Public Document Pack



| MEETING: | Cabinet |
|----------------------------------|-------------------------|
| DATE: | Wednesday, 10 June 2020 |
| TIME: | 10.00 am |
| VENUE: THIS MEETING WILL BE HELD | |
| | VIRTUALLY |

SUPPLEMENTARY AGENDA

Items for Decision/Recommendation to Council

Core Services Spokesperson

11. Barnsley's Recovery and Renewal Strategy - Moving on from COVID-19 (Cab.10.6.2020/11) (Pages 3 - 42)

To: Chair and Members of Cabinet:-

Councillors Houghton CBE (Chair), Andrews BEM, Bruff, Cheetham, Gardiner, Howard, Lamb and Platts

Cabinet Support Members:

Councillors Charlesworth, Franklin, Frost, Saunders, Sumner and Tattersall

Chair of Overview and Scrutiny Committee Chair of Audit Committee

Sarah Norman, Chief Executive

Matt Gladstone, Executive Director Place

Melanie John-Ross, Executive Director Children's Services

Wendy Lowder, Executive Director Adults and Communities

Shokat Lal, Executive Director Core Services

Julia Burrows, Director Public Health

Michael Potter, Service Director Business Improvement and Communications

Neil Copley, Service Director Finance (Section 151 Officer)

Katie Rogers, Head of Communications and Marketing

Anna Marshall, Scrutiny Officer

Martin McCarthy, Service Director Governance, Members and Business Support

Corporate Communications and Marketing

Please contact Martin McCarthy on email governance@barnsley.gov.uk

8th June, 2020



BARNSLEY METROPOLITAN BOROUGH COUNCIL

This matter is not a Key Decision within the Council's definition and has not been included in the relevant Forward Plan

REPORT OF THE EXECUTIVE DIRECTOR
OF CORE SERVICES TO
CABINET

Barnsley's Recovery and Renewal Strategy - Moving on from COVID19

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to highlight the Barnsley MBC COVID19 Recovery & Renewal arrangements, desired outcomes and proposed governance structure.
- 1.2 The report seeks to highlight the ways in which elected members will be involved in decision making through the recovery process, and provide assurance that recovery work is progressing well.

2. RECOMMENDATIONS

It is recommended that:

- 2.1 Cabinet endorse the Barnsley MBC Recovery & Renewal Strategy
- 2.2 Cabinet support the proposed governance and roadmap to support the strategy is noted
- 2.3 Further reports are submitted as appropriate to advise progress

3. INTRODUCTION & BACKGROUND

- 3.1 The Covid-19 pandemic has been a disruptor to normal life with services stopping, demand for health and care services severely tested and the outlook for the UK economy uncertain. The Council has dealt with the pandemic through a response structure not unlike that of any other major incident, with Gold Strategic and Silver Tactical commands overseeing our response to the unfolding situation. The response has called for a huge and concentrated effort and council and partner services have risen to the challenges presented to them. This has been against a backdrop of a tragic and continuing loss of life in the borough. With the Government now moving to reopen businesses and lift some lockdown restrictions the time is right to consider our Recovery & Renewal strategy and planning processes.
- 3.2 Unlike a more conventional recovery from a major incident, e.g. flooding; the time period and potential fluctuations that will occur over the coming months will be a new recovery challenge for the organisation and its partners for the foreseeable future.

3.3 The recovery & renewal strategy to COVID 19 is complicated and multidimensional and requires an agile and adaptive mode of working to match. Our recovery can be defined as the process of rebuilding, restoring, rehabilitating and moving on following this emergency and our plan to get back to 'normal' community functioning. It is also an opportunity to realign our values with communities and build back better, to crystalise and work towards our Barnsley 2030 ambitions and give a sense of renewal to communities to help all to create a 'new normal' that sets a path towards longer term strategic goals.

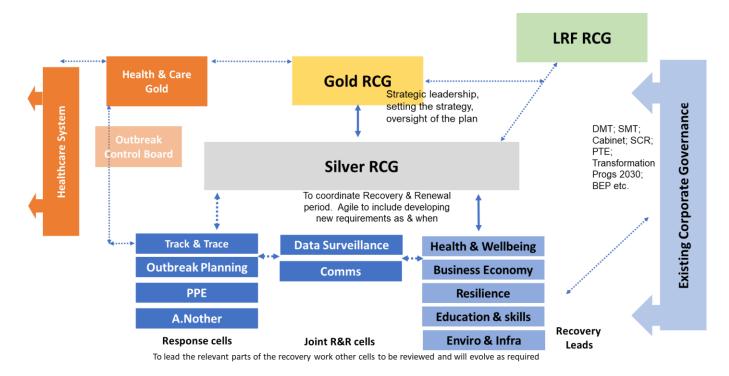
4 CONSIDERATION OF ALTERNATIVE APPROACHES

- 4.1 The approach proposed aligns to regional and national approaches and as such alternative approaches have not been considered. Although there is some Barnsley specific tailoring, e.g. the use of 5 themed areas rather than 4 as per the SYLRF, significant deviation will result in duplication of effort as the council seeks to report within both frameworks.
- 4.2 In addition, the emergency response and recovery guidance, designed to complement the Civil Contingencies Act 2004 sets out a framework for the council's responsibilities as a category 1 responder when entering in to the recovery phase.

5 PROPOSAL AND JUSTIFICATION

- 5.1 The proposed Recovery and Renewal strategy is written to align as far as practically possible to the South Yorkshire Local Resilience Forum (SYLRF) recovery and renewal strategy and incorporates similar outcomes and objectives. Furthermore, it will need to work alongside the Government Recovery Strategy three step plan set out on 11th May 2020. The draft recovery and renewal strategy is attached at *Appendix 1*.
- 5.2 There will also be alignment to regional political structures, working alongside the SCR Mayor, Mayoral Combined Authority within a wider Yorkshire context where appropriate to bring the recovery and renewal to our economy and communities. This will provide political leadership both at a SCR and locality level connecting the various places and communities right across South Yorkshire.
- 5.3 The Gold and Silver arrangements will stay in place for the duration of the recovery process and will be streamlined in order to reduce the officer workload and reduce the risk of duplication. These recovery arrangements are designed to complement existing governance processes, not seek to replace or replicate them. To this end a detailed exercise has been carried out to map existing arrangements to recovery strategy outcomes. These existing arrangements range from Directorate DMTs and existing partnership boards to Task & Finish Groups established to achieve specific objectives.
- 5.4 Themed groups have been established to coordinate activity and report exceptions to Silver and Gold recovery groups. These themes follow the identified 5 outcomes of:
 - Health & Wellbeing
 - Business & Economy

- Community Resilience
- Education and Skills
- Infrastructure and the Environment
- 5.5 The above reporting structure can be summarised as follows:



- 5.6 To aid understanding of the level of activity being undertaken, each theme has mapped existing governance against recovery strategy outcomes and also projects and services. This ensures that all of the impacts identified as part of detailed impact analysis are dealt with as appropriate. This applies equally to positive impacts. The exercise has proven that significant progress is already in place against the themed objectives and outcomes.
- 5.7 These individual thematic exercises will be consolidated to an overall plan which the Coordinating Group will drive and oversee as part of governance arrangements.
- 5.8 Continuation of existing arrangements and appropriate implementation of new governance arrangements will ensure that Barnsley is best placed to positively recover from CV-19.
- 5.9 As the onus is on delivering recovery through existing governance wherever possible existing Elected Member engagement will continue to be sought via these channels, for example DMT Briefings, Cabinet and Area Councils where presentations have already been delivered to outline the overall approach and outcomes. Where specific issues are raised outside these structures the theme leads will seek to engage appropriate members in the decision making process where it is viewed as a strategic matter.
- 5.10 Recovery planning will take place across 3 stages of activity which can be summarised as:

- Service restart primarily managed by service areas and through DMT's and with oversight by Gold and Silver providing overall coherence
- Recovery of the organisation including reopening of office buildings, health of the organisation and our workforce, financial recovery. Cross cutting and with oversight from the Gold and Silver governance arrangements.
- Recovery of Barnsley a focus on Place, business and partnerships working with our partners where appropriate. Focus more on the longer term and dovetailing to our 2030 planning activities.
- 5.11 This will all be set in the context of longer term strategies such as Zero 40/45 and the 2030 planning processes already in place, and organisational and place learning from the response phases.
- 5.12 Appendix 2 describes these stages and their detailed considerations:

6. IMPLICATIONS FOR LOCAL PEOPLE/SERVICE USERS

- 6.1 There are no specific implications for local people / service users as a direct consequence of this report. Initiatives and decisions as part of implementing the recovery strategy will have implications which will be brought to Members' attention as necessary. Full impact assessments will be an integral part of projects undertaken to deliver the strategy.
- 6.2 The review of learning and service provision will inevitably change the way some services are delivered moving forward as the council looks to realign with peoples' values build back better and give a sense of Renewal to communities

7. FINANCIAL IMPLICATIONS

- 7.1 There are no financial implications as a direct consequence of this report. Finance is represented specifically within each theme and considerations will be raised as a part of individual initiatives.
- 7.2 The Service Director Finance (S151 Officer) has also recently presented Cabinet with the Council's COVID 19 Financial Recovery Strategy to support this. This strategy will be delivered in two phases:
 - Phase 1 Emergency Response & Short-Term Recovery [20/21 financial year];
 - Phase 2 Longer Term Recovery and Sustainability [21/22 and beyond/MTFS].
- 7.3 To support Phase 1 Cabinet has also recently approved the setting aside of £1.9M of resources as part of the 2019/20 Revenue Final Accounts process. 7.4 It should be noted that there will inevitably be financial implications arising from changes to the way services are delivered. These will be considered as part of Phase 2 of the Financial Recovery Strategy to be considered further by Cabinet.

8. EMPLOYEE IMPLICATIONS

8.1 There are no direct implications of the report on our employees although the recovery process will inevitably carry impacts as plans are implemented. Impact assessments and consultation will be used to state these impacts to members as appropriate.

9. LEGAL IMPLICATIONS

9.1 No legal implications have been identified.

10. CUSTOMER AND DIGITAL IMPLICATIONS

10.1 The way in which some of our services have been delivered during the lockdown phases of the pandemic has changed, with an increased emphasis on digital solutions where human contact has been rendered difficult by the situation. An important part of the recovery process is to evaluate which of these changes should be retained to deliver services more efficiently and effectively. This will carry implications for our customers and levels of digital exclusion will be carefully considered in all cases.

11. COMMUNICATIONS IMPLICATIONS

11.1 Communications are an integral part of not only the recovery arrangements but also the ongoing response to the situation. As such the Communications cell will continue and will act across both response and recovery.

12. CONSULTATIONS

South Yorkshire Local Resilience Forum

13. THE CORPORATE PLAN AND THE COUNCIL'S PERFORMANCE MANAGEMENT FRAMEWORK

13.1 The recovery and renewal strategy and delivery fits to the council's existing planning processes. The performance reporting framework will be reviewed and enhanced to incorporate Key Performance Indicators which will monitor progress towards the objectives laid out under each outcome.

14. PROMOTING EQUALITY, DIVERSITY AND SOCIAL INCLUSION

- 14.1 None
- 15. TACKLING THE IMPACT OF POVERTY
- 15.1 None
- 16. TACKLING HEALTH INEQUALITIES
- 16.1 None
- 17. REDUCTION OF CRIME AND DISORDER
- 17.1 None

18. RISK MANAGEMENT ISSUES

- 18.1 Risk and threat assessments are an ongoing part of the recovery process and as such risk management will be undertaken by all thematic groups.
- 19. HEALTH, SAFETY AND EMERGENCY RESILIENCE ISSUES
- 19.1 None
- 20. COMPATIBILITY WITH THE EUROPEAN CONVENTION ON HUMAN RIGHTS
- 20.1 None
- 21. CONSERVATION OF BIODIVERSITY
- 21.1 N/A
- 22. GLOSSARY

N/A

23. LIST OF APPENDICES

Appendix 1 Barnsley MBC Recovery and Renewal Strategy

Appendix 2 Barnsley Summary Roadmap Approach

24. BACKGROUND PAPERS

If you would like to inspect background papers for this report, please email governance@barnsley.gov.uk so that appropriate arrangements can be made

Report author: David Robinson

Financial Implications/Consultation

5th June 2020

(To be signed by senior Financial Services officer where no financial implications)

Barnsley Recovery & Renewal Strategy

MOVING ON FROM COVID-19

BMBC Covid-19 Recovery Coordinating Group (RCG)

Strategic Context - Introduction

The Covid-19 pandemic has been a disruptor to normal life with services stopping, demand for health and care services severely tested and the outlook for the UK economy uncertain. Unlike a more conventional recovery from a major incident, e.g. flooding the time period and potential fluctuations that will occur over the coming months will be a new recovery challenge that we will need to deal with for example:

- Fluctuating restrictions depending on future peaks and outbreaks that may be uneven across the region and unpredictable.
- Services may be 'switched on and off' within the recovery period
- The recovery period may be at least 12-18 months or until widespread immunity via a vaccine.
- Different population segments will have different need for restrictions i.e. Shielded population may have greater restrictions for longer.

Against this backdrop, the recovery strategy to COVID 19 is complicated and multidimensional and requires an agile and adaptive mode of working to match. Our Recovery can be defined as the process of rebuilding, restoring, rehabilitating and moving on following this emergency and our plan to get back to 'normal' community functioning. It is also a prospect to realign our values with communities and build back better, to crystallise and work towards our Barnsley 2030 ambitions and give a sense of renewal to communities to help all to create a 'new normal' that sets a path towards longer term strategic goals.

This 'new normal' will require dedicated, collective and focussed leadership alongside our communities, our businesses and our public services for some time and it is likely that we are, to an extent, already moving to a new way of working for our places.

The Barnsley Recovery and Renewal strategy will continue to work alongside the UK Government Recovery Strategy published on 11.05.20, an overall illustration of key points from this strategy is provided in Appendix 4. The national Strategy sets out some key steps that will gradually ease restrictions on lockdown and more importantly have implications for Barnsley's recovery and renewal strategy. The three key steps set out the key easements and are summarised below;

Step 1 (13.05.20 onwards)

- For the foreseeable future, workers should continue to work from home rather than their normal physical workplace, wherever possible.
- All workers who cannot work from home should travel to work if their workplace is open
- Workplaces should follow the new "COVID-19 Secure" guidelines
- People can now spend time outdoors unlimited exercise and meet people (1 person) outdoors and outside of their household if social distancing measures are maintained

Step 2 (W/C 01.06.20)

A phased return for early years settings and schools after Half Term.

Barnsley MBC, Covid-19, Recovery Response Plan, Version 2, 04/06/2020

- Opening non-essential retail
- Cultural/sporting events to potentially take place behind closed-doors for broadcast
- Potential Re-opening more local public transport in urban areas
- Social and family contact Government will consider whether, when and how it can safely change the regulations to allow people to expand their household group.

Step 3 (04.07.20)

- Open at least some of the remaining businesses and premises that have been required to close, for example personal care, hospitality, and leisure facilities.
- Some venues where social distancing is difficult due to crowding may not open.

