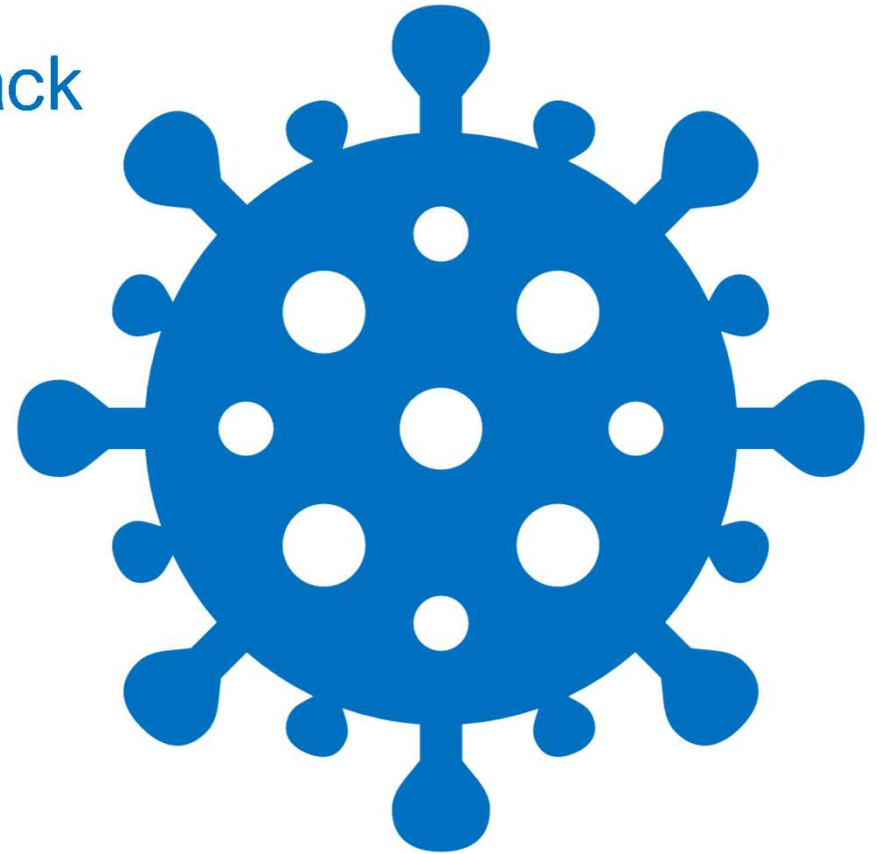


# Hampshire COVID-19 weekly datapack

25<sup>th</sup> June 2021

*Data correct as of 24<sup>th</sup> June 2021 but subject to revision*

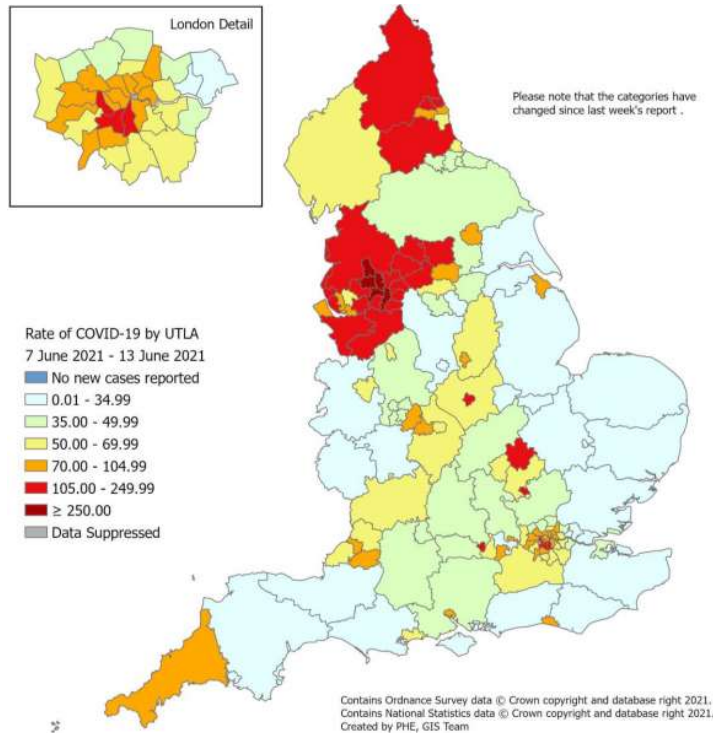


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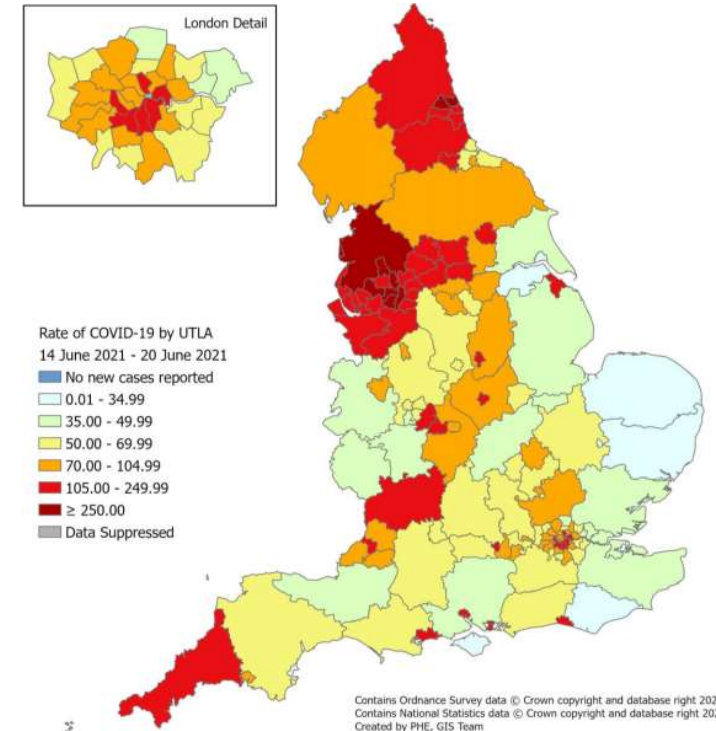
*Produced by the Public Health Team and the Insight and Engagement Unit*

# What do weekly case rates per 100,000 population tell us about COVID-19 activity in England?

Weekly rate: Week 23, 13<sup>th</sup> June 2021



Weekly rate: Week 24, 20<sup>th</sup> June 2021

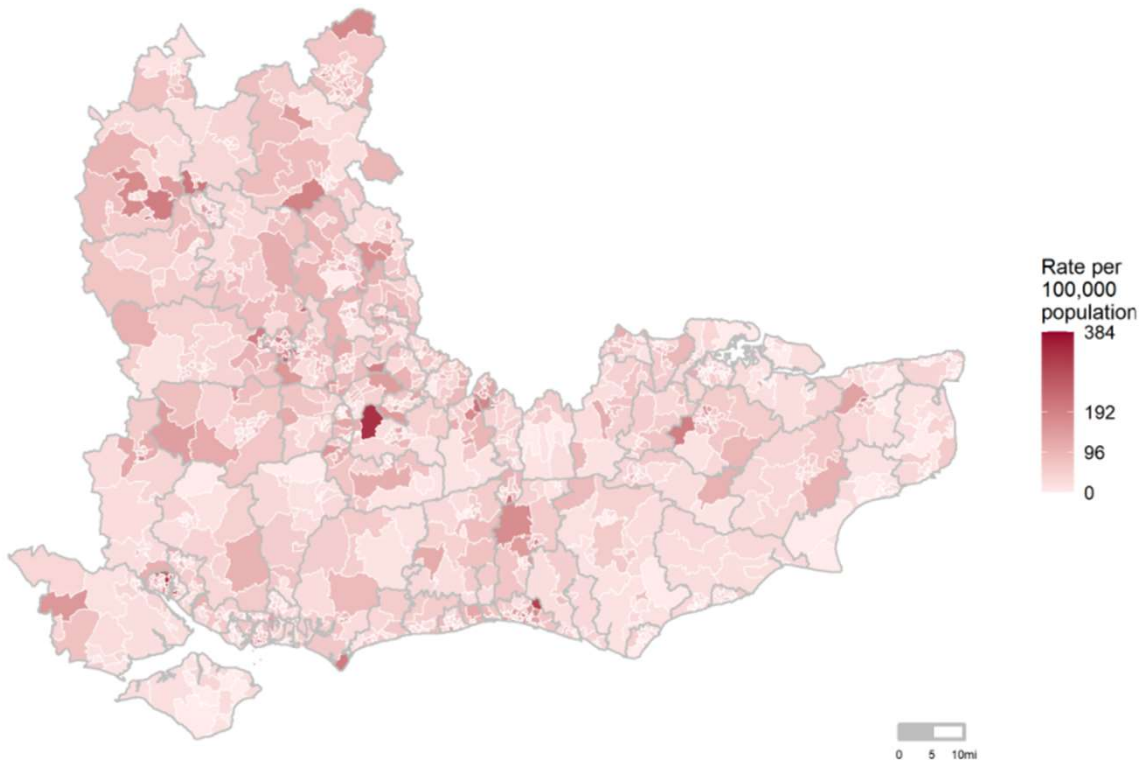


Source: *Weekly Coronavirus Disease 2019 & Influenza (COVID-19) Surveillance Report*

