

## **ANEURIN BEVAN UNIVERSITY HEALTH BOARD**

### **BRIEFING FOR MPs**

**9<sup>th</sup> April 2021 - COVID-19**

Dear Colleague

Please find below a summary of the key issues arising from the briefing that took place on Friday, 9<sup>th</sup> April 2021.

#### **Situation within communities**

Incidence for the Health Board area has decreased, the last 7 days is currently reported as 13.0 per 100,000 population, compared with 26.3 for the previous week. The rate per 100,000 population for each Borough is:

- Blaenau Gwent 17.2 per 100,000. 1.7% +ve.
- Torfaen 14.9 per 100,000. 1.7% +ve.
- Newport 14.2 per 100,000. 1.5% +ve.
- Monmouthshire 10.6 per 100,000. 1.1% +ve.
- Caerphilly 10.5 per 100,000. 1.2% +ve.

The overall positivity rate for the Health Board area is 1.4% with a target of achieving below 5%.

#### **Situation within our hospitals**

There are currently 17 patients in our Intensive Care Unit at the Grange University Hospital. 2 of these patients are COVID-19 positive and 15 are negative for COVID-19.

There are currently 1,526 patients in our in-patient beds; 7 have tested positive for COVID-19; 37 patients are awaiting results; 21 patients are recovering from COVID-19 and 1,461 patients are being treated for something other than COVID-19.

We discussed the pressure on the Grange University Hospital over the past few weeks, and the exceptionally high demand for cardiology services, which has resulted in opening of additional cardiology surge capacity.

We considered various factors that will be driving the demand, including COVID harm with patients presenting late with symptoms and physical over exertion by some who may have been sedentary for a long period. It is important that messages such as 'individuals should start by taking

moderate and regular exercise and building their fitness in gradual stages over a period of weeks' are shared widely with the public.

### **Situation within care homes**

12 care homes in Gwent have on-going incidences related to COVID-19:

- 1 in Blaenau Gwent
- 7 in Caerphilly
- 0 in Monmouthshire
- 1 in Newport
- 3 in Torfaen

Of those positive cases, 35 are staff and 25 are residents.

As at close of play on Wednesday 7<sup>th</sup> April, the mobile unit team successfully offered dose 2 vaccinations in 93 out of the 97 older adult care homes (that are included in JCVI Priority group 1).

### **Update on the mass vaccination programme**

Up to 7 April, 285,596 first doses and 93,766 second doses of Covid-19 vaccinations have been given across the Health Board, through a blend of mass vaccination centres, GP and mobile team delivery. This represents the Health Board being a third of the way through the mass vaccination programme rollout.

95.4% over 80s, 96.3% of people aged 75-79 years and 96.2% of people aged 70-74 years have been vaccinated. In terms of those who have had their second vaccine the numbers are, 35% over 80s, 70% between ages 75 – 75 years, 46% between 70-74 years.

93% of those in the shielding group and 85% of those in the at risk group have already received a vaccine. For those over 50, 9 out of 10 (92%) have received their first vaccine.

The following centres are operating next week (12<sup>th</sup>-18<sup>th</sup> April) with attendance by appointment only:

- Cwmbran, Newbridge and Newport – Monday to Sunday
- Ebbw Vale – Wednesday to Sunday

We referred to a Public Health Wales press release which has helpful numbers to illustrate the risk of COVID itself versus the risk from the vaccine and this is attached to the summary. More information can be found on the Public Health Wales website on the following link <https://phw.nhs.wales/news/>

Modelling is being undertaken to ensure that the appropriate age groups are invited as related to the vaccine supplies expected. This will need to take account of the new guidance issued regarding AstraZeneca vaccines and those above and below age 30.

## **Restarting Services**

I provided you with an update on restarting services, and building on what was contained in previous letters, I can also confirm the following details:

- Orthopaedics has started in the Royal Gwent Hospital. 15 cases done so far this week and positive feedback has been received.
- The first spinal orthopaedic list undertaken today at St Woolos with 8 patients receiving treatment. The plan thereafter will be circa 16 patients every other week.
- This week we commenced "Developing Excellence in Day Surgery" work starting at Nevill Hall Hospital.
- The 2<sup>nd</sup> audiology locum has started and will focus on clearing the backlog of patients waiting to under 14 weeks by end Q1.
- As described earlier, it has been a challenging week at Grange University Hospital, but we have managed to continue the planned elective work.

## **Contacting the Grange University Hospital**

We discussed concerns regarding family members unable to make contact with some patients at the hospital. We recognise that this can be a frustrating and worrying time for both the patient and their family and to help overcome these concerns, Patient Liaison Officers have been put in place to act as the link between patients and their families. This service is in place 7 days a week, between 9am-5pm and can be contacted on 01633 493626.

