

Second Interim Operational Review UK Cross Sector 10kv-Cloud Workshop

Rapid thematic analysis to inform ongoing Response and new Recovery

C19 National Foresight Group

In the spirit of continuous learning and reflection, this document is to be shared with LRFs, Partners and Government Departments.

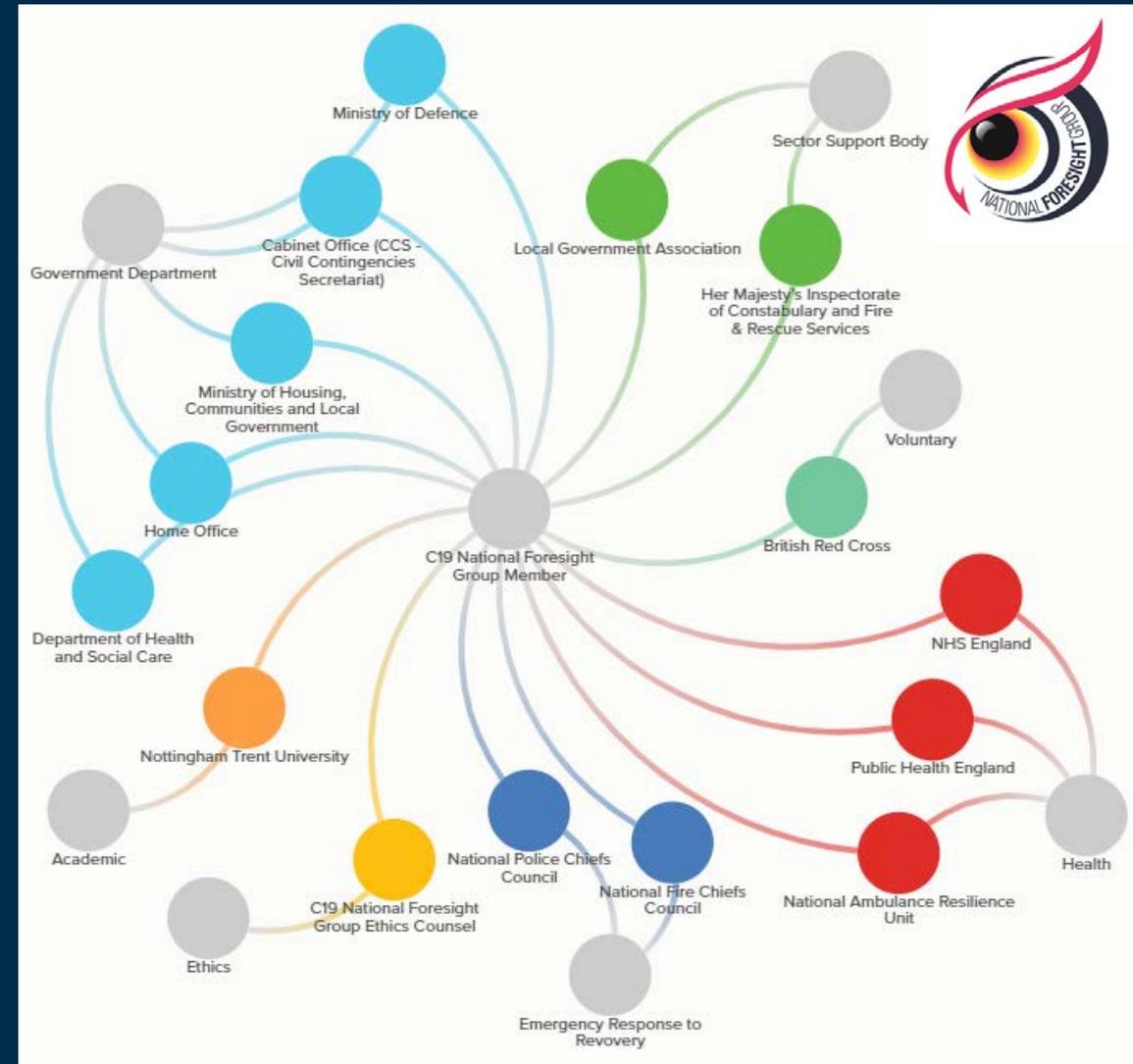
It is highly commendable that LRFs, Partners and Government Departments have engaged with such a duty of candour directly with this independent review and forthcoming reviews.

What is the membership of the C19 National Foresight Group

The C19 National Foresight Group is made up of individuals representing government, emergency response and recovery, academia, health and sector support bodies. They work together to provide a foresight function on COVID-19.

The group is chaired by Shaun West and meets throughout the week to support the response to COVID-19 now and into the future.

To contact the group email: C19FWG@lincolnshire.gov.uk



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Introduction

C19 National Foresight Group provide time and space for partners to reflect, seek a shared understanding of the COVID-19 emergency and forward look so as to make timely, collaborative recommendations to the strategic group for early intervention, considering the consequential impact of those, prioritising innovative actions which may save lives and minimise suffering.

This review was commissioned by Shaun West, Chairperson of the C19 National Foresight Group.

