OVERVIEW & SCRUTINY COMMITTEE

Thursday, 21 May 2020 at 6.30 p.m., Online 'Virtual' Meeting - https://towerhamlets.public-i.tv/core/portal/home

SUPLEMENTAL AGENDA

This meeting is open to the public to attend.

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For further information including the Membership of this body and public information, see the main agenda.

5 .1	**Covid 19 Response**	**All Wards**	**3 - 16**

The Committee will receive a presentation on the response to Covid 19.

Tower Hamlets Reconstitution and Recovery- Work in Progress

Overview and Scrutiny Committee

21 May 2020

ectives and approach – from pandemic to recovery

ctives

inimise cases and deaths - particularly our most vulnerable residents

nsure affected residents get the care ey need

nsure that the impact of service sruption and people's lives is inimised

eliver a balanced and sustainable udget and MTFS

t to
nsure the council and residents recover om the impact of the pandemic whilst ontinuing to respond to it

eliver Council priorities - including a ustainable future budget - and better utcomes for residents by using the pportunities from new ways of working, fficiency and effectiveness learnt during is period.

Approach to recovery:

- ✓ ensure social, economic and health recovery
- ✓ coordinate multi-agency approach
- ✓ ensure a safe transition out of lockdown
- ✓ reconstitute and recover updated council services, democratic processes, and priorities
- ✓ manage budget implications, rebuild our income
- ✓ embed transformation, change and value for money
- ✓ recognise effort and commitment of staff and community
- ✓ support the healing process
- ✓ secure successful, timely step down of the lockdown
- ✓ Feed learning from our experiences into future work
- ✓ ensure consistent council and partnership communication

Considerations

Our approach to recovery will be developing whilst we are still in a pandemic.

The different aspects of recovery are almost all interdependent.

There is much still uncertain in terms exit strategies, and plans are conditio and subject to change.

The timings of recovery are a key pa the conversation, but are difficult to define.

What we know – government guidance

‘Our Plan to Rebuild’ – 11th May 2020

- seeks to return life to as close to normal as possible - for as many people as possible - as fast and fairly as possible

- THREE STEPS of adjustment to social distancing measures:

- Step One (**from 13 May**) – WFH, but some can go back (construction, manufacturing); schools closed; wear face-covering; unlimited exercise outside; can drive

- Step Two (**after 1 June**) – schools to begin opening; non-essential retail open (NOT hospitality/personal care); events behind closed-doors; possible social contact (TBD)

- Step Three (**after 4 July**) - remaining businesses open

r Framework for Reconstitution and Recovery

Workstreams will collaborate on key interdependencies (e.g. workforce) & are not sequential

g pandemic	Getting back to business	Workforce and wellbeing	Dealing with the impact	Making the most new ways of working and innovation	National and local priorities	A new landsca
smaller re to ensure a esponse ng social ng ly vulnerable ce ent and contact ion g further virus	Transition out of lockdown and emergency Determine the configuration and operation of frontline services and workforce Development of different types of frontline services including related workforce Build on opportunities gained from working differently Consider the impact on the budget, service users and staff Communication	Develop a reconstitution and recovery approach for staff including a range of interventions that support a move towards a new normal Deal with • Loss • Fatigue • Leave • Mental health • Dislocation • Support ways of working Build on • Empowered DDs and managers • Remote working • Increased risk appetite • Acting corporately • Matrix working • Recognition	Determine the impact of the pandemic and appropriate responses • Homelessness and rough sleeping • Health and social care (including mental health) • Poverty and unemployment • Impact on business and voluntary sector • Safeguarding • Domestic abuse • Education and learning • Crime and ASB • Workforce *(crosses into the 'workforce' workstream)* • Finance	Build on gains and opportunities • Health and social care integration • Partnership working especially with the local voluntary and community sector • Community involvement in responses • Rapid deployment of digital interventions incl. democracy • Rapid adaption of existing services • Proactive comms • Neighbourhood/ environmental benefits • Health benefits	Respond to national policy and material change • Economy • Sectoral change Expectation and need (vulnerability) • Health and social care integration • Finance/ income Rapid appraisal on the impact on local priorities to ensure there is realignment • Town Hall • Regeneration • Housing • Liveable streets • Poverty and welfare • Community Safety • Climate change • Cohesion Rapid review of existing key strategies and plans to ensure delivery by 22	Renewed Strateg underpinned by revised • MTFS • Transformatio • Workforce pla • Communicati Produce a series setting out what what we spent, t the lessons and recovery Instigate a renew approach - coun not just service delivery/commiss connector, match convenor, - con people with thos help. Importance of co partnership and Wider recognitio
and ability to going	Resilience in frontline service provision	Staff have recovered from dealing with the pandemic	Effective responses developed to deal with possible acute demand	Opportunities realised	Renewed approach to strategic priorities (incl. manifesto)	Articulate renew direction

