

**COFNOD O BENDERFYNIAD BRYG GAN O'R ARWEINYDD Y
CYNGOR, Y CYNGHORYDD A MORGAN**
RECORD OF URGENT DECISION OF THE LEADER OF THE
COUNCIL, COUNCILLOR A MORGAN.

Yn unol ag Adran 3A Ran 3 (paragraff 3) o Gyfansoddiad y Cyngor.

In accordance with Section 3A of Part 3 (paragraph 3) of the Council's Constitution.

Preparing for COVID 19

DIBEN YR ADRODDIAD | PURPOSE OF THE REPORT:

The purpose of the report is to set out the current emergency planning arrangements for COVID 19 at UK, Wales and locality levels and to set out the potential implications for Council services when the outbreak escalates and the action the Council should take.

The report has been prepared to accompany the intended Urgent Decision of the Leader of the Council in accordance with Section 3A (paragraph 3) of Part 3 of the Council's Constitution.

PENDERFYNIAD | DECISION:

Coronaviruses are a family of viruses ranging from the common cold to more severe acute respiratory illnesses such as MERS and SARS. COVID 19 is the illness seen in people infected with a new strain of coronavirus not previously seen in humans. On 31st December 2019, Chinese authorities notified the WHO of an outbreak of pneumonia in Wuhan City, which was later classified as a new disease, COVID 19. The main symptoms are a cough, high temperature and in severe cases, shortness of breath. As there is no immunity in the population and no vaccine or anti-viral medication, there is potential for the disease to spread extensively. The majority of people who become infected will experience a mild self-limiting illness, like seasonal flu. Some will show no symptoms at all. A proportion of those infected will develop complications and require hospital treatment, most often pneumonia. In a small proportion of these cases, the illness may be severe enough to lead to death.

There remains a great deal of uncertainty around the planning assumptions; however, has been assumed that:

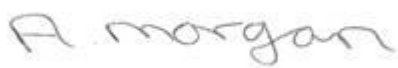
- People infected - 80% of the entire population.
- People showing symptoms -50% of infected population.

- Fatality Rate – 1% of those infected.
- New cases are expected to peak at around 11 weeks from the start of the epidemic.
- Demand for services likely to peak between 12-14 weeks.
- Considerable variation between UHBs based on local timings, size of the resident (and non-resident) population and proportion of vulnerable people population.
- Up to 20% of workforce may be absent from work during peak weeks.

Over the next few weeks it is predicted that the Council will have staff absences as a result of the Coronavirus of over 20%. We cannot continue to operate and provide our services under the existing model of operation with this level of absence. Significant changes will have to be made to the Council's services, curtailing some and stopping others, with the Council being focused on ensuring the most vulnerable people in our communities are supported.

To respond to this emergency, we will in all likelihood require staff to move to other locations and undertake other responsibilities, within their skill sets and legal restrictions, to ensure we can continue to maintain key services.

In addition to the specific measures outlined in paragraph 8.2 of the accompanying Officer Report to this decision and in the event of an emergency and urgent situation arising as a result of COVID 19 then, in respect of the exercise of Executive Functions as outlined in the Council's Constitution, and in the absence or unavailability of (1) the Leader or (2) the Deputy Leader, I delegate the power and responsibility of exercising such executive functions to the Chief Executive and the Senior Leadership Team to make decisions and undertake the actions required to ensure key services continue to operate, ensure the Council and its residents interests are protected and the operation of other services be suspended as may be necessary taking into consideration the potential implications of COVID 19.

 Llofnod yr Aelod o'r Cabinet / Cabinet Member's Signature	Andrew Morgan Priflythrennau /Print Name	18.03.20 Dyddiad / Date
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M. Webber.

