

Cambridgeshire & Peterborough Local Outbreak Engagement Board

Friday, 21st January 2022

1.00p.m.

The meeting will be held virtually via Zoom.

Agenda

Open to public and press

1. Apologies and Declarations of Interests (oral)
[Guidance on declaring interests is available here](#)
2. Notes from the meeting on 26 October 2021 (pages 3 - 13)
3. Public Questions (oral)

Public speaking on the agenda items above is encouraged. Speakers must register their intention to speak no later than 12.00 noon one working day before the meeting
[Registering requests to speak is available here](#)

4. Update on Epidemiology Jyoti Atri
(presentation)
5. Vaccination Uptake Jan Thomas
(Oral)
6. Communication Update Christine Birchall
(Oral)
7. Impact on Economy Val Thomas
(oral)
8. Any Other Business (oral)

The Local Outbreak Engagement Board comprises the following members:

Cambridgeshire County Council – Councillors Howitt & van de Ven
Peterborough City Council – Councillors Fitzgerald & Walsh
Director of Public Health, Executive Director: People and Communities, Service Director:
Adults Social Care & Service Director: Communities and Partnership
Clinical Commissioning Group – Jan Thomas, Gary Howsam, and Louis Kamfer
Cambridgeshire District Councils – Councillor Bill Handley
Chair of Cambridgeshire and Peterborough Healthwatch
Police and Crime Commissioner

For more information about this meeting please contact the
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Agenda Item No.2

**NOTES OF THE CAMBRIDGESHIRE & PETERBOROUGH
LOCAL OUTBREAK ENGAGEMENT BOARD MEETING
HELD AT 3PM ON TUESDAY, 26 OCTOBER 2021
VIRTUAL MEETING VIA ZOOM**

Present:

Cllr Susan van de Ven (Chair)	Chair, Cambridgeshire County Council (CCC) Health and Wellbeing Board
Cllr Irene Walsh	Cabinet Member for Integrated Adult Social Care, Health and Public Health, Peterborough City Council (PCC) CCC
Cllr Wayne Fitzgerald	Leader, PCC
Cllr Richard Howitt	Chair of Adults and Health Committee, CCC
Cllr Bill Handley	District Council Representative
Charlotte Black	Service Director, Adults and Safeguarding (CCC and PCC)
Val Thomas	Consultant in Public Health, CCC
Christine Birchall	Head of Communications and Information, CCC and PCC
Jan Thomas	Accountable Officer, NHS Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)
Jyoti Atri	Director of Public Health, CCC and PCC
Adrian Chapman	Service Director – Communities and Partnerships, CCC and PCC
Sandie Smith	CEO, Healthwatch Cambridgeshire and Peterborough
Gary Howsam	Clinical Chair, CCG
Jim Haylett	CEO, Office of the Police and Crime Commissioner (OPCC)

1. APOLOGIES AND DECLARATIONS OF INTERESTS

Apologies were received from Louis Kamfer (Chief Finance Officer, CCG), Darryl Preston (Police and Crime Commissioner for Cambridgeshire), Stewart Francis (Chair, Healthwatch Cambridgeshire and Peterborough) and Wendi Ogle-Welbourn, Executive Director, People and Communities, CCC and PCC.

There were no declarations of interest.

2. NOTES FROM THE LOCAL OUTBREAK ENGAGEMENT BOARD MEETING HELD ON MONDAY 26 JULY 2021

The notes of the meeting held on 26 July 2021, were approved as a true and accurate record subject to the following amendments:

- Record that Cllr Bill Handley sent his apologies
- Record that Cllr Susan van de Ven chaired the meeting, not Cllr Irene Walsh

3. PUBLIC QUESTIONS

No public questions were received.

4. UPDATE ON EPIDEMIOLOGY

The Director of Public Health, CCC and PCC, provided an epidemiology update to the Board. Presentation Slides may be found in Appendix 1.

The Local Outbreak Engagement Board debated the update and in summary, key points raised and responses to questions included:

- Members asked if anti-vaccination campaigners were having a negative impact on vaccination rates. Officers responded that despite some instances of protests at schools and community events, they were confident that they were having little effect on vaccine uptake. Measures to prevent anti-vaccination campaigns in schools were being pursued at the national level.
- Members asked if the vulnerability of booster vaccine recipients was being recorded in the same way as it had been for the first two doses. Officers responded that they would circulate this information to members of the Board. The booster programme was very different to the initial vaccination programme as it was heavily dependent on timing. There was some minor confusion regarding the difference between booster doses and third doses for the immunosuppressed. Take up was lower for the booster compared with the first two doses.

ACTION AGREED:

It was agreed that the Accountable Officer, CCG would provide the Committee with information on the vulnerability of booster vaccine recipients.