Overall case rates increased in week 24. Case rates increased in all age groups and regions, and most ethnic groups. Overall Pillar 1 and Pillar 2 positivity increased compared to the previous week, most notably in younger age groups.

# What do weekly case rates tell us about COVID-19 activity across South East regional local authorities?

Rate per 100,000 population of COVID-19 cases (Pillar 1 and 2 data) by MSOA in South East (includes data for the last four weeks), 24/06/2021



## Reproduction number (R) and growth rate of COVID-19, 18<sup>th</sup> June 2021

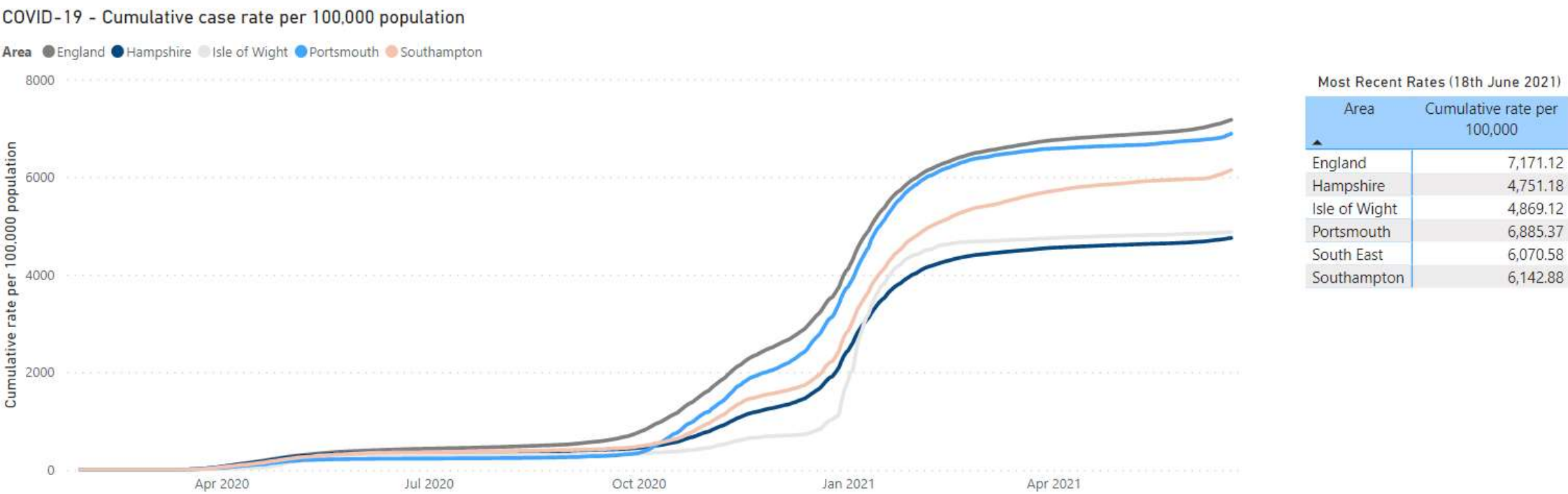
Region	R	Growth rate % per day
England	1.2 to 1.4	3 to 6
East of England	1.1 to 1.3	1 to 5
London	1.1 to 1.4	2 to 6
Midlands	1.0 to 1.3	2 to 6
North East and Yorkshire	1.0 to 1.3	1 to 6
North West	1.3 to 1.5	5 to 8
South East	1.0 to 1.3	1 to 5
South West	1.0 to 1.5	1 to 9

\* Particular care should be taken when interpreting these estimates as they are based on low numbers of cases, hospitalisations or deaths, and/or dominated by clustered outbreaks. They should not be treated as robust enough to inform policy decisions alone.

Source: The R number in the UK

Case rates across the South East are increasing. Case rate increases are most notable in the younger population aged 15 to 29 years.

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



Trends suggest an increase in the rise of infection rates across ceremonial Hampshire, with the exception of the Isle of Wight . Portsmouth City Council authority area has the highest cumulative case rate as of the 18th June 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?

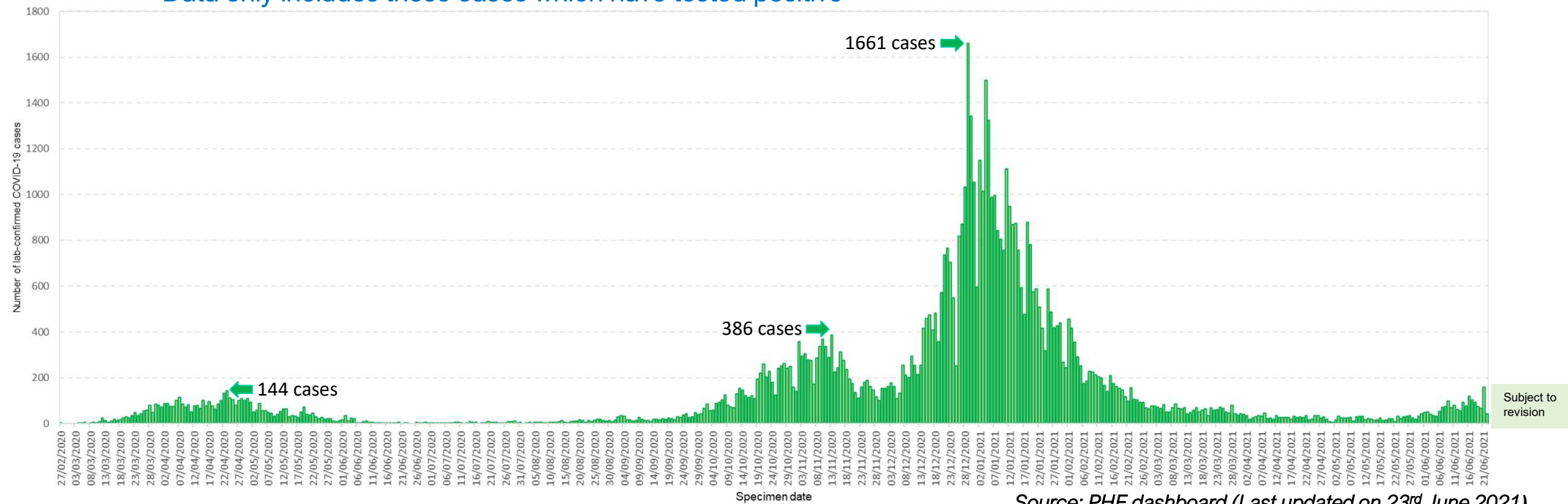
During wave 1 only Pillar 1 (NHS/PHE laboratories) testing was available, this included people admitted to hospital and later people living or working in a health or care environment. Widespread Pillar 2 community testing (Government's commercial testing partners) began on 14<sup>th</sup> July 2020 and 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  
**66,031**

