

**CITY AND COUNTY OF CARDIFF  
DINAS A SIR CAERDYDD**

**Employment Conditions Committee: 31 July 2007**

**Report of the Chief Executive**

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**PANDEMIC INFLUENZA – HUMAN RESOURCES IMPLICATIONS:  
UPDATE**

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**Background**

1. A report was placed before this Committee on 15<sup>th</sup> January 2007 aimed at highlighting the Human Resources implications in planning for and responding to an influenza pandemic. It aimed to highlight the issues that needed to be addressed to ensure a planned and coordinated response to the pandemic and to ensure that the Council could maintain its essential services and in turn its responsibilities to the people of Cardiff. The Committee noted the work undertaken so far in reviewing the implications of an influenza pandemic and requested that an update be submitted to a future meeting to highlight further developments and proposals.
2. This further report aims to update and bring to the Committee the issues and concerns being fed back to the Internal Pandemic Planning Group from all Service Areas. It also aims to highlight the barriers to planning that are being experienced.

**Current Situation**

3. In view of the immediacy of the threat of pandemic influenza, the World Health Organisation (WHO) recommends that all countries undertake urgent action to prepare for a pandemic. The WHO Alert Phase remains at 3 though this can change at any time. Reports have been circulating that victims of H5N1 Avian Flu in Egypt are being tested for a possible mutation of the virus that may make it more infectious to humans.
4. The UK government is recommending that all organisations adopt robust and flexible generic business continuity management arrangements which will help ensure that the impact of any disruptions will be minimised. In the event of an influenza pandemic, businesses will have a key role to play in reducing the risk to employee's health and safety as far as possible, as well as maintaining essential operations.
5. Cardiff Council has a well established Internal Pandemic Planning Group. It is chaired and co-ordinated by the Emergency Management Unit and it is currently planning and developing the Council's response to such an event.
6. If an influenza pandemic occurs, the Council will need to maintain essential services and play a role, in partnership with external agencies, in managing the pandemic.

7. Planning assumptions remain at 25% of employees being absent through sickness directly attributable to the pandemic or as a result of having to look after sick persons at home. Allowances will still have to be made for staff being absent with illness not related to the pandemic. The possible closure of schools and care homes will also have a major affect on the workforce.
8. National and regional guidance is still vague but if the risk increases and should a pandemic occur the UK Government will be issuing public health information and guidance through the National Public Health Service and Welsh Assembly Government.

### **Current Planning**

9. An action plan has been produced by the Internal Pandemic Planning Group highlighting the work that needs to be done by all Service Areas prior to the pandemic threat materialising. (Appendix 1). Action plans have also been produced that highlight the work that will be needed during the 4 UK alert levels and post pandemic (Appendix 2). A draft Cardiff Council Pandemic Plan is being produced which aims to give an overarching strategic view of the Council's response to a pandemic flu outbreak.
10. On March 30<sup>th</sup> 2007 a presentation and small exercise was give to the Senior Management Forum. The aim was to highlight issues surrounding Pandemic Flu and its possible effect on Cardiff Council. It was well attended and well received with very positive feedback being given.

### **Issues**

11. A great deal of the work preparing for a pandemic is business continuity work. This work has started across the Council and should now be geared up to ensure essential services that must continue during a pandemic are identified and resourced. Equally non essential services need to be identified to enable a clearer picture of the resources that can be utilised elsewhere within the Council. This must be done within Service Areas and corporately across the Council. This work will not only assist the response to a pandemic but will greatly enhance the Councils response to other disruptive challenges.
12. A wide ranging concern is being raised regarding the overall command and control structure that will be employed during a pandemic. During a major incident the command and control structure is clearly defined with the Chief Executive and the Corporate Management Team making up the Gold group. This incident will be different in that those on the Gold group could be affected by the infection and therefore unable to take on the role. It is thought that wider ranging powers will need to be given to Operational Managers and other Managers to make decisions in what will be a crisis management situation.
13. Protocols and procedures for the movement of employees from one Service Area to another to ensure the continuation of essential services will need to be addressed. This will bring with it the need for regular training and shadowing across Service Areas, a practice currently being used in other Councils to facilitate this.
14. A qualification and skills database will be needed to allow managers access to the information they will need to ensure the correct staff are brought in to continue to provide the level of service required. The database will need to list the qualifications,

skills, checks and life skills of a person e.g. administration experience, experience of working with children, Criminal Record Bureau checks etc.

