Report to:	Birmingham Health and Social Care Overview and Scrutiny Committee
Date:	19 May 2020
TITLE:	CORONAVIRUS – public facing data sources
Presenting Officer	Elizabeth Griffiths, Assistant Director of Public Health

Report Type:	Information report

1. Purpose:
To provide the Committee with a verbal briefing on the available data and intelligence on the Coronavirus outbreak.

2. Recommendation
The Health and Social Care Overview and Scrutiny Committee is asked to note the contents of this report and the verbal update issued at the meeting.

3. Context
3.1 There is a range of data being collected and issued around Coronavirus at both national and local levels.
3.2 The Public Health Division has been circulating a weekly update to elected members on the latest data picture via the Cabinet Member for Adult Social Care and Health.
3.3 Whilst there is always a need for more real-time data broken down by key demographic areas, with the regular release of national data we are building up a picture of how coronavirus is affecting our communities.
3.4 As the picture of the coronavirus pandemic is changing rapidly; data is fast becoming out of date. This briefing therefore directs the Committee to publicly facing data sources; a verbal update on the latest position will be provided to the Committee at its meeting on 19 May 2020.

4. Public facing data sources
4.1 The number of coronavirus cases in the UK, i.e. the number of lab confirmed cases, is available here: https://coronavirus.data.gov.uk/ this data resource allows you to view the number of cases at a national, regional and local level.

4.2   The Local Government Association (LGA) has produced a useful data resource to track coronavirus cases in a local authority area over time. This resource can be found here: https://lginform.local.gov.uk/reports/view/lga-research/covid-19-case-tracker-area-quick-view-1?mod-area=E08000025&mod-group=AllMetropolitanBoroughLaInCountry_England&mod-type=namedComparisonGroup

4.3   It is important to note that as Birmingham has the largest population of all local authorities it is expected that it should have the highest number of cases. The cases per 100,000 population gives a better representation of how Birmingham compares to other local authority areas.

4.4   COVID-19 mortality data is available at different geographical levels and released for different periods. There are multiple different sources which report at different time periods from the date the actual deaths occurred, and different sources have different levels of detail, for example hospital death data includes ethnicity and is available relatively quickly after death; in contrast death certificates can be reported several weeks after death and do not include ethnicity data but includes postcode of residence.

4.5   The ONS releases information on the number of deaths registered weekly in England and Wales; this resource can be found here: https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/weeklyprovisionalfiguresondeathsregisteredinenglandandwales

4.6   This information is further broken down to a local authority level here: https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/datasets/deathregistrationsandoccurrencesbylocalauthorityandhealthboard

4.7   On 7 May 2020 the ONS released analysis of coronavirus deaths by ethnicity. This data resource can be accessed here: https://coronavirus.data.gov.uk/ https://www.gov.uk/government/publications/phe-data-series-on-deaths-in-people-with-covid-19-technical-summary This national level analysis shows that there is a statistically significant difference in coronavirus deaths for BAME populations compared to those of white ethnicity. This difference is partially explained by embedded inequalities around disadvantage, deprivation and underlying health conditions; however, the remaining difference is not explained in the data.