried and tested community channels maximising awareness and understanding of the programme, reminding people of key 'Hands. Face. Space.' measures and offering reassurance. This will be available in a range of formats and community languages.
- Clear and coherent operational guidance cascaded to necessary delivery teams, including Surge Testing Teams, our local Contact Tracing Team and Local Resilience Forum partners.
- Targeted paid marketing to support our local approach as required.
- Working with NHS and other local partners to ensure consistent and timely information is shared through the local governance structure and with the public.

Resourcing

Staff and volunteers will be briefed and deployed to affected areas within 24 hours of receipt of notification from Public Health England. Teams will engage local residents to explain the programme, provide reassurance and dispel myths, encourage participation and deliver home test kits.

Teams will work on a five hour shift pattern, with three patterns working systematically throughout the day, seven days a week for an agreed period of time areas supported by local intelligence.

Support to Self Isolate

Our plan will be complemented with robust support to assist those who are required to isolate to do so safely and effectively.

Spotlight on community testing

Blue Light Test Site

The Blue Light Test Site, the first of its kind, opened at Fallings Park Fire Station in December 2020. The site is operated by West Midlands Fire Service (WMFS) staff volunteers and is open to WMFS and West Midlands Police staff and their households who live or work in Wolverhampton.

Phil Loach, Chief Fire Officer for West Midlands Fire Service, said: *"We continue to be ready, willing and able to support our communities in whatever ways possible during this pandemic. I am very grateful to our incredible staff who have volunteered to carry out the tests and to be tested themselves."*

"Infection rates across the West Midlands still remain high. By regularly testing our staff, we can ensure we remain as prepared and healthy as possible to serve our communities. It will also provide an extra level of comfort and reassurance to our staff and their families, as well as our police colleagues."

Chief Superintendent Andy Beard, Commander at Wolverhampton Police, said: *"This is a fantastic local resource, to get quick tests to keep our emergency services running – particularly through the festive period. We look forward to supporting this initiative in the future with the Fire Service and City of Wolverhampton Council."*

Faith Community Testing

Faith settings have been key to the successful delivery of our nationally recognised community testing programme. Wolverhampton held the first faith-led test centre at the Guru Nanak Sikh Gurdwara Sedgley Street staffed by community volunteers. Faith leaders have tackled many difficulties during the pandemic and as community leaders have remained connected with communities, reaching those that are most vulnerable.

Mohammad Shafiq, chairman of the Jamia Masjid Bilal Mosque which has hosted a local asymptomatic testing site since December, said: *"During the coronavirus pandemic we have been able to support the local community within Wolverhampton through the test centre here at the mosque."*

"The many volunteers that have dedicated their time and efforts have helped the community to feel welcomed, comfortable and safe, and we are seeing members of the community and local businesses returning for weekly tests."

"It is important that we continue to take measures such as testing and vaccinations to ensure that we can be together again soon with our loved ones, family and friends."

"The asymptomatic testing centre had brought the community together and enabled people to support the fight against Covid-19."

Theme 4:

Contact tracing

Our approach:

The focus throughout the pandemic has been to support high risk settings.

Since June 2020, we have:

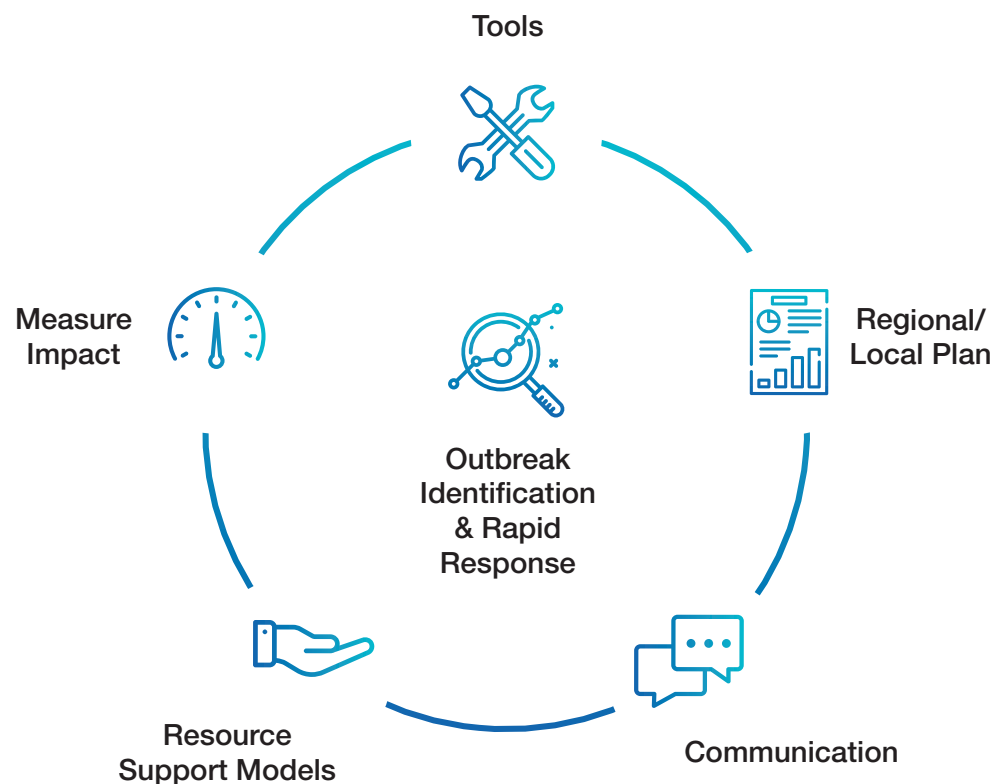
- Played a key role in supporting Public Health England (PHE) with a co-ordinated response to outbreaks across the city. This has seen the Local Authority Health Protection team take on a significant role.
- Established a core team of Public Health professionals who managed all high-risk setting outbreaks, with input from PHE for large outbreaks.
- Continued delivery of the multi-agency Wolverhampton Outbreak Response Group which has brought together key, local system partners every week to discuss all outbreaks across the city in high risk settings. This included partners from PHE, CWC Public Health, Environmental Health, Adult Social Care, Education, The Royal Wolverhampton Trust and Wolverhampton Clinical Commissioning Group.
- Maintained open feedback loops with key strategic and executive partners on lessons learnt from local outbreaks via the Wolverhampton Strategic Co-ordination Group, City IMT, Education IMT and Business IMT.
- Commissioned a dedicated Covid-19 Infection Prevention Control (IPC) Team to focus on care homes and other care settings, ensuring we protect the most vulnerable people across the city, and provide a reactive service for outbreak management. This has helped the local system cope with the demand on local NHS services through infection prevention and outbreak management, ultimately reducing the number of admissions to hospital.
- Established a dedicated helpline for local schools to report positive cases directly to the Health Protection team, which enabled quick and timely risk assessment and contact tracing of cases. At its busiest time, the helpline received up to 60 contacts per per day.
- Developed a bespoke testing option for active case management for outbreak management in high risk settings.
- Addressed compliance issues through the establishment of a joint approach between CWC Public Health, Environmental Health and West Midlands Police to ensure we continued to protect the risk to the public throughout the pandemic.
- Established a local Test and Trace team to support 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 is contacting cases that are unanswered or incomplete with the national team.

Our plan is to:

- Continue to invest in measures to prevent Covid-19, with a focus on supporting those who are vulnerable and most at risk.
- Plan how high-risk settings' "new normal" will look and the support required to focus on key areas of prevention. This includes settings where we see larger numbers of working age population where vaccine roll out may be slower due to the size of the cohort and transmission of the virus is anticipated to continue in the short term.
- Prepare for winter season 2021, continuing to commission a dedicated Covid-19 IPC team until at least the end of 2022, alongside other winter infections including flu.
- Continue to monitor the local picture of Covid-19 through new cases and new variants in order to prepare surge capacity within the team to support outbreak management.
- Continue to review the testing options available to enable us to stem outbreaks earlier and quicker.
- Further develop our flexible approach to outbreak management and single case management. This will include contact tracing, IPC measures, testing, addressing quality and safeguarding concerns and potential closure of settings.
- Focus on prevention of outbreaks in settings, encouraging compliance and Covid-19 safe environments for both employees and service users to support the reopening of social and economic life.
- Support for self-isolation and compliance will continue to be scenario tested and updated as legislation changes.
- Establish a 'doorstep' offer to support the local contact tracing team by making face to face contact with those who are not answering calls or have not provided telephone numbers.
- Continue to explore the feasibility of implementing the Local-0 pilot to support early contact tracing of positive cases. This will enable the team to conduct contact tracing after approximately one hour of a positive test result being identified. We believe that with the capacity within the team, the local telephone number and the local referral offer for those who are vulnerable we will achieve a higher contact rate. We can also refer directly to the local Health Protection Team where concerns are raised.
- Continue to use the PHE Covid-19 Situational Awareness Report to identify unknown and new outbreaks. This allows us to link themes and trends at a local level through the common exposures list provided by NHS Test and Trace.
- Expand the utilisation of NHS Test and Trace and PHE intelligence reports to inform Enhanced Contact Tracing (ECT). In addition to detecting index cases and their contacts, this will enable us to use backward tracing to identify places of transmission. This can help to detect primary cases, additional index cases and other cases that are part of an outbreak.

