Section Heading	Determinant of Health/ Wellbeing	Description of COVID-19 Impact	Effect on Health (Positive/ Negative/ Unclear)	Likelihood of impact	Intensity/ Severity of Impact on Health	Possible Timing of Impact	Rationale	Mitigation or Action	Outcomes or Indicators to Monitor
Alcohol and Tobacco Consumption	Alcohol intake	Increase in alcohol intake	**Negative**	**Probable**	**Moderate**	**Short-term**	A survey of over 2,000 people commissioned by Alcohol Change UK found more than a quarter of current and former drinkers thought they had drunk more during lockdown. Heavier drinkers were more likely to say they had increased the amount they drank. https://alcoholchange.org.uk/blog/2020/drinking-in-the-uk-during-lockdown-and-beyond. Local services are seeing Increasing referrals for high risk problems, particularly homeless people	Joint work with services to map increase in referrals, review accomodation and implement some digital solutions. Established Recovery group to review progress meets weekly. Successful bid for accommodation and support to MHCLG to prevent homelessness	Number of alcohol users in treatment, treatment completion without presentation, Alcohol related A&E and hospital admissions, CIN/CP referrals for parents linked to drug/alcohol use
	Smoking	Increased motivation for smokers to quit and stay smoke free	**Positive/ Opportunity**	**Possible**	**Major**	**Short, Medium and Long term**	Data from the UCL Smoking Toolkit Study show that in England in 2020 there has been an increase of nearly a quarter (22%) in quit attempts compared to 2019 and an increase of almost two-thirds in the quitting success rate from 14% to 23%, the highest since at least 2007	Using the population's increased awareness of health and wellbeing to continue a drive towards healthy living including a renewed focus on stop smoking and switching to harm reducing devices.	Smoking prevalence and differences in smoking prevalence between groups
Black, Asian and Minority Ethnic (BAME) Groups	Access to information	Difficulties with keeping up to date with information about keeping themselves and others safe	**Negative**	**Probable**	**Moderate**	**Short-term**	A survey of the general public conducted by Healthwatch Worcestershire in collaboration with the NHS and Worcestershire County Council found that more respondents in the 'white other' group found it difficult to keep up to date with information about keeping themselves and others safe compared with 'White British' respondents. Significantly more respondents in the 'White Other' group (13%) said they had additional communication needs in comparison with 'White British' respondents (7%)	Continue to draw on language and translation services. Ensuring a responsive translation when necessary.	

	Ethnicity	BAME groups at greater risk of infection and more vulnerable to severe illness and death from Covid-19	**Negative**	**Probable**	**Major**	**Short-term**	During the first wave of the pandemic the death rate from COVID-19 was higher among people of Black, Bangladeshi and Pakistani, Indian, and Other ethnicity compared with those of White ethnicity. Nationally, the mortality rate from COVID-19 has been highest among black men. Even after taking into account other factors that are likely to affect risk of exposure and dying once infected the rate of death involving COVID-19 among black males was twice as great as comparable white males.	Continued protection against Covid-19 by use of facemasks, social distancing, handwashing. etc Nationally, Public Health England have recommended the following actions: Improve ethnicity data collection and recording including collection of ethnicity data at death certification Support community participatory research Improve access, experience and outcomes of NHS, local government and integrated care systems by BAME communities Accelerate the development of culturally competent occupational risk assessment tools Fund, develop and implement culturally competent COVID-19 education and prevention campaigns Accelerate efforts to target culturally competent health promotion and disease prevention programmes Ensure that COVID-19 recovery strategies actively reduce inequalities caused by the wider determinants of health	Mortality rates and number of Covid-19 cases among non-White ethnic groups
Business and Economy	Strength of the Economy	Decline in GDP across all sectors due to lockdown restrictions and slow recovery	**Negative**	**Probable**	**Major**	**Short, medium and long term**	Nationally, the economy in terms of the GDP shrunk by around one quarter between February and April. Between May and July it recovered somewhat but remained smaller than before the pandemic, at around a 12% decrease on February's figures. At the time of writing the most recent economic figures showed more signs of recovery, retail sales are above pre-pandemic levels and there was a large take up of the eat out to help out scheme in August (https://www.ons.gov.uk/economy/grossdomesticproductgdp/datasets/monthlygdpandmainsectorstofourdecimalplaces)	Supporting businesses working in most vulnerable industries.	GDP by sector, number of employees and businesses in Worcestershire working in sectors particularly affected by any future Covid-19 related restrictions are due to slow recovery, number of local businesses temporarily closing or losing business, local business confidence.
	Better transferable skills	People taking on new skills, responsibilities and working practices since the Covid-19 pandemic	**Positive/ Opportunity**	**Possible**	**Moderate**	**Short, medium and long term**	Among those who had a paid job or did casual work for payment, over 60% have had to work in new ways. About a quarter of workers have indicated that they have had to use new equipment, with similar proportions saying they have had to learn new skills and experience have had to take on new responsibilities (https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandwellbeing/bulletins/coronavirusandthesocialimpactsongreatbritain/25september2020).	Ensuring / encouraging employees to keep using the new skills that they have learned in response to Covid-19 and for employers to use employees in their new roles. Encouraging working from home at least some of the time if beneficial to both businesses and employees in terms of work-life balance – it is recognised that not all employers experience better work / life balance or enjoy the adaptation to working from home.	Proportion of people working from home; proportion of people learning new skills, taking apprenticeships, or working in new ways.

