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General advice and overview, CMO and CSA

4. Insufficient time has elapsed and insufficient additional data has accumulated to allow any change to the general advice provided on 23 July. It should be possible to provide an update on which curve hospital admissions / occupancy are following for 29 July, at which point it will also be possible to comment on whether rate of increase in case numbers has slowed. The risk of relaxations needs to be considered in the context of COVID prevalence, which is currently close to an all-time high in terms of case numbers.

5. It should be noted that the totality of hospital pressures has continued to rise, and that three Trusts have had to cancel some elective surgery this week. Currently there are 225 adult inpatients, including 20 in critical care and 5 in I&S Numbers have risen significantly over the weekend. With increased community transmission there has also been an increase in outbreaks in care homes. It therefore remains the case that from perspective of COVID transmission it would be best to delay any further relaxations until it is clear that the peak of the current wave has been passed.

6. We have been asked to comment on the use of face coverings in places of worship, in addition to the relaxations considered in Annex A. Places of worship are settings where there is a potential for large numbers of individuals from mixed age groups to gather together indoors, including elderly and vulnerable with unvaccinated younger people. Ventilation is likely to be variable, and singing as part of collective worship will increase risk. Under these circumstances, use of face coverings is strongly advised. If a decision is made to move to guidance, then use of face coverings when moving around or singing is strongly recommended. The degree of risk will depend on the specific setting and the extent to which congregations choose to continue to wear coverings on a voluntary basis. There have been a number of significant COVID outbreaks associated with places of worship earlier in the epidemic.

7. As indicated previously, consideration needs to be given to the cumulative impact of any relaxations.

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