

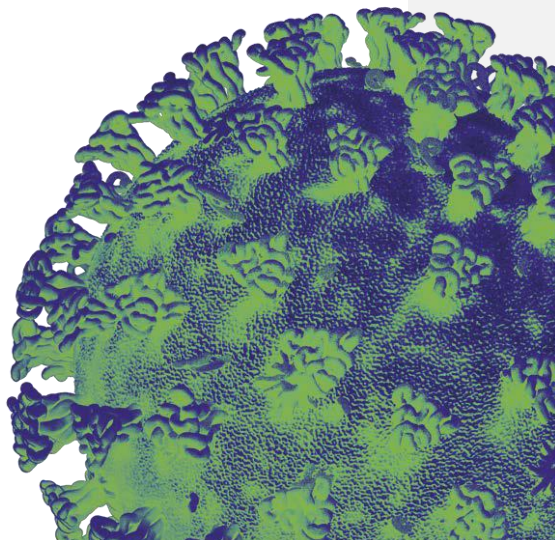
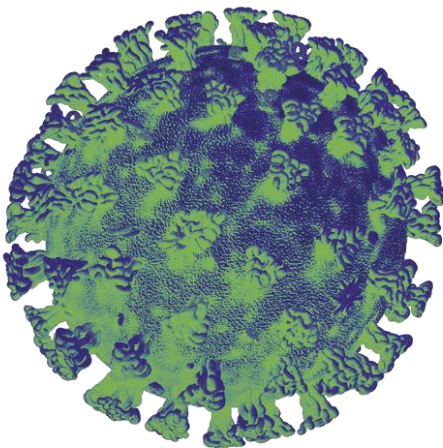
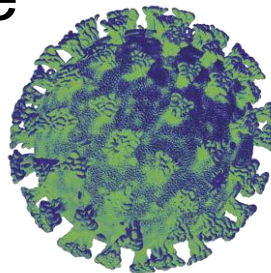


Llywodraeth Cymru
Welsh Government

Science Evidence Advice (SEA)

Summary of Advice

27 January 2023



Top Line Summary

PHW reports decreases in cases admitted to hospital with Influenza, RSV and COVID-19. However, both Influenza and RSV in children remain in circulation.

Wastewater surveillance reports that COVID-19 levels remained stable and ONS COVID-19 infection survey positivity suggest that COVID-19 levels in Wales are decreasing.

COVID-19 hospital admissions, bed occupancy and confirmed COVID-19 patients in hospitals have been decreasing.

The latest projections suggest the most recent COVID-19 wave has peaked in admissions and occupancy. Bed occupancy and ICU occupancy are expected to have reached a peak at maximum levels observed earlier on in the year in July and October before decreasing again throughout January.

Numbers of invasive Group A streptococcal (Strep A) infections have decreased but remain high in comparison to the previous years. There are no additional cases of iGAS in those aged under 15 years since the last report.

Please note that there may still be some residual impact from the end-of-year holidays on the quality of data reported in recent weeks, which could affect the accuracy of this assessment.

Top Line Summary	16
1. Wales COVID-19 Situation Update.....	17
1.1. ONS Coronavirus Infection Survey	18
1.2. Wastewater surveillance.....	20
1.3. PHW Cases (PCR & LFD Testing).....	21
1.4. Deaths	22
1.5. NHS.....	24
1.6. Vaccines	24
1.7. Care homes	26
1.8. Schools	27
1.9. Long Covid.....	27
1.10. International overview – World Health Organisation update	28
1.11. European Centre for Disease Prevention and Control (ECDC).....	17
1.12. Variant of Concern update.....	18
2. COVID-19 Medium-Term Projections	20
2.1. Swansea University MTPs, data as at 13 January	21
2.2. Winter Modelling compared to actuals	22
3. Influenza Situation Update	24
3.1. Weekly Influenza and Acute Respiratory Infection Report – PHW.....	24
3.2. UKHSA Weekly national influenza surveillance report	26
4. Respiratory Syncytial Virus (RSV) and Invasive Group A streptococcal Situation.....	27
4.1. Weekly Influenza and Acute Respiratory Infection Report – PHW.....	27
4.2. Incidence data for Strep A and Scarlet Fever.....	28

1. Wales COVID-19 Situation Update

- PHW report that COVID-19 infections have decreased compared to the previous weeks in Wales.
- Week commencing 23 January 2023, Admissions to critical care wards based on the weekly number of confirmed cases have also decreased compared to the previous week. Wastewater surveillance reports that COVID-19 levels remained stable. Confirmed PCR cases continue to remain stable, and the adjusted case episode rates (PCR +LFD episodes) have stabilised.
- ONS COVID-19 infection survey positivity, week commencing 9 January 2023, suggest that COVID-19 levels in Wales are decreasing.
- COVID-19 hospital admissions, bed occupancy and confirmed COVID-19 patients in hospitals have been decreasing.
- Deaths related to COVID-19 are oscillating around the 5 year average.
- The number of cases associated with XBB.1.5 is still low and there is no indication of increased severity at this time. CH.1.1 continues to grow in Wales but there is no indication of increased severity at this time. Despite the emergence of these variants the overall pressure on the NHS from COVID-19 is decreasing.
- Please note that there may still be some residual impact from the end-of-year holidays on the quality of data reported in recent weeks, which could affect the accuracy of this assessment.

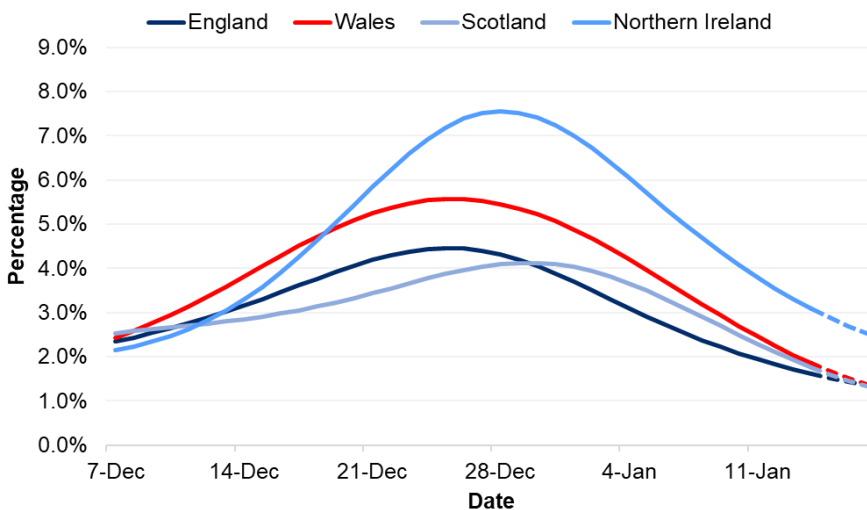
1.1. ONS Coronavirus Infection Survey

The [ONS Coronavirus Infection Survey](#)¹ reports that at the midpoint of the most recent week (11 to 17 January 2023), the positivity rate decreased in all nations of the UK.

