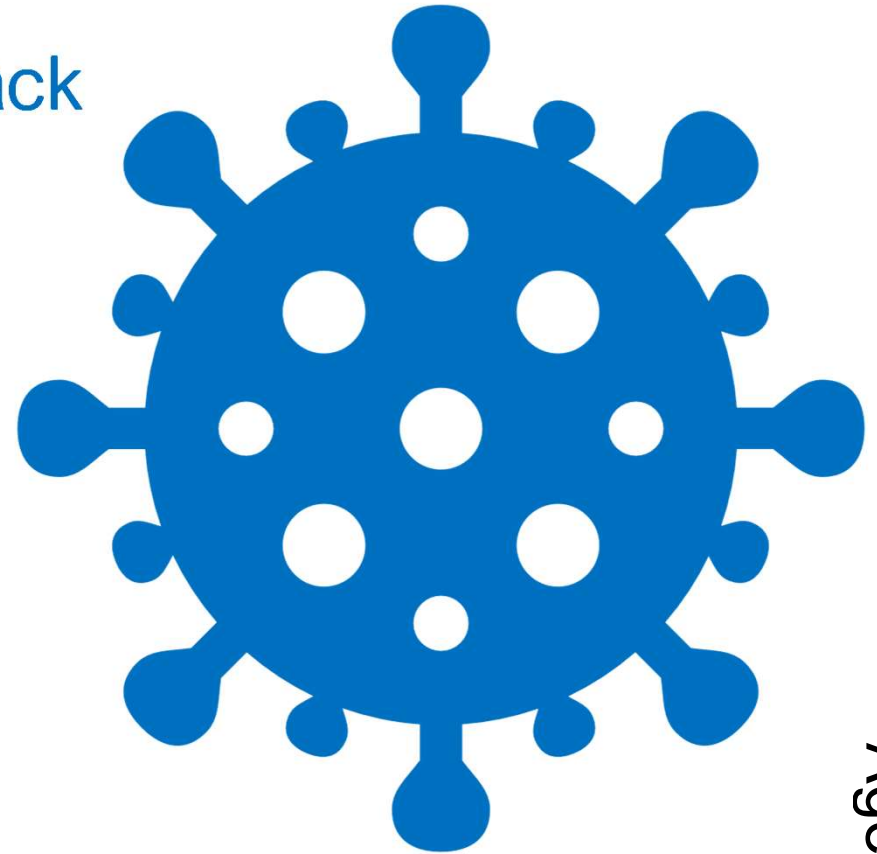


Hampshire COVID-19 weekly datapack

15th September 2021

Data correct as of 14th September 2021 but subject to revision

Page 1



Produced by the Public Health Team and the Insight and Engagement Unit

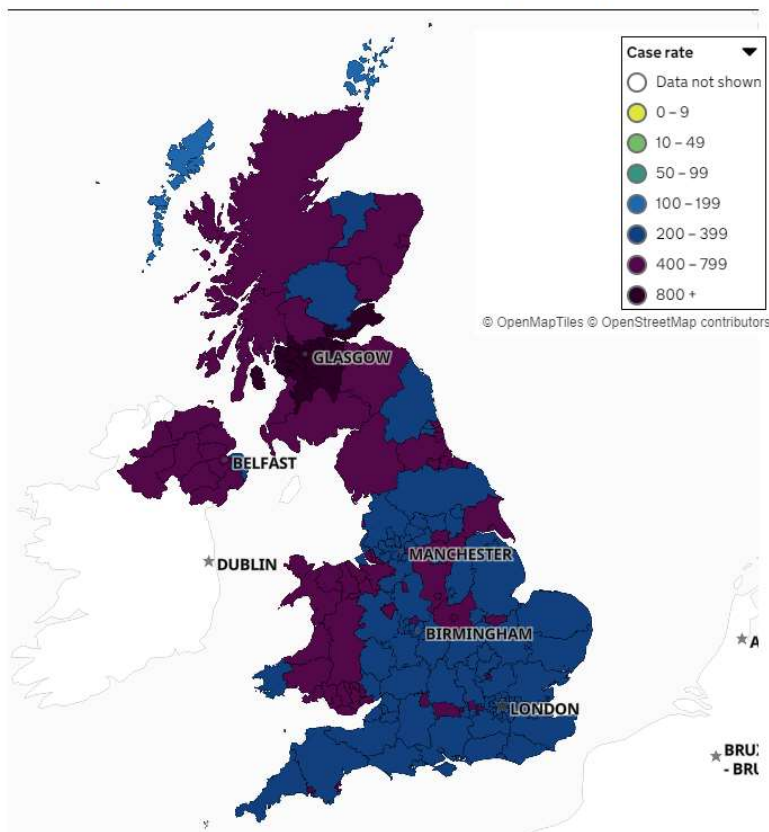
National

National rate = 397.4/100,000.

Infection trends varied across the four UK nations, and remained level in England. Infections increase in Scotland (highest recorded) and Wales, trend uncertain in Northern Ireland

Overall case rates increased slightly compared to the previous 7 days

Case rate per 100,000 people for 7-day period ending on 7 September 2021:



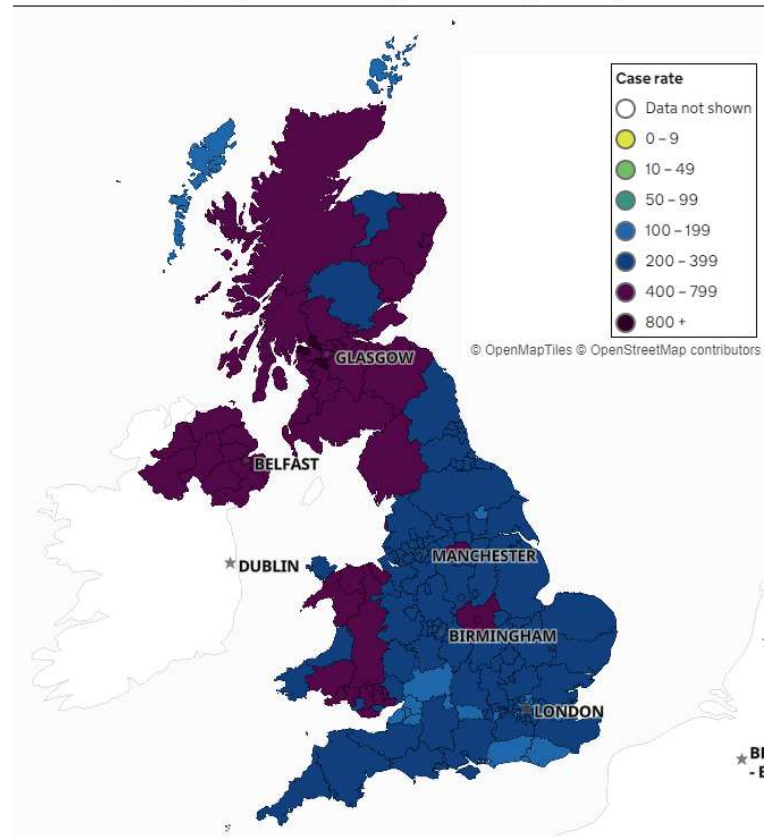
National rate = 311.4/100,000.

