Rapid Health Needs Assessment on COVID-19

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Background

COVID-19 first emerged in China at the end of 2019. In 2020, COVID-19 rapidly spread around the globe. This resulted in the UK introducing measures to control the spread of COVID-19, with the first national lockdown introduced in March 2020.

The main components of the UK's COVID-19 mitigation have been lockdowns, restrictions on social gatherings, and requirements to socially distance, wear face coverings indoors and wash hands regularly. There have been, to date, three national lockdowns. Two of these were in 2020, and the latest commenced in January 2021 and is still ongoing.

Why a rapid health needs assessment

A Health Needs Assessment allows the identification of the needs, and unmet needs, with regards to health and healthcare within a population. This project aims to understand the health issues that may face Torbay's community in the immediate and longer-term future as a result of the COVID-19 pandemic. This rapid health needs assessment aims to capture the wider impacts of COVID-19, including the impacts of lockdown, school closures, and health system changes. This rapid health needs assessment aims to capture the short, medium and long term impacts, which can be both positive and negative. It is based on existing, emerging evidence, although the evidence base is still incomplete or speculative.

This rapid needs assessment has taken a life-course approach, in an attempt to capture the full impacts of COVID-19 on the whole population.

Methods

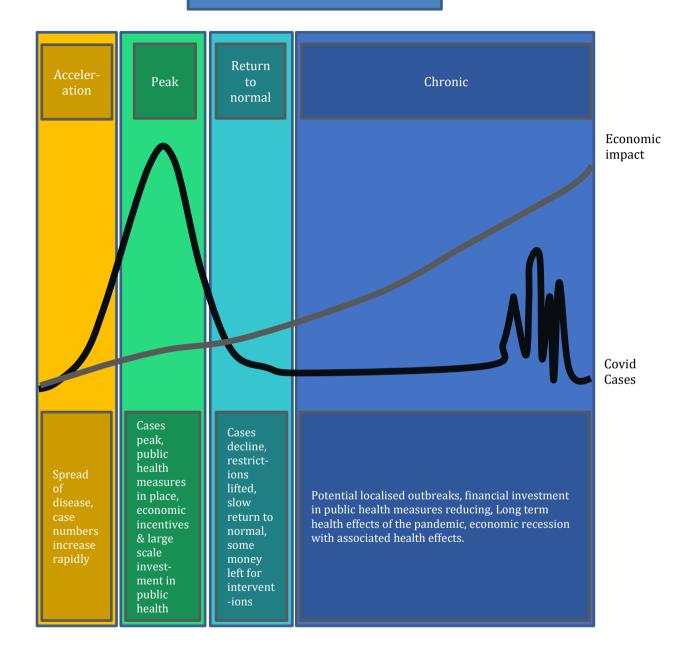
- Review of published literature, grey literature and other similar health needs assessments undertaken in other areas of England.
- Where possible, local Torbay data is provided. Where no local data was available, national trends are reported to inform the patterns that may be occurring in Torbay.

Introduction

This health needs assessment considers the immediate, intermediate and long-term impacts of COVID-19, and the impacts of COVID-19 on people's physical and mental health, people's behaviour, the wider determinants of health and the economy. For each section, recommendations are made which can be implemented immediately, in the intermediate term or in the longer term.

The impacts of COVID-19 are going to be felt for years to come. At the time of writing, in March 2021, some chronic, longer term impacts of COVID-19 attributable to the mitigation measures are already beginning to be seen, such as rising unemployment. Yet case numbers are still high, and there is still significant government support such as the furlough scheme. As cases decrease, and vaccination coverage increases, the acute phases with high peaks of case numbers will lessen, yet as government financial support decreases, the longer term impacts on health and the economy will become increasingly visible. The ongoing overlapping impacts of COVID-19 and COVID-19 mitigation measures are illustrated in Figure 1, below.