In Wales, the estimated number of people testing positive for COVID-19 was 57,100 people (95% credible interval: 45,600 to 69,700), equating to 1.85% of the population, or around 1 in 55 people.

The estimated percentages of the community population with COVID-19 ranged from 1.62% in England to 3.08% in Northern Ireland.

Figure 1 - Positivity rates (%) across UK countries since 7 December 2022



Source: Coronavirus (COVID-19) Infection Survey, ONS, 25/01/23

In England, the estimated number of people testing positive for COVID-19 was 906,300 people (95% credible interval: 853,200 to 963,200), equating to 1.62% of the population, or around 1 in 60 people.

In Scotland, the estimated number of people testing positive for COVID-19 was 92,400 people (95% credible interval: 77,200 to 109,100), equating to 1.76% of the population, or around 1 in 55 people.

In Northern Ireland, the estimated number of people testing positive for COVID-19 was 56,500 people (95% credible interval: 45,800 to 68,500), equating to 3.08% of the population, or around 1 in 30 people.

¹

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/coronaviruscovid19infectionsurveyypilot/previousReleases>

1.2. Wastewater surveillance

[Wastewater surveillance](#)² suggests the overall SARS-CoV-2 viral load has remained level across the country. However, the signal increased at Carmarthen Bay and the Gower, Cleddau and Pembrokeshire Coastal Rivers, Meirionnydd, Tawe to Cadoxton, Wye, Ynys Môn and Hafren Dyfrdwy, and decreased at Clwyd, Conwy and Teifi and North Ceredigion.

Figure 2 - National (blue lines) and Regions (grey lines) wastewater signal for COVID-19 in Wales.

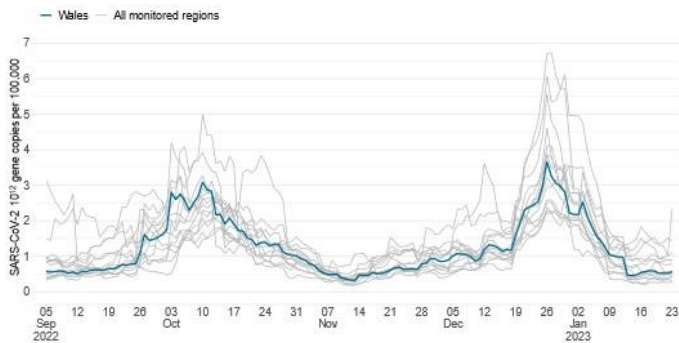
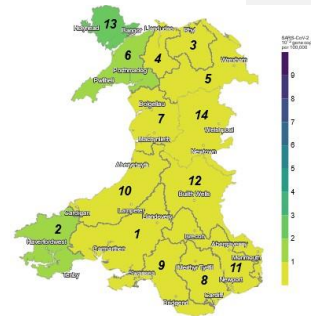


Figure 3 - National Heat Map showing Regional Mean Wastewater Signal



1.3. PHW Cases (PCR & LFD Testing)

As of 25 January 2023, [PHW reports](#)³ that COVID-19 infections have decreased compared to the previous week in Wales.

The all-Wales incidence as estimated using testing data available to PHW suggests that confirmed PCR cases continue to remain stable.

The adjusted case episode rates (PCR +LFD episodes) have stabilised.

LFT positivity has decreased from 16% in the previous week to 13% in week 3.

The incidence rate is highest in the 40-59 age groups

² [Wastewater monitoring reports: coronavirus | GOV.WALES](#)

³ https://public.tableau.com/app/profile/public.health.wales.health.protection/viz/PHWVirologyDashboard-Reportsandnotes_16535581718100/Notesondatainterpretationandreports

1.4. Deaths

ONS published statistics on 24 January on [provisional weekly deaths](#)⁴, including deaths involving COVID-19, for the week ending 13 January 2023.

70 deaths involving COVID-19 were registered in the latest week. This was 5.9% of all deaths, and thirteen more than the previous week.

[PHW reports](#) that deaths in confirmed COVID-19 cases in hospital, reported by clinicians through PHW mortality rapid surveillance, remain at lower levels compared to previous waves.

1,183 deaths from all causes were registered in the latest week. This was 204 more than the previous week and is 264 more than the five-year average for 2016-19 and 2021. Caution is advised in interpreting these numbers as they were affected by the New Year's Day bank holiday falling in the previous week.

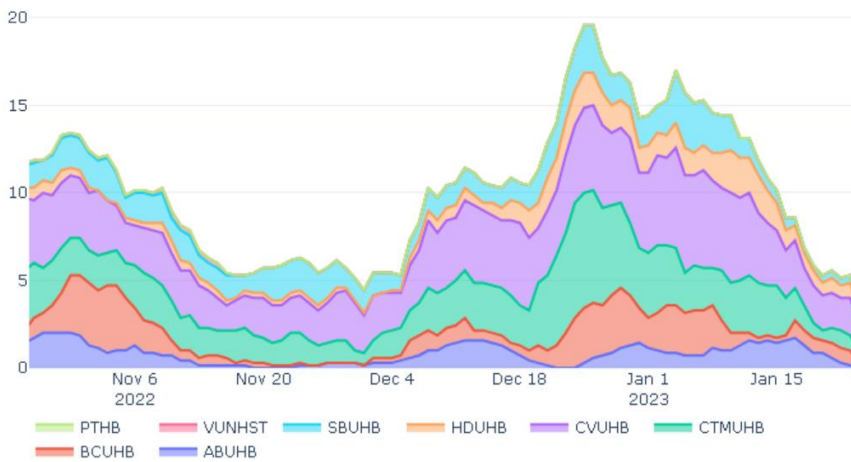
⁴ [Deaths registered weekly in England and Wales, provisional - Office for National Statistics \(ons.gov.uk\)](#)

1.5. NHS

As of 24 January 2023, hospital admissions of suspected and confirmed COVID-19 positive patients are at approximately 4 admissions per day.

Numbers increased through the Christmas period, reaching a peak similar to the October peak, of about 20 admissions per day on Christmas Day and Boxing Day. Admissions then started to decrease to 1 January where there was a small increase to 4 January, after which admissions have been decreasing.

