

Surrey Local Outbreak Engagement Board

1. Reference Information

Paper tracking information	
Title:	Surrey COVID-19 Local Outbreak Management Plan
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Paper date:	19 November 2021
Related papers	<ul style="list-style-type: none"> Surrey Local Outbreak Management Plan

2. Executive summary

The national NHS Test and Trace Service was established in May 2020 to control the rate of reproduction of Coronavirus (COVID-19) by reducing the spread of the infection. The Director of Public Health (DPH) has a statutory duty to work with system partners to develop and ensure delivery of the COVID-19 Local Outbreak Management Plan (LOMP). The LOMP outlines how Surrey County Council (SCC) and system partners continue to work together to prevent the spread of COVID-19, manage outbreaks and support and protect residents. In Surrey, delivery of the LOMP commenced at the beginning of July 2020. This report details recent progress on the delivery of the plan including key outcomes, challenges and next steps.

3. Recommendations

The LOEB is asked to:

- Note the report.
- Continue to provide political oversight of local delivery of the Local Outbreak Management Plan.
- Continue to lead the engagement with local communities and be the public face of the local response.
- Ensure appropriate information on the programme and on COVID-19 in Surrey is cascaded within members own organisations and areas of influence.

4. Reasons for Recommendations

The recommendations reflect the functions of the Local Outbreak Engagement Board (LOEB) as set out in the LOEB Terms of Reference.

5. Detail

The following section provide details on the national COVID-19 strategy and the progress/developments in the local response in Surrey as outlined in the Local Outbreak Management Plan:

5.1 National update

- 5.1.1 COVID-19 Response: Autumn and Winter Plan 2021 – Plan A and Plan B
- 5.1.2 COVID-19 Contain Framework: a guide for local decision makers

5.2 Local Outbreak Management Plan

- 5.2.1 COVID-19 Vaccination Programme
- 5.2.2 Local Contact Tracing
- 5.2.3 COVID-19 Testing
- 5.2.4 High Risk Settings:
 - Education
 - Care Homes
- 5.2.5 Community (COVID-19) Champions
- 5.2.6 Variants of Concern
- 5.2.7 Managed Quarantine Service
- 5.2.8 Initial Accommodation, Dispersal Accommodation and Bridging Hotels

5.1.1 COVID-19 Response: Autumn and Winter Plan 2021

On 14 September 2021 the Government published the [COVID-19 Response: Autumn and Winter Plan 2021](#). This includes:

- Plan A - a comprehensive approach to managing COVID-19 throughout autumn and winter 2021-22
- Plan B - a contingency plan that will only be enacted if the data suggests further measures are necessary to protect the NHS

Over autumn and winter, the Government aims to sustain the progress made and prepare the country for future challenges, while ensuring the NHS does not come under unsustainable pressure. This will be achieved by:

- a. **Building our defences through pharmaceutical interventions:** vaccines, antivirals and disease modifying therapeutics
- b. **Identifying and isolating positive cases to limit transmission:** Test, Trace and Isolate
- c. **Supporting the NHS and social care:** managing pressures and recovering services
- d. **Advising people on how to protect themselves and others:** clear guidance and communications

- e. **Pursuing an international approach:** helping to vaccinate the world and managing risks at the border

A summary of Plan A is outlined below:

COVID-19 Response: Autumn and Winter Plan 2021- Plan A	
Building our defences through pharmaceutical interventions	<p>3.1 The priorities for the COVID-19 vaccination programme in England for the autumn and winter are as follows:</p> <ul style="list-style-type: none"> o Maximising uptake of the vaccine among those that are eligible but have not yet taken up the offer o Offering booster doses to individuals who received vaccination in Phase 1 of the COVID-19 vaccination programme (priority groups 1-9) o Offering a first dose of vaccine to children aged 12-15 years
Identifying and isolating positive cases to limit transmission	<p>4.1 Test, Trace and Isolate system remains critical</p> <p>5.1 The legal requirement to self-isolate for 10 days if an individual tests positive for COVID-19 will remain in place</p> <p>6.1 Regular asymptomatic testing will continue</p> <p>7.1 Community testing will continue to support local authorities to focus on disproportionately impacted and other high-risk groups</p> <p>8.1 Contact tracing will continue; NHS Test and Trace will continue to check with all positive cases whether they need support to self-isolate; find out who they may have passed the virus onto and alert those contacts; and ask all contacts to take a PCR test as soon as possible to help identify positive cases</p> <p>9.1 The Government will continue to encourage the use of the NHS COVID-19 app</p> <p>10.1 In secondary schools, further education and higher education, testing for students will continue for the rest of this term</p> <p>11.1 The Government will continue to provide the public with access to free lateral flow tests in the coming months</p>

