

## COVID-19 HIGHLIGHT REPORT

<b>SERVICE AREAS:</b>	Public Health
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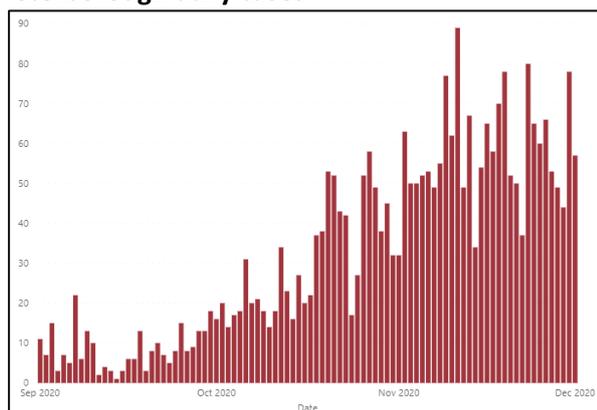
### NEW GUIDANCE AND IMPACT

- **Implementation of the new national Tier system and guidance on Tier 2 restrictions**  
Increased queries to public health directorate on interpretation of the guidance  
Work with the communications team on key messages for the public - with a focus on keeping social contact with people you do not live with as low as possible, and the Tier 2 requirement not to mix socially indoors with people outside your household or support bubble.
- **Guidance on Christmas bubbles during 23<sup>rd</sup> -27<sup>th</sup> December**  
Work with the communications team on key messages for the public - following national guidance that particularly where there are elderly or vulnerable people involved, virtual contact is safest, followed by outdoors. If meeting indoors make a Covid-safety plan in advance.
- **Guidance on locally led Lateral Flow testing**  
Establishing the infrastructure and clinical governance arrangements for locally led lateral flow testing to satisfy Department of Health and Social Care (DHSC) criteria, and to start delivery of targeted local rapid testing in December.
- **DHSC Guidance on care home visiting and use of Lateral Flow Tests**  
We have sent a joint letter to care homes to clarify the local authority position that lateral flow tests are an additional safeguard, but that other precautions such as PPE, social distancing etc should be maintained after a test. This is because of evidence that if someone has Covid-19, then in 'real world' circumstances, the lateral flow test may only identify the infection in 50-60% of cases.
- **Guidance on Covid-19 vaccination using the Pfizer vaccine**  
The approval of the Pfizer vaccine and implementation of a national vaccination programme is excellent news, and could see the impact of Covid-19 genuinely changing in two or three months time. There is a large volume of related guidance, mainly for the NHS.  
Public health advice is that it will take time to vaccinate enough people to impact on population outcomes and NHS pressures, so at this point in time it is essential that everyone sticks to Tier 2 restrictions and covid-safe behaviours.  
We have worked with the CCG and LA Community Hub to develop public health guidance on Covid-safe transport to vaccination sites
- **Guidance and national publicity materials on aerosol transmission of Covid-19 and the importance of ventilation**  
This evidence that Covid-19 aerosols can build up over time, particularly in less well ventilated rooms, has led to revision of the Council's policy on face coverings in meeting rooms and other shared indoor spaces, where staff meet people they don't normally mix with.  
We have also ensured a stronger focus on ventilation in messaging to the public
- **SAGE evidence summaries** on Covid-19 transmission, promoting social interventions through behaviour change, and promoting Covid-safe behaviours with young people  
We have shared these summaries of SAGE evidence with partners through the Health Protection Board to inform local action plans.