15. The full capabilities of the SAP system will need to be explored to ascertain whether this database can be set up and also a procedure for the collection of such data for the database will need to be produced.
16. Further investigation into home working for those employees identified as being essential is needed. Not all Council functions can be carried out by officers from home but many functions can be carried on electronically. This facility does exist already in some areas but a wider application would be needed.
17. The need for a holding contract with a company for the purchase of Personal Protective Equipment to staff that are shown by risk assessment to be at risk of exposure should be assessed and actioned.
18. Communication issues are continually raised. Work has commenced with an item in the Core Brief as the springboard to further information being released. Employees will need to be kept informed of the current situation both locally and nationally. Information regarding the preparations taking place within the Council will also need to be communicated. The message must be to alert but not alarm so what is put out, when and how must be controlled and carefully managed.
19. The role of the Unions within this process is not to be underestimated, a constant dialogue is essential to ensure all are agreed with the way forward.
20. External demands will be made on the Council from agencies such as the National Health Service, Local Health Boards and Welsh Assembly Government. Discussions within different fora are taking place concerning the use of Council buildings to act as anti viral/vaccine distribution centres and possible intermediate care facilities, a link between Adult and Children's Services with Social care in the National Health Service, the use of C2C and the 101 service to act as local telephone triage, a link between Bereavement Services, local funeral directors and the National Health Service on care of the deceased. None of the detail on the above has been completed to date.
21. The financial impact on the Council will be significant, income and expenditure will be greatly affected with some potential Central Government guidelines such as the banning of public gatherings having a large impact on the economy of the city. With budgets being used to assist the response procedures must be agreed to ensure the recording of all income lost and expenditure made.
22. If the need arises to ration fuel the Council must prioritise those officers and functions that would have greatest demand on this resource.
23. The full impact of the pandemic will not be known until it hits so other issues may arise that will need instant decisions under crisis management conditions.
24. A recovery plan will also be needed to ensure a thorough though phased return to normality. A complete review of the Councils response will need to be facilitated to gain lessons learned and also to prepare for any future waves.
25. The welfare of employees who assist in the response will need to be considered. In some cases employees may not come back following an outbreak and the Councils response to this will need to be thoroughly planned for.

## **Proposals**

26. It is proposed that:

- The capability of the SAP system is explored to enable the collation of a Council wide skills and qualification database.
- The possibility of a holding contract is explored with a company to supply the required PPE identified as being necessary for the protection of frontline staff identified as being at risk.

## **Investment for Reform/Benefit to service user**

27. Early consideration of planning for such an outbreak will ensure that the council is able to deliver and maintain essential services. Under such extreme circumstances, a number of existing services will need to be suspended, delayed or delivered in a different way. Effective communication with employees and service users will be critical.

## **Council Policies Supported**

28. This report supports the Council's Emergency Management Plan.

## **Advice**

29. This report has been prepared in consultation with relevant Corporate Directors and reflects their advice. It contains all the information necessary to allow Members to arrive at a reasonable view, taking into account the following advice.

