

# Living with Covid-19 Strategy Birmingham

November 2021



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# Introduction



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# BCC response to Covid-19 Pandemic

- **Emergency Response Framework** - in the initial wave and stood down formally in August 2021
- **Local Outbreak Management Plan** (based on national framework to Covid response) – in summer 2020 and refreshed in spring 2021
- Significant response needed to **Contain and Respond to the spread of Covid-19** in the community (given the high numbers of unvaccinated individuals)
- New- **Living with Covid-19 Strategy**

# Analysis of Covid -19 Pandemic

(March 2020 - October 2021)



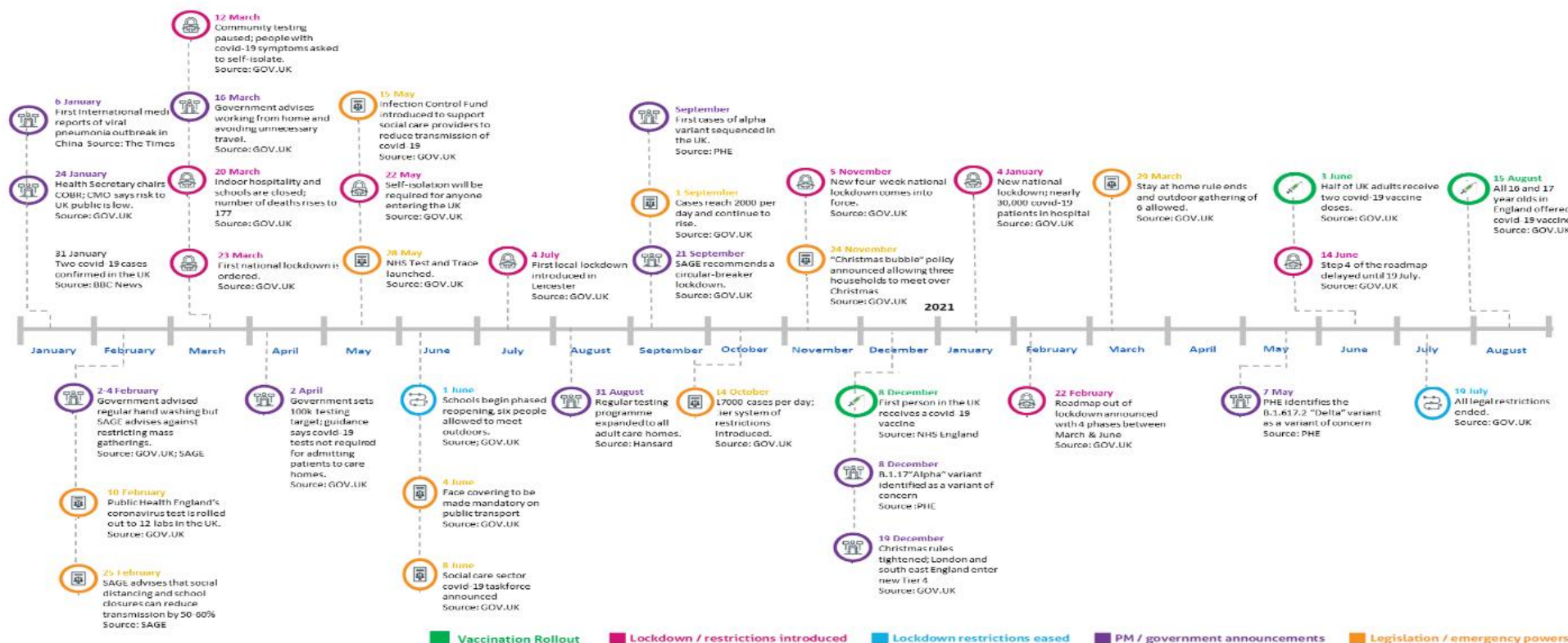
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# Performance of the COVID Response

