

NHS Board Meeting
29th July 2020

Lanarkshire NHS Board
Kirklands
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SUBJECT: TEST & PROTECT IN LANARKSHIRE - UPDATE

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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The NHS Board is asked to note the progress of work in delivering an effective contact tracing service for Lanarkshire, as well as the next stages of this work.

2. ROUTE TO THE BOARD

The paper has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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by the Director of Public Health, Gabe Docherty and Dr Martin Donaghy, Consultant in Public Health

3. SUMMARY OF KEY ISSUES

The aim of Test & Protect (T&P) is to prevent the transmission of COVID-19 from an identified case to the wider community by tracing and isolating their close contacts in as short a period as possible after the case becomes infectious. To be effective it needs to work in synergy with other community-wide measures.

Between 15th May and 15th July, The Test and Protect Service for Lanarkshire residents was managed by NHSL exclusively. In total in that period, 155 cases were notified and 322 contacts traced, an average of 2.1 contacts per case.

Since that date, the National two-tier service has been introduced with the Board managing the cases occurring in complex settings e.g. hospitals and the National Centre (NCTC) following up simpler cases. A triage system has been instituted to distinguish the two types of case and a common Case Management System put in place to handle calls and interviews across the two tiers.

The system is bedding down. Between 15 July and 21st July, 31 cases have been managed and 161 contacts traced, an average of 5.2 contacts per case, indicative of the effects of the easing of lockdown restrictions.

The T&P service has been successfully introduced. As was to be expected, a number of issues have arisen:

- Joint working on complex cases with police, health and social care;
- Isolation of health and social care workers identified as cases and contacts;
- Communications to NHS and other workers on what to expect when contacted by the T&P service;
- Performance monitoring by Scottish Government and reconciliation of data utilised for this purpose;

There has also been significant pressure on senior staff engaged in running a new service while at the same time having to develop its next phase over which there was considerable uncertainty.

The Board is engaged with Scottish Government to ensure that the costs of the service are fully met, and is working within the Board with Service Directors to ensure that seconded officers can continue to work within the T&P service. The recent issues in North Lanarkshire underline the need to have robust and secure arrangements in place in the short to medium term.

Further development work is underway. Work is being taken forward on them, mainly in:

- Finalising National T&P Service responsibilities especially regarding Board's role;
- Scoping the processes and outputs for the NHSL T&P service as it moves forward;
- Developing protocols and communications for local joint working;
- Developing internal review and assurance mechanisms.

A protocol is being developed with both councils' education departments on the operation of T&P in schools. Currently, T&P is part of NHSL's response to the COVID-19 outbreak at SITEL near Motherwell. A fuller report on this will be provided after the outbreak is over.

T&P is one of six operational areas of NHSL Public Health COVID-19 response which a Tactical Group is co-ordinating. This Group identified the ongoing uncertainty in T&P staffing levels as a red risk. Steps have been taken at a corporate level to mitigate this.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input type="checkbox"/>	AOP	<input type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input type="checkbox"/>	Statutory requirement	<input type="checkbox"/>	Achieving Excellence/ local policy	<input type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

- Transition to Scottish two tier system – a national contact tracing centre (Tier 1) and local contact tracing service (Tier 2)
- Transition to a more automated digital tool; case management system (CMS)
- Development of data analytics to inform service audits and performance monitoring

7. FINANCIAL IMPLICATIONS

- Phase 2 staff recruitment has significant financial implications for NHS Lanarkshire, and the funding for these posts is being taken forward with Scottish Government.
- Physical working arrangements are based on current working from home model and if this required change then additional funds may require to be sought for accommodation and related expenditure

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

- Number of cases to be traced by Lanarkshire CT service remains within upper limits of modelling back in April 2020
- There remains no expectation that NHS Boards will provide active monitoring.
- Smooth and seamless transitioning from current digital system, the simple tracing tool (STT) to the case management system (CSM) circa mid-July 2020
- IT systems are able to flag and escalate appropriate cases from national service to local boards timely
- Existing contact tracers are able to continue to be redeployed - these discussion are being taken forward positively within the NHS Board as we have greater clarity on the tier 2 role of NHS Boards.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input checked="" type="checkbox"/>	Equality	<input type="checkbox"/>
Sustainability Management	<input type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

A national EQIA report completed for this service has been reviewed by NHS Lanarkshire's E&D lead, and accepted for NHS Lanarkshire.

11. CONSULTATION AND ENGAGEMENT

Ongoing consultation process with key stakeholders including all key services operating in Lanarkshire including hospitals, primary care, community and social care, Police Scotland and local authorities.

12. ACTIONS FOR THE BOARD

The Board is asked to:

Approve	<input type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

1. Note the update

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

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