

Birmingham Local Outbreak Engagement Board Covid-19 Update

29/09/2020



Key Points

- Case rate is continuing to fall but rank 22nd highest nationally.
- Geographical variation in cases but rise in small numbers in multiple areas, larger numbers in specific areas primarily reflect large household or residential setting clusters.
- % of community tests that are positive is slowly falling but remains double the regional average
- Testing uptake has increased – Birmingham is now highest in the region
- Likely to be a 3-4 week delay before hospitalisations and deaths rise based on international evidence.
- Unlikely to see vaccine rolled out before 2021/22.

Data position (latest data is 26/09/2020)

- 7 Day Pillar 2 testing rate at 26th September 2,315/100K 
 - Rate of testing on 23rd August 994/100K
 - Ranked 1st in the region ahead of Sandwell (2,078/100K), 16th highest in England
- % of positive tests in Pillar 2 at 23rd August 6.8% 
 - Less than the rate on 23rd August 2.5%
 - WM Regional average at 23rd 3.9%
- 7 Day Rolling Rate at 26th September (pillar 1 & 2) 122.7/100K 
 - Increase compared to rate on 23rd August 22.1/100K
 - Ranked 22nd highest nationally, and ranked 1st in WM region, ahead of Sandwell (92.9 /100K)

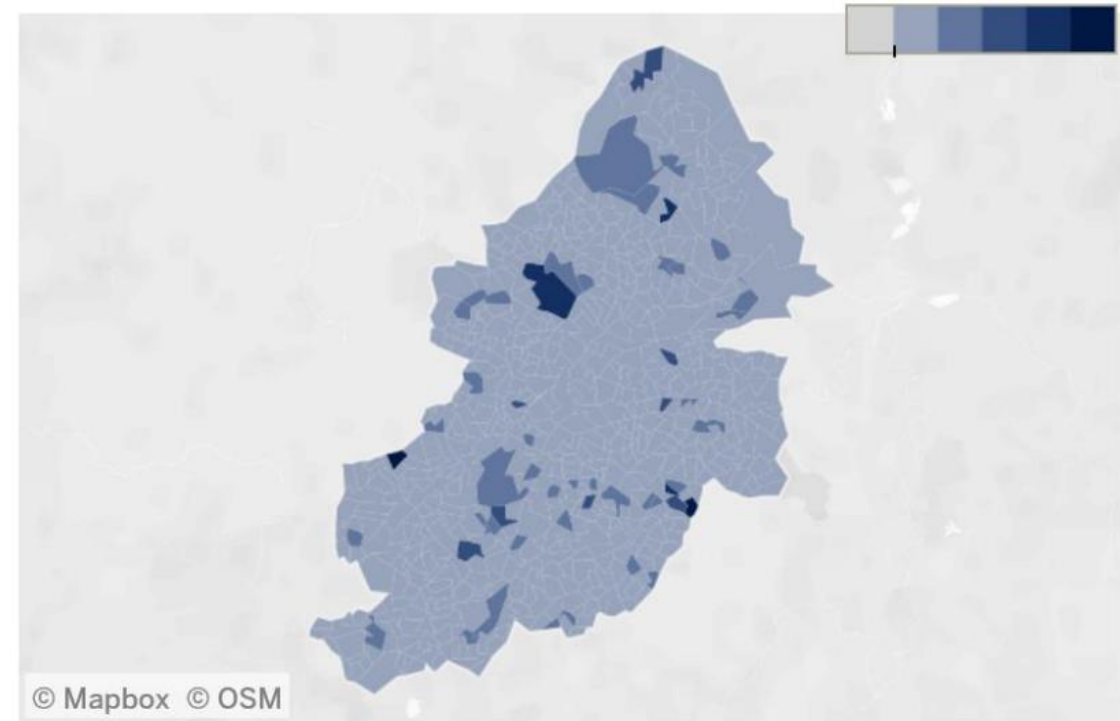
DATA PICTURE



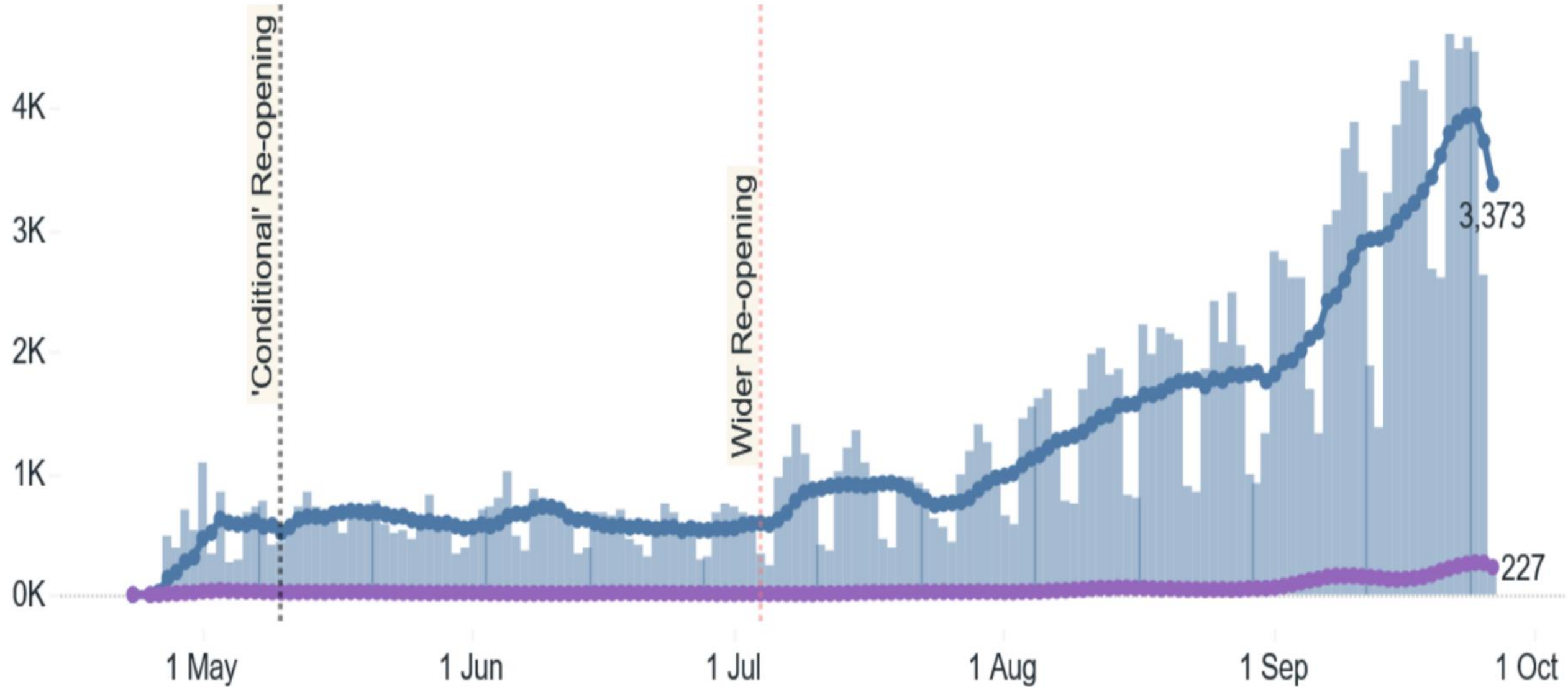
Testing

- There are two main pillars for testing:
 - Pillar 1 – NHS based testing in hospitals for patients and NHS staff
 - Pillar 2 – Community based testing through postal kits, drive-through and walk-through testing sites
- Care home testing is primarily through pillar 2
- The majority of new cases are now identified through pillar 2 testing but the number of cases in pillar 1 has increased.
- Uptake across the city of pillar 2 testing is pretty even over the last 7 days, higher testing rates in general reflect situation testing responses to outbreaks.