5. VACCINATION UPTAKE

The Service Director – Communities and Partnerships, CCC and PCC gave a presentation on vaccination uptake, with a particular emphasis on vaccine confidence work. Points raised included:

- The excellent work of health partners in delivering the vaccine programme was highlighted. Vaccine confidence work focussed on the minority of the population who were hesitant.
- Bookable sites, walk-in sites, pop-up sites and buses were used to deliver vaccinations. 'Hyper-local' provision was provided in addition to the core CCG-led facilities.
- There were three categories of unvaccinated people; those who had caught COVID-19 with low-level symptoms, those facing practical difficulties (e.g., transport and childcare) and those who were hesitant (e.g., believing vaccine myths, needle and phobia). This was the largest category.
- Promotional campaigns were undertaken prior to community vaccination events. Local leaders (e.g. faith groups) were also engaged with.
- Members were encouraged to make suggestions as to where vaccine buses and pop-up centres should be located.
- Additional measures included 15 community workers, multilingual communications and 'Making Every Contact Count' training.
- People were encouraged to contact the COVID hub to seek assistance with practical barriers to vaccination. Their phone number was 03450 455219.
- The coronavirus.data.gov.uk enabled community leaders to monitor vaccine take-up in their areas.

The Local Outbreak Engagement Board debated the presentation and in summary, key points raised and responses to questions included:

- Members asked what was being done to support those who were housebound and reluctant to access community transport. Officers responded that this highlighted the importance of taking into account community intelligence to provide alternative options. CCG colleagues added that support was provided from a combination of community service providers and GPs to use the same vehicles used during the rollout of first and second doses. These people could easily be identified for boosters based on data from their first and second jabs. Members praised the CCG's response to issues raised in this area.
- Members requested an update on the rollout of vaccines to 12 to 15-year-olds and an update on the booster programme. Officers responded that the 12 to 15 programme had been delivered through a contract with Hertfordshire Community Services. Due to capacity issues with this, the CCG had made walk in centres available to this age group. Regarding boosters, officers commented that a key concern was delivering booster vaccines to residential and care homes. There was a plan for every care home to be visited by November.
- Booster doses were recorded on both the NHS app and GP online systems, where available. It was agreed that the Accountable Officer, CCG would provide more information on this to the Board after the meeting.
- Vaccination data received the same level of protection as other medical records.
- Officers commented the effective use of targeted data had been highlighted by the pandemic and there could be benefits of expanding this

further. Members agreed, stating that barriers to data sharing between public sector partners needed to be removed. Members were more comfortable about sharing data when they understood how it would be used.

- While praising the vaccination programme, Members asked to what extent uptake could be improved further. Officers responded that as long as small gains continued to be made, work to promote vaccine uptake needed to continue. The biggest challenge was addressing myths on social media. A great deal had been learnt regarding how to promote vaccines which could be used in future rounds of vaccinations. Vaccine fatigue might be an issue for future rounds of the programme.
- Members commented that the vaccination programme since September had been delivered at a time when pre-COVID behaviour had returned to schools, which had since been somewhat rectified.
- Members praised local communications work.

ACTION AGREED:

- The Accountable Officer, CCG to provide more information on the recording of booster vaccinations on the NHS app and GP online systems.

6. COMMUNICATION UPDATE

The Head of Communications and Information, CCC and PCC provided a Communications Update. Points raised included:

- The best way to promote vaccines was to have this information delivered from trusted sources, e.g. community leaders.
- New toolkits enabled local leaders to understand the situation in their areas.
- Bespoke toolkits had been deployed for specific events, e.g. Halloween, to help people enjoy them safely.
- Workplace campaigns had been undertaken in high-risk industries, e.g. distribution, care homes and hospitality.
- Collaborative work had been undertaken with public sector partners, including on the website thevaccinators.co.uk.
- There was a focus on providing targeted measures to help hesitant people.
- The 'Working into the autumn and winter' campaign would be refreshed with a new pledge for both public sector partners and residents.

There were no questions from Board members.

7. ECONOMY IMPACT

The Consultant in Public Health, CCC provided an update on the economic impact of COVID-19. Points raised included:

- The pattern of workplace outbreaks had shifted towards smaller outbreaks at a larger number of organisations.

- There had been a large number of outbreaks in the infrastructure sector (e.g. food production and utilities) where vaccination rates were lower.
- COVID-19 outbreaks were having a significant impact on businesses, e.g. through staff shortages, supply chain issues and uncertainty about future national restrictions. Communicating COVID-19 mitigation measures to businesses became more challenging when organisations were subject to these pressures but this work continued to take place.

The Local Outbreak Engagement Board debated the presentation and in summary, key points raised and responses to questions included:

- Members requested information on the impact of COVID-19 on health workplaces, e.g. GPs surgeries. Officers responded that hospital admissions for COVID-19 continued to increase and occupancy rates were high. There were pressures relating to staff illness and fatigue. Activities were underway to support staff, e.g. flexible working, but staffing was a major challenge across the whole health and social care system and addressing this was a key priority.
- Regarding primary care, officers stated that this service had remained open throughout the pandemic despite operating in different ways to maintain patient safety. The number of face to face appointments had dropped from 80% to 20-30% and then returned to approximately 65%. This reflected a good balance. 11% more appointments were being offered across Cambridgeshire and Peterborough than before the pandemic. GP workstreams included 'business as usual' (including ramping up services to address winter pressures), caring for people on waiting lists for hospital services and promoting flu vaccinations. There were also staff pressures in primary care. Concerns were raised about abuse directed at general practice staff and the Board condemned such behaviour. Members suggested a communications campaign should be undertaken to help tackle this.
- Members praised officers' promotion of the 'Be Kind' campaign.
- Members highlighted the importance of public sector organisations promoting the recovery from the pandemic. Officers responded that staff in the CCG had been undertaking work in this area and it was acknowledged that there needed to be better integration between this work and work being undertaken over the next few months.