18.03.20

DEPUTY LEADER

LLOFNOD YR AELOD YMGYNGHOROL O'R CABINET
CONSULTEE CABINET MEMBER SIGNATURE

DYDDIAD | DATE

M. Webber

18.03.20

LLOFNOD YMGYNGHORA'I'R PRIF WEITHREDWR
CHIEF EXECUTIVE CONSULTEE SIGNATURE

DYDDIAD | DATE

Gloria

18.03.20

CYFARWYDDWR Y GWASANAETHAU CYLLID A DIGIDOL
DIRECTOR OF FINANCE AND DIGITAL SERVICES (S151)

DYDDIAD | DATE

RHEOLAU'R WEITHDREFN GALW-I-MEWN | CALL IN PROCEDURE RULES.

A YW'R PENDERFYNIAD YN UN BRYN A HEB FOD YN DESTUN PROSES GALW-I-MEWN GAN Y PWYLLGOR TROSOLWG A CHRAFFU?:

IS THE DECISION DEEMED URGENT AND NOT SUBJECT TO CALL-IN BY THE OVERVIEW AND SCRUTINY COMMITTEE:

YDY | YES ✓ NAC YDY | NO

Rheswm dros fod yn fater brys | Reason for Urgency:

The position with Coronavirus is changing quickly and immediate decisions will have to be made to respond to the changing national, and local position.

Os yw'n cael ei ystyried yn fater brys - llofnod y Llywydd, y Dirprwy Lywydd neu Bennaeth y Gwasanaeth Cyflogedig yn cadarnhau cytundeb fod y penderfyniad arfaethedig yn rhesymol yn yr holl amgylchiadau iddo gael ei drin fel mater brys, yn unol â rheol gweithdrefn trosolwg a chraffu 17.2:

If deemed urgent - signature of Presiding Member or Deputy Presiding Member or Head of Paid Service confirming agreement that the proposed decision is reasonable in all the circumstances for it being treated as a matter of urgency, in accordance with the overview and scrutiny procedure rule 17.2:



18.03.20

.....
(Llywydd | Presiding Member)

.....
(Dyddiad | Date)

DS - Os yw hwn yn benderfyniad sy'n cael ei ail-ystyried yna does dim modd galw'r penderfyniad i mewn a bydd y penderfyniad yn dod i rym o'r dyddiad mae'r penderfyniad wedi'i lofnodi.

NB - If this is a reconsidered decision then the decision Cannot be Called In and the decision will take effect from the date the decision is signed.

AT DDEFNYDD Y SWYDDFA YN UNIG | FOR OFFICE USE ONLY

DYDDIADAU CYHOEDDI A GWEITHREDU | PUBLICATION & IMPLEMENTATION DATES

CYHOEDDI | PUBLICATION

Cyhoeddi ar Wefan y Cyngor | Publication on the Councils Website:- _____18.03.20_____

DYDDIAD | DATE

GWEITHREDU'R PENDERFYNIAD | IMPLEMENTATION OF THE DECISION

Nodwch: Fydd y penderfyniad hwn ddim yn dod i rym nac yn cael ei weithredu'n llawn nes cyn pen 3 diwrnod gwaith ar ôl ei gyhoeddi. Nod hyn yw ei alluogi i gael ei "Alw i Mewn" yn unol â Rheol 17.1, Rheolau Gweithdrefn Trosolwg a Chraffu.

Note: This decision will not come into force and may not be implemented until the expiry of 3 clear working days after its publication to enable it to be the subject to the Call-In Procedure in Rule 17.1 of the Overview and Scrutiny Procedure Rules.

Yn amodol ar y drefn "Galw i Mewn", caiff y penderfyniad ei roi ar waith ar / Subject to Call In the implementation date will be

N/A

DYDDIAD / DATE

WEDI'I GYMERADWYO I'W GYHOEDDI: ✓ | APPROVED FOR PUBLICATION :✓

RHONDDA CYNON TAF COUNTY BOROUGH COUNCIL

KEY DELEGATED DECISION

**REPORT TO ACCOMPANY AN URGENT DECISION OF THE LEADER OF THE
COUNCIL, COUNCILLOR A MORGAN**

18th MARCH 2020

PREPARING FOR COVID 19

Authors: Paul Mee, Director for Public Health, Protection & Community Services &
Chris Bradshaw, Chief Executive

1. PURPOSE OF THE REPORT

- 1.1 The purpose of the report is to set out the current emergency planning arrangements for COVID 19 at UK, Wales and locality levels and to set out the potential implications for Council services when the outbreak escalates and the action the Council should take.

