

# COUNTY DURHAM COVID-19 HEALTH AND WELLBEING BOARD

## LOCAL OUTBREAK MANAGEMENT PLAN (LOMP) UPDATE 29 MARCH 2022

**AMANDA HEALY  
DIRECTOR OF PUBLIC HEALTH**

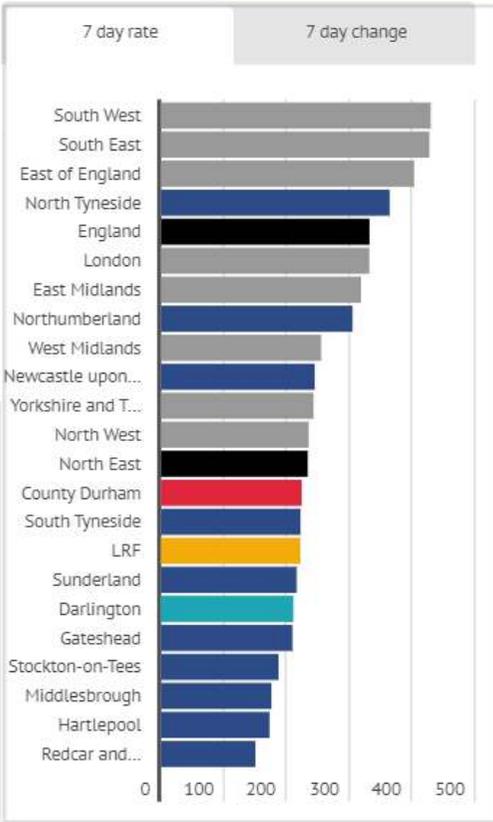
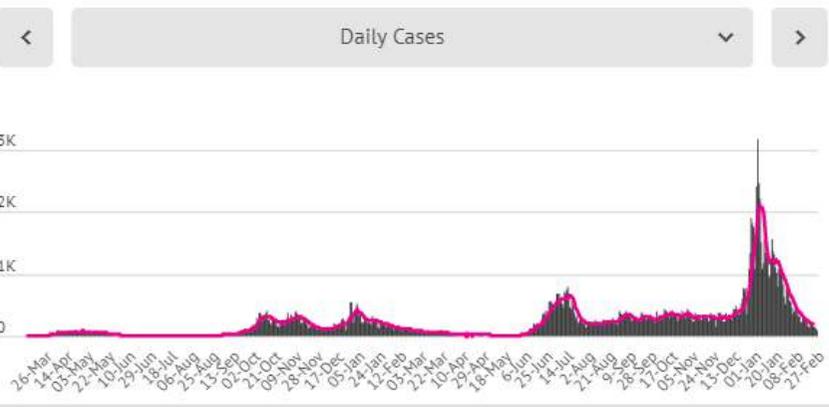


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# Covid-19 Data

## COVID-19 surveillance dashboard County Durham Cases Summary

All data accurate as of 8.30am 01.03.22



- ### Key Points
- Case rates are showing a sustained decline.
  - Difficult to quantify impact of behaviour change around self-reporting of positives.
  - COVID inpatients 64 and 4 in ICU.

*Includes both Pillar 1 and Pillar 2 data. Please note that only partial data may be included in the most recent day(s).  
\*The seven day rate per 100,000 excludes cases with sample date in the last four days due to partial data.*



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# Covid-19 vaccinations

## COVID-19 surveillance dashboard County Durham Vaccinations

Data published 01.03.22



100%\* signifies that the number who have received their first dose exceeds the latest official estimate of the population from the ONS. Further details including source on page 8. Ages 12+



