

# Review and update of the Leicester Coronavirus Response

For consideration by: Health & Wellbeing Scrutiny Commission

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#### **Useful information**

■ Ward(s) All

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# 1. Purpose of report / Introduction

On 18<sup>th</sup> June Leicester stood up an Incident Management Team (IMT) to investigate and control the increase in coronavirus (COVID-19) cases flagged by the Director of Public Health for Leicester City Council following the publication of pillar 2 (community) test results for Leicester City.

On 29<sup>th</sup> June 2020, the secretary of State for Health and Social Care announced local restrictions to the city of Leicester and to parts of the bordering Leicestershire County. At this time, the incidence of coronavirus cases in Leicester per 100,000 population for the previous 7-day period was 135/100,000. The IMT established a governance structure to investigate and control the outbreak.

#### 2. Report Summary

What were the key interventions used to stabilise and then reduce the number of new infections in Leicester?

## **Testing**

Leicester implemented a rapid increase in targeted testing and case finding with national and local infrastructure. This included increasing from 2,000 to 15,000 community tests per week through multiple testing sites, hyper-local approaches were deployed in the most affected communities including tests being offered door-to-door along with information and support for whole households to include those with and without symptoms (symptomatic and asymptomatic). Workplace testing was also important e.g. on-site factory testing.

Important features of the testing strategy:

Local targeting of the most affected communities was based on a constant review of the epidemiology and innovating quickly to develop different bespoke solutions that were practical and worked for different communities based on local understanding of the communities. E.g. Spinney Hill is a densely populated area with very low car ownership. A drive-through testing station on the edge of the city would not work for this population and there was no obvious suitable site for a drive through testing station in the neighbourhood. Instead, a walk-through testing station was developed in Spinney Hill Park and an indoor Local Testing site was developed in the local Highfields Centre. These were well-used by local people, identifying many positive cases in the area that might not otherwise have been tested.

Speed, scale and agility have been vital to the successful testing strategy in Leicester with testing staffing going from 100 people to 250 people working in shifts, 7 days per week to make testing widely available and easily accessible, particularly in hotspot areas. This effort was supported initially by NHS staff and military personnel. As well as ensuring that these efforts were appropriately targeted to the emerging epidemiology, the logistical management, co-ordination and communication associated with testing has been vital.

The huge increase in testing in Leicester resulted in many more positive cases being found and helped to break the chains of onward transmission through self-isolation of these cases and their contacts.

#### **Outbreak Management**

Whilst most transmission seems to have been within and between households, we worked closely with Public Health England's Health Protection Team to constantly review cases identified within any local outbreaks, to identify postcodes of coincidence or links and congregational risks. Whilst non-household clusters and outbreaks within the city do not seem to have been a major feature within Leicester, there may have been links to workplace outbreaks being managed and controlled in parts of the County. The watchful identification of these types of links and the active management of clusters and emerging outbreaks, has helped to stabilise the number of new clusters emerging.

## **Contact Tracing and support for self-isolation**

The prompt identification and management of contacts of COVID-19 cases is vital to interrupting further onward transmission of the virus and the work of NHS Test and Trace has obviously been vital. Completeness and speed are of the essence in successful contact tracing and it has taken concerted action to improve the effectiveness of contact tracing for Leicester.

When Leicester went into local Lockdown at the end of June 2020, little over half of the people who tested positive in Leicester were being interviewed within 24 hours by NHS Test & Trace to identify the contacts who might have become infected. In addition, every day, positive cases in Leicester were recorded as being 'not contactable' or 'follow-up failed'.

As part of efforts to limit the spread of COVID-19 in Leicester in July 2020, NHS T&T facilitated enhancements to its standard process for Leicester with the aim of reaching more people with COVID-19 more quickly, identifying their contacts more quickly by telephone and reaching contacts more quickly to advise them about self-isolation. A ringfenced group of tier 2 staff within NHS T&T used custom scripts and processes to support the Leicester Lockdown area by:

- Bypassing the automated system, NHS T&T passed Leicester cases straight to the ringfenced group of tier 2 staff to contact cases by phone
- Recognising the significance of the Leicester outbreak and encouraging partner/contact notification as part of the adapted scripts

- Cases were only followed up by NHS T&T for 48 hours or 10 calls, whichever was the shorter before being handed over to Leicester City Council for local follow-up
- Cases requiring local authority support (e.g. to self-isolate) were referred directly for support by NHS T&T.

To avoid delays in contacting cases and to reduce the worrying number of cases lost to follow-up every day, Leicester City Council set up local services to supplement the work of NHS Test and Trace locally.