<p>Supporting the NHS and social care</p>	<ul style="list-style-type: none"> • The Government is investing: <ul style="list-style-type: none"> ◦ An additional £5.4 billion into the NHS in England to support the COVID-19 response over the next 6 months ◦ £50 million into research on Long COVID to better understand the causes and potential treatments • Third dose vaccination have been offered to those with severely weakened immune systems and former Clinically Extremely Vulnerable (CEV) groups will be prioritised for a booster vaccine • The Government recommends as many people as possible receive a vaccination against flu this autumn and winter. A free flu vaccination will be available for: <ul style="list-style-type: none"> ◦ Primary and secondary school children ◦ Individuals aged 50 years old and over ◦ Individuals aged 6 months to 50 years in clinical risk groups ◦ Pregnant women ◦ Care home residents ◦ Carers ◦ Close contacts of immunocompromised individuals ◦ Frontline health and social care staff • From 11 November 2021, it will be a condition of deployment for anyone working or volunteering in Care Quality Commission-regulated care homes providing accommodation for persons who require nursing and personal care to be fully vaccinated
<p>Advising people on how to protect themselves and others</p>	<ul style="list-style-type: none"> • The following seven safer behaviours and actions have been highlighted as key to people protecting themselves and others: <div data-bbox="464 1346 1350 1883" style="border: 1px solid #ccc; padding: 10px; background-color: #f0f8ff;"> <p style="text-align: center; border: 1px solid #0070c0; border-radius: 10px; display: inline-block; padding: 2px 10px;">Safer Behaviours and Actions</p> <div style="display: flex; flex-wrap: wrap; justify-content: space-around; align-items: flex-start; padding: 10px 0;"> <div style="text-align: center; width: 20%;">  <p>Get vaccinated</p> </div> <div style="text-align: center; width: 20%;">  <p>Let fresh air in if you meet indoors. Meeting outdoors is safer</p> </div> <div style="text-align: center; width: 20%;">  <p>Wear a face covering in crowded and enclosed settings where you come into contact with people you do not normally meet</p> </div> <div style="text-align: center; width: 20%;">  <p>Get tested, and self isolate if required</p> </div> <div style="text-align: center; width: 20%;">  <p>Try to stay at home if you are feeling unwell</p> </div> <div style="text-align: center; width: 20%;">  <p>Wash your hands</p> </div> <div style="text-align: center; width: 20%;">  <p>Download and use the NHS COVID-19 app</p> </div> </div> </div>

The Government is monitoring the data closely, taking action to support and protect the NHS when necessary. If the data suggests the NHS is likely to come under unsustainable pressure, the Government has prepared a Plan B for England. Plan B prioritises measures which can help control transmission of the virus while seeking to minimise economic and social impacts.

This includes:

- a. **Communicating clearly and urgently to the public that the level of risk has increased, and with it the need to behave more cautiously**
- b. **Introducing mandatory vaccine-only COVID-status certification in certain settings**
- c. **Legally mandating face coverings in certain settings**

The Government would also consider asking people once again to work from home if they can, for a limited period. A summary of Plan B is outlined below:

COVID-19 Response: Autumn and Winter Plan 2021- Plan B	
Communications	<ul style="list-style-type: none"> • The Government would issue clear guidance and communications to the public and businesses, setting out the steps that they should take to manage the increased risks of the virus
Mandatory vaccine-only COVID-status certification	<p>12.1 The Government would introduce mandatory vaccine certification in a limited number of settings, with specific characteristics</p> <p>13.1 Businesses would be given at least one week's notice before mandatory vaccine certification came into force</p> <p>14.1 Mandatory vaccine-only certification would be introduced for visitors to the following venues:</p> <ul style="list-style-type: none"> ○ All nightclubs ○ Indoor, crowded settings with 500 or more attendees where those attendees are likely to be in close proximity to people from other households, such as music venues or large receptions ○ Outdoor, crowded settings with 4,000 or more attendees where those attendees are likely to be in close proximity to people from other households, such as outdoor festivals ○ Any settings with 10,000 or more attendees, such as large sports and music stadia <ul style="list-style-type: none"> • Settings that will be exempt from requirements to use the NHS COVID Pass, include communal worship, wedding ceremonies, funerals and other

	<p>commemorative events, protests and mass participation sporting events</p>
<p>Legally mandating face coverings in additional settings</p>	<ul style="list-style-type: none"> • If Plan B is implemented, the legal requirement to wear face coverings in some settings will be re-instated. The precise settings will be decided at the time
<p>Advice to work from home</p>	<ul style="list-style-type: none"> • If the Government were to re-introduce this measure it would be seeking to reduce the transmission risk inside and outside of the workplace, including by reducing the number of people taking public transport and the number of face-to-face meetings and social activities, and thereby reducing community and household transmission

5.1.2 COVID-19 Contain Framework: a guide for local decision makers

On 7 October 2021, the [COVID-19 Contain Framework: a guide for local decision makers](#) was updated, setting out how national, regional and local partners should continue to work with each other, the public, businesses, and other partners in their communities to prevent, manage and contain outbreaks of COVID-19.

The revised Contain Framework builds on previous iterations of the document, which was first published in July 2020, and includes:

- Roles and responsibilities of local authorities (LAs) and local system partners
- Support LAs can expect from regional and national teams, as well as the decision-making and incident response structures
- Core components of the COVID-19 response across the spectrum of outbreak prevention and management
- Requirements of LAs on the continued COVID-19 response, as well as how this should be factored into LOMPs

The Contain Framework should be read in the context of the [COVID-19 Response: Autumn and Winter Plan 2021](#).