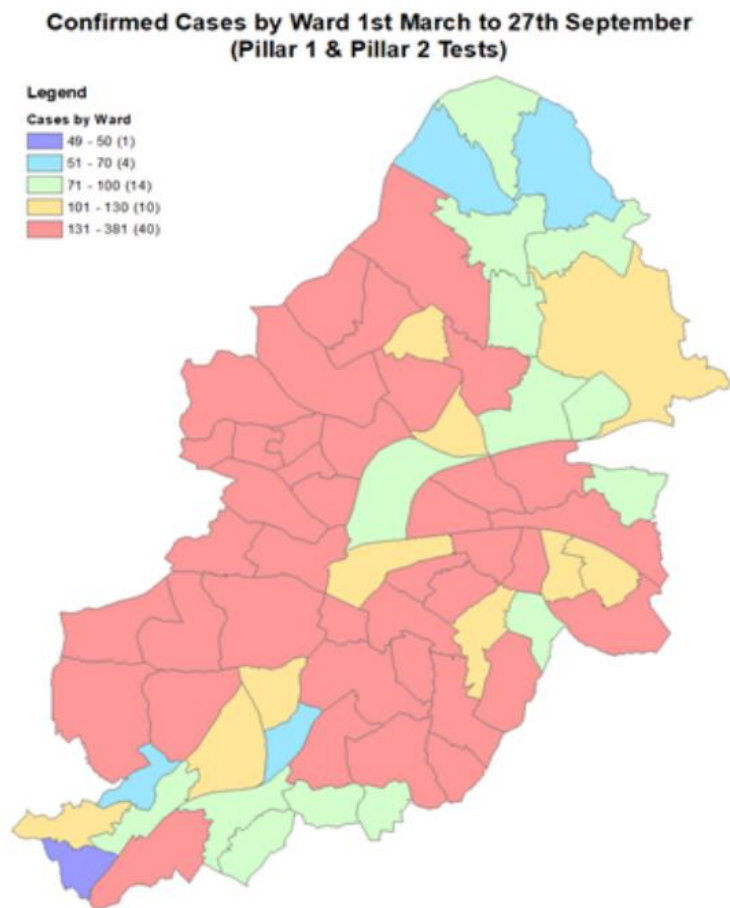
7-day rate of total Pillar 2 tests LSOA
(per 100K population) Range 0.6K to 18.7K



Daily Pillar 2 Covid Testing Count in Birmingham up to 26th September

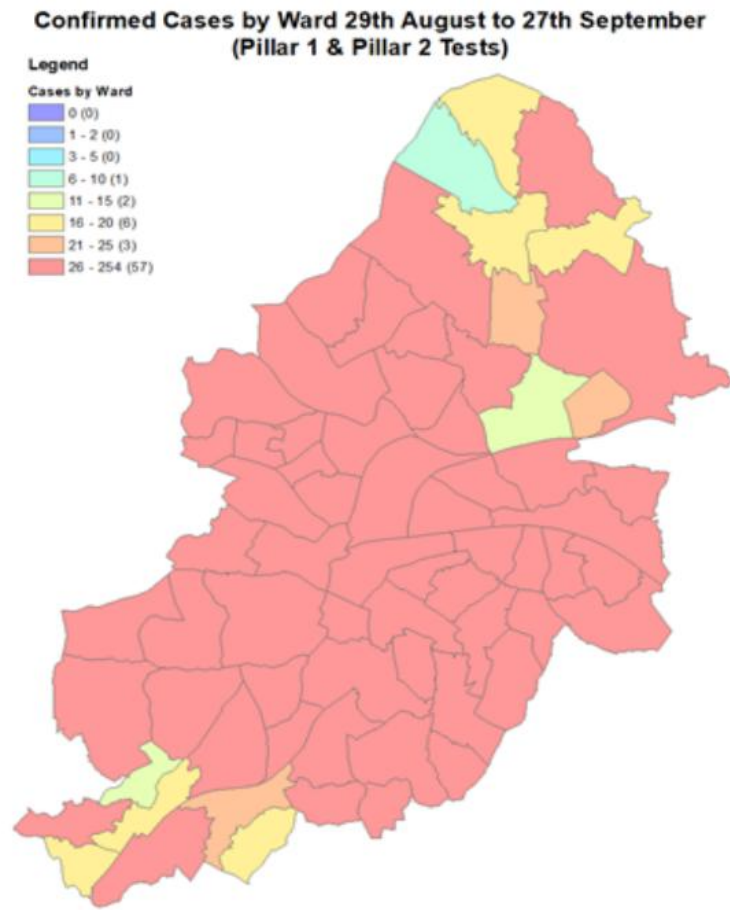


Cases by ward (total, last month & last week)



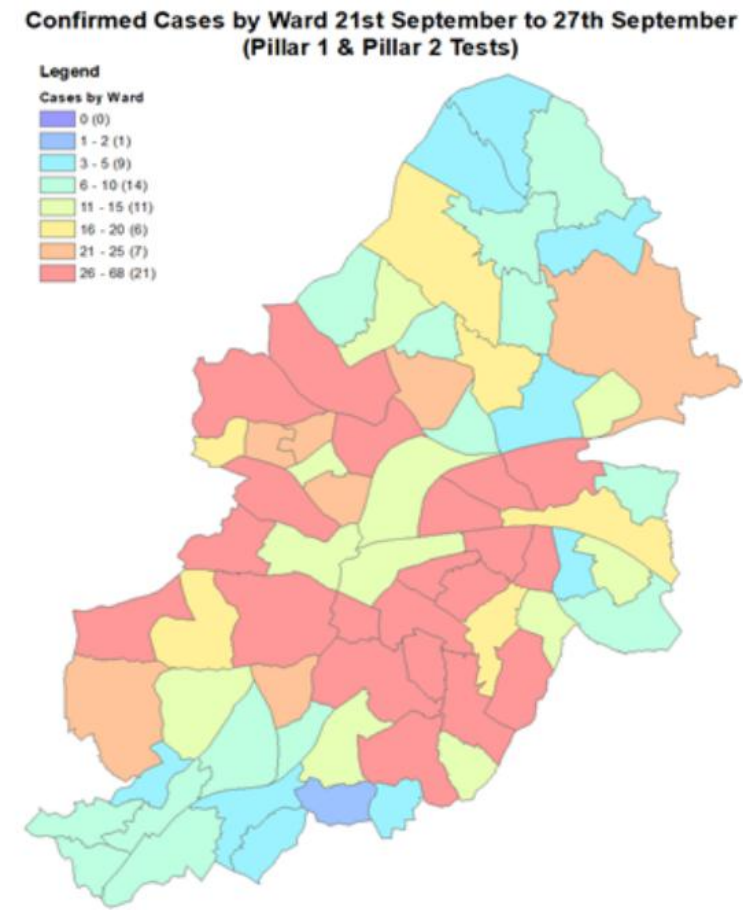
Source: PHE Covid-19 Situational Awareness Explorer (weekly line listing) produced 29th September 2020.
Produced by Birmingham Public Health Division (2020).
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All Cases



Source: PHE Covid-19 Situational Awareness Explorer (weekly line listing) produced 29th September 2020.
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Last Month