	Risk/Opportunity	Description	Impact	Likelihood	Severity	Timescale	Evidence	Mitigation	Data source
	Inability to work amongst key workers	Key workers being unable to work due to accessibility issues, contracting Covid-19 or having symptoms and unable to get a timely, nearby test, lacking childcare or being at risk due to being in a vulnerable group.	**Negative**	**Probable**	**Major**	**Short-term**	The ONS has reported that: 15% of key workers were at moderate risk from coronavirus (COVID-19) because of a health condition. The most common health conditions reported were heart problems (6%), followed by chest and breathing problems (5%). Proportions at risk are similar among non-key workers, at 14%. 31% of key workers have children aged between 5 and 15 years; 16% have children aged 4 years or under. 14% of those in key public service occupations reported being able to work from home. (https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/earningsandworkinghours/articles/coronavirusandkeyworkersintheuk/2020-05-15)	Ensuring key workers are safe, mentally and physically well, have childcare and family support, and able to continue their duties going forward as Covid-19 cases potentially increase in the future and in the wake of any future further national or local lockdowns. WCF to continue to support children of key workers where educational settings need to close.	Number of key workers testing positive for Covid-19, number of key workers able to access and do their job
	Better work/life balance	New working practices	**Positive/ Opportunity**	**Possible**	**Moderate**	**Short, medium and long term**	According to the Opinions and Lifestyle Survey (Covid-19 module), 16 to 20 September among those who had a paid job or did casual work for payment, over 60% have had to work in new ways. In April approximately 20% of respondents had been asked to work from home. However, it is recognised that not all employees experience better work / life balance or enjoy the adaptation to working from home.	Ensuring / encouraging employees to keep using the new skills that they have learned in response to Covid-19 and for employers to use employees in their new roles. Encouraging working from home at least some of the time if beneficial to both businesses and employees in terms of work-life balance – it is recognised that not all employees experience better work / life balance or enjoy the adaptation to working from home.	Proportion of people working from home
Carers	Caring role (unpaid)	Having more caring responsibilities for example caring for older relatives	**Negative**	**Probable**	**Moderate**	**Short-term**	In April, around one-third (32%) of adults who reported giving help or support, were helping someone who they did not help before the pandemic. One-third (33%) also reported giving more help to people they helped previously (https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/morepeoplehavebeenhelpingothersoutsidetheirhouseholdthroughthecoronaviruscovid19lockdown/2020-07-09).	Work is continuing to identify appropriate mitigations	Census of Population 2011 GP Patients Survey Carers List Survey of Adult Carers in England
	Caring role (unpaid)	Increased isolation for people who have been shielding/caring for someone who has been shielding	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from carers to local support services and research by Carers UK indicates some are feeling increased isolation	Proactive calls to carers	Percentage of adult carers who have as much social contact as they would like (Survey of Adult Carers in England)
	Caring role (unpaid)	Carers unable or unwilling to access respite/carer breaks leading to increased carer stress and anxiety	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from carers to local support services	Work is continuing to identify appropriate mitigations	Carers using respite breaks, Feelings of stress (Survey of Adult Carers in England)
	Caring role (unpaid)	Prolonged anxiety - carers being very anxious both about their own health and ability to care, and keeping the person they care for safe	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from carers to local support services	Work is continuing to identify appropriate mitigations	Measures of wellbeing (Survey of Adult Carers in England)

	Caring role (unpaid)	Anxiety about the health and safety of loved ones in care homes; frustration and concern at not being able to see them; breakdown of important family relationships (e.g. where the person in the care home has dementia); impact on wellbeing of the person in the care home	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from carers to local support services	Work is continuing to identify appropriate mitigations	Carer-reported quality of life score (Survey of Adult Carers in England)
	Income	The financial impact of people giving up work to take on caring roles	**Negative**	**Possible**	**Moderate**	**Long-term**	Feedback from carers to local support services.	Work is continuing to identify appropriate mitigations	Financial difficulties (Survey of Adult Carers in England)
	Caring role (unpaid)	Carers concerned about having care workers in to provide homecare, so carrying out moving and handling/personal care tasks on their own without support	**Negative**	**Probable**	**Major**	**Short-term**	Feedback from carers to local support services.	Work is continuing to identify appropriate mitigations	
	Income	More families needed financial support	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from local support services for young carers	Work is continuing to identify appropriate mitigations	
	Availability of food	Young carers turned away from supermarkets and discriminated against as they are children and 'should not be out of their house'.	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from local support services for young carers	Work is continuing to identify appropriate mitigations	
	Social Anxiety	Young carers struggling to cope with a return to normality. Fear of passing virus on to vulnerable family members, but also fear of having to re-engage with peers and build friendship groups. Some young carers have been reclusive even after the rules were relaxed.	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from local support services for young carers	Work is continuing to identify appropriate mitigations	
	Transition to High School	Increased anxiety about transition to high school	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Feedback from local support services for young carers	Work is continuing to identify appropriate mitigations	

	Caring role (unpaid)	Ability to give unpaid care to others	**Negative**	**Probable**	**Major**	**Short-term**	The ONS Opinions and Lifestyle Survey has been collecting people's experiences from the start of lockdown. Between 3 April and 10 May 2020, 79% of adults said they were very or somewhat worried about the effect that coronavirus (COVID-19) was having on their life and 11% of these said their caring responsibilities had been affected by the pandemic. Almost half (47%) who said their caring responsibilities had been affected said they were unable to care for someone they usually supported, for example, by being unable to spend as much time as they would like with them or being unable to travel to them. Nearly 15% also said they had to organise remote support for someone vulnerable and 9% said that paid support had reduced (https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/articles/morepeoplehavebeenhelpingothersoutsidetheirhouseholdthroughthecoronaviruscovid19lockdown/2020-07-09)	Work is continuing to identify appropriate mitigations	Levels of unpaid care
Children and Young People	Criminality	Young people at greater risk of recruitment to criminal gangs	**Negative**	**Speculative**	**Moderate**	**Short-term**	A report by the Children's Commissioner for England states that there is a "real risk" of criminal gangs recruiting young people out of school during the lockdown. However, as part of a BBC news report it has been speculated that the control measures could help teenagers caught up in drug violence turn their lives around (https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf)	Work is continuing to identify appropriate mitigations	
	Safeguarding	Safeguarding issues not being picked up (hidden)	**Negative**	**Probable**	**Moderate**	**Short-term**	There are concerns that child abuse may be going unreported during lockdown. For children already living in difficult circumstances, access to the safety net of support and supervision of professionals from schools, health and social care is reduced by lockdown and school closures (https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf)	Work is continuing to identify appropriate mitigations	
	Access to mental health services	CAHMS - impact on referral, assessment and support due to lockdown restrictions. Greater demand for service due to rise in children and young people's mental health due to COVID-19 pandemic.	**Negative**	**Speculative**	**Major**	**Short-term**	A survey for the Early Intervention Foundation by Ipsos MORI highlights parents' concern for their children's mental health and wellbeing as they return to school, often for the first time since March. The survey also showed parents' strong desire for schools to do more to support pupils to cope at this time (https://www.eif.org.uk/blog/parents-are-concerned-about-the-mental-wellbeing-of-children-returning-to-school-and-they-want-schools-to-help)	Partnership working with CCG on protocols. Partnership working with CCG on protocols	Percentage of children seen for Choice Assessment within 8 weeks of CAMHs referral