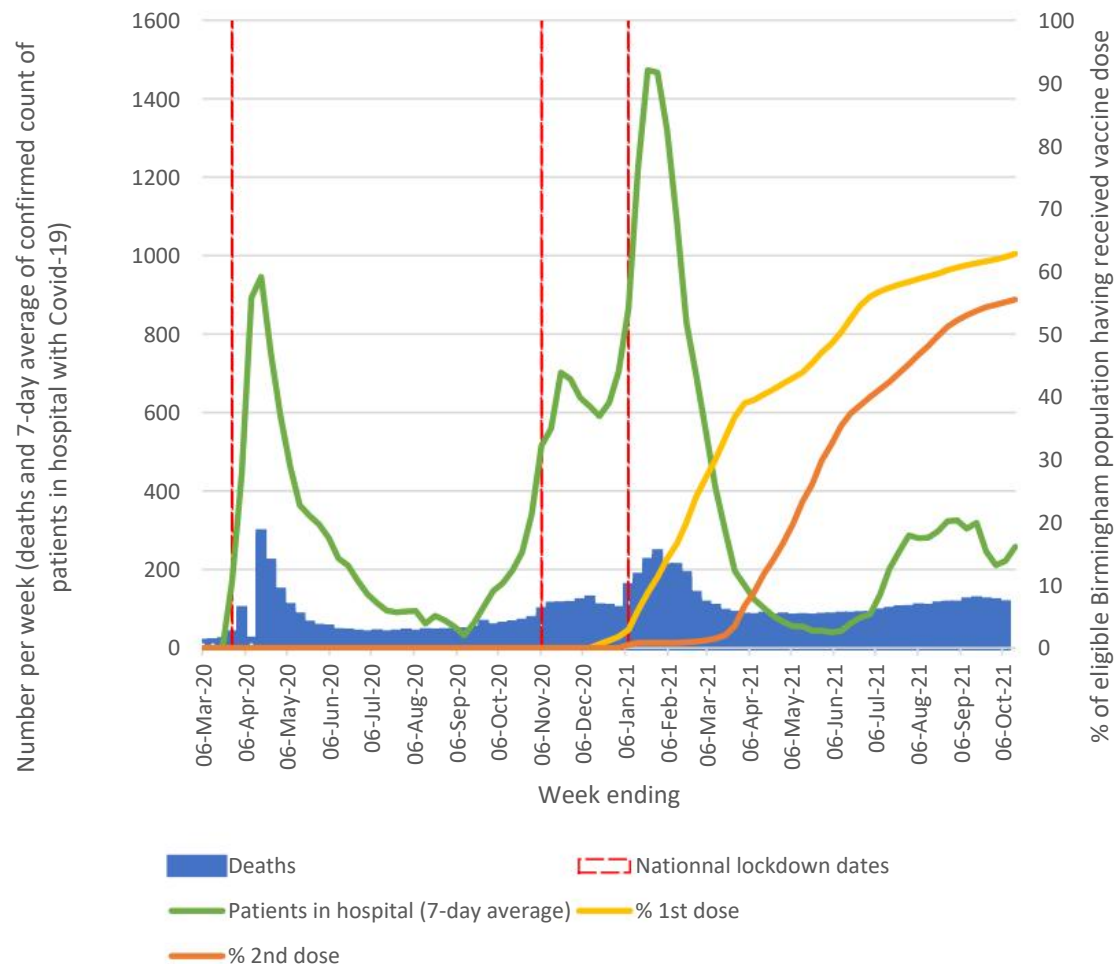
## Timeline of the Response (adapted from 1,2)

(from 6 Jan 2020 to 15<sup>th</sup> August- showing key milestones/national events- lockdowns, vaccination roll out, school reopen and the lifting of restrictions)