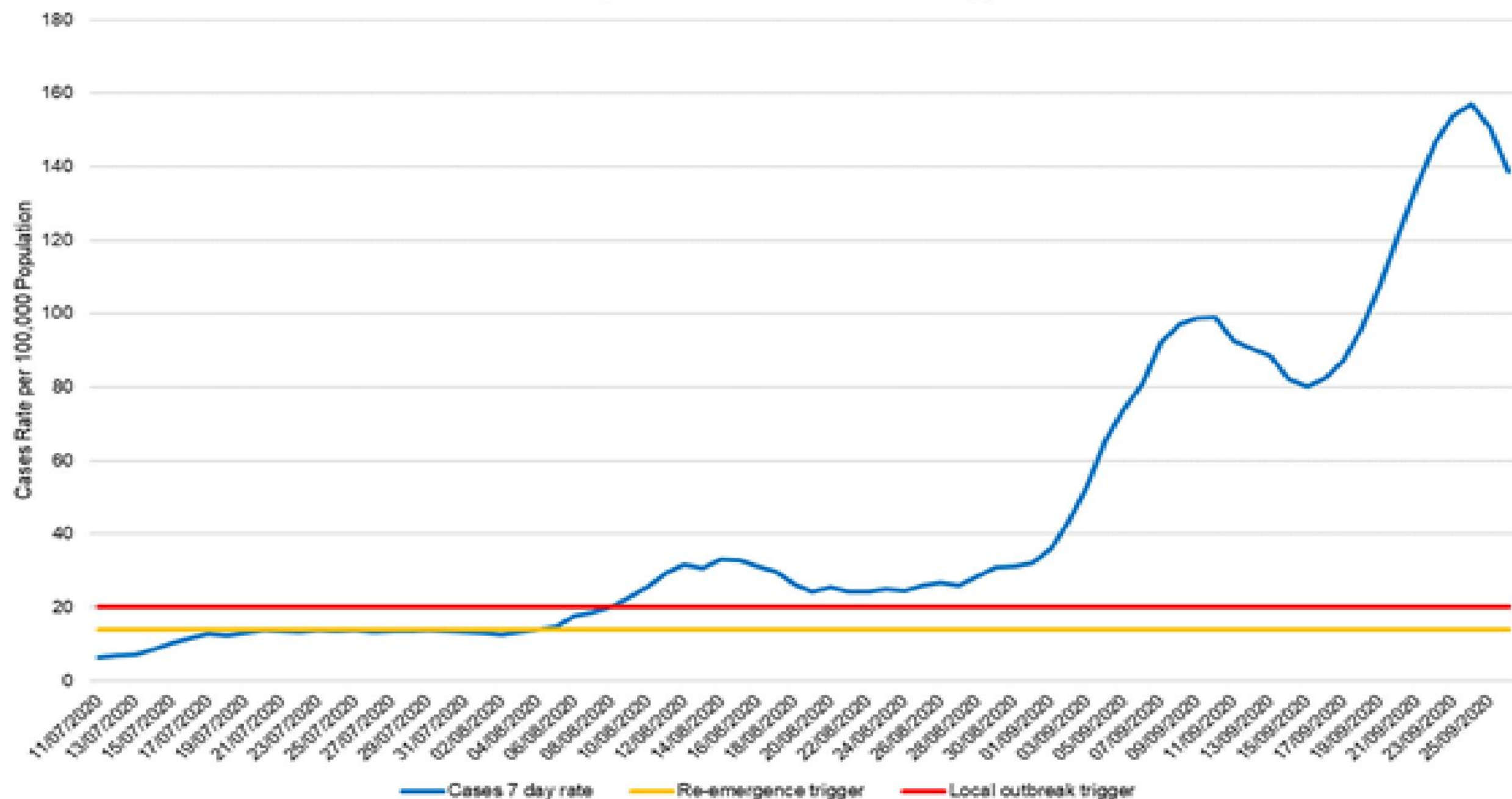
Source: PHE Covid-19 Situational Awareness Explorer (weekly line listing) produced 29th September 2020.
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Last Week

Note: Cases for the week 17th August to 23rd to August are likely to be an under-estimate due to time-lags in reporting.

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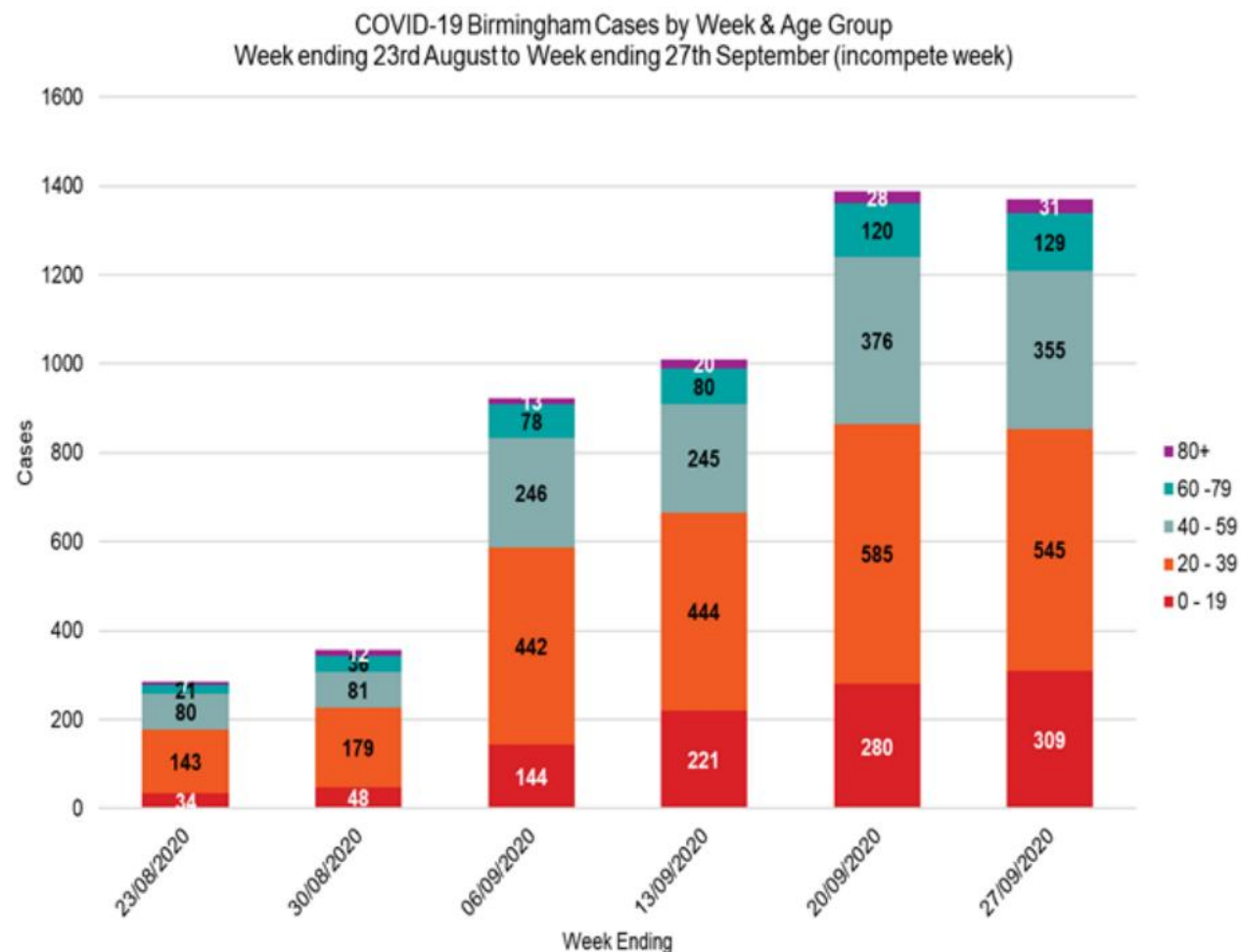
Birmingham Cases Rate per 100,000 Population: 7 day rolling rate benchmarked against re-emergence and local outbreak triggers



