

2022



Trafford Outbreak Control Plan - COVID-19

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CHAPTER ONE: Introduction

1. Purpose

This updated outbreak plan sets out how we will continue to prevent and manage outbreaks of COVID-19 across Trafford so that our residents and communities can live safely through the various phases of the pandemic. It summarises the key roles and responsibilities for controlling COVID-19 in the borough and outlines our local response to the pandemic.

We have existing business continuity and outbreak management plans in place, but this plan builds on these and provides an overview and summary of all the work we are doing to manage COVID-19 in Trafford. More detailed methods of dealing with outbreaks in specific settings and circumstances are described in separate documents. These documents are referenced throughout the plan. Our plan is specific to Trafford but reflects national and Greater Manchester planning to be consistent and effective in our delivery.

The COVID-19 pandemic is continually evolving, so we intend to review and update this plan regularly in line with emerging evidence and best practice.

2. Aims

This plan outlines how we will address ten key aims:

- To prevent the spread of COVID-19; and respond to new variants of concern
- To identify and suppress outbreaks as early as possible.
- To define governance, roles and responsibilities about our local management of COVID-19.
- To describe how we will communicate and engage with partner organisations and our residents.
- To mitigate the impacts of outbreaks on people who live and work in Trafford.
- To reduce the risk of worsening health and other inequalities in our population, especially in our BAME and other higher risk communities.
- To set out how we will use data and other sources of information to monitor local levels of infection; and
- To incorporate our response to the pandemic into existing structures and ways of working.
- To support Trafford residents as we move through the Road Map to recovery
- To increase vaccine uptake and reducing inequalities in access to the vaccine

3. Key principles

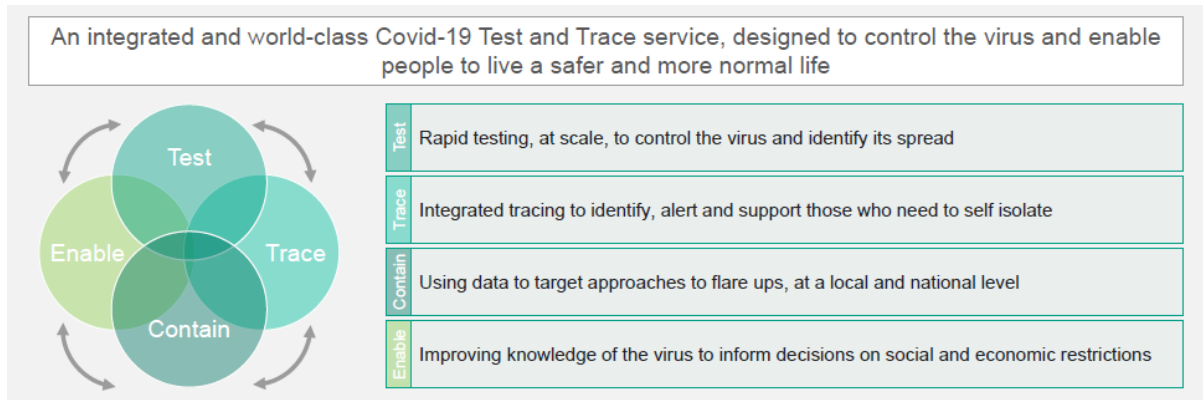
The Association of Directors of Public Health (ADPH) has published [guidance](#) to support local authorities to develop their COVID-19 local outbreak plans. The guidance sets out four fundamental principles, advising that the prevention and management of COVID-19 should:

- Be rooted in public health systems and leadership;
- Adopt a whole system approach;
- Be delivered through an efficient and locally effective and responsive system, including being informed by timely access to data and intelligence; and
- Be sufficiently resourced.

National and regional approaches

a. National approach

The UK Government has a four-pronged approach to tackling COVID-19: test, trace, contain and enable:



This is underpinned by effective planning and response strategies at a local level. Local government plays a crucial, pivotal role in the timely identification and management of cases to contain the infection. This plan outlines how we will achieve this in Trafford.

b. Greater Manchester Approach

Local authorities and other public sector organisations in Greater Manchester (GM) have long-established ways of working together to benefit everyone living and working across the ten GM localities. This is facilitated through the GM Combined Authority (GMCA) and the GM Health and Social Care Partnership (GMHSCP).

The overarching outbreak control plan for Greater Manchester sets out the work that will be undertaken on behalf of the ten GM local authorities and describes how this fits in with the individual boroughs' roles and responsibilities to manage COVID-19 their areas. These linked plans will enable us to act consistently and collaboratively and offer each other support and mutual aid.

The GM outbreak control plan sets out 7 key themes for managing the current phase of the pandemic. Our local plan for Trafford addresses these themes:

- 1. Care homes and schools**
Preventing and managing outbreaks in specific individual settings
- 2. High risk places, locations and communities**
Preventing and managing outbreaks in other high-risk places, locations and communities (e.g., sheltered housing, dormitories for migrant workers, meat processing factories, transport access, rough sleepers and sofa surfers)
- 3. Local testing capacity**
Developing local testing offers to ensure a swift response that is accessible to the entire population
- 4. Contact tracing in complex settings**
Supporting the national and Greater Manchester NHS Test & Trace programmes to ensure that we reach people in complex settings and cohorts
- 5. Data integration**
Ensuring that the information governance arrangements are robust and that there is timely sharing of data, and ensuring there is sufficient expertise in the analysis and interpretation of data to identify any areas of concern and to support local decision making
- 6. Vulnerable people**
Supporting vulnerable local people to protect themselves from COVID-19 and ensuring they can self-isolate if required, with services designed to meet the needs of diverse communities

7. Local Boards

Establishing governance structures led by Trafford's COVID-19 Health Protection Board and supported by existing Gold command forums and a member-led Public Engagement Board to communicate with the general public

For simplicity and to reduce duplication, our plan is arranged as follows:

- Actions we will take to prevent outbreaks
- Actions we will take to respond to outbreaks
- Actions for recovery
- Enabling systems and structures
 - Data integration and interpretation
 - Governance
 - Resources

CHAPTER TWO: Preventing outbreaks

The most effective way to reduce the local impact of COVID-19 is to prevent transmission of disease and thereby prevent outbreaks occurring. Trafford will continue to endeavour to minimise the impact of COVID-19 outbreaks on our communities by:

- Providing direct support and advice to community settings that experience an outbreak via the Director of Public Health in partnership with Public Health England North West and our Public Engagement Board;
- Ensuring common and consistent messaging to communities, including reassurance about the response and associated actions.
- Reinforcing the messaging on prevention and ensuring that any learning from an outbreak is embedded across the borough;
- Working closely with communities to learn from their knowledge and experiences about cases in the community and creating a two-way dialogue to ensure we are able to manage outbreaks by consent. Particular attention will be given to communities where the impact of COVID-19 has been the greatest. This includes our BAME population, people on low incomes, and people with underlying health conditions.

Our critical measures for preventing the further spread of COVID-19 are summarised in the following chapters.

1. Communication and Engagement

We will communicate simple and straightforward preventative measures to our staff, residents and local employers and ensure that these are updated as new guidance and information are developed.

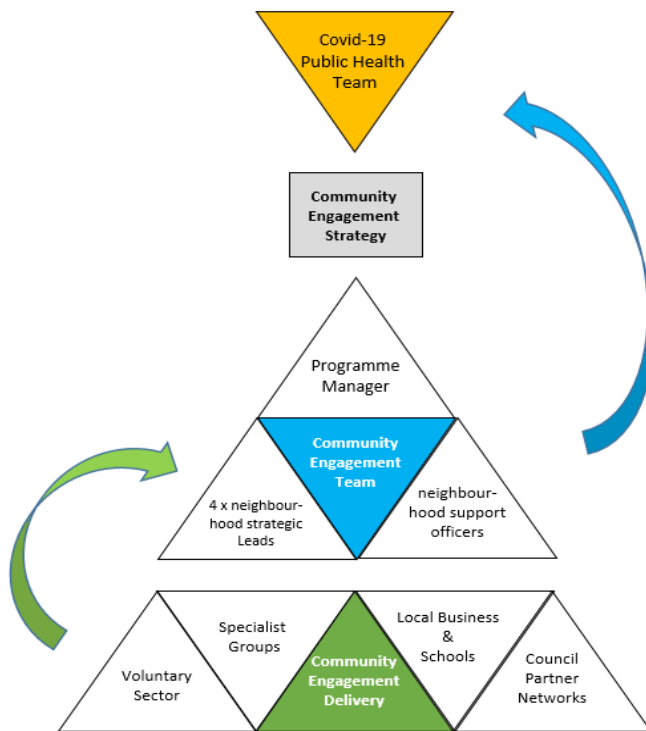
Governance: This work will be overseen by the COVID engagement co-ordination group and Public Engagement Board. The work is steered by updates at the daily public health meetings.

We will include regional communication campaigns such as the #TogetherGM campaign across Greater Manchester, national campaigns, and local campaigns. In January 2021, Trafford created its local design for COVID updates "Trafford stands united against COVID-19"; this initially helped provide updates on the latest rates to residents. It will also be used for any localised messages, including vaccine hesitancy and testing.

We recognise that communication is two way. We will engage with and work alongside our local communities to understand their concerns around COVID-19, and reduce any barriers they experience in accessing testing or vaccination, adhering to social distancing or isolating when needed. This work will be bolstered by the community champions programme and increasing community groups' involvement, including those who specifically work with BAME residents.

Community Engagement

The diagram below sets out how we will deliver the COVID community engagement strategy which is intelligence-led and driven by public health advice and guidance, co-developed with delivery partners and based on feedback from community engagement activities.



The Community Engagement Team will deliver the strategy and a detailed action plan, led by the programme manager and supported by 4 community neighbourhood leads and a neighbourhood-based support team.

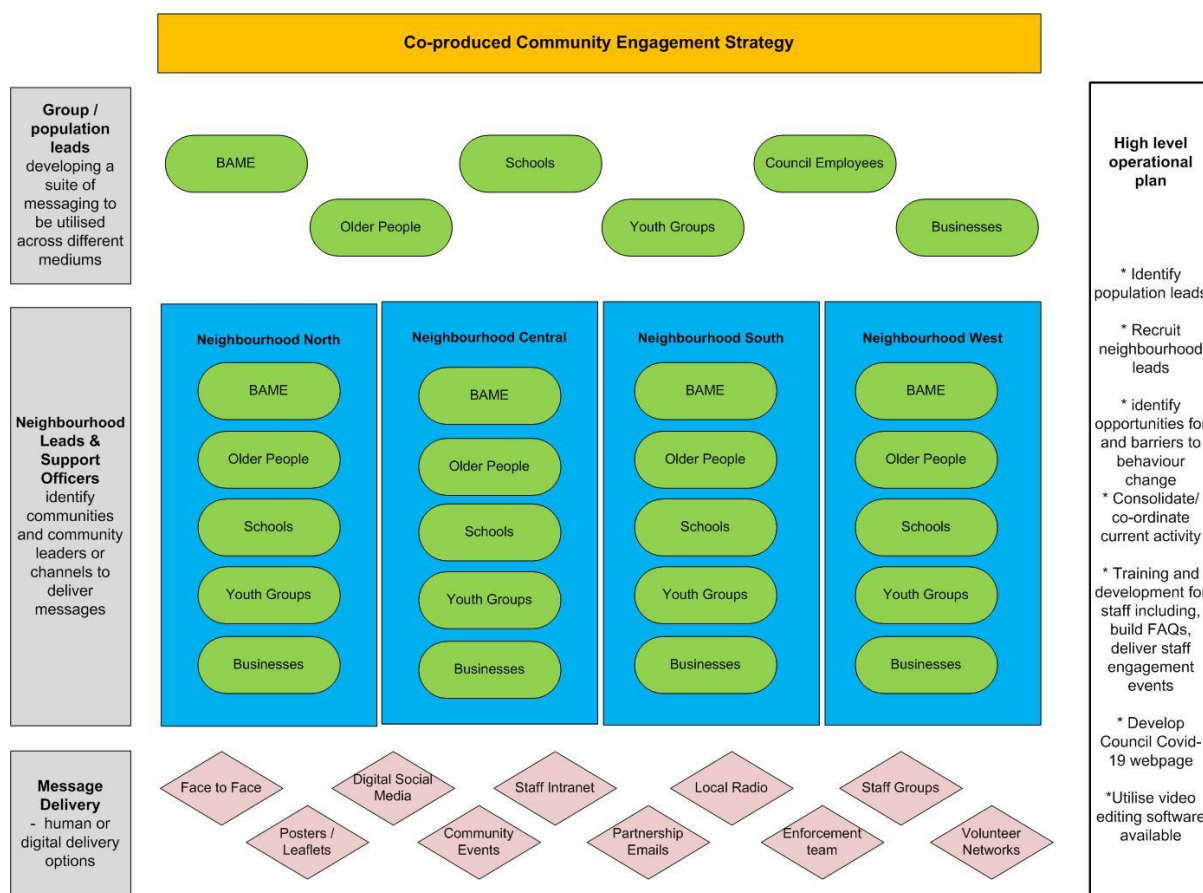
Messaging will meet the needs of the neighbourhoods with messages and delivery methods tailored to meet local population needs in accordance with the diversity of the area.

The team undertake an asset-based, community development approach, focusing on community leadership to identify barriers to and drivers of behaviour change.

Teamwork with wider council teams and local partners enables us to develop and deliver effective engagement and information relay methods using various communication mediums (digital and non-digital).

Community engagement effectiveness is monitored and critical intelligence from community engagement activity loops back to the community engagement team and from there to broader system leaders and partners. This will help develop the engagement strategy further and inform the wider COVID-19 response teams of any work that may impact their work areas.

The diagram below sets out the operational model for delivering our community engagement strategy whereby neighbourhood leads, and neighbourhood support officers identify channels to provide critical messages in key communities and act as conduits to disseminate messages.



COVID Engagement Co-ordination Group

The COVID Engagement Coordination Group is an action-focused weekly group established to support the work of the Public Engagement Board and coordinate the COVID-19 engagement response across Trafford. This group will use local data and intelligence to update and lead the intensive COVID-19 action plan for engagement using localised networks for disseminating information and engaging with residents.

With residents

- The system must continue to reiterate consistent behavioural messages to our residents that will reduce virus transmission:
 - o Handwashing
 - o Respiratory hygiene and face masks
 - o Social distancing
 - o What to do if you have symptoms
 - o What to do if your household members/close contacts have symptoms
 - o Support available when self-isolating and how to access it (particularly important for those where isolating may cause financial hardship).
 - o How to access asymptomatic testing

- Our approach will use simple messages focussed on personal responsibility and protecting those who are more vulnerable; this includes managing expectations on what is safe to do following vaccination
- We will listen to and seek to understand the concerns and barriers experienced by different communities so that we can find solutions together
- The communication and engagement approach will vary in diverse communities. The plan will also consider the media used, language, cultural sensitivity, and frequency of communications.
- Communications will be adaptive and rapidly respond to situations as they arise. We will use national and local data and intelligence to alert us to increasing risks either across the borough or in specific areas/communities/settings. This information is fed through the daily public health meetings and also in topic-specific meetings like vaccine hesitancy.
- Ensuring that schools are kept up to date via the Public Health Team, through the head teachers' forum which is very valued and well-attended. We also share information through email bulletins to schools and undertake social media campaigns aimed at parents to help teachers when issues arise e.g. not self-isolating when needing to, mask wearing at school etc.

With partners

- Trafford Health & Wellbeing Board and the multi-agency Health Protection Board and Public Engagement Board will work with all partner organisations to ensure consistent messages are reinforced and that we hear from partners about their concerns so that we can find solutions together
- Webinars are being held for businesses to provide updates on the latest changes to regulations, remind them of how to be COVID-secure and provide them with the opportunity to ask questions
- Third sector partners (including faith groups) continue to be vital in this, both in supporting the wide range of third sector staff and volunteers with regular information and FAQs; and also to promote engagement across our diverse communities in Trafford

With local employers and businesses

- Local employers and businesses need to have access to clear and consistent messaging and for us to engage with them to prevent transmission of COVID-19
- Specific communication to local employers and businesses will include the simple behavioural messages highlighted for residents above and regular information and FAQs for staff. A communications plan has been developed, outlining how companies can reopen safely and include critical messages for information and assurance. We will continue to work with town centre businesses and spaces to understand and support the work required to make them "COVID-secure". Over the course of the pandemic we have been working with, for example, the Trafford Centre, Altrincham Market and Trafford Park using the reopening safely fund for a range of activities to support re-opening, and preparing for the easing of restrictions from the latest lockdown.
- We have established communication routes with our local businesses via our weekly business bulletin, information on the business pages, and social media – Twitter and LinkedIn. A group has been set up to improve this business communication further, as this will be particularly important as the roadmap sets out when sectors can expect to reopen.