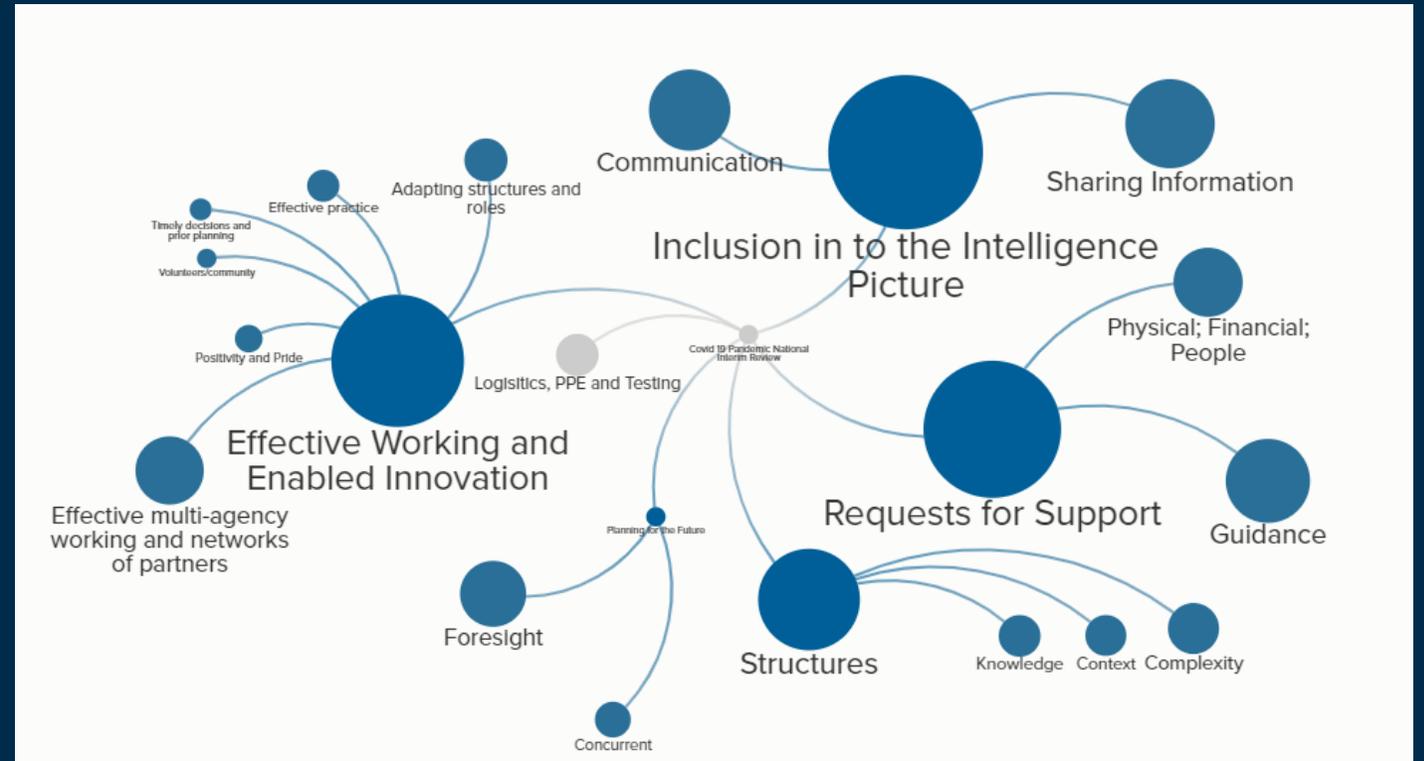
This second interim operational review was hosted by the Hydra Foundation and analysed by Nottingham Trent University to support ongoing and future work in response to COVID-19 across the UK. This review aims to provide space and time for reflection and to shape the future response, taking lessons from beyond response into recovery.

First Interim Operational Review Summary

The first interim operation review took place on Wednesday 22 April 2020. The first mid-crisis review of its kind. It brought together delegates to review their experiences of COVID-19 and to create a space to enhance our response. The analysis of this review yielded six findings and 21 recommendations.

These findings were shared with the UK Government and LRF Chairs.

Recommendations were sub-divided into fast and medium to long term and an actions tracker has been developed. Each of these recommendations has a sponsor and the C19 National Foresight Group is supporting the delivery of these recommendations.



Operational review scope and stats

Overarching goal

Delegates from across the UK afforded time and space, during the ongoing COVID-19 national emergency, to reflect upon their capacity, capability and sustainability throughout an enduring response. Individual and collective reflective practice designed to shape the future response, taking lessons from beyond response into recovery.

10kv Method

This interim operational review was supported using an online model of the 10kv review called *10kv-Cloud*. This system developed by the Hydra Foundation has been used in over 400 debrief and review sessions. This was the second time *10kv-Cloud* has been run across the UK in response to COVID-19.

10kv creates space for participants to post anonymous comment on questions posed to them. It also encourages reflection and comment on peer thoughts during the review. The contents of the 10kv are normally analysed, themed and shared as a detailed report to the sponsor and participants. A rapid review of the material has been undertaken during this review. Emerging findings and preliminary recommendations are shared with you here. The session parameters, invitees and strategic aims are set out below and were driven by the C19 National Foresight Group.

Questions asked during the review

1. Since the first national peak (April), in the context of your LRF...	2. Since the first national peak (April), in the context of your Sub-Regional structures...	3. Since the first national peak (April), in the context of the National structures...	4. Concurrent Emergency	5. Forward Look	6. Personal Reflections & Insights
What is working?	What is working?	What is working?	What is your preparedness for a major local outbreak alongside the duality of response and recovery?	What community engagement methods or approaches do you plan to undertake to inform your ongoing response and recovery?	This open section provides a space for you to record your personal insights, thoughts etc., which may not have been covered by the questions above
What isn't working?	What isn't working?	What isn't working?	How do you plan to manage concurrent events alongside the management of local outbreaks?	What learning can we take from how you are currently managing community challenges?	
How will you manage the next phase of response/recovery?	How will you manage the next phase of response/recovery?	What is required from national response in next phase of the response/recovery?	What are the gaps in capability due to the ongoing response to local outbreaks, recovery and planning for potential concurrent events?	In your existing plans, is there anything you think you should change? Have you discovered you are better prepared in some areas than others?	