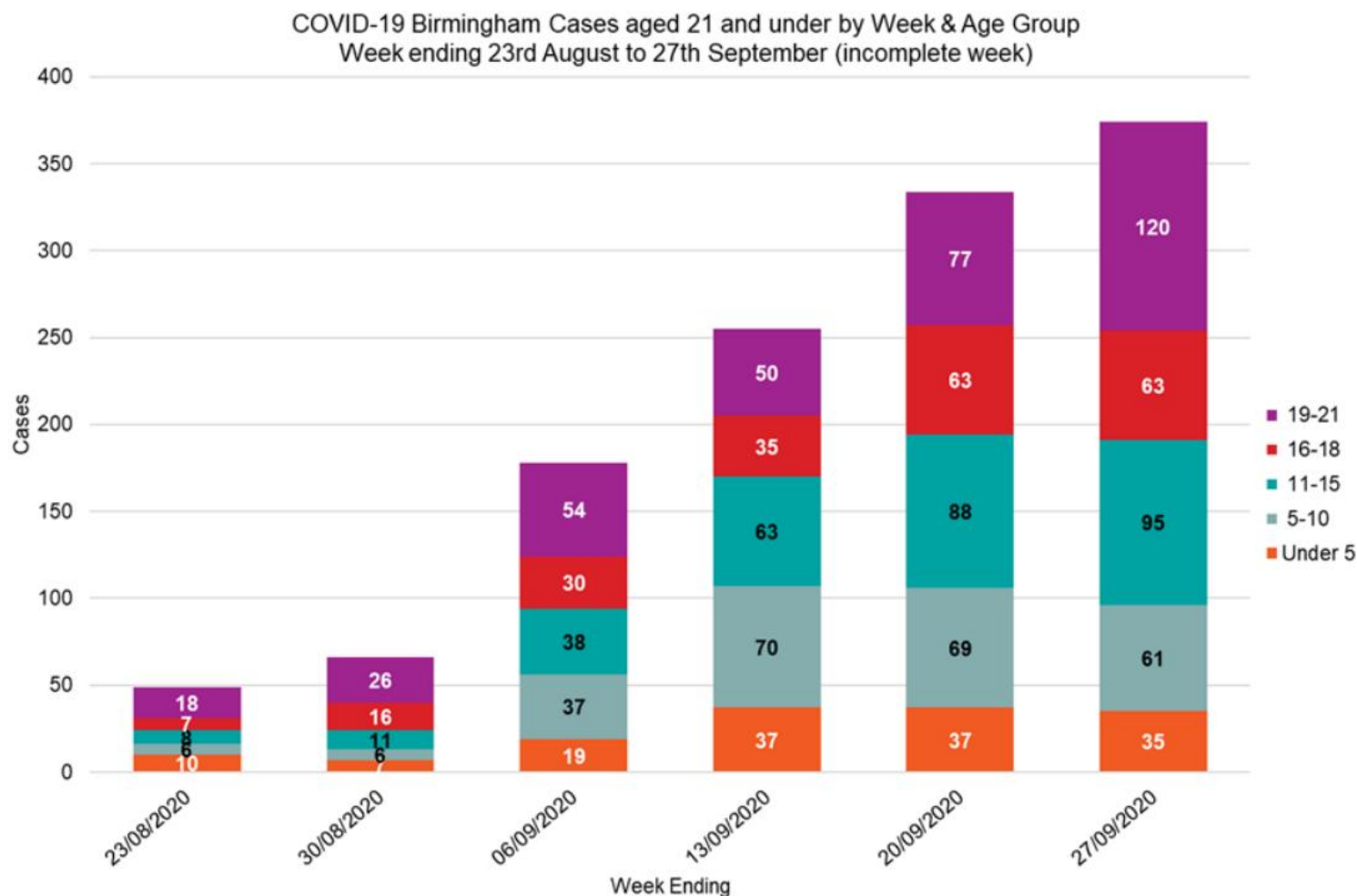
COVID-19 Birmingham Cases by Week and Age Group

Key points to highlight

- This data also comes from the individual case line listings and there is a lag in reporting so the most recent week may be updated.
- The largest number of new cases is being observed in the 20-39 age groups.
- This may reflect the increasing number of adults returning to work and increasing socialization or may also reflect the increase in access to postal/drive through testing.



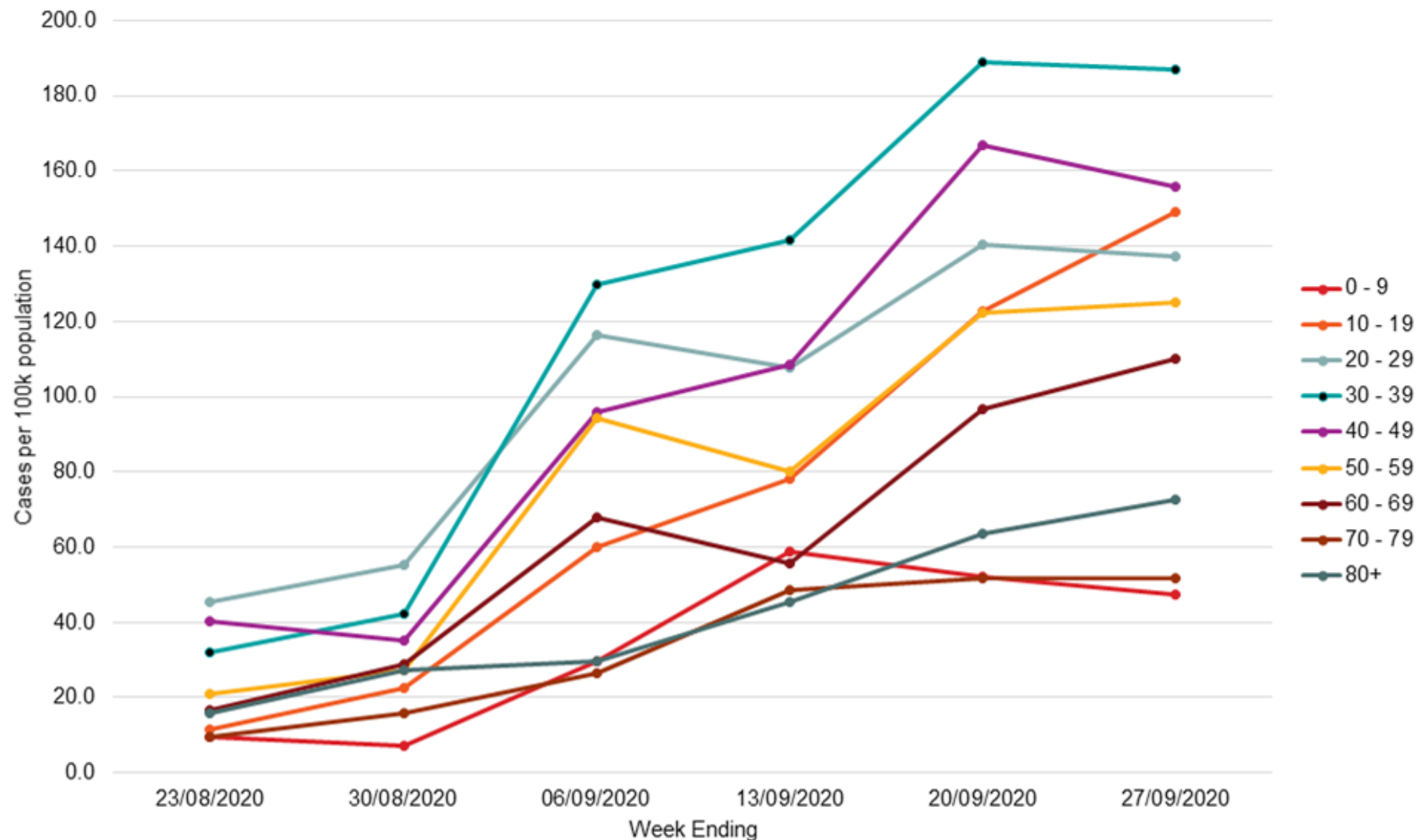
Analysis of new cases in under 21yr age group



Key points to highlight

- This data also comes from the individual case line listings and there is a lag in reporting so the most recent week may be updated.
- The largest number of new cases is being observed in the 19-21 age group.
- Where cases are linked to universities the link appears to be social mixing off-campus.