- The Trafford Strategic Growth team will engage with local employers and businesses to signpost to the support available if companies need to reduce operations or close temporarily as a result of COVID-19 impacts
- Social media for/about businesses to address local issues e.g. contact us if you need support being more COVID secure (when we are seeing high levels on non-compliance) and regional business communications from Greater Manchester on subjects like the testing offer for businesses. We have also done proactive media on major business breaches/fines/prosecutions which achieves high levels of media exposure locally.

2. Compliance and Enforcement

Governance: This work will be overseen by the Enforcement Sub-Group

Following the national lockdown in March 2020, the Council established a multiagency weekly enforcement group meeting to share information and intelligence, track demand and capacity and co-ordinate our responses. This group drives enforcement activity and ensures national legislation and local lockdown guidance is implemented in business premises and activities (including licensed premises), neighbourhoods and open space.

The Enforcement Sub-Group comprises members from a range of services and organisations including the council's Director for Growth and Regulatory Services (Chair), the Director of Highways, Transport and Environment, Environmental Health, Community Safety, Licensing, Greater Manchester Police, Social Housing, Communications and Public Health. The council's principal solicitor also sits on the board to provide legal updates and to answer queries on regulations.

Information about COVID-19 breaches are reported via various channels, including Public Health, Environmental Health, Licensing, Community Safety and some directly to Greater Manchester Police. Surveillance Data is used to co-ordinate enforcement activity. The group links in with the Community Engagement work-stream, maintaining its key focus to engage and educate residents and businesses on COVID-19 rules as the primary aim to keep our communities safe.

Examples of local compliance and enforcement activities include:

- Communication on national regulations and guidance in specific settings
- Ensuring local Public Space Protection Orders are in place to prevent clustering at pub/restaurant closure times.
- Proactive work around key events to identify and manage activity
- Visits to town centres, businesses, licensed premises, takeaways, restaurants, shops, beauty sector premises etc. to ensure that good COVID secure practice is in place
- Engaging with the businesses where outbreaks occur to ensure business owners and managers are clear on COVID secure workplace practice
- Face covering compliance operations on public transport
- Working with event organisers to ensure regulations are adhered to and events are delivered safely
- Stakeholder briefings to Trafford Business, Community Safety and Partnerships and Communities.

3. Vaccination

Trafford Council is working closely with NHS Trafford CCG and primary care colleagues (GP practices, pharmacists etc) on the national COVID-19 vaccination roll-out programme to ensure that all people

across Trafford who need, and are eligible for, a coronavirus vaccine are offered this and that we get good uptake in all population sub-groups.

Trafford Council will continue to work with our health colleagues to ensure we:

- Offer vaccines in line with the Joint Committee on Vaccination and Immunisation (JCVI) guidelines to ensure the greatest public health benefit
- Reduce the pressure on our health and care services by protecting people through their first dose
- Ensure we are providing equity of access to vaccinations
- Maximise our coverage so that no vaccines are wasted

We are doing this by:

- Supporting our residents to get their vaccination
- Supporting our Primary Care Networks (PCNs) to deliver a vaccination programme
- Supporting our vaccinators to provide mutual aid when needed
- Matching the supply of vaccines against need

Measures to improve vaccine uptake locally

A range of measures will be undertaken to improve vaccine take up locally. This work is coordinated through weekly meetings of the COVID Vaccine Operational Group led by the CCG and a Council-led meeting to review actions. The measures will address a range of potential issues related to vaccination hesitancy. These include:

- Increasing confidence, reducing perceptions of risk and gaining endorsement from trusted voices.
- Increasing awareness and dispelling myths.
- Reminding people of the risk of catching COVID-19 and that vaccination is the best way to protect against it
- Improving access and removing barriers.

There is clear evidence that certain Black, Asian and Minority Ethnic (BAME) groups have higher rates of infection, and higher rates of serious disease and mortality. The reasons are multiple and complex and include increased likelihood of face to face work, overcrowded accommodation and lower pay. Certain health conditions are associated with increased risk of serious disease, and these health conditions are often overrepresented in certain BAME groups. Again, much of this is linked to higher rates of deprivation in these groups.

Prioritisation of people with underlying health conditions will provide for greater vaccination of BAME communities who are disproportionately affected by such health conditions. Tailored local implementation to promote good vaccine coverage in BAME groups will be the most important factor within a vaccine programme in reducing health inequalities in these groups.

The NHS will provide advice and information at every possible opportunity, including working closely with BAME communities, to support those receiving a vaccine and to anyone who has questions about the vaccination process.

Healthcare providers have been undertaking staff risk assessments throughout the pandemic to identify individuals at higher risk of contracting the virus and/or experiencing serious illness if they do. These risk assessments include factors such as ethnic background, and should be used as the basis for prioritising access to vaccines for staff over the coming weeks.

Our COVID group is heavily data led so will put measures and interventions in place which address the very local, specific needs.

4. Community Testing

We are continuing to optimise local testing capacity to identify cases early to reduce onward transmission.

Governance: This work will be overseen by the Health Protection Board and Recovery Co-ordination Group.

Our approach:

Trafford has developed a detailed Targeted Testing Strategy and Resource Plan which forms a vital part of our approach to reducing the spread of COVID-19.

The objectives of the Targeted Testing Strategy are aligned with the GM programme, namely:

- To minimise the number of people that come to harm through contracting COVID-19.
- To minimise the number of people that come to harm due to non-COVID-19 conditions, because of the impact of the pandemic on the health and care system
- To minimise the broader social harm caused by the pandemic.
- To contribute to the research activity related to the pandemic.

This plan identifies the testing resources that are in place and those which will be required to:

- Provide a swift testing response to any outbreaks in Trafford.
- Meet local, GM or national requirements that require mass testing in high-risk settings in Trafford and the wider rollout to residents to support community testing in settings and individual homes.
- Maintain the focus in Trafford on preventing outbreaks.
- Provide fast access to testing via a range of testing opportunities for everyone who needs a COVID-19 test in Trafford.

Several demands are driving the need for more localised testing capacity, specifically with regards to asymptomatic testing. As lockdown restrictions are gradually lifted there is a higher likelihood of increased viral transmission and the risk of outbreaks also increases. There is a need for a more flexible offer that improves access to testing for those most vulnerable to COVID-19 in Trafford and reduces inequalities in access for high-risk groups. This will include the need for testing to be delivered in trusted settings close to home for people with no access to a vehicle or limited/no digital access. This is especially crucial as asymptomatic testing is increased. The plan is based on the modelling of future demand, which may include significant changes to the delivery methods and the types of testing. It is critical to remember that testing is only one part of our containment strategy, and anyone offering testing needs to have plans for consequence management, including robust plans to manage and support self-isolation.

Optimising Testing Capacity

The current testing provision in Trafford is split between testing those who are symptomatic (PCR testing) and those who are asymptomatic (Lateral Flow testing)

Symptomatic testing is undertaken using PCR (polymerase chain reaction) tests, which detect viral ribonucleic acid (RNA) to understand if a person has COVID-19 or not. This is done by swabbing the

back of the throat and nose. A laboratory must obtain the results, meaning that results can take 24-48 hours to be returned. There are several different options available to Trafford residents if they need to get a PCR Test:

- *Drive Through Sites* – Trafford has a Mobile Testing Unit in Stretford 5 days a week. To date, our Mobile Testing Unit has carried out 29,354 tests. It first went live in July 2020. Residents are also able to get to the Regional Testing Sites at Manchester Airport and the Etihad Stadium.
- *Walk Through Sites* – Trafford has two Local Testing Sites, one at Trafford Park and one in Partington. The Trafford Park Local Testing Site has carried out 21,838 tests, and the Partington site has carried out 11,738 tests. Both sites went live in August 2020.
- *Home Testing Kits* – For those unable to get to the testing sites, residents can order a home testing kit that is sent to their house.

Asymptomatic testing is undertaken using Lateral Flow tests, which test for proteins made by COVID-19 to understand if someone has the virus. Much like PCR tests, they require a nose and throat swab but differ in that results can be obtained in 30 minutes without a laboratory. The tests are less accurate than PCR tests, and have a higher chance of giving a ‘false negative’ result (where the test shows as negative but the person is positive). To decrease the likelihood of missing people who have COVID, it is recommended that people taking Lateral Flow tests do so every 3-4 days. Trafford has stressed this guidance clearly in all communications about asymptomatic testing. The Lateral Flow testing offer has recently expanded into an Asymptomatic Testing at Scale approach that encompasses a wide variety of cohorts. This includes:

- *Health Care* – Key frontline health workers, are being offered tests to take at home
- *Social Care* – Social care settings have access to a mixture of Lateral Flow tests and PCR tests to regularly test staff and residents for COVID. This includes care homes, supported living, extra care and home care. Lateral Flow Tests are also being used to support visitation in care homes. Training, support and guidance on testing are regularly provided to social care settings from Public Health.
- *Schools* – Secondary Schools have set up Lateral Flow Testing sites for staff over the winter period. These sites are now being used to allow pupils to test 3 times, at which point pupils will then be asked to take Lateral Flow Home Testing Kits. Primary School Staff are also able to access Lateral Flow Home Testing Kits.
- *Members of households, childcare or support bubbles of school staff and pupils* – There are various routes available to individuals who live with people who go into schools to access Lateral Flow Home Test Kits. This includes the option to collect home kits from Local Testing Sites or Regional Testing Sites in the afternoon or by ordering kits direct to their home.
- *Businesses* – Any business, regardless of how many staff they have, can now undertake workplace testing. Trafford has provided training at its Asymptomatic Testing Site for a number of businesses to support them to do this.
- *Key cohorts who come into contact with vulnerable individuals* – Trafford has set up an Asymptomatic Testing Site at Trafford Town Hall. This has allowed key groups who come into contact with others on a regular basis, especially if they are vulnerable, to get tested via Lateral Flow tests. Invited groups to have included social workers, domestic abuse staff and taxi drivers. As well as this, we have used the site to undertake case finding of asymptomatic individuals when there has been an outbreak at a business. We have also helped other organisations set up testing sites and have a Swabbing Team that can be used to provide on-

site outbreak testing if required. To date, 6,393 Lateral Flow Tests have been carried out via this route.

The next steps for testing will involve supporting the roll-out of further asymptomatic testing. Currently, whilst it is currently just those who live with people who work or go to schools that are able to access Lateral Flow Home Testing Kits. However, we know this is going to expand rapidly to include other cohorts. Trafford is already working on introducing a Community Collect model, which will involve setting up local sites that are easily accessible so residents can collect Lateral Flow Home Testing Kits. An offer of a pharmacy model for home testing kits is also being explored nationally, which Trafford will look to support when this is available. A key focus will be informing residents through a proactive communications programme regarding access and availability.

As the Asymptomatic testing at scale process is expanded, a key challenge will be ensuring uptake. A communications plan has been developed to ensure as many eligible residents as possible access lateral flow tests. Because Lateral Flow Home Testing Kits are a large part of this process, communication will be key to ensure people understand how to use the kits and the importance of twice-weekly testing. A significant issue is likely to be around those who do not register the results of their Home Testing Kits, and key literature and videos will be produced to encourage this.

Trafford will also continue to support businesses to set up workplace testing, taking into account that the 50 staff member lower limit has been removed. However, we are conscious that infection prevention & control processes alongside robust consequence management play a crucial role in preventing outbreaks in businesses and that testing is therefore just one element of the strategy. Ongoing communication and support will occur, and key business groups will be focussed on as lockdown is lifted, including hospitality.

5. Contact Tracing

We are supporting the delivery of the national NHS Test & Trace programme as well as maintaining robust local processes for contact tracing within Trafford and GM.

Governance: This work will be overseen by the Health Protection Board

What is contact tracing?

Contact tracing for COVID-19 is the process of identifying anyone who might be incubating the disease because they have been exposed to it through contact with a **case**. A **case** is someone who has tested positive for COVID-19. By identifying contacts and asking them to self-isolate for up to 10 days, the onward transmission of the disease can be slowed or halted. It is, therefore, a very important tool for breaking transmission but to be effective, it requires:

- Positive people (cases) to be identified quickly;
- Cases to be prepared and able to identify contact
- Contacts of the cases to be quickly identified and contacted;
- Contacts to be prepared and able to self-isolate
- Contacts of cases in outbreaks added to national system where necessary in order to facilitate them claiming isolation support

A contact can be:

- anyone who lives in the same household as another person who has COVID-19 symptoms or has tested positive for COVID-19

- anyone who has had any of the following types of contact with someone who has tested positive for COVID-19:
 - face-to-face contact including being coughed on or having a face-to-face conversation within one metre
 - been within one metre for one minute or longer without face-to-face contact
 - been within 2 metres of someone for more than 15 minutes (either as a one-off contact, or added up together over one day)
 - travelled in the same vehicle or a plane

Our Approach

Most people who have a positive test result for COVID-19 will be followed up by the national NHS Test & Trace programme. About 20% of people, once contacted by the national team, will be identified as being "complex". This could be because of characteristics relating to the individual (for example, they might not have access to a phone or may be reluctant to engage), or characteristics relating to the setting (for example, they may work in a school or care home, or another high risk/consequence setting).

Trafford's Locality Contact Tracing offer will deliver consequence management, direct support to settings and cohorts, and contact tracing to highly complex cohorts, supported by the Greater Manchester Integrated Contact Tracing Hub. Level 1 contact tracing in Greater Manchester follows a "locality first" approach, whereby cases records will be triaged by PHE daily and sent to localities. Each locality can then decide whether they wish to contact trace a case locally or refer to the GM Integrated Contact Tracing Hub (GMICTH).

Level 2 contact tracing

Cases that have not been contacted by the National Test and Trace System, Level 2 Contact Tracers within 24 hours of notification are escalated to Trafford's Locality Tracing Partnership.

The L2 case records are assessed, data cleansed and distributed to a network of Trafford contact tracers.

The contact tracing conversation includes consideration for social and emotional needs, with signposting to resources to help to self-isolate or to the Community Hubs. This process also incorporates a welfare pathway to ensure the welfare of uncontactable cases that hit criteria for concern.

When contact tracing is complete for a case, the contact information is then passed back to the national team to enable the contacts of cases to be advised to self-isolate. Systems are in place to optimise engagement with contact tracing and models of door knocking are in development to promote this engagement or support in outbreak situations.

The level 2 offer incorporates enhanced contact tracing exploring backwards contact tracing with cases, and this information can help inform data sources to highlight hyper risk areas. All enhanced contact tracing is carried out as per national track and trace guidance.

A model of contact tracing resource has been developed to ensure surges in demand can be met and local processes are in existence to continually review capacity and demand as ensure contact tracing capacity is available as we progress through recovery and onto BAU.

Figure 1.i. present the GM contact tracing pathway, and 5.ii presents the Trafford's locality pathway for complex settings.