2. RECOMMENDATIONS

It is recommended:

- 2.1 In addition to the specific measures outlined in paragraph 8.2 of the report and in the event of an emergency and urgent situation arising as a result of COVID 19 then, in respect of the exercise of Executive Functions as outlined in the Council's Constitution, and in the absence or unavailability of (1) the Leader or (2) the Deputy Leader, the Leader delegates the power and responsibility of exercising such executive functions to the Chief Executive and the Senior Leadership Team to make decisions and undertake the actions required to ensure key services continue to operate, ensure the Council, its residents and staff interests are protected and the operation of other services be suspended as may be necessary taking into consideration the potential implications of COVID 19.

3. REASONS FOR RECOMMENDATIONS

- 3.1 To ensure that the Council has robust arrangements in place in response to the current outbreak of COVID 19. To ensure that the Council is working effectively with the UHB and the Local Resilience Forum to provide a coordinated and coherent response. To protect and support the public and ensure services can respond to increased demand with a reduced workforce.

4. BACKGROUND

- 4.1 Coronaviruses are a family of viruses ranging from the common cold to more severe acute respiratory illnesses such as MERS and SARS. COVID 19 is the illness seen in people infected with a new strain of coronavirus not previously seen in humans.
- 4.2 On 31st December 2019, Chinese authorities notified the WHO of an outbreak of pneumonia in Wuhan City, which was later classified as a new disease, COVID 19. The main symptoms are a cough, high temperature and in severe cases, shortness of breath. As there is no immunity in the population and no vaccine or anti-viral medication, there is potential for the disease to spread extensively.
- 4.3 Indications are that the majority of people who become infected will experience a mild self-limiting illness, like seasonal flu. Some will show no symptoms at all. A proportion of those infected will develop complications and require hospital treatment, most often pneumonia. In a small proportion of these cases, the illness may be severe enough to lead to death.
- 4.4 The risk of death increases in older people and people with an underlying health risk condition or those who are immuno-compromised. Illness is less common and usually less severe in young people. Children can be affected but illness is rare in people under 20 years of age.

5. STRATEGIC PLANNING ARRANGEMENTS

- 5.1 There are a number of strategic planning documents:

Coronavirus: action plan; a guide to what you can expect across the UK.

- 5.2 The UK action plan published on the 3rd March 2020 sets out what the UK has already done, and plans to do further to tackle the Coronavirus outbreak. The objectives of the action plan are to contain, delay and mitigate the outbreak, using research to inform policy. The overall phases of the plan are:

Contain: detect early cases, follow up close contacts and prevent the disease spreading for as long as is reasonably possible.

Delay: slow the spread, lowering the peak impact.

Research: better understand the virus to plan and act to lessen its effect on the UK.

Mitigate: care for those who are ill, support hospitals and support people in the community to minimise the overall impact of the disease.

South Wales Local Resilience Forum Major Infectious Disease Framework

- 5.3 In a major infectious disease emergency, a Strategic Co-ordination Group (SCG) will be convened to consider the emergency in its wider context; determine longer term and wider impacts and risks with strategic implications; define and communicate the overarching strategy and objectives for the emergency response; establish the framework, policy and parameters for tactical and operational levels; and monitor the context, risks, impacts and progress towards defined objectives. South Wales Police will chair the SCG. A major infectious disease emergency is defined as an outbreak that overwhelms or has the potential to overwhelm normal arrangements and requires implementation of extra-ordinary control measures. The framework sets out key planning assumptions and response considerations for partner organisations.