- Continue to assess places of transmission through data, intelligence and ECT to support Outbreak Investigation and Rapid Response. This will allow effective systems and ways for us to work as a local authority in conjunction with our neighbouring local authorities and the Midlands Region in partnership with Public Health England.
- Continue to work with our local area Health Protection Unit to co-design outbreak management surge capacity to respond to a new local or national wave if it were to occur, using some of the tools from the ECT toolkit to see how this can be further enhanced.

Outbreak Identification and Rapid Response (OIRR) Framework Approach



Contract Tracing in High Risk Settings – Outbreak Management

- Going forward, some elements of our local outbreak management response will return to Public Health England. This will enable the CWC Health Protection team to further develop work in the ‘new normal’, support local sectors to reopen safely as lockdown eases and as we begin to return to some business as usual activity.
- Outbreak management has always been a core part of local Health Protection team tools and will continue to be built into our business as usual arrangements, lending to our strengths of local knowledge and expertise, along with partnership approaches.
- Any large outbreaks that require testing interventions to be deployed will be carried out by the RWT Infection Prevention Team.
- Throughout the pandemic Public Health England has been a vital escalation point for any incident, cluster or outbreak should the support be required. This well established partnership underpinned by an agreed MOU will continue.



Covid Support Advisor

Spotlight on contact tracing

Health Protection Team

From November 2020 to February 2021, the Health Protection team led and provided input into over 100 Incident Management Team meetings for some of the more complex outbreaks across the city.

At peak weeks of the pandemic up to 120 notifications were received by the Health Protection Teams who completed risk assessments to ensure cases were isolated, contacts traced, and appropriate infection prevention control measures were in place.

'Throughout this difficult period, we have had excellent support from our local Public Health team who have consistently given us well-informed and timely advice. This has allowed us to incrementally refine our systems in school and reduce the number of possible contacts created. Our overall attendance throughout this half-term has also been far better than might have been expected in such circumstances, for which I am very grateful to you.'

Graham Tate, Head Teacher, Highfields School.

'The whole process of managing the outbreak with the advice from PH was excellent. In the short space of time in which the outbreak went from one person infected to six was one week and I am sure if we hadn't contacted PH on the first day of the first case to ask for advice, then the whole site would have been closed. You recommended the remaining employees attended a walk in centre close by for weekly lateral flow tests which gave us confidence to continue with our operations. These employees still attend for testing to date.'

Cliff Butcher, Health & Safety Manager, James Durrans & Sons Ltd

Local Contact Tracing Team

On 11 December 2020, the local contact tracing team was established to take on Tier 2 calls from NHS Test and Trace. The team connected with the most hard-to-reach positive cases that the national NHS team has been unable to contact, so that contact tracing could be completed with them.

The local team has contacted over 3,000 positive cases to date. They are also able to make direct referrals to the Stay Safe Be Kind Hotline for those who are struggling with self-isolation to provide financial support, food parcels or refer for mental health and wellbeing advice.

Theme 5:

Data integration and information sharing

Our approach:

The availability of data has improved dramatically since we wrote our Outbreak Control Plan. We use data to help us to understand the spread of Covid-19 in Wolverhampton and direct our efforts to those areas where it will have the biggest impact.

There is now a publicly available national dashboard which provides much of this information at Local Authority level.

Since June 2020, we have:

- Established access to key data sources; all test results, case details, outbreak information and contact tracing data is now available to the Director of Public Health. Much of the data processing has been automated within dashboards provided by Public Health England and NHS Digital.
- Used local sources of data where they contain more timely or detailed information when that is necessary; for example, using data from the social care situation reports to assess vaccination uptake for care home staff.
- Provided weekly and daily summaries of the changing epidemiology of spread in Wolverhampton, so that the city strategy could be targeted to meet the need at the time.
- Shared information about patterns of spread with teams supporting businesses and high-risk settings, so that information can be disseminated, either to reassure or promote action.
- Established a data flow from the national Test and Trace system, so that our local Test and Trace team can contact people who the national team have not been able to get in touch with.
- Analysed testing data to show uptake across the city, which has enabled the Testing team to set up new sites to ensure that all areas of Wolverhampton have good coverage.
- Utilised case data, split by symptomatic PCR testing and asymptomatic lateral flow testing, and broken down by age group, geography and ethnicity, to help us to spot clusters of spread or changing patterns due to vaccination uptake.
- Analysed national survey data to provide weekly estimates of the true underlying prevalence of the virus in the population. This is based on a random household survey, which is not affected by changes in testing availability or uptake.
- Evaluated vaccine uptake by deprivation, ethnicity, geography and GP practice using aggregated vaccination data from GP systems. This data assists local GPs and Community Champions to understand where they can add additional clinics or outreach work to minimise inequalities.
- Tracked NHS data on staff absence levels, trends in new Covid-19 admissions, the current number of Covid-19 inpatients and people on Intensive Care Unit, and Covid-19 deaths in hospital to allow us to understand the impact of Covid-19 on hospital capacity and usual services, and the knock on effects on social care input that might be required when people are discharged.

- Conducted equity audits of the first phase of the vaccination programme; access to vaccination data from partnership working with Primary Care has also allowed us to provide a detailed breakdown of vaccination uptake by key demographics and geography, so that communication and outreach work can be tailored.
- Carried out simulation modelling to plan for the set-up of larger vaccination centres in leisure facilities, to support General Practice with the scaled-up provision of vaccines to vulnerable people.