# COVID-19 Hospital Admissions, Weekly Deaths & Vaccine Uptake in Birmingham

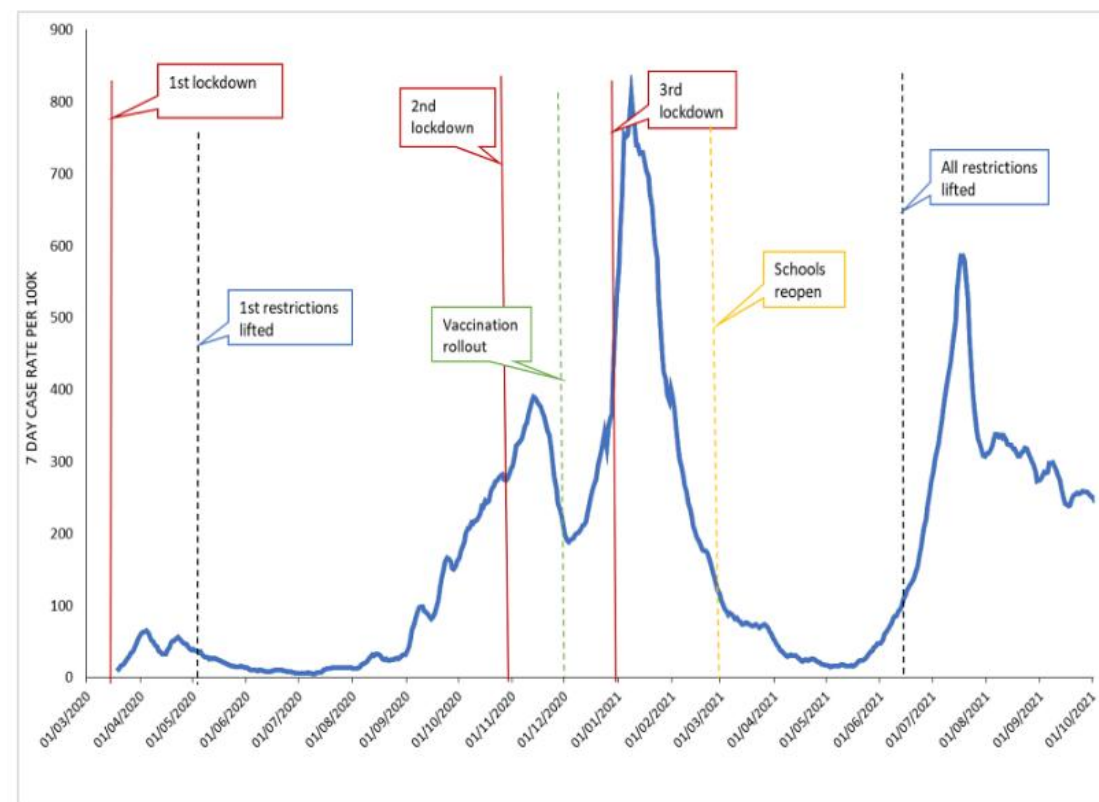


- The **third wave shows significantly more patients in hospital than in the first wave, with deaths equally remaining high** during this period. Lockdown measures were reinstated and Covid-19 **vaccination commenced early December**, with increasing uptake in 2021.
- Approaching spring, the numbers of patients in hospital and deaths had significantly declined, although hospital patient numbers increased again around August 2021, but not to similar levels at the peak of the pandemic. Significantly deaths remained comparably low. Lockdown restrictions was lifted in July.

# COVID-19 Case Rate Summary

- COVID-19 case rates peaked Jan/Feb 2021 (highest peak), around the 3<sup>rd</sup> Lockdown- The rate in Birmingham (811.3/100K) was above the national average (652.3/100K) – around 20% higher
- Following this, case rates dropped significantly between March and July 2021 (mainly because of various interventions)
  - Masks; social distancing; and hand hygiene.
  - National Lockdown continued.
  - Schools reopened but mainly by remote learning
  - Roll-out of vaccination, initially in older age/priority groups, then in other age groups in the population
- Case rates dropped during school holidays, but increased again with school resumption in early September. However, the case rate in Birmingham (298/100K) was lower than for England (347.5/100K) 7<sup>th</sup> September.