Pandemic tactical plan for Cwm Taf Morgannwg University Health Board

- 5.4 Describes how partner agencies will work together to effectively respond to a pandemic flu incident in the Cwm Taf Morgannwg area. A Tactical (Silver) Group will be established as soon as an emerging pandemic is detected. This will be triggered by Public Health Wales. The Tactical (Silver) Group will be chaired by an Executive lead nominated by the Health Board's Chief Executive (normally the Director of Public Health). A local authority representative would be a core member of this group. Beneath this an Operational Group will be convened in accordance with the Cwm Taf Morgannwg Pandemic Operational Plan Framework. The Operational Group would coordinate with the tactical (Silver) Group to ensure that the risk to the organisation's ability to deliver services and respond to the demands of the pandemic are dynamically risk assessed and the response is escalated, resourced and staffed. A representative of Social Services would be a core member of this group.

6. PLANNING ASSUMPTIONS AND RESPONSE CONSIDERATIONS

- 6.1 There remains a great deal of uncertainty around the planning assumptions; however, the following reasonable worst case (RWC) scenario based on no behavioural interventions can be used to inform planning and response arrangements:
- People infected - 80% of the entire population.
 - People showing symptoms -50% of infected population.
 - Fatality Rate – 1% of those infected.
 - New cases are expected to peak at around 11 weeks from the start of the epidemic.
 - Demand for services likely to peak between 12-14 weeks.
 - Considerable variation between UHBs based on local timings, size of the resident (and non-resident) population and proportion of vulnerable people population.
 - Up to 20% of workforce may be absent from work during peak weeks.

7. DISCUSSION – WHAT DOES THE COUNCIL NEED TO CONSIDER?

Human Resources

7.1 The Council will need to consider the potential impact on its workforce:

Immediate Considerations

- The management of sickness.
- The management of absence/special leave (for example those self isolated and awaiting test results).
- The management of “at risk” groups (for example pregnant workers), and
- The return to work of employees who have travelled to category 1 and category 2 countries.
- Messages to staff on basic infection controls – hand washing, “catch it kill it bin it” etc.
- Ensuring front-line staff have the necessary PPE.

When the outbreak escalates

- The temporary secondment of staff into roles to support the emergency response.
- Staff welfare considerations including any dependents they may have.

Social Care

7.2 The Council will need to consider potential implications for Social Care:

Immediate Considerations

- Commissioned Services – check whether service providers have robust business continuity plans in place with regard to COVID 19.
- Continuity of Care - vulnerable people in supported living or otherwise supported in the community- establish a minimum level of essential support, put in place contingency plans to reduce services if necessary.
- Enhanced infection control measures in communal living arrangements such as residential homes, social care environments and supervised mental health residences.
- Social, community and residential care staff in contact with a person in self isolation, either as a suspected case or confirmed,
- Agree what are “essential” services that take priority over other services.

When the outbreak escalates

- Day care centres – consider closure of day care centres to limit spread amongst vulnerable groups.
- Informal Carers – impact on informal carers becoming ill.
- Early discharge from hospital, and to look after people in their own homes. People normally cared for in hospital may need to be cared for at home or in the community.
- Sustaining indirect care services – meals on wheels, community equipment and community alarm services,
- Increased demand for assessments and support alongside reduced capacity to deal with such circumstances. Deferring some assessments and prioritising others.
- People receiving specialist care – substance misuse, disability, children and older people.
- Business continuity – medicine distribution; identifying vulnerable people, maintaining essential services, impact of absentees, impact and disruption to society and supply chain

Schools

7.3 The Council will need to consider the potential implications for schools:

Immediate considerations

- The return to school of employees and pupils who have travelled to category 1 and category 2 countries.
- Enhanced infection control measures in schools – hand washing, “catch it kill it bin it” etc.

When the outbreak escalates

- School closures – either for infection control purposes or because of staff absences. Infection control may be undermined by children mixing socially outside schools.
- Due to caring responsibilities, the impact of parent’s absence from work particularly from essential roles within the Council.

Other Services

7.4 The Council will need to consider other potential implications for services:

Immediate considerations

- Use of Part IIA Orders under the Health Protection (Wales) Regulations to isolate, detain or require individuals to undergo medical examination.
- Information sharing arrangements.