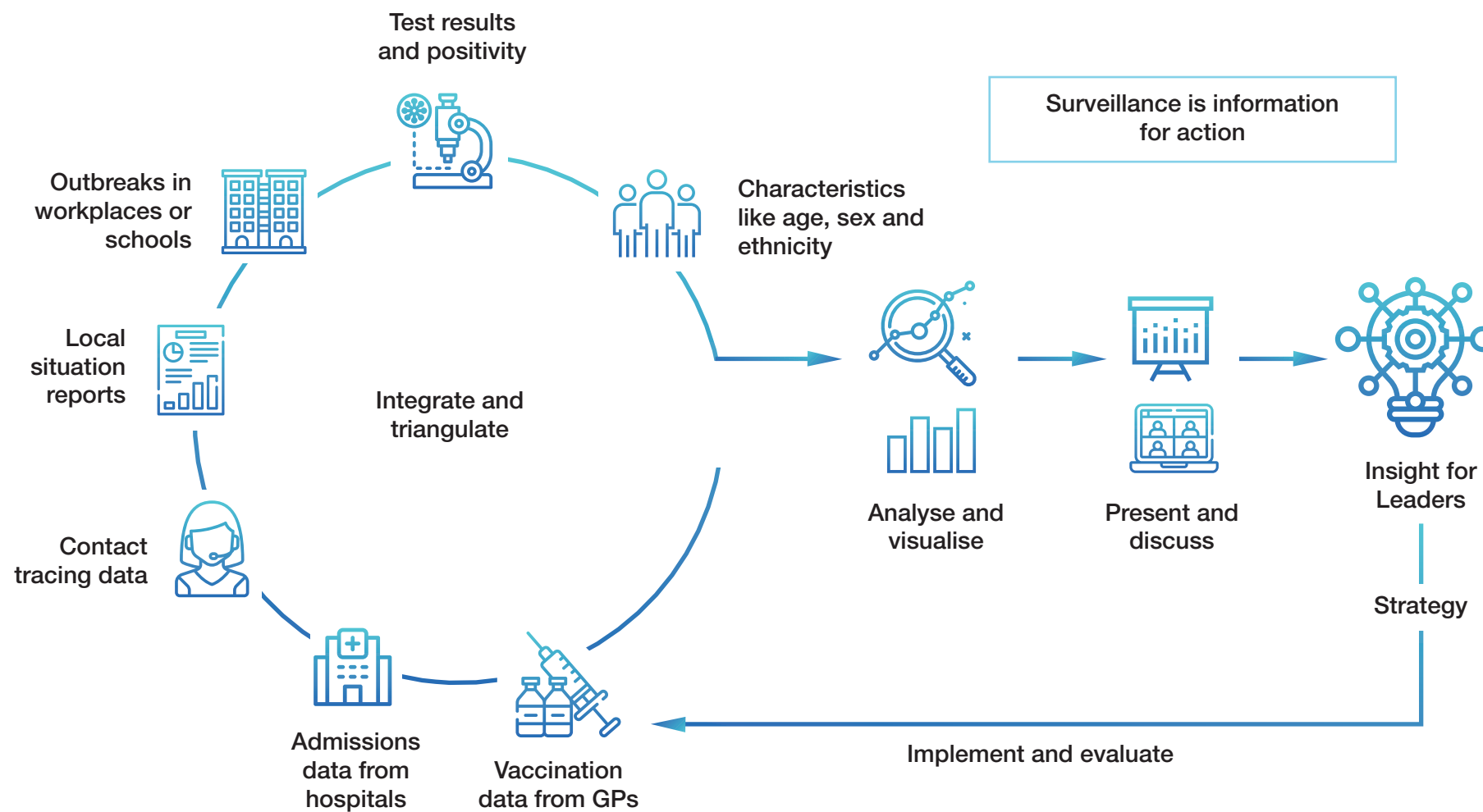


Vaccination centre at WV Active Aldersley

Our plan is to:

- Continue to adapt our approach according to the phase of the pandemic. Looking forward over the next phase of the pandemic, the focus of surveillance will be to monitor for any signs of resurgence or enduring transmission within particular locations, settings or groups of the population, so that action can be targeted appropriately, and mitigations can be put in place where inequalities are observed.
- Ensure that we are providing the most reliable insight, taking the strengths and weaknesses of different data sources into account.
- Monitor the introduction of widespread asymptomatic testing as this may result in an increased case rate even when the prevalence remains steady so careful triangulation of case data with other survey data and prevalence estimates will be required, to provide an objective view of the level of transmission in the community.
- Work with colleagues in Information Governance to track the sharing and use of data under the Coronavirus Act and to ensure that it is stored securely and accessed appropriately.
- Work closely with PHE to understand local, regional and national epidemiology in order to shape appropriate local responses to new variants, which will include plans for a surge testing response, appropriate contact tracing and wider community engagement and communications activities relating to this.

Spotlight on surveillance



Theme 6:

Vulnerable communities

Our approach:

Local data and intelligence continue to underpin a place-based approach to targeting communities with the greatest need for support and assistance. This may include people living in areas of high deprivation or specific disadvantaged groups.

It also helps inform and develop communications to ensure they are accessible e.g. tailored Q&A sessions with specific settings/ groups, provision of key messages in a range of languages and providing information in a format that is best suited to the audience – direct mail, easy to share short social media videos, and easier to read formats etc.

Since June 2020, we have:

- Continued the dedicated Stay Safe Be Kind (SSBK) phone line established at the start of the pandemic to support residents to self-isolate, shield and remain safe and well.
- Extended support to residents identified as Clinically Extremely Vulnerable, providing food parcels, wellbeing calls and financial advice as required where residents have no other support networks in place.
- Provided support and resilience to the city's Food Banks to enable them to continue to reach out to people with financial vulnerabilities.
- Promoted community resilience to ensure residents have the right advice and support when needed through continued work with community partners, health and social care providers, and mental health services.
- Established a Faith Group, working closely with our local faith leaders to support them to facilitate safe prayer and operate Covid-secure venues. The faith leaders have been vital in supporting us to share messages about Covid-19 within their communities and across their congregations.
- Delivered lateral flow testing pilots to key underrepresented groups in partnership with DHSC to P3, The Good Shepherd, Recovery Near You and The Haven.
- Strengthened our work with community and voluntary sector partners to support residents through the establishment of a 'Community Champions' programme, involving a network of grass roots advocates and 100 voluntary sector organisations.
- Raised over £107,000 through our One City Fund crowdfunding platform to support vulnerable residents suffering from financial hardship, homeless people, disabled people, people with mental health issues and people who have no access to technology who are unable to access important services or information. Funds were also raised to support local food banks and not-for-profit food suppliers tackling food poverty in the city.

- Provided a directory of national resources and campaigns to promote mental health and wellbeing, including Every Mind Matters advice and tips on staying well and supporting others. Resource topics included keeping well in lockdown, managing changes in working remotely, being furloughed, as well as issues such as debt, housing, bereavement and domestic violence.
- Communicated support initiatives both universally via media channels and radio interviews, as well as through a wide range of strategic partner channels including Apps and digital newsletters to mental health services users, care givers and staff in Black Country Health Care (BCHC) services.
- Convened weekly STP meetings with Public Health, CCG commissioners, BCHC and voluntary sector colleagues to enable a strategic approach to decision making across all aspects of wellbeing promotion, early intervention and service provision for those with serious mental illness (SMI).
- Facilitated Safeguarding Board reviews of local mental health data to enable timely reflection by multiple strategic partners on developing trends around service utilisation – this work will continue to inform new approaches.
- Taken key messages on mental health support and available services out to BAME communities across the city via the BCHC community development workers (CDWs). The CDWs have worked closely with Public Health to also empower local Health Champions to communicate these messages to migrants and refugees across the city.
- Provided people experiencing low mood, stress or anxiety with access to NHS support including audio guides and other practical tools as well as sign posting to the Wolverhampton Healthy Minds services.
- Together with the CCG and Primary Care, responded to lockdown challenges using digital technology and reviewing prescribing pathways to meet service user needs.
- Via the University of Wolverhampton (UoW), ensured a range of support pathways were available for students affected by lockdown, or needing to isolate – along with links into local CWC support.
- Developed an evidenced based mental health resource for distribution at vaccination sites with key contacts and local support services.
- Supported vulnerable residents to access voluntary sector led well-being calls and on-going support to the lonely and vulnerable, with many voluntary community sector settings remaining open for face to face meetings.
- Worked in partnership with the voluntary sector on co-ordinating a city volunteering response to provide crucial resource in supporting the roll out of testing and vaccinations.

Our plan is to:

- Develop a needs-based accommodation offer for people living in poor housing conditions or overcrowded accommodation where effective self-isolation may be challenging and the risk of onward transmission of the virus is high.
- Further develop the Community Champions programme to reduce the disproportionate impact of the virus on specific communities. Targeted funding and resources will be provided to specific communities, creating sustainability and resilience, and helping to shape future local approaches to health improvement.
- Continue to support underrepresented groups such as homeless people and asylum seekers to register with a local GP. This will ensure that they are included in the Covid-19 vaccination programme, and can access healthcare in the longer term.
- Continue to identify and reduce health inequalities linked to or amplified by Covid-19, through place-based interventions and sustainable solutions in communities.
- Enhance our offer of practical support for self isolation. This includes increasing awareness and uptake of the extended Test and Trace Support payment of £500. The extension includes parents / guardians who satisfy the criteria where their children have been advised to self-isolate.
- Review available data across the city to understand emerging mental health challenges and engage with local stakeholders and communities to understand how the pandemic has affected the mental health of people locally.
- Refresh our range of mental health resources available on the SSBK digital platform.
- Continue to work with our strategic partners from the CCG, Primary Care, BCHC, Wolverhampton Voluntary Sector Council and wider agencies to ensure a joined-up approach across all workstreams, including supporting NHS vaccine roll out to those patients in local mental health services.
- Input into the STP-wide transformation of community services for people with serious mental health illness and their care givers.
- Continue to support the wellbeing of CWC staff via regular staff wellbeing webinars and our Employee Assistance Programme (EAP). This provides a wide range of mental health support tools and services, as well as access to staff trained in mental health first aid (MHFA).
- Support the local NHS, Social Care, CWC and voluntary sector frontline workforce to access universal and targeted mental health support resources. This is alongside Wolverhampton Healthy Minds services and the Black Country Health Care 24/7 support line who support people experiencing a mental health crisis.

Spotlight on vulnerable communities

Community Faith Led Partnerships

Faith Leaders and places of worship have remained a vital link in supporting communities to stay protected throughout the pandemic. Places of worship are integral to communities, both practically and pastorally and Leaders build trust and hope, to counter fear, negativity and myths, whilst building both community and individual resilience.

