



HILLINGDON

LONDON

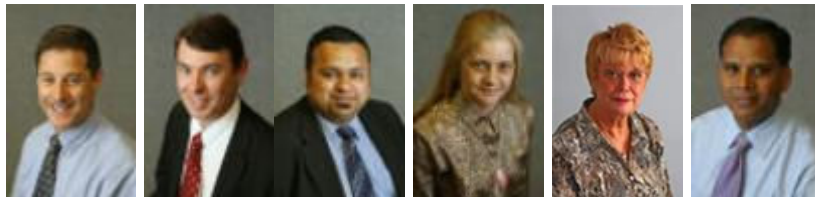
CORPORATE SERVICES & PARTNERSHIPS POLICY OVERVIEW COMMITTEE

2009/10

IMPACT OF A PANDEMIC IN HILLINGDON AND THE EFFECTS ON COUNCIL SERVICES

Members of the Committee

Cllr Richard Lewis (Chairman)
Cllr Michael White (Vice Chairman)
Cllr Sid Garg
Cllr Elizabeth Kemp
Cllr Carol Melvin
Cllr Robin Sansarpuri



Contents

Chairman's Foreword	Page 3
Conclusions and Recommendations	Page 4
Introduction	Page 5
Methodology	Page 9
Evidence and Findings	Page 10
Financial Implications of the Recommendations	Page 19
Appendix – Evidence from Witnesses	Page 21

CHAIRMAN'S FOREWORD



Our review into the Impact of a Pandemic in Hillingdon and the Effects on Council Services started at the time when the world has been affected by the outbreak of a Swine Flu Pandemic. The review has therefore been timely and provided Members with an opportunity to review the existing procedures and planning which the Council has in place in the event of an emergency, such as a Pandemic. The review has found that the Civil Protection Team of the Council has been planning for a Pandemic for a number of years and our review's recommendations should be reflected in the Civil Protection policy of the Council.

We have closely examined evidence from a number of stakeholders with a view to ensuring that the Council's Business and Continuity Plans are in place to ensure that Council services will not be adversely affected if a Pandemic severely affects the Council workforce and the services provided.

The review has found that the Council is being proactive in its preparations for a Pandemic, working closely with the PCT and the Hillingdon Influenza Pandemic Committee and the recommendations we have made will strengthen the Council's Business and Continuity Plans to ensure there is minimum disruption to Council services in the event of a major Pandemic.

I would like to thank the witnesses who gave evidence and the officers who supported us during this review.

A handwritten signature in blue ink that reads "A.A. Lewis". The signature is written in a cursive style with a horizontal line underneath.

CONCLUSIONS AND RECOMMENDATIONS

Our review was undertaken at a timely period with the outbreak of a Swine Flu Pandemic in the summer of this year. The Council had been planning for a Pandemic for a number of years, and Business and Continuity Plans had been put in place across the Council to ensure service provision and staff well being was given priority. The review looked at these plans, which demonstrated that the Council was well prepared for the impact of a Pandemic. However, the review has come up with recommendations which will add value to the Business and Continuity Plans and ensure the Council is fully prepared should the present Swine Flu Pandemic, or in the future another Pandemic, impacts on the Council.

After consideration of all the evidence presented as part of the review, we have made the following recommendations to Cabinet. It should be noted that an interim report of the review was considered by Cabinet at their meeting on 15 October 2009, where officers were asked to consider the feasibility of three recommendations of the review. [Recommendations 2, 3 and 6]

RECOMMENDATION 1

That important appropriate information regarding a Pandemic be communicated to all staff and not just to managers, to ensure the full cascading of important information during a Pandemic.

RECOMMENDATION 2

That a skills and knowledge audit be undertaken of the Council's workforce to build up a computerised database. This information to include details about staff who have been vaccinated against the swine flu virus, those who have had swine flu, those with children and childcare responsibilities, those staff who were front line staff and those that come into contact with the public.

[This recommendation was considered by Cabinet on 15 October 2009 in this Committee's interim report]

RECOMMENDATION 3

That enhancements be considered to be made to the Council's Constitution to provide further contingency arrangements for the decision making processes of the Council, in consultation with the Leader.

[This recommendation was considered by Cabinet on 15 October 2009 in this Committee's interim report]

RECOMMENDATION 4

That, subject to the longevity of the present swine flu Pandemic, consideration be given to preventative measures being taken in Polling Stations and at the Election Counts, for both the Local and General Elections in 2010.

RECOMMENDATION 5

That the Council and Hillingdon Primary Care Trust continue to give urgent consideration and priority to administering the swine flu vaccine to essential front line Council staff, including teachers and ancillary staff in schools, to ensure the continuity of the delivery of services.

RECOMMENDATION 6

To mitigate the impact of a major Pandemic, officers ensure that business and continuity plans are in place at the Borough's educational and care establishments. This includes but is not limited to playgroups, nurseries, schools, further education and higher education establishments as well as social care homes.