There will also be alignment to regional political structures, working alongside the SCR Mayor, Mayoral Combined Authority to bring the recovery and renewal to our economy and communities. This will provide political leadership both at a SCR and locality level connecting the various places and communities right across South Yorkshire. (Appendix 1) sets out the preliminary asks of government to support the development of this Recovery Strategy

Impact assessments are already taking place(Appendix 2) to inform and establishing trajectories for our work and these assessments cover the following themes;

- Humanitarian Assistance
- Business Economy
- Education and Skills
- Infrastructure and Environment
- Resilience

Three Horizons

Understanding of timescales and a consistent approach to the journey from response, recovery, renewal and to achieving the long-term objectives is a foundation from which we can build our strategic plans. Using the three horizons approach1 that set out different timescales and outlooks that are not linear but run concurrently but with different prevalence over time (video explanation in link2). It also sets out questions (example questions set out in Annex 6), which challenge what we want to recover back to and which parts of the disruption of Covid 19 do we learn from to build the future we aspire too.

Horizon 1 (H1): Immediate Recovery steps (April – June 2020) Horizon1 is the existing business as usual or the dominant way of doing things today.

Horizon 2 (H2): Post Peak Recovery Foundations (July 2020 – December 2020) Horizon 2 is the part of greatest innovation and disruption where new innovative thinking and new ways of doing or being emerge. A good example is the digital transformation of the past decade i.e. smartphones.

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¹ Sharpe, B., A. Hodgson, G. Leicester, A. Lyon, and I. Fazey. 2016. Three horizons: a pathways practice for transformation. *Ecology and Society* 21(2):47.

² https://www.youtube.com/watch?v= 5KfRQJqpPU

Horizon 3 (H3): Realising the Recovery Objectives (2021 onwards)

Horizon 3 is the future we want; pockets of the future are already in existence and we want to see this grow and become the new future.

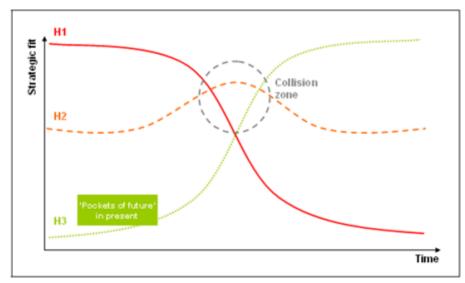
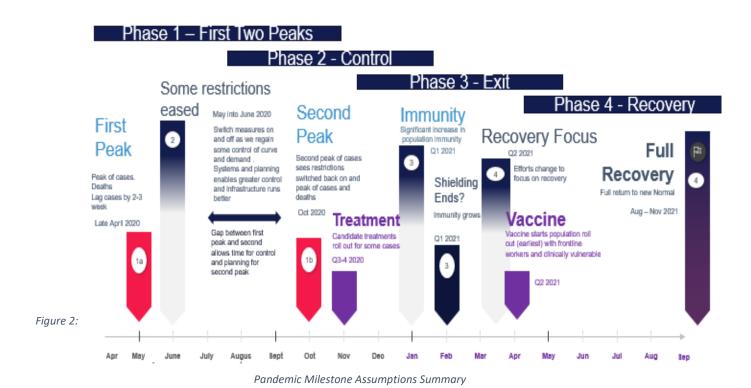


Figure 1: Three Horizons Approach Chart

This approach will be used in conjunction with our best estimate of key pandemic milestones shown in Figure 2. These milestones are uncertain but broadly cover the first two peaks, a controlling phase that will include easing of restrictions, an exit phase that will include enhanced treatments and wider community immunity and finally a full recovery phase that will include a full roll out of a Covid19 vaccine.



Barnsley MBC, Covid-19, Recovery Response Plan, Version 2, 04/06/2020

Purpose of RCG

The objectives of the RCG are to;

- 1. Coordination of the recovery and renewal strategy; and
- 2. To drive sub groups to set out COVID-19 impacts and develop recovery plans for new normalities, the future.

The scope of this strategy is a multi-agency structure to facilitate recovery of the community during and following the COVID-19 pandemic.

Aim

To coordinate a strong partnership recovery that is:

- sensitive to the needs of those affected by the COVID-19 Pandemic;
- Enables the stabilisation, rebuild and restoration of health, social, economic and political well-being of the communities of Barnsley, over the next 12-18 months.
- Aligned to the Barnsley 2030 vision and ambitions.

The Silver Recovery Group Aspirations – How we want to work:

- To learn from staff experiences and use this information to inform our Recovery and Renewal Strategy.
- Listening and wherever possible co-designing the recovery work with local communities and businesses.
- Developing and maintaining an impact assessment for the COVID-19 Pandemic in Barnsley, sharing data to develop our understanding of the situation in a timely and appropriate way.
- Being prepared for quick decisive changes in suppression measures and having the ability to react.
- Testing and monitoring the situation to understand how well Barnsley is recovering.
- Embed consistency across Directorates, partners, SYLRF and where appropriate the SCR. Learning from, challenging and supporting each other.
- Building on the advances made from the positive changes in people's behaviour, i.e. from a climatic and digital perspective and identifying what we want to recover back to.
- Revisiting our present business plans to reconsider our planned outputs to deliver our outcomes.
- Be clear of our asks from government, whilst locally determining how we can deal with the pandemic.
- Devising a financial plan in respect of specific investment or support required to support the 5 recovery themes

Objectives - What we want to achieve

We have put in place a set of objectives that will help us to assess our recovery and renewal intentions that are linked to:

- a) Our Impact Assessments
- b) The Three Horizons approach
- c) A governance approach moving through stages of:
 - Service restart primarily managed by service areas and through Directorate Management Team's and with oversight by Gold and Silver providing overall coherence
 - Recovery of the organisation including reopening of office buildings, health of the organisation and our workforce, financial recovery. Cross cutting and with oversight from the Gold and Silver governance arrangements.
 - Recovery of Barnsley a focus on Place, business and partnerships working with our partners where appropriate. Focus more on the longer term and dovetailing to our 2030 planning

These objectives will be placed in a national context as we move through different phases of recovery as defined by governments' five key tests to guide easements and changes from lockdown;

- 1. Protect the NHS' ability to cope (critical care and specialist treatment across UK).
- 2. Sustained and consistent fall in death rate from coronavirus.
- 3. Reliable data from SAGE showing rate of infection is decreasing to manageable levels.
- 4. Confidence Operational challenges including testing capacity and PPE are in hand with supply able to meet future demand.
- 5. Confident that any adjustment to the current measures will not risk a second peak in infections that will overwhelm the NHS.

Equally a wider international set of tests from the World Health Organisation (WHO) are in play and although there is a good degree of overlap set out a broader perspective to recovery including the importing of new cases. The WHO tests are;

- 1. Disease transmission is under control
- 2. Health systems are able to "detect, test, isolate and treat every case and trace
- 3. Hot spot risks are minimised in vulnerable places, such as nursing homes
- 4. Schools, workplaces and other essential places have established preventive measures
- 5. The risk of importing new cases "can be managed"

6. Communities are fully educated, engaged and empowered to live under a new normal

Government have set out some broad steps as we ease lockdown that are conditional on the number of new Covid19 cases and the R0 figure remaining below one. There will be five Covid Levels to determine the general response of the country (level five being at serious risk of health and care services being overwhelmed and level one being a return to normal activity). Equally a set of three approximate steps around work, schools and shops and finally hospitality have been outlined with further detail to be published.

Although committing individual organisations to longer term objectives is not in the remit of this Recovery and Renewal strategy, this is an opportunity to set a foundations for closer alignment and collaboration towards long term strategic goals we all share and use this opportunity to chart a course to this aim.