**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

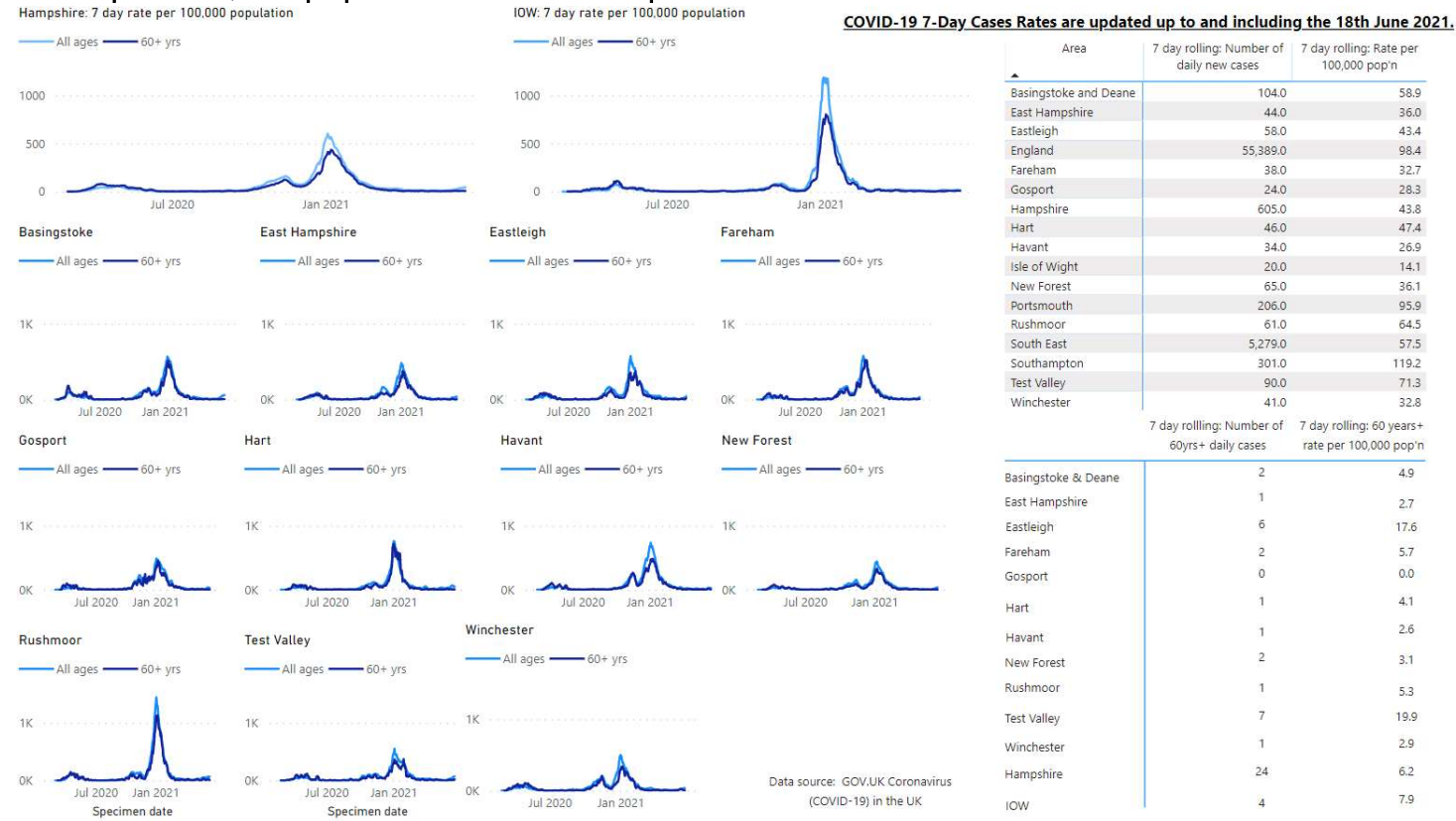


Source: [PHE dashboard](#) (Last updated on 23<sup>rd</sup> June 2021)

Over the epidemic, there have been 66,031 case detections in Hampshire (as of 23<sup>rd</sup> June). There was a small increase in cases during the period of Targeted Case Finding.

# 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 18<sup>th</sup> June 2021



Data source: PHE Line List data analysis and PHE dashboard (Last updated on 23<sup>rd</sup> June)

Overall, COVID-19 case rate activity remains low across all Hampshire Districts, although some districts have seen a slight increase in rates. At 71.3 per 100,000 population Test Valley had the highest 7-day all age case rate and Test Valley the highest over 60 year case rate of 19.9 per 100,000 population, on 18th June 2021.

# What do trends in the school age populations tell us about COVID-19 activity across Hampshire Districts?

## Age specific case rates up to 18<sup>th</sup> June 2021

**RAG Status:** See note below for rating guide

Week ending	All ages	60+ yrs
08/06/21	25.9	6.8
09/06/21	29.5	6.5
10/06/21	31.5	5.7
11/06/21	34.7	7.0
12/06/21	36.7	7.0
13/06/21	36.9	6.5
14/06/21	38.5	6.2
15/06/21	38.7	6.2
16/06/21	40.2	6.5
17/06/21	42.7	6.5
18/06/21	43.8	6.2

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

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

Week ending	All ages	60+
08/06/21	358	26
09/06/21	408	25
10/06/21	436	22
11/06/21	480	27
12/06/21	507	27
13/06/21	510	25
14/06/21	532	24
15/06/21	535	24
16/06/21	556	25
17/06/21	591	25
18/06/21	605	24

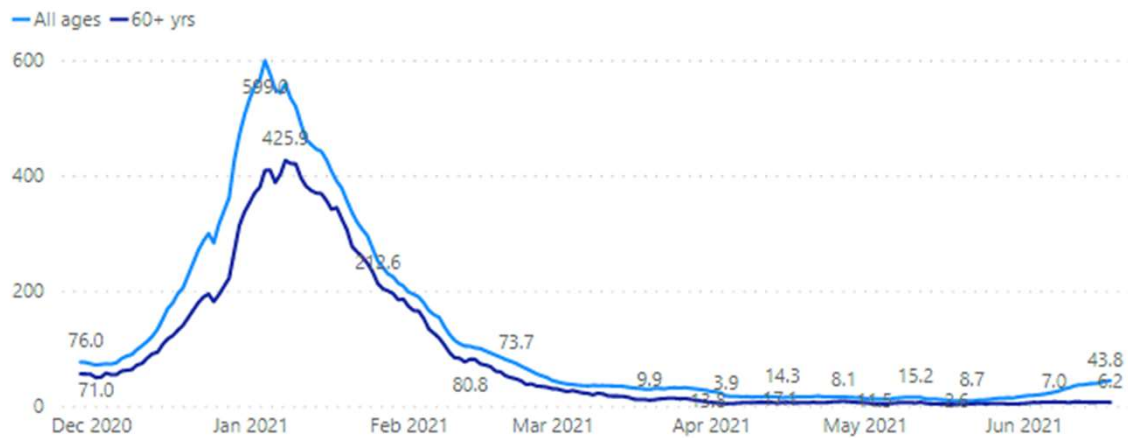
### RATING GUIDE:

**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

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



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

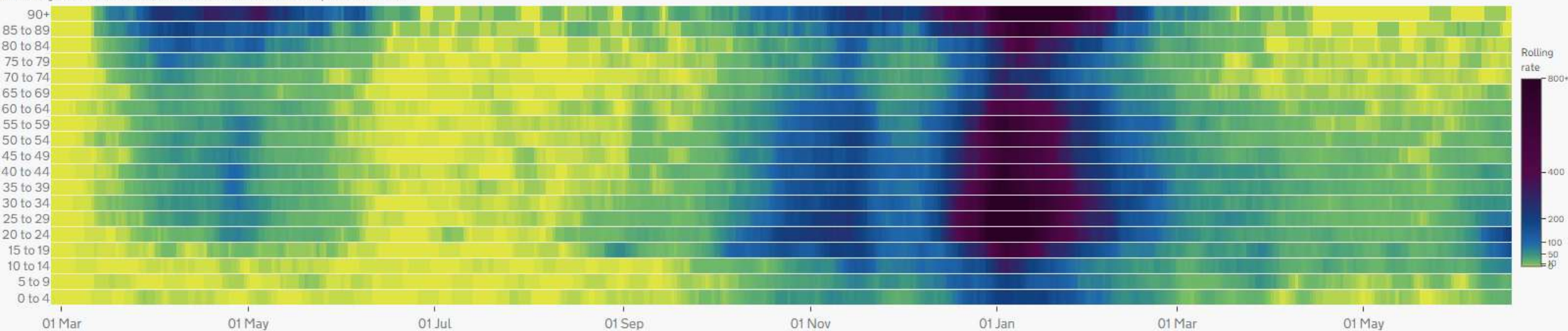
Case rates across the school ages, all ages and over 60s are currently low.