Figure 4 - Hospital admissions of suspected and confirmed COVID-19 positive patients



As of 24 January 2023, the 7-day average of hospital bed occupancy of confirmed COVID-19 patients was 241 beds. Numbers have been decreasing since 26 December 2022, when there was a 7-day average of 644 beds occupied.

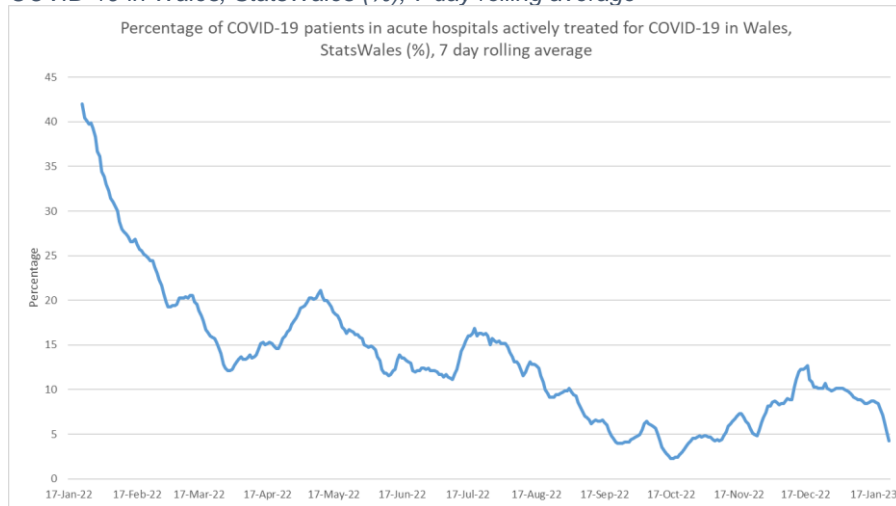
Figure 5 - Average of hospital bed occupancy of confirmed COVID-19 patients



The proportion [of patients in hospital⁵](#) with COVID-19 who are being actively treated for COVID-19, as opposed to testing positive for COVID-19 but being primarily treated for other reasons, increased from the beginning of December, until around 23 December. From then until 20 January, the proportion has been stable at between 8% and 11%. In recent days, it has shown signs of decreasing to around 4%.

⁵ stats.wales.gov.wales

Figure 6 - Percentage of COVID-19 patients in acute hospitals actively treated for COVID-19 in Wales, StatsWales (%), 7 day rolling average



As of 16 January 2023, [NHS staff absence due to self-isolation⁶](#) has remained the same as the period ending 3 January 2023, at 0.1%. Absence due to COVID-19 sickness has decreased to 0.5% from 0.9%.

⁶ statswales.gov.wales

1.6. Vaccines

The Joint Committee on Vaccination and Immunisation (JCVI) [has advised](#)⁷ that plans should be made for those at higher risk of severe COVID-19 to be offered a booster vaccination this autumn (2023).

The JCVI also advised that for a smaller group of people, such as those who are older and those who are immunosuppressed, an extra booster vaccine dose in the spring should also be planned for. Advice regarding the spring 2023 COVID-19 programme will be provided shortly.

The Autumn COVID-19 vaccine booster campaign is under way, as outlined in these tables:

Cumulative number of COVID-19 Autumn 22/23 vaccine doses given, by week. Uptake, based on Wales residents, uses indicative denominator 1,607,838

Week ending	Number of doses	Uptake
2022-09-04	23,224	1.4%
2022-09-11	91,068	5.7%
2022-09-18	155,352	9.7%
2022-09-25	231,915	14.4%
2022-10-02	327,383	20.4%
2022-10-09	427,391	26.6%
2022-10-16	543,109	33.8%
2022-10-23	644,029	40.1%
2022-10-30	734,383	45.7%
2022-11-06	806,864	50.2%
2022-11-13	880,934	54.8%
2022-11-20	941,421	58.6%
2022-11-27	991,637	61.7%
2022-12-04	1,031,513	64.2%
2022-12-11	1,060,954	66.0%
2022-12-18	1,081,279	67.3%
2022-12-25	1,089,557	67.8%
2023-01-01	1,093,494	68.0%
2023-01-08	1,100,270	68.4%
2023-01-15	1,107,550	68.9%

Source: [Public Health Wales](#)

Commented [RA(HPSEaA1): This table is getting really long now, is it worth condensing somehow? E.g. one aggregate line for Sept-Dec 2022, then weekly lines for 2023?

<10,000 doses a week given now since late Dec, so slowing down a lot, although holidays and weather could be a factor...

Commented [HA2R1]: Possibly remove the rows Week ending 2022-09-04 to 2022-10-30 then change the line above the table to read:
Between Week ending 2022-09-04 and 2022-10-30 the Autumn COVID-19 vaccine booster campaign rose from 23,224 doses (in late January 2023 this was estimated as 1.4% uptake) to 734,383 doses (in late January 2023 this was estimated as 45.7% uptake). This table shows how uptake has risen since then:

⁷ [JCVI advises an autumn COVID-19 vaccine booster - GOV.UK \(www.gov.uk\)](#)

Number of COVID-19 Autumn 22/23 booster vaccines given by age and risk group

Risk group	Denominator *(n)	Immunised (n) - 22/23 Booster	Uptake(%) - 22/23 Booster
Severely Immunosuppressed	50,261	38,048	75.7
Residents in a care home for older adults*	13,666	12,104	88.6
Staff working in care homes for older adults**	37,576	15,360	40.9
Health care staff**	141,648	79,618	56.2
Social care staff**		23,304	
All adults aged 65 years and older	705,205	573,091	81.3
All adults aged 50 to 64 years	683,487	398,816	58.4
Aged 5 to 49 years in a clinical risk group	219,146	71,901	32.8

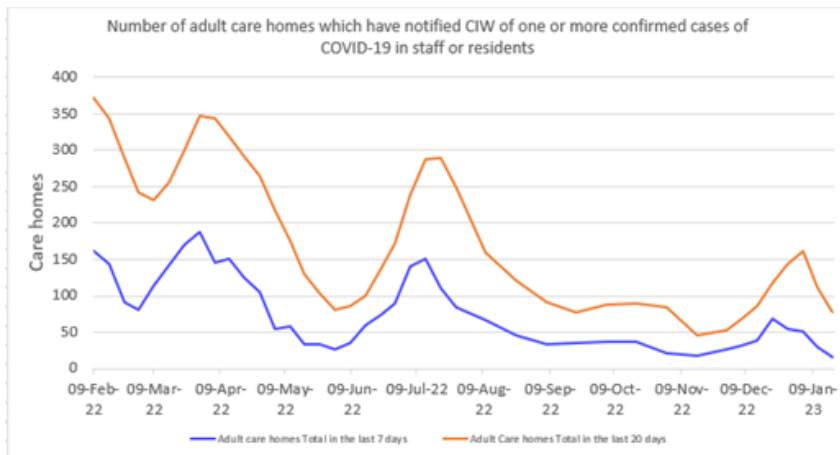
Source: [Public Health Wales](#)

An individual will be counted more than once if they are in more than one risk group. Denominator data is taken from WIS and based on Wales residents, with the exception of care home workers, healthcare workers and social care workers where denominators are based on those working in Wales. From 2 February 2022, all age groups are based on age as at 31 March 2023. Quality of recording of staff priority groups is variable and incomplete, these figures are provided provisionally and should be interpreted with caution. Care home residents have been identified by matching address as recorded in the Welsh Demographic Service (WDS) to a Care Inspectorate Wales list of registered Care Homes.

