The Covid- 19 epidemic in Tower Hamlets



Tower Hamlets Health and Wellbeing Board 9th June, 2020



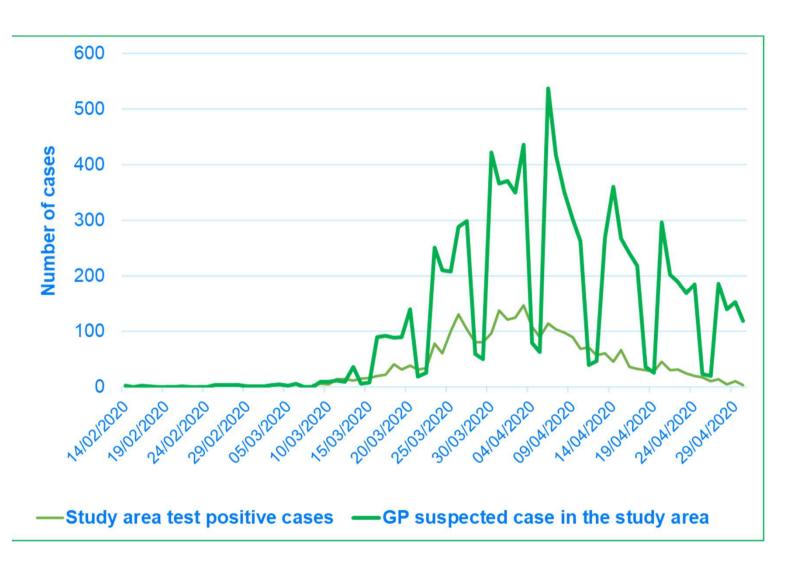
Tower Hamlets Headline figures

- Lab confirmed Covid-19 cases = 635
- Suspected cases
 - Not known how many have had symptoms and self managed (prior to testing)
 - Around 4x were diagnosed with suspected Covid-19 by their GPs compared to confirmed
- Deaths = 279 confirmed or suspected (4th June)

Cumulative COVID-19 Cases per 100,000 people, Tower Hamlets compared with All London Boroughs (excl City) and all English councils 350 300 250 ********************* 100000.0 200 150 100 50 0 - Tower Hamlets Cumulative lab-confirmed cases of COVID-19 per 100,000 people --- Median for All London Boroughs (excl City) Cumulative lab-confirmed cases of COVID-19 per 100,000 people - Median for All English authorities Cumulative lab-confirmed cases of COVID-19 per 100,000 people

