

Report of the Director of Public Health, Sharon Stoltz.

COVID-19 Update and Recovery

Summary

1. This report provides the Health and Wellbeing Board members with an update on COVID data for York and information relating to 'Living with COVID' and what that means for York.
2. The report asks members of the Board to support the continued promotion of safer behaviour messages and vaccinations in line with evidenced based actions to manage other respiratory illness such as colds and influenza.
3. Responding to the COVID virus will be through a 'business as usual' response with an emphasis on managing outbreaks in high risk settings.
4. Living with COVID means that there are no formal restrictions in place but instead there is an emphasis on personal behaviours to reduce the risk of infection and transmission although if there is a significant change in the COVID virus this may change the national approach.
5. On the 31st August 2022, based on advice from the UK Health Security Agency (UKHSA), the national COVID-19 alert level was lowered from level 3 to level 2.
6. Although hospitals and the wider health systems remain extremely busy overall, the summer BA.4 and BA.5 wave is subsiding and direct COVID severe illness is now a much smaller proportion of this. Severe COVID cases, direct COVID healthcare pressures, direct COVID deaths and ONS community positivity estimates have decreased.
7. COVID remains present in the community and we may see an increase in cases with BA 4.6 and BA.2.75 circulating but do not expect this to lead to an immediate increase in hospital pressures. This will continue

to be kept under review. Further COVID surges are likely so getting a vaccination when it is offered is very important.

Background

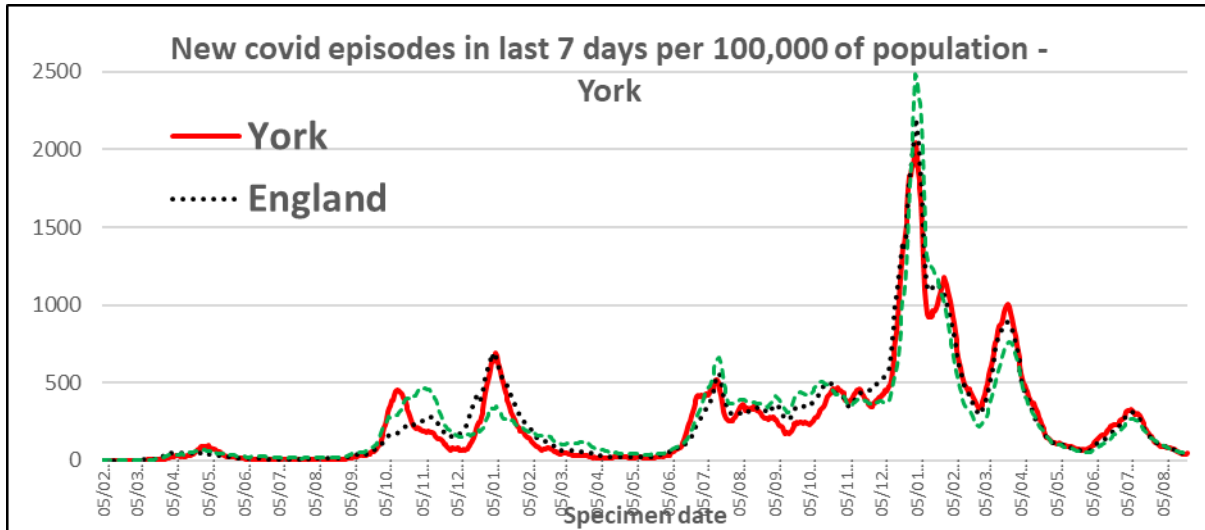
8. The COVID-19 pandemic in the UK has now moved into the recovery phase and one which has been labelled as 'Living with COVID'. Since January 2020 the city has made an unprecedented response to protect its citizens and reduce the risk of illness and death from the virus.
9. It is inevitable that we will experience further peaks and troughs of cases of COVID as well as the likelihood of further variants of the virus. As such, there is a continuing need to be vigilant and for individuals and organisations to take measures to reduce the risk of further infection from COVID.
10. There remains the risk that, as we move into winter, the pressure on the health and social care system across York could be overwhelmed. If we are to mitigate risk and reduce adverse health outcomes for our population, a system wide effort will be needed.

