



# Team Devon Local Outbreak Engagement Board

## TEAM DEVON (LOCAL OUTBREAK ENGAGEMENT BOARD)

Wednesday, 15th July, 2020

A meeting of the Team Devon (Local Outbreak Engagement Board) is to be held on the above date at 11.00 am.

### A G E N D A

- 1 Welcome and Introductions  
Matter arising: update on action cards and clarity on local powers, discretion and escalation.
- 2 Notes of the Shadow Board on 3 July 2020 (pages 1 – 4)
- 3 Overview of the Local Outbreak Scheme including Plan, Track and Trace, the Health Protection Board and Governance Arrangements (Pages 5 - 24)  
Team Devon LOEB Terms of Reference, attached.
- 5 Partners to outline their role on the Board and their reporting mechanisms
- 6 Prevention and Public Messaging
- 7 Managing an Outbreak - What Happens, National Guidance, Action Cards and Best Practice examples
- 8 Feedback and / or Urgent Items from the Health Protection Board
- 9 Key Messages to be communicated today
- 10 Public questions / Questions for the Board and its Members
- 11 Dates of future meetings

## Membership

Councillors J Hart (Chair), A Leadbetter (Vice-Chair), R Croad and J McInnes

### Co-opted Members

D Crump (Living Options), Dr P Johnson (Devon Clinical Commissioning Group), J Kay (Deputy Vice Chancellor of University of Exeter), Dame S Leather (Independent Chair of STP), S MacKney (Petroc), Councillor J Pearce (South Hams District Council), R Roberts (Visit Devon), S Sawyer (Chief Constable of Devon & Cornwall Police), C Stobart (Devon Association of Local Councils (Towns & Parish Councils)) and S Wilkinson (Chief Executive, Devon Community Foundation)

## Access to Information

Any person wishing to know any further information about the meeting including minutes, reports or background papers should contact Karen Strahan or Stephanie Lewis on 01392 382264.

## Internet

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Induction loop system available





## Team Devon Local Outbreak Engagement Board Decision & Action 3 July 2020

### Board Members Present

Councillor John Hart (Leader of Devon County Council), Councillor Andrew Leadbetter (Chair of the Devon Health & Wellbeing Board (Cabinet Member for Adult Care & Health)), Councillor Roger Croad (Cabinet Member for Communities, Public Health, Environment & Prosperity), Councillor James McInnes (Cabinet Member for Children's Services), Janice Kay (Higher Education / University of Exeter), Dame Suzi Leather (Independent Chair of STP), Cllr Judy Pearce (District Council Leader (South Hams & West Devon)), Shaun Sawyer (Chief Constable of Devon & Cornwall Police), Susan Wilkinson (FSB), Diana Crump (Living Options), Sean Mackney (St Petroc's / FE sector)), Rhys Roberts (Visit Devon), Glen Mayhew (Assistant Chief Constable, Devon and Cornwall Police), Cara Stobart (Devon Association of Local Councils (Towns & Parish Councils))

### In Attendance

Virginia Pearson (Director of Public Health), Phil Norrey (Chief Executive DCC), Jan Shadbolt (County Solicitor DCC), Keri Denton (Head of Economy and Enterprise) Peter Doyle (Head of External Affairs), Paula Miles (Internal Communications & Stakeholder Manager), Andrew Yendole (Deputy County Solicitor) Roland Pyle (Head of Policy), Jo Hooper (Corporate Equalities Officer), Karen Strahan (Head of Democratic Services and Scrutiny), Stephanie Lewis (Deputy Democratic Services and Scrutiny Manager)

### Apologies

Paul Johnson (CCG)

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No.	Decision/Action	Who will action?	Who will communicate?	When?
1	<p><b>Welcome and Introductions</b></p> <p>John Hart, Leader of Devon County Council welcomed all to the first shadow meeting of Team Devon Local Outbreak Engagement Board and outlined the strategic role of the engagement board compared to that of the Health Protection Board.</p> <p>The Chair of the Board commented as follows:</p> <ul style="list-style-type: none"> <li>• That the Board would operate as a hub and spoke arrangement;</li> <li>• The importance of Board members relaying key messages and feeding back; and</li> <li>• Public involvement in the Engagement Board</li> </ul>	All to note	All	Ongoing

2	<p><b>Purpose of the Board/Terms of Reference</b></p> <p>The Board considered the proposed terms of reference.</p> <p>Key points highlighted included:</p> <ul style="list-style-type: none"> <li>• The responsibilities of the LOEB of Political oversight of the local delivery of plan and response and communicating and engaging with residents and communities.</li> <li>• Avoiding misinformation.</li> <li>• Supporting vulnerable and high risk communities.</li> <li>• Working in an open and transparent way</li> <li>• Initially meeting fortnightly – but to be reviewed and to note the Board may have to meet quickly in the event of an evolving situation.</li> <li>• Working on a hub and spoke' basis with communities</li> <li>• The national picture with Councillor Hart on the national advisory board and Mr Norrey part of the national good practice network with other beacon Councils.</li> </ul> <p>The Board also received a presentation. The following issues and comments were made:</p> <ul style="list-style-type: none"> <li>• The Devon Local Outbreak Management Plan (LOMP) provided a blueprint for managing coronavirus (COVID-19) outbreaks in Devon to protect residents and support the most vulnerable. It also set out measures to prevent any further local outbreaks as well as action to respond rapidly, limiting further spread. It could be found here <a href="http://www.devon.gov.uk/coronavirus-advice-in-devon/lomp/">www.devon.gov.uk/coronavirus-advice-in-devon/lomp/</a></li> <li>• The role of the Health Protection Board (HPB) (an executive-level partnership looking at the Local Outbreak Management Plan and resource deployment, Data and intelligence (with the Joint Biosecurity Centre), Leading the local public health response with PHE (and NHS test and trace) and Assurance and reporting to the Local Engagement Outbreak Board and the Local Resilience Forum).</li> <li>• That Devon was one of the lowest COVID 19 areas at 149 out of 150.</li> <li>• The research being undertaken by the University (links to SAGE) and building bridges with the HPB, including work being undertaken by the modelling team and workforce impacts.</li> <li>• The start up of tourism activities, support to businesses and potential tensions including anti-social behaviour.</li> <li>• The strong messages of safe tourism and the work that had been done with key messages of planning ahead and signs showing business compliance with</li> </ul>			
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	<p>relevant safety measures to give reassurance to visitors.</p> <ul style="list-style-type: none"> <li>• The work in relation to trading standards, particularly scams.</li> <li>• The importance of positive stories and the value of the work of the voluntary sector.</li> </ul> <p><b>Agreed:</b> that a copy of the presentation be appended to the minutes of the meeting.</p>	KS		
3	<p><b>Roles and responsibilities of Board Members</b></p> <p>All Board members introduced themselves and the organisations and sectors they represented and how they would feed back any key messages to their respective organisations and communications channels. Their respective positions are detailed in the attendance list above.</p>	All to note		
4	<p><b>Overview of the Devon Local Outbreak Management Plan</b></p> <p>VP, in her role as Director of Public Health, updated colleagues on the Local Outbreak Management Plan, commenting that it was a high level document and further detail would follow.</p> <p>The meeting, in discussion, explored:</p> <ul style="list-style-type: none"> <li>• The role of Action Cards which outlined responsibilities and principles that could be applied to specific situations and that these were expected to be received shortly.</li> <li>• Clarity was required on escalation procedures in the event of an outbreak and the importance of such clarity in the local approach.</li> <li>• That work was ongoing to improve the speed of testing, particularly pillar 2 and the Board would be kept updated.</li> <li>• The role of test centres moving forward and the ambition for more mobile testing rather than mobile testing units.</li> <li>• The recently agreed holiday maker and tourist information sheets</li> </ul>			

