

#### Report to the NHS Somerset Clinical Commissioning Group on 26 May 2022

		Enclosure
Title:	Update on Covid-19 and the Vaccination Programme	E

Version Number / Status:	N/A
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#### **Summary and Purpose of Paper**

This paper sets out the latest published data (at 19 May 2022) for the Covid-19 pandemic as produced by Somerset County Council's Public Health Team. It shows that in Somerset, since the start of the pandemic, there have been:

- 166,843 detected Covid-19 cases (including each infection episode of an individual)
- 1,198 Covid deaths (as of 6 May 2022)
- 84.0 cases per 100,000 population in the last 7 days (week 9-15 May 2022)
- The South West R number range as at 19 May 2022 was 0.7 to 0.9
- The England R number range at 19 May 2022 was 0.7 to 0.9

The Director of Public Health will present the very latest information at the meeting on 26 May 2022.

#### Recommendations and next steps

The Governing Body is asked to **Note** the updates on Covid-19 and the Vaccination Programme.

Impact Assessments – key issues identified		
Equality	Equality and Diversity is considered in focusing planning on vulnerable groups who may be at risk from the pandemic.	
Quality	A key principle of EPPR planning is ensure that controls and assurances that are in place to manage the identified community risks and to minimise disruption and maintain the quality of services as far as possible.	
Privacy	All partner agencies in Somerset are signatories to the Somerset Information Sharing Protocol. There was a specific cell concentrating on data protection and information sharing.	
Engagement	There has been broad communication and engagement with partners and local groups over the course of the pandemic response.	

Financial /		Resources have been identified within the CCG budget for emergency planning and business continuity. Additional			
Resource		resources have been allocated to support the pandemic response			
Governance or Legal		The CCG's Legal duties in relation to Emergency Preparedness Resilience and Response (EPRR) are set out in section 4 of the Emergency Planning and Resilience Policy.			
Risk Description		Risks associated with the incident have been captured on a Covid-19 risk register and also on the Corporate Risk Register (Datix refs 406,428) Risks identified and managed earlier during the incident response on the Corporate Risk Register have subsequently been closed (427 – Children and Young Persons Mental Health access rate 390 – Reduced clinical safety 386 – Personal Protective Equipment)			
Risk Rating	Covid-19 C Ris	•	Consequence	Likelihood	RAG Rating
	Increased demand for mental health services (ref 406)		4	3	12
	Risk of nosocomial transmission (ref 428)		4	4	16

#### **Detected cases**

Latest 7 day rate per 100k 09-May to 15-May

84.0

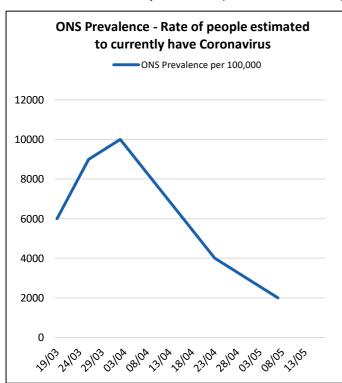


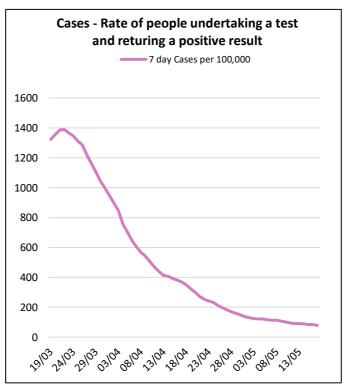


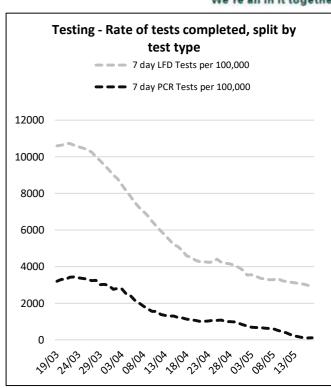
Outbreaks & Clusters: This represents the number of outbreaks and clusters currently being managed. Outbreaks are any situation with two or more cases, where at least two cases are known to be related to each other. Clusters are any incidents being managed at the same setting with two or more cases but where there is no established link between any of the cases.



