

## Notice of Non-key Executive Decision

<b>Subject Heading:</b>	Increasing Local COVID-19 Testing Capacity: Romford Town Hall Car Park
<b>Cabinet Member:</b>	Cllr Jason Frost
<b>SLT Lead:</b>	DPH Mark Ansell
<b>Report Author and contact details:</b>	Jack Davies, Public Health Specialist Jack.Davies@havering.gov.uk
<b>Policy context:</b>	There is a need to provide testing infrastructure throughout the winter for access to COVID-19 testing in Havering: an important measure in controlling outbreaks of infection (Outbreak Control Plan).
<b>Financial summary:</b>	The costs of setting up and running the site are covered by the national testing programme. It is assumed that should measures put in place to mitigate the rate of infection progress positively, the location of the testing facility will need to be considered to accommodate officers return to the office and therefore, Town Hall car park.
<b>Relevant OSC:</b>	Health Overview and Scrutiny Committee
<b>Is this decision exempt from being called-in?</b>	Yes, it is a non-key decision taken by a member of staff

The subject matter of this report deals with the following Council Objectives

## Non-key Executive Decision

Communities making Havering	<input checked="" type="checkbox"/>
Places making Havering	<input checked="" type="checkbox"/>
Opportunities making Havering	<input type="checkbox"/>
Connections making Havering	<input type="checkbox"/>

## Part A – Report seeking decision

### DETAIL OF THE DECISION REQUESTED AND RECOMMENDED ACTION

#### RECOMMENDATIONS

1. To agree a six month arrangement for a COVID-19 Local Testing Site located in the Romford Town Hall Car Park
2. To continue having a Mobile Testing Unit visit Romford Town Hall whilst the LTS is introduced then moving it to a peripheral location
3. To agree the placement of a fourth Local Testing Site in the borough if incidence rate reaches 500/100k population or if current testing provision reaches 100% utilisation for a 14 day period.

### AUTHORITY UNDER WHICH DECISION IS MADE

Council Constitution, Part3, Section 3.2, Powers of the Chief Executive.  
(c) To carry out the functions of the Council for civil aid and emergency planning and to take any action, including incurring expenditure, in connection with an emergency or a disaster in the borough.

### STATEMENT OF THE REASONS FOR THE DECISION

#### 1. Background

The Department for Health and Social Care (DHSC) invited Local Authorities to identify local sites that may be used for COVID-19 testing. The offer from the DHSC was for Local Testing Sites (LTS): a hyper local, walk-through facility, placed in communities designed to serve local people by overcoming barriers to testing such as not having access to a car, needing support to take a test, being unaware of how to book a test or financial barriers.

Up until September 12th 2020, testing sites were located a considerable distance from the borough. Havering now has a LTS in the south of the borough and the north of the borough whilst also having a Mobile Testing Unit (MTU) every third day at Romford Town Hall. Havering now has the opportunity to immediately increase its local testing capacity again, with further LTSs being available from the DHSC. This paper looks at introducing a new LTS in the

## Non-key Executive Decision

borough, learning from the first LTSs to improve the impact of LTSs on the community.

### **2. Rationale behind further Local Testing Sites**

Testing is the cornerstone of national, regional and local strategy to minimise and prevent further harm caused by coronavirus.<sup>1</sup> Testing is crucial to the success of the UK's overall strategy of Test and Trace which aims to prevent onward spread of disease. The purpose of testing is to rapidly identify infected individuals so that their contacts can be isolated before they infect others. To achieve utilisation of the testing service it is important that access to testing is as cheap, simple and easy as possible.<sup>2</sup>

Not only is testing crucial to protecting health but it also helps to prevent unnecessary isolation periods especially for key workers. The direct harm to health caused by COVID-19 and the damaging effects on the local economy and wider wellbeing of residents is understood by Havering Council and it is committed to working effectively to minimise any further harm. As per our Local Outbreak Control Plan, the Local Authority will work to provide local residents with easy and accessible COVID-19 testing.

Testing is central to plans to control coronavirus through autumn and winter when relevant symptoms will inevitably become much more prevalent, necessitating a higher level of testing. Having convenient local testing sites will reduce the disruption to individual residents and improve the functioning of essential services particularly schools.