8. ANY OTHER BUSINESS

None.



Epidemiology Review

Cambridgeshire and Peterborough

25th October 2021

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All-age incidence has reduced in East Cambridgeshire, Huntingdonshire, and Peterborough in the most recent week. Peterborough has the highest all-age 7 day incidence rate. Cambridgeshire & Peterborough, substantially higher than regional and national averages.



Incidence data						
Area	Weekly Incidence (cases/100,000) & trend vs previous 7 days	7-day change in case rate (%)	Weekly incidence - 60+ years (cases per 100,000) & trend vs previous 7 days	Weekly incidence - 11-16 years (cases per 100,000) & trend vs previous 7 days	Incidence Doubling (+) / Halving Rate (-) days	
Data to date:	19-Oct	19-Oct	19-Oct	17-Oct	17-Oct	
Cambridge	303.0 ↑	27.2%	101.0 ↓	1,383 ↑	19 ↑	↑
East Cambridgeshire	574.5 ↓	-1.1%	225.0 ↓	2,131 ↑	-63 ↓	↓
Fenland	602.5 ↑	2.0%	301.4 ↑	2,647 ↓	-3875 ↓	↓
Huntingdonshire	534.7 ↓	-9.7%	192.0 ↑	2,106 ↓	-90 ↓	↓
South Cambridgeshire	526.4 ↑	5.3%	170.6 ↑	2,578 ↑	45 ↑	↑
Cambridgeshire	504.6 ↑	0.8%	199.5 ↑	-	224 ↑	↑
Peterborough	665.8 ↓	-2.2%	245.4 ↑	2,937 ↓	127 ↑	↑
EAST OF ENGLAND	515.8 ↑	16.8%	195.2 ↑	2,116 ↑	-	-
ENGLAND	482.9 ↑	17.6%	218.5 ↑	1,875 ↑	-	-

NOTE: Provisional adjusted weekly incidence rates are subject to change with the inclusion of additional cases on subsequent days. Figures are rounded to nearest whole number to account for possible minor discrepancies with national data.



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Source: Coronavirus.data.gov.uk

Case rates have increased nationally in the latest week across many LTLAs – the age 7 day incidence are listed below.

All indicators for the last 7 days (09 October 2021 to 15 October 2021)

Jyoti Atri, Dir...

Region	LTLA	Individuals tested per day per 100,000 population		Percentage individuals test positive	Percentage individual cases reporting symptoms		Case rate per 100,000 population, all ages	Case rate per 100,000 population aged 60 years and over	Case rate per 100,000 population aged 11-16yrs	Case rate per 100,000 population aged 17-21yrs	Community outbreaks	Newly confirmed cases		
		7-day moving average	7-day change, %	Weekly change, %	7-day change, %	Weekly, 7-day change, %	Weekly	3 week trend	7-day change, %	Weekly change, %	Weekly, 7-day change, %	Weekly change, %	Last 7 days	Last 7
South West	Bath and North East Somerset	744.9	+5.9%	18.7%	+221.2%	50.2% +10.3%	877.0		236.4%	312.5 +184.0%	4590.6 +211.8%	230.8 +223.0%	2	1,722