1.7. Care homes

As of 25 January 2023, the number of adult care homes in Wales that have [notified CIW](#)⁸ of one or more confirmed cases of COVID-19 in staff or residents in the last 7 days has decreased since the previous week, to 16 cases, from 30 cases. This figure for the last 20 days has decreased to 77 (period ending 18 January 2023), from 113 (period ending 11 January 2023). In Wales there are 1,017 adult care homes in total.

Figure 7 - Number of adult care homes which have notified CIW of one or more confirmed cases of COVID-19 in staff or residents



As of 25 January 2023, the [number of notifications to CIW of deaths of adult care home residents involving COVID-19](#)⁹ (both confirmed and suspected) in the last 7 days has decreased to 3, compared to 10 in the previous week.

In total, CIW has been notified of 2,284 care home resident deaths with suspected or confirmed COVID-19 between 1 March 2020 and 18 January 2023. This makes up 12% of all adult care home resident reported deaths (19,754) during this period.

⁸ stats.wales.gov.wales

⁹ stats.wales.gov.wales

1.8. Schools

As of 25 January 2023, the average attendance for this academic year to date is 89.2%.

The latest week is 16 to 20 January 2023, the week before is the 9 to 13 January 2023.

An average of 90.0% of half-day school sessions were recorded as present for pupils aged 5 to 15 over the latest week, down from 92.2% the week before. Data for the latest week is provisional.

An average of 6.4% of half-day school sessions were recorded as authorised absence for pupils aged 5 to 15 over the latest week, up from 4.9% the week before.

An average of 3.6% of half-day school sessions were recorded as unauthorised absence for pupils aged 5 to 15 over the latest week, up from 2.9% the week before.

There has been no difference in the attendance rate by gender for the academic year to date, 89.2% for boys and 89.1% for girls.

The attendance rate by year group for the academic year to date has been highest for pupils in Years 3 and 4 (91.3%) and lowest for pupils in Year 11 (84.8%).

The attendance rate for the academic year to date has been higher for pupils not eligible for free school meals (91.1%) than pupils who are eligible for free school meals (83.8%).

The most common reason for absence for the academic year to date has been illness, with 37.7% of sessions missed being for this reason. [The full report is available here](#)¹⁰

¹⁰ [Attendance of pupils in maintained schools | GOV.WALES](#)

1.9. Long Covid

As noted in the previous report, estimated 2.1 million people living in private households in the UK (3.3% of the population) were experiencing self-reported long COVID (symptoms continuing for more than four weeks after the first confirmed or suspected coronavirus (COVID-19) infection that were not explained by something else) as of 4 December 2022.

In the same period in Wales, it was estimated that 111,000 people self-reported long COVID (3.6% of the Welsh population). This is an estimated decrease of 3,000 people since the four week period ending 6 November 2022. The full report is [available here](#)¹¹ and the next release is scheduled for 2 February 2023.

¹¹ [Prevalence of ongoing symptoms following coronavirus \(COVID-19\) infection in the UK - Office for National Statistics \(ons.gov.uk\)](#)

1.10. International overview – World Health Organisation update

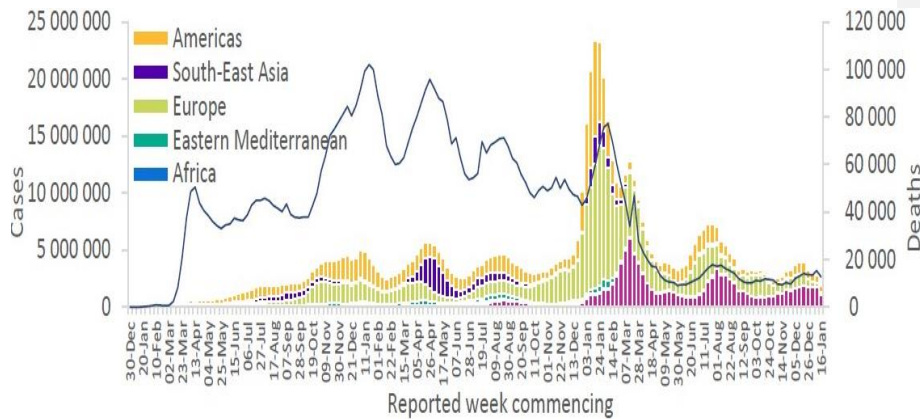
[The WHO reports](#) ¹² that globally, nearly 1.9 million new cases and over 12 000 deaths were reported in the week of 16 to 22 January 2023.

In the last 28 days (26 December 2022 to 22 January 2023), over 11 million cases and over 55 000 new deaths were reported globally – a decrease of 25% and an increase of 13%, respectively, compared to the previous 28 days.

Since early December, reported deaths have been increasing and the reported deaths do not yet include the 72 596 COVID-19 related hospital deaths announced by China (excluding Hong Kong special administrative region (SAR), Macao SAR, and Taiwan) for the period of 8 December 2022 to 19 January 2023, as WHO awaits detailed data disaggregated by week of reporting.

As of 22 January 2023, over 664 million confirmed cases and over 6.7 million deaths have been reported globally.

Figure 8 - COVID-19 cases reported weekly by WHO Region, and global deaths, as of 22 January 2023



Source: [WHO Weekly Epidemiological Update on COVID-19](#)

The highest numbers of new weekly cases were reported from Japan (672 526 new cases; -34%), the United States of America (323 721 new cases; -25%), the Republic of Korea (192 638 new cases; -33%), China (142 066 new cases; -25%), and Brazil (114 916 new cases; -5%). The highest numbers of new weekly deaths were reported from the United States of America (3922 new deaths; -8%), Japan (2779 new deaths; -2%), Brazil (952 new deaths; +108%), China (617 new deaths; -23%), and Spain (424 new deaths; +21%).

