COVID-19 DATA PACK – outbreak and risk profile

Isle of Wight – August 2020



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INTRODUCTION 1

Population health needs, risks and vulnerabilities in the context of COVID-19

- Geography
- Demography Population, Age, Gender, Population density, Ethnicity
- Socio economic data
- Housing
- Vulnerability
- Shielded patients
- Mapping risks and settings

COVID-19 outbreak control plan theme settings

- Children settings children's centres, schools/special schools
- · Adults settings care homes
- Other/ high-risk settings workplace zones/businesses/transport access points/Military

COVID-19 surveillance

- COVID-19 Infections
- NHS Pathways Data
- Deaths





INTRODUCTION 2

- SARS-CoV-2 is a novel virus, much remains to be understood about transmission dynamics and effects on our population, so emerging intelligence is **preliminary** and **subject to change**
- Increasing amounts of COVID-19 intelligence are becoming available and so these datapacks aim to collate data from a
 variety of open sources for each district to explore and better understand potential population health needs, risks and
 vulnerabilities which exist at a local level, including Local Outbreak Control Plan theme settings.
- Local knowledge and intelligence are key when interpreting localised transmission, to identify common factors early enough and prevent further spread of COVID-19. Local Authorities know their areas and should work with Local Authority Public Health and Public Health England (PHE) Health Protection Teams (HPT) to provide insights on localised outbreaks/clusters to ensure an agile and flexible response. This is done in conjunction with COVID-19 surveillance to monitor COVID-19 disease and the impact of local social distancing measures.
- Whilst these datapacks provide a population health overview, they do not provide timely data to control localised outbreaks/clusters, led by the PHE HPT and therefore should not be used as a proxy for management of COVID-19.
- Caution is needed with interpreting some of these data e.g. increasing trends may reflect increased testing, changes in recording, coding or reporting; rather than a true increase in incidence. Likewise, the frequency and timing of updating of data sets differs and thus need to be contextualised.
- Further information from the data compendium where many of the data have been extracted from can be found on Resilience Direct



Population Health Needs, Risks and Vulnerabilities in the Context of COVID-19



GEOGRAPHY

The Isle of Wight measures 23 miles by 13 miles and is located off the UK south coast separated from the mainland by the Solent;

Over half of its area is designated as AONB (Area of Outstanding Natural Beauty) and has just been awarded UNESCO Biosphere Reserve Status in recognition of the sustainable relationships between residents and local environment.



Mixture of urban rural areas:

Rural areas with lower population density and possible geographical barriers to accessing services etc –West Wight

Urban areas centred around

- Newport
- Ryde
- Cowes / East Cowes
- •Bay area
- pockets of deprivation
- dependent on seasonal employment

Isle of Wight's estimated population density in mid-2018 is 372.31 people/km² within a range of 25 to 9333 across 89 LSOAs.

The England-wide LSOA distribution is 2 to 102692 with a mean value of 4393.06 people/km².

Key

Values for LSOAs within the selected boundary are shown.

The colours represent the quintiles:

- 6,499.01 to 102,692 pop/km²: 6 areas
- 4,327.01 to 6,499 pop/km²: 14 areas
- 2,558.01 to 4,327 pop/km²: 15 areas 733.01 to 2,558 pop/km²: 18 areas
- 2 to 733 pop/km²: 36 areas

Data

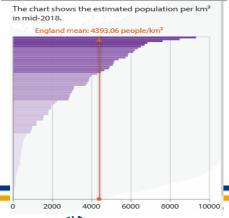
Numerator:

Estimated population: 141,538

Denominator:

Total area: 380.16 km²

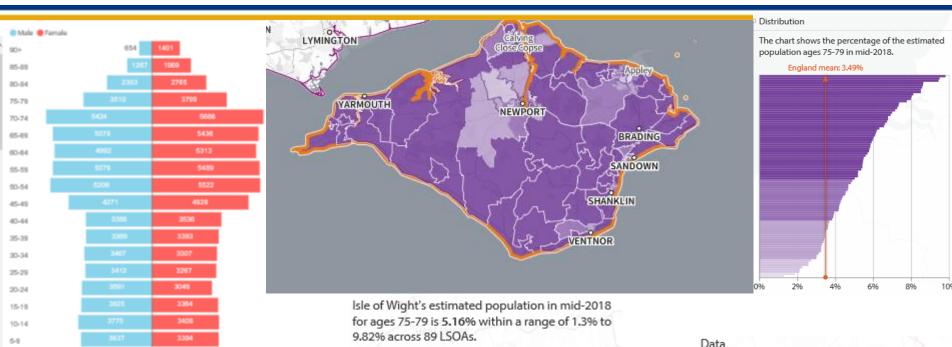
Small Area Population Estimates for mid-2018 ONS: ons.gov.uk/.../populationestimates