During our meeting we also discussed the improvement to connectivity issues and access to Wi-Fi some of which are a feature of the early opening of the hospital. There has been an extensive roll-out of equipment to support communication which will soon include a digital guidebook with step-by-step guides, a list of the equipment that is available on each ward and details of how to get help. All of the digital initiatives to enable regular communication between patients and family, will be supported by Virtual Champions, the Person-Centred Care Team and Frind i Mi volunteers.

I trust that this briefing covers the key issues addressed, and that if there are further enquiries, that you will not hesitate to contact me.

**Judith Paget**  
**Prif Weithredwr/Chief Executive**

## **PRESS RELEASE**

**09 April 2021**

### **Public Health Wales statement on safety concerns with AstraZeneca COVID-19 vaccine**

Public Health Wales supports the expert scientific advice of UK expert groups that the benefits of vaccination with all COVID-19 vaccines in use continue to outweigh the risks of COVID-19. COVID-19 has caused over 120,000 deaths in the UK, with an average of 30 deaths a day still being reported. The vaccination programme has already saved over 6,000 lives.

Following reports of an extremely rare and specific blood clot after vaccination with the AstraZeneca COVID-19 vaccine, the Medicines and Healthcare Regulatory Agency (MHRA) and the Joint Committee on Vaccination and Immunisation (JCVI) confirmed on 7 April 2021 that this type of blood clot with low platelets (sticky cells) are a possible side effect of the vaccine. However, they continue to advise that the benefits of vaccination with the AstraZeneca COVID-19 vaccine continue to outweigh the risks of COVID-19 for the vast majority of adults.

Public Health Wales is aware of one confirmed case of this extremely rare type of clot in Wales after receiving AstraZeneca COVID-19 vaccine among over 1 million people who have received that vaccine.

The expert scientific advice from the JCVI is that risk benefit remains strongly in favour of vaccination with the AstraZeneca vaccine for those aged 30 and over, and those aged under 30 who have underlying health conditions which puts them at higher risk of severe outcomes from COVID-19 infection.

However, JCVI advise that adults aged 18-29 years old who do not have underlying health conditions should be offered an alternative vaccine balancing risks and benefits. Health Boards in Wales will be offering alternative vaccines to this group, while continuing to offer all available vaccines at all other ages.

Those who have received a first dose of the AstraZeneca vaccine irrespective of age, should continue to receive a second dose. To date there have been no confirmed cases of the extremely rare and specific blood clots after receiving the second dose of the vaccine.

Dr Richard Roberts, Head of the Vaccine Preventable Diseases Programme at Public Health Wales said:

“The risk of these extremely rare blood clots is extremely low and the risk benefit in comparison to contracting COVID-19 disease is still very much in favour of vaccination.

“For example, the risk of people in their 40s dying if they catch COVID-19 is 1,000 per million, so if 1 million in their 40s caught COVID-19 then 1,000 would die, 10,000 would be hospitalised and 160,000 would get ‘long COVID’. If all 1 million were vaccinated with two doses of AstraZeneca vaccine it would prevent over 900 deaths, 9,000 hospitalisations and 145,000 cases of long COVID, with the possibility there would be four cases of rare blood clot events and one additional death.

“No medicine or vaccine we receive is without risk and we accept these very low risks because of the benefits we receive. For example, the risk of blood clots in women who take the Oral Contraceptive Pill is higher than those not taking the pill, and this is accepted because of the benefits.

“Common side effects after vaccination are normal and expected. For all approved vaccines in the UK, these side effects can include a sore arm, feeling tired, headache, mild aches or flu like symptoms, and a mild fever that normally last up to two or three days after vaccination.

“If an individual experiences the following symptoms starting four days to four weeks after the vaccine they should seek medical care promptly:

- New severe headache which does not respond to simple painkillers
- An unusual headache which seems worse when lying down or bending over
- Headache accompanied by blurred vision, nausea and vomiting, weakness, drowsiness or seizures
- Unexplained pin-prick rash or bruising away from injection site
- Shortness of breath, chest pain, leg swelling or persistent abdominal pain.

“Public safety remains at the forefront of our concerns and MHRA will continue to monitor vaccine safety working closely with JCVI and this issue will be kept under review.

“Vaccination remains the best way to protect yourself against COVID-19 disease.”

**END**

**CONTACT: For media enquiries please contact the Public Health Wales Communications team on 0300 003 0277 (24 hours)**

Editor’s notes

The Public Health Wales COVID-19 vaccination microsite will be updated in the coming days to reflect the amended guidance.

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Public Health Wales is the national public health institute for Wales providing professionally independent public health advice and services to protect and improve the health and wellbeing of the population of Wales.