Phases of the COVID-19 Pandemic



Physical and mental health

Direct impacts

COVID-19 has had direct and indirect impacts on the population's physical and mental health, and it will continue to do so in the short and medium term future.

In Torbay since March 2020, there have been 135 deaths due to COVID-19 in Torbay, 62 of these deaths were in care homes¹. As we move forwards, and the proportion of the population who are vaccinated increases, there will likely be continued deaths due to COVID-19, although there is unlikely to be large peaks as before due to vaccinations being administered. Torbay has had COVID-19 infection rates, and hospitalisation rates below the national average throughout 2020 and early 2021, therefore despite the ageing population of Torbay, there is no indication that there will be significant increases in the number of deaths due to COVID-19 in the future.

Not everyone who gets COVID-19 will die, however there is increasing evidence on the prevalence of Long Covid², symptoms persisting beyond the period of acute illness, and the significant rehabilitation requirements for people who have been admitted to hospital, and intensive care, for COVID-19 treatment. No systematic data is yet collected on Long Covid, therefore prevalence and incidence estimates for Torbay are not available, but it is probable that around 1 in 5 will have symptoms beyond 5 weeks, and 1 in 10 beyond 12 weeks. There will be an ongoing need to provide healthcare for those with ongoing symptoms, and there may be a role for public health to explore how it can ensure that those with Long Covid and those who have been discharged from hospital after COVID-19 are provided with holistic, high quality care.

COVID-19 is associated with significant mortality and morbidity, although not all groups are affected equally. Those most at risk of the direct impacts of COVID-19 are people over the age of 70, people with pre-existing health conditions, particularly lung conditions and diabetes, those who are overweight or obese, and those living in deprivation or high risk settings such as care homes³.

Indirect effects

Physical health

There are concerns that due to a combination of public concern and anxiety around attending healthcare services, and due to the changes in provision of NHS healthcare during the pandemic, that there has been an increase in deaths due to illnesses other than COVID-19. COVID-19 has been indirectly associated with increases in the number of deaths due to malignancy which are occurring at home. In 2020, 39.6% of malignant neoplasms died at

¹ "Coronavirus (COVID-19) - Office for" https://www.ons.gov.uk/coronavirus. Accessed 5 Mar. 2021.

² "The prevalence of long COVID symptoms and COVID-19" 16 Dec. 2020, https://www.ons.gov.uk/news/statementsandletters/theprevalenceoflongcovidsymptomsandcovid19complications. Accessed 5 Mar. 2021.

³ "QCovid™ risk calculator." https://qcovid.org/. Accessed 4 Mar. 2021.

home in Torbay compared with the previous 5 years where 24.8% were dying at home, this is statistically significant.

Screening uptake has decreased in Torbay. In the final quarter of 2019/20, 74.3% of those aged 25 to 49 attended cervical cancer screening compared to 71.8% in quarter 2 of 2020/21. Urgent referrals for suspected lower gastrointestinal cancer fell significantly at Torbay & South Devon Trust during Q1 2020/21 (April to June 2020) before figures recovered to closer to normal levels over the next 2 quarters. Suspected breast cancer referrals for Torbay & South Devon Trust were comparable with Q1 of the previous year. Across England suspected lower gastrointestinal cancer and suspected breast cancers urgent referrals fell significantly.