¹² <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

1.11. European Centre for Disease Prevention and Control (ECDC)

As of the week ending 22 January 2023, [ECDC reports](#)¹³ a continuing overall improvement in the epidemiological situation in the EU/EEA.

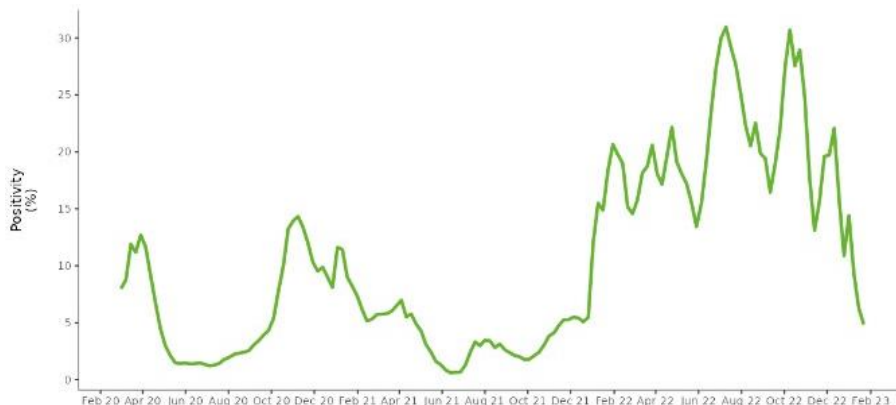
Pooled rates of case notification (all ages and among those aged 65 years and above), hospital admissions, and deaths have continued to decrease following the increases that were observed during December in both the general population and long-term care facilities.

Only one of 21 countries with data on hospital or ICU admissions/occupancy reported increases in at least one of the indicators, while two of 26 countries reporting data on COVID-19 deaths reported increases.

These increases were recent (of 1–2 weeks duration) and the indicators remained relatively low in the affected countries.

Despite what appears to be an improving picture in many EU/EEA countries, the pandemic continues to have a considerable impact, with 1 311 COVID-19 deaths reported by 26 EU/EEA countries in week 3. In the most recent four weeks, 27% and 63% of deaths for which age was reported were in people aged 65–79 years and 80 years and above, respectively.

Figure 9 - EU/EEA weekly test positivity, 26 January 2023



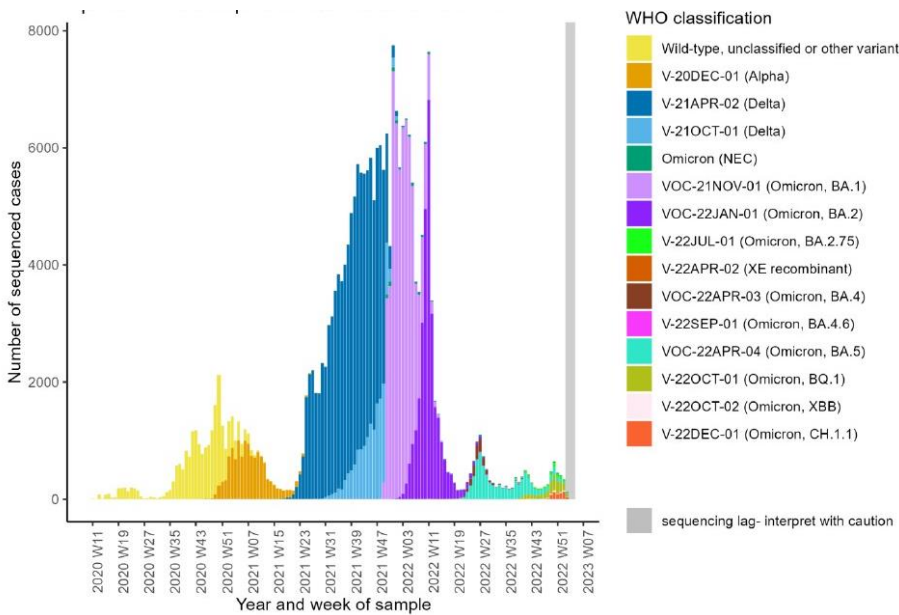
Data source: <https://www.ecdc.europa.eu/en/covid-19/country-overviews>

¹³ [COVID-19 situation updates \(europa.eu\)](#)

1.12. Variant of Concern update

As of 25 January 2023, [PHW report](#)¹⁴ that in the last four reporting weeks, V-22OCT-01 (Omicron, BQ.1) has been the most dominant variant in Wales, accounting for 38.2% of all sequenced cases.

Figure 10 - Epicurve of all sequenced variant cases in Wales (Data as at 24 Jan 2023)



Source: [Public Health Wales COVID-19 genomic surveillance](#)

As of 24 January 2023 there have been 57,114 cases of VOC-21NOV-01 (Omicron, BA.1), 29,265 cases of VOC-22JAN-01 (Omicron, BA.2), 1,192 cases of VOC22APR-03 (Omicron, BA.4), 7,385 cases of VOC-22APR-04 (Omicron, BA.5) and 1,712 cases of V-22OCT-01 (Omicron, BQ.1) confirmed in Wales.

[UKHSA reports](#)¹⁵ that XBB.1.5 (V-23JAN-01) which has rapidly grown has shown a small decrease this week in England making up 7.6% in the w/c 09 January 2023, compared to 8.9% in the w/c 02 January 2023.

CH.1.1 (V-22DEC-01) continues to increase in proportion in England, making up 25.6% w/c 09 January 2023, up from 23.9% in the w/c 02 January 2023.

¹⁴ https://public.tableau.com/app/profile/public.health.wales.health.protection/viz/PHWVirologyDashboard-Reportsandnotes_16535581718100/Notesondatainterpretationandreports

¹⁵

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1128554/variant-technical-briefing-49-11-january-2023.pdf

The UKHSA Variant Technical Group have advised that CH.1.1 and XBB.1.5 are currently the variants most likely to predominate in the UK following BQ.1, unless further novel variants arise.

It is plausible that XBB.1.5 will cause an increase in incidence after the current wave, however it is currently too early to confirm this trajectory. UK growth estimates are very early and have high uncertainty due to the small number of sequenced XBB.1.5 cases.

As of 25 January 2023, the [WHO has revised](#) the confidence level of the risk assessment for XBB.1.5 from “Low” (assessed on 11 January 2023) to “Moderate” (25 January 2023), using additional reports from countries on prevalence and growth advantage, and laboratory-based studies.

Based on its genetic characteristics and growth rate estimates, XBB.1.5 is likely to contribute to increases in case incidence globally. There is moderate-strength evidence for increased risk of transmission and immune escape. From reports by several countries, no early signal of an increase in severity has been observed.