## Which age group is most affected in Hampshire?

### Cases by specimen date age demographics **EXPERIMENTAL**

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.



Cases rates continue to remain low across all age groups. Whilst highest rates are in 15-24 year olds, these rates still remain low.

Source: [PHE dashboard](#) (Last updated on 23<sup>rd</sup> June 2021)



# Variants of Concern (VOC) or Under Investigation (VUI)

Note now less dominant Alpha being replaced by the dominant Delta variant

			Data up to 16 <sup>th</sup> June		Data up to 23 <sup>rd</sup> June	
Variant	Lineage	Country first detected	Total genomically confirmed and probable cases	Change since last update on 8 <sup>th</sup> June	Total genomically confirmed and probable cases	Change since last update on 16 <sup>th</sup> June
1. Alpha (VOC-20DEC-01)	B.1.1.7	England, UK – first sequenced in the UK in Sept'20	272,011	+4,089	274,410	+2,399
2. Beta (VOC-20DEC-02)	501Y.V2.B.1.351	South Africa - first sequenced in the UK in Dec'20	1,036	+24	1,053	+17
3. Gamma (VOC-21JAN-02)	P.1	Japan ex Manaus, Brazil - first detected in the UK in Feb'21	237	+19	244	+7
4. VOC-21FEB-02	B.1.1.7 with E484K	England, UK - first detected in the UK in Dec'20	46	+1	46	0
5. Delta (VOC-21APR-02)	B.1.617.2	India	75,953	+33,630	111,157*	+35,204



Increase in Delta is thankfully moderate, and extended period of restrictions will give time to allow more vaccination

\*Of which 42 had the K417N mutation = 'Delta Plus' or AY.1, may be more transmissible and immune evasive than Delta

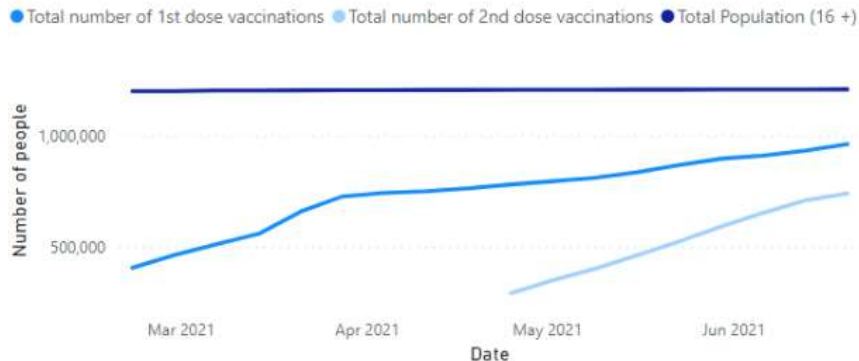
An operational WGS issue for specimen dates 10 to 15 June 2021 may impact variant counts in figures and tables for this limited period. Source: [Variants: distribution of cases data - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/variants-distribution-of-cases-data)

# How is the vaccination programme progressing in Hampshire?

Cumulative vaccinations by week up to 20<sup>th</sup> June 2021

Vaccination data as of the: 20 June 2021

Cumulative number of people vaccinated by week and dose

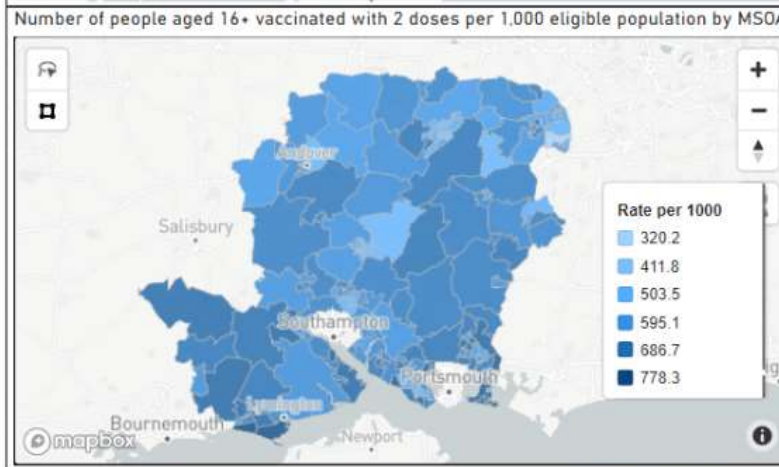
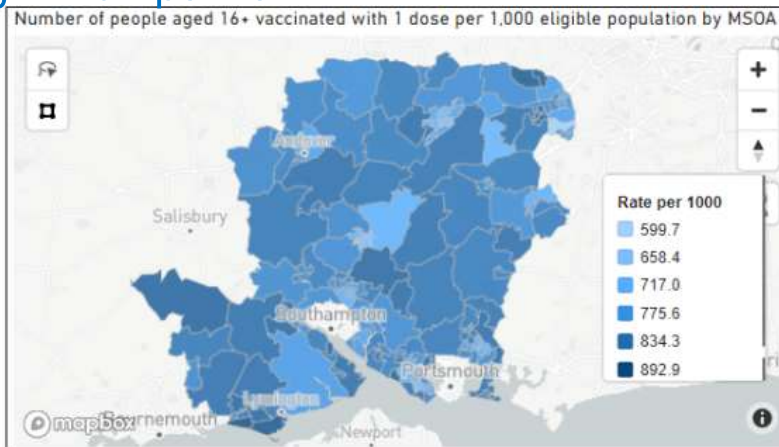


Proportion of people vaccinated

Select Dose: First

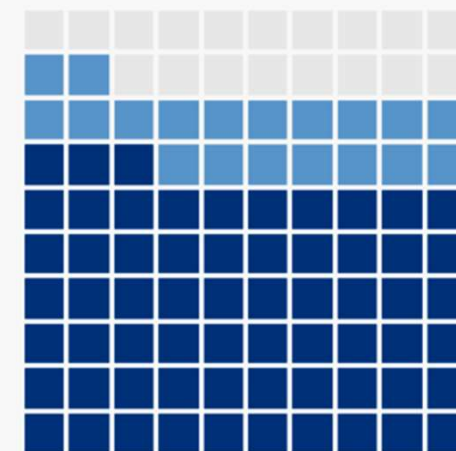
Area	25 and under	25-29	30-39	40-49	50-59	60-69	70-79	80+	All ages
Basingstoke and Deane	26.9%	43.5%	72.9%	84.4%	91.0%	93.1%	96.0%	96.3%	76.7%
East Hampshire	33.3%	53.4%	75.1%	87.8%	92.3%	94.7%	96.8%	97.6%	81.7%
Eastleigh	27.2%	47.3%	72.4%	87.0%	92.0%	94.2%	96.8%	97.2%	78.6%
Fareham	33.2%	53.7%	73.7%	88.3%	92.7%	95.1%	97.3%	97.6%	81.6%
Gosport	24.8%	45.1%	70.8%	84.5%	90.8%	94.0%	96.3%	97.0%	77.2%
Hampshire	31.1%	52.4%	73.2%	86.1%	91.7%	94.2%	96.5%	97.1%	79.6%
Hart	39.3%	59.8%	76.8%	87.9%	92.2%	94.6%	97.0%	97.4%	81.7%
Havant	30.3%	54.2%	69.7%	85.8%	92.1%	94.9%	96.7%	97.1%	80.1%
New Forest	39.3%	60.9%	74.8%	85.4%	91.7%	94.6%	96.6%	97.2%	83.7%
Rushmoor	35.4%	57.7%	70.4%	82.7%	89.7%	91.3%	93.8%	94.3%	75.7%
Test Valley	22.9%	49.5%	75.1%	87.2%	92.5%	94.6%	96.7%	97.6%	79.7%
Winchester	30.0%	55.6%	73.8%	86.4%	91.7%	93.8%	96.4%	97.2%	77.8%

Estimated vaccination rates for 1<sup>st</sup> and 2<sup>nd</sup> doses continue to increase in Hampshire Districts. National evidence shows that the vaccination programme has led to clear reduction in symptomatic disease, death and hospitalisation.