[This recommendation was considered by Cabinet on 15 October 2009 in this Committee's interim report]

INTRODUCTION

The Corporate Services & Partnerships Policy Overview Committee began its review into the impact of a Pandemic in Hillingdon and the effects on Council services at its meeting on 7 July 2009.

The review was topical as in the summer of 2009 the World Health Organisation had issued an alert over a Swine Flu virus which had originated in Mexico and spread to all parts of the world, including this country.

The Government has judged that one of the highest current risks to the UK is the possible emergence of a human influenza pandemic – that is the rapid worldwide spread of influenza caused by a novel virus to which people would have no immunity, resulting in serious harm to human health, and wider social and economic damage and disruption.

WHAT IS A PANDEMIC?

An influenza Pandemic occurs when a novel influenza virus appears, against which the human population has little or no immunity. Influenza is one of the

most difficult infectious diseases to control because the virus spreads easily from person to person via the respiratory route when an infected person talks, coughs or sneezes. The incubation period is in the range of one to four days. Historical evidence suggests that one person infects about two others on average and that influenza spreads particularly rapidly in closed communities such as schools or residential homes.

Influenza poses a serious danger for high risk groups (the very young, the elderly and the chronically ill and some disabled people).

Pandemics can cause major social and economic damage and disruption. Social disruption may be greatest when rates of absenteeism impair essential services.

¹The first wave of the Swine Flu Pandemic saw a peak in mid to late July 2009 with estimates of over 100 new cases a week in England by the end of July. Numbers then declined rapidly and continued at a fairly low level until early September. From around the middle of September the numbers have started to increase again, but less quickly than in the first wave of the Pandemic. Projections suggest that we may now be experiencing the predicted second wave of Swine Flu.

Planning assumptions suggest that the worst case clinical attack rate across the population as a whole is 12%, which means that in the peak week of the pandemic up to 1.5 million people may become ill and 5% of people could be absent from work.²

On a local level the projections³ is that 700 plus people would end up in hospital.

As of 29 October 2009, there were 78,000 new Swine Flu cases in that week, which was up from 53,000 the previous week. The latest official figures for England also show that the number of people needing critical care has jumped substantially, rising to 157 patients – the highest number since the emergence of Swine Flu.⁴

WHAT WILL THE IMPACT OF A PANDEMIC BE?

In the absence of early or effective interventions, society is likely to face much wider social and economic disruption, significant threats to the continuity of essential services, lower productivity levels, shortages and distribution difficulties.

¹ Department of Health – Swine Flu – Guidance for Planners – 22 Oct 2009

² Note this is in addition to normal winter absence rates

³ PCT witness – 8 September 2009

⁴ NHS Choices www.nhs.uk/news - 29 October 2009

Individual organisations such as local authorities may also suffer from the Pandemic's impact on business and services. Difficulties in maintaining business and service continuity will be exacerbated if the virus affects those of working age more than other groups, and fear of infection, illness, care-providing responsibilities, stress, bereavement and potential travel disruption are likely to lead to higher levels of staff absence.

High levels of public and political concern, general scrutiny and demands for advice and information are inevitable at all stages of a pandemic.

AIM OF THE REVIEW

To review how the Council has prepared for a Pandemic in terms of the effects on Council services, including schools and further education establishments.

TERMS OF REFERENCE

1. To examine the local resilience and response plans which are in place for this Council to respond to a Pandemic.
2. To examine how the Council could mitigate the impact of a Pandemic on Council staff and the services provided.
3. To examine the multi-agency planning for a Pandemic and looking at any gaps which may exist in the delivery of services?
4. To examine the working practices that the Council will require during a Pandemic to ensure a minimum disruption to Council services.
5. To examine the priority services which the Council and its partners will need during a Pandemic to vulnerable people in conjunction with its partners.
6. To make recommendations from the above investigations, in relation to the resilience and planning processes for this Council's response to a Pandemic.

REASONS FOR THE REVIEW

It was widely reported in the spring of 2009 that the World Health Organisation had raised the alert over Swine Flu to Pandemic status. Swine Flu originated in Mexico and has spread rapidly to other parts of the world, including this country.

As the Port Authority for Heathrow Airport, the Council already has well developed plans in place for this type of issue and the Council works with the

Health Protection Agency and other partners to put necessary measures in place. This review is therefore timely in that it will seek to examine whether the Council could do more to mitigate the effects of a Pandemic on Council services.

Part of the review examined the existing arrangements the Council has in place for dealing with Pandemic Influenza as detailed in the London Regional Resilience Flu Pandemic Response Plan and the work carried out by the Council's Civil Protection Service. The review will contribute to ensuring preparations are in place to enable the Council to provide essential services to residents, particularly the most vulnerable, during a Pandemic.

