As we put together this plan in late June 2020, we are now past the first peak of COVID-19 in Haringey and the rate of new cases in Haringey is low and stable. Our hospitals currently have very few sick patients with COVID. This is in contrast to March, April and May when we had a severe outbreak of COVID in London and over 250 people died with COVID in Haringey.

We now have an opportunity to work together in Haringey to prevent new outbreaks of COVID-19, and to reduce the impact of any outbreaks that we do have.

The best way of reducing further impact of COVID-19 on the health and wellbeing of our communities is to prevent a significant rise of cases locally. This is also the best way for us to keep our schools open, our care homes COVID free, our high streets operating and our NHS open for all.

To do this we need to work across organisations in Haringey and beyond, and we are also asking our residents and communities in Haringey to continue to do their bit to keep us all safe.

All local authorities have been asked to produce what is called a local outbreak management plan.

These plans outline how local authorities will play their part and work with other agencies and other parts of the public health system to prevent and manage local outbreaks of COVID.

This document is an initial draft with an outline of our local priorities in Haringey for preventing and managing local outbreaks of COVID.

I would like to agree these priorities with partners in Haringey and develop these plans further over the next few weeks. As every month goes by, we understand more about COVID-19 and how it spreads, so we will need to update the plan and the actions we need to take on an ongoing basis.

Please note that this document does not deal with planning for a second surge of COVID in our local hospitals or how the council will provide essential services in the case of a second wave of COVID - that is being looked at elsewhere.

This document is also not a plan for managing a contained outbreak in an NHS setting such as a hospital – they will have their own plans in place in the NHS for this.

**Overall objectives for the prevention and management of new COVID-19 outbreaks in Haringey:**

- To prevent local spread and outbreaks of COVID-19 and identify any clusters of cases proactively
- To manage and mitigate any local outbreaks that develop
- To have a multi-agency plan owned by local
To engage and involve local communities

To understand the impact of COVID-19 on our local communities

To provide local infrastructure and oversight on outbreak prevention to link into national programmes, and to link with neighbouring areas

**Priority areas:**

- Data and information about the outbreak
- Communication, engagement and messaging including prevention
- Management of cases and operational management of outbreaks, including how we will work with neighbouring areas
- Local testing capacity
- Specific settings including care homes and schools
- Haringey’s Black, Asian and Minority Ethnic Communities
- Supporting people to self-isolate
- Local Governance and oversight

**Limitations of the Plan**

While there is much we can do locally to prevent and manage outbreaks of COVID, there are many factors that will impact the spread of COVID in Haringey that may be beyond our control locally and we can only influence. These factors include national policies on lifting lockdown and social interaction, availability of new treatments or vaccines, and testing technology and speed of test results from the national programme.

We therefore may reach a point where community transmission of COVID-19 in Haringey reaches a level which will need national or regional action to address. This also emphasises the need to ensure that the local NHS is prepared for a significant rise in infection rates. This planning is taking place elsewhere and is beyond the scope of this document.

Haringey is the 4th most deprived London borough. It is also a great place to live and work with one of the most ethnically diverse populations of any local authority in the country.

**Impact of COVID-19**

Up to 31st May 2020, there were a total of 595 diagnosed cases of COVID-19 in Haringey.

This significantly underestimates the total number of cases, as testing during the first wave was largely restricted to sick patients in hospital. There are likely to have been many thousands of milder and asymptomatic cases in the community in Haringey.

In Haringey there were 253 cases with COVID recorded as a cause of death up until 15th May 2020 - 208 were in hospital, 22 in peoples own homes, 20 in care homes and 3 recorded as elsewhere.

The overwhelming majority (around 90%) of deaths with COVID in Haringey were in people over 60, and age is the strongest risk factor for COVID. We had a number of outbreaks of COVID-19 in our local older people’s care homes. We also know that people with certain long-term conditions are at higher risk of serious illness.

Haringey is an extremely diverse borough, and evidence that there is a higher risk of serious illness and death from COVID in some ethnic groups is therefore very pertinent. Public Health England found that people from Bangladeshi and Pakistani ethnic groups were 2 times more likely to die from COVID than white people, and other ethnic groups, including Black Caribbean and Black African, had between a 10 to 50% increased risk of death from COVID compared to white people.