	<p><b>Agreed:</b></p> <ul style="list-style-type: none"> <li>Agenda for 15<sup>th</sup> July be amended to include update on Action Cards and clarity on local action, powers, discretion and escalation in the event of an outbreak.</li> <li>Ensure the tourism and holiday maker sheets are shared with the notes of the meeting.</li> </ul>	KS KS		
5	<p><b>Overview of the Draft Agenda for the first formal meeting</b></p> <p>The Board noted the proposed draft agenda for the 15<sup>th</sup> July and highlighted the importance of access to the meeting for the public and also that the voice of young people needed to be heard.</p>	All		
6	<p><b>Communications Strategy</b></p> <p>The Board considered the draft Communications Strategy, noting that a Communications Protocol would also be produced.</p> <p>The Board, in discussion, commented as follows:</p> <ul style="list-style-type: none"> <li>The importance of accessible formats of any communications and the role of the Members of the Board supporting with that.</li> <li>Ensuring lessons were learned, particularly learning from areas and / sectors who had experienced outbreaks.</li> </ul> <p><b>Agreed:</b> that comments on the draft Communications Strategy be submitted to Paula Miles (Internal Communications &amp; Stakeholder Manager) at <a href="mailto:paula.miles@devon.gov.uk">paula.miles@devon.gov.uk</a></p>	All / PM		
7	<p><b>Date of future meetings</b></p> <p>The next meeting was agreed as 15 July 2020 @ 11am with an informal briefing of the Board @ 10am.</p>	All to note		
8	<p><b>AOB</b></p> <p>No matters raised</p>			



## **COVID-19: LOCAL OUTBREAK MANAGEMENT PLAN**

Report of the Chief Officer for Communities, Public Health, Environment and Prosperity

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### **1. Background**

- 1.1. On 22<sup>nd</sup> May 2020 the Government announced new arrangements for local authorities to take a lead role in the management of COVID-19 as lockdown was released.
- 1.2. Each Upper Tier Local Authority (County Councils and Unitary Authorities) will publish a Local Outbreak Management Plan by 30<sup>th</sup> June 2020.

### **2. Introduction**

- 2.1. Upper tier Local Authorities (County Councils and Unitary Authorities) will establish COVID-19 Health Protection Boards. These are multi-agency strategic partnerships, non-statutory, working to detect, manage and contain outbreaks of COVID-19, working under the existing statutory duties of the Director of Public Health. The COVID-19 Health Protection Board will be chaired by the Director of Public Health and its role will be:
  - a. Overseeing the Local Outbreak Management Plan and resource deployment via tactical and operational management.
  - b. Data and intelligence (with Joint Biosecurity Centre).
  - c. Leading the local Public Health response with PHE (and NHS Test and Trace).
  - d. Assurance and reporting to other groups as required.
- 2.2. Upper tier Local Authorities (County Councils and Unitary Authorities) will also establish Local Outbreak Engagement Boards which are also non-statutory, and designed to provide:
  - a. Political oversight of the local delivery of the Local Outbreak Management Plan and the local response.
  - b. Communicating and engaging with residents and communities.
- 2.3. The Local Outbreak Engagement Board will be known as 'Team Devon' and will be chaired by the Council Leader Councillor John Hart.
- 2.4. Local Outbreak Management Plans are dynamic and will be updated according to local need and any change in national requirements.

# Agenda Item 3

## **3. Financial considerations**

- 3.1 The Government has allocated £300 million to Upper Tier Local Authorities in the form of a ring-fenced Local Authority Test and Trace grant to support the additional public health capacity to develop and implement plans. Devon County Council's allocation is £2,618,508.

## **4. Legal considerations**

- 4.1 The governance arrangements and terms of reference for the new COVID-19 Health Protection Board and the 'Team Devon' Local Outbreak Engagement Board have been prepared by the legal team.

## **5. Environmental impact considerations**

- 5.1 No direct impacts of the governance arrangements on the environment although there are environmental considerations to the management of the pandemic (including tourism, transport and travel) which will be important for both Boards to consider.

## **6. Equality considerations**

- 6.1 There has been increasing evidence of the differential impact of the COVID-19 pandemic on certain populations including older people, people from a black and minority ethnic background, and those with learning disability. The emergence of a greater inequality gap in vulnerable groups is of concern as we move into Recovery.

## **7. Risk assessment considerations**

- 7.1 The development of the new arrangements has involved the County Council's lead manager on risk management, and this is an area that will continue to develop. As these are strategic partnerships, risks will also be held by individual organisations.

**Dr Virginia Pearson**  
**CHIEF OFFICER FOR COMMUNITIES, PUBLIC HEALTH, ENVIRONMENT AND PROSPERITY/DIRECTOR OF PUBLIC HEALTH**  
**DEVON COUNTY COUNCIL**

**Electoral Divisions:** All

Cabinet Member for Community, Public Health and Transportation and Environmental Services: Councillor Roger Croad  
Council Leader: Councillor John Hart

## **Background publications**

Devon COVID-19 Local Outbreak Management Plan

## COVID-19 Local Outbreak Management Plan

### 1.0 Introduction

- 1.1 All upper tier Local Authorities have been instructed to produce a Local Outbreak Management Plan (LOMP) by the end of June 2020. Local Authorities have a significant role to play in the identification and management of COVID-19 outbreaks. Directors of Public Health have a crucial leadership role to play ensuring that through the LOMP they have the plans in place and have the necessary capacity and capability to quickly deploy resources to the most critical areas to respond to COVID-19 outbreaks and help prevent the spread of the virus.
- 1.2 The aim of the LOMP is to provide a clear plan on how local government works with the new NHS Test and Trace Service to ensure a whole system approach to contain and manage local COVID-19 outbreaks. This is a dynamic plan and will be updated as new national guidance is published or legislation changes.
- 1.3 Containing local outbreaks, while led by the local Director of Public Health, needs to be a co-ordinated effort working with Public Health England local health protection teams, the NHS, Social Care, District Councils, Education, Police, the private sector, employers and the community and voluntary sector. Members of the general public also have a vital role in reducing spread of the virus and preventing outbreaks, both in terms of following national guidance and advice including adherence to the social distancing guidelines and following good hand/respiratory hygiene practices, and if symptomatic having a test but also self-isolating should they be instructed to do so.

### 2.0 Core Working Principles

- 2.1 While it is necessary to have a degree of local flexibility it has been agreed that both in the development of the LOMP and the proactive and reactive response to a COVID-19 outbreak it is also important to have a degree of consistency. The South West Regional Directors of Public Health have agreed to adhere to the following key working principles:
1. We will work together as a public health system, building on and utilising the existing close working relationships we have between the local authority public health teams and PHE. We will endeavour to ensure we make best use of the capacity and capability of the regional public health workforce.
  2. While recognising local sovereignty we will commit to ensuring a common language to describe the local governance arrangements:
    - a. **COVID-19 Health Protection Board**
    - b. **Local Outbreak Management Plans**
    - c. **Local Outbreak Engagement Board**
  3. We will ensure that we all work to an agreed common set of quality standards and approaches in the management of local outbreaks, utilising and building upon already agreed approaches such as those defined within the Core Health Protection Functions Memorandum of Understanding

(MoU). The MoU is a document signed by agencies in the South West including Local Authorities, District Councils, Public Health England, Clinical Commissioning Groups and the Port Authority. The document describes a set of key principles on how the agencies will work together to protect the health of the population from the adverse health effects due to infection, contamination and other hazards.

