Manchester COVID-19

Manchester COVID-19 enhanced response area Plan



June 2021

Situation Update

- COVID-19 cases have been increasing in Manchester and in other Greater Manchester areas over the past few weeks. The number of cases in a 7day period in Manchester is now the highest it has been since mid-January 2021
- Currently, the number of new cases is highest among people aged between 11 and 34 and is particularly high in the 17 to 24 age group. Rates are also high among South Asian communities
- The increase in cases is linked to the Delta variant of concern (VOC), which spreads up to 60% more easily than previous strains. This VOC is now the dominant variant in Manchester
- Given the location of Manchester at the centre of the Greater Manchester conurbation and the number of people who travel frequently in and out of the city for work, education and recreation, there is a greater risk that the Delta variant will spread quickly and pose a risk to people in other GM boroughs
- There is no evidence that vaccines are any less effective against this variant and there is strong evidence that vaccines do reduce serious illness and hospital admission related to COVID-19.
- We need to act quickly with additional measures to bring the case rate down so that we can ease restrictions and allow the economy to recover





Background

- Manchester's enhanced response area Plan builds on the successful implementation of our Variants Of Concern (VOC) Prevention Plan, developed by the VOC Prevention Task Group
- In May 2021 eight areas of the city were identified that are particularly vulnerable to the emerging threat from the VOC-21-APR-02 'Delta' Variant: Longsight, Levenshulme, Cheetham, Crumpsall, Rusholme, Ardwick, Moss Side and Whalley Range
- These areas were identified following analysis of patterns of case rates and outbreaks, which highlighted rapid transmission within younger age groups and South Asian communities. These areas have been a focus of concern and enhanced response for some time due to a significantly lower than average vaccination coverage
- Manchester has a very large population of students who often are living away from home for the first time in homes of multiple occupation, making them particularly vulnerable to transmission. It is known that younger age groups, including young people of university age, drove Manchester's 'second wave' of COVID in September 2020, when a number of large outbreaks necessitated large-scale local 'lockdowns' of student halls of residence in order to contain the risk of transmission into the wider community. The movement of large numbers of students across the country, coupled with international students arriving, poses a risk of the spread of variants from other areas into Manchester

Background

On 11 May 2021 a cross-system Task Group was convened to develop and implement a system-wide Variants of Concern Prevention Plan in order to respond to the threat of Delta VOC-21-APR-02 in Manchester, with the following five workstreams:

- **1. Targeted vaccination Drive:** Increased vaccination coverage in the target communities and populations
- 2. Targeted communications and engagement: Provide the targeted communities with the right information and support to access vaccinations, asymptomatic and symptomatic testing and support to self-isolate
- **3. Rapidly Identify & Break Chains of transmission:** Provide investigation and enhanced contact tracing for people testing positive with a VOC to define locations they may have acquired or transmitted infection to focus further testing . Enhanced community and surge testing. Enhanced support to self-isolate
- 4. Recommendations for additional local measures and/or restrictions aimed at reducing transmission: Use available data to provide a maximum understanding of the prevalence of VOCs in the population and make recommendations that will encourage and promote safe personal behaviours alongside effective compliance and enforcement measures
- 5. Mitigate the risk of transmission in university students: Work closely with Manchester universities to plan for the COVID secure arrival of home and international students and support effective testing protocols