## **Legal Implications**

30. This Council as a Category One Responder under the Civil Contingency Act 2004. If an emergency occurs or is likely to occur the Council is required to deliver its functions as far as necessary or desirable for the purpose of preventing the emergency or reducing, controlling or mitigating its effects. The Council is also required to maintain Business Continuity Plans to enable it to perform functions in the event of an emergency, so far as is reasonably practicable

## **Financial Implications**

31. The report sets out an action plan and identifies a range of issues that may arise in the event of a possible influenza pandemic. Whilst it is not possible at this stage to calculate the likely financial implications it is clear these may be significant and there will be a need to ensure that appropriate measures are in place to identify and record any costs or income lost to the authority as a result of the pandemic. The Council has no specific budget for such an eventuality and therefore should an outbreak occur and costs arise then these will have to be met from within the Council's overall budget. In cases of emergency or disaster the WAG may also establish a Bellwin Scheme which might also provide an additional source of funding to the Council although this will depend upon the circumstances and will be at the discretion of the Assembly Government.

## **Human Resource Implications**

32. An outbreak of pandemic flu will provide significant challenges to the organisation. The deployment of available employees to deliver essential services will require careful planning and managing. The Council will, when required, have to make key decisions regarding employment issues.

### **Trade Union Comments**

33. The Trade Unions were grateful for the continued consultation with them in respect of the planning in relation to an influenza epidemic .They acknowledge that the Council will play a key role in the event of an epidemic and that decisions need to be made in the planning process and as the situation develops . They requested that they be kept informed of future developments.

### **RECOMMENDATION(S)**

34. It is recommended that:-

- (i) Committee note the work that has been undertaken to date in reviewing the implications of an influenza pandemic
- (ii) An update is submitted to a future Executive Business Meeting.

**BYRON DAVIES**  
**CHIEF EXECUTIVE**

The following Appendices are attached:

Appendix 1 : Initial Pandemic Flu Action Plan

Appendix 2 : Alert Levels 1-4 and Post Pandemic/Recovery Period

## Appendix 1

### Initial Pandemic Flu Action Plan

Emphasis at this time is on the uncertainties surrounding a pandemic, advice on measures to reduce risk to the individual, and that medical counter-measures will not solve business continuity requirements because antiviral drugs for treatment will only lessen the severity of the illness. They will neither cure it nor significantly reduce absenteeism.

Due to the uncertain nature of the pandemic outbreak it is essential that for planning purposes certain planning assumptions have to be made. These are;

All schools will close – current WAG guidelines tell Councils to prepare for schools to close or remain open therefore as a worst case scenario it is better to assume that schools will close. Absenteeism of 30% - it is predicted that 25% of the workforce will be absent directly relating to the pandemic either through illness or caring roles. This figure is in addition to normal absentee figures of 5% average therefore a 30% absence figure should be planned for.

At this stage planning should proceed on the basis that emergency powers will not be used. As a result, local responders will need to plan how best to promulgate the recommendations to their communities and to achieve compliance on a voluntary basis.

Action	Detail	By Who	Target Date
1. Comprehensive Business Continuity Plans	<ul style="list-style-type: none"> <li>Identify an officer to act as a liaison for the planning process.</li> <li>Review the categorisation of services into essential and non-essential services initially and regularly prior to and throughout the pandemic, in line with national guidance as available</li> <li>Identify which services could be curtailed or closed down during all, or the most intense period, of the pandemic</li> <li>Identify the minimum number of employees required to provide the essential and additional services (point 2), once identified.</li> </ul>	All Service Areas	July 2007
		All Service Areas	October 2007
		All Service Areas	October 2007
		All Service Areas	October 2007

