## Agenda Item 9



# Open Report on behalf of Andy Gutherson, Executive Director - Place and Senior Responsible Officer for Covid-19 Recovery

Report to: **Overview and Scrutiny Management Board** 

Date: 28<sup>th</sup> October 2021
Subject: Covid-19 Update

## **Summary:**

This report provides an overview of the work by the Local Resilience Forum (LRF), partners, and Lincolnshire County Council (LCC) to manage Lincolnshire's response to the Covid-19 pandemic.

This report will provide an update and overview of the situation since the most recent briefing paper provided to the Overview and Scrutiny Management Board (OSMB) on the 30<sup>th</sup> September 2021.

#### **Actions Required:**

The Overview and Scrutiny Management Board (OSMB) is invited to consider the report and provide feedback on the update presented.

#### 1. Background

This report will set out the current position with regard to Covid-19 and highlight any changes that have occurred since the briefing paper in September was produced.

The country is learning to live with Covid-19, and the main line of defence is now vaccination rather than lockdown. Although nationally and locally cases have been rising in recent weeks, data continues to show that the link between cases, hospitalisations, and deaths has weakened significantly since the start of the pandemic.

Winter is always a challenging time for the NHS however this winter could be particularly difficult due to the impacts of Covid-19 on top of the usual increase in demand. It is a realistic possibility that the impact of flu (and other seasonal viruses) may be greater this winter than in a normal winter due to very low levels of flu over winter 2020 to 2021. There is considerable uncertainty over how these pressures will interact with the impact of Covid-19.

It will be increasingly necessary to be able to flex the system to react to different levels of virus prevalence across the country. Seasonality, waning immunity or a more transmissible or vaccine-escaping variant could result in a significant resurgence of Covid-19 in the autumn and winter. UKHSA will work with NHS England to ensure that winter plans also include appropriate assumptions and mitigations for potential resurgences of Covid-19 and other health threats that impact on care capacity.

NHS England is working with local colleagues via its regional teams to develop detailed plans to ensure that they are able to deliver a booster programme in line with the JCVI guidance. They will continue to work closely with partners including local authorities and voluntary organisations to ensure equal access and to maximise uptake of both Covid-19 and influenza vaccines. Details of the government strategy which includes details of the additional measures that could be instigated nationally, if required, are set out later in the report.

Locally, Lincolnshire is making good progress delivering the booster programme to eligible cohorts. The vaccination programme for the 12-15 year old cohort is also progressing well and the County is currently above the national average for uptake across this cohort.

The report will now set out the current data position for the county. This is prior to providing further information on the local recovery position.

#### 2. Latest Data

The latest data (reported as of the 25<sup>th</sup> October 2021) is presented in the tables below. To aid OSMB in monitoring the direction of travel a summary of this data in comparison to that presented to OSMB in September is provided as follows, and be should viewed in consideration of the information provided throughout the report:

- Rate of Positive Cases per 100,000 Population is 521.4 per 100,000 (25<sup>th</sup> October 2021) in comparison to the 20<sup>th</sup> September 2021, which was reported at 257.1 per 100,000.
- On the 24<sup>th</sup> October 2021, Lincolnshire Covid-19 cases reported in the last 7 day period was 3,996, in comparison to the figure reported on the 20<sup>th</sup> September 2021 which was 1957.
- Deaths reported in the last 7 day period up to the 19<sup>th</sup> September 2021 for Lincolnshire as defined below was reported as 6, in comparison in the last 7 day period up to 24<sup>th</sup> October 2021 it was reported as 7.
- Number of Covid-19 vaccines administered up to the 12<sup>th</sup> September 2021 for Lincolnshire was 1,108,065, as of the 17 October this was reported as 1,131,705.

In addition to the data covering Lincolnshire, it was agreed that the report would provide data on cases in surrounding areas of the country. This is to provide a comparison, for the benefit of the members this table includes last months reported figures for reference.

## **East Midland comparison table**

Upper Tier Local Authority	Rate of positive cases per 100,000 (updated 19/10)	Rate of positive cases per 100,000 (as reported in September)
Derbyshire	577.2	294.2
Leicestershire	396.0	451.1
Lincolnshire	555.8	258.2
Norfolk	517.3	223.0
North East Lincolnshire	356.4	308.1
North Lincolnshire	407.0	342.1
Nottinghamshire	459.7	320.0
Peterborough	665.8	300.6

Despite the increased case numbers across the county the Covid-19 related pressures within ULHT are slightly less than reported in September with fewer patients currently requiring critical care. As of 25<sup>th</sup> October 2021 there are 49 inpatients in ULHT hospitals with a PCR confirmed case of Covid-19. This compares to 57 as of 20<sup>th</sup> September 2021.

In the last 7 days, 100% of cases in Lincolnshire that were genome sequenced were the Delta variant and there are no issues to report relating to known variants of concern.

