

# Cabinet



Wednesday, 24 March 2021 at 5.30 p.m.

Microsoft Teams

## Supplemental Agenda

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## Cabinet

Wednesday, 24 March 2021

5.30 p.m.

	Pages
<b>6 .11 Direct Award of Contract for Delivery of Covid-19 Asymptomatic Testing</b>	<b>3 - 24</b>
<p><b>Report Summary:</b></p> <p>This paper proposes a contract award to Hub Logistics for the continued provision of four fixed Asymptomatic Test Sites (ATs) in Tower Hamlets over a three month period until the end of June 2021, operating 9 hours per day, 7 days per week and offering enhancements to the existing service such as 'Community Collect' points for home test kit collection.</p> <p>The estimated value of this contract is £715,000 with the flexibility to expand provision should the need arise. These costs will be funded by the Department of Health &amp; Social Care up to the lower of £14 per test delivered or costs.</p> <p>During this three-month period the Council will also assume direct management of the Blackwall Depot staff testing site, as well as developing a longer term delivery plan for community asymptomatic testing.</p> <p><b>Wards:</b> All Wards <b>Lead Member:</b> Deputy Mayor and Cabinet Member for Adults, Health and Wellbeing <b>Corporate Priority:</b> TH Plan 3: Strong, resilient and safe communities</p>	



<p><b>Cabinet</b></p> <p>24 March 2021</p>	
<p><b>Report of:</b> Denise Radley, Corporate Director Health &amp; Adults &amp; Community</p>	<p><b>Classification:</b> Unrestricted</p>
<p><b>Direct Award of Contract for Delivery of Covid-19 Asymptomatic Testing Sites (ATS)</b></p>	

<b>Lead Member</b>	<b>Councillor Rachel Blake, Deputy Mayor and Cabinet Member for Adults, Health &amp; Wellbeing</b>
<b>Originating Officer(s)</b>	Somen Banerjee, Director of Public Health
<b>Wards affected</b>	All
<b>Key Decision?</b>	No
<b>Reason for Key Decision</b>	This report has been reviewed as not meeting the Key Decision criteria.
<b>Forward Plan Notice Published</b>	16/03/2021
<b>Strategic Plan Priority / Outcome</b>	People are aspirational, independent and have equal access to opportunities

**Special Circumstances Justifying Urgent Consideration**

The paper is urgent because our asymptomatic testing contract, held by the GLA on behalf of all North East London boroughs, comes to an end on 12th April. There is a Government requirement for the council to have an asymptomatic testing service in place until the end of June 2021. Since having been informed of the GLAs intention to end its role in hosting the contract in February, the 24th March Cabinet is the first and last opportunity at which the required executive decision can be obtained to ensure continuity of service. The report was not available at the time the agenda was published because the timeframe between being informed by the GLA of their intention to pull out of the contract, developing a plan for continuity of service and taking to CLT Gold and then Cabinet for decision was too tight to meet the submission deadlines.

**Executive Summary**

There is a Government requirement for the Council to provide asymptomatic community testing to the local eligible population. The recently published ‘Roadmap

our of Lockdown' indicates that this service will need to be in place until the end of June.

Since December 2020, Asymptomatic Test Sites (ATS) in Tower Hamlets have been provided by a company call Hub Logistics via a Greater London Authority contract held on behalf of 8 North East London boroughs (inc. City of London). In February 2021, the Council was informed by the GLA that it would not extend the arrangement beyond the end of March 2021.

If continuity of service is to be maintained, the timescales do not allow for a full tender process to be completed and there is not sufficient capacity or expertise within the Council to deliver this service directly at the required scale.

As such, it is proposed that Hub Logistics are directly awarded a contract to continue to deliver four Asymptomatic Test Sites (ATSs) until the end of June 2021. The Council will look to take on the direct management of the staff testing ATS currently based at Blackwall Depot to develop in house expertise for delivery of these services beyond the end of June.

### **Recommendations:**

The Cabinet is recommended to:

1. Note the Council's plans for delivering asymptomatic community testing in Tower Hamlets, which aligns with the requirements set out in 'Roadmap out of Lockdown' published by Government on 22<sup>nd</sup> February 2021;
2. Make a Direct Award of a 1+1+1 contract (months) for the delivery of the borough's Asymptomatic Test Sites (ATSs) to Hub Logistics for the period 12<sup>th</sup> April to 4<sup>th</sup> July 2021.

## **1 REASONS FOR THE DECISIONS**

- 1.1 The Government's 'Roadmap out of Lockdown' for lifting national Covid-19 restrictions published on 22<sup>nd</sup> February 2021 includes a requirement for local authorities to extend asymptomatic community testing until the end of June, and to expand the service by offering Lateral Flow Test (LFT) home testing for eligible groups via a system called 'Community Collect'.
- 1.2 Alongside the rollout of the vaccine, the ongoing provision of asymptomatic community testing will play a vital role in ensuring that the lifting of restrictions is delivered safely and sustainably. As lockdown eases, asymptomatic community testing will expand to focus on new groups of people as relevant national restrictions are eased, following the initial focus on the return of schools. Other groups will follow in accordance with the timetable set out in the roadmap.