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

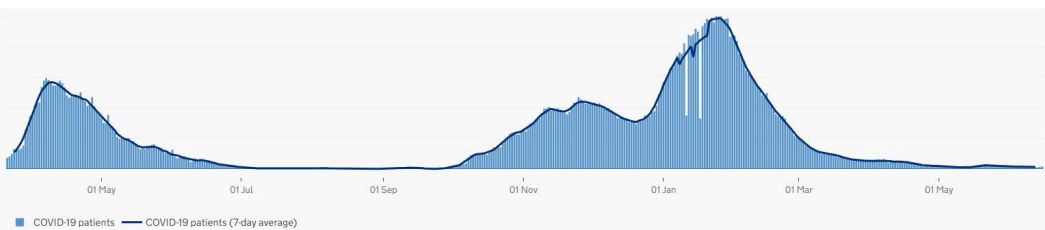
## Vaccination uptake



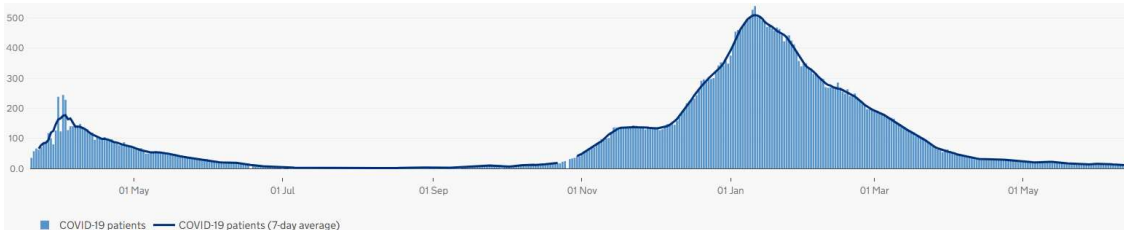
Source: [PHE dashboard](#) (Last updated on 23<sup>rd</sup> June 2021)

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

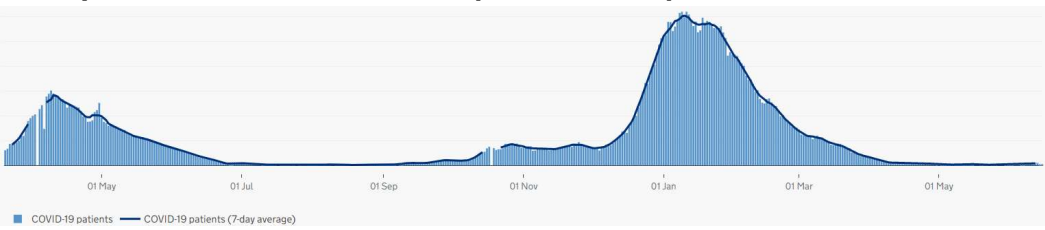
**Hampshire Hospitals NHS Foundation Trust – 4 patients in hospital**



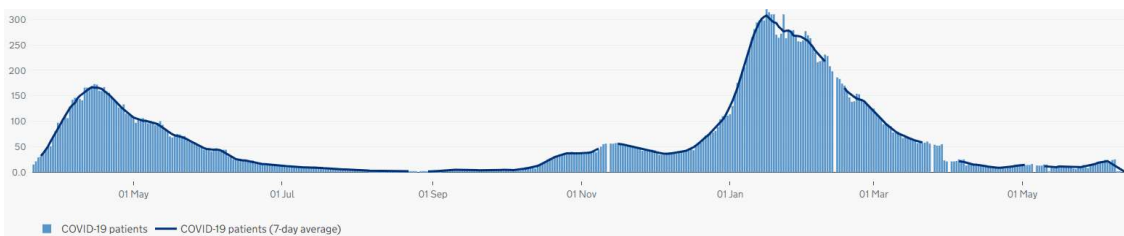
**Portsmouth Hospitals University NHS Trust – 10 patients in hospital**



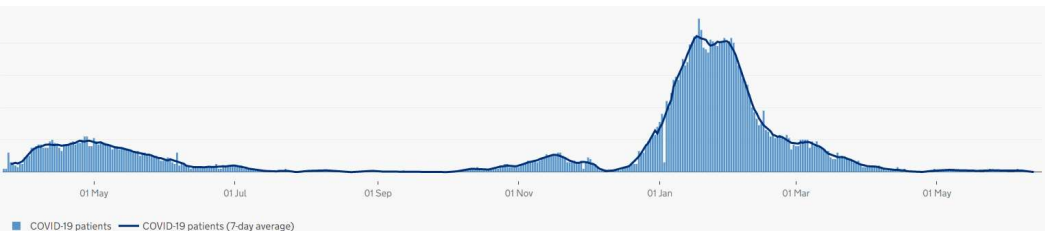
**Frimley Health Foundation Trust – 5 patients in hospital**



**University Hospital Southampton NHS Foundation Trust – 3 patients in hospital**



**Isle of Wight NHS Trust – 0 patients in hospital**

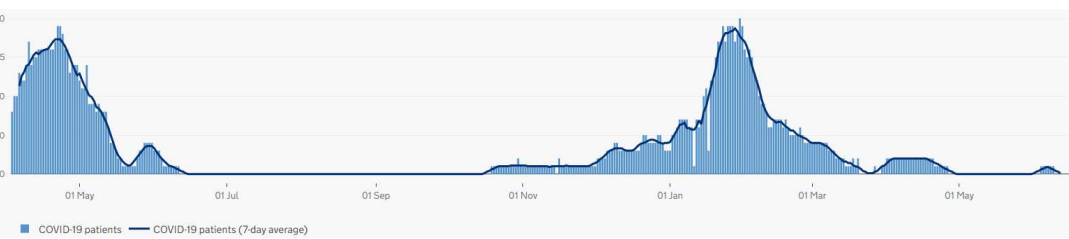


Data source: <https://coronavirus.data.gov.uk/details/healthcare> reported on 24th June 2021

Overall, the number of new COVID-19 admissions are small, hospital occupancy is now below the wave 1 and 2 peaks across HIOW trusts.

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

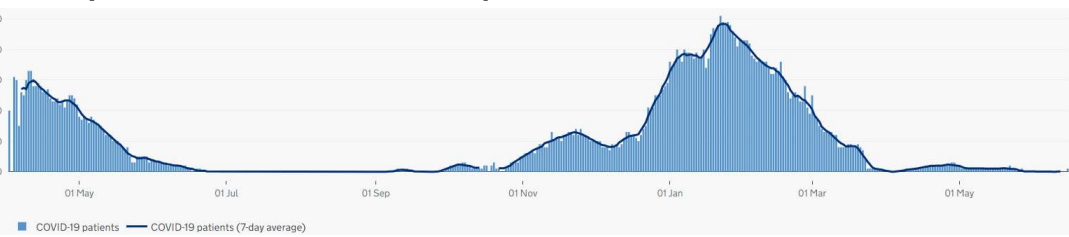
**Hampshire Hospitals NHS Foundation Trust – 0 patients on ventilation**



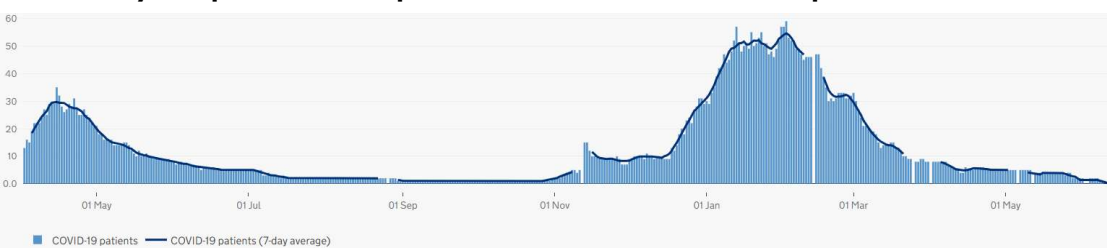
**Portsmouth Hospitals University NHS Trust – 0 patients on ventilation**



