



Cardiff and Vale of Glamorgan COVID-19 Prevention and Response Plan

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Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board



Iechyd Cyhoeddus
Cymru
Public Health
Wales



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1.0 Introduction

The Cardiff and Vale of Glamorgan COVID-19 Prevention and Response Plan, published in September 2020, set out an effective Test, Trace and Protect (TTP) response for the region.

The Plan was developed in response to a joint letter from the Welsh Government Chief Medical Officer/ Medical Director NHS Wales, Director General Health and Social Services/ NHS Wales Chief Executive and Director, Local Government. The letter made clear the need to prevent the spread of COVID-19 and lead an effective response, across a variety of settings, with an emphasis on integrated planning, shared delivery and joined-up communications. A letter requesting updated versions of this plan was received from the Welsh Government Chief Medical Officer/Medical Director NHS Wales and Director General Covid Crisis Coordination in May 2021.

The Plan has been updated for 2021/22, to reflect the rapidly evolving nature of the current environment and the changing requirements of an effective response to COVID-19. The Plan sets out some of the major achievements over the past year, provides an update on the governance arrangements and reasserts the local planning and decision-making principles. The Plan also considers the priorities for preventing and responding to COVID-19 in the year ahead, and includes a refreshed action plan of proposed developments to further enhance the regional response. The Plan is consistent with the three interdependent purposes articulated within Welsh Government's (draft) Trace and Protect Strategy: to **Identify, Interrupt** (and Protect) and **Provide Insight**. It has also been cross-checked with the guidance for Revising Local COVID-19 Prevention and Response Plans, issued by Welsh Government and Public Health Wales (dated 2/5/21, issued 10/5/21).

The updated Plan continues to cover the Cardiff and Vale University Health Board area, and has been developed with the full involvement of all public service partners. It has been agreed and adopted by Cardiff and Vale University Health Board, as well as Cardiff Council and the Vale of Glamorgan Council. It will be reviewed regularly at the Regional Test, Trace and Protect (TTP) Operational Board to provide assurance of implementation and ensure it is updated in response to developing regional issues.



2.0 Major Achievements in 2020/21

Delivery arrangements across the Cardiff and Vale of Glamorgan region have been characterised by an unprecedented level of partnership working, with effective response arrangements established at pace and scale. This has brought into sharp focus both the strategic problem solving capabilities of the region's Public Service Partners, as well as their mobilising and convening capacity to ensure effective operational delivery.

Some of the major achievements of the last year are summarised below:

Test: A Comprehensive Testing Regime which could be adapted and scaled to meet local need.

- During 2020, 203,740 tests were undertaken in Cardiff and the Vale of Glamorgan
- Community Testing Units (CTUs) and Mobile Testing Facilities were deployed to support outbreak management. These were expanded to support continued testing over the winter period.
- Walk through centres were established to meet local need and home visits also arranged where necessary. In September 2020, 'Pop up' sampling facilities were piloted for those individuals who do not have access to transport.
- Staff antibody testing was undertaken across all schools in Cardiff and the Vale of Glamorgan, as well as across key workers in health and identified social care facilities. Antibody testing was also delivered to key workers within identified social care facilities.
- Staffing resources were managed effectively to ensure that testing capacity could meet local demand. The commitment, resilience and adaptability of staff has been crucial in responding to the first and second wave.
- Asymptomatic Lateral Flow Device (LFD) testing has been implemented in social care, health care and schools.

Trace: A highly effective Tracing Service and Surveillance System has been established.

- We have trained a team of experienced contact tracers and advisors. This includes a team of Super Tracers who have developed additional expertise in tracing more complex settings such as schools, university settings and houses of multiple occupation, and support the investigation of clusters and cases of concern.
- An incoming call team has been established, to help and support citizens with local level Test, Trace and Protect (TTP) queries. Channels of contact include email, webchat and telephone.
- Plans and processes have been enhanced to prevent, mitigate and control spread in all high risk places and sectors, drawing on both local knowledge and intelligence, and the Wales COVID-19 Risk Assessment undertaken by military liaison officers. Multiple partners are involved in addressing this via a daily (weekday) review of cases, including both Cardiff and Vale of Glamorgan Councils, Cardiff and the Vale of Glamorgan's Shared Regulatory Service (SRS), Local Public Health Team (UHB/PHW), PHW specialist health protection, Cardiff and Vale University Health Board, as well as other contributors as necessary, such as Higher Education/ Further Education sectors.
- A population level surveillance dashboard has been established, with a set of indicators shared across partners. The indicators provide an important overview of the pandemic and its impact on clinical pathways, services and key population groups.
- A robust process has been established for identifying workplace, school, healthcare, social care and student clusters, to ensure timely response and intervention.
- A mapping tool has been developed to geographically visualise new cases and potential clusters, based on live data from the National Customer Relationship Manager system (CRM). This includes rates at ward and primary care cluster level, and identification of workplace and residential clusters, providing early warning of rising case rates and/or settings of concern.

Protect: Robust arrangements are in place to ensure that the population of Cardiff and the Vale of Glamorgan is protected and supported.

- Support functions were rapidly established for those that are vulnerable, isolating or shielding, enabling immediate issues relating to the availability of food and medication, as well as other support needs, to be addressed.
- Telephone lines dedicated to providing residents with help and support were ramped up, with Cardiff Council staff receiving over 41,000 calls in 2020. This compares to 4,670 calls being received in 2019. Vale of Glamorgan Council staff also witnessed a surge, with 1,360 extra calls being taken on the newly established Vale Heroes support line in 2020.
- In 2020, 6,405 food parcels were delivered to vulnerable residents in the Vale of Glamorgan, whilst 7,143 parcels were delivered in Cardiff.
- Effective support mechanisms were put in place for the homeless population. Two hotels were leased and established as homeless hostels with 24 hour support staff on site. Two sites were also set up as isolation units, so that homeless people could be effectively isolated whilst still meeting their needs.
- Mass Vaccination has been established across Cardiff and the Vale of Glamorgan. The first and second milestones have been achieved and we are on track to deliver the third much earlier than planned (see section 3.3).

Communication and Engagement: The success of the Test, Trace and Protect Service is dependent upon the effectiveness of communication and engagement.

- Effective use of social media and community engagement practices – building on the communications and engagement capacity of all partners – has ensured residents are provided with the latest and most accurate information.
- Targeted engagement work has been undertaken to effectively engage with hard to reach communities. An Ethnic Minority COVID-19 Operations Sub-group has been established, as well as a communications and engagement strategy.



3.0 Strategic Aims, Objectives and Targets for 2021/22

● 3.1 Strategic Aim

To deliver an effective and proportionate Test, Trace and Protect Service in order to minimise harm from the COVID-19 pandemic and safeguard public health in Cardiff and the Vale of Glamorgan.

● 3.2 Objectives

We will achieve this aim by:

- 1 Ensuring the Test, Trace and Protect Service can meet local need.
- 2 Ensuring capacity exists to offer testing to all people identified as possible COVID-19 cases or who present a high risk of transmission to vulnerable persons, in line with the Testing Strategy for Wales¹.
- 3 Ensuring that local contact tracing teams are scalable and can respond rapidly to fluctuations in demand.
- 4 Continuing to support and protect any vulnerable individuals and groups, including those who are self-isolating or requested to shield.
- 5 Ensuring that accurate and timely data and intelligence is used to inform a timely and effective response.
- 6 Efficiently and effectively delivering a mass vaccination programme across Cardiff and the Vale of Glamorgan, in accordance with national guidance on priority groups², the COVID-19 Vaccination Strategy³ and the developing evidence base.
- 7 Using the resources above, and as a partnership under the direction of the Regional Incident Management Team (IMT), we will adopt a 'toolkit' approach to respond to risks, incidents or changes in circumstance that affect the population of Cardiff and the Vale of Glamorgan.

