

Nottingham City Council Delegated Decision



Nottingham
City Council

Reference Number:

4197

Author:

Sarah White

Department:

Chief Executive's

Contact:

Sarah White

(Job Title: Project Manager, Email: sarah.white1@nottinghamcity.gov.uk, Phone: 01158763410)

Subject:

Approvals related to the expansion of community testing sites

Total Value:

£931,884 (Type: Revenue)

Decision Being Taken:

To accept the additional grant funding of up to £931,884 from the Department of Health and Social Care. Grant funding of £522,102 has already been agreed (Delegated Decision number 4112).

To extend the pilot programme at Djanogly Leisure Centre until at least the end of June 2021, subject to there still being a demand for tests in this area.

To delegate the approval of any further extension of the pilot programme to the Corporate Director for COVID Response and Recovery, subject to the DHSC confirming an extension to the programme and funding allocation until at least the end of June 2021.

To delegate approval to the Corporate Director for COVID Response and Recovery to confirm the selection of sites in the programme, subject to a case being made by Public Health.

To delegate approval to the Corporate Director for COVID Response and Recovery to allocate grant funding towards project costs and purchases, as required, to deliver the programme.

In January 2021, Nottingham City received approval from the Department of Health and Social Care (DHSC) to pilot a programme of asymptomatic community testing using lateral flow devices (LFD). The pilot has helped to establish that there is a demand for LFD tests in the community and has helped to identify a number of positive cases without symptoms who might otherwise not have been identified. This report asks for approval to extend the pilot programme into other areas of the City.

Following the announcement of new tighter restrictions for England from 5th January 2021, the Secretary of State has agreed three key changes to prior guidance:

1. The programme will be extended to all Local Authorities across England, not just those that had previously been prioritised based on the Tier system.
2. The Government will support the Programme until at least the end of June 2021, with continued provision of lateral flow tests, funding up to £14 per test and wider support from central government.
3. Participating authorities will continue to have flexibility to target plans to reflect local priorities and the local epidemiological picture. During the lockdown period authorities are asked to prioritise making testing available to those people who are permitted to leave home for work (including essential voluntary work) and who are unable to access asymptomatic testing through other routes, particularly those who are critical to supporting communities, responding to the pandemic and/or at higher risk of infection and transmission.

Taking into consideration the initial feedback from the pilot and the changes outlined above, the proposal is to set up at least three asymptomatic test sites across the City, focused on providing access for citizens who are most at risk and including the need to test peripatetic works, following recent direction from the DHSC.

It is anticipated that the programme may extend beyond 31 March 2021 until at least 30 June 2021. It is recommended that the Corporate Director for COVID Response and Recovery approves any extension of the programme, subject to having received confirmation of funding from the DHSC, an appropriate funding allocation confirmed and a case being made by Public Health. This will ensure that there is the necessary flexibility to respond in a timely manner, but that controls are in place to manage the programme effectively and mitigate any risk to the Council.

It is recommended that the decision on site selection be delegated to the Corporate Director for COVID Response and Recovery to allow for flexibility and respond to the changing need across the City. The final decision on sites will be based upon a number of factors, including clinical suitability and how well this facilitates access for at risk groups, particularly where there is a higher proportion of citizens in sectors that have to work outside the home. Other at risk groups might include BAME groups, culturally and linguistically different groups, or communities where there are lower rates of testing but higher positivity. These factors will be taken into consideration when deciding where test sites should be located.

The funding for this programme is a grant allocated by the DHSC on a retrospective basis, at a maximum of £14 per test, depending on actual costs. The learning from the pilot project indicates that the Council will be able to staff and operate at least three small test sites within this funding envelope, estimated to be £931,884. A previous report approved in early February, formalised the allocation of a maximum of £522,102 in grant, giving an overall total of £1,453,986 in grant. There is an element of financial risk as the funding is retrospective and based on the number of tests completed, but the Council has been given assurances that reasonable costs incurred in delivering the programme will be funded by the DHSC. The previous report set out that, should it be required, the Council could allocate a proportion of the Contain grant towards this project, should there be a shortfall in funding or to help manage cash flow.

Where possible, the Council will seek to redeploy existing staff to support the programme. Where this is not possible, workforce will be recruited through a compliant procurement route, utilizing existing frameworks. Set up costs and operational costs will be procured through existing frameworks as required.