There have also been concerns over the last 12 months that healthcare use has changed substantially. A&E attendances at Torbay and South Devon NHS Trust have fallen 32% when comparing March to December 2019 with March to December 2020. There were falls in emergency admissions for chest pains for Torbay residents during April and May 2020, numbers subsequently recovered in the rest of year to be in line with the same period of the previous year. There has been a 26% fall in elective admissions. Across the Devon STP, GP Appointments have fallen by 10.6% in 2020 compared to 2019, face to face appointments are down 28.8% although telephone/video consultations are up by 50.7%. In the short term there is a need for public health to establish whether digital exclusion is contributing to widening health inequalities as has been predicted elsewhere⁴, and if so, advocate for the provision of face to face appointments for those who need them most alongside action to support digital participation. Additionally, the delay to the provision of elective surgery may have significant impacts on quality of life, but may also contribute to increasing frailty and decreasing physical activity levels if people requiring, for example, orthopaedic surgery, are in pain and/or housebound for significant periods of time. This may also contribute to worsening mental health and social isolation for some groups of the population. Waiting list times to start treatment increased significantly across Devon CCG. As of February 2020, the median waiting time to start treatment was 8.4 weeks. By July 2020 this had more than doubled to 18.3 weeks, by December 2020 this had fallen back to 13.4 weeks. The increase in times was particularly significant in areas such as orthopaedic surgery where the median waiting time to start treatment reached 28.6 weeks by September 2020.

There has not been an increase in domestic abuse reported to the police between April and November 2020 compared to the same period last year. Nationally, the ONS have not identified a significant increase in reported cases of domestic abuse, however there has been, during COVID-19 lockdowns, an increase in demand for domestic abuse services. This has been attributed to a potential increase in severity of domestic abuse, and a decrease in other available support, such as counselling⁵. Devon & Cornwall's rate of

⁴ "Covid-19 is magnifying the digital divide - The BMJ - BMJ Blogs." 1 Sept. 2020, https://blogs.bmj.com/bmj/2020/09/01/covid-19-is-magnifying-the-digital-divide/. Accessed 5 Mar. 2021.

⁵ "Domestic abuse during the coronavirus (COVID-19) pandemic" 25 Nov. 2020, https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabuseduring thecoronaviruscovid19pandemicenglandandwales/november2020. Accessed 5 Mar. 2021.

domestic abuse in 2019/20 was 22.3 per 1000 people, which is similar to the South West average⁶.

Recommendations

Immediate	Intermediate term (3m- 18m)	Long term (>18m)
Ensure that primary and secondary care offer face to face appointments and alternatives to e-consultations for those who are digitally excluded, and target limited face to face appointments to groups at most risk of exclusion.	Monitoring health inequalities associated with uptake of e-consultations, and trends in uptake of primary and secondary care consultations in order to inform future service demand.	Monitor the long term impact of delays to elective procedures and outpatient appointments, screening services and the implementation of econsultations on health inequalities.
Build digital literacy in the local community through the use of community groups.	Ensure that screening services are adequately resourced to provide catchup services for 2021-2023 to ensure that everyone who missed screening, and monitor the impact of delays on inequalities.	
Plan for an increase in attendance at GPs and A&E as lockdown eases.	Prepare for the dual impact of Brexit and COVID-19 on the NHS and social care workforce by establishing recruitment and training processes and monitoring workforce trends.	

Mental health

With regards to mental health, nationally there have been significant concerns raised with regards to worsening mental health of the population⁷. This has not translated into an immediate rise in suicides and in Torbay - there has been no increase in number of deaths due to suicide in 2020, so this does not, at least immediately, appear to be a significant issue in Torbay, although the numbers are small.

There is however increasing concern around the immediate, intermediate and long term impacts of COVID-19 on the mental health of the population. Currently, due to COVID-19 and COVID-19 mitigation measures, there are concerns around:

⁶ "Public Health Profiles." https://fingertips.phe.org.uk/. Accessed 5 Mar. 2021.

⁷ "Trends in suicide during the covid-19 pandemic | The BMJ." 12 Nov. 2020, https://www.bmj.com/content/371/bmj.m4352. Accessed 5 Mar. 2021.