5.2 Local Outbreak Management Plan

Surrey's COVID-19 [Local Outbreak Management Plan](#) (version 14) is currently being updated to reflect the COVID-19 Response: Autumn and Winter Plan 2021 and the revised COVID-19 Contain Framework described above. The revised plan (version 15) is due to be published on 10 December 2021, when it will be shared with Surrey's Heartlands Integrated Care System (ICS) Resilience & EPRR Board and the LOEB for approval.

Developments and progress on delivery across key workstreams are outlined below:

5.2.1 COVID-19 Vaccination Programme

Surrey's [Weekly Coronavirus Full Summary Report](#) provides vaccination data for all districts and boroughs. National daily and weekly data on COVID-19 vaccinations is available [here](#).

Surrey Heartlands CCG

Information on Surrey Heartlands Clinical Commissioning Group (CCG) COVID-19 vaccination programme is available [here](#). As of 31 October, Surrey Heartlands CCG has delivered 1.53m vaccinations via the Surrey Heartlands vaccine sites. This consists of 742k first doses, 670k second doses and 126k booster doses. Surrey Heartlands vaccination programme is designed to be flexible to deliver on Joint Committee on Vaccination and Immunisation (JCVI) guidance and is focusing on four key priority areas whilst continuing to provide the 'evergreen offer'.

The priority groups include:

1. Booster vaccinations for all eligible cohorts
2. Care home residents
3. Children aged 12 to 15 years
4. Immunosuppressed

Booster vaccinations

Booster vaccination uptake in Surrey Heartlands is currently 61.2%. This is higher than South East regional average of 58.5%. Each locality is delivering its booster delivery plan with adequate appointment capacity to accommodate expected demand. As of 11 November 2021, the [NHS National Booking System](#) will allow eligible people to book their booster vaccination appointments 30 days in advance of the date from which they are due their booster.

Care home residents

Surrey Heartlands has met the national target set for all eligible care home residents to receive their booster vaccinations by 1 November 2021. To date, 95% of care homes have been visited and plans are in place to visit the small number of remaining care homes who required the re-scheduling of vaccination clinics. This may have been due to COVID-19 outbreaks or the need to schedule vaccination clinics in line with a resident's booster eligibility date (which fell after 1 November 2021).

Children aged 12 to 15 years

Following updated [advice](#) from the JCVI on 3 September 2021, all 12-15 year olds are being offered a single dose of Pfizer vaccine. Most children are being vaccinated in a school-based setting by the School Aged Immunisation Service. In addition, there is an option to book an appointment [online](#). As of 31 October 2021, 15,544 vaccinations have been administered to children aged 12-15 years, representing a 28% uptake. This compares with the South East regional average of 26.6%.

Immunosuppressed

As of 31 October 2021, 76% of eligible immunosuppressed people have taken up the third dose, following updated [guidance](#) from the JCVI on 2 September 2021, advising that a third primary dose should be offered to individuals aged 12 years and over with severe immunosuppression.

Frimley Health and Care ICS

Information on the Frimley Health and Care COVID-19 vaccination programme is available [here](#). As of 1 November 2021, Frimley has delivered 1.14m vaccinations. This consists of 537k first doses, 503k second doses, and 104k boosters of which 5,350 were co-administered with flu.

Booster vaccinations

Frimley Health and Care has the highest uptake of booster doses in the South East region. Booster vaccines for adults continue to be provided at local vaccination services and community pharmacies have begun the roll-out the vaccine to eligible groups. Where possible, this is being co-administered with flu. Care homes have been visited by Primary Care Networks providing residents with booster doses.

Supporting the care home workforce

Frimley Health and Care has worked with care homes to ensure all staff have received their first, second and where possible, the booster dose and flu vaccination. Scoping and support is being carried out where the mandatory uptake in care homes has not reached 100%.

Children aged 12 to 15 years

Healthy children aged 12-15 years have been vaccinated against COVID-19 and flu within school settings. Children who were unable to take up the initial offer can book an appointment as a local site via the [NHS National Booking System](#). Children with specific underlying health conditions that put them at risk of serious COVID-19 or who are household contacts of persons (adults or children) who are immunosuppressed are being vaccinated at their local vaccination service and being given two doses of the vaccine.

Evergreen Offer and Phase 3 – Addressing Inequalities

The Equality Impact Assessment for Surrey is available [here](#) and has underpinned the approach to communications and engagement of under-served communities and those with lowest confidence in the vaccination programme. The strategic approach to addressing inequalities in uptake of the vaccination programme has included systematic application of Public Health England's Health Inequalities toolkit and the Behaviour Change Wheel to inform insight driven and co-produced solutions. The

Equality group for vaccinations oversees the delivery groups dedicated to this work including, outreach working group - supporting, drug and alcohol users, Gypsy Roma Traveller (GRT) community, asylum/migrant, mental health, survivors of domestic abuse, sex workers and homeless - Engagement Group (BAME, health and social care workforce and maternity) and Communications. Vaccination uptake by geography and demographics are reviewed fortnightly and informs targeted communications and community engagement approaches. The 10 MSOAs with the lowest uptake have dedicated community outreach workers who work with communities (including faith and community leaders) to understand the challenges and co-produce solutions. There is a dedicated Equality Coordinator who supports the GRT community, Women's Refuges and Asylum and Refugees to uptake the vaccination.