Figure 1. i. GM contact tracing pathway

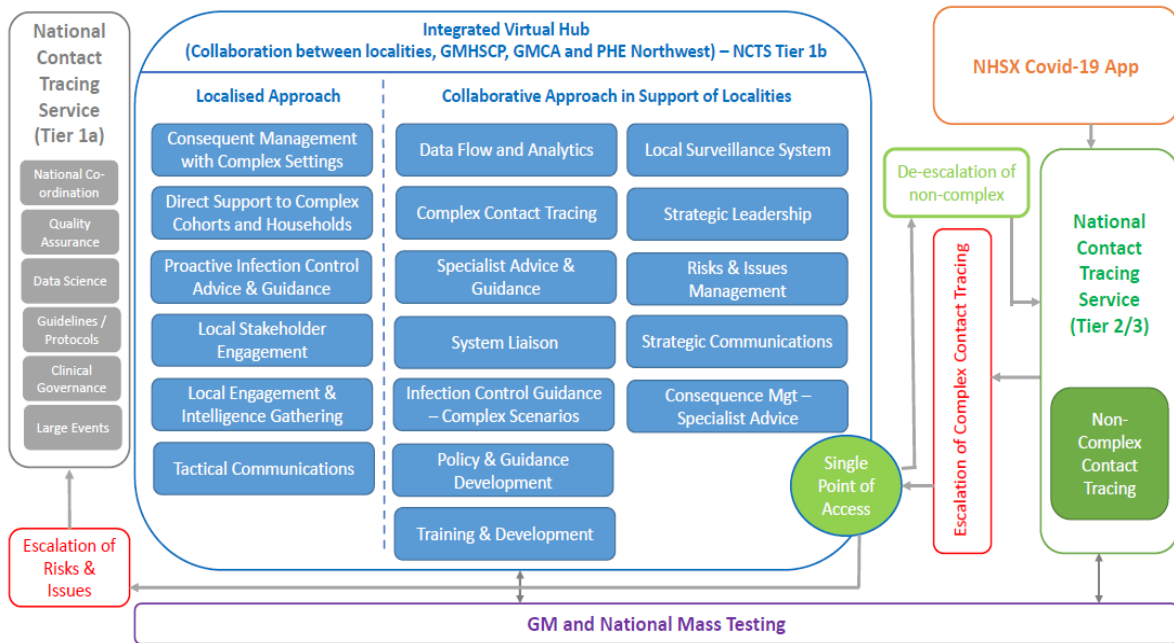


Figure 1.ii: Trafford Locality Flow Chart for managing level 1b complex settings and outbreaks

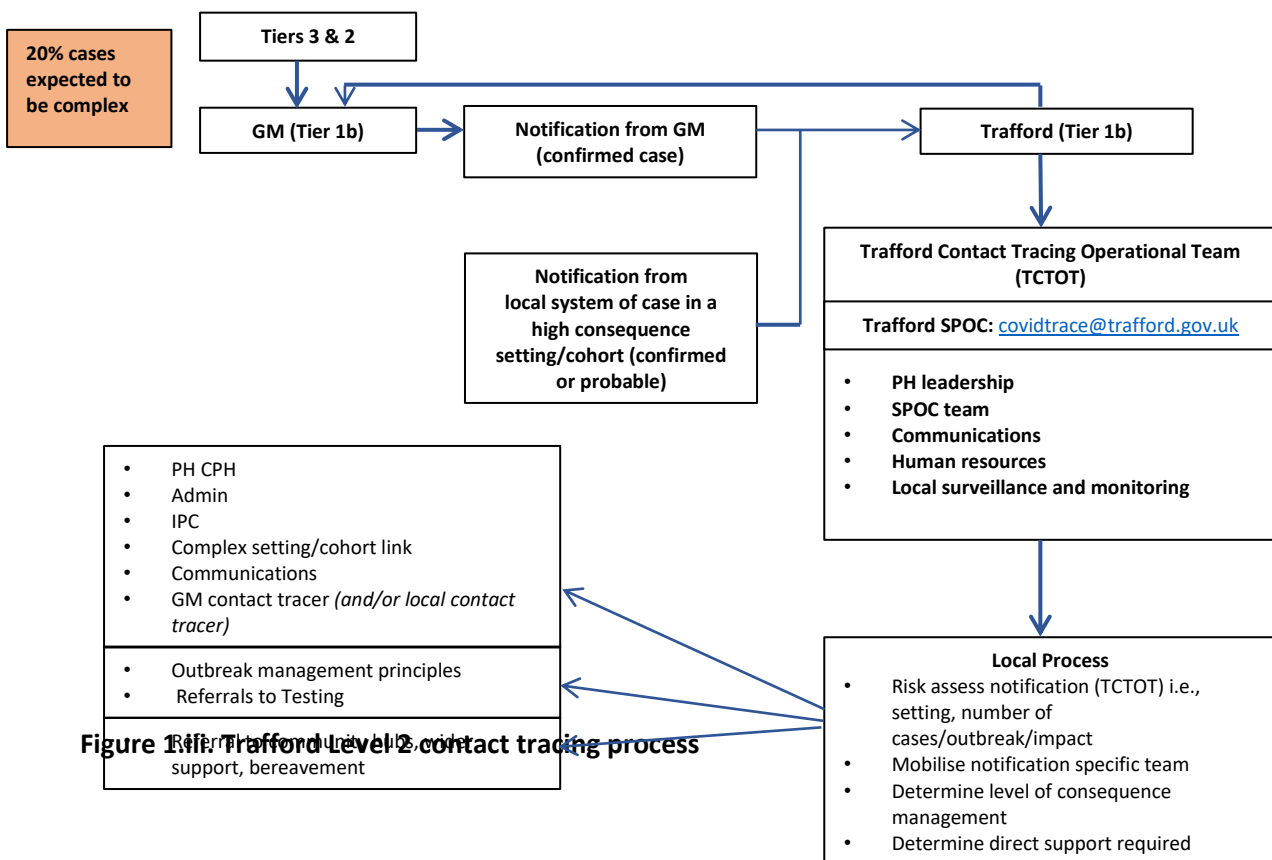
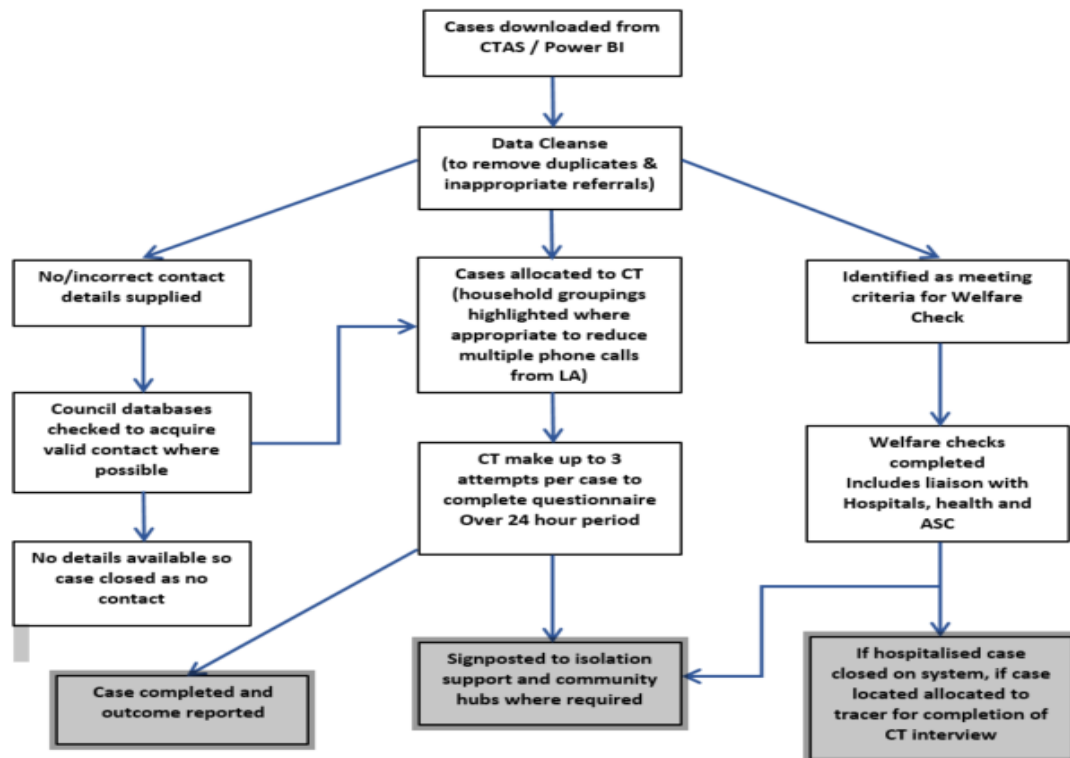


Figure 1.iii: Trafford Level 2 contact tracing process



As described later in section 5, a local network of complex settings and cohorts have been identified. Directories for in-hours and out-of-hours contacts are currently under development for each setting and cohort identified.

We will continue to work with existing specialist services and their staff as they are expert at engaging with people who are identified as belonging to a complex cohort, for example, rough sleepers or off-street sex workers.

For services delivering from a complex setting or to a complex cohort, local supporting guidance is being developed and shared. This will describe the actions needed when there is a possible or confirmed case of COVID-19 to support rapid and appropriate action.

Trafford's locality process has been developed in line with GM systems to ensure an integrated and streamlined response.

Key actions

- Regular clear and constant communications including regular Q&As by the public health and engagement teams.
- Continue to promote supporting guidance for complex settings and cohorts and provide updates as required
- Develop plans to further analyse data around level 2 cases who do not engage with the contact tracing process to inform the identification of hyper risk areas and need for further community engagement

6. Higher-risk settings, communities and locations

Understanding our local communities and services and building relationships across all settings is fundamental to the effectiveness of outbreak management. Across Trafford, engagement and consultation with services and communities of interest will support shared understanding and ensure

that the processes developed are effective at reducing local risks. Our Commissioning and Partnerships teams are in contact with providers on a regular basis so that we are aware of any issues e.g. availability of Personal Protective Equipment (PPE) or the ability to follow guidance. Daily updates are provided to our adult social care providers, and children's services.

We continue to develop specific outbreak plans and preventative approaches for high-risk settings communities and locations. This extends to supporting high-risk demographic groups such as those who are shielded or BAME communities.

Care homes

The care homes work is overseen by the Silver Adult Health and Social Care Group

Our approach

Care homes and supported living have rightly been identified as a very high-risk setting. This is both because of the high risk of transmission of infection in a residential setting but also because of the high level of vulnerability to serious illness among both residents and staff in care homes. To reduce the risks, we have been working intensively with our care homes since the start of the pandemic, but we recognise that this has been a very difficult time for the homes. We would like to record our thanks to our care home managers and their teams for all their hard work as we recognise the enormous challenges they have faced.

Trafford Council has submitted a Care Home Support Plan to Central Government along with all other local authorities in Greater Manchester (GM).

The management of individual cases and outbreaks in care homes will remain the responsibility of Trafford Council, supported by the CICT. This includes contact tracing of staff, residents and visitors in homes where positive cases are identified. Any wider contact tracing (e.g., families of staff) will be conducted through the national NHS Test and Trace programme.

All suspected and confirmed cases of COVID-19 in care homes should be reported promptly to the Community Infection Prevention and Control Team.

Key actions

- Care home support managed through bi-weekly monitoring call by our adult social care commissioners;
- Guidance provided to homes on a regular basis, with updates flagged.
- Training provided on infection prevention and control;
- Action cards produced by PHE circulated;
- We have established a system for accessing PPE when routine supplies are disrupted;
- Additional costs of PPE have been refunded;
- Robust testing offers for symptomatic residents whose-home testing of asymptomatic staff and residents undertaken; across Greater Manchester, we are currently reviewing the frequency of any repeats of whole home testing together with a discussion on who should be included in this.
- We have produced guidance to homes on safe practices for visitors;
- Infection Control Grant distributed to all care homes - the focus is on using this to ensure that homes do not need to share staff and implementing infection prevention and control.

We are monitoring the situation in our care homes, using a range of sources of information, including from the homes themselves and from national and local monitoring and surveillance systems.

The schools work is overseen by the Silver Children's Health, Social Care and Education Group

Our approach

We recognise the importance of ensuring that all of our children and young people have as normal a life as possible despite the global pandemic. This includes ensuring that they can access education and that existing inequalities are not made worse at this time. Our schools have remained open throughout, albeit for a reduced number of pupils, and we appreciate the hard work of our head teachers and their teams.

We have been working with our schools and early years settings to make sure that the increase in a number of children returning to school is managed as safely as possible. All education settings include Early Years, and Alternative Provision, have received guidance describing the practical steps that they can take to reduce the risk of infection and of the risk of onward transmission. The guidance is updated as relevant and shared with each setting and on Trafford's education website. There is ongoing extensive engagement with senior leadership teams across the settings to ensure engagement and understanding of preventative and reactive processes.

Outbreak management in schools and early years settings is led by Trafford's Single Point of Contact (SPOC) for contact tracing, with specific cases being referred to GMICTH when appropriate:

Where any of the concerns below are identified, a multi-agency Outbreak Control Team (OCT) will be convened.

- There has been a death in the setting;
- There are a large number of vulnerable people (e.g. special educational needs unit);
- There are high numbers;
- The outbreak is ongoing despite the implementation of routine infection control measures;
- There are concerns about the safe running of the setting or institution;
- There are other factors that require multi-agency coordination and decision making e.g. potential media interest.

The OCT are led by a Public Health Consultant at Trafford Council, with support sought from PHE depending on the nature of the concerns. Regardless of who leads the OCT, officers from Trafford Council play a key role in managing the outbreak.

The contact tracing for single cases or clusters identified in schools/early years settings is supported through:

- Provision of information and support to the setting involving the Trafford community infection control team when required;
- Identification of potential consequence management requirements
- Identification and communication around potentially contentious or controversial cases which may attract adverse media attention and outlining where action is needed.

We are monitoring the situation in our schools, using a range of sources of information, including from the schools themselves and from national and local monitoring and surveillance systems.

Asymptomatic testing in Schools

Asymptomatic testing has now been implemented in schools. A task and finish group was established with key stakeholders to facilitate the implementation of the programme.

- Secondary staff – testing sites were established within schools test regularly test all staff within secondary settings. Uptake of this offer has largely been high. This has now moved to a home testing model. Schools have been supported where there were specific difficulties identified when planning the logistics of pupil testing.
- Primary Staff – a home testing model has been implemented and offered to all staff working within primary schools in Trafford.
- Pupil testing – secondary age only. Schools are offering 3 lateral flow tests onsite to enable pupils to become familiar with the process of self swabbing prior to the move to home testing. Schools have been supported where there were specific difficulties identified when planning the logistics of pupil testing.

Staff and secondary pupils are asked to complete lateral flow tests test twice per week at home and report results into school and into the national Track and Trace. Schools will inform the Trafford SPOC of any positive cases and implement contact tracing immediately to ensure correct outbreak management advice is provided.

Secondary schools (including Secondary special schools) have been asked to retain as small testing facility onsite to maintain an offer for those pupils unable or unwilling to test at home. There is specific guidance for pupils with Special Educational Needs & Disabilities (SEND) that recognises the flexibility that needs to be applied to testing children in this cohort. Further research is continuing into alternative methods of testing such a saliva tests which may increase inclusion in the programme for specific groups.

At present testing for primary aged children is not recommended however families of school aged children can access home tests kits and take part in routine testing – this has been communicated to all families via schools communication channels

Key actions

- Ongoing web based Q&A sessions for heads, Special Educational Needs Co-ordinators (SENCOs) and others from schools and early years;
- We have supported schools with individual risk assessments (including testing risk assessments)
- We have provided micro packs of PPE to schools for use in case of a child or staff member becoming ill at school.
- We are refining the processes for sharing information quickly and accurately between the Trafford SPOC, the GMICHTH and relevant teams within the council e.g. public health, education and the community infection control team;
- All suspected and confirmed cases of COVID-19 in schools, early years and childcare settings should be reported promptly to the SPOC: COVIDtrace@trafford.gov.uk
- Regular parent communications are being sent via schools communications networks to promote the testing in schools programme, testing for households of school aged children and also of maintaining COVID safe behaviours.
- Supplementary testing has been made available at Trafford's ATS for schools and early years settings where specific difficulties have been identified for staff accessing testing

Adapting the Testing Offer to Target Seldom Heard Groups

Ensuring that seldom heard groups have been able to access testing has been a key priority in Trafford. As part of this, we have undertaken the following:

- Ensuring we set up a Local Testing Site in Partington, which is an area with poor transport links.
- We have set up another Local Testing Site and a Mobile Testing Unit in the North of the borough, which is Trafford's highest area of deprivation.
- Ensuring Testing communication has been sent out in multiple languages, including Polish, Czech and Romanian.
- We are utilising the Community Engagement Team to target key cohorts with testing messaging. The Community Engagement Team have built a relationship up with 3 mosques in Trafford where public health messaging is included in the weekly Friday Prayers. For example, this has including encouraging people to ensure their secondary school children are tested as part of the school testing regime.
- Trafford has a dedicated Swabbing Team. The team is often used to undertake swabbing for vulnerable individuals who otherwise would not have been able to access tests.

As noted above, it will be a challenge to ensure uptake of asymptomatic testing occurs as cohort eligibility is expanded. This will especially be the case for seldom heard groups. We are aware that the biggest impediment to people being tested is the risk of losing money if they test positive and have to self-isolate. Communications to residents will include details of how to claim self-isolation funding if residents are eligible. As the range of testing increases there is a need to ensure that our residents have confidence in the results of their tests

Engaging with Seldom Heard Groups

The community engagement team work with trusted leaders from local communities, faith groups and the Voluntary, Community & Social Enterprise (VCSE) sector to identify opportunities for and barriers to change and share these with system partners to effect changes that maximise the opportunities and minimise barriers across the neighbourhood and the borough.

The approach taken is a "whole neighbourhood" approach, recognising that while the impact of COVID-19 may be more significant in some groups than others, there is a need for all of us to adjust our behaviour at this time. Within this, the team aim to reduce inequalities in outcomes between areas and sub-populations.