Data source: Public Health England (PHE) Strategic Health Asset Planning and Evaluation (SHAPE) tool

DEMOGRAPHY – POPULATION, AGE, GENDER



- Total population: 141,538 (mid-2018 estimates)
- Females: 72,204, Males:69,334
- Over a quarter of the Island's population is 65 and over

The England-wide LSOA distribution is 0.04% to 13.67% with a mean value of 3.49%.

Key

The colours represent the quintiles:

- 5% to 14%; 46 areas
- 4% to 5%: 18 areas
- 3% to 4%: 17 areas
- 2% to 3%: 6 areas
- 0% to 2%; 2 areas

Numerator:

Persons: ages 75-79 estimate: 7,309

Denominator:

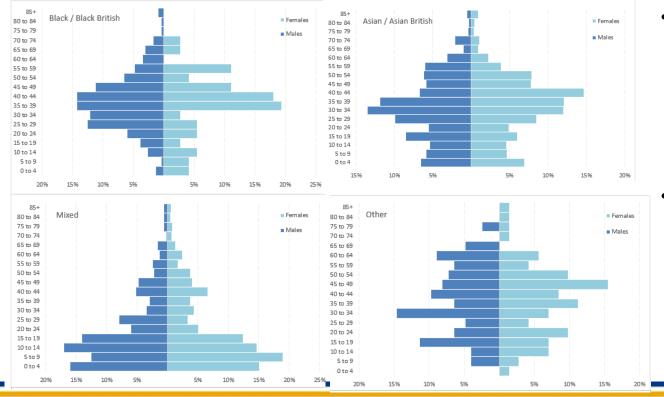
Total estimated population: 141,538

Small Area Population Estimates for mid-2018 ONS: ons.gov.uk/.../populationestimates



Ethnic Group Population Structure

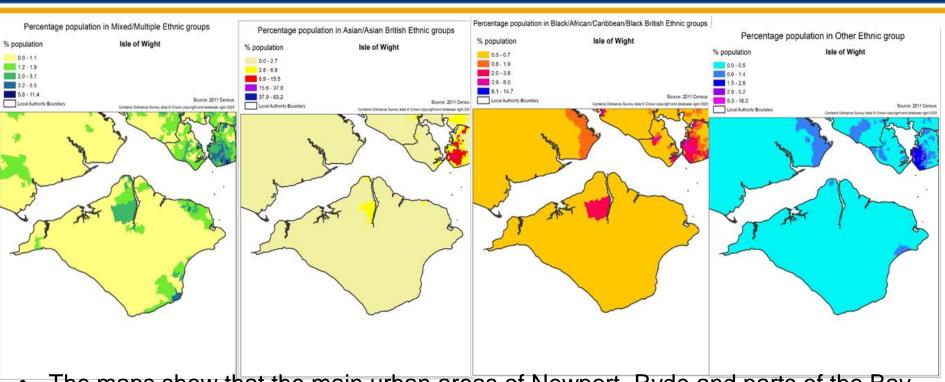
PHE disparities report published June 2020 reported that COVID19 mortality rates were higher in those in Black, Asian and Minority Ethnic (BAME) groups compared to those in White ethnic group.



