



**WARWICKSHIRE  
MULTI-AGENCY PANDEMIC INFLUENZA PLAN**

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**Version: 6.0**

**Implementation Date: 10/1/2009**

**Review Date: 10/1/2010**

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## DISTRIBUTION LIST

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Recipients
Members of Warwickshire Pandemic Influenza Committee
Warwickshire County Council
Warwick District Council
Stratford upon Avon District Council
North Warwickshire Borough Council
Nuneaton & Bedworth Borough Council
Rugby Borough Council
Coventry City Council
Warwickshire PCT
Coventry PCT
West Midlands East HPU
Warwickshire Police
Warwickshire Fire and Rescue Service
West Midlands Ambulance Service
South Warwickshire General Hospital
University Hospital Coventry & Warwickshire
George Eliot Hospital
Coventry & Warwickshire Partnership Trust
British Red Cross
St. John's Ambulance

The plan will be cascaded to other organisations as considered appropriate by individuals and organisations listed above.

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**AMENDMENT RECORD**

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Update #	Issue date	Page (s)
2	26/02/2008	Restructured to include Civil contingencies directorate check list for LRF plans

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## GLOSSARY OF TERMS

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ERMA	Emergency Response Management Arrangements
CCS	Civil Contingencies Secretariat
COBR	Cabinet Office Briefing Room
DPH	Director of Public Health
GP	General Practitioner
HPA	Health Protection Agency
NHS	National Health Service
PCT	Primary Care Trust
LRF	Local Resilience Forum
RRF	Regional Resilience Forum
SCG	Strategic Coordination Group
SHA	Strategic Health Authority
SITREP	Situation Reports
STAC	Scientific Technical Advisory Cell
WCC	Warwickshire County Council
WHO	World Health Organisation

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## FOREWORD

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The primary responsibility for planning for and responding to any major emergency rests with local organisations, acting individually and collectively through Local Resilience Forums (LRFs) and Strategic Coordination Groups (SCGs)<sup>1</sup>.

All public and private organisations need to work with and through their local forum to develop plans for maintaining services and business continuity during a pandemic and to respond to the wider challenges that will result.

Following publication of the National Framework and the Cabinet Office guidance document<sup>2</sup>, there will be a significant shift from policy development to implementation. With this in mind, the aim for the period to December 2008, agreed by ministers, is:

“to deliver a complete suite of fully audited and tested UK multi – agency pandemic influenza operational plans from the national to the local level in the public sector, thus providing reasonable assurance that the UK is as well prepared as practicable to cope with a pandemic.”<sup>2</sup>

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# 1 INTRODUCTION

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Most experts believe that it is not a question of whether there will be another severe influenza pandemic, but when (the Chief Medical Officer, 2002)<sup>1</sup>

## 2.1 Background

A pandemic is the worldwide spread of a disease, with outbreaks or epidemics occurring in many countries and in most regions of the world.

Influenza (flu) pandemics have swept the globe from time to time throughout history with devastating effect, far in excess of that resulting from the 'seasonal' influenza which (in the UK) occurs most winters.

Three pandemics occurred in the last century – in 1918/19 ('Spanish' flu), 1957/58 ('Asian' flu) and 1968/69 ('Hong Kong' flu). Up to a quarter of the UK population developed illness in each of these pandemics, many thousands of people died and the associated economic and social disruption was huge. The most severe – that of 1918/19 – is estimated to have killed around 250,000 people in the UK and between 20 and 40 million people worldwide, a greater toll than the whole of the First World War.

A pandemic of influenza results when a new influenza virus emerges which is markedly different from recently circulating strains and is able to:

- infect people (rather than, or in addition to, other mammals or birds)
- spread readily from person to person
- cause illness in a high proportion of the people infected.
- spread widely, because most people will have little or no immunity to the new virus and will be susceptible to infection (they will not previously have been exposed to it or a similar strain of virus, and any previous vaccinations will not have covered the strain).

Since 2003, there has been (and continues to be) a widespread occurrence – and continued spread – of a highly pathogenic avian (bird) influenza virus (H5N1) in poultry in SE Asia. This

has increased concern that this could cause an emergence of a new human influenza virus with pandemic potential.

The timing, extent and severity of a future pandemic remain uncertain, but experience from previous pandemics is that it will spread rapidly to all parts of the globe causing sudden, sharp increases in illness and deaths over a matter of weeks. It could rapidly overwhelm health and other services, and have far reaching effects on daily life, businesses and consequently the economy.

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## 2. PURPOSE, AIM AND OBJECTIVES

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### 2.1 Purpose

Pandemic Influenza is the highest priority risk on the risk registers of the Local and Regional Resilience Forums. Large segments of the population may be affected by influenza producing major impacts on all agencies and infrastructure of society. There will be significant challenges to the business continuity and whilst all organisations may be hit simultaneously targeted support to the health and social services will be required. The impact on health and health service will require a coordinated action of health service and its partners and this plan covers the support arrangements provided by other organisations to the health service.

### 2.2 Aim

The aim of this multi agency plan is to outline the operational framework for Warwickshire Local Resilience Forum for responding to the Pandemic Influenza. It will provide the main elements of the required coordinated response by all agencies in dealing with such an emergency. The response of individual organisations is described in their own pandemic influenza plans.

### 2.3 Strategic objectives

- To outline strategic command, control & coordination and decision making arrangements required for controlling a pandemic of influenza
- Provide links to the planning assumptions set in the national planning framework and provide tables outlining the impact on Warwickshire.
- Provide an overview of the West Midlands Regional arrangements within which the Warwickshire LRF will be expected to operate.
- Provide an outline of the roles and responsibilities of multi agency partners and structures such as the Strategic Coordination Group.
- To outline the arrangements for collection and sharing of information across multi-agency boundaries

- It will briefly outline the communication arrangements within and between organisations and with the members of the public. The detailed arrangements will be provided in the Communication plan.
- Provide an overview of arrangements for dealing with all areas of response that require a multi-agency input etc. managing excess deaths, antiviral distribution centre and communication issues.

This plan needs to be read in conjunction with the Major Emergency Plans of all partner agencies and Regional and National Influenza Pandemic Influenza Plans.

The specific arrangements for dealing with mass vaccination or mass fatalities and communication are outlined in detail in the specific plans.

