



# Covid-19 update for Kent Health Overview and Scrutiny Committee – July 2021

Content of this report is accurate for the deadline of paper submissions. Verbal updates will be provided at the committee meeting.

The report is provided by the Kent and Medway Clinical Commissioning Group (KMCCG) on behalf of the Integrated Care System. It is an overview to the NHS response to the pandemic and includes work being delivered by a wide range of NHS partners.

# **Vaccination programme**

The Covid-19 vaccination programme across Kent and Medway continues to progressed well. Since the last HOSC update we have passed the two million vaccines milestone. The programme has been delivered across three distinct phases:

- Phase 1 vaccination of extremely vulnerable (cohorts 1-4)
- Phase 2 vaccination of all eligible adults aged 18+
- Phase 3 autumn/winter boosters and possible extension to under 18s

## Within Kent and Medway:

- **Phase 1 is complete** in terms of having offered the vaccine to all eligible groups and achieved high uptake levels. Vaccination remains available to anyone who has not yet taken up the offer.
- Phase 2 is nearing completion in terms of having offered a first dose to all adults by 19 July 2021 and completing second doses by September/October 2021.
- **Phase 3 is in planning** but reliant on additional national decisions before local implementation plans can be fully developed. We will provide more detail on this in a future update to HOSC.

#### **VACCINATION PROGRESS**

Figures on vaccine progress are published nationally each Thursday. As of 8 July, the position in Kent and Medway was:

- 2,174,480 vaccines in total
- 1,236,674 first doses
- 937,806 second doses completed
- 88% of the top 9 at-risk cohorts are now vaccinated with both doses. This equates to 96% of those
  who have had a first dose.

There has been significant progress in vaccinating younger people in the last month. In our update to the June HOSC we reported:

- 12% of 18-29 year olds had received a first dose. This is now at 51%
- 21% of 30-39 year olds had received a first dose. This is now at 65%

Uptake amongst younger groups has not been as fast as the older and more at risk groups, but steady progress is being made with significant local, regional and national publicity to promote the importance of getting vaccinated and the availability of clinics. Responding to feedback the NHS across the country has opened up walk-in options both from existing vaccination services and at pop-up sites in various locations. Details of local walk-in clinics are published on the CCG website <a href="www.kentandmedwayccg.nhs.uk/grabajab">www.kentandmedwayccg.nhs.uk/grabajab</a> and promoted through social media and other channels.

Second doses for all age groups are now being brought forward to 8 weeks (rather than 12). Within the 40-49 year olds 47% have now had both doses (58% of those who have had a first dose). First dose take up in 40-49 year olds is 81%.

## Percentage uptake across the priority groups:

Cohorts	First dose uptake	Second dose completion	Whole pop. fully vaccinated
1 (Care home residents and carers)	100%*	88%	85%
2 (80+ years and health and care frontline staff)	95%	95%	91%
<b>3</b> (75-79 year olds )	97%	98%	95%
4 (70-74 year olds and extremely vulnerable)	95%	98%	93%
Total 1 – 4	95%	97%	92%
<b>5</b> (65-69 year olds)	94%	98%	92%
6 (clinically vulnerable aged 16-64)	86%	92%	79%
<b>7</b> (60-74 year olds)	92%	97%	89%
8 (55-59 year olds)	90%	95%	87%
<b>9</b> (50-54 year olds)	88%	95%	83%
Total 1 – 9	92%	96%	88%
<b>10</b> (40-49 year olds)	81%	58%	47%
<b>11</b> (30-39 year olds)	65%	28%	18%
<b>12</b> (18-29 year olds)	51%	22%	11%
Total 10 – 12	65%	37%	24%
All cohorts	80%	76%	61%

<sup>\*</sup> Data is from national reporting against an estimated denominator, with actual first dose vaccinations exceeding the denominator.

#### LARGE VACCINATION CENTRES

The vaccination programme has been a partnership across the whole NHS system in Kent and Medway. Kent Community Health NHS Foundation Trust (KCHFT) have run the large vaccination centres and roving services for hard to reach groups.

The five large vaccination centres have played an important part in phases 1 and 2. They have delivered approximately 20% of the vaccines given across all services in Kent and Medway.

With phase 2 nearing completion KCHFT has decided that they must now focus on restoring their core services and supporting the recovery programme of the wider NHS. We are working with them to plan their exit from the vaccination programme whilst making sure there is sufficient capacity to complete phase 2 and developing a resilient model for phase 3. As we near the completion of the vaccine programme and leisure venues are returning to normal the Angle leisure centre and Woodville Halls theatre are being handed back so the buildings can open to the public again.

We are confident that there continues to be a range of vaccination services open to local people and sufficient capacity to complete phase 2 of the vaccination programme. This is helped by increased access to appointments through the National Booking Service (NBS). There are now 13 pharmacies and 14 GP-led vaccination services across Kent and Medway taking bookings through the NBS; meaning appointments are open to anyone, not just patients registered with particular GP surgeries.

### Site by site summary of large sites

#### • Folca - Folkestone

The Folca site will remain open and run by KCHFT until the end of the adult vaccination programme (phase 2). First dose appointments are expected to end in-line with meeting the national target of 19 July.

Five pharmacies are also running in the East Kent area including Deal, New Romney and Ashford. 13 GP-led services are running in East Kent with GP-led services on the NBS offering appointments in Dover, Canterbury, Ashford, Ramsgate, Folkestone and Faversham.

# Pentagon – Chatham

The Pentagon will remain open and run by KCHFT until the end of the adult vaccination programme (phase 2). First dose appointments are expected to end in-line with meeting the national target of 19 July.

Three pharmacies are also running in the Medway area and all of the GP-led services continue to offer vaccination to all cohorts. GP-led clinics run from Rochester and Lordswood Healthy Living Centres are in the process of moving onto the national booking service for bookings.

# • Saga – Thanet

The PCN service which has been running from the Saga centre has ow taken over from KCHFT. The PCN will continue to run the centre at the total capacity that both KCHFT and the PCNs have been delivering to date.

The other PCN service based in Ramsgate and a pharmacy in Cliftonville, Margate also now take bookings through the NBS.

### • Woodville Halls - Gravesend

Woodville Halls will remain open until the end of August. The Theatre is opening for performances in September. First dose appointments are expected to end in-line with meeting the national target of 19 July.

There are five PCN vaccination services still operating in the Dartford, Gravesham and Swanley area. Services now bookable through the NBS are running at the Swanley council building; Dartford football club, the Orchard practice, and a pharmacy services at Bluewater.

# • Angel Centre - Tonbridge

The lease to use the Angle Centre expires at the end of July 2021. KCHFT is now focussed on completing second dose vaccinations for those previously vaccinated at the centre and completing the close down process to hand the site back to the landlord in the first week of August.

With four pharmacy-run services and three GP-run services in West Kent now available on the NBS there are vaccination services open for all residents to book with in the following towns:

- Tunbridge Wells
- Sevenoaks
- East Peckham
- Maidstone
- Leybourne
- Ticehurst (noted not Kent, but continues to be available)

#### MORE INFORMATION ON THE VACCINE PROGRAMME

KMCCG publish a regular update on vaccine progress where you can see the latest figures https://www.kentandmedwayccg.nhs.uk/your-health/coronavirus/covid19vaccine/covid-19-vaccine-updates

The full data sets published every Thursday by NHS England include details at CCG/Integrated Care System level (Kent and Medway) as well as council level information.

https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-vaccinations/

# Covid-19 cases and deaths

Community infection rates are rising, but at this point the increase in hospitalisation has been modest. As of 8 July there were 25 Covid-19 patients in hospitals across Kent and Medway; 2 of those in critical care beds.

Deaths from Covid-19 remain low, although there are unfortunately still a small number of deaths on a weekly basis. The position remains that there are regularly days when no deaths are recorded in any Kent and Medway hospitals or community sites.

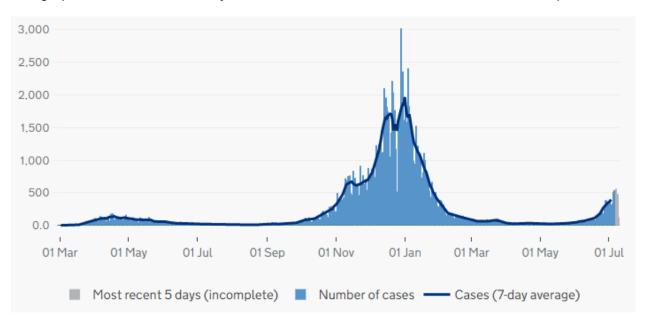
As of 11 July in Kent there have been:

- 3,994 deaths within 28 days of a positive test
- 4,583 deaths with Covid-19 recorded on the death certificate

In Medway there have been:

- 752 deaths within 28 days of a positive test
- 799 deaths with Covid-19 recorded on the death certificate

The graph below shows the daily confirmed cases in Kent over the duration of the pandemic:



Source: 11 July 2021 https://coronavirus.data.gov.uk/details/cases?areaType=utla&areaName=Kent

# **Hospital elective care treatments**

The NHS across Kent and Medway continues to work hard to reschedule routine treatments and good progress is being made. Rescheduling treatment will prioritise those with the highest clinical need and those who have been waiting longest.

The number of people waiting over 52 weeks is reducing on a weekly basis. Latest published waiting list figures were published on 9 July, providing figures for May 2021, and show the number of people waiting over 52 weeks fell from 7,963 in April to 6,815 in May.

	April 2021	May 2021
Total incomplete pathways	143,974	150,752
Total within 18 weeks	92,867	103,028
% within 18 weeks	64.5%	68.3%
Average waiting time in weeks	10.7	10.5
Total 52 plus weeks	7,963	6,815

Source: National Consultant-led Referral to Treatment Waiting Times Data 2021-22, 8 July 2021 <a href="https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/rtt-data-2021-22/">https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/rtt-data-2021-22/</a>

In May 2021, activity across all local NHS hospitals, NHS providers outside Kent and Medway and the independent sector included 24,488 inpatient treatments and 240,991 outpatient appointments.

# **General Practice pressure**

The CCG continues to work with general practice, the Local Medical Committee and wider NHS partners to address pressures caused by the backlog of patients who have not been seen during the pandemic. Whilst the number of people on hospital waiting lists is relatively easy to quantify, there is also a significant backlog in demand for general practice appointments; which is harder to quantify.

The key drivers of pressure on general practice include:

- 1. Suboptimal use of primary care appointments
- 2. Backlog of GP work post-covid
- 3. General practice infrastructure challenges
- 4. Lack of sufficient and timely access to diagnostics
- 5. Workforce constraints

Plans are being developed to address all of these areas with a range of actions across the short, medium and long term. Some of the short-term improvement plans are given below as examples and a new primary care strategy is being prepared to address medium to long term issues. A more detailed report of the development of strategy will be brought to a future HOSC meeting.

- Hospital waiting list queries people on hospital waiting lists have traditionally had to contact
  their general practice for updates, which then needs the practice to follow up with the hospital. We
  are working with all hospitals to implement direct enquiries services.
- Medication on discharge people leaving hospital often require on-going medication but are
  routinely prescribed just 2-3 days of supply by the hospital, meaning people have to quickly contact
  their practice to arrange further supplies. We are reviewing options to increase the amount of
  medication prescribed on discharge.

- Internal hospital referrals If one hospital service sees a patient and identifies a need for another
  appointment with another services the patient is normally directed back to general practice to make
  the new referral. We are reviewing options to enable internal referral directly from one hospital
  service to another.
- **Promoting alternative services** 111, pharmacy and urgent treatment centres can provide the advice and care that some patients need. We continue to work with practices and the public to promote suitable alternatives to contacting general practice.
- **Telephone system capabilities** some practices have inadequate telephone systems for the level of demand now being experienced. We are working with NHS England to pilot new systems and develop a national standard for primary care telephone systems.
- Remote monitoring solutions during the pandemic we developed a successful remote monitoring service for blood oxygen levels. A similar model is now being developed for blood pressure monitoring.
- **Increased capacity for blood testing** routine blood tests are a significant activity across general practice. We are developing plans to increase capacity both for collecting samples and analysing results.

Pressure on primary care is also related to workforce and infrastructure challenges, which existed before the pandemic, need longer-term solutions. A new primary care strategy will review work that has been ongoing in these areas and identify additional options for improvement.

# Conclusion

All parts of the NHS continue to work extremely hard to meet the needs of patients which have built up through the period of lockdown restrictions. With Covid-19 infections rising we maintain our attention on supporting those needing hospital care and planning for potential increased pressure on hospitals. With the vaccination programme progressing well it is hoped that the majority of new infections will lead to less serious illness with fewer people needing hospital care.

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