Infection trends varied across the four UK nations, remain high in England with a slight decline, but the trend is uncertain.

In Scotland, estimated infections increased, although the rate of growth slowed from previous weeks, so cases plateauing at much higher level. Infections also increased in Wales, while Northern Ireland recorded a decrease.

Overall COVID-19 case rates decreased in week 36

Case rate per 100,000 people for 7-day period ending on 14 September 2021:



Acute respiratory incidents in the past week increased compared to the previous week, particularly in educational settings. SARS-CoV-2 was identified in the majority of these

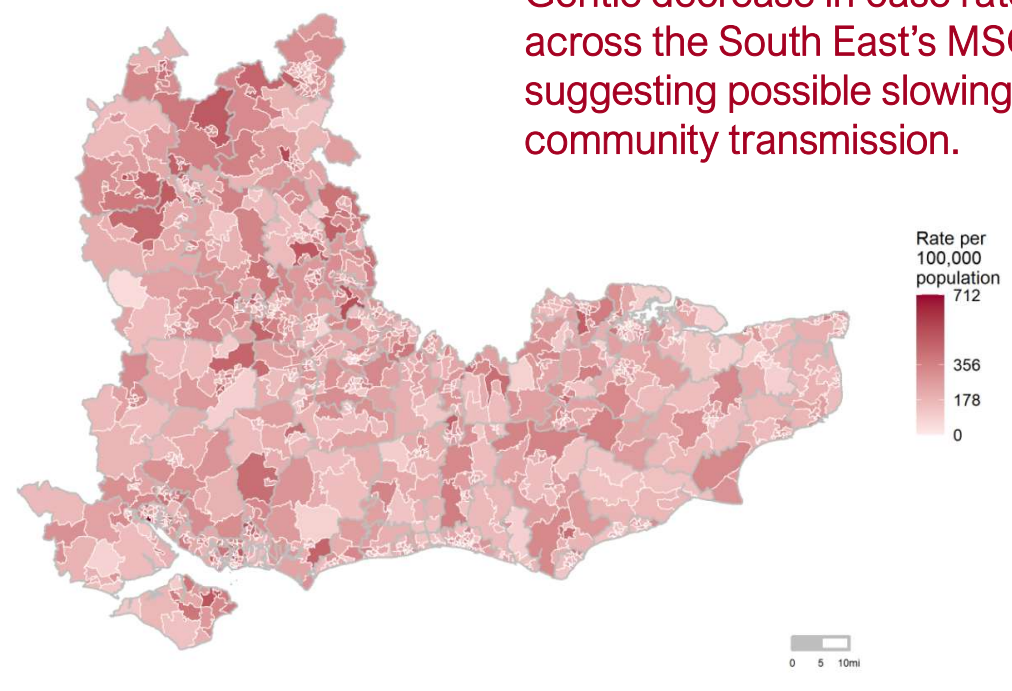
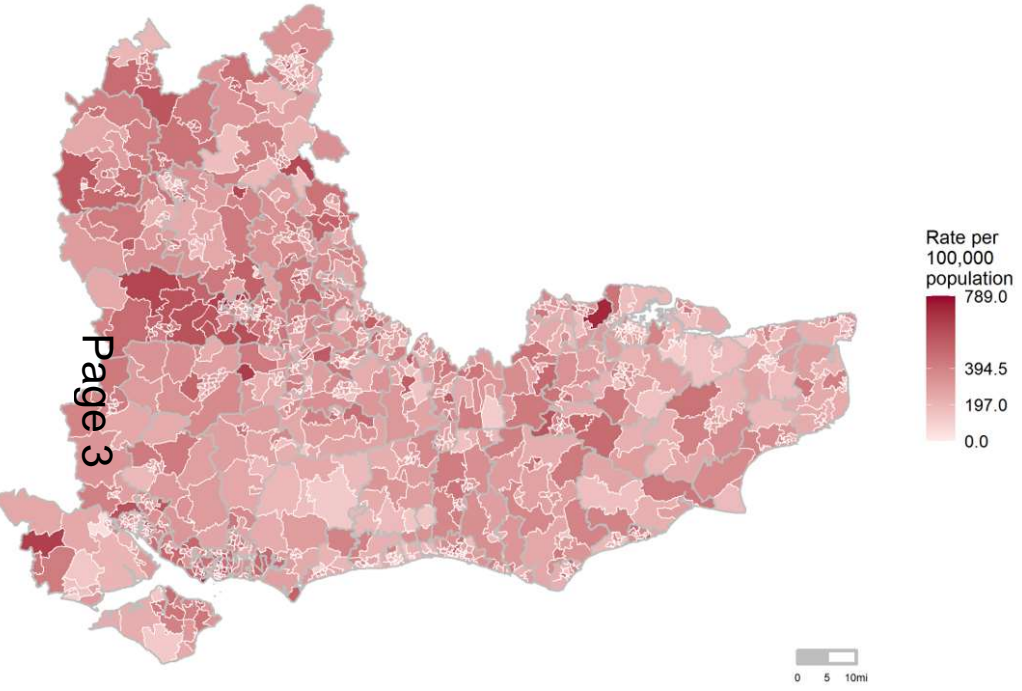
Source: GOV.UK Coronavirus (COVID-19) in the UK [interactive map](#)

MSOA case rates in the South East region, surveillance map

Last week – 9th September 2021

This week – 16th September 2021

Gentle decrease in case rates across the South East’s MSOAs, suggesting possible slowing community transmission.