Requirement to 'Stay at home' and closure of social spaces	Lack of social interaction and reduction in physical activity impacting on children and young people's mental and physical wellbeing	**Negative**	**Confirmed**	**Major**	**Short-term**	Parents reporting their child's mental health/ wellbeing worsened during lockdown. Social isolation and concerns about illness contributing. A local survey across Herefordshire and Worcestershire for children and young people in contact with mental health services and their parents found that 52% said their mental health and wellbeing was a little bit or a lot worse since the start of the coronavirus outbreak.	Communications - online activities Partnership working with the voluntary sector i.e. Ready Steady Worcestershire Here 2 Help Corporate approach/model to wellbeing	Here to help data? Web hits on comms messages/links to activities
Access to education, health and care services for children/ young people with Special Educational Needs and Disability	Delay or reduction in provision for health needs specific to individual SEND Children with SEND at greater risk if isolated due to COVID-19	**Negative**	**Speculative**	**Uncertain**	**Short-term**	Highlighted as a concern by local childrens services	SEND Improvement programme - facilitating partnership working SEND Improvement programme - facilitating partnership working	Fortnightly DfE return on SEND demand, numbers with an EHCP plan etc SEND Improvement Dashboard quarterly indicators for health
Reduction in household Income and financial stability causing poverty and poor diet.	Effect on adults job security and financial impacts of unexpected periods off work with limited sick pay, children being at home more and having to pay for food and other expenses. Changes to provision of free school meals/vouchers causing poverty, hunger, diet	**Negative**	**Probable**	**Uncertain**	**Short-Medium term**	Impacts of poverty on children's long-term development are well documented – especially on academic performance and family relationships. In Worcestershire the unemployment claimant count increased by 11,200 between March and August 2020.	free school meal provision in school or vouchers Holiday hunger Project (WCF and partnerships) Here2Help free school meal provision in school or vouchers Holiday hunger Project (WCF and partnerships) Here2Help	Take up of free school meals Holiday Hunger data Here 2 Help data
Time with the family	Increased opportunity to spend time with family	**Positive/ Opportunity**	**Probable**	**Moderate**	**Short-term**	Information from a key informant		

	Early intervention	Ability of services to support children and families has been seriously affected	**Negative**	**Confirmed**	**Moderate**	**Short-term**	The Local Government Association (LGA) has raised concerns that vulnerable children are missing out on vital support during the COVID-19 crisis, warning that some councils are seeing up to a 50% decline in referrals of children to social care. Research by the Early Intervention Foundation with heads of early intervention and help services, head teachers and practitioners highlights the biggest challenges may be yet to come. There was a widespread assumption among the participants that there would be a significant spike in early help and social care referrals once the social distancing and lockdown measures are eased (https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf)	Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	
	Adverse Childhood Experiences (ACEs)	Children experiencing adverse childhood experiences including domestic abuse, parental conflict and substance misuse due to household isolation	**Negative**	**Probable**	**Major**	**Short-Medium term**	A signal from the GETSAFE dashboard has been seen locally and there have been more requests for information on domestic abuse	Safeguarding and Social Care COVID-19 service protocols Here 2 Help Safeguarding and Social Care COVID-19 service protocols Here 2 Help	Social Care fortnightly DfE data return GETSAFE Hub Hazards Profile data CSE and children missing data: -CSE Identification (risk factor on contacts & Assessments) -CSE Experiencing/Vulnerable (taken from the Getafe Flags) -Children who go missing -Children who go missing whilst at risk of CSE
	Return to education	Effect of return to education on mental health, wellbeing and anxiety.	**Unclear**	**Possible**	**Uncertain**	**Short-term**	National survey data re: parents' concern for pupils' mental health and wellbeing – especially returning to school. 51% of parents were concerned about their child's mental health or wellbeing. In addition to the Impact on mental wellbeing of children, local services are seeing an impact on parents/young people as well with a number of cases where the mental health has been severely affected by lockdown and they have become more reclusive or anxiety about returning to school/college for themselves or their children has increased massively. This is a mix of individuals who had known anxiety issues pre-COVID-19 but also now there are individuals who we have no record of previous anxiety issues.	Worcestershire Children First 'Back to School Project'. Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	Take up and outcomes of 'Back to School' project