South West	Somerset West and Taunton	960.0	+7.7%	13.1%	+129.8%	42.7% +10.3%	873.1	+138.8%	231.6 +116.4%	4048.8 +117.3%	530.7 +80.0%	3	1,357	
East of England	Ipswich	960.3	+9.0%	12.9%	+10.3%	50.7% +1.8%	865.6	+22.1%	278.4 +16.4%	3837.1 +7.8%	559.7 +21.9%	3	1,177	
South West	Mendip	738.4	-1.3%	19.8%	+79.3%	49.3% -1.2%	816.9	+81.3%	273.1 +106.4%	3625.7 +65.8%	561.4 +66.7%	4	950	
South West	Stroud	681.7	+13.0%	13.9%	+367.6%	47.4% +10.2%	784.1	+447.9%	215.4 +208.2%	3999.1 +390.0%	473.5 +188.8%	2	948	
South West	Cheltenham	710.9	+10.9%	15.8%	+477.8%	53.2% +78.5%	775.6	+439.2%	216.3 +236.8%	4296.9 +618.6%	443.8 +357.1%	0	900	
South East	Gosport	860.3	+13.1%	13.1%	+33.7%	49.5% +2.7%	771.1	+49.4%	336.9 +79.1%	3163.8 +52.8%	517.5 +20.0%	5	693	
East Midlands	West Lindsey	791.5	+12.5%	14.2%	+19.3%	55.2% +10.8%	756.9	+29.9%	186.3 +16.0%	3832.9 +21.9%	319.5 +48.0%	1	730	
South East	Winchester	1038.3	+13.3%	10.6%	+30.9%	48.9% +6.1%	757.6	+45.4%	178.1 +23.9%	3971.3 +66.1%	319.0 +121.5%	2	954	
South West	Wiltshire	727.4	+6.2%	14.4%	+94.6%	48.7% +3.0%	738.2	+108.6%	229.7 +87.6%	3945.2 +108.8%	350.9 +39.6%	6	3,721	
Yorkshire and Humber	Harrogate	883.9	+3.9%	11.9%	+12.3%	51.0% +2.8%	731.7	+18.5%	260.3 +34.4%	3556.9 +23.3%	546.6 +105.3%	1	1,182	
South West	Swindon	673.8	+1.6%	19.3%	+255.9%	54.2% +31.6%	730.9	+241.8%	266.1 +296.7%	3177.2 +280.7%	506.9 +130.8%	2	1,629	
West Midlands	Staffordshire Moorlands	807.1	+10.4%	12.1%	+12.9%	52.6% +1.9%	730.5	+25.3%	348.5 +19.3%	3507.7 +53.3%	315.3 +7.7%	0	719	
North West	Copeland	822.2	+6.6%	12.6%	+7.7%	45.3% +0.2%	723.1	+15.8%	415.3 +8.9%	2418.6 -7.1%	480.4 +40.0%	2	492	
North West	Wyre	788.4	+9.8%	13.2%	+24.5%	56.5% +2.7%	717.3	+38.2%	413.5 +76.3%	2205.2 +7.3%	311.9 +28.6%	1	811	
East Midlands	North East Derbyshire	682.6	+10.3%	18.2%	+29.9%	53.7% -3.8%	716.1	+40.6%	362.9 +87.3%	3120.2 +32.9%	453.4 +17.8%	1	732	
North West	Cheshire East	913.9	+10.0%	11.4%	+15.2%	50.1% -3.7%	714.6	+26.5%	284.5 +32.4%	3095.5 +23.3%	510.5 +46.6%	1	2,783	
West Midlands	Cannock Chase	752.4	+8.8%	12.8%	+4.1%	51.8% +1.4%	707.5	+16.0%	308.7 +64.6%	2557.4 -6.3%	561.8 +12.5%	0	718	
South West	Tewkesbury	600.7	+19.3%	15.8%	+507.7%	53.1% +18.3%	691.3	+826.2%	183.5 +355.3%	4016.7 +1133.3%	421.1 +239.9%	1	668	
West Midlands	Lichfield	828.6	+12.5%	12.0%	-0.8%	47.4% +1.3%	690.1	+12.9%	297.4 +35.7%	2872.2 +3.6%	480.5 +43.8%	0	729	
England		703.0	+1.3%	8.3%	+19.2%	52.1% -0.6%	447.9	+21.8%	199.4 +27.9%	1796.9 +19.9%	270.0 +17.1%	345	253,269	

