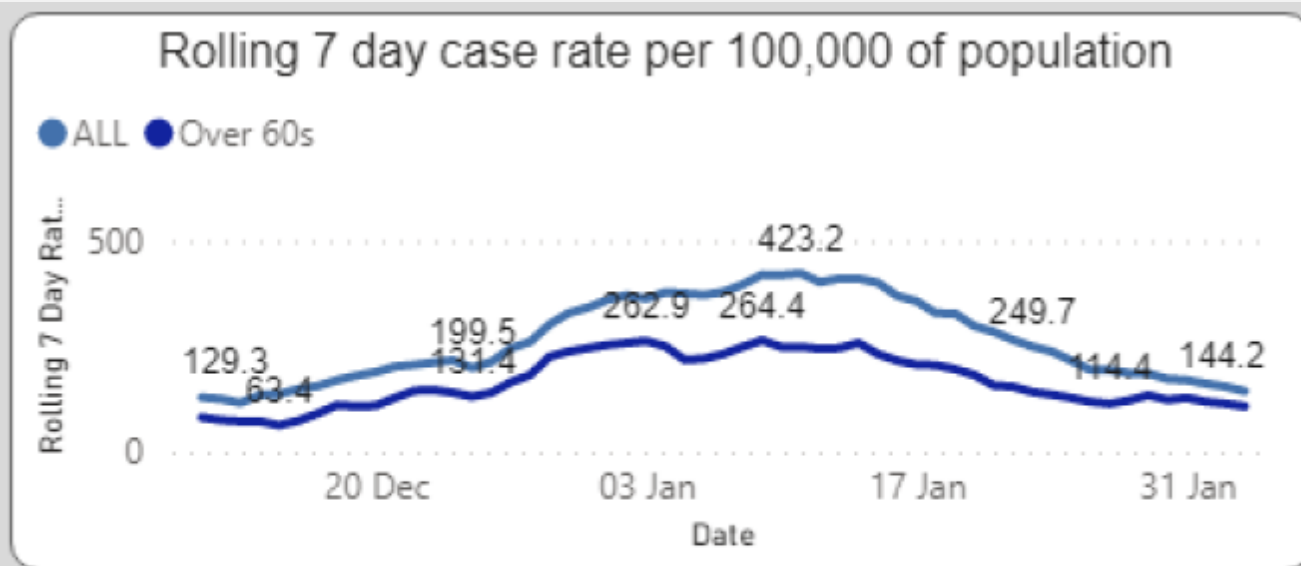


# HEALTH PROTECTION BOARD: PANDEMIC RESPONSE

## Appendix I: Overview and update

@ 08/02/2021

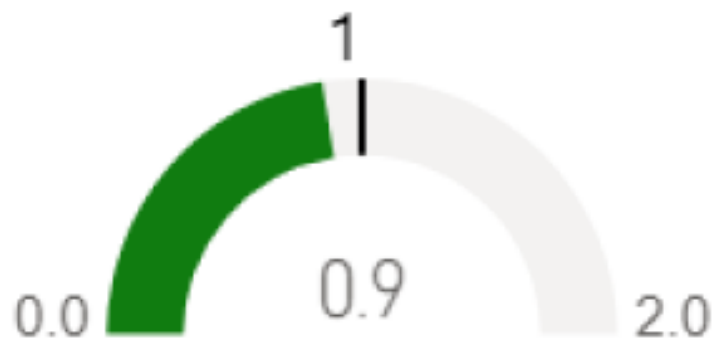


Cases last 7 days in North Somerset for full weeks data  
**310**

7-day rate	ALL	Over 60s
	144.2 per 100,000	108.2 per 100,000
South West	146.7 per 100,000	121.3 per 100,000
England	222.7 per 100,000	England data not available