Trend

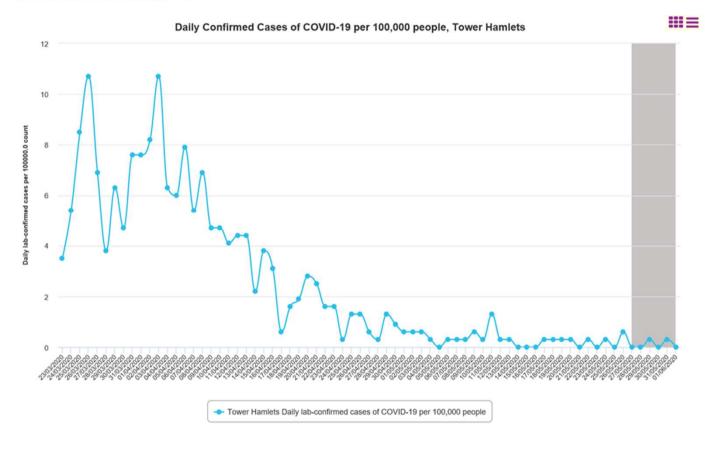
Confirmed cases



Trend

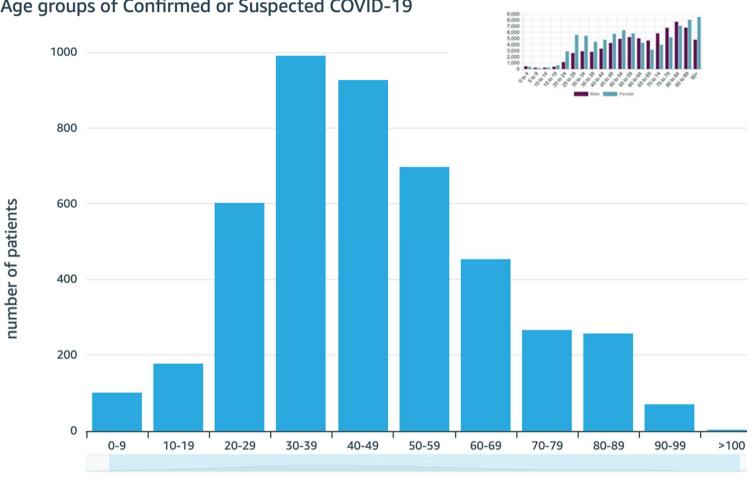
Confirmed and GP suspected cases

Clinical Effectiveness Group - Queen Mary University London



Note: the area of the chart in grey indicates provisional data. Not all cases tested for in this period have yet been incorporated into the data, and as such case numbers in the grey area are likely to be significantly higher than they currently appear to be.

Daily lab confirmed cases

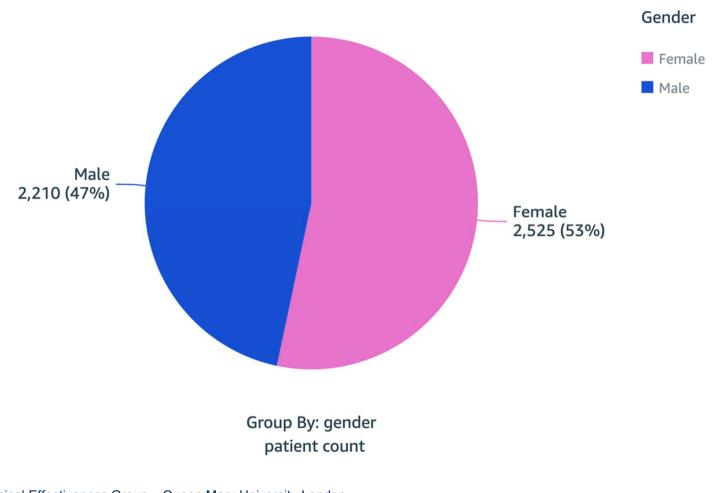


Age groups of Confirmed or Suspected COVID-19

Total number of lab-confirmed cases in England by age and sex

Age

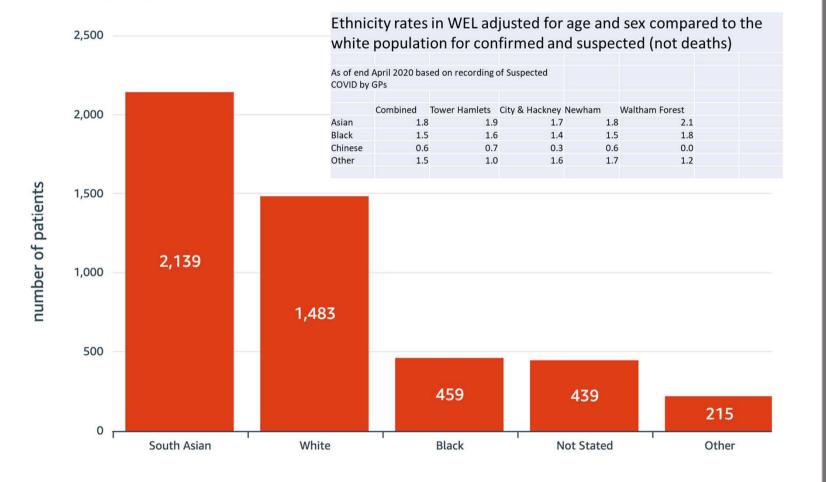
Clinical Effectiveness Group - Queen Mary University London



Gender split of Confirmed or Suspected COVID-19

Clinical Effectiveness Group - Queen Mary University London

Gender



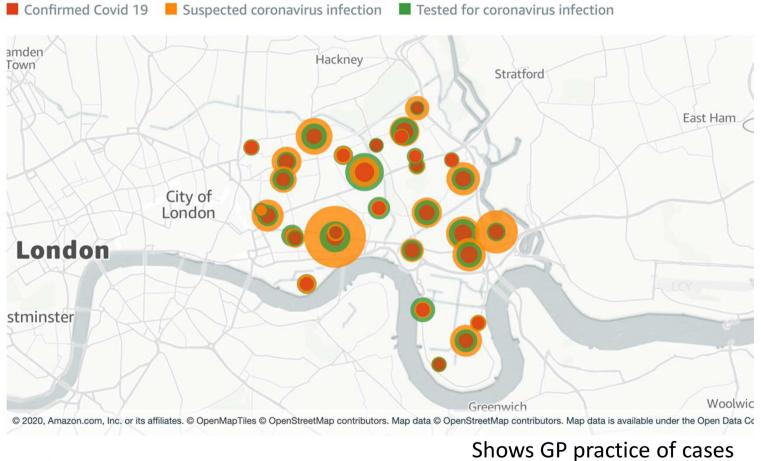
Ethnicity groups of Confirmed or Suspected COVID-19