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Data available on coronavirus.data.gov.uk

Case rates have increased nationally in the latest week across many areas – 20 with >10% increase in weekly case rates are listed below

All indicators for the last 7 days (09 October 2021 to 15 October 2021)

Jyoti Atri, Dir...

Region	LTLA	Individuals tested per day per 100,000 population		Percentage individuals test positive		Percentage individual cases reporting symptoms		Case rate per 100,000 population, all ages		Case rate per 100,000 population aged 60 years and over		Case rate per 100,000 population aged 11-16yrs		Case rate per 100,000 population aged 17-21yrs		Community outbreaks	Newly confirmed cases
		7-day moving average	7-day change, %	Weekly change, %	7-day change, %	Weekly change, %	7-day change, %	Weekly change, %	3 week trend	7-day change, %	Weekly change, %	7-day change, %	Weekly change, %	7-day change, %	Weekly change, %		
South West	North Somerset	736.0	+4.8%	12.3%	+296.8%	48.1%	+40.6%	840.2	+293.2%	223.5	+217.5%	2819.7	+378.1%	458.2	+183.3%	2	1,380
South East	West Berkshire	991.5	+3.0%	13.4%	+162.7%	44.4%	-12.8%	853.1	+167.4%	178.1	+114.6%	2852.2	+132.9%	319.9	+82.2%	5	1,035
South West	Sedgemoor	719.8	+0.5%	15.3%	+188.1%	47.7%	+20.2%	872.4	+166.9%	212.8	+97.6%	3177.3	+182.3%	326.7	+58.3%	2	830
South West	South Somerset	749.2	+5.5%	12.4%	+100.0%	49.6%	+9.9%	840.9	+169.2%	204.4	+105.4%	3301.3	+125.9%	339.2	+19.1%	1	1,081
South East	Surrey Heath	813.5	+4.3%	11.4%	+54.1%	45.3%	-4.0%	839.0	+80.1%	180.2	+42.4%	2926.5	+41.8%	370.9	+50.0%	0	570
South East	Woking	907.2	+13.6%	19.7%	+35.4%	48.0%	+5.7%	858.9	+52.2%	177.9	+95.3%	3182.9	+23.3%	352.4	+36.4%	2	659
South East	Wokingham	865.6	+9.8%	11.2%	+36.6%	41.6%	-12.8%	870.9	+50.6%	181.5	+18.2%	2789.6	+24.7%	255.4	-4.3%	1	1,167
East Midlands	Rutland	748.2	+12.3%	11.9%	+25.5%	47.1%	+5.4%	827.5	+44.3%	207.3	+286.0%	3851.1	+43.4%	353.4	+20.0%	0	254
East Midlands	South Kesteven	720.6	+12.4%	13.8%	+19.3%	47.0%	+7.3%	883.5	+36.7%	131.8	+28.6%	3497.2	+23.5%	479.0	+107.1%	1	979
North East	North Tyneside	689.4	+12.8%	13.8%	+20.4%	53.3%	-4.1%	848.2	+35.9%	326.3	+38.6%	2444.2	-45.2%	323.2	+36.4%	1	1,354
Yorkshire and Humber	Rotherham	645.7	+8.7%	18.6%	+15.9%	60.3%	-3.7%	840.9	+26.5%	360.7	+31.6%	2153.0	+26.1%	495.0	+88.6%	0	1,698
South East	Eastleigh	960.8	+7.2%	15.4%	+18.2%	51.6%	-5.5%	887.0	+24.6%	252.7	+57.2%	2452.6	+2.5%	389.7	+85.0%	2	931
North West	Warrington	806.3	+8.8%	11.7%	+12.5%	54.9%	-2.5%	836.6	+22.0%	278.0	+21.7%	2572.1	+19.1%	360.4	+12.6%	1	1,333
East Midlands	Rushcliffe	737.7	+10.2%	12.8%	+9.4%	53.3%	-1.3%	852.3	+21.1%	188.0	+25.0%	3294.0	+25.5%	358.7	+81.7%	1	792
North West	Chorley	754.4	+4.3%	12.8%	+12.5%	52.6%	-4.4%	853.7	+19.4%	283.9	+44.3%	2888.5	+19.0%	326.7	+21.4%	2	777
East Midlands	Bolsover	886.5	+6.0%	14.5%	+9.8%	62.3%	+5.6%	867.9	+15.1%	272.8	+18.0%	1831.8	-26.3%	307.1	-14.3%	1	543
East Midlands	Derbyshire Dales	871.1	-3.2%	13.9%	+13.9%	48.4%	+6.6%	837.9	+13.2%	268.4	+65.9%	3411.5	-3.6%	474.1	+180.0%	0	482
East of England	Peterborough	739.6	+7.0%	13.4%	+3.9%	48.1%	+1.7%	885.5	+12.4%	225.0	+30.0%	3169.7	-2.7%	652.2	+33.3%	2	1,389
West Midlands	Wyre Forest	781.0	-1.4%	11.9%	+15.5%	54.2%	+7.8%	838.7	+12.4%	206.4	+14.0%	3277.4	+6.0%	357.4	0.0%	0	644
East Midlands	High Peak	746.9	+7.8%	13.4%	+4.7%	54.8%	+0.4%	874.7	+11.0%	241.7	+82.8%	2824.9	-7.4%	333.4	0.0%	0	625
England	England	703.0	+1.3%	8.3%	+19.2%	52.1%	-0.6%	447.9	+21.8%	199.4	+27.9%	1796.9	+19.9%	270.0	+17.1%	345	253,269

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Data available on coronavirus.data.gov.uk

Case rates have increased nationally in the latest week across many areas – 20 for 7 day incidence rates in 60+ are listed below

All indicators for the last 7 days (09 October 2021 to 15 October 2021)