Strategic Outcomes & Objectives of the Recovery & Renewal Strategy

| Recovery Theme | Strategic Recovery Outcomes & Objectives | | | |
|---------------------|---|--|--|--|
| Health & Wellbeing | To continue to reduce and supress infection across the borough and to hear and restore the health and wellbeing of Barnsley people Identify and embed the gains that have been made for example in daily physical exercise Assure arrangements for the monitoring and protection of public health. Identify and address the hidden harm caused by increased social isolation and other consequences of covid-19 Provide bereavement support and stabilise & heal resident's & employees mental health and wellbeing Respond to the surge in demand that that is likely to arise in adults children's and public health services as restrictions lift | | | |
| Business Economy | To ensure that the boroughs' communities and businesses positively move on from COVID-19. To bring back public and investor confidence in our local economy. Identify & embed the gains that have been made for example in utilising digital technologies To provide short-term support to businesses to restore the local economy To leverage, reshape and direct investment support packages across the local economy; supporting our key sectors of construction, retail, logistics, and hospitality To provide a strategic response for an inclusive low carbon economic recovery To focus on "levelling up" economic opportunities for our communities To provide short-term support to the community & voluntary sector, particularly where they are essential to the recovery effort | | | |
| Building Resilience | To improve resilience across the borough in preparation for potential future waves of the COVID 19; to continue to shield and protect the vulnerable. | | | |

| Recovery Theme | Strategic Recovery Outcomes & Objectives | | | |
|----------------------------------|--|--|--|--|
| | Building on the learning from Emergency Response centre and our work within communities to provide support and resilience. Containing and managing changes in relation to crime and disorder or community tensions Continuing investment in Staff welfare - Care of our employees and staff Restoring of democratic processes and measures to address democratic deficit. | | | |
| Education, Attainment and Skills | To safely open and reinstate educational activity and catch up on learning lost through both traditional educational establishments and digital means. Maximise opportunities for digital skills and learning in schools, colleges and adult/community learning including access to good quality CEIAG to support aspiration, develop employability skills and promote participation in learning. Return children and young people to schools and post-16 learning providers & target support to key year 10 pupils and young people progressing into and within post-16 learning, particularly the most vulnerable. Ensure access to learning opportunities for adults to improve their wellbeing and mental health and/or progress in, into or towards employment or self-employment. Refreshing of assessment and plans following the pandemic Minimise the risks to the "covid-19 generation" | | | |
| Infrastructure & the Environment | To safely reinstate infrastructure and transport networks as soon as practicable. Build on the zero carbon gains achieved through home working Enable safe use of public transport and restore public confidence Regather Highways Maintenance Programmes; provision of full recycling services; and reduce increased fly tipping levels. Maintaining the increases to active modes of transport gained as a consequence of the lock down measures Reinstate and recover Ministry of Justice services locally for processing, hearing and disposal of local authority business on all regulatory and enforcement work. | | | |

The Recovery Strategy will: -

Support financial recovery of anchor institutions as a consequence of COVID-19

Set out any specific investment or support required to support the 5 recovery themes

Support & engage with our communities and businesses through the next control phase of the COVID -19 Pandemic.

Support for the vulnerable communities for sustained period including an anticipated peak in demand

Identify any additional / exceptional recovery costs to support the return to business as usual or the new normalities

Set out the HR/OD strategy and plan within the authority whilst also linking in with the wider partnership plans through the next control phase of the COVID -19 Pandemic.

Revisit our vision of the future; to realign with our communities and economic outlook. To realign with our future Barnsley 2030 ambitions, Council Plan and Zero 40 & Zero 45 strategies.

Provide safe and reassuring ways to reinstate and reopen communities and businesses in line with changing social distancing measures.

Review, revise and realign Medium Term Financial Budget to reflect changes in expenditure, investment and income

Ensure effective partnership coordination of information and activities.

Celebrate and commemorate the contributions made to support our communities and facilitate the public opportunities to express their appreciation.

Making best use of robust evidential local data and intelligence gathered independently or through improved data sharing relationships.

Learn from what has been experienced in the light of collective experience.

Governance for the Group

The current recovery and renewal arrangements can be seen at Appendix 3.

Performance Indicators to Track Recovery

Performance indicators are key in understanding the progress of the organisation in returning to a 'new normal' position. Defining the indicators relies on whether services have been 'switched on or off' during the recovery period, how long that recovery period may take and how different population segments will have different needs during the recovery process.

The council has a strong and embedded performance framework in place, that reflects the pre-CV-19 normality. The existing performance framework could be adapted to reflect the recovery process; instead of reporting the normal indicators the indicators could be adapted to reflect the recovery performance indicators, and reported to BLT, SMT and Cabinet throughout the recovery phase.

The recovery indicators will need to be established and may contain a subset of the current operational Gold command performance indicators, but the recovery indicators will also need to include additional factors that track beyond the operational needs of tackling the pandemic.

Some examples of potential performance indicators (adapted from the South Yorkshire Local Resilience Forum Recovery & Renewal Strategy) are:

| Economic | Number of New Universal Credit Claimants Number of Business births/deaths Unemployment Levels Business Confidence Net Homes Completed / Build Programmes Town Centre Footfall Wage Levels Levels of Debt Public Transport Suite Bus Usage Rail Journeys |
|--------------------------------|---|
| Environmental & Infrastructure | Air QualityTraffic FlowsFly Tipping |
| Humanitarian | Vulnerable households (contact/support) Number of New Confirmed COVID 19 Cases Number of New COVID 19 Deaths Delayed Transfers of Care Number of people Homelessness / Rough Sleepers and availability of temporary accommodation Vulnerable children tracking Social Care Bed Capacity New Admissions Domestic Abuse Incidents |
| Resilience | Well-being assessment Serious Acquisitive Crime Incidents |

Appendix 1 – Preliminary asks from Government to support the Recovery & Renewal Strategy

| SUB GROUP | Asks of LGA/ Government to support the Recovery & Renewal Strategy |
|------------------------|---|
| Adult social | Parity of esteem between social care and health |
| Care | Failty of esteem between social care and health Funding to finance the increased costs that will be incurred during the recovery phase – for PPE, to support discharge to assess arrangements, to fund post covid rehabilitation and care and the additional resources required to rebuild resilience in the adult social care sector. Early consultation on any potential legal changes. |
| Communities | Clarity and finances in relation to: step-down arrangements for homelessness provision. step-down arrangements for shielded cohort. expectations for wider 'shielded' population. |
| Mental health & health | Additional investment to address the hidden harm societal impact of Covid; Health inequalities; alcohol; domestic abuse; adverse childhood Experiences. Resources to support consequential surge planning Flexibilities and freedoms to transform the health service in terms of how it needs to look in the future |
| Excess Deaths | Indications of when legislative requirements will return to pre covid |
| Economy | To support the implementation of the regional and local COVID19 economic recovery plans. Flexibility of capital funding timescales (i.e. LGF) to secure developer commitment Align remaining European Funding to meet business needs for recovery To ensure that financial resource such as devolution and shared prosperity fund are flexible to support the implementation of recovery plans. An ongoing commitment to the Future High Street Fund and Towns Funding place based transformative initiatives. Remove intervention rate/ match funding requirements where scheme permits Certainty re construction – i.e. force majeure/ support for business continuity |
| Communications | Prior notice of specific announcements. Local Government receives instant backlash without being able to have prepared communications ahead It would be good to include some of this information in the daily CommNet emails. |
| Children & education | Anticipated increase in demand on the children's workforce whose resilience may be low. May require additional capacity to meet the change in level and nature of new demand levels. Additional financial support to the early years sector to maintain sustainability. Increase workforce capacity (children's social care) to meet an increase in demand as hidden harm is uncovered Additional funding for schools to fund pastoral support services to reengage children on the edge of vulnerability Additional financial support for the early years childcare sector to prevent business failure Long term sustainable funding settlement for children's service Additional finance support to maintain School transport PPE in order to manage social distancing in schools and settings following release of some lockdown measures |