KEY ISSUES

1. What business continuity and contingency plans have the Council in place to ensure that critical services and outputs continue to be delivered throughout a Pandemic?
2. What is the multi-agency approach to a Pandemic, particularly in relation to the provision of essential services to residents?
3. What will the effects of a pandemic be on Hillingdon PCT's budget? How will providing both Tamiflu and/or vaccines to patients affect the financial deficit of the PCT?
4. What operational plans will the Council have in place should a Pandemic widely affect the Council's workforce? What advice would be given to staff who meet the public face-to-face and what safeguards would be put in place? How would staff commute to work if public transport is affected?
5. Are the command structures, roles and responsibilities during a Pandemic clear?
6. Would flexible working be encouraged such as home or remote working and would the Council have the IT infrastructure to enable this to happen?
7. To some extent the level of staff absence during a Pandemic depends on the demographics of the Council's work teams and the numbers who have childcare or family responsibilities. What estimates can be made of the likely numbers of the Council's workforce this will include?

METHODOLOGY

For the review, witness sessions took place on 23 July, 8 September and 14 October 2009 and involved the following witnesses:

23 July 2009

Mike Price – Civil Protection Manager, LBH
Steve Palmer – Head of ICT, LBH
Amanda Marsh – Head of Human Resources, LBH
John Purcell – Bereavement Manager, LBH
Lloyd White – Head of Democratic Services, LBH

8 September 2009

Kevin Mullins – Executive Director for Flu Resilience, Hillingdon Primary Care Trust
Andrew Scott – Head of Human Resources, Uxbridge College
Sarah Harty – Head of Resources, Policy & Performance, Education and Children's Services, LBH
Emma Marsh – Deputy Head of Communications, LBH
Steve Smith – Head of Facilities Management, LBH (written evidence)

14 October 2009

Dr Neil Suggett – Head Teacher of Hayes Park Primary School
Dr Iran Adil-Smith – Head of Risk and Radiation, Brunel University
Sarah Morris – Head of Access and Assessment, Adult Social Care, Health & Housing, LBH

In addition to hearing evidence from witnesses, Members were provided with the following reading material which provided useful background information to the review

- London Regional Resilience Flu Pandemic Response Plan – Special Arrangements for Dealing with Pandemic Influenza in London
- London Borough of Hillingdon – Council's Response to Swine Flu
- Australian Government – Department of the Prime Minister and the Cabinet – National Action Plan for Human Influenza Pandemic
- Improvement and Development Agency – Swine Flu Information for Elected Members
- Improvement and Development Agency – Swine Flu: Crisis Management
- Department of Health: Swine Flu – UK Planning Assumptions (a number throughout the review)

EVIDENCE AND FINDINGS

WHAT HAS THE COUNCIL ALREADY IN PLACE?

At two of our witness sessions, the focus of the review was on the Business and Continuity Plans the Council already has in place in the event of a major Pandemic. The Council has been planning for a Pandemic for a number of years, both at a local and a pan-London level.

The evidence we received from the Council's Civil Protection Manager provided the main background to the review and gave details of where preparations were at.

- Hillingdon Primary Care Trust was the lead agency for a Pandemic in the Borough
- The Council has an Influenza Pandemic Group and a Flu Working Group which meets weekly. There is a "Gold Officer" rota which operates 24 hours a day and which could make strategic level decisions
- Reference was made to the London Regional Resilience Flu Pandemic Response Plan and other Pandemic documents, which have guided the Council's planning
- The Council's Corporate Communications Team will be heavily involved and would make sure communication links are clear with the Council's multi-agency partners
- Reference was made to the hygiene information which has been given to staff. This includes the covering of noses and mouths with a tissue when a person coughs or sneezes and throwing the tissue in the bin after it was used. Washing hands frequently with soap and water, especially after coughing and sneezing on hands, and after going to the toilet. The cleaning of keyboards, phones and desks before finishing work with surface disinfection wipes. This was particularly important for staff who "hot desked"
- Those staff who do not have easy access to hand washing facilities will be issued with hand gels. Hand gels will also be positioned at entrances to Council buildings to enable members of the public and visitors to use them
- Work was underway to source mass communications and business continuity software. This follows the identification of a capability gap during snow and power failure events in early 2009. This software will be extremely beneficial not only during a pandemic but also during any other emergency / business continuity response

Communication

Our review noted that during a Pandemic, communication within the Council is very important. The evidence provided by the Deputy Head of Communications of the Council (**see appendix**) suggested that the

communication strategy at the Council is excellent, with the Council working closely with the PCT on the present Pandemic. Regular updates were provided on the present Swine Flu Pandemic on the Council's intranet site, at team briefings and via emails to managers. However, to ensure the full cascading of important information regarding for instance hygiene and other mitigation measures against the spread of a virus, communication should be passed to all staff and not just to managers. This will ensure important information was getting through to all staff and enable a total awareness of the issues across the workforce.

RECOMMENDATION 1

That important appropriate information regarding a Pandemic be communicated to all staff and not just to managers, to ensure the full cascading of important information during a Pandemic.