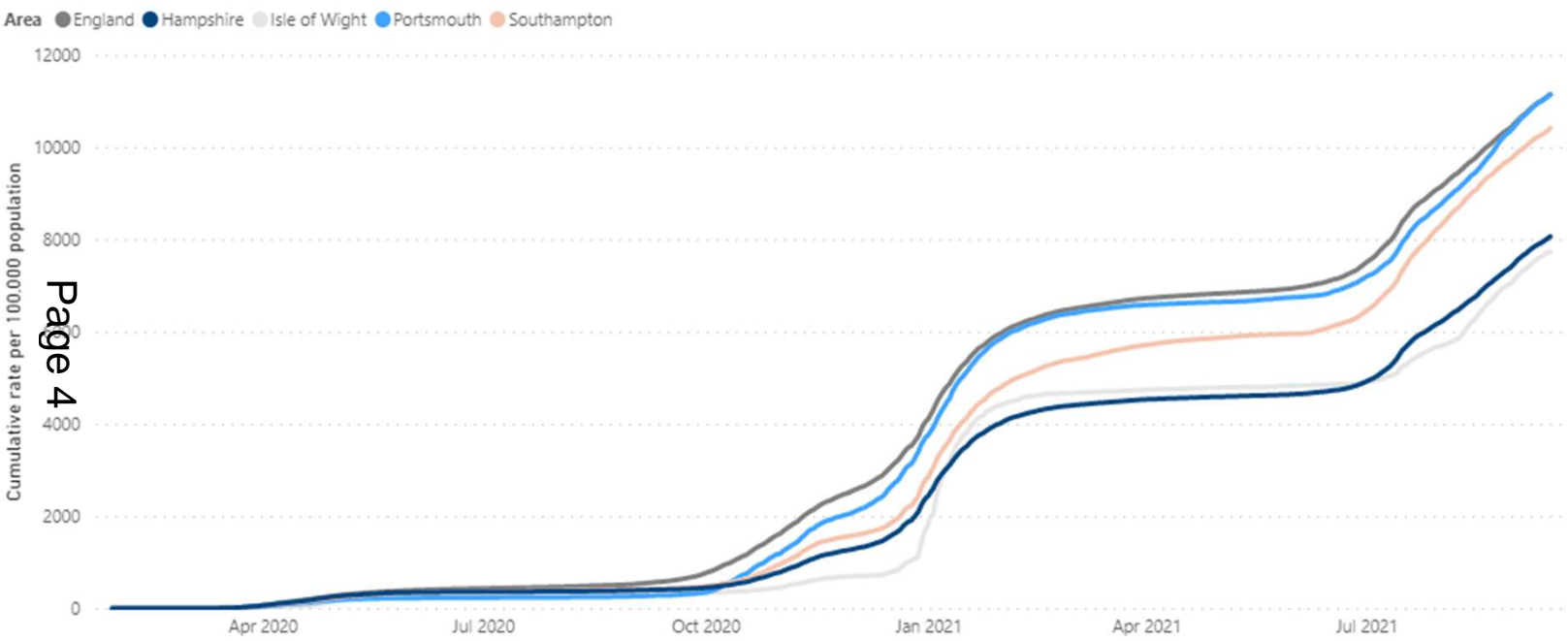
Hampshire & IOW MSOAs in the top 5% of rates/100k population for the last two full natural weeks, 9th September 2021:

Havant - Waterloo North West, Barncroft & Warren Park, Cowplain East	Basingstoke and Deane - Brighton Hill, Bramley, Sherfield & the Sherbornes, Kempshott
IOW - Ryde West & Havenstreet, Ryde South	Gosport – Rowner
Hart - Hook & Rotherwick	East Hampshire - Bordon Camp, Petersfield North & East Meon

Source: PHE LA Report store bi-weekly surveillance map

What do weekly cumulative case rates tell us about COVID-19 activity across ceremonial Hampshire?

COVID-19 - Cumulative case rate per 100,000 population



Most Recent Rates (15t...

Area	Cumulative rate per 100,000
England	11,147.62
Hampshire	8,062.66
Isle of Wight	7,737.39
Portsmouth	11,137.82
South East	9,394.93
Southampton	10,412.38

Trends suggest a continuing rise in infection rates across ceremonial Hampshire. Portsmouth City Council authority area has the highest cumulative case rate as of the 15th September 2021, although it is lower than the England rate.

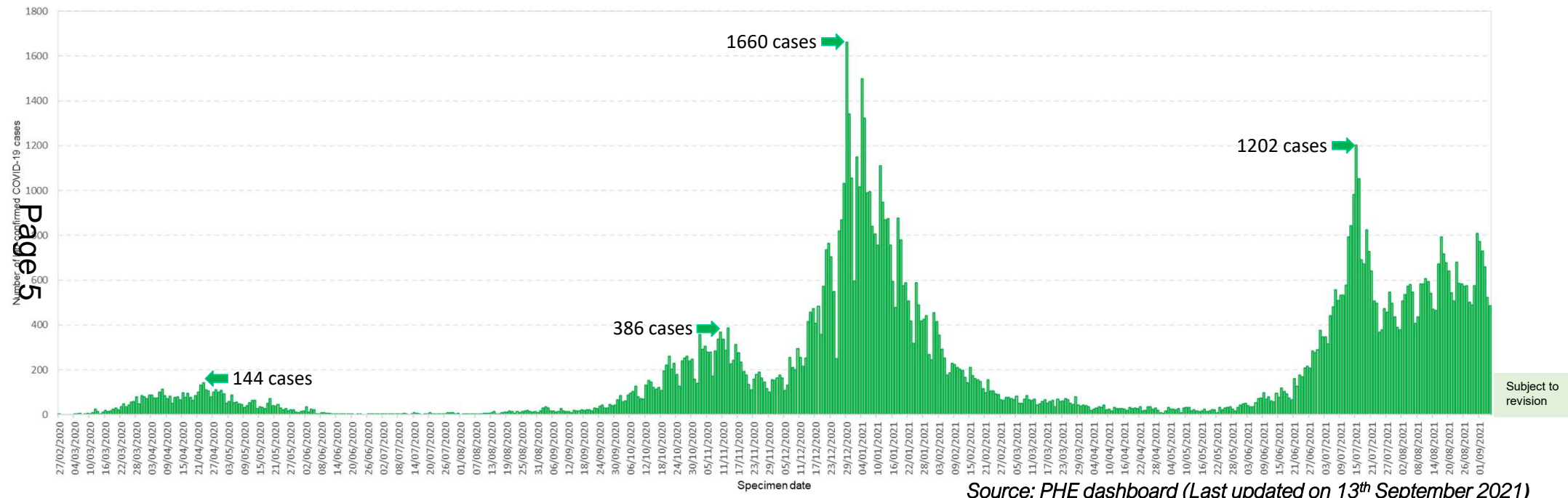
What do daily cases tell us about how the epidemic is progressing over time in Hampshire?

During wave 1 only Pillar 1 (NHS/PHE laboratories) testing was available, this included people admitted to hospital and later people living or working in a health or care environment. Widespread Pillar 2 community testing (Government's commercial testing partners) began on 14th July 2020 and since then the data includes both testing Pillars. Due to these different testing strategies, it is not possible to directly compare case numbers between wave 1 and wave 2.

Total number of COVID-19 cases
110,043

Caution: There is a data lag with more test results expected for the most recent week.

Data only includes those cases which have tested positive



Source: PHE dashboard (Last updated on 13th September 2021)

Over the epidemic, there have been 110,043 case detections in Hampshire (as of 12th September). Recent data suggest a possible stabilisation in the number of cases across Hampshire. Please note that the number of cases in the last 5 days is subject to revision.