Main/Key Issues to be Considered

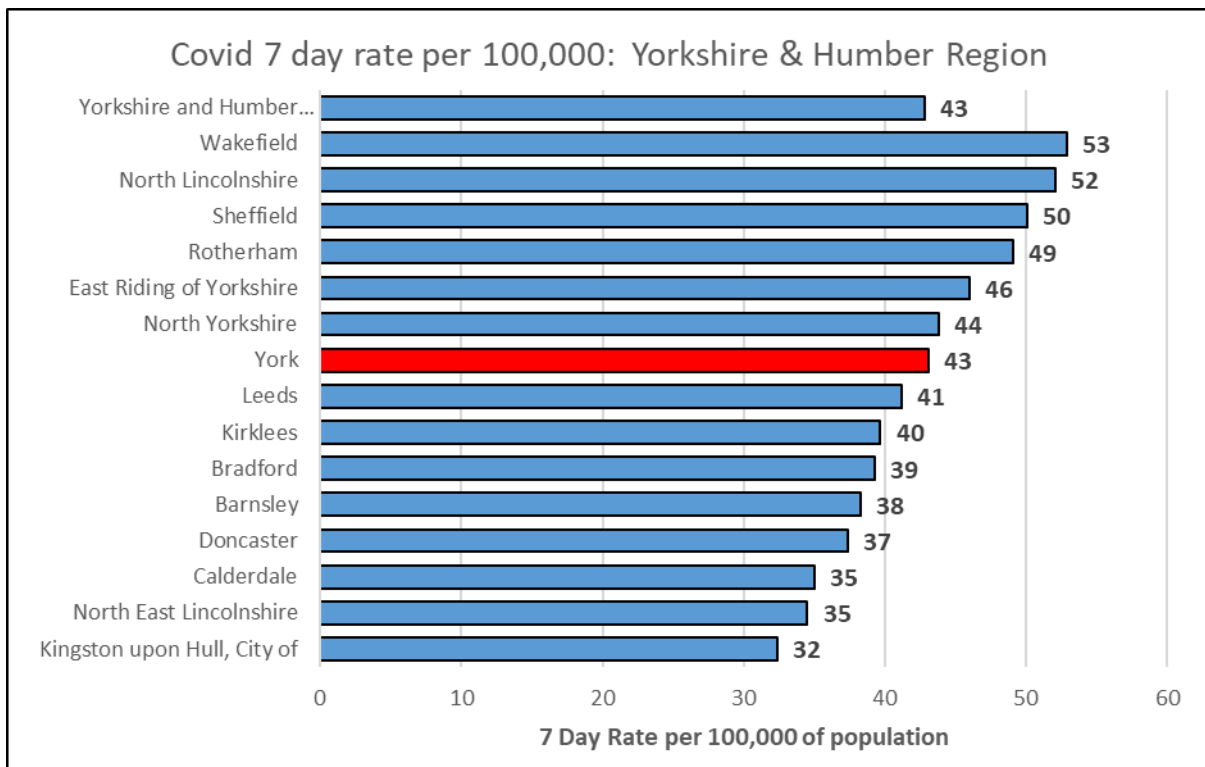
11. At this stage in the pandemic the frequency of data reporting has been reduced and a comprehensive update is now published monthly. The cessation of most COVID testing also means that we no longer have detailed and accurate information on the number of positive cases. The most recent COVID data for York are shown below.

Diagnosed cases / episodes

12. As at 31.8.22 CYC residents have had a total 70,191 COVID episodes since the start of the pandemic, a rate of 33,024 per 100,000 of population. The cumulative rate in York is below the national (35,072) and regional (34,590) averages.
13. The provisional rate of new COVID episodes per 100,000 of population for the period 23.08.22 to 29.8.22 in York is 40.3 (85 episodes). (Using data published on Gov.uk on 31.8.22).
14. The latest official "validated" rate of new COVID episodes per 100,000 of population for the period 20.8.22 to 26.8.22 in York was 43.1 (91 episodes). The national and regional averages at this date were 43.6 and 42.8 respectively (using data published on Gov.uk on 31.8.22).