● 3.3 Mass Vaccination Targets

We are aiming to meet or exceed the nationally set vaccination targets.

We achieved the first milestone in our Mass Vaccination Plan in February 2021 – to offer a vaccine to everyone in the first four priority groups:

- Everyone over 70
- All frontline health and social care workers
- Everyone living or working in older people's care homes
- Everyone who is clinically extremely vulnerable

We achieved the second milestone, to offer a vaccine to everyone in priority groups 5 to 9, on 19 April 2021:

- Everyone aged 50 to 69
- Everyone over 16 with an underlying health condition, which puts them at increased clinical risk of serious illness with COVID-19, including some people with learning disabilities and with severe mental illness.
- Many invaluable unpaid carers who provide care for someone who is clinically vulnerable to COVID-19.

We have vaccinated nearly 50% of the rest of the eligible adult population and we are on track to complete our third milestone, offering a vaccine to all 18-49 year olds, by the end of June 2021.

The uptake target is 80% for each priority group.

¹ Covid-19 Testing Strategy: <https://gov.wales/covid-19-testing-strategy>

² We are following the Joint Committee for Vaccination and Immunisation (JCVI) priority groups.

³ COVID-19 Vaccination Strategy: <https://gov.wales/covid-19-vaccination-strategy-and-updates>

4.0 Principles and Planning Assumptions

● 4.1 Principles

In July 2020, Welsh Government and Public Health Wales jointly issued guidance for developing local COVID-19 Prevention and Response Plans. The guidance set out an approach for allowing local action within a national framework, with local plans delivering a system-wide approach in the context of Welsh Government's National COVID-19 Public Health Escalation and Response Plan. The National Plan emphasised 6 principles to support the effective implementation of a local system within a national context. These have been fully adopted within this Plan, alongside a further 4 locally determined principles:

- 1 Our primary responsibility is to make the public safe.
- 2 We will build on public health expertise and use a systems approach.
- 3 We will be open with data and insight so everyone can protect themselves and others.
- 4 We will build consensus between decision-makers to secure trust, confidence and consent.
- 5 We will follow well-established communicable disease control and emergency management principles.
- 6 We will consider equality, economic, social and health-related impacts of decisions.
- 7 We will continue to deliver all aspects of Test, Trace and Protect at a level that responds to the needs of the population of Cardiff and the Vale of Glamorgan, in order to minimise the harms caused by the COVID-19 pandemic.
- 8 We will continue to work in robust partnership at the regional level, with key decisions, including those of prioritisation, made collectively by regional partners.
- 9 Our governance structures will reflect and support this collective regional ownership and decision-making.
- 10 We will continue to work collaboratively and constructively with national partners, including Welsh Government and Public Health Wales.

Guidance for revising Local COVID-19 Prevention and Response Plans was issued in May 2021. This plan is consistent with this updated guidance.

● 4.2 Planning Assumptions

It is anticipated that:

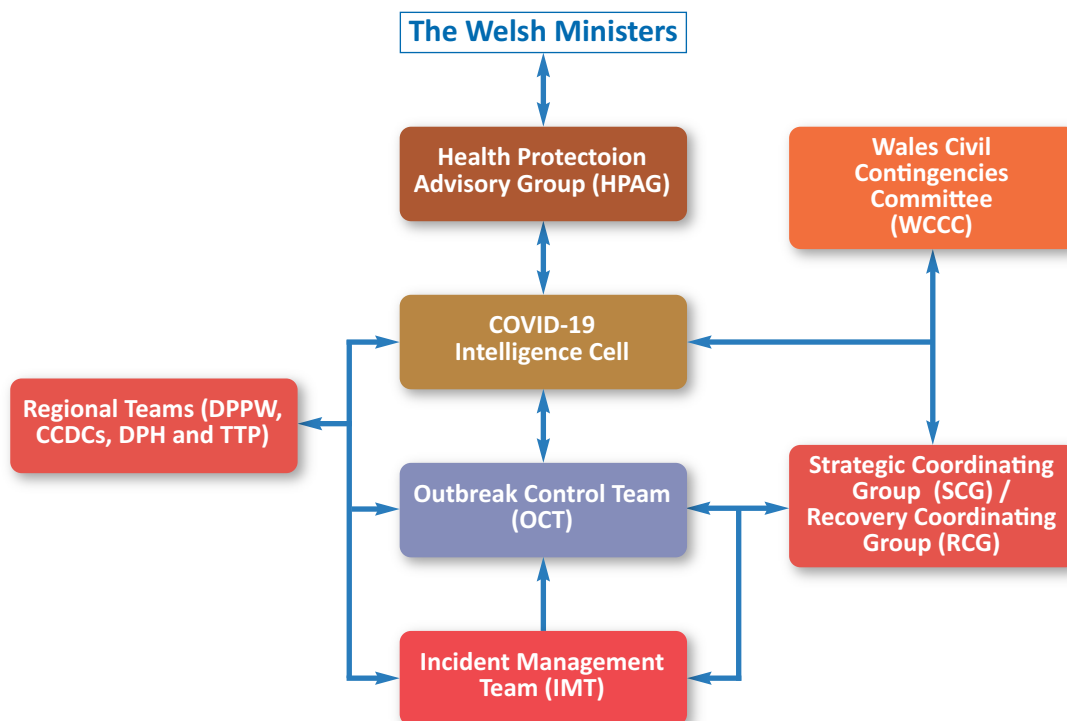
- The Test, Trace and Protect Service will remain fully operational for at least the 2021/22 financial year.
- Components of the Test, Trace and Protect Service may need to be rapidly enhanced in response to the incidence of COVID-19 in the population.
- The Test function will remain relatively consistent during the year.
- The Trace function will need to be appropriately scaled in response to local case rates.
- The Protect function will need to be mobilised quickly where it is necessary to support vulnerable individuals and groups.
- The vaccination programme will require two doses to be administered to the population with a possible booster in the autumn. Over the longer term, it is anticipated that a COVID-19 vaccine will become part of a rolling/routine vaccination programme.
- The Welsh Government funding arrangement will remain consistent with the arrangements to date, and all costs associated with the service will be recorded using established accounting practices.

5.0 National Context

The Coronavirus Control Plan for Wales⁴ sets out the national approach to managing the risks of coronavirus, based on the principles of caution, proportionality and subsidiarity. A well-established set of governance and decision-making arrangements are in place, as shown in figure 1, which sets out the core decision-making structures for responding to incidents and outbreaks as they are escalated. These arrangements align with The Communicable Disease Outbreak Plan for Wales⁵ (CDO Plan). The principle of subsidiarity means that decisions should be taken at the most effective level – the approach across Wales to preventing the spread of coronavirus in the first place aims to avoid the need to escalate into these decision-making structures if possible.

Communication and information sharing happens between all levels; each Health Board area includes a Strategic Regional Test, Trace and Protect Oversight Group to provide situational awareness on emerging clusters and outbreaks to key partners and the COVID-19 Intelligence Cell.