Analysis

A thematic analysis of the data created has been undertaken by a team of five academics at NTU and the Hydra Foundation who have coded, line by line, all the material produced through the review. Through this coding findings emerged that represented the responses across each of the questions. Working with Subject Matter Experts, a series of preliminary recommendations have been developed for the UK Government and the emergency response community. A full review report will follow this rapid analysis and presentation.

Review stats

- Review took place on Wednesday 17 June 2020 between 15:05 and 16:15
- During the review over 170 delegates logged on via smartphones or laptops
- Over 48,000 words were generated over the six question areas
- Over 1,400 comments were shared by participants
- The raw data has been rapidly analysed by academics from Nottingham Trent University and the Hydra Foundation to create the emerging findings and preliminary recommendations within this presentation
- This is the fourth time an online review of this kind has been managed at this scale or complexity. The other reviews have been run UK wide, across Wales and in Northern Ireland

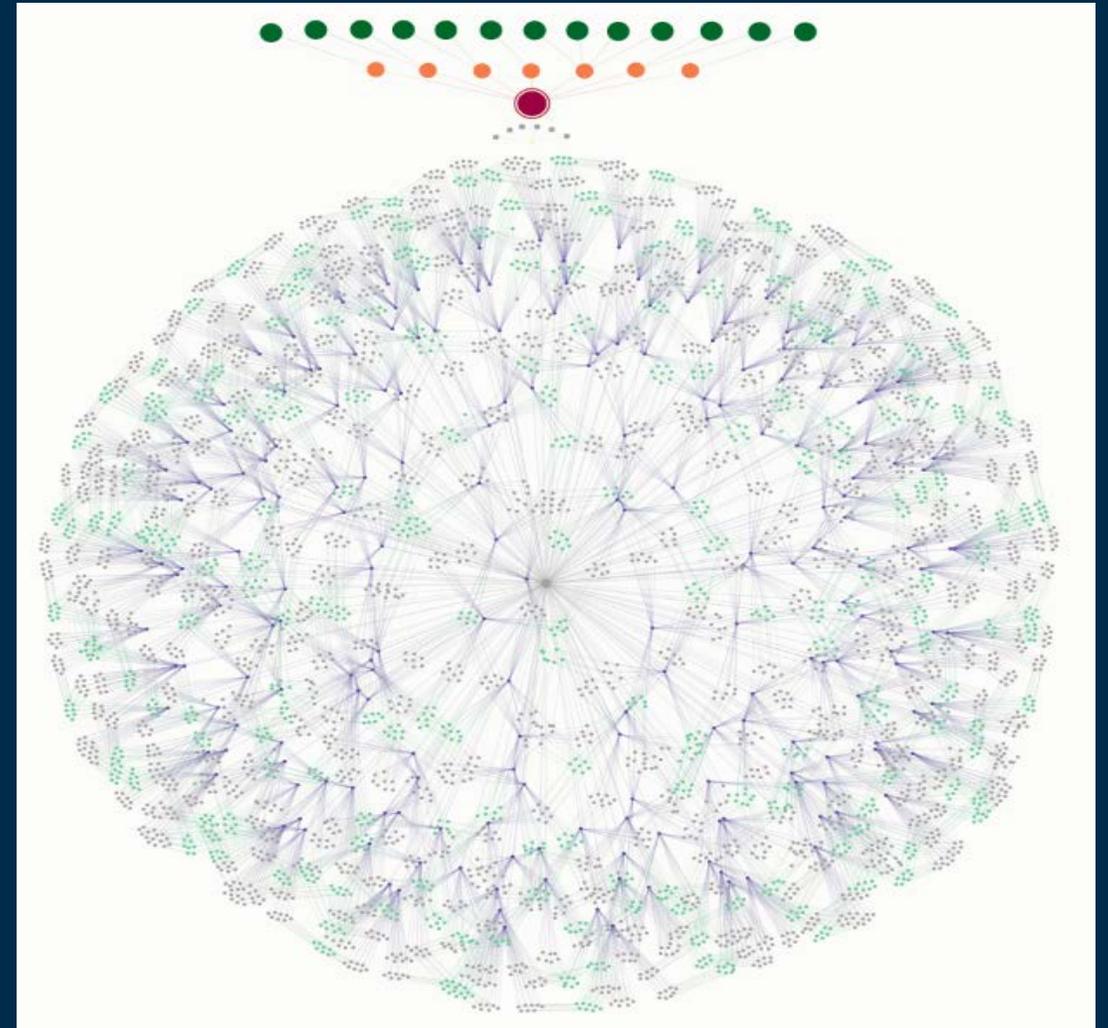
Key review emerging findings and preliminary recommendations

Seven emerging findings and thirteen preliminary recommendations

These are:

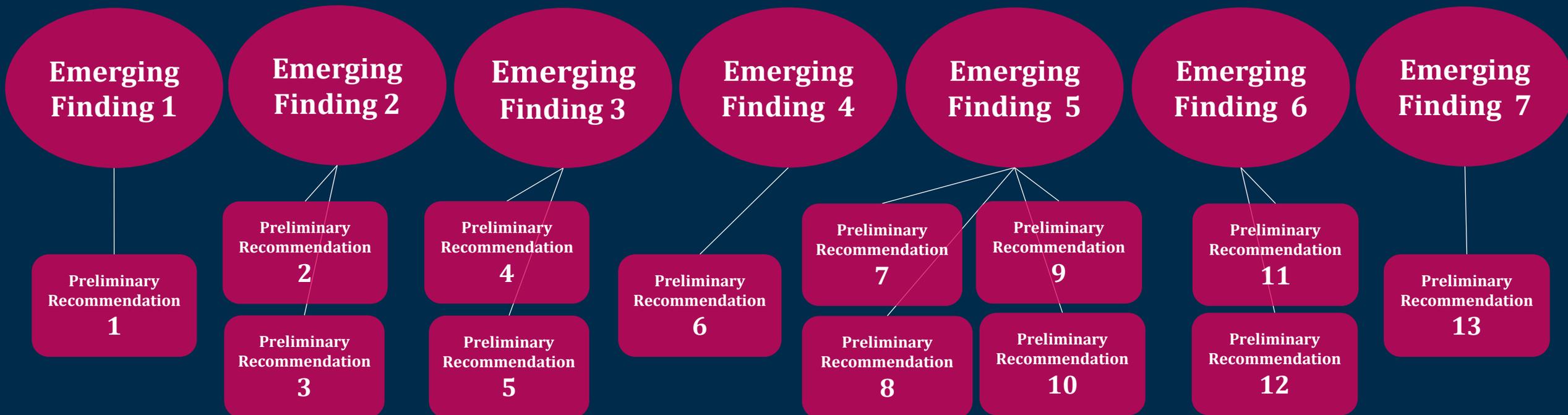
- Action orientated
- Positive
- Achievable
- Co-owned

This diagram represents the interim operational review analysis process. It shows the volume of material produced by delegates which the analytical team has coded and themed to create the emerging findings and preliminary recommendations discussed in this rapid review presentation.

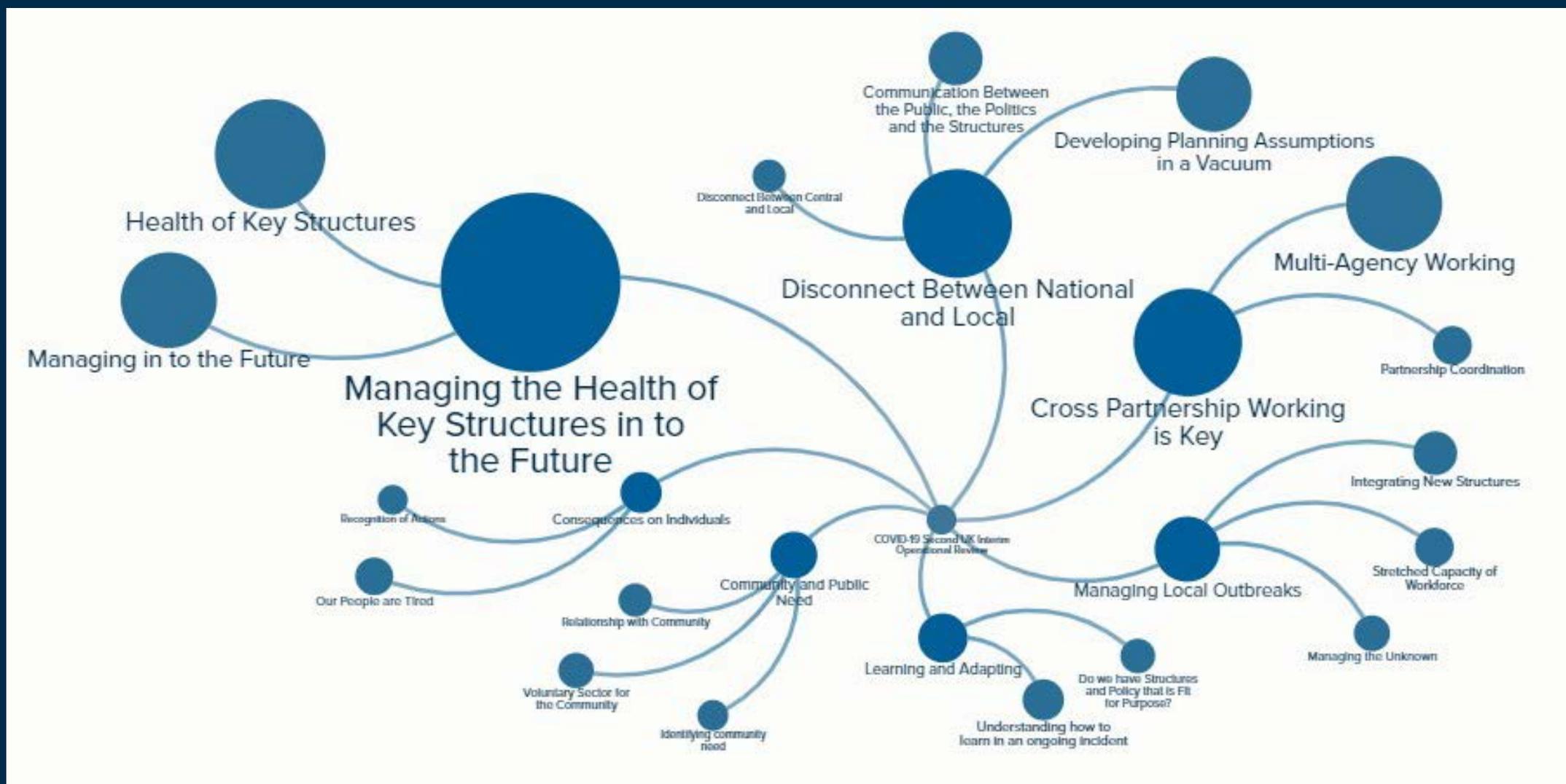


Emerging findings into preliminary recommendations

The seven emerging findings are linked to thirteen numbered preliminary recommendations in this presentation. The linkages between these are displayed below.



