

Local Outbreak Engagement Board (Health and Wellbeing Board sub-committee)

Monday 26th April 2021, 1.00pm

Present: Councillor Matthew Winnington (Chair), Councillor Judith Smyth, Cllr Jeanette Smith, : Councillor Suzy Horton, Stef Nientowalski (Shaping Portsmouth), Roger Batterbury (Healthwatch), Helen Atkinson (Director of Public Health), Dr Linda Collie (Portsmouth CCG), Louise Wilders (HIVE Portsmouth), Richard Lee (Assistant Director-Regulatory Services, PCC), Matthew Gummerson (Strategic Lead for Intelligence, PCC), Alison Jeffery (Director of Children, Families and Education, PCC), Dominique Le Touze (Consultant in Public Health, PCC), Claire Currie (Consultant in Public Health), Kelly Nash (Strategy Unit, PCC).

Apologies: None received

1. Notes of last meeting (22nd March 2021)

The notes were agreed as accurate record of the meetings. It was noted that a letter had been sent relating to self-isolation as requested and a response had not yet been received.

2. Local Intelligence Summary

Matt Gummerson provided an overview of the latest data and key messages.

There have been 35 new infections in the past week. The 7-day rate per 100,000 population for the city is now 16.3, a drop of 8% over the last week (compares to 15.8 in Hampshire, and 17.8 in the wider SE region). It was noted that this is positive and that some areas continue to see enduring transmission (Doncaster currently has the highest rate of any upper tier local authority in the country at 68.3). It was reported that the new UK variant remains the dominant nationally and locally, with 100% of Portsmouth cases w/e 16th April of this type. Overall, infection rates are highest amongst the 30-44 age group, and there are no particular concerns around school-age children at present.

In terms of pressure on the hospital system, this has improved. . There have been 9 covid admissions or in-patient diagnoses in the last 7 days, a reduction of 44% on the previous 7 days. 26 beds were occupied by Covid patients (as of 21/04/21) and 2 patients were on ICU.

There have been 288 deaths since the end of October, with 2 deaths in the last 7 days. This means that there have now been 368 covid-related deaths since the beginning of the pandemic. There have been no covid-related deaths in the last seven days and overall deaths in the city are now slightly below average for the time of year.

The Chair thanked Matt for the presentation.

3. Director of Public Health and Head of Regulatory Services Update

Helen Atkinson updated the Board that there had been a sector-led improvement conversation with colleagues in Brighton and Hove regarding the Local Outbreak Plan to

identify shared areas of interest and exchange good practice - this had been useful and there will be further information sharing particularly around vaccination and targeted testing.

4. Local Outbreak Plan

Helen Atkinson and Kelly Nash provided an overview of feedback that had been received from PHE/DHSC regarding the refreshed Local Outbreak Management Plan. It was reported that all areas had been met, with 7 fully met, and that amendments had been made in light of the feedback as set out in the accompanying paper. Work would now take place to turn the plan into a readable version and place online, and further amendments would be made regularly as updates to policy direction are made.

5. Test, trace and isolate

Dominique Le Touze ran through a presentation summarising the test, trace and isolate position. It was noted that the city currently has 2 walkthrough local test sites, a site for a drive-through mobile testing unit, and a regional test site that can be accessed in Southampton. Home testing is also for people with symptoms. In respect of asymptomatic testing, there are various sector routes, a national workplace programme and community testing. Community testing is led by local authorities and a site is based at Somerstown Central, and 11 pharmacies are also offering supervised testing. Community collection of test kits is available through the LTS/RTS sites (will be available until the end of April), and kits can also be collected from Somerstown, almost all pharmacies in the city and a mobile collection offer is being developed.

On the w/c 12th April, 388 tests were carried out at Somerstown and 343 boxes of kits were issued (2401 tests in total). Kits have also been delivered to several sites to try and increase uptake of routine asymptomatic testing in high-risk populations (including sex workers and individuals in homeless hotels/accommodation).

For future, a strategic plan for testing in the city is being developed, to take account of both symptomatic and asymptomatic testing, and improving uptake across the city.

In respect of local contact tracing, the city has now launched Local 0 (as of 18th April), and have successfully completed 95%, which is in excess of the target rate. Less than 50% of applications for self-isolation payments have been successful, and work is underway to understand why and to gauge how we could better offer support. As part of the local contact tracing interview, we are checking support needs and offering this help where appropriate. Since 8th February 2021, 35 people have been supported by the HIVE.

6. Vaccination programme

Claire Currie reported that the 15th April target for Phase 1(JCVI cohorts 1-9) to be offered a first dose of vaccine. Individuals aged 44 and over have now been invited to book. The focus is in encouraging uptake in those in cohorts 1-9 who have not yet done so, and getting through 2nd doses. Pregnant women are now also to be offered the vaccine (Pfizer/Moderna).

On the most recent data, 42.7% of Portsmouth CCG registered patients had received at least one dose of the vaccine (30,265 have received both doses).

It was noted that some black and minority ethnic groups have lower uptake which is being used to guide activity locally. There is high uptake across the city broadly, although some geographic areas have been a bit lower (generally mapping to areas of deprivation). Also noted that the uptake is slightly lower among men.

Work is planned to address a range of inequality groups that have been identified, including individuals in substance misuse treatment, refugees/asylum seekers/undocumented migrants, clinical at risk groups, veterans and care leavers.

Claire then provided an overview of the pop-up clinic held at Jami mosque, which was developed as a partnership between mosque, Portsdown Group Practice PCN, HIVE, CCG and various local authority departments. Across the day, 250 vaccines were delivered, including 13 individuals not registered anywhere else.

Roger Batterbury asked whether there was any news about how an autumn booster programme for vaccination might work; and also what we are starting to see about the impact of Long Covid locally, including in the care sector. Claire reported that there is not yet a clear picture about what the next round of boosters or annual plans would look like, including whether this would include older children. Dr Collie reported that there is now a pathway for Long Covid and the GP is the first port of call for this; referrals can be made after 12 weeks and there are a range of diagnostic tests and a specialist clinic that can be accessed. It was also noted that there is a paediatric pathway. Helen reported that some ONS data re Long Covid is now available and this link was made available to the group.

Stef Nientowalski asked what opportunities there are to share the good uptake in the city and let people know how they are making a difference by coming forward for vaccination. It was noted that there had been an article in the News to celebrate 100,000 vaccines in the city. Ideas were put forward around other channels that could be used, including use of the Big Screen - The Chair asked Kelly Nash to take these ideas back to the communications team.

7. Assurance report

The Board received the report which covered:

- Local context - updated with the information taken from the data reporting (and updated to include information about variants of concern and enduring transmission)
- Local activity - bringing together a range of information about what our work is telling us about our preparedness
- Assurance around high-risk settings, populations and underserved populations.
- Key risks, including relating to the relaxed restrictions.

There were no questions, and the Board noted that on the basis of information and evidence that they have received, they have a high degree of assurance on local arrangements.

8. Any other business

Stef raised that there was work underway with colleagues in the police to look at safe streets and it was agreed that Supt Clare Jenkins could be invited to a future meeting to update.

9. Future dates

Future meeting dates were noted - dates are now in the diary until August.