Figure 1: Coronavirus Control Plan for Wales Governance



⁴ Coronavirus Control Plan for Wales: <https://gov.wales/coronavirus-control-plan-revised-alert-levels-wales-march-2021>

⁵ The Communicable Disease Outbreak Plan for Wales (CDO Plan) sets out arrangements for managing all outbreaks of communicable disease in Wales. This is the model for all outbreaks led by or within Wales: <http://www.wales.nhs.uk/sites3/docmetadata.cfm?orgid=457&id=255613>



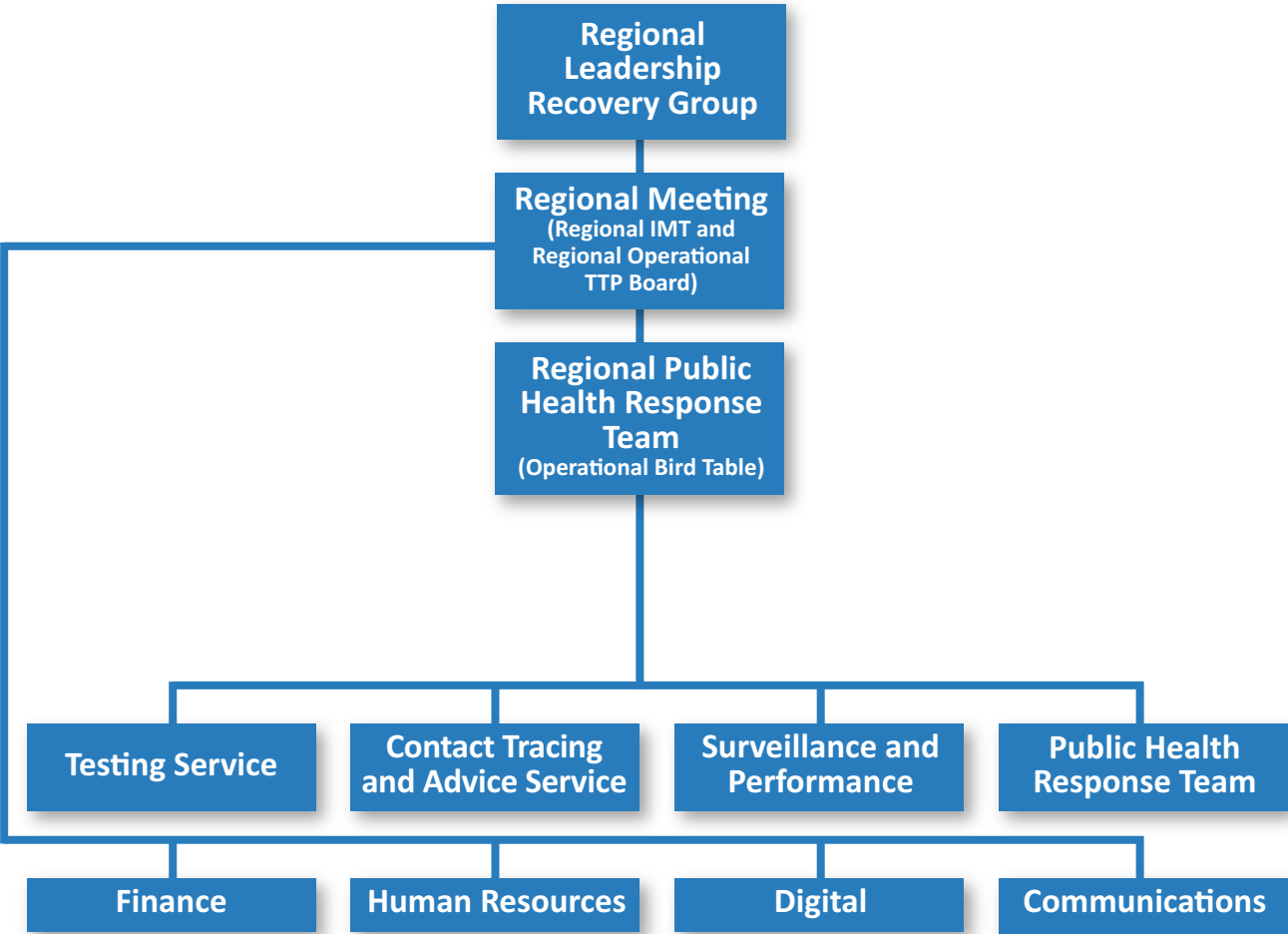
The work programme of the Cardiff and Vale of Glamorgan Test, Trace and Protect Service, set out in this Prevention and Response Plan, aligns with the ‘Regional Teams’ section of figure 1.

6.0 Regional Planning and Response

6.1 Governance Structures and Escalation Mechanisms

The governance structure described in figure 2 has been revised to oversee implementation and delivery of the Test, Trace and Protect (TTP) Service within Cardiff and the Vale of Glamorgan as we move in to recovery. It continues to include strategic and operational elements, and identifies four key operational functions.

Figure 2: Cardiff and the Vale of Glamorgan Test, Trace and Protect Governance Arrangements



A list of named leads and their key responsibilities can be found at Appendix 1.

6.1.1 Regional Leadership Recovery Group

The Regional Leadership Recovery Group will replace the previous Senior Leadership Group, and will act both as a regional leadership mechanism and as a sub-regional mechanism for the South Wales Local Resilience Forum Recovery Group. The Regional Leadership Recovery Group meets regularly and is chaired by the CEO of the Cardiff and Vale University Health Board. Membership includes the Leaders of Cardiff Council and the Vale of Glamorgan Council, as well as senior executive leadership from: Cardiff and Vale University of Wales Health Board; Cardiff Council; Vale of Glamorgan Council; and South Wales Police.

The Group makes key decisions based on recommendations from the Incident Management Team, and to guide and implement Test, Trace and Protect (TTP) in Cardiff and the Vale of Glamorgan. It updates the following stakeholders on the implementation and operation of the Plan:

- The Cardiff Public Services Board
- The Vale of Glamorgan Public Services Board
- The Regional Partnership Board
- The Welsh Government, through the national TTP partnership infrastructure

The Leaders of Cardiff Council and the Vale of Glamorgan Council ensure direct political representation and oversight within the TTP Governance Arrangements. Local arrangements, determined by each local authority, are also in place to ensure the Executive (Cabinet) for both local authorities are updated on operational issues and participate as necessary in any decision-making.

● 6.1.2 Regional Meeting

Regional Meetings are held regularly, at a frequency determined by the incident case rates (see section 7 for more detail of escalation and de-escalation thresholds). Two distinct functions are recognised. In view of the cross-over in membership and for the purpose of efficiency, these are currently organised as a single meeting with two separate sections, but could return to separate groups if required:

1 | **Regional Incident Management Team (IMT)**

Regional Incident Management Team (IMT) was first established in September 2020, in response to a rise in local case rates, in accordance with the Coronavirus Control Plan for Wales⁴ and the Communicable Disease Outbreak Plan for Wales⁵ (CDO Plan). It is chaired by the Executive Director of Public Health (DPH) and is responsible for reviewing local disease activity and agreeing elements of the strategic regional response to COVID-19. It also provides recommendations for national level action to Welsh Government.

Regional IMT membership includes Lead Officers from the two Local Authorities, the Test, Trace and Protect Service, Shared Regulatory Services (SRS), including the Director of Public Protection (DPP), South Wales Police, Higher Education/Further Education, as well as Public Health Wales, including the Communicable Disease Control Consultant (CCDC) and Microbiologist.

