

HEALTH AND WELL-BEING BOARD

15 FEBRUARY 2022

COVID-19 HEALTH PROTECTION BOARD QUARTERLY REPORT (QUARTER 3 2021): DELIVERING WORCESTERSHIRE'S OUTBREAK CONTROL PLAN

Board Sponsor

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Author

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Priorities

Mental health & well-being
Being Active
Reducing harm from Alcohol
Other: COVID-19

Safeguarding

Impact on Safeguarding Children	No
If yes please give details	

Impact on Safeguarding Adults	No
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Item for Decision, Consideration or Information

Consideration

Recommendation

- 1. The Health and Well-being Board is asked to:**
 - a) Note the delivery of Worcestershire's Outbreak Control Plan (OCP), the arrangements for governance and the current situation of Local Outbreak Response Team (LORT) operation.**
 - b) Note the plans for review of future Health Protection Governance and de-escalation of COVID-19 Acute response.**

Background

2. This quarterly report from the COVID-19 Health Protection Board will describe the delivery of the Outbreak Control Plan in Quarter 3 2021.
3. Quarter 3 saw changes in Government Guidance for self-isolation. Individuals who received negative Lateral Flow tests (LFT) results on day six and day seven of their self-isolation period no longer had to self-isolate for the full 10 days as long as

they met a set criteria. Specific guidance applies for people working in health and social care settings.

<https://www.gov.uk/government/publications/covid-19-stay-at-home-guidance/stay-at-home-guidance-for-households-with-possible-coronavirus-covid-19-infection>

Quarter 3 COVID-19 situation

4. As of 1 December 2021, Worcestershire COVID-19 case rate was 496 per 100,000 population which had remained fairly stable in Quarter 3 with delta variant causing most cases. Children and young people had the highest rates of COVID-19 amongst all population groups in Worcestershire, due to spread in education settings and households.
5. Omicron cases began to be detected in Worcestershire during December, with the first case detected in Malvern Hills.
6. As of 14 January 2022, Worcestershire COVID-19 case rate was 1,507 per 100,000 population which has significantly escalated due to COVID-19 omicron variant.
7. Omicron now represents the vast majority of COVID-19 cases in Worcestershire and can spread much more easily than previous variants.
8. Testing regimes have recently changed and confirmatory PCR tests are no longer required after a positive LFT.
9. A reduction in self isolation to five full days with negative lateral flow tests on days five and six will help the economy and organisations with staffing issues, but this is not without risk of additional spread.
10. Due to vaccination, hospitalisations have been kept under control, but do continue to edge upwards. There is currently approximately one hospital admission for every 100 COVID-19 cases in Worcestershire.
11. With such high numbers of COVID-19, people needing care due to COVID-19 will continue to put pressure on the NHS.

Local Outbreak Control Team activity

12. In Quarter 3 the LORT dealt with a total of 1,217 situations and 9,467 individual cases. This was a slight decrease compared to the previous quarter. However, Adult Social Care (ASC) settings saw a significant increase in cases.
13. The number of situations in schools remained similar to Quarter 2. In total there were 457 situations in Quarter 3. There was a slight increase in November 2021 however, this may be due to there being half term breaks in October and December 2021. Schools had the highest number of outbreaks reported to the LORT compared to other settings.
14. Workplace settings experienced a lower number of situations compared to Quarter 2. In Quarter 2 there were 371 situations reported compared to 263 in Quarter 3.

15. ASC settings experienced an increase in cases for Quarter 3. There was a significant rise in December 2021. 140 ASC situations were reported in December 2022 however, 66 were reported in October 2021 and 68 in November. There was also a rise in health care settings in December 2021.

16. Feedback from education colleagues suggests that schools would prefer a lighter touch approach to outbreak management as they have gained significant experience in this during the pandemic. Therefore, a new process was implemented for schools on the return after the Christmas break. However, full support is still available when requested by schools and higher risk settings, such still undergo full risk assessment processes with both LORT and the UK Health Security Agency (UKSHA).

Lateral Flow Testing in schools

17. On 10 November 2021 a new Lateral Flow Mobile Testing Team for schools was implemented.

18. The service attended schools in outbreak and administered LFT on the school site. The aim was to enable earlier identification of positive cases, reducing risk of transmission, and reducing the impact on schools and pupils' education. During Quarter 3 the team visited seven schools and supervised 2,789 tests. There were a total of 17 positive results (0.61%).

Winter preparedness

19. In Quarter 3 winter preparedness toolkits were developed and cascaded to schools and care home settings.

20. The LORT also worked collaboratively with UKHSA and HWCCG to plan for winter and to identify any gaps.

Health protection governance

21. A workshop is being set up to discuss the future of Health Protection governance. The workshop will allow stakeholders to discuss the vision of Health Protection governance going forward and whether potentially merging the Health Protection Sub-Group and COVID-19 Health Protection Board could allow a group that meets the assurance requirements of the Local Authority, but also allows for more dynamic problem solving across the system.

Legal, Financial and HR Implications

22. The Contain Outbreak Management Fund (COMF) was fully allocated for 2021/22, however there has been some natural slippage due to contingency funding not being required and workforce issues. The COMF can now be spent into the 2022/23 financial year. An appropriate and proportionate acute response will remain the priority of the Public Health team. A fully costed acute response de-escalation plan will be presented to COVID-19 Health Protection Board in February 2022. This will decide on a response which satisfies the local needs and can be upscaled to respond to any future variants of COVID-19 if needed. Once this plan has been approved COVID-19 Health Protection Board will reallocate any remaining COMF to

continue to reduce inequalities and protect the most vulnerable against the impacts of COVID-19.

Privacy Impact Assessment

23. As appropriate.

Equality and Diversity Implications

24. A full Equality Impact Assessment has been carried out in respect of the overall Outbreak Control Plan. Impacts and mitigations are described for protected groups. The recommendations will further support action to prevent and control outbreaks that may affect protected groups.

Contact Points

County Council Contact Points

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Worcestershire Hub: 01905 765765

Specific Contact Points for this report

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Background Papers

In the opinion of the proper officer (in this case the Director of Public Health) the following are the background papers relating to the subject matter of this report:

Worcestershire's Outbreak Control Plan:

https://www.worcestershire.gov.uk/info/20769/coronavirus_covid-19/2273/coronavirus_covid-19_outbreak_control_plan