- On the Island 97.3% of the population are white. The next largest groups are Mixed (1.2%) and Asian / Asian British (1.1%).
- The population pyramid for Mixed show residents are of a younger age with Asian / Asian British and Black / Black British having peaks from 25 to 49 yrs



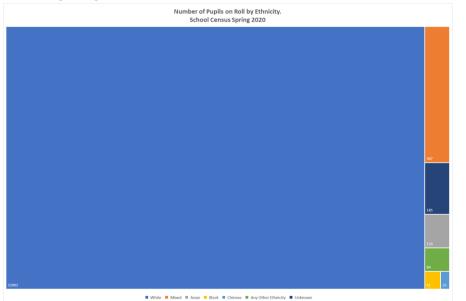
Ethnic Group Population Maps



- The maps show that the main urban areas of Newport, Ryde and parts of the Bay area have higher proportion of Black, Asian and Minority Ethnic residents
- The area with the highest levels of BAME includes the prison and hospital where the population is more ethnically diverse

School Census Ethnic Group Data

- 16,843 pupils on roll in Island schools, 94% of whom are White, with 6% from other ethnic backgrounds – see breakdown below
- 59 languages spoken the top 14 are shown opposite.



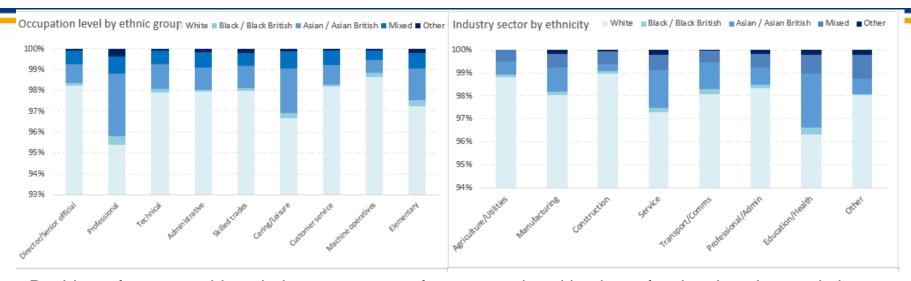
Language Description	Number of Pupils
Polish	131
Other than English	88
Romanian	27
Turkish	20
Arabic	18
Bengali	17
Hungarian	16
Bulgarian	15
Spanish	15
Chinese	12
Portuguese	12
Tagalog/Filipino	12
French	10
Tamil	10

<u>PHE disparity report</u> recommended that communications work with community leaders is conducted to enhance the depth of reach into BAME communities, ensuring that guidance and media is culturally appropriate and available in different languages using different approaches to mitigate fears and encourage improved uptake of vital prevention services.



Data source: IOW School Admissions Team

Ethnic Group Sociodemographic Data



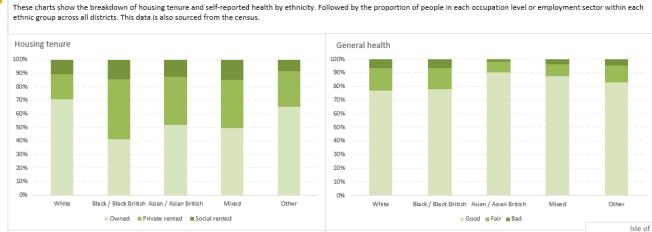
Residents from non-white ethnic groups more often reported working in professional, caring, and elementary occupations whilst white residents more commonly worked in senior official, technical, administrative or skilled trades. Elementary jobs are categorised as the lowest skilled type of occupation.

Residents from non-white ethnic groups were also more frequently working in the service industry (hotels, restaurants), followed by education/health and transport/ communications and manufacturing sectors

<u>The July 2020 ONS Infection Survey</u> analysis found that infection rates are higher among patient- and resident-facing health and social care roles than other occupations



Ethnic Group Housing Data

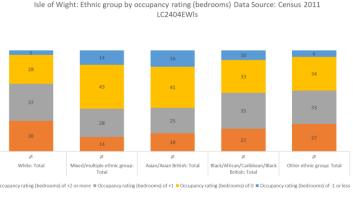


A lower proportion of Black / Black British, Mixed and Asian / Asian British population own their own home and are more likely to live in private rented accommodation.

White residents are less likely to report their health as good, which may be related to the older demographic of this population.

Occupancy rating provides a measure of whether a household's accommodation is overcrowded or under occupied. An occupancy rating of -1 implies that a household has one fewer room/bedroom than required, whereas +1 implies that they have one more room/bedroom than the standard requirement.