Clinical Effectiveness Group – Queen Mary University London

Ethnicity

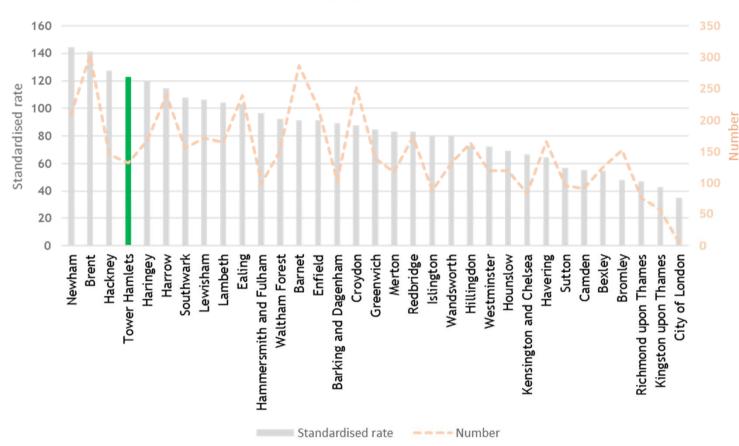
Count of patients with Confirmed, Suspected and Tested for COVID-19

SHOWING TOP 32 IN LATITUDE, LONGITUDE AND TOP 3 IN CORONA_STATUS



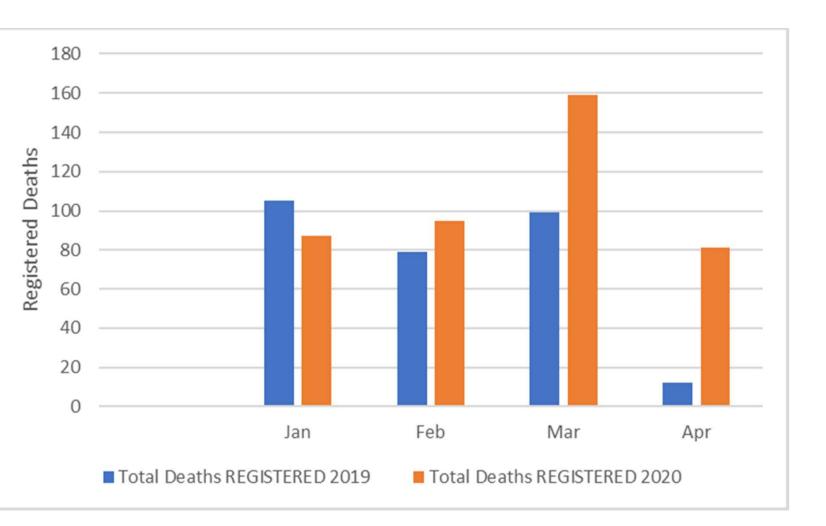
Place

Clinical Effectiveness Group – Queen Mary University London



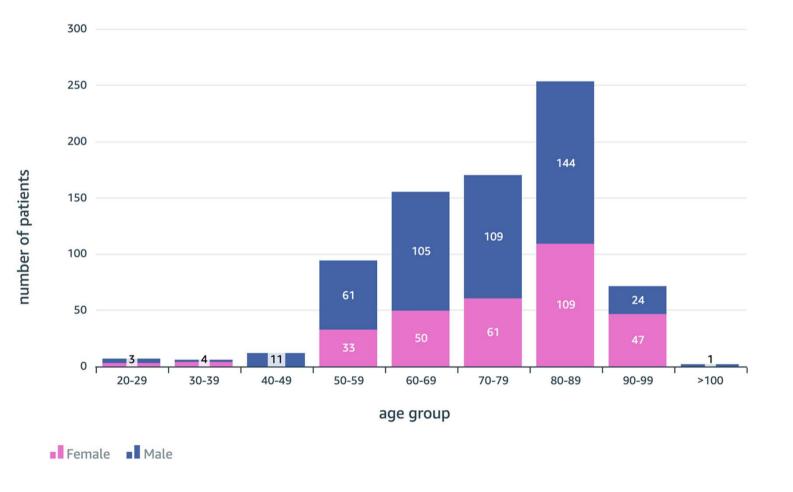
Deaths due to COVID-19 in London, 1st March to 17th April 2020