Emerging findings and subthemes



Disconnect Between National and Local

Disconnect Between Central and Local

“The government has latched on to LRFs (quite rightly) as well organised communities of agencies and responders, and have used that route to try and deliver outcomes not usually within our scope, (including intelligence gathering)”

“The view of Whitehall of the Regions and what is needed can, on occasions, be at variance to the view of the regions/LRFs/Localities and there is a perception that a lack of understanding of consequences when drawing up top-down policy is not conducive to a national/Regional relationship”

Developing Planning Assumptions in a Vacuum

“Data exchange at national level has been poor. The data machine is hungry and only really works one way...”

“We raised ‘share situational awareness’ up the partnership strategy to reinforce that data simply wasn't being shared by NHS-response”

“A single, SHARED set of planning assumptions is needed”

Communication to the Public, from the Politics, and Between the Structures

“The need to suddenly respond to national Ministerial Briefings when we could have been told beforehand so we could have planned the local response this has been a constant issue and it undermines public confidence”

“Trying to understand the health picture. Despite trying to improve relations and understanding, we are still being met with a stance that suggests we don't need to worry about it, its being managed by health”

Disconnect Between National and Local

This emerging finding has three subthemes

Disconnect Between Central and Local: This subtheme reflects the view that the Government has little understanding about the roles and responsibilities of the LRF structures which has an impact on the ability of the LRF to fulfil Government's expectations. In terms of sub-national structures in some places these do not exist, but where they are present they are welcomed, enhancing communication and providing a route for escalation.

Developing Planning Assumptions in a Vacuum: Sharing of data, intelligence, planning assumptions and guidance is very limited from Government, however the requests for data and information from the centre are time consuming and described as 'data hungry'. Sharing of data, intelligence, planning assumptions and guidance is happening more frequently horizontally with other partners, but this is still much lower for health.

Communication to the Public, from the Politics, and Between the Structures: Communications between government and LRF structures has been challenging in its effectiveness and timeliness. An announcement led approach to communication has meant LRF response has been continually reactionary. Communication is still not two way, but key contacts (GLOs) are more consistent and working better (on the whole). National level communication to the public has also been confused.

1. Establishing or strengthening sub-national networks should be explored to further enhance the accuracy and coordination of communication and intelligence between the local and national structures to bridge this gap.

Cross Partnership Working is Key

Multi-Agency Working

“Still having to wrestle with the fundamental disjoint created by having separate LRF and Local Health Resilience Partnerships, and key people on both sides lacking sufficient knowledge of the other”

“The military were better briefed than we were by utilising all of their liaison points and assimilating the data but did not willingly feed back in”

“Hugely improved regional dialogue with NHS, supported well by defence teams”

“LRF contacting neighbouring and other LRF's on their approach to recovery and benchmarking”

Partnership Coordination

“Sheer volume of information being issued has been chronic - there is a real need to reduce the volume of separate products / information flow and improve quality / benefit”

“Failure to take a whole system approach exposed communities whilst hospitals had capacity. Even within the NHS the focus was on the acute hospitals and not the community aspects”

“Good interagency support and a better understanding of what we can do as a LRF and what we can't”

Cross Partnership Working is Key

This emerging finding has two subthemes

Multi-Agency Working: Delegates reported that on balance the partnership working they are engaged in is going well, with many instances of exemplary working. Collaborative and new ways of working to overcome stretched resources means that innovation continues to be seen in the delivery of local response and recovery. The elongated nature of the incident has highlighted the time and energy organisational relationship management takes within the partnership, but the local structures appear to be actively reviewing and reflecting on their effectiveness and updating pace or arrangements of structures to keep them relevant and 'match fit'.

Partnership Coordination: This subtheme includes cross department (Government) working and a request to establish clear departmental leadership going forward, and to drive coordination at a national level. The main constituent contribution to this subtheme is regional or cross-region coordination which is requested for the long term effectiveness of the ongoing response and recovery phases.

2. Government should develop a common debrief methodology and shared learning mechanism. Reviews and local debriefs should aim to identify the enabling factors of these successful longer term response and recovery partnerships in this unique situation.
3. The UK Concept of Operations for the management of a national emergency should be subject to a rapid review in the context of COVID-19 to ensure all stakeholders are clear on the roles and responsibilities at local and national levels.

Managing the Health of Key Structures into the Future

Health of Key Structures

“We're asking organisations to operate at the edge of their remits to work effectively together. We don't want leaders on edge, or in the gaps, but rather comfortably moving their energy away from their core activity towards the edge of the place where their remit meets another's. That requires compensation, support, and resource, - the LRF structures are underinvested in and so their centre of gravity remains in the heart of one organisations response (usually).”

Managing in to the Future

“Danger that local outbreak plans run in parallel to established response/recovery structures”

“I would second this - public health doesn't always sit at neatly with emergency planning as it should and they have a track record of 'trying to do everything for themselves'. This is commendable but risks wider issues not being picked up”

“...Local district council politicians want to manage recovery themselves and solely at the district council level. Covid requires integration of response and recovery.”

“WE ARE HANGING OUT FOR A MULTI-YEAR SPENDING PLAN”

“Gaps are really around the capacity to cope with more LRF lead issues as there has been increased intensity and expectation on what LRFS can achieve in a day without any funding structures or permanent teams”

Managing the Health of Key Structures into the Future

This emerging finding contains two subthemes

Health of Key Structures: This subtheme describes the strain on structures three months in to the response and recovery. The 'health' of these structures on balance appear sound, but delegates are clear that they are fragile, stretched too wide and populated by the same organisations. It is unusual for these structures to become medium or longer term entities. It is important to explore how these key structures and organisations continue to perform and remain stable in light of stretched resources and scope.