The hygiene measures which the Council puts in practice are of great importance in limiting the effects of a Pandemic. The Council's Head of Facilities Management provided our review with details of what has been put in place to mitigate the present Swine Flu Pandemic. These measures are:

- Additional cleaning has taken place. The cleaning specification in the Civic Centre has been varied within the terms of the cleaning contract at no additional cost to the Council. This has involved additional touch cleaning of all wc facilities, over and above their usual daily clean
- Notices have been displayed at various locations, particularly in toilets, advising staff to regularly wash their hands and providing details on the correct way of doing so
- £10,000 has been spent on additional preventative measures which include the procurement and distribution of desk and surface wipes across the Council. This includes areas such as Civic Centre Phase reception and toilets, plus all Civic Centre public facing toilets
- Hand gels have been installed in reception areas in over 40 locations across the Borough
- Sterilisation has taken place in all office areas where there has been confirmed cases of swine flu, using a mist of anti-viral chemicals
- Work is taking place with the Council's Facilities Management provider to ensure they have robust business continuity processes in place to cover for staff absences.
- The Council has offered to provide the Swine Flu vaccination service to essential Facilities Management employees or those of their partners, providing front line services in key areas such as Children's residential premises, Special Schools and Early Years Centres, recognising the role these staff groups play in the daily functioning of 'life and limb' services to residents of the Borough

An important part of the planning process for an emergency situation would be the back-up the Council would have for its Information and

Communications Technology. The Council's Head of Information and Communications Technology provided our review with details of the contingency plans which are in place.

- The Council's IT facilities and Customer Contact Centre have emergency planning procedures for a number of scenarios. Mutual aid was available from neighbouring West London Councils
- If the Civic Centre's IT network was not available there was a private network the Council could use which was used across London
- Priority applications would be run and remote access could be given for around 75 staff
- The staff in public facing services such as the Customer Contact Centre were multi-skilled. Home working would be an option to reduce the threat of the spread of a virus
- Multi-skilled staff have been trained in areas such as Council Tax to enable these essential services and duties to be carried out. Provision has been made if there was a serious escalation of the present Swine Flu Pandemic to transfer staff to those essential front line services
- Communications take place through the Council's intranet site but information would be communicated through team briefings. HR would provide updates on the intranet as they were presently doing with the Swine Flu Pandemic
- The storing of electronic information off site was being looked at
- There was provision within Breakspear Crematorium for IT backup

An important consideration will be the HR policies the Council has in place, particularly in relation to the managing attendance policy. The repercussions of a Pandemic will be far reaching and will affect those staff who contract a flu virus, those staff who are parents or who are carers, those staff who are reliant on public transport etc.

The Council's Head of Human Resources gave our review details of the managing attendance arrangements which currently existed during this present Swine Flu Pandemic.

- At the present time there are no plans to change the present policy in relation to trigger levels for sickness absence and the payback scheme, although the situation will continue to be monitored
- In relation to those people who will have to stay at home to care for a family member who has flu, no special provision has been made at this stage. Staff will have to take special or unpaid leave. However if the effects of the Pandemic increase and there was a major impact on Council staff, each case would be looked at on an individual basis and the policy could change. This was in keeping with other London authorities.
- During a major Pandemic the managing attendance policy will have to be flexible and consideration will have to be given to cost implications and balance this with sensitivity

- Regular reports of Swine Flu cases within the Council was reported to the London control room which fed into the national statistics
- Performance management targets could be affected if Council staff were majorly affected by a pandemic
- The redeployment of staff will be looked at to enable essential front-line services to be maintained. However, it will need to be ensured that staff had the necessary skills and the appropriate CRB checks.

Skills and Knowledge

Our review's remit was to ensure that a Pandemic did not impact on Council front line services and Members agreed that it was important that front line services be maintained. To enable this the Council could transfer staff who have the necessary skills into these areas if a Pandemic impacted on front line staff.

The Cabinet was made aware that the Head of Human Resources had discussed with the officer Strategic Pandemic Influenza Group the best way of assembling the information required to undertake a skills audit. Members may wish to note that work is already taking place across the Council to identify key skill areas. Individual departments also hold such information.

Human Resources already collect data on Swine Flu cases swiftly and it is also feasible that data on those vaccinated can be collated when the vaccination programme starts in earnest. In terms of a central database, the current HR/Payroll system (Resourcelink) as it has been configured for Hillingdon does not have a means for recording employee skills, vaccinations, childcare responsibilities and those staff who are front line at the present time.

The Head of Human Resources has therefore concluded that the most appropriate means of gathering the information required, without additional resource implications, would be by way of using existing data bases across the Council.

Members may also like to note that in addition to this, the Civil Protection Service have now provided a list of skills relevant to the need to maintain priority services. Work is now proceeding to identify information sources that would enable the Council to draw up a list of actual employees possessing the skills required.

RECOMMENDATION 2

That a skills and knowledge audit be undertaken of the Council's workforce to build up a computerised database. This information to include details about staff who have been vaccinated against the swine flu virus, those who have had swine flu, those with children and childcare responsibilities, those staff who were front line staff and those that come into contact with the public.

[This recommendation was considered by Cabinet on 15 October 2009 in this Committee's interim report.]