Data for the Island suggests that overcrowding is more prevalent in Asian/Asian British residents where 16% of these households have an occupancy rating of -1 or less and Mixed/ multiple ethnic groups where 14% have a -1 occupancy rating:



The July 2020 ONS Infection Survey found that rates of positive tests for COVID-19 appear lower for individuals who live in two-person-households than in larger households

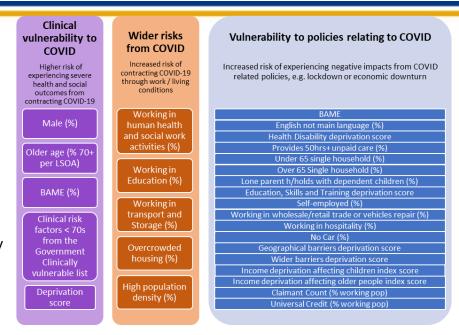
COVID-19 Vulnerability Indices Summary

Assorted factors make people more vulnerable at different stages of the COVID-19 outbreak; response, recovery or both. Evidence shows an increased clinical vulnerability to severe outcomes from COVID-19 such as hospitalisation or dying for certain groups of people, as well as specific employment positions and living conditions also widely further increase risks. Additionally, some groups have greater vulnerability to the negative effects of the 'lockdown' and economic policies put in place in the response and recovery phases

Three separate indices have been developed to support the range of approaches for the local authority in different stages and aim to help us understand the potential direct and indirect impact COVID-19 may have on our communities. The indices are not intended to be used as a standalone tool but within the context of local knowledge and other available data.

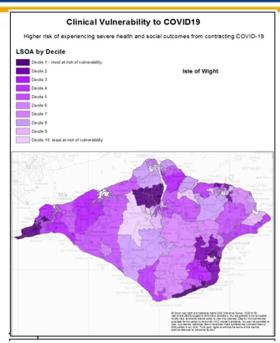
Key points:

- Individual clinical and wider risks to COVID-19, and policies relating to COVID-19, have brought vulnerabilities into sharp focus.
- People facing the greatest deprivation are likely to experience a higher risk of exposure to COVID-19 and existing poor health puts them at risk of more severe outcomes if they contract the virus. However, it is difficult to untangle the interplay between clinical and wider risks, and the quantification of risk.
- Local authorities need to work with partners to consider policies to protect people at increased risk of severe COVID-19 disease.

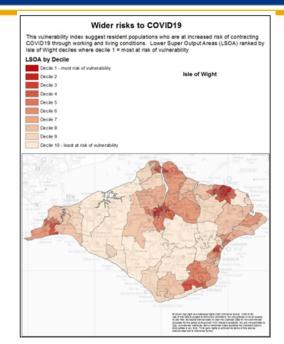


Data source: HIOW LRF Risks and Vulnerabilities Compendium available via Resilience Direct

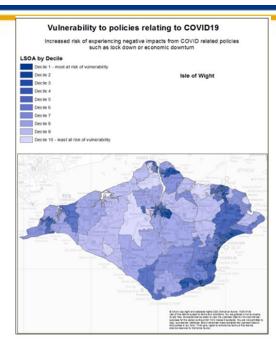
Covid-19 Vulnerability Indices - Maps



- Parts of Newport (related to prison • male, BAME, deprivation);
- Coastal regions West Wight, Ventnor, Shanklin (older population)
- Parts of Ryde (BAME, male, deprivation)



- Parts of the North and Central Wight human health / social care, education, higher population density;
- Parts of South Wight high population density
- Parts of West Wight



- More populated areas parts of North and Central Wight – self employed, wholesale / retail trade, deprivation, universal credit
- Coastal regions particularly parts of South Wight - working in hospitality, deprivation, single households, education, skills and training deprivation score
- Parts of West Wight geographical barriers, deprivation

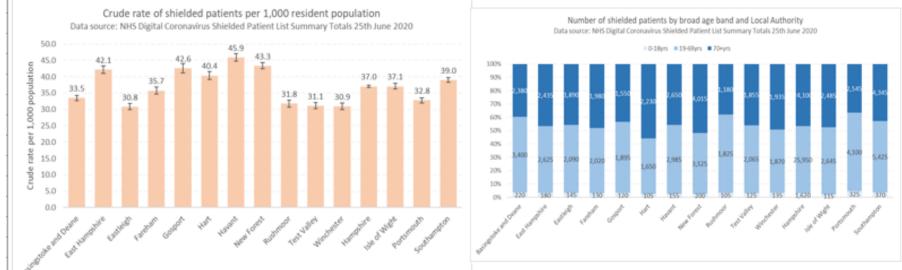


Data source: HIOW LRF Risks and Vulnerabilities Compendium available via Resilience Direct

Shielded Patients

Within the population, certain patients are at the highest risk of severe COVID-19 illness and 'Shielding' is an important strategy to protect them.