2 | **Regional Operational Test, Trace, Protect (TTP) Board**

Regional Operational TTP Board is responsible for overseeing all aspects of the delivery of the agreed Operational Plan. It is chaired by the Corporate Director of People and Communities from Cardiff Council, and brings together Lead Officers for each of the four regional operational functions – **Testing Service; Contact Tracing and Advice Service; Surveillance and Performance; and Public Health Response Team** – as well as the leads for the following cross cutting functions: **Finance, Human Resources, Digital and Communications**.

The Board receives exception reports from each of the four operational functions, as well as the four cross cutting areas. Key operational decisions are made by this forum, along with scrutiny of surveillance and performance data.

⁴ Coronavirus Control Plan for Wales: <https://gov.wales/coronavirus-control-plan-revised-alert-levels-wales-march-2021>

⁵ The Communicable Disease Outbreak Plan for Wales (CDO Plan) sets out arrangements for managing all outbreaks of communicable disease in Wales. This is the model for all outbreaks led by or within Wales: <http://www.wales.nhs.uk/sites3/docmetadata.cfm?orgid=457&id=255613>



● 6.1.3 Regional Public Health Response Team (Operational Bird Table)

The Operational Bird Table brings together leads from each of the four regional operational functions of the Regional Operational TTP Board on a daily basis (weekdays), including specialist Health Protection provided by the CCDC. It is chaired by the DPP. The membership also aligns with CDO Plan5, with representation from DPH, DPP and CCDC (or deputies). The group reviews new case activity, along with any new or ongoing incidents, and mitigation action is agreed. The daily meetings are also able to identify trends and population level risks, which in turn provides intelligence to inform Regional IMT and Regional Operational TTP Board.

● 6.1.4 Operational Functions of the Regional Operational Test, Trace, Protect (TTP) Board

- **Testing Service:** co-ordinates and delivers the regional testing mechanisms, and works to ensure integration of regional and national systems. This is led by Cardiff and Vale University Health Board on behalf of the partnership.
- **Contact Tracing and Advice Service:** includes the delivery of the Cardiff and Vale Contact Tracing Service, as well as escalation of complex cases and clusters to the Regional Public Health Response Team. This service is hosted and led by Cardiff Council on behalf of the partnership.
- **Surveillance and Performance:** provides regional surveillance dashboards, national surveillance outputs, data and intelligence reports as requested, and key messages for partner organisations and specific operational groups. A Regional Information Group (RIG) meets regularly over Teams with data leads from Cardiff Council, Vale of Glamorgan Council, Cardiff and Vale University Health Board, and the Local Public Health Team.
- **Public Health Response Team:** this multiagency team provides advice, guidance and oversight to a range of settings, and oversees the management of complex cases, settings and clusters, including potential Variants of Concern (VOC)/Variants Under Investigation (VUI). A Regional Standard Operating Procedure (SOP) has been developed and is continually updated, which details how issues are escalated, including to the national level where required.

● 6.2 Regional Response to an Outbreak

An outbreak within the Cardiff and Vale region would require a coordinated partnership response. It is therefore important that the response is led regionally, working closely and collaboratively with specialist health protection, Public Health Wales and Welsh Government, following the procedures described in the Communicable Disease Outbreak Plan for Wales (CDO Plan)⁵.

Smaller clusters are generally managed via the Operational Bird Table, with larger or more complex clusters requiring a dedicated cluster or incident management team meeting. However, in the event of an outbreak, an **Outbreak Control Team (OCT)** would be established, the role of which is to facilitate collaborative working and arrangement between organisations. Core members of the OCT are set out in section 2.1 of the CDO Plan5, and they are responsible for declaring an outbreak. The membership of the Operational Bird Table and IMTs mirror the required membership of an OCT.

Cardiff and Vale of Glamorgan Councils have Outbreak Plans and Lead Officers for Communicable Disease that are part of Shared Regulatory Services (SRS).

Depending on the nature of the incident, it may be necessary to activate emergency response plans.

⁵ The Communicable Disease Outbreak Plan for Wales (CDO Plan) sets out arrangements for managing all outbreaks of communicable disease in Wales. This is the model for all outbreaks led by or within Wales: <http://www.wales.nhs.uk/sites3/docmetadata.cfm?orgid=457&id=255613>



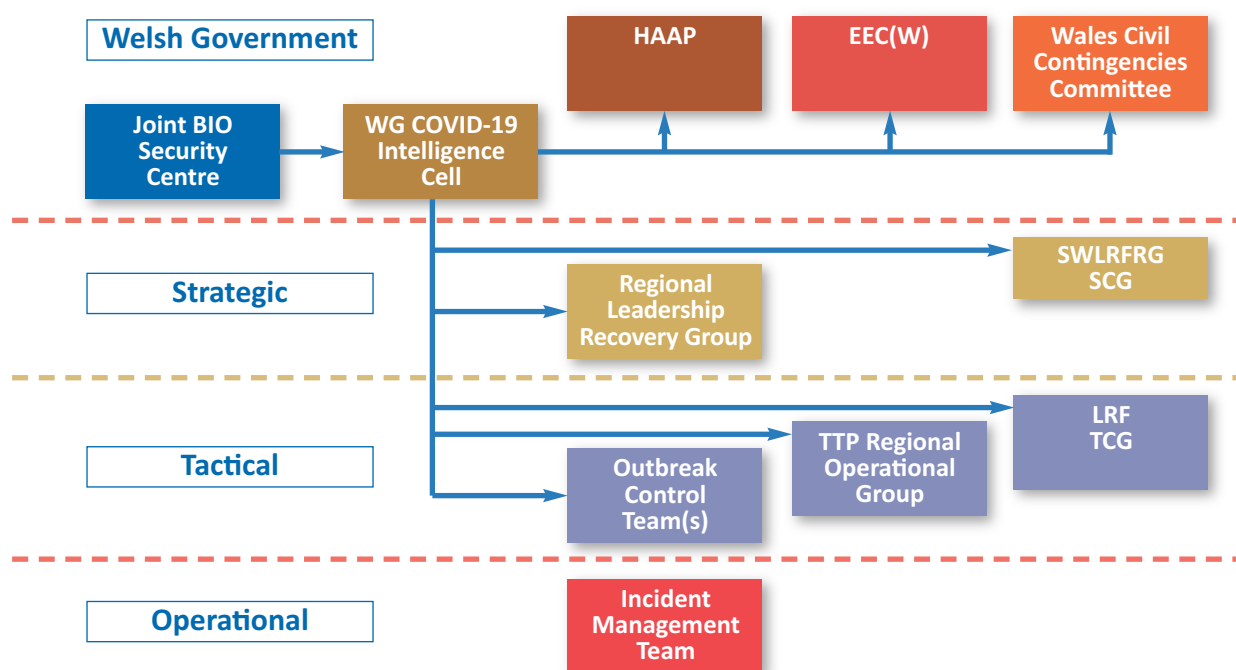
● 6.3 Escalation Beyond the Regional Response

As we move to the recovery phase, the need for escalation beyond the regional response to multi-agency civil contingency structures, through the South Wales Local Resilience Forum Recovery Group (SWLRFRG) and associated national structures, would be agreed by Regional IMT and Regional Leadership Recovery Group.

Any multi-agency response will be initiated through the SWLRFRG, which will invoke the Strategic Coordination Group (SCG) as necessary.

Close working will take place between any regional Outbreak Control Teams (OCTs) established at that time and the SWLRFRG SCG. Such an escalation is covered in Part 7 of the CDO Plan⁵. This escalation process is outlined in figure 3.