Since March 2020, the Director of Public Health has hosted meetings with faith leaders on a weekly basis to encourage, educate and support compliance for places of worship. Through this network, leaders are encouraged to share best practice and are offered guidance and support with risk assessments from the environmental health and public health team. Many places of worship have continued to be physically closed based on discussion and information shared and continue with online services taking careful steps to ensure that they are Covid compliant before opening.

Faith leaders seek guidance on the safe reopening of their places of worship and have sought advice and guidance from the Director of Public Health on many areas that impact on their community such as weddings, funerals and religious festivals as well as community concerns and questions around testing and vaccinations.

Community Champions

Community Champions were established in partnership with the NHS, through the Local Outbreak Engagement Board and co-ordinated by the Learning Communities Partnership and other voluntary sector organisations.

Activity has included outreach services, Covid-19 Safety Packs, regular radio messaging by community and Faith Leaders in over 10 languages, young people's Stay Safe competition, social media videos and animations and befriending calls to older people.

Community Champions are working in partnership with the CCG to support the rollout of the vaccine in target communities across the city which is informed by joint intelligence.

Theme 7:

Interface with the vaccine roll out

Vaccines are at the heart of the Government's strategy to manage Covid-19. The Wolverhampton Clinical Commissioning Group lead on the local vaccination programme supported by a 'One City' approach. In Wolverhampton, the first Covid-19 vaccine was given on 14 December 2020.

In December the NHS launched the largest vaccination programme in its history.

Since then, the NHS, working closely with the City of Wolverhampton Council and other partners, has successfully established the Covid-19 vaccination programme in the city. To date we have:

- In cooperation with The Royal Wolverhampton NHS Trust, successfully vaccinated the majority of front-line NHS and social care workers in the city, with an offer made to all eligible staff and have rolled out the offer of vaccination to local people in line with the priorities determined by the national Joint Committee on Vaccination and Immunisation.
- Worked in partnership with local GPs via Primary Care Networks and The Royal Wolverhampton NHS Trust, to get as many eligible front-line staff and residents vaccinated as possible. This is being proactively driven by a 'One City' approach, coordinated via the Wolverhampton Covid-19 Vaccine Partnership Working Group and informed by learning from successful interventions to promote and embed community testing.
- As part of the 'One City' approach, established two large GP-led vaccination sites in the city at WV Active Aldersley Leisure Village and Bilston Bert Williams Centre - both council-owned venues, as part of a network of GP sites across the city.
- Provided bespoke LFT testing for support staff at vaccination centres to ensure a covid secure location and the safety of staff and patients.
- Facilitated GP Practice sites to further support local roll-out via key council services; this includes allocating assets and staff to sites, providing expertise in site builds, highways management, and communications and engagement with local population groups.
- Established a contact centre to support local GPs to get residents booked in for their vaccine, offer transport to and from vaccination sites and pro-actively contact people yet to take up vaccinations. Nearly two thirds of proactive calls made to date have resulted in residents taking up the vaccination offer.

Our plan is to:

- Continue to work with the NHS to ensure GP records for adults with learning disabilities, those diagnosed with a severe mental illness, vulnerable residents and any unpaid carers looking after some of the most vulnerable are kept up to date – in preparation for inviting them for their vaccination in the short term, whilst also providing them with access to primary health care for the longer term.
- Develop an agreed methodology to further improve equity and access to vaccinations, including opportunities for targeted intervention for anyone not registered with a GP and any other marginalised or vulnerable groups.
- Continue to engage with residents and break down barriers, listening to and addressing concerns about accepting a vaccine and co-producing solutions to increase take up of the vaccine across the city.
- Further enhance vaccine roll out by linking into and crosscutting several of the themes in this plan (including Data Integration and Information Sharing, Vulnerable Communities, and Communications and Engagement) with the aims of ensuring that no one in the city is left behind and increasing the protection of the population as a whole.

Spotlight on interface with the vaccine roll out

Vaccinating People Experiencing Homelessness

People experiencing homelessness face reduced access to healthcare and experience some of the highest rates of poor health outcomes and undiagnosed health conditions in the population. Many people from this group are likely to have health conditions that put them at a higher risk of death from Covid-19. Therefore, offering the vaccine to this group will help us protect people who are at greater risk, ensuring that fewer people become seriously ill or die from the virus in the city.

On 13 February 2021, the Council, CCG, local GPs, provider support agencies and voluntary and third sector organisations worked together to vaccinate almost 180 people who are experiencing homelessness, including rough sleepers and the staff and volunteers who work in close contact with these vulnerable individuals, in line with national Joint Committee on Vaccination and Immunisation guidance.

A small task group was established with representatives from Public Health, Local GP and Clinical Director leading on vaccination roll out in the city, Good Shepherd Ministry and the CWC Homelessness Strategy Team. The group agreed to utilise existing links and capitalise on the relationships that provider organisations have with their clients and service users in order to maximise uptake.

Vaccinating People Experiencing Homelessness continued...

The Homelessness Strategy Team played a pivotal role in disseminating information on booking and data collection with key organisations who were in turn encouraged to collate information and hold discussions with individuals. Part of this process involved registering people with a GP where they were not previously registered. This helped to establish sustained longer-term care pathways for people by improving access to care.

The vaccination roll out built upon the success of the two day lateral flow testing pilot at The Good Shepherd Ministry on Waterloo Road in January 2021 – which saw partnership working between the Council, Department of Health and Social Care, The Good Shepherd, P3 and Recovery Near You to offer testing to this vulnerable cohort and raise awareness of the virus.

Both the clinical infrastructure and prior engagement with the target group were in place to make The Good Shepherd a suitable vaccination centre. The established links with the target group and the setting were key to encouraging take up of the offer.

Dr. Kamran Ahmed and his team from Unity Primary Care Network undertook the vaccines on site. Staff and volunteers who were able to travel were invited to the Aldersley clinic for their vaccine the week before the planned clinic. This enabled staff to talk to key service users about their personal experience in having the vaccine and answer any concerns they may have had.

Staff from key agencies were present on the day to support clients and service users through the vaccination process and to offer a familiar face. The Good Shepherd team supported throughout the process and further encouraged uptake by offering a fast track to anyone taking up the vaccine to get their usual food parcel service collection which operates from the Ministry.

Overall, this was a very successful delivery model which benefitted greatly from the joined up working and fantastic rapport and existing relationships that services have with this vulnerable group. Plans are in place to return to the setting in the near future to offer second doses and make an offer to any people who may have not received the vaccine first time around.



Theme 8:

Governance and local boards

Our approach:

Sound and effective governance arrangements at executive, strategic and operational levels remain critical in delivering the outbreak management response for the city, particularly as we seek to break the chains of Covid-19 transmission to enable people to return to and maintain a more normal way of life.

This is supported by established mutual aid agreements across the region and robust processes in place should they need to be called on.

Our Outbreak Control Plan is jointly owned, supported and driven by the City of Wolverhampton Council, Royal Wolverhampton NHS Trust, Wolverhampton Clinical Commissioning Group and West Midlands Police. Leadership is provided by Wolverhampton Healthwatch, Black Country Partnership NHS Foundation Trust, Public Health England, NHS England, Wolverhampton Voluntary Sector Council and the Ethnic Minority Council - Wolverhampton Equality and Diversity Partnership, via the Local Outbreak Engagement Board oversight.

This 2021 refresh has been co-authored with system partners and informed by the Education and City Incident Management Teams. Additional assurance has been provided by the membership of the Wolverhampton Covid-19 Strategic Co-ordination Group and Local Outbreak Engagement Board.

Since June 2020, we have:

- Built on the pre-existing foundations of strong partnership working in the city to enable the partnership framework established at the start of the pandemic to strengthen and mature, supported by a governance structure with clear roles and responsibilities.
- Fully embedded Clinical Governance and kept under review per existing arrangements with a combination of:
 - The Covid-19 Outbreak Response Group on standby providing Public Health leadership and infection control expertise, in partnership with PHE, NHS, Environmental Health and other key partners.
 - The local gold (Strategic Coordination Group) provides key strategic leadership direction with relevant stakeholders such as PHE, West Midlands Police, NHS, reviewing capacity management to deliver all aspects of the plan whilst taking account of business as usual activities, providing resource co-ordination, analysis, scrutiny and assessment of any clinical governance impacts across the health and care system that may require mitigation strategies to be deployed.
 - A Local Outbreak Engagement Board, chaired by the Leader of the Council, providing public engagement and community leadership, including a focus on building trust and participation across all communities in the city.

