The Manchester Briefing on COVID-19

International lessons for local and national government recovery and renewal

Fifteenth briefing: Week beginning 13th July 2020

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The University of Manchester, UK

What is ‘The Manchester Briefing on COVID-19’?
The Manchester Briefing on COVID-19 is aimed at those who plan and implement recovery from COVID-19, including government emergency planners and resilience officers.

Each week we bring together international lessons and examples which may prompt your thinking on the recovery from COVID-19, as well as other information from a range of sources and a focus on one key topic. The lessons are taken from websites (e.g. UN, WHO), documents (e.g. from researchers and governments), webinars (e.g. those facilitated by WEF, GCRN), and other things we find.

We aim to report what others have done without making any judgement on the effectiveness of the approaches or recommending any specific approach.

This week
We have provided four briefings:
Briefing A: Policing during the COVID-19 pandemic
Briefing B: Lessons from across the world
Briefing C: Impact assessments for COVID-19
Briefing D: Useful webinars

Please register at ambs.ac.uk/covidrecovery to receive future briefings

Other information
If this is the first briefing you have received and would like to be sent the previous ones, please email events@manchester.ac.uk.

If you would be willing to contribute your knowledge to the briefing (via a 30-minute interview) please contact Duncan.Shaw@manchester.ac.uk

We also produce a blog series which you can access here along with other news about our team and our work.
Briefing A: Policing during the COVID-19 pandemic
Policing and managing civil unrest during COVID-19: Reflections from the USA and Australia

“All community concerns begin as local issues that require effective local action”

“The relationships between the Police and communities that pre-exist are key, as is careful examination of causation factors for existing inequalities”.

Introduction
Across the world, COVID-19 has resulted in lockdowns to restrict population’s movement to safeguard public health. In some cases, such as Leicester (UK) and Melbourne (Australia), spikes in infection rates have brought localised or ‘smart lockdowns’ to contain the spread of the virus. Increased strains on people’s mental health and public fatigue from restricted freedoms has led to people flouting government advice on social distancing and public gatherings, resulting in the declaration of major incidents, such as in Bournemouth (UK). In many cases, the restrictions have magnified existing inequalities, putting a spotlight on communities and the need to translate public health information (both literally and in terms of cultural applicability).

Enforcing lockdown and movement restrictions, combined with recent tragic events such as the death of George Floyd which led to mass protests and civil unrest, has resulted in police needing to navigate complex and dynamic relationships with the communities they serve, and with people for whom interaction with the police is rare. The impacts of COVID-19 has required new types of conversations and engagement between communities and the police to benefit response and recovery.

This document provides reflections from the USA and Australia on policing to enforce local lockdowns, and manage civil unrest during COVID-19. We report what others have said without offering judgment on the effectiveness of the reflections.

The key findings are that, because of COVID-19, a clear and consistent message is imperative as many communities will not have had any previous contact with the police so not be attuned to their communications. This has implications for how police engage with their communities during response and recovery, and for how communities can engage with the police.

Method
This document is based on reflections from 10 experts from the USA and 3 from Australia. The reflections are from those with direct experience, not from the interpretation of intermediaries.

2 Former Police Officer, UK
3 https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(20)30240-6/fulltext
6 https://www.bbc.co.uk/news/uk-52219070
From the USA:
1. Prof Don Kettle and Admiral Thad Allen (National Incident Commander Hurricane Katrina). Talked about the response to the disaster of Hurricane Katrina and aftermath of civil unrest.
2. Democratic Mayors of: Phoenix, Atlanta, Newark/New Jersey and Stockton California. Talked about coronavirus and civil unrest.
3. Chief Steven Casstevens (President: International Association of Chiefs of Police President; Chief of Police with the Buffalo). Talked about policing during the COVID-19 pandemic and nationwide civil unrest.
4. Andrew Baxter (Chief of the Charlottesville Fire Department), Chris Cebollero (who headed St. Louis’ Christian Hospital EMS during the Ferguson riots), and Rob McDonald (Operations Manager for American Medical Response who was involved in violent protests in Portland). Talked about the 10 lessons for managing civil unrest.