enhanced response area

- On 8th June 2021 Government announced that whole of Greater Manchester would be designated as an Enhanced Response Area (ERA) and on 16th June the status was rebadged as an enhanced response area (era). Manchester's Variants of Concern Prevention Plan was re-designated as our enhanced response area Plan accordingly
- ERA status had previously been given to Bolton, Blackburn with Darwen and Burley in the North West, which benefited from additional vaccine supplies, testing capacity and military support
- Following a submission to NHS England and National Contain, an initial allocation of vaccine was agreed on 11th June to support a 3-week surge plan
- A formal Military Aid for Civil Authorities (MACA) request submitted by Manchester and a number of other GM authorities for additional vaccinators; support for testing has been approved
- The Director of Public Health and Executive Member for Health and Care provided a briefing on the Plan to councillors in the eight priority wards on Monday 14th June
- The era Task Group (previously the VOC Prevention Task Group), bringing together leads from the Manchester Vaccination Programme with Manchester Test and Trace, Neighbourhoods, MLCO, communications and COVID Health Equity and chaired by David Regan (Director of Public Health), continues to be responsible for delivery of the Plan
- The implementation of this plan is monitored by the Manchester COVID-19 Response Group (CORG), chaired by David Regan
- The governance of the plan comes under Manchester Gold, chaired by the Chief Executive of Manchester City Council Joanne Roney

enhanced response area Options/Tools

Being part of an enhanced response area gives the following additional options/tools to use to reduce COVID-19 cases:

- Rapid Response Team deployed to support LAs to plan and coordinate their ground campaign, and the ability to request Military Aid to the Civil Authority (MACA)
- Supervised in-school testing
- Wastewater testing samples prioritised for sequencing, in and around the enhanced response area Plan areas
- Specialist comms support to support increased awareness and focused engagement with disadvantaged groups
- Drive vaccine uptake across eligible cohorts by upweighting resources for operational delivery of the vaccine programme.
- Allow Directors of Public Health to recommend additional control measures in educational settings (particularly face coverings)
- Local Authorities can approach their local police force, HSE and other enforcement agencies to seek support in compliance and enforcement as necessary
- Subject to agreement, designate a Vaccines Champion to ensure all available resources from the Vaccines Programme are harnessed to support access and uptake in a local area, linking this surge activity to the community engagement on testing
- Supporting spot checks to ensure workplaces are COVID-safe
- Gov.uk Guidance advising people living in these areas to take particular caution when meeting others outside of their household or support bubble and to minimise travel in and out of affected areas. Where necessary, this may be supported by a Ministerial statement to highlight the guidance.

Key messages for residents and communities

We have a critical window where what we do now as a city, will have a major long-term effect.

Our key advice – which is also enhanced response area guidance - remains the same:

- Take extra care and meet people outside, rather than inside, wherever possible
- Follow all the rules around social distancing, face coverings, washing hands, wiping surfaces and keeping windows open
- Take the vaccination when offered and if you have any questions please talk to your GP, who will want to help.
- Do the free twice-weekly testing sessions (these are the lateral flow kits that are for people who do not have COVID symptoms). This is because we know that 1 in 3 people can have the virus without ever showing any sign of it. Then, please record your results -and if it is positive please book a PCR test immediately to confirm the result More details can be found on the council website <u>www.manchester.gov.uk/coronavirus</u>
- If you have COVID symptoms, please don't delay, book a free PCR test immediately and stay at home until you get your result and advice on if you need to self-isolate
- Please take the help and support we can offer while you self-isolate. There is no stigma in catching the virus or being a contact
- Manchester will remain open as usual for business and if we all follow the rules it means that we can all enjoy
 what the city has to offer

Data, Intelligence and Insight

- We continue the work we have done throughout the pandemic to use all of the data, intelligence and insight available to us to identify and continually monitor the priority areas and communities we have chosen as a focus for targeted communication and engagement work, enhanced testing and delivery of our vaccination programme
- We are working with other local authorities as part of a pilot to explore the benefits of using data on international arrivals from 'red', amber' and 'green' list countries to provide additional support to people who are quarantining and to understand better potential sources of transmission from outside of the UK
- To support our neighbourhood teams to understand and respond to the changing patterns of COVID within their local areas and communities, we have developed an online COVID-19 Surveillance Dashboard which provides an up-to-date view of the latest data in respect of confirmed cases, tests and vaccinations down to Lower Super Output Area (LSOA) in the form of an interactive map and charts
- We have developed a dashboard to enable us to track vaccination coverage across the areas of the city targeted by the Plan, allowing us to compare this against coverage as a whole

Data, Intelligence and Insight (Examples)

Current reporting period 31 May 2021 to 6 June 2021

The rate per 100,000 of confirmed COVID-19 cases for each neighbourhood in the reporting period. The rates are based on the number of people with at least one positive COVID-19 test result, either labe-reported or rapid lateral flow test by specimen date. Positive rapid lateral flow test septiment of the PCR test results are negative, these are not reported as cases. Peopl tested positive more than once are only counted once, on the date of their first positive test.

