



Report of: Director of Public Health

Health and Wellbeing Board	Date:10th March 2021	Ward(s):
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Delete as appropriate	Exempt	Non-exempt
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SUBJECT: COVID19 update

1. Synopsis

- 1.1 This report and accompanying slides updates on the current position in terms of infections, testing and deaths related to COVID19 in Islington.

2. Recommendations

- 2.1 To note the situation on COVID19 cases, testing and mortality in the borough of Islington.

3. Background

- 3.1 The attached report provides the HWBB with an overview of COVID19 cases, testing and mortality for the latest complete week of data compared to the previous week. Please include a brief explanation of the issue at hand. Any acronyms or technical terms should be explained.
- 3.2 Islington came out of the second lockdown in early December with an average of around 250 confirmed cases of COVID-19 per week, and a positivity rate on testing of 5-6%. This was in stark contrast to the summer after Islington came out of the first lockdown, when on average there were around 10-15 confirmed cases per week and a typical positivity rate on testing of around 0.5% in the borough.

- 3.3 Confirmed infections began to increase again immediately the second lockdown ended, which we now know was in part linked to a new, more infectious variant of COVID-19 which was becoming dominant across London at that time. Confirmed infections rose rapidly through December, reaching a range of c. 1800 – 2000 per week and a positivity rate on testing of 25% or higher over the Christmas week and the first week of the New Year.

Since the second week of January we have started to see a decline in COVID-19 cases in Islington and the rate of confirmed cases continues to fall. The latest 7 day period of complete data, covering the period 8th of February to 14th of February, shows Islington's case rate as 64 per 100,000 population, equating to approximately 156 cases. This is a decrease from a rate of 119 in the case rate from the previous week (1st of February to 7th February). The test positivity rate has declined to 4.1% compared to 7.3% in the preceding 7 days.

The cumulative number of deaths since March 2020 had reached 319 by 5th of February 2021. This is a crude mortality rate of 131.6 deaths per 100, 000, lower than the England COVID-19 death rate of 203.8 per 100,000 and London 191.4 per 100,000. Since the beginning of 2021 and up to the 5th February there has been 129 deaths in Islington, 37 of these occurring in the last fortnight.

4. Implications

4.1 Financial Implications:

There are no direct financial implications arising from the report.

4.2 Legal Implications:

Section 13(2) Public Health (Control of Diseases) Act 1984 (Part II Control of Disease), the Secretary of State is permitted to make regulations in relation to treatment of persons affected with any epidemic, endemic or infectious disease and for preventing the spread of such diseases. Health Protection (Notification) (Amendment) (Coronavirus) Regulations 2020 places a duty on operators of diagnostic laboratories to notify Public Health England of SARS-Cov-2 found in samples. Islington Council is an UTLA. UTLA's ('Upper Tier Local Authorities') are leading local outbreak planning with the support of NHS Test and Trace. PHE and other government departments with a view to preventing and containing outbreaks in individual local settings and are obliged to comply with DoH guidance – 'Covid-19 contain framework: a guide for local decision-makers' which provides details and responsibilities for ongoing monitoring both locally and nationally in order to help prevent, identify and contain outbreaks.

4.3 Environmental Implications and contribution to achieving a net zero carbon Islington by 2030:

There are no environmental implications related to this update.

4.4 Resident Impact Assessment:

Please retain this standard paragraph and add relevant text about specific impacts and mitigation below:

The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

5. Conclusion and reasons for recommendations

5.1 The COVID19 case rate is decreasing sharply in Islington. There are some signs now that the second peak of mortality from COVID19 is declining.

Appendices

- Please list all appendices and specify if any are exempt.
- If an RIA has been completed it must accompany the report as an appendix.

Background papers:

- (seek advice from Democratic Services if you are uncertain of the regulations regarding background papers. If a paper used in the development of the report has been published elsewhere there is no need to include it here.)

Signed by:



Jonathan O'Sullivan,
Director of Public Health

Date: 2 March 2021

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