- 1.3 All of Tower Hamlet's existing Asymptomatic Test Sites (ATS) are currently operated by a provider, Hub Logistics, who were appointed by the Greater London Authority in December 2020 to deliver community mass testing for all 8 boroughs in North East London. The Council was informed in February 2021 that this arrangement would cease at the end of March 2021, with a possible extension until the 12th April where boroughs could demonstrate robust transition plans were in place.
- 1.4 Due to the very short timescale between the Council being informed of the GLA's intention to end its contract and the date of contract cessation, it is not possible to complete a tender exercise under the usual procurement procedures for the delivery of this service. In order to maintain service continuity, this paper therefore proposes a direct award of a 1+1+1 (month) contract to Hub Logistics for the ongoing delivery of four fixed Asymptomatic Test Sites (ATSS) in Tower Hamlets over a three month period from 12<sup>th</sup> April to the 4<sup>th</sup> July 2021 (last day of the last week in June). Each of these sites will operate 9 hours per day, 7 days per week and offer enhancements to the existing service such as 'Community Collect' points for LFT home test kit collection for eligible residents.
- 1.5 Hub Logistics have delivered this service effectively to date, working in close partnership with LBTH Public Health and a range of test site hosting partners including Poplar Harca, Toynbee Hall and Canary Wharf Group. Over the period of the GLA held contract the borough has seen LFT utilisation at its ATS network grow consistently and the proposals set out below provides capacity to increase usage further.
- 1.6 The estimated value of this contract is £715,000 with the flexibility to expand provision should the need arise. These costs will be funded by the Department of Health & Social Care (DHSC) up to the lower of £14 per test delivered or costs incurred. During this three-month period the Council will also assume direct management of the Blackwall Depot staff testing site, as well as developing a longer-term delivery plan for community asymptomatic testing.

## **2 ALTERNATIVE OPTIONS**

- 2.1 Cabinet could opt not award the contract, but that would risk creating a gap in service delivery of this critically important element of the public health protection response to the Covid-19 pandemic, due to the reality of the time which would be required to undertake a full procurement exercise or to develop a fully equivalent in-house alternative.

## **3 DETAILS OF THE REPORT**

- 3.1 Rapid Lateral Flow Tests (LFTs) for Covid-19 are available for people who don't have symptoms of Covid-19 but would still like to get tested. The tests are quick and convenient and provide results in under 30 minutes. Tests are

available for all residents, but twice weekly routine LFT testing is recommended for residents who:

- are a key worker (carers, tradespeople and essential retail);
- cannot work from home;
- or if others in your household still go out for work.

3.2 There are currently five public Asymptomatic Testing Sites (ATS) in Tower Hamlets:

- 56 Burcham Street, Poplar, E14 0SH. Open 10am to 7pm daily;
- Canary Wharf - level -2, Jubilee Place, Canary Wharf, E14 5NY. Open 11:00am to 8pm on Thursdays, and 7.30am to 4.30pm on all other days;
- Toynbee Hall, 28 Commercial St, London E1 6LS. Open 11am to 8pm daily;
- Mary Sambrook, 125 The Highway, St Katharine's & Wapping, London E1W 2BP. Open 7am to 4pm daily;
- The Tramshed, Digby Street, Bethnal Green, E2 OLP. Open 10am to 7pm daily.

3.3 These sites are walk-in centres, but appointments can also be booked online, and they are located across the borough with a variety of opening times to make access as easy as possible. In addition, there is one further ATS at Blackwall Depot. This was initially focussed on staff operating from the depot but has since been opened out to any LBTH staff member from 9am Monday to Friday.

3.4 Utilisation of LFT sites has grown consistently since the first site opened on 18<sup>th</sup> December 2020, and over recent weeks more than 3,000 tests per week have been completed. Despite these improvements, the borough still has low LFT take-up relative to other London boroughs, and this is being addressed through enhanced communications and community engagement.

3.5 All the ATSs in Tower Hamlets are delivered by an external company, Hub Logistics, which was appointed by the Greater London Authority in December 2020 to provide these services to eight North East London boroughs (including the City of London). This contract is due to cease on 31<sup>st</sup> March, although the GLA has indicated it would be willing to extend arrangements through until 12th April 2021 if they consider a robust transition plan to be in place.

3.6 The aim of the Council's asymptomatic community testing programme is to have "*testing on every street*" by making it as accessible as possible, providing the public with opportunities to:

- Take a test at a local asymptomatic test site (ATS)
  - Collect self-test kits from a collection site – ‘Community Collect’
  - Get tested via a workplace
  - Order a self-test kit online to be delivered to a person’s home
- 3.7 The Council’s delivery of these ambitions rests on the continued operation of a core network of fixed Asymptomatic Test Sites (ATSs). These will form the basis for the development of additional testing capabilities and are the most complex and resource intensive element of the asymptomatic community testing programme to deliver.
- 3.8 As noted above, the current contract for the delivery of the Council’s ATS network ceases on the 31<sup>st</sup> March, although an extension is possible through until 12<sup>th</sup> April 2021. Because of these short timescales it has not been possible for the Council to complete a tender exercise under the usual procurement procedures for the delivery of this service.
- 3.9 Whilst this service could, in theory, be provided ‘in-house’ the time limiting factors involved mean the Council would not be able to secure the required expertise or management capacity to deliver the service at the necessary scale and guarantee continue of service.
- 3.10 In order to maintain service continuity and satisfy the Government requirement to have a service in place, the Council proposes a direct award of a 1+1+1 (month) contract to Hub Logistics for the ongoing delivery of four fixed Asymptomatic Test Sites (ATSs) in Tower Hamlets over a three month period from 12th April to the 4th July (last day of the last week in June).
- 3.11 It is likely that some form of asymptomatic community testing will be required beyond this date, but considering the uncertainty of future Government policy, this 3-month period is considered a prudent balance between longevity and flexibility.
- 3.12 The reduction the number of ATSs is deemed a sensible balance recognising the increasing emphasis on ‘Community Collect’ and home delivery of LFTs, together with the low level of demand seen at some of our existing sites. However, depending on circumstances such as changes to disease prevalence or Government requirements/guidance, there could be a need to increase the size or number of ATSs available, which could increase the costs of delivery.
- 3.13 The four sites will operate 9 hours per day, 7 days per week and offer 240-270 tests per site, per day, giving a borough wide system capacity of c. 7,000 tests per week. Subject to the agreement of building owners, these four sites will be: Toynbee Hall (West), Jubilee Place (South), Burcham St (East) and ‘The Tramshed’ (Central).
- 3.14 Where viable, each ATS will offer a ‘Community Collect’ point, although the network of available collection points will be expanded beyond this, for example using our IDEA Stores and Children’s Centres. In addition, once an

appropriate model has been defined, LFT surge testing to support local outbreak management might also be staffed using ATS testing operatives.