Communities	Social Cohesion	A feeling that the country will be more united and kinder once we have recovered from the pandemic	**Positive/ Opportunity**	**Possible**	**Moderate**	**Medium-Long term**	In April 2020 findings from the weekly Office for National Statistics (ONS) Opinions and Lifestyle Survey were that people thought Britain would be more united after we have recovered from the pandemic, 46% of respondents vs 24% before the pandemic. However, by June 2020, this belief had declined to 28% of respondents. Most people also expected that inequalities in society would remain. This expectation was broadly stable between April and June. There was only a small difference in the proportion of the population who thought that Britain was equal before the pandemic (19%) and the proportion who thought that it will be equal after we recover from the pandemic (22%). But interestingly, in June, there was still a belief that we will be a kind nation after the pandemic, perhaps because of the many stories of individual kindness heard or experienced over this time	Work is continuing to identify appropriate mitigations	
	Civic Participation	Increased civic participation including increased volunteering and the formation of new volunteer groups	**Positive/ Opportunity**	**Confirmed**	**Moderate**	**Short-term**	Up to 17/09/2020 there were: - 1288 individual volunteers registered to provide support to local residents through the Here2Help scheme - 565 organisations registered to provide support to local residents through the Here2Help scheme. This figure includes 289 local, regional and national businesses, 94 voluntary organisations, 34 public sector organisations and 137 community groups. During the early stages of the pandemic and national lockdown, a number of community groups and Facebook groups were set up by residents to link up and provide support to others in their local area, whether that be a town or city, village or ward.	Seek ways to build on this response	Number of volunteers
Community Safety and Crime including Domestic Abuse	Domestic abuse	Increase in domestic abuse	**Negative**	**Possible**	**Major**	**Short-term**	Following a reduction at the start of the lockdown period, reported domestic abuse offences increased following the easing of restrictions but are now (as of October 2020) at levels anticipated for the time of year. Interestingly, local commentators have suggested that all Worcestershire domestic abuse support provision, and in particular, the help line have seen increasing	Joint work with housing and domestic abuse services to map increase in referrals, review accomodation and implement some digital solutions. Review of accommodation and support provision. Complete needs assessment for implementation of domestic abuse bill. Future joint planning and commissioning to meet needs across Police and Crime Commissioner,	Domestic abuse referrals. Crime statistics for domestic abuse. Admissions to A&E, CIN and CP data/referrals for homelessness linked to domestic abuse
	Domestic abuse	Intervention has been delivered using virtual and digital platforms	**Negative**	**Speculative**	**Uncertain**	**Short-term**	Speculation by a key informant	Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	
	Accommodated in domestic abuse refuge or safe house	Units may not necessarily be suitable for isolation	**Negative**	**Confirmed**	**Moderate**	**Uncertain**	Information from a key informant	Provision of separate units of accomodation	

Overall crime	Decrease in crime	**Positive/ Opportunity**	**Probable**	**Moderate**	**Short-term**	Locally, Total Recorded Crime reduced significantly during the lockdown but has since increased, however, at the time of writing (October 2020) it remains below the average for the time of year.	Crime Data	Crime statistics
Antisocial behaviour	Increase in antisocial behaviour	**Negative**	**Probable**	**Moderate**	**Short-term**	Antisocial behaviour peaked in April 2020 and the numbers have reduced since then, but they are still higher than usual. They are mainly classified as nuisance offences. There is no evidence that they are linked to children.	Police Data	Crime data for antisocial behaviour
Hate crime	Increase in hate crime	**Negative**	**Probable**	**Moderate**	**Short-term**	Hate crime increased in May, June and July, but has now returned to the average number of offences we would see this time of year. The majority remains race-related; there has been no change in the proportion. The number of offences in Q2 was similar to the number in Q2 last year	Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	Crime data for hate crime
Use of Nitrous Oxide	Increase in the use of Nitrous Oxide	**Negative**	**Speculative**	**Minimal**	**Short-term**	It has been speculated that there may have been an increase in the use of nitrous oxide as a recreational drug. However, it is possible that this is an issue of perception and increased reporting as people are using public spaces more and therefore noticing discharged canisters	Continued messaging about the health harms of nitrous oxide	Hospital admissions, treatment referrals
Drug Abuse	Increase in drugs related offences	**Negative**	**Probable**	**Moderate**	**Short-term**	There was an increase in drug offences during the lockdown period but numbers in October 2020 were back within the normal range. This increase was mirrored across other forces so is unlikely to relate to any issues particular to Worcestershire. Factors might include it being easier for police officers on patrol to spot people that were not complying with lockdown rules as they were selling/buying drugs	Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	Drug related deaths
Fraud	Increase in cyber crime	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Cyber-crime increased during lockdown. This was part of an on-going trend in increasing numbers which was accelerated during lockdown. COVID-19 creates emotional tension which may have led to additional vulnerability to scams	Continued messaging	Referrals to Action Fraud
Radicalisation	The protection that social and community networks provide against radicalisation is reduced by social distancing	**Negative**	**Possible**	**Moderate**	**Medium-term**	A key informant has highlighted that the isolation of lockdown: 1. Marginalises vulnerable individuals, making them more susceptible to radicalisation and more likely to spend time alone on the internet. 2. Decreases their exposure to the usual controls	Front line worker awareness	Reports in to channel

	Sexual Offences	Reduction in reported sexual offences	**Positive/ Opportunity**	**Possible**	**Moderate**	**Short-term**	There was a decrease in reported sexual offences in April 2020. They increased in the following months and are currently still slightly higher than the average for this point in the year (October 2020). Providers of support services for victims of sexual offences have identified that some service users are more reluctant to take the offer of virtual support. Services such as counselling are also being impacted. Services were struggling with providing support to children during lockdown virtually but are now slowly going back into schools. In addition, service providers are finding that clients are seeking support for COVID-19 related anxieties in addition to the reason for the original referral.	Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	Crime statistics, support services for victims of sexual offences - no. of referrals, engagement rates, positive outcomes achieved, length of time in service
	Drug Abuse	Increase in adult referrals for drug treatment requiring advice and support for recovery	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Local services are seeing Increasing referrals for high risk problems, particularly homeless people	Joint work with services to map increase in referrals, review accomodation and implement some digital solutions. Established Recovery group to review progress meets weekly. Successful bid for accommodation and support to MHCLG to prevent homelessness	Homelessness data, NDTMS, A&E and hospital admissions, drug related deaths, CIN/CP referrals for parents linked to drug/alcohol use
	Support from specialist providers for victims of sexual offences	Reduction in face to face support from specialist providers	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Service providers have identified that some service users are more reluctant to take the offer of virtual support. Services such as counselling are also being impacted. Services were struggling with providing support to children during lockdown virtually but are now slowly going back into schools. In addition, service providers are finding that clients are seeking support for COVID related anxieties in addition to reason for original referral.	Some face to face sessions are being carried out but only if there is a specific and urgent need, and where it is safe to do so. Service providers are finding creative and safe ways to offer support. Providers are looking at long term ways to offer the support in a safe space in person.	No. of referrals, engagement rates, positive outcomes achieved, length of time in service
	Criminal Justice	Backlog in court cases being held	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Courts have a significant backlog of cases due to court closures. Local service providers who are supporting victims are seeing increases in support required for these clients as well as clients disengaging in service.	A variety of options are being explored, along with weekly CJS update calls between partners.	Lead in times for cases, no.'s of victims and witnesses being supported, court outcome data
Deprivation	Level of deprivation	Higher rates of Covid-19 cases and deaths in deprived areas	**Negative**	**Possible**	**Major**	**Short-term**	Nationally, death rates from COVID-19 in the most deprived areas have been more than double the least deprived areas. There is some evidence that this is also the case locally with higher rates of death per 10,000 population in deprived areas in Worcestershire in the March - July period.	Continued protection of the vulnerable cohort via wearing facemasks, social distancing, handwashing. etc Potential for higher scale local lockdowns or certain measures if cases continue to rise.	Case and mortality rates in deprived areas
Diet and Physical Activity	Physical activity	The COVID-19 pandemic affecting the exercise routine of residents	**Negative**	**Possible**	**Moderate**	**Short-term**	Indicators from the Opinions and Lifestyle Survey suggest that 23% of people have had their regular exercise routine affected due to the Covid-19 outbreak (https://www.ons.gov.uk/releases/coronavirusandthesocialimpactsongreatbritain4september2020)	It will be important to promote the importance of physical activity for maintaining health	People using leisure facilities including leisure centres