Select the neighbourhood to navigate to the detail page.

The alert levels are set based on the rate of cases per 100,000 people in the 7 day period:

- Green less than or equal to 100 - Yellow between 101 and 200 - Amber between 201 and 400 - Red over 400

Author: Mark Hambleto

Please use caution when interpreting small numbers Last updated: 09/06/2021 15:44:07

	-			
		Rate per 100,000	7 day change	Cases in previous 30 days STGF and S-gene cases
	Ancoats, Clayton and Bradford	262	\mathbf{O}	
	Ardwick and Longsight	150	•	
t,	Cheetham and Crumpsall	119	•	
e IS	Choriton, Whalley Range and Fallowfield	173	•	
	Didsbury, Burnage and Chorlton	266		
	Fallowfield (Old Moat) and Withington	182	•	
	Gorton and Levenshulme	179	•	
	Higher Blackley, Harpurhey and Charlestown	231	•	
]	Miles Platting, Newton Heath, Moston and City Centre	305	$\mathbf{\bullet}$	
	Moss Side, Hulme and Rusholme	186	\mathbf{O}	
	Wythenshawe (Baguley, Sharston, Woodhouse Park)	107	•	
	Wythenshawe (Brooklands) and Northenden	190	•	

LFD Testing Rates Over Time





Confirmed COVID 19 cases from 31 May 2021 to 06 June 2021 Metric: Cases Select period: 0

Cases

Asian or Asian British

Male and female; hover over segment for details. Daily cases are split by STGF and S-gene cases





Hover for info (i) Back to summary

COVID Vaccination Programme

Manchester Health & Care Commissioning

Mixed, multiple, other or unknow

Vaccination Coverage in Wards targeted following the Delta Varient of Concern (VOC)

This report visualises first dose COVID Vaccination Coverage across all Priority Cohorts for Wards targeted as a result of the Delta variant of COVID-19 (B.1.617.2, formally known as the "Indian" variant). The targeted Wards are:

- Ardwick - Crumpsall - Cheetham - Levenshulme - Longsight - Rusholme - Moss Side - Whalley Range

View data as of: 6/16/2021

Trend in first dose coverage since 1st May



Data, Intelligence and Insight

We are tracking differences in the use of home school testing kits in different parts of the city. Our initial analysis shows that the rate of home school tests is lower rates in our target areas. This may relate to differences in people's willingness and ability to take home tests and register the results or not understanding why this is important

Rate of School Home Testing per 100,000 11-16 year olds by Ward



The graph shows the total number of school home tests (positive and negative/void) that have taken over the period between 1 April and 15 June 2021 by secondary school age children living in each ward per 100,000 resident population. (Note: the figures only include the results of tests that have been taken and successfully registered on the government testing results portal)

The data shows that the rate of school home testing is higher in some of our more affluent and less ethnically diverse wards, such as Chorlton, Didsbury and Brooklands, and lower in our more deprived wards with large ethnic group populations (e.g. Cheetham, Crumpsall, Moss Side, Rusholme).

Workstream 1: Targeted Vaccination Drive

The overall objective of the Manchester Vaccination Programme is to deliver a safe, effective and equitable roll out of the Covid-19 vaccine to Manchester residents, patients and health and social care workforce at the fastest possible pace to reach our whole population. The outcomes are a population protected from Covid-19, that is more likely to engage in future vaccination programmes, and a city supported to recover effectively from the pandemic.