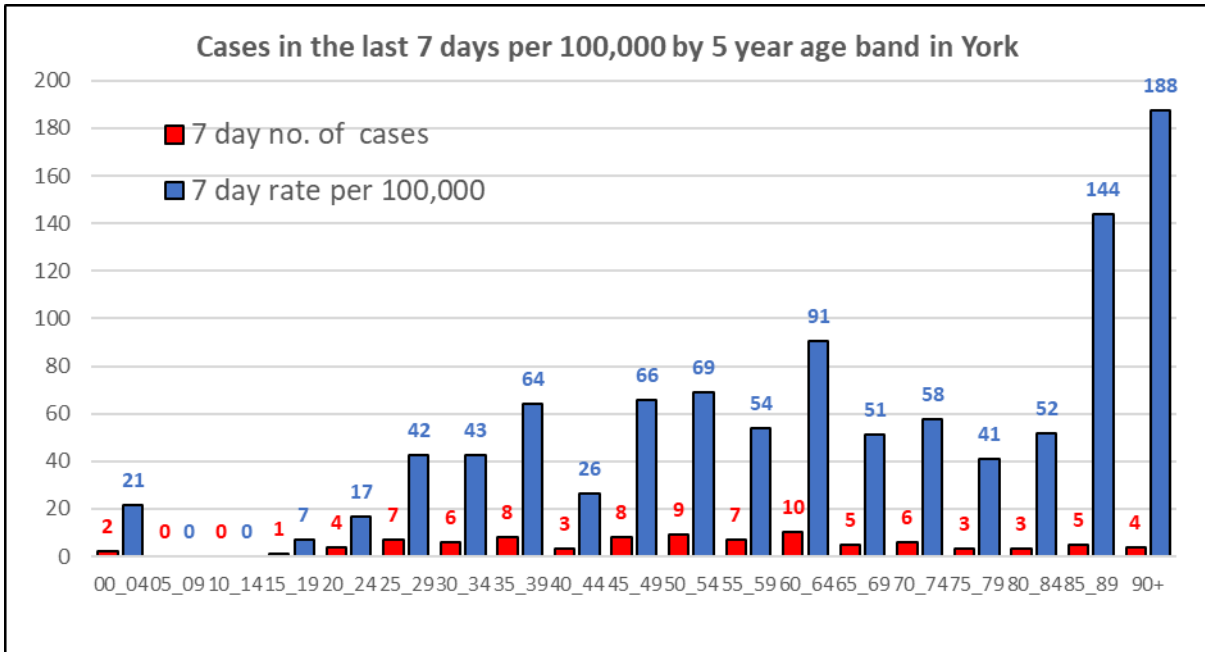


15. York is currently ranked 7th out of 15 Upper Tier Local Authorities (UTLAs) in the Yorkshire and Humber region.



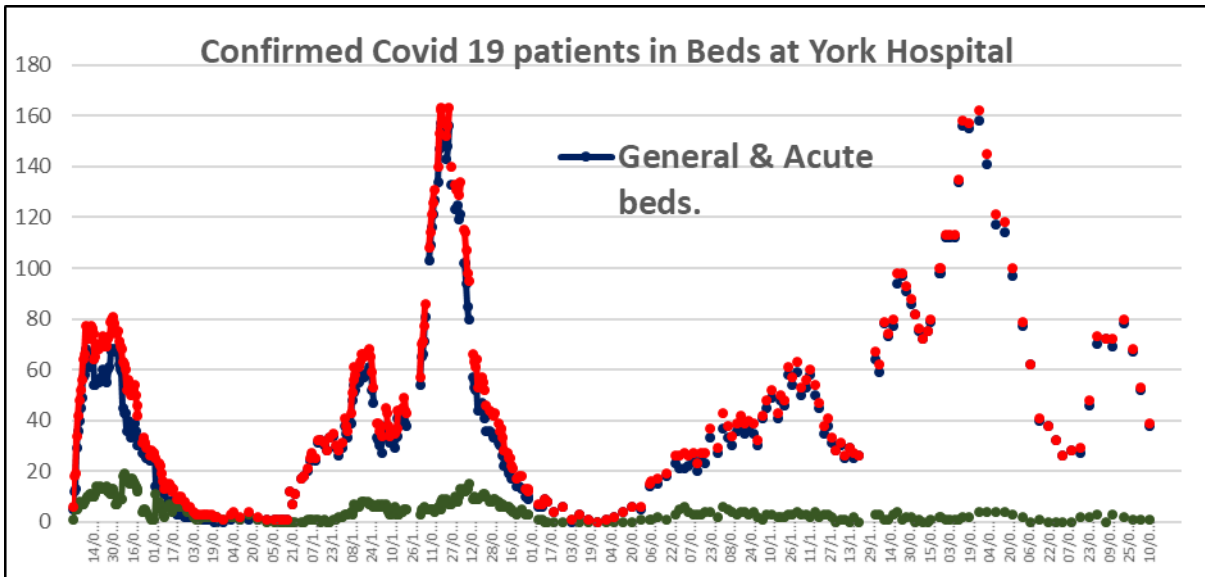
16. The rate of new COVID cases per 100,000 of population for the period 20.8.22 to 26.8.22 for people aged 60+ in York was 72.1 (36 cases). The national and regional averages were 65.2 and 64.1 respectively.