Managing in to The Future: Delegates were very clear about the challenges of managing activity within and between partnerships and formal structures in the future. The challenge of balancing the impacts on capacity from the EU Transition demands, the creation and population of new Local Outbreak Management structures with existing structures, and the requirements of recovery are discussed. Throughout this data is the clear need for urgent financial assistance.

4. Despite the emergency management structures being agile and creative, coordinated and facilitated national shared learning can identify what maintenance could be done to facilitate ongoing strength in these structures in light of ongoing demands.
5. UK Government needs to resolve the urgent and longer term resourcing needs and financial assistance required for LAs and LRFs to maintain an effective C-19 response and also sustain their core business as usual services.

Managing Local Outbreaks

Integrating New Structures

“Having to be truly flexible. “flat pack” approach is being used to stand down capacity...establishing triggers and thresholds is a vital element of that work to ensure...understanding of when and how quickly we can stand this up”

“I think the risk is that we downsize incident response too early, Our BAU structures may be too unwieldy to respond with pace and efficiency”

Managing the Unknown

“The key capability is the ability to generate a lockdown due to the lack of legal support and national political support, making such a lockdown impossible due to inevitable lack of consensus. The current guidance gives a clear role of DPHs and the Health Protection Boards, but with unclear statutory authority”

“Local outbreak management planning is a risk as we have little intelligence to identify what resources will be required. Early anecdotal evidence is that very little comes from the national system which may indicate a reluctance for individuals to evidence non compliance. However most responses locally have been from local sources where residents report on their neighbours and local businesses. This could cause real local tensions and risk public disorder”

Stretched Capacity of the Workforce

“Huge concern regarding the work required in preparing for a possible no deal Brexit”

“Many core roles within them are absorbed by officers undertaking work in addition to their normal day jobs”

Managing Local Outbreaks

This emerging finding contains three subthemes

Integrating New Structures: Delegates were clear that the additional load of managing new structures alongside their existing ones (which are likely to be ongoing in to EU Transition planning and winter pressures) would likely impact on their preparedness in managing a local outbreak. This is not about lack of planning, but management of the new processes and existing activity in the round. Including managing the 'flatpack' approach to structures standing up and being stood down.

Managing the Unknown: This captures managing the risks of COVID-19 and a second wave. There are a lot of unknowns and it was felt national guidance and leadership was required on issues such as assumptions to plan against, ensuring organisations shared data and planned together (e.g., health partners and the LRF), clarity of process, assurance of enforcement powers, and likely impacts on communities and community relationships.

Stretched Capacity of the Workforce: Delegates noted that the same organisations are staffing the majority of these structures and they run out of people and energy very quickly.

6. A focussed national rapid consultation should take place, including every LRF manager, Directors of Public Health England and NHS England, to establish common approaches to managing this new demand, with a follow up in three months to review how these are working and the risks and benefits associated with different approaches. Learning should be shared quickly back to both roles.

Learning and Adapting

Understanding How to Learn in an Ongoing Incident

“I think the biggest area that we could learn from has been the amount of duplication - simple tools (such as this) or impact assessments, contact books, PPE quantities / usage surveys, debrief questionnaires etc could have been produced once by a national team. Instead each LRF has to develop its own systems / tools on top of responding / recovering”

“Capturing the work the community recovery group have done so far to see best practices and how to engage going forward”

“This was bigger than we ever imagined. The feeling of being overwhelmed individually and collectively was temporary. The power and confidence gleaned from the knowledge and experience of partner organisations was humbling to be a part of. Being comfortable being uncomfortable is a condition that we must ensure we reflect in our training”

Do We Have Fit for Purpose Structures and Policy

“A wholesale change will have to wait but we can do a lot with changes (for example putting LRF's on statutory footing and placing obligations on Cat 1 and Cat 2 responders). Equally the Conops at a UK level needs a rapid review”

“The CCA is now out of date and radically needs an overhaul - the expectations of the LRF are way beyond anything referenced within the legal status of an LRF under existing legislation”

“The CCA sort of works whilst in peacetime but whilst in major incidents it suffers. There's no imperative to force partners to work together, no inspectorate function, little accountability and no funding structure”

“A review of CCA might be useful, but could also turn into a distraction or blame game. The pandemic and Brexit are not typical incidents”

Learning and Adapting

This has two subthemes

Understanding How to Learn in an Ongoing Incident: This subtheme refers to the dynamic and unique prospect that local organisations have to learn whilst the incident is still ongoing. Where usually only a feed forward exists, the elongated nature of response and recovery for COVID-19 allows for feedback cycles to ensure incident adaptation and learning. Preparedness activities (such as table top planning, scenario development and mapping, exercising and skillset mapping), sharing lessons between LRFs through networks (more opportunity was called for to do this) and uncertainty planning were all being used to inform and guide how LRFs could approach their own learning as COVID-19 management is still active.

Do We Have Fit for Purpose Structures and Policy: There was discussion as to whether local and national structures should be reviewed and if they were fit for purpose for the management of COVID-19 (not all were in agreement that they were not fit for purpose for other types of incident). There was also a call for a review of the Civil Contingencies Act, although this was not unanimous.

7. The methods of learning during an ongoing event should be captured and included in relevant training and exercising doctrine.
8. The lessons gained from additional methods of learning should be collated and shared across the relevant organisations as soon as possible, through reports on reviews such as this process.
9. To ensure consistency of response in each local area, Government should produce a COVID-19 specific national resilience standard and rapidly develop and implement an assurance mechanism through which all LRFs can be independently assessed against that and other relevant national resilience standards.
10. The Civil Contingencies Act 2004 should be reviewed in the context of COVID-19 in order to ensure the UK civil protection framework is capable of managing the full range of foreseeable national civil emergency threats to the UK.