	Current Progress				Ambition		
Established cal reducing impac	l centre offer to support booking for eligible patients (freep ct of digital exclusion and language barriers	phone)		Expanded offer	to increase capacity (circa 30k)		
Maximise upta individual conv	ke of the vaccine across the whole population by accelerat rersations (i.e. those who have not responded to current of	ing fers)		Reduction in hea inclusion groups	ath inequity through greater engag - target circa 23k cohorts 1-9	gement and targetir	ng of
Communities A engagement	Against COVID – focused on door knocking and community			Improved levels team workforce	of vaccination coverage enabled b to cover all low uptake areas	y increased neighb	ourhood
Improved staff	vaccination uptake e.g. care home staff to 74% (1 st dose)			Increase uptake through tailored	of 1 st dose to 95% for all care sected and a sected by a sected	tor and 2 nd dose ind improve access	crease
Outreach and H offers and pop	Hyper local offers – tackling impact of deprivation, multiple ups including walk in and vaccination vans	e roving		Expanded semi- communication	permanent vaccination sites for th and engagement focusing on targ	ne duration of surge eted communities	e. Supported

Workstream 1: Targeted Vaccination Drive

Manchester's Vaccination Programme has three main delivery objectives:

- To achieve a minimum of 85% vaccine coverage through cohorts 1-12 across the whole city by the end of July
- To rapidly increase uptake across the 8 LSOA areas subject to the enhanced response area Plan
- To continue to close the vaccination coverage gap between different ethnicities and gender

The quality and granularity of data on the progress of the vaccination programme is high, and will allow us to continue to accurately track against these two objectives on a daily basis.

The detail of the Manchester Vaccination Plan continues to focus on the three interrelated areas:

- Access: increasing capacity and opportunities to be vaccinated, improving the ways in which people can access these opportunities, and removing barriers that make it difficult for people to get their vaccine
- Information: provision of tailored, targeted and culturally competent information about COVID and vaccination with bespoke use of the "3Ms" as appropriate for the target audience (Message, Messenger, Media)
- Motivation: activities that create conditions for people to want the vaccine, and build trust and confidence in the vaccine

Workstream 1: Targeted Vaccination Drive

- Manchester has around 278,000 people aged over 18 who are yet to receive their first dose, a large majority of whom reside in the target communities of Longsight, Levenshulme, Cheetham, Crumpsall, Rusholme, Ardwick, Moss Side and Whalley Range
- The Manchester Vaccination Programme Spring Plan focussed on improving uptake in Cohorts 1-9 and although we have seen significant increase, we still need a continued emphasis on Access, Information and Motivation for these patients in addition to rapid delivery for our younger cohorts
- Given the time delay between providing targeted vaccines to individuals and vaccines becoming effective against the virus, the first priority of the enhanced response area Plan is to increase coverage to all over-18s in the target areas
- One of these areas has a coverage below 60% (Moss Side), five have a coverage between 60%-70% and two have coverage between 70%-75%. Given the low coverage in Moss Side (<60%), this area has been selected as the first priority for the drive
- Second dose run rate and an accelerated programme including delayed second doses needs to be run in parallel; additional resource is needed to meet this drive whilst continuing to drive both first doses and second doses across the City
- The approach to increasing vaccination coverage is divided into three strands:
 - Maximising the capacity at existing fixed sites covering the target areas (delivered by Primary Care Networks (PCN), Community Pharmacy and Manchester Foundation Trust). Three PCN fixed sites cover the target areas: The Vallance, The Irish Centre and The Jain Centre
 - 2. Short-term 'pop-up' sites (1-5 days), supplemented by a roving van model delivered by PCNs/Community Pharmacy
 - 3. Utilisation of enhanced response area Plan assets, including the 'Spaceship' mobile vaccination site