5.2.2 Local Contact Tracing

Details on Local Contact Tracing in Surrey are available [here](#).

Local Contact Tracing continues to play an essential role in breaking the chains of COVID-19 transmission. Surrey's Local Tracing Partnership (our Local Contact Tracing Team) continue to operate 'Local 24'. This means that for the first 24 hours, the national NHS Test and Trace Team attempt to contact individuals who have tested positive for COVID-19 to provide advice and to obtain details of anyone they have been in close contact with. If the NHS Test and Trace Team are unable to contact an individual within 24 hours, the case is passed to Surrey's Local Tracing Partnership who will continue trying to contact the person by phone. The contact tracers in Surrey are currently managing high case numbers and are successful in completing around 70% of cases referred to them. Recruitment into the team has taken place recently and further recruitment is planned. This additional capacity will enable a return to 'Local 4' (where cases are passed directly to Surrey after the 4-hour opportunity to complete their questionnaire online). The return to Local 4 will be phased by targeting areas with the highest COVID-19 case rates.

The Contact Tracing Delivery Group oversees local contact tracing and reports to Surrey Heartlands Integrated Care System (ICS) Resilience and Emergency Preparedness, Resilience and Response (EPRR) Board to ensure robust and clear decision making. Contact tracing, testing and vaccinations leads are working collaboratively via the COVID-19 Matrix Response Group to provide an agile and coordinated response to operational priorities within the three COVID-19 programmes.

5.2.3 COVID-19 Testing

Details on COVID-19 testing in Surrey available are [here](#).

Symptomatic testing

Individuals should continue to self-isolate and [arrange a PCR test](#) as soon as they develop any of the three main symptoms of COVID-19: a high temperature, a new continuous cough or a loss or change to your sense of smell or taste. PCR testing for symptomatic individuals continues to be accessible at a number of locations including drive-through regional test sites in Guildford, Gatwick, Heathrow and Twickenham; six local test sites in areas of greater population density offering cycle/walk-in testing and mobile testing units, which are rotated around the county in

response to need and epidemiological data. Home PCR testing kits can be requested [online](#).

GPs can also order stocks of PCR tests for testing symptomatic patients. GPs can use these at their discretion to offer the swabs where they deem it to be clinically appropriate. This improves streamlining of patient care and can increase access to testing for patients who would otherwise be unlikely to take a test via the primary testing routes. This might be due to barriers around language, distance, disability, or digital inclusion. These PCR testing kits are also available to symptomatic general practice staff and their symptomatic household members.

The Surrey Testing Operational Group also continues to support certain settings, such as prisons and other high-risk settings with symptomatic PCR testing and testing support during outbreaks upon request.

Targeted community testing (symptom-free testing)

Targeted community testing using LFDs is currently available at a number of community pharmacies across the county. In total, 28 pharmacies are currently accredited across Surrey, and nine of these were operational in the latest reporting period (week commencing 25 October 2021). These pharmacies offer assisted testing to anyone aged over 11 who lives, works or studies in Surrey. Anyone aged under 16 must be accompanied by a parent or guardian.

The Surrey Testing Operational Group is also utilising two Agile Testing Units (ATU), which can provide assisted LFD testing and collection of self-test LFD kits to be used at home. Almost 40,000 self-test LFD kits were distributed in the latest reporting week. The ATU is also being used to educate and promote LFD testing across several geographical locations, which have been chosen to target populations that are under-represented in testing or disproportionately affected by COVID-19.

The Surrey Testing Operational Group have also liaised with service providers who work with vulnerable and hard to reach communities, to set up on-site LFD testing or collection of self-test LFD test kits. LeatherHEAD START and Epsom and Ewell Foodbank are currently delivering LFD testing as part of this service provider model, and the Surrey Testing Operational group is in discussion with other service providers who wish to onboard.

Individuals can now collect self-test LFD kits from many pharmacies participating in Pharmacy Collect. Individuals must now get a collection code [online](#) before visiting the pharmacy to collect their self-test LFD kits. The location of Pharmacy Collect sites can be found on the [NHS Test Site Finder](#). Alternatively, individuals can [order self-test LFD kits online](#) to be delivered to their home for themselves or members of their household or bubbles.

There are multiple nationally-led asymptomatic testing streams that provide regular LFD testing in various settings, such as educational settings, care settings, NHS settings, and a small number of workplaces participating in daily contact testing. LFD testing kits are provided by NHS Test and Trace directly to these settings or individuals are directed to collect or order self-test LFD kits from the routes already mentioned.

It is recommended that regular LFD testing should be performed twice weekly as per national [guidance](#). Details on how to order lateral flow test is available [here](#). In the event of a positive result, individuals need to self-isolate and get a PCR test to confirm the result.

Contact testing

Anyone who has been notified that they have had close contact with someone with COVID-19 is advised to get a PCR test as soon as possible, even if they do not have symptoms. PCR tests can be arranged [online](#) or by calling 119.