- Increasing social isolation, particularly among those with long term conditions and disabilities or older people
- Increases in reported distress, stress and anxiety⁸
- That a decrease in referrals to secondary mental health services may present with worsening mental health in the intermediate term⁹
- Across Devon CCG there were 21,550 adults in contact with mental health services and 2,190 people in contact with children and young people's mental health services.
 This is very close to pre-COVID levels. Levels did fall by approximately 10% initially during April/May 2020.
- Mental Health admissions for Torbay residents have remained consistent with previous years
- IAPT referrals have fallen 17% between March and December 2020 when compared
 to the same period in 2019. The majority of this shortfall relates to April & May 2020
 when numbers fell by almost half. Over the summer, rates were comparable to the
 previous year.
- Emergency hospital admissions for intentional self-harm in Torbay have remained fairly constant for 20/21 when compared to previous years.

Nevertheless, there is likely, in the intermediate term, to be a significant increase in mental health concerns among the population. This is a combination of new distress, anxiety and depression among the population, and potential exacerbations of existing mental health illness due to a decrease in service provision combined with external stressors which can worsen mental health conditions (job loss, debt, social isolation, anxiety and stress). This is significant for public health, because the existing low-level mental health support that is in place may not be adequate to cope with both new and existing mental health issues. A new community level mental health support offer may be required for Torbay, focussing particularly on areas of deprivation, people with long term physical and mental health conditions and children and young people.

Recommendations

Immediate Intermediate term (3m-Long term (>18m) 18m) Ensure that Torbay is As society opens up, Monitor the longer term impacts of COVID-19 and providing a social isolation establish support for older COVID-19 mitigation and loneliness support people and those who have measures of different intervention targeted at older been socially isolated so subsection of society, in people and those with that they can be supported order to inform any future disabilities / long term to reintegrate into society. pandemics and appropriate conditions. mitigation measures. Ensure that adequate bereavement counselling support is available for

⁸ "Mental health and health behaviours before and during the initial" https://jech.bmj.com/content/75/3/224. Accessed 5 Mar. 2021.

⁹ "Effects of the COVID-19 pandemic on primary care-recorded mental" 11 Jan. 2021, https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(20)30288-7/fulltext. Accessed 5 Mar. 2021.

family and friends of those who have died from COVID-19.	
Ensure mental health support is available for health and social care staff.	

Children and Young People

It is important to spotlight the impacts of COVID-19 and the mitigation measures for COVID-19 on children and young people. We do not have Torbay specific data for children available at the time of writing, but national trends are worrying, and may be specifically relevant to Torbay which has a particularly high rate of looked after children. There are therefore more children and young people in Torbay who are vulnerable to the effects of COVID-19 and its mitigation measures than there may be in other local authority areas in England. COVID-19 is also significantly more likely to impact the life-course of children and young people, whilst they are relatively protected to the immediate, direct impacts of COVID-19.

Nationally, a systematic review of observational studies¹⁰ has identified that there are currently high levels of distress, anxiety and depression among children and young people. Two studies have identified non-significant increases in suicide rates among children, and there has been a decrease in the number of attendances for self- harm and psychiatric issues. Worryingly, there has also been a 27-39% decrease in safeguarding referrals with an understandable noticeable drop in referrals from schools. For Torbay, this is particularly relevant due to the high number of looked after children in the area. There was a rise in local safeguarding referrals in the initial period after the first lockdown.

There has also been a reported increase in use of screen time by children, and a decrease in outdoor play and physical activity. 13% of parents report that their children were doing no physical activity at all during lockdown. This is significant for public health, as children who reduce their physical activity levels often do not increase them again as they go through adolescence¹¹. One positive which has emerged from COVID-19 lockdown is that there appears to have been an increase, for some families, in father involvement in caregiving.

A report specifically investigating the impact of COVID-19 lockdowns on babies and new parents identified that 7 in 10 parents faced challenges in pregnancy and in early parenting due to COVID-19¹². Reduced support for breastfeeding and parenting due to reduced pre/antenatal classes may result in reduced breastfeeding rates, and potential challenges in early years parenting (which can have significant impacts on the health of children). Closure of early years settings, including nursery and school, may contribute to reduced socialisation

¹⁰ "Impacts of school closures on physical and mental health of children" 12 Feb. 2021, https://www.medrxiv.org/content/10.1101/2021.02.10.21251526v1. Accessed 5 Mar. 2021.