4. We will adopt a continuous learning approach to the planning and response to COVID-19 outbreaks, sharing and learning from one another to ensure we provide the most effective response we can.
5. We will ensure that there is an integrated data and surveillance system established, which alongside a robust evidence-base will enable us to respond effectively to outbreaks. Proposal that a COVID-19 Regional Data and Intelligence Framework is developed which will enable DsPH to have access to the necessary information to lead the COVID-19 Health Protection Board.
6. We will commit to openness and transparency, communicating the most up to date science, evidence and data to colleagues, wider partners and the public.
7. We will ensure that within our planning and response to COVID-19 we will plan and take the necessary actions to mitigate and reduce the impact of COVID-19 on those most vulnerable, including BAME communities.
8. We recognise that DsPH have a system leadership role in chairing the COVID-19 Local Health Protection Board. We commit to actively engaging with key partners, including all levels of government (Upper, lower tier local authorities, towns and parishes and wider partners and communities), key stakeholders including the community and voluntary section to ensure a whole system approach.
9. We accept that we are currently working in a fast-changing, complex environment. DsPH are having to respond dynamically to changing evidence, national guidance, demands and expectations. We will commit to be actioned focused and commit to working to public health first principles (to protect and improve the health of the population)
10. We will ensure that our LOMP includes a strong focus on prevention and early intervention to ensure key settings (e.g. care homes and schools) and high-risk locations and communities identify and prioritise preventative measures to reduce the risk of outbreaks.

### **3.0 Governance**

- 3.1 Working in partnership is crucial to help prevent the spread of the virus and swiftly respond to local outbreaks. While the response to outbreaks will be led by the local Directors of Public Health success will require a co-ordinated partnership response. This will involve numerous agencies, some of whom are mentioned above, working together. Which agencies are involved will depend somewhat as to the outbreak setting, but it is critical that all organisations understand the plan and the role and actions they are expected to take in a response.
- 3.2 Managing outbreaks in workplaces, specific settings such as schools and care homes and within the community is not new and is a core function of public

health and environmental health. It is therefore important that the creation of any new arrangements to manage local COVID-19 outbreaks build on existing plans e.g. Care Homes Resilience Plan and link in with existing structures and arrangements such as the Health Protection Sub-Committee of the Health and Wellbeing Board (<https://www.devonhealthandwellbeing.org.uk/board/>) and the Local Resilience Forum and area able to fulfil any reporting requirements by other bodies.

- 3.3 The following governance arrangements will support the Local Outbreak Management Plan and are described diagrammatically in appendix 1.

### **Devon and Torbay Covid-19 Health Protection Board**

This Board will be chaired by the Director of Public Health for Devon County Council with the Vice chairs being the Director of Public Health for Torbay Council and DCC Deputy Director of Public Health. This Board is an Executive-level Partnership Board and will have the following key responsibilities:

1. Local Outbreak Management Plan and resource deployment
2. Data and intelligence (with the Joint Biosecurity Centre)
3. Leading the local Public Health response with PHE (and NHS Test and Trace)
4. Assurance and reporting to Local Engagement Outbreak Board and the Local Resilience Forum.

#### **Membership will include:**

PHE, Clinical Commissioning Group, Police, Unitary and District Council, (EHO/Housing), Fire and Rescue Service, Public Protection, Social Care, Schools and Colleges, Higher Education, Economy Enterprise and Skills, Business & Tourism, Military Liaison, Prisons, Communities.

\* Plus in advisory capacity: Consultant in Public Health/Public Health Intelligence; Communications Lead; DCC Corporate Equality Officer.

### **Team Devon (Local Outbreak Engagement Board)**

This Board will be chaired by the Leader of Devon County Council and will have the following key responsibilities:

1. Political oversight of the local delivery of plan and response
2. Communicating and engaging with residents and communities

#### **Membership will include:**

Health and Wellbeing Board Chair, CCG Chair, District Council Leader, Portfolio Holders, Police, Higher Education, Devon Association of Local Councils (Towns and Parish Councils), Voluntary and Community Sector working on a 'hub and spoke' basis with Communities.

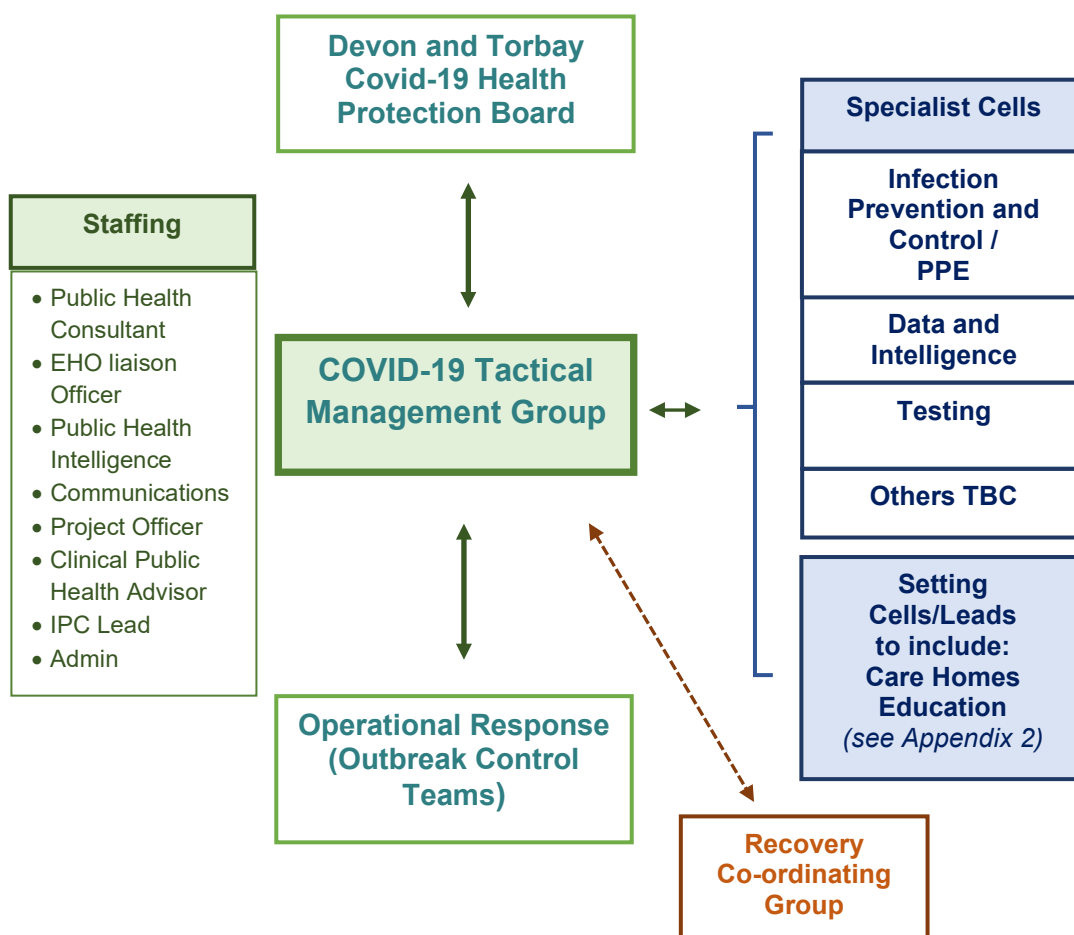
\* Plus in advisory capacity: DPH, Communication Lead and Equality Officer.