NHS Digital provides a Shielded Patient List (SPL) which is anonymous summary data of patient counts (age band & gender) by Local Authority



Data extracted in June indicates that the Island rate for shielded patients is 37.1 per 1,000 residents. This is statistically significantly higher than six of the other HIOW areas.

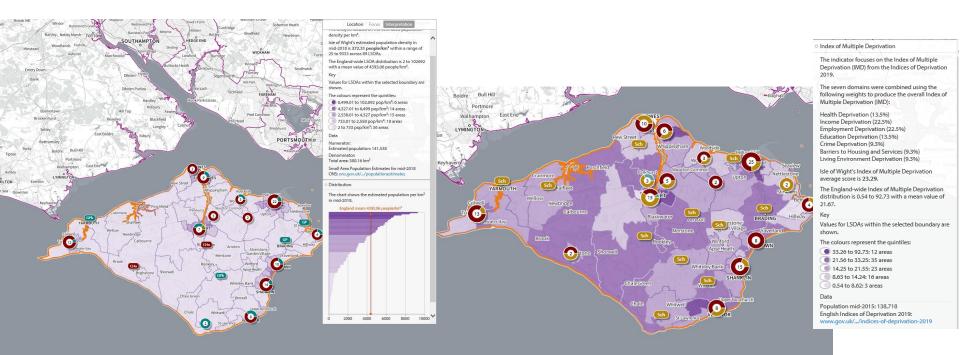
Half the shielded population are aged between 19 to 69 years and just under half (47%) are 70+ Area with the highest proportion of shielded patients include urban areas such as East Cowes and more rural areas of west/central wight and east/central wight



Data source: HIOW LRF Risks and Vulnerabilities Compendium available via Resilience Direct

Mapping risks and settings

Population density v/s location of care homes, GP Practices and mental health facility Indices of multiple deprivation v/s location of care homes and schools