	Lifestyle/beha viour	An increased awareness of weight could mean people taking more care of themselves	**Positive/ Opportunity**	**Speculative**	**Moderate**	**Short-term**	Suggestion from a key informant.	Build on this awareness and promote the importance of physical activity and good diet for maintaining health	People using leisure facilities including leisure centres; Estimates of physical activity; the estimated prevalence of overweight and obesity
	Physical activity	Increased walking and cycling	**Positive/ Opportunity**	**Speculative**	**Moderate**	**Short-medium term**	The pedestrian data from Diglis Bridge Worcester shows that currently walking levels are on par with the same week in 2019. Both Worcestershire and National data shows that there is a direct correlation in cycling levels and weather. There has been a steady decline in cycling since lockdown ended. Storms Ellen and Francis in mid to late August can be seen to have had a direct impact on cycling levels.	Promote the importance of physical activity for maintaining health. Use of the planning system to promote healthy weight environments	Estimates of physical activity
	Diet and nutrition	Increased eating	**Negative**	**Probable**	**Major**	**Short, medium and long term**	Societal changes required to manage the coronavirus may have promoted weight gain. This is due to the adverse impact on socio-economics, physiological health and the metabolic impact of elevated stress, emotional eating and physical inactivity. The pandemic has reduced access to weight management support and many people living with obesity have used food to manage their emotions during the COVID-19 lockdown. COVID-19 has adversely impacted self-reported dietary and physical activity behaviours in many people (Public Health England. Supporting weight management services during the COVID-19 pandemichttps://assets.publishing.service.gov.uk/gov ernment/uploads/system/uploads/attachment_data/file /915274/WMS_Report.pdf)	Promote the importance of good diet for maintaining health including promotion of the Eatwell Guide. Use of the planning system to promote healthy weight environments	Estimated prevalence of overweight and obesity in adults and the results from the National Child Measurement Programme (NCMP)
Digital Media Use	Better / transferable digital media and internet use skills	Increase of digital media use and social media in response to the Covid-19 pandemic	**Positive/ Opportunity**	**Possible**	**Moderate**	**Medium-term**	The early days of the Covid-19 pandemic saw increases in media consumption behaviour in the UK. In particular, the Covid-19 Media Behaviours Report in March 2020 suggested that 40% of respondents were using social media more, a third were using Facebook more and 28% were using WhatsApp more. Ofcom's annual Online Nation report suggested that during the height of the lockdown adults were spending a record 4 hours a day online on average, whilst twice as many were using video calls to keep in touch during the lockdown (https://www.prweek.com/article/1677915/bbc-sky-guardian-most-trusted-news-brands-thanks-coronavirus-coverage)	Work is continuing to identify appropriate mitigations	Number of people online, and with access to the internet; number of people accessing social media.

Education	Closure of education settings	Children at higher risk of exploitation due to availability Impact on holistic development Future educational achievement on holistic needs including health Greater impact on vulnerable learners being out of school	**Negative**	**Probable**	**Major**	**Short-term**		Access to Worcestershire GET SAFE team, funding of link workers Education and Early Help Protocol Provision of virtual education and access to Laptops & IT for home learning. Support to education settings for re-openings (part and full) Continued development of the get safe partnership, Transformational projects on child exploitation Education and Early Help Protocol Provision of virtual education and access to Laptops & IT for home learning. Support to education settings for re-openings (part and full)	GET SAFE KPIs DfE return for education (weekly school attendance, early years provision open/closed, Vulnerable children data)
	Reduced take up of early education and childcare entitlement	Risk to developmental experience and achieving physical/personal/social and emotional milestones.	**Negative**	**Probable**	**Uncertain**	**Short-term**	Some settings were closed for a period from March 2020.	Continual funding of placements through COVID-19 Appointment of Early Years Strategic Lead within WCF/WCC and development of the Early Years Strategy	Early years funding placement data, EYFS profile data
Employment	Unemployment	Increase in unemployment, increase in people signing up for Universal Credit and Job Seekers Allowance	**Negative**	**Confirmed**	**Major**	**Short-Medium term**	In Worcestershire between March and August 2020 the claimant count increased by 11,285 to 19,590 people. In August 2020 5.5% of the working age population were unemployed - this is an increase of 3.3% from August 2019. Young people and men have been particularly impacted.	Local measures to protect jobs especially in vulnerable and key industries. Supporting businesses to lower closures and / or impact of Covid meaning staff layoffs. Supporting newly-redundant people back to work via job club, re-training programmes, etc.	Unemployment Claimant Count, Universal Credit Claims
Environment and Climate Change	Transport-related air quality, noise, sedentary lifestyles, access to health and other key services and facilities.	Modal shift to active and sustainable travel modes, delivering reduced transport-related noise, improved ambient air quality, improved levels of physical activity and improved access to key services and facilities for all.	**Positive/ Opportunity**	**Speculative**	**Major**	**Short, medium and long term**	The evidence suggests that the impact of COVID-19 on Worcestershire's transport choices have been transitory and it is unlikely that there will be long-term benefits derived from behavioural changes as a result of this pandemic. Indeed, it is now likely that we will see even greater reliance on the car for even more trips (particularly shorter distance trips) with further increases in sedentary lifestyles, leading to a further deterioration in local health outcomes.	Invest in infrastructure, services and promotion of active and sustainable travel modes to encourage permanent modal shift away from single-occupancy car use. Invest in infrastructure, services and promotion of active and sustainable travel modes to encourage permanent modal shift away from single-occupancy car use.	Air Quality, traffic volumes (particularly peak flows).
	Transport-related air quality, noise, sedentary lifestyles, access to health and other key services and facilities.	Increased reliance on the private car as the principal means of delivering access to services, even for short trips.	**Negative**	**Probable**	**Moderate**	**Short, medium and long term**	The evidence suggests that the impact of COVID-19 on Worcestershire's transport choices have been transitory and it is unlikely that there will be long-term benefits derived from behavioural changes as a result of this pandemic. Indeed, it is now likely that we will see even greater reliance on the car for even more trips (particularly shorter distance trips) with further increases in sedentary lifestyles, leading to a further deterioration in local health outcomes.	Invest in infrastructure, services and promotion of active and sustainable travel modes to encourage permanent modal shift away from single-occupancy car use. Invest in infrastructure, services and promotion of active and sustainable travel modes to encourage permanent modal shift away from single-occupancy car use.	Air Quality, traffic volumes (particularly peak flows).