	<ul style="list-style-type: none"> <li>• Service Areas need to identify the skills needed and the checks/training required by employees who will provide the essential and additional (point 2) services to include CRB checks where necessary.</li> <li>• Once delivery needs have been assessed, further consideration needs to be given to organisational arrangements required to ensure delivery of essential and additional services.</li> <li>• Service Areas need to identify staff that will require fuel for private vehicles in order to deliver those essential and additional services.</li> <li>• Service Areas need to identify employees who could effectively work at home in the event of pandemic influenza</li> <li>• Identify services which are contracted out and ensure they are resilient to sustain their service provision.</li> <li>• Service Areas need to identify employees who as a result of caring responsibilities may be unable to attend work.</li> </ul>	All Service Areas	October 2007
		All Service Areas	October 2007
		All Service Areas	October 2007
		All Service Areas	October 2007
		All Service Areas	October 2007
		All Service Areas	October 2007
2. Identification of additional Council responsibilities	<ul style="list-style-type: none"> <li>• Identify additional services which the Council will have to provide in the event of pandemic influenza</li> </ul>	Emergency Management/external agencies	October 2007
3. Communication plan	<ul style="list-style-type: none"> <li>• Develop a Communication Plan that addresses different target groups (e.g. press, employees, community etc.) that is to be implemented if the likelihood of a pandemic increases or the pandemic materialises.</li> </ul>	Communication and Human Resources	October 2007
4. Financial implications	<ul style="list-style-type: none"> <li>• Investigate the purchase of appropriate respiratory masks.</li> <li>• Provide information on the number of employees who will be directly dealing with the public in</li> </ul>	Financial Services	October 2007
		All Service Areas	October 2007

	<p>order to calculate the number of masks required.</p> <ul style="list-style-type: none"> <li>• Identify other financial resources needed to address issues raised in the preparation of the Councils planning for pandemic influenza.</li> <li>• Identify a process to allow accurate financial records of expenditure and loss of income due to pandemic.</li> </ul>	<p>All Service Areas/Financial Services</p> <p>Financial Services</p>	<p>October 2007</p> <p>October 2007</p>
5. Closure of Workplaces	<ul style="list-style-type: none"> <li>• Service Areas will need to identify workplaces that may close as a result of the pandemic.</li> <li>• Service Areas need to plan how to accommodate employees whose normal workplaces are closed in the event of pandemic influenza.</li> <li>• Identify a process where employees and their skill levels are identified that can be utilised in essential Council services as highlighted through the BC process.</li> </ul>	<p>All Service Areas</p> <p>All Service Areas</p> <p>Human Resources</p>	<p>October 2007</p> <p>October 2007</p> <p>October 2007</p>
6. Special Leave Policy	<ul style="list-style-type: none"> <li>• Employment Conditions Committee to decide on whether the Special Leave Policy should be amended in the event of pandemic influenza.</li> </ul>	<p>Human Resources</p>	
7. Internal pandemic Planning group	<ul style="list-style-type: none"> <li>• To meet monthly to review arrangements and progress on planning issues</li> <li>• To review the progress on BC planning</li> <li>• Highlight any other planning considerations and consider guidelines that will affect the Councils pandemic preparations</li> </ul>	<p>All Service Areas</p>	<p>Ongoing</p>
<b>Other Considerations</b>			
1. Trade Unions	<ul style="list-style-type: none"> <li>• Trade Unions to be kept fully briefed and consulted in the development of organisational arrangements in the preparation for pandemic influenza through the Health and Safety Advisory Forum, Works Council, Health</li> </ul>	<p>Human Resources</p>	<p>Ongoing</p>

	and Safety Committees, Service Area Joint Consultative Committees and other mechanisms as appropriate.		
2. Recovery	<ul style="list-style-type: none"> <li>• All Service Areas to look at post pandemic recovery to rehabilitate the service back to normal delivery levels.</li> <li>• Identify financial losses and expenditure as per procedure identified.</li> </ul>	<p>All Service Areas</p> <p>All Service Areas</p>	<p>October 2007</p> <p>October 2007</p>
3. Health and Safety	<ul style="list-style-type: none"> <li>• Ensure that health and safety responsibilities to employees continue to be fully discharged. In addition;</li> <li>• Take all reasonable steps to ensure that employees who are ill or think they are ill during a pandemic are positively encouraged not to come into work. Human Resource policies may need to be reviewed to achieve this aim.</li> <li>• Ensure that employees are made aware of advice on how to reduce the risk of infection during a pandemic.</li> <li>• Ensure that adequate hygiene (e.g. hand-washing) facilities are available.</li> </ul>	All Service Areas/Human Resources/Communications	October 2007
4. Training, education and exercising	<ul style="list-style-type: none"> <li>• Regular training, education and exercises of pandemic plans, as part of broader emergency planning and preparedness</li> </ul>	All Service Areas and multi agency partners	Ongoing