The number of cases associated with XBB.1.5 is still low and thus severity cannot yet be confidently assessed. Taken together, XBB.1.5 does not appear to have additional public health risk relative to the other Omicron descendent lineages.

WHO and the TAG-VE recommend Member States prioritize the following studies to better address uncertainties relating to the growth advantage, antibody escape and severity of XBB.1.5.

[ECDC reports](#)¹⁶ ECDC reports that the overall level of risk to the EU/EEA associated with the spread of the Omicron XBB.1.5 SARS-CoV-2 sub-lineage as low for the general population. The risk is moderate to high for vulnerable individuals such as the elderly and non-vaccinated and immunocompromised people, depending on their immunity against SARS-CoV-2. Several knowledge gaps exist with XBB.1.5 and this assessment may change in the coming weeks as more evidence becomes available.

¹⁶[ECDC assesses risk to the EU/EEA associated with Omicron XBB1.5 sub-lineage \(europa.eu\)](#)

2. COVID-19 Medium-Term Projections

- The latest projections suggest the most recent wave has peaked in admissions and occupancy.
- Hospital admissions are projected to decrease to a minimum of around 11 admissions before gradually increasing again.
- Bed occupancy and ICU occupancy are expected to have reached a peak at maximum levels observed earlier on in the year in July and October before decreasing again throughout January.
- Deaths see a slight increase before a slight decrease, continuing to fluctuate at low levels of about 1 death daily.

Swansea University (SU) regularly produces medium-term projections (MTPs) for Wales. The SU projections are also combined with other models to go into a consensus MTP for admissions which is agreed every two weeks by the UKHSA Epidemiological Modelling Review Group (EMRG), which has taken over from COVID-M-O in agreeing these MTPs. EMRG projections are not shown this week as there haven't been any produced during the Christmas period.

The SU projections are typically more up to date but may be less robust as they are based on one model only. Both MTPs are based on projecting forward from current data and do not explicitly factor in policy changes, changes in testing, changes in behaviour, or rapid changes in vaccinations.

These MTPs for COVID-19 are not forecasts or predictions. They represent a scenario in which the trajectory of the epidemic continues to follow the trends that were seen in data available at the time.

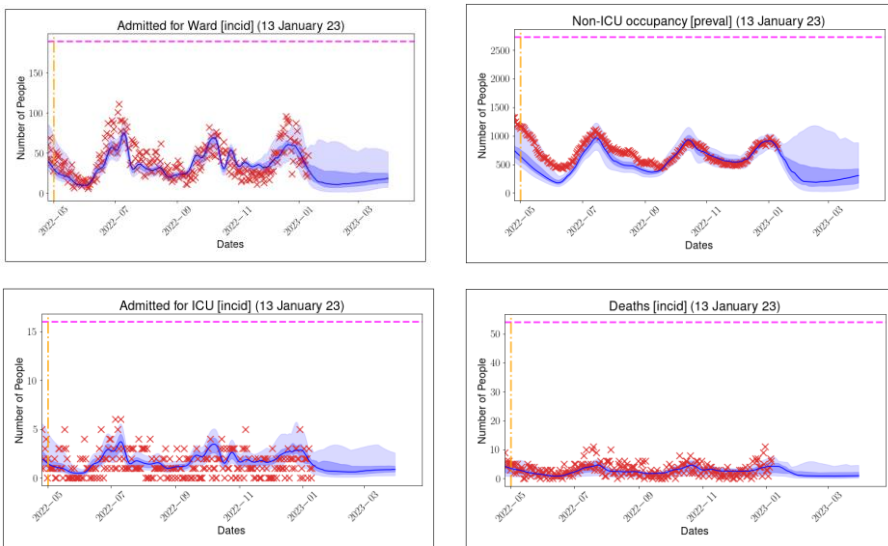
2.1. Swansea University MTPs, data as at 13 January

In the charts below, red crosses represent actual Omicron data, which the model is fitted to – fit is weighted to data points after the vertical orange line to represent the characteristics of emergent strains. The blue line represents the central modelling estimate. The blue ribbon represents the confidence intervals, with the darker blue ribbon indicating the 25th to 75th percentiles, and the 95% confidence limits in the lighter ribbon. The pink dotted line represents pre-Omicron peaks.

This set of projections suggest that pressures will plateau with a chance of a slight increase in admissions and occupancy in mid-March

Commented [KA(HPSEaA3): @Rushton, Rachel (HSS Health Protection - Science, Evidence and Advice) RU Ok providing a "top line summary" for MTPs - similar to the rest of the sections (High level statement - 3 bullet points or so) 😊

Figure 11 - Swansea University Medium Term Projections



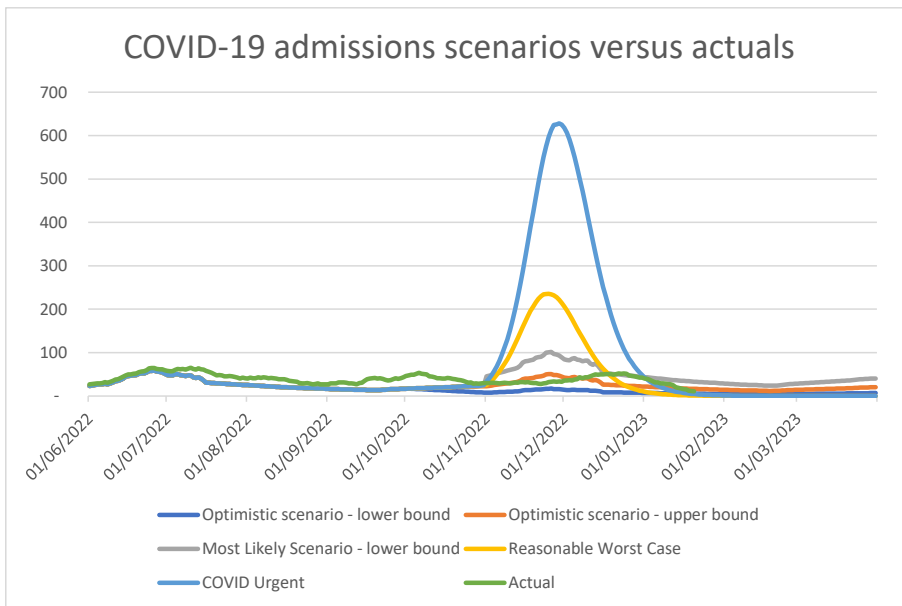
2.2. Winter Modelling compared to actuals

In order to aid with winter planning of COVID-19 admissions and occupancy over the 2022/23 winter, a [paper was published](#)¹⁷ outlining several scenarios. It's important to note that these scenarios were not an indication of what would happen, but rather what could happen. Since the publication of the winter modelling continuous monitoring has taken place to track actual data against the scenarios. The admissions data is provided by Public Health Wales and occupancy data is sourced from [Digital Health and Care Wales](#)¹⁸.