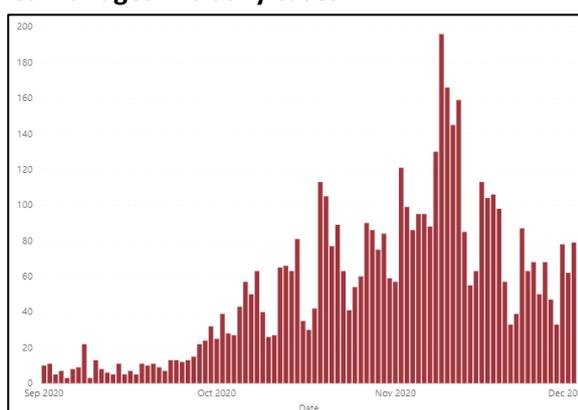
## NEW CHALLENGES AND ACTIVITY

### Epidemiology

#### Peterborough daily cases



#### Cambridgeshire daily cases



**Please note different scales on the two graphs**

The number of Covid-19 cases in Cambridgeshire and Peterborough saw a rise from the start of lockdown through to mid-November, which is likely to have resulted from increased social contact just before lockdown on Nov 5<sup>th</sup>, and then transmission of Covid-19 at home within households. A significant part of this rise was among students and young people in Cambridge City, but it was present in all areas of the county.

There was then a fall in case numbers through to the end of November in Cambridgeshire, and stabilisation (no rise or fall) in cases in Peterborough. Within Cambridgeshire the fall in cases was more marked in Cambridge City, Huntingdonshire and South Cambridgeshire, and in Fenland and East Cambridgeshire the cases stabilised.

A slight uptick in cases in Cambridgeshire has been seen at the start of December, too early to be the result of moving from lockdown into Tier 2. However the overall case rate for the Cambridgeshire is still well below national and regional averages. In Peterborough, cases are above the national and regional average. In both areas there has been an increase in cases admitted to hospital, which places pressure on the local NHS, and a small rise in local deaths from Covid-19.

#### Weekly Covid-19 case rates per 100000

	PHE adjusted Weekly Incidence (cases/100,000) & trend vs previous 7d	
Data to date	02-Dec	
Cambridge	64.9	↓
East Cambridgeshire	67.9	↑
Fenland	108.0	↑
Huntingdonshire	48.3	↓
South Cambridgeshire	48.4	↑
Peterborough	203.2	↑
<b>EAST OF ENGLAND</b>	126.3	↑
<b>ENGLAND</b>	148.7	↓

#### Local Action Plans

All District and City Councils in Cambridgeshire have been developing their Local Action Plan for Covid-19, for joint sign-off by the DPH and District/City Council Chief Executive. This covers a range of actions including local communications and community engagement, prevention and enforcement work with local businesses, support for vulnerable people and those self-isolating, and the District/City Council contribution to contact tracing. Each District/City Council has a weekly 'Gold' meeting, and public health staff attend in order to share the detailed epidemiology for that District/City Council area, to support rapid response and action planning. The District/City Councils have been asked to prepare a financial plan

alongside their Local Action Plan, for which delivery will be funded by the Contain Outbreak Management Fund (COMF) allocation to Cambridgeshire. Peterborough City Council has also prepared and is delivering a comprehensive Local Action Plan to address the higher rates of Covid-19. This is led by the Peterborough Rapid Response Team, and funded by the COMF allocation.

### **Revision of the Cambridgeshire and Peterborough Local Outbreak Control Plan Action Plan**

A review of the Action Plan put in place when the Local Outbreak Control Plan for Cambridgeshire and Peterborough was first approved on 30<sup>th</sup> June, found that over 90% of actions planned had now been achieved. The Action Plan has therefore been revised with a focus on (a) further strengthening existing outbreak prevention and control activities (b) communications and community engagement (c) further developing and strengthening testing and contact tracing locally (d) engagement with business (e) programme management.

### **Launch of Local Enhanced Contact Tracing in Cambridgeshire**

The Cambridgeshire and Peterborough local enhanced contact tracing service was launched on 19<sup>th</sup> November, and builds further on the pre-existing and successful Peterborough model. The service follows up people who have tested positive for Covid-19 who the national Test and Trace service have not been able to contact. It is a collaboration across the County Council, Peterborough City Council and all five District and City Councils in Cambridgeshire, with a shared rota to enable seven day working. From the latest data, 70% of cases handed to the local team by the national Test and Trace Service have been successfully followed up locally.