## Appendix 2

Alert Level 1		
<p>Information would be communicated from the World Health Organisation to the Department of Health and cascaded through internal and external communications.</p> <p>At this level of alert cases have been identified outside of the UK. Assumptions are that person-to-person transmission has occurred with a credible threat of a global pandemic. This may have been preceded by an outbreak in livestock or animals and for industries involved in import/export of animals there may be restrictions.</p> <p>At this level of alert it is unlikely that there will be detailed information on the level of infectiousness, death rates and projected impact on the workforce, as these will be developed as quickly as possible from national and international experiences. In the absence of such information, scenarios are based on previous 20<sup>th</sup> Century Pandemics with a cumulative attack rate of 25% of the population over one or more waves of around 12 weeks each.</p> <p>During this phase there is unlikely to be a specific vaccine, however high-risk groups already identified for influenza &amp; pneumococcal vaccine should be encouraged to take up the offer.</p> <p>During this phase preparation becomes crucial as the acceleration through alert levels one, two and three may be very rapid.</p>		
ACTIONS	LEAD	NEXT STAGE
<b>Review arrangements to identify employees available to be transferred to essential services.</b>	All Service Areas Co-ordinated by Human Resources	
<b>Implement protocols for accepting and training workers from these sources for defined essential service roles.</b>	As Above	
<b>Co-ordinate Pandemic flu plans with LHB and other responding agencies.</b>	Emergency Management	
<b>Ensure that liability, insurance and temporary licensing issues for volunteers and workers from other fields</b>	All Service Areas co-ordinated by Human Resources	

are addressed, and consider ethical aspects of plans.		
<b>Consider curtailing certain Council activities at this Pandemic phase as part of infection control.</b>	All Service Areas/CMT/Executive	
<b>Ensure high levels of hygiene in the workplace as part of infection control.</b>	All	
<b>ACTIONS</b>	<b>LEAD</b>	<b>NEXT STAGE</b>
<b>Put in place arrangements for those with a home working capability.</b>	All Service Areas	
<b>Put in place financial arrangements to ensure all expenditure and income loss directly connected to pandemic can be recorded</b>	Financial Services	
<b>Line Managers to monitor staff returning from abroad and consider voluntary quarantine</b>	All Service Areas	
<b>Activate pandemic communication strategy and structure</b>	EMU/Comms/HR	
<b>Plan for the anticipated stockpiling of food, fuel, and medications. Local rationing, or priority given to essential workers, may be needed.</b>	All	
<b>Put on standby those sites identified as distribution sites within Cardiff for distribution of vaccines/anti-virals.</b>	EMU	Coordinate with LHB plans
<b>COMMUNICATIONS</b>		
Ensure that all staff are made aware of Government advice		