**Roles and responsibilities**

It is important to be clear about the roles and responsibilities of different agencies in preventing and responding to outbreaks at a local level.

Haringey Council is not directly responsible for the initial identification and management of outbreaks of infection, or for contact tracing or testing residents for COVID. The responsibility for these areas lie with Public Health England and the NHS as outlined below. It is important we work closely together with these agencies to prevent and manage outbreaks of COVID. Some of these roles and responsibilities are set out in the table below.
## Roles and responsibilities of agencies and organisations in responding to COVID-19 outbreak

<table>
<thead>
<tr>
<th>Agency or Organisation</th>
<th>Roles and Responsibilities</th>
</tr>
</thead>
</table>
| **NHS Test & Trace**   | ➔ Provide testing of suspected cases of COVID-19  
                        ➔ Call handlers make initial contact (tier 3)  
                        ➔ NHS professionals undertake initial contact tracing of confirmed cases (tier 2). If a risk assessment identifies the need for a specialist input (tier 1) this would then be referred to the London Coronavirus Response Cell (LCRC). |
| **Public Health England London Coronavirus Response Cell (PHE LCRC)** | ➔ The LCRC is a pooled PHE resource from the three London Health Protection Teams  
                        ➔ Initial detection of an outbreak from routine surveillance or ad-hoc reporting  
                        ➔ Initial risk assessment, escalation (if required) and notification to partners  
                        ➔ Lead the initial response and investigation in order to allow an accurate risk assessment to be undertaken to inform any actions that may be necessary  
                        ➔ Provide specialist health protection advice and manage cases and contacts, testing and infection control  
                        ➔ Provide information materials to the setting affected  
                        ➔ Recommend ongoing infection control measures  
                        ➔ Convene an Incident Management Team (IMT), if required, for specific high risk complex situations, and also contribute to any IMTs convened by Local Authority  
                        ➔ Provide information to Director of Public Health and advice/recommendations for ongoing support  
                        ➔ Liaise with other sources of specialist advice at PHE and from other experts/professionals  
                        ➔ Ensure appropriate escalation of the incident where there is a wider geographical spread or increased seriousness of the threat to public health  
                        ➔ PHE also provides system leadership and surveillance, some of which will take place at a national level. |
| **Local Authority**    | ➔ Lead role in protecting and improving health of the population across their jurisdiction  
                        ➔ The Director of Public Health has a leadership role for the Local Authority contribution to health protection matters, including preparing for and responding to incidents that present a threat to public health  
                        ➔ Supporting the LCRC in their initial response and investigation in order to allow an accurate risk assessment to be undertaken to inform actions that may be necessary  
                        ➔ Deliver COVID-19 prevention work and respond to COVID-19 related enquiries  
                        ➔ Ensure appropriate Local Authority representation at Incident Management Team (IMT) meetings if convened by LCRC  
                        ➔ Providing Public Health advice to the LCRC IMT, particularly with regards to the vulnerability and resilience of the local community  
                        ➔ Briefing the LCRC IMT on levels of media interest, in terms of both traditional channels and social media  
                        ➔ Advising the LCRC IMT on issues relating to public information, especially in the communication of risk  
                        ➔ Convene a local authority IMT if required for community cluster  
                        ➔ Statutory duty to investigate infectious disease linked to workplace settings, undertake inspections, regulate workplace risk assessment processes and exercise powers under the Health and Safety at Work Act 1974, where they are the Health and Safety enforcement authority  
                        ➔ Ensuring that contracted providers deliver an appropriate clinical response to any incident that threatens the public’s health  
                        ➔ Ensuring Business Continuity impacts are monitored and that the council is able to continue to deliver on its priority services  
                        ➔ Consider the authorisation of variations to contractual obligations to respond to communicable disease outbreaks and incidents not covered by Major Incident clauses where necessary. |
| **Metropolitan Police** | ➔ May have a role in enforcing legal restrictions as advised by the government to support local outbreak management |
Our priorities in Haringey

The sections below set out the proposed priority areas for our plan to prevent and manage outbreaks of COVID in Haringey.

These priorities require strong inter-agency working between the council and its partners. This includes locally with the Haringey Resilience Forum partners which includes the NHS, the voluntary and community sectors and residents, and regionally with Public Health England and other London councils.

