



TRAFFORD COUNCIL

AGENDA PAPERS FOR TRAFFORD COVID-19 PUBLIC ENGAGEMENT BOARD

Date: Wednesday, 16 March 2022

Time: 10.00 am

Place: Virtual meeting:

<https://www.youtube.com/channel/UCjwblOW5x0NSe38sgFU8bKg>

A G E N D A	PART I	Pages
1. ATTENDANCES		
To note attendances, including officers, and any apologies for absence.		
2. DECLARATIONS OF INTEREST		
Members to give notice of any interest and the nature of that interest relating to any item on the agenda in accordance with the adopted Code of Conduct.		
3. MINUTES		1 - 4
To receive and, if so determined, to approve as a correct record the Minutes of the meeting held on 23rd February 2022.		
4. UPDATE ON THE CURRENT COVID-19 SITUATION IN TRAFFORD		5 - 24
To receive an update from the Director of Public Health.		
5. 10 POINT PLAN UPDATE		
(a) Mass Testing		
To receive a verbal update from the Strategic Testing Lead.		
(b) Contact Tracing and Outbreak Management		
To receive a verbal update from the Covid-19 Project Manager.		
(c) Mass Vaccination		
To receive a verbal update from the Deputy Medical Director, Trafford		

CCG.

(d) **Community Engagement**

To receive a verbal update from Regulatory Services.

6. **PUBLIC ENGAGEMENT BOARD ACTIVITY**

For all Board Members to provide updates on any activity pertaining to the remit of the Board not covered elsewhere on the agenda.

7. **ANY OTHER BUSINESS**

To consider any other items of business not on the agenda which need to be considered by the Board before the next confirmed meeting.

SARA TODD

Chief Executive

Membership of the Committee

Council Leader or named Elected Member, nominated leads from opposition parties
VCSE representatives – including specialists relating to key population groups (older people; BAME; children; mental health , Learning Difficulties), Partnerships lead, Communications lead, Director of Public Health, Director of Adult Social Services, Director for Children's Services, Neighbourhood representatives, Clinical Commissioning Group representative, Trafford Local Care Organisation representative, Healthwatch Representative

Further Information

For help, advice and information about this meeting please contact:

Molly Shaw,

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Email: molly.shaw@trafford.gov.uk

This agenda was issued on **15th March 2022** by the Legal and Democratic Services Section, Trafford Council, Trafford Town Hall; Talbot Road, Stretford, Manchester, M32 0TH

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Trafford Covid-19 Public Engagement Board - Wednesday, 16 March 2022

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Document Pack Page 1
Trafford Covid-19 Public Engagement Board

Wednesday 23rd February 2022 – 10:00 a.m. – Virtual meeting

Present:

Councillor Freeman (Chair)	Executive Member for Covid-19 Recovery and Reform
Councillor Newgrosh	Member of the Health Scrutiny Committee, Trafford Council
Councillor Acton	Chair of the Overview and Scrutiny Committee, Trafford Council
Councillor Welton	Ward Councillor, Trafford Council
Councillor Blackburn	Ward Councillor, Trafford Council
Helen Gollins	Acting Director of Public Health, Trafford Council
Khan Moghal	Chair, Voice of BME Trafford
Andrew Latham	Chief Officer, HealthWatch Trafford
Dorothy Evans	Voluntary, African Caribbean Care Group
Jilla Burgess-Allen	Consultant in Public Health, Trafford Council
Mark Jarvis	Medical Director, Trafford CCG
Ellie Caddick	Covid-19 Communications Lead, Trafford Council
Jamie Oliver	Communications & Engagement Specialist, Trafford Council
Catherine Martland	Outbreak and Contact Tracing Hub Officer, Trafford Council
Danny Zammit	Strategic Neighbourhood Lead, Trafford Council
Beenish Hanif	Health Protection Lead, Trafford Council
Molly Shaw	Governance Officer, Trafford Council
Natalie Owen	Governance Officer, Trafford Council

	Item	Decision / Action	Key Person for Action
1.	Welcome and apologies	Apologies were received from Ben Wilmott.	
2.	Minutes	The minutes of the meeting 9 th February 2022 were agreed as an accurate record.	
3.	Membership	There had been no changes to the Membership since the last meeting.	
4.	Update on the current Covid-19 situation in Trafford	<p>The Board agreed to note the update.</p> <p>The following messages were shared with the Board:</p> <ol style="list-style-type: none"> 1. The rates across Trafford had decreased with rates at 277 per 100,000; 2. The rates in over 60s had decreased to 205 per 100,000; 3. The positivity rate was 9%; 4. Trafford had the second highest rates across Greater Manchester; 5. The South and Central wards had the highest rates across Trafford; 6. A presentation was shared which outlined the four principles of ongoing advice, key dates and actions being taken in the future; 	All

		<ol style="list-style-type: none"> 7. From 24th February, people who tested positive no longer were required to isolate; 8. There were still actions that were being taken by the Local Authority to stop the spread of Covid-19 such as vaccination, PPE and surveillance; 9. People needed to take additional care (even if vaccinated) by avoiding crowded places, meeting people outdoors where possible, wearing a mask, keeping up with hand hygiene, and working from home if able. 	
5.	10POINT ACTION PLAN		
5a.	Mass Testing	<p>The Board agreed to note the update. The following messages were shared with the Board:</p> <ol style="list-style-type: none"> 1. That as of Monday, most students and staff in education settings no longer had to test twice weekly; 2. That from 24th February, under 18s and fully vaccinated close contacts no longer had to take daily tests; 3. From 1st April, the provision of free universal symptomatic and asymptomatic testing would end; 4. Symptomatic testing will remain for social care and health care staff; 5. That over 80s and the most vulnerable people would be able to have free symptomatic testing; 6. Although there was no legal requirement to isolate, the national message was to avoid contact with others and order a PCR. 	All
5b.	Contact Tracing and Outbreak Management	<p>The Board agreed to note the update. The following messages were shared with the Board:</p> <ol style="list-style-type: none"> 1. There was cases in 9 primary schools, 6 secondary schools and 11 early years settings but none were meeting outbreak thresholds; 2. There was very low activity in workplace settings; 3. The local Contact Tracing team carried out contact tracing with Level 2 cases and had a completion rate of 75%; 4. Support had been given to people across Trafford who were self-isolating. 	All
5c.	Care Homes and Supported Accommodation	<p>The Board agreed to note the update. The following messages were shared with the Board:</p> <ol style="list-style-type: none"> 1. The outbreaks in care home settings had reduced significantly and at present there was only 2 with 	All

		<p>outbreaks, compared with 28 in January;</p> <ol style="list-style-type: none"> 2. All asymptomatic staff should test daily using a Lateral Flow test; 3. All symptomatic residents should be tested monthly using a PCR test; 4. If a staff member returns to work after testing positive, they should resume routine LFD testing, even within the 90 day window of testing positive; 5. Staff who tested positive on a LFD within the 90 day period should start a new period of self-isolation; 6. Residents who test positive should isolate regardless of vaccination status, then take LFD tests daily from day 5; 7. Residents can end isolation early following 2 consecutive negative Lateral Flow tests, but only if clinical improvement criteria's are met. 	
5d.	Mass Vaccination	<p>The Board agreed to note the update. The following messages were shared with the Board:</p> <ol style="list-style-type: none"> 1. That the 5-11 year old vaccination programme had been approved; 2. Low uptake was expected for this vaccination but it was a travel requirement for most countries which could encourage uptake; 3. The emphasis on the 5-11 year old vaccination programme was to allow parents to make informed decisions; 4. The current vaccination centre contracts end on 31st March so new arrangements were to be put in place. 	All
5e.	Update and escalations from the COVID-19 Community Engagement Group	<p>The Board agreed to note the update. The following messages were shared with the Board:</p> <ol style="list-style-type: none"> 1. The team were door knocking to promote the mobile vaccination clinics; 2. The team were helping schools to boost the uptake of the 12-15 year old vaccine programme; 3. Primary schools were being contacted to deliver sessions to promote covid-safe behaviours such as hand hygiene; 4. There was an ongoing art project in schools to highlight young people's experience of the pandemic. 	All

5f.	Communications Strategy	<p>The Board agreed to note the update.</p> <p>The following messages were shared with the Board:</p> <ol style="list-style-type: none"> 1. The key messages being delivered were: <ol style="list-style-type: none"> a. To get vaccinated; b. Ensure proper ventilation; c. Encourage face coverings; d. Stay at home if you're not well; e. Test if you are symptomatic; f. Catch it, bin it, kill it; g. Hand hygiene; 2. Before 31st March, messaging would still promote getting a PCR if symptomatic; 3. A MMR campaign was also running nationally. 	
6.	Public Engagement Board Activity and Feedback	None.	
7.	Any Other Business	None.	
8.	Date of Next Meeting	Wednesday 16 th March 2022 at 10:00 a.m.	



Weekly External COVID-19 Data Briefing

The reported week in these briefing slides cover the 7-day period between 4 March and 10 March 2022

Trafford Public Health Team

Epi Summary (1 of 2)

Overview

- There were **1148** confirmed cases during the week ending Thursday 10 March 2022, with the highest number of cases (**230**) reported on **Wednesday 9 March**.
- Our 7 day case rate has increased to **483.2/100k** from **259.7/100k** in the previous week.
- We have seen a sharp increase in our case rate over the past week and we expect further increases in the coming days.
- Trafford's case rate is above the North West average (**398.3/100k**), but below England (**502.4/100k**) average. Trafford has the highest case rate across the 10 GM boroughs.
- Trafford's testing rate saw slight increases (at **187.6/100k** from **177/100k**), whilst our positivity rate (at **18.5%** from **10.3%**) increased sharply from the previous week.

Age Profiles

- Case rates have increased for all residents over the past week.
- Case rates remain highest for 30-44 year olds (at **709.4/100k** from **414.2/100k** in the previous week).
- We have seen large increases in the number of positive cases for residents aged 60+ (at **333.5/100k** from **192.7/100k** in the previous week).
- When compared to the previous week, PCR testing rates have increased slightly for most age groups. PCR testing rates are much higher for residents above the age of 74 when compared to all other ages.

Epi Summary (2 of 2)

Geography

- Case rates have increased for all but 1 ward (Brooklands).
- Case rates are highest for wards in Trafford's South and West localities.
- Case rates have increased most for wards in the West & South of the borough.

Hospital Activity

- The increases in hospitalisation that we had noted has now stabilised.
- There were **183** local COVID-19 admissions during the week ending Sunday 6 March 2022 compared with **181** COVID-19 admissions during the previous week.
- The North West region is seeing larger increases in COVID-19 hospital admissions.

Mortality

- There were less than **5** deaths for Trafford residents testing positive from COVID-19 in the 14 days up to Sunday 14 March 2022, which is unchanged from the previous 14 day period.

Public Health Concern

We have seen a sharp increase in COVID-19 cases over the past 10 days. We expect to see further increases in our case rate, however we do not expect a similar spike in COVID-19 infections to what we experienced in December 2021-January 2022. Although all other GM boroughs are also seeing an increase in their case rate, Trafford has the highest case rate across GM. Trafford has the highest positivity rate and 3rd highest testing rate across GM (with little difference in testing between the boroughs), indicating that our current case rate is reflective of increasing community transmission. As a result of testing policy changes, our understanding of data accuracy and trend analysis will change. Other surveillance means will start to become utilised, however these techniques are still in development.

Post December 2021 has seen a visible increase in the number of COVID-19 re-infections. The Omicron variant seems to be a driving factor in these re-infections, indicating that people are still at risk of COVID-19 even if they have had the infection previously. We are keeping a close eye on the data to see if any noticeable trends are occurring throughout the borough.

COVID-19 vaccinations continue to provide the most effective protection against COVID-19 infection and the link with hospital admissions/COVID-19 mortality. Although the most recent two weeks shows a slight increase in the number of local hospital admissions (as well as a similar regional trend), the number of COVID-admitted residents occupying ventilation beds is lower than any period prior to July 2021. The increasing trend in hospital admissions is of concern, however the current level of hospital admissions is as expected considering our current prevalence.

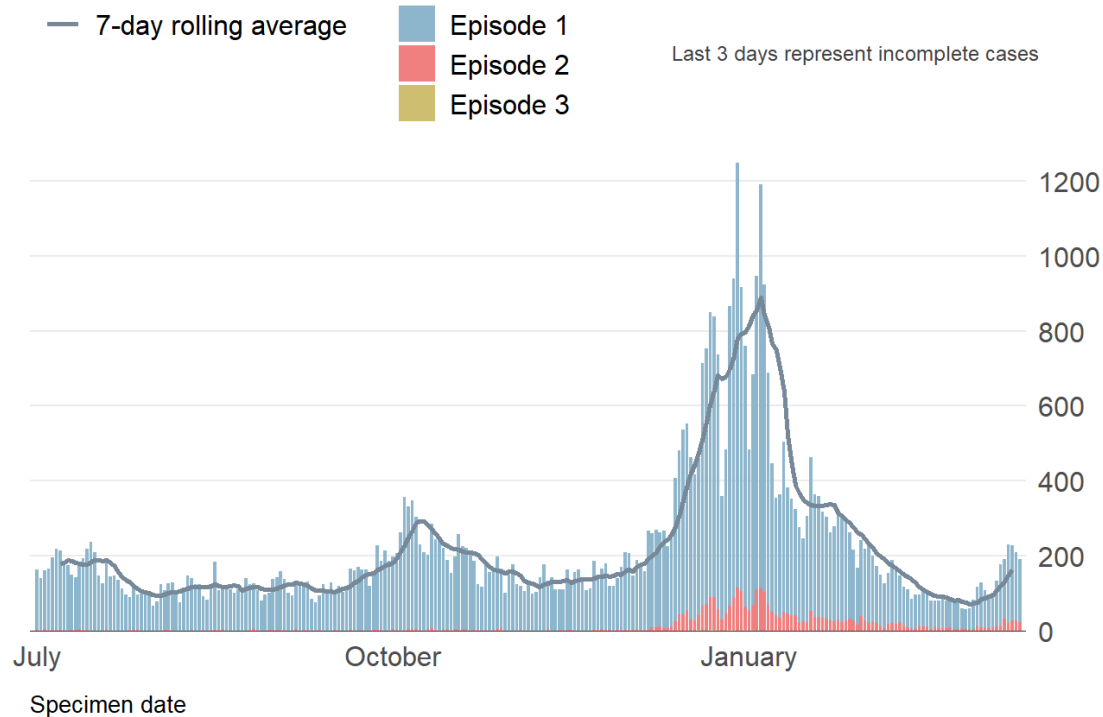
On February 21st, the Prime Ministers announced the 'Living with COVID-19' plan. Restrictions will be lifted in stages from the 21st February through to April 1st. The local COVID-19 response team continues to focus on preventative measures, communicating COVID secure behaviors, and advising caution in high risk settings.

COVID-19 measures

- The Government's 'Living with Covid' plan was published on 21/02/22.
- Many restrictions have now been lifted, outlined below:
 - There is no **legal requirement** to self-isolate. People who test positive will continue to be advised to stay at home and avoid contact with other people. After 5 days, they may choose to take a Lateral Flow Device (LFD) followed by another the next day - if both are negative, and they do not have a temperature, they can safely return to their normal routine.
 - Close contacts do not need to daily test for 7 days and unvaccinated close contacts no longer need to self-isolate.
 - Self-isolation support payments have ended
 - staff and students in most education and childcare settings no longer need to undertake twice weekly asymptomatic testing
 - Routine contact tracing has ceased
 - The Health Protection (Coronavirus, Restrictions) (England) (No. 3) Regulations will be revoked. Local authorities will continue to manage local outbreaks of COVID-19 in high risk settings.
 - From 24 March, the COVID-19 provisions within Statutory Sick Pay and Employment and Support Allowance regulations will end.
 - **From 1 April:**
 - the Government will update guidance setting out the ongoing steps that people with COVID-19 should take to minimise contact with other people.
 - the Government will no longer provide free universal symptomatic and asymptomatic testing for the general public in England
 - the Government will remove the current guidance on domestic voluntary COVID-status certification and will no longer recommend that certain venues use the NHS COVID Pass.
- Vaccines have enabled the gradual and safe removal of restrictions on everyday life over the past year, and will remain at the heart of the Government's approach to living with the virus in the future.
- Local health teams continue to use contact tracing and provide context-specific advice where they assess this to be necessary as part of their role in managing infectious diseases.
- The local COVID-19 response team continues to focus on preventative measures, communicating COVID secure behaviors, and advising caution in high-risk settings.
- The NHS COVID Pass will remain available within the NHS App for a limited period, to support the use of certification in other parts of the UK. The NHS App will continue to allow individuals access to their vaccination status for international travel, as well as their recovery status for travel to those overseas destinations that recognise it.
- Individuals can still reduce the risk of catching and passing on COVID-19 by:
 - Getting vaccinated
 - Letting fresh air in if meeting indoors, or meeting outside
 - Wearing a face covering in crowded and enclosed spaces, especially where you come into contact with people you do not usually meet, when rates of transmission are high
 - Trying to stay at home if you are unwell
 - Taking a test if you have COVID-19 symptoms, and staying at home and avoiding contact with other people if you test positive
 - Washing your hands and following advice to 'Catch it, Bin it, Kill it'.
- The UK Passenger locator form and all remaining testing rules for travellers arriving in the UK will be scrapped from 18th March 2022.

Trend

Figure 1. Epidemic curve of daily confirmed new cases in Trafford (1 July 2021 to 12 March 2022)



Source: PHE Covid-19 Situational Awareness Explorer

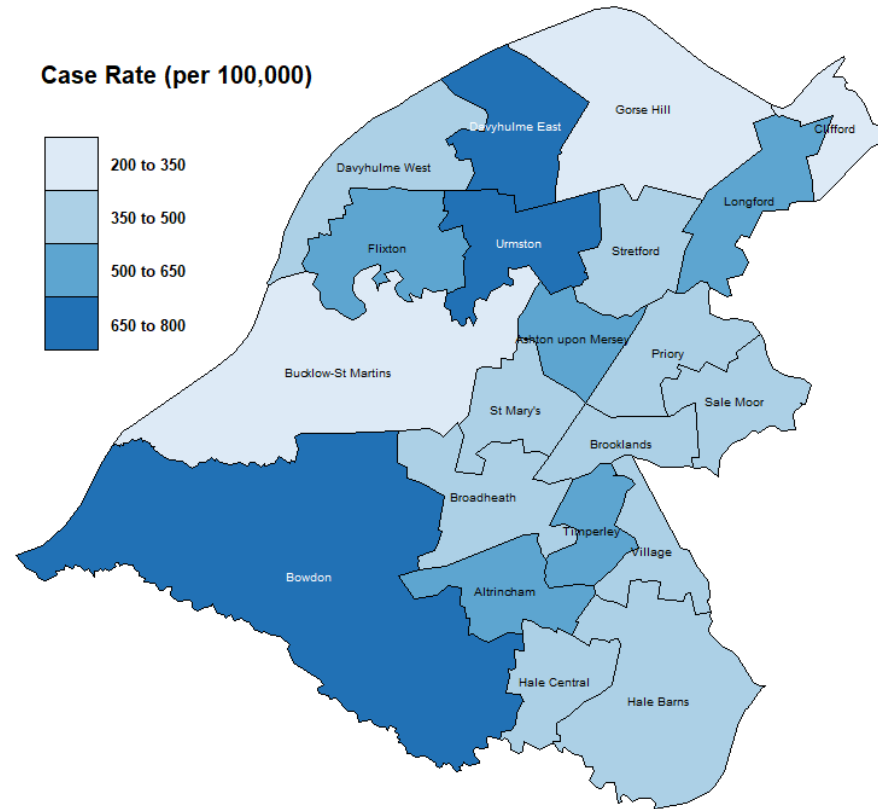
Summary Context:

We have seen a substantial increase in daily cases over the past week, increasing above 200 cases per day. We expect further increases over the coming week. December 2021 shows a growing proportion of COVID-19 reinfections ('Episode'). Please see link below for further information on COVID-19 reinfections.

[Cases definition now includes multiple infection episodes | Coronavirus in the UK \(data.gov.uk\)](#)

Geography

Figure 2. Incidence per 100,000 population by MSOA in Trafford 4 March to 10 March 2022)



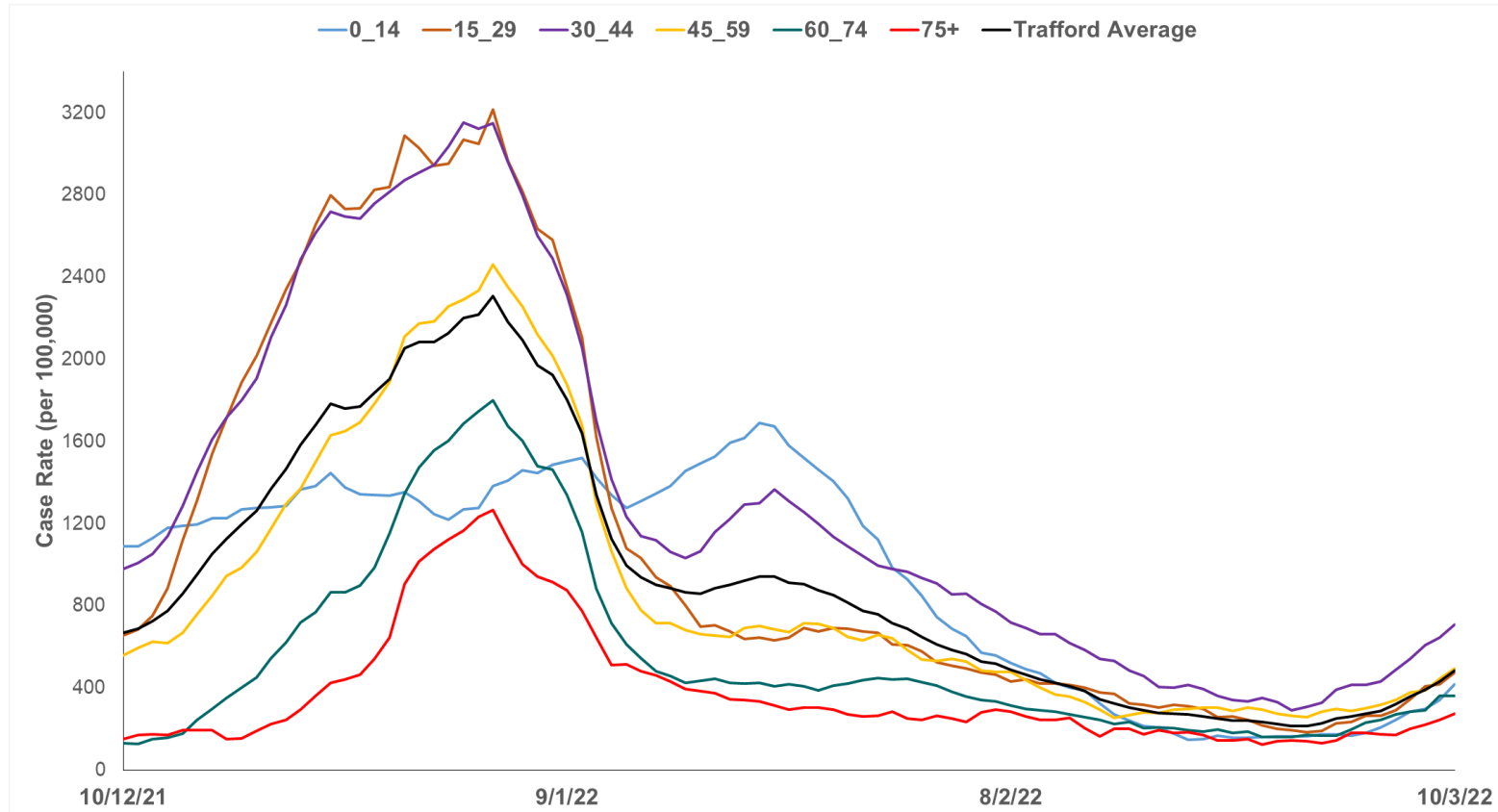
Source: PHE Covid-19 Situational Awareness Explorer

Summary Context:

Case rates have dropped for all but 1 ward (Brooklands). Case rates are highest for wards in Trafford’s South and West localities. Case rates have increased most for wards in the West and South of the borough. Case rates are highest for the wards of Davyhulme East (**715.5/100k**), Bowdon (**705.1/100k**), and Urmston (**695.9/100**).

Age Groups: Cases

Figure 3. Age-specific case rates per 100,000 population Trafford, 7-day moving average (10 December 2021 – 10 March 2022)



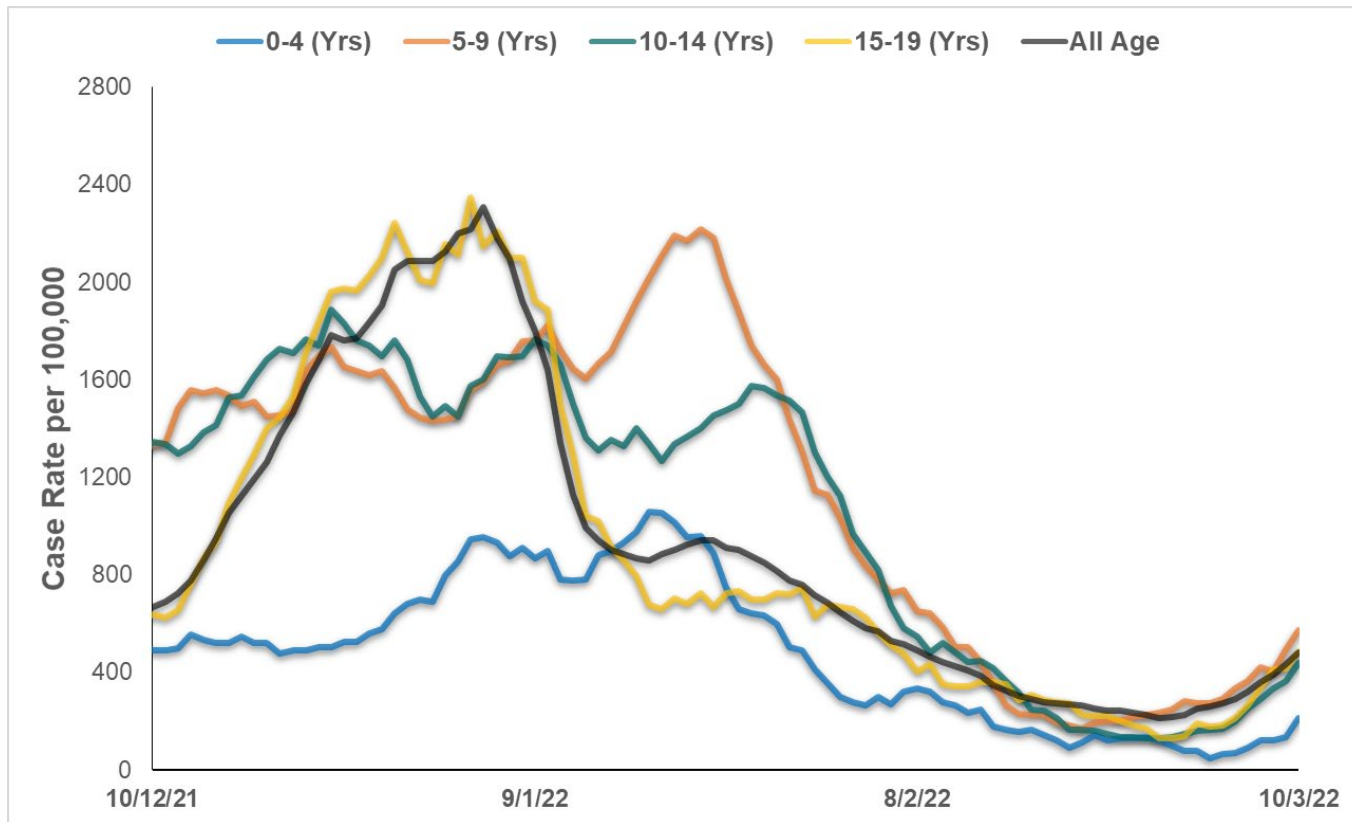
Source: PHE Covid-19 Situational Awareness Explorer

Summary Context:

When compared to the previous week, case rates have increased for all age groups. Rates remain highest for 30-44 year olds (at **709.4/100k** from **414.2/100k** in the previous week). Case rates have increased most for 0-14 year olds (**+148%**). We have seen large increases in the number of positive cases for residents aged 60+ (at **333.5/100k** from **192.7/100k** in the previous week).

School Age Groups: Cases

Figure 4. Age-specific case rates per 100,000 population Trafford, 7-day moving average (10 December 2021 – 10 March 2022)



Source: PHE Covid-19 Situational Awareness Explorer

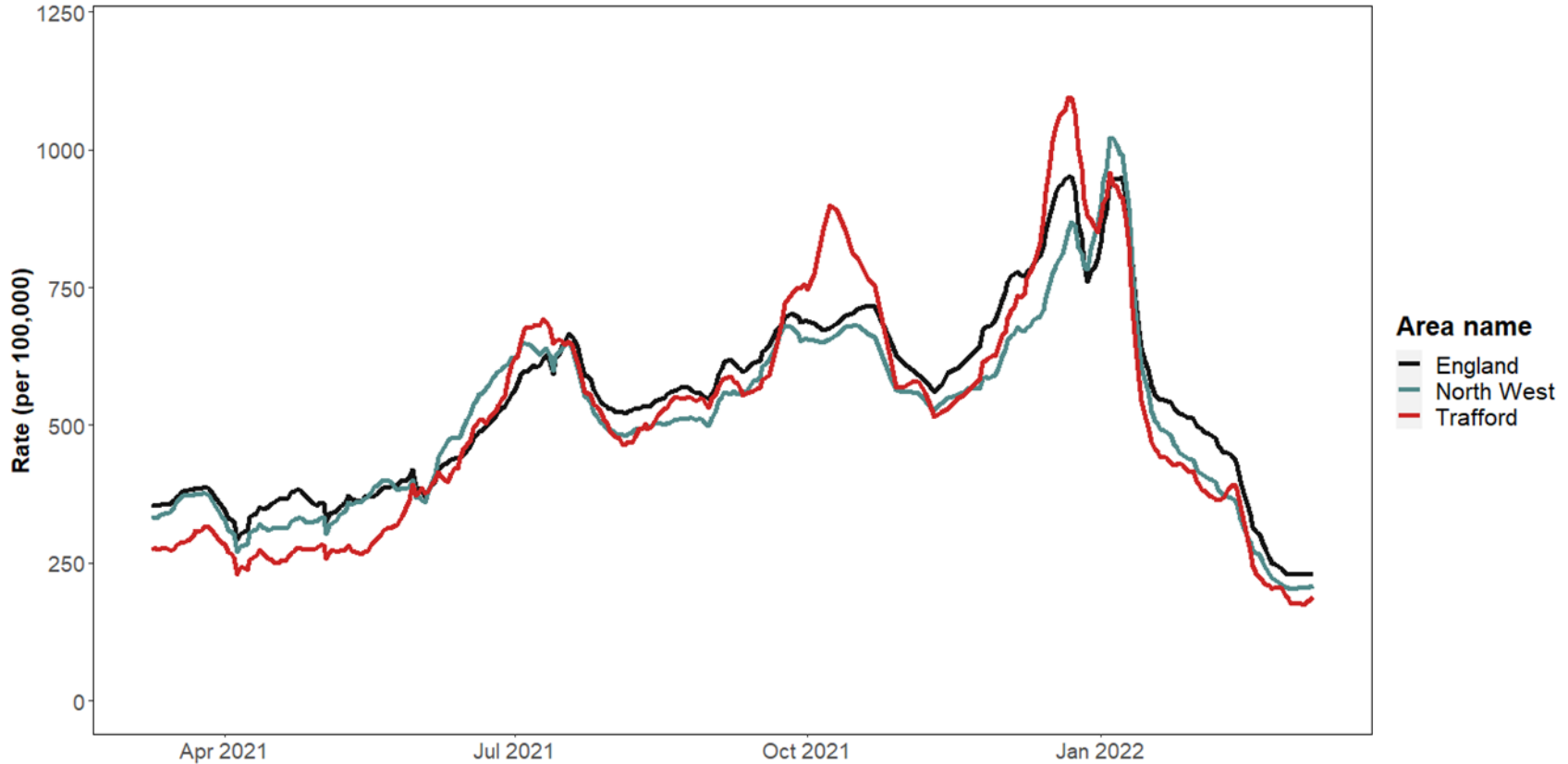
Summary Context:

Case rates have increased for young persons below the age of 20 over the recent week. Case rates remain highest for 5-9 year olds (at **573.6/100k**), but have increased most for 0-4 (**+329%**), 15-19 (**+175%**), and 10-14 (**+164%**) year olds when compared to the previous week.

PCR Testing

Figure 5. Daily Testing Rate (7-day average): England, North West, & Trafford

Trafford, 9 March 2021 - 9 March 2022



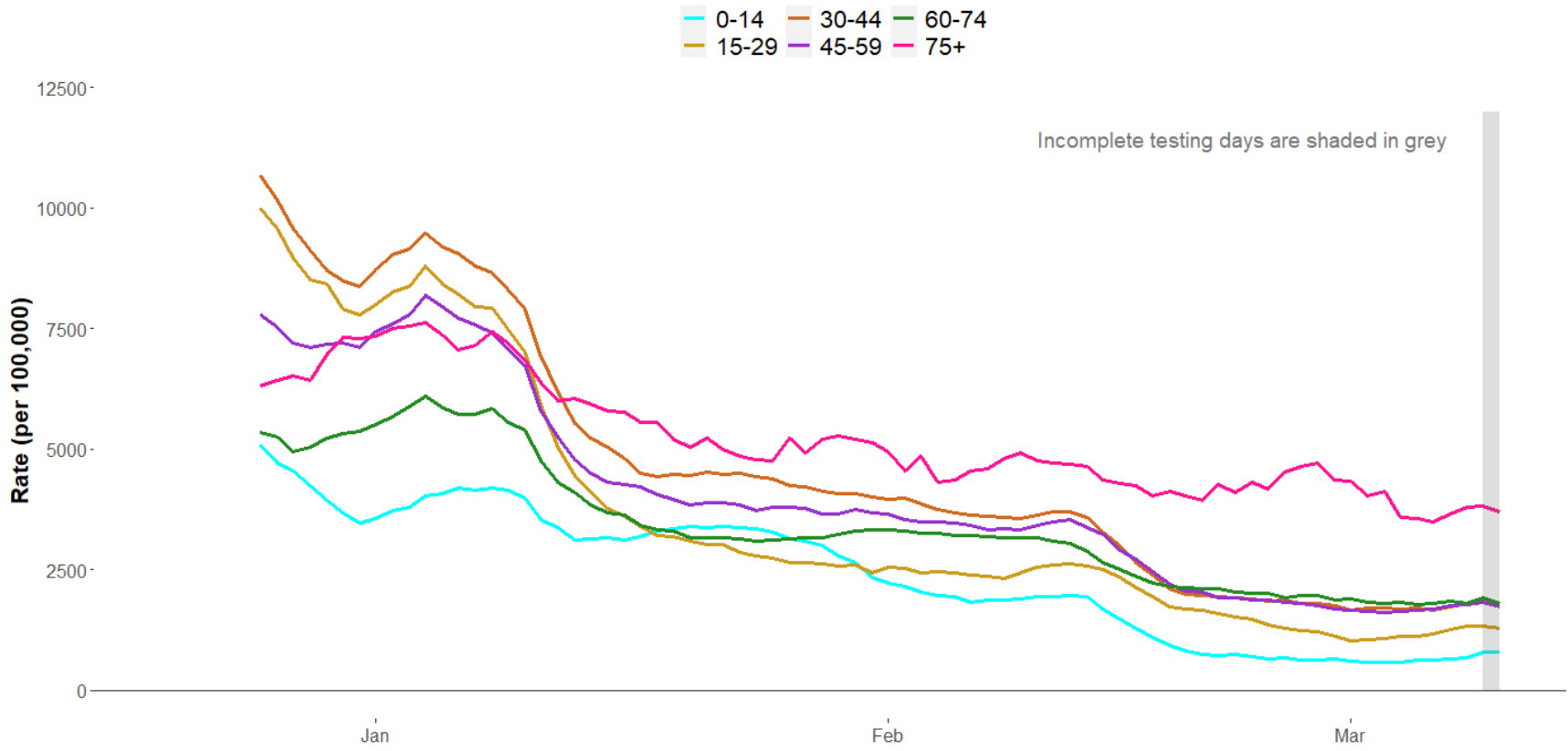
Source: PHE COVID-19 Situational Awareness Explorer

Summary Context:

PCR testing rates have increased slightly over the past week, however remain at their lowest ever levels since recording started. Trafford's testing rate is below the North West and England average. Trafford has the 3rd highest testing rate across the 10 GM boroughs, although there is little variation in testing between the boroughs.

Age Groups: PCR Testing

Figure 6. Age-Specific PCR testing rate per 100,000 residents (7-day moving)
Trafford, 25 December 2021 - 10 March 2022



Source: Data from PHE COVID-19 Situational Awareness Explorer

Summary Context:

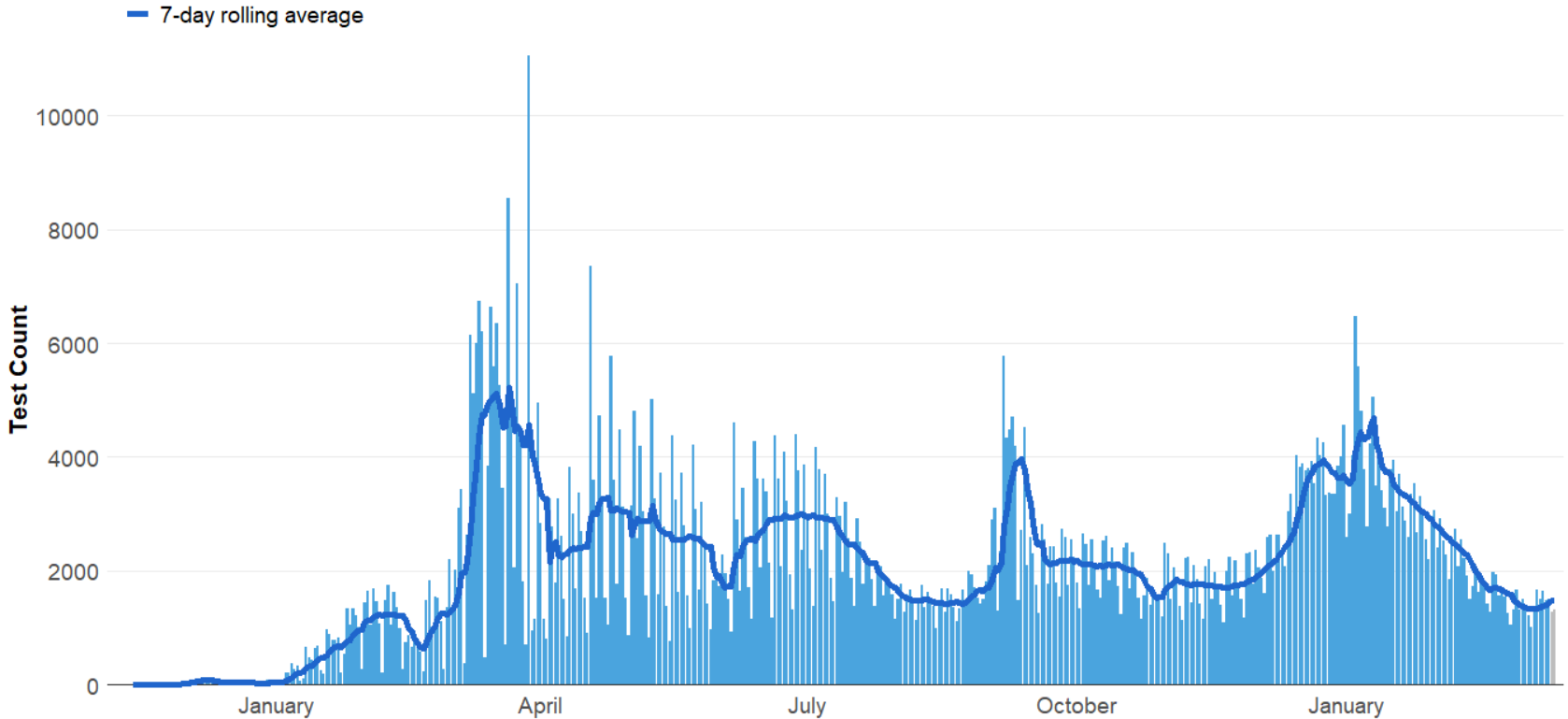
PCR testing rates for all age groups have seen slight increases over the past week. PCR testing remains highest for residents above the age of 74 (**3807.7/100k**) and lowest for 0-14 year olds (**681.3/100k**).

LFD Testing

Figure 7. Number of Daily LFD Tests

Trafford, 13 November 2020 - 13 March 2022

Incomplete testing days are shaded in grey



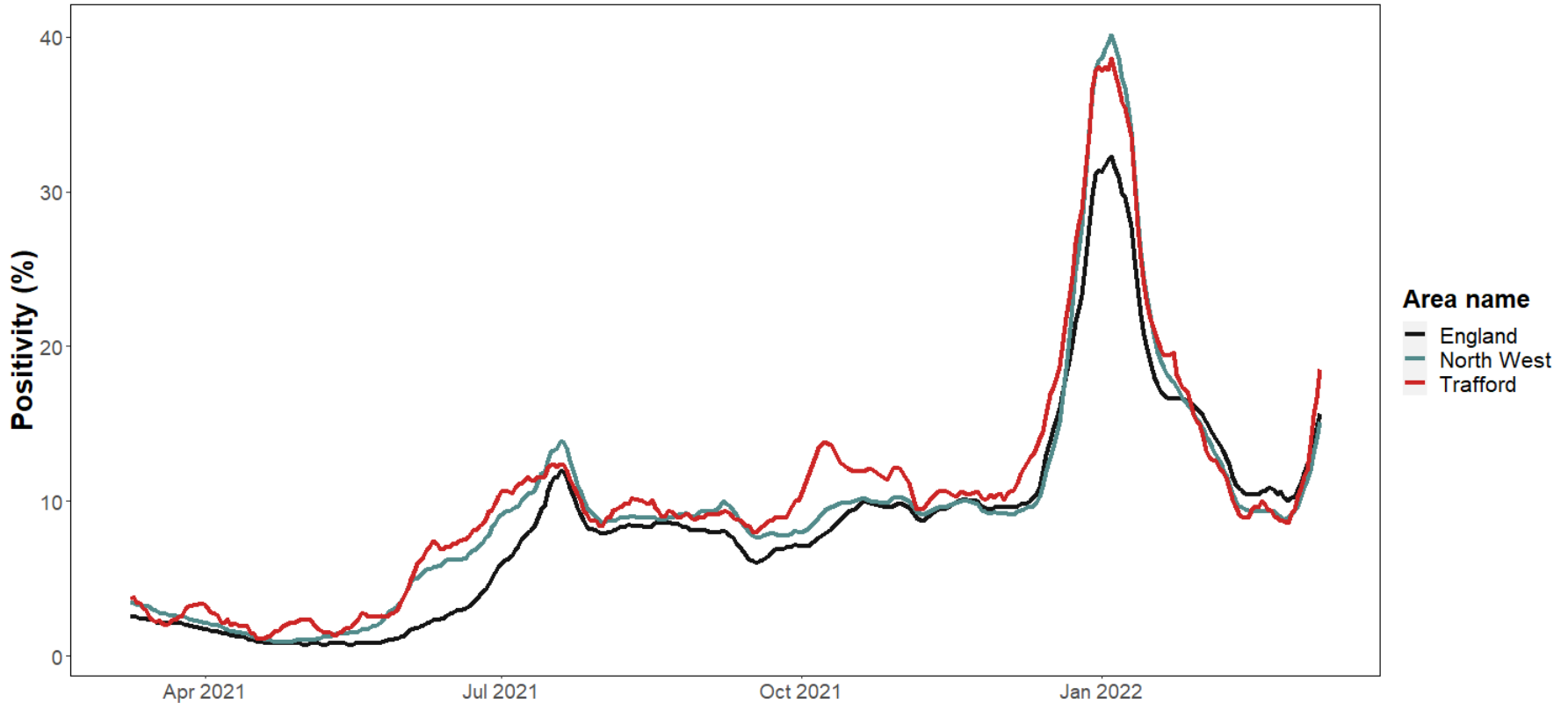
Summary Context:

We have seen slight increase in Lateral Flow Testing over the past week, although testing remains well below levels that we were seeing from the previous 6 months. On average, **1,440** tests are being conducted by Trafford residents per day.

Positivity

Figure 8. Weekly Positivity Rates: England, North West, & Trafford

Trafford, 9 March 2021 - 9 March 2022



Source: Data from PHE COVID-19 Situational Awareness Explorer

Summary Context:

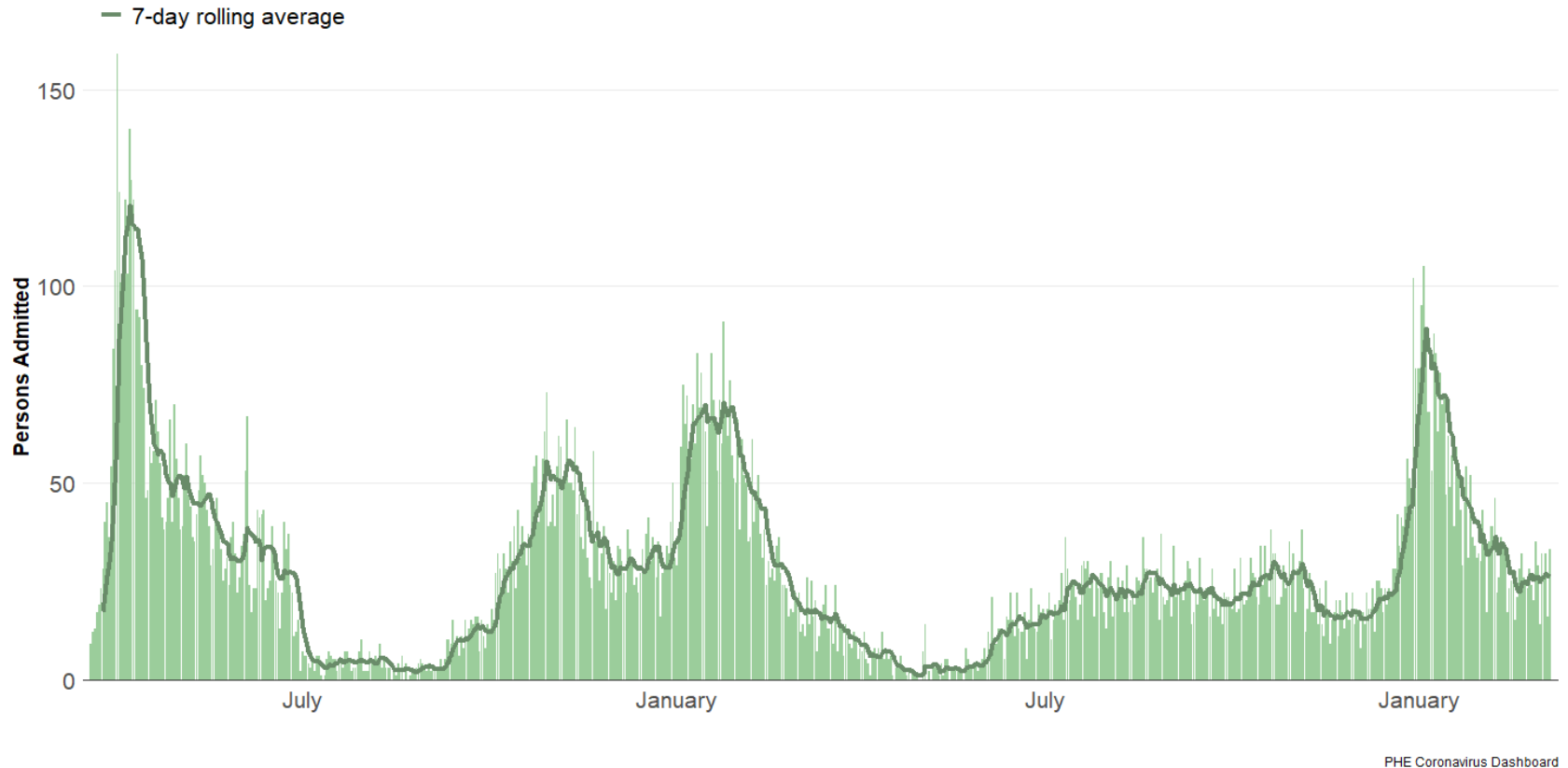
We have seen a sharp increase in Trafford's positivity rate over the past 10 days, partially linked to the continued reduction in testing rates. Trafford's positivity rate is above the North West and England average. Trafford currently has the joint highest positivity rate across the 10 GM boroughs, at **18.5%**.

Hospital Admissions

(Data includes any resident (not specific to Trafford-only residents) for: Manchester University, Stockport, and Warrington & Halton Teaching Hospital Foundation Trusts)

Figure 9. Daily count of COVID-19 hospital admissions

19 March 2020 to 6 March 2022



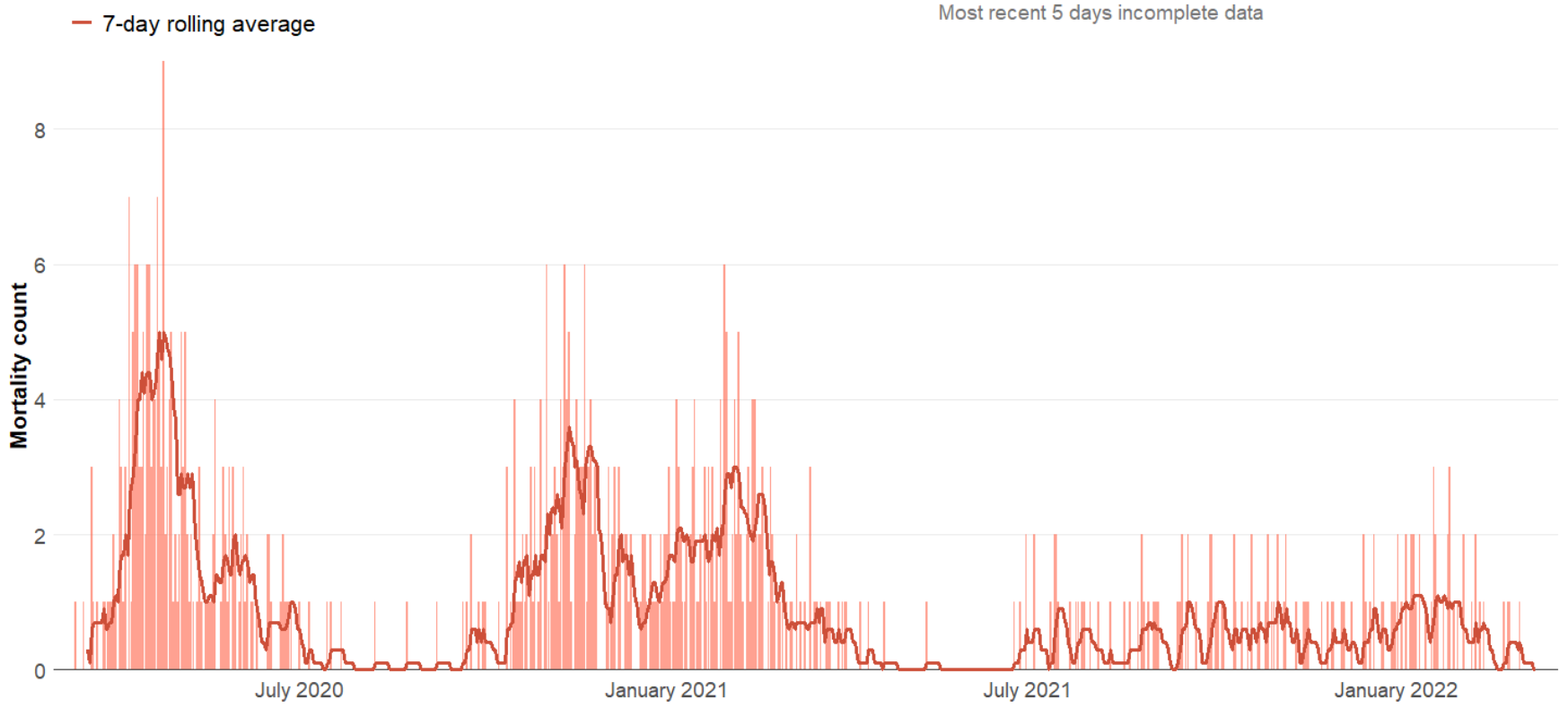
Summary Context:

The increases in hospitalisation that we had noted has now stabilised. There were **183** COVID-19 admissions during the week ending Sunday 6 March 2022 compared with **181** COVID-19 admissions during the previous week.

Trafford Resident COVID-19 Mortality

Figure 10. Daily count of COVID-19 deaths within 28 days of positive test result

Trafford, 11 March 2020 - 12 March 2022



Source: PHE Coronavirus Dashboard

Summary Context:

Similar to periods in summer 2021, we are seeing a small number of mortalities linked to COVID-19. There were less than **5** deaths for Trafford residents testing positive from COVID-19 in the 14 days up to Sunday 14 March 2022, which is unchanged from the previous 14 day period.

Vaccinations

Overview

- The total percentage of Trafford residents (Aged 12+) administered their first vaccine dose by **5-3-2022** was **84%** (increasing by **0.1%** from the previous week).
- The total percentage of Trafford residents (Aged 12+) administered both vaccine doses by **5-3-2022** was **79.5%** (increasing by **0.1%** from the previous week).
- Booster uptake is at **85.3%** (dropping from the previous week due to an increase in eligible residents) for residents who are **currently** eligible (eligible from time of second dose).

