



Cyngor Castell-nedd Port Talbot  
Neath Port Talbot Council

## **NEATH PORT TALBOT COUNTY BOROUGH COUNCIL**

### **Personnel Committee**

**4 June 2020**

### **Report of the Director of Environment and Regeneration – N.Pearce**

#### **Matter for Decision**

#### **Wards Affected: All Wards**

#### **Contact Tracing Service staffing structure**

#### **Purpose of the Report:**

To seek authority to establish a staffing structure for the Contact Tracing Service.

#### **Background:**

In May, The Welsh Government published the Test, Track and Trace Strategy, a strategy for testing the general public and tracing the spread of coronavirus in Wales.

To date, the Welsh Government's testing strategy has focused on people in hospitals, care homes, and symptomatic critical workers. In the next phase, Test, Trace, Protect will mean asking people to report symptoms, testing anyone in the community who is showing symptoms of COVID-19, and tracing those they have come into close contact with. Contacts will be advised to self-isolate in order to stop further spread among family, friends and the community. Contact tracing is a long established public

health approach to containing the spread of many infections and has proven effective in controlling coronavirus in other countries. Welsh Government sets out the aim to bring together and build on the existing contact tracing expertise in local health boards and local authorities to delivery this strategy on the ground.

A three tier, multiagency approach will see contact tracing provided at national, regional and local levels.

**Public Health Wales will provide national co-ordination**, expert advice and support on contact tracing methods and priorities. This will include setting all Wales standards and guidance for how contact tracing should operate. Public Health Wales will also identify which contacts and settings confer the highest risk of transmission, helping direct contact tracing and testing efforts.

NHS Wales Informatics Service (NWIS) will ensure that there is a single national digital platform for contact tracing across Wales.

Contact tracing will be delivered regionally by Local Health Boards and Local Authorities working in partnership along with other public services to deploy contact tracing teams who understand their local communities and context.

**Regional response tier** staff will be involved in a variety of roles supporting the service at a regional level. They will include specialists from Local Authorities and Local Health Boards, (with access to Health Protection specialist advice support from Public Health Wales). They will be responsible for responding to clusters within their area and providing proactive support to settings where the risk of transmission is increased.

**The local tier** will be responsible for the interviewing of cases and follow up of contacts, supported by a case and contact information management system, and organised in local contact tracing teams. This tier will be co-ordinated and delivered by Health Boards and Local Authorities and will include the following roles:

**Contact tracers** are staff identified and deployed as part of the local contact tracing teams. They will be responsible for the interviewing of cases and identifying their contacts. Standard Operating Procedures (SOPs) and scripts will be available and basic advice can be provided using the contact tracing system knowledge base. Any complex issues and situations should be escalated to the **Regional response cell**. Clinical issues should be referred to the **Clinical Lead**, or acute health issues should be signposted to healthcare services (111, 999, primary care etc).

**Contact advisors** are staff identified and deployed as part of the local contact tracing teams. They will be responsible for advising and follow-up of contacts who require management outside of the automated processes. SOPs and scripts will be available and basic advice can be provided using the contact tracing system knowledge base. Any complex issues and situations should be escalated to the **Regional response cell**. Clinical issues should be referred to the **Clinical Lead**, or signposted to Healthcare services (111, 999, primary care etc).

**Clinical leads** are staff identified and deployed as part of the local contact tracing teams. They will be responsible for advising and follow-up of cases and contacts who have clinical queries. Acute health issues should be referred to healthcare services (111, 999, primary care etc).