#### **2.4 Audience:**

This guidance is intended for those responders who are responsible for developing policies and strategies or coordinating, managing, maintaining or testing contingency arrangements for responding to an influenza pandemic, e.g Category 1 responders. Additionally it will be of interest to those seeking general information or an overview of the County's general preparedness for and planned response to a pandemic.

#### **2.5 Plan Review**

This document is a dynamic document and as work streams complete they will be incorporated in the plan. The plan will be reviewed annually; the date of review of this document will be 10/01/10.

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## 3 PLANNING ASSUMPTIONS

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### 3.1 National planning assumptions

- Up to 50% of the population may show clinical symptoms of influenza over the entire period of a pandemic and up to 25% of those may develop complications.
- Up to 22% of the clinical cases may be expected during the peak week of a pandemic wave.
- Up to 32% of the symptomatic patients will require assessment and treatment by the general practitioner or other health professional.
- Up to 4% of those who are symptomatic may require hospital admissions. Average length of stay for those with complications may be six days.
- Up to 2.5% of those who show clinical symptoms of influenza may die.
- Antiviral medicines should be available to all patients who have been symptomatic for less than 48 hours within 12-24 hours of reporting symptoms
- Absenteeism for work may reach 25% and up to 50% of smaller business units.
- Vaccine may become available during the second wave of the pandemic. Mass vaccination will be planned and delivered by the PCT in conjunction with the health protection unit and the local authorities in accordance with the central government guidance

### 3.2 Warwickshire Planning Presumptions

The impact of the Pandemic of influenza on Warwickshire County and the Districts and Boroughs is shown in the following tables. A range of scenarios using attack rates of 25%, 35% and 50% and mortality rate of 2.5% have been used in the planning presumptions.

Table 1 Expected health care demand over the course of the pandemic for Warwickshire.

Warwickshire	25% attack rate		35% attack rate		50% attack rate	
	Per 100 k population	Warwickshire	Per 100 k population	Warwickshire	Per 100 k population	Warwickshire
Population 522,300						
Symptomatic cases	25,000	130,575	35,000	18,280	50,000	261,150
GP consultation	7,125	37,214	9,975	52,099	14,250	73,330
Hospital admissions	1,000	5,223	1,400	7,312	2,000	10,446
Deaths	625	3,264	875	4,570	1,250	6,529
Peak Weak Cases	5,500	28,727	7,700	40,217	11,000	57,453

### Planning presumptions for districts

Table 2 Expected health care demand over the course of the pandemic for North Warwickshire

North Warwickshire	25% attack rate		35% attack rate		50% attack rate	
	Per 100 k population	North Warwickshire	Per 100 k population	North Warwickshire	Per 100 k population	North Warwickshire
Population 62,300						
Symptomatic cases	25,000	15,575	35,000	21,805	50,000	31,150
GP consultation	7,125	4,439	9,975	6,214	14,250	8,878
Hospital admissions	1,000	623	1,400	872	2,000	1,246
Deaths	625	389	875	545	1,250	779
Peak Weak Cases	5,500	3,427	7,700	4,797	11,000	6,853

**Table 3 . Expected health care demand over the course of the pandemic for Nuneaton & Bedworth**

Nuneaton & Bedworth	25% attack rate		35% attack rate		50% attack rate	
	Per 100 k population	Nuneaton & Bedworth	Per 100 k population	Nuneaton & Bedworth	Per 100 k population	Nuneaton & Bedworth
Population 120700						
Symptomatic cases	25,000	30,175	35,000	42,245	50,000	60,350
GP consultation	7,125	8,600	9,975	12,040	14,250	17,200
Hospital admissions	1000	1,207	1,400	1,690	2,000	2,414
Deaths	625	754	875	1,056	1,250	1,509
Peak Weak Cases	5,500	6,639	7,700	9,294	11,000	13,277

**Table 4 Expected health care demand over the course of the pandemic for Rugby**

Rugby	25% attack rate		35% attack rate		50% attack rate	
	Per 100 k population	Rugby	Per 100 k population	Rugby	Per 100 k population	Rugby
Population 90,300						
Symptomatic cases	25,000	22,575	35,000	31,605	50,000	45,150
GP consultation	7,125	6,434	9,975	9,007	14,250	12,868
Hospital admissions	1000	903	1,400	1,264	2,000	1,806
Deaths	625	564	875	790	1,250	1,129
Peak Weak Cases	5,500	4,967	7,700	6,953	11,000	9,933

**Table 5 Expected health care demand over the course of the pandemic for Warwick district**

Warwick	25% attack rate		35% attack rate		50% attack rate	
	Per 100 k population	Warwick	Per 100 k population	Warwick	Per 100 k population	Warwick
Population 133000						
Symptomatic cases	25,000	33,250	35,000	46,550	50,000	66,500
GP consultation	7,125	9,476	9,975	13,267	14,250	18,953
Hospital admissions	1000	1,330	1,400	1,862	2,000	2,660
Deaths	625	831	875	1,164	1,250	1,663
Peak Weak Cases	5,500	7,315	7,700	10,241	11,000	14,630

**Table 6 Expected health care demand over the course of the pandemic for Stratford Upon Avon**

Stratford upon Avon	25% attack rate		35% attack rate		50% attack rate	
	Per 100 k population	Stratford upon Avon	Per 100 k population	Stratford upon Avon	Per 100 k population	Stratford upon Avon
Population 116,100						
Symptomatic cases	25,000	29,025	35,000	40,635	50,000	58,050
GP consultation	7,125	8,272	9,975	11,581	14,250	16,544
Hospital admissions	1000	1,161	1,400	1,625	2,000	2,322
Deaths	625	726	875	1,016	1,250	1451
Peak Weak Cases	5,500	6,386	7,700	8,940	11,000	12771

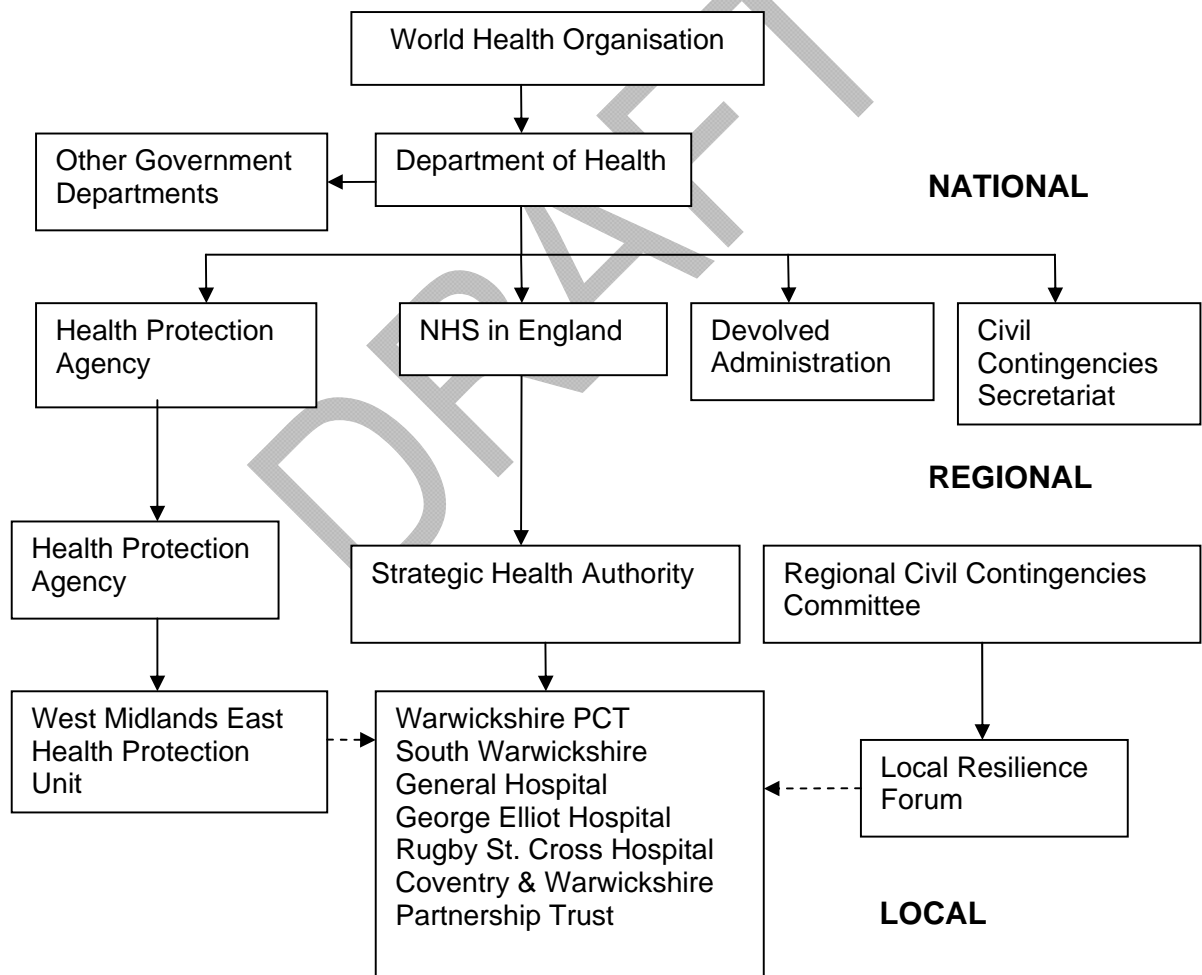
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## 4 THE PANDEMIC PERIOD

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### 4.1 DECLARING A PANDEMIC

The World Health Organization (WHO) will inform the Department of Health of any change in alert levels. The Department of Health will communicate this information, together with an assessment of risk to the UK, to the devolved administrations, Civil Contingencies Secretariat, other government departments, the NHS in England, healthcare professionals, the public and relevant organizations. The Department of Health will also notify responders of the relevant UK alert level, informed by surveillance information from the Health Protection Agency (HPA). This plan will be activated at UK alert level 1.



## 4.2 WHO international phases and UK alert levels

WHO has defined phases in the evolution of a pandemic, these phases allow for a step-wise escalation in planning and response, that is proportionate to the risk from first emergence of a novel influenza virus. WHO will inform its member states of any change in the alert phase, and this classification is used internationally. If a pandemic were declared, action would depend on whether cases had been identified in the UK and the extent of spread. For UK purposes, four additional alert levels have therefore been included within WHO Phase 6; these are consistent with those used for other communicable disease emergencies.

### WHO Pandemic phases

Inter-pandemic phase New virus in animals, no human cases	Low risk of human cases	1
	Higher risk of human cases	2
Pandemic alert New virus causes human cases	No or very limited human-to-human transmission	3
	Evidence of increased human-to-human transmission	4
	Evidence of significant human-to-human transmission	5
Pandemic	Efficient and sustained human-to-human transmission	6

### UK ALERT LEVELS

1	Virus/cases only outside the UK
2	Virus isolated in the UK
3	Outbreak(s) in the UK
4	Widespread activity across the UK

### **4.3 Plan activation**

In the event of a pandemic influenza being declared in UK at WHO phase 5 (UK Alert Level 1) the plan will be activated following discussions between DPH/Chief Executive of the PCT, Director West Midlands East HPU and the chair of the Warwickshire Local Resilience Forum. The Strategic Coordination Group will be convened to coordinate the multi-agency response at the Police Headquarters at Leek Wooton. The purpose of the SCG is to take overall responsibility for the strategic management of the pandemic at local level working closely with Warwickshire Primary Care Trust. Membership of the SCG is likely to mirror the Category 1 membership at the LRF.

The SCG will be convened to take stock of the preparedness arrangements and review the capability and capacity to maintain essential services and understand the roles and responsibilities for mitigation of the effects of the pandemic.

All organizations will implement business continuity plans focusing on essential activities and adjusting activity to cope with additional demand and allow for potential disruption.

### **4.4 Action according to the UK Alert Levels**

- The overall aim will be to maintain normal services and continue social and economic activities for as long and as far as that is possible.
- The focus of the Health service will be to rapidly assess the initial cases and treat them. Measure to limit and slow the spread of infection will be implemented.
- The emphasis at this stage will be to collect detailed information on the initial cases to inform the epidemiology to modify projections and inform public health and clinical management policies.
- Members of the public who are ill and suspects they may have influenza-like symptoms will be advised to stay at home, contact the National Flu Line service, inform a relative or friend and if necessary ask them to collect their antiviral medicines.
- Personal and respiratory hygiene messages will be reinforced ahead of an escalation to UK alert level 3.
- Information will be cascaded to all organizations, informing them of the situation.

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## 5 COMMAND & CONTROL ARRANGEMENTS

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### 5.4 National and Regional Coordination and Response Structures

The national response to any future influenza pandemic will be led by The Department of Health who are the lead Government Department for such an outbreak. The overall coordination of the response will be directed by The Cabinet Office Civil Contingencies Committee which will operate via COBR – The Cabinet Office Briefing Room.