¹¹ "Physical activity and health in adolescence - NCBI - NIH." https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4953112/. Accessed 5 Mar. 2021.

¹² "The Babies in Lockdown report | Best Beginnings." 5 Aug. 2020, https://www.bestbeginnings.org.uk/news/the-babies-in-lockdown-report. Accessed 5 Mar. 2021.

of children, which may affect childhood development. In the intermediate term, a lack of child care may result in less parental employment, subsequent income decreases, and likely impacts on gender inequality, with mothers more likely to reduce their income and increase their caregiving¹³.

Childhood immunisation rates in Torbay appear to have remained constant so far, and do not appear to have dropped due to COVID-19. For example, 12-month and 24-month immunisation rates have not significantly reduced. For 12-month olds in the first quarter of 2020/21 95.1% had MenB immunisation, and in the second quarter of 2020/21 this was 97.5%. In the first quarter of 2020/21, 97.0% of five year olds had received one MMR, and 93.1% had received two MMRs, 92.2% had received Diphtheria, Tetanus and Polio and 96.7% had received Haemophilus B / Meningitis C. In the second quarter of 2020/21, 96.4% of five year olds had received one MMR, 92.3% had received two MMRs, 89.8% had received Diphtheria, Tetanus and Polio and 96.7% had received Haemophilus B / Meningitis C.

Recommendations

Immediate	Intermediate term (3m- 18m)	Long term (>18m)
Consider the immediate implementation of enhanced parenting support for new, at-risk parents (single parents, young parents, those who have been domestically abused). Such an intervention could capture those who have missed antenatal and prenatal support during COVID-19, and struggled with early parenting during lockdown.	Set up enhanced support for physical activity for children and young people as they return to school and education, to attempt to prevent a decline in physical activity levels among children and young people long term.	Ensure that a comprehensive review is undertaken to ensure that the environment and education provision in Torbay encourage physical activity among children and young people, equally for all groups.
Establish easy-access, community led mental health support for children and young people as we emerge from lockdown. This can be short term to support resocialisation.	Monitor the uptake of childhood vaccinations, particularly to identify any inequalities in uptake which emerge.	Develop a long term support offer for children and young people to develop skills for employment and to have support to obtain jobs, in the recovery from the COVID-19 pandemic.
Monitor the impact of lockdown and emerging from lockdown on safeguarding, particularly with the return to school which has just commenced.	Co-design bespoke support services for looked after children affected by the pandemic (potential increase in numbers) as they will have specific health	

¹³ "The impact of COVID-19 childcare closures and women's labour" 22 Jan. 2021, https://voxeu.org/article/impact-covid-19-childcare-closures-and-women-s-labour-supply. Accessed 5 Mar. 2021.

Healthy Behaviours

COVID-19 mitigation measures, such as lockdowns, have affected the behavioural patterns of society.

Nationally, alcohol intake has increased, with 1 in 6 people drinking more often. Torbay, according to Fingertips¹⁴, had high alcohol specific mortality in 2017-19 (16.9 per 100,000), and according to latest data 25.2% of adults were drinking over 14 units a week, and 13.4% of adults were binge drinking. The higher rates of alcohol intake in Torbay prior to COVID-19 may therefore mean that Torbay's population may have increased alcohol intake even further. It is not yet known whether this pattern of increase alcohol intake will continue once lockdown measures are relaxed, however steps need to be taken in the intermediate term to account for the impact of excess alcohol intake on the health of Torbay's population. Referrals to locally commissioned substance misuse services during the COVID-19 period have remained relatively consistent with levels pre-COVID.