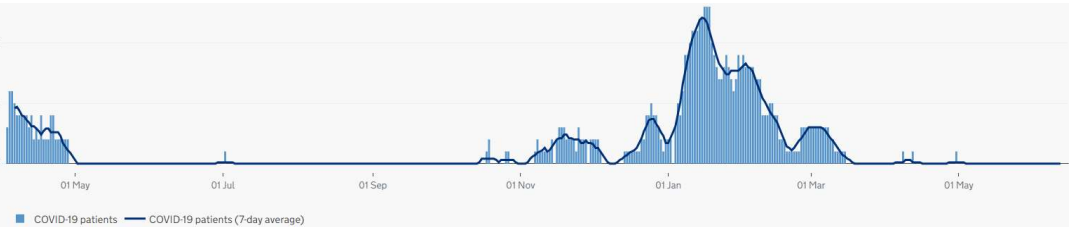
**Frimley Health Foundation Trust – 1 patient on ventilation**



**University Hospital Southampton NHS Foundation Trust – 1 patient on ventilation**



**Isle of Wight NHS Trust – 0 patients on ventilation**



Data source: <https://coronavirus.data.gov.uk/details/healthcare> reported on 24th June 2021

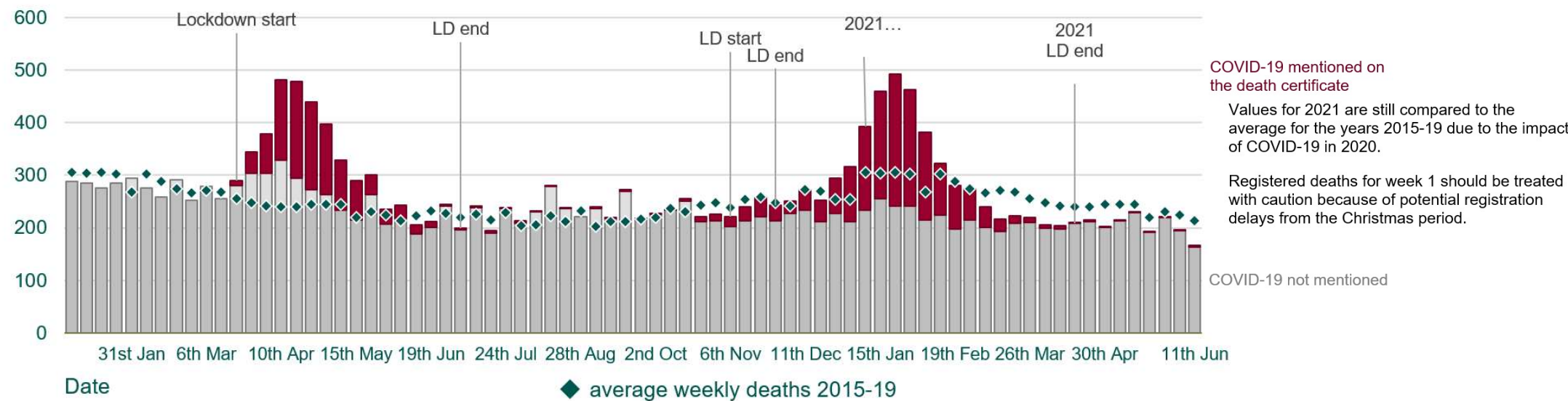
The number of COVID-19 patients in mechanical ventilation beds in critical care units (CCU) across Hampshire has now declined. The need to avoid CCUs being overwhelmed is a key factor in significant policy decisions, including regional and national lockdowns and service recovery.



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

Hampshire deaths per week over 2020 to 11<sup>th</sup> June 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: PHE ONS- Deaths registered weekly in England and Wales, provisional

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 the beginning of March the number of deaths has been below what we would expect for this time of year. Sadly 2,855 people have so far died of COVID-19, with three deaths reported over the latest week ending the 11<sup>th</sup> June.

# The COVID-19 alert level and Tiering indicators – Hampshire summary 13th June to 19th June 2021

On the 22nd February the government announced [the roadmap which outlines four steps for easing restrictions](#). Before proceeding to the next step, the Government will examine the data to assess the impact of previous steps. This assessment will be based on four tests:

- Test 1** -The vaccine deployment programme continues successfully.
- Test 2** - Evidence shows vaccines are sufficiently effective in reducing hospitalisations and deaths in those vaccinated.
- Test 3** - Infection rates do not risk a surge in hospitalisations which would put unsustainable pressure on the NHS.
- Test 4** - Our assessment of the risks is not fundamentally changed by new Variants of Concern.

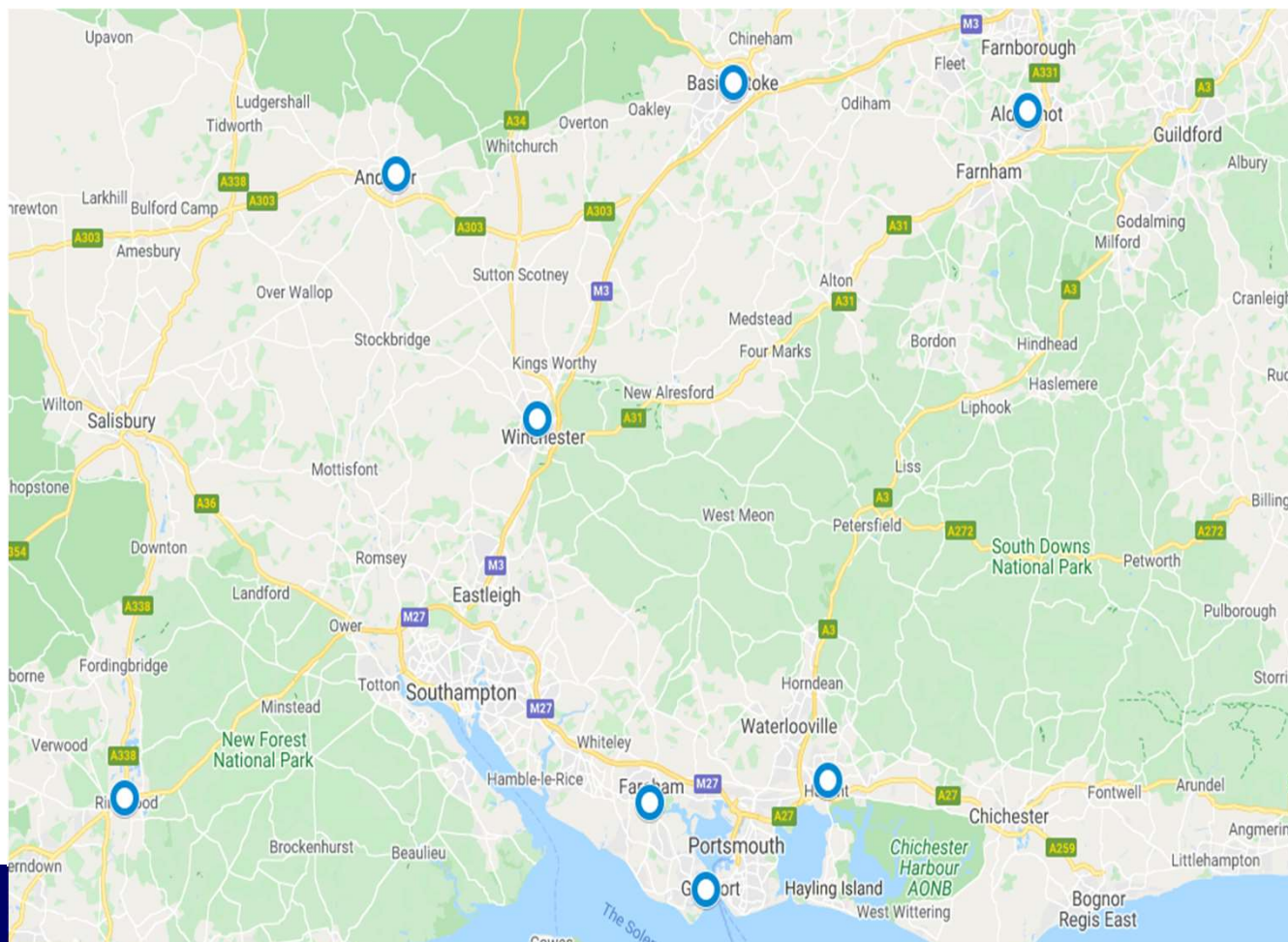
When interpreting these data at a district level it is important to note that small numbers can cause daily fluctuations. Therefore this narrative must be considered with the long term trends shown on slide 7 which show an overall decrease in trends across all districts since mid- January