COVID-19 Birmingham Cases Rate per 100,000 Population by Week & Age Group
Week ending 23rd August to Week ending 27th September (incomplete week)

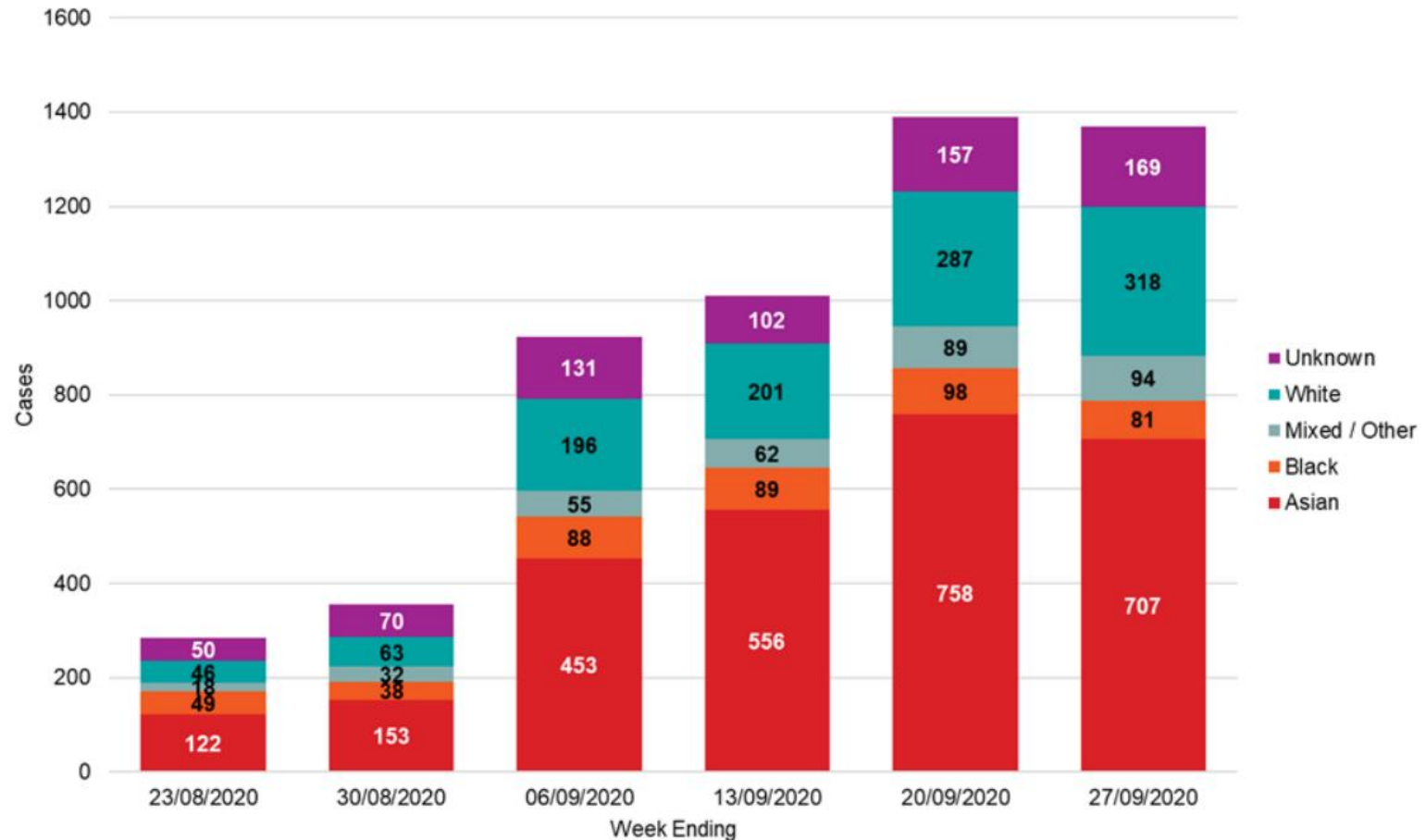


Cases by Ethnicity & Week

COVID-19 Birmingham Cases by Week & Ethnicity
Week ending 23rd August to 27th September (incomplete week)

Key points to highlight

- This data also comes from the individual case line listings and there is a lag in reporting so the most recent week may be updated.
- It is important to highlight that without the demographic of individuals testing it is difficult to know if this reflects differences in uptake of testing in different communities.
- Throughout the outbreak the Asian community have been over represented in covid-19 cases and this may reflect occupational exposure.

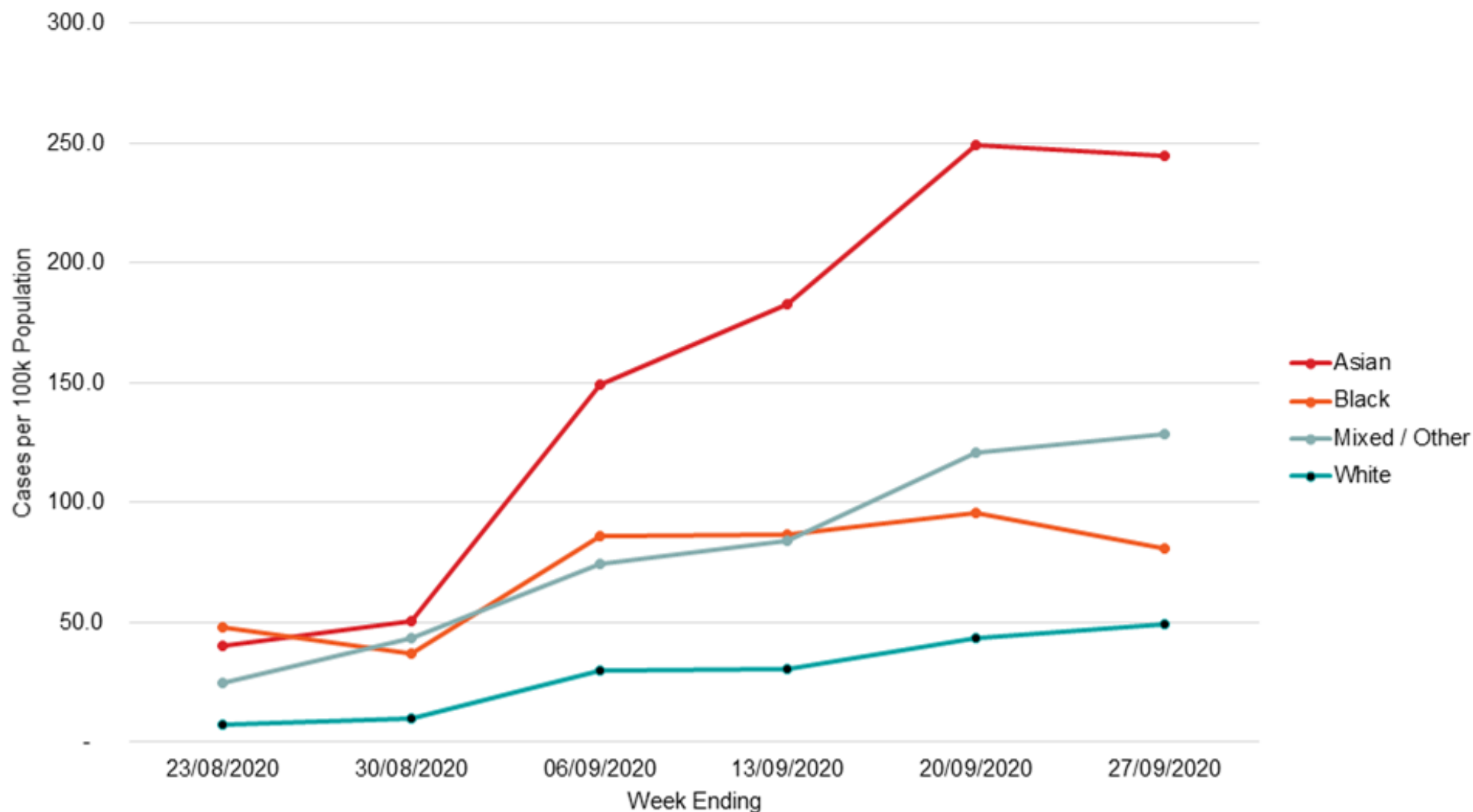


Source: PHE COVID-19 Positive Test Data (weekly line listing)

Note: Cases for the week 17th August to 23rd to August are likely to be an under-estimate due to time-lags in reporting.

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COVID-19 Birmingham Cases Rate per 100,000 Population by Week & Ethnic Group. Week ending 23rd August to Week ending 27th September (incomplete week)



Situation Summary

Public Health England define situations are:

- Cluster: A number of cases with possible but unconfirmed epidemiological link
- Outbreak: A number of cases with highly probable or confirmed epidemiological link
- Exposure: Where a person or a number of people have been exposed
- Issue: Where there is a local situation that requires monitoring
- Threat: A wider situation which required long term monitoring and planning

The majority of situations in Birmingham are Issues/Exposures and the majority of outbreaks involve less than five cases reflecting the positive engagement and rapid response by businesses, care homes and schools.

Situational issues

Week ending	New situations count	Issues	Exposures	Clusters	Enquiries	Outbreaks
23/08	30	2	21	0	3	4
16/08	47	4	23	1	8	11
09/08	28	5	11	4	1	7
02/08	23	1	12	0	0	10
26/07	25	4	17	0	0	4
19/07	16	3	9	0	0	4
12/07	17	3	10	0	0	4
05/07	11	5	2	0	0	4
28/06	14	4	6	0	0	4
21/06	17	7	9	0	0	1
14/06	10	3	4	0	0	3
07/06	6	3	1	0	0	2
Total	244	44	125	5	12	58
Situation description		Issue – suspected case	Exposure – single confirmed case	Cluster – 2 linked cases within 14 days		Outbreak – 2 cases linked to setting but not to each other with 14 days

Situation Analysis

As of the 27th September 2020 to date there have been 165 situations in residential care settings, 356 situations in education and early year settings, an increase of 108 (44%) situations since last week. 135 situations in workplace settings, 2 situations in households (this has not changed in the last seven weeks) and 176 situations in other settings.

Settings	Number of situations	
	27 th September	20 th September
Residential Care	25	22
Workplace	13	13
Education	108	128
Other	33	27

ESCALATION REGULATION



LA led Regulation Intervention

- Health Protection (Coronavirus Restrictions) (England) (No.3) Regulations
 - Regulation 4: restrict access to, or close, individual premises on basis of inadequate risk assessment or risk management
 - Regulation 5: prohibit certain types of event taking place on the basis of a maximum event size, including life events
 - Regulation 6: restrict access to, or close, public outdoor places (or types of outdoor public places)

National Level Regulation Intervention

Birmingham is currently an area of National Intervention, along with Sandwell, Solihull and Wolverhampton.

[Restrictions](#) are in place on households to prevent residents mixing with people they do not live with in their homes or gardens.

In addition, [national restrictions](#) are currently in place to ensure that people do not meet in groups of more than 6 outdoors or in hospitality settings.

ESCALATION INTERVENTION PLAN



Aim of escalation strategy

- Suppress the spread of Covid-19 in Birmingham and wider region
- Protect the most vulnerable to prevent further excess deaths and increased hospitalisation

Objectives

- Increase uptake of testing in both targeted and generalised ways
- Improve engagement with CTAS/tracing follow up
- Increase compliance with risk reduction behaviours to prevent spread of Covid-19 at both personal and organisational level
- Intervention and engagement to protect the most vulnerable

Escalation Governance

- In light of the escalation in case numbers there has been an enhanced response strategy.
- To support this an inter-agency incident management team (IMT) chaired by the BCC Chief Executive has been meeting daily to support delivery of work across organisations to support the response, this links across to the Regional Strategic Response Group and the internal Council Gold and Tactical Command groups.
- Alongside this there have been briefings to Cabinet members and neighbouring authority Leaders, chief executives, directors of Public Health and to the WM combined Authority Mayor and MPs.

Intervention impact on indicators

- Increase testing will increase case rate and expect initial increase in % positives but this should reduce if the situation is coming under control.
- Enhanced contact tracing is likely to increase situation awareness and this will spike but as Covid reg enforcement impact this should stabilize and the number of cases linked to situation count should be low.
- Testing rates should remain high and even across the footprint.

Increase Testing Uptake

Current concerns around testing based on community engagement and data:

- Geographical coverage of testing sites
- Limited car ownership
- Timeliness for postal kits
- Accessibility of instructions
- Impact on income

Planned interventions

Increase LTU walk-through testing facilities in West, East and Centre

Increase MTU drive-through testing facilities in North and South

Translation & videos on testing kit use promotion

Pilot of drop and collect testing approach in highly localised way

Pilot of increased opportunistic testing in primary care

Work with DWP and BIES on income support for self-isolation impact

Expansion of testing locations

Drive-through facilities

2 mobile testing drive-through units operational and rotating through locations.

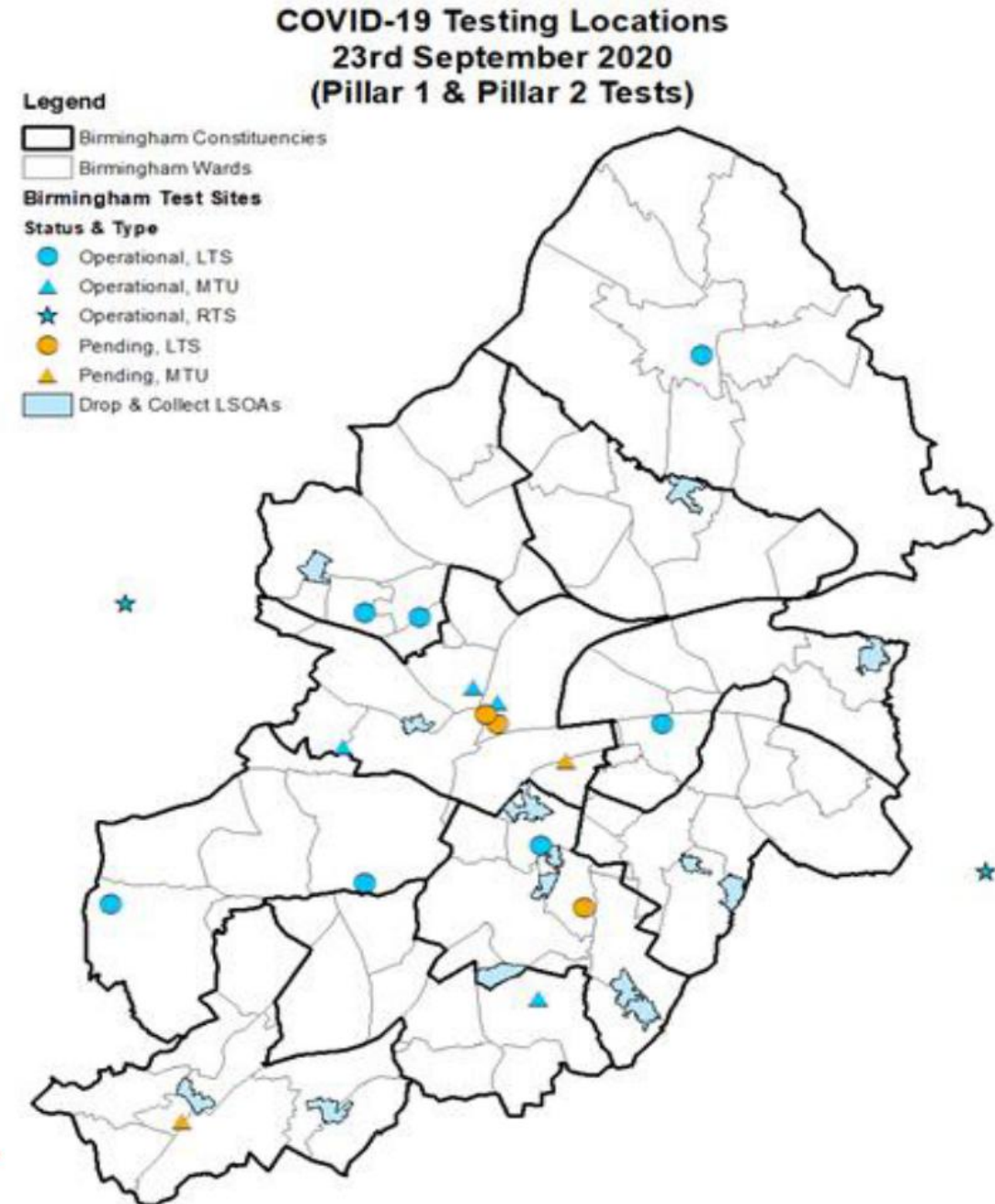
1 site in Longbridge pending approvals to go live
Regional testing site has moved from Edgbaston to Birmingham Airport

Walk-through facilities

7 walk-through local testing sites operational

Further sites being identified in line with the agreement to secure 10 walk-through local testing sites.

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Notes: LTS = Local Testing Site, MTU = Mobile Testing Unit, RTS = Regional Testing Site.
Source: COVID-19 Testing Planner produced 23rd September 2020.
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Pilot 'drop and collect' in small geographical areas

- Two separate pilots being trialled
- Pilot A: targeting localities that have high LSOA outbreak incidence (PH Intelligence led) or low testing uptake (Phase 1)
 - Door to door drop off and collection of test kits by public sector staff volunteers in affected areas
 - Results via Pillar 2 community testing regime
 - Opportunity for outreach education providing key PH messages
- Pilot B: targeting individuals that need a test but unable to access a test centre (Phase 2)
 - Allocating testing kits to high risk settings and vulnerable population service providers

Learning from Drop & Collect intervention to date

- Number of staff deployed: 571 (467 BCC, 104 external)
- Number of kits deployed: 5970
- Number of kits returned: 5028
- Key learning from doorstep refusal highlights need for clear communication about purpose of drop & collect and importance of translated support materials.

Increase Tracing Engagement

Current concerns around tracing based on community engagement and data:

- Trust in confidentiality
- Languages
- Data completeness
- Connection between CTAS and local intelligence

Planned interventions

Amplify community engagement and explanation of NHS T&T service

Use multi-lingual engagement to support understanding

Strengthen link to NHS brand through NHS voice

Pilot access to enhanced local tracing support

Pilot linking local enforcement/situational data to Tier 2 tracing

Progress to date

- As part of the enhanced support the Council has been working with NHS Test and Trace to step up enhanced contact tracing. This went live on the 24th September.
- The burden placed on the Council is significantly higher than projected by Public Health England and we are working with them and the NHS Test and Trace service to review the model. Currently between 300-500 cases are being passed over as incomplete from NHS Test and Trace on a daily basis which is significantly higher than the modelling prior to start of 20-30 cases a day and is at risk of overwhelming the public health capacity.

Next steps

- Training Public health specialist staff through national training programme to undertake contact tracing and use the CTAS system
- Working toward launch of local enhanced contact tracing in mid-September

Communication & Engagement

A wide range of community and engagement activity has taken place including:

- Media engagement including weekly live Q&A with BBC WM
- Social media engagement through @HealthyBrum and BCC twitter, Facebook, Instagram and YouTube accounts. Over August & September, 435 HealthyBrum tweets were posted, reaching over 405k people and had 1.1k engagements; 331 HealthyBrum Facebook posts reached over 62k people and had 349 engagements; 97 HealthyBrum Instagram posts reached 3k people and had 400 engagements; Videos on the HealthyBrum YouTube channel had 2200 watches and the channel now has 118 videos uploaded.
- Targeted social media communications for geographical areas within the drop and collect service (over 31,000 reach with 386 interactions), notices on the new restrictions in Birmingham (over 31,000 reach with over 700 interactions) and a CTA for residents to get involved in the covid champions' programme.
- YouTube and social media content have been created in multiple languages to ensure we reach our diverse demographic, such as Urdu, Arabic, French, Spanish, Cantonese, Polish, Romanian and more.
- 'No Bull' campaign launched in the city featuring digital advertising, targeted online ads and collaborations with media such as IChooseBirmingham.
- Setting specific engagement with care homes, educational settings, businesses
- Community partner engagement
- Weekly interfaith meetings with faith leaders
- BHealthy webinar series and risk reduction education and engagement programme under way

Covid Community Champions

- Birmingham Covid Champions programme aims to create clarity where there is confusion and opportunities for citizens to take action in local communities to contain Covid in our city.
- Objectives – recruit up to 1,500 volunteers to become Covid Champions by the end of October
- Provide e-learning modules, webinars and whatsapp support
- Weekly key message & FAQ for champions
- Utilise feedback from Champions to inform local strategy

BECOME A **BIRMINGHAM** CHAMPION

Preventing the spread of COVID-19

Join our network of local people to help during the COVID-19 pandemic
Anyone living or working in Birmingham can get involved!



Receive the latest information and government guidelines on how to stay safe and healthy



Share this information with your friends, family, colleagues and community



Keeping our communities well informed will help minimise the risk of the virus spreading.

COVID-19



CHAMPION

www.birmingham.gov.uk/COVID-19_Health_Champions

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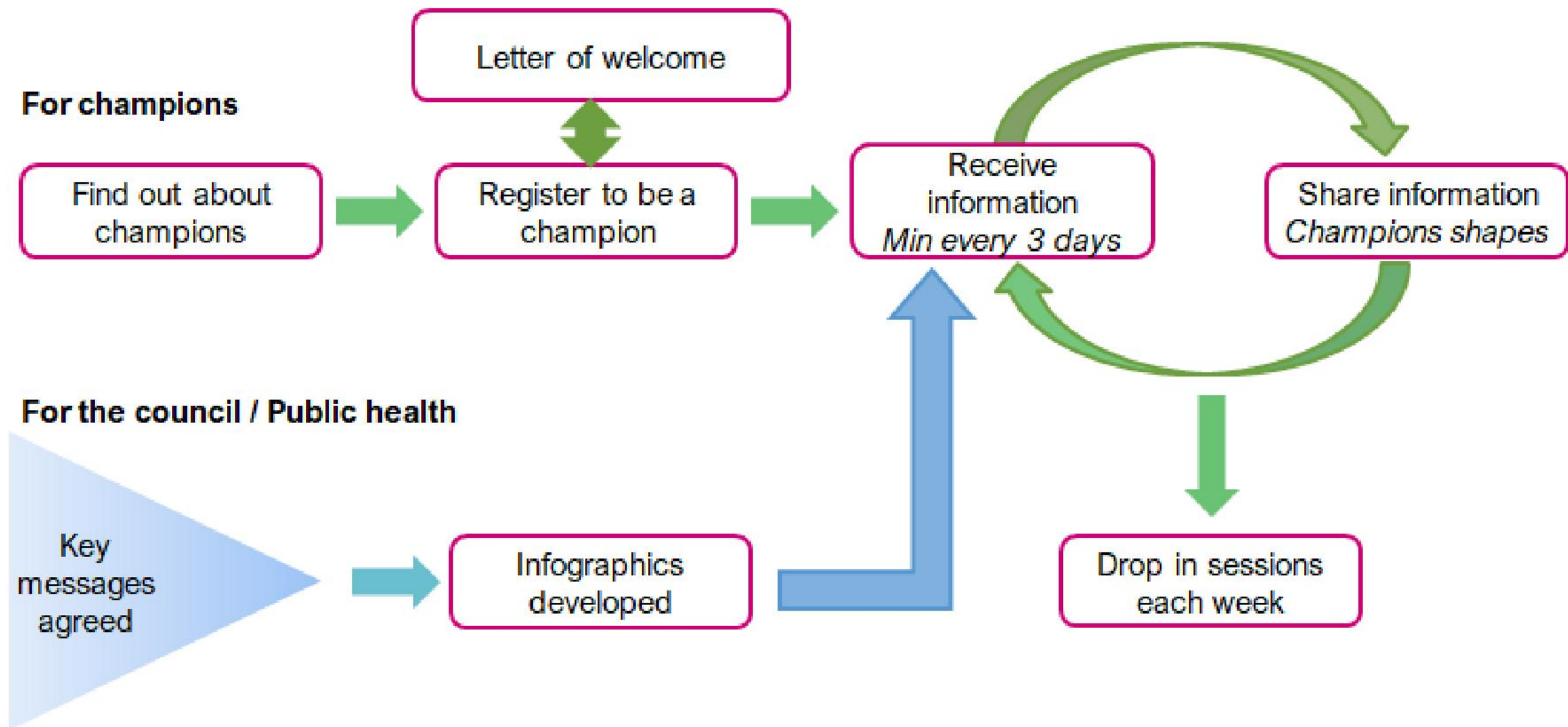
Keeping our communities well informed will help minimise the risk of the virus spreading.

COVID-19



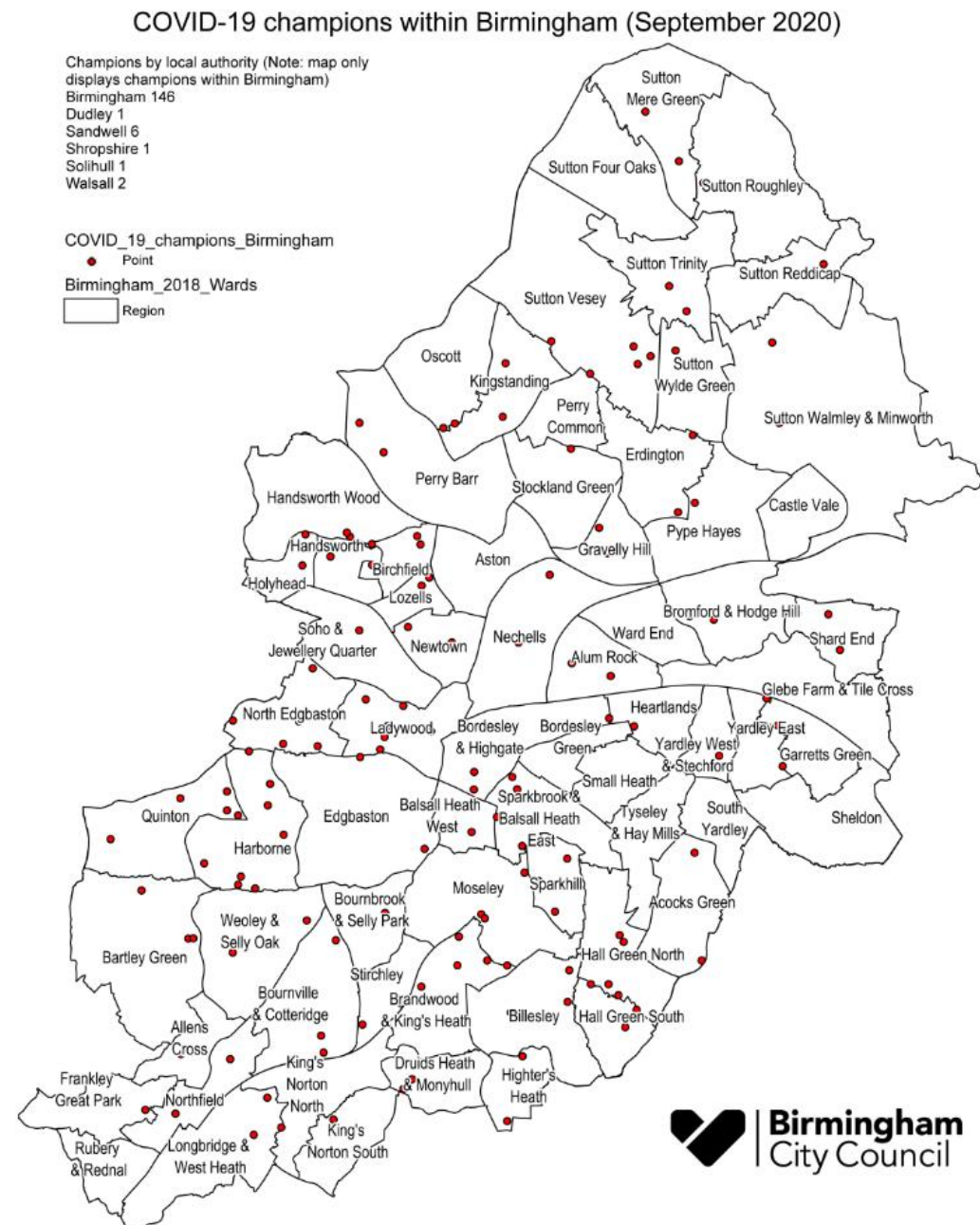
CHAMPION

www.birmingham.gov.uk/COVID-19_Health_Champions



Covid community champions uptake

As of 29/09 175 Covid Community Champions have signed up



Increase Risk Reduction Compliance

Current concerns based on community engagement and data:

- Understanding of the guidelines
- Covid messaging fatigue
- Enforcement
- High potential communities e.g. university students

Planned interventions

Strong cut through local coms campaign

Direct engagement through elected members and community leaders

Direct education and awareness interventions with business

Strong enforcement direct and through partners

High potential communities

Progress to date

- Localised campaign materials launch 21/08 to reinforce individual risk reduction
- Community leaders briefing and key message materials
- Briefing to business sector hosted by Chamber of Commerce 20/08
- Doorstep education inspections and education visits mobilised over last 2 weeks
- Whistleblowing line for business issues launched last week
- Working with Universities, already developed internal contact tracing mobilisation and messaging with students prior to arrival.

Next steps

- Continued work with Asian Chamber of Commerce to do focused engagement with Asian business sector.
- Working with PHE Behavioural Insight team to support university student messaging.
- Tendering for additional community partner organisations to further strengthen targeted engagement through the FindItBirmingham portal.

Intervention to protect the most vulnerable

Current concerns about vulnerable from community engagement and data:

- Increased situations in care homes (primarily staff)
- Clinical vulnerable individuals
- Special schools
- Concerns about refugee and asylum seeker facilities

Planned interventions

Close care homes to non-essential visitors, consider extension to inpatient sites

NHS support to care homes infection control and risk reduction

NHS communication with clinically vulnerable individuals to raise awareness

Extension of 'Everybody in'

Refugee and Asylum seekers movement into the city halted

Bhealthy - Mortality risk reduction campaign

Progress to date

- Closed care homes to visitors from 14/08, review weekly
- Already working with CCG to provide enhanced support to care homes, stepping up support to those on 'watch list'
- Extending 'Everybody In' model given community transmission risk
- Launched BHealthy campaign on mortality risk reduction – translated into 21 languages

Next steps

- Working with DHSC to expand care and extra care settings pillar 2 testing
- Targeted advice through primary care to clinically vulnerable patients
- Mobilising community champion briefings on Bhealthy
- Proposal to do surveillance testing sweep within Asylum seeker dispersal centres and homeless settings being developed

BHealthy Update

BHealthy

A simple checklist with practical tools and tips to help improve your health and wellbeing and reduce your risk of becoming seriously ill from Covid-19

- ✓ Checklist for a healthier you
- ✓ Weekly Getting Ready Plan
- ✓ Keeping COVID safe



- XXX Webinars to date – any feedback quotes? - attendance numbers?
- Resources translated into 21 languages
- Direct distribution through faith and community organisations, targeted distribution through asylum champions and social prescribers
- Supported by teaching webinars and web resources for community facilitators

Projected impact of interventions



Increased testing uptake will increase case numbers over next 2-3 weeks, aiming for 2,000 tests per 100K population as 7 day rate

Current rate is
>2,000 tests per 100K
over last 7 days



Increased situation link to contact tracing will increase epidemiology context of spread, especially between social situations connections to spread and patterns across geographies

Contact tracing is
improving and
strongest evidence is
for household
transmission



Increased enforcement and education support to businesses will increase organisational risk reduction compliance and reduce situations

Whistleblowing
helpline and
enforcement is having
positive impact

Context of indicators

- As testing increases there is a spike in positive cases, particularly where asymptomatic testing, even if the overall % of population with Covid-19 isn't changing i.e. if no change in positivity rate.
- Important to consider % of positive tests alongside case rate as increase testing with the same positivity rate will increase the case rate but the concern is more serious if positivity rate is rising as testing increases.
- Therefore escalation and de-escalation has to consider both % positive of pillar 2 community tests as well as overall case rate.
- Similarly enhanced contact tracing is likely to increase situational awareness and increase situation count but ultimately reduce the overall case numbers linked to specific situations.

[birmingham.gov.uk/futurecouncil](https://www.birmingham.gov.uk/futurecouncil)



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