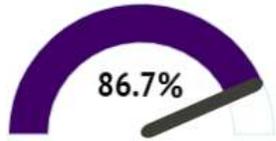
1,133,519

Cumulative total doses (1st, 2nd, and Booster) to date



419,892

1st dose



395,332

2nd dose

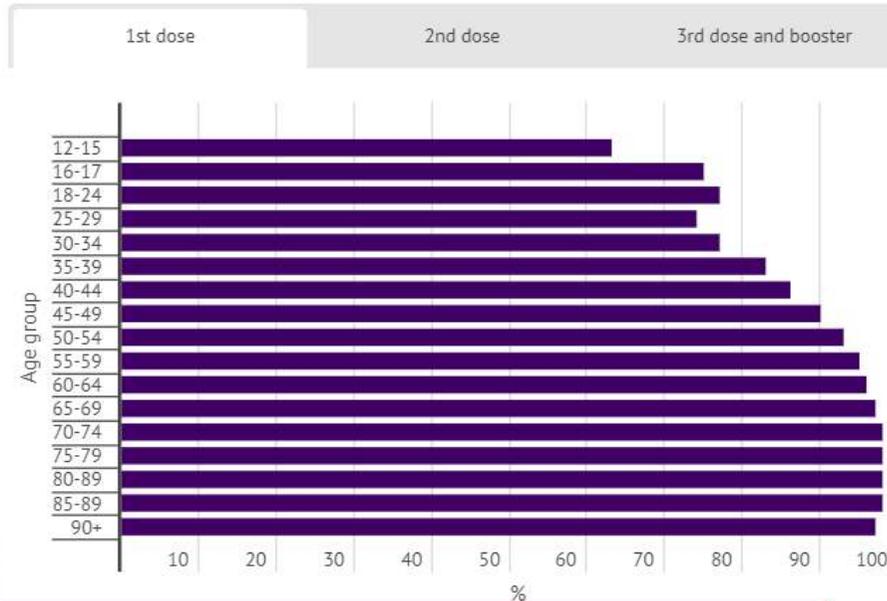


318,305

3rd dose and booster



Percentage of population having received vaccine



For an interactive map on local vaccination uptake please visit <https://coronavirus.data.gov.uk/details/interactive-map/vaccinations>

Numbers may differ due to the date of update.

Share

- 8 times more likely to be hospitalised if unvaccinated.

- Leaving no one behind approach

- 12-15 programme.

- Spring booster

- 5-11yrs non-urgent low dose offer



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# Spring Plan: Living with Covid

## 21 February

- Remove guidance for twice weekly asymptomatic testing for staff and students in most education settings

## From 24 February

- Remove the legal requirement to self-isolate following a positive test for adults and children - advised to stay at home for at least 5 full days or 2 negative test results.
- Fully vaccinated close contacts and under 18s no longer need to test daily for 7 days. Remove legal requirement for close contacts who are not fully vaccinated to self-isolate.
- End self-isolation support payments, national funding for practical support. No medicine delivery service.
- End routine contact tracing.
- End the legal obligation for individuals to tell their employers when they are required to self-isolate.
- Revoke The Health Protection (Coronavirus, Restrictions) Regulations.

## From 24 March

- Covid-19 provisions in statutory sick pay end

## From 1 April

- No longer a requirement for NHS covid pass for certain venues
- Updated guidance on testing and steps people should take to minimise contact
- No longer provide free universal symptomatic and asymptomatic testing for general public in England.
- Consolidate guidance to the public and businesses, in line with public health advice.
- Remove the health and safety requirement for every employer to explicitly consider COVID-19 in their risk assessments.
- Replace the existing set of 'Working Safely' guidance with new public health guidance.



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# Living safely with Covid – goals and priorities

## Goals

- Protect and enable people and communities at greatest risk from COVID-19 and its consequences.
- Protect critical infrastructure including the NHS and social care
- Support the wellbeing and development of children, young people and adults.
- Enable the recovery of economic and social activities.
- Strengthen prevention and preparedness for future waves and other epidemics.