1. Data and information about the outbreak

In order to prevent and manage any outbreaks of COVID-19 in Haringey, the first thing we need to do is to keep track of the COVID infection in Haringey.

This includes knowing how many people are testing positive, what is happening to the trends in infection, and if there are any clusters of cases or outbreaks in settings such as care homes and schools.

We are already doing this internally in Haringey Council by receiving and sharing information with Public Health England on new cases and any areas for concern.

In the coming weeks we will start sharing a summary of this information with partners in Haringey on a regular basis. This will mean people will have access to information, for example on local infection rates, to help form risk based judgements about how to stay safe.

We will also give our partners and residents the opportunity to ask any questions about the situation or any of our public health messaging and collate these for publication as frequently asked questions.

We will also link into any national or regional status reports for COVID-19 risk and cascade any relevant messages through our communication channels, for example by linking to the risk levels set through the Joint Biosecurity Centre for COVID-19.

2. Communication, engagement and messaging including prevention

With the easing of Lockdown restrictions, it is now more important than ever that we do not become complacent with the positive actions taken by Haringey residents to slow the spread of COVID.

It is important that we communicate key messages on preventing outbreaks to our diverse communities. Key messages include maintaining social distancing, limiting close social contact outside our households, getting tested and isolating urgently when people have COVID symptoms, and providing the NHS with information about our close contacts.

We need to ensure that people trust the communications they receive from us about prevention and management, and we will need to engage and communicate with grass roots organisations to do this.

Key actions for this part of the plan include:

- Developing and publishing a communications and engagement plan including
  - Working with other London councils to develop prevention messaging – and tailoring this to different communities in Haringey including translated materials where appropriate.
  - Outlining our communications approach in the event of a significant cluster of cases in Haringey.
- Working with our local grass roots voluntary and community organisations to spread key public health messages so that they reach people who are most vulnerable to the COVID-19 infection.
- Sending out weekly updates with key messages to institutional settings including the care sector and schools (we are already doing this) – example in appendix.
- Engaging with local GP practices on how we can identify any local clusters of cases early and use our primary care system to provide key messages to patients.

3. Management of cases and operational management of outbreaks including how we will work with neighbouring areas, link into the national contact tracing service and enforcement of restrictions

In order to prevent significant outbreaks of COVID-19, there are simple interventions that need to be followed for every COVID-19 case:

- Testing and isolation – anyone with fever, new cough, or loss of taste or smell needs to self-isolate immediately (with their household) and get a COVID test via the national testing offer [www.nhs.uk/ask-for-a-coronavirus-test](http://www.nhs.uk/ask-for-a-coronavirus-test)
- Contact tracing - if the person tests positive we must identify their close contacts and ask these contacts to self-isolate for 14 days. This is challenging, but very important in stopping the spread of the virus.

Contact tracing is carried out by the National Contact Tracing Service. This is led by the NHS, supported by Public Health England. There is information on the NHS Test and Trace service, including the way people are contacted by the service here: [www.gov.uk/guidance/nhs-test-and-trace-how-it-works](http://www.gov.uk/guidance/nhs-test-and-trace-how-it-works)
What would we do if there was an outbreak of COVID in Haringey?

An outbreak is defined as multiple linked cases where there is transmission beyond a single household. There is information on management of outbreaks of COVID in a number of different settings in the attached appendix.

Outbreaks of COVID are identified by Public Health England, working the NHS Contact Tracing Service, or through our own local intelligence, for example with schools and care homes.

When a significant community outbreak occurs the first step is usually to convene an Incident Management Team (IMT) meeting. This will be convened by Public Health England along with the local authority Director of Public Health (or multiple local authorities if the incident spans borough boundaries). Other people such as headteachers, care home managers or GPs might be invited to this meeting depending on the setting. Whoever is required to successfully manage the outbreak would be invited and expected to attend.

The IMT meeting will:

- Ensure information about the outbreak is correct and shared between organisations
- Assess the risk of the outbreak to others and understand the source of the outbreak
- Put control measures in place, including expanding testing, ensuring identification and isolation of people with COVID and their close contacts, and any further control measures such as closures of schools or workplaces
- Ensure communication with the public as required
- Continue to meet as necessary to monitor and respond to the outbreak

Local Enforcement: There are a number of powers that can be used in the case of an outbreak to restrict events and gatherings that pose a risk to the public’s health. We will always attempt to first seek compliance with regulations through consensual approaches, and only use legal powers as a last resort. We still need to understand further what the mechanisms and powers would be to impose local restrictions to contain a significant outbreak such as school closures, stay at home advice and restrictions on business opening. It is likely any of these “local lockdown” measures would need action across London as a region.