## 7 Day Case Rates Trend Chart: 1st March 2020 to 1st October 2021

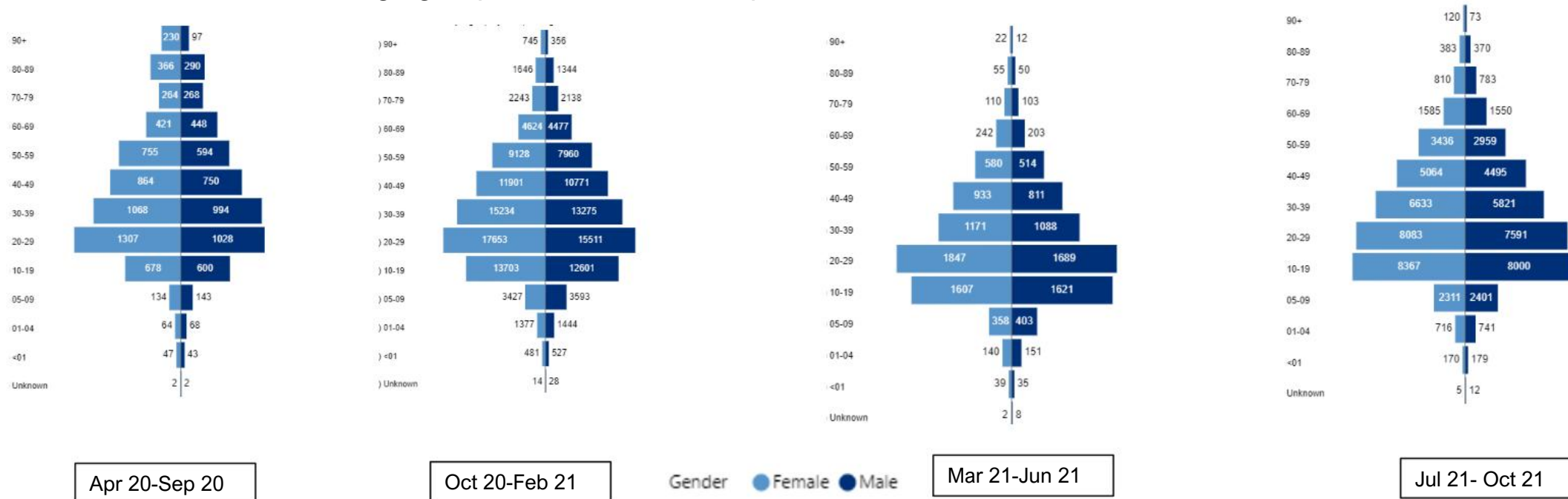


COVID-19 case rates (per 100K) in Birmingham and England		
Key dates (lockdown/schools reopen)	Birmingham	England
04-Apr-20	64.5	35.9
14-Nov-20	389.8	275.2
08-Jan-21	811.3	652.3
18-Jul-21	586.4	511.1
07-Sep-21	298	347.5

Source: PHE Situational Awareness Explorer; GOV.UK

# Age and Gender Trends – Case Rates

- Throughout the pandemic, across all age groups there were **more female cases than males**
- In the **first 9 months** of the pandemic, **the number of cases in the older age groups (65+) were significantly high**
- In the **second 9 months** of the pandemic, **the number of cases increased in all age groups except 80+ age group**
- In the **second half of the pandemic**, there was a **significant rise in cases in children and young adults**, with the **highest in the 20-29 age group**, and cases almost doubling in the latter period
- The 30-49 and 10-19 age groups followed a similar pattern



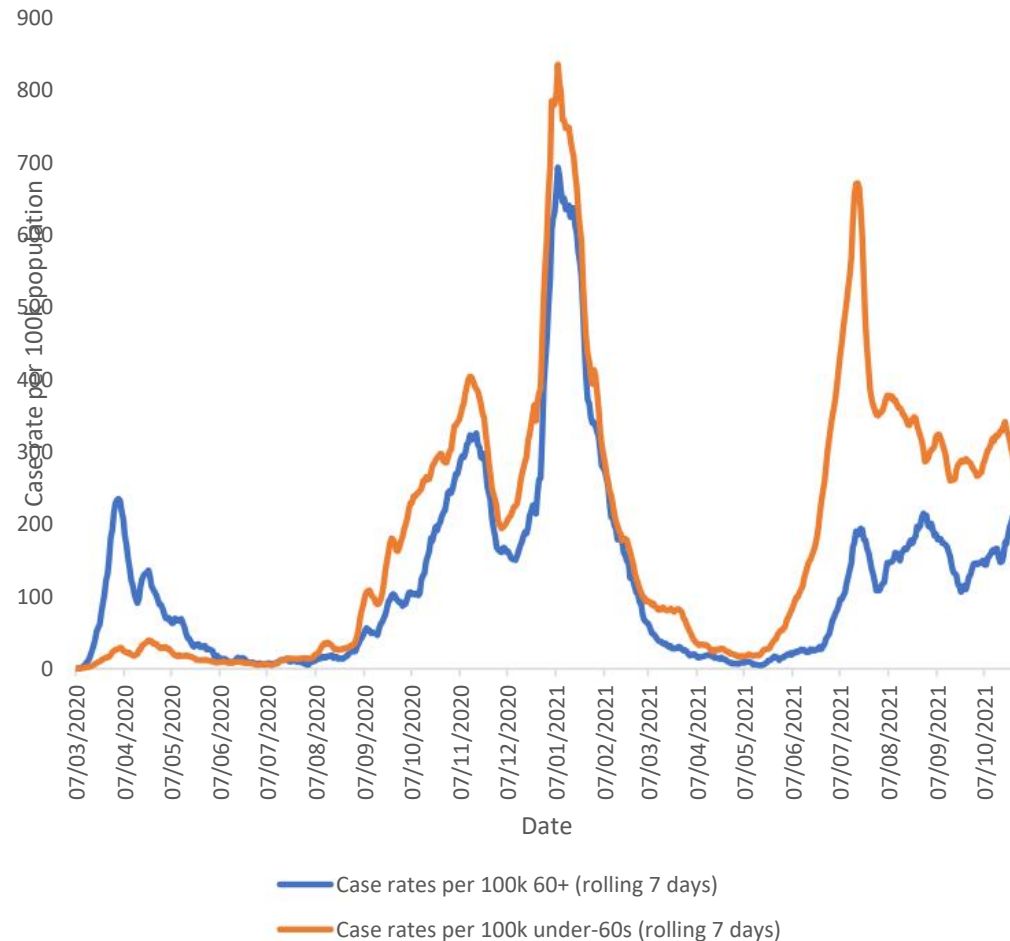
Source: PHE Situational Awareness Explorer