From Australia:
1. A member of The Department of Justice and Community Safety, Victoria
2. A Government Risk Advisor
3. Dr Chris Lemoh: Physician (General Medicine/Infectious Diseases), Monash Refugee Health & Wellbeing Service

Policing civil unrest during COVID-19: Reflections from the USA

During the crisis response phase, shorter-term actions to support policing during civil unrest include:

The importance of appropriate communication

- **Agree a common language:** Misunderstanding or offence caused by language can be overcome by agreeing a common language on every issue e.g. articulating ‘systemic racism’, ‘social distancing’, ‘travel restrictions’. There will be opposing groups with different language and definitions.

- **Lower the rhetoric of firm policing:** A narrative of hard-line approaches and crack-downs can lead to a reality of conflict as the public bracing themselves for tensions that quickly escalate and restrict the freedom of how police respond: “If you say a particular kind of behaviour will be met with the full force of the law it puts operational commanders in a very difficult position. What is needed at the moment is clear...”

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11 Department of Justice and Community Safety, Victoria
12 Government Risk Advisor
and firm messaging about the rules around the pandemic, but allowing police to exercise their judgment in difficult circumstances. That’s been lost.”

- **Communicate similar information internally and externally:** Provide essential information so both parties have a consistent narrative and do not need to invent their own, which can quickly escalate and cause harm: “Even if you lack information, update what you can and be frank about what you can’t”.

- **Talk extensively with parties on all sides:** Talk before a protest to capture intelligence (e.g. on estimated numbers of attendees) and support incident command (e.g. associated agencies to establish a working plan ahead of time e.g. staging locations).

**Encourage local civic policing**

- **Promote local, compassionate policing:** All community concerns begin as local issues that require effective local action. Local action depends on trust and humanity: “The policies I support are the ones I can sell in my neighbourhood to my mum and my grandma”. How people come to trust law enforcement depends on the type of interaction and response they get, and the level of national support and strategy that underpinning such programmes. This facilitates policing consensus rather than enforcement, and reduces the risk of clashes between the public and the police: “Treat people as if they were a member of their family and don’t leave your job until they are happy”.

- **Promote police transparency:** Transparency facilitates trust - secrecy creates suspicion. So, provide the public with an increased understanding of their rights and police practices aligning to those. This can mitigate an ‘us and them’ mentality that puts the public and police officers at risk of violence.

- **Embody that every crisis becomes an exercise in applied civics:** To support the response you need to create clarity, be open and honest, build credibility and trust with the public, and create a cause for action that everyone can believe in.

**Consider everyone’s safety**

- **Consider the safety of other emergency services:** Where relationships between the police and communities are strained. In the USA, one interviewee talked about how medical services were advised to remove badges and blue shirts during protests as crowds turned violent towards the police and there was a fear other emergency services would be attacked: “When folks walk in with a blue shirt and gold badge on, who’s to say who they are? In a crisis of civil disobedience, maybe those aren’t the uniforms we [medical services] should be wearing”.

- **Talk with police about their safety and mental health:** More US police officers die from suicide than they do in the line of duty. In COVID-19, police face additional concerns of their health (e.g. weaponised spitting), and possible financial or emotional issues as a result of the virus.

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Agree the facts, problem, and mission

- **Agree the basic facts of the situation:** Agreeing and disseminating basic facts regarding unlawful behaviour can facilitate lawful behaviour. Agreeing language is a basis for agreeing facts, and being transparent on those is key. There is a very high level of complexity in COVID-19 and civil unrest.

- **Agree a common view of the problem and mission:** There is no shared definition of the problem for COVID and civil unrest so getting the right solution is difficult if you don’t know the right problem to solve. The problem definition needs to be agreed, on which an established mission can be approved. In New Orleans, they had got the problem wrong – it was not a hurricane – it was a loss of command and control and no continuity of government.

- **Fix the problems without resorting to politics:** No politics should enter into the response – if you intertwine politics with response then you can “screw both up”.

Longer-term actions to improve the relationship between police and communities during the recovery/mitigation/preparedness phase include:

- **Increasing police visibility:** Newark (New Jersey) saw an 80% decrease in complaints against the police, reduced violence and homicides (116 to 51 in 2019) by:
  - Create community street teams to support community liaison and equal justice
  - Run ‘trauma circles’ for communities to talk e.g. about complaints against the Police
  - Began ‘citizen clergy’ volunteers trained in the law, police practices and policy
  - Hired social workers to support police interventions

- **Supporting youth centres:** Atlanta (Georgia) improved policing relationships with young people by police recruits visiting youth centres (weekly) to mentor youth and learn about their concerns.