Further actions we have taken, or will take, to prepare our operational response to an outbreak:

- We have already set up local procedures and rotas for our own environmental health and public health staff to prepare, if extra staff are needed to be mobilised in the case of a local outbreak
- We will create local scenario exercises to model our response to an outbreak in Haringey
- We need to work with national and regional agencies to further understand the powers that we have to impose local or regional measures to contain a significant local outbreak (e.g. school closures etc).

4. Local testing capacity

There is a national system self-referral system in place for testing for COVID (see above) which gives people the option of drive through testing centres, postal kits or mobile testing units across London. Testing is also available through NHS services for people who present with symptoms.

We have been able to complement this across Barnet, Camden, Enfield, Haringey and Islington (North Central London level), by working together with NHS partners to develop some local targeted testing capacity. For example, this has been used for widespread testing in care homes for asymptomatic staff and residents, before it was offered nationally.

We will look to continue to collectively develop our testing capacity across North Central London, as well as further developing mobile testing capacity across London so that we can:

- Quickly mobilise additional testing capacity to respond to any local outbreaks
- Where possible, offer care home staff more regular testing in line with best practice emerging from the NHS
5. Outbreak prevention and management in specific settings – including care homes and schools

Care Homes and the wider care sector

Protecting vulnerable residents who are looked after in the care sector in Haringey is of utmost importance in our plan.

Haringey Council and our local NHS have been working closely with the borough's care homes and domiciliary care providers to provide support on an ongoing basis to care homes and other parts of the care sector during the COVID-19 outbreak through:

- Implementing Haringey’s support plan for care providers.
- Providing support to care homes to access personal protective equipment (PPE). If a care provider cannot access PPE through their usual supplier, the Local Authority can provide an emergency supply and stocks are continually monitored to ensure an ongoing supply.
- Webinars on infection control provided directly by Haringey Local Authority at the beginning of the outbreak and now provided by the North London Partners. These cover a variety of topics including infection control, end of life care, and utilizing digital resources.
- Regular meetings with local care providers, with attendees including the local authority, North Central London Clinical Commissioning Group, and local NHS providers. These meetings review access to PPE, testing, and any other issues relating to supporting local providers. These were daily and are now twice weekly. The frequency will be reviewed and can be increased if the situation requires it.
- A weekly update written by the Director of Public Health to all care homes and domiciliary care providers detailing any new updates to guidance, access to support and webinars, and any other relevant information. It includes a COVID-19 directory of all local and national resources available to support care providers.
- Working collaboratively across the North Central London boroughs to share learning and provide support, including providing enhanced widespread testing to some care homes.
- Conducting a feedback exercise in Haringey, as cases are currently low in the borough. Feedback is being requested from care providers on our response to the outbreak, what has worked well and what can be improved. The results of this exercise will be used to ensure we are providing the best possible support for care providers in the coming months.
- Providing enhanced support if a care provider is experiencing an outbreak of cases, including facilitating access to testing and PPE, help with infection control, and detailed advice and support if required.

Further areas of work we are proposing to take forward with the care sector include:

- Exploring regimes for regular testing for staff in care homes learning from NHS settings.
- Identifying any issues with staff and residents moving between settings.

Schools and early years settings:

- Support will continue to be provided to schools through weekly written public health briefings, which are sent to all headteachers in the borough, and regular virtual meetings between headteachers and Haringey Council. Briefings focus on COVID-19 related updates and support available to schools from both the council and wider partners.
- We have produced a ‘Schools Risk Assessment Template’ that follows Department for Education and Public Health England guidance closely. The template supports schools to create a specific risk assessment for their settings.
- A guidance document to schools and early years settings has been developed which provides advice on when and how to use Personal Protective Equipment (PPE) within settings. The council have also offered PPE to schools and early years settings to ensure teachers, staff, parents, carers and pupils feel safe returning to their setting, and staff have the appropriate PPE available should this be required.
- In addition to PPE, we are providing advice and guidance to schools and early years settings as needed, and have developed several guidance documents to support them.
- There are also protocols in place to ensure schools and early years settings contact Public Health England and Haringey Public Health when they experience a confirmed or suspected case of COVID-19, so support and advice on management of cases can be provided.
Other settings of interest

We will continue to actively identify settings and populations with high risk of COVID transmission and develop preventative actions for these settings, some of this work is happening at a pan London level, for example work on major transport hubs. These settings include:

- Homeless hostels
- Faith settings
- High risk businesses – such as food processing

Preventive work is already taking place in these settings, for example through regular communication and engagement on key public health messages.