## **The Swansea Bay Health Board Regional Plan**

To address demand, a large workforce will be required to undertake contact tracing and follow-up within a defined geographical area. The Plan sets out that Contact teams will follow the following structure and based around Upper Super Output Areas (USOA) of which Neath Port Talbot has 5:

Role	No.s of staff per USOA team	Capacity Assumption (based on 8hr working day) per USOA team	Contact Tracing Capacity (Single Team)	Contact Tracing Capacity (NPT) – 5 USOA areas	Contact Tracing Capacity (Swansea) – 8 USOA areas	Contact Tracing Capacity (Swansea Bay – 13 USOA areas)
Clinical Lead	1 per team			5	8	13
Contact Tracer	3-4 per team	Interview 4 cases / day	12-16	60-80	96-128	156-208
Contact Adviser	10-12 per team	Follow up 10-12 contacts per day	100-144	500-720	800-1152	1300-1872

The Plan sets out that each of Neath Port Talbot’s USOA’s will require the following staffing arrangements:

### **Team**

1 Clinical Lead / 4 Contact Tracer / 12 Contact Advisors (of which 1 is a supervisor)

1 supervisor (Advisor) in each of the 12 Advisors Teams (Manage Advisor Team)

### **Capacity**

Contact Tracer Interview 6 / 7 cases 24 - 28 per day

Contact Advisor 12 calls a day (minimum) expectation of 20 calls (12 advisors = 144 - 240 contacts per day per team)

### **Business Support function (to support across the 5 teams)**

The business support will consist of 1 co-ordinator, 1 admin officer and 1 training officer. The business support will support all teams as they grow and may need to be increased when capacity is reached, by the addition of further administrative staff. The main role is to ensure staff cover, deal with any training or advice on operational issues and ensure returns, admin or cover is obtained.

Timetable:

<b>Phase</b>	<b>Swansea</b>	<b>NPT</b>
<b>1 (testing / Shadowing)</b>	1 teams 18th May – 22nd (testing structure , shadowing EHO’s and e-learning and connectivity in preparation for digital solution)	1 teams 18 May – 22nd (testing structure and e-learning and connectivity in preparation for digital solution)
<b>2 (Preparation)</b>	2 teams 26 May – 31 May	2 teams 26 May – 31st May
<b>3 (Go Live)</b>	4 teams (1 June – 1st July)	4 teams (1 June – 1st July)
<b>4 (Review)</b>	15th – 20th June Review capacity and demand before Phase 5	
<b>5 (Growth)</b>	8 teams (1 July - onwards)	6 Teams (1 July - onwards)
These teams will then need to grow further to cover additional demand		

Through their existing workforces, Swansea / Neath Port Talbot / Health Board will require resources of:

City & County of Swansea: 8 Teams (136 staff + 3 Support team)

NPT: 6 Teams (102 staff + 3 support team)

The structure will initially be staffed by the redeployment of employees from within each Local Authority, with both Authorities being supported by staff from the health board

This will ensure we can establish the teams quickly. However during the return to normal the Local Authorities will need to consider recruiting additional employees to ensure that sufficient people are available, due to the long hours of operation and the extended working

week of 7 days, 8.00 .am. to 6.00 p.m. As services at each organisation return to normal work, the staff redeployed may no longer be available. If demand for this service outstrips the internal resources available and / or redeployed resources need to return to substantive posts, the Council will need to recruit additional employees from the external market.

### **Neath Port Talbot Staffing Arrangements:**

The service will sit with Ceri Morris, Head of Planning & Public Protection, and as part of the first initial phase, we will be establishing 6 Contact Tracing teams by mid-June. A redeployed Accountable Manager will support Ceri to set up the service, until such time as she needs to return to her substantive post.

Each team will have 11 Contact Advisors, job evaluated at Grade 5, 1 supervisor, job evaluated at Grade 6 and 4 Contact Tracers, job evaluated at Grade 7. Health are providing Clinical Leads, as well some Contact Tracers (21 employees have been provided to date). The majority of employees provided by Health are currently shielding, and Health have advised that as and when advice in relation to shielding changes, they may need to call these employees back to their substantive posts.

In line with our Redeployment Agreement with trade unions, no employee will be in financial detriment as a result of this temporary redeployment – if the employee's substantive post is of a higher grade they will retain their higher grade. If they are at a lower grade they will receive the higher grade in respect of the redeployment.