Evidence suggests that throughout September there has been a significant benefit to Havering residents by hosting LTSs in the borough. During September, national testing capacity struggled to meet a significant increase in demand. Capacity was redirected to areas with the highest levels of community transmission. As a result, capacity was switched away from London to the North West and North East of England. Looking at the evidence in Figure 1 (as detailed in exempt Appendix 1), testing in London dropped significantly as site activity was reduced. However all three BHR boroughs bucked this trend as LTS capacity came online

### **3. Introducing further Local Testing Sites**

There is a need to improve access to testing in the borough so there is appropriate provision available for when residents call upon it especially as we move through winter. The paper seeks agreement for introducing a further LTS immediately in the borough and another when deemed necessary. The introduction of a third LTS will mean current demand is sizeably met for some time. This will mean Havering residents have as good access to testing as any

---

<sup>1</sup> HM Government. 2020. The next chapter in our plan to rebuild: The UK Government's COVID-19 recovery strategy.

<sup>2</sup> Gulliford, M., Figueroa-Munoz, J., Morgan, M., Hughes, D., Gibson, B., Beech, R & Hudson, M. 2002. What does 'access to health care' mean?

## Non-key Executive Decision

other London Borough. A fourth LTS would be introduced if incidence rates increased to a threshold level, utilisation of local LTSs reach full capacity or a significant change in national testing policy took place which required further local testing capacity.

The rationale behind immediately increasing local testing capacity is this will allow for current local need to be sizeably met. The most popular route of testing is now the LTS since they have been made available with table 1 showing the percentage use of possible testing routes over 4 weeks to 18<sup>th</sup> October 2020.

**Table 1: Percentage uptake of Pillar 2 testing for Havering residents, over the past 4 weeks WK ending 18th October 2020.**

Testing Route	% usage over past 4 weeks
LTS	60%
Home	22%
Drive through	18%
Total	100%

Local Testing sites have become popular as they have come online. Though it must be acknowledged that hosting site does not guarantee testing for local people due to the nature of the booking system, however, as shown before in Figure 1 residents have seen considerable benefit so far. Residents are making use of testing facilities in the borough as well as in neighbouring Local Authorities. For example, residents in Brooklands, Mawneys and Romford town make use of the LTS in Barking and Dagenham. Whilst in October, 15% of monthly total tests took place for Havering residents in test sites outside Havering boundaries. An increase in testing rate has been seen with the introduction of the LTSs. With the introduction of a third site, it provides another permanent testing facility available in the borough which will break down barriers to testing.

**Table 2: Overview of current and proposed local testing facilities in Havering**

Current Testing Facilities				
Site Name	Number of tests each day	Number of tests over 7 days	Capacity if 60% to Havering residents	Capacity if 40% to Havering residents
Dagnam Park Drive LTS	288	2016		
Cherry Tree LTS	288	2016		
Romford Town Hall MTU*	250	500		
<b>Total</b>		4532	2719	1813
Proposed				
3rd LTS	288	2016		
<b>Total</b>	288	6548	3929	2619
4 <sup>th</sup> LTS	288	2016		
<b>Total</b>	288	8564	5138	3426

## Non-key Executive Decision

It can be seen that if running at full, current local capacity is 4532 tests. It is known that not all this capacity will go to local people so this must be considered as we plan for the time ahead. Looking at the data on capacity (Table 2), the usage of testing routes (Table 1) as well considering current and future incidence rates, it is anticipated that by introducing a third LTS in the borough it will mean need will be sizeably met for some time. The introduction of a third LTS will mean Havering residents have as good access to testing as any other London Borough.

With the introduction of new national restrictions from 4<sup>th</sup> November it is hoped COVID-19 incidence rates will fall substantially and be maintained at a low level. It is prudent to put plans in place for the future to protect the health of residents. The following looks at when a fourth LTS may be required.