Public Health Wales has four statutory functions:

- To provide and manage a range of public health, health protection, healthcare improvement, health advisory, child protection and microbiological laboratory services and services relating to the surveillance, prevention and control of communicable diseases;
- To develop and maintain arrangements for making information about matters related to the protection and improvement of health in Wales available to the public; to undertake and commission research into such matters and to contribute to the provision and development of training in such matters;
- To undertake the systematic collection, analysis and dissemination of information about the health of the people of Wales in particular including cancer incidence, mortality and survival; and prevalence of congenital anomalies; and
- To provide, manage, monitor, evaluate and conduct research into screening of health conditions and screening of health related matters.

More information on Public Health Wales is available at [www.publichealthwales.org](http://www.publichealthwales.org)



## DATGANIAD I'R WASG

**09 Ebrill 2021**

### **Datganiad Iechyd Cyhoeddus Cymru ar bryderon diogelwch gyda brechlyn COVID-19 AstraZeneca**

Mae Iechyd Cyhoeddus Cymru yn cefnogi cyngor gwyddonol arbenigol grwpiau arbenigol y DU bod manteision brechu gyda'r holl frechlynnau COVID-19 sy'n cael eu defnyddio yn parhau i fod yn drech na risgiau COVID-19. Mae COVID-19 wedi achosi dros 120,000 o farwolaethau yn y DU, gyda chyfartaledd o 30 o farwolaethau'r dydd yn dal i gael eu hadrodd. Mae'r rhaglen frechu eisoes wedi achub dros 6,000 o fywydau.

Yn dilyn adroddiadau am glot gwaed prin iawn a phenodol ar ôl brechu gyda brechlyn COVID-19 AstraZeneca, mae'r Asiantaeth Rheoleiddio Meddyginiaethau a Chynhyrchion Gofal Iechyd (MHRA) a'r Cyd-bwyllgor ar Imiwneiddio a Brechu (JCVI) wedi cadarnhau ar 7 Ebrill 2021 bod y math hwn o glot gwaed gyda

phlatennau (celloedd gludiog) isel yn un o sgil-ffeithiau posibl y brechlyn. Fodd bynnag, maent yn parhau i gynghori bod manteision brechu gyda brechlyn COVID-19 AstraZeneca yn parhau i fod yn drech na risgiau COVID-19 i'r mwyafrif helaeth o oedolion.

Mae Iechyd Cyhoeddus Cymru yn ymwybodol o un achos a gadarnhawyd o'r math prin iawn hwn o glot gwaed yng Nghymru ar ôl cael brechlyn COVID-19 AstraZeneca ymhlith dros 1 filiwn o bobl sydd wedi cael y brechlyn hwnnw.

Y cyngor gwyddonol arbenigol gan y JCVI yw bod y risgiau a'r manteision yn parhau'n gryf o blaid brechu gyda brechlyn AstraZeneca ar gyfer y rhai 30 oed a throsodd, a'r rhai o dan 30 oed sydd â chyflyrau iechyd sylfaenol sy'n eu rhoi mewn mwy o risg o ganlyniadau difrifol o haint COVID-19.

Fodd bynnag, mae'r JCVI yn cynghori y dylid cynnig brechlyn arall i oedolion 18-29 oed nad oes ganddynt gyflyrau iechyd sylfaenol, gan gydbwysu'r risgiau a'r manteision. Bydd byrddau iechyd yng Nghymru yn cynnig brechlynnau eraill i'r grŵp hwn, tra'n parhau i gynnig yr holl frechlynnau sydd ar gael i bob oedran arall.

Dylai'r rhai sydd wedi cael dos cyntaf o frechlyn AstraZeneca beth bynnag fo'u hoedran, barhau i gael ail ddos. Hyd yma ni chadarnhawyd unrhyw achosion o'r clotiau gwaed prin iawn a phenodol ar ôl cael yr ail ddos o'r brechlyn.

Dywedodd Dr Richard Roberts, Pennaeth y Rhaglen Frechu yn erbyn Clefydau Ataliadwy yn Iechyd Cyhoeddus Cymru:

"Mae'r risg o'r clotiau gwaed prin iawn hyn yn isel iawn ac mae'r risgiau a'r manteision o gymharu â chael clefyd COVID-19 yn dal i fod o blaid brechu.