Figure 3: Escalation process for Cardiff and Vale region



⁵ The Communicable Disease Outbreak Plan for Wales (CDO Plan) sets out arrangements for managing all outbreaks of communicable disease in Wales. This is the model for all outbreaks led by or within Wales: <http://www.wales.nhs.uk/sites3/docmetadata.cfm?orgid=457&id=255613>



7.0 Escalation and De-escalation Thresholds for Regional Arrangements

Regional surveillance and oversight arrangements for COVID-19 have been reviewed based on learning from the second wave of coronavirus in winter 2020/21. This is to ensure that the prevention and response arrangements are commensurate and appropriate with the level of threat posed by COVID-19. For this reason, an escalation and de-escalation approach has been developed, in line with data surveillance thresholds agreed by Regional IMT and Senior Leadership Group, as well as Regional Information Group.

These thresholds will be applied pragmatically; for example, if there are regular small fluctuations in the case rate then arrangements will continue to follow those appropriate to the highest recent rate, until a stable lower rate is achieved.

Escalation can also be triggered at the request of Regional IMT, Senior Leadership Group or Regional Operational TTP Board. This may be, for example, in anticipation of a predictable upcoming event which may increase rates, such as students returning to Cardiff.

● 7.1 Overview of the Current Regional Surveillance Approach

Since June 2020, the Cardiff and Vale of Glamorgan Region have operated a two-level surveillance system within Cardiff and Vale, with each level complementing the other. This consists of a population-level tier, and an individual case and cluster tier, shown below:

Individual case and cluster review and management

Operational Bird Table Meetings

- In-depth confidential review of individual cases and clusters
- Multi-professional membership
- Meets daily during week
- Good for picking up trends and exposure risks at lower case rates

Population surveillance dashboard

- Population-level trends
- Data collated by colleagues across the partnership, shared widely
- Weekly updates during second wave
- Good for picking up trends and impacts at higher case rates

Ad hoc additional requests

- Review trends of concern observed at the Operational Bird Table, or queries from elected representatives, media etc.

● 7.2 Routine Surveillance: Thresholds for Escalating and De-escalating

For 2021/22, the scale of data surveillance and the regularity of the reporting arrangements will be determined by agreed thresholds against a series of core indicators. Data surveillance and reporting arrangements will therefore be escalated or de-escalated based on the thresholds below. A full breakdown of the indicators being used as part of the surveillance approach is provided at **Appendix 2**.

Table 1: Thresholds for Escalating and De-escalating COVID-19 Data Surveillance and Reporting Arrangements

Case rate per 100k per week#	Equivalent daily new cases across C&V	Population-level surveillance indicator dashboard					Individual case and cluster surveillance management	
		Monitoring and reporting frequency		Reporting arrangements			Multi-disciplinary birdtable meeting	
		Core Indicators†	Extended Indicators†	Regional IMT and Leadership Board	Management Executives	TTP Ops Board	Focus of review	Frequency
<2.5	<1.8	Monthly	Not routinely monitored	No IMT*	Not routinely monitored	Monthly by email	All new cases and clusters	As required / to be agreed
2.5 - 5	1.8 - 3.6	Fortnightly	Not routinely monitored	No IMT*	Monthly	Fortnightly by email	All new cases and clusters	Daily on weekdays
5 - 25	3.6 - 17.9	Weekly	Monthly	As required if IMT held*	Fortnightly	Fortnightly (by email if no meeting)	Majority of new cases, and all new clusters	Daily on weekdays
>25	>17.9	Weekly	Weekly	Weekly	Weekly	Weekly (by email if no meeting)	All new clusters (for rate below 100 per 100k), and new cases of note or concern	Daily on weekdays

*Original threshold for establishing IMT was 20 per 100k; SBARs required above 25 per 100k

† See Appendix 2. In addition, any indicators which were red in extended indicators, prior to case rate changing

Use highest of Cardiff rate and Vale rate to determine category



8.0 Delivery Arrangements

● 8.1 Sampling and Testing

● 8.1.1 Regional Arrangements for Sampling and Testing:

- Two Community Testing Units (CTUs) operating 7 days a week. The service is currently available to key workers as identified in the Chief Medical Officer guidance and Testing Strategy for Wales (July 2020). One of the centres also provides Pre-op and Pre procedure sampling for the UHB Inpatient services. Home visits to all Cardiff and Vale of Glamorgan citizens can also be arranged through this model.
- A Population centre, based within the City at Cardiff City Stadium, operated by the Department of Health and Social Care, which is available to symptomatic residents for sampling. This is a drive through model only.
- Local Testing Centres, which are available to those individuals who have no access to transport, including walk-through centres and Mobile Testing Units (MTUs). These are currently based in Cardiff Bay; Museum Avenue, Cardiff; Colcot Road, Barry; and Ely and are also operated by the Department of Health and Social Care.
- MTUs are also accessible to the Cardiff and Vale Regional Public Health Response team, and wider structures as appropriate, to support incident and outbreak management.

● 8.1.2 Sampling and testing arrangements for large outbreaks and incidents if regional capacity is exceeded:

- We currently have sampling/ testing capacity for 400 antigen tests per day at existing CTUs, and capacity for approximately 2000 (approx. 285 per day) antibody tests per week across the UHB, both in inpatients and community.
- If CTU capacity has been exceeded we have mechanisms in place to call on the other resources described above. We can also increase our staffing to meet demand.
- In addition, plans have been developed to deploy small area geographical asymptomatic testing, if required, in response to local incidents.

● 8.2 Contact Tracing

Contact tracing is a tried and tested method of controlling the spread of infectious diseases. The aim is to support the ongoing work to control the spread of coronavirus, by identifying and isolating people with acute infections and their contacts. Systematic population contact tracing also provides real time intelligence across the whole of Wales on where the disease is and how quickly it is spreading.

● 8.2.1 Contract Tracing and Advice Service

The Contract Tracing and Advice Service is hosted and led by Cardiff Council; the service undertakes contact tracing of cases, escalating complex cases and clusters to the Public Health Response Team.

Contact tracing is reliant on tests being taken quickly; as soon as people start to display symptoms, they are encouraged to arrange to take a test as quickly as possible whilst they, and members of their household, self-isolate.

If a person has tested positive for COVID-19, the Cardiff and Vale of Glamorgan Contact Tracing and Advice Service will contact the individual by telephone.

The person will be asked to:

- Self-isolate for 10 days, subject to a few exceptional circumstances, to make sure that they don't spread the virus. Exceptional circumstances include seeking medical assistance, where urgent or advised by a medical professional.

- Recall where they have been recently and who they have been in close contact with, on any occasion beginning up to 14 days before symptoms started.

Anyone who may have caught the virus from the individual is considered a close contact, and the Contact Tracing and Advice Service will get in touch with them to give them appropriate advice.

● 8.3 Surveillance

As highlighted in section 7.1, a two-tier COVID-19 surveillance system has been developed for the Cardiff and Vale region, identifying trends at a population level and individual case/ cluster level. The Senior Responsible Officer for the system is a Consultant in Public Health Medicine in the Local Public Health Team, with component parts led and delivered by colleagues across the Health Board, two Local Authorities, and Public Health Wales.

Population level surveillance:

The Regional Information Group (RIG) meets regularly, drawing together data leads from Cardiff Council, Vale of Glamorgan Council, Cardiff and Vale University Health Board, the Local Public Health Team and other partner organisations. A population level surveillance dashboard has been created, with a number of population surveillance indicators that cut across the COVID-19 clinical pathway.