Existing networks for critical groups such as BAME low-income families, etc., are leveraged to ensure our most vulnerable populations are effectively engaged and aware of and linked into support offers for food, healthcare, and financial support.

The Council will also be launching a Community Champions scheme in Trafford. Community Champions will be given the latest information about COVID-19 and a weekly message which they can share with their community networks. We will support our champions with regular information sessions and check-in sessions with the Public Health and Community Engagement teams. Recruiting Community Champions from within BAME communities will be a priority, as these communities have been disproportionately affected during the pandemic.

Vulnerable and underserved communities

Those communities whose health tends to be worse than the population will be supported to make positive changes to improve their general health and wellbeing, which will, in turn, give additional protection against COVID-19. Data is regularly examined to direct work across a number of vulnerable groups including:

- Adult Social Care (ASC) – vulnerable adults – work is progressed as described above in care homes and through the ASC Silver group where key cohorts of vulnerable older people are reached with the community hubs and in particular settings. This includes providing training and support to key providers in supported living, day care and home care providers.
- Anti-social behaviour cohort – part of the enforcement programme and targeted those individuals at most risk through proactive outreach workers
- Asylum seekers – as section outlined above – Engaging with seldom heard groups and working with trusted partners who have productive relationships with this group. The work includes symptom awareness, promoting testing and vaccine uptake
- BAME communities – see section above on community engagement programme and BAME focussed work, working with the VCSE sector
- Care homes – extensive programme of professional advice, inspection and audit and training and developments as outlined above
- Care leavers in independent living settings – work with Children’s commissioning team providing training, support and professional advice to providers and targeted support to at risk young people particularly around access to testing
- Community health settings – working with CCG on COVID safe environments and providing advice and support to those shielding
- Complex families - work with Children’s commissioning team providing training, support and professional advice to providers and targeted support to at risk young people particularly around access to testing
- Early years settings - work with Early Years commissioning team providing training, support and professional advice to Nursey and Early Years providers and targeted support to at risk families and staff particularly around access to testing and contact tracing
- Greater Manchester Fire & Rescue Service (GMFRS) and Greater Manchester Police (GMP) – via Health Protection Board supporting multidisciplinary response
- Street sex workers –outreach work with key agencies
- People experiencing or have fled domestic abuse – programmes of support for providers and
- People from the deaf community through commissioned services
- People who have substance or alcohol misuse issues – working directly with Greater Manchester Mental Health Trust (GMMH) and key VCSE providers
- People with learning disabilities & settings that support this cohort of people -providing training and support to key providers in supported living, day care and home care providers.
- People with mental health conditions & settings that support this cohort of people – working directly with GMMH and includes providing training and support key providers in supported living, day care and home care providers.
- Rough sleepers and others in precarious accommodation such as sofa surfers – working directly with homeless lead
- Schools – as detailed in section above
- Shielded residents – providing support to community hubs
- Special schools – as detailed in section above
- Specific faith communities - see section above on community engagement programme and working with the VCSE sector
- Traveller community – via the link Community Nurses

Health-promoting behaviours and benefits

Many common Long Term Conditions (LTCs) put people at higher risk of COVID-19 severity and complications. LTCs may also be exacerbated by increased stress and changes in diet and physical activity, and people with LTCs may experience reduced healthcare provision during pandemics. Therefore it is vital that the protective element of a healthy lifestyle is promoted.

Behaviour	Protection against	Local support available	Cross-cutting projects
Being physically active	<ul style="list-style-type: none"> • Obesity • Type 2 diabetes • Cardio-Vascular Disease (CVD) • Mental ill-health 	<p>Trafford leisure exercise referral scheme</p> <p>Empower You – physical activity programme for people with disabilities and sensory impairments</p>	<p>Trafford’s NHS Health Check programme to identify people with unhealthy lifestyles that could be at risk of developing long term conditions.</p>
Eating a balanced diet	<ul style="list-style-type: none"> • Obesity • Type 2 diabetes • CVD 	<p>NHS and commercial weight management services</p> <p>Diabetes Prevention Programme</p>	<p>LIVA- digital support to BAME and deprived communities to be more active and make healthy lifestyle changes.</p>
Giving up smoking	<ul style="list-style-type: none"> • CVD • Asthma • Chronic Obstructive Pulmonary Disease (COPD) • Cancer 	<p>Support from GP and Pharmacies</p> <p>Stop smoking in pregnancy programme</p> <p>CURE- support to stop smoking when in hospital</p>	<p>Age UK Trafford provides healthy lifestyle support to older people from deprived communities.</p>
Maintaining wellbeing	<ul style="list-style-type: none"> • Mental ill-health 	<p>42nd Street, Just Psychology, Kooth and CAMHS support children and young people’s mental health</p> <p>BlueSCI, social prescribing, counselling and therapies, Greater Manchester Mental Health Trust</p> <p>Pakistani Resource Centre support people from BAME with mental health needs</p> <p>GM Bereavement Support Service</p>	<p>Manchester Deaf Centre provides support to the deaf community in Trafford to improve healthy lifestyles.</p> <p>Voice of BME supports BAME communities to access health checks and other health/cancer screening and provides support to improve healthy lifestyles.</p>
Screening and Immunisation	<ul style="list-style-type: none"> • Cancer progression • Infectious diseases 	<p>Support available from specialist groups as well as from primary and community services</p>	

Not overusing alcohol and drugs	<ul style="list-style-type: none"> • Obesity • Mental ill-health • CVD • Type 2 Diabetes • Asthma • COPD • Cancer 	Achieve Trafford support Self Help Support Groups	
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7. Support for self-isolation

Our Approach

Any setting, cohort or household that requires support because they have been asked to self-isolate without warning (e.g., those who have been identified as a contact of a case) are the responsibility of local authorities. The national government will continue to provide support to those shielding.

All COVID-19 workstreams that deal with individuals required to self-isolate including community engagement, our businesses work and L2 contact tracing team ensure welfare and other issues are explored and signpost to community hubs and information on self-isolation payments.

The Trafford Community Response to Coronavirus Hubs will remain the primary route for people to access humanitarian assistance locally when needed. This is accessed via a central number where a triage system is in place to direct people to one of 6 community support hubs, or to Trafford Assist, or to relevant professionals. We will also support multi-agency and cross-sectoral responses to meet diverse and emerging needs. This may include work with other boroughs in Greater Manchester, especially where communities in different boroughs have strong links to each other.

The six community hubs are run by the voluntary sector and are able to reach into communities and provide links to social prescribers, Trafford Housing Trust capacity builders and other resources. These hubs have also developed a further network of organisations that are offering support to communities. A Memorandum of Understanding (MOU) has been signed by 13 partners which runs on a rolling monthly basis. The hubs' roles have grown from more than just humanitarian aid into a localised recovery offer, whilst still having the flexibility to react to any further lockdown. The community hubs have also been supported by a range of agencies including the Trafford Place-based working / Social Prescribing workers, giving an ideal route into help for volunteers needing support to help people. We have also been contacting those on the national shielding programme to ensure they have access to the appropriate support

Our response is further supported by a central phone line and website provided by Citizens Advice Trafford. This is the main access route into the 6 community hubs and also offers callers a broad range of information and advice on topics like employment, benefits, welfare rights, housing, consumer rights and relationships.

Citizens Advice Trafford also work closely with our in-house Trafford Assist service, which will look to support those that are unable to afford food, fuel or other essentials.

Our Trafford Assist team are helping residents who have been asked to self-isolate by NHS Test and Trace, or who are identified as a close contact by the NHS COVID-19 app, to access Test and Trace self-isolation payments. In addition, our partnership with Citizens Advice Bureau includes support for those who are self-isolating by offering advice on benefits and grants residents may be able to claim

if they are unable to work, and their household's financial circumstances qualify, as well as access to help such as payment holidays.

We have compiled an Equality Impact Assessment for the hubs and developed an action plan based on key insights to ensure we are reaching out to people that would not perhaps report in and to identify where we need to make extra efforts or apply different approaches.

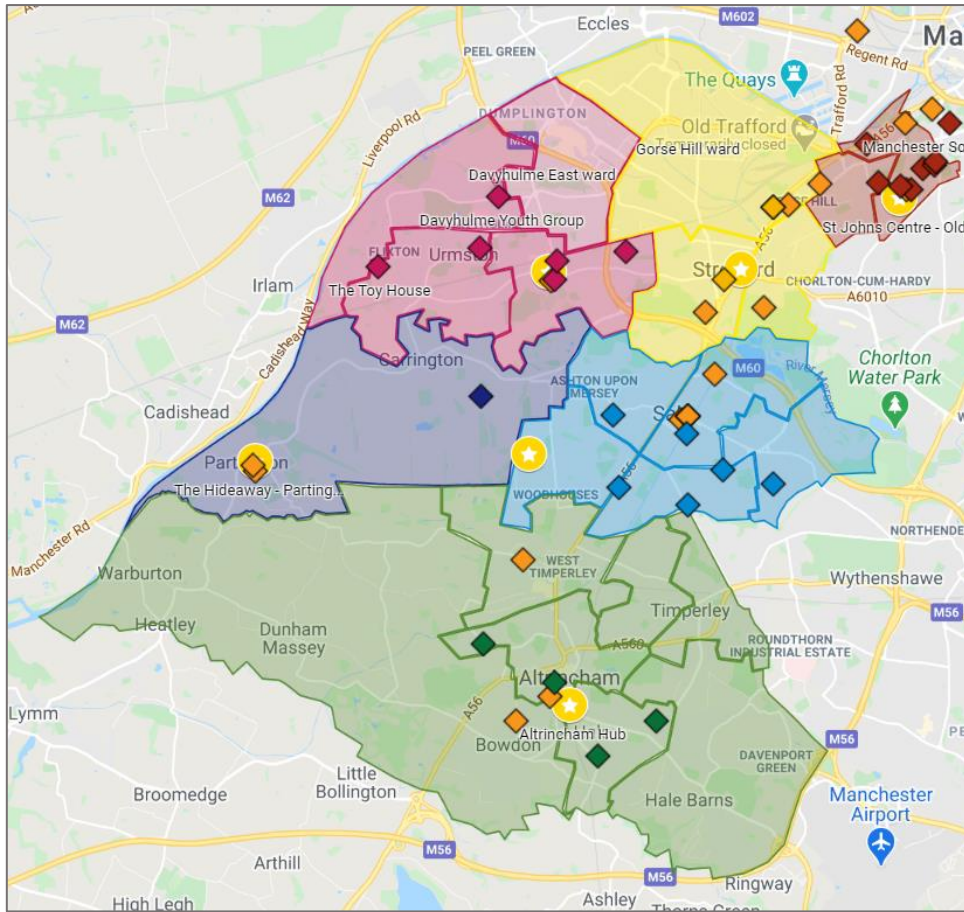
We will also be supporting the rollout of the Ministry of Housing, Community & Local Government's (MHCLG) framework of practical support for self-isolation. The framework sets out the types of practical, social and emotional support that people may need to access if they are self-isolating because they or a close contact have tested positive for COVID-19. It sets out the role of NHS Test and Trace in sharing information with councils about people who may need help in accessing support – and the role of councils in assessing people's needs and helping them access support. The framework focuses on:

- Communications to improve awareness of when people need to self-isolate, how long for, what this involves, its importance in stopping the spread of the virus, the support available and the consequences of breaking the rules.
- Practical, social, and emotional support for those who need it, organised by councils and community groups.

Key actions

- All suspected and confirmed cases of COVID-19 in high-risk places, locations and communities of interest should be reported promptly to the SPOC: COVIDtrace@trafford.gov.uk;
- We will continue to develop, maintain and review the complex settings and cohorts directories;
- Continue to make best use of the Trafford Crisis Fund to support the running and/or establishment of community projects to provide practical and wellbeing support for residents
- Support rollout of MHCLG's framework of practical support for self-isolation
- We will prioritise health-promoting activity to reduce the impact of LTCs in higher-risk communities such as people from BAME groups and people with diabetes.
- Develop and roll-out a referral mechanism (Refernet) able to be used across partners and the borough to improve our ability to signpost, improve our information and advice pathways, and allow for better data collection on pathways through the system and outcomes. Agree future and funding for Community Hubs model
- Continue to widen the scope of the hubs to enable a more holistic approach to support people in their communities to support risk reduction in relation to an outbreak of COVID in their area.
- Continue to work with supermarkets and Defra to ensure that people are supported through online delivery of food and essential supplies;

Map of the hubs and supporting organisations / projects



8. Surveillance

Access to timely and robust data is essential to respond to the COVID-19 pandemic. With the right data, individuals and organisations can make the most informed decisions to keep people safer through the coronavirus pandemic and restart the economy at the right time and place. COVID-19 specific data needs include: testing activity, number of cases, local contact tracing, local outbreaks in places such as school, hospitals and care homes, hospital activity and COVID-related deaths.

The availability of datasets, particularly publically available data sets, have become more readily available throughout the course of the pandemic. However, for the purpose of supporting local surveillance, the availability of person-level data allows an updated and accurate picture of SARS-CoV-2 spread across the population, helping to enable public health response.

Surveillance Systems

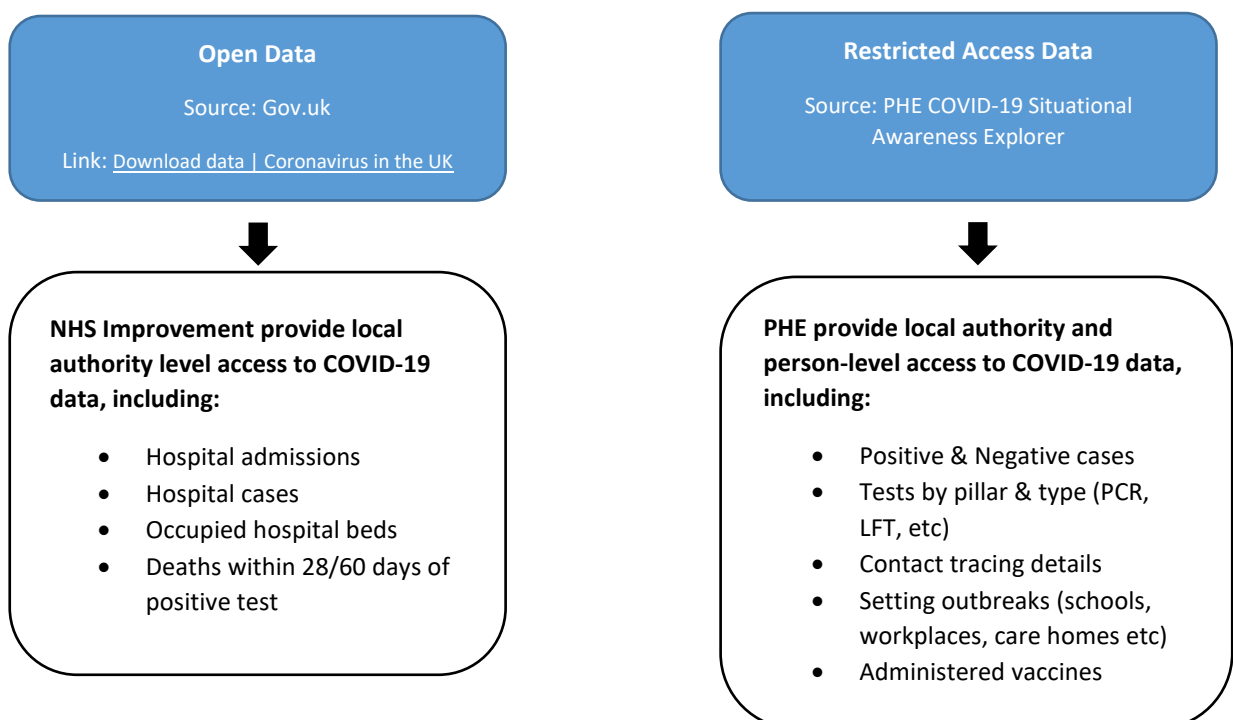
- COVID-19 Spread

To optimise the use of surveillance, data needs to be measured regularly and consistently. Bringing together a wide range of data can make well informed judgements about emerging trends, geographical variations and the people most affected. Public Health England (PHE) provide local authorities with person-level data to help support their surveillance functions, which in turn allows the Public Health Intelligence team to put together timely data reports that are conveyed across internal and external groups.

