

# North Tyneside Council

## Report to Council

### Date: 27<sup>th</sup> November 2014

#### ITEM 6

Title: Ebola Virus Briefing

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Portfolio(s): Adult Social Care

Cabinet Member(s): Cllr Lesley Spillard

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Report from Service Area:

Public Health

Responsible Officer:

Marietta Evans, Director of Public Health (Tel: (0191) 643 2880)

Wards affected:

All

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## PART 1

### 1.1 Purpose:

The purpose of the report is to provide a briefing for elected members in relation to the North East and local response to the Ebola Virus

### 1.2 Recommendation(s):

It is recommended that Council note the content and potential implications for the Authority and wider community.

### 1.3 Forward Plan:

This report first appeared on the Forward Plan that was published on 3<sup>rd</sup> November 2014.

### 1.4 Council Plan and Policy Framework

This report relates to the following priority in the 2014/18 Our North Tyneside Plan in relation to the overarching aim; 'Our people will be supported to live healthier and longer lives'.

### 1.5 Information:

- 1.5.1 Ebola virus disease (previously known as Ebola haemorrhagic fever) is a rare but severe disease which is caused by Ebola virus. It can result in uncontrolled bleeding, causing damage to the patient's vital organs. The Ebola virus is often fatal if left untreated. It was

first recognised in 1976 and has caused sporadic outbreaks since in several African countries. The virus is initially transmitted to people from wild animals and spreads in the human population through human-to-human transmission through contact with blood and body fluids. It does not transmit through the air. The incubation period is between 2 and 21 days and there is minimal risk of transmission during the incubation period (i.e. before symptoms appear).

- 1.5.2 People infected with Ebola can only spread the virus to other people once they have developed symptoms, such as a fever. Even if someone has symptoms, it's important to remember that the virus is only transmitted by direct contact with the blood or body fluids of an infected person.
- 1.5.3 Anyone who cares for an infected person or handles their blood or fluid samples is at risk of becoming infected. Hospital workers, laboratory workers and family members are at greatest risk. Strict infection control procedures and wearing protective clothing minimises this risk.
- 1.5.4 The Chief Medical Officer has confirmed that it is likely we will see a case of Ebola in the UK, and that there could be a handful of cases over the next three months. She confirms that the public health risk in the UK remains very low and measures currently in place – including exit screening in all affected countries - offer the correct level of protection.
- 1.5.5 Enhanced screening arrangements for people travelling from the affected regions are now in place at Heathrow, Gatwick, Manchester and Birmingham airports and at Eurostar at St Pancras
- 1.5.6 A national exercise to test preparedness for Ebola took place on Saturday 11<sup>th</sup> October. The plan remains for the first four confirmed cases of Ebola to be treated at the Royal Free Hospital in London, with the Royal Victoria Infirmary, Newcastle acting as a “surge centre” to take a further two confirmed cases if necessary. Arrangements are in place for the North East Ambulance Service Hazardous Area Response Team to transport confirmed cases as necessary.
- 1.5.7 Locally, Public Health England (PHE) is working with NHS England and local authority Directors of Public Health through the Local Health Resilience Partnerships (LHRPs) to ensure that plans are as robust as possible. PHE has existing strong partnership arrangements with the NHS, local authorities and ports covering all aspects of public health and infection control. Additional arrangements have been set up alongside these to ensure all information and guidance relating to Ebola is shared widely among partners, including setting up workshops and planning exercises.
- 1.5.8 In terms of screening for Ebola virus at key ports any decision to screen at Newcastle Airport will be made following guidance from Public Health England. Additional measures have been agreed between Tyne Port Health Authority and PHE in relation to Port of Tyne. This includes:
  - Port staff are alert to the risk of Ebola in their routine monitoring of all arrivals into the Port.
  - The history of previous destinations of vessels is reported together with origin of the crew
  - Masters of vessels have heightened awareness about the signs and symptoms of Ebola and are alert to any illness involving flu like symptoms within the Maritime Declaration of health; and
  - Any concerns about possible infection will be notified to the Chief Port Health Officer who will in turn seek immediate advice from PHE.

1.5.9 In terms of local action, advice on Ebola was sent out to childcare and educational setting in August 2014. Guidance has also been issued by PHE to all healthcare settings including GPs and hospitals in the borough with regard to recognition of Ebola symptoms, reporting to PHE and appropriate response.

1.5.10 Implications for the Authority;

- Appropriate staff will take part in PHE and Local Resilience Forum exercises
- Multi-agency Command, Control and Coordination arrangements will be in place in line with national guidance
- The Communications Teams will liaise with key partners in preparing an appropriate media response
- Appropriate staff will draft plans (with partners as appropriate) in relation to communications and reassurance to the public and also managing potential public disorder; and
- Relevant staff will consider premises issues, including decontamination of public spaces or buildings, management of homes used for temporary isolation and giving advice to the public on safety

## **1.6 Decision options:**

There are no decision options as the information in this report is submitted for Council's information only.

## **1.7 Reasons for recommended option:**

Not applicable

## **1.8 Appendices**

None

## **1.9 Contact officers:**

Marietta Evans, Director of Public Health Tel. 0191 643 2880

Wendy Burke, Consultant in Public Health Tel. 0191 643 2104

Alison Campbell, Finance Business Manager Tel. 0191 643 7038

## **PART 2 – COMPLIANCE WITH PRINCIPLES OF DECISION MAKING**

### **2.1 Finance and other resources**

There are no direct finance and other resources implications arising directly from this report.

Contingency and preparedness arrangements are being funded from existing budgets within the Authority and by partners.

If actions such as decontamination of public places were required that they could not be managed within existing resources these would be reported to Cabinet as appropriate.

## **2.2 Legal**

There are potential legal implications in terms of the Health Protection Regulations 2010 which give public authorities powers and statutory obligations to prevent and control health risks to the public, specifically from diseases and infection. This may include the Tyne Port Health Authority in terms of the quarantine/boarding of vessels and refusing entry to vessels.

## **2.3 Consultation/community engagement**

Communication and engagement with the public is being lead by Public Health England. The Authority's Communications Team will work with PHE and other partners as required around any communications to the public.

There has been internal engagement with Senior Leadership Team, Cabinet Member(s) and ERLG.

## **2.4 Human rights**

There are currently no direct implications.

There may be potential human rights implications in terms of protection of the public and front line workers if Ebola reaches the UK and there were cases locally.

## **2.5 Equalities and diversity**

There are currently no direct implications.

There may be potential equalities and diversity issues in relation to the public response should Ebola reach the UK and there were cases locally. Plans are in place to manage these and are available if required.

## **2.6 Risk management**

Risks are being managed nationally by Public Health England and mitigated locally as outlined in the body of the report.

## **2.7 Crime and disorder**

There are currently no direct implications.

There may be potential implications in terms of public unrest and disorder if there were diagnosed cases of Ebola locally.

## **2.8 Environment and sustainability**

There are currently no direct implications.

There may be potential implications in terms of decontamination of public buildings and spaces if there were cases of Ebola locally.

**PART 3 - SIGN OFF**

- Deputy Chief Executive  X
- Head(s) of Service  X
- Mayor/Cabinet Member(s)  X
- Chief Finance Officer  X
- Monitoring Officer  X
- Head of Corporate Strategy  X