A fourth LTS will likely be introduced in the borough if any of the following criteria are met:

- The incidence rate increased locally to 500 per 100k population
- Utilisation of current hosted testing provisions reaches 100% for a 14 day period

The World Health Organisation (WHO) recommends that for all positive cases to be identified, between 10-30 tests<sup>3</sup> for every positive case must be completed. If an area has a high positivity ratio, it suggests that a high number of cases are being missed, thus the overall aim of the council is to have a high testing rate whilst maintaining a low positivity rate.

Considering the recommendation by the WHO, if the incidence rate increased to 500 cases per 100,000 locally, then for the lower limit of the WHO's suggested testing rate to be achieved, 12,990 tests would be conducted each week for Havering residents. It would be expected for testing to be scaled up across both testing pillars with 45% and 55% of tests being conducted across Pillar 1 and 2 respectively. This would result in approximately 7145 tests being conducted across Pillar 2. After discounting tests for routine care home testing and assuming the percentage of people choosing a LTS testing route remained the same (60%), then 3687 tests would take place through LTSs. When considering that not all LTS capacity goes to residents, then it is likely that there would be a need for a 4<sup>th</sup> local testing site to enable adequate access to testing for residents. Table 3 lays this out in more detail.

---

<sup>3</sup> WHO COVID-19 - virtual press conference [Link](#)

## Non-key Executive Decision

**Table 3:** Potential testing demands if Havering experienced 500/100k population incidence rate

Tests required to maintain 10% positivity rate		
	12990	
Tests assuming current split across Pillars continues		
Pillar 1 (45%)	5846	
Pillar 2 (55%)	7145	
Weekly breakdown of testing across Pillar 2		
Testing Route	Number of tests	Total remaining
<b>Total Pillar 2</b>	7145	7145
Routine care home testing	1000	6145
Local Testing Site (60%)	3687	2458
Home Testing (22%)	1352	1106
MTU/Drive through (18%)	1106	0

A significant gap between available local provisions and need for testing could potentially occur if the incidence rate were to increase to 500/100,000. The available provision of an MTU and three LTSs would likely be running near to full capacity. Incidence rate is the guide on when to introduce a 4<sup>th</sup> local testing site but to ensure the timing is based on true need, the factors laid out in the limitations will be considered in real time. This calculation has been used to estimate when it is likely Havering may require further testing sites in the case of a growing epidemic.

**Limitations:** It must be acknowledged that this modelling is being used to gauge the quantity of testing which may be needed and when. The model is impacted by many different factors such as the split of testing across pillar 1 and 2, the split of testing routes chosen (home/LTS/drive through), incidence rates as well as people coming forward for testing, therefore, this is in no way a precise prediction.

Currently, the national testing policy is for symptomatic people to come forward for testing. However, it is being seen that the government are trialling mass asymptomatic testing such as in Liverpool City from 6<sup>th</sup> November 2020<sup>4</sup>. If there is a change towards this policy, there will be a need to provide testing facilities for this service in the local area. If this change does take place locally, then it will be subject to an additional decision paper.

#### **4. Current and future testing demand**

England entered a second stay at home order period on the 5<sup>th</sup> November 2020 which is planned to end on 2<sup>nd</sup> December 2020. As of 9<sup>th</sup> November 2020, Haverings incidence rate for COVID-19 is 257/100,000. With the stay at home period, it is anticipated that the current incidence rate will reduce by the

<sup>4</sup> <https://www.gov.uk/guidance/getting-tested-for-coronavirus-if-you-live-or-work-in-liverpool>

## Non-key Executive Decision

end of the 4 week period. It is therefore believed that it will be some time if ever that the local incidence rate will reach 500/100,000.

It is the recommendation of officers to proceed with the introduction of a third local testing site, however, a 4th is not needed immediately which allows time to consider the best testing options available. It is known that other testing site models such as a drive up model are being looked into by DHSC. On top of this additional testing methodologies in addition to PCR may well become available so the 4th site may not be necessary even if incidence increases to 500/100,000. Despite this, officers will plan to consider potential locations for a fourth Local Testing site if the criteria was reached and no new testing options are available.

### **5. Location of Local Testing Sites**

The objective of Havering Council is to provide equity of access to testing for residents. Accessibility to testing sites is crucial to the utilisation thus the current placement of LTSs has been done in an order to serve residents. The council now has an opportunity to introduce further LTSs in the borough to increase testing capacity again locally. The following criteria is used to prioritise the placement of LTS in communities.