Surveillance reports include:

- Trend of cases over time
- Regional comparisons
- Current position of COVID cases
- Testing activity
- Spread of COVID across the borough
- Population groups effected

Figure 2. Data Sources to support COVID-19 Surveillance



As more data becomes readily available from national systems, opportunities to enhance surveillance reporting through our COVID-response work streams are welcome additions. Examples of new monitoring systems and tools include:

- **Waste Water Surveillance**
 - Individuals with COVID-19 have been shown to shed SARS-CoV-2 in their stools, regardless of whether symptoms are present. Collection of waste water samples can help to monitor the changes in prevalence, over time, and within communities. At present, this surveillance tool does not include detailed data for Trafford.

- **NHS COVID-19 app**
 - Local authority level data, acknowledging positive and negative tests, as well as reported symptoms linked with the app is now available. This new monitoring system can supplement our existing surveillance work. This data has limitations as it can only report data for users of the app.
 - Trafford's Health Intelligence, Contact Tracing, and Outbreak Control team have assessed the given data within the NHS app, recognising little use it as a means of surveillance at present. We recognise that as lockdown restrictions become lifted throughout the stages of the coronavirus roadmap, the given data may become more influential for surveillance purposes.

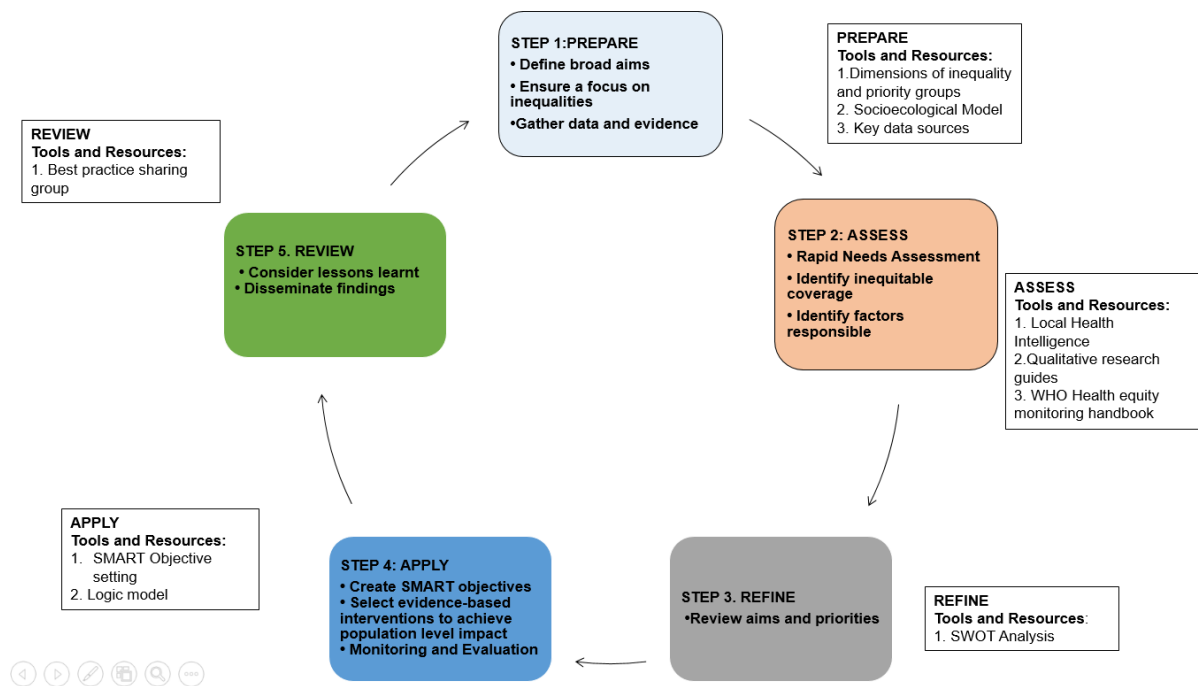
COVID-19 Vaccination:

PHI presents surveillance reports on COVID-19 vaccinations for internal and external teams. Inequalities in vaccine uptake is closely being monitored by the PHI team and the findings are shared for an adequate response.

Public Health Unit (PHU) at the Trafford Council will conduct an Equality and Health Inequality Impact assessment for Trafford's COVID-19 Vaccination Programme. Local Action Plan (LAP) template developed by Public Health England (PHE) has been adapted to the local context to reflect the urgency in addressing emerging inequalities during vaccine roll out.

The assessment will aim to identify and assess potential impacts of the COVID-19 vaccination programme on different population groups in Trafford to prevent discrimination and identify opportunities to promote equality. Steps of the LAP are presented below:

Figure 3: Local Action Plan cycle with tools and resources required at each step



Trafford's COVID-19 vaccination programme will be tested against the needs of the general equality duty in the Equality Act 2010, and considerations will be made on how the programme affects protected characteristics and different dimensions of inequality (Equality Act 2010, 2010). These include:

- Age
- Sex
- Gender reassignment
- Geography including rural/urban split
- Deprivation (based on Index of Multiple Deprivation 2019 scores)
- Ethnic origin
- Religion
- Disability and health status including learning and physical disabilities, mental and chronic physical illnesses
- Carers paid/unpaid/family members
- Underserved groups including travellers, migrants, prisoners, looked after children
- homeless
- Parental factors including lone parents, family size, parental age, parental illness
- Sexual orientation
- Marriage and civil partnership

In order to examine effects on protected characteristics and different dimensions of inequality, it is essential to have equality-related COVID-19 vaccination data for Trafford and locally relevant intelligence therefore needs to be exploited. At present vaccination data is available only for age, ethnicity and deprivation. Details of datasets currently available are presented in Table 1 below.

Table 1: Available data sources for Trafford

NAME	SOURCE	GEOGRAPHY	DESCRIPTION
Office for National Statistics England and Wales Census 201	https://www.ons.gov.uk/census/2011census/2011censusdata	LSOA, National	Local characteristics tables from the 2011 Census on the topics of rural/urban status, ethnicity, language and religion, amongst others
COVID-19 Situational Awareness Explorer	Public Health England – not publically available	MSOA	Total number of Trafford residents that have been vaccinated (dose 1 & 2), among: care home residents, 80+ residents, 75-79 residents and 70-74 residents.
National Immunisation Dashboard	Public Health England – not publically available	Trafford residents registered to a GP practice within Trafford	Total number of vaccinations (does 1 & 2) by all 1-9 JCVI priority groups. Also broken down by gender, ethnicity and Index of Multiple Deprivation (IMD).
NHS Foundry Platform	NHS England – not publically available	LSOA	Total number of residents vaccinated (dose 1 only) within each LSOA, by all 1-9 JCVI priority groups, ethnicity and IMD.
Department for Communities and Local Government Index of multiple deprivation 2019	https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019	LSOA, National	The English indices of deprivation measure relative deprivation in small areas in England called lower-layer super output areas. The index of multiple deprivation is the most widely used of these indices

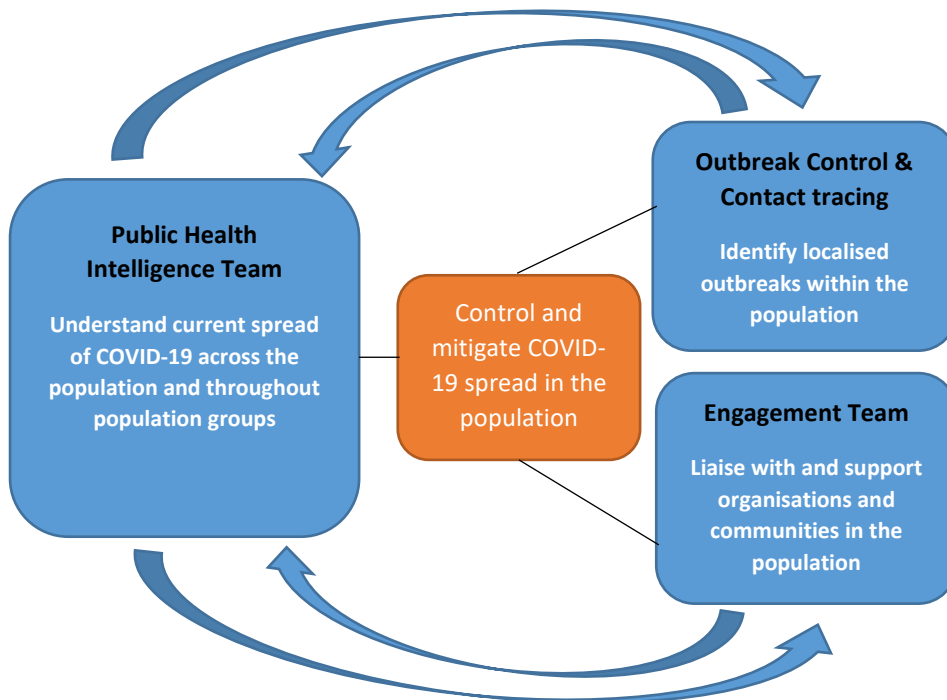
The team will work with local partners to identify other sources of data on remaining measures particularly via GP records. Collaboration with colleagues across different local organisations and the use of population health management approaches, will ensure that additional datasets held by other system partners can be accessed to support the identification of specific population groups and to target specific activity to identify inequalities, improve access and ensure effective delivery.

Partnership working

Our community response to COVID-19 is multi-faceted, relying on knowledge and understanding from colleagues across different functions within the public health team. Since March 2020, the burden and prevalence of COVID-19 within the population has varied across different time points. Monitoring the relationship between the changing patterns of COVID-19 and localised outbreaks (such as school, workplace and care home settings) helps us understand how prevalence of COVID-19 can increase in certain geographical areas and/or populations groups.

To enable a coordinated COVID-19 response, partnership working between the Public Health Intelligence, contact tracing, and outbreak control teams is an on-going function.

Figure 4. Summary of partnership working to support ongoing surveillance



Daily Briefings

Daily 9am meetings are utilised as a platform for our Surveillance, Outbreak Control, and Community Engagement Teams to feed data and understandings for local trends within Trafford. Subsequent findings can then be actioned to help mitigate any existing or future covid-19 outbreaks. For example, Trafford’s Outbreak Control team will identify workplace outbreaks and then rely on data from the surveillance team to indicate if case rates within the local area are exceeding those throughout other areas in Trafford.

Ongoing tasks

Without knowing the long term impact of COVID-19 prevalence in Trafford’s population, whilst also taking into consideration the importance of monitoring the vaccine programme over the course of 2021, it is important that we expand the capacity of the team and improve our reporting systems.

In order to achieve this, we aim to:

- Further develop our COVID-19 dashboards
- Increase PHI team
- Increase capacity with a recruitment drive
- Increase the availability of reporting software(s)
- Obtain population-level insight on the effects of COVID

Existing understanding of population health

Trafford's JSNA, public health evidence and local knowledge have been used to direct work to locations and communities of interest as defined by the GM Test & Trace Guidance. The addition of Public Health Surveillance Analyst roles has enable speedy and robust identification of "hotspots", whether these are geographical areas or groups.

Our surveillance activities allow us to examine data in order to direct work across a number of groups including seldom heard groups and other sub-populations of interest.

CHAPTER THREE: Responding to outbreaks

The previous chapter outlined the key mechanisms and steps that will be taken to prevent outbreaks of COVID-19 in Trafford, based on the seven key themes of outbreak control plans that have been identified nationally. The following sections detail the plans in place which will be implemented should outbreaks of COVID-19 occur.

1. Defining an outbreak

Broadly, an outbreak is defined as two or more confirmed cases within an identified setting and within a specified time period. Given the continuing high level of population susceptibility to COVID-19, we consider even a single case of COVID-19 in a high risk/high consequence setting to be of concern, and we would take action to prevent any further spread, even where outbreak criteria are not met.

2. Managing an outbreak: key roles and responsibilities

As outlined in the previous section on Contact Tracing, all positive COVID-19 test results are fed through the national NHS Test & Trace service. From here, relevant contact tracing takes place by national Level 2 and Level 3 call handlers, with more complex issues and cases being passed to the GMICHTH for relevant follow up, which may subsequently include the Trafford SPOC.

If multiple cases are identified in a setting (two or more confirmed cases occurring in the same setting within 14 days) or with other clear epidemiological links, the GMICHTH will risk assessing whether the outbreak is likely to indicate transmission within a particular environment. This risk assessment will include:

- Monitoring dates of onset of illness and of last attendance at the setting;
- Monitoring dates of contact between cases in the setting and use of PPE / social distancing during contact;
- Links between cases outside the setting (e.g.: home address; social activities; friends; other known links).

This risk assessment will be led by colleagues in the PHE NW Health Protection Team who sit in the GMICHTH. If the following assessment is identified as an outbreak, it will progress under existing outbreak management arrangements as per the established Operational Local Health Economy Outbreak Plan for Trafford. Further details of the steps required in specific situations are outlined in the GM Outbreak Control Plan and associated SOPs developed by PHE. The key steps that will be led by Trafford Council in conjunction with PHE are as follows:

a. Notification

This will happen either via the GM Hub or locality. Initial notification of a confirmed case will link in with the contact tracing process outlined in the previous chapter.

All suspected and confirmed cases of COVID-19 in high-risk places, locations and communities of interest should be reported promptly to the SPOC:

COVIDtrace@trafford.gov.uk

Regular assessment of postcode coincidence reports and common exposure reports is undertaken within the Trafford SPOC. These sources allow early identification of settings with multiple cases, and settings when multiple exposures may have occurred. Whilst there can be limitations to this data as it relies on how well the positive case engages with the national Track and Trace system, it has been used effectively to identify outbreaks early, and also to proactively engage with settings about their COVID security.

b. Outbreak investigation and risk assessment

Outbreak investigation and management will be carried out in line with the agreed processes within Trafford Outbreak Control Plan – COVID 19. Within this, the Trafford SPOC will work with the GMITCH to review the information available and any required actions. This will involve contact with the setting to gather further information about the numbers of symptomatic individuals and potential contacts, including any other risks. Where significant risk identified, a joint decision will be taken between Trafford Council and GMICTH/PHE to declare an outbreak.

c. Advice & Controls

Infection prevention & control advice will provide the setting to manage immediate risks. The advice will predominantly be delivered via the GMITCH, but in some settings, this will fall to our local services. The advice will include social distancing; PPE use, protective groupings (cohorts), enhanced cleaning; and requirements for closure. Links to relevant national and local advice will be provided, including template letters for further communications, FAQs, and detailed infection control advice where required. There will be case-by-case consideration of the benefits of wider communications/media support, such as letters out to wider groups or reactive press statements.

d. Assess Testing Need

Trafford Council and GMICTH/PHE will determine the need for any further testing, with the priority being any symptomatic people who have not yet been tested. Our local swabbing team may be called upon to deliver any such testing depending on the setting.

e. Assess Need for Outbreak Control Team

If the outbreak is complex and multiple issues arise, Trafford Council and GMICTH/PHE will discuss the need to convene an Outbreak Control Team. This will be based on assessment of key indicators including, vulnerabilities of cohort affected, number of cases, controls and measures in place, and engagement with the contact tracing team. Local operational process in place to assist with risk assessment. The key members of this will include Trafford Public Health, PHE; the Community Infection Control Team; representative(s) from the setting; other relevant stakeholders and partners including healthcare; CCG; or environmental health representatives. Communications implications should also be considered at this stage and involved in the OCT if appropriate. A high threshold will be applied, and an OCT will only be convened for the most complex situations. In lower-risk scenarios, the Trafford SPOC will coordinate the local response and determine whether a local response team meeting is required.

f. Continued Follow-up

Consequence management issues will be picked up across partners and addressed. This will be coordinated by the Trafford SPOC. Examples may include bespoke support for vulnerable individuals, PPE supply issues; complex local contact tracing requirements; staffing and continuity issues in a service/setting. Settings will remain in contact with GMICTH/PHE and Trafford SPOC to inform of any further issues or changes to the situation. The risk assessment will be reviewed if information emerges that would change the approach (e.g., increase in the number of cases)

g. Close Outbreak

In the short term, once all necessary infection prevention and control and consequence management actions are complete, the situation is closed for further actions. The outbreak can be declared over 14 days after the last case of COVID-19 infection. Further actions around consequence management may need to continue beyond this period if there has been a significant impact.

h. Further Monitoring / Notification

The setting will monitor the situation and will notify Trafford SPOC if the situation worsens, and further input is required.

The GMICTH holds the SOPs which outline more detailed steps that will take place in the event of outbreaks in specific settings and situations. These have been informed by detailed scenario planning, which has taken place at a GM and local level.