We have already populated the 6 teams and the vast majority of employees have been pleased to be offered this work, and to be supporting the Council's response to Covid-19 in such an important way. We have been flexible with those who have caring responsibilities, agreeing hours of work with them that take account of their caring responsibilities – in some cases employees will not be

working their full contractual hours in order to accommodate this, but at no financial detriment. We are filling the weekend team with people who are shielding but work weekends as part of their substantive post, or with people who don't normally work weekends but are willing to voluntarily work at the weekend instead to accommodate e.g. childcare.

These employees will be designated key workers and able to access childcare in the school hubs if they want / need to.

Public Health Wales are providing scripts for advisors and tracers, as well as an E Learning package. Our internal training team is supplementing this training package with a range of training, including TEAMS training, safeguarding, GDPR, difficult conversations, customer care, etc. We have also redeployed on a temporary basis 2 members of the training team to support the teams in this initial phase.

All employees will work from home and be provided with the necessary kit to help them do this work.

### **Financial Impacts:**

The costs set out below are based on additional employees being recruited to the service. The current set up costs are being minimised through the redeployment of employees who are unable to work because of the Covid-19 emergency – either because they are unable to attend the workplace because it is closed and they cannot perform their job at home, or because they are shielding and unable to attend the workplace. As highlighted above, it may be necessary to recruit additional staff, if we need to move redeployed staff back to their substantive posts, or if the demand for this service outstrips the current staffing arrangement.

<b>Team 1</b>	<b>Annual Salary</b>	<b>Monthly Salary</b>
Clinical Lead	£40,760	£3,396

4 Contact tracers	(£27,905) £111,620	£9,301
11 Contact Advisors	(£23,836) £262,196	£21,849
1 Contact Advisor – Supervisor	£25,801	£2,150
Total (Excl. on-costs)	£440,377	£36,696

<b>Business Support Team</b>	<b>Annual Salary</b>	<b>Monthly Salary</b>
Business Support Co-ordinator	£28,785	£2,398
Training Officer	£27,905	£2,325
Admin Officer	£20,751	£1,729
Total (Excl. on-costs)	£77,441	£6,452

**Monthly costs:**

1 Team + 1 BST = £43,148

2 Teams + 1 BST + 1 Shadow Contact Tracer = £82,169

4 Teams + 1 BST = £153,236

+ 2 Shadow Contact Tracers = £157,886

6 Teams + 1 BST = **£226,628**

**NB: Additional employer on costs will be in the region of 34%.**

There will be additional costs associated with the ICT kit provided to employees to enable them to work at home.

In a letter dated 19<sup>th</sup> May 2020, Welsh Government confirmed:



“The Welsh Government is content to fund agreed costs, however, as I am sure you will appreciate we would only expect to fund additional costs arising, for example where recruitment of staff either directly to do this work or for essential backfill for existing staff redeployed to this work cannot be avoided. No doubt local authorities and health boards are taking all possible opportunities to resource this work from re-deploying staff but I recognise that as more services resume this may not always be possible”.

**Integrated Impact Assessment:**

An integrated impact assessment is not required for this report.

**Valleys Communities Impacts:**

No impacts

**Workforce Impacts:**

The workforce is being sourced from those employees who are available for redeployment as a result of the Covid-19 emergency, on a temporary basis, and in line with agreements reached with our recognised trade unions.

**Legal Impacts:**

No impacts

**Risk Management Impacts:**

The Swansea Bay Health Board Regional Plan includes a risk register.

**Consultation:**

Trade unions have been consulted and support this approach.

**Recommendations:**

1. To approve the establishment of teams to deliver the requirements of the Contact Tracing Service in Neath Port Talbot.
2. To redeploy available employees into the service, for an initial period of 3 months.
3. To recruit from the external market any additional employees that may be required, either as a result of redeployed staff having to return to their substantive post and / or an increase in demand for services.

**Reasons for Proposed Decision:**

To deliver the contact tracing element of the Welsh Government's Trace, Track and Protect Strategy.

**Implementation of Decision:**

The decision will be implemented immediately.

**Appendices:**

Integrated Impact Assessment.

**List of Background Papers:**

None

**Officer Contact:**

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