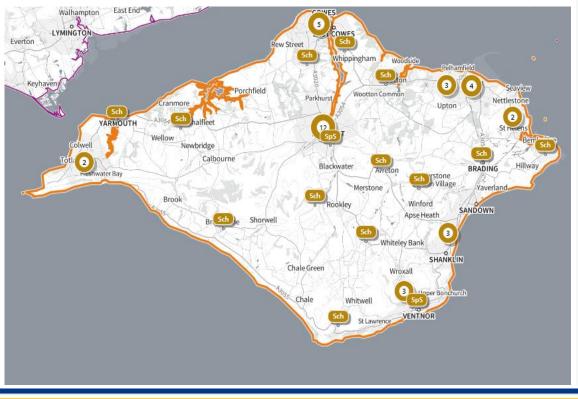


COVID-19 outbreak control plan theme settings



Education sites

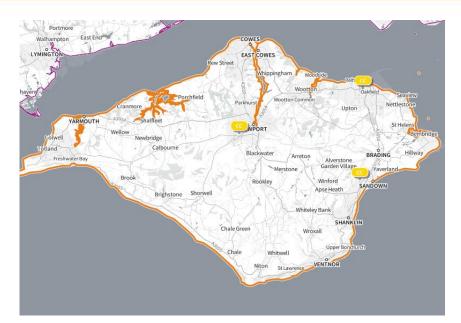
46 Schools, 2 special schools



✓ Sch	All Saints Church of England Primary	√ Sch	Nine Acres Primary School, Newport
Z_ /6	School, Freshwater, Freshwater	✓ Sch	,
✓ Sch	Arreton St George's Church of England Controlled Primary School, Newport		Niton Primary School, Ventnor
✓ Sch	Barton Primary School, Newport	✓ Sch	Northwood Primary School, Cowes
Sch	Bembridge Church of England Primary School, Bembridge	√ Sch	Oakfield Church of England Aided Primary School, Ryde, Ryde
√ Sch	Binstead Primary School, Ryde	√ Sch	Queensgate Foundation Primary, Eas
√ Sch	Brading Church of England Controlled Primary School, Sandown		Cowes
✓ Sch	Brighstone Church of England Aided	✓ Sch	Ryde Academy, Ryde
√ Sch	Primary School, Newport Broadlea Primary School, Sandown	✓ Sch	Shalfleet Church of England Primary School, Newport
✓ Sch	Carisbrooke Church of England Controlled Primary School, Newport	✓ Sch	St Blasius Shanklin CofE Primary Academy, Shanklin
√ Sch	Carisbrooke College, Newport	✓ SpS	St Catherine's School, Ventnor
✓ Sch	Chillerton and Rookley Primary School, Newport	✓ Sch	St Francis Catholic and Church of
✓ Sch	Christ The King College, Newport	•	England Primary Academy, Ventnor
✓ Sch	Cowes Enterprise College, An Ormiston Academy, Cowes	✓ SpS	St George's School, Newport
✓ Sch	Cowes Primary School, Cowes	√ Sch	St Helens Primary School, Ryde
✓ Sch	Dover Park Primary School, Ryde	✓ Sch	St Mary's Catholic Primary School, Ry
✓ Sch	Gatten and Lake Primary School, Shanklin	✓ Sch	St Saviour's Catholic Primary School,
✓ Sch	Godshill Primary School, Ventnor		Totland Bay
✓ Sch	Green Mount Primary School, Ryde	✓ Sch	St Thomas of Canterbury Catholic Primary School, Newport
▼ Sch	Gurnard Primary School, Cowes	√ Sch	Summerfields Primary School, Newp
✓ Sch	Haylands Primary School, Ryde	√ Sch	The Island Free School, Ventnor
✓ Sch	Holy Cross Catholic Primary School, East Cowes		
✓ Sch	Hunnyhill Primary School, Newport	✓ Sch	The Isle of Wight College, Newport
✓ Sch	Lanesend Primary School, Cowes	✓ Sch	Wootton Community Primary School
✓ Sch	Medina College, Newport		Ryde
✓ SpS	Medina House School, Newport Isle of Wight	✓ Sch	Wroxall Primary School, Ventnor
✓ Sch	Nettlestone Primary School, Seaview	✓ Sch	Yarmouth Church of England Aided Primary School, Yarmouth
√ Sch	Newchurch Primary School, Sandown		Timary School, Talmouth
✓ Sch	Newport Church of England Aided Primary School, Newport		



Early Years settings





- Newport
- Ryde
- The Bays



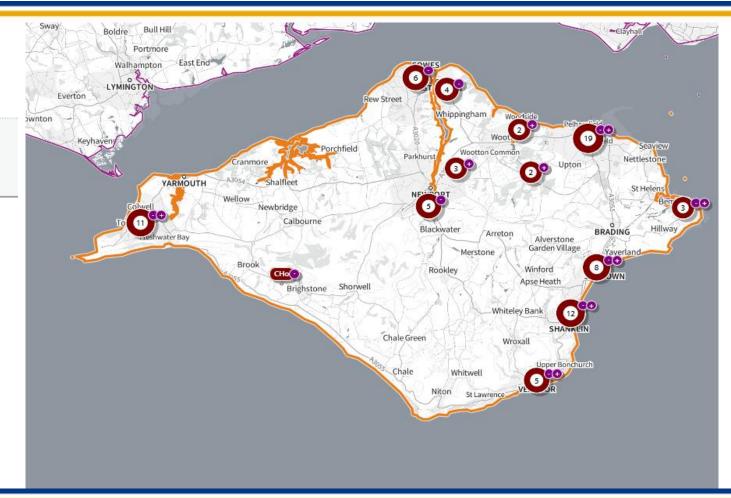
52 registered Early Years Providers



Care home settings

75 Care homes

✓ 13 🗪 With nursing
✓ 62 💿 Without nursing





Workplace settings

The majority of the Island is classified as rural, with pockets of public sector, retail and manufacturing.