on how to reduce the risk of infection during a pandemic. Information for staff to be available on the Intranet/Internet and in printed form in Service Area newsletters		
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Alert Level 2		
<p>During this level of alert new viruses will have been isolated within the UK. Information will be coming from the NPHS through the Department of Health and Welsh Assembly Government through the Local Resilience Forum to local Authorities</p> <p><b>At this stage the outbreaks may be small and localized. Short-term interventions may be in use which would not be appropriate to a pandemic scale, so as to limit the spread of the infection. Accelerated transmission may occur in the workplace, resulting in staff being ill during a narrower time frame than in the general population</b></p> <p><b>Communications are a crucial element of the response. Many groups, not least the public, will need clear, accurate information and advice about the actions they can take. They will also need assurance that their concerns are being addressed.</b></p>		
ACTIONS	LEAD	NEXT STAGE
<b>Principal EMU Officer to request the Chief Executive to convene the Local Authority Strategic Coordinating Group (Gold).</b>	EMU	
<b>Managers to provide immediate report of staff sickness to Human Resources.</b>	All Service Areas	
<b>Representative of Cardiff Council to attend Multi Agency Gold Group and report back.</b>	Corporate Director	
<b>Assess the need to distribute personal protective equipment for front line staff identified through the BC process.</b>	All Service Areas/HR Health and Safety	
<b>Review the Business Continuity plans of the Registrar Service to ensure that there is adequate resource</b>	Registrar	
<b>Assess the capacity of</b>	Bereavement	

<b>hospital and community mortuaries, crematoria, and funeral services, and plan for appropriate modifications in the event of a pandemic.</b>	Services	
<b>Put on standby temporary mortuary arrangements in conjunction with police and the Coroners Office.</b>	EMU/Gold Group/Coroner	
<b>ACTIONS</b>	<b>LEAD</b>	<b>NEXT STAGE</b>
<b>Review the mechanism allowing staff from non essential services in the council to be trained to assist with essential service roles.</b>	All Service Areas/HR	
<b>Ensure that liability, insurance and temporary licensing issues for volunteers and workers from other fields are addressed, and consider ethical aspects</b>	All Service Areas co-ordinated by HR	
<b>Consider whether recovery after a pandemic needs financial support from the government. If so, develop criteria for financial support and seek ways to ensure availability of funds.</b>	<b>CMT/Financial Services</b>	
<b>Assess how existing community groups (religious groups/churches), can contribute to rebuilding the society. Identify contact persons within these groups</b>	EMU/CMT/HR (Equalities Unit)	
<b>Ensure that clear and concise information is available via</b>	Comms	

<p><b>the intranet/internet or internal Service Area newsletters to staff and public as to what they should be doing to minimise the spread of the pandemic.</b></p>		
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**ALERT 3**  
**PANDEMIC PERIOD**

Although UK Alert Level 3 and 4 may progress rapidly from one to another there are some key differences in the Council's response. At Alert Level 3 there may be multiple small outbreaks of flu which are likely to be limited in terms of geographic regions.

During this phase the advice and action taken will focus on limiting the spread of these outbreaks and trying to prevent progression to Alert Level 4. Non-Cardiff outbreaks will need to be monitored closely owing to the demography of our workforce. Again at this stage we need to consider staff leaving work to act as carers for relatives, etc.

Operational Managers and Chief Officers will need to consider how their business continuity plans will function if an element of their structure/function or supply chain is affected in one of the isolated outbreaks. Should there be an outbreak within Cardiff the impact will be substantially larger and some of the responses considered at Alert Level 4 will come into effect.

During this phase of the pandemic there are likely to be increasing levels of anxiety in the general population and an enhanced risk of social disruption. This may be exacerbated by large-scale outbreaks outside of the UK.

<b>ACTIONS</b>	<b>LEAD</b>	<b>NEXT STAGE</b>
<p><b>Provide clear and timely dissemination of information on national and regional guidance, for example on immunisation, use of antiviral agents, and other relevant matters.</b></p>	<p><b>EMU/Comms/LHB</b></p>	
<p><b>Re-assess the administrative arrangements for certifying deaths, providing documentation for cremations, and referring cases to HM coroner.</b></p>	<p><b>Registrars</b></p>	
<p><b>Implement the mechanism for the redeployment of staff to essential services and the recruiting of additional staff where necessary.</b></p>	<p><b>All Service Areas Co-ordinated by HR</b></p>	
<p>Assess the position of schools and childcare facilities to continue to operate or close in</p>	<p><b>LEA</b></p>	