Deaths



Deaths from all causes

Count of deceased COVID-19 patients by age/sex (use filters to drill down)



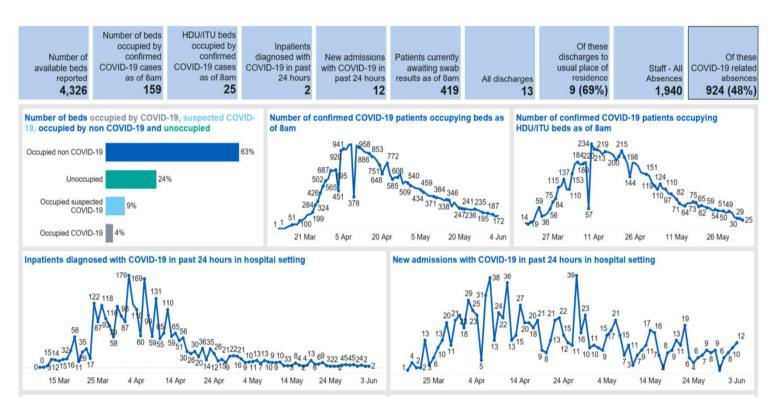
Deaths by age and gender

(East London)

Clinical Effectiveness Group – Queen Mary University London

North East London Commissioning Alliance

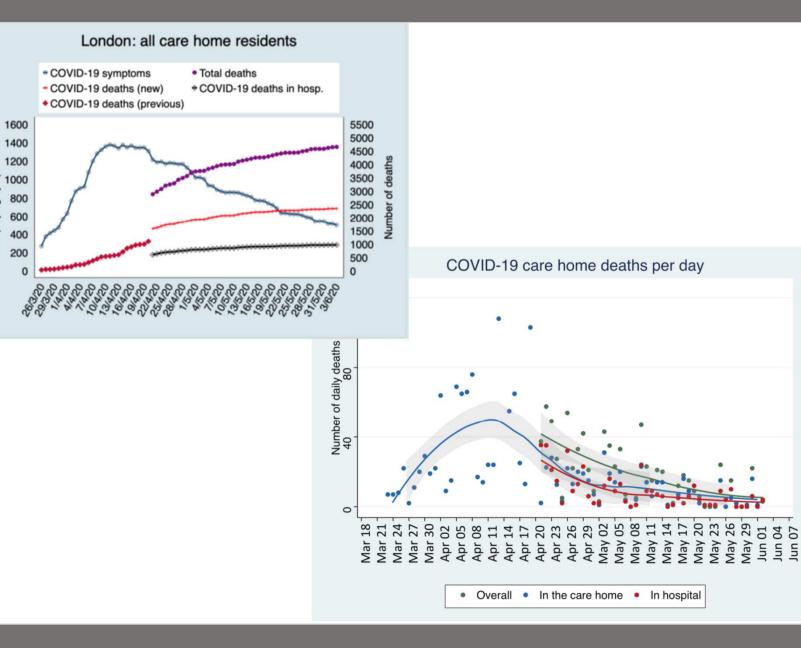
North East London COVID Data: 04 June 2020



Hospitals

An alliance of North East London Clinical Commissioning Groups

City and Hackney, Newham, Tower Hamlets, Waltham Forest, Barking and Dagenham, Havering and Redbridge CCGs



Care Homes

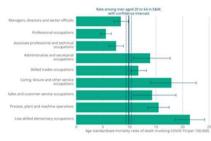
London analysis

All deaths Covid-19 deaths Death rate as a % difference from the least deprived decile

...however, in the most deprived areas, Covid-19 150 has had a proportionally higher impact. As with all deaths, Covid-19's 100 effects are worse the more deprived an area is... 50 0 8 5 3 9 7 6 4 2 10 Most deprived > < Least deprived