**The Joint Biosecurity Centre Tier allocation indicators** - The JBC's Tiering allocation is separate, and independent of its alert level system. The most recent figures for these indicators for Hampshire are provided below for reference as they provide a picture of what is happening with the virus in local areas:

1. **Case detection rates in all age groups** - The overall Hampshire and all lower tier local authority COVID-19 all age weekly case detection rates are low in most districts, however, increases are evident across the County largely driven by the younger population. **Test Valley has the highest rate of 72.1 per 100,000, followed by Rushmoor, 60.3 per 100,000.**
2. **Case detection rates in the over 60s** –weekly case rates in the over 60s is low with small fluctuations in the numbers of cases. **Test Valley has the highest over 60s rate of 19.9 per 100,000.**
3. **The rate at which cases are rising or falling** – The number of cases remains low. Local increases cause small fluctuations in cases resulting in larger percentage changes, due to this there is variation in the percentage change in case rate across the districts. Overall rates remain low but increasing community transmission is evident.
4. **Positivity rate (the number of positive cases detected as a percentage of tests taken)** – Weekly positivity rates are now low in all districts **Test Valley (1.9%), Basingstoke & Deane (1.8%) and Rushmoor (1.6%) have the highest positivity.** Note that a positive rate of less than 5% indicates that the epidemic is under control.
5. **Pressure on the NHS, including current and projected occupancy** - The number of new hospital cases admitted across trusts is low. The total number of mechanical and non-invasive ventilated beds occupied with a COVID-19 patient remains low. However, all NHS services are busy and under severe non-COVID-19 backlog pressures.

# Local Testing Site (LTS) Locations

<b>Aldershot</b>	Rushmoor	Parsons Barracks Car Park, Ordnance Road, Aldershot, GU11 1TW
<b>Gosport</b>	Gosport	Walpole Park Car Park, South Street, Gosport, PO12 1NH
<b>Havant</b>	Havant	Havant Civic Centre Car Park, Havant, Hampshire, PO9 2AX
<b>Winchester</b>	Winchester	Worthy Lane Car Park, Winchester, Hampshire, SO23 7AB
<b>Fareham</b>	Fareham	Cams Alders Car Park, Palmerston Drive, Fareham, Hampshire PO14 1BJ
<b>Andover</b>	Test Valley	Shepherds Spring Lane Car Park, SP10 1QW
<b>Basingstoke</b>	Basingstoke & Deane	Churchill Way East Car Park, Basingstoke RG21 7QU
<b>Ringwood</b>	New Forest	The Furlong Car Park, Ringwood BH24 1AT



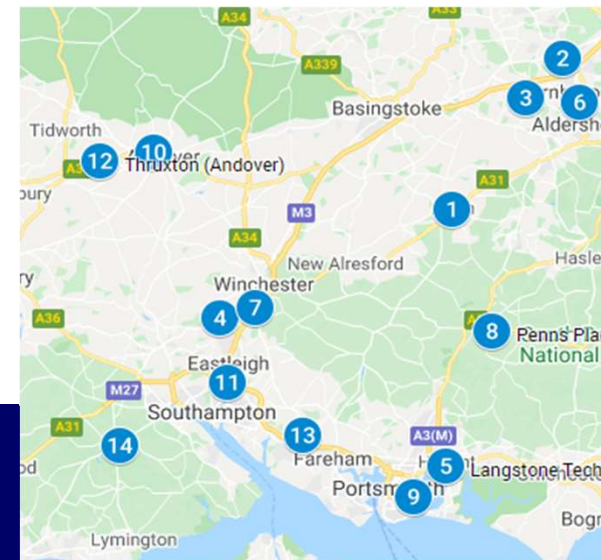
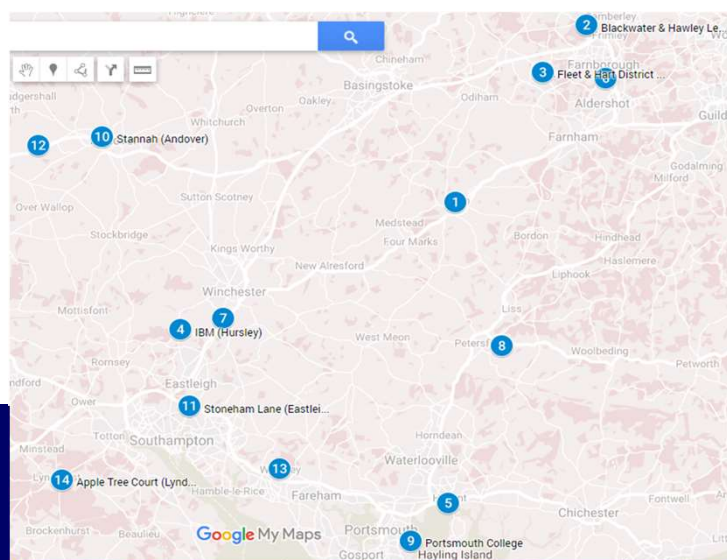




