

Greater Manchester Resilience Forum

Multi-agency memorandum of understanding

**Management of incidents and outbreaks
of zoonotic diseases in Greater Manchester**

1 Introduction

- 1.1 Some animal diseases do not pose a threat to human health e.g. bluetongue; some animal diseases have the potential for a very significant impact on human health e.g. avian influenza and rabies. For practical purposes, a zoonosis is a disease which can be transmitted from animal to human. This MOU focuses on, and is limited to, animal diseases that have the potential to infect humans and that could have significant implications for human public health.
- 1.2 Defra have published a detailed overarching plan for the management of a range of animal diseases, as well as plans for responding to specific diseases including foot and mouth disease, avian influenza, rabies and bluetongue. The plans include background information on key diseases and significant detail on incident management. The detail will not be rehearsed here.
- 1.3 This MOU sets out the framework for the Greater Manchester multi-agency response to outbreaks and incidents of zoonotic disease and outlines the roles, responsibilities and contributions of the relevant agencies. This MOU should be read in conjunction with other relevant guidance and plans, in particular:

Defra contingency plan for exotic animal diseases	http://www.defra.gov.uk/animalh/diseases/pdf/frameworkresponseplanv2.pdf http://www.defra.gov.uk/animalh/diseases/pdf/overview-emergencypreparedv2.pdf
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North West Resilience Forum multi-agency exotic animal diseases management plan

Greater Manchester Resilience Forum Major Incident Plan

LACORS generic notifiable animal disease contingency plan template for Local Authorities in England	http://www.lacors.gov.uk/lacors/upload/16992.doc http://www.lacors.gov.uk/lacors/upload/16534.doc http://www.lacors.gov.uk/lacors/upload/16536.doc
Avian influenza annexe	
Foot and mouth annexe	

In addition each local agency will have internal plans and standard operating procedures relevant to these incidents.

- 1.4 There are two aspects to an outbreak of certain zoonotic diseases. Firstly the containment of the outbreak in the animal population including the

management of the consequent economic and social impact and secondly, in some circumstances, preventing or limiting the transmission of disease to the human population.

- 1.5 Not all incidents of zoonotic disease will require the response set out in this document (e.g. brucellosis). The condition most likely to require this response at the time of writing is avian influenza.
- 1.6 This MOU has been developed jointly by representatives of Animal Health, Greater Manchester Health Protection Unit, Greater Manchester Local Authorities, Greater Manchester Primary Care Trusts, Greater Manchester Police and Greater Manchester Acute NHS and Foundation Trusts.

2 Response framework

- 2.1 Defra is the lead Government department for the management of animal disease outbreaks. In Great Britain, Animal Health is the delivery body and the lead for the operational activities (appendix 1). Locally this will be led by the Animal Health Divisional Office at Barton Hall, Preston. Animal health will notify partners in a timely fashion at an appropriate level of suspicion (appendix 2).
- 2.2 The Health Protection Agency will be the lead agency for the human aspects of animal disease outbreaks. The local public health response will be delivered jointly by Greater Manchester Health Protection Unit and the Primary Care Trust.
- 2.3 *Animal health*
 - 2.3.1 Overall control of outbreaks will be undertaken at a national level by the National Disease Control Centre under the authorisation of the Chief Executive of Animal Health.
 - 2.3.2 The response is managed locally by a Local Disease Control Centre (LDCC), led by the Regional Operations Director with support from the Divisional Veterinary Manager and the Divisional Operations Managers.
 - 2.3.3 The Local Disease Control Centre
LDCC will be activated at level of suspicion 3 (appendix 2). The LDCC will be focused on all aspects of animal disease control such as culling and disposal of animals, movement restrictions in the immediate area of the case and welfare of staff involved in the operation. Their main responsibility is the effective control and eradication of disease during an outbreak and allowing the industry to return to normality. This will include:
 - Identification of the source and possible spread of infection
 - Co-ordination of disease control measures on the infected premises
 - Identification and tracing of poultry, people and vehicles/equipment which may have been in direct contact with infected animals
 - Identification and surveillance of animals in the vicinity of the infected premises
 - Licensing of the movements of animals and animal products within the restricted zones
 - Implementation of any changes in policy or controls
 - Provision of regular feedback to inform strategic decisions

- Maintenance of communication with external agencies with a legitimate interest in the incident
- Provision of an accurate and reliable source of information for other professionals, the media and the public and designating a press spokesperson

The LDCC will receive advice from the Incident Management Team on human health control/counter measures and will provide input to lessons to be learned and incident/outbreak reports.