The Next 3 Weeks

- An initial frontloading of vaccine supply is being made available to the City
- We are working with the Manchester universities to develop a bespoke offer, including a site at Owens Park Halls of Residence – targeting an anticipated 20,000 population that can be signposted through partnership working
- We are providing bespoke invitations to critical populations working with local teams to provide tailored and culturally-competent approaches e.g. – dedicated drop-in times and clinics targeting taxi drivers, police and school and college staff
- We continued our focus on second doses and those who have not come forward
- The Plan is jointly led by Manchester Health and Care Commissioning and Manchester City Council in partnership with the Manchester University Hospitals NHS Foundation Trust (MFT), Manchester Local Care Organisation and VCSE partners. The plan is supported by Greater Manchester Health and Social Care Partnership and Northwest Regional NHS colleagues

Military Aid Civil Authorities (MACA) Request

- Two additional new semi permanent vaccination sites are being established: Moss Side Leisure Centre, and Belle Vue Sports Village car park (to support access in the central east belt: Levenshulme and Longsight)
- Clinical Directors for each site will be sourced from the NHS in Manchester to ensure the appropriate Healthcare Governance is in place
- Initially these sites will deliver Pfizer first dose to the under 40's however should the supply of the Pfizer vaccine become compromised, the sites will switch to administering the Astra Zeneca Vaccine 1st and 2nd Doses to those over 40 at pace
- A MACA request has been submitted to provide the workforce for these sites (awaiting outcome)

Moss Side Leisure Centre (8 pod model)

- > 8 pods will be in operation 7 days a week 12 hours a day
- Each Pod can deliver at least 100 doses of vaccine per day, so this site is aiming to deliver at least 800 doses per day this would be circa 22,400 over 4 weeks
- Plans are progressing at pace to enable Moss Side Leisure Centre to be a site; it has previously been a site for testing and has all the necessary provisions in place e.g. Infection and Prevention Control (IPC)
- The military team required to achieve this will be: 2x Team Leaders, 6x general duties administration staff/ observers, 3x registered health care professionals to take consent and health questionnaires/ supervision, 12x unregistered vaccinators (CMT's)

Military Aid Civil Authorities (MACA) Request

Belle Vue Sports Village Vaccine Pod Facility ('spaceship' model)

- ➢ 6 pods will be in operation 7 days a week 12 hours a day
- Each Pod can deliver at least 100 doses of vaccine per day, so this site is aiming to deliver at least 600 doses per day this would be circa 16,400 over 4 weeks
- The vaccine pod facility will be transferred from Bolton and the Belle Vue Sports Village car park is a suitable location that has been assessed by Manchester City Council Estates Lead and NHS Property Services Lead
- The military team required to achieve this will be: 2x Team Leaders, 6x general duties administration staff/ observers, 3x registered health care professionals to take consent and health questionnaires/ supervision, 9x unregistered vaccinators (CMT's)

- Working closely with communities and community leaders we are ensuring that individuals have the right culturally-appropriate information and support to access vaccinations, regular asymptomatic and symptomatic testing and support to self-isolate
- We continue to promote infection, prevention control messages with communities, including social distancing, handwashing, good ventilation and enhanced cleaning in settings
- We are providing increased community engagement, including ensuring that messages are accessible in languages that are used by communities and provided by trusted community representatives
- We are working towards the provision of a vaccination workforce that reflects the ethnicity of our target populations
- We are co-delivering doorstep community engagement with 'Communities Against COVID' a pre-existing project targeting over-40s who haven't responded to invitations to vaccination from their GPs. Staff and volunteers are providing a visible presence in neighbourhoods, engaging with residents, signposting to available vaccination clinics, providing LFD home testing kits and information about testing and support to self-isolate in a variety of languages
- We continue to recruit of COVID Chat volunteers reflecting the diversity of the target populations linking these to Communities Against COVID engagement