Further breakdown of the latest data is below:

Tests (updated: 25 October 2021)

	Total Tests Carried Out	Total Positive Tests	% Positive Tests	Positive Cases	Rate of Positive Cases per 100,000 Population
Lincolnshire	65,647	5,357	8.2%	3,996	521.4
Boston	4,601	347	7.5%	269	379.7
East Lindsey	11,023	774	7.0%	570	401.3
Lincoln	7,250	576	7.9%	438	437.8
North Kesteven	11,909	1,051	8.8%	769	650.9
South Holland	7,708	554	7.2%	402	419.4
South Kesteven	14,115	1,258	8.9%	929	648.6
West Lindsey	9,041	797	8.8%	619	643.5

The data in the table above is a rolling 7-day summary of Pillar 1 and Pillar 2 Tests. Data has been extracted from Public Health England daily line lists, which provide data on laboratory confirmed cases and tests captured through their Second Generation Surveillance System (SGSS). The rates shown are crude rates per 100,000 resident population.

## Cases (updated: 24 October 2021)

	Cases in the Last 7 Days	Cases to Date
Lincolnshire	3,996	88,639
Boston	269	8,922
East Lindsey	570	15,464
Lincoln	438	13,842
North Kesteven	769	12,862
South Holland	402	10,355
South Kesteven	929	16,345
West Lindsey	619	10,849

Data on cases are sourced from Second Generation Surveillance System (SGSS). This is PHE's surveillance system for laboratory confirmed cases. Lab confirmed positive cases of COVID-19 confirmed in the last 24 hours are reported daily by NHS and PHE diagnostic laboratories. This is the most accurate and up to date version of data and as such it will not align with the data that is published nationally (<u>link to tracker</u>) due to delays in reporting.

## Deaths (updated: 24 October 2021)

Area	Total deaths	Total deaths in the last 7 days
Lincolnshire	1,746	7
Boston	185	1
East Lindsey	416	1
Lincoln	202	1
North Kesteven	236	2
South Holland	216	1
South Kesteven	287	1
West Lindsey	204	0

Total number of deaths since the start of the pandemic of people who have had a positive test result for COVID-19 and died within 28 days of the first positive test. The actual cause of death may not be COVID-19 in all cases. People who died from COVID-19 but had not tested positive are not included and people who died from COVID-19 more than 28 days after their first positive test are not included. Data on COVID-19 associated deaths in England are produced by Public Health England from multiple sources linked to confirmed case data. Deaths newly reported each day cover the 24 hours up to 5pm on the previous day. As of 31st August 2020, the methodology for counting COVID-19 deaths was amended and, as such, the total number of COVID-19 related deaths was reduced. Data is available to Local Authorities and the general public here.

## **Hospital data**

Number of beds	Number of	Number of beds	Inpatients	New admissions
occupied by	COVID-19	on oxygen**	diagnosed with	with COVID-19
confirmed	intensive-care		COVID-19 in	in past 24
COVID-19 cases	beds occupied*		past 24 hours**	hours**
as of 8am*				
49	11	21	4	0

#### **Vaccinations in Lincolnshire**

Period Covered 8 December 2020 – 17 October 2021 (Published: 21 October 2021) Total number of vaccines given in Lincolnshire up to 17 October was 1,131,705

Age Group	First Dose	Second Dose	% who have had at	% who have had
			least one dose	both doses
Under 18	18,403	1,573		
18 - 24	47,504	41,184	79.5%	68.9%
25 - 29	33,746	30,075	80.9%	72.1%
30 - 34	36,545	33,321	84.3%	76.9%
35 – 39	36,642	34,434	86.0%	80.8%
40 – 44	37,078	35,447	91.7%	87.7%
45 - 49	41,490	40,190	87.6%	84.9%
50 – 54	51,765	50,528	96.1%	93.8%
55 – 59	55,049	53,981	96.7%	94.8%
60 - 64	50,127	49,094	98.7%	96.7%
65 – 69	45,252	44,764	95.0%	93.9%
70 – 74	48,243	47,881	94.9%	94.2%
75 – 79	37,792	37,530	100%*	100%*
Over 80	46,225	45,842	97.9%	97.1%

The number of people who have been vaccinated for Covid-19 split by age group published by <a href="NHSEL">NHSEL</a>. All figures are presented by date of vaccination as recorded on the National Immunisation Management Service (NIMS) database. \*100% signifies that the number who have received their first dose exceeds the latest official estimates of the population from the ONS for this group.

## 3. Update on the current LRF Covid-19 activity

There remains an on-going level of activity underway; the areas to highlight in this briefing paper are below. This provides an overview of the work.

#### National guidance updates

There have been recent no changes to roles and responsibilities for local authorities since the summer. Whilst Covid-19 continues to present an unprecedented challenge, well-established local, regional and national arrangements for public health and emergency planning continue to remain in place.