Data up to 20 January 2023 showed a trend in admissions continues to track closely to most of the scenarios, tracking at a very low number of admissions.

Data up to 24 January 2023 showed current occupancy with a similar trend line to the most likely scenario. This follows a decrease and may plateau in the coming weeks if the trend continue to follow the most likely scenario.

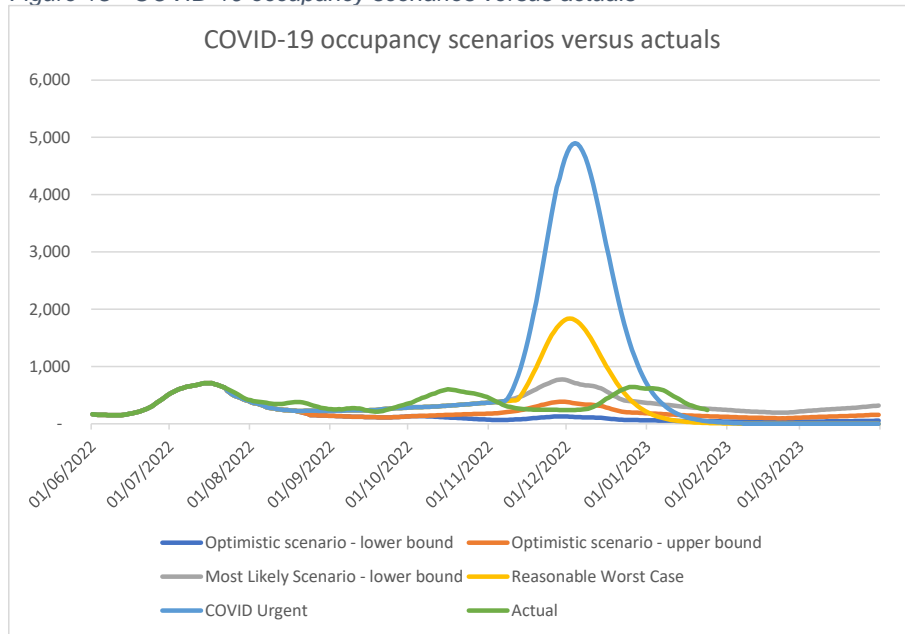
Figure 12 COVID-19 admissions scenarios versus actuals



¹⁷ [Science Evidence Advice: Winter modelling 2022 to 2023 | GOV.WALES](#)

¹⁸ [statswales.gov.wales](#)

Figure 13 - COVID-19 occupancy scenarios versus actuals



3. Influenza Situation Update

- As of 25 January 2023, influenza remains in circulation, although activity is decreasing in Wales.
- UKHSA reports that influenza positivity, confirmed outbreaks, hospital and ICU admissions are decreasing.
- In Europe, the percentage of patients presenting with flu symptoms is stabilising.
- Please note that there may still be some residual impact from the end-of-year holidays on the quality of data reported in recent weeks, which could affect the accuracy of this assessment.

3.1. Weekly Influenza and Acute Respiratory Infection Report – PHW

As of 25 January 2023, [PHW report](#)¹⁹ that influenza remains in circulation in Wales, although activity is decreasing. During week 3 (ending 22/01/2023), there were 68 cases of influenza (this is a decrease from the previous week).

The Sentinel GP consultation rate for influenza-like illness (ILI) in Wales during week 3, was 6.78 consultations per 100,000 practice population. This is a decrease compared to the previous week.

Consultation rates were highest in those aged 35 to 44 years.

The Sentinel GP consultation rate for Acute Respiratory Infections (ARI) was 209.1 per 100,000 practice population during week 3.

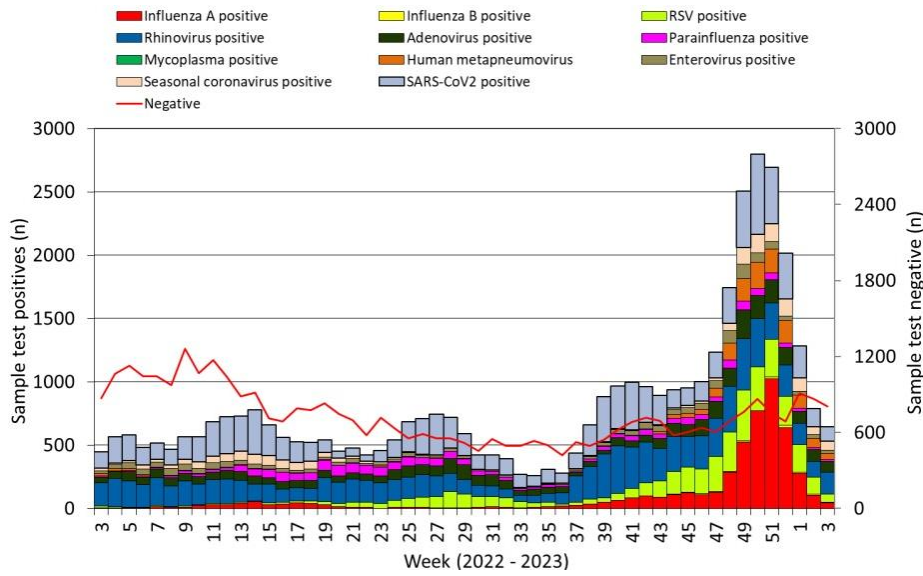
The percentage of calls to NHS Direct Wales which were 'influenza-related' (cold/flu, cough, fever, headache, and sore throat) during week 3 decreased to 19.9%.

Figure 14 - Uptake of influenza immunisations in GP Practice patients in Wales

People aged 65y and older	75.2%
People younger than 65y in a clinical risk group	42.1%
Children aged two & three years	41.7%
Children aged between four & ten years	61.0%
Children aged between 11 & 15 years	50.6%
Total NHS staff	43.6%
NHS staff with direct patient contact	43.6%

¹⁹ [Weekly Influenza and Acute Respiratory Infection Report - Public Health Wales \(nhs.wales\)](#)

Figure 15 - Specimens submitted for virological testing for hospital patients and non-sentinel GPs



Data Source: [PHW Weekly Influenza](#) & Acute Respiratory Infection Surveillance

3.2. UKHSA Weekly national influenza surveillance report

As of 26 January 2023, [UKHSA reports](#)²⁰ that influenza positivity decreased to 2.8% compared to 6.5% in week 2, with the highest positivity seen in children aged 5 to 14 years old and in the 15 to 44 years and at 4.5%.