- 3.15 With a view to the medium to long term delivery of ATS, the Council proposes the staff testing facility at the Blackwall Depot becomes directly managed, thereby providing the opportunity to train staff and develop management expertise for a future transition to a fully 'in house' model.

#### **4 EQUALITIES IMPLICATIONS**

- 4.1 The inequalities in the impact of COVID-19 have been stark in Tower Hamlets as well as neighbouring East London boroughs. The ethnicity, occupational and socioeconomic characteristics linked to vulnerability to the impacts of COVID-19 are particularly high in the Tower Hamlets population.
- 4.2 We have invested significantly in working with residents and communities particularly affected by COVID-19 to understand the impacting on their lives and to establish trusting relationships to address issues together. Engagement, communications, and coproduction on initiatives shaped by the communities of the borough has been at the heart of our approach to responding to the pandemic.
- 4.3 The Council will consolidate and build on the current work over the next three to six months, and refresh the 'Safe Communities' engagement strategy including the development of a 'Living with Covid' plan that looks at how people's lives will need to adapt to Covid-19 as an endemic infection in the community, including the need for regular testing.

#### **5 OTHER STATUTORY IMPLICATIONS**

- 5.1 The Council is subject to the statutory Best Value duty in respect of the delivery of all its functions including the delivery of asymptomatic testing. The Council will enter into a contract with the supplier on the same or similar terms to that which the GLA entered into with the supplier. This will allow the Council to monitor the service delivery and ensure continuing improvement in terms of economy efficiency and effectiveness.
- 5.2 Due to the urgency of the decision arising from the timescales set out above, there has been limited opportunity for consultation. Corporate Leadership (CLT) Gold has been consulted on the available options as well as elements of the Covid-19 governance structure including the Testing Bronze Group.

#### **6 COMMENTS OF THE CHIEF FINANCE OFFICER**

- 6.1 Costs associated with this award are funded via a S31 Department of Health and Social Care demand led grant, the Community Testing Fund. This is a

ring-fenced grant to Local Authorities (issued under grant determination 2020/21 31/5301).

- 6.2 Tower Hamlets will receive a total of 3 instalments of the grant. The original planned submission of the number of tests to be delivered was 75,000 tests. Instalment 1 has been received in the amount of £157,500 (15% of the grant based on delivery of 75,000 tests at £14 per test). Instalment 2 is expected to be received shortly in the amount of £315,000 (30% of the grant based on delivery of 75,000 tests at £14 per test). The final instalment, to be payable to the Local Authority, will be based on eligible expenditure, as defined in the Grant Conditions, between the period 1<sup>st</sup> April 2020 and 31<sup>st</sup> March 2021. The number of tests to be delivered has later been revised to 64,218 tests, resulting in a revised total grant allocation of £899k compared to the original allocation of £1,050k (a reduction of £151k) assuming delivery of all planned tests.

	<b>Number of Tests to be Delivered</b>	<b>Total Grant @ £14 per test £</b>	<b>Instalment 1 15% received £</b>	<b>Instalment 2 30% outstanding £</b>
Original Planned	75,000	<b>1,050,000</b>	157,500	315,000
Revised Planned	64,218	<b>899,052</b>		

- 6.3 Costs will be reimbursed based on the lower of £14 per actual number of tests delivered by the Local Authority, and the costs it can demonstrate it has incurred, excluding the value of any supplies provided by DHSC and the cost of Lateral Flow Device test kits.
- 6.4 The total cost of the contract with Hub Logistics is £715k and costs incurred for the Blackwall Depot staff testing site will need to be offset against the grant recovered from the DHSC. Maximising the number of tests delivered, and therefore the grant that can be recovered, will ensure that the costs incurred can be fully recovered, without additional financial burden on council resources.
- 6.5 In addition to this, there is also the financial risk that any costs incurred after 31<sup>st</sup> March cannot be charged against the Community Covid Testing Fund. Confirmation of carry-forward of any underspend against this grant or further funding for 2021/22 has still not been received from DHSC but is due to be announced imminently.
- 6.6 The Local Authority does have further Covid Grant funding available to offset costs incurred over and above those funded via the Community Covid Testing Fund. The expenditure incurred for this project would be eligible under the grant conditions for the Test and Trace Grant (£3.2m received to date) or the Contain Outbreak Management Fund (£3.9m received to date). The DHSC have confirmed that any underspends against these grants can be carried-forward for use in 2021/22 against eligible expenditure, and sufficient funding would be available from these grant funding streams in 21/22 to meet the

costs of any additional expenditure incurred over the Community Covid Testing Fund, if required.

## **7 COMMENTS OF LEGAL SERVICES**

- 7.1 The Council is legally required to provide asymptomatic testing by central government as part of the national strategy for tackling the Covid pandemic. The existing service is currently provided through the GLA.
- 7.2 Unfortunately, due to circumstances beyond the Council's control the GLA's contract with the provider is not going to be extended beyond the 12<sup>th</sup> April 2021 with the Council required to continue to make the service available until at least June in accordance with the road map. There is insufficient time to run a procurement and in any event, the time required to run a procurement would cause a cessation in the service which would place human life at risk.
- 7.3 Regulation 32 of the Public Contracts Regulations 2015 allows the Council to award a contract without subjecting the contract to a competitive exercise where for reasons of extreme urgency the Council cannot comply with the time limits set down in respect of a competitive process. The circumstances outlined in this report demonstrate compliance with regulation 32(2c)
- 7.4 The Council may only rely on regulation 32 (2c) where the circumstances of extreme urgency were not foreseeable to the Council nor due to the Council's fault. This is also the case here.
- 7.5 The Council is subject to the statutory Best Value duty in respect of the delivery of all its functions including the delivery of asymptomatic testing. The Council will enter into a contract with the supplier on the same or similar terms to that which the GLA entered into with the supplier. This will allow the Council to monitor the service delivery and ensure continuing improvement in terms of economy efficiency and effectiveness.
- 7.6 It should be noted that a failure to continue to deliver this service at the current time may have a disproportionate impact on persons with a protected characteristic and therefore alternative provision of some sort would have to be found in order for the Council to comply with its statutory duties under the Equality Act 2010.