- 3.4 The COVID-19 Tactical Management Group (TMG) will receive notifications of suspected or confirmed cases of COVID-19 cases from Public Health England. The role of the group is to carry out a dynamic risk assessment and link with the appropriate setting lead to ensure they are aware of the notification. In collaboration with the setting lead agreement will be reached on the most appropriate person(s) to lead the local response. The locally designated lead,

working with the Local Health Protection Team (PHE) and key local partners (see Appendix 2) will follow the agreed Standard Operating Procedures protocols to take the necessary actions to contain the outbreak. This could include the setting up of an Outbreak Control Team. If an incident or suspected case is raised directly with a Setting Lead this intelligence will be passed onto the Tactical Management Group who will liaise with the Local Health Protection Team to triangulate data and intelligence. Good local relationships often mean service leads/mangers are notified informally before a formal notification is made.

- 3.5 The staffing of COVID-19 Tactical Management Group will vary depending on the number of incidents and while it is expected that additional capacity and capability will be brought into the group as necessary, depending on the scale and complexity of outbreaks, there will be a core group of staff identified to ensure the group can function effectively during the Pandemic.

### COVID-19 Tactical Management Group



### 4.0 Data Integration

- 4.1 The need for local, timely, high quality data and surveillance is a critical factor in helping the COVID-19 Health Protection Board make the informed decisions. Boards across the South West will work to an agreed dataset which enables transparency and consistency for data analysis, interpretation and comparison purposes. The Department of Health and Social Care National Testing Programme, NHS Digital and NHSX are developing an interactive data dashboard which will be available for local use. This data dashboard,

alongside the data produced by the Joint Biosecurity Centre will provide local Health Protection Boards with national data and intelligence.

- 4.2 To complement the national data dashboard local data and intelligence, gathered from partners and through local Incident Managements Teams and Outbreak Control Teams will be vital to ensure an effective tactical response to local outbreaks. Timely data and surveillance information will provide the COVID-19 Health Protection Board with the necessary information to help prevent and control the transmission of COVID-19. Team Devon (LOEB) will also have a key role in communicating data and intelligence with the public, primarily to strengthen the link between evidence and decision making, promoting openness and transparency, as part of the Smarter Devon Smarter Decision-making work (reference working principle 6).
- 4.3 The establishment of a local COVID-19 data and intelligence group with clear agreement of local data flows, pathways and information sharing protocols is a key priority.

## **5.0 Prevention and Response Plans for Places and Communities**

- 5.1 While it is important that the plan can be used to respond to all local COVID-19 outbreaks we know from the data and intelligence that there are settings which are more likely to have outbreaks or may be more challenging to manage an outbreak due to the nature of the setting or vulnerability of the cohort concerned. It is therefore prudent to have specific plans in place with pre-agreed actions to respond to outbreaks in these higher risk settings. Standard Operating Procedures (SOPs) will be created to enable a co-ordinated and timely system response to help contain outbreaks. An overview of COVID-19 higher risk setting, including the role of key agencies is included in Appendix 2.
- 5.2 In addition to settings which maybe at higher risk of COVID-19 outbreaks we know that there are some people and communities who are also at higher risk. These include for example BAME communities, refugees and asylum seekers, people with learning disability and autism, older people and people with underlying health conditions. It is important the Local Outbreak Health Protection Board ensures that the health needs of those most vulnerable people and communities are addressed. The overview in Appendix 2 also includes detail of the relevant Board member lead for these areas.
- 5.3 As part of the national containment framework 'Action Cards' have been developed for individual settings such as workplaces or institutional settings. The Action Cards provide details of how and who they should contact in the event they suspect they have a COVID-19 outbreak in their setting. The Action Cards also provide clear guidance on how individual settings can help prevent the spread of COVID-19 by applying existing guidance on social distancing, adhering to the risk assessed safe working advice, cleaning hands regularly, disinfecting objects, surfaces and common touch points, cohorting the workforce and minimising contacts outside of the household.
- 5.4 The Action Cards will be web-based (**weblink to be added**) and will be produced, updated and promoted nationally and locally for individuals, businesses and organisations to download and use.
- 5.5 In addition to providing guidance and advice to key settings and general public, both through national and local messaging there is a need for evidence-based preventative measures to be targeted at high risk settings. Training and advice has been, and will continue to be provided by the NHS Community Infection



Prevention and Control Team to those who work in higher risk settings and those working with or caring for the most vulnerable people. High quality and timely Infection Prevention Control (IPC) advice is critical to help prevent and contain the spread of COVID-19.

## 6.0 Protecting and supporting vulnerable people

We know from the number of local people identified within the 'shielding' category as a response to COVID-19 that there are many people and families who need support during this Pandemic. We know that some people and families who are instructed to self-isolate either as a result of having symptoms or being identified as a close contact of a confirmed case will find this difficult and may require additional support in order to self-isolate. The local authority working with key partners and the voluntary and community sector will ensure that people are guided to help and support.

## 7.0 Testing and contact tracing

- 7.1 The NHS Test and Trace Service has been set up with three primary goals:
1. To ensure that anyone who develops symptoms of coronavirus can quickly be tested to find out if they have the virus.
  2. Provide a targeted asymptomatic testing programme for NHS and social care staff and care home residents.
  3. Help trace close recent contacts of anyone who has tested positive for coronavirus.
- 7.2 The NHS Test and Trace Service (as shown in figure 1) includes four key elements, Test, Trace, Contain and Enable

### Testing

Anyone in England who has symptoms of coronavirus (i.e. a high temperature, a new, continuous cough, or a loss or change to sense of smell or taste), whatever their age can access a test by going to the NHS website (<https://www.nhs.uk/ask-for-a-coronavirus-test>) or by calling 119. People will either be able to book an appointment at a drive-through or walk-through test site or ask for a home test kit.

There is a different testing route for essential workers who have symptoms of coronavirus or for someone who has symptoms and lives with an essential worker. Essential workers include, for example NHS and social care staff, police, transport workers, education and care workers, etc. Tests are accessed by the individual via the GOV.UK (<https://www.gov.uk/apply-coronavirus-test-essential-workers>) or they can be referred by their employer. In addition to these two routes there is a specific national testing route for care homes residents and staff (Whole Care Home Testing) and NHS Trusts can test patients and utilise local capacity to test staff.

### Trace

When someone tests positive for coronavirus the NHS Test and Trace Service will trace contacts of the positive case. A 'contact' means a person who has been in close contact with someone who has tested positive for coronavirus and who may or may not live with them. The key timeframe is 48 hours before they developed symptoms and the time since they have developed symptoms.