| SUB GROUP | Asks of LGA/ Government |
|--------------------------|--|
| Business Intelligence | Consistent Impact assessment templates from Gov departments Support any Local Resilience Forum's request for data or analytical |
| Business Continuity | Advance understanding of overall exit strategy in order to facilitate the development of local plans – rather than a slow reveal through daily announcements to assist local recovery planning and reopening activities Improved consistency of interpretation and issuing of guidance from government and other bodies Explanation and support with consequence management of work streams tasks to local authorities such as impact of supplying PPE to the external care sector |
| Finance & legal | Extension of executive powers and ability to conduct all of the Council's formal meetings and decision making virtually until social distancing measures are relaxed Relaxation of some of the restrictions around access to buildings to facilitate the resumption of (mainly property transactional work) on hold or delayed due the need for original physical documentation to meet Land Registry requirements Broadening of the definition of essential travel to incorporate, for example, carrying out of property surveys that can be conducted externally and enforcement of a range regulatory and environmental matters. As a result of dealing with austerity measures over the past 10 years, LA's require additional support to adequately lead the COVID 19 recovery for their communities, businesses or key services. Initial required levels of financial support from Government have been identified and reported Government funding received to date nowhere near sufficient to bridge the 20/21 predicted shortfall and there is still a pressing need for further Government funding above that already announced; There will be a significant ongoing impact on LA finances as a result of COVID 19 which needs addressing by Government. There is a requirement to determine what the ongoing impact will be to lobby to Government as part of the spending review |

Appendix 2 – Barnsley Rapid Impact Assessment

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|-------------------------|---|---|--|---|----------------------------------|
| Humanitarian Assistance | Direct health impacts of the pandemic on individuals and families | | H1 Earlier loss of life H2 Increased morbidity – post ITU Subsequent waves of outbreaks of COVID-19 H3 Future pandemic preparations Addressing and tackling health inequalities, the ones we already know about and new ones as a result of Covid, need to be at the forefront of all our recovery plans Impacts on family carers to sustain levels of care at home. Delayed access to treatments and associated traumas. Challenges for working age adults with disabilities to step back into recovery phases – knowledge and understanding of this could be challenging | H1 Bereavement support for families H2 NHS rehabilitation and PTSD services Contact tracing, testing, PPE H3 Reviewed plans Identifying hidden harms including alcohol, domestic abuse child abuse and neglect/self-neglect. Response needs to be flexible and responsive to local intelligence Review of carer support offer. Dependencies with NHS recovery Plans understood | NHS, LA, PHE |

age 21

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|--|---|---|--|--|
| Page 22 | Continuation of people defined by govt. as needing to be isolated/shielded Over 70 Pregnant women People with specific underlying health conditions | | H1 Continued access to food and medication Continued support network to minimise social isolation risks Mental wellbeing of those isolated H2 Ability to meet rent/mortgage costs if can't work, or if LHA/HB does not cover full rent costs | H1 Ensure people remain shielded/isolated (continued clear and concise comms strategy). Continuation of community response and volunteer networks. Continued provision of CV-19 contact centre. Scale up access to emotional support Ensure robust offer to individuals with regards to mental wellbeing support H2 Access to mortgage support schemes and debt advice Use of discretionary Housing Benefit New hardship-related initiative to support PRS tenants? H3 | Comms across the anchor institutions, third sector Locality Teams, BH, SYFR, Police, volunteer network Interface with Health & Care Gold recovery plan Finance Team Enforcement Team Customer Services |
| | People made vulnerable by way of life or occupation | | H1 To fully understand - the nature of the pandemic - the measures in place | H1 Sharing of Communications across all vulnerable people Continued support from police in areas of noncompliance | Comms, Locality Teams, Enforcement and police BH, Complex Lives Team, Localities |

| high, very high or controls / capabilities required) | |
|---|---|
| • Keyworkers • Highly staffed major employers • Testing for keyworkers to ensure they are fit to return/continue for work H2 To understand: - how to reintegrate safely back into the community - Transition to long term accommodation going forward (homeless) Continued provision of testing relevant to scale of exposure Ensure testing sites remain in operation of testing relevant to scale of exposure Ensure testing sites remain in operation | National task force outputs e.g. Rough Sleepers. Family centres Front line Children's Services staff and carers |

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|--|---|---|--|---|
| | Loss of jobs Less income due to furlough Affordability of basic needs Long term impact of repayment holidays Delays in refunds | | H1 Employment support services Financial advice and support Emotional support Access to welfare system People know their rights in relation to refunds of prepaid activities | Provision of information to ensure people can access benefits Signposting to services that can support people to address their financial situation | DWP, Financial Inclusion Group members, CAB, Financial services, Credit Union, Mental Health Support Co-ordination of humanitarian aid |
| D | | | H2 Support to prevent losing their home | H2 Proactive work with landlords in all tenures Mortgage debt advice and support | Homeless Alliance and HOAHP. |
| Page 24 | | | Н3 | Н3 | |
| 24 | Access to networks | | H1 Re-instatement of face to face socialising (observing safe distancing guidance) Emotional support | H1 Scale up access to emotional support Clarity of guidance on do's and don'ts Safe and timely opening up of networks | Talking Shop, Samaritans, local support and social groups, faith and spiritual services |
| | netball, etc) Work/school Counselling / emotional support groups | | H2 Support to re-establish 'normality' in a safe way | H2 Upskilling staff, volunteers, to manage re-opening under strict social distancing guidelines | Comms, social group leaders, schools, employers, VCS, Sports Clubs |
| | Pubs/clubs | | H3 Large scale celebrations (planned and through natural gatherings) | H3 Plans to be in place to manage the night time | Early help support through Family Centres and Targeted Youth Support |

³age 24

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|--|---|--|---|--|
| | | | | economy and pub/club/ restaurant Use of safe alcohol messages and reiterate impact of overindulgence on emergency services. | Guidance on the re-opening of pubs/clubs to be communicated in a clear and concise way. Any rules to be followed must be enforced. |
| D | Reinstatement of health prevention/ treatment (non-covid 19 related) • Medical appointments/services • Screening • Immunisations • Dentistry • Surgery | | H1 The need to know it's safe to access medical services | Processes in place to promote importance of attending appointments and guidance on what to do/expect when attending appointments e.g. where you report to, PPE, social distancing measures etc. | Comms Hospitals and GP staff Dentists Health visitors |
| 0505 25 | Treatment (e.g. cancer) | | H2 The need to know it's safe to access medical services | Reinstate dentist services, screening and immunisation programmes when the lifting of restrictions allow Put plans in place to re commence surgery/treatment – a process to manage the delayed along with new patients to be put in place Ensure unintended consequences between reinstatement of NHS services and demands for adult social care understood & planned for carefully. | Co-dependency planning between NHS phases and Social Care. Public transport operations for those who rely upon it to access these services. |
| | | | Н3 | Н3 | |