Consequences to the Individual

Our People are Tired

“Important to recognise just how tired staff are emotionally. Well-being is an important factor in preparing for future challenges of 2nd wave and annual flu epidemic. There is a limit to resilience”

“Risk of being seen as a weak link if you take time out. And likely that ongoing demands will make it difficult for proper recuperation as we move through recovery and have the risks of second spike/ local outbreaks”

“It is clear that the success of the approach is down to individuals, and their own work ethic and values. We have come a long way with a few individuals who have dug in and put in a lot of hours in a stressful period of a lot of unknowns with a changing narrative on a daily, sometimes hourly basis”

Recognition of Action

“The care home community and home care/sheltered living and the voluntary sector were all key to the management of this pandemic and they got forgotten at the beginning of this. We now have a fragile community care system with providers/col orgs facing viability challenges”

“I am concerned that when the public inquiry comes that decisions that have been made locally in good faith, and individuals, will be hung out to dry. Hindsight is a wonderful thing, but the failure to take seriously the messages of previous exercises to prepare us for a pandemic when this was top of the risk register will be buried by individuals being criticised for impossible choices”

Consequences to the Individual

This theme has two subthemes

Our People are Tired: This subtheme captures the emotional toll that managing COVID-19 has had on staff. Staff are fatigued, exhausted and have little remaining capacity. They have managed their roles flexibly, in a changing operational context, where local and organisational leadership are exhausted. They have done this all with knowledge of how the impacts of managing the virus have manifested within communities where the most significant impacts have been felt. They have also done this whilst managing their own risk to the virus and that of their family. Many have not taken leave and are unsure when and how they will be able to.

Recognition of Actions: There are two aspects to this subtheme, the pride in actions taken and the recognition that some decisions have had consequences. There are many instances in this subtheme of pride in successes and feeling of doing the right thing in the right way for the right reasons. However, there is also the lived experience and impact of seeing some decisions play out and the realities of their impacts are challenging to process.

11. In the immediate term, national support structures such as *Our Frontline*, *Mind*, *NHS crisis lines* should be publicised by all partnership organisations to their staff. Internally, response and recovery structures should be seeking advice on their support policies and mechanisms to ensure they are suitably broad in their duty of care and support to those involved in the immediate, medium and longer term response and recovery.
12. LRFs and associated partner organisations should ensure their policies of refreshing and rotating staff are implemented and reviewed at a suitable time period.

Community and Public Need

Identifying Community Needs

“We have been fortunate that the public have been overwhelmingly in support of measures in most areas and supportive of enforcement action. Fresh Covid measures in a second peak might attract less public support and it is clear we cannot enforce our way out of this problem”

“Moving from the response phase into recovery, the growing problem of food poverty is really stark. The Food strategy appears weak and needs stronger direction to ensure there is no unmet need. Food banks are doing an amazing brilliant job but need to be part of a structured national response -- it feels too ad-hoc and under-funded.”

Relationships with the Community

“Similarly community expectation could be a real concern as we may not be able to offer our usual service to communities at risk”

“Preserving the connected and compassionate communities really important; but takes some support and coordination. Not street parties, but local actors listening to local communities at a micro-geography level and listening to their asks then acting on them”

Volunteering Sector for the Community

“Engagement of the voluntary sector at a local authority level has been a successful element of the response. The number of volunteers has increased and we can build on this good will”

“The National volunteer scheme has been disconnected from local areas, which is not helpful as these are residents that we want to continue to engage and support. Understanding how many were recruited in the area and what tasks they had signed up to do at an earlier stage would have helped and assisted planning and likely would have led to them being used more effectively...local authorities have relied on their own volunteering schemes and existing voluntary sector agencies. We run the risk of disenfranchising people from this type of activity in future”

Community and Public Need

This emerging finding has three subthemes

Identifying Community Needs: There was discussion about the developing urgency to understand the impact on the health and social inequalities of the pandemic within communities. This includes understanding the impact and consequences of the management of the pandemic both in the immediate, medium and longer term.

Relationships with the Community: Community expectations and how to respond and manage these was discussed within this subtheme. The ability to effectively connect and manage partnerships with Voluntary and Community Sector organisations was seen as crucial to managing some aspects of community need going forward and maintaining a relationship with the community.

Volunteering Sector for the Community: Discussion of this subtheme includes the ability to retain the current volunteering activity and convert that in to longer term capability. This was prioritised in particular to those members of the community who were vulnerable before the pandemic, or whose experience of the pandemic has led to the development of vulnerabilities.

13. Government should afford LRFs and LA's access to a toolkit of methods being utilised to identify and map community cohesion, community vulnerability and community solidarity. This would inform priorities of the immediate recovery work, and also the approach of future community relationships in the context of Local Outbreak Management and support aggregation to the sub-national and national levels whilst allowing local innovation to be maintained.