5.2.4 High Risk Settings

Education

As set out in the [Schools COVID-19 operational guidance](#), the Government's direction for education and early years settings has been that COVID-19 becomes "a virus that we learn to live with", alongside a strong commitment to reduce the disruption to children's and young people's education. The Education [Contingency Framework](#) is being promoted and deployed accordingly where there are COVID-19 outbreaks in education settings.

The Government's priority is for education settings to deliver face-to-face, high-quality education to all children and young people. This term has felt different from last year in schools. The way in which schools are responding to COVID-19 is changing. Many measures such as bubbles, reduced social mixing, isolation of contacts and face coverings that were previously introduced have now diminished.

The shift in protective measures outlined in [guidance](#) allows schools more freedom to be flexible in the delivery of learning and means that the school environment has returned to a status similar to before the pandemic.

Education and early years settings still have routine and proactive infection control procedures in place like enhanced cleaning, ventilation, frequent testing (age-appropriate), hand washing and CO2 monitors to allow for safer, controlled environments. These actions remain effective tools in preventing COVID-19, but by their nature, are slower at reducing virus transmission than also implementing bubbles, face coverings and staggered start times.

In practice, this means that since the start of the new academic year in September, school life should look and feel much more 'normal' for pupils, staff and parents and carers. However, we know that with the continuation of rates of community infection, there are likely to be cases of transmission in educational settings. For this reason, Surrey Public Health Team and School Relationships Service are continuing to provide access to advice, support, and guidance to education sector leaders to support successful delivery of quality education. This includes support for schools to do all that is reasonably practical to ensure the health, safety and welfare of all staff and students.

It is generally well understood that children are at very low risk of severe illness from COVID-19 and they are far better off being in school in terms of their overall wellbeing and development. School relationship colleagues have seen apprehension of pupils, their families, school leaders and education colleagues reduce since the beginning of term. Surrey Public Health Team and School Relationships Service continue to provide a consultation service via COVID Clinics for school leaders, designed to support them in their decision making related to introducing temporary measures in response to a rise in cases within the school setting, as per the Education [Contingency Framework](#).

Testing

Schools continue to promote twice weekly symptom-free lateral flow testing for all secondary school age pupils, and all staff and parents/carers. If at any time a lateral flow result is positive, a confirmatory PCR will still be required, even while waiting for a previous PCR test result. Based on recent UK Health Security Agency (UKHSA) [advice](#), secondary age students, and school staff identified as contacts during an outbreak are also encouraged to take a daily LFD test until they receive their PCR test result. UKHSA guidance also references the use of daily LFD tests in primary age children who are contacts, which can be advised as necessary by health protection teams, at parents' discretion.

Immunisations

The School Aged Immunisation Services are currently delivering COVID vaccinations to children aged 12 years and over in school settings alongside the flu vaccination programme. Parents/carers also have the choice to take their children to the COVID mass vaccination centre at Sandown Park Racecourse (Esher) with no appointment required. There are also a range of locations offering bookable appointments for 12–15-year-olds. The latest information is available [here](#).

Universities and higher education settings in Surrey have been supported with Frequently Asked Questions, details of where to find nearest vaccination walk-in centre, and national and local assets. Surrey Public Health Team worked closely with the University of Surrey to facilitate a pop-up vaccination site on campus for fresher's fortnight. Surrey's universities are continuing to promote the COVID-19 vaccine and other vaccinations for students and staff.

Contact tracing

From 19 July 2021, NHS Test and Trace became responsible for contact tracing in schools, which means school leaders no longer need to identify close contacts. This process feels less robust than the role that the schools played last school year. Concerns around this have been escalated and Department for Education (DfE) is clear in their position that education settings are no longer expected to undertake contact tracing.

Data

Surrey Public Health Team continues to review [COVID-19 data](#) twice weekly, in addition to separately meeting twice weekly to specifically focus on education settings. This focused insight allows Surrey to analyse individual school trends, outbreak size, and whether a setting has recently had support to implement additional contingency measures. This facilitates a proportionate, proactive, and

prioritised response from Surrey's Education and Public Health colleagues. Schools can also reach out directly to their named Area School Officer if they have any concerns, and where appropriate a COVID Clinic will be held.

NHS Test and Trace data shows daily testing of children in contact with COVID-19 in schools was able to identify most of those who go on to become infected. This allows them to isolate safely at home, while most other students and staff to remain in school.

Representatives from the Local Contact Tracing Team are invited to COVID Clinics at boarding school outbreaks and at larger outbreaks identified in schools. Public Health continue to help schools to understand the contact tracing process in Surrey and to make them aware that the Surrey Contact Tracing Team are keen to support schools as far as they are able.

The high-level picture of Surrey's local infection rates is available to education and early years settings, which is broken down by district and borough. Schools are reminded about accessing this regularly within weekly newsletters that go to school leaders. COVID-19 case rates continue to be high in school age children as they largely are unvaccinated.

Additional needs and attendance

Data and feedback from education settings suggests that children are presenting in schools with a wide range of additional needs attributed to the disruption to learning, social interactions and family life since March 2020. The return to school has provided an opportunity for the assessment of need and the short, medium or long-term support required. The sector is in dialogue locally in response to concerns about children in early years being prepared and ready for learning at school, and for the preparedness and resilience of those young people leaving school and moving into further education.