Continuing Pandemic Response

jectives:

We are still in the pandemic, and will continue to work so:

- Cases are minimised
- The most vulnerable protected and get care they need
- The wider impacts on population minimised or mitigated

To ensure we continue to have the right **structure** in place as we move into a different phase of the emergency

Key lines of enquiry:

- What resources are needed throughout the lifetime of the pandemic and where will they 'sit' and be managed? PPE, testing, volunteers, shielding support, expert advice.
- What will be the likely role of local authorities on contact tracing?
- What are the implications for Boards and the Tower Hamlets Together structure? Should any/more aspects of t pandemic response be allocated in this structure?
- What changes need to be made to the BECC, Silver and Bronze Groups and to the Borough Resilience Forum when?
- What are the links to regional structures and frameworks for recovery?
- If the infrastructure is slimmed down but needs to be scaled up when needed (e.g. a second Covid-19 peak): w evidence will trigger this and what will be scaled up?
- What planning assumptions need to be revisited?
- What future pandemic risks are envisaged and how can these be addressed?
- If social distancing is likely to be the 'new normal' whilst lockdown eases, what does this mean for:
  - Workplaces, businesses and schools
  - Public transport and other forms of transport
  - The design of public and private spaces (e.g. widening pavements and any changes to enable more cycli
  - Enforcement

Getting Back to Business

jectives:

To manage the council's approach to bringing services back into operation in a planned way whilst adhering to current public health advice

To provide compliant council infrastructure to support the provision of services

To review any changes to frontline operations to adapt and embed improved ways of working for both field based and office based staff.

To inform the thinking for any changes to future occupation of council buildings and support existing asset reviews, IT infrastructure roll out and new Town hall.

Key lines of enquiry:

- What is the current usable space and desk spaces within council buildings? Consideration will be given to staff seating, access pathways, customer distancing, cleaning contract, provision of PPE, sanitiser and wipes.
- The reactivation of all council office space will be on a phased basis: main buildings in initial phase followed by other council managed or operated buildings
- What are the considerations to opening the council buildings
  - Time required to deliver compliant buildings
  - Any criteria is closely aligned with the published government guidance
  - Adhere to the principle of only essential officers are returned to council buildings with minimum occupancy requirements.
  - Clarity on running costs vs closure costs
- How do we utilise our existing buildings with reduced capacity?
- What is considered an essential service? Similar to Covid categorisation or changes required (HR data) ?
- What support and equipment is required for teams to ensure buildings can operate at a reduced?
- How do we prioritise the services/staff that should occupy reduced capacity and confirm new prioritisation process?
- How do we measure and maintain staff and customer confidence to access and use our buildings?

se study: Proposed return to work prioritisation

sed reopening of facilities allowing social ncing based dependent on;