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# COVID-19 Case rates (per 100k population) in under-60s compared to 60+ trend chart

Case rates per 100k population in Birmingham

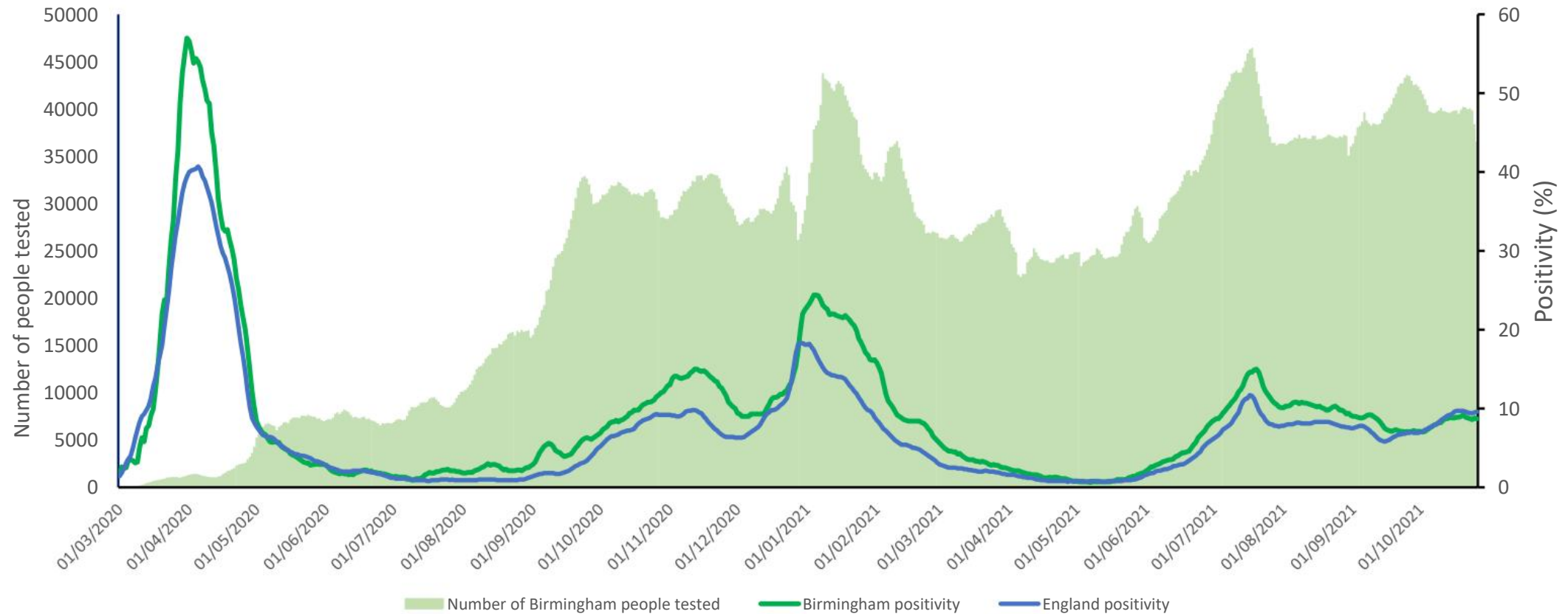


- The **60+ case rates were higher than other age group** at the beginning of the pandemic and continued to rise, peaked higher than in under-60s, peaking in early April 2020 at 234.7
- **By summer of 2021, rates in the 60+ population had been surpassed by the under-60s.**
- Subsequently the trends for over-60s has been like the under-60s, but at a consistently lower rate.
- The trend continues to demonstrate fluctuations in the case rates over the months.