DfE unvalidated data is providing a picture of a positive return by children and young people to education. Nationally, circa 90% of children are attending school this September and the return in Surrey is slightly above this figure. This figure is below pre-pandemic levels of attendance (usually circa 95%) and DfE data suggests that 3% of this gap is due to COVID-19 related absence. The data is showing a similar trend for children with Education Health and Care Plans and those children who have a social worker. There is close attention and analysis of the attendance data by the multi-disciplinary Encouraging School Attendance Group, who monitor trends, and consider whether any further promotional activity and/or interventions are needed.

A [back to school](#) communication campaign was launched for families to prepare them and their children for the return to school this academic year. The aim was not only to provide information, but also assurance, that it is safe and crucial that children resume their education.

A detailed report considered by Surrey's Children, Families, Lifelong Learning and Culture Select Committee on 18 October 2021 is also available [here](#). This highlights the impacts of COVID-19 on education and learners in Surrey and includes

information on support provided over summer, support for return to school, information on electively home educated students and children missing education.

Support for children/families with a Free School Meal (FSM) entitlement

There has been strong support from the Council and school leaders for food vouchers for children in receipt of benefit-related free school meals over the school holidays. It has proved to be a very effective means of targeting and distributing food support for children in financially vulnerable households during the school holidays. The allocation of flexible vouchers has provided families with local, trusted and discreet allocation by their school, a choice of retailer where they can purchase food and flexibility of when they can spend vouchers. The support offered has provided vouchers to in excess of 22,000 children during school holidays in the academic year 2020/21 and October half-term 2021. This includes children aged between two and four in early years provision.

Universities

Surrey Public Health Team continue to meet regularly with university colleagues and have worked with health colleagues to support throughout the pandemic. Surrey's university settings have been supported to access regular symptom free (lateral flow) testing, vaccinations (see vaccines section above for detail), and support with considerations of international students returning to the county.

SCC Public Health colleagues also join regional discussions with UKHSA, Department for Health and Social Care (DHSC), and DfE – at which Surrey's universities are well represented. SCC Communications Team link to university Communications via the Multi-Agency Information Group (MIG) meetings and share current assets and campaigns, many of which have been targeted to university student age groups. Insight work has also been conducted from youth agency Livity and shared with university colleagues, reviewing the impact on students during the pandemic. Targeted social media influencer campaigns are ongoing based on these insights.

Care Homes

The Care Homes COVID-19 Outbreak Oversight Group meets weekly to look at the current COVID-19 outbreaks in care homes and co-ordination of system response in line with national guidance. Public Health work closely with the UKSHA to receive details on daily outbreaks. Targeted support in response to outbreaks continues to be provided by SCC's Quality Assurance Team, Infection prevention and control (IPC) nurses, and NHS care home leads. This targeted support in response to outbreaks focuses on IPC, outbreak management, workforce, confidence in management, safeguarding and vaccination uptake.

Information on the current position (as of 29 October 2021) within care home settings is outlined below:

Outbreaks

Since the beginning of August there has been a steady increase in outbreaks, averaging at eight per week, however the number of residents who are COVID-19 positive is very low and the number of COVID-19 related deaths in care homes averages one a week

COVID-19 infection rate

- PCR testing - 0.44% (54 positive tests out of 12,340; six of which were residents)
- Lateral flow testing - 0.17% (31 positive tests out of 17,857; none of these were residents)

COVID-19 vaccination (8 December 2020 and 31 October 2021)

Section 5.2.1 provides a progress update from Surrey Heartlands CCG and Frimley Health and Care ICS relating to delivery of COVID-19 vaccinations within care homes. The following data on COVID-19 vaccination in care homes has been extracted from Surrey's [Weekly Coronavirus Full Summary Report](#):

Older Adult Care Homes (residents aged 65 years and over) - Residents

Area	Total number of residents	Number of eligible residents vaccinated (1st dose)	% of eligible residents of older adult care homes vaccinated (1st dose)	Number of eligible residents vaccinated (2nd dose)	% of eligible residents of older adult care homes vaccinated (2nd dose)
England	315,252	303,113	96.1%	298,930	94.8%
South East	56,498	54,499	96.5%	53,777	95.2%
Surrey	8,719	8,440	96.8%	8,345	95.7%

Older Adult Care Homes (residents aged 65 years and over) - Staff

Area	Total number of staff	Number of eligible staff vaccinated (1st dose)	% of eligible staff of older adult care homes vaccinated (1st dose)	Number of eligible staff vaccinated (2nd dose)	% of eligible staff of older adult care homes vaccinated (2nd dose)
England	461,855	436,406	94.5%	412,815	89.4%
South East	83,893	79,108	94.3%	75,065	89.5%
Surrey	13,414	12,566	93.7%	11,802	88.0%

Younger Adult Care Homes (residents aged under 65) - Residents

Area	Total number of residents	Number of residents reported to be vaccinated (1st dose)	% of residents vaccinated (1st dose)	Number of residents reported to be vaccinated (2nd dose)	% of residents vaccinated (2nd dose)
England	36,001	33,680	93.6%	32,757	91.0%
South East	6,634	6,282	94.7%	6,023	90.8%
Surrey	735	696	94.7%	676	92.0%