- Deployed thematic multi-agency Incident Management Teams (IMT) to further support the existing governance structure, with frequency of meetings and partners involved flexed dependant on city case rates or time-specific issues, such as closure/ safe re-opening of leisure and retail, support to schools, education, care homes.
- Established a Wolverhampton Covid-19 Vaccine Partnership Working Group to coordinate a 'One City' response to supporting local vaccine roll out to best meet population need, underpinned by regular reporting of equity data.

Our plan is to:

- Maintain the Strategic Co-ordination Group arrangements that will continue to provide leadership on the approach to tackle the impact Covid-19 has on the city.
- Continue to use the regular meetings of the Local Outbreak Engagement Board to provide democratic oversight, assurance and scrutiny of:
 - Plans to prevent and manage outbreaks of Covid-19 in Wolverhampton
 - Actions taken to prevent and manage outbreaks and their outcomes
 - Ensure that the Test and Trace response in Wolverhampton is delivering the right interventions to protect the health and wellbeing of all citizens
- Engage and communicate with residents and stakeholders to build trust and participation across all communities in the city.
- Help embed the 'new normal' into the city with safe reopening of services whilst prioritising residents safety
- Keep local and system governance arrangements for the Outbreak Control Plan under review as we progress through the different stages of the Roadmap, with oversight provided by the Local Outbreak Engagement Board at bi-monthly public meetings, in conjunction with Wolverhampton Health and Wellbeing Board, known locally as Health and Wellbeing Together.
- Work with partners to develop and implement a Health Inequalities Strategy for the city over the next year driven by the Health and Wellbeing Together Board and aligned to the Wolverhampton Relight our City Strategy and the Public Health Annual Report 2020.
- Refresh our current programme management approach to ensure it aligns with this refreshed Outbreak Control Plan and stages within the national Roadmap.

Communicating our plan

Our approach:

We understand that to deliver a successful response to the pandemic, local people, communities, partners, businesses and organisations must recognise, trust and be part of our approach.

Clear messages on what to do to stay safe and well, how to access support as well as sharing the latest national guidance are targeted to reach everyone - no matter where they live, work or travel. This is supported by our collaborative approach to Covid-19 communications, working from day one of the pandemic with partners including the NHS and West Midlands Police, allowing us to jointly deliver consistent messages under a joint brand.

Listening, learning and refining communication methods based on feedback continues to be central to our approach. Co-production of materials and activity to build trust and extend reach, including using a mixture of traditional and new communications channels as well as a broad range of media outlets is key. Examples include virtual meetings, personalised letters, social media posts, local radio stations, information in different languages.

Since June 2020 we have:

- Further developed our established Covid-19 Communications Working Group (consisting of colleagues from Public Health and Corporate Communications) adopting a collaborative approach to communications with internal colleagues as well as recognised 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.
- Shared potentially life-saving messages to hundreds of thousands of residents – keeping them informed of all changes and update to local and national guidance including multiple Covid-19 tier changes and national lockdown – ensuring compliance with 2.9million engagements on social media and almost 800,000 unique visits to our key Covid-19 webpages since the beginning of the pandemic.
- Maximised coverage of universal media to reach as many city residents as possible, with council coverage on BBC National news, ITN, Sky News, Good Morning Britain, Radio 4, 5Live, Gulshan Radio, and a weekly slot on Wolverhampton Community Radio.

- Produced and sent letters direct to the homes of tens of thousands of our most isolated and vulnerable residents – letting them know what help and support was available to them.
- Communicated directly with city businesses so they could access lifesaving grants, promoted the reopening of our highstreets to kickstart the economy and established a website from scratch to help local businesses trade online when they couldn't open their doors before Christmas.
- Co-produced materials and activity led by our network of Community Champions and supported by community leaders, including local councillors.
- Established a website that allowed parents to make sure their children didn't go hungry and access free school meals we made available over half term.
- Produced and sent letters direct to the homes of tens of thousands of our most isolated and vulnerable residents – letting them know what help and support was available to them.

Our plan is to

- Ensure the Local Outbreak Engagement Board continues to have oversight of strategic communications and engagement work. Local communications will continue to be led by City of Wolverhampton Council Communications Team in conjunction with NHS and West Midlands Police Communications Teams and other partners as appropriate.
- Maintain our Covid-19 communications framework first based on the key elements of Prevention, Support and Outbreak Response. First introduced in our Local Outbreak Control Plan published in June 2020, the framework enables proactive and reactive communications to be released with the mode and frequency determined by level and immediacy of risk.
- In the event of an outbreak, the Director of Public Health will continue to lead communications in conjunction with Public Health England. Our local governance structures are utilised to ensure that any information requiring dissemination is done so in a responsible, efficient and effective way.
- Continue to tirelessly promote our Covid-19 testing offer as a key part in driving down city infection rates.
- Continue to help people understand the rules for every step of the 'roadmap out of lockdown'.

- Increase awareness of the support available for people who are required to self-isolate.
- Boost uptake of the vaccine by sharing bespoke information directly with local communities to bust vaccine myths, making sure they get the lifesaving jab. This includes harnessing the support of key local leaders and city assets.
- Ensure our wider community engagement work continues to compliment the Project Relight campaign as we move through the next phase of the pandemic to recovery.
- Continue to expand the good work of the Wolverhampton Equality and Diversity Partnership delivering Covid-19 key messages in Gujarati and Punjabi. Sessions in Urdu, Hindu and other community languages are being added to the schedule.



Wolverhampton High Street

Spotlight on communicating our plan

Communications – using city stakeholders to deliver key Covid-19 messages

We have worked with an extensive range of influencers, partners and stakeholders throughout the pandemic to co-produce and deliver key Covid-19 messages.

From working with Councillors to deliver messages into the heart of their constituencies, to teaming up with Wolverhampton Wanderers and benefiting from their world-wide profile, we have created bespoke messages for target audiences.

Video scripts were prepared for Councillors to share in multiple languages, stressing the importance of following local restrictions to prevent the further spread of the virus.

Meanwhile Wolverhampton Wanderers have used leading players to urge their young fanbase to keep friends and family safe. More recently, head coach Nuno shared our key messages on taking the vaccine during a pre-game press conference.

By providing our valued partners with accessible key messages, we have been able to take a 'One City' approach to tackling the pandemic, drive down infection rates and help our most vulnerable access support, keeping our city safe.



Conor Coady

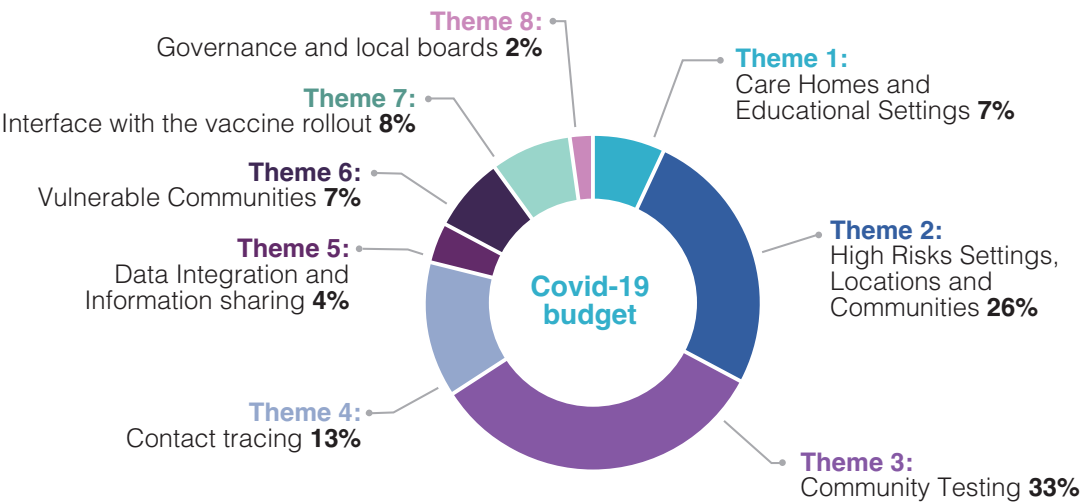
Resourcing our plan

The effective implementation of the Local Outbreak Control Plan requires financial resource and capability as well as staff skills and expertise.

Nationally, the Government has indicated that in 2021/22 it will provide £400million funding from the Contain Outbreak Management Fund to local authorities to continue to support the local response to Covid-19 over the coming months.

Locally this funding will be used to support a range of teams and services contributing to the Covid-19 response, ensuring that they are appropriately resourced with information, training and additional capacity where necessary.