Gypsys and Travellers	Lack of sanitation	Gypsies and Travellers who live on unauthorised encampments no longer had access to places they relied upon for water and cleaning purposes due to closure of leisure centres, churches and petrol	**Unclear**	**Confirmed**	**Uncertain**	**Short-term**	Provided as evidence from a key informant	Provision of more permanent traveller sites	
	Access to healthcare	Gypsies and Travellers who live on unauthorised encampments already have poor access to healthcare and CV-19 may have made this even worse	**Unclear**	**Probable**	**Uncertain**	**Short-term**	Gypsy, Roma and Traveller (GRT) communities' already experience some of the poorest health outcomes, including: significantly lower life expectancy, higher maternal and infant mortality, higher rates in GRT children of accidental injury and infections; high rates of accident and emergency department attendance; low/variable uptake of childhood immunisations; significantly increasing risk of vaccine preventable disease, poor dental health, high unmet need and low dental registration It is highly likely that COVID 19 has exacerbated this	Provision of more permanent traveller sites	
	Mental Health	Gypsies and Travellers already have a high prevalence of mental health conditions and social distancing may have made this worse	**Negative**	**Probable**	**Moderate**	**Short-term**	Information from a key informant	Provision of more permanent traveller sites	
Health, Wellbeing and Social Care Services	Self Care	Increase in self-care and the use of alternative support for example pharmacies	**Positive/Opportunity**	**Possible**	**Moderate**	**Short, medium and long term**	Suggestion from a key informant	Build upon increasing self-care and alternative forms of support, for example, pharmacies, to reduce pressures on health and care services	Use of GP services
	Healthcare access	Digital advancements/application of digital - technology to support long term condition management, remote consultations etc *also potential negative (digital exclusion)	**Unclear**	**Probable**	**Moderate**	**Short, medium and long term**	Suggestion from a key informant.	This is possibly an opportunity for services to be delivered more efficiently and may be more convenient for people who have access to digital technology. Ensure increased use of telephone, video and online health services does not disadvantage individuals or re-enforce existing health inequalities and digital exclusion.	Indicators from the GP Patient Survey
	Support to live independently	People struggling to get support to live independently. Carers not able to attend or person did not want them to. Family members isolating or working too much to support. Volunteers returning to work.	**Negative**	**Probable**	**Moderate**	**Short-term**	Calls received by the Here2Help line	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact.	Referrals and calls to Here2Help and the Access Centre

	Absence of face to face services delivered by social workers	Face to face support often highlights safeguarding and is key to determining a persons mental health and personal wellbeing. Safeguarding issues may be missed.	**Negative**	**Probable**	**Major**	**Short-term**	Information from a key informant	Facilitate return to face to face working by key health and social care professionals.	
	Availability & Quality of Care	Restrictive practice under Covid-19 not always in line with national guidance within provider settings	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Information from a key informant	Issues addressed on a case by case basis. Guidance provided. Regular communications with providers - following changes to guidance.	
	Availability & Quality of Care	PPE not used correctly in provider settings	**Negative**	**Confirmed**	**Minimal**	**Short-term**	Information from a key informant	Managed via CCG, WCC and safeguarding processess. Monitoring in place	
	Support to live indpendently	An increasing number of people have wanted to avoid care home placements and this has resulted in higher levels of care at home - increased pressure on the domiciliary care market and higher vacancies in care home market	**Positive/ Opportunity**	**Probable**	**Uncertain**	**Short-term**	Locally there are more people with a higher level of domiciliary care at home and lower admissions in care settings	Review provision for the future and work with comissioners on best value services at home, increase Direct payments. Seek ways to build on this response	
	Support to live indpendently	It has been more difficult to complete full detailed assessments and care planning for people under covid conditions, or review their care. This has been done virtually wherever possible but for some people with dementia for example, this is not feasible. Delays in accessing some health care services such as therapy assessments.	**Unclear**	**Probable**	**Moderate**	**Short-term**	Locally reviews have been delayed.	Start to review covid cases and review in person with full PPE where required. However won't be able to review those in care settings unless critical still due to lockdown measures. Seek ways to build on this response	

		Social isolation Reduced access to support	Reduced access to families and health professionals whilst in people are in care homes including those in Discharge to Assess beds. Where homes have had to restrict access often only phone or digital access is feasible. This doesn't work for everyone especially those with sensory impairments, dementia etc. Garden visits have been helpful but have also increased anxiety for some carer and service users	**Negative**	**Probable**	**Uncertain**	**Short-term**	Feedback from staff and families, media coverage	Keep visitor access under review	
		Social environments	People in supported living and extra care facilities have had their social environment reduced through lockdown. Impact on people's health and mental wellbeing. Led to some non-compliance with Covid-19 rules in places.	**Negative**	**Confirmed**	**Uncertain**	**Short-term**	Information from a key informant	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact.	
		Uncertaintly about where someone will live and additional movement between placements	Continuing Health Care process suspended during COVID-19 has meant people are not always in their permanent placement leading to uncertainty and a possible second move	**Unclear**	**Speculative**	**Uncertain**	**Short-term**	Information from a key informant	People receiving COVID funding as an interim. Restoration of CHC process now in place	
		Access to paid or unpaid care	The COVID-19 outbreak affecting access to paid and unpaid care for some residents	**Negative**	**Probable**	**Major**	**Short-term**	National data indicated that people across all age groups are affected	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact.	