Source: GOV.UK

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# PCR Tests (Numbers tested and positivity)



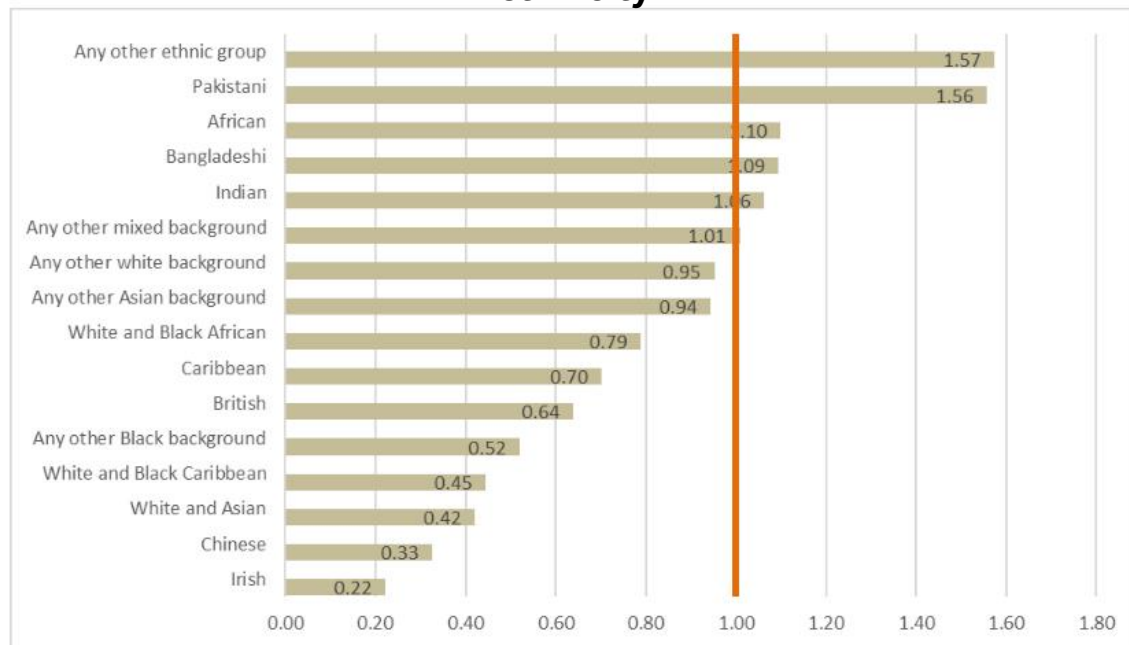
- PCR positivity in Birmingham has been consistently higher than England through most of the pandemic
- With more testing, PCR positivity peaked in November 2020 and also in January 2021 (with positivity between 16-24%)
- Positivity peaked around July at 13.7%, with increasing case rates reported.
- By end of September 2021, positivity was 7.1% and the England rate was slightly higher during this period.