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### **Linked Reports, Appendices and Background Documents**

#### **Linked Report**

- NONE

#### **Appendices**

- Tower Hamlets LFT Community Testing Service Specification

**Background Documents – Local Authorities (Executive Arrangements)(Access to Information)(England) Regulations 2012**

- NONE

**Officer contact details for documents:**

Dr Andy Liggins, Public Health Consultant

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## Tower Hamlets LFT Community Testing Service Specification

### 1. Context

1.1. As testing technologies have evolved throughout the pandemic, Tower Hamlets has developed a network of:

- **symptomatic local testing sites (LTSS)** using PCR tests and which are operated by NHS Test & Trace;
- **asymptomatic testing sites (ATSS)** using rapid lateral flow tests (LFTs) and which are currently delivered by a provider called 'Hub Logistics', commissioned in December 2020 by Tower Hamlets via a contract held on behalf of 7 NEL boroughs by the Greater London Authority (GLA).

1.2. Following the announcement in February 2021 of a roadmap for the government's approach to lifting the current national lockdown, there is a requirement to update our local outbreak control plan, including an expansion of our asymptomatic testing offer to new eligible cohorts, and an offer of LFT home testing via a system called 'Community Collect'.

1.3. Alongside the rollout of the vaccine, the expansion of asymptomatic testing will play a vital role in ensuring that the lifting of restrictions is delivered safely and sustainably. As lockdown eases, testing will expand to focus on new groups of people as relevant national restrictions are eased, with an initial focus on the return of schools. Other groups will follow in accordance with the timetable set out in the roadmap.

1.4. As national restrictions are further eased with other non-critical sectors reopening, we intend to combat the risk of transmission by supporting these additional groups to conveniently access regular testing near their home, by opening new ways of accessing testing both digitally and in trusted collection points in the community.

1.5. This Service Specification describes the operational, day to day delivery of rapid testing via asymptomatic testing sites (ATSS) sites within Tower Hamlets and options for developing additional services, as required.

1.6. Central Government funding and ongoing support from DHSC Regional Assistance Teams have been confirmed up to the end of June 2021. This Service Specification will therefore set out anticipated delivery needs within Tower Hamlets from 1st April 2021 to 30th June 2021, with six weekly reviews as newer delivery models such as community collect come online.

## 2. Current asymptomatic testing sites

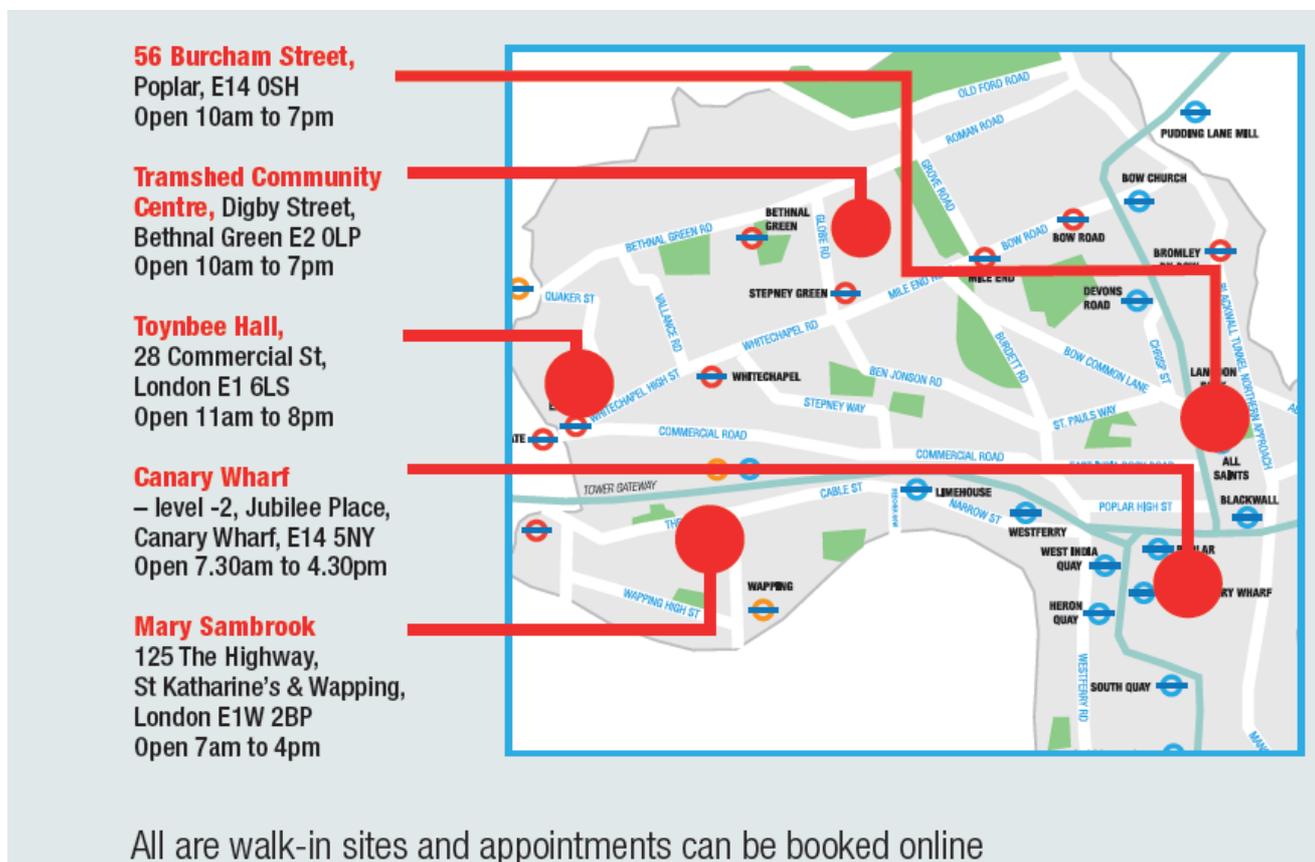
2.1. Rapid Covid-19 tests (Lateral Flow Tests) are available for people who don't have symptoms of Covid-19 but would still like to get tested. The tests are quick and convenient and provide results in under 30 minutes.