Younger Adult Care Home (residents aged under 65) – Staff

Area	Total number of staff	Number of staff reported to be vaccinated (1st dose)	% of staff vaccinated (1st dose)	Number of staff reported to be vaccinated (2nd dose)	% of staff vaccinated (2nd dose)
England	87,742	81,289	92.6%	75,818	86.4%
Surrey	2,466	2,277	92.3%	2,124	86.1%

From 11 November 2021, all care home workers, and anyone entering a care home, [will need to be fully vaccinated](#), unless they are exempt under the new regulations. These [regulations](#) require registered persons of all Care Quality Commission (CQC) registered care homes (which provide accommodation together with nursing or personal care) to ensure that a person does not enter the indoor premises unless they have had two doses of a Medicines and Healthcare products Regulatory Agency (MHRA) approved COVID-19 vaccine. The regulations come into force on 11 November 2021 after a 16-week grace period which commenced on 22 July 2021. Any adverse impact on overall care home staffing levels will be monitored closely by SCC to ensure overall market stability and service continuity.

Surrey has received over £39m of additional funding since the start of the pandemic to support care homes with additional costs and financial pressures incurred by the pandemic. Care homes will receive a further £4.9m of Infection Control Funds and Rapid Testing Funds, bringing the total support for care homes since the start of the pandemic to over £44m.

On 16 August 2021, the requirement to [self-isolate was removed for double vaccinated close contacts](#). Consequently, a risk assessment is undertaken for any staff members identified as a close contact who is working with highly vulnerable patients. Staff must remain asymptomatic, follow the prescribed testing guidance

(LFD and PCR), and ensure IPC measures such as handwashing and PPE are adhered to. Managers must review controls carefully and consider other redeployment options if necessary.

5.2.5 Community (COVID-19) Champions

Public Health continues to support local areas to deliver the Community (COVID-19) Champions programme, in order to help reduce and control the spread of the COVID-19 throughout the autumn and winter period.

Recent progress includes:

- The first countywide Community (COVID-19) Champions webinar took place on 20 October 2021. The event was hosted by Public Health and was well attended by 41 representatives. Participants were presented with the latest Surrey COVID-19 data and a facilitated discussion was held about the role of Community (COVID-19) Champions in pandemic recovery. This provided an opportunity for Champions to interact, share learning and best practice, and raise questions or concerns with Public Health specialists.
- Ten boroughs and districts have formally engaged with the Community (COVID-19) Champions programme. Woking Borough Council has recently appointing a scheme coordinator. Work is underway to establish a scheme in Tandridge via a voluntary group with wide community presence across the borough.
- COVID-19 briefings are cascaded fortnightly to the Community (COVID-19) Champions networks and partners across Surrey.
- Public Health is working closely with borough and district coordinators and engaging with key partners including Surrey Heartlands ICS, Active Surrey, Surrey Ethnic Minority Forum, Central Surrey Voluntary Action, Surrey Neighbourhood Watch and Users Voice to extend and diversify delivery of the programme into new settings and communities.

5.2.6 Variants of Concern

The latest national data on Variants of Concern (VOCs) and Variants Under Investigation (VUIs), including distribution of case data by lower-tier local authority, is available [here](#). Information and intelligence about VOCs in Surrey is available in the [Weekly Coronavirus Full Summary Report](#). Surrey County Council continues to play a critical role in responding to VOC and VUI outbreaks by working closely with UKHSA and local partners to monitor VOC cases, and working with local communities to ensure they are safe and supported.

5.2.7 Managed Quarantine Service

From Monday 1 November, the remaining seven destinations on the [red list](#) (Colombia, the Dominican Republic, Ecuador, Haiti, Panama, Peru and Venezuela) were removed. There are no longer any hotels in Surrey under the Managed Quarantine Service (MQS).

The data for all countries and territories will be kept under review, including the emergence of new variants, and the Government will take action where the epidemiological picture changes. Updated travel [guidance](#) provides details of what people must do before they travel to England and after arrival.

5.2.8 Initial Accommodation, Dispersal Accommodation and Bridging Hotels

Initial accommodation is short-term housing for asylum seekers who need accommodation urgently before their support applications have been fully assessed and longer-term accommodation can be arranged. There are currently two hotels in Surrey being used as Initial accommodation delivered by the Home Office.

Dispersal Accommodation is longer-term temporary accommodation managed by accommodation providers on behalf of the Home Office for those needing accommodation until their asylum claim has been fully determined. Surrey currently has one Dispersal Accommodation setting.

Bridging hotels provide accommodation for Afghan evacuees before they are offered more settled accommodation. This forms part of concerted nationwide efforts delivered for the Afghan Relocations and Assistance Policy (ARAP) and Afghan Citizens Resettlement Scheme (ACRS). There are currently two Bridging hotels in Surrey with another one planned for the end of November.