Smoking has decreased over the time period of the COVID-19 pandemic¹⁵. A survey undertaken by Action on Smoking and Health found that 300,000 adults may have quit smoking during the pandemic¹⁶. A further 550,000 adults have tried to quit, and 2.4 million adults have cut down on smoking. A quarter of former smokers said they were less likely to resume smoking due the pandemic; only 4% said they would be more likely to relapse due to the pandemic. Therefore, overall an increase in successful smoking cessation could be expected due to the pandemic, this may result in increased demand for smoking cessation services.

Sport England have been undertaking weekly surveys of the population's physical activity behaviour throughout the COVID-19 lockdowns. Physical activity behaviours have been disrupted, and many people reported struggling to stay active during lockdown, 68% of people reported that their physical activity levels had dropped¹⁷. A decrease in physical activity levels among the population may contribute to increasing overweight and obesity in the population, and widening inequalities due to differences in physical activity according to level of deprivation¹⁸.

¹⁴ "Public Health Profiles." https://fingertips.phe.org.uk/. Accessed 5 Mar. 2021.

¹⁵ "Mental health and health behaviours before and during the initial" https://jech.bmj.com/content/75/3/224. Accessed 5 Mar. 2021.

¹⁶ "Press Releases - Action on Smoking and Health." https://ash.org.uk/category/media-and-news/, Accessed 5 Mar. 2021.

¹⁷ "Coronavirus | Sport England." https://www.sportengland.org/how-we-can-help/coronavirus. Accessed 5 Mar. 2021.

¹⁸ "Understanding the impact of Covid-19 - Amazon AWS." 19 Jan. 2021, <a href="https://sportengland-production-files.s3.eu-west-2.amazonaws.com/s3fs-public/2021-01/Understanding%20the%20impact%20of%20coronavirus%20-%20January%202020.pdf?i3nGv3dZ.w8cL3ioOOc3k1Ky1kNFUH3F. Accessed 5 Mar. 2021.

Recommendations

Immediate	Intermediate term (3m- 18m)	Long term (>18m)
Monitor trends on alcohol consumption as lockdown is eased.	Increase awareness of 'at risk' alcohol consumption in the population and support behaviour change before significant impact on health. Ensure sufficient service provision for problematic drinking.	Monitor the impact of COVID-19 lockdown and other mitigation measures on inequalities in behaviours including physical activity, smoking and alcohol intake.
Continue to provide smoking cessations services to ensure that those newly motivated to quit smoking can access evidence based support.	Establish a physical activity offer for least affluent members of the community to support them to increase physical activity as lockdown is lifted.	

Wider determinants of health

- Historically, Torbay has had lower rates of air pollution due to fine particulate matter.
 Car use across England has fallen significantly and the first lockdown led to a 42% decrease in surface-level nitrogen dioxide pollution in the UK. There is no local data for the same lockdown period.
- A third of people within Torbay live in area that is amongst the 20% most deprived in relation to indoor deprivation for England. Indoor deprivation measures the quality of housing, specifically the proportion of houses that do not have central heating and the proportion of social and private homes that fail to meet the Decent Homes standard. There was a national stay of repossession during April to September 2020, there were a small number of repossessions during October to December 2020 but these were far below numbers in the same period of the previous year.
- Total recorded crime decreased by 8.7% in Devon and Cornwall during the 12 months to 30th September 2020 when compared to the previous year. This compares to a 6.6% fall nationally. Thefts fell by 25% when compared to the previous year, theft accounts for 22% of crimes across Devon & Cornwall. There was a 7% rise in Anti-social behaviour incidents, this increase may reflect the reporting of breaches to public health restrictions.
- The number of children in school within Torbay during January to February 2021 was between 20% and 25% of the school population. National studies have indicated that the children of higher income parents are more likely to undertake more home schooling than those of lower income parents, suggesting that there may be an increased need as we emerge from lockdown to support children from lower income families.