- Additional funding has been secured for:
 - > Targeted digital promotion (including digi-screens) led by the MCC Digital Team
 - A leaflet drop targeted at the 8 areas in very plain English/Easy read/symbols/ community languages with key messages about testing including access to funding for self isolation, Covid safety messages and vaccination
 - > Media slots on local radio e.g. Legacy, Asian radio stations –involving clinicians and community representatives
 - Physical signage and publicity
- We are exploring an enhanced helpline hosted by a community organisation to answer questions and connect to support, including advice on the impact of the vaccination on certain medications and conditions. Funding has been secured for VCSE support for local radio content and the helpline
- We will issue messages around responsible behaviours when out socially
- We are encouraging residents to take lateral flow tests before going out socially/attending events
- We are promoting communications around the use of the Test & Trace app with messages that people should selfisolate if 'pinged' and signposting support to self-isolate around the app

Businesses

- We continue to encourage and promote COVID controls and safe personal behaviours alongside effective compliance and enforcement measures
- We are producing a leaflet about vaccinations that teams will hand out whilst engaging with businesses
- We are reissuing COVID messaging to businesses to encourage them to continue with COVID controls, reminding businesses what a contact is and how to identify their own work-based contacts, ensuring that they take a PCR test and self-isolate
- We are reminding businesses that if staff are pinged on the app that they should self-isolate, and that its good practice for staff to have the app on their phone
- We are exploring an accreditation scheme for businesses to recognise those that are correctly implementing COVID controls and supporting testing and self-isolation for staff

- Our **Youth Engagement Plan** tackles youth-specific barriers and drivers and addresses:
 - creating an enabling environment
 - establishing positive social norms in peer groups
 - promoting feelings of empathy and prosocial motivation
 - engaging young people in communicating risk-prevention messages
 - building young people's confidence in their ability to act and to protect themselves from risks
 - facilitating safe social connections to reduce negative impacts on mental health
- The plan targets:
 - young people aged 14 and 15 with key messages around COVID-safety and why their families should be vaccinated
 - > young people aged 16-25 with key messages around why they should be vaccinated
 - young people not in higher education and at increased social disadvantage
- The Plan has a particular focus on reaching young people from Black, African and Minority Ethnic groups
- In line with the priorities of the era Plan, in our message around promoting COVID-safe behaviour the Youth Engagement Plan places particular focus on vaccination

- Through the plan we have developed a young-person focused Community Toolkit, including links and graphics to social media messages; this is being promoted across our well-established networks, including local Young People's Partnerships
- A film has been produced by Sarah Doran (Consultant in Public Health) thanking our young people for doing their bit
- Dr Cordelle Ofori (Consultant in Public Health) took part in a COVID vaccination panel conversation on Unity Radio's Next Generation Youth, answering young people's concerns about COVID vaccination, to be broadcast on 1 July
- We are working with local radio stations, including Unity Radio, around the delivery of a youth-focused online music event 'Test Fest' which will involve local youth ambassadors and young people to promote COVID messages/vaccination information

Workstream 3: Rapidly identify & break chains of transmission

- Where COVID-19 cases, clusters or outbreaks are detected, we continue to take all appropriate public heath action to break the chains of transmission and stop the spread.
- Overall we aim to:
 - Prevent transmission from undetected cases by maintaining excellent standard of routine COVID control and response Test, Trace, Isolate
 - Prevent transmission from travel-associated cases
 - Use proportionate and effective control measures where cases are detected
- We do this by:
 - Investigation and contact tracing for people testing positive to identify places they may have acquired or transmitted infection to focus further testing
 - Enhanced testing in outbreak settings and targeted geographical areas
 - Enhanced support to self-isolate

3.1 Investigation and contact tracing

Summary of approach

Carry out investigations into cases, clusters and outbreaks to:

- Establish a likely source for the infection
- Assess the likelihood of onwards transmission from the case

Carry out rapid detection and isolation of infectious cases during their *infectious period* and isolation of close contacts of infectious cases during their *incubation period*

Identify places where cases may have acquired or transmitted infection to focus further testing

Ask contacts of cases to take a PCR test to see if they also test positive. This will help us to understand the spread of infection and get more people to isolate quickly if we need them to.