### 5.5 Regional Civil Contingencies Committee (RCCC)

The Regional Civil Contingencies Committee will assemble a strategic picture of the situation across the region and communicate this to the Strategic Co-ordinating Group in Warwickshire as well as upwards to central government. It will also support work undertaken within Local Resilience Forum areas by identifying regional priorities; assist in targeting and deployment of scarce resources across the region; provide effective communication channels between local, regional and national levels. The RCCC does not have executive command and control in the response.

### 5.3 Health Emergency Response and Management Arrangements – ERMA

ERMA (Emergency Response Management Arrangements) will deliver a co-coordinated and proportionate response that ensures efficient command and control of the health economy in the West Midlands including Warwickshire. There are three levels of ERMA that feed directly into each of the multi-agency groups involved in delivering the pandemic influenza response. Health refers to these as ERMA 1; ERMA 2; and ERMA 3.

**ERMA 1:** Each NHS Trust in Warwickshire will have a remit to identify services that are not coping with increase demands or shortages, redeployment of staff and antiviral distribution.

**ERMA 2:** One ERMA 2 will be in operation across Warwickshire which will work alongside the Strategic Co-ordinating Group in Warwickshire. The remit for ERMA 2 will be to identify opportunities for mutual aid and ensuring partner health organisations are working together

**ERMA 3:** There will only be one ERMA 3 for the whole of the West Midlands and it will lead and command the strategic regional response of health services.

#### **5.4 Scientific and Technical Advisory Cell**

The role of the Scientific and Technical Advisory Cell (referred to as STAC) is to coordinate scientific and technical advice in support of the response and to provide advice, guidance and information to the Emergency Response Management Arrangements – Level 3. Relevant information from the Scientific and Technical Advisory Cell will also be fed onto the Regional Civil Contingencies Committee via representatives attending the Regional Civil Contingencies Committee from ERMA 3. There will only be one STAC for the entire West Midlands.

#### **5.5 Strategic Coordinating Group - Warwickshire**

The Strategic Co-coordinating Group (SCG) for Warwickshire will bring together chief officers and senior staff from Category 1 Responders and partner agencies across the County. The SCG may also include representatives of category 2 responders such as utility companies as well as representatives of Regional government and the military. During an outbreak of pandemic influenza the SCG will be chaired by one of three nominated officers. These are Jim Graham, Chief Executive of Warwickshire County Council, William Brown, Strategic Director of Community Protection and County Fire Officer and Bill Holland, Assistant Chief Constable, Warwickshire Police. During a pandemic influenza event the health service will have a pivotal role in the group. This group will regularly meet to bring all parties together – this may be done virtually by video conferencing - to agree priorities and set policy. A key task of the SCG will be to ensure integration and continuity of approach at a local level. The multi-agency group would be located at either Warwickshire Police headquarters at Leek Wooton or in the Emergency Centre at Warwickshire County Council, Shire Hall, Warwick.

## Strategic Coordination and Reporting Arrangements

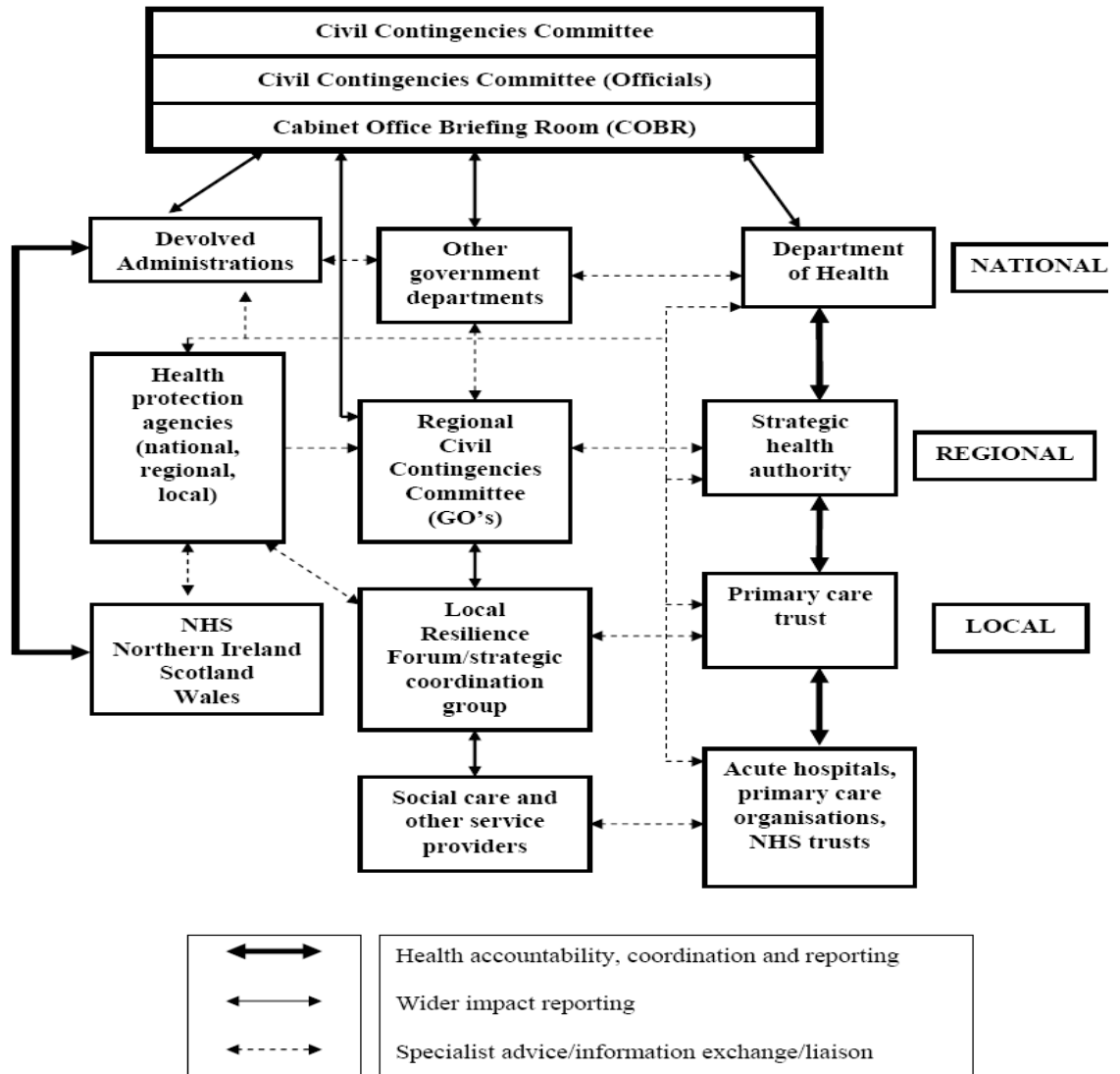


Figure 3: Central-local reporting and coordination arrangements

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## 6 ROLES & RESPONSIBILITIES DURING PANDEMIC INFLUENZA

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### 6.1 Warwickshire Primary Care Trust (PCT)