## Priorities

- Continue to support equitable and rapid deployment of vaccination.
- Prioritise specialist public health capacity on managing outbreaks in vulnerable and complex settings.
- Encourage good infection and control measures, taking our partners and our communities with us.
- Support educational settings to manage COVID-19 infections to minimise education disruption.
- Encourage businesses and employers to continue to operate safely to ensure those who are most vulnerable are not excluded.
- Work with the health and social care system to ensure equity of access to treatments and support.
- Have plans to ensure sufficient workforce capacity to respond quickly in a surge, in line with agreed national frameworks and health protection risk assessments.
- Maintain surveillance systems and oversight.



# Vaccine Inequalities: 'Leaving no-one behind' approach

- LSOA level data identifies areas of concern, which include:
  - Variation in dose 1, dose 2 and booster coverage
  - Variation below county level by deprivation, gender and age
  - Clustering of low vaccination coverage
- Hyper local data informs the identification of accessible community assets or locations
- The approach identifies clusters/communities with low levels of uptake where:
  - Residents are encouraged to access their vaccine where there is local provision
  - Additional provision for communities with restricted access to vaccination sites
- Enhanced community engagement and communication plan
- Multi-agency collaborative working.
- Comms to under-represented groups, anchor organisations, communities and businesses through AAPs, Wellbeing4Life and Business Durham.
- Evaluation of the May to November pop up vaccination clinics has been completed
- The Leaving no-one behind approach used to develop the 12-15 years school and community offer

County Durham  
Care Partnership

County Durham  
Health and Wellbeing Board

**COVID-19  
Vaccination Bus**  
is coming to Newton Aycliffe!

**Thursday 2nd September**  
Crafter's Companion Offices Car Park  
Horsdale Avenue  
Aycliffe Business Park  
Newton Aycliffe  
DL1 6DR  
**1pm - 6pm**  
No appointment needed - just turn up

Jump on board to get your life-saving vaccination!

- First and second doses of Pfizer and limited second doses of AstraZeneca will be available.
- For anyone age 16 and over.
- Must be a minimum of 8 weeks between first and second doses.

**Worries or concerns?**  
Let's talk - there will be health professionals there on the day who can provide further information and support.  
Supported by Knights Pharmacy  
**Knights**

# Vaccine Inequalities

- **Pop-up Vaccination Clinic Evaluation**

- **MELISSA bus**

- 23 mobile pop-up vaccination clinics delivered
- 7,988 vaccines between 7 May - 22 November 2021.
- 18-29yr olds highest cohort
- Targeted approach in LSOAs, GRT stop-over sites and workplaces such as Amazon (Bowburn) and Newton Aycliffe Industrial Estate.
- Positive service user feedback positive; 'Keep it going'; 'Come back again'; 'More often'; 'Advertise more'; 'Go around villages'; 'Weekends'.
- Easily accessible locations – to be less exposed to the elements
- Request for follow up vaccines – reliance on bus
- Operating hours suited people's working day
- Length of queue and willingness to wait in all weathers highlighted people's eagerness to get vaccine

- **Pop-up Walk-in Clinics**

- Delivered 6 University Walk-in Pop-up Clinics; 2 in June/July and 4 in October 2021.
- 1,953 vaccinations delivered, 75% were 1st dose with 18-29yr highest cohort.
- Robust planning across system partners attributed to success of vaccine clinics.
- Millennium Square with 10 vaccination pods attracted the most publicity with 544,985 social media hits
- Service user experience from those attending Millennium Square:
  - More convenient than via GP
  - Quick, easy, and efficient.
  - Booked for Sunderland – but couldn't get there.
  - Well organised – surprised at how smooth it went.
  - Nurses were excellent
- **The leaving no-one behind approach continues to be used to target delivery**



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# Public Questions

1. Does it matter which vaccine I get? Can they still be mixed (are there any benefits/side effects to this) or can I request a specific dose?
2. Do I still need to wait 8 weeks between vaccines, and what do I do if I haven't been called for my Booster vaccination, and can't get through to my doctors to make an appointment?
3. How long will we need to keep getting vaccines and boosters?
4. What are the rules about wearing masks? And are there any guidelines in place for using community buildings now?