Activate further enhanced response where there is evidence of undetected community transmission (e.g. no known chain of transmission, indicating missed cases) and/or high potential for on-going onwards spread

Continue to prioritise our reactive engagement with businesses, focussing on higher risk situations

Summary of approach

Continue to promote and improve access to regular twice weekly LFD testing for asymptomatic residents, targeting priority areas and underrepresented and disproportionately impacted groups

Use PCR home testing/Mobile Testing Units to carry out whole school testing in secondary schools in priority wards and to respond to outbreak situations in settings. Carry out mass PCR testing in small geography areas if indicated by the data

Look for opportunities to use our existing activities and services to increase access to testing

Enhanced testing in high risk residential settings

Data, intelligence and insight

We are using data, intelligence and insight in order to target our enhanced testing offer on areas that will yield the most benefit in terms of the identification of new cases of COVID. To do this, we will focus on areas and/or communities where there have been lower rates of testing but a higher positivity rate (i.e. a higher proportion of positive tests). These are areas where enhanced testing has the biggest opportunity to identify larger numbers of positive cases of COVID.



This chart compares the total number of tests per 100,000 population taken in each of the 32 wards in the city (bottom axis) with the proportion of those tests that have tested positive (side axis).

Areas in the upper left hand corner of the chart are those which have low rates of testing and high positivity rates. These are the wards where we will focus our enhanced testing offer. Our 8 priority wards make up the majority of wards in this corner of the chart,

Symptomatic testing (PCR)

- All contacts of positive cases will need to take a PCR test as well as self-isolating. We are exploring ways of making these easier to access for settings
- We are improving access to PCR testing for those experiencing symptoms of COVID prioritising key wards, underrepresented and disproportionately impacted groups
- We are exploring how we can use our local testing team to improve access to PCR tests
- We will be using PCR tests including MTUs to respond to settings-based outbreak situations or if the data tells us enhanced testing is needed in certain smaller geographical areas
- We will work in a trauma informed way, avoiding uniformed soldiers on the streets in communities where appropriate

Home testing (LFD)

- We are working to understand better the barriers to use of home testing kits (LFD) among different age groups and communities (e.g., lack of access to test kits, lack of (technical) understanding of testing instructions/process, complexity of process of recording results etc.) and developing local targeted responses to address these barriers
- We are exploring developing a network of 'technical support' people ('testing buddies') to demonstrate process of using a home testing kit and recording results
- We are working with priority settings (universities, workplaces etc.) to increase regular LFD testing including proactive deliveries of lateral flow tests and targeted comms messages)
- We are working with VCSE organisations to develop community collect options for underrepresented groups
- We are working to provide home LFD kits at Vaccination Centres to encourage those being vaccinated and their families to continue with regular testing
- We are combining home delivery of lateral flow tests with door-to-door vaccine promotion and will continue to use other community engagement opportunities to combine messages
- We are conducting behavioural insight work encouraging twice weekly LFD testing for all households as the norm

LFD mobile supported testing

- We are working with Healthworks and neighbourhoods teams to develop a model of mobile asymptomatic assisted testing with underrepresented and disproportionately impacted groups and in areas of enduring transmission. Staffing will be reflective of communities where possible and provision should use community volunteers and link workers to maximise access
- We continue to provide assisted testing at Heathfield and Old Hall Lane sites beyond the planned closure date during this period

Enhanced Testing in High Risk Settings

- In line with current PHE guidance published in response to new variants, if a single positive case is notified from a high risk setting, such as a care home (staff or resident), two full rounds of outbreak testing will be conducted
- The Manchester Test & Trace Testing Team are available at short notice to physically support settings with testing
 if required
- If either round identifies a further positive case, the Community Health Protection Team (CHPT) will monitor the setting for 28 days (from the date of the most recent case) after which a round 'end of outbreak recovery testing' will be carried out
- If all results are negative in both rounds, the CHPT will monitor the setting for 14 days, after which no further action will be required