Region	LTLA	Individuals tested per day per 100,000 population		Percentage individuals test positive		Percentage individual cases reporting symptoms		Case rate per 100,000 population, all ages		Case rate per 100,000 population aged 60 years and over		Case rate per 100,000 population aged 11-16yrs		Case rate per 100,000 population aged 17-24yrs		Community outbreaks	Newly confirmed cases
		7-day moving average	7-day change, %	Weekly	7-day change, %	Weekly	7-day change, %	Weekly	3 week trend	7-day change, %	Weekly	7-day change, %	Weekly	7-day change, %	Weekly	7-day change, %	Last 7 days
North West	Copeland	822.2	+ 6.6%	12.8%	+ 7.7%	45.3%	+ 0.2%	723.1	+ 15.8%	415.3	+ 8.9%	2416.6	-7.1%	460.4	+ 40.0%	2	492
North West	Wyre	788.4	+ 9.8%	13.2%	+ 24.5%	56.5%	+ 2.7%	717.3	+ 38.2%	413.5	+ 76.3%	2205.2	+ 7.3%	311.9	-28.6%	1	811
Yorkshire and Humber	Barnsley	637.2	+ 3.3%	14.8%	+ 0.7%	56.9%	-5.0%	626.8	+ 3.6%	372.0	+ 15.4%	2042.9	-8.9%	470.1	+ 8.0%	0	1,555
East Midlands	North East Derbyshire	682.6	+ 10.3%	15.2%	+ 29.9%	53.7%	-3.8%	716.1	+ 40.8%	362.9	+ 87.3%	3120.2	+ 32.9%	453.4	+ 17.8%	1	732
Yorkshire and Humber	Rotherham	645.7	+ 8.7%	14.6%	+ 15.9%	60.3%	-3.7%	640.6	+ 28.5%	360.7	+ 31.9%	2153.0	+ 28.1%	495.0	+ 88.6%	0	1,698
West Midlands	Stoke-on-Trent	717.1	+ 6.6%	11.1%	+ 0.9%	57.0%	+ 8.8%	536.9	+ 5.6%	351.6	+ 35.5%	1458.5	-22.3%	336.9	+ 32.5%	3	1,383
West Midlands	Staffordshire Moorlands	807.1	+ 10.4%	13.1%	+ 12.9%	52.6%	+ 1.9%	730.5	+ 25.3%	348.5	+ 10.3%	3507.7	+ 53.3%	315.3	+ 7.7%	0	719
North East	Hartlepool	526.8	+ 9.7%	8.3%	+ 13.4%	56.9%	+ 4.4%	343.2	+ 23.9%	348.3	+ 80.8%	799.3	+ 5.9%	162.7	-42.9%	2	322
East Midlands	Bassetlaw	666.9	-3.3%	13.7%	+ 0.7%	52.3%	-5.9%	652.7	+ 3.1%	341.7	+ 12.5%	2538.0	-5.2%	633.5	+200.0%	0	772
South East	Gosport	866.3	+ 13.1%	13.1%	+ 33.7%	49.5%	+ 2.7%	771.1	+ 49.4%	336.9	+ 78.1%	3163.6	+ 52.8%	517.5	+ 20.0%	5	653
North East	North Tyneside	689.4	+ 12.6%	13.6%	+ 20.4%	53.3%	-4.1%	648.2	+ 35.5%	328.3	+ 38.6%	2444.2	+ 45.2%	323.3	+ 38.4%	1	1,354
Yorkshire and Humber	Calderdale	602.2	-1.9%	15.3%	+ 5.1%	58.1%	0.0%	589.8	+ 4.1%	321.9	+ 10.4%	1831.2	+ 0.4%	338.2	+ 9.4%	1	1,247
East of England	Fenland	675.1	-3.2%	12.6%	+ 5.9%	45.8%	-3.2%	564.6	+ 4.5%	321.3	+ 102.1%	2648.6	-10.0%	431.7	-25.9%	0	607
North West	Allerdale	704.6	-8.4%	10.6%	-15.2%	51.4%	-11.7%	541.8	-16.0%	318.5	-18.0%	1664.3	-6.2%	382.4	0.0%	0	530
West Midlands	Nuneaton and Bedworth	729.3	-9.0%	13.5%	-1.5%	52.9%	+ 2.3%	661.6	-0.2%	317.7	+ 26.8%	2126.7	-29.8%	514.3	+ 18.5%	0	863
North West	Barrow-in-Furness	757.7	-13.4%	10.3%	-18.9%	54.8%	+ 2.0%	566.5	-22.9%	318.7	+ 7.1%	2125.3	-22.6%	677.9	-17.9%	0	398
North West	Blackpool	803.5	+ 4.6%	9.9%	+ 15.1%	54.9%	+ 5.2%	535.5	+ 18.4%	315.7	+ 9.2%	1514.7	+ 21.0%	365.9	+ 31.6%	3	741
North West	Rossendale	623.0	+ 5.0%	10.8%	+ 6.9%	58.4%	-8.3%	459.2	+ 12.7%	313.5	+ 60.0%	1254.4	+ 17.5%	194.8	0.0%	0	328
South West	Bath and North East Somerset	744.9	+ 5.9%	16.1%	+221.2%	50.2%	+10.3%	677.0	+238.4%	312.5	+184.6%	4590.8	+211.9%	210.6	+223.0%	2	1,722
West Midlands	Cannock Chase	792.4	+ 9.8%	12.8%	+ 4.1%	51.8%	+ 1.4%	707.5	+ 16.0%	308.7	+ 54.0%	2557.4	-6.3%	561.8	+ 12.5%	0	716
	England	703.0	+ 1.3%	8.2%	+ 19.2%	52.1%	-6.6%	447.9	+ 21.8%	199.4	+ 27.9%	1796.9	+ 19.9%	270.8	+ 17.1%	345	253,269

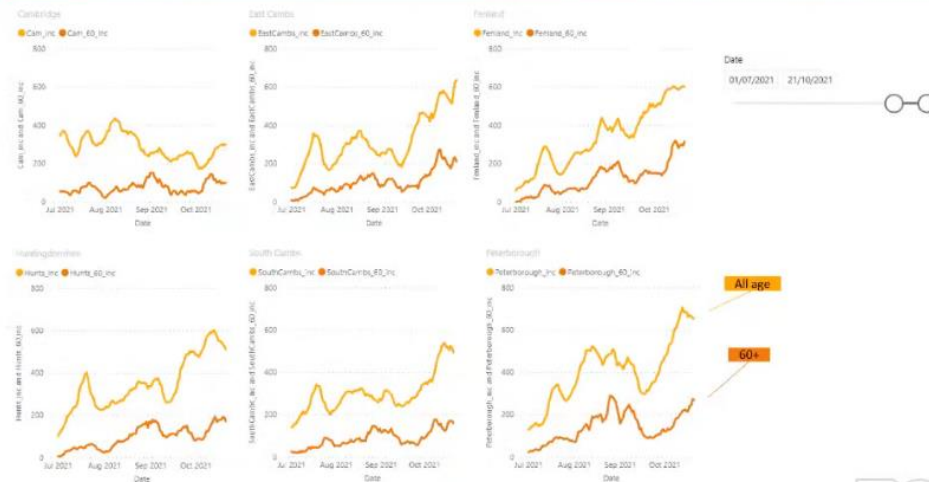
Jyoti Atri, Dir...