Please note the **five-day lag** for data quality purposes

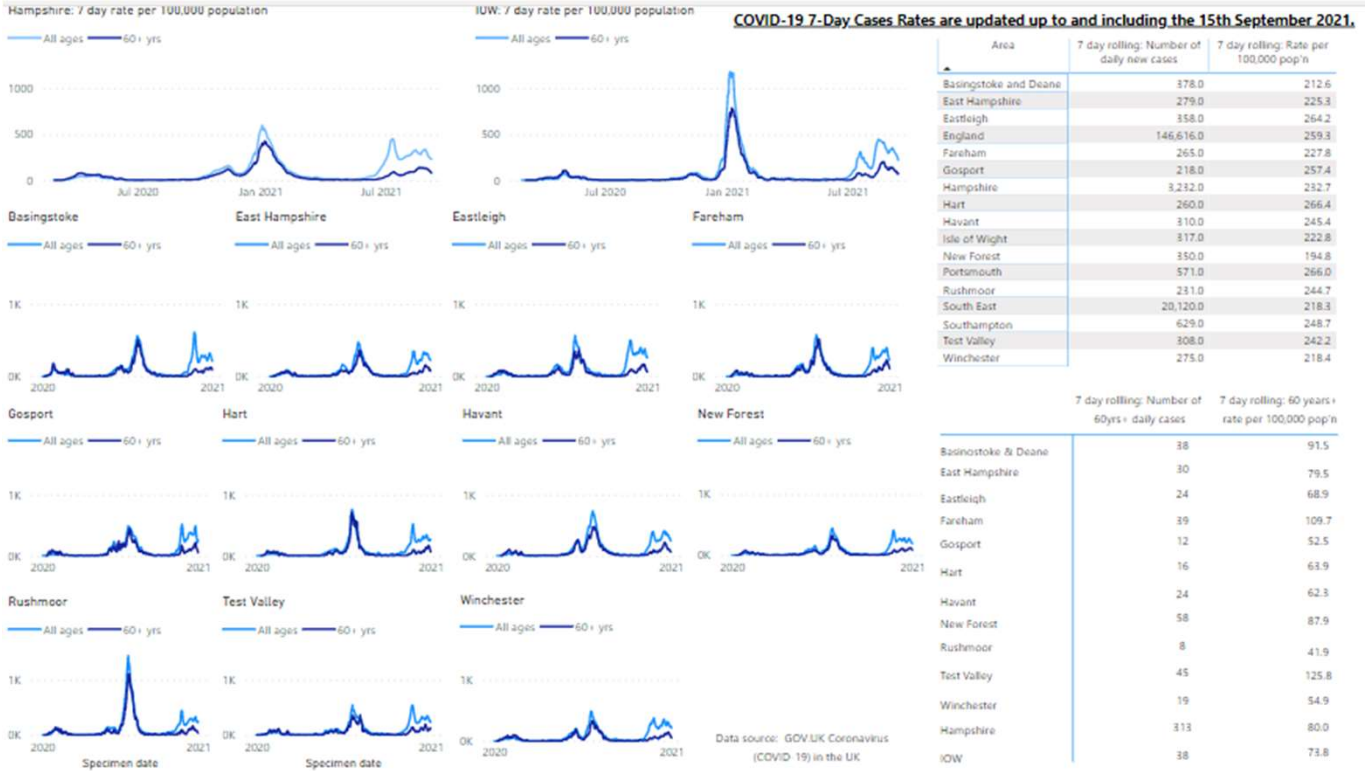
Let's keep life moving together

SAFE

- Fresh air
- Testing
- Face
- App
- Hands

What do the trends in weekly all age case rates tell us about overall COVID-19 activity across Hampshire Districts?

Daily rates of COVID-19 cases per 100,000 population in districts up to 15th September 2021



Data source: PHE Line List data analysis and PHE dashboard (Last updated on 13th September)

The trend in COVID-19 all age case rates has been stabilising across the majority Hampshire districts.



Please note that the charts on this page show rates of cases per 100,000. Also, district figures are subject to large statistical fluctuation due to the smaller populations



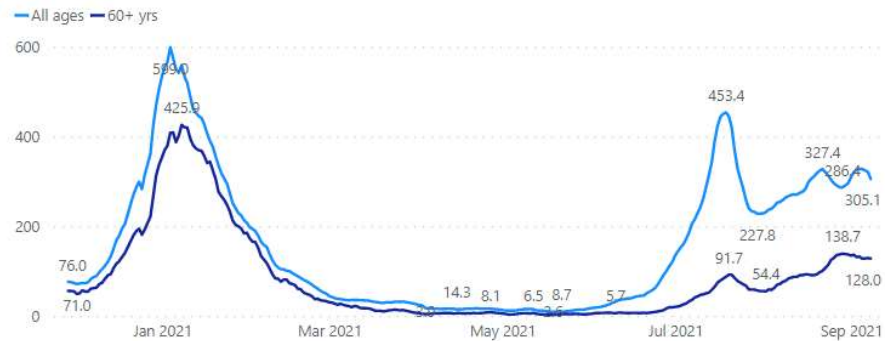
What do trends in the case numbers, rates and positivity tell us about COVID-19 activity in Hampshire?

Age specific case rates up to 8th September 2021

RAG Status: See note below for rating guide

Week ending	All ages	60+ yrs
01/09/21	308.6	134.4
02/09/21	319.5	136.2
03/09/21	326.2	131.3
04/09/21	327.7	132.1
05/09/21	327.6	127.5
07/09/21	321.1	128.7
08/09/21	305.1	128.0

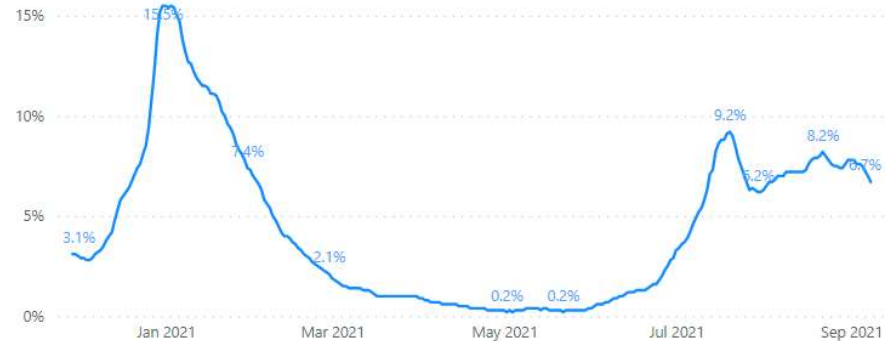
Case detection rate: Positive cases per 100,000 population, all age and 60+ yrs rates



The number of confirmed cases in previous 7 days (PCR&LFT)

Week ending	All ages	60+
01/09/21	4,287	526
02/09/21	4,438	533
03/09/21	4,531	514
04/09/21	4,553	517
05/09/21	4,551	499
07/09/21	4,461	504
08/09/21	4,239	501

Weekly test positivity rate(%): Note: a positive rate of less than 5% indicates that the epidemic is under control



RATING GUIDE:
 Weekly % positive: >7.5%, 4% to 7.5%, <4%
 Weekly all age rate: >250 cases per 100,000 per week, 151 to 250, 51 to 150, 25 to 50, <25
 Weekly 60+ rate: >150 cases per 100,000 per week, 101 to 150, 51 to 100, 25 to 50, <25

Data on this page are from the PHE Regional Situational Awareness Report (SAR). Due to the reporting delays the most recent 4 days are excluded from the calculations of rates and moving averages. Data reported is for a 7 day rolling period with the end date of that period shown on the tables and charts.

Data source: PHE Line List data analysis

Trends in case numbers, rates (in all ages and over 60s) and positivity show us that COVID-19 activity is varied – with a high, stable all age rate but a gradually rising over 60 rate. Positivity has decreased slightly recently but remains over 5% in Hampshire.