National analysis – deaths and deprivation Figure 1: Men working in low-skilled or caring, leisure and other service occupations had the highest rates of death involving

Age-standardised mortality rates of death involving the coronavirus (COVID-19) in England and Wales, by major occupational group, deaths registered up to, and including, 20 April 2020

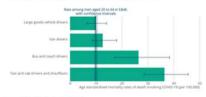


Source: Office for National Statistics

Embed code

Figure 3: Among road transport drivers, taxi and cab and chauffeurs had the highest rate of death involving COVID-19

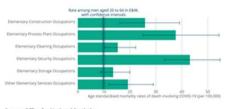
Age-standardised mortality rates of death involving the coronavirus (COVID-19) in England and Wales, deaths registered up to, and including, 20 April 2020



Source: Office for National Statistics

Figure 2: Among the lowest skilled workers, men working in Elementary security occupations had the highest rate of death involving COVID-19

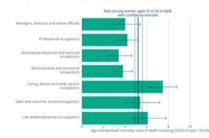
Age-standardised mortality rates of death involving the coronavirus (COVID-19) in England and Wales, deaths registered up to, and including, 20 April 2020



Source: Office for National Statistics Embed code

Figure 4: Women working in caring, leisure and other service occupations had the highest rate of death involving COVID-19 compared with women of the same age in the general population

Age-standardised mortality rates of death involving the coronavirus (COVID-19) in England and Wales, deaths registered up to, and including, 20 April 2020

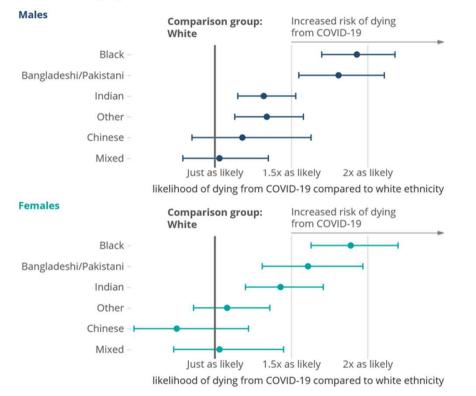


Source: Office for National Statistics

National analysis – deaths and occupation

Most ethnic minority groups are at greater risk of a COVID-19 death than the White population

Risk of COVID-19 death by ethnic group and sex, England and Wales, 2 March to 10 April 2020, fully adjusted model

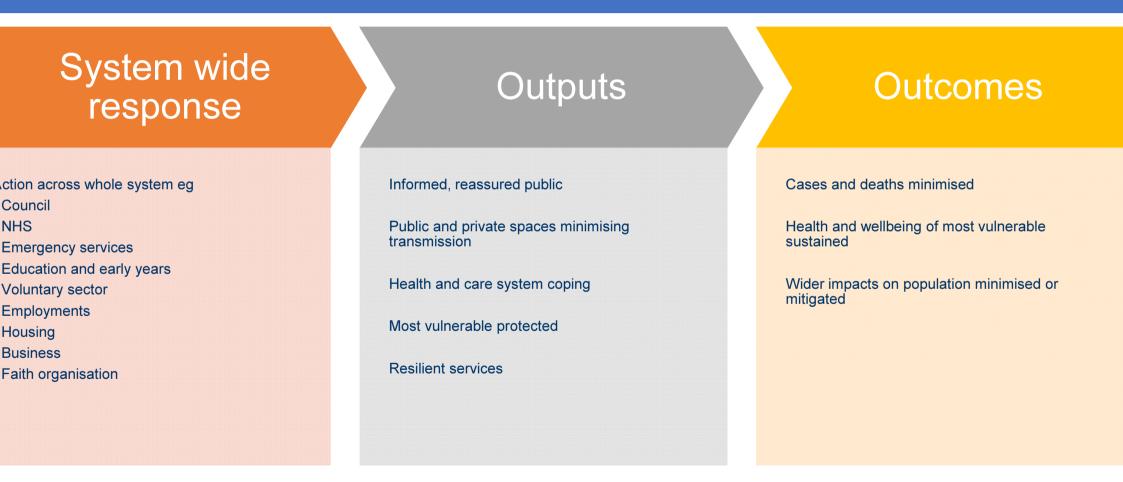


National analysis ethnicity and deaths

Source: Office for National Statistics

Responding to the epidemic

ower Hamlets response in first phase



Priorities



 Health and care PPE, testing Discharge Homelessness Care homes 	ShieldingMost vulnerable clinicallyAround 9000	Community mobilisation	Children and educations • Medically complex • Socially vulnerable • Domestic violence • Schools
		 Volunteering Customer contact Urgent and ongoing support (food, finance, social needs) 	
Excess death	Communications	Track and Trace	Place