- Communications and engagement – clear and consistent messages to the public and staff. Reinforcing the key messages and making sure everyone contributes to minimising the impact of the outbreak.

When the outbreak escalates

- Potential request to assist PHW with contact tracing for confirmed cases.
- Impact of other services being temporarily reduced due to staff absences, redeployment of staff.
- Excess deaths over a 15-week period, with half of them over three weeks at the height of the outbreak.

Social Interventions & Population Distancing

7.5 The Council will need to consider the potential implications of behavioural and social interventions including population-distancing strategies should the outbreak escalate:

- **Stopping large events such as concerts and sports,**
- **Closure of schools,**
- **Home isolation of symptomatic cases,**
- **Whole household isolation,**
- **Social distancing,**
- **Social distancing for those over 65 (nursing homes and households).**

7.6 These would be pivotal in delaying the peak of the epidemic and flattening its size, thereby having fewer people affected and lessening its impact

8 THE PROPOSED COUNCIL RESPONSE TO THE CORONAVIRUS

Social Interventions & Population Distancing

8.1 Over the next few weeks it is predicted that the Council will have staff absences as a result of the Coronavirus of over 20%. We cannot continue to operate and provide our services under the existing model with this level of absence. Therefore, in the week commencing 16th March 2020, we will implement the following:

- **Office based staff:**
 - The majority of staff with agile devices will be directed to work from home;
 - Any additional key staff that are identified as suitable to home-work they will be directed to home-work once the ICT device has been allocated;
 - Other staff will continue to be based in the office but spread out as part of 'social distancing' (supported on rota basis by a Snr Staff

member), and continue to provide day to day support to frontline services e.g. schools, which may still be open and running.

- **Social Care settings**

- Unless in an emergency, we will encourage family and friends to refrain from visiting the Council's residential homes to reduce the probability of the spread of the virus.

Changes to key frontline services

8.2 The Senior Leadership Team is seeking delegated powers to make temporary changes to frontline and other core services **that may become necessary**, as a result of the Council having to address issues and prioritise matters relating to COVID 19. This could include (but not be limited to) the following:

- **Waste Collection** – move to monthly collection of black bag waste, fortnightly collection of recyclables, and maintain food and nappy waste as weekly;
- **Street Cleansing** – a reduced service focused on litter and dog fouling bins and town centres but will vary depending on the number of staff available;
- **Fleet** – focused on HGVs only;
- **Highways** – emergency repairs only but will vary depending on the number of staff available;
- **Social Care – Adults** – The focus will be on prioritising and supporting the most vulnerable adults in the community, both in their own homes and residential homes, with a pressing need to support the Welsh NHS with the discharging of hospital patients – and the service will adopt the practices that it has deployed in previous winter whiteouts. The Service is seeking opportunities to bring in additional suitably qualified staff where possible to cover the inevitable staff absences. We will also have to consider closing day services and supporting vulnerable adults in their own homes such as those with learning disabilities in partnership with the independent home provider;
- **Meals on Wheels** – the service will have to prioritise the most vulnerable as directed by the Social Care team, and change the service to offer a weekly service of frozen/chilled meals;
- **Social Care – Children** – Safeguarding will continue to be the priority and sufficient capacity will be retained to deliver these responsibilities and those in the care homes. If possible we will continue to provide support to parents through the Resilient Families Service, the Disabled Children's Services, Miskin Project etc;
- **Schools** – a priority will be to keep schools open for the next few weeks until the Easter holidays, and then revisit during this period depending on the impact of the Coronavirus and the latest advice and guidance provided

to the Council. We recommend that schools relax the curriculum and the pupil/teacher ratios during the next few weeks, other than for KS4 & 5 pupils studying exams, and adopt a flexible approach with possibly some of the older more independent learners having access to digital learning from home;