Close contact means:

- having face-to-face contact with someone (less than 1 metre away)



- spending more than 15 minutes within 2 metres of someone
- travelling in a car or other small vehicle with someone (even on a short journey) or close to them on a plane
- if you work in – or have recently visited – a setting with other people (for example, a GP surgery, a school or a workplace)

The NHS Test and Trace Service will assess and if it is necessary inform the close contact that they must self-isolate at home to help stop the spread of the virus. There are three tiers to the contact tracing operating model with each Tier being bridged by a Team Leader function to ensure information flows and cases are escalated and de-escalated accordingly:

**Tier 3:** There are approximately 15,000 national call handlers who are trained to make initial contact and provide advice to those testing positive and their contacts.

**Tier 2:** There are approximately 3,000 health care professionals employed nationally who are trained to interview cases and identify contacts.

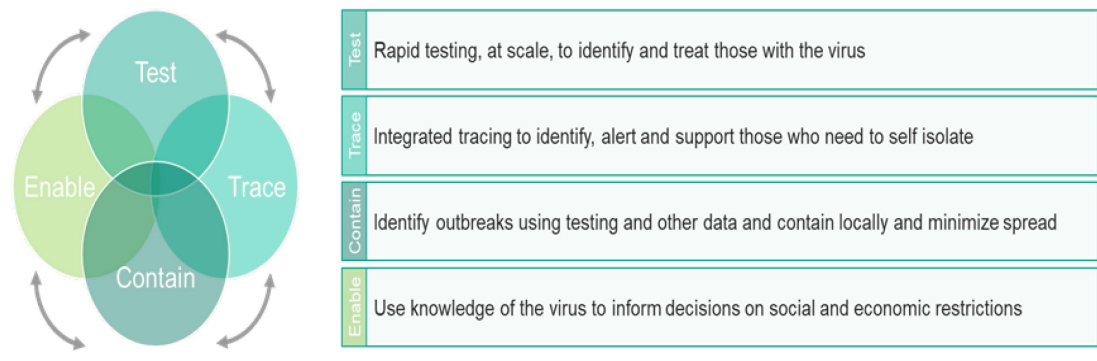
**Tier 1:** Where Tier 3 and Tier 2 identify a degree of complexity and a 'context' for concern (e.g. a school, health setting, care home or workplace) they will escalate to Tier 1. At Tier 1 the Local Health Protection Teams (PHE) will work with local partners, including the local authority public health team, to follow up cases and agree actions to contain the outbreak.

7.3 The expectation is that vast majority of people requesting tests and/or being contacted by the NHS Test and Trace Service will not require any local involvement and will be supported through Tier 2 and 3. However, for more complex outbreaks (Tier 1) the knowledge and relationships which local partners have will be invaluable in providing a timely and appropriate response to a local outbreak working in collaboration with PHE. This will include the ability to swiftly mobilise local testing units, to support local intelligence gathering, provide infection control advice and ensure timely communications to the public and their representatives.

7.4 The use of mobile phone technology through the use of the NHS COVID-19 app and a new Google/Apple framework is continuing to be developed. A COVID-19 app will form just one component of the NHS Test and Trace Service and once fully functioning and rolled out, will complement other forms of traditional contact tracing.

## **NHS Test and Trace Service (figure 1)**

An integrated and world-class Covid-19 Test and Trace service, designed to control the virus and enable people to live a safer and more normal life



Continuous data capture and information loop at each stage that flows through Joint Biosecurity Centre to recommendations

Underpinned by a huge public engagement exercise to build trust and participation

**Contain**

Early identification of an outbreaks, which is generally but not always defined as ‘two or more cases connected in time to a specific place’ (not a household), is critical to help contain the spread of infection. For complex outbreaks (Tier 1) a local authority will convene an Incident Management Team (IMT). The team will consist of key representative applicable to the setting. In some circumstances it will be necessary to form an Outbreak Control Team (OCT). The OCT will usually be chaired by a member of the Local PHE Health Protection Team or by a Consultant in Public Health from the Local Authority Public Health Team. The membership of the OCT will vary depending on the setting but includes public health expertise, communication leads and the manager or key staff from the outbreak setting. The key aim of the OCT is to contain the outbreak and minimise any risks.

**Enable**

The gathering of data and intelligence (covered in section 4) and national and international research is critical to inform national policy and local action. The plan will be updated to ensure that as and when new research and policy is produced the plan will be updated accordingly.

**8.0 Communication and Engagement**

- 8.1 Providing up-to-date guidance, information and advice to the general public and key stakeholders is a key element of the plan. While much of the guidance and messaging is currently derived from central government and PHE the interpretation and the localisation of the key messaging has often been required. There are existing communication protocols and material in place between PHE and Local Authorities to ensure clarity and consistency of messages in response to an outbreak such as letters to parents following a confirmed case in a school.
- 8.2 Ensuring there is consistency in messaging from key local organisations is vital to avoid confusion and to build trust and confidence. There are established close working arrangements with key partners in agreeing and communicating proactive, timely COVID-19 messages within the Local Resilience Forum

Warning and Informing Group and under the Team Devon communication channels and connections. DCC has a number of existing communication channels it is using to deliver COVID-19 messages both internally and externally including the ConnectMe e-newsletter, regular messages from the Chief Executive, social media content, a Team Devon newspaper and dedicated webpages. Engaging and involving stakeholders and key individuals in the development and delivery of messages will continue to be a crucial part of the plan. A communication lead will sit on the Local Outbreak Health Protection Board and Local Outbreak Engagement Board to support them in an advisory capacity.

8.3 A communications and engagement strategy will be developed as part of this plan to build trust and confidence within the general public and partners.

**9.0 Resources**

9.1 The Local Outbreak Management Plan requires the necessary resources, both financial and staffing resources. Nationally £300million has been allocated for local authorities to support the additional public health capacity required to develop and implement the plans to mitigate against and manage local COVID-19 outbreaks. Devon County Council’s share of the Local Authority Test and Trace Service Support Grant Determination is £2,618,508.

9.2 While the response to a local outbreak needs to be led by public health, the skills and expertise within the local system are required to effectively manage outbreaks, working as a ‘system within the local system’. Public health within the local authority and Public Health England do not have the capacity, skills or expertise alone and so resources and input from key organisations and professional groups such as Environmental Health Officers, Infection Prevention Control specialists, Health and Social Care, NHS, Communications Officers, data and intelligence analysts and Health and Safety Officers will be needed, amongst others.

9.3 The precise additional resource required locally will be dependent upon the number and complexity of COVID-19 outbreaks. There will be a need to increase wider public health capacity to support testing, contact tracing and to provide advice and guidance.

9.4 There will also be additional resources required to support vulnerable people who are instructed to self-isolate. If the local system requires surge capacity to effectively respond to outbreaks this request will be routed through the Local Resilience Forum.

Sign: .....

Sign:.....

Chief Executive: .....