17. Case rates in York are currently highest in the following age ranges: 90+ (188 per 100,000); 85-89 (144 per 100,000) and 60-64 (91 per 100,000). The age breakdown by 5 year age bands is shown below.



COVID Bed Occupancy in York Hospital

- 18. As at 01.9.22 there were 51 confirmed COVID patients in General/Acute beds. The peak number was 158 on 28.3.22.
- 19. As at 01.9.22 there were 2 confirmed COVID patient in the Intensive Treatment Unit. The peak number for people in ITU was 19 on 10.5.20.



R Number

20. The 'R' value (the number of people that one infected person will pass on a virus to, on average) for the North East and Yorkshire area on 19.8.22 was estimated to be in the range 0.7 to 1.0.

Vaccinations for People aged 16+ (1st dose, 2nd dose and Booster)

21. As at 1.8.22 a total of 159,005 CYC residents aged 16+ have had the first dose of the vaccine. This represents 89.2% of the estimated (16+) population of York.
22. As at 1.8.22 a total of 153,265 CYC residents aged 16+ have had both doses of the vaccine. This represents 86.0% of the estimated (16+) population of York.
23. As at 1.8.22 a total of 126,199 CYC residents aged 16+ have received the booster vaccine. This represents 70.8% of the estimated (16+) population of York.

Vaccinations for People aged 12-15 (1st and 2nd dose)

24. As at 1.8.22 a total of 5,773 CYC residents aged 12-15 have had the first dose of the vaccine. This represents 68.9% of the estimated (12-15) population of York.
25. As at 1.8.22 a total of 4,485 CYC residents aged 12-15 have had both doses of the vaccine. This represents 53.5% of the estimated (12-15) population of York.