From 17<sup>th</sup> July 2020, Leicester City Council began to receive a daily encrypted list from NHS Test and Trace of the details of Leicester residents who had tested positive but who had not provided information about their contacts to NHS T&T and/or who NHS T&T had been unable to interview, despite up to 10 attempted phone calls over 48 hours.

Leicester City Council trained a team of staff from customer services and libraries to investigate and find alternative ways of contacting positive cases, usually by phone using a different number held by the Council. This approach is often successful but if this fails, a 'ground team' visit the positive case(s) at their home address to provide advice, offer support and obtain details of their contacts.

Within a few weeks, this approach proved so successful that, since 16<sup>th</sup> August, Leicester City Council's contact tracing team have now been following up all cases that have not been followed up within 24 hours by NHS T&T.

Leicester's local contact tracing results to 30<sup>th</sup> August:

- We have received 301 valid cases to investigate.
- Of these, local investigation team has contacted 278 cases
- Of our successful contacts 41 have been achieved by our ground team visiting an address (13.6%)
- We have recorded 21 cases as No Trace (6.9%)
- This is a 92.3% success rate so far

Leicester City Council also started taking referrals for cases who have indicated that they require additional support to self-isolate and additional support calls are made to understand support needs and to arrange the necessary support to be provided. A support hub provides support in the form of food supplies, but accommodation and funding have also been made available to people quickly depending of the needs and circumstances of each case. Between 22<sup>nd</sup> July and 30<sup>th</sup> August, Leicester City Council have followed up 141 cases referred for support.

#### **Communication and Community Engagement**

Leicester developed and implemented a comprehensive Communications and Community Engagement strategy for Leicester's Lockdown with the aim:

To support a reduction in the number of cases of Coronavirus within Leicester through a multi-channel social marketing, communications and engagement campaign which is sensitive to the cultural and language needs of the local population and which focuses on:

- Regular, clear and transparent messaging about the ongoing situation (including data)
- Messaging which also recognises the efforts made by communities and the many agencies involved and which is regularly refreshed to mitigate against message fatigue and the need to continue to maintain adherence to protective behaviours
- Clear guidance for communities and businesses about what actions they need to take to protect themselves, others and the wider community
- Increasing awareness of the importance of testing whether symptomatic or asymptomatic, how to get tested and what to do if you test positive
- Implementing targeted and enhanced communications activity at a local level in the priority hotspot areas to ensure communities take the actions needed to reduce transmission of the virus
- Supporting the efforts to reduce the level of 'failed' contacts in the contact tracing programme
- Engagement of community influencers and local trusted voices (local leaders, health spokespeople) to support understanding, awareness and behaviour change
- Evaluating the reach and impact of activity and identifying lessons learned

This work has been extensive and is on-going. It is being governed and delivered through a Communications and Community Engagement Cell of the Incident Management Team, led by a Leicester City Council Director with input and support from communication leads from national, regional and local partners.

There is a Communications and Community Engagement strategy document provides a comprehensive overview of this activity and starts to identify some of the lessons learnt through these interventions. It is also worth noting that communications messages in Leicester have been complicated by the easing of restrictions nationally and in surrounding areas requiring Leicester's restrictions to be articulated with clarity and repetition to counter myths and misunderstandings.

## **Community Engagement**

As an under-pinning part of all the work in Leicester, it would be hard to over-state the importance of listening to local community leaders and responding to their ideas and suggestions based on their local knowledge and intelligence. Leicester City Council's networks have enabled important formal and informal engagement conversations with around 160 stakeholders in priority areas of the city.

This was followed up by more in-depth focus groups across key wards which provided greater understanding of needs and issues within communities as well as helping to ensure the development of common messages through trusted community voices as well as in other appropriate formats.

Whilst it is always important to start with engagement and with attempts to inform and persuade people to adopt COVID-safe behaviours, our communities themselves have suggested that more enforcement action might be appropriate with some individuals/households and/or that making enforcement action more visible with individuals/households might also be important as we move forward.

## **Business Engagement**

The Business Engagement Cell of Leicester's IMT remains proactive in ensuring COVID-19 Secure business working practices inside and outside premises are put in and remain in place and that the Cell responds to any surges in demand for restaurants or other business environments that might threaten matters such as social distancing etc (noting for example the work that was required to help support businesses and the public during the now ended "Eat Out to Help Out" scheme).