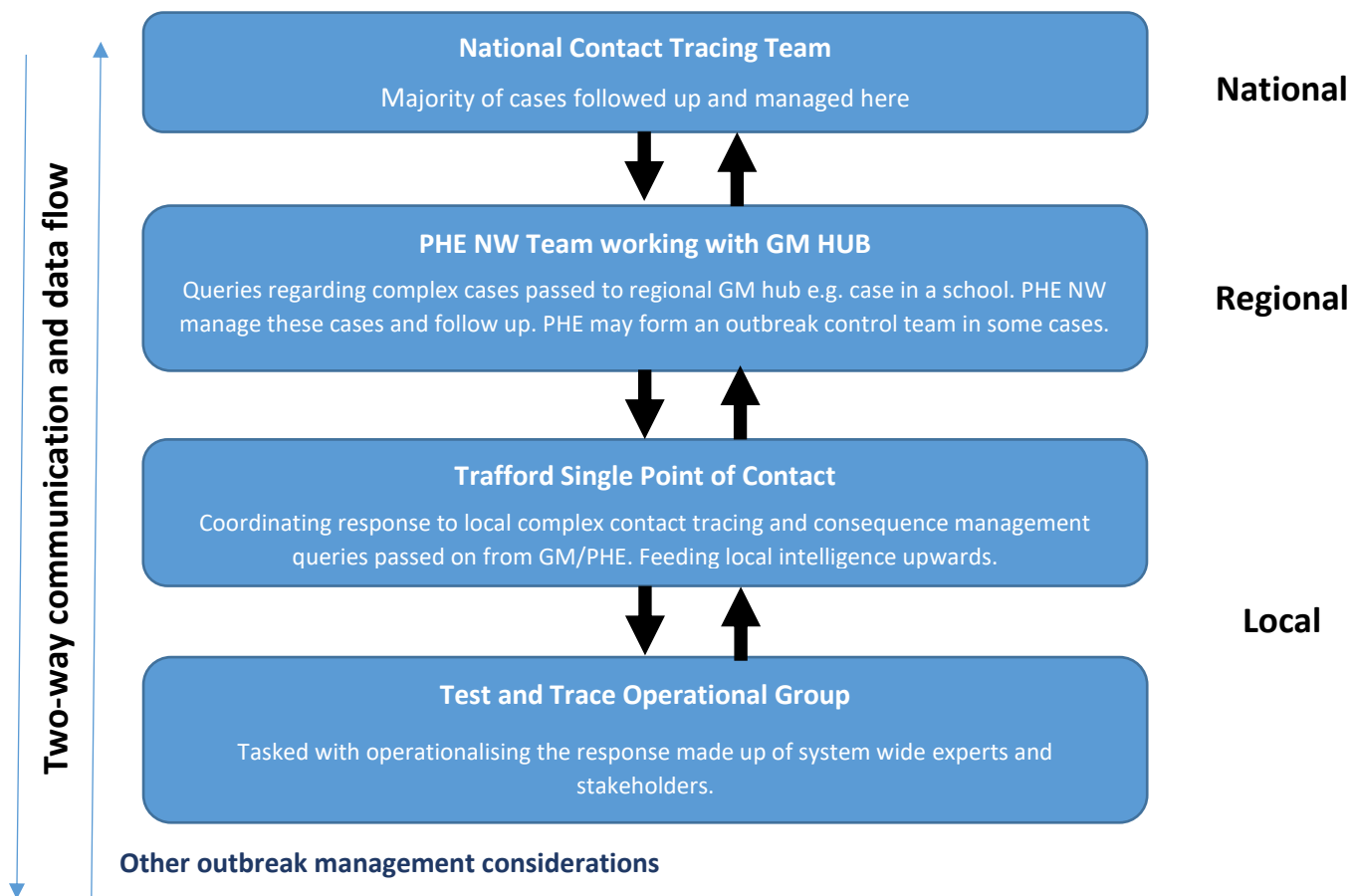
Hours of Operation

The Trafford SPOC operates from 09:00 – 17:00 Monday to Friday. Outside of these hours, we have a local Public Health on call response. Health protection advice is also provided by the PHE North West Health Protection Team.

Trafford Council’s normal civil contingency contacts will be used for any relevant out of hours response, which includes access to local public health advice from the Trafford Public Health team.

Figure 5 below summarises the different roles and responsibilities during an outbreak situation emphasising the important role of two-way communication in that system.

Figure 5 - Summary of Roles and Responsibilities Relating to COVID-19 Outbreak Management



Organisations that deliver essential services may require support if large numbers of staff are asked to self-isolate. Alerting organisations to these risks is an important aspect of the communications and engagement work, supported by the Public Engagement Board and the Health Protection Board.

In situations where consequence management issues are identified for organisations, the following actions will be taken:

1. Escalation to the Trafford SPOC via the GMICHTH or local intelligence;
2. The impact on the organisation will be discussed with the organisation – this will include any other relevant partners.
3. Agile risk assessments will be conducted with all partners, and actions will be developed to mitigate the impacts identified.

This process will ensure that appropriate isolation as advised by the NHS Test & Trace service can be implemented to prevent further spread of COVID-19 while also limiting any adverse impacts this may have.

Critical organisations and services in Trafford which are at risk if high numbers of staff self-isolate include:

- Primary and community care services
- Emergency services (police; fire & rescue; ambulance)
- Essential council services (e.g., refuse collection, safeguarding, social care)
- Care homes

- Utilities
- Schools and childcare providers

Please note this list is not exhaustive.

Consequences for Individuals

Some individuals may either not be in a position to comply with self-isolation (e.g., homeless people, those with social or mental health issues) or may struggle to support themselves if they are shielded or asked to self-isolate. Others may not comply with self-isolation due to the economic and social impact on them and their family.

In situations where consequence management issues are identified for individuals, the following actions will be taken:

1. Escalated to the Trafford SPOC via the GMICTH or via local intelligence;
2. The Trafford SPOC will identify the most appropriate method to provide support to the individual to enable them to comply with self-isolation (via referral into relevant support or specialist service) – this will include any other relevant partners;
3. Key partners to support individuals include but are not limited to:
 - Trafford Council Contact Centre as a front door to main support and council services;
 - Trafford Community Response Hubs as a key provider of humanitarian support;
 - Citizens Advice Bureau – supporting residents to access financial support during isolation, e.g., payment holidays.
 - Trafford Assist – this is Trafford’s local welfare assistance scheme designed to help residents meet immediate short term need and help them back to independence.
 - Welfare rights for more complex financial support and welfare assistance benefits;
 - NHS volunteer service and local third sector support in their community;
 - Foodbanks – ensuring that the foodbank offer is back to normal after the lockdown and able to fully support residents where they cannot access or afford food.

There is a potential resource impact for the system of supporting individuals to self-isolate, for example, through continuing to provide humanitarian hub support. These resource implications will be escalated via the Trafford Test & Trace Steering Group and fed through to the Health Protection Board or Public Engagement Board where required.

Communications during a specific outbreak

- During an outbreak, it will be necessary to ensure clear communication across all partners. The Trafford SPOC will work with communications leads across Trafford Council and other partners, including PHE to determine any reactive and wider communications required in relation to a specific outbreak
- Where required, Trafford SPOC will work with PHE or the GMICTH to develop reactive press statements relating to outbreak situations as they arise and
- The team will use opportunities to promote messages to businesses on COVID-secure practice and keep in touch on issues.
- SPOC contact details will be shared with partners to help two-way communication and help support partners in preventing and managing cases.

Media and Political Impact

Outbreaks in certain organisations such as schools may result in wider media interest, which can cause public unrest and disruption.

The Public Engagement Board, the Health Protection Board and the Trafford SPOC will support specific settings with resources to provide clear advice and information in the appropriate media and format and will manage any wider media and political impacts in these situations as they arise

Managing Delivery

A log of all actions arising from the various workstreams supporting COVID-19 outbreak management will be held by the Trafford SPOC and GMICHTH/PHE and can be reviewed through the governance channels to track progress and ensure actions and control measures are being followed up.

3. Responding to Variants of Concern

Over time, all viruses mutate. Those that spread more quickly or are potentially resistant to interventions are known as "Variants of Concern" (VOC).

Localities across GM are agreed that there has been little added value from surge testing, not least because the reporting of results is too slow to be of any value in either case finding or case management. We are therefore recommending instead that we:

- Request enhanced level of genomic sequencing to be turned on for all positive PCRs, to see the levels of the new variant(s) in GM.
- Increase the waste water sampling including analysing for Variants of Concern (VOCs) where indicated, with an aim of bringing more areas in the programme (currently Trafford and Manchester are covered by the Davyhulme site which gives a single result for the whole area covered. Stockport by contrast has 3 sites and Oldham has 9 so the results are more useful)
- Ensuring overall good performance of Test, Trace and Isolate
- Continue with confirmatory PCR testing for positive lateral flow tests.

Nevertheless, if a variant of concern was identified in Trafford, and a mass testing and case finding exercise was requested to identify anyone who with the new variant, Trafford has developed a plan that covers the following areas:

Area	Action	Detail
Planning	Understand if testing is required	Assess when VOC was found and what contact tracing occurred. Decision to be made on if Surge Testing should go ahead.
	Identify Area	Finalise map, identify household numbers within the area, including estimated number of over 16's. Identify schools & businesses within the area, & identify potential local barriers to accessing testing.
Test Sites	Set up Mobile Testing Units (MTU)	Agree how many MTU's are needed, ascertain viable locations and work with owner if not owned by Trafford. Carry out risk assessment.
	Set up Collect & Drop Hub	Ascertain viable location for Collect & Drop Hub. Carry out risk assessment. Agree opening hours.

	Develop SOP	Standard Operating Procedure (SOP) to be developed for running of test sites and Collect & Drop Hub. To be based on Birmingham SOP.
Neighbourhood Door to Door	Source Volunteers	Source staff and volunteer teams to knock on doors to increase awareness and encourage uptake. Social Care have a list of potential volunteers.
	Put in place Adult Social Care Support	Home care providers will need to assist people within the area to do their tests/ administering tests where appropriate/needed. Risk Assessment & SOP required.
	Create Collection Pack	Collection Pack to be prepared with collection instructions, how to register the tests, and how to administer the tests etc.
	Send out Volunteers	Split areas into zones. Script, guidance and training provided for staff and volunteers. Create Door knocking log and issues log.
	Report Data	Ensure daily reporting system in place re number of tests collected, returned etc.
Communications	Text Houses Where Test Kits will be Dropped Off	Performance to pull off information of vulnerable groups in identified area. Exchequer Services to add contact details. IT & Digital to send out text message to inform those who are homebound/shielding informing them about surge testing and stating somebody will knock on their door to hand out a home testing kit
	Communications to be sent out	Communications to be developed from NHS Test & Trace support pack. To include, letter, flyer, social media, & website. Issue press notice.
	Recruit key community leaders	Key community groups & local leaders to be asked to support around communications (e.g. faith groups & counsellors)
Contact Tracing	Meet with stakeholders	The contact tracing operational team (Trafford Test and Trace strategic team, Environmental Health, Central Coordination Team; GM Integrated Contact Tracing Hub, and Public Health England NW) will meet every morning

Trafford has a strong tradition and credibility in crisis management but learning from other areas that have responded to VOC gives us a good perspective on how to access and use surge capacity efficiently. As part of our local response, we will look to recruit a large number of volunteers to support the delivery of home testing kits. A list of volunteers from Trafford Council's social care team has been collated for use and additional efforts linked to our community engagement and community champions work is underway.

CHAPTER FOUR: Recovery from COVID-19

1. Health and Social Care Recovery and Reform Programme

Trafford’s health and social care services have collaborated to meet the challenges of the unique situation that the COVID-19 pandemic has presented, demonstrating our ability and determination to rebuild a more effective system.

Building on the Trafford Locality Plan which was based upon our commissioning and delivery of services for our population, for our people, in the place where we live and work and in partnership with others, we have developed a our recovery and reform programme.

The strategic principles of **Population, People, Place and Partnership** remain fundamental and core to our collective ambitions. The programme is focused on “**Living Well At Home**” and will ensure the following:

- People who need care and support should receive this where possible in their own bed.
- People receive the right support at the right time as close to home as possible.
- Safety and well-being is paramount.
- We will anticipate in advance if and when our system can’t deliver against the principles and have a plan ready to support our providers and a maintain safe care for our residents.
- The citizen should be empowered to self-manage their care and support.

The Health and Social Care Recovery and Reform Programme has been created to support our move from response to the pandemic into recovery and reform of the system. New governance arrangements has been developed to support the infrastructure of the programme:

System Connectivity

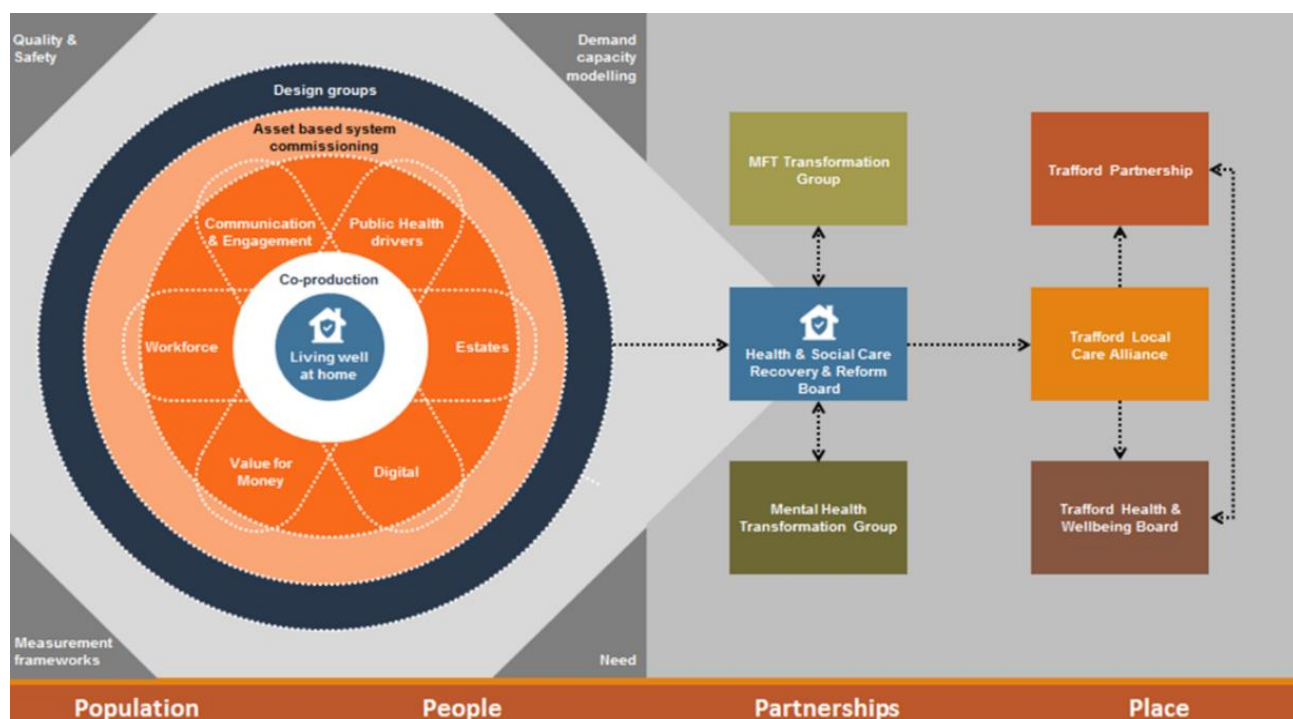


Figure 6 – Health and Social Care Governance Structure

Health and Social Care Recovery and Recovery Board

System Leaders meet weekly to ensure a smooth journey into recovery and reform, the Boards main remit is:

- To oversee joint working within the organisations with representation across the system.
- To define tasks, activities and resources for the development and embedding of the programme.
- To provide key strategic direction in a timely manner and recommend where appropriate for decisions to be escalated to other governance forums.
- To manage the resources assigned to the programme as it progresses and ensure collaboration and co-production throughout the work programme.
- To identify any risks and issues that may adversely affect the timely accomplishment of allocated tasks
- Serve as the conduit through which information about the programme is communicated to colleagues.
- To oversee the development and delivery of all recovery and reform activity in accordance with agreed priorities.
- To ensure maximum benefits are achieved to support all programme activity.
- To play a key role in communicating the change, promoting collaboration and assessing the impact on stakeholders.

Designing a new system

The Health and Social Care Recovery and Reform Board is supported by three Strategic Design Groups (SDGs):

1. Living Well At Home.
2. Living Well in My Community.
3. A Short Stay in Hospital.

These groups are led by system leaders from both health and social care to ensure collaboration across the system.

The scope of the SDGs

Living Well at Home (LWAH)

To develop a range of support to enable people to live fulfilling independent lives in their own homes (and other home-settings) for as long as possible. Building on personal strengths, natural supports (such as support from family and friends), community assets, including support from non-commissioned service, the CCG and Council will commission a range of services which provide specialist services that either cannot be provided in a different way.