SW testing average = 426 per 100,000

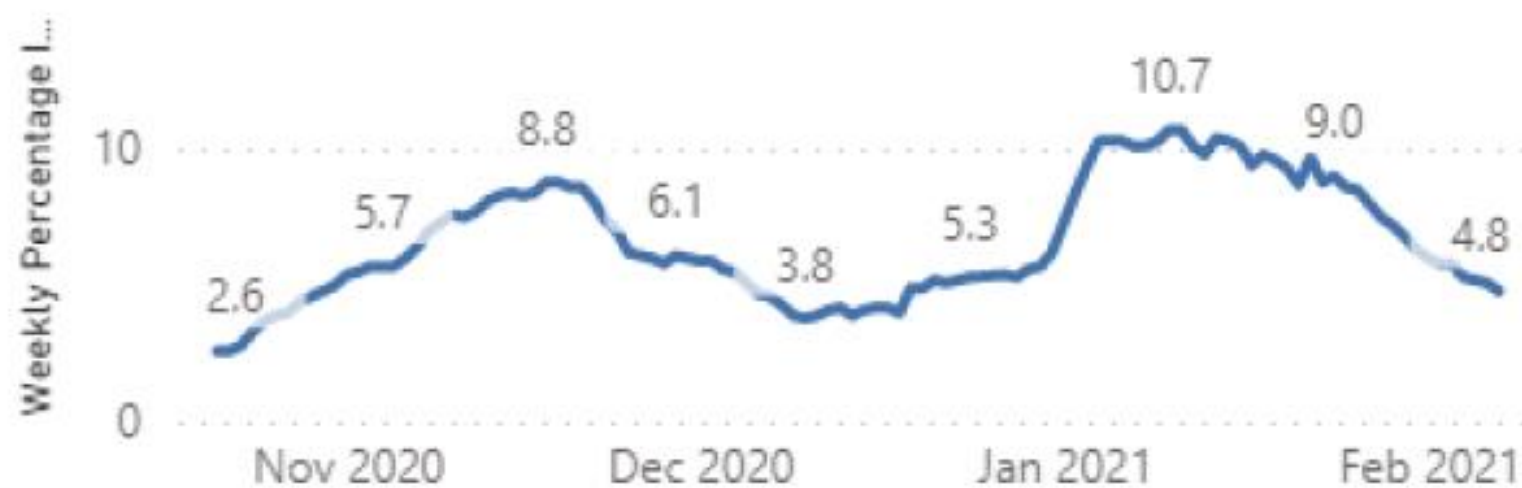
Latest maximum R number  
for the South West



Rolling 7 day test rate per 100,000 of population



### Individuals testing positive (% of all tests)



Current % test positive:

North Somerset:  
**4.8%**

South West:  
**5.6%**

England: **9.0%**

## CASES BY AGE

Area	0 to 14	15 to 24	25 to 44	45 to 64	65 to 74	75+
North Somerset	76.3	190.2	210.6	148.2	84.9	142.6
South West	64.8	157.5	212.2	147.1	65.6	141.1

@ 08/02/2021

# KEY WORKSTREAMS

## Outbreak Management

Health protection response to local clusters or outbreaks of cases.

Break chain of transmission in higher risk locations by setting profile and/or potential to spread

Weekly Incident Management Team meetings to support locations

## Testing

Case finding to ensure isolation and break chain of transmission.

Diagnosis to assist clinical management

Reduce risk to key groups with targeted testing.

PCR and Lateral Flow Testing at multiple sites

## Contact tracing

Ensure isolation of diagnosed case and give practical advice and support

Define contacts to support further isolation/testing as required

Break chain of transmission

Local enhanced service launched in January

## Insight, communication, and engagement

Identify and support key protective behaviours

Understand and address barriers to compliance

Regular updates for key stakeholders

Build community response capital

## Enforcement

Use regulatory services powers to ensure business awareness and compliance

Investigate and address breaches

Work alongside Police powers when engagement not successful

Additional presence e.g. Marshalls fund.

## Surveillance and intelligence

Monitor trends and address patterns of increased incidence

Model future patterns to prevent/reduce impact where possible

Monitor new variants

## Vaccination

NHS England/CCG/Providers lead with wider support for community engagement and messaging. Enable vaccination sites as required.

## Community response

North Somerset together; Town and Parish Councils and other local action groups. Vital reach and credibility with those who need support.

# VACCINATION

- Within the Bristol, North Somerset and South Gloucestershire (BNSSG) health area the latest figures (published on 4 February) show that by the end of January 130,424 adults have had their first dose in the BNSSG area. 93% of over 80s have had at least the first dose and 88% of 75-79 year olds.

## **Local vaccination sites**

- These sites include hospital hubs located at Southmead Hospital, Bristol Royal Infirmary and Weston General Hospital, a super vaccination centre at Ashton Gate Stadium, seven pharmacies and 19 vaccination sites run by GPs.
- GP vaccination sites, managed by Primary Care Networks, include these in North Somerset: Riverbank Medical Centre, Weston-super-Mare; Pudding Pie Lane Surgery, Langford; Brockway Medical Centre, Nailsea; Portishead Medical Centre,
- Ashton Gate Stadium in Bristol is our local super vaccination centre which is vaccinating people from 8am – 8pm, 7 days a week.
- Locking Pharmacy, Weston-super-Mare

# HEALTH AND SOCIAL CARE SYSTEM RESPONSE

- Most recent wave has created significant capacity pressures across all health and social care providers. Peak reached in late January/early February but significant challenges remain. Voids in residential and nursing care remain high as self-funders opt for care at home
- Targeted additional support from multi agency partners for care sector through various grants and wrap around infection prevention and control measures
- Issues include numbers of positive cases in care homes and hospital beds, staff absence and routes in and out of hospital for those needing care
- Impact on routine care and need to 'catch up' with planned procedures being planned for in health system
- Planning for longer-term health and care impacts, for example, mental and emotional wellbeing needs; deterioration of physical health because procedures not happening; missed opportunities for earlier intervention meaning higher dependency on services
- Overarching need to recognise and tackle widening of health and other inequalities e.g. child development, worklessness, informal carers.