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Data available on coronavirus.data.gov.uk

All-age 7 day incidence is now as high as it has been over the course of the Covid-19 pandemic in Cambridgeshire, but has reduced in all other areas of Cambridgeshire and Peterborough, except...

LTLA incidence

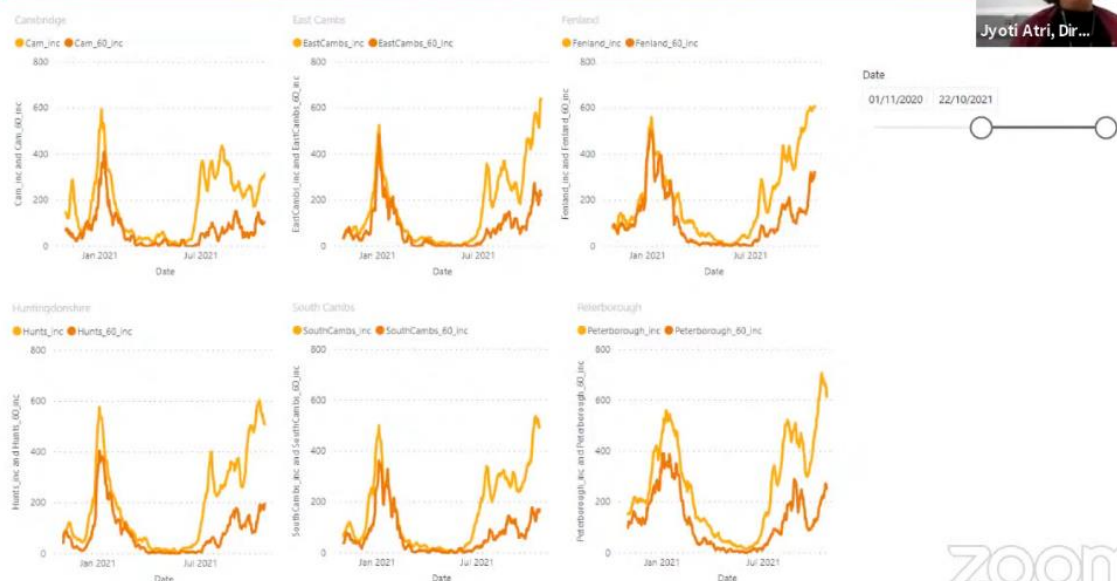


Data will be added to the last few days – potentially affecting trends- data provided to 21/10.

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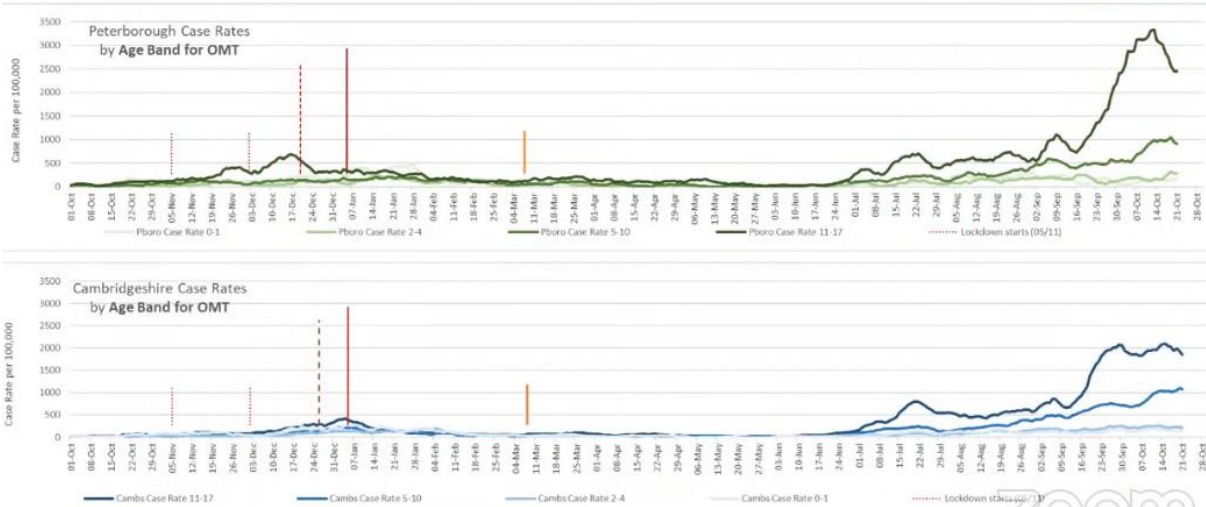
Source: Coronavirus.data.gov.uk

LTLA incidence



Data will be added to the last few days – potentially affecting trends- data provided to 22/10

47% of cases in the last week are aged 0-17 across Cambridgeshire and Peterborough. A rapid increase is observed in 11-17 year olds since schools reopened, with a significant increase in primary and college age groups.