An important and sensitive area the Council is responsible for is the Bereavement Service. During a Pandemic this service could be severely stretched having to deal with a greater number of deaths. The Council's Bereavement Manager gave our review a summary of the plans which are in place for a Pandemic

- Bereavement Services comprises of Breakspear Crematorium, cemeteries and the mortuary. The crematorium has two qualified technicians, with five in reserve. Staff were multi-skilled and if needed, the crematorium could operate 24 hours a day
- The breakdown of funeral arrangements is currently 70% of people are cremated and 30% buried. Burials have been outsourced
- Mortuary storage is limited but in the event of an emergency, legislation could be passed to enable the use of mass graves. For increased numbers extra storage space could be provided and the service will work closely with neighbouring authorities
- In relation to post mortems for people who have died of Swine Flu, staff wore protective clothing and face masks. This is because the Swine Flu virus stays alive for 24 hours after the person has died
- Cremations could be speeded up from 30 minute slots down to 10 minute slots if the numbers increase
- In case of orders that there should be no congregating of crowds, funerals could be limited to immediate family and the service webcast to family and friends enabling them to be able to watch and/or participate in the service
- Burials in mass graves could be initiated if required as a last resort

The decision making process for a local authority will still have to be maintained in the event of a Pandemic and our review was provided with information from the Council's Head of Democratic Services who also has responsibility for Registrars.

- Robust contingency plans are in place for Registrars in the event of an increase in deaths caused by a pandemic
- Extra stationery is available and other administrative staff within Democratic Services could be used to assist in registering an increased number of deaths which may result from a Pandemic
- For May 2010 for the local elections mitigation measures will be required in polling stations and at the count with hand gels etc. Further planning will be needed for this
- Provision will be made in the Council's Constitution to enable the Council's decision making process to continue in the event of meetings being inquorate due to a Pandemic
- Web casting of meetings could be an option to mitigate the spread of a virus.

Decision Making

If a Pandemic reaches a level whereby it impacts on the Council's decision making framework, contingency arrangements will be required to enable the functions of the Council to be maintained. The Council's Constitution sets out how the Council operates, how decisions are made, and the procedures that are followed to ensure that they are efficient, transparent and accountable to local people.

The Constitution at present states that the quorum for meetings be as follows:

- Council meetings, the quorum of a meeting will be $\frac{1}{4}$ of the whole number of Members
- Committee meetings, the quorum of a meeting will be $\frac{1}{3}$ of the whole number of Members of the body concerned or 3 Members of the Committee whichever is the greater
- Audit Committee the quorum shall be 4 Members of the Committee
- The Cabinet, the quorum is $\frac{1}{4}$ of the total number of Members of the Cabinet, or 4, whichever is the larger
- For Policy Overview Committees and Scrutiny Committees the quorum shall be half of the whole number of the Committee

In relation to key decisions taken by the Cabinet, as circumstances require and to cover planned and unplanned absences, the Leader of the Council may assign Cabinet portfolio responsibilities from one Cabinet Member to another. In addition under the Council's Scheme of Delegation for Cabinet Members, the Deputy Leader deputises for the Leader in his absence.

The existing provisions are adequate for most eventualities, but in extreme emergencies, such as, if there is a major Pandemic, further emergency measures are needed to be put in place to ensure the primary business of the Council can be conducted. Officers should be asked to investigate this, in consultation with the Leader of the Council, and provision should be made in the Constitution.

In Democratic Services a comprehensive Business Continuity Plan has already been put in place in the event of a major incident affecting the Civic Centre. The plan provides for the fast cascade of information and actions to Councillors and staff, contains full contact details for everyone and lists in detail the human and physical resource requirements for the service, if it needs to either be temporarily relocated or set up again from scratch. Such a plan will enable the service to continue to provide support to the decision-making, Committee and support functions critical to the Council. Managers in Democratic Services also hold the plan at their home or other address away from the Civic Centre for obvious reasons.

RECOMMENDATION 3

That enhancements be considered to be made to the Council's Constitution to provide further contingency arrangements for the decision making processes of the Council, in consultation with the Leader.

[This recommendation was considered by Cabinet on 15 October 2009 in this Committee's interim report.]

Local and General Elections

The forthcoming Local Elections for May 2010, and the General Election which is due to be held sometime in 2010 will involve thousands of electors accessing Polling Stations, which will be manned by hundreds of Polling Station staff. In addition the Election count will involve the congregation of many Count staff, candidates and their supporters and members of the public. Preparations should be made to mitigate as far as possible the impact of the present Swine Flu Pandemic with such a large gathering of people at various locations.

If the present Swine Flu Pandemic is still prevalent in the spring of 2010, mitigation measures will be taken at Polling Stations and at the Counts. These will include information regarding hygiene and the placing of hand gels at the entrances to Polling Stations and at the venue for the Counts. Contingency arrangements and procedures being considered also include having arrangements in place for Polling Station staff who fail to turn up due to illness at Polling Stations to perform their duties as Presiding Officers and Poll Clerks, ensuring there are reserve staff on stand by who are fully trained for Polling Station duties and verification of ballot papers and counting duties.

RECOMMENDATION 4

That, subject to the longevity of the present Swine Flu Pandemic, consideration be given to preventative measures being taken in Polling Stations and at the Election Counts, for both the Local and General Elections in 2010.