6. Haringey’s Black, Asian and Minority Ethnic Communities

Haringey has an incredibly diverse population, with many different groups of people from different backgrounds and ethnicities. The term Black, Asian and Minority Ethnic Communities does not adequately do justice to the many communities and diversity of lived experience in Haringey. It is important that we do more to understand and respond to the increased impact of COVID-19 on our diverse BAME communities in the borough.

We are taking a number of steps to address the impact of COVID-19 on our diverse communities. These are based on themes that have arisen during local engagement with grass roots organisations telling us about the lived experiences of BAME people in Haringey during the 1st wave of COVID. From these consultations, we are taking forward the following actions, and looking to identify any further necessary actions.

- Improving messaging, engagement and communication with our diverse communities in Haringey on the actions to take to protect ourselves from COVID-19 (see priority 2 above)
- Getting better data on the local impact of COVID-19 on different communities.

- Ensuring that BAME NHS, council and school staff are safe at work, by providing access to tools that allow assessment of workplace risk and provision of reasonable adjustments to make the workplace as safe as possible

7. Support for people who need to self-isolate or shield

Haringey are encouraging all residents to consider what their arrangements will be and what support they may need if they are required to self-isolate. This is happening through conversations on the Council’s COVID-19 helpline and through distribution of our ‘Making a Plan’ leaflet (attached). In addition to practical considerations, this includes information on emotional wellbeing.

Support for accessing food provision is available through local and national delivery services, including phone-based ordering. Additionally, there is support available for those who may be self-isolating but may also be struggling to afford food.

In addition to national support to pharmacies, Haringey has a prescription delivery service. This includes delivery of wider medical support items such as hearing aid batteries, incontinence pads etc.

Other areas we need to consider for this part of this plan:

- Criteria to re-start shielding locally (assuming restrictions are partially lifted by central government) in the case of the outbreak
- How we would re-mobilise our current shielding support rapidly in the case of an outbreak
- What systems nationally and locally will be in place to provide support to residents and small businesses that may have to stop working for 14 days to self-isolate if identified as a contact of a confirmed COVID-19 case

8. Local governance and oversight

This work will be steered by a new local Haringey COVID-19 Prevention and Outbreak Management Board, chaired by Haringey’s Director of Public Health. Attendance for this board will include:

- Haringey Council
  Senior managers from environmental health
  Emergency planning
  Communications
  Engagement and community support leads
- Haringey Partners , NHS
  Voluntary and community sector representative(s)
  Local Healthwatch that represents patients in Haringey
The Haringey COVID-19 Prevention and Outbreak Management Board will report to Haringey’s Health and Wellbeing Board as a forum for political leadership and engagement with the public on our plans.

Any local outbreaks will be managed through an incident management team, with joint leadership from PHE and any local authorities impacted, as well as other partners relevant to the situation (e.g. headteachers, GPs and care home managers).

Any incidents which require a local incident management team will also feed into Haringey Council’s GOLD emergency planning structure for our COVID response. Haringey Council GOLD is a strategic meeting of senior managers in the council held as required in order to respond to local emergencies. GOLD meetings are currently held twice weekly, but they can be held more frequently if required.

### Developing the plan and how to contact us

This is a first draft of our plan and is being shared with partners across our Health and Wellbeing Board for further input and refinement.

This plan will develop over time, taking into account new and relevant information and guidance as it becomes available. We are committed to constantly learning about how we can better prevent and manage COVID-19 locally.

We want to make sure this plan is owned by Haringey partners and communities, so we would really welcome any feedback. Please contact Haringey’s Director of Public Health, Dr Will Maimaris to provide feedback will.maimaris@haringey.gov.uk.

### Appendices: Attached separately

- Make a Plan Connected Communities Pamphlet