	Access to healthcare	Decreased access to healthcare and the risk that patients will come to harm due to failure to present at the right time or due to long delays in both investigations and treatment. Secondary care services were suspended when the first wave of COVID-19 hit. Care for long term conditions disrupted.	**Negative**	**Confirmed**	**Major**	**Short-term**	At the end of August 2020, the percentage of patients waiting 18 weeks or less to start consultant-led treatment was 47.9%. In total 38,444 patients. By comparison, at the end of August 2019, 80.1% of patients were waiting 18 weeks or less to start consultant-led treatment, equating to 37,204 patients (NHS England and NHS Improvement: monthly RTT data for Worcestershire Acute Hospital Trust. August 2020. Available from: https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times). Social prescribers have described increasing referrals of people on the waiting list for surgery in pain.	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact. Support for people who are digitally excluded (as service delivery changes)	Delayed transfers of care, referral to treatment waiting times, Patient reported outcome measures
	Cancer Screening and Treatment	Screening in effect paused and reduced treatment activity in some areas	**Negative**	**Probable**	**Moderate**	**Short-term**	Nationally, at the start of the pandemic preventative services including cancer screening were in effect suspended. Although screening was not officially stopped in England, the move to having the majority of GP appointments delivered online plus lack of local lab capacity meant that many appointments were cancelled or invitations not sent this is likely to contribute to delayed cancer diagnoses (Findings of the Health & Equity in Recovery Plans Working Group. Direct and indirect impacts of COVID-19 on health and wellbeing. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf)	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact.	Emergency presentations for cancer, Cancer survival, Under 75 mortality rates from cancer
	Mental Health Services	Increases in urgent and emergency cases	**Negative**	**Possible**	**Moderate**	**Short-term**	Findings of the Health & Equity in Recovery Plans Working Group. Direct and indirect impacts of COVID-19 on health and wellbeing. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact.	Hospital admissions for mental health conditions
	Mental Health Services	Falls in routine appointments	**Negative**	**Possible**	**Moderate**	**Short-term**	Findings of the Health & Equity in Recovery Plans Working Group. Direct and indirect impacts of COVID-19 on health and wellbeing. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact.	Improving access to psychological therapies indicators

	Health seeking for urgent care	Reduction in accident and emergency department attendance	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Worcestershire Acute Trust saw a drastic reduction in A&E attendences in April 2020 compared to April 2019. A reduction of around half. By September 2020 the figures were nearer normal but still lower by 14%. Nationally the drop was most pronounced in those aged 0-6 (findings of the Health & Equity in Recovery Plans Working Group. Direct and indirect impacts of COVID-19 on health and wellbeing. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf)	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact.	A&E attendances
High Risk Groups Including Those Who Are Clinically Extremely Vulnerable	COVID-19 Infection	People with certain medical conditions are at very high risk of severe illness and death from COVID-19	**Negative**	**Confirmed**	**Major**	**Short-term**	People who are defined as clinically extremely vulnerable are at very high risk of severe illness from coronavirus (Department of Health and Social Care and Public Health England. Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19. Accessed 15th October 2020. Available at: https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19#Clinically)	Ensure people who are defined as clinically extremely vulnerable receive the right communications at the right time in order to keep themselves safe.	COVID-19 cases and deaths in people who are clinically extremely vulnerable
	Shielding	Staying at home has led to a reduction in physical activity and changes in diet	**Negative**	**Speculative**	**Moderate**	**Short-term**	Public Health England's suggestions on how to mitigate the adverse impacts in this group include: •Promote home based physical activity •Support people to maintain a healthy balanced diet (Public Health England, Local Government Association and the Association of Directors of Public Health. COVID-19 Suggestions for mitigating the impact on health inequalities at a local level. Available at: https://www.local.gov.uk/sites/default/files/documents/COVID-19%20Suggestions%20for%20mitigating%20the%20impact%20on%20health%20inequalities%20at%20a%20local%20level%20%282%29.pdf)	Promote home based physical activity and support people to maintain a healthy balanced diet	Physical activity and dietary indicators
	Shielding	Staying at home has increased social isolation and loneliness	**Negative**	**Possible**	**Moderate**	**Short-term**	A key informant has highlighted	Encourage people to use the internet safely to stay informed and connect with family and friends	Indicators of wellbeing; Here2Help requests (number and nature)
	Shielding	Disempowerment of people with long-term conditions	**Negative**	**Speculative**	**Moderate**	**Short-term**	A key informant has highlighted	Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	Here2Help requests (number and nature)
Homelessness	Homelessness	Increase in homelessness due to housing payment arrears and loss of accommodation	**Negative**	**Possible**	**Moderate**	**Short-term**	Information from a key informant	Work is continuing to identify appropriate mitigations	Number of homelessness applications, Number of rough sleepers