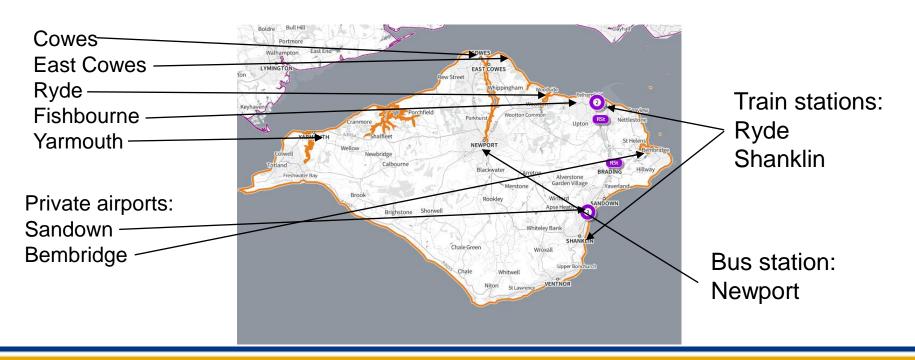




Transport access points

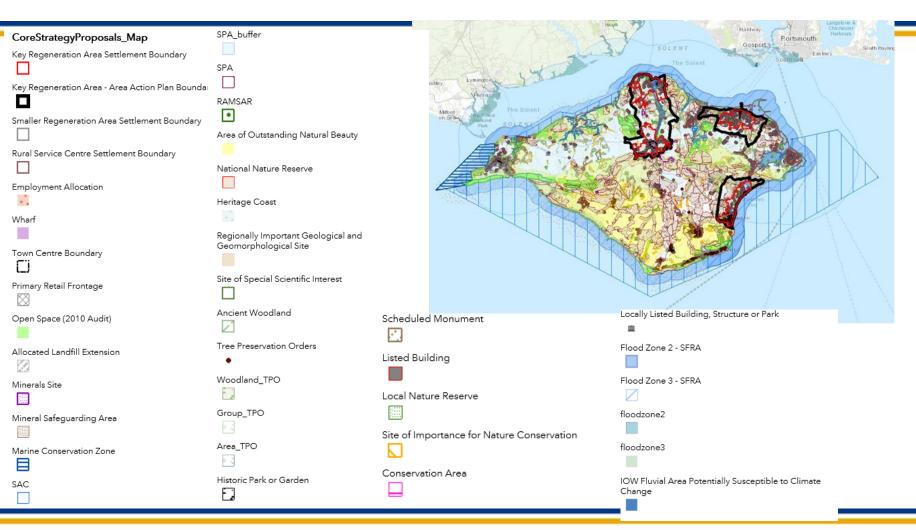
Incoming population particularly seasonally through ferry ports

Ferry ports:





Isle of Wight Site Summary



COVID-19 surveillance



Covid-19 surveillance

- COVID-19 surveillance provides an indication about COVID-19 transmission that infection rates within parts of the community have increased or may be about to, or whether particular groups of people are affected. This data is then used to inform public health action to help prevent and control COVID-19 disease.
- Multiple sources of data are used to understand the spread of COVID-19 disease and monitor COVID-19 activity:
 - Cases of COVID-19
 - NHS Pathways 111 data
 - COVID-19 deaths
- It is important to look at emerging trends, overall increases in trends, links with other outbreaks/clusters, areas that aren't settling as they should i.e. stubborn trends, particular vulnerable groups/settings/localities affected, comparator local authority trends, numbers above threshold and effectiveness of distancing/COVID-19 secure measures.
- No single piece of data tells the whole story and interpretation should be based on a consideration of patterns and trends across <u>all</u> indicators to provide situational awareness, and be viewed in the context of any policy changes.