2.3.4 Representation at the Local Disease Control Centre

- Animal Health Regional Operations Director (chair)
- Relevant Local Authority
- Police
- Defra/Animal Health Health and Safety adviser
- Health Protection Agency
- Incident Management Team (IMT) liaison
- Environment Agency (EA)
- Regional Resilience team

Others may be invited as appropriate.

2.4 *Human health*

2.4.1 The Incident Management Team (IMT)

If appropriate to the disease, the human aspects of the outbreak will be managed by an incident management team (IMT).

The role of the IMT is to manage the public health impact of the incident ensuring that the potential consequences on public health and the health of staff involved in disease control operations are minimised.

The functions of the IMT will include:

- Provision of advice to LDCC on health related matters.
- Human health risk assessment.
- Identification of and management of all those already exposed.
- Co-ordinating human health interventions including provision of information and advice, vaccination and prophylaxis.
- Identification, management and follow-up of symptomatic contacts
- Advising on measures to prevent or minimise exposure.
- Agreeing and co-ordinating (in consultation with others such as the HSE, and Defra/Animal Health, health and safety professionals) the arrangements for protecting those who will potentially be exposed.
- Provision of information on health related matters as required to all interested parties including local health professionals, the media and the public.

2.4.2 Membership of the IMT

- Consultant in Health Protection (Health Protection Unit)
- HPU director
- PCT Director of Public Health (DPH)
- Appropriate LDCC liaison/Animal Health representative
- Regional Epidemiologist
- Information and surveillance officer

- Health Emergency Planning Advisor (HEPA)
- Communications manager
- Administrative staff/office manager

The IMT will usually be chaired by the HPU.

Other members may be invited as appropriate e.g. Local Authority Environmental Health.

- 2.5 Greater Manchester Senior Co-ordinating Group
SCG will not necessarily be convened but may be convened in line with current protocols if the need is perceived.
- 2.6 Recovery working group
A recovery working group will be convened as appropriate to the incident and will be led by the Local Authority in line with current protocols.

3 Roles and responsibilities

3.1 Animal Health

Animal Health will:

- Establish a Local Disease Control Centre (LDCC) to co-ordinate the local aspects of the disease control operation. This will most likely be located at Barton Hall, Preston although an alternative venue within Greater Manchester may be established.
- Ensure that local operational partners and stakeholders are aware of their responsibilities in a disease situation, and are actively engaged in the appropriate communication network.
- Provide veterinary resource for disease testing requirements.
- Lead in the identification of tracing the source of the disease and possible contact animals.
- If appropriate to the disease, identify possible human contacts and provide this information to the Greater Manchester Health Protection Unit as soon as possible
- Co-ordinate the effective serving of notices and movement licences.
- Work with delivery partners to organise enforcement activities based on local intelligence and consideration of disease risk.
- Co-ordinate and manage culling activities and carcass disposal as appropriate.

3.2 The Local Authority

The Local Authority will:

- Provide appropriate representation at the LDCC and other working groups as required.
- Assist Animal Health/ Defra with the provision of resources such as staff, vehicles, equipment and buildings where necessary and within the limits of resources available at the time.
- Erect road signs for publicising the Protection and Surveillance Zones around a premises where disease has been confirmed.

- Patrol any areas put under movement restrictions, providing guidance and enforcement of any control/restriction orders imposed by Defra as appropriate.
- Assist with the gathering and co-ordination of information on the location of animals, animal gatherings and potential human contacts.
- When interviewing residents and occupiers of premises within control zones, officers will enquire about the health of residents and occupiers. Details of residents who report any symptoms compatible with the outbreak disease will be reported as soon as possible to the Health Protection Unit on a standard form.
- Assist with the distribution of information leaflets to residents within the control zones.
- Contribute to the process for issuing individual movement licences as required.
- Provide assistance with and monitor cleansing and disinfection requirements, and serve notices as necessary
- Provide guidance to the local community in line with national guidance and information being provided by the local authority and answer queries from the public and farming community.
- Ensure effective transfer of intelligence with other government delivery partners, and industry where appropriate.
- Close and re-open rights of way as appropriate and in line with LDCC decisions.
- Monitor livestock welfare, especially on transport and at markets.
- Enforce animal health and welfare legislation as appropriate. Maintain effective liaison with other local Operational Partners.
- Provide advice on public health implications of the disease control operations (e.g. disposal operations).
- Complete any further reasonable *ad hoc* activity that may be requested by either the Animal Health and Welfare Enforcement Manager or Animal Health.
- Lead the Recovery Working Group