Recommendations

Immediate	Intermediate term (3m- 18m)	Long term (>18m)
Establish infrastructure to support walking and cycling when lockdown eases to encourage active travel - this improves air quality and increases physical activity.	Torbay could implement real-time evaluation of the health and well-being effects of COVID-19 on the wider determinants. This could be in the form of quantitative data, or in the form of qualitative data obtained through listening exercises / focus groups. ¹⁹	Monitor the impact of lockdown on education attainment levels, and implement strategies in conjunction with education which support catch up programmes, and employment skills development to mitigate the impacts of the pandemic on widening inequalities.
Monitor crime levels as we emerge from lockdown, and consider providing residents with information on how they can emerge from lockdown safely to reduce distress and anxiety.		

Economic impacts

The COVID-19 response to date has cost the government significantly. To pay for this, the Office for Budget Responsibility (OBR) has stated that borrowing will be £355bn for the current financial year (April 2020 to April 2021), the highest level since World War Two, before falling back to £234bn over the next year²⁰. The pandemic has reduced the governments' tax income due to increases in unemployment and people on furlough. The long term impact on public spending is still unclear²¹.

The COVID pandemic is an unprecedented economic shock for the UK with several impacts:

- Some form of recession is likely due to increased borrowing and decreased government tax income.
- UK GDP fell by 22% in the first half of 2020, the largest fall in the last 400 years, and is still 10% below where the UK was expected to be before COVID in real terms.

¹⁹ "Public health research in the UK to understand and mitigate the" https://jech.bmj.com/content/jech/early/2020/10/06/jech-2020-214997.full.pdf. Accessed 5 Mar. 2021.

²⁰ "Budget 2021: How much will it cost the UK and how will we pay" 3 Mar. 2021, https://www.bbc.co.uk/news/business-52663523. Accessed 5 Mar. 2021.

²¹ "Budget 2021: How much will it cost the UK and how will we pay" 3rd March 2021, https://www.bbc.co.uk/news/business-52663523. Accessed 5th March 2021

- The UK government launched a program of financial measures to support the labour market and companies suffering from COVID-19, with the primary focus to support economic activity and employment in the near term, as well as to reduce longer term economic damage²².
- Economic downturns generally reduce wages, income and wealth and increase unemployment²³, with their respective effects on public health, and particularly affect lower income households and young people.
- In addition, these effects (such as unemployment) can also have impacts on mental health and wellbeing.
- Unemployment tends to be persistent, the unemployment rate took seven years to return to pre-recession levels after both previous recessions.
- During periods of high unemployment, the number of people without a job for prolonged periods of time increases. This makes it even more challenging for people to become re-employed.²⁴
- Unemployment is likely to hit youth hardest, and also Torbay's economy is particularly vulnerable to the long term impact of COVID-19 due to the high proportion of jobs in hospitality and tourism.

Torbay faces acute economic and social challenges. Gross Value Added (GVA) [1] per head is one of the lowest in the country, and expected to contract 9.7% during 2020 as a consequence of Covid-19. Torbay's current GVA per head is £14,599 (2018) this is 48.8% lower than the UK average and is the lowest in England. Torbay is the 48th most deprived local authority area in England with 27.4% of the population living in the most deprived areas. Torbay has higher levels of youth unemployment than neighbouring areas. In November 2020, there were 1000 18-24 year olds in Torbay claiming universal credit. This is 11.8% of the population, which is above the South-west regional (7.2%) and Great Britain (9.0%) averages, and has increased since 2019, before COVID-19.

Evidence suggests that these existing challenges are already, and will continue to be, exacerbated by the negative economic impact of COVID-19. A report by the Institute of Fiscal Studies (2020)²⁵ identified three potential dimensions which may influence how vulnerable a local authority area is to the impacts of COVID-19: health, jobs and families. In

5th March 2021.

<u>ramsden.pdf?la=en&hash=FA29F3EE33EF0439FF20F0EBE91E55B4F64DA9B6</u>. Accessed 5th March 2021.