- **Tackling police racism:** Stockton (California) supporting vulnerable people, and reduced violent crime by 40% by community-based policing by:
  - Open door to complain on excessive police force
  - Public apologies from police to families/victims of excessive force
  - Community conversations on police role in civil rights movements and lynchings
  - Policing training on implicit bias and procedural justice

- **Addressing the public’s mental health:** Phoenix (Arizona) embedded clinicians into Police departments and 911 call centres to assess call-outs and provide police and public support.

- **Giving practical support to the public:** In US cities, police social workers assist police officers with victims of domestic violence, substance abuse, and housing issues, to provide practical longer-term support.

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Enforcing lockdown measures: Reflections from Australia

During the response phase, approaches to support Policing during lockdown include:

**The importance of appropriate communication**

- **Know your audience:** Knowing the ethnic diversity of the community is imperative to translate advice to communities that speak other languages. Explaining government measures, the reasons for these, and potential consequences of non-compliance prevents confusion, fear, mistrust, and unsafe public health behaviours.\(^{11, 19}\)

- **Be innovative in disseminating information:** In many disadvantaged communities access to the internet or technology such as laptops or tablets is limited, and television and radio may pose language barriers. However, most people do have mobile phones, therefore using text messaging and WhatsApp can quickly reach more marginalised communities.\(^{12}\)

- **Supply a direct means of public contact:** The provision of a dedicated, non-emergency police phone line can provide fast and reliable communication channels for the public when they have concerns, such as large gatherings of people. In the state of Victoria, 73,000 calls were received from 1\(^{st}\)-19\(^{th}\) April related to breaking of lockdown restrictions.\(^{11}\) A dedicated phone line may promote social and consensus policing, leading to behavioural change.

**Utilise local knowledge**

- **Work with local community organisations:** Community groups including social and religious networks have a deep understanding of their communities and needs. Engaging with these groups during lockdown can help culturally appropriate information and provisions to be made available. In Melbourne:
  - The authorities were responsible for delivering food packages to residents in hard lockdown, but delivered non-halal food items to a majority Muslim community who were unable to eat it.\(^{11}\) Liaising with local community networks would have mitigated this and improved relationships between networks and authorities.
  - Working through community networks can increase the efficiency of response activities. Information sheets for residents were translated by community members into ten written, and five oral, languages within 24 hours and distributed among residents within a tower block via text and WhatsApp. One expert stated: “I’ve been involved in public health projects like this and if the government had to do this on their own, it would have taken them at least six months to get that kind of translation work done.”\(^{13}\)

- **Use a partnership approach:** Identify the challenges and appropriate partners to help solve these. In Melbourne, as it became clear to authorities that COVID-19 information was not adequately reaching some non-English speaking communities. Public Health Officers went into the community with translators to knock on doors to tell people about the virus and ways they may be spreading it.\(^{11}\) Working in partnership with the police would help enforce the message and build relationships in the community – especially with people who have not had previous contact with the police.

Agree the facts, problem, and mission

- **Agree the basic facts of the situation:** Agreeing and disseminating the facts relating to lockdown rules is important to ensure policing of lockdown is enacted equally in an area. It also helps to achieve consensus and compliance with the public and to avoid resentment in the community. In Melbourne, discrepancies over breaching of lockdown rules and fines issued to the public resulted in a parliamentary enquiry.\(^{11}\)

- **Agree a common view of appropriate action:** Characterisation and enforcement of lockdown rules need to be consistent within an area. Inconsistencies can create tension between the public, and between the public and the police or government which may lead to civil unrest.