Data is sourced from national sources (e.g. PHW, Google and Apple Mobility) and local organisations (e.g. Health Board and Councils). Data, narrative and RAG status for each indicator is updated regularly by leads and collated automatically within PowerBI. The dashboard is taken as a live document, or one page PDF summary, to relevant partnership committees to alert individuals and organisations to the current dynamics of COVID-19 and its impact on our services.

Case and cluster level surveillance:

A daily Operational Bird Table meeting (Monday to Friday) is convened to identify and discuss management of new cases, possible clusters, and any other emerging issues. The daily meeting operates to a structured agenda, systematically reviewing new cases on the National Customer Relationship Manager system (CRM) which have been traced in the last 24 hours. It also reviews items in the regional queue, as well as any ongoing incidents, which facilitates the identification and management of potential clusters.

Possible clusters are discussed, along with any potential links, and feedback from contact tracers/advisers is considered. Expert advice on further action, and the need for any additional investigations, is provided by the Communicable Disease Control Consultant (CCDC). Preventative actions are also discussed as necessary, as well as complex cases, incidents and potential clusters.

The CCDC discusses any significant new cases or emerging clusters at the national twice weekly Welsh Government COVID Intelligence Cell, and also feeds back the results of this discussion regionally at the daily midday meeting.

Taking action based on surveillance findings:

If concerning trends or patterns are identified through the population or case/ cluster surveillance mechanisms described above, action will be taken in line with the response and governance mechanisms set out in section 6 of this Plan.



● 8.4 Incident Management

As a Region, we have developed an integrated, partnership system for managing COVID-19 risk in our population. We will continue to work as a partnership, under the direction of the Regional IMT, to adopt a 'toolkit' approach to deploy our available resources to respond appropriately and effectively to any new circumstances that arise.

As previously highlighted in section 6.14, a Regional SOP has been developed by the multi-agency Public Health Response Team, which describes in detail how cases relating to specific settings are to be escalated to various stakeholder teams sitting at the regional level. The Regional SOP is iterative and is constantly under review.

The systems in place to manage a selection of our higher risk settings are outlined below:

Care Home Settings:

The management of incidents is in accordance with a Standard Operating Procedure (SOP) jointly produced by Public Health Wales (PHW) and Environmental Health. This procedure clearly delineates the role of PHW and Local Authorities, including both Environmental Health and Social Services Commissioning Teams. Cardiff and the Vale of Glamorgan areas have also implemented robust arrangements for the management of cases and incidents of COVID-19 in care home settings, including regular oversight meetings led by Local Authority Commissioning Teams to discuss the current position, and incident meetings with individual care providers to ensure that they are able to navigate on-going incidents as effectively and confidently as possible.

Education and Childcare Settings:

Welsh Government's Operational Guidance for Schools⁶ is used to guide the investigation and management of clusters and incidents of COVID-19. Partner organisations have developed a coordinated approach to contact tracing, infection control and communications whenever such events occur.

Further and Higher Education Settings:

Regional procedures have been agreed with Further and Higher education establishments, who can require an especially swift response due to the scale and risk of spread. In the event of outbreaks, or increased rates of transmission, institutions work with local partners, specifically the Regional Public Health Response team, to ensure that the testing programme is able to effectively respond. This includes identifying measures to isolate people with positive results and minimise the spread of the disease and developing specific messaging for students and staff.

Prisons:

Incidents related to COVID-19 in the prison setting are managed by Public Health Wales. Cardiff and Vale University Health Board provide the primary health care team, and a Cardiff and Vale Local Public Health Team staff member contributes to incident meetings.

Healthcare:

Cardiff and Vale University Health Board clinical services have actively engaged with Test, Trace and Protect (TTP) since the outset, with an Infection, Prevention and Control Team representative being a core member of the Operational Bird Table. The University Health Board has gained considerable experience of managing COVID-19 in the workplace, and deployed a dedicated staff contact tracing team during the first and second wave. As staff case numbers have dropped in response to vaccination, this team has been stood down and replaced by a Liaison Nurse Specialist who also attends the Operational Bird Table.

Variants and Mutants of Concern (VAMC):

As a Region we have processes in place to manage any VAMC identified in our local residents, in line with the Conceptual Framework for Management of VAMC in Wales and the End-to-End Process Manual for TTP Operational Teams in Wales.

Cases of VOC/VUI are notified to the CCDC. The tracing records are rapidly collated and a risk assessment is made at the Operational Bird Table, led by the CCDC. In cases where the risk is controlled, for example an international traveller who has isolated since arrival in the UK, further mitigating action is agreed and coordinated by the

⁶ Operational Guidance for Schools: <https://gov.wales/operational-guidance-schools-and-settings>

Operational Bird Table. In cases where there is a higher level of concern about the risk, a separate IMT is convened to discuss the case(s) and make a detailed risk assessment and action plan; this would include assessment of the need for wider testing within a defined group or geographical areas. Relevant information is shared with regional leads, the Public Health Wales Incident Director and Welsh Government.

International Travellers:

Arriving travellers remain a significant concern because of the risk of reseeding infection into our communities, including variant strains. Arriving travellers from 'red list' countries are required to quarantine in managed facilities (hotels) at the port of entry, none of which are in Wales. Travellers from 'amber list' countries are required to quarantine in their homes, and are monitored by the national Arriving Traveller Team to ensure they are complying with isolation and testing requirements. Any positive cases in amber travellers are traced and monitored by a dedicated team of tracers within Cardiff and the Vale to ensure compliance with isolation. In addition, detailed contact tracing, isolation and testing is carried out to further reduce the risk. Local testing of cases and their contacts allows timely sequencing via the Welsh PenGU Laboratory. Positive cases in arriving travellers are risk assessed at the Operational Bird Table to ensure all relevant action is taken.

● 8.5 Mitigation and Control

As restrictions ease across Wales and more establishments begin to re-open, the risk of community transmission will increase. The most densely populated regions have the highest risk, the highest density of school/ college students, as well as a high density of large businesses.

Enhanced Enforcement:

The coronavirus regulations confer powers on Local Authority Enforcement Officers to ensure that measures are taken to minimise the risk of exposure to coronavirus at workplaces and other premises that are open. An Officer may issue a "premises improvement notice", requiring the person responsible for the premises to take specified measures, and if those measures are not taken an Officer may issue a "premises closure notice" requiring the premises to close.

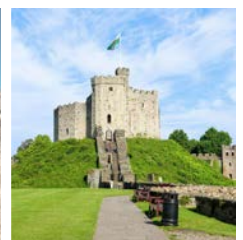
The parent Act, the Public Health (Control of Diseases) Act 1984, and regulations made thereunder, provide local authorities with wider, more flexible powers to deal with incidents or emergencies where infection or contamination presents, or could present, a significant risk to human health. Some powers, relating to specific circumstances, can be exercised directly by local authorities. In other circumstances, local authorities can apply to a justice of the peace (JP) for a Part 2A Order to impose restrictions or requirements to protect human health.

In terms of mass gatherings, both councils work proactively with local police to ensure appropriate action is taken to manage incidents that have happened in both areas, including the use of dispersal orders where necessary.

Managing High Risk Settings:

Whilst specific preventative guidance and arrangements vary per setting, Shared Regulatory Services (SRS) require, as a minimum, that workplaces have carried out risk assessments and mitigated risks with a combination of controls to ensure compliance with the Coronavirus Regulations.