2.2. These tests are available for all residents but twice weekly routine LFT testing is recommended, specifically if you are:

- a key worker (carers, tradespeople and essential retail);
- cannot work from home;
- or if others in your household still go out for work.

2.3 There are currently five public asymptomatic testing sites (ATS) in Tower Hamlets:

- 56 Burcham Street, Poplar, E14 0SH. Open 10am to 7pm daily;
- Canary Wharf - level -2, Jubilee Place, Canary Wharf, E14 5NY. Open 11:00am to 8pm on Thursdays, and 7.30am to 4.30pm on all other days;
- Toynbee Hall, 28 Commercial St, London E1 6LS. Open 11am to 8pm daily;
- Mary Sambrook, 125 The Highway, St Katharine's & Wapping, London E1W 2BP. Open 7am to 4pm daily
- Tramshed Community Centre, Digby Street, Bethnal Green, E2 0LP. Open 10am to 7pm daily.



2.4 Due to being under national lockdown restrictions these test sites are situated within a variety of settings. It is possible that we will need to relocate sites as business as usual starts to slowly return and these spaces are required for other activities. Therefore, along with the daily operational duties of running an efficient and safe test site, there may also need to be capacity to flexibility relocate and mobilise other sites quickly and in a cost-effective manner.

### 3. Daily operational workforce requirements

3.1. The operational workforce requirements for Community Testing Rapid Test Site are set out in the Workforce Blueprint, at the time of writing the latest version is 3.4. Hence this version of the Workforce Blueprint informs this specification document.

3.2. Other key Community Testing documents necessary and unpinning this specification include:

- the Master Clinical SOP,
- Clinical Policy and Protocol,
- the Citizen Journey,
- Quality Checklist Form,
- Risk Assessment Log, and
- Guidance on Site Set Up.

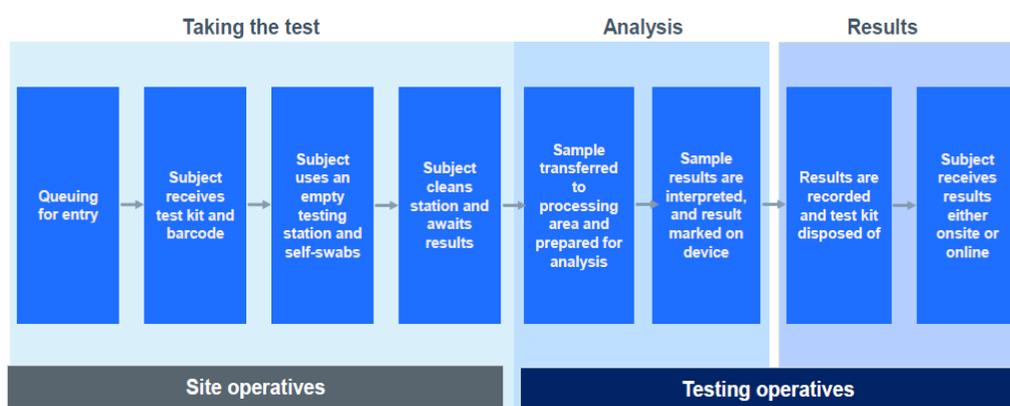
3.3. Tower Hamlets is a diverse borough with areas of deprivation, it is therefore vital that the Community Testing programme is inclusive and culturally sensitive to the barriers and challenges some residents may experience in accessing or participating in rapid testing. The delivery of this Service Specification will also need to reflect an awareness and understanding of these needs.

3.4. Below is the Testing Process from end to end as described in the Workforce Blueprint:



## THE TESTING PROCESS

The workforce plan is based on **the participant journey**, and the steps required by the **clinical standard operating procedure (SOP)**. This drives the **roles we have developed** which follow in the next slides. Sites must also comply with, and demonstrate how they are ensuring compliance with the 2 metre rule on **social distancing** e.g. work-space layout, signage, briefings, and on-boarding. It is expected that Test Site Leads will remind on-site teams at their daily briefings.