²age 25

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|---|---|--|---|---|
| Page 26 | Mental Health Worry Boredom Increased debility due to existing mental health problems Conversely, improved mental health due to being able to step back from society Fear of reintegration Fear of second wave Grief Frontline workers exhausted emotionally and physically Suicidal thoughts/actions Anxiety Loneliness & social isolation | | H1 Re-establish access to support services Access to staff wellbeing services Long term boredom may lead to breaches in continued distancing – risks to health of self and others Overwhelming feelings to end life H2 Support to reintegrate into society following lock down Increased sickness levels (non covid) due to emotional/physical burnout Support to manage housing costs and debt PTSD from certain areas e.g. Care Homes could impact on overall capacity. H3 | H1 Bereavement and counselling services may need to upscale to meet demand Services to establish protocols to ensure staff are able to take leave in a coordinated and fair way as a way to reduce possible raise in sick leave levels H2 Services to establish protocols to ensure staff are able to take leave in a coordinated and fair way as a way to reduce possible raise in sick leave levels Tenancy support and landlord management services Mortgage and unsecured debt advice H3 | Individual employers Community support services Locality Teams / stronger families Mental Health services e.g. Talking Shop Samaritans GPs Faith and spiritual services Employment support services Early help support in communities through Family Centres and Targeted Youth Support services Co-dependency with Health & Care Recovery plan Enforcement, Berneslai Homes, CAB, Money Advice Service, Housing options |

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|---|---|--|---|---|
| П | Children and Young People: Increased worry and anxiety Psychological (isolation; trauma; bereavement; loss of social networks/friends) Escalation of risky behaviours (drinking; drug taking; gambling) Loss of ability to recognise/monitor emerging safeguarding issues | | H1 Re-establish access to support services Long term boredom may lead to breaches in continued distancing – risks to health of self and others Overwhelming feelings to end life | H1 Access to support, advice, guidance and therapies Reestablishment of face to face support both on a one to one basis and in groups Potential increase in youth detached work in communities Re-establishment of social networks across communities | Targeted Youth Support services Mindspace CAMHS Young People's Substance Mis-use Service Early help Family Support services |
| Dage 97 | | | H2 H3 | H2 H3 | |
| | Suppressed and increase referral demand Changes to low level support Increased pressure on family carers, resulting in increased referrals to Social Care. Resourcing levels Increased Discharge to Assess | | H1 Increased levels of support for additional D2A cohort. Increased access to support for family carers to enable them to continue to provide care Mental Health Act assessments. Reassurance of care home system in relation to infection | H1 Detailed impact assessments, clear government guidance, improved reviews of key processes like D2A with partners Guidance for people who use services and family carers Continuing to provide a link into support for family | Adult Social Care Sub Group |
| | Infection control in care homes | | control measures and appropriate use of PPE guidance. Increased time to serve and support patients | carers through Covid-19 contact centre and other key points of contact. | |

age 2

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|--------------------------------|---|---|---|---|--|
| | Sustainability of the provider market | | H2 Increased time to serve and support patients Mental Health Act assessment requests increase | Ensure capacity in market H2 Improved reviews of key processes like D2A with partners Plan for 20/21 winter pressures especially around patient flow and provider capacity | |
| Page 2 | | | H3 Reassurance and stability of the care home system – financial stability Market shaping and facilitation | Н3 | |
| Business, Education and Skills | Closed due to non- essential nature Loss of income Major cashflow issues & a lack of data / intelligence Not eligible for grant/grant not enough Supply chain disruptions Failure to pay suppliers & staff Staff redundancies Business collapses Increase in unemployment levels through economic contraction | | H1-H3 Re-opening of business & services following govt. guidance on social distancing. Support to continue business during cash flow issues. Support to find other work Support to ensure funds available are accessed. Support to remobilise activity where able e.g. private sector housebuilding, Housing Association development programme. | H1-H3 Issue clear guidance across the business sector to ensure only businesses allowed to open do. Provide ongoing support to businesses working with them to solutions to return to new normalities. Ensure any available funds are continued to be allocated in a timely fashion Signpost people to DWP to find other job opportunities | Chamber of Commerce DWP / Job Centre HOAHP, Planning, Highways, Legal, Procurement Public transport operations, SYPTE, SCR. |

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|---|---|--|--|---|
| | | | Continued compliancy programmes and administration of CV-19 requirements Need for additional skills and employability support | Sufficient staffing in council services to enable remobilisation Clear guidance required on how employers expect their workforce to travel to work. Avoid public transport unless you have no alternative. Consider | |
| Page 29 | Education | | H1 Reopening of schools (subject to guidance) Continued home schooling where necessary (shielded, vulnerable through health) | phased start times to alleviate pressure on public transport. H1 Effective planning and notification to parents of planned reinstatement Continue to prepare homework packs for children who may need | Education Children's Trust Children's Services Social care support workers Stronger Families Early Start and Families |
| | education | | Adequate supply of PPE Review of assessment and plans to reflect support needs of vulnerable children and families Assessment of pupil progress or otherwise H2 | longer shielding Continue to monitor children vulnerable to safeguarding issues and ensure reintegration back into school. Incorporating the digital offer as 'standard' for foreseeable H2 | service including Family Centres Education Welfare Inclusion Service |
| | | | H3 | Н3 | |

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|--------|---|---|--|---|---|
| UC CCC | Infrastructure and Environment Disruption to utilities/essential services Consequential damage to properties Expiration of landlord legal responsibilities – utility supplies Pollution/decontamination Waste Natural resources/habitat | | Increased demand for goods as shops re-open People frightened to use Public Transport due to fear of Covid Some people still unable to access their own food supplies due to shielding Pressures of extreme working level leaves essential services over worked/under staffed Clear communicable safe ways of working Waste continues to be collected and waste recycling centres re-open Reinstatement of non-urgent repair services to BH properties and private rented sector Natural resources such as countryside and green space begin to re-open. | Safe systems of work to incorporate social distancing requirements Logistics increase to meet demand Safety of transport promoted Public transport timetables reliable and meet the needs of the public as transition moves forward Communicate the need to recycle. Establish safe working practices for repairs to be carried out to properties | Logistic companies SYPT, Northern Rail, LNER and other rail companies Comms in place to promote waste and recycling services once open as well as how this will operate to manage social distancing measures |
| | Management of the Public Realm & green Spaces | | H1 As lockdown measures are lifted, a general safe reopening of spaces is required | Natural and cultural resources gradually introduced once safe to do so. Open area sites to have clear guidelines re use and if possible, marshals in place to manage visitor number Utilise local information centres to promote carefully | SYFR, National Trust, YWS, RSPB, Wildlife Trust, information centres, local ramblers associations? |

age 30

| | | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|------------|--|---|--|---|--|
| | | | | H1 Support public realm to reopen. Provide communications and information in support of current social distancing requirements | planned opening of local areas of interest in a timely and appropriate manner. | |
| Page 31 | | Transportation Disruption to daily life (education, welfare, transport, food) • Loss of capacity • Service continuity • Service accessibility • School Transport | | H1 Reinstatement of transportation services safely and in line with current social distancing recommendations | Implications for competing demands for public realm, especially in town and city centres. Arrangements for safe queueing at bus, tram stops and at interchanges and rail stations. Provision of active travel routes Planning for statutory and non-statutory school transport (bus but also tram) based on significantly reduced vehicle capacity. | H1 Communications on limited capacity on public transport. Encourage cycling and walking. Consider phased start times for employers. H2 Increasing active travel routes and necessary infrastructure |
| | Resilience | Crime & Community Cohesion Fear Anti-social behaviour Empty business premises - target Doorstep crime Online, phone, text crime | | As lockdown is lifted people become fearful that crime will increase again Lack of adherence to easements in lockdown | Continue to patrol reported hotspots providing reassurance to residents Continue with soft enforcement unless firmer measures are required Continue warn residents about doorstep crime, etc | Safer Neighbourhoods Team Police Comms Targeted Youth Support including Early Intervention and Prevention and Youth Justice Safeguarding Adults Board |