PCTs are responsible for developing, supporting and monitoring NHS and public health response arrangements at the local level and for involving and mobilising general practice and primary care resources. The PCT has its own pandemic influenza plan but also has a role in ensuring that services which it commissions – such as GP's and Acute Hospitals – have suitable plans and procedures in place. The PCT will also work closely with the County Council to ensure that best use is made of resources in the areas such as social care in which both organisations have a key role. This role may also include working with other key partners – including private sector care and support service providers.

### 6.2 Health Protection Agency

The HPA is engaged in planning for pandemic influenza in the Region and locally. Response plans have been developed for the West Midlands East Health Protection Unit in conjunction with the HPA west midlands region. The HPA will be responsible for providing public health advice to Warwickshire PCT and other partners and supporting all aspects of the public health response to an influenza pandemic.

In the Inter pandemic phase and the early part of the pandemic phase the HPA will provide the following specialist health protection services:

- advice on the investigation and management of early cases and contacts
- Detailed epidemiological data on the emerging virus (from WHO Phase 4 to UK alert level 2).
- Local data for national decisions such as choice of vaccine or antiviral strategy
- expertise, advice and operational support to the NHS through local and regional teams
- At UK alert levels 1 and 2 – and initially during level 3 – advice on microbiological/viral testing of patients presenting with influenza-like symptoms.
- The health protection unit will provide expert advice and support to the local responders and contribute the Scientific Technical Advisory Cell.

### **6.3 ACUTE NHS TRUSTS**

There are two Acute Hospital Trusts in Warwickshire – George Eliot hospital in Nuneaton and South Warwickshire Hospital in Warwick. Acute Trust Pandemic flu plans aim to enable the hospitals to respond as effectively as possible to any future pandemic by prioritizing services and staff. The key elements of these plans will address arrangements to create the significant additional capacity necessary to provide acute care, contingency arrangements for the expansion of specialist care and policies for suspension of non-emergency activity when required to free capacity and staff.

All plans build upon current Department of Health guidance on planning for Flu Pandemic and link with Trust-specific Major Incident Plans, the Coventry and Warwickshire Pandemic Influenza Plan and the West Midlands Health Region Specific Arrangements for Dealing with Pandemic Influenza. The principles of management within the pandemic for acute NHS Trusts will be based on general principles of outbreak control.

South Warwickshire NHS Trust arrangements are summarized below

- To assist in the command and control of the contingency plan the Trust will use the principles embedded into the Major Incident plan, and the same control procedures will be followed.
- As information becomes available about the spread of influenza, the Emergency Planning Lead will meet with the Executive team and a Pandemic Flu control team will be established. When WHO International Level 6 is reached, there will be a briefing and an overview of the current preparedness of the Trust. The frequency of the meetings will depend on the declared national levels and when the UK alert reaches level 2, this plan will be activated.
- The Executive team will determine the frequency of meetings as the UK alert level increases especially when UK alert reaches level 4 or if the level 3 outbreak is within our own health economy.
- The membership of the Pandemic Flu Control team will consist of the executive on call and nominated managers and clinicians as required providing advice and guidance on the effects of the pandemic flu.
- Guidance and support from other agencies will be available through the Emergency Planning team at Warwickshire County Council. (See Major Incident Plan Contact file)

The Infection Control team will attend when requested to provide details on surveillance information obtained from internally of the trust and also that gained from the HPA Health Protection Unit. This is inline with current NHS Emergency Planning Guidance.

- One of the initial actions of the Pandemic Flu Control team is to organise a rota to establish appropriate management cover over a 24/7 basis during the pandemic incident. It must also take into account the potential for sickness of the membership of the pandemic Flu Control Team and thus identify deputies as appropriate.

#### **6.4 WEST MIDLANDS AMBULANCE SERVICE TRUST**

- West Midlands Ambulance Service NHS Trust is responsible for developing organisational plans in conjunction with partner agencies to respond to an influenza pandemic and maintain business continuity.
- Plans will include: projected requirements for significant acute sector surge capacity, increased demand for specialist beds, patient transport, supporting the maintenance of patients in community settings, re-deploying staff at short notice, providing staff protection and strict infection control.

#### **6.5 PRIVATE HOSPITALS**

- The Nuffield Hospital in Leamington Spa has been approached to ascertain the support it could provide to the NHS during any influenza pandemic. The Nuffield would be subject to the same issues with loss of staff and the need to prioritise services as NHS hospitals. However, subject to future agreement it may be that the surgical capacity and expertise at the hospital could be used to ease the burden on acute trusts in the County to a limited extent.

#### **6.6 NHS DIRECT**

- NHS Direct is responsible for providing critical health advice and information to the public. However, during the event of the pandemic threat increasing, the Government will activate a single number national flu line as a source of general advice and information which will utilize the services of NHS Direct. That line will also provide a link

to the PCT health help-lines and automated access to local health assessment arrangements for symptomatic patients. Those who think that they have the flu will need to contact the flu line and will then be taken through an algorithm to see if they are entitled to anti viral treatment. People will have been asked to identify a “flu friend”, prior to any pandemic and these flu friends will then be asked to collect the anti virals from nominated centres using a Unique Reference Number (URN) provided by the National Flu Line.

### **6.7 Warwickshire Police**

- Warwickshire Police will initiate their own business continuity plans in the event of any outbreak and will prioritise services accordingly.
- In addition to their primary role of the maintenance of public order they will also provide advice for the security of anti viral medicine or vaccine in transit to designated locations and as part of the assessment of designated locations for the anti viral distribution centres.
- Police will assist with risk assessing and planning for contingencies relating to traffic management and public order issues that may arise at designated locations.