Use of Resources

- **Consider the resources needed for response and the message this conveys:** Police presence can be a comforting sight, but can also cause fear and alarm which may be counterintuitive to compliance. In Melbourne, around 500 police officers were deployed to guard tower blocks under hard lockdown restrictions to ensure 3,000 residents did not attempt to leave their apartments.\(^{20}\) This included riot police, whose attendance was described as an “excessive” police presence that “affronted and confused the community.”\(^ {11}\)

Longer-term actions during the recovery/mitigation/preparedness phase from Australia include:

Build relationships

- **Increase the breadth of police outreach:** Working with diverse community groups is important to build a consensus-based approach to policing and build trust. Policing in Melbourne had focused on youth programmes with about 200 young people at high risk of gang activity.\(^ {11}\) There are additional connections that could be made with civil society and religious groups to support recovery and future response.

- **Consider renewal projects:** Renewing trust and transparency between the police and communities is critical in creating the basis for dialogue and mutual respect that enable safe and effective police responses, and recovery.

Conclusion

At the centre of policing are local issues that require effective local action. Effective local action is facilitated before, during and after an event by: clear and consistent communication with all stakeholders; effective partnerships with local organisations that know their communities; and effectual relationships with communities that have been directly affected.

COVID-19 has initiated new relationships and conversations between the police and the public. It is important that changes to policing (presence and powers) because of COVID-19 are reflected in consistent, clear and regular messages to all in society. This facilitates trust between police and the community, and builds a sense of normalcy around engaging in regular conversation about what is needed for response and recovery to COVID-

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\(^{20}\) Government Risk Advisor
19. Examples of how to do this include having regular conversations between the police and the community during COVID-19 which can be facilitated by Police supporting public health initiatives such as test, track and trace programmes. Such initiatives provide an opportunity for the police to go door-to-door, supporting communities around positive initiatives, talking to communities about their concerns, and, simultaneously having a visible police presence which may encourage compliance to lockdowns and avoid the need for firmer approaches to enforcement. This can also help working with other partners (e.g. public health officers) to establish positive police communications that helps to enforce public health guidelines, while facilitating conversation with people who have not had previous contact with the police.
Briefing B. Lessons you may find helpful from across the world

We provide the lessons under six categories, with sub-categories for ease of reference. We have selected lessons that are of specific interest to the recovery process although many also relate to the response phase, and the likely overlap between response and recovery.

This week our lessons on humanitarian assistance focus on localised and targeted public health interventions, utilising partnerships between the police and public health officials, and gender inclusive policies for COVID-19 decision-making to help address gender inequalities in health outcomes. Economic lessons consider health and safety practices to support safe working, and prevent/mitigate COVID-19 outbreaks in the workplace, and regeneration of businesses through promotion of cultural heritage and the arts. Infrastructure lessons focus on measures to minimize contact and maintain distance in schools, and securing and recovering supply chains from the impacts of COVID-19. Environmental lessons consider the combined health risk of extreme heat and COVID-19. Communications lessons focus on collecting data on public opinions to help understand the public’s concerns and behavioural changes. Governance and legislation addresses emergency and recovery planning by considering how existing strategic partnerships can be extended to support other COVID-19 activities, and conducting impact assessments.

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| **Humanitarian Assistance**    | **Public protection**  
Consider taking health services and testing into the community door-to-door in communities with outbreaks. In Pune, an ‘Action Plan for Hotspot Areas’ was developed in which the local police force supported implementation of contact tracing and wide-spread testing, water and sanitation support, food and shelter planning and public awareness. Teams carried out local door-to-door check-ups of all households in the hotspot areas. Consider how to take public health interventions and information into the community:  
- Establish dedicated COVID care booths in hotspot areas  
- Allot dedicated ambulances in case serious cases are detected  
- Designate, specific localised teams within the hotspot area, including police, medical staff and community engagement officers to conduct thorough, localised door-to-door check-ups of all households in the hotspot areas (including virus testing)  
- Use teams to distribute medication to those who need it, and to provide discharge public health packages. These may include:  
  - A packet of masks  
  - Sanitizer  
  - Soap  
  - Cleaning products  
- Ensure comprehensive medical, nutritional, and psycho-social care for those identified as COVID-19 positive  
- To maximise identification of cases, adopt standardized systems for testing | India | [http://cdri.world/casestudy/response_to_covid19_by_pune.pdf](http://cdri.world/casestudy/response_to_covid19_by_pune.pdf) |
<p>|                               |                                                                                                                                                                                                                                                                                                                                       | Australia      | Department of Justice and Community Safety, Victoria                  |</p>
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| Public protection              | **Consider the role of the police in managing COVID-19 outbreaks and hotspot areas.** In Pune, 7,500 Special Police Officers (SPO) were given specific powers to help manage areas which had seen a rise in COVID-19 infections. They provided an important role in managing the spread of the virus, in partnership with the community and public health officials. Consider how to:  
  - Implement a standard operating procedures which include the police in public health interventions for COVID-19  
  - Use efficient reporting structures, and easy-to-use methods of communication (such as WhatsApp) to manage situations in real time  
  - Utilise the police to help provide essential response services (e.g. to those who are shielding), and in spreading awareness of social distancing and lockdown norms (e.g. by being out in public or by going door-to-door)  
  - Utilise the increased widespread interactions of the police with the community for voluntary operations supporting COVID-19 interventions | India          | [http://cdri.world/casestudy/response_to_covid19_by_pune.pdf](http://cdri.world/casestudy/response_to_covid19_by_pune.pdf) |
### Recovery: Categories of Impact