rage 3

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|--|---|---|--|---|
| Page 32 | Criminal Justice and Law and order Shortage of goods and/or staff to deliver goods or services (e.g. cashiers, ATM servicing) could lead to public disorder or panic. Reduction in policing capacity, requiring prioritisation of resources. Public protests. Conflict at points of sale. Scamming / criminal opportunists. Delayed or early prison releases Delays to processing cases in the system | | Clear communications and controls around managing potential situations Effective planning of service backlog Prioritisation of backlog cases | Regular data analysis and joint tactical deployment | Safer neighbourhoods Team, SYP, Business Economy Teams |
| | Organisational Capacity, Capability and Resilience Staff absence (due to illness, self-isolation, mental health, bereavement, caring responsibilities etc.) Partnership Working Data and information sharing Effective (or ineffective) local communication throughout recovery Additional cots in short-term and reduced income in longer-term (Council Tax, Business rates, fees and charges, Govt funding) | | Underutilisation of existing partnership arrangements Continue newly agreed data sharing arrangements Need to deliver statutory services and support most vulnerable. | Regular data analysis and joint tactical deployment Review revised level of resources and prioritise how money is spent to maximise impact. | One Yorkshire, CA, BH, NPS, BPL, Norse, BDR, Business Community, Markets Team, HR, Business Intelligence & Improvement, OHU LA's Unsure of impact on others |

Jage 3

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|---------|---|---|--|--|--|
| Page 33 | Workforce resilience Increased stress and anxiety Exhausted workforce Pressure on some service areas to maintain high capacity and different ways of working well into recovery (e.g. bereavement) Worry of returning to work Deaths in service and grief Access to work – Public Transport (social distancing) | | H1 Clarity around home working policies Support for staff involved Reinforcement of AL entitlements Recognition Clear reintroduction to the workplace process Temporary policies around social distancing at work Improved office layouts Shift working patterns H2 Amending employment policy and arrangements where appropriate Organisational Development review | Clear policies Clear communications Visible Leadership Support mechanisms / services | HR, Public Health, Health and Safety BLT |
| | Community resilience Increased suppressed and demands Being able to sustain supporting vulnerable people within the community Loss of traditional volunteering activities Increased vulnerability & impact of increased social isolation (hidden harm) | | H1 Continued support from CV-19 contact centre Identification of new cohorts Reinstatement of revised volunteering activity to align to CV-19 demands Further support networks around shielded groups | H1 Improved awareness and assurance Clear identification and support campaigns Rebranding / relaunch of CV-19 related activity? Support channels | Communities / Mental Health / CCG Sub groups |

| | Current identified impacts of the pandemic (S, M & L -term) | Recovery Priority (low, medium, high, very high or critical) | Needs of individuals (over S, M & L term) | Actions to meet needs (Recovery measures / controls / capabilities required) | Resources/organisations required |
|--------|---|---|--|---|---|
| | Sustaining increased provision continuity for Homelessness Increased social isolation / harm to the economy if Public Transport provision ceases | | Homelessness offer for next 12 mths | | |
| Dage — | Concurrent Incidents Ability of partnership to respond whilst maintaining recovery Staff welfare and resilience | | Scale and potential longevity of this incident may also impact on the Council's ability to respond to concurrent incidents either localised within the remit of a single service or a wider incident necessitating a Council wide response | Review and revise business continuity plans | BMBC |
| A 34 | Capability and capacity to maintain critical services over a sustained period Capability to resource service innovations developed Flexibility to switch on additional services | | Assurance of priority activities for health, safety and wellbeing of residents Ability to respond to changes in lockdown policy and community needs | Sustain priority activities for vulnerable residents during extended response and recovery Innovative service delivery to be captured and resources as new norms Preparedness arrangements to meet community needs and expectations | All organisations |
| | Democracy & decision-making | | Role of local democracy through next phases of recovery & restart/renewal | Clear roles for local councillors / local democratic processes until year end Restart of the Area Council meetings focussed on | Legal / Members services Stronger Communities Team |

age 3

| Current identified impacts of the | Recovery Priority | Needs of individuals (over S, | Actions to meet needs | Resources/organisations |
|-----------------------------------|--------------------|-------------------------------|-------------------------|-------------------------|
| pandemic (S, M & L -term) | (low, medium, | M & L term) | (Recovery measures / | required |
| | high, very high or | , | controls / capabilities | - |
| | critical) | | required) | |
| | | | locality approaches to | |
| | | | recovery and renewal. | |
| | | | - | |

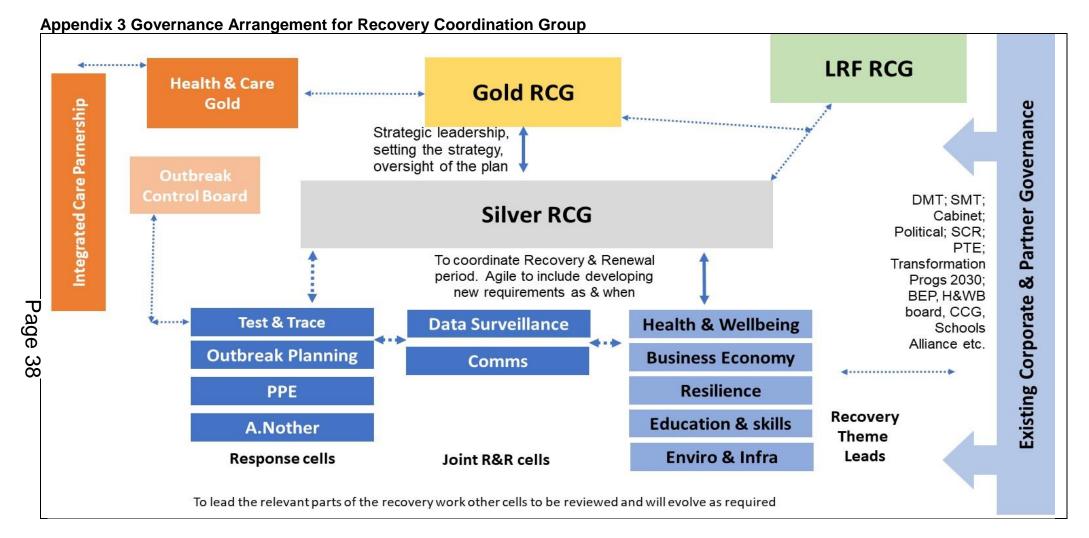
COVID 19 – Unintended Consequences

| Concominance | T | luene e e t | COVID | 719 - Unintended Consequences |
|--------------------------------|----------|-------------|-----------|---|
| Consequence | D '4' | Impact | 0 1 1 1 1 | Follows a server format of months about the server format to the server |
| Physical Health | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Increased number of people | | | | |
| taking outdoor exercise | | | | |
| Mental Health | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| PTSD frontline workers | | | High | |
| PTSD bereaved | | | High | |
| Anxiety / fear of recurrence | | | Medium | |
| Increased OCD behaviour | | | | |
| (handwashing, cleaning, etc) | | | | |
| Fear of second wave | | | | |
| Increased Family values | | | | |
| Increased domestic violence | | | | |
| Economic | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Innovation / adapting | | | | |
| business to current need | | | | |
| More use of local shops | | | High | |
| (those able to open) | | | | |
| Prompt invoice settlement by | | | High | |
| providers to ease cash flow | | | | |
| ى <u>Education/training</u> | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Schools remain place of | | | High | |
| safety and support | | | | |
| Increased use of technology | | | High | Works well however, not available to all children |
| Public Services | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Staff willing to adapt provide | | | High | |
| additional workers for | | | | |
| essential services | | | | |
| Over demand for services | | | | |
| such as weddings as people | | | | |
| rearrange | | | | |
| Increase in the number of | | | | Working alongside staff to support our most vulnerable |
| volunteers (e.g. community) | | | | |
| Infrastructure | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Essential repairs continue | | | | |
| Backlog Housing LL utility | | | | |
| responsibilities | | | | |
| Reduced utility overheads | | | | |