Working with Hillingdon Primary Care Trust (PCT)

Hillingdon PCT is the lead agency in the Borough for managing a Pandemic and the Council works very closely with them to ensure plans are in place. The PCT is the lead agency for the Hillingdon Influenza Pandemic Committee which involves public bodies within the Borough. Details of the evidence submitted by the Executive Director for Flu Resilience at the PCT are included in the **appendix** to this report.

The main issues in the evidence he gave was in relation to the vaccination programme and the entitlement of Council staff to it. Our review was informed that there was an anticipated second wave of Swine Flu in the autumn. At the end of October 2009, General Practice surgeries throughout the Borough began vaccinating residents, starting with those considered most at risk of complications from the Pandemic.

The vaccination of key frontline health staff at Hillingdon Hospital has started, with staff at the paediatric and obstetric units being amongst the first to be offered the vaccine to protect themselves and patients. Our review was concerned with staff employed by the Council and when they would be vaccinated against swine flu. The review was informed that the second string of priority groups for vaccinations will involve Council staff such as those who provide meals on wheels, social care staff, Facilities Management contractor staff, teachers etc. On 10 November 2009 the Department of Health released details of the financial support which will be made available to Council's for the vaccination of the Council's directly managed social care workers. Local authorities were asked to submit specific information to the Department of Health and by 3 December 2009, local authorities will be informed of the allocation available to help meet the cost of vaccination programmes.

RECOMMENDATION 5

That the Council and Hillingdon Primary Care Trust continue to give urgent consideration and priority to administering the Swine Flu vaccine to essential front line Council staff, including teachers and ancillary staff in schools, to ensure the continuity of the delivery of services.

Schools, Further Education Colleges and Social Care Establishments in the Borough

The impact of a Pandemic on the Borough's educational and care establishments was a major part of our review as it was anticipated that the second wave of the Swine Flu Pandemic would arise at the start of the autumn school term.

Our review heard evidence from a number of education professionals which included the Head of Resources, Policy & Performance, Education and Children's Services (**see appendix**) who provided our review with information on the department's role in overseeing schools and children's homes within the Borough.

The review was particularly concerned with the impact a Pandemic would have on the gathering of a large number of people, such as within a school. Evidence did suggest that children will have no residual immunity to the swine influenza and the virus was likely to spread rapidly. This may result in the

closure of schools which would not only affect the children and staff, but would also impact on services and businesses dependent on working parents.

Our review found that Education and Children's Services Department had worked closely with the Council's Communications Team and the Civil Protection Team in devising a template for schools to produce their business and continuity plans. This also applied to Children's Homes and Respite Care.

The role of the central Education and Children's Services Department was to provide leadership and guidance to schools and children's homes and the individual schools were responsible for their own management, which included their preparations for a Pandemic.

Our review also heard evidence from the Head Teacher of Hayes Park Primary School, the Human Resources Director of Uxbridge College, the Head of Risk and Radiation at Brunel University (**see appendix**) who all offered reassurance that effective business and continuity plans were in place at their establishments.

In addition the review heard evidence from the Head of Access and Assessment for Adult Social Care and Housing who provided the review with the plans which were in place for social care services within the Borough (**see appendix**).

In relation to organisations that provided social care services, our review was informed that some 87 organisations have been contacted with a request to send copies of their contingency plans for a Pandemic to the Council. This will also extend to agencies that supplied homes with agency staff, to ensure there were no gaps in preparations. This work was progressing with the department working closely with the PCT.

Preparations have been made with regard to prioritisation of staff for vaccinations, subject to further information from the PCT. Residents of care homes will be given the opportunity and will be encouraged to have the vaccinations against the present swine flu virus. This will also be offered to administrative, catering and cleaning staff.

To ensure plans were being prepared in all schools, other educational establishments (including nurseries and playgroups), as well as all social care establishments, the review agreed this should be given the highest priority to ensure the effects of a pandemic can be mitigated.

Areas which should be included in business and continuity plans are:

- Agreed roles and responsibilities
- A list of minimum staffing requirements to ensure the provision of the establishment's services
- Essential work which would be required to continue

- Which work was of a lesser priority which could be reduced during a pandemic or even not be carried out
- Is there agreement on communication processes

Additionally in relation to individuals, have these organisations undertaken a skills and knowledge audit to ensure essential services are covered if staff are off sick? This to include:

- Cover arrangements
- A list of staff contact details
- Those staff with childcare or care responsibilities
- Working arrangements if there were transport disruptions
- Flexible working policies i.e. home working, remote working

RECOMMENDATION 6

To mitigate the impact of a major Pandemic, officers ensure that Business and Continuity Plans are in place at the Borough's educational and care establishments. This includes but is not limited to playgroups, nurseries, schools, further education and higher education establishments as well as social care homes.

[This recommendation was considered by Cabinet on 15 October 2009 in this Committee's interim report.]