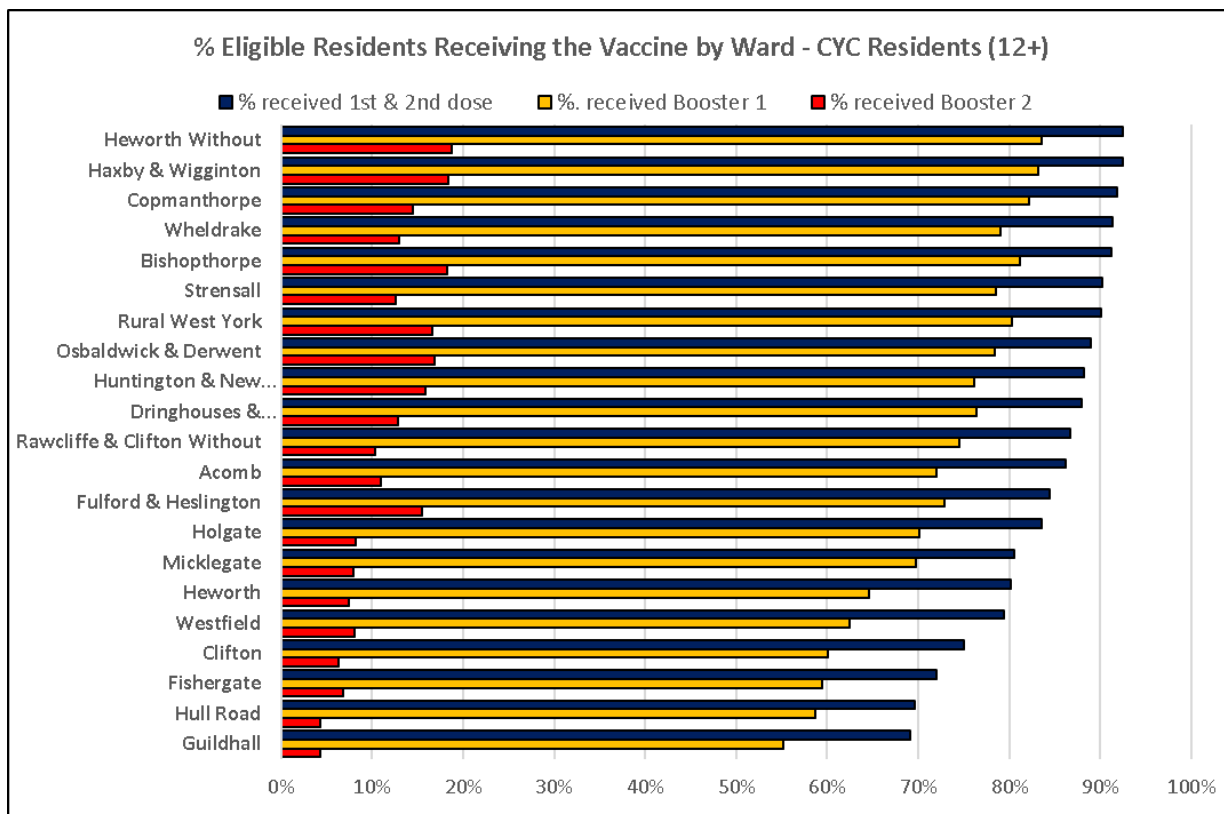
Vaccinations for People aged 5-11 (1st dose)

26. As at 1.8.22 a total of 2,766 CYC residents aged 5-11 have had the first dose of the vaccine. This represents 18.4% of the estimated (5-11) population of York.

Source: PHE Covid-19 Situational Awareness Explorer.

Vaccinations by Age / Category and Ward

27. The chart below shows the percentage of CYC residents age 12+ in each ward who have had the vaccine.



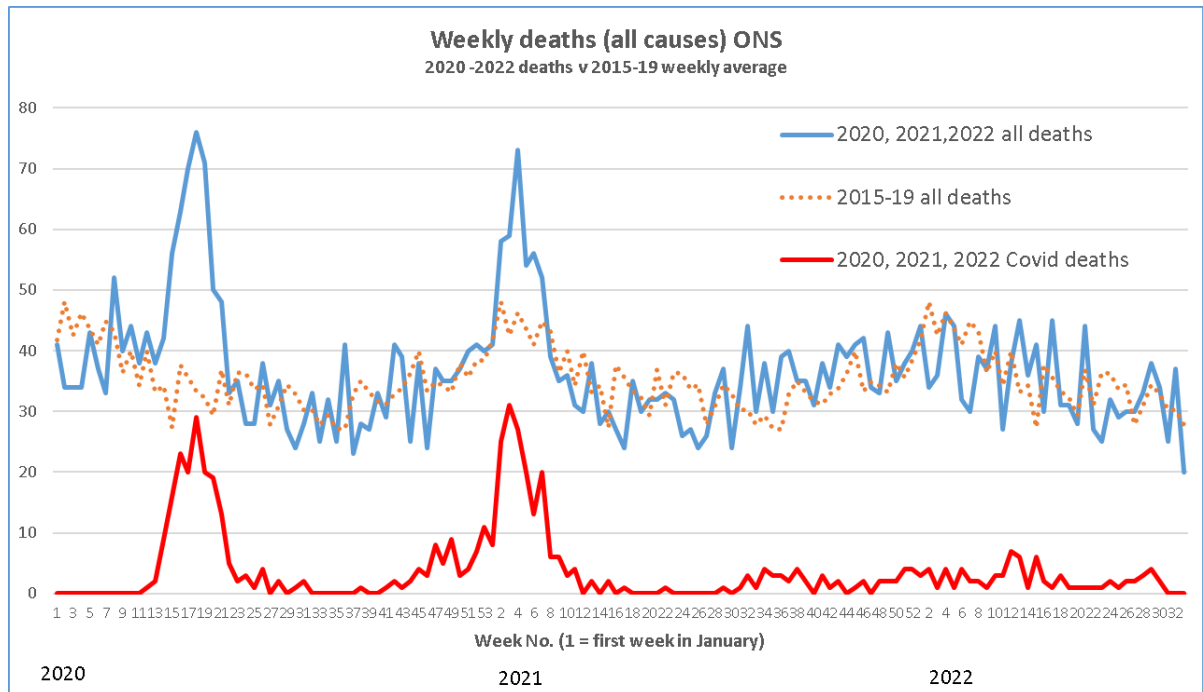
Source: NHS NIMS Covid Vaccine Uptake Report