| Vulnerable people | Consider the importance of gender-inclusive policies and decision-making. Including gender-inclusive perspectives can address gender inequalities in health outcomes, the economy and wider society. For example, in the EU, women make up: 93% of child care workers; 86% of personal care workers in health services; and 95% of domestic cleaners (https://eige.europa.eu/covid-19-and-gender-equality/frontline-workers). This exposes women to the virus, heighten the potential of poverty and mental health issues as these jobs are undervalued, precarious, and underpaid. Women also bear an unequal burden in unpaid household labour which can undermine access to paid employment. There is a need to assess the implications of COVID-19 policies to ensure gendered experiences are recognised and addressed. Consider:
|                  | - The level of exposure of genders to COVID-19 due to gender segregation in the labour market
|                  | - The increased risks to occupational health and well-being of women in caring professions
|                  | - Increased consultation with, and inclusion of, women in decision-making during crises
|                  | - Working with community/religious leaders to promote caregiving/caretaking as everyone’s responsibility
|                  | - How gender-balanced teams can provide treatment or support for mental health and well-being
|                  | - Innovating to mitigate other social issues such as gender based violence
|                  | - Offering guidance on domestic violence into existing services e.g. give volunteers, who provide other services, information on victim support
|                  | - Educating organisations about the heighten risk of gender based violence since COVID-19 so that they can be part of safeguarding women and girls |

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## Recovery: Categories of impact

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<td><strong>Business regeneration/Public sector</strong></td>
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<td><strong>Consider how to manage cultural heritage during COVID-19.</strong> A number of countries and regions rely on a tourism industry to support cultural heritage and the arts. The closure of borders and internal movements within a country has disrupted tourist businesses such as accommodation facilities, travel agencies, tourist guides, service industries, and the arts. Consider how to:</td>
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<td>▪ Create a dedicated website that lists all available arts and culture in the country or region such as Italy’s “Culture does not stop” site</td>
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<td>“Culture does not stop” site:</td>
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<td>▪ Curate online exhibitions by gathering contributions from art historians, archaeologists, archivists, librarians, restorers, architects, authors, writers, actors, musicians, etc.</td>
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<td><a href="https://www.beniculturali.it/mibac/export/MiBAC/sito-MiBAC/Contenuti/MibacUnif/Comunicati/visualizza_asset.html_422536076.html">https://www.beniculturali.it/mibac/export/MiBAC/sito-MiBAC/Contenuti/MibacUnif/Comunicati/visualizza_asset.html_422536076.html</a></td>
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<td>▪ Employ online guides or experts to provide ‘tours’ of cultural sites, museums, etc.</td>
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<td>▪ Ensure content is regularly updated in the same way physical cultural experiences are</td>
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<td>- Managing suspected or confirmed cases of COVID-19 e.g. promote a culture of transparency and support to reporting and managing suspected and confirmed cases</td>
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<td>- Multiple or mobile workplaces e.g. the number and types of workplaces such as offices, factories, warehouses, vehicles, workers’ own/other people’s homes</td>
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<td>- Resource availability e.g. adequate provision of toilet and handwashing facilities</td>
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<td>- Reporting to external parties e.g. consultation and participation of workers, worker representatives and trade unions in decisions that affect health, safety and well-being</td>
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<td>- Inclusivity and accessibility e.g. ensure issues and anxieties are respected; adapt roles and activities to reduce risks to vulnerable workers</td>
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<td>- Psychological health and well-being e.g. take account of unsupervised working hours, isolation, lack of clarity on roles/responsibilities/deadlines</td>
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<tr>
<td>Use available COVID-19 communication templates, printable signage and reopening toolkits</td>
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### Recovery: Categories of impact