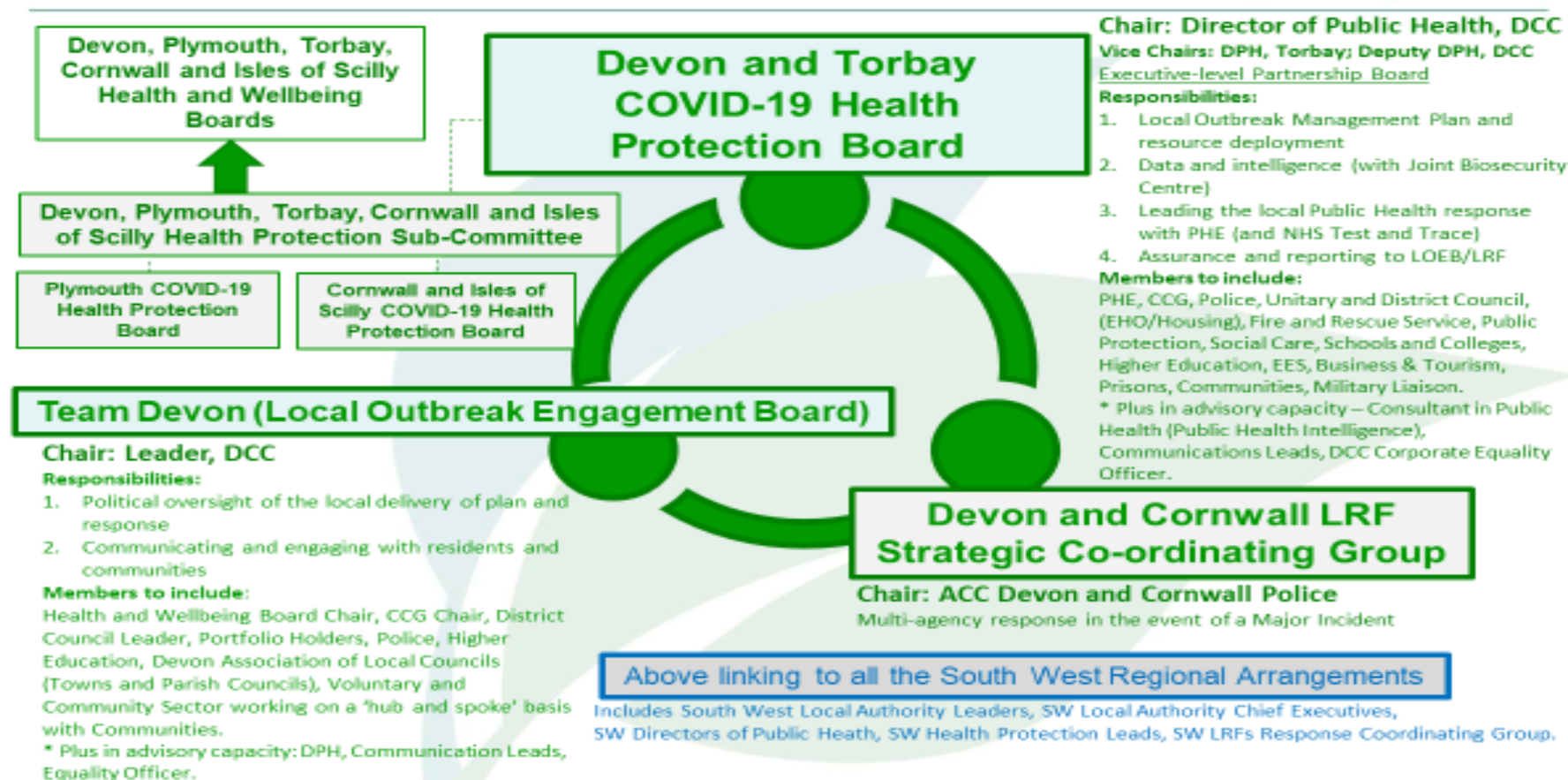
Director of Public Health:.....

Date: .....

Date: .....



# Governance Arrangements



**Chair:** Director of Public Health, DCC  
**Vice Chairs:** DPH, Torbay; Deputy DPH, DCC  
Executive-level Partnership Board

- Responsibilities:**
1. Local Outbreak Management Plan and resource deployment
  2. Data and intelligence (with Joint Biosecurity Centre)
  3. Leading the local Public Health response with PHE (and NHS Test and Trace)
  4. Assurance and reporting to LOEB/LRF

**Members to include:**  
 PHE, CCG, Police, Unitary and District Council, (EHO/Housing), Fire and Rescue Service, Public Protection, Social Care, Schools and Colleges, Higher Education, EES, Business & Tourism, Prisons, Communities, Military Liaison.  
 \* Plus in advisory capacity – Consultant in Public Health (Public Health Intelligence), Communications Leads, DCC Corporate Equality Officer.

**Chair:** Leader, DCC

- Responsibilities:**
1. Political oversight of the local delivery of plan and response
  2. Communicating and engaging with residents and communities

**Members to include:**  
 Health and Wellbeing Board Chair, CCG Chair, District Council Leader, Portfolio Holders, Police, Higher Education, Devon Association of Local Councils (Towns and Parish Councils), Voluntary and Community Sector working on a 'hub and spoke' basis with Communities.  
 \* Plus in advisory capacity: DPH, Communication Leads, Equality Officer.

**Devon and Cornwall LRF Strategic Co-ordinating Group**

**Chair:** ACC Devon and Cornwall Police  
 Multi-agency response in the event of a Major Incident

**Above linking to all the South West Regional Arrangements**

Includes South West Local Authority Leaders, SW Local Authority Chief Executives, SW Directors of Public Health, SW Health Protection Leads, SW LRFs Response Coordinating Group.

## APPENDIX 2

### Overview of organisational involvement and role in the prevention and management of outbreaks by setting

| Category                | Setting            | Health Protection Board Lead            | Key agencies involved and role                                                 |                                                                                                                  |                                                                                                    |                                                                              |
|-------------------------|--------------------|-----------------------------------------|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
|                         |                    |                                         | PHE                                                                            | LA                                                                                                               | NHS                                                                                                | Other                                                                        |
| Health and Care Setting | Hospital           | CCG AO                                  | <b>LHPT</b><br><i>(Advice / Guidance)</i>                                      | <b>DPH</b><br><i>(notified)</i>                                                                                  | <b>Implement Hospital Outbreak Plan</b>                                                            |                                                                              |
|                         | Mental Health      | CCG AO                                  | <b>LHPT</b><br><i>(Advice / Guidance)</i>                                      | <b>DPH</b><br><i>(notified)</i>                                                                                  | <b>System mental health lead</b><br><br><b>Implement Hospital Outbreak Plan</b>                    |                                                                              |
|                         | Primary care       | CCG AO                                  | <b>LHPT</b><br><i>(Advice / Guidance)</i>                                      | <b>DPH</b><br><i>(notified)</i>                                                                                  | <b>Primary Care lead</b>                                                                           |                                                                              |
|                         | Community Services | CCG AO                                  | <b>LHPT</b><br><i>(Advice / Guidance)</i>                                      | <b>DPH</b><br><i>(notified)</i>                                                                                  | <b>ASC MDT lead</b><br><b>CCG</b><br><b>Community Infection Control Team</b><br><i>If required</i> |                                                                              |
|                         | Care Homes         | DASS x2                                 | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>ASC/QAIT</b><br><i>(notification, support, advice, comm's)</i><br><br><b>PH Lead</b><br><i>(support LHPT)</i> | <b>CCG</b><br><b>Community Infection Control Team</b><br><i>If required</i>                        | <b>PPE Cell</b><br><i>(if emergency supplies required)</i>                   |
|                         | Domiciliary Care   | DASS x2                                 | <b>LHPT</b><br><i>(Advice / Guidance)</i>                                      | <b>ASC/QAIT</b>                                                                                                  | <b>CCG</b><br><b>Community Infection Control Team</b><br><i>If required</i>                        |                                                                              |
| Educational Setting     | Preschool          | Deputy Chief Officer/<br>Education Lead | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>Education</b><br><i>(notification, support)</i><br><br><b>PH Lead</b>                                         | <b>CCG</b><br><b>Community Infection Control Team</b><br><i>If required</i>                        | <b>DCC Health &amp; Safety Team</b><br><i>(Risk Assessment &amp; Advice)</i> |