#### **Business Engagement Context**

- By the 31<sup>st</sup> August there had been 1018 business engagement COVID-19 Secure check visits in the north east of the City.
- Leicester City Council Regulatory Services has visited 52 HSE regulated premises and 744 local authority regulated premises in the north east of the City.
- As part of the above there have been 244 revisits recorded as Action/Intervention required (242 local authority regulated, 2 HSE regulated).
- Total number of remote interventions where no visit was required: 184 (167 local authority regulated, 17 HSE regulated).
- In addition to the above visits to businesses outside of the north east of the city have also taken place.
- Prior to the above there had also been significant business engagement work through the Council's Regulatory Services team that had already taken place and it was reassuring to know much of the above resulted more in conversations with businesses about reaffirming advice that had previously been provided, and was being implemented, rather than starting from scratch.
- As part of the City Council's regulatory response The Health Protection (Coronavirus, Restrictions) (England) No.3) Regulations have recently been used. This was in response to large unmanaged queues outside restaurants, predominately on London Road, that were participating in the "Eat Out to Help Out" Scheme. The council determined that two directions (Regulation 4 – Direction against premises – applied to 11 premises) and Regulation 6 – Outdoor Public Places Direction) were required having considered the following conditions had been met:
  - a. direction responds to a serious and imminent threat to public health;
  - b. direction is necessary for the purpose of preventing, protecting against, controlling or providing a public health response to the incidence or spread of infection by coronavirus in the Authority's area; and
  - c. the prohibitions, requirements or restrictions imposed by this direction are a proportionate means of achieving that purpose.

## **Business Engagement Lessons Learned:**

 Leicester City Council has been able to build on previous business engagement work and have visited a substantial number of businesses premises in a short space of time since 29<sup>th</sup> June 2020 to ensure COVID-19 Secure compliance working in partnership with Public Health England whose data identified priority areas for visits.

- 2. The visits were required to take place in local authority regulated premises and HSE regulated premises. It became apparent that the HSE is working to a nationally informed programme that is based on spot checks. This was not something PHE or JBC representatives were initially aware of in the Leicester Incident Management Team meetings that commenced from 29<sup>th</sup> June.
- 3. Whilst the HSE has conducted visits in Leicester they have been unable to direct visits in accordance with the requirements of the Public Health England Incident Management Team that was introduced. Leicester City Council has therefore conducted visits in HSE premises (52 premises) to ensure all priority sites were assessed and appropriate advice provided. It proved important not to rely on the HSE due to the significant and apparent resource limitations that they have and their inability to respond to the demand required to ensure as part of a comprehensive programme of work COVID-19 Secure compliance within HSE regulated premises.
- 4. The Council has been able to conduct all the required visits to priority sites (covering local authority regulated sites and as appropriate HSE regulated sites). For the HSE sites if regulation issues were found it was agreed with the HSE that these would be of course be referred to them for follow up.
- 5. Not linked to point 4 but where the HSE has been notified of outbreaks the Business Engagement Cell has not been informed of the outcome of the HSE's work and unfortunately the HSE has only been able to attend a few BEC meetings.
- Leicestershire Fire and Rescue Service has proved to be a very valuable additional resource/partner to support COVID-19 Secure/Public Health visits. They have visited 28 hotels as part of the Business Engagement Cells work.
- 7. Where businesses were found to be open that should not have been, appropriate action was used, including the use of prohibition notices where required such methods have proved effective in ensuring compliance with the restrictions that have been/are in place in Leicester.
- 8. In terms of the use of the "The Health Protection (Coronavirus, Restrictions) (England) No.3) Regulations" in relation to large unmanaged queues outside restaurants participating in the "Eat Out to Help Out" scheme on London Road the following lessons have been noted: -

#### 3. Conclusion

The decreasing incidence of COVID-19 and the reduction in positivity rate clearly suggests that Leicester's strategy is working and that the interventions put in place since 18<sup>th</sup> June have resulted in a significant progress in Leicester. It is hard to disaggregate the impact of each aspect of the efforts and interventions and it is likely that the progress could only have been delivered through concerted efforts on all fronts simultaneously.

This report does not cover a range of other actions and interventions delivered by the Council and other partners through the IMT and its working 'cells' e.g. work to prepare schools for re-opening, support to care homes (e.g. Leicester City Council rings every care home in the city once per week to check on issues and progress with testing) and all of work delivered through the NHS – all of this has been important too.

It is important to note that all interventions have been informed by a granular understanding and interpretation of the epidemiology by local and PHE colleagues; all approaches have been shaped by an understanding of local communities and the delivery of Leicester's plan at such pace has been possible through the over-arching leadership and governance of Leicester's IMT. This has brought relentless and rigorous focus and grip as well as the management and co-ordination of many interrelated strands of activity across many organisations and individuals.

It is important to note that coronavirus knows no boundaries and that the integration and alignment of arrangements between Leicester city and Leicestershire County Council has also been important. There is no doubt that Leicester City Council's leadership and agility has been a vital part of this progress with many staff at all levels turning their skills and capacity to the delivery of action related to COVID-19. The leadership and specialist health protection expertise of PHE staff has also been vital as has the close and proactive working relationship between all partner organisations.