| Education | Consider measures to minimize contact and maintain distance in schools. A collaboration between primary, secondary and special schools in the UK has developed some examples from practice on how to maintain social distancing. These are not exhaustive and may be adapted and implemented alongside other protective measures in schools. Actions to consider:

**For primary and secondary schools**
- Stagger lunch and break times of students and, where possible, start and finish times
- Mark the playground in a way that allows for separate ‘bubbles’ of children to play and for staff to walk round the space safely
- Adjust seating plans to recognize that some children may have had low levels of engagement with others during lockdown and may need to sit nearer the teacher for further support
- Ensure specialist or support staff who may be at risk from COVID-19 can continue providing support e.g. install protective screens and allocate a specific classroom for that staff member
- Negotiate with transport companies to bring children to school in their specific COVID-19 groups (bubbles). This may be especially relevant for children from special schools who have additional health and safety needs

**For special schools**
- Ensure specialist staff and therapists have the resources to write their reports from home to limit staff meetings
- Find ways to integrate various therapies to limit the use of specialist rooms and facilities | UK | https://unitedlearning.org.uk/portals/0/unitedthinking/Examples%20of%20protective%20measures.pdf?ver=2020-07-03-192023-697 |
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| Supply chains                  | Consider how to secure and recover supply chains, and to prepare them for a post COVID-19 world. The resilience of construction and infrastructure is highly dependent on reliable, flexible and sustainable supply chains. Learning from the impacts of COVID-19 has identified three key phases for building supply chain resilience. Consider how to:  

*Secure the supply chain – immediate steps*  
- Rapidly assess levels of inventory and resource capacity against immediate/emerging demand  
- Analyse a range of tactical scenarios and secure essential resources needed to maintain operations  
- Evaluate existing relevant contract clauses such as those covering insurances and payment  

*Recover the supply chain – steps to be taken next*  
- Refresh business continuity management plans e.g. tested home working, wellbeing protocols, emergency command/control structures  

