Appendix A: Outbreak Control Team standard documents

South East OCT/IMT Terms of Reference

The terms of reference should be agreed upon at the first meeting and recorded accordingly.

Suggested terms of reference:

- 1. Verify an outbreak/incident is occurring
- 2. To review the data/evidence for contact tracing and COVID secure measures (setting/community)
- To regularly conduct a full risk assessment whilst the outbreak is ongoing, including determining UKHSA outbreak/incident level (i.e., local, regional, national)
- 4. To develop a strategy to deal with the outbreak/incident and allocate responsibilities to members of the OCT/IMT based on the risk assessment
- 5. To agree appropriate further investigations for contact tracing, and COVID secure measures (setting/community)
- 6. To agree and initiate further testing (e.g., MTU deployment)
- 7. To ensure that appropriate control measures are implemented to prevent further primary and secondary cases
- 8. To review and understand the impacts across the city's different populations and use this to inform response
- 9. To communicate as required with other health professionals, partner organisations, setting and staff (if applicable), media, public, and local politicians, providing an accurate, timely and informative source of information in appropriate accessible formats / languages
- 10. Consideration of the need to refer aspects of incident control for legal or expert opinion.
- 11. Agreeing standardisation of email subject headings
- 12. To make recommendations regarding the development of systems and procedures to prevent a future occurrence of similar incidents and where feasible enact these
- 13. To determine when the outbreak/incident can be considered over, based on ongoing risk assessment
- 14. To produce a report or reports at least one of which will be the final report containing lessons learnt and recommendations.

South East OCT/IMT COVID-19 AGENDA

Outbreak/Incident location:

HP Zone No: Date & Time:

Conference details: Usually virtual by skype/teams

| Item: | Item: |
|-------|---|
| 1 | Introductions and apologies |
| 2 | First meeting – agree chair and TOR |
| | Minutes of previous meeting |
| 3 | Review of information currently available |
| | Contact tracing (case and close contact numbers) |
| | COVID secure measures (setting/community) |
| 4 | Current risk assessment |
| 5 | Further investigations/controls needed |
| | Contact tracing |
| | COVID secure measures (setting/community) |
| | Testing including MTU deployment |
| 6 | Communications |
| | Agree lead communications teams for: |
| | - Public / media and wider communications |
| | COVID secure measures at setting (if applicable)Contact Tracing at setting (if applicable) |
| | - Health partners |
| | - LRF partners and local politicians |
| | Identify communications needed for: |
| | public / media / high risk settings (if applicable) |
| | - setting / staff / affected persons etc |
| | - health partners e.g., GPs, hospitals etc |
| | LRF partners and local politicians Identify translation needs |
| 7 | Capacity Issues – including out of hours challenges |
| 8 | Review and record key decisions |
| | (including closure of outbreak/incident when appropriate) |
| 9 | Review, record and set timeframes for key actions |
| 10 | AOB |
| 11 | Date and time of next meeting |
| | |

OCT/IMT Membership – Attendees and apologies

| Organisation | Role | Name (Initials) and job title | Present / Apologies |
|----------------|------------------------------------|-------------------------------|---------------------|
| UKHSA SE | Consultant in Communicable | | |
| HPT | Disease Control / Consultant in | | |
| | Health Protection* | | |
| | Health Protection Practitioner | | |
| | Regional Communications Lead | | |
| | Field Epidemiology Service | | |
| County / | Director of Public Health / Public | | |
| Unitary Local | Health Consultant* | | |
| Authority | Public Health Lead | | |
| | Infection Control Lead (as | | |
| | appropriate) | | |
| | Communications Lead | | |
| | Emergency Planning Lead (as | | |
| | appropriate) | | |
| | Directorate / Service Lead | | |
| | (as appropriate) | | |
| District / | Environmental Health Practitioner | | |
| Borough Local | / Lead | | |
| Authority | Communications Lead | | |
| | Emergency Planning Lead (as | | |
| | appropriate) | | |
| | Directorate / Service Lead | | |
| | (as appropriate) | | |
| Clinical | Director / senior manager | | |
| Commissioning | Communications Lead | | |
| Group Other | As appropriate to setting | | |
| Otrici | As appropriate to setting | | |

^{*}Chair to be agreed in advance of meeting, together with administration support

South East OCT/IMT COVID-19 MINUTES

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|---|----|-----|------|---|----------|----------|
| | | | | | | |

HPZone No: Date & Time:

Chair:

Minute Taker:

| Item | Item: | Actions/Owner/Timescale |
|------|---|-------------------------|
| No: | | |
| 1 | Introductions and apologies | |
| | See Attendance / Apologies list | |
| 2 | First meeting – agree chair and TOR | |
| | Minutes of previous minutes | |
| 3 | Review of information currently available | |
| | Contact tracing | |
| | COVID secure measures (setting/community) | |
| 4 | Current risk assessment | |
| 5 | Further investigations/controls needed | |
| | Contact tracing | |
| | Setting COVID secure measures (setting/community) | |
| | Testing including MTU deployment | |
| 6 | Communications | |
| | Agreed lead communications teams: | |
| | Public / media and wider communications – | |
| | COVID secure measures at setting – | |
| | Contact Tracing at setting – | |
| | Health partners- | |
| | LRF partners and local politicians – | |
| | Details of agreed communications: | |

| | public / media/ high risk settings – |
|----|--|
| | setting / staff / affected persons etc – |
| | health partners e.g., GPs, hospitals etc – |
| | LRF partners and local politicians – |
| | Agreed translation needs: |
| 7 | Capacity Issues |
| 8 | Key decisions (see decision log) Agreed email subject heading |
| | Closure of outbreak/incident (when appropriate) |
| 9 | Key actions (see action log) |
| 10 | AOB |
| 11 | Date and time of next meeting |

Decision Log

| Log No: | Key Decisions made |
|------------|-------------------------------|
| 1 | Agreed email subject heading: |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |

Action Log

| Action No: | Action | Owner | Date completed |
|---------------|--------|-------|----------------|
| 1 | | | _ |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |