

# COVID-19 Weekly Summary: 7<sup>th</sup> September 2022

**Coronavirus remains a serious health risk. Residents and visitors to the borough should stay cautious to help protect themselves and others.**

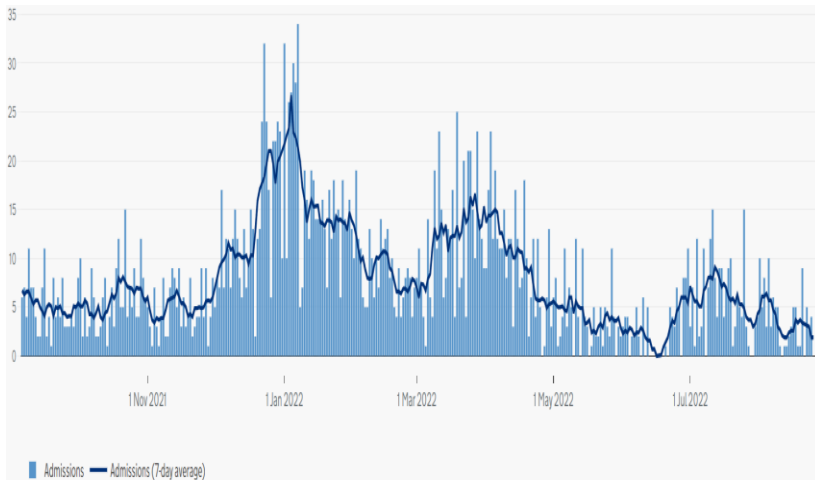
- On the 24<sup>th</sup> August, NHS England announced that from the 31<sup>st</sup> August routine asymptomatic COVID-19 testing will be paused in NHS healthcare settings for both patients and staff. Asymptomatic testing will continue for high-risk patients identified for monoclonal antibody or antiviral treatment, immunocompromised patients, patients being discharged to care homes and hospices, patients seeking early release from self-isolation and patients tested as part of outbreak testing in healthcare settings. Symptomatic testing in these settings will also continue unchanged.
- On the 15<sup>th</sup> July NHS England outlined its plan for COVID-19 and Influenza vaccinations for the autumn of 2022, the autumn booster campaign. The guidance confirmed the COVID-19 autumn booster will be offered to; residents and staff in care homes, frontline health and social care workers, all adults aged 50 years and over, persons aged 5 to 49 years in a clinical risk group and their household contacts and persons aged 16 to 49 who are carers.
- It was announced on 16<sup>th</sup> August that the UK Medicines and Healthcare Products Regulatory Agency had approved Moderna's latest vaccine. This vaccine is a "bivalent" product that aims to boost protection from both the original strain of COVID-19 and the Omicron BA.1 variant of the virus. While it has been confirmed that some doses of this vaccine will be available for delivery during the autumn booster campaign, official guidance stresses that timely vaccination is more important than the type of vaccine received.
- In the week to 31<sup>st</sup> August, Barking and Dagenham's all-age case rate fell for the eighth consecutive week, from 30.8 cases per 100k residents to 27.1 cases, a 12.0% decrease. Over the same period, the London average rate fell from 34.4 cases per 100k residents to 30.2 cases, a 12.2% decrease. 13 London boroughs have a lower case rate than Barking and Dagenham. Barking and Dagenham's all-age case rate remains rag rated green.
- In the week to 31<sup>st</sup> August, Barking and Dagenham's 60+ case rate rose from 39.2 cases per 100k residents to 46.4 cases, an 18.4% increase. After this increase, 17 London boroughs have a lower 60+ case rate than Barking and Dagenham. Over the week to 31<sup>st</sup> August, the London average 60+ case rate fell from 57.0 cases per 100k residents to 30.2 cases, a fall of 47.0%.
- The number of patients in a BHRUT G&A hospital bed with COVID-19 increased from 14 in the week to 23<sup>rd</sup> August to 15 in the week to 31<sup>st</sup> August. During the same period, the number of patients in critical care fell from 5 to 2. The number of COVID-19 positive hospital admissions over the week to 25<sup>th</sup> August is lower than the number one year ago. The number of COVID-19 positive patients in hospital and the number of COVID-19 positive patients in critical care beds in the week to 27<sup>th</sup> August are also lower than they were one year ago.
- In the week to 26<sup>th</sup> August, no death certificates issued in the borough mentioned COVID-19. The total number of deaths in the borough was 5.0 deaths below the 2015-19 average for the same week. Negative excess mortality has been recorded in 23 of the first 34 weeks of 2022. There have been 667 COVID-19 related deaths in the borough since the start of the pandemic.
- The rate of PCR testing in Barking and Dagenham increased over the week to 31<sup>st</sup> August, from 33.2 tests per 100k residents to 33.6 tests. This is the eighth lowest PCR testing rate in London. The percentage of PCR tests that had a positive result fell from 4.2% to 3.8% over the same period.

# Covid-19 patients in hospital

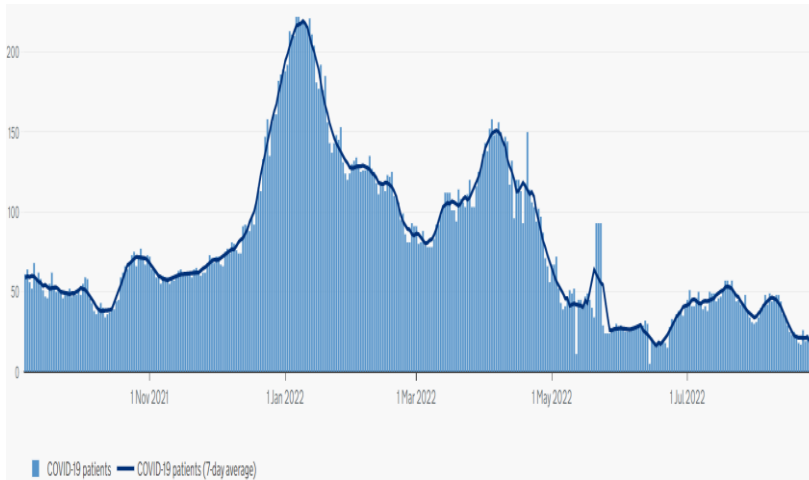
## Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT)

- Asymptomatic testing of patients in NHS health care settings will pause from 31<sup>st</sup> August, including in hospitals. This means COVID-19 positive admissions and patients in hospitals will not be directly comparable before and after this date.
- The average number of patients with Covid-19 admitted to BHRUT hospitals each day fell from 3.4 in the week to 18<sup>th</sup> August to 1.9 in the week to 25<sup>th</sup> August. One year prior, this value was 7.0.
- The average number of patients in hospital with Covid-19 fell from 23.1 on 20<sup>th</sup> August to 18.0 on 27<sup>th</sup> August. One year prior, this value was 68.3.
- The average number of patients in mechanical ventilation beds with Covid-19 fell from 4.6 on 20<sup>th</sup> August to 3.3 on 27<sup>th</sup> August. One year prior, this value was 12.1.

### Patients admitted to hospital



### Patients in hospital



### Patients in mechanical ventilation beds

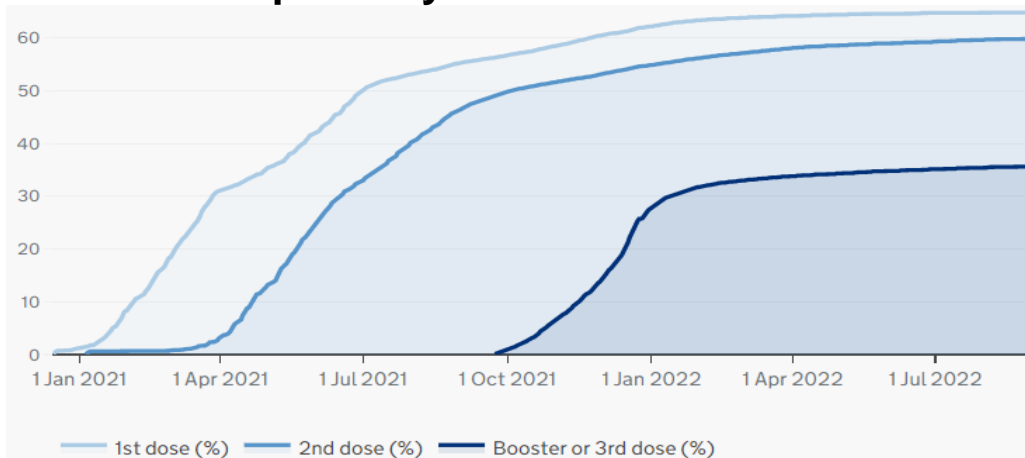


Image and data source: <https://coronavirus.data.gov.uk>

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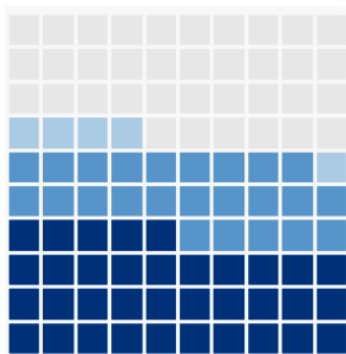
**Barking &  
Dagenham**

### Vaccination uptake by vaccination date



- As of the 12<sup>th</sup> April 2022, the age used to compile vaccination figures changed from being the age on 31<sup>st</sup> August 2021, to being the age of the person on the day the data was extracted. The method of basing age on the age of the person on the 31<sup>st</sup> August 2021 becomes a less accurate metric over time, prompting the change.
- The change has moved some vaccinated people into different age categories; younger age bands were the most affected by this change.
- Many vaccinations that were previously categorised as vaccinations of children aged under 12 are now calculated in the 12-15 age group. This has raised the total number of vaccinations delivered. The number of NHS registered patients has also increased significantly thereby reducing the overall vaccination rates compared to before the metric change.
- Over the week to 29<sup>th</sup> August, Barking and Dagenham’s 12+ first dose vaccination rate fell 0.1% to 64.8%. The borough’s second dose vaccination rate remained unchanged at 59.8%. The borough’s third dose vaccination also remained unchanged at 35.6%.
- Over the week to 29<sup>th</sup> August, London’s 12+ first dose vaccination rate remained unchanged at 69.5%. The gap between the Barking and Dagenham rate and the London rate widened 0.1% to 4.7%. London’s 12+ second dose vaccination remained unchanged at 65.3%. The gap between the Barking and Dagenham and the London average was also unchanged at 5.5%. London’s 12+ third dose vaccination was also unchanged over the week to 29<sup>th</sup> August at 47.4%.
- The first dose vaccination rate in the borough’s 12–15 year olds remained unchanged at 29.9% over the week to 29<sup>th</sup> August. This is the lowest rate in North East London and below the London average of 40.1%.
- First dose vaccination rate in the borough’s 5-11 year olds remained unchanged at 5.0% over the week to 29<sup>th</sup> August, remaining below the London rate of 8.7%, which was also unchanged over the week.

### Latest vaccination uptake



First dose total  
**134,826**

Second dose total  
**124,383**

Booster or third dose total  
**73,996**

1st dose: 64.8%  
2nd dose: 59.8%  
Booster or 3rd dose: 35.6%

Total percentage of people aged 12 and over who have received a COVID-19 vaccination, by dose, up to the latest day on which vaccine data were reported. Daily figures include all vaccines that were given up to and including the date shown. Only people who have an NHS number and are currently alive are included. The denominator used is the number of people on the National Immunisation Management Service (NIMS) database. They will differ from NHS England daily outputs, which provide operational data for the management of the vaccination programme.

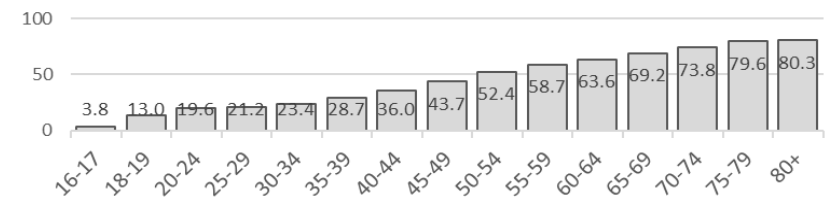
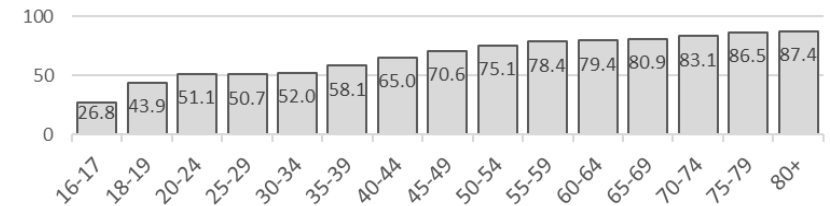
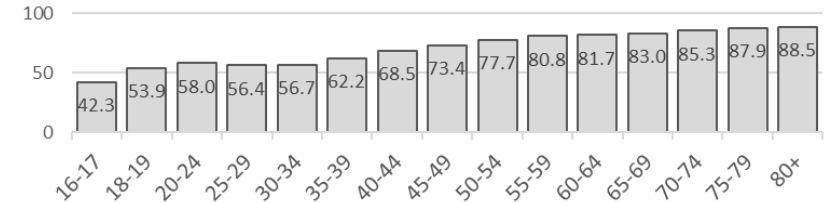
Image and data source: <https://coronavirus.data.gov.uk>

# Vaccination coverage by ward and age group (residents aged 16+)

- As mentioned in the previous page, the change to the methodology for calculating resident age when vaccinated made on the 12<sup>th</sup> April 2022 means that vaccinations delivered and vaccine coverage percentages are not directly comparable between this report and reports published before the 20<sup>th</sup> April.
- Between the 29<sup>th</sup> August and 5<sup>th</sup> September, delivery of vaccine doses did not keep pace with the increase in the number of NHS registered patients in Barking and Dagenham. This resulted in a decline in first and second dose vaccine coverage percentages over the week. Coverage of residents receiving their third or fourth dose was maintained despite the increase in NHS registered patients.
- The Spring booster campaign offers a fourth dose of the vaccine to residents aged 75 and over, those in care homes for adults and residents aged 12 years and over who are immunosuppressed.

## Vaccinations given to NHS registered Barking and Dagenham residents aged 16+ by ward

Ward name	Latest Data (as at 05 Sep 2022)										
	Dose 1		Dose 2		Dose 3 or Booster		Spring Booster		Dose 1 to dose 2 conversion rate (%)	NHS Registered Patients	
	Number	Coverage (%)	Number	Coverage (%)	Number	Coverage (%)	Number	Coverage (%)		Number	%
Abbey	9,731	58.7	8,936	53.9	4,719	28.5	486	2.9	91.8	16,564	8.6
Gascoigne	6,864	62.2	6,285	56.9	3,305	29.9	336	3.0	91.6	11,036	5.7
River	6,898	65.7	6,410	61.0	3,723	35.4	594	5.7	92.9	10,503	5.5
Eastbury	7,761	65.7	7,203	61.0	3,991	33.8	559	4.7	92.8	11,814	6.1
Becontree	9,412	66.3	8,810	62.1	4,892	34.5	717	5.1	93.6	14,186	7.4
Mayesbrook	6,812	67.0	6,409	63.0	3,727	36.6	572	5.6	94.1	10,174	5.3
Thames	9,439	67.3	8,704	62.1	4,362	31.1	578	4.1	92.2	14,020	7.3
Goresbrook	7,226	67.9	6,785	63.8	3,974	37.3	670	6.3	93.9	10,643	5.5
Alibon	6,834	68.1	6,415	63.9	3,833	38.2	512	5.1	93.9	10,034	5.2
Whalebone	7,653	68.9	7,168	64.6	4,255	38.3	657	5.9	93.7	11,103	5.8
Village	7,102	68.9	6,658	64.6	3,839	37.3	664	6.4	93.7	10,301	5.4
Heath	7,266	69.6	6,822	65.4	3,958	37.9	670	6.4	93.9	10,434	5.4
Parsloes	6,468	69.8	6,095	65.8	3,620	39.1	500	5.4	94.2	9,269	4.8
Chadwell Heath	7,110	71.4	6,706	67.3	4,049	40.6	753	7.6	94.3	9,961	5.2
Valence	7,491	71.5	7,091	67.6	4,274	40.8	618	5.9	94.7	10,482	5.4
Longbridge	8,443	72.5	7,972	68.5	4,609	39.6	685	5.9	94.4	11,639	6.1
Eastbrook	7,606	74.5	7,171	70.3	4,609	45.2	873	8.6	94.3	10,203	5.3
<b>Barking and Dagenham</b>	<b>130,116</b>	<b>67.6</b>	<b>121,640</b>	<b>63.2</b>	<b>69,739</b>	<b>36.3</b>	<b>10444</b>	<b>5.4</b>	<b>93.5</b>	<b>192,366</b>	<b>100.0</b>



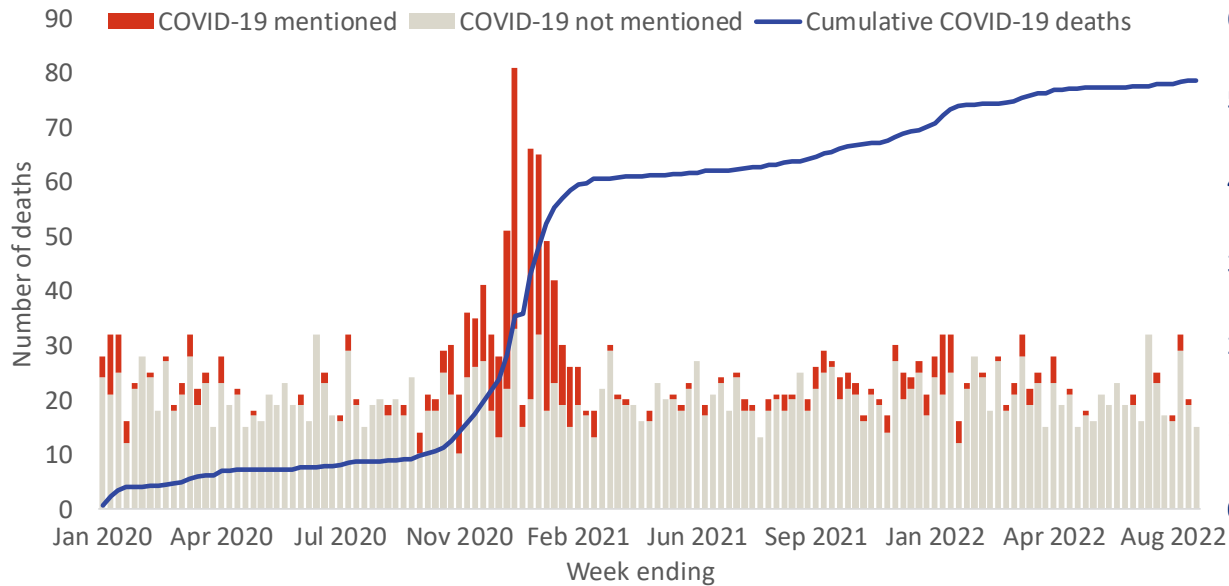
Notes: Coverage includes only borough residents registered with the NHS and can be viewed as being 'at least' the figure presented.  
Data source: NIMS via the Covid-19 Situational Awareness Explorer.

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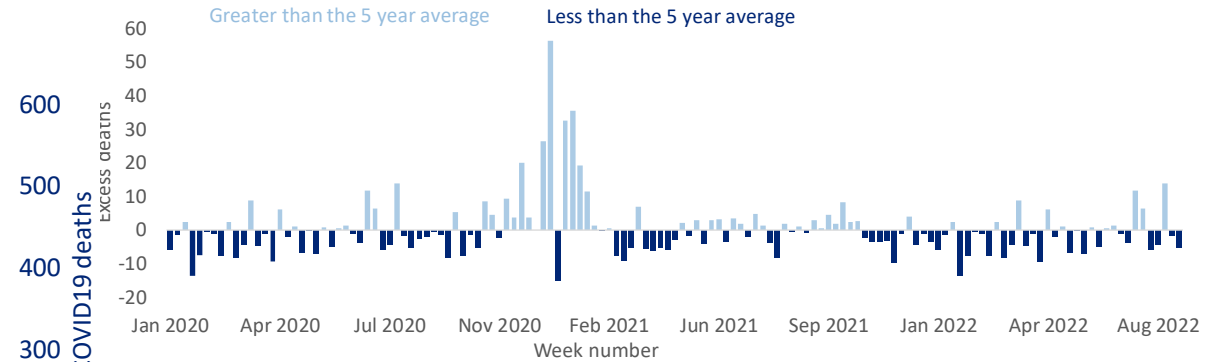


- In the week to 26<sup>th</sup> August, 15 death certificates were issued within Barking and Dagenham, none of which mentioned COVID-19. This is 5.0 fewer deaths than the 2015-2019 average for the same week.
- The number of death certificates issued in the borough in the week to 19<sup>th</sup> August has been revised upward from 18 to 20. The number of certificates that mentioned COVID-19 remained unchanged at 1.
- Of the first 34 weeks of 2022, 23 weeks have had a lower number of deaths than the 5 year average between 2015-19.
- In total, 667 Covid-19 related deaths have occurred in the borough since the start of the pandemic.

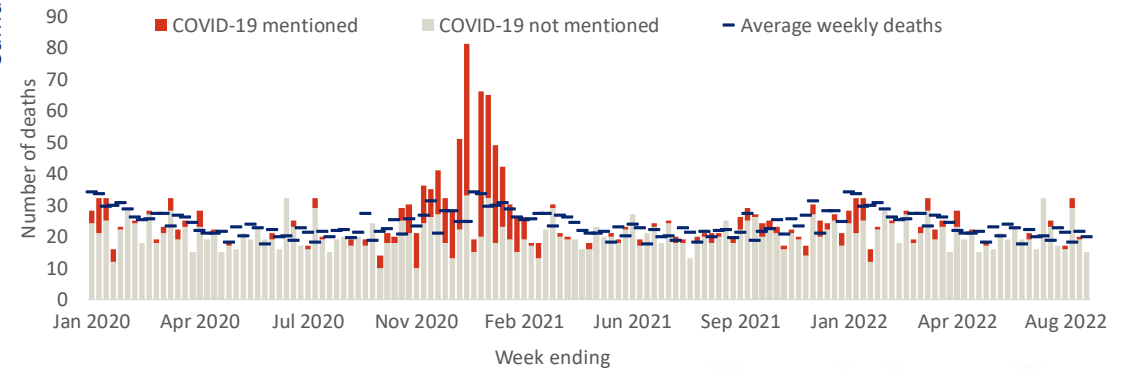
### Trend in deaths that occurred from w/e 06/03/2020 to w/e 26/08/22



### Excess deaths (2020 & 2021 weekly deaths minus 2015 to 2019 average for that week)



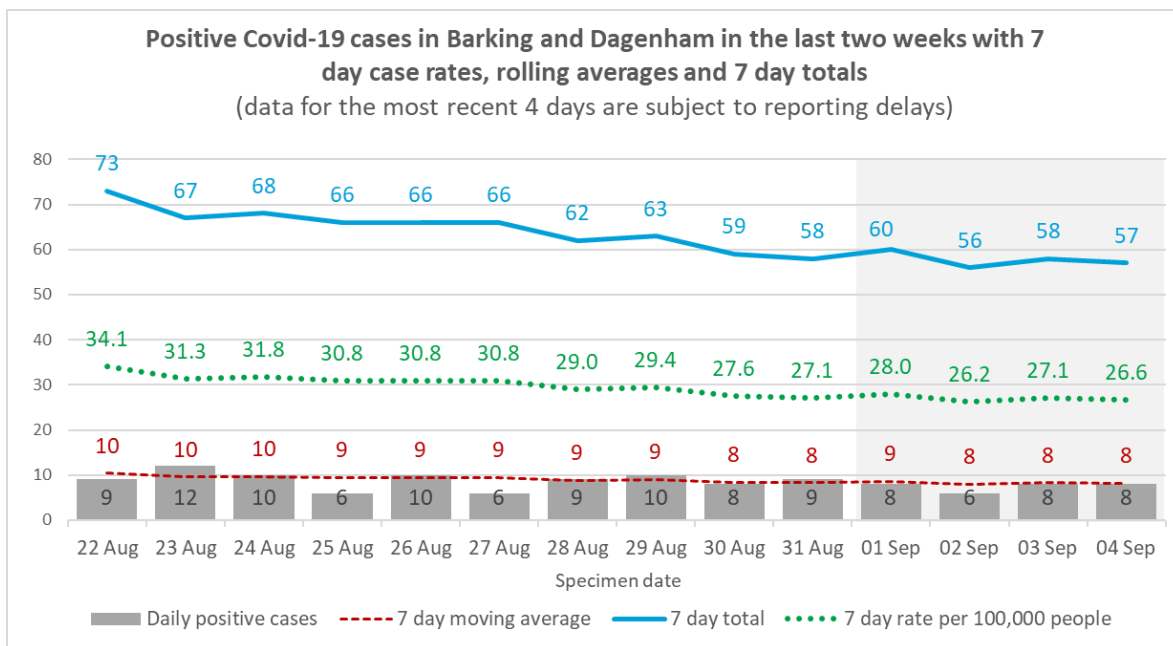
### All deaths by week and weekly average occurrence 2015 to 2019



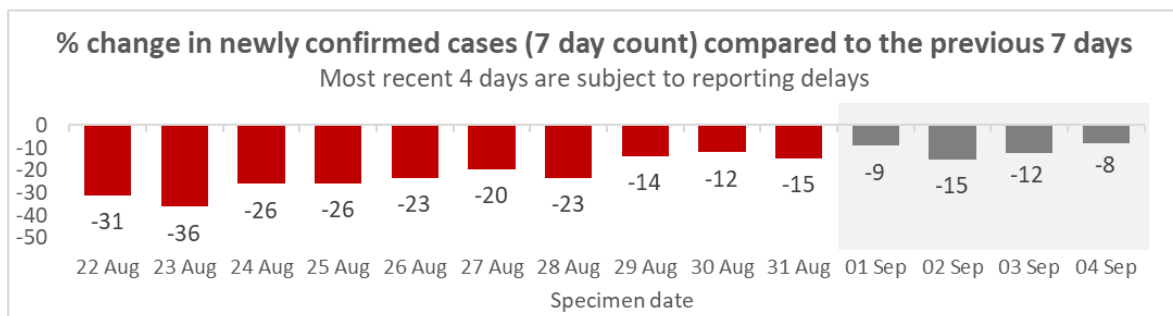
Data source: [weekly mortality data published by the ONS](#)

Please note the last release of mortality data in 2021 is expected on 21<sup>st</sup> December 2021 and the first release of 2022 is expected on 5<sup>th</sup> January 2022.

## New positive COVID-19 cases in the last two weeks



- In Barking and Dagenham in the 7 days to the 31<sup>st</sup> August there were:
  - 58 newly confirmed cases, down from 68 in the previous week.
  - 27.1 new cases per 100,000 residents, down from 31.8 in the previous week.
  - An average of 8 new cases per day, down from 10 in the previous week.
- In the week to the 31<sup>st</sup> August, Barking and Dagenham saw a eighth consecutive week of case count declines and a corresponding fall in the boroughs case rate per 100k residents, compared to the previous week.
- Provisional case counts appear to be declining at a slower rate than seen in previous weeks, suggesting case rates may stabilise around the current rate in the coming week.



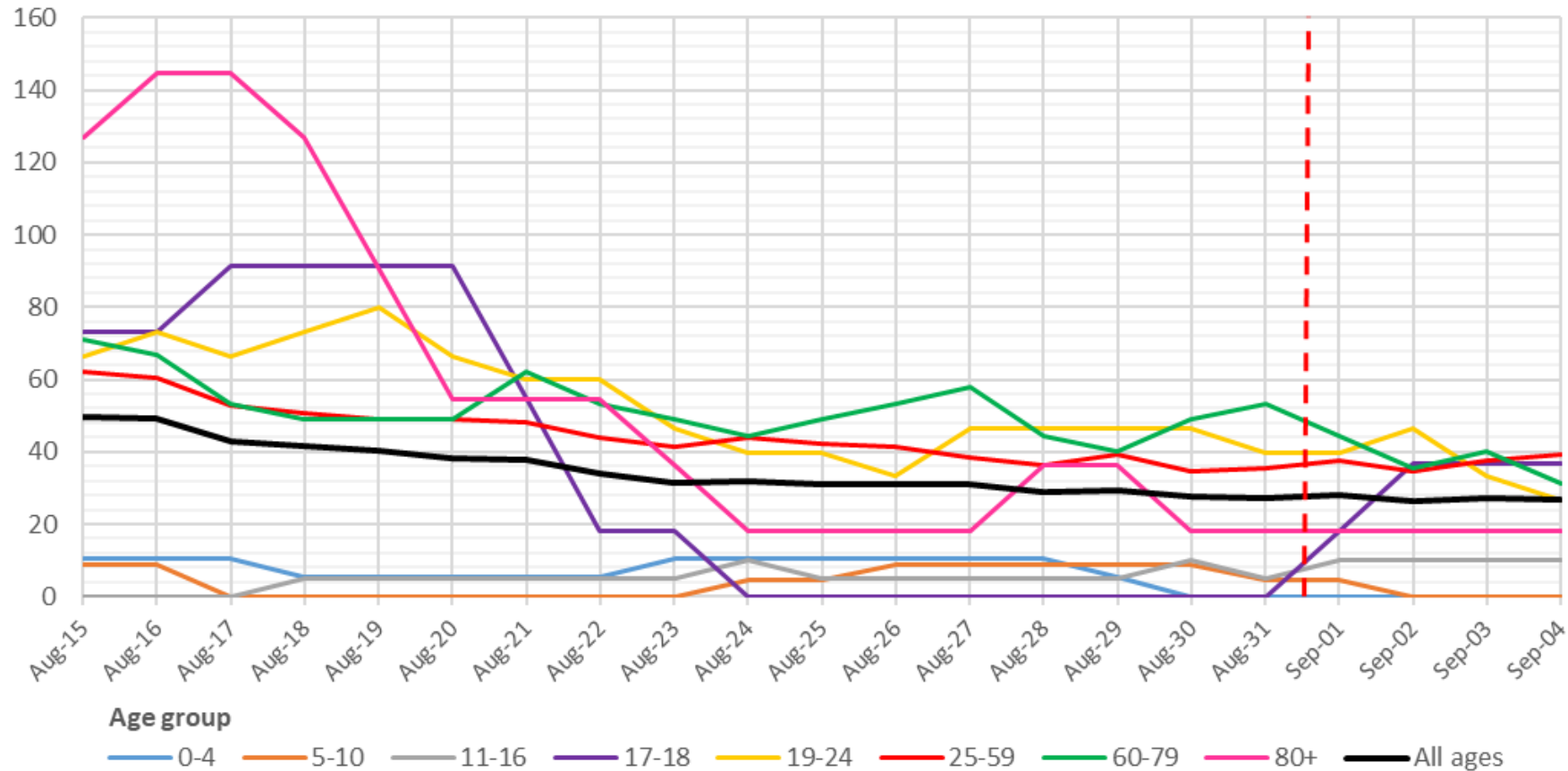
Data source: Covid-19 Situational Awareness Explorer

# Age-specific case rates per 100k people, Barking and Dagenham

- In the week to the 31<sup>st</sup> August, most age groups experienced little change to their case rate per 100k residents. The 60-79 case rate was the only rate to increase over the week to the 31<sup>st</sup> August and the increase was very small, rising from 44.4 cases per 100k residents to 53.3 cases. This is the highest case rate of any age group. Case rates in all other age groups were either unchanged or reduced over the week to 31<sup>st</sup> August. No cases were identified in the 0-4 and 17-18 year old age groups during the week, giving both groups a case rate of 0.0 cases per 100k residents.

## Barking and Dagenham, age-specific 7 day case rates per 100,000 people

Data for most recent 4 days is provisional



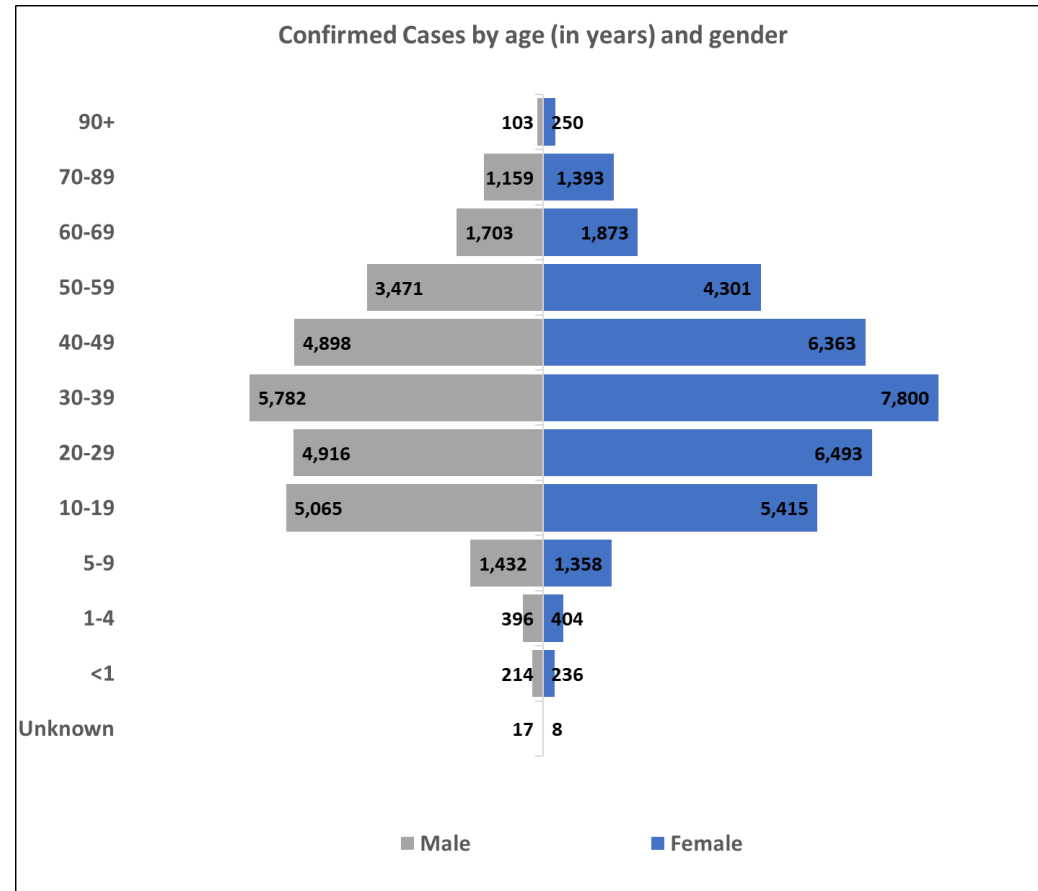
Data source: Case counts are from Covid-19 Situational Awareness Explorer. The denominators for age-specific rates are based on ONS MYE2020.

