

MUNICIPAL YEAR 2019/20

Meeting Title:
HEALTH AND WELLBEING BOARD
Date: 19th March 2020

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Agenda Item:

Subject: Update on Borough
Response to Covid 19

Report of: Stuart Lines, Director
of Public Health

1. EXECUTIVE SUMMARY

Covid 19 is a novel corona virus first detected in China but has now infected over 113,000 people in 113 countries with over 4,100 fatalities. As of 9.00 am on 11th March 2020 there were 456 confirmed cases of Covid 19 in the UK. Six patients who tested positive for Covid have died. It is now accepted that it is 'highly likely' that the virus will now spread in a 'significant way' in the UK.

This update briefs the HWB of current Covid situation in the UK, the national plan and the local response, pressures and concerns.

This update is caveated in that this is a fast moving situation which may change between the time of report writing and the HWB Board.

Recommendations

The Board is asked to note and comment upon this update

Background

- 1.1 On 31 December 2019, the World Health Organization (WHO) was informed of a cluster of cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province, China
- 1.2 On 12 January 2020 it was announced that a novel coronavirus had been identified in samples obtained from cases and that initial analysis of virus genetic sequences suggested that this was the cause of the outbreak. This virus is referred to as SARS-CoV-2, and the associated disease as COVID-19.
- 1.3 As of 9.00 am on 11th March 2020 113,851 cases have been diagnosed in 113 countries and areas (including mainland China), with a total of 4,193 fatalities
- 1.4 As of 11th March 2020 at 9.00 am 27, 476 people have been tested in the UK, of which 27,020 were confirmed negative and 456 were confirmed as positive. Six patients who tested positive for COVID-19 have died.
- 1.5 On 9th March 2020 the first case of Covid 19 in Enfield was confirmed.
- 1.6 On 3rd March 2020 the Government published its coronavirus action plan
- 1.7 The action plan has 4 stages:
 - Contain
 - Detect and stop spread
 - Delay
 - Lowering peak impact
 - Research
 - Vaccine, treatment, models of care
 - Mitigate
 - Minimise impact upon society
- 1.8 LBE has been asked to plan on the basis of a 'reasonable worst case' (RWC) of a 35% clinical attack rate and a 1-2% fatality rate. This would imply approximately 115,000 people becoming ill and between 1,150 and 2,300 dying. In a 'normal' year there are approximately 2000 deaths in Enfield.
- 1.9 Of those who become infected the overwhelming majority will experience mild or no symptoms. However, modelling implications are still that LBE, the NHS and other provider services would experience enormous strain.
- 1.10 The Chief Medical Officer has indicated that the UK may be moving from the 'Contain' stage of the plan to 'Delay'. 'Lowering peak impact' is intended ensuring that if the virus becomes widespread it is slowed so that as few people are ill at any one time as possible.

LBE

- 2.1 LBE is the lead agency with responsibility for system resilience
- 2.2 There was a first meeting of the Enfield Influenza Committee on 11th February. This was chaired by LBE and attended by the Royal Free, the North Middlesex,

the CCG. LBE and providers outlined their plans and contingency measures for dealing with any forthcoming infection spread.

- 2.3 No date was set for further meetings but it was agreed that if and when it became necessary the IPC would meet as often as appropriate.
- 2.4 The LBE Executive Management Team will review the Covid 19 situation weekly for the foreseeable future.
- 2.4 There was a meeting of the Enfield Business Resilience Forum on 11th March. It was noted that the Director of Public Health has declared a need for the Influenza Pandemic Committee (IPC) to start meeting and that internal governance arrangements have been instigated to oversee the Council's response to Covid. External partners fed back on their own planning and business continuity arrangements.
- 2.5 Public Health has been asked to present to the Health Scrutiny Committee on 25th March.

NHS

- 3.1 NHS England has declared a 'Level 4' incident (national emergency) thereby putting in place 'command and control' measures.
- 3.2 All hospitals in England have been told to assume that they will receive Covid 19 cases in due course.
- 3.3 NHS Trusts are receiving daily updates, have regular North Central London teleconferences and weekly national webinars chaired by the Chief Medical Officer, Professor Chris Whitty.
- 3.4 All Acute Trusts have been directed to establish pods for testing to which NHS 111 can direct patients.
- 3.5 Trusts have provided training on the use of Personal Protective Equipment (PPE) and supplies are being monitored.
- 3.6 The NHS has a stockpile of PPE.
- 3.7 NHS Trusts have had staff briefings, provided communications and signage is being displayed for both staff and the public.
- 3.8 The North Middlesex A&E has identified cubicles for patients with a confirmed or unconfirmed diagnosis. A 'drive-thru' swabbing area is being considered as it is thought that this will be recommended by the DH.
- 3.9 The CCG has sent information to all practices including advice on texting information to patients who may have travelled from abroad, and information / advice for pharmacists, on PPE, the identification of possible cases
- 3.10 Both the North Midd and Chase Farm are reporting additional pressures on staff because of the time required for swabbing and testing of potential patients.
- 3.11 BEH are reporting that staff are being diverted from normal duties in order to prepare for the potential spread of the virus.
- 3.12 Going forward all Trusts have concerns² about staffing particularly if they / family members are asked to self-isolate and / or schools are shut.

- 3.13 BEH is further concerned about the difficulties of isolating a patient with Mental Health issues and where this may be clinically difficult / inappropriate.
- 3.14 Supporting the response to the coronavirus is now a key priority for the North Central London NCL CCGs. A team of CCG lead commissioning Directors is now in place to support the response – including ensuring regular liaison with Providers, Local Authorities, Public Health etc.
- 3.15 A NCL CCG coordination centre has been set up at Laycock street, (Islington CCG base) where all enquiries on Covid 19 will be directed and managed.
- 3.16 The volume of community tests required across London is expected to rapidly and significantly increase over the next week. An urgent requirement of the ‘system’ is to significantly increase capacity for community testing (swabbing) including home visits and drive-through facilities.
- 3.17 Key issues include rapidly increasing demand for testing, supporting NHS 111 and Trust workforce capacity, ensuring patients follow correct pathways, increasing costs to the system and ongoing sustainable provision of Personal Protective Equipment.

Discussion

- 4.1 The CMO has indicated that the UK is moving from a ‘contain’ to ‘delay’ stage in the spread of Covid 19. This is because although numbers are low community transmission now seems to be taking place in the UK (e.g. not all cases can be attributed to foreign travel).
- 4.2 LBE is the system lead for community resilience in the borough and it has assured itself that providers and services are as prepared as possible for a possible pandemic.
- 4.3 If and when any spread of Covid 19 becomes widespread enormous strain would be placed upon all services across the borough. One of the biggest issues may be business continuity with large numbers of people off sick.
- 4.4 LBE and all providers have reviewed their business continuity plans. However, until a pandemic arrives it is difficult to predict where supply chains may be weakest.
- 4.5 The Local Resilience Forum is ready to meet again and will meet as regularly as necessary throughout any pandemic. This will enable and encourage mutual aid as appropriate.

Conclusion

- 5.1 LBE as a borough has measures in place to respond to the emerging threat from Covid 19.
- 5.2 Members of the HWB Board are invited to comment upon the above.