

COVID-19 in Nottingham City

1. Background

The World Health Organisation (WHO) declared COVID-19 an infectious disease, caused by the newly discovered Coronavirus, a pandemic on 11th March 2020. Most people infected with the COVID-19 virus experience a mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those, with underlying medical problems are more likely to develop serious illness. At this time there are no vaccines for COVID-19.

2. Local Context

At the time of writing, there have been 1,172 lab-confirmed positive cases in Nottingham City across all settings (pillars 1 and 2). This information is updated daily and made [publically available](#) by Public Health England (PHE). This equates to 354 positive cases per 100,000 residents, lower than the overall England rate of 439.1 and the second lowest of the English core cities. As with the national picture, the daily number of new cases in Nottingham peaked in mid-April has been in continual decline since.

The first COVID-19 deaths in Nottingham were in the week ending 27 March 2020. In total (up to 26 June 2020) there have been 231 COVID-19 deaths in Nottingham City (data published by ONS). The majority of these have occurred in hospital (58%) but a significant number have also occurred in care homes (36%). As with positive cases the number of COVID-19 deaths peaked in mid-April (44 deaths in the week ending 17 April 2020) and has continually declined since this point. In the three most recent weeks for which data has been available there have been 3 COVID-19 deaths in Nottingham City per week.

3. Disparities in the risk and outcomes of COVID-19

It has been clear since the early stages of the pandemic that the health impacts are likely to be unequal, and to exacerbate pre-existing health inequalities. This was confirmed by a PHE review into the disparities in the risk and outcomes of COVID-19. Disparities have been observed in relation to a number of factors, the largest of which is age. Nationally, and locally, the highest number of cases and deaths have continued to be seen in the older age groups, in particular in the 85+ age group.

The risk of becoming seriously ill or dying with COVID-19 is also greater for black and minority ethnic groups. PHE's 'Beyond the data' report discusses the role of factors associated with ethnicity including occupation, population density, use of public transport, household composition and housing conditions in COVID-19 transmission, and of inequalities in pre-existing health conditions.

Differences have also been observed in relation to deprivation and occupation.

The national evidence and information is being combined with local intelligence to inform a framework for action that builds on Nottingham's existing assets, to reduce health inequalities both in relation to COVID-19 and beyond.

4. Nottingham's response to COVID-19

The Nottingham and Nottinghamshire Local Resilience Forum has been at the forefront of the multi-agency response to COVID-19 across the City and County. The nature and scale of the pandemic has required the Council and partners to reallocate resource at pace.

This includes, but is not limited to;

- Establishing local arrangements to make sure urgent needs for Personal Protective Equipment could be met in a timely way, including a centralised ordering and distribution system.
- Ensuring sufficient and accessible local testing capacity colleagues for key workers and the wider community.
- Working closely with external care and support providers to provide a range of support.
- Provision of shelter for rough sleepers to ensure they were able to socially distance and self-isolate as per the national guidance.
- Establishing the Customer Services Hub, enabling citizens to raise requests for help. Since March 2020 over 2,000 requests have been received, over 2,000 emergency food parcels delivered and over 70 volunteers recruited. Over 17,000 citizens identified as shielding by the Government or as socially vulnerable by local GPs were also proactively contacted and offered support.

5. NHS Test and Trace and Local Outbreak Control Plan

As we move past the peak, and lockdown measures are eased, the focus has shifted to containing the disease through testing and tracing. Nationally this is delivered through the NHS Test and Trace programme, which contacts individuals with a positive test result, identifies their close contacts and advises them to self-isolate for a 14 day period.

This is complemented at the local level through the local authority led development and delivery of Local Outbreak Control Plans. Nottingham City's plan, published on 30 June 2020, is available on the Council's [website](#). The plan sets out how the Council and partners will mitigate the risk of and manage any further outbreaks of COVID-19.

Key features of the Plan include the ongoing local surveillance of key data indicators and local 'soft' intelligence brought together at a daily Outbreak Cell, identification of potential 'high-risk' or complex settings and the production of Incident Management Plans for these to enable a swift response should it be required, and the establishment of Local Outbreak Control Engagement Boards to ensure effective communication with local communities.

6. Conclusion

COVID-19 has had significant impacts, beyond the impact on the health of those directly affected and the impact on the family and friends of those who have sadly died as a result. Lockdown has impacted the population's mental health, as well as had an economic impact both on individuals and the wider economy as a whole. Children and young people have been impacted by school closures, with inequalities likely to be evident. These impacts will continue to be felt over the longer term and easing of lockdown will bring new challenges. As we move into recovery it is important that the reduction of health inequalities plays a central role. Whilst these challenges should not be underestimated Nottingham's strong partnership approach means it is well placed to tackle them.