Age specific case rates up to 8th September 2021

Let's keep life moving together

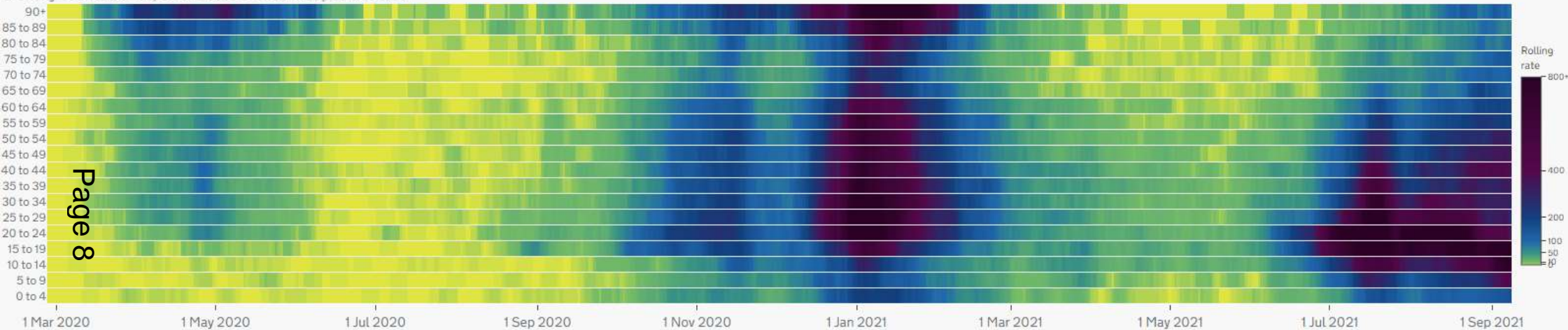
SAFE

- Fresh air
- Testing
- Face
- App
- Hands

Which age group is most affected in Hampshire?

Cases by specimen date age demographics

Rate of people with at least one positive COVID-19 test result (either lab-reported or lateral flow device) per 100,000 population in the rolling 7-day period ending on the dates shown, by age. Individuals tested positive more than once are only counted once, on the date of their first positive test.



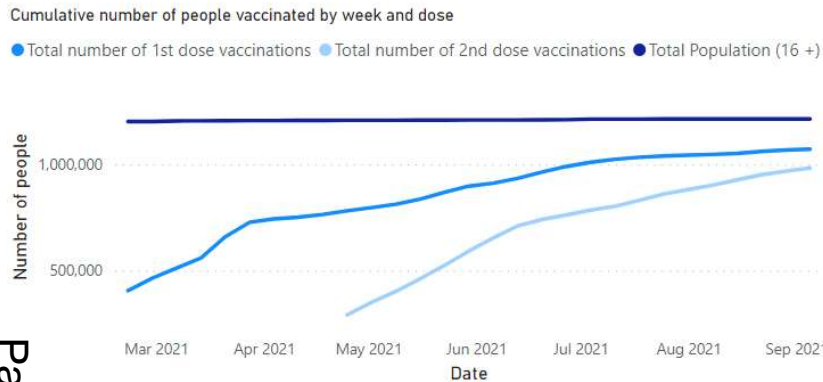
Case rates are prevalent in all age groups, but 15-19 year olds are the most affected age group with a rate of 804.1 per 100,000, though this is a decrease compared to the previous week.

Source: [PHE dashboard](#) (Last updated on 13th September 2021)

How is the vaccination programme progressing in Hampshire?

Cumulative vaccinations by week up to 5th September 2021

Vaccination data as of the: 05 September 2021

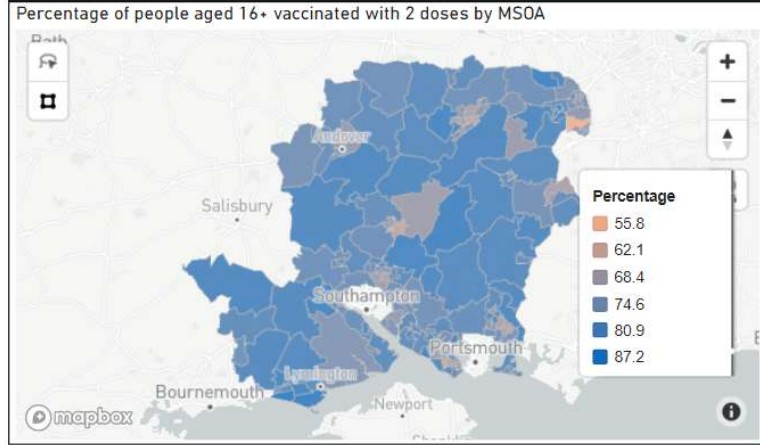
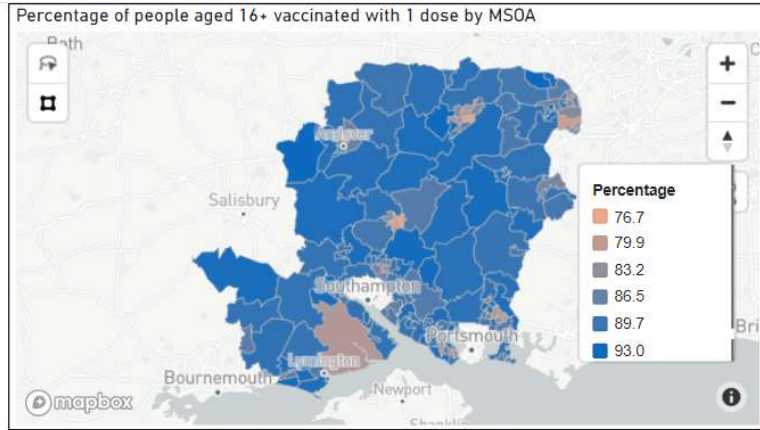


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Proportion of people vaccinated

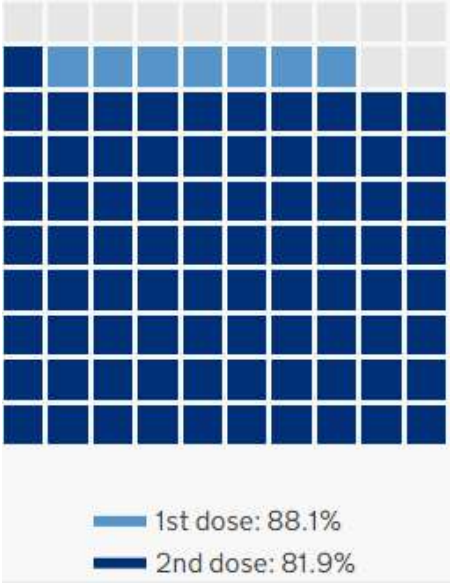
Select Dose:

Area	18-24	25-29	30-39	40-49	50-59	60-69	70-79	80+	All ages
Basingstoke and Deane	77.9%	75.0%	78.8%	86.0%	91.5%	93.4%	96.1%	96.5%	86.4%
East Hampshire	82.3%	77.3%	82.6%	89.5%	92.9%	95.0%	96.9%	97.7%	90.0%
Eastleigh	79.7%	78.7%	82.2%	88.8%	92.7%	94.6%	96.9%	97.3%	88.8%
Fareham	81.3%	78.5%	82.7%	89.8%	93.4%	95.3%	97.4%	97.7%	90.2%
Gosport	75.3%	74.2%	79.7%	86.6%	91.7%	94.3%	96.5%	97.1%	87.0%
Hampshire	78.8%	76.2%	80.8%	87.8%	92.4%	94.4%	96.6%	97.2%	88.3%
Hart	81.9%	79.9%	83.7%	89.4%	92.7%	94.7%	97.0%	97.4%	89.8%
Havant	75.8%	74.5%	78.2%	87.1%	92.6%	95.1%	96.8%	97.2%	87.7%
New Forest	78.8%	75.0%	80.3%	87.0%	92.3%	94.8%	96.6%	97.3%	89.5%
Rushmoor	77.2%	76.5%	78.2%	84.6%	90.4%	91.6%	93.9%	94.1%	84.4%
Test Valley	81.6%	78.3%	83.2%	89.1%	93.3%	94.9%	96.8%	97.7%	89.5%
Winchester	76.1%	72.2%	80.8%	88.3%	92.2%	94.0%	96.6%	97.3%	87.4%



Population for rates: NIMS (National Immunisation Management Service). Data Source: [Statistics » COVID-19 Vaccinations \(england.nhs.uk\)](#)

Vaccination uptake



Source: [PHE dashboard](#) (Last updated on 13th September 2021)

Estimated vaccination rates for 1st and 2nd doses continue to increase in Hampshire Districts. Over 80% of Hampshire residents aged 16+ are fully vaccinated. National evidence shows that the vaccination programme has led to clear reduction in serious illness, hospitalisation and death.

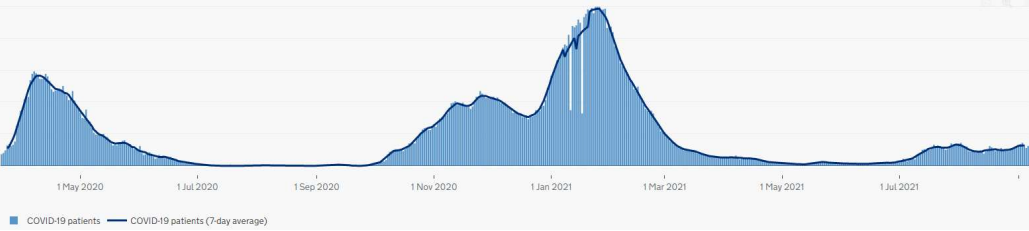


Population for rates: NIMS (National Immunisation Management Service).
Data Source: [Statistics » COVID-19 Vaccinations \(england.nhs.uk\)](#).
District data available on the COVID-19 weekly report: [Microsoft Power BI](#)

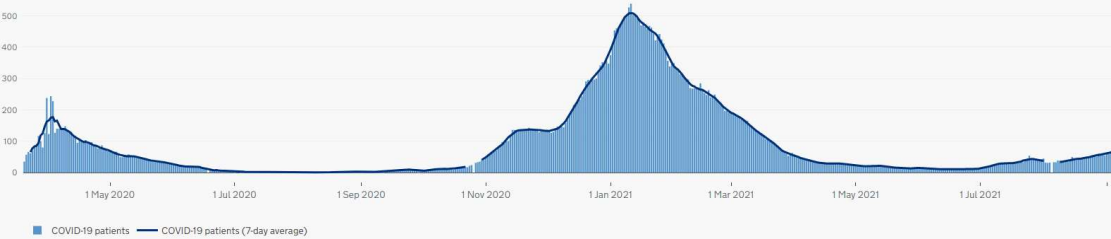


What do trends in COVID-19 patients admitted to hospital tell us about healthcare activity across Hampshire?

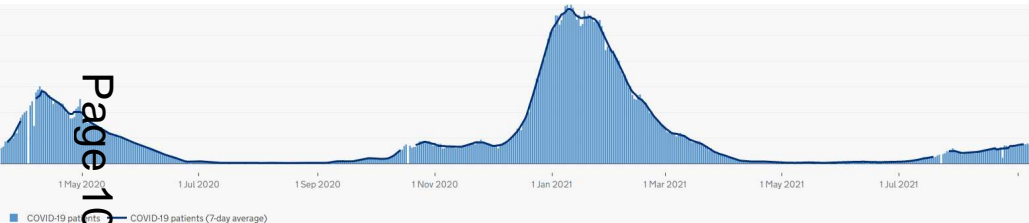
Hampshire Hospitals NHS Foundation Trust – 30 patients in hospital



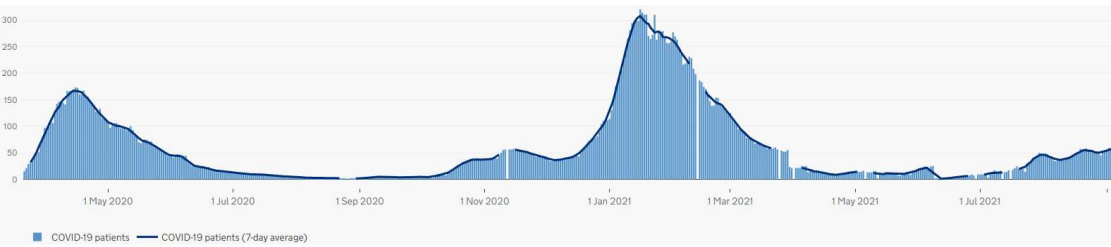
Portsmouth Hospitals University NHS Trust – 65 patients in hospital



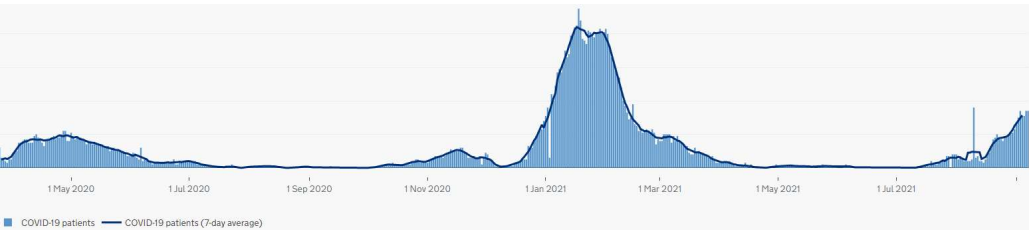
Frimley Health Foundation Trust – 74 patients in hospital



University Hospital Southampton NHS Foundation Trust – 59 patients in hospital



Isle of Wight NHS Trust – 34 patients in hospital



Data source: [https://coronavirus.data.gov.uk/details/healthcare reported on 13th September 2021](https://coronavirus.data.gov.uk/details/healthcare%20reported%20on%2013th%20September%202021)

The number of new COVID-19 admissions across HIOW trusts have increased, though hospital occupancy continues to be below the wave 1 and 2 peaks.