3.5. The different roles for each test site are described here:

## TESTING & TRACE ROLES

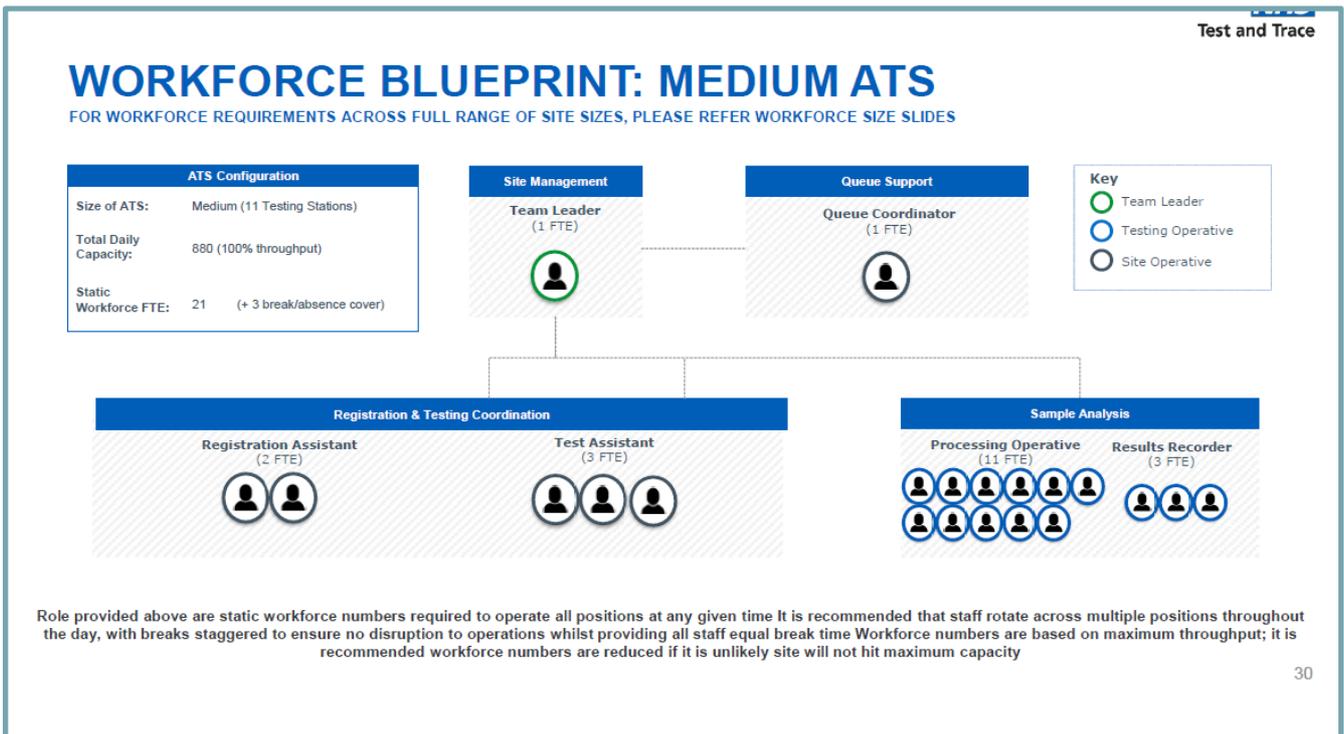
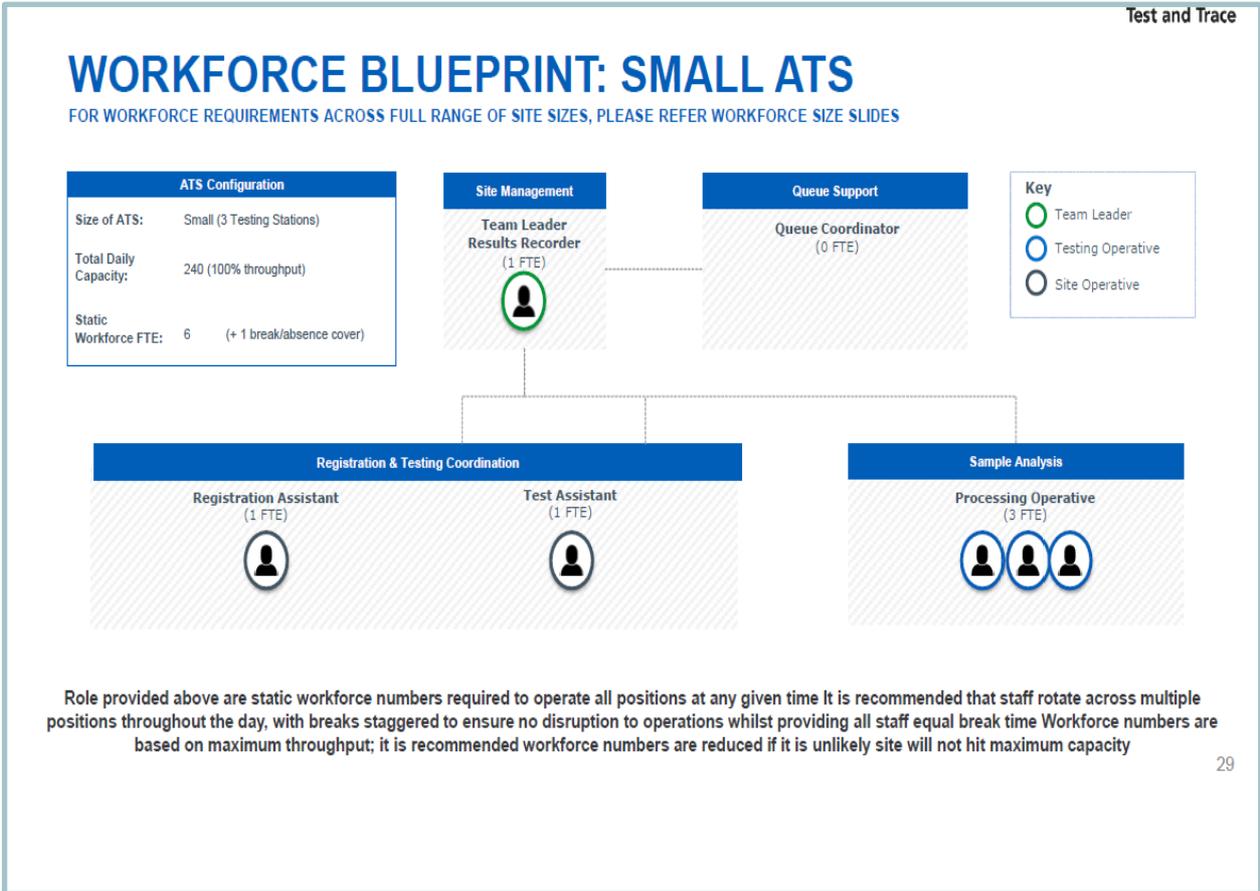
ROLE	KEY RESPONSIBILITIES
<b>Team Leader</b>	Responsible for the overall on-site operations at the test site, including day-to-day workforce management. Several Supervisor or Deputy Team Leader roles may be needed for larger sites – this should be designed at a site level. It is advised the span of control does not exceed 15 people per supervisor role.
<b>Site Operative</b>	Helping manage the site and supporting subjects through the testing process. From queue management, to registration and supporting testing. The role has three positions: Queue Coordinator, Registration Assistant, and Test Assistant.
<b>Testing Operative</b>	Conducting the processing and analysis of tests to ensure the process is conducted accurately and uploaded to the system. The role has two positions: Processing Operative, and Results Recorder. Results will be passed on to existing.
<b>Local Contact Tracers (Optional)</b>	Communicates directly with individuals who have received a positive COVID-19 result to identify close contacts who may be at risk. Ensures index cases continues to self isolate, and advise they reach out to those they have been in contact with. Cases are initially managed at a national tracing level before being triaged to Local Contact Tracers if unable to make contact with cases.