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# Cumulative view of cases since 1st March 2020

- From the beginning of the pandemic to the 28<sup>th</sup> August 2022, in Barking and Dagenham there have been 72,399 episodes of infection. This metric now counts the first and subsequent times a resident tests positive for COVID-19. This number would represent an estimated 33.8% of the population if each episode affected a different borough resident.
- Cases in the week to 28<sup>th</sup> August have not changed the overall distribution of cases among borough residents. Residents aged 60 and above are still fractionally underrepresented in case numbers, relative to their proportion of the population. Adults aged 20 to 59 remain slightly overrepresented and women in these age groups are slightly more overrepresented than men. Children aged 9 and under remain the most underrepresented demographic in case counts.



Episodes of Infection  
**72,399**

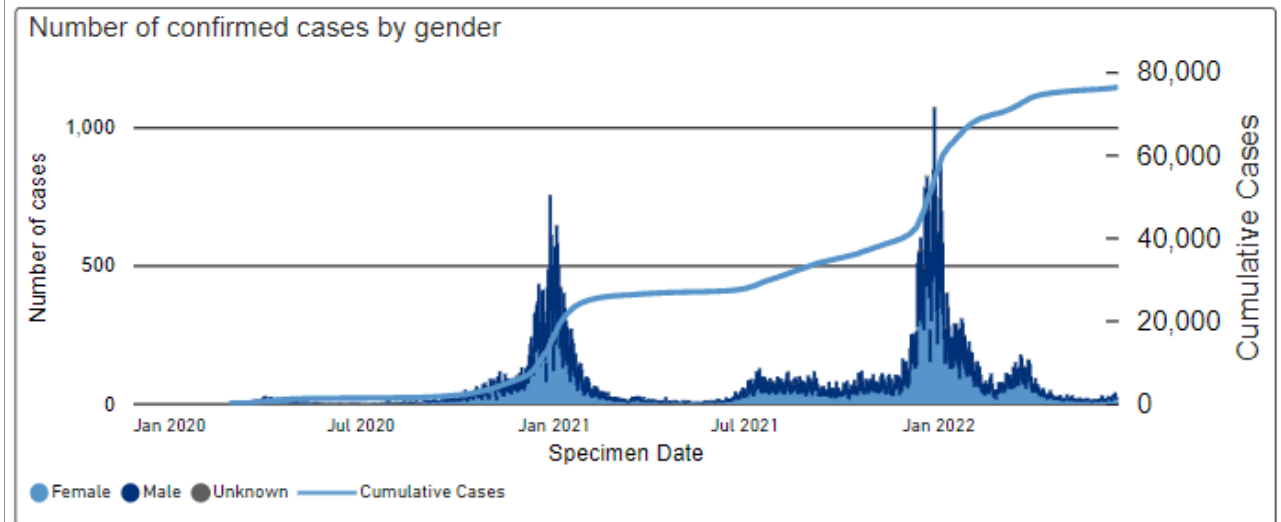


Image source: Covid-19 Situational Awareness Explorer.

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# Director of Public Health recommended actions

- Assure our arrangements are consistent with London's plans, resilient and proportionate to protect the vulnerable as we transition back to normality in a pandemic.
- Ensure messaging reflects the need to continue COVID-19 testing in NHS healthcare settings for asymptomatic vulnerable individuals, and all symptomatic individuals beyond the pause of routine asymptomatic testing on 31<sup>st</sup> August 2022.
- Maintain the ability to reintroduce key measures in the event of future variants and consider the infrastructure and workforce needed to respond rapidly to outbreaks and increases in cases.
- Maintain a targeted vaccination approach to school age, pregnant women and over 50s as well as underserved communities, those experiencing homelessness and minority ethnic groups.
- Deliver the spring booster vaccination programme to all adults aged over 75, all residents in care homes for older adults, and all aged 12 and above who are immunosuppressed and prepare for delivery of the autumn booster campaign.
- Continue to promote public health messaging in line with 'living with Covid' and ensure residents understand the ongoing importance of 'hands, face, space' both as a prevention measure and to manage personal risk.
- Monitor levels of COVID-19 across age groups and neighbourhoods, as well as hospitalisations and deaths in vaccinated over 60s.
- Consider how to use the staff trained in fixed term Covid roles as a reserve workforce for future health protection incidents and emergencies that require more than a BAU response.