*Prepare the supply chain for a post COVID-19 world*  
- Embed resilience e.g. Has risk increased? Is the supply chain intact?  
- Build resilience through  
  - keeping redundancy (e.g. increasing stocks, spare capacity, supply competition)  
  - creating resistance (e.g. automation)  
  - improving recovery (e.g. rapid response protocols)  
- Map strategic supply chains to identify possible points of failure in future shocks e.g. an emergency or second wave  
- Implement ‘smart’ forecasting, analytics, and cloud-based systems that provide advanced prediction and indicate disruption | Dubai, Saudi Arabia | [https://www.arcdis.com/media/0/8/8/%7B088F0D7B-A492-4052-8386-E64B7F1AC195%7DConstruction%20Industry%20Supply%20Chain%20Resilience%20for%20design.pdf](https://www.arcdis.com/media/0/8/8/%7B088F0D7B-A492-4052-8386-E64B7F1AC195%7DConstruction%20Industry%20Supply%20Chain%20Resilience%20for%20design.pdf) |
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| Environmental General environment | **Consider the compounding impacts of heat and COVID-19 on health risks.** Heat waves pose a particular risk to those already vulnerable to COVID-19 including the elderly (>65 years), and those with pre-existing health conditions (e.g. cardiovascular, pulmonary, kidney disease), and essential workers. COVID-19 and heat can put strains on health, and on surge capacity plans for hospitals to deal with concurrent risks. Additionally, people may expose themselves to other risks such as limiting social distancing measures to check in on older neighbours. Consider how to:  
  ▪ Collaborate with formal and informal social service systems to identify and reach vulnerable individuals with information and support to protect them  
  ▪ Increase the use of telephone outreach programmes for daily check-ins with the most vulnerable  
  ▪ Increase enrolment of vulnerable people into check-ins and resources to run the system  
  ▪ Review plans for in-home safety checks. Ensure the health and safety of staff, volunteers and the people they visit through training and the provision of PPE  
  ▪ Identify high-risk communities by reviewing where local heat islands occur, and where this may overlap with high incidence or risk of COVID-19  
  ▪ Assist efforts to review and expand social safety net programmes to support at-home cooling strategies for the most vulnerable e.g. utilise expanding energy subsidies to ensure households can afford home cooling measures  
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<td><strong>Communications</strong></td>
<td>Consider collecting public opinion to understand behavioural, health, and information needs. Tracking public opinion can provide insights into how a society is coping with rapid change, and provides organisations with data that can influence decision-making. During a pandemic this is particularly important as complex information is shared with the public at speed, understanding how this is being understood can help develop evidence-based interventions to support the population. Consider collecting the following types of public opinion information to inform recovery strategies:</td>
<td>UK</td>
<td><a href="https://www.ipsos.com/ipsos-mori/en-uk/public-opinion-covid-19-coronavirus-pandemic">https://www.ipsos.com/ipsos-mori/en-uk/public-opinion-covid-19-coronavirus-pandemic</a> <a href="https://www.ipsos.com/sites/default/files/2020-04/coronavirus-covid-19-infographic-ipsos-mori.pdf">https://www.ipsos.com/sites/default/files/2020-04/coronavirus-covid-19-infographic-ipsos-mori.pdf</a></td>
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<tr>
<td>Targeted communication</td>
<td>Consider conducting an impact assessment for your organization to explore the effects of COVID-19, emerging needs or inequalities, and opportunities to improve. See Case Study</td>
<td>UK</td>
<td></td>
</tr>
<tr>
<td>Recovery: Categories of impact</td>
<td>Country/Region</td>
<td>Source</td>
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**Consider how existing strategic partnerships can be extended to support other COVID-19 activities.** In Pakistan, a National Immunization Support Project (NISP) supported by the World Bank has developed wider strategic collaborations to transform immunization by increasing vaccination coverage and strengthening existing systems and mechanisms. At the heart of NISP is a pooled procurement mechanism and governance structures which successfully sourced vaccines for Provinces and provided an uninterrupted supply for the past 4 years in an efficient and collaborative manner. When COVID-19 hit, NISP: (1) had a series of trusted partners, so repurposed its trusted procurement mechanism e.g. to procure PPE for health care workers; and, (2) was a trusted partner itself, so provided its own expertise to other partners beyond its usual remit e.g. to provide financial management governance to oversee funds.

Inspired by (1), consider how your organisation can repurpose trusted partnerships and identify:

- Major issues that are troublesome due to limited effective partnerships available to support
- Where trusted strategic partnerships are already established and proven to be working well
- How strategic partners can expand their collaboration to address the troublesome issues
- The blockers, how to overcome them, and to expand the partnership to support response

Inspired by (2), consider how your organisation is the trusted partner that can help others and identify:

- What general expertise your organisation has and is able to provide in support to partners
- How your organisation can repurpose key skills and capabilities to go beyond its usual remit to offer support as a trusted partner
- How your organisation can provide its normal services whilst providing support to response
- The blockers, and how to overcome them, to provide your capabilities to others’ response
Briefing C: Impact assessments for COVID-19

Introduction
As local resilience partnerships establish Recovery Coordinating Groups (RCG), this week we talk about impact assessments using details from: HMG Guidance\(^2\), previous briefings (Week 8), and our video\(^2\).

Establish the RCG for COVID-19
When setting up an RCG there are a number of considerations, including:

- **the administrative level** – the level of the RCG and how it relates to other district/county RCGs
- **collaboration** – how will strategic partners: align ambitions for partnership-wide recovery/renewal; establish protocols to share information; and agree which activities for each administrative level RCG
- **membership** – led by local authorities and include organisations with a people, place or economic focus as well as Cat 1 responders
- **agree strategic objectives** – to support the recovery and renewal of people, place, and processes

Commission an impact assessment
Impact assessments will feed into RCG, either by direct commission or through a strategic coordination group. The assessment will explore the strategic effects of COVID-19, their impacts, specific or emerging system-wide needs or inequalities, and opportunities to improve. National Recovery Guidance\(^1\) describes the process of conducting an Impact Assessment as in the graphic.