### **6.8 Local Authorities**

Local Authorities at County and District and Borough level will initiate their own business continuity plans in the event of any outbreak and will prioritise services accordingly. As well as maintaining the priority services they will respond to the pandemic influenza plans as follows

- Attendance at and support of the multi-agency pandemic flu group.
- Assistance with dissemination of health guidance and messages, at the local level. This is an extension of the infectious disease control work which we already liaise closely with the HPA on.
- Dealing with public health issues as they arise during a pandemic. (eg resolving drainage problems, pest control, food disposal where premises have closed, general refuse and accumulation issues)
- Dealing with excess deaths in the community. Currently we deal with ‘public health’ when relatives cannot be found to register deaths or pay for burials. There may be an increased need for this.

- Support at anti-viral distribution/vaccination centres where the PCT cannot provide sufficient cover.
- Assistance with gathering infectious disease control data and information, where required.

### **6.9 Warwickshire Fire and Rescue services**

- Warwickshire Fire and Rescue Service will initiate their own business continuity plans to enable the service to maintain essential cover for the County. Plans will take account of the need to prioritise emergency response when staffing may be considerably affected by the pandemic

### **6.10. Utilities**

- Major Utilities such as Gas, Electricity, Water and BT have their own contingency plans, which would be activated as required.

### **6.11 Voluntary Sector**

- Major emergencies can put a strain on resources of the NHS, Local Authorities and the emergency services. During such times additional support from organisations in the voluntary sector can be seen as invaluable

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## 7 COMMUNICATION

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### 7.1 Regional and Local Arrangements

All parts of the Health service in the region are expected to have their own emergency operations centres either up and running or on standby, depending on the Alert Level (i.e. at WHO level 6 and above). These centres will establish links into key partners and the combined health sector command and control structure so providing the health control, communication and coordination hubs across the region.

The West Midlands has an agreed control, communication and coordination system for mass casualty, regional impact, incidents. This system establishes a single group that can coordinate both the NHS operational and public health responses. Strategic command is provided via the West Midlands Emergency Response Arrangements (ERMA) made up of a level 3 cadre. This group will decide, by consultation at the time, when and where it will meet formally, but this will normally be at St Chads, Birmingham

Operating in support of this Strategic Health Cell, as well as the RCCC in its own right, is the Regional Health Pandemic Influenza Team, which incorporates the Scientific and Technical Advisory Cell (STAC), whose purpose is to provide (and interpret where necessary) expert public health advice that can be operationally applied to the deliberations of the RCCC and Strategic Health Cell. Supporting much of this activity is a health multi-agency regional communications plan which is coordinated via the HPA Communications Manager on behalf of all the regional SHA.

A communication plan has been developed for Warwickshire to respond to the challenge of a pandemic influenza. The document addresses Business continuity and recovery of communications and ensures consistency of messages to staff, patients and stakeholders through joint working with partner agencies. It provides

communication strategies for each phase of the pandemic and UK alert levels for internal and external communication with public and the media. It identifies spokes persons that will be used during the pandemic.

## **7.2 Joint Media Plan**

The Joint Media plan has been developed – section to be added.

## **7.3 Data Flows**

The Civil Contingencies Secretariat will require a frequent SITREP. These SITREPS will be reported to the Government through the Regional Government structures and in accordance to the pre determined battle rhythm identified in current guidance once the pandemic of influenza is declared.

The SITREP requirement and format is attached at Appendix

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## 8 BUSINESS CONTINUITY

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The Civil Contingencies Act 2004 imposes a statutory requirement on all Category 1 responders to have robust business continuity management arrangements in place to manage disruptions to the delivery of services.

The pandemic influenza will produce a disruption to services due to staff absences. The absences may be due to illness or for caring for family members affected by influenza.

Business continuity plans are being developed by all Category 1 & 2 organisations and others such as utilities and businesses. Organisations are pandemic influenza

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## 9 ANTIVIRAL DISTRIBUTION

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The Warwickshire Primary Care Trust has developed plans for managing the supply of antiviral medicines, including systems for monitoring the use of antiviral drugs. A number of collection points have been identified that meet the national basic requirement criteria set by the Department of Health. These collection points have been chosen in order to provide adequate 24 hours access and avoid queues and congestions.

Consideration is being given to staffing these collection points. Administrative staff employed by the PCT will be redirected from non essential work. In addition discussions are taking place with partner organisations about the possibility of redeploying their administrative staff. However it is also likely that a considerable numbers of 'new staff' may be employed on a temporary basis. Training will be provided to the collection point staff via short training guide provided nationally. Future work includes considering the security issues for these points, the provision of specific equipment for management of queues and crowds and signage of collection points.

In addition to 'public collection points' there will also be 'limited access collection points' to allow health care professional to access antivirals and for close communities. In addition home delivery options may also be considered in exceptional circumstances

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## 10 MASS VACCINATION

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A pandemic specific vaccine is likely to become available after four to six months, in the second wave of the pandemic. Therefore it is unlikely that a specific vaccine will contribute much to dealing with the initial wave of a pandemic but it is likely to be an effective intervention for subsequent waves should they occur.

Two doses will be required to provide adequate level of protection against a novel strain. It is expected that national guidance will be issued on the priority groups when the vaccine becomes available.

The national guidance indicates that primary care based model for population wide specific pandemic vaccination is the favoured approach for delivery of a specific pandemic vaccine. However an alternate would be the use of mass vaccination centres.

A mass vaccination operational plan has been developed for the mass vaccination of population. The plan is based on both these approaches and also the use of mobile teams. The plan details; the roles and responsibilities, considerations relating to attendee flow process and identification of attendees, equipment storage, transport arrangements and security issues.

This plan is a dynamic document that may have to be reviewed in line with the changes in the national policy.

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## **11 MANAGING EXCESS DEATHS**

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A pandemic of influenza is predicted to lead to a significant increase in the number of deaths across Warwickshire. This has the potential impact on several areas of health care as well as creating logistical problems around body storage, registrations, funeral arrangements, cremation and burials.

Warwickshire County Council is currently developing a plan that outlines the arrangements that will be undertaken in Warwickshire, for the provision and establishment of a temporary resilience mortuary following such an event where the number of fatalities is greater than normal local arrangements can manage. The aim of this plan is to provide information to facilitate the effective establishment and use of the Warwickshire Resilience Mortuary. The plan gives a process overview of handling mass fatality and addresses the following key areas: procedures for activation, detailed roles & responsibilities of agencies involved, call out lists, detailed action sheets, provision of resources and personnel to operate a resilience mortuary, adequate security and control procedures to prevent unauthorized access to the site, and health, safety and welfare (including aftercare) of persons employed or operating within the temporary mortuary. The plan is currently in a draft format and work is being undertaken to finalize it.