3.6. Roles, positions and responsibilities may need to be adapted on a site by site basis depending on the size and target throughput of your test sites. Roles and positions can be performed by the same person (if appropriate). Ideally we need to be able to scale or merge the workforce in response to test site throughput and delivery.

3.7. The workforce will also need to have the adaptability to deliver at pop up sites and via a mobile testing service. If a Variant of Concern is linked to postcodes within Tower Hamlets, there will also need to be scope to flex the core, trained workforce to support surge testing initiatives.

3.8. With the recent additions of home rapid test kits and Community Collection from Local Testing Stations, Community Pharmacies and rapid test sites, forecasting throughput for each rapid test site is difficult. There is also the high likelihood that a mobile testing service will be required to support residents who continue to struggle to access rapid testing through static or online testing routes. Flexibility, capacity and responsiveness to scale up and scale down is essential to the successful delivery of this service spec.

3.9. Below is the Workforce Blueprint for a 3 and an 11 Booth Test Site as a guide:



3.10. Other UK pilots have found that the inclusion of a Team Leader or an Assistance Team Leader post is best tailored to the size and needs of the testing infrastructure, however supervisory responsibilities should not exceed 15 people.

3.11. Operationally, queue management should be factored in, with the capacity to help those queuing with test registration. Many people find the registration process difficult to navigate due to the number of questions, or the need for a smartphone or internet connected device. This can also slow down the testing process.

3.12. There is a need to coordinate when people enter booths, or access another testing delivery model (pop up, mobile etc), people often ask for or appreciate some direction with the self-swabbing. There is a requirement to ensure deep cleans take place following possible bodily fluid transfers. Finally, due to the number of steps required to process tests it advised that Test Processors focus on one test at a time.

3.13. Suggested Workforce Requirements:

## Workforce Resource Requirements by Test Site Size (1/2)

**Test and Trace**

The table below outlines the indicative number of staff needed to operate a test site per shift to maximum capacity

Additional contingency resource has been added to cover breaks and potential absences. It is recommended that staff rotate across multiple positions throughout the day, with breaks and all staff provided equal break time

Local contact tracers have been included. However, it is at the discretion of the LA as to whether they want an uplift in local contract tracing following testing.

Role	Position	Number of Testing Stations (Test Site Size)													
		1	2	3	4	5	6	7	8	9	10	11	12	13	14
<b>Team Leader</b>		1*	1*	1*	1	1	1	1	1	1	1	1	1	1	1
Site Operations Role	Queue Coordinator	0	0	0	0	0	0	0	1	1	1	1	2	2	2
	Registration Assistant	0	0	1	1	1	1	1	2	2	2	2	2	3	3
	Test Assistant	1	1	1	1	1	2	2	2	2	3	3	3	3	4
Testing Operations Role	Processing Operative	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	Results Recorder	0	0	0	1	1	2	2	2	2	3	3	3	3	3
Break & Absence Cover		0	1	1	1	1	2	2	2	3	3	3	4	4	
<b>Total</b>		3	5	7	9	10	14	15	18	20	22	24	26	29	31

Daily Capacity (8hr operations)	80	160	240	320	400	480	560	640	720	800	880	960	1040	1120
Contact Tracers**	1	1	1	1	1	1	1	1	1	2	2	2	2	2

Workforce numbers are a guideline only and local decisions should be made on a sensible workforce size on a site by site basis.

\* Assumes Team Leader doubles as Results Recorder for small sites  
 \*\* Contact tracer calculations assume a 2% positivity rate, a 75% reachability rate and 30% of cases dealt with by local authorities  
 Note: Assumes sufficient workforce to deliver maximum potential capacity (1 test every 6 minutes per testing station)  
 Note: Daily capacity includes all testing, including retest of void LFD and confirmatory PCR testing

**4. Required Service Specification Work Streams**

4.1. The following identifies the works streams required to deliver this Service Specification and omits the workstreams which can be delivered in house.

<b>SITE/DELIVERY MANAGEMENT</b>	<b>PARTICIPATION IN SURGE TESTING</b>
<b>OPERATIONS TRAINING</b>	<b>MOBILE TESTING (MTUs)/POP UP COORDINATION</b>
<b>OPERATIONS AUDITING</b>	<b>REPORTING &amp; IT</b>
<b>SAMPLE ANALYSIS COORDINATION</b>	<b>REGISTRATION &amp; TESTING COORDINATION</b>
<b>RESOURCING &amp; CONTRACTING THE WORKFORCE</b>	<b>COLLABORATIVE/FLEXIBLE WORKING</b>
<b>STAFF PROVISIONS &amp; WELFARE</b>	<b>QUEUE MANAGEMENT</b>

#### 4.2. Project Management

Overall project management of the asymptomatic testing infrastructure will be led by Public Health.

