

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

Monday 6th December 2021, 1.00pm

Present: Cllr Jason Fazackarley, Roger Batterbury (Healthwatch), Helen Atkinson (Director of Public Health), Dr Linda Collie (Portsmouth CCG), Councillor Judith Smyth, Councillor Suzy Horton, Richard Lee (Regulatory Services, PCC), Dominique Le Touze (Consultant in Public Health), Louise Wilders (HIVE Portsmouth), Matthew Gummerson (Strategic Lead for Intelligence, PCC), Emma Seria-Walker (Public Health), Sally Hodges (Director of Children's Services).

Kelly Nash (Strategy Unit, PCC)

Apologies: Councillor Jeanette Smith, Stef Nientowalski (Shaping Portsmouth),

1. Notes of last meeting (8th November 2021)

The notes were agreed as an accurate record of the meeting.

2. Local Intelligence Summary

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

In terms of the local infection data, Matt reported that there have been 1412 new cases reported in the last week with the 7 day infection rate per 100,000 in Portsmouth now at 658.7, a 46% increase in the previous week. It was noted that rates of infection are now at the highest rate than at any previous point in the pandemic. Rates are highest locally among the 0-14 age group; and have increased in all ages except the 60+ group since 22nd November 2021. It was also noted that all Portsmouth infection is currently believed to be the Delta variant - nationally, more information is emerging about the Omicron variant and there are now 246 confirmed cases nationally.

It was noted that the UKHSA risk register currently considers that the new variant may be at least as transmissible, and there is early evidence of reduced effectiveness of natural immunity, vaccines and therapeutics.

On vaccination, 70.6% of eligible population have now received a second dose, and 23.6% of population have received a booster (this figure currently includes under 18s who are not eligible).

It was noted that rates of lower uptake are concentrated in the south of the city, but this is also where the youngest population is.

In terms of hospitalisations, roughly 20 people are being admitted or diagnosed daily in the hospital, and - as of 30th November - 9 patients are in ventilation beds.

There have been 3 deaths in the last 7 days, meaning a total of 406 deaths over the course of the pandemic. Overall deaths in the city are roughly where they would be expected to be.

Cllr Horton asked whether, in the light of the new information emerging, we think we are taking the right approach with schools. Helen Atkinson advised that we are giving lots of support and advice to schools and working with national guidance but also encouraging schools to use whatever measures they feel are necessary - important to note that children do not in the main show a greater level of serious illness. Dr Colie noted that in general practice, GPs are seeing children who are not poorly with the illness itself but are suffering fatigue after the infection. Work is underway with paediatricians to gather evidence and understand the picture.

Cllr Smyth asked what sort of help and support children in these situations are receiving? Dr Collie reported that from a medical point of view, the response is generally to try and check if there is anything that does need to be done, but generally just about managing the recovery and encouraging people to phase in gently - understanding is that schools are being understanding and supportive. Sally Hodges raised that these issues, plus ongoing business continuity challenges for schools, mean that everyone should be aware that education continues to be disrupted. Cllr Horton suggested that support to parents is considered as part of the Long Covid working group.

Louise Wilders asked if there had been any work to map the areas where there is lower vaccine take-up to see if that is connected to higher rates of cases. Matt reported that this has been looked at and there is no connection - rates in areas tend to be connected to issues such as school outbreaks for example. Also note that in areas of higher vaccination there is some evidence that there is now waning immunity.

A query was raised about delays between boosters being administered and delays in this information being recorded with GPs - it was noted that this reflects the interface between Pinnacle and System One but does not affect data around numbers boosted being reported.

3. Test, Trace and Isolate

It was reported that there has been a policy change to encourage lateral flow testing whenever someone is likely to be in a crowded or poorly ventilated place or meeting people at higher risk of severe Covid-19. It was noted that more details are included in the assurance report to be considered later in the meeting.

4. Vaccination

It was noted that the current focus of the vaccination programme is the booster programme, the 12-15 rollout, the delivery of 3rd doses for individuals who are immunosuppressed, and pregnant women. The evergreen offer continues to be offered to ensure that first and second vaccinations are delivered.

Updated recommendations from JCVI on 29th November are that booster vaccinations are now available to 18-35 year olds, a minimum of 3 months after the completion of the first course, and for the immunosuppressed 3 months after completion of the primary course.

Noted that healthy 12-15 year olds should be offered a 2nd dose minimum 12 weeks after the first dose. This will be delivered by Solent NHS. Home schooled children will be offered at St James as well as special catch-up clinics.

In terms of promotional activity, there is a pop-up booster vaccination bus one day a week in December. The Know the Facts about the Vaxx local campaign is continuing and other work includes translated messages and community champions.

Roger Batterbury asked what the programme is for boosting people at home, and also what had happened regarding the testing priority post box. Dr Collie answered that PCNs are responsible for vaccinating the housebound on their lists, but the issue continues to be the waiting time that is required after the Pfizer dose which means it is a slow process, and GPs are trying to co-ordinate the vaccinations with other work that can be carried out such as blood pressure checks and medicine reviews. Dominique Le Touze will follow up again regarding the post box.

Louise Wilders asked where people can get lateral flow tests and Dominique advised that the distribution of tests through supermarkets, community centres, libraries is ramping up, and tests are also being distributed at pop-up vaccination opportunities. Louise undertook to liaise with sector colleagues who could help distribute. It was also noted that sites are being targeted where there may be some vulnerability, such as food banks and hostels.

5. Director of Public Health and Regulatory services update

Richard Lee reported that new regulations have been introduced from 30th November and deal with the requirements around face coverings - the local authority is not responsible for enforcement, but are expected to look at premises and ensure signage etc is correct. The regulations cover all shops, post offices, banks and building societies and certain vehicles. In order to support this work, the authority will be retaining the Covid Community Engagement Officers to cover the period of uncertainty.

Helen Atkinson reported that since the WHO announced the Omicron variant, travel restrictions have been put in place and aggressive contact tracing has taken place around confirmed cases. Nationally, we are in a phase of trying to reduce spread and contain transmission.

Note that UKHSA are prioritising Omicron and therefore more cases will be coming to the local teams to support. Under current rules, contacts of Omicron cases are required to self-isolate regardless of age or vaccination status, based on the evidence that the variant is significantly more transmissible. It is likely that Omicron will become the dominant variant and some changes to messaging are likely to be needed.

6. Assurance report

The assurance report was considered and the Board were satisfied with the information provided.

7. Any other business

There was no other business.

8. Future dates

Future meeting dates are now established until March 2022:

- 10th January 2022

- 7th February 2022
- 7th March 2022