"Er enghraifft, mae'r risg y bydd pobl yn eu 40au yn marw os byddant yn dal COVID-19 yn 1,000 y filiwn, felly os bydd 1 filiwn yn eu 40au yn dal COVID-19 yna byddai 1,000 yn marw, byddai 10,000 yn gorfod mynd i'r ysbyty a byddai 160,000 yn cael 'COVID hir'. Pe bai'r 1 filiwn yn cael eu brechu â dau ddos o frechlyn AstraZeneca byddai'n atal dros 900 o farwolaethau, 9,000 o achosion o orfod mynd i'r ysbyty a 145,000 o achosion o COVID hir, gyda'r posibilrwydd y byddai pedwar achos o glotiau gwaed prin ac un farwolaeth ychwanegol.

"Nid oes unrhyw feddyginiaeth na brechlyn a gawn heb risg ac rydym yn derbyn y risgiau isel iawn hyn oherwydd y manteision a gawn. Er enghraifft, mae'r risg o glotiau gwaed mewn menywod sy'n cymryd y Bilsen Atal Cenhedlu Geneuol yn uwch na'r rhai nad ydynt yn cymryd y bilsen, a derbynnir hyn oherwydd y manteision.

"Mae sgil-ffeithiau cyffredin ar ôl brechu yn normal ac yn ddisgwyliedig. Ar gyfer yr holl frechlynnau a gymeradwywyd yn y DU, gall y sgil-ffeithiau hyn gynnwys braich ddolurus, teimlo'n flinedig, pen tost/cur pen, poenau ysgafn neu symptomau tebyg i'r fflw, a thwymyn ysgafn sydd fel arfer yn para hyd at ddau neu dri diwrnod ar ôl brechu.

"Os bydd unigolyn yn profi'r symptomau canlynol sy'n dechrau pedwar diwrnod i bedwar wythnosau ar ôl y brechlyn dylent geisio gofal meddygol yn brydlon:

- Pen tost/cur pen difrifol newydd nad yw'n ymateb i boenladdwyr syml

- Pen tost/cur pen anarferol sy'n ymddangos yn waeth wrth orwedd i lawr neu blygu drosodd
- Pen tost/cur pen ar y cyd â golwg aneglur, cyfog a chwydu, gwendid, teimlo'n gysglyd neu ffitiau
- Brech neu gleisio pigiad pin heb esboniad i ffwrdd o safle'r pigiad
- Diffyg anadl, poen yn y frest, chwyddo yn y coesau neu boen cyson yn y stumog.

"Mae diogelwch y cyhoedd yn parhau i fod yn flaenllaw o ran ein pryderon a bydd yr MHRA yn parhau i fonitro diogelwch brechlynnau gan weithio'n agos gyda'r JCVI a bydd y mater hwn yn cael ei adolygu'n barhaus.

"Brechu yw'r ffordd orau o hyd i amddiffyn eich hun rhag clefyd COVID-19."

## **DIWEDD**

### **CYSWLLT: Ar gyfer ymholiadau'r wasg ffoniwch dîm Cyfathrebu Iechyd Cyhoeddus Cymru ar 0300 003 0277 (24 awr)**

#### Nodiadau'r golygydd

Bydd microwefan brechu COVID-19 Iechyd Cyhoeddus Cymru yn cael ei diweddarau yn ystod y dyddiau nesaf i adlewyrchu'r canllawiau diwygiedig.

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Iechyd Cyhoeddus Cymru yw sefydliad iechyd cyhoeddus cenedlaethol Cymru sy'n darparu cyngor a gwasanaethau iechyd y cyhoedd annibynnol i ddiogelu a gwella iechyd a llesiant poblogaeth Cymru.

Mae gan Iechyd Cyhoeddus Cymru bedair swyddogaeth statudol:

- Darparu a rheoli ystod o wasanaethau iechyd cyhoeddus, diogelu iechyd, gwella gofal iechyd, cynghori ar iechyd, amddiffyn plant a labordai microbiolegol a gwasanaethau'n ymwneud â gwylidwriaeth, atal a rheoli clefydau trosglwyddadwy;
- Datblygu a chynnal trefniadau ar gyfer darparu gwybodaeth am faterion yn ymwneud â diogelu a gwella iechyd yng Nghymru ar gyfer y cyhoedd; cynnal a chomisiynu ymchwil i faterion o'r fath a chyfrannu at ddarparu a datblygu hyfforddiant mewn materion o'r fath;
- Casglu, dadansoddi a lledaenu gwybodaeth yn systematig am iechyd pobl Cymru yn arbennig yn cynnwys achosion o ganser, cyfraddau marwolaeth a goroesi; a nifer yr achosion o anomaleddau cynhenid; a
- Darparu, rheoli, monitro, gwerthuso a chynnal ymchwil i sgrinio cyflyrau iechyd a sgrinio materion yn ymwneud ag iechyd.

Ceir rhagor o wybodaeth am Iechyd Cyhoeddus Cymru yn [www.iechydcyhoedduscymru.org](http://www.iechydcyhoedduscymru.org)