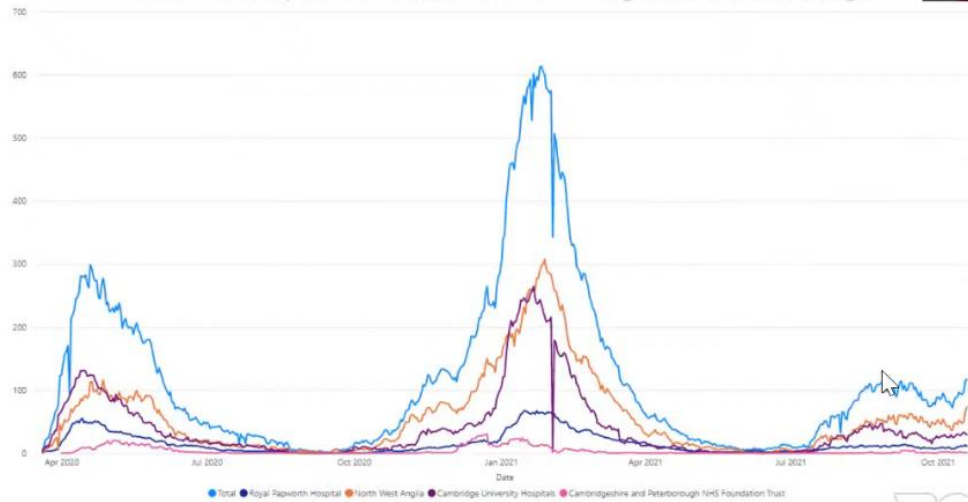
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Source Coronavirus.data.gov.uk

In-hospital patient numbers had a slight decline towards the end of September, but numbers are increasing again.



Patients in Hospital with COVID-19 for Cambridgeshire & Peterborough



zoom

OFFICIAL Source: NHS Digital, <https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-hospital-activity/>, Weekly Admissions and Beds, Data to the 19 October 2021

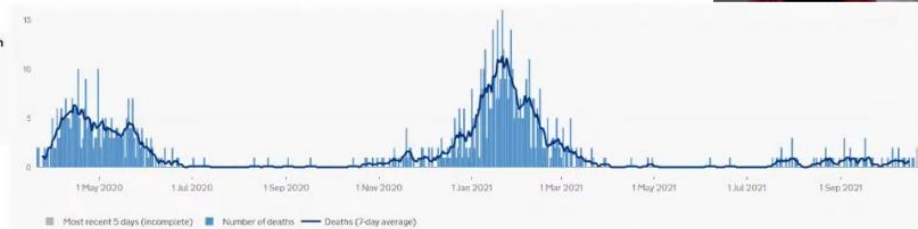
Mortality rates in Cambridgeshire and Peterborough have recently increased. 31 deaths have occurred within 28 days of a positive test in Cambridgeshire and 20 have occurred in Peterborough since 01/09/2021.



Cambridgeshire

Deaths within 28 days of positive test by date of death

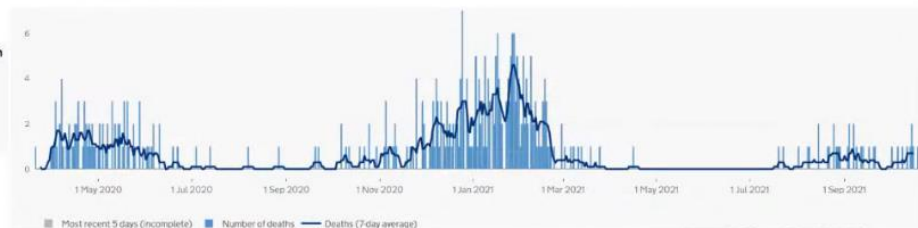
Number of deaths of people who had had a positive test result for COVID-19 and died within 28 days of the first positive test. Data from the four nations are not directly comparable as methodologies and inclusion criteria vary. Data for the period ending 5 days before the date when the website was last updated with data for the selected area, highlighted in grey, is incomplete.



Peterborough

Deaths within 28 days of positive test by date of death

Number of deaths of people who had had a positive test result for COVID-19 and died within 28 days of the first positive test. Data from the four nations are not directly comparable as methodologies and inclusion criteria vary. Data for the period ending 5 days before the date when the website was last updated with data for the selected area, highlighted in grey, is incomplete.



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Please note the y-axis on the charts have different values

Source: Coronavirus.data.gov.uk, data updated 24 October

Vaccination rates are below the targeted 80% threshold in young people and young age groups and below the England average for all age groups in Peterborough



First dose

Age band	Peterborough	Cambridgeshire	East of England	England
12_15	8.9%	21.5%	24.4%	20.3%
16_17	48.4%	68.6%	62.8%	58.3%
18_24	56.4%	68.4%	70.2%	66.7%
25_39	57.2%	67.3%	70.5%	67.9%
40_49	70.8%	80.4%	82.0%	79.5%
50_59	81.5%	88.7%	89.5%	87.8%
60+	89.7%	94.2%	94.5%	93.5%

- Statistically significantly lower than England average
- Statistically similar to the England average
- Statistically significantly higher than England average

Total percentage of people who have received a COVID-19 vaccination, by dose, up to the latest day on which vaccine data were reported. Daily figures include all vaccines that were given up to and including the date shown, and that were entered on the relevant system at the time of extract. NIMS denominator.

200m

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Source: Coronavirus.data.gov.uk – Last updated on Wednesday 24 October 2021 at 4:00pm