|                           |                                                                                 |                                         |                                                                         |                                                                                                           |                                                                                                  |                                                                                                  |
|---------------------------|---------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
|                           |                                                                                 |                                         |                                                                         | (notification, Advice, support<br>LHPT)<br><b>LA Comm's team</b>                                          |                                                                                                  |                                                                                                  |
|                           | Schools                                                                         | Deputy Chief Officer/<br>Education Lead | <b>LHPT</b><br>(Test notification, risk assessment, IPC advice, comm's) | <b>Education</b><br>(notification, support)<br><br><b>PH Lead</b><br>(notification, Advice, support LHPT) | <b>Mental Health Support Teams CCG</b><br><b>Community Infection Control Team</b><br>If required | <b>School Principal</b><br><br><b>DCC Health &amp; Safety Team</b><br>(Risk Assessment & Advice) |
|                           | Boarding Schools                                                                | Deputy Chief Officer/<br>Education Lead | <b>LHPT</b><br>(Test notification, risk assessment, IPC advice, comm's) | <b>Education</b><br>(notification, support)<br><br><b>PH Lead</b><br>(notification, Advice, support LHPT) | <b>CCG</b><br><b>Community Infection Control Team</b><br>If required                             | <b>Boarding School Principal</b>                                                                 |
|                           | Universities and colleges (Including private)                                   | University Lead                         | <b>LHPT</b><br>(Test notification, risk assessment, IPC advice, comm's) | <b>Education</b><br>(notification, support)<br><br><b>PH Lead</b><br>(notification, Advice, support LHPT) | <b>CCG</b><br><b>Community Infection Control Team</b><br>If required                             | <b>University Lead</b><br><br><b>District Council's</b>                                          |
| <b>Workplace Settings</b> | Institutional<br>e.g.<br>Prisons.                                               | HMP Cluster Governor                    | <b>LHPT</b><br>(Test notification, risk assessment, IPC advice, comm's) | <b>PH Lead</b><br>(notification, Advice, support LHPT)                                                    | <b>NHSE/I</b>                                                                                    | <b>PHE/MoJ Prison Lead</b><br><b>PHE led Prison Outbreak Control Group</b>                       |
|                           | Public Transport                                                                | Head of TCS                             | <b>LHPT</b><br>(Test notification, risk assessment, IPC advice, comm's) | <b>Head of TCS</b><br><br><b>PH Lead</b><br>(notification, Advice, support LHPT)                          | <b>CCG</b><br><b>Community Infection Control Team</b><br>If required                             | <b>Network rail and private travel providers</b>                                                 |
|                           | Industrial sites<br>e.g.<br>Manufacturing.<br>Construction.<br>Outdoor working. | Head of EES<br><br>Business Lead        | <b>LHPT</b><br>(Test notification, risk assessment, IPC advice, comm's) | <b>Head of EES</b><br><br><b>PH Lead</b><br>(notification, Advice, support LHPT)                          | <b>CCG</b><br><b>Community Infection Control Team</b><br>If required                             | <b>DSEHM and sub-groups</b><br>(e.g. licensing, food and health and safety)<br><b>HSE</b>        |

|                            |                                                                                                                                  |                               |                                                                                |                                                                                                                           |  |                                                                                                    |
|----------------------------|----------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------|
|                            |                                                                                                                                  |                               |                                                                                |                                                                                                                           |  |                                                                                                    |
|                            | Commercial<br><i>e.g.</i><br>Offices<br>Contact centres                                                                          | Head of EES<br>Business Lead  | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>Head of EES</b><br><br><b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                                   |  | <b>DSEHM and sub-groups</b><br><b>HSE</b>                                                          |
|                            | Consumer<br><i>e.g.</i><br>Food and Drink establishments.<br>Shops.                                                              | Head of EES<br>Business Lead  | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>Head of EES</b><br><br><b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                                   |  | <b>DSEHM and sub-groups</b>                                                                        |
|                            | Social<br><i>e.g.</i><br>Caravan/camping sites.<br>Hotels.<br>Holiday lets/ B&B's.<br>Cinemas.<br>Leisure centres.<br>Libraries. | Head of EES<br>Business Lead  | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>Head of ESS</b><br><br><b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i><br><br><b>LA Communities Team</b> |  | <b>Libraries unlimited</b><br><br><b>Tourism</b><br><br><b>DSEHM - Licensing District Councils</b> |
| <b>Travel and Movement</b> | Mass Transportation<br><i>e.g.</i><br>Airports.<br>Ferry Ports.<br>Trains                                                        | Port Health                   | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                                                             |  | <b>DSEHM and sub-groups</b><br><br><b>PHE Port Health Group</b>                                    |
|                            | Large gathering (>500 people)<br><i>e.g.</i><br>sports grounds.<br>Theatres.                                                     | EH lead (licensing)<br>Police | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i><br><br><b>Communications Lead</b>                           |  | <b>DSEHM and licensing sub-group</b><br><br><b>SDP/OPiC</b>                                        |



|                                          |                                                                                                        |                     |                                                                                |                                                                                                 |                                                                             |                                                                                                                                              |
|------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
|                                          | <i>Tourist attractions. will</i>                                                                       |                     |                                                                                |                                                                                                 |                                                                             |                                                                                                                                              |
|                                          | Small gathering (<500 people)<br><br><i>e.g. Cinemas. Parks. Place of worship.</i>                     | EH lead             | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i><br><br><b>Communications Lead</b> |                                                                             | <b>DSEHM and licensing sub-group</b><br><br><b>SDP/OPIC</b><br><br><b>Diocese (places of worship)</b><br><br><b>District Councils(parks)</b> |
| <b>Vulnerable Individuals and groups</b> | Homelessness<br><br><i>Inc: Hostels</i>                                                                | Housing lead        | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                                   | <b>CCG</b><br><b>Community Infection Control Team</b><br><i>If required</i> | <b>District Councils</b><br><i>(Housing Leads)</i>                                                                                           |
|                                          | Vulnerability & /or complexity including Domestic abuse & substance<br><br><i>Inc: Hostels/refuges</i> | Head of Communities | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                                   |                                                                             | <b>District Councils</b><br><i>(Housing Leads)</i>                                                                                           |
|                                          | Refugees and Asylum seekers                                                                            | Head of Communities | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                                   |                                                                             | <b>District Councils</b><br><i>(Housing Leads)</i>                                                                                           |
|                                          | Gypsy, Traveller and Roma                                                                              | Head of Communities | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                                   |                                                                             |                                                                                                                                              |
|                                          | Disabled people and carers                                                                             | DASS                | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>DASS</b><br><br><b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i>                | <b>ASC/CCG lead</b>                                                         |                                                                                                                                              |