3.3 Greater Manchester Health Protection Unit (GMHPU)/ Health Protection Agency (HPA)

GMHPU will:

- Provide representation at the LDCC and other working groups as required.
- Lead the Incident Management Team.
- Oversee and co-ordinate contact tracing.
- Oversee and co-ordinate the surveillance and follow-up of human contacts.
- Provide advice on control measures, requirements for prophylaxis for contacts and those involved in managing the outbreak (e.g. vaccine, drugs), infection control measures and protective equipment.
- Lead appropriate epidemiological investigation.
- Support other agencies with communication and education of those involved in the outbreak and the general public.

3.4 The Primary Care Trust

In many cases, an incident will affect only one PCT. In this event, the local PCT will:

- Provide representation at the Incident Management Team.
- Provide representation at the LDCC and other working groups as required.
- Ensure access to resources for protection of human health e.g. influenza vaccine, antiviral prophylaxis and treatment.
- Provide resources to support contact tracing as required.
- Support appropriate epidemiological investigation as required.

If an incident involves more than one PCT area, the affected PCTs and the lead PCT will identify a single co-ordinating PCT.

3.5 Greater Manchester Police

Police forces will fulfil a number of specific roles in relation to an animal disease outbreak, in addition to their wider role in maintaining order and protecting the public. The work of police forces in an animal disease outbreak will be dependent upon the severity and nature of other requirements being placed upon them. Police are able to provide assistance to Animal Health through the provision of specialist knowledge in the area of management and co-ordination of major incidents.

Greater Manchester Police will:

- Provide appropriate representation at the LDCC. The nature of the representation will be determined at the time of the incident. Physical representation may be required particularly for larger incidents or in the early phases of an incident. In some circumstances a single point of contact for liaison will suffice.
- Support local authorities with the policing of control zones as appropriate and with the enforcement of movement controls by assisting in the stopping and checking of vehicles transporting animals.
- Share all relevant information obtained with local authorities and Animal Health.
- Manage disturbances to the peace or obstruction to enforcement and veterinary activities.

3.6 The Environment Agency

The Environment Agency will advise on potential environmental hazards arising from a zoonotic incident e.g. discharges to the environment from carcass disposal.

3.7 Other agencies

3.7.1 Acute and Foundation NHS Trusts

It is possible that Trusts will receive symptomatic patients in which case the Trust will manage these patients in accordance with the infection control advice current at the time. Trusts will notify the Health Protection Unit immediately of (i) presenting patients who have a history and illness compatible with a zoonotic disease and (ii) patients who may be connected with a known incident. The IMT will inform local Trusts of ongoing incidents.

3.7.2 North West Ambulance Service

It is possible that NWAS will be asked to transfer symptomatic patients in which case NWAS will be informed of the nature of the disease. NWAS will manage these patients in accordance with the prevailing infection control advice.