The LWAH model provides a fundamental shift to asset and strengths based care which not only meets peoples' individual needs, but also keeps them connected to family friends and the wider community.

The Living Well in My Community (LWIMC)

This Group is responsible for developing a place-based community model that can respond to local people's needs, creating an environment where residents feel supported, educated and have access

to the right information and advice and guidance; people are connected to their local communities, to community leaders, and to a diverse range of groups and services that exist in their area; are enabled to help each other as good neighbours living in great communities; and are supported in their physical and mental health.

The group proactively seeks out good practice from other local authorities and broader community success stories, embedding these into Trafford where appropriate.

The Strategic Design Group aims to:

- Development a place-based working / the community hub model.
- Re-design of information and advice services across Trafford with our partners.
- Support the public health agenda and the wider determinants of health such as poverty, environment; public health priorities around prevention.
- To support the sustainability of the voluntary, community and faith sectors.

A Short Stay in Hospital (SSIH)

This group addresses a number of challenges which will need to be managed at a locality, system and national level in order to run an efficient and safe service in and out of hospital that does not create health inequalities.

The aim is to create a strong, safe, sustainable health and care system for the future by ensuring consistent and evidence based pathways of care. People will be seen by the appropriate specialist in the right place and at the right time with more services provided and accessed in the community.

There are three main work-streams to this group:

1. Planned Care
2. Urgent Care
3. Cancer Care

A cross-cutting programme of for the health and care system is the Mental Health Strategy and Transformation Programme, which aims to:

- To develop and implement a mental health strategy which ensures that mental health is prioritised equally alongside physical health.
- To ensure Trafford's Mental Health Strategy is fully integrated across health and care and co-produced with our citizens and stakeholders.
- The strategy will future-proof against crises in whatever form they come and our locality offer will be crucial to achieving this ambition.

Enablers to change

The Health and Social Care Recovery and Reform Programme is supported by system enablers that include:

- Finance
- Workforce
- Digital
- Estates
- Communication and Engagement
- Performance, Quality and Improvement

Key achievements in 2020-21

Living Well At Home

- 57 Home Care Tenders have been scored and are on track for Framework defined by 1st April 2021 with 4-6 providers expected in 4 Trafford Neighbourhoods.
- Aligning reporting of Local Care Providers with LWAH and considerations made on 'Place' commissioning, re-enablement and capacity with production of social value.
- Tender evaluation completed and going through sign off process the updating Adult Social Care Teams re: the new model in preparation for launch.
- The purchase of, two residential care homes was completed by the Council on the 8th February 2021.
- A large blueprint for change and reorganisation with re-standing up of day services has commenced.

Living Well in My Community

- Community Hubs continue to support our most vulnerable residents and are experiencing uptake in shopping support requests in March 2021.
- Health Inequalities dashboard completed and indicators agreed and set up which will inform Neighbourhood Profiles - Neighbourhood Profile Task and Finish Group established.
- Corporate Equality Strategy completed and approved by Council and CCG governance.
- Thrive are leading the 'Principles of Investment Strategy' for the VSCFS and working to develop the 'Community Collective'.
- A partnership wide information and advice offer has been re-designed.

A Short Stay in Hospital

- Urgent Care - Front Door triage and streaming underway.
- Virtual Clinical Hub-AKA Urgent Opinion and Supported Early Discharge piloted in Wythenshawe coming on-line.
- Talk before Walk – 111 First (roll out across NW) with direct booking into Emergency Departments and Local Clinical Assessment Services.
- Overarching programme plan in place for Long COVID.
- Trafford Cancer Partnership (TCP) re-established.
- Rapid Diagnostic Centre has gone live date of 22nd February 2021 for the non-specific symptoms of cancer.

2. Activities to enable 'living with COVID' (COVID secure)

The Government's roadmap to recovery is stepped process to coming out of lockdown by autumn 2021, whereby public and private sector is gradually permitted to open and resume business activity with COVID safety precautions. The COVID-19 response roadmap has four phased steps and progression from one step to the next is dependent upon the assessment and management on COVID prevalence in the population.

The team will continue to:

- Engage with businesses through communications and face to face visits to promote the COVID secure guidelines.

- Undertake proactive and reactive work by the enforcement team to check on compliance with the regulations and guidance in business settings.
- Host business webinars and online material to support businesses in implementing changes to become COVID secure.

3. Ongoing role of Non-Pharmaceutical Interventions (NPIs)

Infection prevention and control

Good infection prevention and control processes are essential to ensure that the risk of transmission of COVID-19 is minimised. Public Health and the Community Infection Control Team (CICT) provide guidance, education and support to infection control settings, including handwashing, environmental cleaning, waste disposal, and the proper use of PPE. We will support organisations to access the appropriate guidance, training and supplies to maintain effective infection prevention and control processes.

Trafford has formed a Mutual Aid Hub with Manchester City Council for provision of PPE. The MA hub together with other GM LAs work in partnership with the GM level hub for the receipt and bulk storage of national LRF issues of PPE. The MA hub holds a rolling 21 days stock of all PPE items with additional resilience provided through the GM hub.

PPE can be ordered via a dedicated Trafford [online form](#). Once submitted, the request is automatically sent to the relevant commissioning teams for approval, then to the warehouse team where to be packed and delivered directly to the service in need.

Orders in Trafford must be received by midday Tuesday for delivery to take place on Wednesday-Friday that same week.

The Trafford and Manchester MA hub provides:

- Access to a full range of free PPE to local health and social care providers in Trafford who are unable to access free PPE via other routes, such as the government portal. This includes local authority services (CHC/ASC) LD/MH community care, extra care, PHB funded personal assistants and extra-resident unpaid carers
- PPE for social care primary care providers on the PPE portal in clinical need. For example, if there is an increase in local COVID-19 cases or temporary difficulties accessing other distribution channels
- a combined stock management, PPE order processing and distribution logistics operation
- continuous review of live PHE guidance for the correct usage of PPE items per sector
- robust clinical review and guidance of safety practices and quality assurance of PPE used by frontline staff (CCG and Council staff). This has enabled the safe use and access to suitable PPE items in our locality.
- data analytics to monitor PPE access and ensure there is sufficient supply to meet demand across all sectors

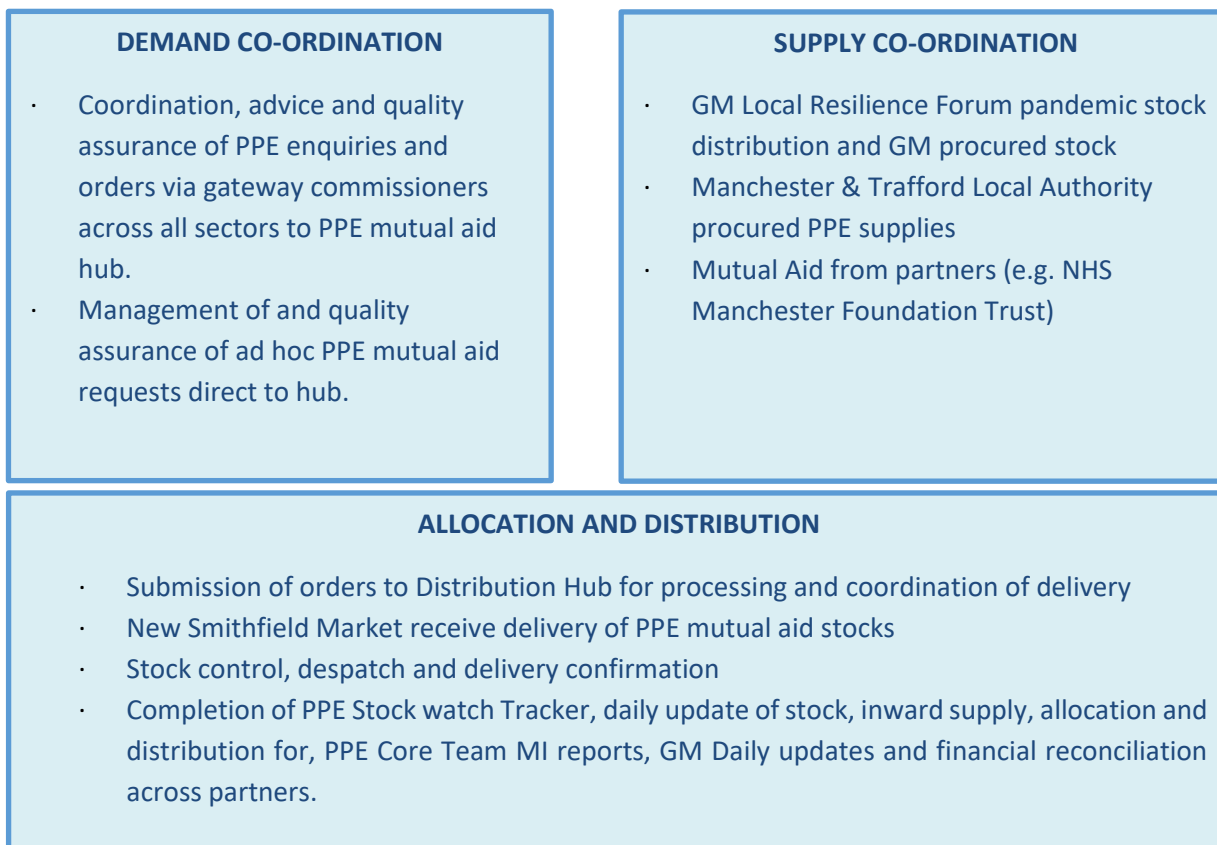
The MA hub acts as an enabling function for other areas of infection control (targeted testing, vaccinations, and community engagement) and is able to rapidly respond to emerging programs of work.

- The MA hub also provides emergency support with logistics, stock management and access to PPE in response to infection control needs: Provision of additional PPE if there are local

outbreaks in specific settings which require an immediate an increase in supplies to prevent spread.

- Provision of a buffer stock should an organisation’s PPE stock become reduced as a result of order delays/changes in guidance/supply chain issues.
- Provision of PPE items to new emerging cohorts not covered through the national PPE portal

PPE Mutual Aid Hub High-Level Operating Structure



4. Action on enduring transmission

The COVID-19 pandemic has emphasised the need for better preventative services and of taking a whole system approach to health improvement.

The risk of harm from COVID-19 is not evenly spread across the population, and the impact of the known risk factors is increased when more than one factor is present. Nationally, the evidence tells us that COVID-19 is increasing health inequalities, with the greatest impact falling on those who already have poorer health and wellbeing. We need to ensure that we address this locally, as we already have steep inequalities between our most and least deprived wards. Issues such as clean air, maintaining a healthy weight and blood pressure, and having good mental health are paramount for individual resilience

There is a need to further amalgamate the efforts to respond to COVID-19 with the planned recovery work across the health and social care system, particularly as we exit current restrictions and embark on the development of our H&SC Locality construct in the context of the emerging Integrated Care System arrangements. More work needs to be done to ensure people’s concerns and needs are reflected in service provision across Trafford. We must recognise the disproportionate effect on older people, particularly in deprived areas and from BAME communities, and the implications this

will have in the future for reducing existing health inequalities, which have been amplified by COVID-19. Those with cognitive impairment, such as dementia, may be disproportionately affected by COVID-19, both in terms of the number of deaths, and resulting detrimental consequences caused by restriction on visiting in care homes and restrictions in social interaction with people from outside your household, which may hasten cognitive decline.

In order to adequately channel the efforts of all our partner organisations in the new governance arrangements it is important to have the correct capacity supporting integrated strategy development, supported by a robust programme management approach that connects the aspirations of the One System Board and the delivery function of the Provider Collaborative arrangements.

To are committed to maintain whatever level of daily preventative measures are required to keep Covid-19 transmission at a manageable low level, thereby enabling the health and social care sector locally to clear backlog, to support people whose health needs have deteriorated during the pandemic (including those suffering with longer term sequelae of covid infection), to transform, integrate and reset.

We are taking steps, across the system, to address covid related inequalities: Ensuring our vaccination programme is equitable through a rigorous health inequality impact assessment process which is underway; Developing a Council Recovery Plan with reducing inequalities at its heart; a primary care health inequalities quality improvement plan; and Trafford's recently published poverty strategy. The Director of Health's Annual report for 2020 also focuses on the impact covid has had on our population and helps chart our path to building back fairer.

CHAPTER FIVE: Key enablers

1. Data integration and information sharing

We are working to ensure that information governance arrangements are robust and that there is timely sharing of data, and that there is sufficient expertise in the analysis and interpretation of data to identify any areas of concern and to support local decision making. Our approach continues to be refined but we must remain intelligence driven to enable a system wide response – COVID-19 intelligence is being used to i) lead engagement work ii) address locality inequalities and ensure BAME and other high risks groups are protected, iii) direct staff and partners in COVID-19 activity, iv) publish data to keep residents, staff and businesses informed and v) provide information for governance assurance and information.

Governance: This work will be coordinated by the Data Collection & Modelling workstream overseen by the Health Protection Board

Our approach

There are three key strands of work within this theme.

The first is providing timely information that will help manage and predict outbreak patterns and impacts of COVID-19 outbreaks.

The second is providing data around the impact of COVID-19 on services and how this can be mitigated in the recovery plan.

These two aspects also require us to be able to provide an overview of the key indirect impacts of COVID-19.

Finally, we need to ensure that we have robust processes for information management, governance and security.

Guiding principles

The following principles are central to a local approach to data management and interpretation:

1. Data should be used to guide local decisions related to the pandemic;
2. The dissemination of data should be done in a controlled and consistent way so that all sectors are giving the same message;
3. All areas working with data related to the pandemic should work together;
4. Data must be managed in accordance with information governance and data sharing agreements.

Aims

The aims of using data are to:

- Identify local outbreaks and hotspots through data analysis and mapping;
- Provide evidence to support neighbourhood-level decision making;
- Provide evidence to support resource distribution decisions (e.g., testing capacity).
- Provide evidence of communities or groups who may require additional support (e.g., awareness of larger numbers of people in a particular area self-isolating)
- Where possible, undertake forecasting and predictive analytics;
- Allow the building back of services taking into account the prevalence of risk factors in the community.

Key Strand 1 – outbreak management and prediction

As identified earlier, the testing data will allow us to identify cases, clusters and outbreaks. While outbreak control teams will manage outbreaks locally, in addition to this, there is a need to gain data on other metrics (e.g., hospital bed or care home capacity) in order to monitor the impact of the disease.

These data will be provided by the data workstream in accordance with the needs of the Director of Public Health. They will be presented in an easily accessible dashboard with clear trigger points, so that decision making is transparent.

Key strand 2- impact on services and the recovery plan

Data on the impact of COVID-19 on service and suggestions of where work should be focussed going forward will be driven by the recovery plan.

These metrics are being drawn together by NHS Trafford CCG in collaboration with the council and Public Health colleagues.

Key Strand 3 -Information management, governance and security

Throughout Greater Manchester, details about individual patients will be accessible through the Graphnet system. This will include COVID-19 related data. Allied to this is a system that will allow data to be pulled at a pseudonymised level to be able to build a picture of local trends.

Information governance around coronavirus has been expedited, with changes being made to the Control of Patient Information regulations. This has allowed information to be shared more widely between different sectors in Greater Manchester. Information security is managed by existing systems in Trafford and in Greater Manchester.

A shared approach to analysis, presentation and interpretation is crucial for both key strands 1 and 2

The COVID-19 workstream is a collaboration between Trafford Council and CCG, working to provide data on management of COVID-19 infection, but also to assist in the recovery phase.

An instructional framework is in development to better coordinate data activities, enable prioritisation and set parameters for the data needed.

This will be overseen by the Health Protection Board, headed up by the Director of Public Health.

Key products developed to date

Data for external stakeholders and the public

- A weekly stakeholder briefing
 - This gives information around infection rates in the locality, together with related interpretation and messaging
- Trafford data lab applications
 - Local COVID-19 application with new cases, rates per 100,000
 - National COVID-19 tracker

Further public-facing datasets will be produced as the data quality and consistency develops.

5. Governance arrangements

Our approach

Daily Briefing/planning meetings

We have established a core group that meets every weekday morning between 9-9.30, to review the situation and to ensure that we have actions in place to identify and respond to any emerging issues or any changes in policy or guidance. The meeting takes a structured approach, covering data, testing, contact tracing, outbreak management, vaccination, and community engagement. We also use this meeting to plan any communications and to ensure that we have our plans in place for the fortnightly Health Protection Board and the Public Engagement Board.