Enhanced Testing in Schools

- We will aim to carry out whole school PCR testing in 10 secondary schools within the 8 priority wards using MTUs or home testing kits as appropriate, working in collaboration with schools.
- We will encourage all secondary schools to stand up assisted LFD testing until the end of term with a focus on schools in the priority wards. We will encourage schools to adopt new models of assisted testing being develop by DHSC requiring less time and resource.
- We will explore routes for schools to access additional PCR kits to improve access to testing for symptomatic students and contacts.
- We will work with DHSC, PHE and local schools to design and develop a daily contact testing programme for schools to reduce disruption due to isolation of contacts
- We are encouraging school pupils to take a test before school trips and other events

3.3 Enhanced support to isolate

Summary of approach

Offer enhanced self-isolation support to our residents over and above the national programme, including participation in the **GM Self-Isolation Pathfinder 12-week pilot**, providing intensive self-isolation support in the 8 areas identified in this plan

Intensive support includes:

- Systematic and proactive engagement of people with a confirmed COVID-19 test result and their household close contacts within 24 hours of the test result to develop a person-centred self-isolation support plan
- Access to daily practical and emotional support
- Access to temporary alternative accommodation for index cases living in large households
- Targeted community-specific and culturally sensitive communication and engagement underpinned by behavioural insights research

We plan to offer enhanced support to self-isolate to residents returning from international travel who need to self-isolate in their homes outside the DHSC managed quarantine hotels; awaiting data-sharing agreement to facilitate this

Workstream 4: Recommendations for additional local measures and/or restrictions

- From 17th May there was a national lifting of the requirement for pupils to wear face coverings in secondary schools and colleges, and staff within the classroom. However, government guidance states that face coverings can be advised for pupils, students or staff for a temporary period in response to particular localised outbreaks, including variants of concern
- In line with other GM areas, we have asked schools and higher education colleges to promote the continued use of face coverings for all in communal settings and classrooms, including pupils, as part of their robust system of controls to reduce potential COVID-19 transmission. This request has also been made to universities in Manchester
- We continue to utilise a wide range of data sources to inform proactive engagement with businesses, including
 postcode coincidences, common exposure reports, risky venue alerts, VOC line lists etc. We analyse data received
 from our COVID Secure, COVID Response, Outbreak Control and Licensing and Out of Hours teams, which includes
 "softer intelligence" e.g. Officers noting behaviour changes, areas that are particularly busy etc. If our analysis
 identifies particular areas of high transmissibility, our Environmental Health teams visit premises to require that they
 revisit their risk assessments and systems of work taking this into account (under Health and Safety legislation)
- To coincide with the move to Step 3 of the national roadmap we provided a leaflet to businesses requesting that they
 contact us if they have two or more cases over 14 days

Workstream 5: Mitigating the risk of transmission in university students

- We ensure that students living in our targeted geographical areas are included in enhanced testing and enhanced vaccination initiatives
- We are working with universities to promote and encourage more uptake of regular on-site LFD testing. In addition to the national requirement for regular LFD testing once students arrive at university, we are recommending PCR testing for all students before they travel to Manchester
- We are building on our experience of working with our local universities to monitor data in respect of COVID tests taken by students, including those living in Halls of Residence and Purpose Built Student Accommodation (PBSA)
- The movement of large numbers of students across the country, coupled with international students arriving, poses a risk of the spread of Variants of Concern from other areas into Manchester. We continue to work closely with the universities to plan for the COVID secure arrival of their students for start of term including:
 - establishing move-in dates for home students
 - Tracking international student arrival dates (amber/red country quarantine locations)
 - Encouraging pre-travel PCR testing
- We are analysing early warning data, including waste water surveillance and PCR test outcomes
- We have developed thresholds for outbreak measures
- We are working with universities to ensure that students have support they need to self- isolate.