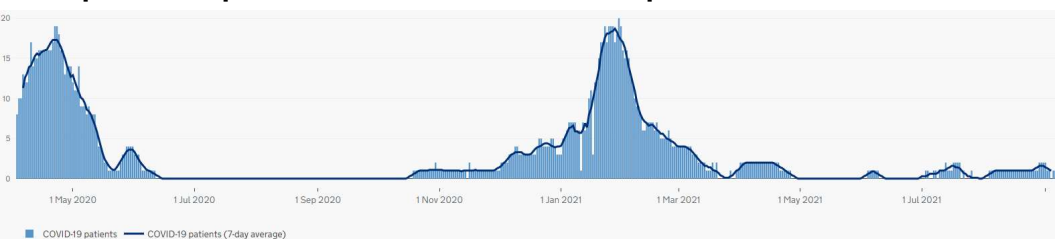


Please note that the charts on this page show **actual numbers** of hospitalised cases

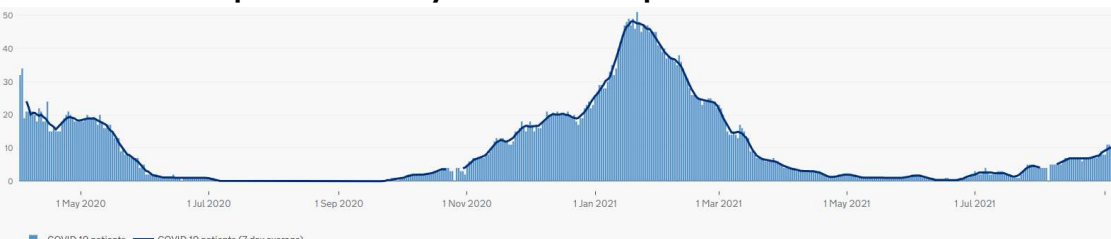


What do trends in COVID-19 patients in mechanical ventilation beds tell us about healthcare activity across Hampshire?

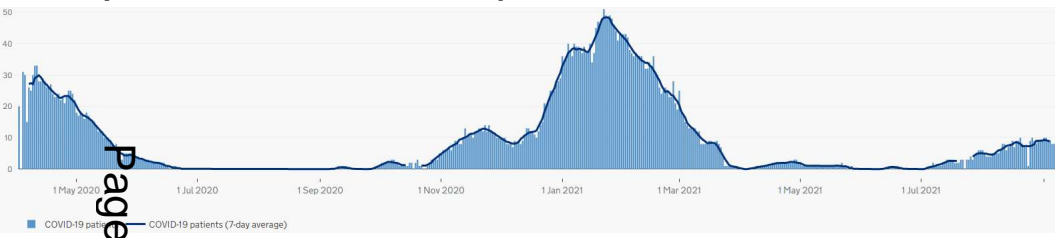
Hampshire Hospitals NHS Foundation Trust – 1 patient on ventilation



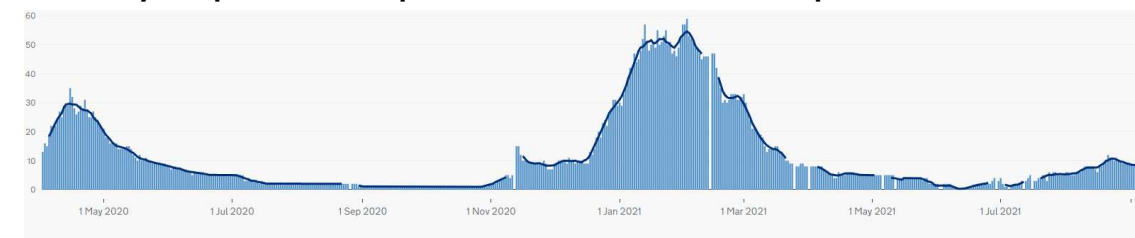
Portsmouth Hospitals University NHS Trust – 9 patients on ventilation



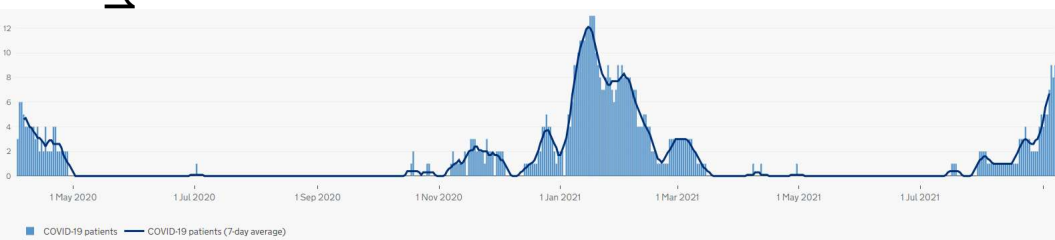
Frimley Health Foundation Trust – 8 patients on ventilation



University Hospital Southampton NHS Foundation Trust – 8 patients on ventilation



Isle of Wight NHS Trust – 9 patients on ventilation



Data source: <https://coronavirus.data.gov.uk/details/healthcare> reported on 6th September 2021

The number of COVID-19 patients in mechanical ventilation beds in critical care units (CCU) across Hampshire has increased, though it remains low. The need to avoid CCUs being overwhelmed is a key factor in significant policy decisions, including regional and national lockdowns and service recovery.



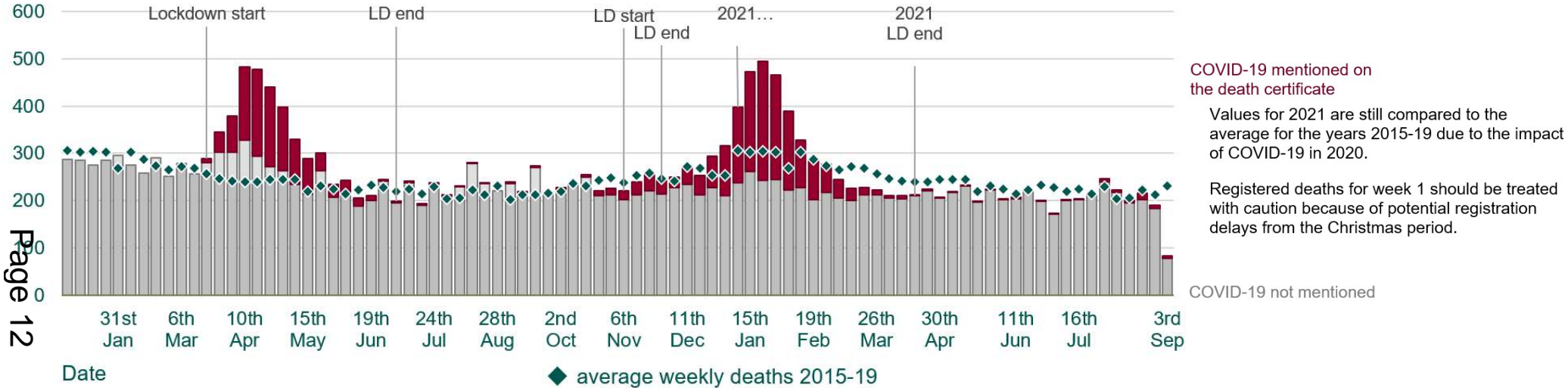
Please note that the charts on this page show **actual numbers** of hospitalised cases



What do trends in excess deaths tell us about the COVID-19 mortality experience across Hampshire?

Hampshire deaths per week over 2020 to 3rd September 2021 compared with 2015-2019 five-year average

All deaths in 2020 by week, with proportion where COVID-19 is mentioned



Data source: ONS Death registrations and occurrences by local authority and health board. Produced by LKIS, Public Health England

Office for National Statistics, licensed under the Open Government Licence.