Prioritise communities that are:

- furthest from existing testing sites
- with the highest incidence rates
- with the highest usage of home testing kits
- and have relatively low levels of car ownership

The council first placed a MTU in Romford as it is the central location in the borough. When the opportunity to host LTSs was presented, the council used the above criteria to first place a LTS in the south of the borough and then in the north. With the opportunity to host further testing sites, it is a careful balance between the need and distance from further testing sites. Figure 3 has been removed from this copy due to the data being Official Sensitive. The map of covid cases at MSOA level can be found here:

<https://coronavirus.data.gov.uk/details/interactive-map>.

Figure 3 showed the current location of LTSs in the borough with crude infection rate. The interactive map will show incidence rate at MSOA level and is publically available. The placement of LTSs has followed carefully the above criteria for placement. Considering these criteria, the recommendation is that the following order is used for the future placement of Local Testing Sites:

- Romford
- Hornchurch

As can be seen in the publically available interactive map of COVID cases, the central area of Havering has some of the highest level of COVID incidence and there is currently no permanent testing facility. Meanwhile, Romford Town and Brooklands wards have the highest usage of home testing kits from September 1<sup>st</sup> – October 31<sup>st</sup>. This is a concern because there is a higher likelihood of false negatives when tests carried out at home. Research suggests that having a

## Non-key Executive Decision

supervised self-swab test is likely to be as accurate as swabs collected directly by healthcare workers.<sup>5</sup> At the LTS it is a supervised test which is undertaken. With the introduction of a LTS in Romford Town, it is expected that more residents from the surrounding wards will visit a test site to get tested which will hopefully reduce the demand on home test kits and the potential number of false negatives returned.

### **6. Site selection for Local Testing Site**

The placement of a LTS requires it be placed in a location which provides good pedestrian access. The site needs to be available for a six month period. Finally, the site needs to be in the gift of the council to minimise the delay in site the becoming operational and cost to the council - as The Department for Health and Social Care do not cover the cost of renting site locations. The agreement between DHSC and the land owner is through a legal license so to allow a quicker process, legal departments are involved.

The choice of initial LTSs was based purely on criteria provided by the DHSC. Having now experienced the build and operation of two sites and feedback from local stakeholders, for the decision on future LTSs the following expanded criteria are used:

Prioritise potential sites (i.e. in the gift of the Council and meeting the minimum specification of DHSC) within communities based on: -

- Walkability for local community
- Minimal impact on wider community – considering parking options in the vicinity and to minimise additional on street parking
- Minimise impact on local business
- Minimise impact on local schools and pre-schools
- Financial impact of site to the council

### **Placement of LTS in Romford**

The recommendation is to place a 3rd LTS at Romford Town Hall Car Park. This would then develop a permanent testing facility in Romford with minimal impact on local businesses, schools or the wider community. The site will be placed on the 2<sup>nd</sup> level of the rear car park behind the town Hall, with entrance from Park End Road. There is enough space to host a MTU and LTS in this area of the town, whilst ensuring segregation from staff and visitor parking. It is planned for both the LTS and MTU be located at Romford for a short period of time before redeploying the MTU to a place in the east side of the borough which has good driving access. This will mean access to testing in Havering will be very strong across the whole borough.

---

<sup>5</sup> Kojima, N., Turner, F., Slepnev, V., Bacelar, A., Deming, L., Kodeboyina, S. & Klausner, J D. 2020. Self-Collected Oral Fluid and Nasal Swabs Demonstrate Comparable Sensitivity to Clinician Collected Nasopharyngeal Swabs for Covid-19 Detection.

## Non-key Executive Decision

DHSC have agreed to locate a local testing site in the rear car park of the Romford Town Hall. This will be for a 6 month period with the site opening at reduced hours then running from 8-8, 7 days a week. If approved the timeline for Romford Town Hall is:

Site Survey: 19<sup>th</sup> November 2020  
Site Build: 23<sup>rd</sup> November 2020  
Testing Pilot: 26<sup>th</sup> November 2020  
Site Live Date: 27<sup>th</sup> November 2020

Occupation of the site will be regulated by way of a Licence being prepared by the council's Legal Team. Space will be maintained between the test site and space for council staff to park in the car parks.