Lage C

| Consequence Impact | | | | |
|--------------------------------|----------|----------|-----------|--|
| Environment | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Improved air quality | | | High | |
| Less use of cars and shorter | | | Medium | |
| journeys | | | | |
| Ways of working change | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Use of technology | | | High | |
| Improved systems | | | Medium | |
| Staff able to adapt quickly | | | High | |
| Changes to service delivery | | | | |
| lead to improvements | | | | |
| Emergency Services | Positive | Negative | Certainty | Evidence source (word of mouth, observation, data) |
| Reduced crime during | | | | |
| lockdown | | | | |
| Reduced pressure on | | | | |
| ambulance and A&E services | | | | |
| from alcohol related incidents | | | | |
| Increased joint working, | | | | |
| support and sharing of skills | | | | |
| and between services | | | | |
| Reduction in Road Traffic | | | | |
| Accidents | | | | |

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Appendix 4 – UK Recovery Strategy (taken from Institute for Government)

Return life to as close to normal as possible, for as many people as possible, as fast and fairly as possible, in a way that avoids a new epidemic, minimises lives lost and maximises health, economic and social outcomes.

Taking into account three possible effects of any changes:



Phase 1: Phase 3: Phase 2: Contain, delay, research Smarter controls Reliable treatment and mitigate Measures will be eased if we meet As the UK moves into Phase 2, the The government will judge timing of these steps based on its five tests and assessments government has set out a 'roadmap' of five tests: of the Covid-19 Alert level, as assessed by three steps: the new Joint Biosecurity Centre: Protecting the NHS's ability to Step 1: From 13 May in England CV not known to be present in Go to work if you can't work the UK from home Sustained and consistent fall in daily death rates CV present in the UK, but the Unlimited outdoor exercise number of cases and transmission is low Rate of infection decreasing to manageable levels Step 2: No earlier than 1 June

- Operational challenges in hand (including testing and PPE)
- Avoiding a risk of a second peak that overwhelms the NHS

- Phased reopening of shops
 - · Phased return of school children

Step 3: No earlier than 4 July

 Reopen some of hospitality industry and other public places

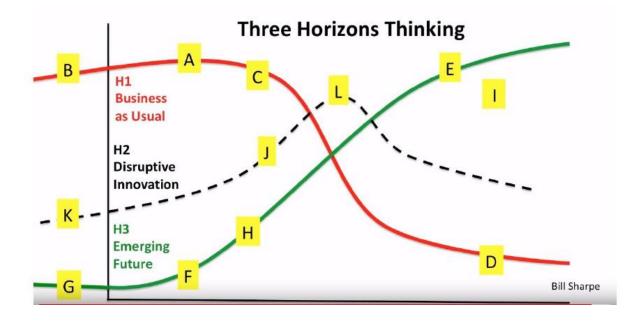
- A CV epidemic is in general circulation
- A CV epidemic is in general circulation; transmission is high or rising exponentially
- As level 4 and there is a material risk of healthcare services being overwhelmed

Appendix 5 – Questions to use alongside the Three Horizons Approach

Twelve Questions from: Three Horizons Framework, A Quick Introduction: YouTube video (7 minutes) by

Kate Raworth, author of Doughnut Economics

- A. What is Business as Usual? the key characteristics of the prevailing system?
- B. Look Back. How did we get here? What values, cultures, laws, events led to this?
- C. Why do we believe it's not fit for purpose and is failing? Give examples. How fast do we want to see a decline? ... because collapse is rarely beneficial
- D. Is there anything valuable about the old system that we would want to retain rather than lose such as its infrastructure?
- E. What is the future we want to bring about? its key characteristics? What would it look like and feel like to be there?
- F. What seeds of that future are visible in the present? Give specific examples.
- G. Looking back, whose work are these present possibilities built upon? What history, values, and culture are embedded within them?
- H. How could they be scaled and spread? Give examples of actors who are already working on this.
- I. What are competing visions of the future that are being pursued by others? Could we collaborate with them because we share enough core elements, or are theirs inherently competing visions? If so, how do we prevent their vision from derailing ours?
- J. What is being disruptive? Think of many different kinds of factors: technological, political, cultural, ecological, economic, social disruptions.
- K. What are the roots of those disruptions? and for each one identified what would it look like for it to be captured (H2-) or harnessed (H2+)? What can be done strategically to ensure that it is harnessed? Give examples of disruptions that you believe have been captured and others that have been harnessed. In each case why did it happen? What made that possible? and lastly my favourite...
- L. If you are a disruptive actor, whether a social movement, a tech innovator, or a new form of finance, what kinds of guidance can you set for yourself to help influence whether your disruption is captured to extend the life of H1 or harnessed to bring about H3? What allies will you seek? What action will you take? How will you assess potential offers for collaboration or finance? and How will you work with others to ensure that the H2+ disruptions scales and spreads?



Barnsley Summary Roadmap Approach

Stage 1 – Restarting Services (H1) (May / June)

- a) What is the Borough wide impacts of Coronavirus?
- b) What are the organisational impacts, opportunities and risks across the partnerships?
- c) What are the unintended consequences +/-?
- d) What are the implications of government guidance on the workforce and services?
- What are communities, our staff, businesses telling us?
- f) What have we learnt and what might the implications be for the Borough
- g) What should our Recovery Structure be mobilising?
- Review, Test, adapt and learn

At the end of this stage we will;

- An agreed impact assessment
- Line of Sight Map for R&R Strategy
- Understand which services are being switched on/restarting
- Clear implications for staff returning to work
- Understand residents / business feelings
- Learnt Key lessons
- Have a clear Comms Plan
- Clear Political Engagement/steer

Stage 2 – Recovery of the organisation (H1-H2) (Jun-Sep)

- a) What should a 100 day Recovery and Renewal plan look like?
 - What & How will services resume?
 - What & How we will change services in the future?
- b) What are the <u>Immediate</u> Priorities we need to deliver?
- Testing and Contact Tracing; Town Centres; Transport Recovery; Outbreak Planning
- Workplace Recovery and Renewal Plan Implementation
- Social Distancing / Public Realm
- Reinstating Area Councils
- c) Re-implement existing governance arrangements / develop new Partnerships?
- How we want to work in the future?
- How do we take positive disruptions into a new future
- d) Clear financial roadmap
- f) Influencing Gov't begin rebuilding
- g) Developing Place-based Plan
- i) Incorporating 2030
- j) Review, Test, adapt and learn

At the end of this stage we will;

- Have implemented 100 day plan
- Have a functioning recovery & renewal structure

Stage 3 Recovery of Barnsley (H2-H3) (Sep-Mar+)

- a) What if Barnsley became more compassionate as a borough?
- b) What if decent wages were available to the health and care sector / inclusive economy?
- c) What if Barnsley had a major shift in behaviour towards climate change?
- d) What if we worked more collaboratively with SY partners?
- e) What if our new ways of working provides better outcomes and save money?
- f) How might we build CV-19 into our 2030 plans?
- g) How might we agree 21/22 budget, corporate plan and MTFS?
- h) How might we develop our partnerships rebuilding from CV-19
- Review, Test, adapt and learn

Non linear relationship some parts of stage three will take place at the same time as stage 1

Separate elements in each stage into organisation and place

Stage 4 Platforms for sustainable and inclusive growth (H3) (2021 +)

Barnsley 2030 Zero 40/45