We have broadly aligned our Covid-19 budget allocation to the themes of our Local Outbreak Control Plan:



These allocations will continue to be reviewed as we move through the Roadmap stages and may be reprofiled if required, based on emerging priorities.

We continue to draw on the multi-agency capabilities and expertise of our key partners, operating as a whole system, to support these efforts in response to the changing landscape of the pandemic. To date this has enabled efficient use of capacity and resources across the system to respond swiftly and effectively at scale where needed.

The additional Contain funding ensures that sufficient capacity is secured to support the implementation of the Local Outbreak Control Plan into the future. It also means that surge capacity requirements can be built into ongoing planning based on a reasonable worst-case scenario i.e. an outbreak of significant size / complexity or multiple concurrent outbreaks.

The volume, scale and complexity of incidents is difficult to predict however further alignment of operating procedures, resource deployment / redeployment, recruitment and investment in commissioned services will support this capacity plan.

There are also additional resources to support clinically extremely vulnerable people who have been advised to shield and those people who are instructed to self-isolate. Looking ahead, a broader self-isolation support framework will be developed to ensure we have an effective approach that meets the needs of local clinically extremely vulnerable people who may need to continue to shield, people who have been instructed to isolate and people who are not currently engaging with testing and isolation requirements.

Challenges in delivering our plan

CHALLENGE	IMPACT	MITIGATE
Local Outbreak Control Plan and response can influence the spread of infection within the city but cannot totally control it	Residual risk that measures are inadequate, leading to resurgence of the virus locally	Accurate real time surveillance and robust review and governance in place locally. Escalation as necessary.
Cross border issues/ regional issues	<p>We have limited influence on the spread of infection in neighbouring areas. We need to work with neighbouring areas to keep up to date and on top of any resurgence.</p> <p>Vaccine supply chains are controlled by national distribution teams in NHSE/I and this can sometimes lead to under or over supply of stock to certain local areas which goes beyond the required capacity.</p>	<p>Engagement with Regional Convener team and Public Health England to understand epidemiology across West Midlands and with neighbouring local authorities where necessary.</p> <p>The close links established within Black Country & West Birmingham CCG has meant that neighbouring GPs have shared vaccine stocks and deliveries on a mutual aid basis where surplus supply has gone to one area or where one area has had missed deliveries thereby maintaining a level of provision.</p>
Variants of concern	Variants can cause vaccinations to become less effective.	Work with regional partners to keep up to date on intelligence, and further develop plans based on latest evidence and best practice learning.
Resources	Financial and human resources are needed to produce an effective, collaborative response to Covid-19 in the long term.	Use governance structures in place to flag key issues with appropriate timelines and forward plan especially as business as usual activity resumes across all sectors.

Continued...

CHALLENGE	IMPACT	MITIGATE
Uptake of vaccinations.	There are many factors influencing vaccination uptake, from supply, hesitancy, access to and variation in uptake in different population groups.	Work with key NHS partners to unblock any system issues, support our partners to deliver vaccinations with equity and a focus on health inequalities.
Continued focus on Covid-19 response whilst also addressing factors exacerbated by Covid-19.	Issues exacerbated by Covid-19 will be affecting sections of the population differently across the whole life-course e.g. impact on early years, pupils in education, young people attempting to enter the job market, older unemployed and those in insecure housing.	One Council and One City approach informed and supported by Public Health assessment of need. Driven through existing networks and governance arrangements with a timeframe aligned to the national Roadmap stages in the first instance and continuing into the following year.
	Impact on health and social care, including preventative interventions such as health checks and screening programmes and timely access to health care.	To be worked through in conjunction with health partners and with oversight from Health and Wellbeing Together with a timeframe aligned to the national Roadmap stages in the first instance and then the following year.
	Impact on sustainability and resilience of communities including the voluntary and community sector.	A One City approach to support communities at a place-based level and align system commissioning to build capacity, sustainability and growth.

Conclusion

While restrictions across the last 12 months have helped control Covid-19, they have also had a significant impact on the economy, society and education at a local, national and global level. We've been hit hard by the pandemic and Covid-19 has shone a light on the inequalities in our communities which impact on the health and opportunities of local people. But we have also come together in the most incredible way during this time of crisis.

The success we have seen has reflected the collective strength and commitment of our longstanding multiagency partnerships and the community spirit which has been so crucial during the city's response phase. We can't stop now – it is absolutely vital this approach continues as we move forward.

As restrictions are lifted, it will be increasingly important for all of us to play our part. Vaccinations – including revaccination – will be key to managing the transition from pandemic to something we can learn to live with.

We know that there is still a lot of uncertainty about the future. The mental and physical health of our residents have been damaged, the challenges of domestic abuse and acquisitive crime still need to be tackled, our local NHS services need to recover, and our vibrant city economy needs to be rebuilt.

We will reset, recover and relight. We will continue to support our residents, communities and businesses, using our refreshed Outbreak Control Framework to keep local people safe, and work collectively to build community and economic resilience address the new challenges the pandemic has brought.

Working as One City with all our partners together, we will continue to look after our own and be bold about transforming the lives of our residents. Wolverhampton will emerge from the pandemic much stronger and more resilient than ever before – ready and able to meet the needs of those who live, work and visit this great city. No community will be left behind as our city recovers together.



Supporting documents

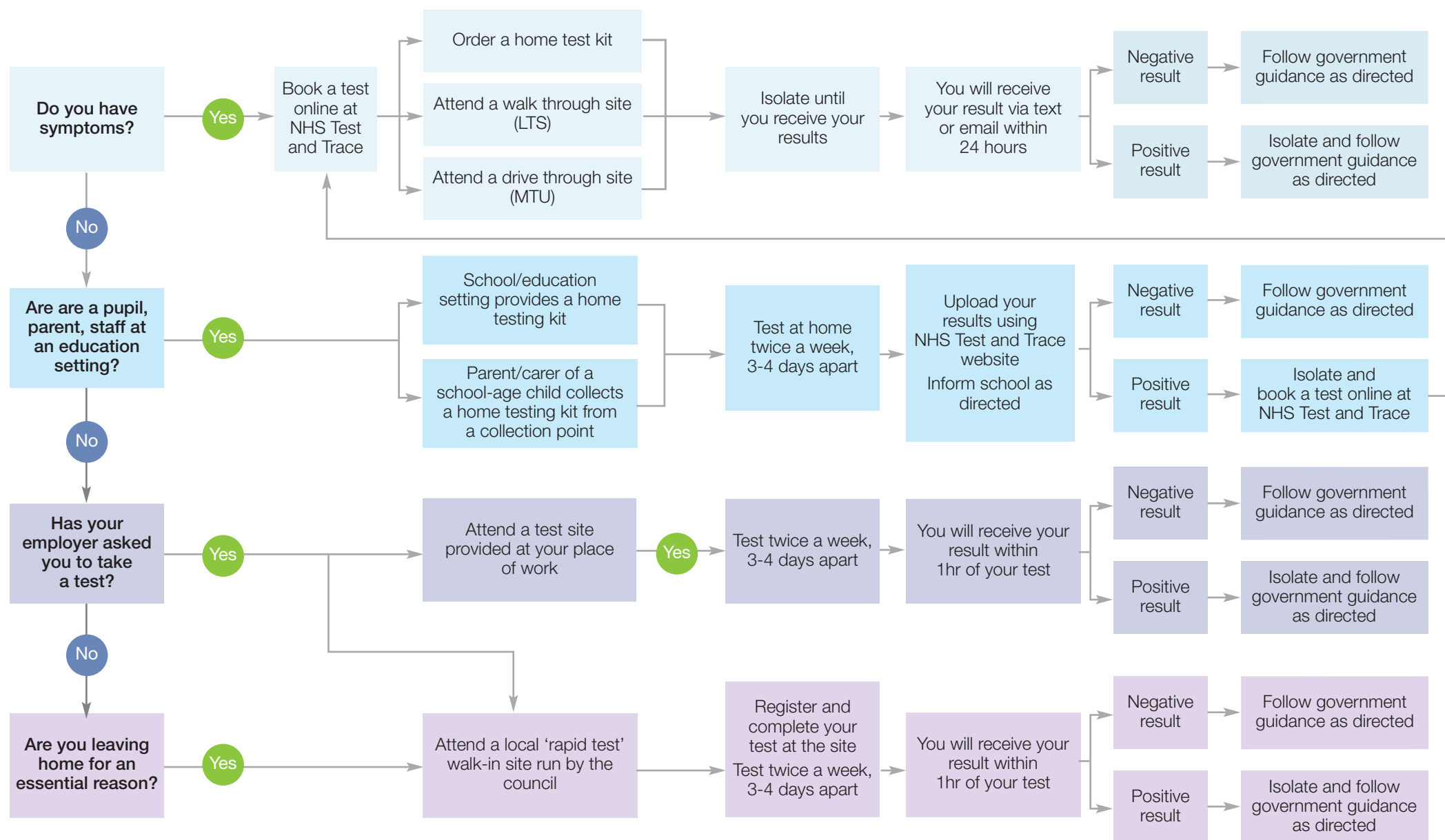
The refreshed Wolverhampton Outbreak Control Plan is underpinned by a suite of supporting documents including:

- Wolverhampton Local Outbreak Control Plan Monitoring Framework
- COVID-19 Response – Spring 2021: Roadmap out of Lockdown
- COVID-19 contain framework: a guide for local decision-makers
- Relighting our City Strategy
- Local Boards Terms of Reference

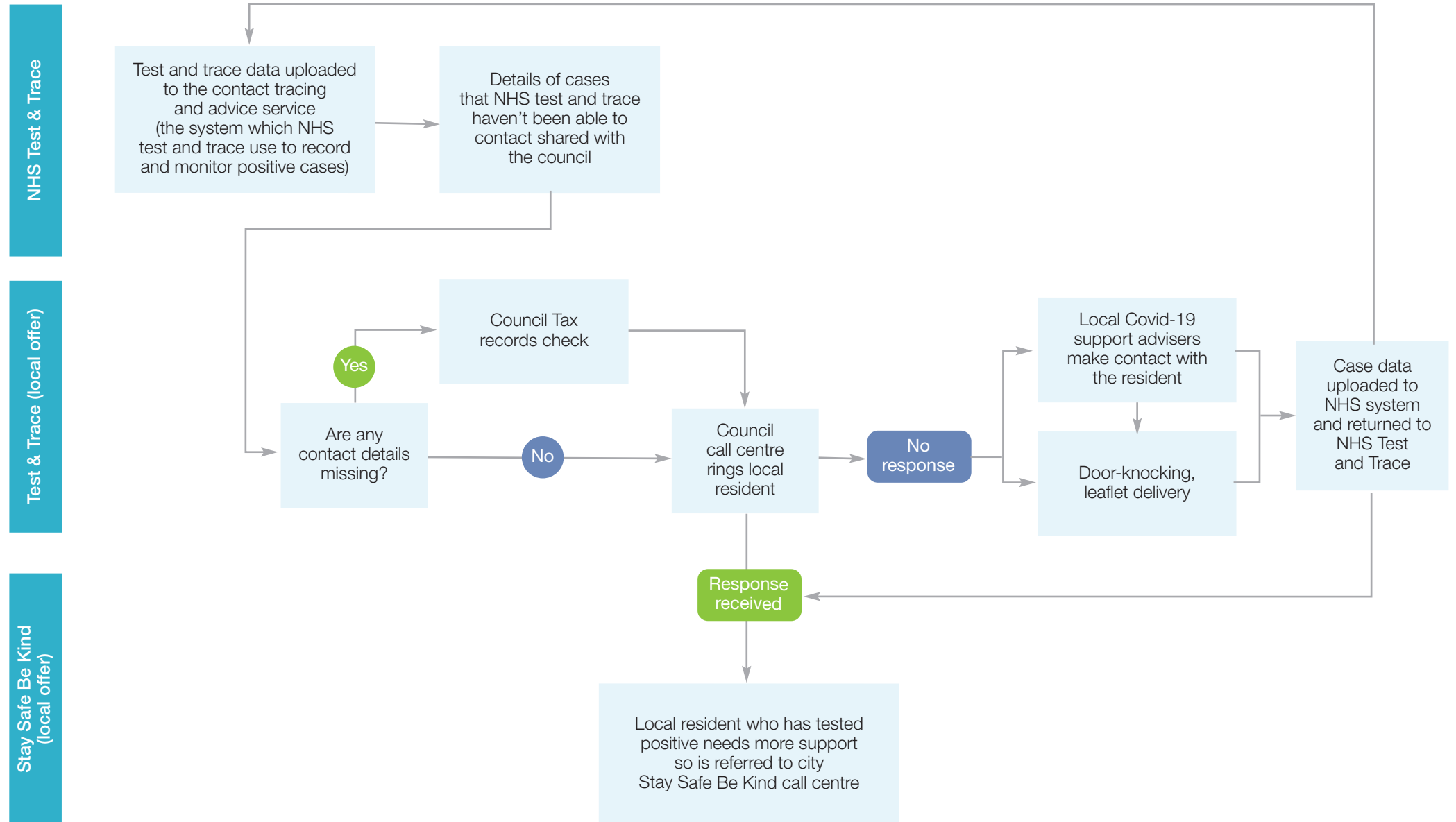
By their very nature, this suite of documents is subject to regular change as systems and processes change, as new guidance or evidence is published, or as learning drives improvement going forward.

These documents are available upon request. If you would like a copy, please email:
publichealth@wolverhampton.gov.uk

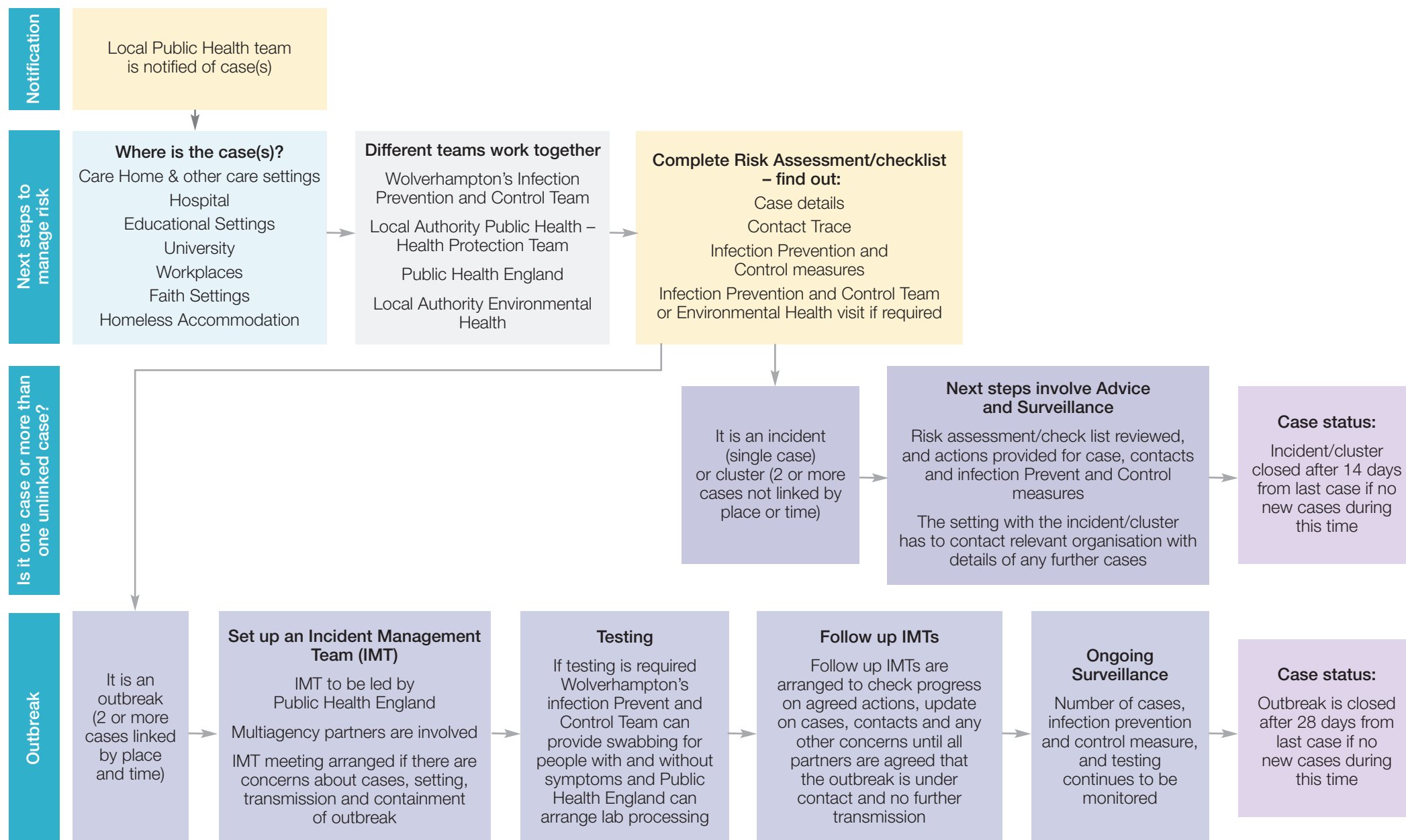
How we test for Covid-19 in Wolverhampton



