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Date : August 2020  
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COVID-19: Theme Two high risk places, locations and communities.

### **Purpose of this paper**

The purpose of this paper is to update the board about Theme Two of the outbreak management plan: COVID 19, Management of outbreaks in identified high risk communities or settings.

Within Theme Two the national guidance outlines specifically the following communities: Homeless; Gypsy & Traveller; Military; BAME; Substance Misusers

This paper does not attempt to cover all of Theme Two, other high-risk groups and sites such as universities and business premises are covered in other reports.

### **The response so far**

#### **Theme Two:**

The local and national outbreak management plans include in Theme Two, outbreak management in high risk communities and sites, and the responsibilities for working with these to prevent and manage COVID 19 outbreaks. The national guidance outlines specifically the following communities: Homeless; Gypsy & Traveller; BAME; Substance Misusers.

It is clear from the emerging evidence that some groups within our society will be more adversely affected than others by the impact of Covid 19, this may be for a variety of reasons. Those from lower socio economic situations may have no option to work from home, may be more at risk of losing their income, more likely to have to take public transport to work or work in places where close contact is unavoidable and therefore at higher risk of infection. In addition, we already know that some groups who may be at higher risk of infection also have already poorer health outcomes than those experienced by the general population of any city. For this reason, extra support is offered within the outbreak management plan for these communities and individuals.

Each local authority has agreed to a set of joint working agreements or SOP's (standard operating procedures) with the regional health protection team, these outline the necessary steps to be taken should there be an outbreak of COVID 19 in those communities or settings.

Part of the SOP for vulnerable communities and settings includes access to testing as well as IPC (Infection Prevention Control) support from the specialist teams. Each CYC area has an identified public health specialist who has been able to offer support and guidance during the initial response. Where service provision is with a third sector provider this link has been forged through the designated commissioning managers.

Public Health core specialist officer team is a small team with limited capacity and as such have in general not directly worked with customers during the initial response, working as a point of contact for those staff already in contact with the customer. Support and advice remains in place as the initial response is paired back, in addition, a central enquiries email has enabled residents and professionals to ask questions and request support from the core PH specialist team as queries or issues have arisen.

The model has been to work with those people who are already in touch with the community of interest and have trusting relationships established. For instance, direct support was given to the substance misuse commissioned provider by public health specialists in order that they were equipped to initiate prevention measures and manage any outbreaks in partnership public health using the appropriate SOP.

Work has been undertaken with the equality and diversity officers at CYC to ensure BAME communities have had information and support in a timely manner including information made available in other languages for those staying in York during lockdown whose first language is not English. In addition, specific support has been given to identified communities through the designated link workers, for instance work has been undertaken in partnership with Migration Yorkshire, Refugee Action York and Faith leaders to share information and health messages with specific community groups and with those without access to social media or television.

A number of initiatives have been undertaken by the established support officers and neighbourhood enforcement team to ensure the Gypsy and

Traveller community have had access to guidance, were able to access fresh water and safe waste disposal to ensure social distancing was possible. This was alongside clear health information to support anyone who experienced symptoms to access testing.

Additional posts have been agreed within CYC to support the capacity and demand locally, to ensure that the hub support remains available for those who need it and key public health messages continue to be shared with those identified at greater risk.

Testing for COVID 19 has been made available to all residents in a number of ways, for most people this would be through the national booking system <https://self-referral.test-for-coronavirus.service.gov.uk/antigen/name>. For some people this is not possible and alternative testing options have been developed locally which are outlined in the testing policy. This process has been made available to the support system work force to implement. For instance, for someone who is homeless or without a fixed address for postal test and no car to attend a drive through centre, tests are arranged through the existing support workforce.

Through the support offered (theme six) to all residents through the community hubs and extensive volunteering programme, volunteers were able to link residents to extended support systems where required. In addition, a public facing communications campaign has been implemented to advertise where residents can access Covid related help.

### **Future initiatives**

Whilst the intention is to return as much as possible to business as usual, the need for extra support will continue beyond this initial phase. This will mean some of the initiatives will need to remain in place to support our most vulnerable residents. In continuing to provide this support we protect all our residents by limiting community contacts and reducing transmission of Covid 19.

The offer from the core public health team will remain in place for up to 18 months, with additional capacity to enable this to be managed alongside usual business. Joint working with existing workforces to ensure they are equipped to manage any potential or actual outbreaks within our identified vulnerable communities.

## **Summary of national guidance**

Theme two: Annex One: *High-risk workplaces, communities, and locations – identifying and planning how to manage high-risk workplaces, communities of interest and locations (for example defining preventative measures and outbreak management strategies).*

<https://www.gov.uk/government/publications/containing-and-managing-local-coronavirus-covid-19-outbreaks/covid-19-contain-framework-a-guide-for-local-decision-makers>