Cohort Groups

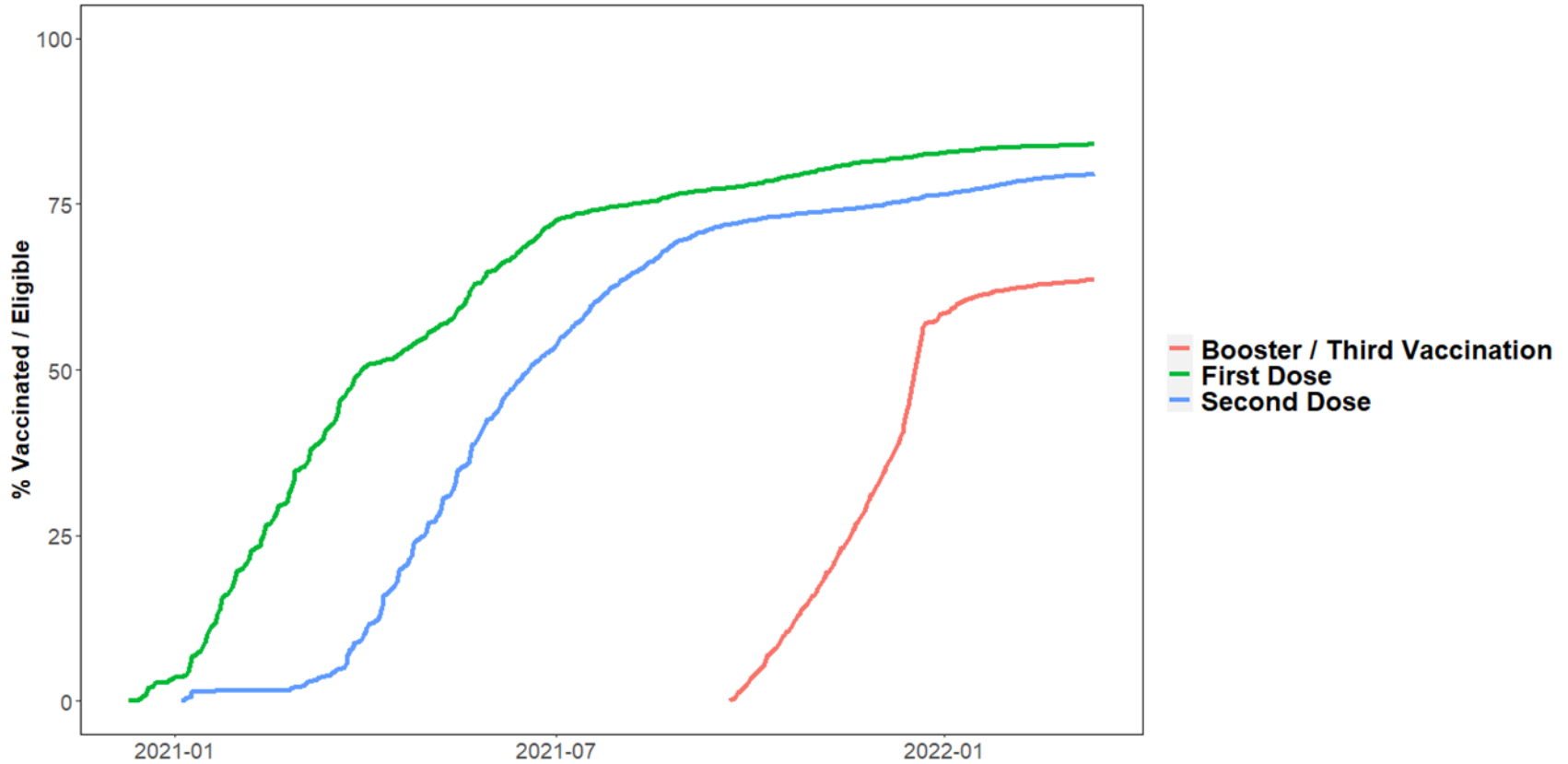
- Vaccine uptake remains lowest in adults and young people below the age of **40**. Similar to patterns we have seen among 18-39 year olds, vaccine uptake has stalled among young persons below the age of 18 – below **75%**.
- Vaccine uptake is at **73.2%** for 18-29 year olds (increasing by **0.8%** since February 1st) and **75.8%** for 30-39 year olds (increasing by **0.2%** since February 1st).
- Vaccine uptake is at **73.8%** for 16-17 year olds (increasing by **1.2%** since February 1st) and **62.6%** for 12-15 year olds (increasing by **2.6%** since February 1st).
- Vaccine uptake for priority groups 1-9 is at **91.2%**, increasing by **0.1%** since February 1st.
- Uptake (1st dose cohorts 1-12) across Trafford's four localities is lowest in the north (**74.3%**) and highest in the south (**87.2%**).
- There is a social gradient in vaccination uptake (first dose) across Trafford, with decreasing uptake as the level of deprivation increases (**69.9%** for most deprived compared to **89.2%** for least deprived areas). This gradient widens as we drop down the age groups.
- We are seeing variation in second dose and booster uptake, also linked to age and deprivation.

Programme Changes

- The in-school 12-15yr old programme of clinics is now complete, however those 12-15 year olds who are due a vaccine can still access the out of school clinics, details can be found here: <https://www.traffordccg.nhs.uk/Coronavirus/COVID-19-vaccine-walk-in-clinics-in-Trafford.aspx>
- The national booking service has been updated so that clinically vulnerable 12 to 15 year olds can quickly and easily book in a booster jab when they become eligible.
- We are awaiting details on the expected additional booster programme and on the healthy 5-11 year old programme. We anticipate these programmes will be rolled out during the Spring.
- Adults who had COVID-19 more than 28 days ago and missed their booster should now get their booster vaccine as soon as possible. Children aged 12-15 should wait 12 weeks after testing positive before having their vaccine.
- Regulations requiring COVID-19 vaccination to work in Care Quality Commission (CQC) registered care homes have been lifted from 15 March and the legal requirement for health and social care staff to be double jabbed from 1 April has been revoked.

Vaccine Delivery Timeline

Figure 11. Running Total of First, Second, and Third/Booster Dose Vaccines
 Trafford Residents, up to March 13th 2022



Source: COVID-19 Situational Awareness Explorer

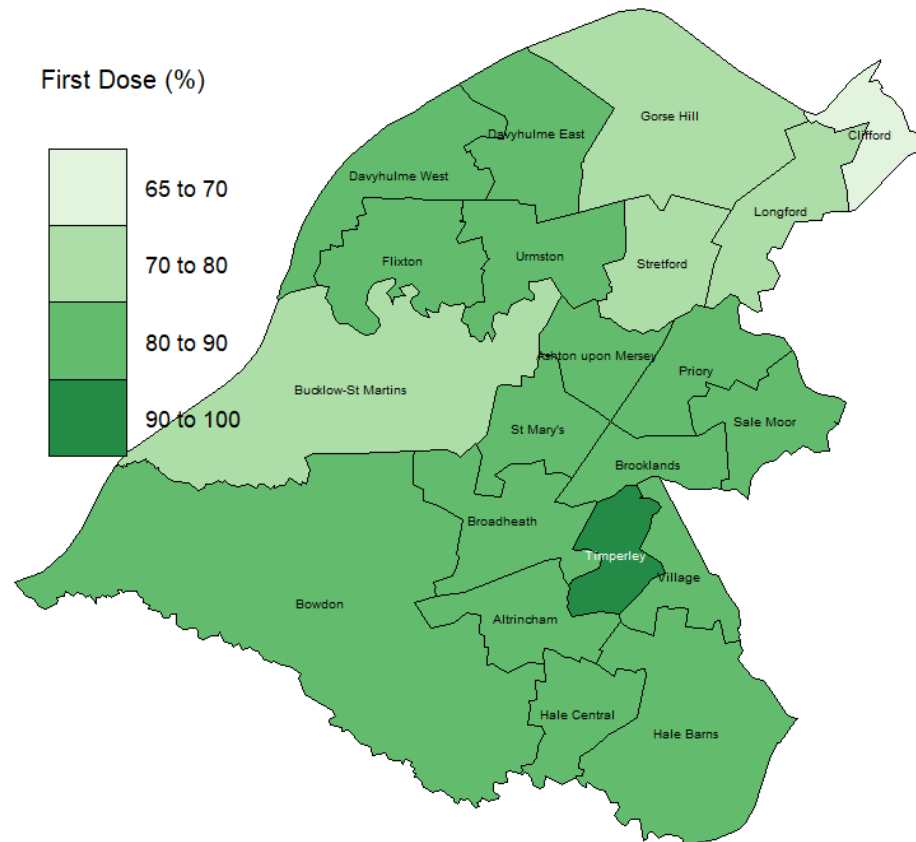
Summary Context:

Vaccine uptake for residents above the age of 12 is progressing slowly, increasing by **0.1%** in residents receiving their first dose and both vaccine doses within the last 7 days (up to March 12th). Third dose / booster vaccines have increased by **0.2%** within the last 7 days.

Please note: Booster uptake in this slide refers to every residents aged 12+, regardless of eligibility status.

Vaccine Uptake by Ward

Figure 12. First dose vaccine uptake (%) for all eligible residents (12+) by Ward
Trafford, up to 14th March 2022



Summary Context:

Vaccine uptake is lowest in Trafford's North locality and highest in Trafford's South locality. We are seeing variation in vaccine uptake (first dose) across the borough, ranging from **67.7%** (Clifford) to **91.3%** (Timperley). Timperley remains the only Ward to have a first dose uptake above 90%.

Further resources

- [COVID-19 page](#) on [Trafford Data Lab's](#) website
- [COVID-19 Resources](#) developed by [Manchester Health & Care Commissioning](#)
- The Government [Coronavirus dashboard](#)
- [Our World in Data's](#) coronavirus pages

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