Through primary care surveillance, the influenza-like-illness consultations indicator decreased in week 3 and returned to baseline.

The overall number of reported influenza confirmed outbreaks continued to decrease in week 3.

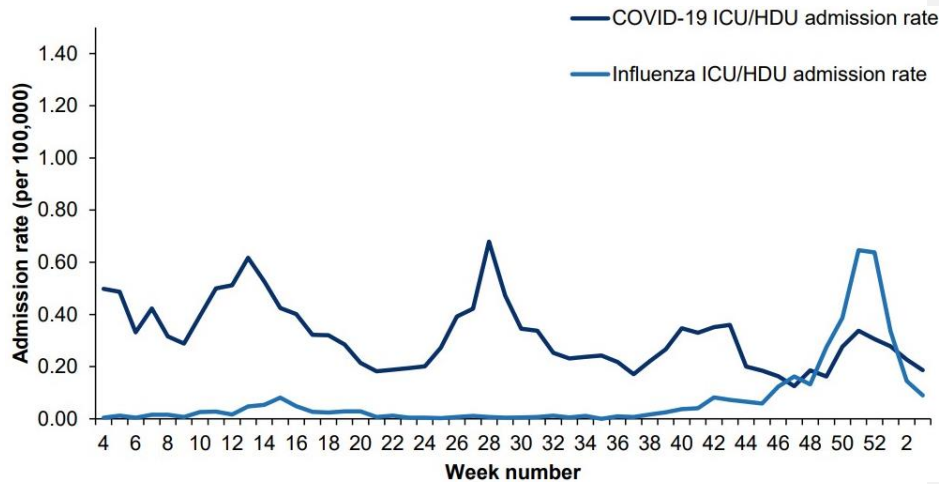
The highest number of incidents continue to be in care homes, with 4 influenza confirmed outbreaks occurring in England in week 3 compared to 23 in week 2.

Influenza hospital admissions decreased in week 3 compared to the previous week.

Influenza admissions were highest in the under 5 years old age group.

Influenza ICU admissions decreased in week 3 and approached the baseline range of activity. Emergency department attendances for influenza-like illness increased slightly.

Figure 16 - Weekly overall hospital admission rates of new COVID-19 and influenza positive cases per 100k population, England



²⁰ <https://www.gov.uk/government/statistics/national-flu-and-covid-19-surveillance-reports-2022-to-2023-season>

4. Respiratory Syncytial Virus (RSV) and Invasive Group A streptococcal Situation

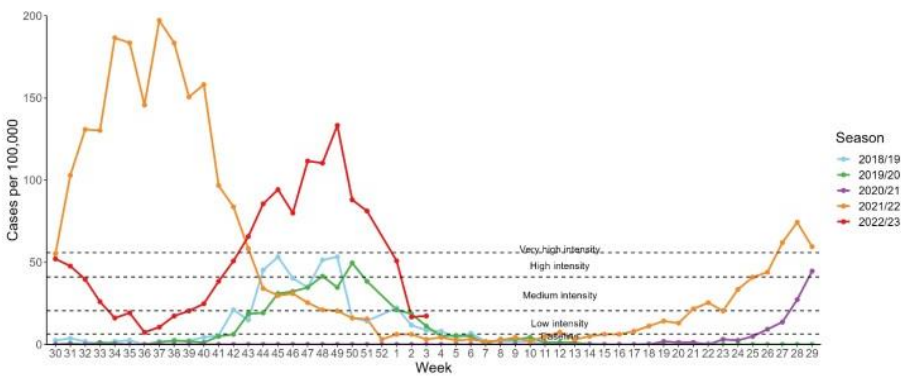
- RSV incidence in children under five years of age has decreased and remains at low levels of activity.
- UKHSA reports that the overall positivity and hospitalisation rate for RSV continued to decrease.
- Numbers of invasive Group A streptococcal (Strep A) infections have decreased but remain high in comparison to the previous years. No additional cases of iGAS in those aged under 15 years since the last report.

4.1. Weekly Influenza and Acute Respiratory Infection Report – PHW

As of 25 January 2023, PHW report that confirmed RSV case incidence in children aged under five remains at low levels.

There were 66 surveillance samples from patients with Influenza Like Illness symptoms collected by sentinel GPs and community pharmacies during week 3. Of the 66 samples, three tested positive for influenza (two A(H3N2), one A(H1N1)), three for a seasonal coronavirus, three for SARS-CoV2, one for RSV, three for human metapneumovirus, two for adenovirus, four for rhinovirus, three for parainfluenza and four for enterovirus.

Figure 17 - RSV Incidence rate in those aged under 5 in Wales, by week



4.2. Incidence data for Strep A and Scarlet Fever

As at 26 January, PHW report that scarlet fever and iGAS notifications have decreased, but remain high compared to previous years.

No additional cases of iGAS in those aged under 15 years since the last report (n=28).

As at 23 January 2023 there have been a total of 91 cases of iGAS confirmed in Wales since 1st September 2022. Of these individuals, 58 are aged 15 years or older and 33 are aged under 15 years.

Figure 18 - PHW Scarlet Fever Notifications per 100k, 22 January 2023

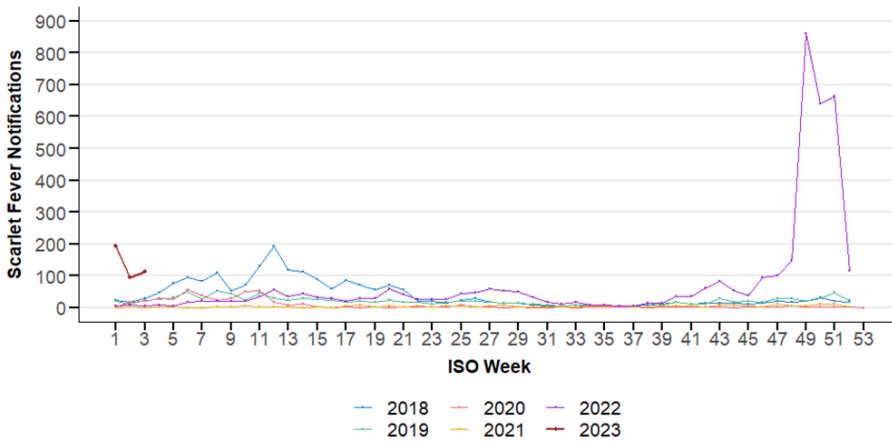


Figure 19 - PHW Lab Confirmed Invasive group A streptococcal infections, 22 January 2023