²² "The potential long-term effects of Covid - Bank of England." 17 Nov.. 2020, https://www.bankofengland.co.uk/-/media/boe/files/speech/2020/the-potential-long-term-effects-of-covid-speech-by-dave-ramsden.pdf?la=en&hash=FA29F3EE33EF0439FF20F0EBE91E55B4F64DA9B6. Accessed 5th March 2021.

²³ "The potential long-term effects of Covid - Bank of England." 17 Nov.. 2020, https://www.bankofengland.co.uk/-/media/boe/files/speech/2020/the-potential-long-term-effects-of-covid-speech-by-dave-ramsden.pdf?la=en&hash=FA29F3EE33EF0439FF20F0EBE91E55B4F64DA9B6. Accessed

²⁴ "The potential long-term effects of Covid - Bank of England." 17 Nov.. 2020, https://www.bankofengland.co.uk/-/media/boe/files/speech/2020/the-potential-long-term-effects-of-covid-speech-by-dave-

²⁵ "The geography of the COVID-19 crisis in England - Institute For" 15 Jun. 2020, https://www.ifs.org.uk/publications/14888. Accessed 5 Mar. 2021.

this report, Torbay was identified as an area which was particularly vulnerable on all three dimensions. For example, the local economy is dependent on the face-to-face service sector which accounts for 68.4% of all jobs. Yet, in July 2020 2,600 job losses occurred in Torbay, many of these in hospitality and tourism. In 2020, Torbay was ranked the most deprived local authority in the South West, and due to the economic impacts of COVID-19 is likely to be on the areas of the South West which struggles most with recovery. The Joseph Rowntree Foundation²⁶ has undertaken a study analysing the parts of Britain at most risk of surging poverty as a result of the COVID-19 crisis. The report identified that, "Not every area has been affected equally by the economic consequences of COVID-19. Many places hit hardest are those that went into the health crisis with the weakest economies. This includes many seaside towns..." (page 1, 2020).

As of 31st January 2021, 20% of eligible employments were furloughed in Torbay. This equates to approximately 10,700 employments in Torbay. This is a decrease from the peak in June 2020 when 35% of eligible employments were furloughed (19,300 employments). Since April 2020, the number of unemployment claimants has been more than double the number of claimants on the equivalent month of the previous year. The number of claimants in December 2020 was 5,455.

The economic impacts of COVID-19 for Torbay are likely to include:

- Short term job losses followed by increases in unemployment, poverty and homelessness.
- A significant challenge with regards to employment in an upcoming recession, with a particular impact on young people and those facing extra challenges such as those with mental health difficulties and learning disabilities.
- A decrease in public funding, and a subsequent decrease in public services, including potential decreases to the public health budget.

Recommendations

Immediate	Intermediate term (3m- 18m)	Long term (>18m)
Short term employment support and opportunities, making effective use of those on Furlough and ensuring that job vacancies in public health and health and social care are tailored to those currently unemployed. This could be supported by the Department of Work and Pensions.	Establishing employment support hubs, which support the unemployed into work, and also help with stress, evictions / housing and debt advice.	Public health should support the creation of jobs in renewables and green energy to support a green economic recovery and improvements to health.

²⁶ "UK Poverty 2020/21 | JRF." 13 Jan. 2021, https://www.jrf.org.uk/report/uk-poverty-2020-21. Accessed 5 Mar. 2021.

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Summary

The conclusions of this Health Needs Assessment are that COVID-19 has already harmed the health of Torbay's population, but whereas Torbay was not as substantially affected by COVID-19 as other areas of England in the acute phases of COVID-19, it is one of the areas of England most vulnerable to longer term impacts and the impacts of economic damage and upcoming recession. There are however potential strategies which could be implemented immediately, or in the short term, which may help with mitigating some of the effect of COVID-19 on the health of Torbay's in the near future, and Torbay's public health team should consider which of these areas to focus on as an immediate priority.