On 1<sup>st</sup> October 2021, NHS Test and Trace (including the Joint Biosecurity Centre), the Covid-19 managed quarantine service, and the health protection functions of Public Health England (PHE) joined together to establish UKHSA. The immediate priority of UKHSA is to lead the UK government's ongoing response to the Covid-19 pandemic, whilst continuing to manage other routine infectious disease and external health threats.

<sup>\*</sup> ULHT Corporate Ops as of 06:30 on 25/10/2021

<sup>\*\*</sup> NHS England Covid-19 Situational Operational Dashboard as of 13:58 on 22/10/2021

On 4th October 2021 the rules for international travel to England changed with a new single red list of countries and territories replacing the traffic light system. Testing requirements have also been reduced for eligible fully vaccinated travellers, who no longer need to take a PDT when travelling to England. From the 24th October travellers returning to England will be required to take lateral flow tests instead of more expensive PCR tests. As of the 22nd October, a list of approved providers will be available on the gov.uk website.

On the 7th October 2021 the government published an update to the Covid-19 contain framework. A link to this document has been included in the background papers section of this report. The framework should be read in context with the Autumn Winter Plan 2021.

#### The framework sets out:

- The roles and responsibilities of local authorities and local system partners, and the support local authorities can expect from regional and national teams, as well as the decision-making and incident response structures;
- The core components of the COVID-19 response across the spectrum of outbreak prevention and management, including to variants;
- The requirements of local authorities on the continued COVID-19 response, as well as how this should be factored into local outbreak management plans (LOMPs).

Whilst vaccination remains the government's main line of defence, a test, trace and self-isolation strategy will remain in place for managing the virus over Autumn and Winter. The updated strategy is summarised below:

- 1. We will continue to expect everyone with COVID-19 symptoms to self-isolate and take a polymerase chain reaction (PCR) test. Over autumn and winter PCR testing for those with COVID-19 symptoms will continue to be available free of charge.
- 2. Regular asymptomatic testing will continue to help find cases and break the chains of transmission. It will be focused on those who are not fully vaccinated, those in education, and those in higher-risk settings such as the NHS, social care, and prisons. Public access to lateral flow devices (LFDs) via GOV.UK and pharmacies will continue in the coming months to help manage periods of risk. At a later stage, as the government's response to the virus changes, universal free provision of LFDs will end, and individuals and businesses using the tests will bear the cost.
- 3. Community testing will continue to support local authorities to focus on disproportionately impacted and other high-risk groups.
- 4. The legal requirement to self-isolate for 10 days if an individual tests positive for COVID-19 and for close contacts who are 18 and over and not fully vaccinated will remain. We will continue to provide practical and financial support to those who are eligible and require assistance to self-isolate. Local authorities will continue to play a critical role in managing financial support by administering and raising awareness of the Test and Trace Support Payment scheme (TTSP).

- 5. We will continue with contact tracing throughout autumn and winter to enable us to check with all positive cases whether they need support to self-isolate and to alert their close contacts. Local authorities will continue to play an essential role in this. We have seen the success of Local Tracing Partnerships (LTPs) that are now the norm with over 300 in operation.
- 6. We will also continue to encourage the use of NHS COVID-19 App this winter to help individuals manage risk and make informed decisions.
- 7. The Health Protection (Coronavirus, Restrictions) (England) (No.3) Regulations 2020 ('No.3 Regulations') which give local authorities the power to issue a direction imposing restrictions, requirements or prohibitions in relation to individual premises, events and public outdoor places have been extended until 24 March 2022.
- 8. We will continue to support and work with local authorities and local areas facing particular challenges. This includes support for areas with enduring transmission and national support for an enhanced response in areas with particularly challenging disease situations. The government will also continue to provide access to the <a href="Education Contingency Framework">Education Contingency Framework</a>, which provides guidance on the principles for managing local outbreaks of COVID-19 in all education and childcare settings.

The Association of Directors of Public Health (ADPH) is continuing to engage with the Department for Education and UKHSA on Covid-19 outbreak management in schools and has formally written to the Secretary of State for Education. The letter sets out the insights and experiences of DsPH since the start of term, outlines the opportunities to improve the collective response to minimising Covid transmission and offers support in building and delivering an approach that works. Further information and potentially updated policy is expected to come from central government shortly.

#### The Covid-19 vaccination programme

Lincolnshire's vaccination system has made good progress administering vaccines to the 12-15 yr old cohort utilising the immunisation programme delivered through schools as well as the two vaccination centres. Locally the uptake in this cohort is above the national average with plans for other weekend and walk-in pathways in development.

Lincolnshire began to administer the first booster vaccinations on Friday 24<sup>th</sup> September 2021. Delivery of the programme is ongoing for eligible cohorts and making good progress.