- **Childcare Settings** – similar to schools, a priority will be to keep these settings open as long as possible to enable key workers in schools, healthcare, social care and similar priority services to be able to attend work;
- **Public Health & Protection** - will focus on the Coronavirus response, providing advice and guidance to services and exercising the Part 2 Orders as necessary, reallocating staff from other teams. The Registrar's Service will be prioritised to remain open. The Crematorium and Burial staffing will be a priority.
- **Housing & Homeless Services & Substance Misuse Services** – emergency service only to the most vulnerable, unless staffing resources allow for a more comprehensive service;
- **Libraries** – With only two staff in each library, over the next few weeks it is likely that we will only be able to offer a reduced service focused on fewer sites which will operate as Hubs in terms of community response;
- **Leisure Centres** – Limited service dependent on staff availability – potentially reduced service focused on Llantrisant, Aberdare and Rhondda Fawr Sports Centres. It may be necessary to close all leisure centres in the future;
- **Parks and Playgrounds** – we will try and keep as many of these open as possible but maintenance will be on an emergency basis only;
- **Theatres and Tourism Attractions** – these will remain open in line with the advice of the UK Government in terms of crowds in public spaces, to determine whether we close or not. This will be kept under review on a daily basis;
- **Public Toilets** – these may need to be closed due to the lack of capacity to clean the toilets;
- **Legal Services & Coroner's Service** – we will seek to provide additional administrative capacity for the Coroner's Service, and ensure continuity of support in respect of Community and Children's Services and other urgent matters;
- **Corporate Estates** – emergency response only but vary depending on the number of staff available;
- **ICT** – This is an essential service and we will look to maintain this by some staff working remotely and in different locations;
- **Contact Centre & Communications** – these services will be maintained using a reduced staffing compliment and moving staff from other services to maintain a limited service that only responds to essential and urgent calls;

- **Procurement** – ensuring that essential supplies and services continue to be provided to support frontline provision to our residents.
 - **Finance & HR** – where possible staff will work from home, and we will prioritise the Benefits Service, along with Payroll, Revenues etc.
- 8.3 To respond to this emergency, we will in all likelihood require staff to move to other locations and undertake other responsibilities, within their skill sets and legal restrictions, to ensure we can continue to maintain key services.
- 8.4 In addition to those specific measures outlined in paragraph 8.2 above and in the event of an emergency and urgent situation arising as a result of COVID 19 then, in respect of the exercise of Executive Functions as outlined in the Council’s Constitution, and in the absence or unavailability of (1) the Leader or (2) the Deputy Leader it is recommended the Leader delegates the power and responsibility of exercising such executive functions to the Chief Executive and the Senior Leadership Team to make decisions and undertake the actions required to ensure key services continue to operate based on the services’ business continuity plans, ensure the Council and its residents interests are protected and the operation of other services be suspended as may be necessary taking into consideration the potential implications of COVID 19.
- 8.5 It should also be noted that under Part 3 (Section 5) of the Council’s Constitution which concerns the General Scheme of Delegation to Officers the following applies:

“The Chief Executive shall be entitled to exercise any functions otherwise delegated to a Chief Officer in the event of that officer’s absence or refusal to exercise specific delegated powers or in an emergency. “

“Where a decision is required urgently in order to protect the interests of the Council or to prevent or reduce the risk of damage to persons or property, the Chief Executive, any Chief Officer or any individual Cabinet Member in respect of functions within his/her portfolio and in consultation with the Chief Executive or a Chief Officer may take such a decision.”

CONCLUSIONS

- 9.1 At the moment, most of the responsibility for the response to Coronavirus rests with the UK Government, Welsh Government and Health Services and this is likely to remain the case until the Council triggers the next stage of the emergency planning arrangements described in this report. In such circumstances the Council will have a critical role in working with the UHB and to ensure our essential services continue to be provided to the most vulnerable in our communities.

9.2 Therefore, the Council needs to put in place the necessary plans to effectively respond to the potential impacts of COVID 19, continue to deliver essential services and protect local communities and our staff. It is impossible to plan for every eventuality, but this report seeks to provide officers with the flexibility and the delegated powers to respond to every situation.