639 new online Idea Store memberships



@

14,393 e-books and audio books accessed

















£97,781,665 business rate relief given to 3,187 businesses



151,000

72 organisations

£98,210 in rent relief for community groups

PPE items distributed to around





4,031 books delivered to support ho schooling of key worker childr



12,000 hot family meals provided over Easter



45,711 free school meals provided

rough sleepers helped off the streets

111

Data correct as of 14 May 2





Resident perspective



30 March -21 May 2020

Your health and wellbeing in healthwatch the COVID-19 pandemic Tower Hamlets

We are in the process of carying out a survey online and on the phone.

We also analysed comments received from local people via telephone and email, NHS Choices, patient opinion and social media. 354 respondents to date

1237 further comments





The longer term..

There is an ongoing risk of further waves until an effective vaccine is available

It is likely that until then a combination of current measures will continue to some extent depending or levels of Covid-19 in the population (social distancing, hygiene, test and trace, shielding)

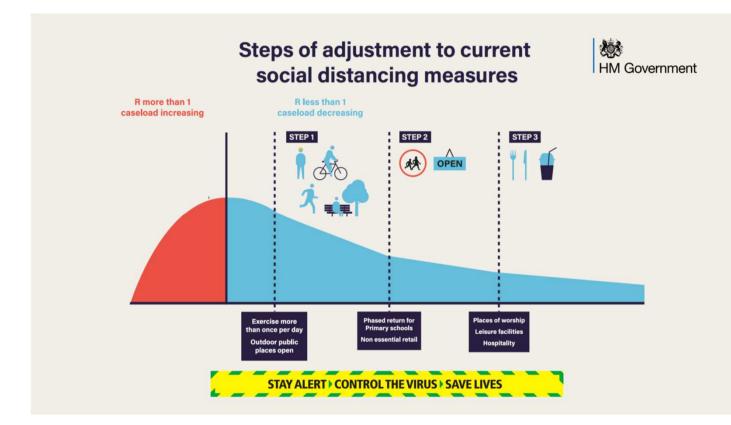
There remain important unknowns eg likelihood of reinfection, transmission of people with no symptom

Our challenge is to work together to prevent infection, contain outbreaks, provide assurance to our residents and enable a level of normality to return to people's lives

Our response will be shaped by the COVID Alert Level

	COVID Alert L	.evels MM Government
Level	Description	Action
5	As level 4 and there is a material risk of healthcare services being overwhelmed	Social distancing measures increase from today's level
4	A COVID-19 epidemic is in general circulation; transmission is high or rising exponentially	Current social distancing measures and restrictions
3	A COVID-19 epidemic is in general circulation	Gradual relaxing of restrictions and social distancing measures
2	COVID-19 is present in the UK, but the number of cases and transmission is low	No or minimal social distancing measures; enhanced testing, tracing, monitoring and screenin
1	COVID-19 is not known to be present in the UK	Routine international monitoring

The next two months are challenging but critical as lockdown is lifted



Clarity of messaging will be essential



Stay at home as much as possible



Work from home if you can



Go to work if you can't work from home



Limit contact with other people



If you can, wear a face covering in enclosed spaces



Keep your distance if you go out (2m where possible)



Wash your hands regularly



Do not leave home if you or anyone in your household has symptoms

Phase 2 Prevention and outbreak management



Inputs	Outcomes	Outputs	Outcomes
PPE advice/supply Social distancing advice Test, track and trace Shielding Specific setting support • Care homes • Schools • Public realm Outbreak management	 Sufficient/appropriate Right behaviours Minimisation of spread Shielded safe Minimisation of cases, deaths, public assured, providers feel safe Local outbreaks contained 	Informed, reassured public Public and private spaces minimising transmission Health and care system coping Most vulnerable protected Resilient services	Cases and deaths minimised Health and wellbeing of most vulnerable sustained Wider impacts on population minimised or mitigated

est of London borough