Collect the consequences
We suggest that the complexity of COVID-19 means the impact assessment should be as strategic and straightforward as possible. RCGs should have strategic-level agreement on the direction, scope and parameters for the impact assessment. Then, strategic information from many sources is needed to fully understand impacts e.g. from partner databases, existing measures, knowledgeable people, surveys, interviews/workshops, or other sources that unlock the impacts on people, place, and processes.

Talking to knowledgeable people should aim to ensure that the assessment does not gather thousands of comments which cloud more than they clarify. A straightforward approach, targeting knowledgeable groups who can support the process, will put more focus on the quality of their insight than on the number of people consulted or number of comments made. For example, consider whether the impact assessment would be better informed if it is more than:

- **a single question** e.g.: “What significant consequences has COVID-19 had on your area of work?”

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\(^1\) [https://www.gov.uk/guidance/national-recovery-guidance](https://www.gov.uk/guidance/national-recovery-guidance)

\(^2\) Video on ‘Planning Recovery and Renewal’ [www.ambs.ac.uk/covidrecovery](http://www.ambs.ac.uk/covidrecovery)
• asked to all partners or cell leaders who will consult knowledgeable people as required
• to provide their top 8 consequences on their service delivery to people, place, processes and identify:
  o Is it an effect, impact, or opportunity?
  o What is its impact rating (e.g. ‘positive, limited, moderate, severe’)?
  o Should it be addressed in the short-term or longer-term?

Using this approach, if 15 cells are running then 120-150 significant consequences would be gathered – so to understand these and design corrective actions is a substantial activity. Magnify that ten-fold (in the number of questions, consultees or consequences) and the task becomes unwieldy either collecting overlapping consequences or ones of lower significant.

Analyse the consequences
To make sense of the comments, group the comments into the 6 core topics to:
• validate their diversity and broad-based nature;
• identify recurring and complementary topics of significance;
• provide a basis to identify follow-on actions

Within each core topic, grouping comments by the 38 sub-topics (in the graphic) may bring added clarity of what really are the key issues to address.

Understand the rationale
To understand the rationale for addressing core topics, consider the:
• Baseline – to identify the pre-COVID-19 state of the situation that you are considering changing
• Effect – the immediate consequence of COVID-19 on the baseline
• Impact – the wider/secondary impact of COVID-19 on the baseline/effect

Develop recovery actions
RCG should now be ready to develop recovery actions for significant consequences. Actions may be:
• Transactional – a single, straightforward, short-term action by an organisation
• Transformational – a longer-term portfolio of action by a strategic partnership of organisations to deliver a complex web of interconnected, democratically significant, renewal activity

Actions can be at three levels of comprehensiveness depending on scale and timing:
• Immediate Recovery Action – an organisation delivering a transactional action to address an effect
• Wider Recovery Action – a partnership delivering a series of transactional actions to address an effect
**Strategic Renewal Action** – a partnership delivering transformational actions to address a strategic impact or opportunity

Understanding the baseline, can identify effects and impacts. These can be addressed with immediate, wider or strategic actions depending on the desired scale, motivation, and funding available, as in the graphic.

Deliver recovery actions

RCG must decide the priority for each action by evaluating its likelihood, effort, motivation, capability, capacity, duration, and resources needed, and its impact on reputation from (not) pursuing it.

For more details contact: duncan.shaw-2@manchester.ac.uk & david.powell@manchester.ac.uk
**Briefing D: Useful webinars**

<table>
<thead>
<tr>
<th>Taken place in the past week</th>
<th>Webinar Title</th>
<th>Link to presentation</th>
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<tbody>
<tr>
<td>10.7.2020</td>
<td>Gender Inclusive Cities: How can cities embed gender inclusivity in recovery planning and beyond?</td>
<td><a href="https://www.youtube.com/watch?v=ZaNtnv3xg">https://www.youtube.com/watch?v=ZaNtnv3xg</a></td>
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**Coming up**

<table>
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<tr>
<th>Date</th>
<th>Webinar Title</th>
<th>Link to registration</th>
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