Other Options Considered:

- 1. Do nothing - do not extend the pilot project or expand the programme to establish other test sites. This option has not been taken forward as the Council supports the objective of identifying asymptomatic positive cases in the community as part of the wider strategy to manage COVID.
- 2. Extend the pilot, but do not expand the programme. This option was not taken forward as the DHSC are encouraging Local Authorities to continue to rollout the programme of asymptomatic testing across communities so that the offer is available to a wider variety of groups. Initial analysis of the postcodes of those attending the pilot site indicates that most people attending are from within the community and therefore further sites will ensure other communities have access to asymptomatic testing.
- 3. Do not extend the pilot, but rollout the programme or consider other sites for expansion beyond those already being reviewed. The pilot is helping to identify those in the community who may not be aware that they have the virus and as the site is already operational and well attended, it is logical that this offer remains in place. In terms of the sites considered for the programme rollout, this is determined by a number of factors and some of this data changes frequently. The team need to be able to respond flexibly to both the opportunities to provide an asymptomatic test offer and new requests from the DHSC and government. Delegating this responsibility to the Corporate Director of COVID Response and Recovery facilitates a responsive solution.
- 4. Extend the pilot project until at least 30 June 2021 and continue with the rollout of the programme to selected areas, based on the analysis of need and criteria set by the DHSC and government. The Corporate Director of COVID Response and Recovery will retain responsibility for the rollout of the programme within the funding envelope, including deciding whether to extend beyond 30 June 2021. This is the preferred option.

Background Papers:

Published Works:

Delegated Decision 4112.

Affected Wards:

Citywide

Colleague / Councillor Interests:

Consultations:

Those not consulted are not directly affected by the decision.

Crime and Disorder Implications:

There are no implications on Crime and Disorder

Equality:	EIA not required. Reasons: There are no changes from the EIA submitted with Delegated Decision 4112
Decision Type:	Portfolio Holder
Subject to Call In:	Yes
Call In Expiry date:	06/05/2021
Advice Sought:	Legal, Finance
Legal Advice:	<p>The legal advice provided is essentially a repetition as to that given under DDM 4112 in respect of the first allocation of funding for such testing sites. The acceptance and use of the funding must be in line with any funding requirements. As it appears that funding will be collected retrospectively the Council will carry the financial risk of delivery of the testing until it can demonstrate that it has complied with the delivery and funding requirements.</p> <p>An appropriate agreement should be put in place with those sites to be used, such agreements to be in line with the legal advice which has previously been provided to the Director of Public Health.</p> <p>Advice provided by Naomi Vass (Senior Solicitor) on 25/02/2021.</p>

Finance Advice:

This decision seeks to build on the previous decision in DDM 4112, in relation to the asymptomatic testing programme, to provide approval to accept and allocate additional grant funding of up to £931,884 to add to the initial grant of £522,102 for a total of £1,453,986 from the Department of Health & Social Care (DHSC) based on estimated volumes of testing.

This decision seeks approval to extend the programme as below:

1. Approval to accept and spend the grant funding linked to asymptomatic testing programme.
2. Approval to establish additional sites at Clifton, Meadows, Bulwell and Aspley until 30th June 2021
3. Further extend the existing programme at Djonogly and Framework from 31st March 2021 to 30th June 2021

As mentioned in the previous decision, the primary element of this funding is retrospectively provided, at £14 per test. Therefore, if actual testing volumes vary from that estimated, the actual total grant received will vary accordingly. With several costs being fixed, irrespective of total testing volumes, there is a continuing risk that total funding finally received from the DHSC may not completely cover total costs incurred by the Council. However, as outlined in the brief from the original DDM (4112), this risk will continue to be mitigated by the commitment of up to £294,000 from the Contain Outbreak Management grant if required. There has also been assurance from DHSC, that any reasonable costs incurred over the £14 per test funding cap, will also be covered.

It is also noted that several planned locations to be used during this scheme, may reopen for other activities, such as leisure centres, in line with the roadmap re the easing of national lockdown measures. This means that alternative sites may be required to deliver this programme at a later date, this is currently being reviewed by the service, but could mean the current forecast of costs per test could vary accordingly.

To aid with the mitigation of risk outlined above, and to ensure correct levels of funding are received from DHSC, the costs and number of tests are monitored weekly, and forecasted for the remainder of the scheme, and these are included in a monitoring return to the National Team and reported via the regular project board meetings.

Processes established to administer this programme are aligned to requirements of the grant.

Advice provided by Graeme Black (Commercial Business Partner) on 04/03/2021.

Signatures

Eunice Campbell-Clark (Portfolio Holder Leisure, Culture and Schools)
SIGNED and Dated: 27/04/2021
David Johns (Interim Director of Public Health)
SIGNED and Dated: 27/04/2021