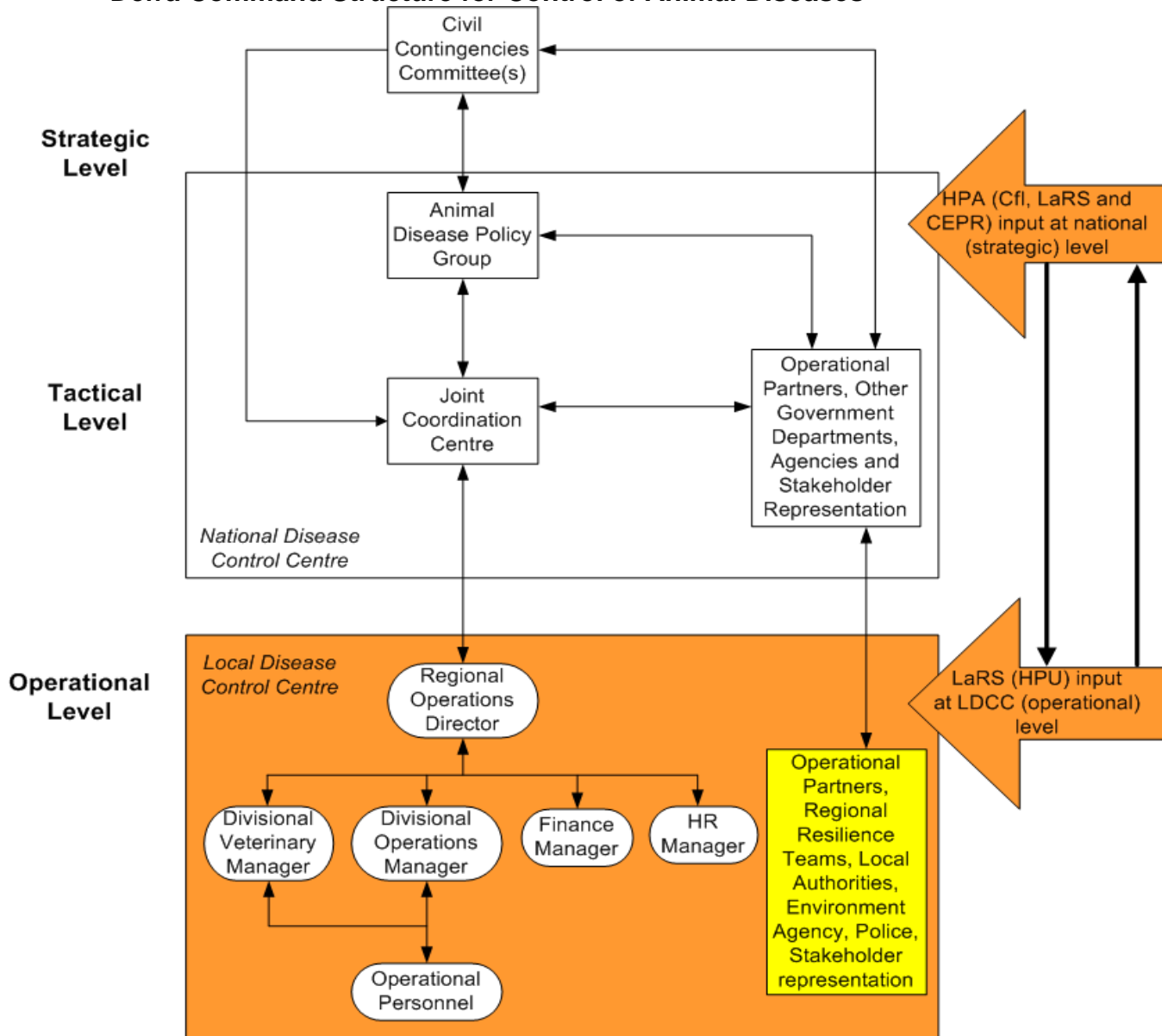
3.7.3 Greater Manchester Fire and Rescue

GMFR will be informed of the situation as it develops and any implications for its usual working.

4 Health and safety

- 4.1 The IMT will at all times be mindful of the health and safety of personnel involved in the management of an incident. Personnel entering infected premises will be strictly limited to those who are necessary to the operation. This will be under the direction of Animal Health and appropriate protection will be provided with the necessary training.
- 4.2 Personnel from agencies other than Animal Health will not be required to enter infected premises on matters related to the management of the incident; they will not knowingly be put into situations where there is a possible risk of infection. Appendix 3 is an advisory briefing issued in respect of police officers. The same principles apply to staff from other agencies.
- 4.3 If personnel are required to enter an infected premises as part of their normal activities *e.g.* to deal with an incident such as a breach of the peace, Animal Health will make every effort to provide appropriate personal protective equipment (PPE).
- 4.4 If personnel are required to enter an infected premises urgently as part of their normal activities without appropriate PPE because it was not available within the time-scales required, then the HPA will ensure that an assessment is made of the risk of having entered the premises and will if appropriate ensure post-exposure prophylaxis.

Appendix 1 Defra Command Structure for Control of Animal Diseases



Strategic – Key officials will make decisions concerning the policies upon which the disease control operation will be based (e.g. Chief Veterinary Officer).

Tactical – Officials are responsible for ensuring that strategic advice is translated into practical instructions to those carrying out the operational response. The tactical response will be co-ordinated by the Joint Co-ordination Centre (JCC), which is part of the National Disease Control Centre (NDCC). This is both an advisory and co-ordination function for those controlling the disease at local level (e.g. Head of Response Co-ordination).

Operational – Activity will centre on the work of the Local Disease Control Centre (LDCC). The LDCC will implement tactical level advice in line with guidance set in the Defra contingency plan and operational instructions (e.g. Regional Operations Director (ROD)).