## Media and communications

The media messages continue to reflect the national and local position including the key message of the importance of Covid-19 and influenza vaccine. A new national campaign was launched on 8<sup>th</sup> October 2021 to combat widespread underestimation of the combined threat of Covid-19 and influenza. The campaign encourages people to book their flu vaccine and covid booster as soon as they are eligible.

#### Covid-19 - Testing

The wider community testing programme is well established and continues to be encouraged locally and nationally. Testing, both symptomatic and asymptomatic, will remain in place to help identify positive cases and reduce the risk of transmission to others, regardless of vaccination status. Free PCR testing for people with Covid-19 symptoms and free lateral flow testing, particularly for people working in higher risk workplaces and in education settings will continue in England as part of the government winter plan.

## 4. LRF Recovery and Exit planning

The Lincolnshire Resilience Forum (LRF) are now in the final stages of the 'oversight and assurance' phase of our recovery. The Lincolnshire journey towards recovery has continued as planned and the overall position in the county remains cautiously positive. Meetings of the Recovery Strategic Co-ordination group have been taking place on a monthly cycle since the beginning of September 2021. The Recovery Leads Group have also moved from a bi-weekly to a monthly cycle as of October 2021.

The current data is being monitored and there continues to be continual reflection on how the system is collectively progressing. On 7th October 2021 RSCG received assurance from the Education, Higher Education, and Community and Voluntarily Sector Engagement representatives that, across the system, the direction of travel is a positive one and where there are ongoing vulnerabilities or risks, plans are in place at an organisational/system level to address these without the requirement for a wider LRF command structure being in place.

This builds upon the assurance provided by NHS and Public Health colleagues on 2nd September 2021. On that basis currently there is confidence that exit should proceed as planned with a target date of the end of the calendar year 2021. However, this timetable will be monitored and reviewed in line with any changes to either the local or the national position. The LRF coordinates the activity and there remains confidence that our processes are robust and fit for purpose.

Since the last report, planning and development around our 2021 recovery debrief has progressed well. To ensure partners reflect on the processes and practices used and inform future emergency response and recovery activity, a two stage debrief has been presented to and agreed by RSCG. An initial digital survey is now live and LRF agencies have been encouraged to contribute.

The LRF Recovery Team will present initial findings to RSCG on 2nd December 2021 and will recommend particular themes/topics for a 'deeper dive' multiagency debrief that will be independently facilitated at a later date.

#### 5. Conclusion

Protecting the public's health and mitigating harm to our residents, families, and vulnerable people will continue to be our priority as we plan for our longer term recovery.

On 4<sup>th</sup> November 2021, the Business & Economy sector, Engage, Enforce & Comply and Event Planning parts of the system will present to RSCG. This will conclude the focused presentations that were set out in the RSCG forward plan within the Terms of Reference.

If the situation is stable and RSCG are satisfied that these remaining parts of the system meet the assurance procedures agreed then it will be in a position to agree to stand down the LRF Covid-19 recovery structure in line with the current timetable. On this basis Lincolnshire County Council will be in a position to safely withdraw the resources from both RSCG and Recovery Lead Group as the recovery journey will be in a position to be sustained within everyday core business capacity without the need for these additional resources to be in place.

It is therefore anticipated that the report to OSMB on the 25<sup>th</sup> November will be the final report to be provided.

#### 6. Consultation

## a) Risks and Impact Analysis

A full risk register is maintained as part of the RSCG assurance process.

An Impact Analysis is in place and is a live document which will be reviewed throughout the period of the recovery. This has been developed from the detailed impact assessment and action plan that has been agreed by the LRF.

#### 7. Background Papers

The following background papers as defined in the Local Government Act 1972 were relied upon in the writing of this briefing paper.

Document title	Where the document can be viewed
Data on the levels of Vaccination in the UK	https://coronavirus.data.gov.uk/details/vaccinations
COVID-19 Response: Autumn and Winter Plan 2021	https://www.gov.uk/government/publications/covid-19-response-autumn-and-winter-plan-2021
Covid-19 response Summer 2021 (Step 4)	https://www.gov.uk/government/publications/covid-19-response-summer-2021-roadmap/covid-19-response-summer-2021
COVID-19 contain framework: a guide for	https://www.gov.uk/government/publications/containing- and-managing-local-coronavirus-covid-19- outbreaks/covid-19-contain-framework-a-guide-for-local-

local decision-makers	decision-makers
Travel to England from another country during coronavirus (COVID-19)	https://www.gov.uk/guidance/travel-to-england-from- another-country-during-coronavirus-covid-19

This briefing paper was written by Michelle Andrews, who can be contacted on 07917 463431 or via email at <a href="mailto:michelle.andrews@lincolnshire.gov.uk">michelle.andrews@lincolnshire.gov.uk</a>.