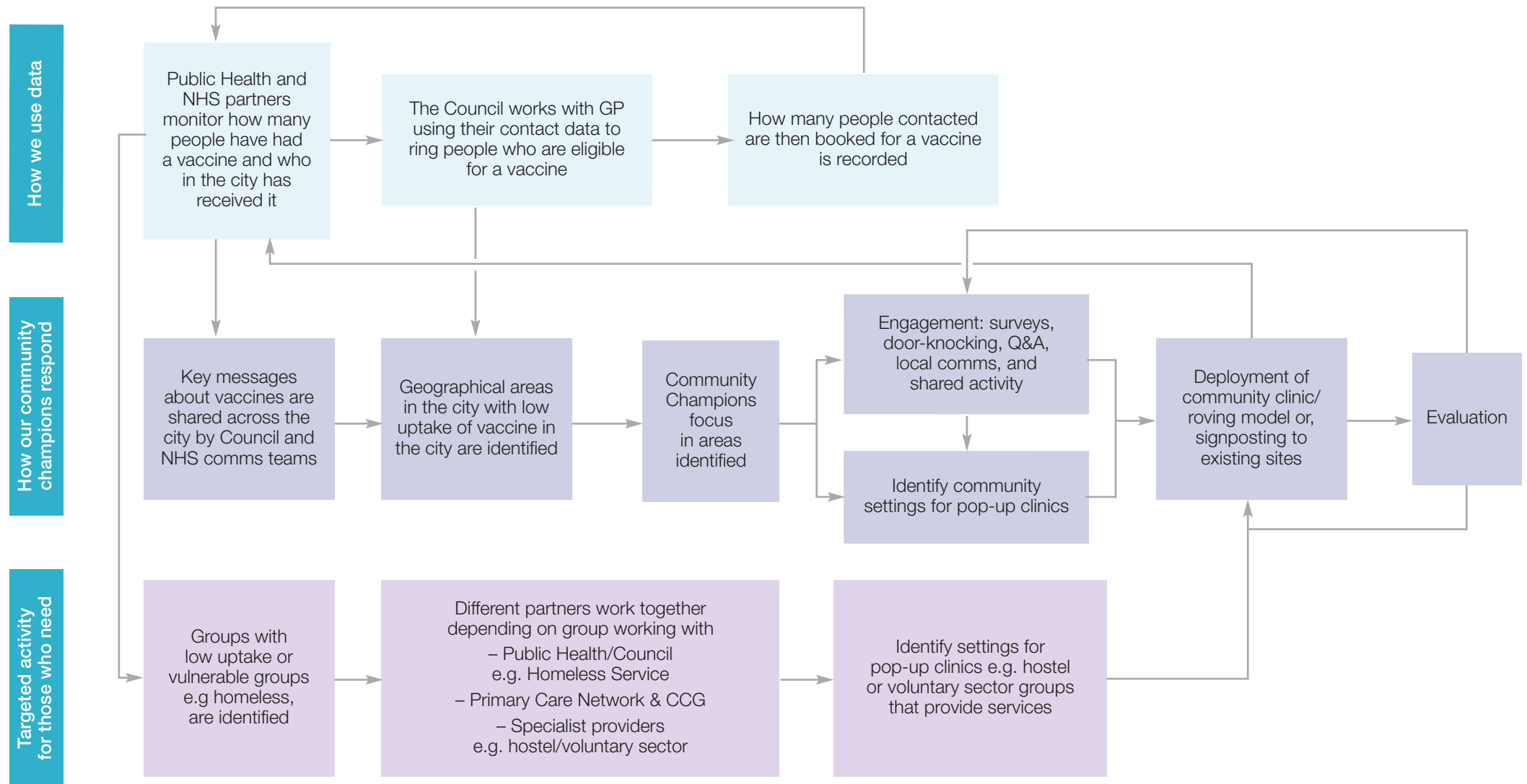
How we test and trace at a local level in Wolverhampton



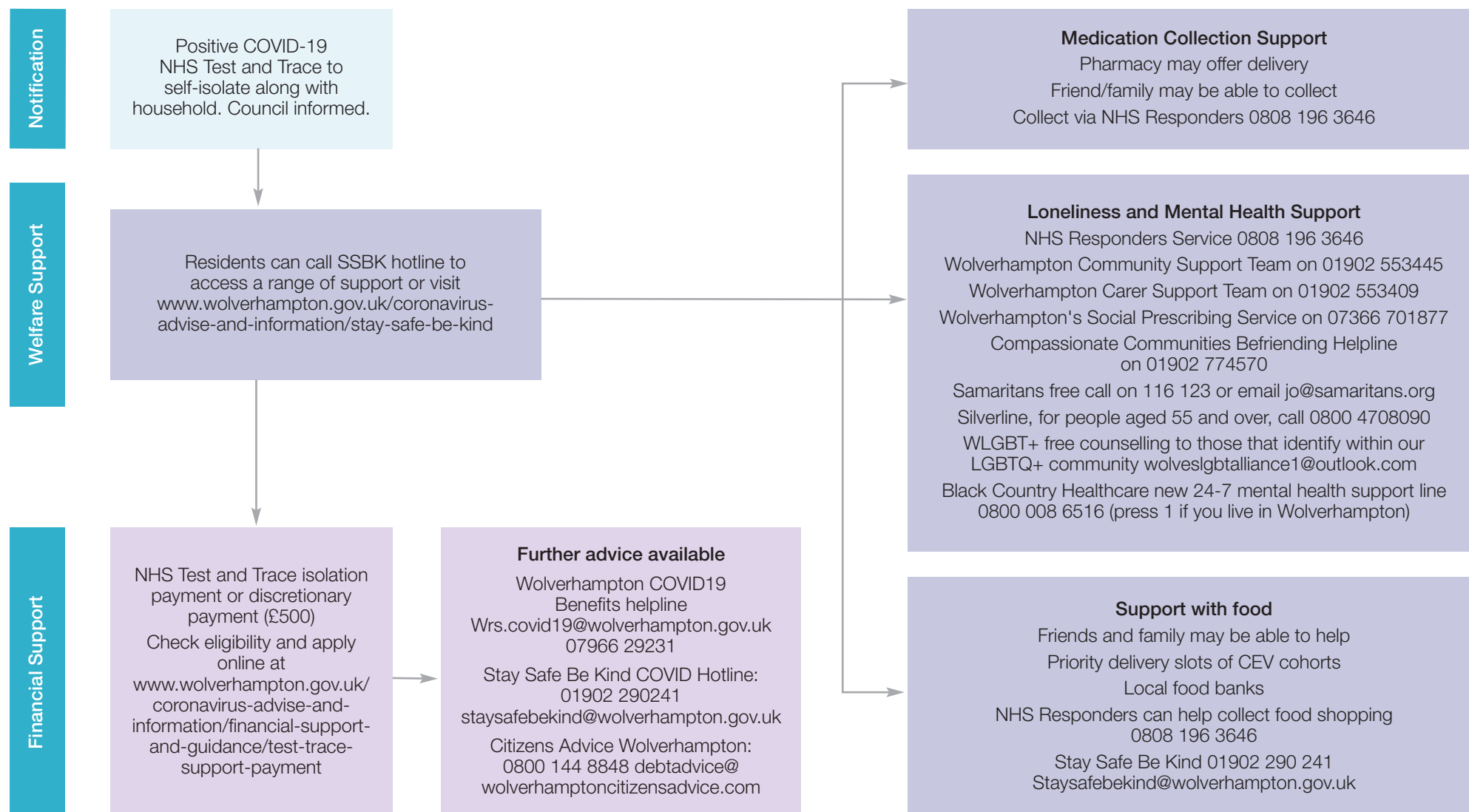
How we manage Covid-19 outbreaks in Wolverhampton



How we work with our local community to help people get a Covid-19 vaccine in Wolverhampton



How we support people to self-isolate in Wolverhampton



You can get this information in large print, braille,
audio or in another language by calling 01902 551155

wolverhampton.gov.uk 01902 551155

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