Source: Data source: ONS Death registrations and occurrences by local authority and health board. Produced by LKIS, Public Health England

Further detailed county and district mortality data can be accessed from the [Public Health Hampshire Districts COVID-19 Cases and Mortality Report](#)

In Hampshire excess (extra) deaths occurred during wave one and wave two of the pandemic however, not all excess deaths throughout the time had COVID-19 mentioned on the death certificate. Since March the number of deaths has been below or comparable to what we would expect for this time of year. Sadly 2,913 people have so far died of COVID-19. Four deaths were reported as at the latest week ending the 3rd September.

Please note that whilst District data tends to mirror the Hampshire trend, data at this level is subject to large statistical fluctuation due to the smaller populations.



Key messages and factors to consider.....

- The rates of new confirmed COVID-19 infections are characterised by high, fluctuating all age case rates; the highest rates are in the 15-19-year-olds. Latest case rate data, reporting the 7-day period as of 8th September 2021, also suggest fluctuations in the over 60s rate with increases noted in some districts. Weekly positivity in all districts is 5% or above. Note that a positivity rate of less than 5% indicates that the epidemic is under control.
- The R for the Southeast region is estimated to be between 0.9 and 1.1 and the growth rate between -1 and +2. These estimates suggest that across the region ongoing community transmission continues. We need to monitor this closely, keeping a close watch on hospitalisations and deaths data, to ensure that growth is suppressed as much as possible. This is so that the prevalence and spread of disease falls and is contained to low levels, and we can get beyond the devastating health and economic impacts of COVID-19.
- ONS Infection Survey reported that in the week ending 3rd September 2021, infection trends varied across the four UK nations, remaining level in England, with 1.41% (1 in 70 people) in England testing positive
- Surveillance data indicate that the Delta variant is now dominant whilst the Alpha variant has declined substantially.
- The number of new COVID-19 admissions may be increasing gently.
- National evidence has shown that the vaccination programme has led to clear reduction in serious illness, hospitalisation and death.
- Acute COVID-19 pressures on the health service have reduced which is encouraging, but there is a huge non-COVID backlog and devastating longer-term impact of Long-COVID to consider. As lockdown restrictions have now been relaxed, infection rates will rise as we still have ongoing community transmission and proportions of our population who aren't fully vaccinated. We need to ensure that we continue follow preventative principles wherever possible, of fresh air, hands, space and face and self isolate if required, so that infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS. A proportion of the population are still estimated to be susceptible, given this and the highly transmissible nature of the Delta variant, it is important that we normalise and sustain COVID-19 control behaviours to break the chains of virus transmission and keep case rates low even in the context of the successful vaccination programme.

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Our focus needs to be on:

- [Being vigilant about variants](#) – emergence of the new, more transmissible Delta variant leading to increased community transmission, serves as a reminder that we need to continue to ease carefully out of lockdown, especially as population mobility increases
- [Promoting vaccination](#) – there's been a clear reduction in severe illness and hospitalisation due to a successful vaccination programme. Vaccine-effectiveness after 2 doses against the delta variant is high. We need to get more people vaccinated, especially numbers receiving the second dose
- [Aiming on containing transmission](#) – need to continue measures to reduce transmission rates of confirmed cases through NHS Test and Trace – take up of PCR testing to enable swifter case finding among contacts, step-up contact tracing and support self-isolation.
- [Continuing strong public messaging](#) – require to reiterate the importance of following COVID-19 appropriate behaviours, safe distancing, hand washing, wearing a face covering when in public places, ensuring good ventilation, regular testing and compliance with Government restrictions. These public health control measures used with previous variants are still applicable to the Delta variant.
- [Protecting younger age groups](#) - Infection rise is currently confined to younger groups and we need to lay emphasis on making activities safe rather than stopping them outright and ensuring public health control measures are followed by younger age groups.

Notes on the methodology

- Data is drawn from a range of sources, including:
 - The official UK Government website for data and insights on Coronavirus (COVID-19) (<https://coronavirus.data.gov.uk>)
 - The Office for National Statistics (<https://www.ons.gov.uk>)
 - Hampshire County Council's public health data resources (<https://www.hants.gov.uk/socialcareandhealth/publichealth/jsna/covid19-data-and-intelligence>)

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Due to time lags relating to testing times, data is generally shown excluding the previous five days, for the purposes of data quality

Where rates are used, these are shown per 100,000 population

Locally calculated rates are slightly ahead of the national data but do align

- Importantly, at lower tier local authority levels data tends to be unstable and need to be interpreted with caution!

The Winter Plan

The Government released the [COVID-19 Autumn and Winter Plan](#) on 15/09/2021.

The Plan outlines a 'Plan A' for managing the ongoing pandemic over the Autumn and Winter months and a 'Plan B' which provides for additional steps should cases escalate and severely impact the ability of the NHS to function.

Plan A:

- a) Building our defences through pharmaceutical interventions: vaccines, antivirals and disease modifying therapeutics.
- b) Identifying and isolating positive cases to limit transmission: Test, Trace and Isolate.
- c) Supporting the NHS and social care: managing pressures and recovering services.
- d) Advising people on how to protect themselves and others: clear guidance and communications.
- e) Pursuing an international approach: helping to vaccinate the world and managing risks at the border.

Plan B - If evidence and data suggests that the NHS could be faced with unsustainable pressure, the following steps could be taken:

- a) Urgently communicating an increased risk to Public Health – leading to improved COVID safe behaviors.
- b) Mandatory vaccine only covid status certification in particular settings (**further guidance to come**)
- c) Legally mandating face coverings in certain settings.
- d) *Instruction to work from home, if you can, for a limited period of time.*

The Winter Plan – key changes and impact on local areas

- **Booster vaccines** to be delivered to those vaccinated in Phase 1 – delivered no earlier than 6 months after completion of the primary course. **To commence from 20th September.**
- **Pfizer vaccinations** to be offered to 12-15 year olds to begin from 20th September.
- **Offering a third vaccine** dose to people aged 12 and over with severely weakened immune systems
- **Maximising further vaccine uptake** - An additional £23.3 million for a network of 'Community Vaccine Champions' will be provided to local authorities and voluntary and community sector organisations. Details TBC from DHSC.
- **Extension of free Flu Vaccinations** to include all secondary school children and adults 50-64 yrs.
- **Asymptomatic testing** to be focused on those not fully vaccinated, those in education and those in higher-risk settings.
- **Testing in education settings** to continue throughout the term.
- **Lateral flow testing** to remain free for the coming months – however the universal free provision will come to an end – with **individuals and businesses having to pay** for these tests in the future, dates TBC.
- **Contact Tracing** to continue throughout the Autumn and Winter.
- **Practical and financial support** for those required to self-isolate to be extended until March 2022.
- Further update to the **Contain Framework** due in October to underline links with winter respiratory illnesses.
- The **Health Protection (Coronavirus, Restrictions) (England) (No. 3) Regulations 2020**, which enable local authorities to respond to serious and imminent public health threats, inc. **issuing directions for events**, will likely be extended until 24 March 22.

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