SRS provide advice and guidance to businesses through physical inspections, correspondence, and web based advice: www.srs.wales. SRS' business database also allows quick contact with all or some industry sectors and their partnership with the Health and Safety Executive also allows businesses to be reached where they are the key regulator.



● 8.6 Protect and Support

We know that COVID-19 disproportionately affects more vulnerable members of our community, including older age groups, ethnic minority groups, and those living in deprived populations. We also recognise that these factors may coexist and potentially compound vulnerability in both individuals and communities; these interrelating effects need to be considered as we continue work to effectively prevent, mitigate and control the spread of COVID-19 and protect the most vulnerable in Cardiff and the Vale of Glamorgan.

Furthermore, as COVID-19 vaccines are now available, we must work to vaccinate the population of Cardiff and the Vale of Glamorgan as quickly and safely as possible.

Support for those vulnerable, isolating or shielding:

At the very outset of the pandemic, the Local Authorities of Cardiff and the Vale of Glamorgan established support functions to address immediate issues relating to the availability of food and medication, as well as other support needs. The Test, Trace and Protect (TTP) service has established effective links with these arrangements. The establishment of the Self-Isolation Support Scheme is also helping to provide support to those on low incomes. Support mechanisms will continue to remain in place in both local authority areas, including for those who are required to isolate when identified as a case or a contact, or after returning from international travel.

Support for the Homeless Population:

The vulnerability of this group was recognised at the start of the pandemic and arrangements were put in place to ensure that this population could effectively self-isolate and socially distance, and that their needs were met. New accommodation projects have been identified and are currently being developed to ensure that these individuals can be appropriately housed, and so that the achievements made during the pandemic are maintained. In addition, specific sessions have been organised to offer vaccination to as many individuals as possible.

Support and engagement with ethnic minority communities:

A sub-group has been established to investigate the mechanisms and community assets available to deliver information to ethnic minority communities in Cardiff and the Vale, as well as other seldom heard groups. A strategy has been developed to ensure these groups are effectively engaged. This partnership has been further enhanced to share information on vaccination and offer vaccination in local venues, including Mosques.

Measuring the impact on communities:

As part of the two Local Authorities' recovery planning processes, consideration is being given to the impact coronavirus has had on communities, in particular the most vulnerable people in society reflecting the above. For example, Vale of Glamorgan Council have undertaken a community impact analysis, considering different/emerging issues based on research, with a particular focus on protected characteristics.

Mass Vaccination:

In October 2020, the University Health Board produced a Cardiff and Vale of Glamorgan COVID-19 Mass Vaccination Plan. Development of the initial plan was led by the Executive Director of Public Health, as was first phase delivery. The plan has subsequently been led strategically by the Executive Director of Public Health and operationally by the Executive Director of Nursing. It outlines the operational delivery, the workforce and infrastructure requirements, procurement and storage, monitoring and data, and communications.

The Mass Vaccination programme has been a strong success, with the completion of milestones on time and also earlier than anticipated, adding additional protection to our citizens. We have supported our harder to reach groups with outreach clinics, working with Community Leaders and Specialist Support Staff. We also continue to proactively reach out to anyone having vaccine hesitancy to ensure we support everyone with their decision-making.

9.0 Communications

We need flexible and rapid mechanisms both to make live decisions, and to communicate widely across our organisations, a range of partner organisations, and the public, to complement our governance structure and decision-making mechanisms outlined in section 6.

We have clear communication between the Chair and statutory organisations⁷ representatives on an OCT, and the Executive Leads of the organisations, in order to ensure that strategic consequences of such potential/ actual decisions are collectively understood and that risk mitigations and communications are in place.

For each organisation, the respective Executive Lead will, with their organisation, agree which Executive Lead or Senior Manager will be responsible for dealing with the particular situation that has arisen.

● 9.1 Communications Plan

A Communications Plan for Test, Trace and Protect (TTP) in Cardiff and the Vale was developed at the outset of the programme, and outlines a range of local and regional mechanisms that are being used to disseminate information about TTP. The Plan was developed by the Regional Operational TTP Board and sets out a multi-level and multiagency approach with four key objectives:

- 1 To amplify the national TTP campaign;
- 2 To clarify regional arrangements;
- 3 To direct symptomatic critical workers; and
- 4 To provide regional communications insight to Welsh Government

The work resulted in the establishment of a robust regional communications group. The remit of this group has since expanded; it is now used to coordinate regional messaging on testing, national alert levels and restrictions, as well as the Cardiff and Vale Mass Vaccination Programme.

● 9.2 Incident Communications Protocol

To ensure a framework is in place to enable a rapid and coordinated communications response to a significant local incident, an incident communications protocol has been developed.

In line with this, a wider communications cell was established in September 2020 to support Regional IMT. The group includes representatives from the third sector, further education and higher education sectors, as well as the communications leads for all statutory partners.

⁷ Statutory Organisations: Cardiff and Vale University Health Board, Cardiff Council and Vale of Glamorgan Council.



● 9.3 Engagement with our Ethnic Minority Communities

As highlighted in section 8.6, a sub-group has also been established to investigate the mechanisms and community assets available to deliver information to the ethnic minority community in Cardiff and the Vale, as well as other hard to reach and seldom heard groups. Work initially focused on gaining insight into the issues affecting take-up of testing in high risk population groups; the work of this group has now pivoted to focus on vaccine hesitancy.

A core group, consisting of representatives from the University Health Board, Local Public Health Team, as well both Local Authorities, meet fortnightly to focus on the delivery of priority actions. A wider sub-group, which includes community leaders and representatives from the third sector, meets monthly and serves as a forum for ongoing engagement.

● 9.4 Mass Vaccination Programme

A Communications Plan was developed to map out the audiences and communications tools needed to get the messages out to the population. Vaccine hesitancy and concerns over the safety of the vaccine have been a challenge, but a suite of Myth Busters were developed to answer some of the concerns. The plan was coordinated with the Local Authorities, and the ethnic minority sub group for TTP became much needed voices for the mass vaccination programme, enabling the UHB to get the messages out to the target groups.

The plan has been supported by good working relationships with the local, national and international media who have reported on each milestone and enabled the UHB to share their messages wider. A stakeholder briefing was also developed in the early stages of the campaign to keep people updated on the programme as it moved at pace.

The campaign is still ongoing and while the programme has met its milestone of inviting all people aged 18 and over, further work is being done to analyse the data of those groups who have opted out or not attended to engage with these groups and encourage them to receive their vaccination. The next phase of Leave Nobody Behind is a multi channel campaign to focus on areas and groups that have had less uptake to include radio, supermarkets, billboards, bus stops, advertising on apps and social media targeting. This phase of the campaign will be delivered with influencers and leaders from the local communities who will be best placed to share the messaging.

10.0 Implementation, Review and Learning

This Plan will be reviewed regularly at the Regional Test, Trace and Protect (TTP) Operational Board to provide assurance of implementation and ensure it is updated in response to developing regional issues. Information and learning is routinely shared across the partnership and with national organisations, in line with our governance structures. This will continue so that we can manage the risk in line with the best available evidence. Formal opportunities to share learning through the time period covered by this plan will be considered by the Regional Operational Board and Senior Leadership Group.