Preliminary Recommendations

1. Establishing or strengthening sub-national networks should be explored to further enhance the accuracy and coordination of communication and intelligence between the local and national structures to bridge this gap.
2. Government should develop a common debrief methodology and shared learning mechanism. Reviews and local debriefs should aim to identify the enabling factors of these successful longer term response and recovery partnerships in this unique situation.
3. The UK Concept of Operations for the management of a national emergency should be subject to a rapid review in the context of COVID-19 to ensure all stakeholders are clear on the roles and responsibilities at local and national levels.
4. Despite the emergency management structures being agile and creative, coordinated and facilitated national shared learning can identify what maintenance could be done to facilitate ongoing strength in these structures in light of ongoing demands.
5. UK Government needs to resolve the urgent and longer term resourcing needs and financial assistance required for LAs and LRFs to maintain an effective C-19 response and also sustain their core business as usual services.
6. A focussed national rapid consultation should take place, including every LRF manager, Directors of Public Health England and NHS England, to establish common approaches to managing this new demand, with a follow up in three months to review how these are working and the risks and benefits associated with different approaches. Learning should be shared quickly back to both roles.
7. The methods of learning during an ongoing event should be captured and included in relevant training and exercising doctrine.

Preliminary Recommendations continued

8. The lessons gained from additional methods of learning should be collated and shared across the relevant organisations as soon as possible, through reports on reviews such as this process.
9. To ensure consistency of response in each local area, Government should produce a COVID-19 specific national resilience standard and rapidly develop and implement an assurance mechanism through which all LRFs can be independently assessed against that and other relevant national resilience standards.
10. The Civil Contingencies Act 2004 should be reviewed in the context of COVID-19 in order to ensure the UK civil protection framework is capable of managing the full range of foreseeable national civil emergency threats to the UK.
11. In the immediate term, national support structures such as Our Frontline, Mind, NHS crisis lines should be publicised by all partnership organisations to their staff. Internally, response and recovery structures should be seeking advice on their support policies and mechanisms to ensure they are suitably broad in their duty of care and support to those involved in the immediate, medium and longer term response and recovery.
12. LRFs and associated partner organisations should ensure their policies of refreshing and rotating staff are implemented and reviewed at a suitable time period.
13. Government should afford LRFs and LA's access to a toolkit of methods being utilised to identify and map community cohesion, community vulnerability and community solidarity. This would inform priorities of the immediate recovery work, and also the approach of future community relationships in the context of Local Outbreak Management and support aggregation to the sub-national and national levels whilst allowing local innovation to be maintained.

Opportunities and Risks

Mitigation of Risks

- **Methodological issues in the review process**
10kv has been used over 400 times and the analysis conducted (whilst rapid) has been done with academic integrity and method
- **Review insights not shared or acted upon - We have given LRFs and emergency response partners a voice and it is to our peril if we do not act upon it**
We have a clear actionable plan to share insights with this group and participants to inform future work and prioritise
- **Losing sight of the rich data within the full *10kv-Cloud* review process by only acting on preliminary recommendations**
Action plan in place with NTU and the Hydra Foundation to ensure final report on *10kv-Cloud* review is shared and made available
- **This presentation or full report is shared beyond the intended recipients which impacts on participating delegates and partner's ability to share insights with confidence and candour**
The document, part or whole, will be shared safely, professionally and responsibly. We remind recipients of their obligations under the document classification **Official-Sensitive**
- **A raw data compromise undermines discretionary effort from participants and distracts from the frontline effort to tackle COVID-19**
Raw data is held securely and compliantly with insights shared with trusted partners

Opportunities

- This review has afforded an updated and live insight into the operational activity and reflections of our key practitioners from across the UK as they manage ongoing actions related to COVID-19
- It allows us the ability to modify and enhance approaches to this and future challenges
- It allows us to see progression and growth from the first interim operational review
- It provides an opportunity to acknowledge and recognise the work done by partners as we move to the duality of response, recovery and Local Outbreak Management of COVID-19 by LAs, LRFs, Partners and Government Departments

C19 National Foresight Group Summary

C19 National Foresight Group believes we must all recognise the pride and achievement of what has been achieved so far. We need to be agile and proactive moving ahead. We are at a tipping point as we move from Response to new Recovery and our actions must reflect this.

Short Term

We need to learn from our experiences so far and make immediate changes whilst responding, lives are still at stake. To support our people at local, regional and national level. Create a focus on intelligence and data to enhance consistency and clarity from LRF to COBR and back. We should continue to triage the main issues and be mindful of the challenges of concurrency

Medium Term

There is a clear appetite to co-design and address the new Recovery framework and UK COVID-19 Exit Strategy. There is precious time to do this

Long Term

This review has highlighted the opportunity for learning, policy and system change that must be developed

save lives, relieve harm and support communities

Three preliminary recommendations LRFs should focus on now

6. A focussed national rapid consultation should take place, including every LRF manager, Directors of Public Health England and NHS England to establish common approaches to managing this new demand, with a follow up in three months to review how these are working and the risks and benefits associated with different approaches. Learning should be shared quickly back to both roles.
11. In the immediate term, national support structures such as *Our Frontline*, *Mind*, *NHS crisis lines* should be publicised by all partnership organisations to their staff. Internally, response and recovery structures should be seeking advice on their support policies and mechanisms to ensure they are suitably broad in their duty of care and support to those involved in the immediate, medium and longer term response and recovery.
12. LRFs and associated partner organisations should ensure their policies of refreshing and rotating staff are implemented and reviewed at a suitable time period.

What next?

- The full report will be shared by Shaun West, the Chairperson of the C19 National Foresight Group, by Wednesday 22 July
- This rapid analysis presentation is available for use by the commissioning team to inform ongoing work by LRFs, Partners the UK Government
- Ongoing foresight work undertaken by C19 National Foresight Group in the form of regular foresight briefings, thematic strategic roundtable reports and commissioned reviews shared via LRF Chairs and SOLACE networks. All previous outputs have been shared. We ask these are distributed to relevant team members.
- A third interim operational review has been commissioned by C19 National Foresight Group and will be hosted on Wednesday 16 September 2020

Questions and discussion

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