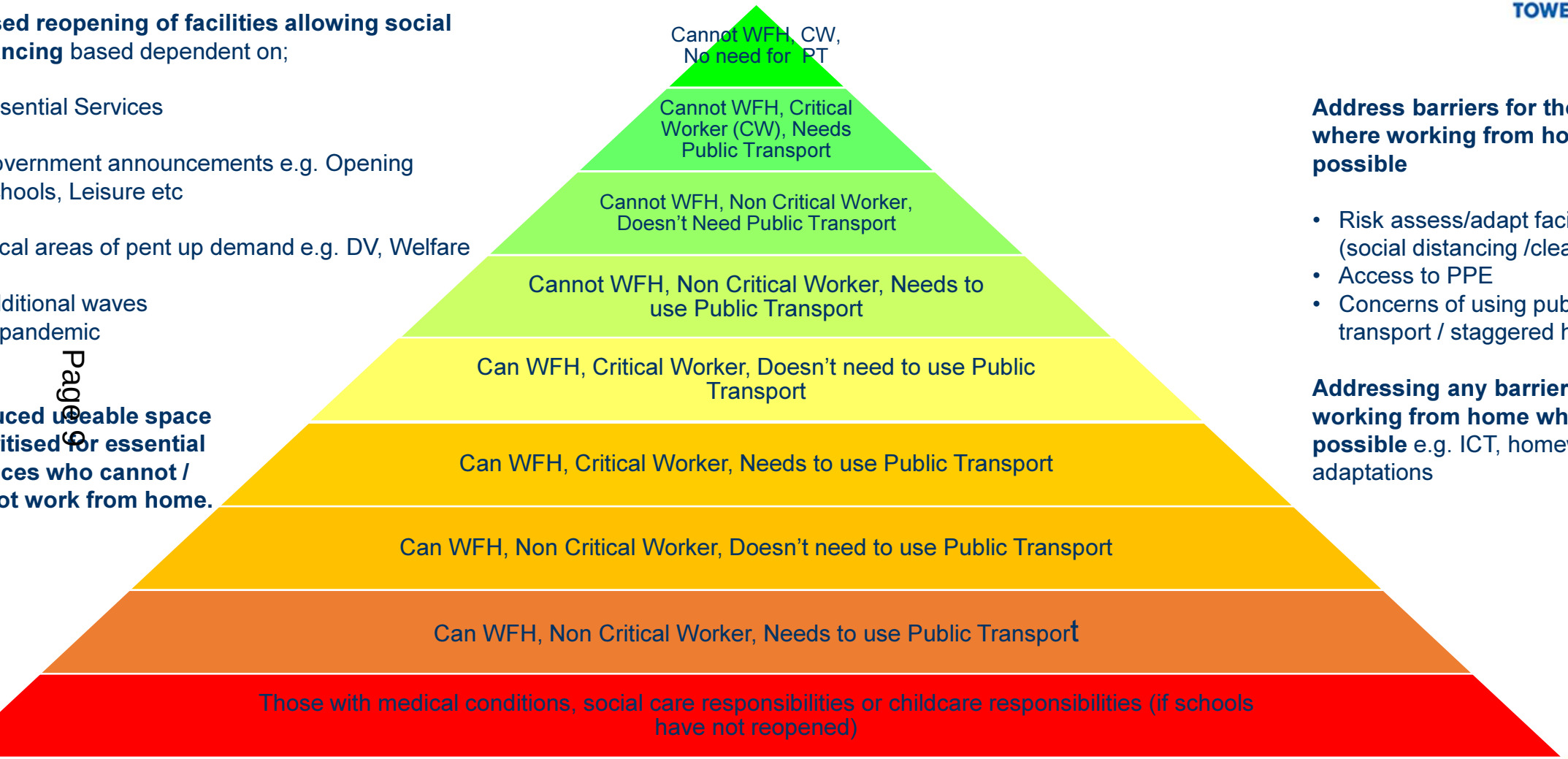
sential Services

overnment announcements e.g. Opening hools, Leisure etc

cal areas of pent up demand e.g. DV, Welfare

ditional waves pandemic

uced useable space itised for essential ces who cannot / ot work from home.



Address barriers for those where working from home is possible

- Risk assess/adapt facilities (social distancing /cleanliness
- Access to PPE
- Concerns of using public transport / staggered hours

Addressing any barriers to working from home where possible e.g. ICT, homeworking adaptations

ase study: Recovery considerations in schools & early years

Phased reopening of primary school starting with reception and years 1 and 6 planned from **1st June.**

Lead in time will be required to enable schools to **plan and prepare**

Significant challenges with **social distancing** (younger children, group sessions, parents at pick-up and drop-off times) need to be thought through

Staff **PPE** requirements to clarify and resource

Staff would need to access **testing** schemes

Staff and parents may be **reluctant to attend** school due to concerns about travelling to/being at school. Some teachers, children and/or parents will be at a higher risk of Covid-19 and/or live with those who are.

Staff and pupils will be sporadically **absent due to sickness or self-isolation**

Frequency and extent of **cleaning** premises to be clear and managed.

Preparations to **manage outbreaks** would need to be in place, linked to contact tracing work.

It is not within our power to open all settings (e.g. privately run nurseries).

Possible **'settling in' implications** to get (esp. younger) children accustomed back to school environment

Reopening may result in a 'pent up' increase in **safeguarding and domestic abuse**-related work.

Workforce and wellbeing

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Proposed areas of focus:

1. Workforce recovery and readjustment
2. Workforce planning
3. Workforce wellbeing
4. Workforce realignment and reablement
5. People and Wellbeing Strategy

We are proposing that the **top priority areas of focus** are 1, 3 and 4 in the recovery phase including:

Space to enable the workforce to recover and provide opportunities to reflect on what has happened

Strategies to thank and recognise all employees for their contribution and to identify key contributors at team and individual

What is different and why and what and how can staff inform what is retained, restored and realigned – a learning approach

Workforce wellbeing including our future functions & services,, our infrastructure supports e.g. Health & Safety, PPE, social distancing as well as focus on mental, physical and financial wellbeing for our workforce

Questions to pose to understand the impact:

- Will home/flexible working be the new normal? What needs to be in plac
  support staff/managers achieve this?
- What are the policy implications and adaptations needed?
- What work needs to happen to understand the impact of the pandemic c
  staff?
- What health and safety support is needed for staff working at home for l
  and how we enable this?
- How can we provide opportunities to reflect and space to recover?
- When and how do we recognise and thank staff?
- How and when do we communicate with staff about possible further cha
  what impact might this have?
- What are the travel to and from work and implications and staggered op
  times?
- What plans do we need in place to deal with a second outbreak and abil
  react and respond?
- When and how can the workforce come into the office