Appendix 2

Defra levels of suspicion, national alert levels and initial actions in response to a suspected case of avian influenza

Level of suspicion (Alert level)	Generic level of suspicion	Initial actions (Defra/Animal Health)
0 (WHITE)	Disease not suspected following veterinary enquiry	All restrictions on premises lifted – no further action
1 (WHITE) Broadly equivalent to 'Report of suspicion'	Lesions and clinical disease not typical – but disease cannot be ruled out entirely on clinical grounds	Suspect birds left alive and observed. Samples taken and submitted for laboratory diagnosis. Premises restrictions imposed. Local authority will be notified.
2 (AMBER) Broadly equivalent to 'Disease suspected'	Lesions and clinical disease suggestive of disease. Poultry showing typical lesions may be killed	Sick birds may be killed. Suspect flock left alive and observed. Samples taken and submitted for laboratory diagnosis. Premises restrictions imposed. Animal Health should notify direct to the local HPU.
3 (AMBER) Broadly equivalent to 'Disease suspected'	Lesions and clinical disease highly suggestive of disease. Entire flock of birds may be pre-emptively killed	An amber teleconference will be called to discuss the incident and agree next steps. All poultry on the premises may be pre-emptively killed (slaughtered on suspicion). Samples submitted for laboratory diagnosis. Premises restrictions imposed. Animal Health/Defra will contact Public Health partners at local and national level. A NDCC and LDCC will be established.
4 (RED) Equivalent to 'Disease confirmed'	As a level 3 plus disease already confirmed or a decision to slaughter on suspicion has been taken	All poultry on the premises slaughtered on suspicion and disease confirmed on clinical grounds only without awaiting laboratory results. Samples will be submitted for laboratory diagnosis. Area restrictions imposed. Animal Health/Defra will contact Public Health partners at local and national level. A NDCC and LDCC will be established

Appendix 3

Advisory Briefing

Risks to police officers in England supporting Defra / animal health operations to control H5N1 avian influenza (AI) outbreaks

Police operations around infected premises / contact with premises and people from infected premises

Any restrictions on entry put in place around infected premises will be positioned far enough away from any of the areas where infected birds and their bedding (material such as straw and wood shavings contaminated with bird faeces) are kept, where people are changing into and out of PPE or where vehicles are being disinfected so that the risk of transmission of avian influenza is contained. This is the same approach that would be adopted for any incident involving a notifiable disease affecting animals such as foot and mouth.

Police officers controlling entry to and exit from the site will not be at any risk of exposure to infectious material and therefore do not require PPE or antiviral medication. If it is perceived that there is any increased risk of transmission then the control points to the site will be moved outwards to an even safer distance. There is no question of putting officers knowingly into situations where there is a possible risk of infection.

Police officers will be in contact with people entering and leaving the farm but these individuals do not represent a risk to the officers, or anyone else they are in contact with because the PPE that they would have been wearing will have been taken off and bagged away from the officers and before there is any contact with anyone.

Recommendations:

- (1) Defra / Animal Health will not expect or require police securing an infected premise (IP) / dangerous contact premise (DC) / slaughter on suspicion (SOS) premise to be positioned at any place that will bring them within a hazardous distance of any infected animals, animal wastes or hazardous processes.
- (2) The Health Protection Agency (HPA) recommend in the light of this undertaking that police officers involved in supporting AI control operations are at no greater risk than any ordinary member of the public and therefore require no personal protective equipment (PPE), no respiratory protective equipment (RPE), and do not require pre- or post-exposure prophylaxis with anti-viral drugs such as oseltamivir (Tamiflu®).
- (3) If an officer is required to enter an infected premises as part of their normal activities e.g. to deal with an incident such as a breach of the peace, to respond to an emergency call or as part of a criminal investigation; Animal Health would make best endeavours to provide appropriate PPE, if available at the site, if the force concerned was unable to provide it within the time-scales required;
- (4) If an officer is required to enter an infected premises urgently as part of their normal activities without appropriate PPE because the force concerned, or Animal Health, was unable to provide it within the time-scales required; then the HPA will ensure that an assessment is made of the risk to the officer of having entered the premises and will if appropriate ensure that the officer receives post-exposure prophylaxis with anti-viral drugs such as oseltamivir (Tamiflu®).

Defra / Animal Health
Health Protection Agency

16th November 2007