#### 4.3. Provider Operations Manager and Team Leaders:

The Provider Operations Manager is responsible for ensuring all policies and processes for the project are carried out by the teams on site in accordance with protocols and procedures as directed by Public Health, Test Operations Manager, policy directives from the DHSC, and key documents such as the Workforce Blueprint. This is through the implementation of SOPs and training and undertaking audits.

The Provider Operational Manager is responsible for the following areas of activity:

- Distribution of SOPs and adherence to the SOP.
- Operational Training, **including the management of NHS Test and Trace LFD** online training
- Management of the LFTS
- Day to day operational reporting
- Overall compliance with Health and Safety guidance
- Reviewing onsite staffing levels
- General Operations - Liaising with the Test Operations Manager to ensure adequate stock of PPE, LFDs, cleaning equipment.

Any personal information relating to staff is obtained, processed and stored in line with the requirements of the GDPR. Full details are available in the Staff Privacy Notice.

The Provider Operations Manager and Team Leaders will support the workforce to participate in Safeguarding and MECC training.

The Team Leader will process, and document all reports on site to the Provider Operations Manager on a daily basis at the end of each shift.

The Team Leader will be responsible for **the operations** of the site including, training/inductions process, site services and welfare for all on site.

In case of emergency the on-site Team Leader will be the point of contact for any emergency services required to come to site.

The Team Leaders will be responsible for the following areas of activity:

- Responsible for the overall on-site operations at the test site, including day-to-day workforce management.
- Running day-to-day operations including adverse incident reporting, on-site workforce management, managing site health & safety and receiving and managing stock
- Point of escalation for any issues on site, and escalates to local public health officials as appropriate

- Ensure adherence to SOP and clinical guidance is maintained throughout operations Responsible for safety and security of the site
- If subjects raise any data privacy concerns, direct subjects to the Data Privacy Notice which explains how their data is used.
- Responsibility for the quality and risk management of the testing and regularly checking that the site meets the standards required

#### 4.4. **Resourcing and Contracts**

To take overall responsibility for resourcing the staff on site and to recruit for a rapid mobilisation of a core trained and competent workforce. Further recruitment will also include posts advertised via Tower Hamlets ITRES in addition to existing provider recruitment channels. This workstream also includes:

- Site 'Do's and Don'ts'
- Organising training

Any personal information relating to staff is obtained, processed and stored in line with the requirements of the GDPR. Full details are available in the Staff Privacy Notice.

Rotas are created each week to outline the staff and contractor requirements for each LFTS location. This will identify which staff members have been engaged for each role.

#### 4.5. **Operational Training**

The Provider Operations Management will oversee the Team Leaders facilitation of the necessary training for all staff, to ensure staff are briefed correctly in order to carry out their roles on site. They will work alongside the Test Operations Manager (providing SOPs for training materials) and Public Health who will quality assure testing delivery.

All staff and contractors attend Training Sessions as outlined below;

- ***NHS Track and Trace LFD online training course***
- Half-day on operating site carried out by the Team Leader

During the first period of training the following overviews are completed:

- Project Overview Training. incl. an outline of org chart, incl. their own roles and how they fit into wider project
- Do's and Don'ts
- PPE Guidelines
- Briefing on SOP's and the importance of the individuals understanding and keeping up to date with the SOP's
- Site specific induction

Further Training Steps include;

- Talk through Process (Methodically working through: Clinical Policy and Protocol, the Citizen Journey.
- Incident management and the Risk Assessment Log
- Supervised on going
- Local Safeguarding and MECC training

Opportunity for any question/clarification is reiterated throughout the entire process.

#### 4.6. **Mobilisation Co-ordination**

Due to the highly flexible nature of this service Specification, it is likely that the Provider Operational Manager for the Testing Workforce (and Team Leaders) will be asked to support the mobilisation of a new site, delivery method or surge testing.

#### 4.7. **Auditing**

The Provider Operations Manager and Team Leaders will be responsible for carrying out on-site audits on processes and SOP's. This will include monitoring and reviewing the implementation of NHS Clinical SOPs, NHS Track and Trace training materials and general site processes.

A regular auditing system will be delivered with support from Public Health. These audits will also include staff wellbeing and mental health.

#### 4.8. **Mobile Testing Service Coordination**

The Provider Operations Manager, Team Leaders and the Test Operations Manager will have oversight of the operation and processes required on site for the coordination and set-up of Mobile Testing Services with support from Public Health.

The MTS Team Leader will work alongside the Test Operations Manager and Public Health to manage and continually review the process for:-

- Establishing locations for MTS'
- Arranging required temporary infrastructure
- Staffing of each MTU
- Creating a schedule for each MTS', as directed by Public Health and the Test Operations Manager.

#### 4.9. **Staff Provisions (Welfare / Feedback)**

The Provider Operations Manager and Team Leaders will be responsible for ensuring necessary provisions are made for all onsite staff. This will include dedicated staff welfare facilities.

Personal welfare is of paramount importance, it is essential that staff have access to information concerning the support available should they test positive on their daily LFT test and need to self-isolate.

Daily briefings and supervision should also provide spaces for staff to give feedback in. Staff welfare will be monitored through the auditing process.

### **5. KPIs:**

Initially the task is to mobilise a workforce to deliver testing across the existing sites in Tower Hamlets. However, it is anticipated that this will change and could include reducing the number of booths across sites and staffing a mobile testing service soon after the commencement of the

contract, and transitioning site to a Community Collect model. With this in mind, 6-weekly reviews will be held to prioritise workstreams and resources to need.

- Daily reporting of tests completed, +ve, -ve and voids;
- Weekly reports collating tests completed across all delivery sites/models;
- Auditing - daily and weekly returns;
- Good quality service delivery as measured through community engagement exercises;
- Flexible and collaborative working as measured through responsive, innovative and safe delivery of mobile and pop up delivery models;
- Safe and reliable delivery as measured through incidents, risk assessments and staff cover for all testing delivery methods.

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