Cases for the most recent days will be incomplete, it takes around 3 days for all tests to be processed.







- As a result of recent changes to policy the number of detected cases alone no longer provides an accurate or consistent indication of the prevalence of COVID-19 in our community. As a result of this, detailed cases data such as the map and district level figures have been removed.
- Cases are still shown on the chart above. However, we have now included additional information (ONS Prevalence\*) that may give a better indication of the actual number of people with COVID.
- \*ONS Prevalence Survey estimates the proportion of people in Somerset testing positive based on a survey undertaken by the Office for National Statistics (ONS).
- Testing data has also been added to provide further context.

### Somerset COVID-19 Local Outbreak Management Plan Dashboard - Wider Context

**Latest R number range for the South West** 

0.7 to 0.9

Last updated on Friday 13 May 2022

Produced by:

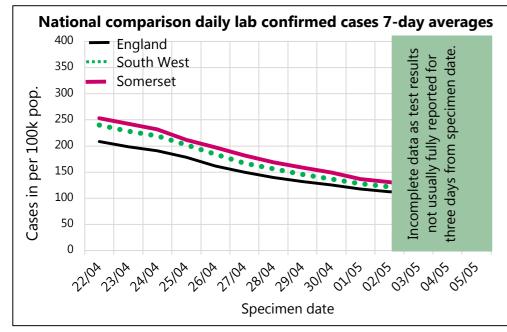
UK Government Scientific Advisory Group for Emergencies (SAGE)

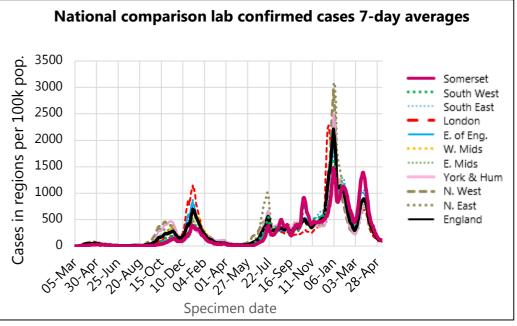
#### What is R?

The reproduction number (R) is the average number of secondary infections produced by 1 infected person.

An R number of 1 means that on average every person who is infected will infect 1 other person, meaning the total number of new infections is stable.

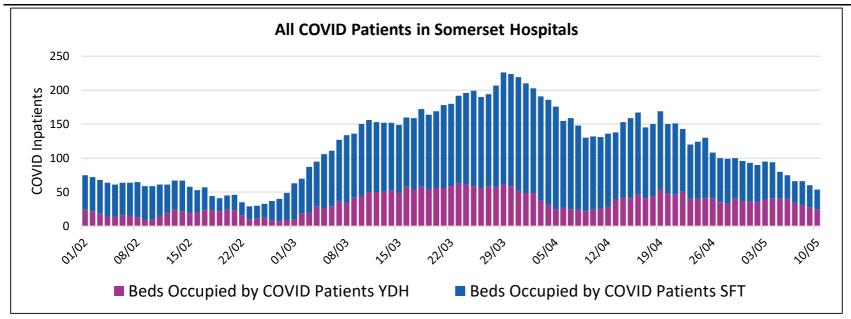
Region	R
UK	No longer produced
England	0.7 to 0.9
East of England	0.7 to 0.9
London	0.7 to 0.9
Midlands	0.6 to 0.8
NE and Yorks	0.6 to 0.9
North West	0.7 to 0.9
South East	0.7 to 0.9
South West	0.7 to 0.9



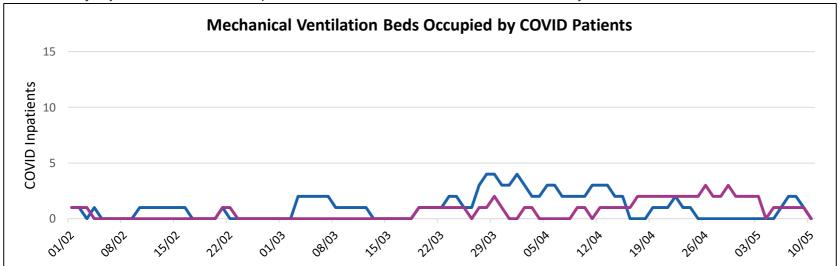


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## Somerset COVID-19 Local Outbreak Management Plan Dashboard - Hospital Activity



The vast majority of current cases are in hopsital for reasons other than COVID and are not seriously ill with COVID.