# Mobile Testing Units (MTU) Locations

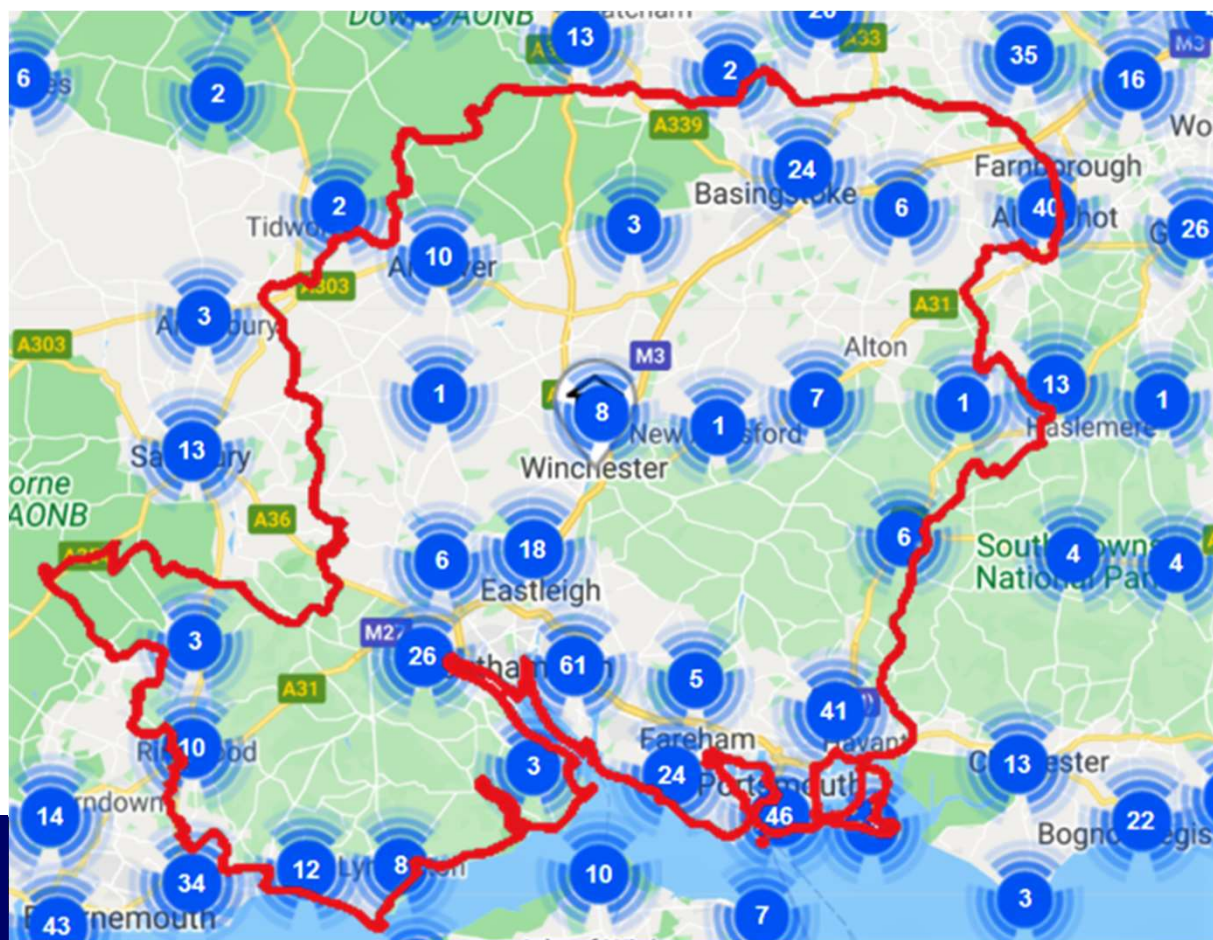
Site Name	District	Address
Apple Tree Court (Lyndhurst)	New Forest	Appletree Court, Beaulieu Rd, Lyndhurst SO43 7PA
Bank Carpark (Alton)	East Hants	Vicarage Hill, Alton GU34 1HN
Blackwater & Hawley Leisure Centre	Hart	Hawley Green, Blackwater, Camberley GU17 9BW
Fleet & Hart District Council Offices	Hart	Hart District Council Offices Car Park, Fleet GU51 4AE
IBM (Hursley)	Winchester	IBM Hursley, Hursley Park, Winchester, SO21 2LA
Langstone Technology Park	Havant	Langstone Rd, Havant
Napier Gardens (Farnborough)	Rushmoor	Napier Gardens Car Park, Redvers Buller Road, Farnborough GU11 2JH
Park & Ride South (Winchester)	Winchester	Winchester Park & Ride SO21 2FG
Penns Place (Petersfield)	East Hants	Penns Place Car Park, Petersfield GU31 4EX
Portsmouth College	Portsmouth	Tangier Rd, Portsmouth PO3 6PZ
Stannah (Andover)	Andover	Watt Close, East Portway, Andover SP10 3SD
Stoneham Lane (Eastleigh)	Eastleigh	Stoneham Lane Football Complex, Eastleigh SO16 2PA
Thruxton (Andover)	Andover	Thruxton Aerodrome, Andover SP11 8PN
Zurich (Whiteley)	Fareham	Zurich, Whiteley, PO15 7JZ

- 1 Bank Carpark (Alton)
- 2 Blackwater & Hawley Leisure...
- 3 Fleet & Hart District Council ...
- 4 IBM (Hursley)
- 5 Langstone Technology Park
- 6 Napier Gardens (Farnborough)
- 7 Park & Ride South (Winchest...
- 8 Penns Place (Petersfield)
- 9 Portsmouth College
- 10 Stannah (Andover)
- 11 Stoneham Lane (Eastleigh)
- 12 Thruxton (Andover)
- 13 Zurich (Whiteley)
- 14 Apple Tree Court (Lyndhurst)





# Hampshire Pharmacy Collect & Test



**B**lue circles show locations of pharmacies offering collect and supervised asymptomatic testing.

For the full list of names and locations please use the following link:

<https://maps.test-and-trace.nhs.uk/#>

# Testing Summary

- The following locations offer symptomatic testing using PCR tests for those with symptoms
  - 1 x Regional Testing site (RTS)  
Southampton Airport, Eastleigh
  - 8 x Local Testing sites (LTS)
  - 3 x Mobile Testing Units (MTU) deployed across 14 locations in Hampshire
  - Any of the above locations can also be re-designated as asymptomatic sites when testing for variants of concern (VOC's)
  - Asymptomatic testing using Lateral flow devices (LFD) for those without symptoms
  - **Supervised testing** located at 33 Pharmacy sites
  - **Home collect test** from over 300 pharmacy locations
  - Eg 3<sup>rd</sup>-9<sup>th</sup> May - 38918 boxes of tests collected
  - Access to additional MTU's from DHSC for surge testing
- National testing schemes** registered for:
- Children Services incl schools, nurseries, homes
  - Adult Social Care incl: Care Homes, Extra Care & Supported Living
  - Workplace testing: Private and Public
  - <https://maps.test-and-trace.nhs.uk/>

## Key messages and factors to consider.....

- Evidence of increasing community transmission is evident across areas Hampshire although the rates of new confirmed COVID-19 infection still remain low in districts. A small number of cases with the Delta variant (B.1.617.2 identified in India) were detected in Rushmoor and Hart, resulting in Targeted Case Finding in these areas, and a subsequent increase in case numbers as asymptomatic cases were identified.
- The latest case rate data, reporting the 7-day period for 13<sup>th</sup> June to 19<sup>th</sup> June, suggest low case rates in the over 60s case rate. Weekly positivity rates are low across all districts. All districts have a positivity less than 2%. Note that a positivity rate of less than 5% indicates that the epidemic is under control.
- The R for the South East region is estimated to be between 1.0 and 1.3 and the growth rate between 1 and 5. These estimates suggest that across the region ongoing community transmission is occurring. We need to monitor this closely, keeping a close watch on hospitalisations and deaths data, to ensure that growth is suppressed, and R is kept below 1. This is so that the prevalence and spread of disease falls, and is contained, to levels which enable fewer restrictions, and we are able to get beyond the devastating health and economic impacts of COVID-19.
- The daily number of new COVID-19 hospital cases is low. Decreasing COVID-19 bed occupancy pressures are now evident.
- Monitoring of Variants of Concern (VOC) or Under Investigation (VUI) occurs regularly, the Alpha variant (B1.1.7 identified in Kent) is no longer dominant locally and has been replaced by the Delta variant as the most common variant in this area.
- National evidence has shown that the vaccination programme has led to clear reduction in symptomatic disease, death and hospitalisation.
- Acute COVID-19 pressures on the health service have reduced to expected levels which is encouraging, but there is a huge non-COVID backlog and devastating longer term impact of Long-COVID to consider. As lockdown restrictions are eased further, infection rates will rise as we still have low levels of ongoing community transmission and proportions of our population who aren't fully vaccinated. We need to ensure that we adhere to current preventative principles of 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. We need to recognise that infection rates have not reached a peak naturally, rather polices have successfully suppressed the infection rates temporarily. A proportion of the population are still estimated to be susceptible given this and the highly transmissible nature of the new variant, means 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.

## Our focus needs to be on:

- Being vigilant about variants – emergence of the new, more transmissible delta variant (first identified in India) leading to increased community transmission i.e. non-travel related transmission, serves as a reminder that we need to continue to ease carefully out of lockdown, especially as population mobility increases with international travel
- In the absence of a vaccination programme for people aged under 18 years, this young population remain susceptible to COVID-19 therefore the importance of regular testing, isolating and following COVID-19 appropriate behaviours is vitally important. Although the clinical risk for young people is low, it is not absent, and these measures will help protect them from the potential long term health and wider impacts of COVID-19.
- Promoting vaccination – clear reduction in symptomatic disease and hospitalisation, however effectiveness against emerging VOCs, is unclear. At the moment there is no evidence that vaccines won't work, but we don't know enough yet. However, vaccine-effectiveness after 2nd dose against the delta variant is reckoned to be higher.
- Declining case rate trends – need to be cognisant that rates have not been suppressed to those that were experienced in summer 2020 and the delta variant, which is now dominant, is more transmissible than that circulating at the start of the pandemic and also the alpha variant. We must be attentive around troubling growing infection rates to ensure they do not translate into hospital admissions.
- Continuing strong public messaging – require to reiterate the importance of following COVID-19 appropriate behaviours, complying with Government guidance on safe distancing, hand washing, wearing a face covering when in public places and ensuring good ventilation



## 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>)
- 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!