Covid-19 Surveillance indicators



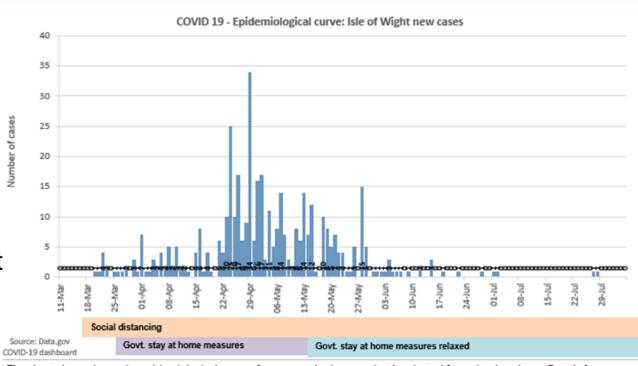


Infections: Confirmed C-19 cases, Cumulative and Daily

Snapshot as at 4th August 2020

423 confirmed cases

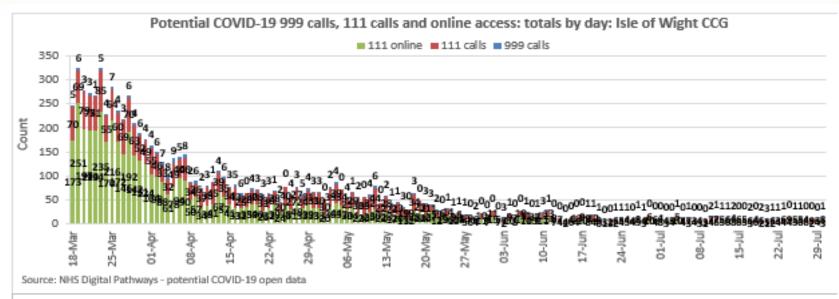
Daily cases have reduced from a peak at the end of April and beginning of May



The chart above shows the epidemiological curve of new cases in the area that is selected from the dropdown. Data is from Data.gov COVID-19 dashboard. Case numbers are subject to revisions, especially most recent numbers. **Track and trace service went live in England on 28th May.**



NHS Pathways Data



The chart above shows the total number of potential COVID-19 999 calls, 111 calls and 111 online for the selected CCG. Note that the above chart shows a count of people accessing these services, therefore it is possible that several people have accessed multiple services and appear in more than one category; but, due to the nature of the data it is not possible to understand the extent of possible couple counting. Data is from NHS Digital Pathways - potential COVID-19 (open data). The combination of this indicator with other information could be used as an early warning signal e.g. a second wave of infections.

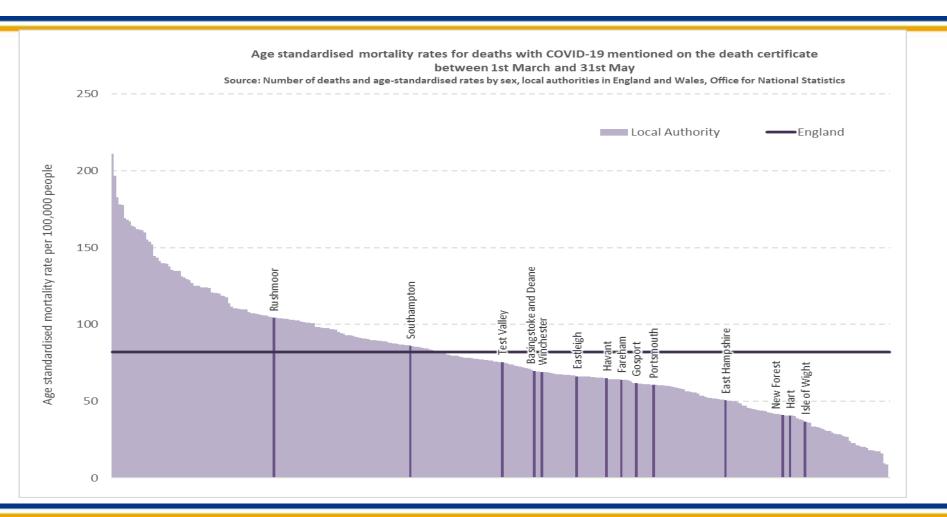
The chart shows a decline in the number of NHS Pathways triage assessments for a potential COVID-19 final disposition

Data Source: HIOW LRF Early Warning Dashboard accessed via Resilience.

Direct



Mortality Rates





In Summary – What should we do knowing this?

- The data suggest that the Isle of Wight has several COVID-19 vulnerabilities a mix of urban areas with a higher BAME population and a rural population with a higher shielded population
- Incoming population flows through ferry port, private airports and private boats
- So what should we do?
- Share local soft intelligence with both Local Authority Public Health (LAPH) and <u>Public Health England (PHE) Health Protection Teams (HPT)</u> contacts, to complement outbreak/incident control. Use this local knowledge and intelligence when investigating/interpreting localised transmission/outbreaks/clusters to provide insight on contact points
- Work with Local Outbreak Control Plan officers, who lead on controlling localised clusters
- Identify common factors early enough to contain and prevent further spread of COVID-19
- Detail possible places where people are likely to become infected for timely local decision making and more targeted control measures; Ensure local areas of high risk are COVID-19 secure
- Be vigilant around COVID-19 surveillance for future spikes/surge in infection