11.0 Action Plan 2021/22

Action Number	Section / Theme	Action	Outcome Measure	Timescale for Completion	Lead
1	TTP - Testing	Deployment of Testing Team to support Health Protection requirements and continued accessibility to local, regional and community sites.	Symptomatic citizens tested. Containment of possible COVID-19 spread.	Ongoing until change in Welsh Government Direction.	Head of Operational Testing
2	TTP - Contact Tracing	Ensure that the Contact Tracing and Advice Service can meet local need.	In line with National Targets (contact within 24 hours).	On-going – informally reviewed weekly, formally reviewed Monthly.	Chief Digital Officer
3	TTP - Contact Tracing	Ensure that local contact tracing teams are scalable and can respond rapidly to fluctuations in demand.	In line with National Targets (contact within 24 hours). In line with Welsh Government guidance and budget allocation.	September 2020 (current funding ceases end 09/21).	Chief Digital Officer
4	TTP - Project	Ensure that all identified clusters are effectively investigated to implement suitable controls to minimise the risk of onward spread.	Clusters managed and case rates.	Ongoing – review at Operational Bird Table.	Director of Public Protection
5	TTP - Project	Ensure that any case that is suspected to be a Variant of Concern, or Interest, is investigated to implement suitable controls to minimise the risk of onward spread.		Ongoing	Consultant for Communicable Disease Control
6	TTP - Project	Ensure that suitable advice is provided to businesses and surveillance checks completed to maintain compliance with COVID-19 legislation and guidance.		Ongoing	Director of Public Protection
7	Mass Vaccination	Offer the vaccine to the entire eligible adult population.	Vaccines administered – the uptake target is 80% for each priority group.	By 31 July 2021	Executive Director of Public Health

Action Number	Section / Theme	Action	Outcome Measure	Timescale for Completion	Lead
8	Mass Vaccination	Offer booster vaccine to the entire eligible population, in line with national guidance		To be determined, once national guidance issued	Executive Director of Public Health
9	Communications	Refocus work of TTP/IMT Communications Cell to reflect emerging strategic priorities.	Membership and work programme of the cell continues to change to provide effective communications support.	Ongoing	Communications Manager
10	Communications	Align the work of the Ethnic Minority COVID-19 Operations Sub Group with that of the wider Mass Vaccination Programme.	Sub-group works effectively with wider network of partners and the Seldom Heard Voices group within the Mass Vaccination Programme.	Ongoing	Communications Manager / Regional Resettlement Coordinator



Appendix 1: Test, Trace and Protect (TTP) Named Leads and their Key Responsibilities

Name	Title	Key Responsibilities
Len Richards	CEO Cardiff and Vale University Health Board	<ul style="list-style-type: none"> Chair of Senior Leadership Group
Cllr Huw Thomas	Leader of Cardiff Council	<ul style="list-style-type: none"> Member of Senior Leadership Group
Cllr Neil Moore	Leader of Vale of Glamorgan Council	<ul style="list-style-type: none"> Member of Senior Leadership Group
Paul Orders	CEO, Cardiff Council	<ul style="list-style-type: none"> Member of Senior Leadership Group
Rob Thomas	Managing Director, Vale of Glamorgan Council	<ul style="list-style-type: none"> Member of Senior Leadership Group
Andrew Valentine	Chief Superintendent, South Wales Police	<ul style="list-style-type: none"> Member of Senior Leadership Group
Fiona Kinghorn	Executive Director of Public Health, Cardiff and Vale UHB	<ul style="list-style-type: none"> Member of Senior Leadership Group Senior Responsible Officer for TTP Strategic Leadership for Mass Vaccination Chair of Regional IMT
Sarah McGill	Corporate Director of People and Communities, Cardiff Council	<ul style="list-style-type: none"> Member of Senior Leadership Group Chair of Regional TTP Operational Board
Dave Holland	Director of Public Protection/ Head of Shared Regulatory Services	<ul style="list-style-type: none"> Member of Senior Leadership Group Senior Responsible Officer for TTP Chair of Regional Public Health Response Team (Operational Bird Table)
Tom Bowring	Head of Policy and Business Transformation, Vale of Glamorgan Council	<ul style="list-style-type: none"> Member of Senior Leadership Group
Dr Gwen Lowe	Consultant for Communicable Disease Control, Public Health Wales	<ul style="list-style-type: none"> Specialist Health Protection
Ruth Walker	Executive Director of Nursing	<ul style="list-style-type: none"> Operational Leadership for Mass Vaccination
Tracy Meredith	Head of Operations Testing and Mass Immunisation	<ul style="list-style-type: none"> Testing Service Lead Mass Immunisation Operational Lead
Lorna Bennett	Consultant in Public Health, Cardiff and Vale UHB/ Public Health Wales	<ul style="list-style-type: none"> Mass Immunisation Programme Lead
Isabelle Bignall	Chief Digital Officer, Cardiff Council	<ul style="list-style-type: none"> Lead of the Cardiff and the Vale of Glamorgan Contact Tracing and Advice Service



Name	Title	Key Responsibilities
Dr Tom Porter	Consultant in Public Health Medicine, Public Health Wales/ Cardiff and Vale UHB	<ul style="list-style-type: none"> • TTP Surveillance Lead
Nick Blake	Operational Manager for Business Performance and Policy, Cardiff Council	<ul style="list-style-type: none"> • TTP Performance Lead
Dr Siân Griffiths	Consultant in Public Health Medicine, Public Health Wales/ Cardiff and Vale UHB	<ul style="list-style-type: none"> • Joint Public Health Response Team Lead
Christopher Lee	Corporate Director of Resources, Cardiff Council	<ul style="list-style-type: none"> • TTP Finance Lead
Tracey Thomas	Chief HR Officer, Cardiff Council	<ul style="list-style-type: none"> • TTP HR Lead
Phil Bear	Head of ICT, Cardiff Council	<ul style="list-style-type: none"> • TTP Digital Lead
Robert Jones	Communications Manager, Vale of Glamorgan Council	<ul style="list-style-type: none"> • TTP Communications Lead
Tom Dodsworth	Regional Resettlement Coordinator, Vale of Glamorgan Council	<ul style="list-style-type: none"> • Ethnic Minority COVID-19 Operations Sub-group lead



Appendix 2: Population Surveillance Indicators

It should be noted that many of the indicators in both the core and extended sets have been, and will continue to be, routinely monitored as part of non-Covid or departmental monitoring. The monitoring and reporting arrangements here refer only to the cross-partnership surveillance dashboard and its recipients.

Core Indicators

Number of new confirmed cases of COVID-19 in Cardiff and Vale of Glamorgan residents
Percentage of Covid tests undertaken which are positive
R Estimate for Wales
Hospital admissions
International travellers entering Cardiff and Vale of Glamorgan: number per week and % testing positive (To be finalised)
Number of new cases of variants of concern (VOC) in Cardiff and Vale of Glamorgan (To be finalised)

Extended Indicators

Google and Apple Mobility data
Government Policy (Wales)
Staff Sickness Rates
Number of new confirmed cases of COVID-19 in care home residents and staff (Cardiff)
Number of new confirmed cases of COVID-19 in care home residents and staff (Vale of Glamorgan)
Number of residential/nursing home settings bed vacancies (Cardiff)
Settings with a current incident - NHS
Settings with a current incident - Education
Settings with a current incident - Care homes (Cardiff)
Settings with a current incident - Care homes (Vale of Glamorgan)
7 day rolling average 111 calls
Ambulance Incidents
GP OOH Calls
GP rolling 7 days recording rate for suspected COVID-19
Hospital bed occupancy
Deaths involving Covid (ONS data)
Emergency Unit attendances
Requests for reablement (Covid/non-Covid)
Residents (Covid/non-Covid) receiving reablement