Trafford has established three key Boards to provide oversight and governance of our local response to COVID-19:

i. COVID-19 Health Protection Board

This is a multi-agency board chaired by the DPH, at "silver" level, linking into other Silver Boards. It reports in Trafford Gold Command Recovery Coordination Group (RCG).

Its focus is on the coordination of key health protection elements relating to COVID-19:

- NHS Test and Trace
- Personal protective equipment (PPE)
- Infection prevention and control (IPC)
- Data management, analysis and interpretation
- Approval and dissemination of local guidance
- Internal communications

ii. Public Engagement Board

This is an Elected Member led Board with a focus on communication and engagement with the general public. It will develop local support for implementing the necessary steps for reducing the transmission of COVID-19 by:

- Minimising the negative impacts of control measures on the general population, specified sub-groups of the population, and families and individuals
- Building trust in the NHS Test and Trace and vaccination programme
- Linking to and promoting the work of the community hubs
- Ensuring that higher risk groups are identified and supported
- Ensuring that work to address health inequalities is planned and supported
- Co-producing materials with the VCSE sector and the public
- Developing measures to assess the success of the above activities and ensuring that any learning is embedded into future planning

Our Public Engagement Board is a sub-board of our Health and Well Being Board.

iii. Recovery Co-ordination Group

This Gold group consists of senior leaders from across the CCG and council with a focus on co-ordinating the response and recovery activities to deliver an effective COVID-19 response by:

- Provide strategic decision making during the recovery phase, following the Coronavirus pandemic/in its response to COVID-19, for the borough of Trafford.
- Provide visible and strong leadership during the recovery phase.
- Develop the recovery strategy for each sub-group, and ensure implementation of the strategy so that public confidence is rebuilt.
- Represent each sub-group interests and statutory responsibilities during the recovery.

- Work with strategic partnership forums i.e. Trafford Partnership, residents, communities and businesses to ensure the best outcome/recovery and contribute to the recovery strategy for the borough of Trafford.
- Ensure the co-ordination and delivery of consistent messages to stakeholders, partners, colleagues, residents as well as the external media.
- Ensure alignment with the wider GM and GMCA agenda.
- To oversee the review of business continuity plans ensuring each area of the business has an agreed Business Continuity Plan.

Supporting Structures

The following structures and partners across Trafford are currently established to support the Health Protection Board/ Public Engagement Board and manage the response to COVID-19:

- Trafford CCG
- Trafford Silver Groups (Adult Health & Social Care / Children's Health and Care/Infrastructure, Environment and Physical Activity/Sustainability and Economy)
- Trafford COVID Single Point of Contact
- Trafford LCO/MFT – Infection Prevention & Control
- North West Health Protection Team, Public Health England (GM Hub)
- Trafford Testing and Contact Tracing Group
- COVID-19 Data workstream
- GM Targeted Testing Steering Group
- Trafford Targeted Testing Task & Finish Group
- GM Contact Tracing Group
- Trafford Silver Resources Group
- Trafford Enforcement Co-ordination Group
- Trafford Engagement Co-ordination Group

These command and control structures will feed into RCG via the Health Protection Board. This route of accountability will have responsibility for:

- Monitoring and contributing to the surveillance of new and emerging outbreaks of COVID-19;
- Identifying and implementing national and local Public Health actions in both clinical and non-clinical settings;
- Leading on testing and contact tracing systems as part of the wider Test, Trace, Contain and Enable strategy;
- Providing scientific and technical oversight;
- Continued oversight of implemented actions and Infection Prevention Control Teams.

Lead officers for the Trafford SPOC will feed relevant information and raise challenges or issues that may require wider input into the Health Protection Board.

6. Resources

The impact of COVID-19 cannot be underestimated in terms of its impacts on system resource. Colleagues across entire health and social care system and the wider economy have come together to fight the pandemic and there is a need for recognition of the goodwill and solidarity of staff to enable delivery. Voluntary support and the help of other partners including the British Armed Forces has been critical for successful delivery. Single points of failure, staff wellbeing, and quality risks have been identified within existing structures and are being proactively managed to ensure staff wellbeing and delivery assurance. Trafford's Director of Public Health, Deputy Director of Public Health

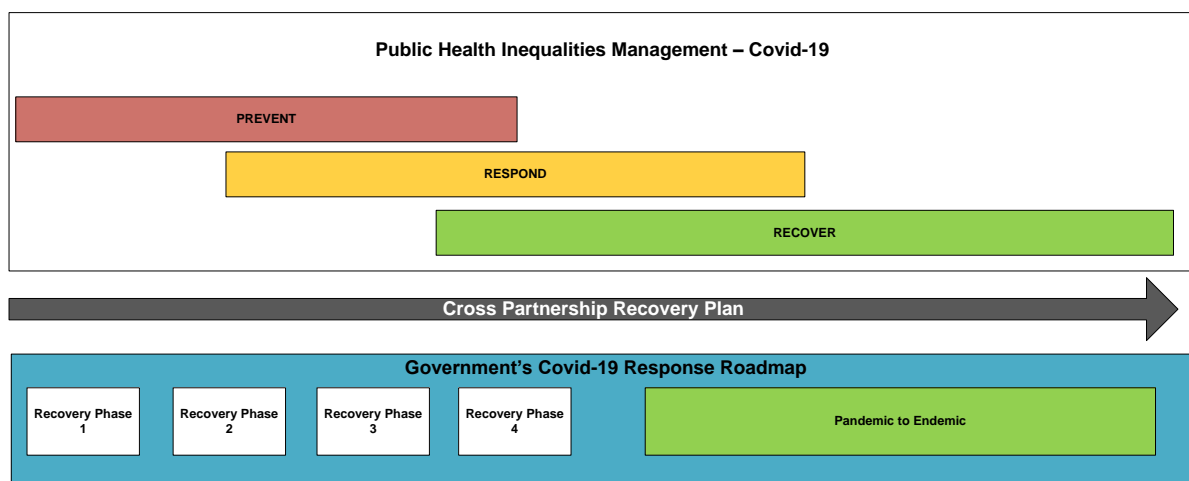
and Public Health Consultants remain integral to the current COVID-19 delivery structure despite having broad Public Health portfolios and other duties. The impacts on wider work programmes need fully scoping and the resource requirements for full recovery need mapping but are underway.

In recognition of the importance of local systems and in particular the leadership of the Local Authority and local Directors of Public Health, the government has made finances available to every local authority to develop a resourced Outbreak Management Plan. This money is being spent on delivering our local outbreak management plan in accordance with the guidelines for allocation. Mapping of adequate resourcing to deliver functions is an ongoing exercise but a central PMO function to drive the activity of the Outbreak Management Plan and ensure delivery assurance is being recruited to.

The Government’s roadmap to recovery

The Government’s roadmap to recovery is a stepped process to coming out of lockdown by autumn 2021, whereby the public and private sector are gradually permitted to open and resume business activity with COVID safety precautions. The COVID-19 response roadmap has four phased steps and progression from one step to the next is dependent upon the assessment and management on COVID prevalence in the population. The PH team COVID response work is aligned to run alongside the national recovery phases to deliver the short term infection control (Prevent) activities and embed within the longer term (Respond and Recover) health inequalities management programme.

The work activity is programme managed and detailed in the PH team ‘Cross Partnership – Recovery Plan’. The Plan is closely aligned with the National COVID-19 Response document as well as locality based interventions for system recovery through the phased recovery detailed in the response document and at locality level.



Prevent – Infection Control

The Prevent programme of work is closely aligned to the recovery roadmap and delivers essential infection control activities to support public and private sector services through the phased recovery. As we progress through the recovery roadmap, there is expected to be a reducing level of activity from each of the pillars in the Prevent – Infection Control.

Respond – Data Intelligence & Surveillance

The Respond programme of work is critical to enable a data intelligence led approach to understanding health inequalities amongst Trafford communities and keeping communities engaged and informed throughout the pandemic, encouraging behaviours to prevent the spread of COVID-19 and building trusted links with the community to understand and support with overcoming barriers which cause health inequalities. The pandemic has brought to the surface long term health and social inequalities, maintaining positive relationships and exchanges with the community is essential for accomplishing the long term strategic goals of the Public Health, health inequalities programme.

Recover – Programme Delivery, Health Inequalities

The Recover programme of work delivers the long term strategy to improve community health outcomes and challenge health inequalities, it incorporates and continues to progress the management of COVID-19 infection control and health inequalities response as part of the wider programmes of work. Furthermore, the PH team’s Prevent, Recover and Respond programme of work links to and works alongside wider Council teams and external partners to deliver the objectives of the pandemic recovery activity.

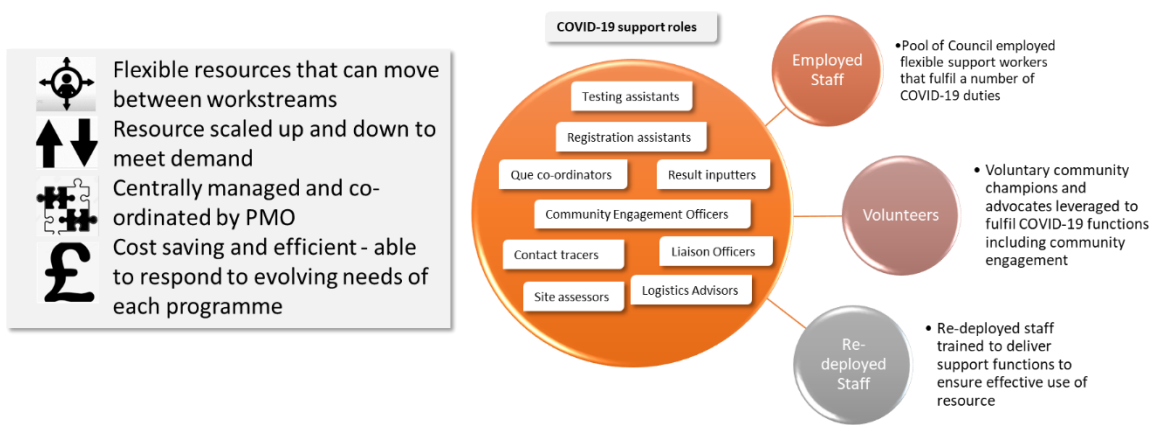
Figure 7: Evolving COVID-19 Programme Response Structure

Public Health - Inequalities Management & COVID-19								
	PREVENT – Infection Control				RESPOND – Data Intelligence and Surveillance		RECOVER - Programme Delivery Health Inequalities	
Pillar of Activity	(Control) Testing	(Control) Contact Tracing	(Prevention) PPE	(Prevention) Vaccination	Data & Intelligence	Community Engagement	Governance & Systems	Health Inequalities
Why	Identify positive COVID-19 cases	Outbreak monitoring and management	Health protection and enable business / system continuity	Enable system / community recovery	Enable an intelligence led approach to inequalities management and infection control	Reduce inequalities, relay trusted comms and support	Assurance of programme delivery, system integration	Reduce the impact of health inequalities in Trafford
Key Function	<ul style="list-style-type: none"> - Infection control monitoring - Ensure communities and businesses have access to tests 	<ul style="list-style-type: none"> - Infection control -protect the community/workforce -Trace contacts of infected people - Work with businesses to reduce impact of outbreaks 	<ul style="list-style-type: none"> - Provision of PPE to support infection control and protect the community /workforce - Support business continuity 	<ul style="list-style-type: none"> - Reduce viral transmission - Reduce hospitalisation; - Protect individuals - Business / system recovery 	<ul style="list-style-type: none"> - Enable intelligent use of resources - Ensure inequalities are identified - Identify gaps in knowledge - Right info, right time, right place; 	<ul style="list-style-type: none"> - Enable community to make informed decisions - Promote clear info and guidance - Provide a trusted voice for the community - Promote positive health behaviours - Reduce inequalities - Develop community links 	<ul style="list-style-type: none"> - Programme/project horizon planning - Consistent and timely approach to project delivery - Cross pillar system integration - Managing interdependencies - Governance mapping - Risk Management - Stakeholder management 	<ul style="list-style-type: none"> - Identifying the needs of the population and how these needs may change over time - Impact of COVID - Encouraging healthy behaviours - Helping people to overcome barriers to healthy options
Key Outcomes	<ul style="list-style-type: none"> - Set-up and running of PCR and LFT testing sites - Facilitating distribution of LFT test kits 	<ul style="list-style-type: none"> - Outbreak identification and control - Trend analysis 	<ul style="list-style-type: none"> - Stock management and distribution logistics - Interpreting guidance 	<ul style="list-style-type: none"> - Roll out of vaccination program - Protect the community/workforce 	<ul style="list-style-type: none"> -Understanding data/info needs for stakeholder groups; -Ensuring fit for purpose data reports for each governance 	<ul style="list-style-type: none"> - Community engagement events - 	<ul style="list-style-type: none"> -Challenge activity; ensure system is proactive and resilient; -Link pillars & forward 	<ul style="list-style-type: none"> - Better and healthier communities - Better life chances

			- Quality control; - Data analysis		meeting; I/G assurance; -Data-lead decision making		planning; -Decision making process outside formal meetings	
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Flexible resource

Lessons learnt from our response in Trafford have demonstrated the benefits of flexible resources that can be scaled up and down to meet demand. We are in the process of moving from a vertically integrated structure of teams sitting within pillars (testing, contact tracing, PPE etc.) to a more multi-disciplined horizontally integrated team that is flexible and rapidly deployable to meet needs, help create resilience, capacity build, reduce risk and provide delivery assurance.



Existing corporate service teams e.g. H&S, infection control, ICT, remain in need of strengthening to identify and respond to new and existing system requirements. We are working hard to strengthen areas requiring support in order to deliver our LOMP effectively.

Next Steps

Over the course of the pandemic we have had to invest in a number of new areas, diverting workforce from their usual activity. Once the virus has faded, health inequalities will remain. Recovery planning is critical to ensure the council is adequately equipped to deliver its pre-existing system plans, alongside its ability to address current and exacerbated impacts of COVID. The impacts on BAU activity and existing work plans need fully scoping alongside recovery resource planning to ensure we are able to recover from the impacts of COVID-19 and deliver the breadth of high quality local services to our population with improved population outcomes. This work is underway but will evolve and be designed to it is robust enough to flex with new scenarios.

Glossary

ADPH	Association of Directors of Public Health
ASC	Adult Social Care
BAME	Black and Minority Ethnic
CAB	Citizen's Advice Bureau
CAMHS	Child and Adolescent Mental Health Services
CCG	Clinical Commissioning Group
CICT	Community Infection Control Team
COPD	Chronic Obstructive Pulmonary Disease
COVID-19	Corona Virus Disease 2019
CVD	Cardiovascular disease
DPH	Director of Public Health
FAQ	Frequently asked questions
GM	Greater Manchester
GMCA	GM Combined Authority
GMFRS	Greater Manchester Fire & Rescue Service
GMHSCP	GM Health and Social Care Partnership
GMICTH	Greater Manchester Integrated Contact Tracing Hub
GMMH	Greater Manchester Mental Health Trust
GMP	Greater Manchester Police
GP	General Practitioner
IMD	Index of Multiple Deprivation
IPC	Infection prevention and control
JBC	Joint Biosecurity Centre – (government body bringing together expertise and analysis to inform decisions on tackling COVID-19)
JCVI	Joint Committee on Vaccination and Immunisation
LCO	Local Care Organisation
LSOA	Lower Layer Super Output Areas
LTCs	Long Term conditions
LWAH	Living Well at Home
LWIMC	Living Well in My Community
MA	Mutual Aid
MFT	Manchester Foundation Trust
MHCLG	Ministry of Housing, Community & Local Government
MOU	Memorandum of Understanding
MSOA	Medium Layer Super Output Areas
MTU	Mobile Testing Units
NHS	National Health Service
NPI	Non-Pharmaceutical Interventions
OCT	Outbreak Control Team
PCN	Primary Care Network
PCR	Polymerase Chain Reaction – (a technique used to "amplify" small segments of DNA)
PHE	Public Health England
PHU	Public Health Unit
PPE	Personal Protective Equipment
RCG	Recovery Co-ordination Group
RNA	Ribonucleic acid
SARS	Severe Acute Respiratory Syndrome
SDG	Strategic Design Group

SENCo	Special Educational Needs Co-ordinator
SEND	Special Educational Needs & Disabilities
SOP	Standard Operating Procedure
SPOC	Trafford Single Point of Contact
SSIH	Short Stay in Hospital
TMBC	Trafford Metropolitan Borough Council
VCSE	Voluntary, Community and Social Enterprise
VOC	Variant of Concern
WHO	World Health Organisation