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## The Somerset System is currently OPEL Level 4

OPEL 1: Capacity is such that organisations are able to maintain patient flow and are able to meet anticipated demand within resources.

OPEL 2: System is starting to show signs of pressure.

OPEL 3: System is experiencing major pressures compromising patient flow and continues to increase.

OPEL 4: Pressure in the system continues to escalate leaving organisations unable to deliver comprehensive care.

For more information on OPEL status follow the link below:

https://www.somersetccg.nh s.uk/operational-pressuresescalation-levels-opel

## Somerset COVID-19 Local Outbreak Management Plan Dashboard - Deaths

Home, 59, 5%

Other

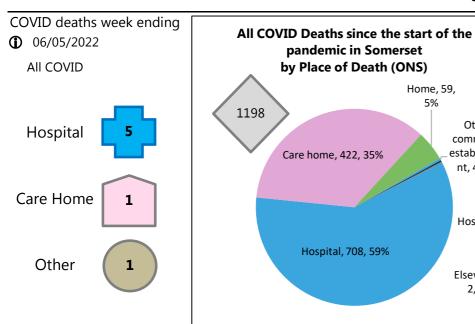
communal establishme

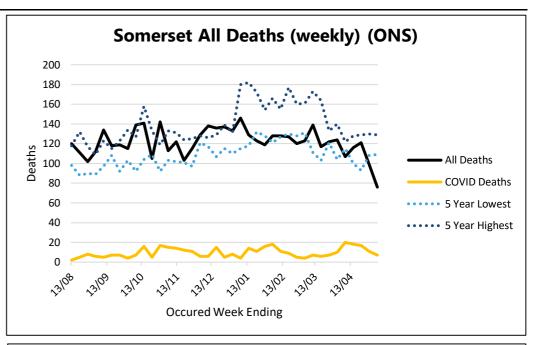
nt, 4, 1%

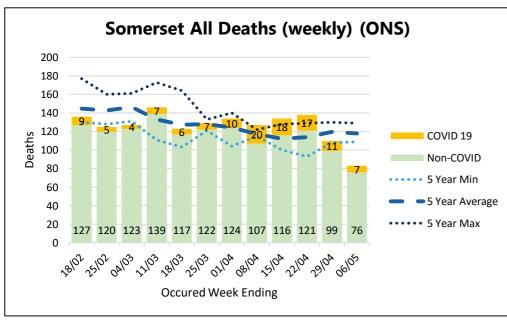
Hospice, 3,

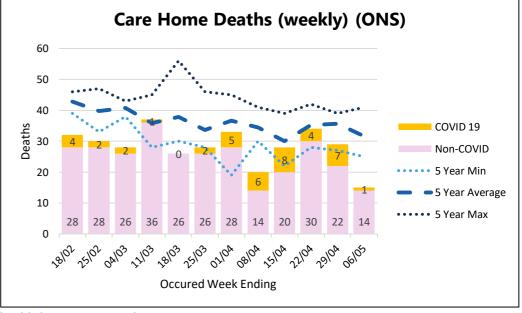
0%

Elsewhere, 2,0%



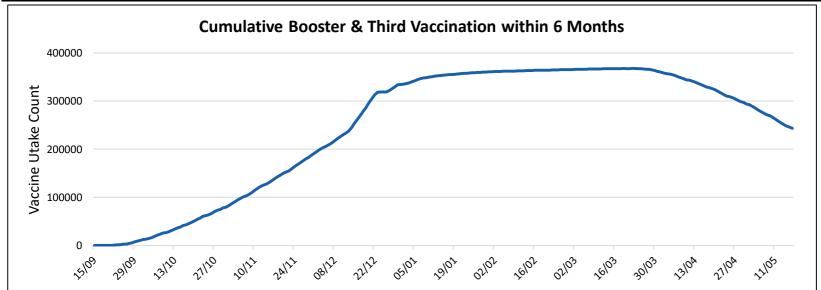




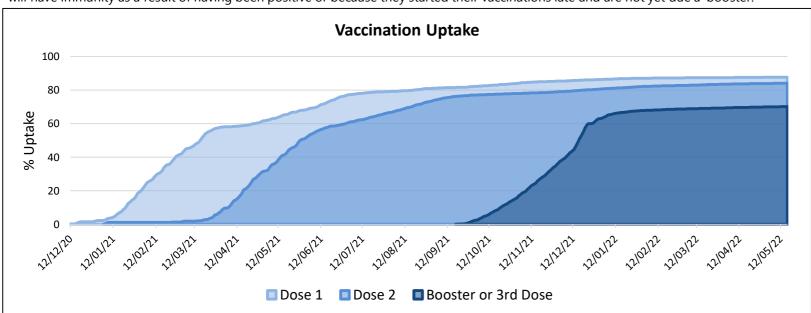


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## Somerset COVID-19 Local Outbreak Management Plan Dashboard - COVID Vaccinations



The above chart shows how many people are likely to have functional immunity having completed a full course of vaccinations. Other people will have immunity as a result of having been positive or because they started their vaccinations late and are not yet due a booster.



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% 12+ population vaccinated once =

87.6

% 12+ population vaccinated twice =

84.1

% 12+ population vaccinated three times =

70.1

Population based on ONS 2020 estimates hence potential for uptake over 100%

Data to: 17/05/2022

# Looking for vaccinations by Age?

For more information on vaccination uptake by Age Band follow the link below:

https://coronavirus.data.gov.uk/de tails/vaccinations

For more information on estimated vaccination effectiveness over-time follow the link below:

https://www.nejm.org/doi/full/10. 1056/NEJMoa2115481

## Somerset COVID-19 Local Outbreak Management Plan Dashboard - Data

Data type	Next updated	How published	Link for more information
Lab confirmed cases: Pillars 1 & 2	19/05/2022	Published daily ~5pm with data to day before. By specimen date.	https://coronavirus.data.gov.uk/
R value from SAGE group	27/05/2022	Published fortnightly on Friday.	https://www.gov.uk/guidance/the-r-number-in-the-uk
Pillar 2 testing	24/05/2022	Published daily	https://coronavirus.data.gov.uk/
Death counts (ONS) County and district level	24/05/2022	Published weekly on Tuesday with data to the Friday 11 days before.	https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/datasets/deathregistrationsandoccurrencesbylocalauthorityandhealthboard
Vaccination data	19/05/2022	Published daily.	https://coronavirus.data.gov.uk/details/vaccinations
Hospital Activity	19/05/2022	Published daily.	https://coronavirus.data.gov.uk/details/healthcare
OPEL Status	19/05/2022	Published daily.	https://www.somersetccg.nhs.uk/operational-pressures-escalation-levels-opel
ONS Prevalance Data	20/05/2022	Published weekly on Friday with data to two weeks before.	https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsand diseases/datasets/coronaviruscovid19infectionsurveydata/2022

As of 2nd June 2020, numbers of lab-confirmed positive cases now include those identified by testing in all settings (pillars 1 and 2).

In January 2021, we changed the presentation of deaths data to be shown compared to the average and five year high and low deaths by date of occurrence rather than date of reporting. Deaths by date of reporting fluctuates more, especially when affected by bank holidays. Reporting by date of death does mean the latest week's figures are usually slightly incomplete when first reported due to delays in registrations of some deaths whereas the comparison years are more complete. For week 53 we have taken an average of 52 and week 1 comparison years.

Dashboard available at: https://www.somerset.gov.uk/covid-19-dashboard/