As the review was nearing its end, the projections from the Department of Health was that the second wave of the Swine Flu Pandemic would affect a much larger number of people. With the situation changing on a weekly basis and the need for particular areas of the review to be updated, it will be necessary for Members to be kept up to date on further developments.

Financial Implications of the Recommendations

The general true cost of a severe Pandemic cannot be determined but the costs to the Council will be staff off work, possible delays in the delivery of some Council services, the implementation of policy and so on. Initially £10,000 has been allocated from within existing resources for preventative hygiene measures such as the distribution of desk and surface wipes across the Council and the placing of hand gels in reception areas of over 40 locations.

Those recommendations within the report that may incur a financial commitment from the Council are as follows:

Recommendation 4 – Preventative measures at polling stations and at the election counts for next year's local and general election. The costs associated with measures to be taken in case the present Swine Flu Pandemic is still prevalent around both the local and general election in 2010

are there may be a cost implication due to the fact that reserve staff may have to be paid a retainer fee for availability. However, if staff are recruited internally, the reserve fee may be minimal or not necessary due to the fact that they would be at work if not required for election duties.

Recommendation 5 – The administering of the Swine Flu Vaccination to essential front line staff has been offered to 256 staff within the Council's priority groups. The Department of Health has agreed to meet the costs of these vaccinations to front line staff.

APPENDIX – Evidence from Witnesses

Deputy Head of Communications, LBH

- Both the PCT's and Council's Communications Teams worked closely during the present pandemic
- The Team had been working closely with civil protection officers since the swine flu virus
- The Council's intranet had information and advice for staff on the present swine flu pandemic. There was a questions and answers section for managers
- Updates were provided at monthly team meetings for managers as well as regular updates on the Council's newsletter which was sent to all staff
- The major learning that had come out of the death of the pupil was that it was important to make sure that contacts and roles had been sorted out to enable quick and effective working with a variety of people
- It was important that staff were aware of the procedures
- The vaccination process would be managed through the Council's intranet
- Re-assurances would need to be given regarding the advantages of the vaccination
- Occupational Health were devising a vaccination strategy to offer vaccinations to all Council staff that fit the national eligibility criteria

Executive Director for Flu Resilience, Hillingdon Primary Care Trust

- There was an anticipation of a second wave of swine flu in the autumn and preparations were under way with vaccinations ready in mid October
- There were 22 community pharmacists and there would be a number of street pharmacists
- The current planning focuses on workforce issues, communications, prevention, prioritisation and recovery
- Reference was made to the Department of Health planning assumptions which provided details of the potential effects of the infection and the stand out figures were that the projected case fatality rate was up to 0.1% of clinical cases
- The projection was that 700 plus people would end up in hospital. The treatment of children would be challenging as there was less specialist paediatric staff
- The severity of the pandemic had been downgraded
- Heathrow Airport had their own contingency plans and the PCT was geared up to support them

- The vaccination programme would initially be aimed at at risk individuals aged 6 months to 65 years, pregnant women, household contacts of immuno compromised individuals, people aged 65 + years and in at risk groups and frontline health and social care staff
- The vaccine would be administered in two doses, three weeks apart and school nurses and occupational health staff would be used to give the vaccine
- On one of these occasions the Seasonal Flu vaccine could also be given
- Discussions would be taking place with GPs regarding administering the vaccine as there would be a cost implication but nevertheless it would be given free of charge to the patient
- The vaccination programme would have a significant impact on the PCT's budget and the PCT would have to look at all options in terms of delivering the programme
- The second string of priority groups for vaccinations would involve Council staff such as staff involved in meals on wheels, Facility Management contractor staff, teachers etc
- The local NHS Trusts that provided services for Hillingdon residents were part of the reporting structure which was overseen by the Hillingdon Influenza Pandemic Committee and the PCT would take control once "gold alert" had been reached in the command and control chain
- A skills audit had been undertaken and a number of the Administrative staff had medical skills and expertise and these would be utilised on patient facing services if required

Head of Resources, Policy & Performance, Education and Children's Services, LBH

- That the Head of Resources, Policy & Performance's remit included overseeing schools and children's homes and her role was of leadership and guidance. Schools were individually managed but the department's website included information regarding business continuity
- Work had taken place with the Communications Team and the Civil Protection Team on devising a template for schools to produce their business and continuity plans
- There was an option of schools working in clusters to provide business and continuity in an area and the sharing of roles and responsibilities
- In relation to Children's Homes and Respite Care, the prioritisation of services was being looked as well as prioritising staff for the vaccinations

Head Teacher of Hayes Park Primary School

- The school worked from a template which was available on the Council's intranet site when producing their business and continuity

plans for a pandemic. There was an appendix attached to this template which provided details on the present swine flu pandemic