Source: GOV.UK

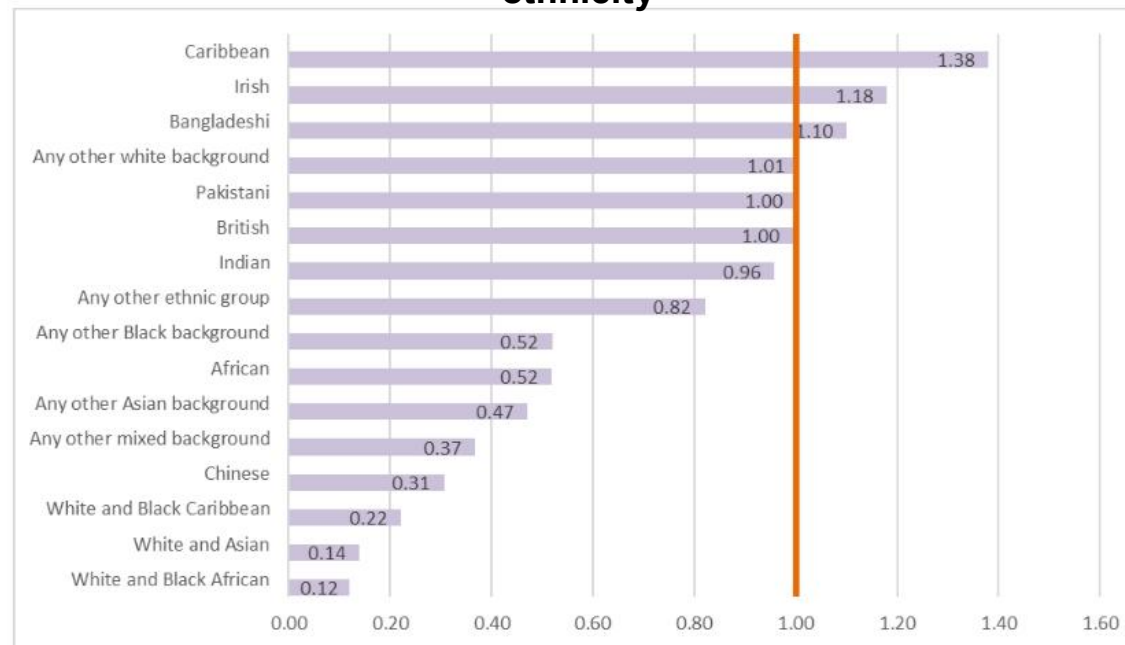
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# Covid-19 cases and deaths in Birmingham (by ethnicity)

Relative Risk of covid-19 cases and resident population by ethnicity



Relative Risk of covid-19 deaths and resident population by ethnicity



This chart highlights the disparity between the relative risk of cases and deaths in different ethnic groups. As illustrated above, while some ethnic groups (Caribbean, Irish) had a low relative risk of having COVID for their population, they recorded a higher relative risk of dying from COVID, for example the Irish were about 78% less likely to have COVID, they had about 18% higher relative risk of dying from the disease.

Source: Excess Mortality report, September 2021

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# Strategies to Live with COVID

(December 2021 – September 2021)



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# Rationale - Living with Covid-19 Strategy

- The evidence from the emergency phase has further underscored the inequities across Birmingham. The pandemic has **uncovered and aggravated long-term inequalities**, and **the multi-dimensional consequences of the pandemic**
  - Although the number of cases has begun to decrease, the pandemic has not ended
  - Possible Scenarios of evolution of the pandemic will be considered' A key component of the implementation approach is a commitment to adjusting and making decisions in response to new information and changes in context to ensure that lessons from implementation are incorporated to evolving scenarios.
  - Given the variations in outcome and impact, the strategies for living with COVID is necessarily **varied and targeted to the different populations and communities.**
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# Key strands of the Strategies

The key strands of action to live with Covid and minimize illness and death set out in this strategy are:

- Maintain the specialist public health function and response within the Council and within the newly formed UKSHA
- Continue to develop and improve the use of data, intelligence and insight to improve the understanding of inequalities and poor uptake of vaccine and risk reduction interventions.
- Bring a coherent approach to the ongoing support needs of people isolating due to Covid to avoid destitution and reduce the risk of onwards transmission.
- Maintain and evolve community engagement mechanisms into sustainable relationships that address the challenges of 'Covid fatigue' and vaccine hesitancy as well as provide timely intelligence to better understand challenges and issues in our communities.

# Further details- Living with Covid -19 Strategy

- Review and develop a new approach to living safely with Covid-19
- Focus primarily on the public health response and will set out clear response to the pandemic in a non-emergency response phase
- Address the mechanisms for strengthening, mutually reinforcing or joint strategies with other agencies.
- Birmingham faces additional challenges in this phase because of its global trade, education base and the international events hosted in the city, including the Commonwealth Games
- Span from 1 December 2021 (Winter) to 30 September 2022 (Autumn), by which time it is anticipated that vaccination both domestically and internationally will be established enough to contain the pandemic.
- Funded through the COMF Funding reserves agreed in the profiling of this ringfenced grant up to the end of September 2022.
- This will not include the work on Covid-19 recovery and the NHS clinical response
- The strategy will also articulate the arrangements for transitioning the Test and Trace team to the wider 'business-as-usual' public health division team
- Conducted a rapid internal review of the learning from the last 18 months and the current policy landscape. The progress made in implementation of the Local Outbreak Management Plan (LOMP) and performance of other response interventions including any challenges that emerged, the lessons learned and the resilience capacities that enabled the Birmingham response informed the strategies