Considerations for 'Recovery' in the Context of Covid-19

This Executive Summary reviews the language and meaning focussing on the concept of 'recovery' from a strategic roundtable focus group which ran on the 07/05/2020. These have been summarised and themed from a recording of the focus group using thematic analysis.

Prepared by Dr Rowena Hill on behalf of the C19 National Foresight Group.

Definitions

Restart

This is a discrete, short-term process of restarting any services and public service provision that were paused during the initial response phase of Covid-19. For example, wider health services other than those related to Covid-19 care, aspects of social work, etc. Please note: restart also includes the provision of those services restarting using alternative delivery models to pre-Covid-19 to accommodate physical distancing measures and guidelines for operating as these change through the pandemic lifecycle.

Phases of recovery

The distinct stages in the process of recovery. These include; *Stabilisation* of the economy; economic developments; interventions with commerce. *Adaptation* of social interventions; response interventions such as physical distancing; community engagement and development; activity to manage both latent and resurge demand after transitions.

Transition between phases

The short *period of change* from one phase to another within the umbrella of the recovery process. The *purposeful change* which local, regional or national decision-makers manage with a community of place or interest, with the objective of moving from one phase to another within the recovery process. This is more effective the higher the alignment of communication, the greater the shared understanding of the current and future phases, and the higher the community engagement and participation in those changes.

*Indicative **timelines** for planning purposes (3 months, 6 months, 12 months, 24 months, 5 years, 10 years)*

The term 'Recovery' is informed by (see table overleaf)...

ECLIPSING THE DICHOTOMY OF RESPONSE/ RECOVERY

Agreement that a dichotomy where recovery is initiated very soon after response begins does not fit the projected trajectory of Covid-19*. The main challenges expressed:

1) It needs to be a non-linear sequencing of phases within two clusters of activity (response will not cease with the emphasis solely on recovery).

2) An intertwined approach is needed, running the two together to manage Covid-19 as response will need to 'pulse' throughout ongoing recovery work depending on the r-rate. Not the traditional bluelight chaired response and LA chaired recovery.

3) The number of phases needed both in response and recovery will be more than those in a 'typical' major incident due to the wide range of activity needed, societal wide approach is needed to manage the potential challenges in the pandemic lifecycle.

The projected trajectory is referred to as the 'pandemic lifecycle', meaning the epidemiological patterns of the virus over time. The interventions needed to respond and manage the r-rate are called 'interventions'.

Recovery (in the context of Covid-19)…		
…is not:	a return to pre-Covid-19 life, this is not possible as the social and economic path of the UK has altered too fundamentally to achieve 'a return'.	the aim 'to recover', it is not a 'state of being' to achieve for the UK or its local geographies, it should not be arrived 'at', more moved *through*.
…is:	an umbrella term used to describe the ***process of moving through a series of transitions and phases***. The aim of this ***process*** should be to: • increase familiar societal routines • decrease threat to life, or quality of life, from the spread of the Covid-19 virus • prevent, or decrease, effects of primary impacts from Covid-19 (e.g., physical distancing, economic precarity) taken to manage the r-rate or local virus clusters • prevent, or decrease, effects of secondary impacts from Covid-19 (e.g., health inequalities, wellbeing challenges emerging as a consequence of primary impacts) • facilitate society to accommodate the new ways of living and working brought about by medium- and longer-term changes to manage the Covid-19 pandemic and the associated impacts	
…structures should have:	• clear governance between recovery activities and response phases. The governance should allow for recovery to sit in the longer timeframe, with response phases stepping up activity when needed as directed by the r-rate • liaison mechanisms between Recovery Coordinating Groups and Strategic Coordinating Groups (SCGs) • sustainability plans to enable SCGs and TCGs to remain in situ for at least 12 months, or until the response phases are no longer needed (which in the context of Covid-19 means that the global societal health threat has passed and a vaccine has been administered to most of the UK population) • pre-determined thresholds or trigger points for standing up response activities within the longer recovery timeframe • consideration of how dual response and recovery would be staffed between the main actors (health, police, local authorities, fire) • evidence based scenarios and assumptions within a framework which allows for those scenarios and assumptions to be revisited and redefined • cognisance of EU exit planning	
…needs to be:	an iterative process by design from the start. There is a requirement to ensure that recovery plans can adapt and continually evolve in response to: • the continuously changing pandemic lifecycle and consequential interventions such as response to the r rate • the continuously changing wider context (including Brexit and the natural societal shifts in priorities over the coming years) • shifts between levels of the national five stage plan and associated interventions • define and redefine development opportunities against community need	