### **Placement of further testing provisions**

As pointed out previously when considering current and future testing demand, it is likely the options available for testing are set to increase with potentially new testing site models as well as other methodologies in addition to PCR becoming available. Therefore, it may be the case that demand for testing will be met through the use of this additional options. However, it is important to consider that these are not guaranteed and therefore a location for a 4<sup>th</sup> Local Testing Site will be identified.

Learning from the placement of the first LTSs officers are currently considering the most potentially viable options in the Hornchurch area using the criteria developed and in line with DHSC criteria. Officers are working with Deloitte on the potential options available and these are currently being drawn together which will be presented in due course to cabinet members.

Depending on the outcomes of the discussions by DHSC on a drive up model, then the location chosen for an additional site will reflect the criteria of that model. When deciding the location for a LTS they are designed to be in the centre of communities with good walking access, therefore, placing them on the periphery of residential areas is not an option with these sites. However, if a drive up option is available, officers will look to introduce this type of model replacing the walkability criteria with driving access whilst still aiming to minimise the impact on the wider community.

The decision to bring in further walk-through testing facilities to the borough such as the LTS allows for improved access to testing for residents. This improves the understanding of the epidemic locally and allows for contact tracing to begin if a positive result is returned. After preventing infection taking place, the primary efforts to control levels of infection in the community is through contact tracing and providing appropriate public health advice to affected individuals to break the chain of transmission.

**OTHER OPTIONS CONSIDERED AND REJECTED**

**Non-key Executive Decision**

**Options**

**1. Do nothing**

To continue with existing arrangements was not deemed as a viable option due to the high and increasing infection rate in the borough and the need to protect public health. The Recommendation of the Director of Public Health is to work to increase testing capacity locally for the reasons detailed in the report.

**PRE-DECISION CONSULTATION**

**NAME AND JOB TITLE OF STAFF MEMBER ADVISING THE DECISION-MAKER**

Name: Jack Davies

Designation: Public Health Specialist

Signature: *J Davies* Date: 16<sup>th</sup> November 2020

## Part B - Assessment of implications and risks

### LEGAL IMPLICATIONS AND RISKS

The agreement put forward to Havering is a 6 month agreement for the use of Romford Town Hall Car Park. Occupation will be regulated by way of a Licence.

### FINANCIAL IMPLICATIONS AND RISKS

Costs of setting up and running the Test site will be covered by the DHSC.

It is assumed that should measures put in place to mitigate the rate of infection progress positively, the location of the testing facility will need to be considered to accommodate officers return to the office and therefore the usage of the Town Hall car park.

### HUMAN RESOURCES IMPLICATIONS AND RISKS (AND ACCOMMODATION IMPLICATIONS WHERE RELEVANT)

There are no HR implications.

### EQUALITIES AND SOCIAL INCLUSION IMPLICATIONS AND RISKS

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) Foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are age, disability, gender reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex/gender, sexual orientation.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

Making testing available in Romford, will seek to to redress the disadvantage that residents in these neighbourhoods may experience in accessing testing for Covid-19. The purpose of the testing sites is to ensure everyone in Havering has the opportunity for localised testing.

**Non-key Executive Decision**

**BACKGROUND PAPERS**

**Non-key Executive Decision**

**Part C – Record of decision**

I have made this executive decision in accordance with authority delegated to me by the Leader of the Council and in compliance with the requirements of the Constitution.

**Decision**

Proposal agreed

Proposal NOT agreed because

**Details of decision maker**

Signed 

Name: Mark Ansell

Cabinet Portfolio held:

CMT Member title:

Head of Service title

Other manager title:

Date: 16<sup>th</sup> November 2020

**Lodging this notice**

The signed decision notice must be delivered to the proper officer, Debra Marlow, Principal Democratic Services Officer in Democratic Services, in the Town Hall.

**For use by Committee Administration**

This notice was lodged with me on \_\_\_\_\_

Signed \_\_\_\_\_