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## **12 APPENDICES**

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### **12.1 SCG considerations**

#### **12.1.1 Triggers for activation**

### **12.1.2 Frequency of meetings**

### **12.1.3 Membership**

### **12.1.4 Agenda for the SCG meeting**

1. Welcome
2. Introductions
3. Representation
4. Statement of purpose
5. General situation and Status reporting and assessment
6. Antiviral Medication
7. Home care and admission avoidance
8. Assisting vulnerable people
9. Surge capacity
10. Managing excess death
11. School Closure
12. Business continuity challenges
13. Sector updates
14. Communication
15. Communicating with the public and working with the media
16. Recovery
17. Battle rhythm SITREPS
18. Security, Confidentiality and information management
19. Future meetings

## 12.2 SITREP for Warwickshire Local Resilience Forum Strategic Coordination Group

	SITREP No:	
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Date: (dd-mm-yy)		Time: (24hrs)		:	
------------------	--	---------------	--	---	--

SCG Chair

Lead Official:	
----------------	--

Contact details:	Tel:	
	Fax:	
Availability:	Mobile	
	Email	

SCG Secretary

Alternate contact:	
--------------------	--

Operation Centre Contacts

Contact details:	Tel:	
	Fax:	
Availability:	Mobile	
	Email	

SCG Centre Contact Details

Contact details:	Tel:	
	Fax:	
Availability:	Mobile	
	Email	

Other Key  
Contact s  
GOWM

Contact details:	Tel:	
	Fax:	
Availability:	Mobile	
	Email	

Warwickshire  
County  
Council

Contact details:	Tel:	
	Fax:	
Availability:	Mobile	
	Email	

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## 12.2.1 Warwickshire STREP

### Contents

1	Departmental /Government Office Key Issues
2	Key Issues for CRIP- Common Recognised Information Picture
3	Current Issues
4	Operational response
5	Resources and readiness
6	Forward Look
7	Political policy
8	Media/communicating
9	Manpower and staffing issues
10	Other information not covered elsewhere
11	Information requirement/ request clarification
12	Background / overview
13	Next Sitrep
14	Contacts

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Provide the Cabinet Office /COBR Situation Cell and other agencies with key issues that Warwickshire SCG is currently dealing with or issues that require wider visibility or resources/assistance.

Also note any restrictions on report's distribution i.e. "for central government departments only."

### 1. Departmental / Government Office Key Issues

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Mark out

Restrict circulation of reports to central government only?

YES	NO
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### 2. Key Issues for CRIP-( Common Recognised Information Picture)

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### 3. Current Situation

<b>SERVICE</b>	Use Traffic Light System	Significant Impact	Impact but coping	Very small Impact
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>FUEL</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>OIL</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>GAS</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>ELECTRICITY</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>TELECOM NETWORKS</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>POSTAL SERVICES</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>POSTAL DISTRIBUTION</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>FOOD DISTRIBUTION</b>				
Provide details of shortages ,				

outages, panic buying, business continuity issues and projections going forward relating to <b>WATER</b>	
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>BROADCASTING AND PRINT MEDIA</b>	
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>WASTE MANAGEMENT</b>	

3. Current Situation (continued)

	Cremation	Funeral	Burials	Coroners	Registrar	Others
<b>Warwickshire county council</b>						
<p>Key Issues</p>						

3. Current Situation (continued)-ad hoc information on other issues and areas of concern

<b>SERVICE</b>	Use Traffic Light System	Significant Impact	Impact but coping	Very small Impact
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>TRANSPORTATION</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>TOURISM</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>ANIMAL HEALTH</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>JUDICIAL PROCESS</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>COMMUNITY COHESION</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>BUSINESS ISSUES</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>SOCIAL CARE/WELFARE/VULNERABLE GROUPS</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>MILITARY AID AND SUPPORT</b>				

3. Operational response-education

Warwickshire	Still open		Closed		Re-opened	
	Schools	Pupils	Schools	Pupils	Schools	Pupils
Primary						
Secondary						
Academy						
Special						
Independent						

Notes:1 Independent and non-maintained special schools should be recorded as 'special', not independent, 2 Middle schools deemed primary should be recorded as 'primary' and Middle schools deemed as 'secondary' as 'secondary', 3 PRU's should be recorded as 'secondary', 4 Nursery schools should be recorded in this table, but in that for early years an child care settings below ,5 This will require input from each local authority and collation by the GO.

3. Operational response (continued)-Early years and Childcare Settings

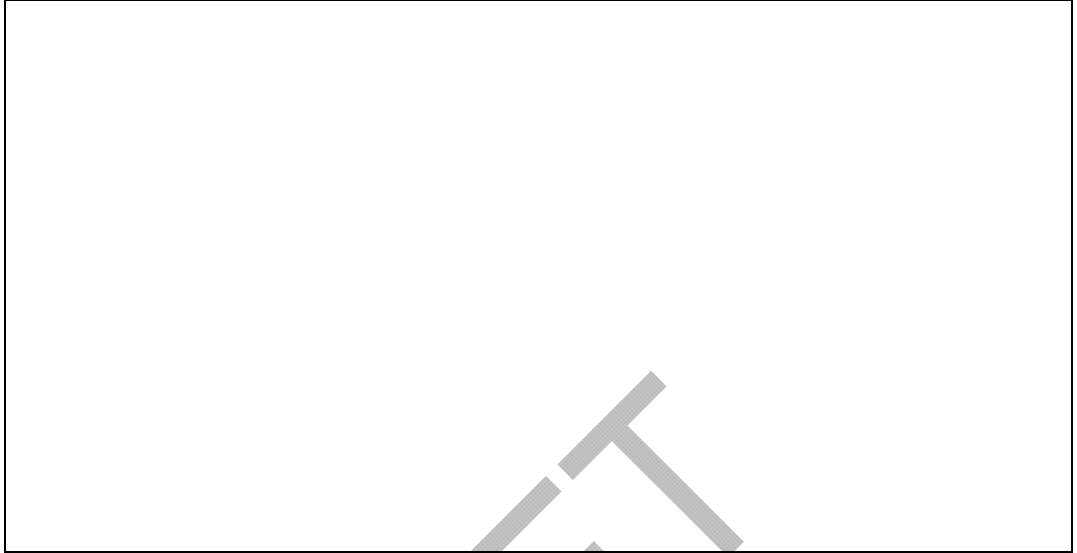
Local authority	No. of Settings still open	No. of Settings Closed	No. of Settings Re-opened
Warwick District Council			
Stratford Upon Avon District Council			
Nuneaton & Bedworth Borough Council			
North Warwickshire Borough Council			
Rugby Borough Council			