- Plans were in place for teachers to transfer to different schools dependent on the impact of the pandemic on school numbers. This was as part of the extended schools partnership of which Hayes Park Primary School was in the Yeading cluster. There was flexibility in the system to ensure the education of children was not compromised
- At this stage there had been no plans to explore the possibility of using retired teachers as back up
- No decisions had been made on vaccinations but it was likely that staff would take the vaccination if offered it
- Head Teachers of schools met regularly and there was a collaborative approach to planning should there be an upsurge in the pandemic
- Networking took place between groups of specialist teachers i.e. early years group, PE staff etc
- In relation to agencies that supplied staff to schools, it was agreed that agencies be asked to ensure there were business and continuity plans in place
- Business and continuity plans were in place for administrative and catering staff of the school
- The school would only close if the ratio of teachers to pupils fell
- Hygiene measures were in place such as posters providing guidance and information on hygiene, providing tissues, hand gels and liquid soap
- An isolation area in the school had been identified for potential swine flu pandemic victims, where parents would be asked to come and collect their children
- Pupils on field trips had also been built into the Risk Assessment procedures
- Information on swine flu and its symptoms had been communicated to parents through the school's newsletter
- There was confidence that Hayes Park Primary School would cope in the event of an upsurge in the pandemic.

Head of Human Resources of Uxbridge College

- Risk assessments have taken place to identify essential services which would be required and these would include Teaching and Learning, IT Services, Financial Administration and Payroll
- Flu vaccinations will be offered and paid for by the college once the vaccine was available
- The pandemic would have an impact on transport and Members asked that the College gave consideration to providing additional car parking at the College
- Communication with employees, students and parents would be by email and through the College website

- Actions taken to maintain services would include combining course groups so that one lecturer could cover two classes, greater use of Agency Lecturers to cover sickness, extending the number of staff working from home and accessing the College's IT system and emails.

Head of Risk and Radiation – Brunel University

- Brunel University had 13,000 students with 4,000 students living on site
- The University had already well developed business and continuity plans in place, which had been reviewed and updated as a consequence of the swine flu pandemic. This was now an annex to the University's current business and continuity plan
- The present pandemic was part of the reporting structure for the Infectious Diseases Working Group. There was a crisis management team consisting of 14 officers with a command and control structure in place which would be implemented in an emergency
- With a large number of students living on site the issue of containment had been investigated and some flats had been identified as potential units for isolation
- Reference was made to the large number of foreign students who were at the University and who had no close family in the country. Procedures were in place for them to contact hall managers if they were unwell
- All students had been issued with information sheets on the present swine flu pandemic which provided guidelines on what they should do if they believed they had the symptoms
- Regular liaison had taken place with the PCT and Hillingdon Hospital and would continue
- A helpline had been set up for staff to report incidents
- Hygiene measures were in place and included notices and signs in toilets regarding the washing of hands. Hand gels have been provided in the cafeteria area. It was noted hand gels were not as effective as soap and water
- The University looked at the repercussions of cancelling lectures as well as the impact this would have on students with young families, or students who were carers
- Administrative staff were encouraged to know about other staff's jobs and the University had a list of recently retired staff who could be called upon in an emergency
- In relation to communication, staff had remote access to University systems
- The University was used for hospitality and conferences and this area was included in business and continuity plans
- The University had a Communications Team who in the past had dealt with other serious issues. A good communications strategy was in place

- A counselling service for students was in place
- The University was a member of the Influenza Pandemic Committee

Head of Access and Assessment, Adult Social Care, Health & Housing, LBH

- A questionnaire had been sent out to 87 organisations who provided social care services based on the PCT template checklist and also a request was made for copies of contingency plans for the pandemic
- Meetings were being set up with suppliers of home services to ask some follow up questions
- Providers of services provided information on a daily basis on sickness levels of both residents and staff
- The department was part of the Strategic Influenza Pandemic Group
- In relation to vaccinations the Department was awaiting information from the PCT but preparations had been made with regard to prioritisation. Residents would be given the opportunity and encouraged to have the vaccination against swine flu. Vaccinations would also be offered to administrative, catering and cleaning staff. Subsequent to the meeting it had been confirmed that 250 vaccines would be available and this would be a one dose vaccination
- The priority for vaccinations was the PCT priority groups such as hospitals, GPs etc. The Council was awaiting confirmation with regard to its priority groups
- Hand gels had been provided for all care staff as an immediate supply of water was not always readily available
- Aprons and masks would be made available for staff if the pandemic worsened
- The Deputy Directors and the Heads of Service home and mobile telephone numbers have been given to the service managers across the department and added to the contingency plans for weekend and evening contact
- The meals on wheels service was provided by a private contractor but in an emergency multi portion meals could be provided to assist an establishment if required
- Staff had the facility to work remotely with mobile technology
- Contingency plans of agencies would be checked to ensure that there were no gaps in preparations. Subsequent to the meeting contingency plans had been received from agencies
- There was a counselling service for front line staff which would ensure they would be given support. This would be enhanced should the pandemic worsen
- Discussions had taken place with District Nurses regarding the possibility of sharing resources in the event of an upsurge in the pandemic
- Bed Management would be important in order to cope with people who would need treatment

- The needs of those parents who cared for disabled adults would also be taken into consideration and their needs would be met
- Specialist care agencies were used in emergencies. There would be a quick and thorough assessment of patients to see if they could be cared for in their own homes.