### **Pilot of access to testing for vulnerable people**

We have improved access to Covid-19 testing for some of our most vulnerable residents through working with the Department of Health and Social Care on a pilot project, including work with homeless hostels, refuges, and drug and alcohol services to supply swabs which can be used immediately to test clients who report Covid-19 symptoms.

### **Development of locally led rapid lateral flow testing**

We have developed a local model to use rapid lateral flow testing alongside 'backwards contact tracing' to identify and test clusters of Covid-19 cases and identify their source. This model will be brought to implementation over December, with significant work required to satisfy DHSC requirements for delivery of lateral flow tests, to put infrastructure in place, and to recruit staff.

### **Work with universities**

There has been ongoing close work with both Cambridge University and Anglia Ruskin University, and public health staff have attended operational Covid-19 management meetings on a daily basis. Student outbreaks have been well managed and by the end of term, the rate of Covid-19 cases amongst students was low.

### **Outbreak management**

Public health continues to work closely with other directorates and partner agencies on the day to day management of Covid-19 outbreaks in school and early year's settings, care homes, workplaces and among vulnerable population groups. The Cambridgeshire and Peterborough single point of contact for Covid-19 outbreak management operates from 8am to 8pm on a daily basis, including week-ends, and the workload remains busy - although essential to controlling the spread of Covid-19 in local communities.

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## **RECOVERY ACTIVITY**

### **Local Resilience Forum Recovery Group - Public Health and Prevention Sub-Group**

Public health work on recovery is focussed on a multi-agency approach through the Local Resilience Forum Public Health and Prevention Sub-Group. The five core themes on which this work has focussed are:

- Health inequalities

- Screening, vaccinations, and immunisations
- Health behaviours
- Mental Health
- Housing and health

The work under each theme has been driven forward by small working groups.

In addition public health staff have contributed to the work of other LRF Recovery Sub-Groups - including the Vulnerable People group.

#### **DECISIONS MADE SINCE LAST REPORTING PERIOD**

Covid-19 related decisions made in the last month include approval of business cases funded by either the national Test and Trace grant or Contain Outbreak Management Fund grant for:

- Additional public health, outbreak management and infection control capacity
- Additional business support capacity for the C19 single point of contact
- Additional communications team capacity
- Peterborough City Council Rapid Response Plan
- Infrastructure and staffing for a combined backward contract tracing and rapid lateral flow testing services
- Infrastructure and staffing for additional telephone follow up and support for residents who are self-isolating

Business cases are due for consideration or expected shortly for:

- All District/City Council Local Action Plans additional implementation costs
- District/City Council led training and Covid-19 safety for taxi-drivers

#### **NEW FINANCIAL IMPLICATIONS SINCE LAST REPORTING PERIOD**

- Cambridgeshire County Council has been allocated a Contain Outbreak Management Fund (COMF) grant of £5.2M in addition to the £2.5M allocated in the original Test and Trace grant. This funding is allocated through the Health Protection Board, to the full range of outbreak prevention and management activities outlined above, and covers both County Council and District Council activities.

#### **WORKFORCE CHANGES**

A range of staff have or will be recruited by the Public Health Directorate on short term contracts for:

- Outbreak Management Team and C19 Single Point of Contact
- Enhanced Local Contact Tracing Service roles
- To support development of Local Rapid Testing

The majority of Public Health Directorate staff have reprioritised their workloads towards Covid-19.

#### **COMMUNICATIONS**

Public health staff work closely with the Communications Directorate to provide public health advice and sign off for a wide range of communication materials - including media releases, leaflets, and social media messaging.

Over the past month the Director of Public Health has promoted the latest public health messages through a range of media including video- blogs, radio and television interviews and a Facebook live interview for the Cambridge News, as well as working with the communications team on 'DPH letters' to a range of recipients including businesses, care homes, and groups of local residents .