4. Operational response (continued)-ad hoc information on other issues and areas of concern

<b>SERVICE</b>	Use Traffic Light System	Significant Impact	Impact but coping	Very small Impact
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>TRANSPORTATION</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>TOURISM</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>ANIMAL HEALTH</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>JUDICIAL PROCESS</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>COMMUNITY COHESION</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>BUSINESS ISSUES</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>SOCIAL CARE/WELFARE/VULNERABLE GROUPS</b>				
Provide details of shortages , outages, panic buying, business continuity issues and projections going forward relating to <b>MILITARY AID AND SUPPORT</b>				

## 5. Resources and readiness

This section is used to provide the Cabinet Office /COBR Situation Cell and other agencies with any resourcing and readiness issues that Warwickshire SCG is currently dealing with or requires wider visibility.



A large, empty rectangular box intended for content related to resources and readiness. A large, light gray 'DRAFT' watermark is oriented diagonally across the page, partially overlapping this box.

## 6. Next steps/Forward look

This section is used to provide the Cabinet Office /COBR Situation Cell and other agencies with any resourcing and readiness issues that Warwickshire SCG is currently dealing with or requires wider visibility.



A large, empty rectangular box intended for content related to next steps and forward look. A large, light gray 'DRAFT' watermark is oriented diagonally across the page, partially overlapping this box.

## 7. Public Policy

This section is used to provide the Cabinet Office /COBR Situation Cell and other agencies with any resourcing and readiness issues that Warwickshire SCG is currently dealing with or requires wider visibility.

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## 8. Media and Communications

This section is used to provide the Cabinet Office /COBR Situation Cell and other agencies with any resourcing and readiness issues that Warwickshire SCG is currently dealing with or requires wider visibility.

Media coverage:
Media tone and current themes:
Key lines to take/public messages
Warning and informing public advice:
Ministerial/VIP visits
Good news
Forward look:
Other media issues:

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9. Human Resources and Staffing issues

Issues should be reported on exception basis: only where problems/significant issues arise

<b>Indicate RAG status by assigning appropriate colour to the comment row below. Issues impacts including changes to priorities and other counter measures</b>	
Warwickshire County council	R
	A
	G
Warwick District council	R
	A
	G
Stratford Upon Avon District council	R
	A
	G
Nuneaton & Bedworth Borough council	R
	A
	G
North Warwickshire Borough council	R
	A
	G
Rugby Borough council	R
	A
	G

10. Other information not covered elsewhere

This section is for providing other information that does not fit well elsewhere in the report

Empty box for providing other information not covered elsewhere in the report.

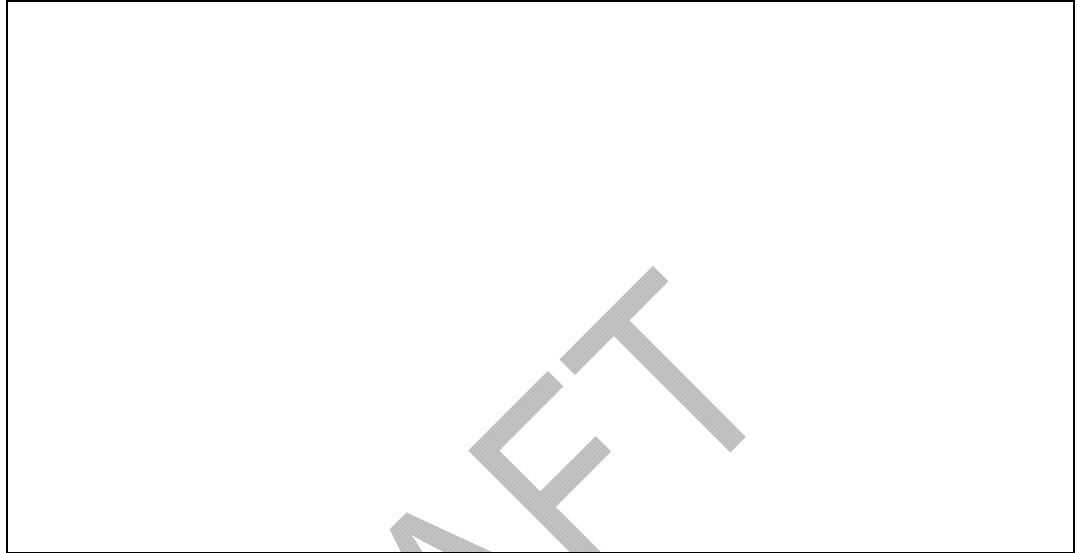
11. Information requirements/ request for clarification

This section is for seeking information or clarification from the Cabinet Office/ COBR Situation Cell or other agencies. Where the information or clarification would be sourced from the specific agency, this should be identified. This section does not negate to contact agencies directly but does not provide a record of requested information or matters for clarification.

Information requirements (PRIORITY)	
Requested clarification (PRIORITY)	
Information requirements (ROUTINE)	
Requested clarification (ROUTINE)	

12. Background/ overview

Use this section to provide Cabinet office/ COBR Situation Cell and agencies with any background details that would assist them in understanding the situation or specific key issues being reported



13. Next SITREP will be issued at

Provide an indication of when the next situation report is due. If it is the last report then this should be stated



14. Key Contact details- for 24 hour contact



















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## REFERENCES

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- 1 Department of Health and Health Protection Agency (2007) Pandemic influenza: Guidance
- 2 Cabinet Office, Civil Contingencies' Secretariat, *2007 Local Resilience Forum Guidance – Pandemic Influenza Planning*, 6<sup>th</sup> December 2007
- 3 Cabinet Office, Department of Health, *A national framework for responding to an influenza pandemic*, November 2007
- 4 Warwickshire Primary Care Trust 's Draft Pandemic Influenza Contingency Plan (v.1.2, updated Dec 2008)
- 5 Coventry and Warwickshire Mass Vaccination plan 2006

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