Dealing with the impact

ctives

identify, quantify, edict the range of pacts of the OVID-19 Pandemic residents and sinesses in Tower amlets over the edium and long rm.

identify the tcomes we need to hieve in order to dress these pacts alongside isting/amended sues faced.

develop propriate ways to dress the impact a Council and ross the wider rtnership

Proposed areas of focus:

i. Homelessness and rough sleeping
ii. Health and social care (including mental health)
iii. Poverty and unemployment
iv. Impact on business and voluntary sector
v. Safeguarding
vi. Domestic abuse
vii. Education and learning
viii. Crime and ASB
ix. Workforce *(crosses into the 'workforce' workstream)*
x. Finance

We are proposing that the **top priority areas of focus** are (i) to (iv). In addition, we will look at:

- The impact for different groups, based on the nine protected characteristics.
- The impact on partner organisations (health, police, schools)
- Any impacts that haven't yet been felt but are on the 'horizon'.

Questions to pose to understand the impact:

- What is the challenge or change related to each area of focus?
- What is the quantifiable and qualitative impact (positive, negative, neut Tower Hamlets? E.g. safeguarding referral levels, unemployment levels staff and resident feedback.
- Are any particular groups impacted more than others, and how does th compare to pre-Covid?
- For each area of focus, what has our response been to date and what lessons have we learned?
- What does the future look like, and what is the phasing / timing of poss future impacts?
- What is the national, regional and partner response likely to be? What within our control and what is not?
- Where is the current and future response to this articulated, managed monitored? E.g. strategic plan? Boards?
- What are the implications for internal and external communications?

exercise

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Phased early years & primary school return to end of Jun, start with reception and Years 1 & 6

Phased reopening of shops – non-essential retail, exc. hospitality

Possible social bubble policy

Contact tracing?

Phased return secondary school?

Libraries (Idea Stores) reopen?

Outdoor gatherings (30 people or less)?

Reopening of some businesses and premises, inc. hospitality, leisure, 'personal care'

Gradual end of furlough scheme?

Gyms reopen?

Playgrounds open?

Leisure centres?

Denise
This slide sets out:
- **lockdown easements based**
  government guidance (thos
  highlighted in green)
- **The hypothetical and specul**
  timings of other key change
- **The hypothetical impact of t**

NHS starts to restore non-urgent / BAU services?

Second peak in Covid-19?

Flu season

shielding support, PPE, public health advice, testing support, enforcement. Some form of social distancing

May | June | July | August | September | October | November | December

More children's safeguarding and domestic abuse issues when schools return; exacerbated by domestic violence increase expected over summer

Increase in demand for health and social care

Increase in demand for health and social care

in some crime (e.g. burglary) as less
possible 'pent up' serious youth
as lockdown eases

Impact on poverty (food banks, unemployment, homelessness) as furlough ends

Risk of business closure if social distancing not possible

increase in demand for mental health and wellbeing support (workforce and residents), possible increase in adult safeguarding referrals

Social bubbles sporadically self-isolating due to track and trace results (impact on residents and workforce)

est of London
e borough

corporating new ways of working, re-prioritising and etting a new landscape

ectives:

ew new approaches that have n developed in response to the demic, and test then embed those h are successful into existing rnance and delivery structures.

gree a revised set of local priorities ed to local impact data as well as nges in national, regional and ner policies.

roduce revised strategies and s to deliver against revised borough ities and engage sub regional, nal and national partners to ensure TH voice is heard.

ure that all priority proposals and s are affordable, sustainable and onstrate best value.

Key lines of enquiry:

- What new approaches have been developed as part of the response to the Pandemic? What i impact of these approaches, who do they impact upon and how?
- What are the implications of rolling out successful new ways of working? How can we best ens that the delivery of new ways of working (digital/community mobilisation/partnerships etc) are embedded within the new landscape and related delivery/governance structures?
- What are the emerging priorities outlined in local data, or stemming from changes in national, regional or partner policy/focus? How do these compare with our current priorities and what d need to de-escalate to accommodate them?
- What new governance structures/strategic documents need to be developed to drive the deliv new priorities?
- What is the Council's role in delivering new priorities and how does this tie with place shaping forward? In which areas should we connect, convene and support different stakeholders to co together to deliver borough priorities?
- How do we recognise and empower local stakeholders for their contribution in taking delivery forward. How do we monitor implementation of revised plans and strategies?

Recommendations

roposed next steps:

une 2020 Cabinet	July 2020 Cabinet
report setting out our response to the pandemic so r	A report setting out the impact of the pandemic on t borough
report setting out our approach to reconstitution and covery and our spend so far	Revised strategic plan (short summary) and delivery/action plan and comms plan
	Financial plan and related workforce and transformation plans

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