Deaths

28. Two key sources about deaths from COVID at Local Authority level are ONS data and local registrar data. They are derived from the same source (civil registration data). ONS data is more comprehensive as it includes deaths of York residents which have occurred and been registered outside York. Local registrar data provides a breakdown by age and gender. For both data sources a death from COVID is said to have occurred when COVID-19 has been recorded on the death certificate. The most recently available data is summarised below:
29. ONS Weekly data: In the most recent period (2022 Week 33: 13.8.22 to 19.8.22) 0 COVID deaths were recorded as having occurred for CYC residents. In weeks 32, 31 and 30 there had been 0, 0 and 2 deaths respectively. Please note that due to lags in death registration, weekly totals are subject to revision.
30. ONS Cumulative data: Since the start of the pandemic, for deaths occurring up to 19.8.2022 and registered up to 27.8.2022, 524 COVID deaths were recorded as having occurred for CYC residents. The number of deaths per 100,000 of population in York is 248 which is lower than the national average of 308.

Source: ONS - Deaths registered weekly in England and Wales, provisional: week ending 19.8.2022. Released 31.8.22.

31. Age / Gender breakdown (using registrar data): The average age of the CYC residents who died was 81.5, with an age range of 30-104.



Recovery and Living with COVID

32. The data above provides evidence that we now have to adjust to living with COVID with public health scientists predicting that in the medium to long term the virus will become endemic, the expectation being that the virus will become more stable and predictable, but we will still see some community transmission.
33. Living with COVID will mean the continuing need to work to reduce vaccine inequalities, to understand why there are areas across York where vaccine uptake needs to increase to reduce the risk to vulnerable people and mitigate outbreaks. We will also need to work with our population to continue with personal behaviours which reduce risk such as hand hygiene and 'catch it, bin it, kill it' actions. This will be especially meaningful as we head into winter and the flu season.
34. Whilst we want our citizens to have confidence in working and socialising it is important to understand that there still remains a level of uncertainty around transmission because of waning immunity, vaccine inequality and the risk of new variants. It is therefore still pertinent that the following advice is communicated and supported :

- Be aware of symptoms
- Stay at home if you think you might have COVID
- Get vaccinated if eligible
- Wear a face mask when appropriate, particularly in crowded indoor places
- Meet outside if possible, good ventilation is important
- Good hand and respiratory hygiene

35. As with all communicable diseases the position in York will continue to be monitored by the Director of Public Health working closely with the UK Health Security Agency (UKHSA) and wider system partners to respond to outbreaks and work on prevention.

Consultation

36. Not applicable.

Options

37. The report is for information.

Strategic/Operational Plans

38. York's Joint Health and Wellbeing Strategy 2017-2022. This report links to all areas in the above strategy across the life course.

39. CYC Health Protection Assurance Framework strategic objective to ensure local authority and partners are supporting the preventative actions to protect the health of the population.

Implications

40. There are no specialist implications

Risk Management

41. There remains the risk that, as we move into winter, the pressure on the health and social care system across York could be overwhelmed. If we are to mitigate risk and reduce adverse health outcomes for our population, a system wide effort will be needed. In particular there needs to be a shared focus on delivering a successful COVID and seasonal flu vaccination programme with maximum uptake across all eligible groups.

Recommendations

42. The Health and Wellbeing Board are asked to receive the report and highlight any key issues for further consideration.

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Report
Approved



Date 01/09/2022

Wards Affected:

All



For further information please contact the author of the report