

COVID-19 MoU for PHE and LA Partnership Working

25 March 2021

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Purpose of the MoU

1. The purpose of this Memorandum of Understanding (MoU) is to outline how the PHE East of England (EoE) Health Protection Team (HPT) will work with Southend-on-Sea Borough Council Local Authority (LA) to manage case(s), incidents and outbreaks of COVID-19.
2. This MoU provides the principles and a generic framework for working collaboratively across the EoE HPT and LAs. This allows for flexibility in operational arrangements within LAs to implement the principles and agreed actions set out in this MoU.
3. This MoU can be amended only in writing and subject to agreement by both PHE EoE and Southend-on-Sea Borough Council LA.
4. This MoU supersedes all previous setting specific MoUs agreed by PHE EoE and LAs. It provides a generic template which can be applied to all settings.
5. This MoU will be kept under regular review.

Scope of this MoU

1. This MoU outlines the principles of managing COVID-19 and can be applied to the following settings:
 - Care homes
 - Educational settings
 - Prisons
 - Workplaces, including opticians, pharmacies and veterinary practices
 - Socially vulnerable settings, including HMOs
 - Residential facilities for children and adults

Exclusions – NHS Community, Hospital and Mental Health Trusts; GP practices, dental surgeries and independent healthcare providers.

2. This MoU builds on the previous setting specific PHE-LA MoUs (care homes, educational settings, workplace, socially vulnerable settings, prisons) which have laid the foundation for joint working between the PHE HPT and LAs in the EoE.

3. This MoU is divided into three sections and has an accompanying toolkit:

Section A - LAs currently not enrolled in the “Local Zero” pilots

(This section has been removed from this version of the MOU as it does not apply Southend- on-Sea Borough Council)

Section B- LAs enrolled in the “Local Zero” pilots.

(This section applies to Southend-on Sea Borough Council and is currently managed through a contract in place with ESCTS – PROVIDE)

Section C – Future Developments

Toolkit - There is an accompanying toolkit which has general information, including definitions, template letters and checklists which can be adapted by PHE and LAs as required.
Draft will be shared separately

Rationale for this MOU

1. To build on existing joint working arrangements and embed new developments, including “Local Zero” pilots, Outbreak Identification and Rapid Response (OIRR), and management of variants and mutations.
2. To clarify the roles and responsibilities of the HPT and the LA teams, making effective use of expertise and resources of both organisations.
3. To inform the revised LA Outbreak Control Plan.

Governance

1. Refer to the Toolkit for the overarching governance framework for PHE-LA collaborative working for COVID-19.
2. The Health Protection Boards will provide governance for this MoU collaborative arrangements, review and monitoring.
3. The PHE-LA Partnership Group will provide a forum for PHE and LA to discuss new initiatives/ activities and enable sharing of good practice. The Group Terms of Reference are included in the Toolkit.

Section B

LAs enrolled in “Local Zero” Pilots

LA responsibility

1. LA will receive information on all cases in their residents as soon as they are reported to CTAS
2. LA will contact the cases to complete their CTAS records in accordance with their protocol. Cases will be invited for the digital journey and contacted by phone by call handlers as soon as they are reported
3. LA will escalate to the HPT for the following settings:
 - a. Care homes
 - b. Prisons
 - c. HMOs
 - d. Military settings (if needed)
 - e. VAM cases (see point 9)
 - f. GPs, dental practices and private healthcare

The HPT will undertake the risk assessment, collecting basic information on the case(s), incident or outbreak and provide initial infection control advice to the setting

4. For all other settings the LA will contact the setting to collect basic information and provide infection control advice
5. LA will carry out a risk assessment, with PHE support if required. This support will be in the form of a discussion with the CRC duty consultant, HPT patch lead or senior HP practitioner
6. Deal with matters which are escalated to LA such as welfare and safeguarding issues
7. **Based on the risk assessment the LA will decide if an Incident Management Team (IMT) is required or not.** If PHE attendance is required at an IMT, the IMT request template (**Appendix A**) should be completed and submitted to ICC.EastofEngland@phe.gov.uk
8. **The LA will:**
 - a. Lead on communication with the setting
 - b. Undertake to arrange any mass testing as indicated by the risk assessment or by an IMT
 - c. Carry out any enhanced contact tracing required
 - d. Inform and update stakeholders in line with local agreements
 - e. **Inform PHE (the HPT patch lead) about confirmed outbreaks at settings in their area**
 - f. Inform the Health and Safety Executive (HSE) of outbreaks at settings if required
9. **Variants and Mutations (VAM):**
 - a. The LA will be kept informed of VAM cases via an email to the SPOC email address. DPH will also be notified/copied in the email

- b. LA will follow up cases who have not engaged with the HPT within 24 hours of initial contact
- c. The LA will attend any IMT and arrange surge testing if required

10. Declaring an outbreak or cluster over

The incident/outbreak will be declared over by joint agreement of the IMT, or by the LA if no IMT is convened, in accordance with the standard definitions in the Toolkit.

PHE Responsibility

- 1. The following settings will be escalated to the HPT from the LA:
 - a. Care homes
 - b. Prisons
 - c. HMOs
 - d. Military settings (if needed)
 - e. VAM cases
 - f. GPs, dental practices and private healthcare

The HPT will undertake the risk assessment, collecting basic information on the case(s), incident or outbreak and provide initial infection control advice to the setting

- 2. For all other settings, the HPT will handover to the LA any cases/incidents reported directly to the HPT
- 3. The HPT will provide health protection expert advice to the Incident Management Team (IMT) when requested. IMT requests should be sent to ICC.EastofEngland@phe.gov.uk along with a completed IMT request form (**Appendix A**)
- 4. Provide ongoing support to the LA for identification and management of clusters and outbreaks, including attendance at regular LA meetings e.g. surveillance meetings
- 5. Provide advice on the interpretation and implementation of national guidance by email or telephone, as requested.

Section C

Future Developments

The following areas will be developed in the future, and are not covered in this MoU:

- 1. Training and development strategies
- 2. Data exchange mechanisms

OIRR requirements will be addressed in the data exchange arrangements, as they are unlikely to impact the joint working arrangements beyond the mechanisms of data exchange

- 3. Quality assurance processes

Appendix A

IMT Request for PHE Health Protection Team (HPT) attendance	
Please complete this form to request HPT attendance at an IMT and submit with the meeting invitation to ICC.EastofEngland@phe.gov.uk	
Requesting Organisation	
Name and Address of outbreak setting	Postcode:
Contact Name and details	Name: Phone: Email:
HP Zone No. (if available)	
Date and Time of the IMT	
Is this a new outbreak/situation?	
Brief description of the outbreak/situation	
What specific input is required from the HPT?	

Version Control

Version & Date	Amendments	*Authors
V0.1 14/02/2021	First version for comment	Victoria Matthews
V0.2 26/02/2021	Revised v1 considerably to develop it into a template format	Deepti Kumar
V0.3 03/03/2021	Added in details to reflect ECT and Variants	Deepti Kumar and Victoria Matthews
V0.4 11/03/2021	Further amendments to text, layout etc.	Victoria Matthews, Smita Kapadia, Deepti Kumar
V0.5 12/03/2021	Amendments following discussion at the End to End Outbreak Identification meeting Included contribution from FS in Sections C and D	Dorothy Gregson, Mike Hill, Olabisi Williams, Priya Duggal. Elain Edwards, Lynsey Emmet, Deepti Kumar
V1.0 25/03/2021	Updated to reflect LA comments (most EoE LAs commented on the previous version)	Victoria Matthews, Deepti Kumar, Dorothy Gregson