Health and social care professionals (including SCC Public Health Team, Emergency Management Team, NHS, UKHSA, district and borough representatives) from across Surrey have been meeting with Home Office representatives to work in partnership on health and welfare issues, ensuring that residents have access to testing and vaccination to protect them from COVID-19.

Enforcement update - provided by Surrey Police:

Operation Apollo

Surrey Police's continued response to the Coronavirus Pandemic

Since the last update, no new Fixed penalty notices have been issued for Surrey and the total number of tickets issued since the start of the pandemic stands at 1,593.

Surrey currently has 14 officers and staff self-isolating (9 officers, 5 staff) and 9 cases confirmed of COVID19. Numbers currently equate to 6.9% of the workforce with the figure nationally being 6.0%. With half term finishing over the next couple of weeks we will see the impact that schools have on our self-isolation, with the potential of more people having to isolate due to children testing positive and/or passing on the virus.

Now that there are no longer Red countries on the travel list for England, the hotels that were taking on travellers needing to quarantine have now returned to normal



business or have taken on other Home Office contracts, which include contracts for housing asylum seekers or bridging accommodation for Afghan refugees.

Surrey currently has 2 bridging hotels. Afghan refugees are being housed in these hotels while they are waiting for permanent accommodation to become available, which could be anywhere in the country. In the meantime, education and medical provisions are on site as is assistance in helping integrate the refugees into the community.

Asylum Hotels, which house asylum seekers who have arrive on the beaches from France, continue to increase in number. There are now 17 hotels across the South East Region with 2 more to come online shortly however it remains to be confirmed where and which hotels these will be. Further hotels may also contract to the Home Office for asylum hotels and this will depend on the number of boats which arrive from France. Due to a change in tactics this year by OCGs (Organised Crime Groups) and bigger boats being used, weather and wave conditions are now less of an issue during the winter. There is the potential for more to land on beaches, where historically winter has been a quieter time for landings.

There are currently 2 asylum hotels within Surrey. One is a 'Processing' hotel where asylum seekers spend their first 5 days in the UK isolating before being moved on to 'Contingency' accommodation to continue their isolation and then to stay for an indefinite period.

Last year we had a relatively mild winter, however this year it is not unreasonable to think things will be very different. Similarly, last year seasonal winter flu didn't really impact as we were in lockdown, this year that will be very different. We are taking steps via Wellbeing Wednesday to remind people to get a flu jab and reminding those that are eligible to get their Covid boosters. Surrey has rising rates of absence due to Covid however there is also a resurgence of illnesses such as the common cold, flu, and stomach bugs. We have delayed the go live of the new ways of working piece and are reviewing after COP26 if it is appropriate to get more people back into the workplace.

Anti Vax protests continue across Surrey. Whilst large scale protest targeting schools has not emerged there has been widespread and a fairly significant amount of anti vax activity targeting schools, be it through letters, social media posts and comments and small numbers of anti vaxers at schools intimidating pupils on entry and exit.

We are also aware of similar anti vax activity stepping up in relation to other vaccine centre locations, including at hospitals and GP surgeries, with reports of 'letters and writs' being 'served' or handed in at these locations addressed to senior staff etc. From what we can assess most of these incidents have not been at a level to create an offence, and the small number that have are being investigated.

The 'Booster programme' will be ramping up immediately, both in terms of promotion and delivery, and this brings with it likely increases in footfall at vaccine sites and anti vax activity as well.

We are asking that officers are proactively engaging with schools after half term where the vaccination programme is being carried out and continuing to provide reassurance and any security and safety advice.

6. Challenges

The following areas have been identified as key challenges which are summarised below. These are documented within the Public Health COVID-19 Risk Register which forms part of the system risk register overseen by Surrey Heartlands Resilience and EPRR Board:

- New VOCs pose a threat to the system by potentially placing extra demand on capacity, requiring re-direction of resources, impacting Public Health and wider system partners.
- The Government is yet to confirm whether any remaining Contain Outbreak Management Fund (COMF) 2020-2021 provided to local authorities in England to help reduce the spread of coronavirus and support local public health can be carried forward into the next financial year (April 2022 onwards).
- The mandatory requirement for all care home workers to be fully vaccinated by 11 November 2021 (unless exempt) may lead to a loss of staff, posing a safeguarding risk to care home settings.
- The COVID-19 Public Inquiry which is due to commence Spring 2022 is a significant challenge to Surrey County Council and system partners. Preparation is underway to ensure all key decisions, actions and evidence is appropriately logged ahead of the inquiry.

7. Timescale and delivery plan

Delivery of the LOMP is ongoing and will be required throughout the COVID-19 pandemic.

8. How is this being communicated?

The Communications Plan to support the LOMP is led by SCC Communications and Engagement Department in conjunction with system partners in the MIG.

9. Next steps

- Continue to review and update the LOMP regularly in line with national policy and guidance.
- Continue to monitor COVID-19 data and surveillance twice weekly.
- Continue to drive delivery of the LOMP via Surrey Heartlands ICS Resilience and EPRR Board.
- Adapting any local protocols in the LOMP to reflect new learning and best practice.
- Continue to assess risks and implement mitigating actions.
- Continue to monitor the capacity and budget.
- Continue preparatory work for the COVID-19 Public Inquiry.