conjunction with WAG guidance.		
ACTIONS	LEAD	NEXT STAGE
<p>Ensure any agreed flexible policies are in place for the following:</p> <ul style="list-style-type: none"> <li>To enable staff to work from home</li> <li>Support for staff including indemnity arrangements</li> <li>Consideration is given to staff who need to care for children or other family members who are ill with flu</li> <li>People taking time off due to family bereavement or psychosocial impact of pandemic</li> <li>Ensure employees who are ill or think they are ill with flu like symptoms during a pandemic are positively encouraged <b>not</b> to come into work</li> </ul> <p>Ensure that health and safety responsibilities continue to be discharged.</p>	<b>All Service Areas co-ordinated by HR</b>	<b>Managers to be aware of these factors and are disseminating information to staff</b>

<b>ALERT LEVEL 4</b>		
<p><b>At this Level there will be widespread infection across the UK, with 2 or more waves of infection expected to last approximately 12 - 15 weeks each.</b></p> <p><b>The infectivity of the organism may vary and so it is difficult to predict the impact on workforce levels as well as the demand for services, however it is reasonable to estimate 25% of the workforce affected at any one time on top of normal sickness rates of 5%, with the majority taking between 5-8 working days off.</b></p> <p><b>Those affected may vary dependant on the strain of the influenza virus, but active, healthy young adults may be considered at high risk of infection due to inherent socialization and mobility across the City. The risk of death and severe illness remains highest at the extremes of age. Many people may take time off to care for dependants.</b></p>		
ACTIONS	LEAD	NEXT STAGE
<b>Review statutory and essential business activities in light of increased staff absenteeism and demand from outside agencies</b>	<b>CMT/Executive</b>	

<b>Put in place any necessary measures to maintain essential business activities for several weeks at high levels of staff absenteeism, including options for remote working and on-line options for customers and business partners.</b>	<b>All</b>	
<b>Continue to provide regular and timely staff and public information and advice via all means available.</b>	<b>COMMS</b>	
<b>Ensure high levels of hygiene are maintained to ensure cleanliness of workspaces.</b>	<b>All</b>	

**POST PANDEMIC/RECOVERY PERIOD**

Although a pandemic may have two or more waves, lasting 12 - 15 weeks each, it will eventually end and this will be signalled through communication from the NPHS. At this stage the number of new cases will show a sustained decrease.

During this phase Service Areas will need to consider how they re-establish 'normal' service and review and evaluate their response to the pandemic.

<b>ACTIONS</b>	<b>LEAD</b>	<b>NEXT STAGE</b>
<b>CMT to be informed of change of alert status.</b>  <b>Staff to be notified of change of alert status.</b>  <b>Media and community to be informed.</b>	<b>EMU/Comms</b>	<b>This information to be on website or distributed by all means.</b>
<b>Return to normal service may need to be phased dependant on partners and staff availability.</b>  <b>Undertake a review of staff resources and the ability to deliver all Council functions.</b>	<b>All</b>	
<b>Ensure evaluation of the response to the pandemic internally, nationally and internationally once the first wave is over to assess lessons learned. Evaluation should focus on the response at all levels and should lead to recommendations for improvement.</b>	<b>All</b>	<b>Send to CMT for consideration and endorsement.</b>
<b>Review communications strategy and materials, and amend as appropriate in anticipation of</b>	<b>Comms</b>	

<b>future pandemic waves</b>		
<b>Assess the financial implications of the pandemic response both in loss of income and expenditure.</b>	<b>Financial Services/All Service Areas</b>	
Develop strategy for maintaining business confidence and supporting local economic regeneration.	<b>CMT/Executive</b>	
Assess staff welfare and support issues.	<b>All/Occupational Health</b>	
<b>ACTIONS</b>	<b>LEAD</b>	<b>NEXT STAGE</b>
Continue situation monitoring in anticipation of further waves.	<b>EMU</b>	