|                                                 |                                          |                                                                                         |                                                                                |                                                               |                           |                                                      |
|-------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------|---------------------------|------------------------------------------------------|
|                                                 | People with LD and autism                | DASS                                                                                    | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>DASS</b><br><i>(Notified)</i>                              | <b>ASC/CCG lead</b>       |                                                      |
|                                                 | Mental Health Service users              | CCG/DASS                                                                                | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>DASS</b><br><i>(Notified)</i>                              | <b>Mental Health Lead</b> |                                                      |
|                                                 | Older People                             | CCG/DASS                                                                                | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>DASS</b><br><i>(Notified)</i>                              | <b>CCG lead</b>           |                                                      |
|                                                 | People with underlying health conditions | CCG                                                                                     | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> |                                                               | <b>CCG lead</b>           |                                                      |
|                                                 | Health and Care Staff                    | CCG/DASS                                                                                | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>DASS</b><br><i>(Notified)</i>                              |                           |                                                      |
| <b>High risk communities and neighbourhoods</b> | BAME Communities                         | Head of Communities                                                                     | <b>LHPT</b><br><i>(Test notification, risk assessment, IPC advice, comm's)</i> | <b>PH Lead</b><br><i>(notification, Advice, support LHPT)</i> |                           | <b>Equality and Diversity leads in organisations</b> |
| <b>Public Protection</b>                        | Business Lead                            | Police (X2)<br>Head Trading Standards<br>(Devon/<br>Somerset/<br>Torbay shared Service) |                                                                                |                                                               |                           |                                                      |
| <b>Military Liaison</b>                         | Planning                                 | Military Lead                                                                           |                                                                                |                                                               |                           |                                                      |

**Key:**

AO: Accountable Officer

ASC: Adult Social Care

CCG Lead: Clinical Commissioning Group

DASS: Director of Adult Social Services  
DPH: Director of Public Health  
DSEHM: Devon Strategic Environmental Health Management Group  
EES: Economy, Enterprise and Skills  
HSE: Health and Safety Executive  
LHPT: Local Health Protection Team (Public Health England)  
LRF: Local Resilience Forum  
MDT: Multi-Disciplinary Team SDP  
NHSE/I: NHS England and NHS Improvement  
OPiC: Operational Incident Cell (LRF)  
PHE: Public Health England  
PH Lead: Local Authority Public Health Team Lead  
SDP: Safer Devon Partnership  
TCS: Transport Coordination Services  
QAIT: Quality Assurance Improvement Team





## Team Devon (Local Outbreak Engagement Board)

### Terms of Reference

#### 1. Context

- 1.1 The national Test and Trace Service is designed to control the rate of reproduction of Covid-19, reduce the spread of the infection and save lives. Its aim is to help to return life to as normal as possible, for as many people and businesses as possible, in a way that is safe, protects the health and care systems as well as supporting the economy.
- 1.2 Devon County Council has been designated one of England's 11 Beacon Councils by Government to lead the implementation of new Covid-19 Local Outbreak Management Plans, including the identification and management of COVID-19 outbreaks.
- 1.3 This is a national programme, but the response will be brought together at Local Authority level under the leadership of the Director of Public Health to ensure a community focus and appropriately tailored response. This will be based on science and data and the prevention, containment and isolation of the virus.
- 1.4 Local authorities must work with partners to put in place measures to prevent, identify and contain outbreaks and protect the public's health, using local knowledge to target resources and improve the speed and co-ordination of any response to local flare ups of the infection.
- 1.5 The Plan requires a public-facing board led by The Leader of the Council and other key stakeholders to communicate openly, honestly and transparently with the public. This is Team Devon's Local Outbreak Engagement Board (**LOEB**) who will lead the engagement with local communities and businesses and be the public face and voice of the local response for both prevention and containment in the event of an outbreak.

#### 2. Purpose

- 1.1 Provide political ownership and public-facing engagement and communication for both prevention and outbreak responses.

#### 3. Role and Responsibilities

- 1.2 The Team Devon LOEB will be responsible for:
  - Political oversight of the local delivery of the Local Outbreak Management Plan;
  - Communicating and engaging with residents and community leaders, providing community direction and leadership for prevention and outbreak response, especially with vulnerable and/or higher risk communities of interest;
  - Addressing misinformation;
  - Endorsing the Communications Strategy for the Local Outbreak Management Plan; and
  - Local political liaison with Ministers.
  - Reviewing and communicating such other matters relating to Coronavirus as they arise in line with Government policy.
- 1.3 This Board must maintain close liaison with the Devon and Torbay COVID-19 Health Protection Board.

# Agenda Item 4

## 4. Principles

- 1.4 The Board will communicate those key messages in the best interests of Devon's residents, communities and businesses, based upon the science, evidence and data considered by the Health Protection Board, recognising the unique geography of Devon.
- 1.5 To work in an open and transparent way to ensure no surprises for other partners and provide reassurance to residents.

## 5. Chair

- 1.6 The Leader of the County Council (Councillor Hart) will be the chair of the Team Devon (Local Outbreak Engagement Board).
- 1.7 The Deputy Chair will be the Chair of the Devon Health and Wellbeing Board (Councillor Leadbetter).

## 6. Membership

- 1.8 The Board membership will be as follows:
  - The Leader of Devon County Council
  - Chair of the Devon Health and Wellbeing Board (Cabinet Member for Adult Care and Health)
  - Cabinet Member for Children's Services
  - Cabinet Member for Communities, Public Health, Environment and Prosperity
  - Chief Constable of Devon and Cornwall Police (Shaun Sawyer)
  - Chair of Clinical Commissioning Group (Paul Johnston)
  - Chair of ICS (Dame Suzi Leather)
  - District Council Leader (Councillor Pearce – South Hams and West Devon)
  - Higher Education (Janice Kay – Deputy Vice Chancellor of University of Exeter)
  - Further Education (Sean Mackney – Principal of Petroc College)
  - Devon Association of Local Councils (Towns and Parish Councils) (County Officer Cara Stobart)
  - Voluntary and Community Sector (Diana Crump – Living Options)
  - Tourism Representative (Rhys Roberts – Chair of Visit Devon)
  - Business Rep (Sue Wilkinson – Development Manager Federation of Small Businesses)
  - \*DPH/ CEX, Communications Lead (advisory capacity only), Equalities Officer (advisory capacity only) and any others required on an ad hoc basis depending on nature of outbreak and affected sectors.
- 1.9 The Membership of the Board is very much based on a 'hub and spoke model', with the members above being responsible for the dissemination of key messages through relevant channels, utilising existing networks where appropriate and / or developing new ones where needed.

## 7. Team Devon (Local Outbreak Engagement Board) Support

- 1.10 Devon County Council's Democratic services team will be responsible for any administrative arrangements required for the Team Devon (Local Outbreak Engagement Board).
- 1.11 This may involve, but not exclusively, setting up meetings / events, distribution of any relevant paperwork, dissemination of information, ensuring relevant actions are carried out and appropriate liaison with the Communications Team.

1.12 The County Council’s Communications Team (Head of Communications and Media), will lead on strategic and operational communications, in close liaison with the Director of Public Health, Devon County Council’s Chief Executive, and give advice to the Team Devon Local Outbreak Engagement Board.

## 8. Frequency

1.13 The Board will initially convene fortnightly, although this frequency will be kept under review.

1.14 As outlined in the Communications Strategy, whilst the Leader will use best endeavours to convene the full Board, there may be occasions or circumstances that require a rapid approval and deployment of communications and the Leader may use his discretion to sign off communications or engage a smaller membership of the Board.

## 9. Governance

