

**Manchester Health and Wellbeing Board
Report for Resolution**

Report to: Manchester Health and Wellbeing Board – 18 March 2020

Subject: COVID-19

Report of: Director of Public Health

Summary

This report provides a brief overview of the current plans to ensure the City of Manchester can respond effectively to the respective phases of the COVID-19 pandemic and deal with the wider societal impacts.

It is important to note that following the announcement by the Prime Minister, Chief Medical Officer and Chief Scientific Advisor on Monday 16th March 2020, all organisations represented on the Manchester Health and Wellbeing Board have been considering all of the guidance issued. A verbal update will be provided to the Board by the Director of Public Health.

Recommendation

The Board is asked to note the report and approve the formal establishment of the Manchester COVID-19 Locality Planning Group as set out in Annex A.

Board Priority(s) Addressed:

Health and Wellbeing Strategy priority	Summary of contribution to the strategy
Getting the youngest people in our communities off to the best start	The evolving nature of the COVID-19 pandemic means that it is too early to assess the impact on the delivery of Board priorities. However, it is clear that priorities 4, 6 and 7 will be particularly relevant.
Improving people's mental health and wellbeing	
Bringing people into employment and ensuring good work for all	
Enabling people to keep well and live independently as they grow older	
Turning round the lives of troubled families as part of the Confident and Achieving Manchester programme	
One health and care system – right care, right place, right time	
Self-care	

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

1. Introduction

- 1.1 On 31 December 2019, the World Health Organization (WHO) was informed of a cluster of cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province, China.
- 1.2 On 12 January 2020 it was announced that a novel coronavirus had been identified in samples obtained from cases and that initial analysis of virus genetic sequences suggested that this was the cause of the outbreak. This virus is referred to as SARS-CoV-2, and the associated disease as COVID-19.
- 1.3 As of 15 March 2020 (9:00am), over 152,000 cases have been diagnosed in 147 countries and areas (including mainland China), with a total of over 5,700 fatalities. Of these totals, over 72,000 cases and more than 2,500 deaths have been reported from countries outside mainland China. Within China, 84% of cases reported to date are in Hubei Province.
- 1.4 As of 9am on 16 March 2020, 44,105 people have been tested in the UK, of which 42,562 were confirmed negative, 1,543 were confirmed as positive and 35 deaths. There have been 80 cases in Greater Manchester, including 9 in Manchester.
- 1.5 Coronaviruses are a large family of viruses with some causing less-severe disease, such as the common cold, and others causing more severe disease such as Middle East respiratory syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS) coronaviruses.
- 1.6 On 11 February, WHO named the syndrome caused by this novel coronavirus COVID-19 (Coronavirus Disease 2019)

2. National Guidance

- 2.1 The Government published the Coronavirus Action Plan on 3rd March 2020 which sets out the four phases.

Contain: detect early cases, follow up close contacts, and prevent the disease taking hold in this country for as long as is reasonably possible;

Delay: slow the spread in this country, if it does take hold, lowering the peak impact and pushing it away from the winter season;

Research: better understand the virus and the actions that will lessen its effect on the UK population; innovate responses including diagnostic, drugs and vaccines; use the evidence to inform the development of the most effective models of care;

Mitigate: provide the best care possible for people who become ill, support hospitals to maintain essential services and ensure ongoing support for people ill in the community to minimise the overall impact of the disease on society, public services and on the economy

2.2 On Thursday 12 March the Government announced that we have moved from the “containment” to the delay phase

3. The Manchester response

3.1 The response to the current situation has moved rapidly from supporting public health messages and promoting hand-washing, to a phase of community and city leadership.

3.2 Planning to deal with the impacts has taken place at a regional level as well as a local level, and across the local authority and health sectors.

3.3 Scenario planning for potential escalation of the impacts of Covid-19 has been carried out and tested to ensure that partners can work together to mitigate any issues.

3.4 In the course of the last week, messaging has moved from primarily being around measures to contain the virus – hand-washing and hygiene – to leading a community response.

3.5 The council website has been redesigned to reflect the changed circumstances with information on how individuals can help vulnerable groups in their area; support for those who may lose their job as a result of cancelled events; new health guidance; support for schools and businesses.

3.6 Each individual organisation has handled its own internal communications messaging, but all organisation communication leads meet frequently to ensure consistency and support.

3.7 In public health terms, preparations to respond to COVID-19 commenced in early January following an assessment of the emerging situation in Wuhan (Manchester’s sister city) and Hubei Province. The focus in late January/early February was:

- Conducting tests on people who had returned to Manchester from Wuhan/Hubei (all negative).
- Responding to community cohesion concerns and business impacts on the Chinese community

3.8 A decision was also made to rename the Manchester Health Protection Group which already has a formal link to the Manchester Health and Wellbeing Board, as the Manchester COVID-19 Locality Planning Group (MCLPG) for the duration of the pandemic.

3.9 The MCLPG will fulfil the functions of the ‘Borough/City Pandemic Co-ordinating Group’ as set out in the Greater Manchester Resilience Forum Pandemic Plan.

- 3.10 The MCLPG will also report to the Greater Manchester Strategic Co-ordination Group and link to NHS COVID-19 Incident Management Teams and the Council's Resilience Forum.
- 3.11 The Terms of Reference are attached as Annex A. This includes the key responsibilities (Appendix 1), membership (appendix 2) and a draft of the current governance and reporting arrangements (Appendix 3). It is important to note that Appendix 3 will be further updated following discussions with Manchester City Council and NHS Organisations earlier this week.
- 3.12 There has been a noticeable shift in the contacts with the Council since Saturday from public health related information to requests for community and city resilience support.
- 3.13 While health partners have continued to manage the health issues, the council focus has moved to sharing information on support for businesses, people placed in financial difficulty as a result of self-isolation or a business failure caused by cancellation of events, how communities can support foodbanks and other local resilience groups, advice for schools, and to act as a hub for voluntary and community sector information.
- 3.14 With the rapidly changing situation, information is updated on and shared from the Manchester.gov.uk website, shared across social networks, and amended in line with the most recent guidance.

4. Recommendations

- 4.1 The Board are asked to:
 - 1) note the report; and
 - 2) approve the formal establishment of the Manchester COVID-19 Locality Planning Group as set out in Annex A.