							Information from Key Informant	To build upon the work done so far	Total initial assessments, households assessed as owed a prevention duty, households owed a relief duty
	Living conditions	Significant number of homeless people housed during lockdown	**Positive/ Opportunity**	**Confirmed**	**Moderate**	**Short-term**	Information from Key Informant	To build upon the work done so far	Total initial assessments, households assessed as owed a prevention duty, households owed a relief duty
Housing	Poor Quality Housing	Increased time at home during lockdown may make health impacts of poor-quality housing worse	**Negative**	**Possible**	**Moderate**	**Short-term**	Findings of the Health & Equity in Recovery Plans Working Group. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf	Work is continuing to identify appropriate mitigations	Fuel poverty, Tenure, Housing affordability
	Increased falls risk	Social distancing measures and financial insecurity may have exacerbated the risk of falls by leading to essential works to the home being delayed, particularly for shielded households	**Negative**	**Speculative**	**Moderate**	**Short-term**	Finding of the Centre for Ageing Better report. Homes, Health and COVID-19. Available at: https://www.ageing-better.org.uk/sites/default/files/2020-09/Homes-health-and-COVID-19.pdf	Work is continuing to identify appropriate mitigations	Falls in the home
	Built environment	Impact of Covid 19 determined by quality of built environment	**Unclear**	**Probable**	**Moderate**	**Short-term**		Work is continuing to identify appropriate mitigations	Fuel poverty, Tenure, Housing affordability
	Overcrowded housing	Impact exacerbated during lockdown and social distancing measures	**Negative**	**Possible**	**Moderate**	**Short-term**		Work is continuing to identify appropriate mitigations	Tenure, Housing affordability
Low Income	Income	Increase of people on Universal Credit due to Covid-19 affecting jobs and income	**Negative**	**Confirmed**	**Major**	**Short-Medium term**	In Worcestershre there have been large increases since March in the number of households on Universal Credit, increasing by 12,836 to 31,496 in May 2020. This is an increase of 69% compared with 57% nationally.	Work is continuing to identify appropriate mitigations	Number of people on UC
	Loss of income	Unable to heat home, reliance on food banks, potential loss of home	**Negative**	**Confirmed**	**Major**	**Short-Medium term**	Although data is only available up to May 2020, large increases in the number of households on Universal Credit have also occurred in Worcestershire since March. The number of households increased by 12,836 to 31,496 in May 2020. This is an increase of 69% compared with 57% nationally	•Target housing/financial information and support to the needs of the most vulnerable groups and those new to the system •Target more intensive forms of help towards those least likely to be able to navigate the welfare claims process alone •Ensure there are strong links with Department for Work and Pensions advice services •Plan for additional demand in housing benefit services (where existing claimants may need to amend their circumstances as income levels change (e.g. self- employed) throughout the course/different phases of the pandemic	Universal Credit Claimants, Unemployment claimants, Numbers using foodbank

Mental Health	Suicide	Higher rates of suicide particularly in deprived areas	Negative	Speculative	Major	Short-Medium term	Nationally higher rates of suicide have been evident in more deprived areas, most notably among men in their 40's and 50's. The impact of the pandemic, both economically and emotionally is a major concern for suicide prevention. The latest ONS figures show that there were over 700,000 fewer people on payroll during lockdown, and the most deprived local areas have been affected the most, in terms of mortality. Additionally, almost one in five adults (19.2%) were likely to be experiencing some form of depression during the COVID-19 pandemic in June 2020; almost double the number before the pandemic (July 2019 to March 2020).	Ensuring mental health resources are available and can be accessed, and vulnerable people are aware of what is on offer. Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	Rates of suicide
Mental Health	Well-being	The COVID-19 pandemic affecting the well-being of residents (boredom, loneliness, anxiety, stress)	Negative	Probable	Major	Short, medium and long term	Indicators from the Opinions and Lifestyle Survey suggest that 39% of people said their well-being has been affected (for example, boredom, loneliness, anxiety and stress), rising to 46% among females, and 52% among people with any specific health condition (https://www.ons.gov.uk/releases/coronavirusandthesocialimpactsongreatbritain4september2020). A Healthwatch Worcestershire survey aimed at the general public found that one in five (20%) of respondents said that COVID-19 was having a great deal or a lot of impact on their mental health and emotional wellbeing and just over a quarter (26%) reported it was having a moderate impact	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	Mental health, Personal wellbeing estimates from the Annual Population Survey
	Bereavement	Bereavement caused by death of a family member, friend or colleague from COVID-19	Negative	Confirmed	Moderate	Short-Medium term	Information from a key informant	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	
	Low mood, depression and anxiety	Increase in common mental health conditions	Negative	Possible	Major	Short-Medium term	Information from a key informant. Increase in referrals for those requiring input from mental health, befriending and lifestyle advice	More prompt support available via healthy minds. Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	Referrals to social prescribing, nature of refferals, Prevalence of common mental health disorders, improving access to psychological therapies indicators

	Social Isolation and Loneliness	Loss of social contact. Loss of access to community based support and activities, for example, Dementia Cafes and PLUS (isolation support) ceased face to face access during lockdown.	**Negative**	**Possible**	**Major**	**Short-term**	Information from a key informant and Social Prescribers reporting an increase in referrals for those requiring input from mental health, befriending and lifestyle advice. Health & Equity in Recovery Plans Working Group. Direct and indirect impacts of COVID-19 on health and wellbeing. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf	More prompt support available via healthy minds. New community groups, more mental health specialists, availability of technology, engagement with religious organisations where ethnic minorities are likely to turn for welfare. Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	Referrals for anxiety and stress via GP, Referrals to Healthy Minds, Referrals to social prescribing, nature of refferals
	Access to advocacy services	During lockdown access to vulnerable people with mental health conditions was limited. Residential homes and wards were locked down and telephone contact was not always possible. This placed individuals at risk.	**Negative**	**Confirmed**	Uncertain	**Short-term**	Information from a key informant	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	Referral to advocacy support when someone is discharged from a mental health ward
Migrants, Asylum Seekers and Refugees	Access to healthcare and health information	Vulnerable migrants may experience language barriers or lack of access to technology. They may also access information from other countries which may not be relevant in the UK.	**Negative**	**Probable**	**Moderate**	**Short-term**	The Organisation for Economic Co-operation and Development (OECD). What is the impact of the COVID-19 pandemic on immigrants and their children? October 2020. Available at: http://www.oecd.org/coronavirus/policy-responses/what-is-the-impact-of-the-covid-19-pandemic-on-immigrants-and-their-children-e7cbb7de/. Refugee and asylum seeker patient health toolkit. BMA guidance. Available at: https://www.bma.org.uk/advice-and-support/ethics/refugees-overseas-visitors-and-vulnerable-migrants/refugee-and-asylum-seeker-patient-health-toolkit	•Where possible, make guidance available in multiple languages, and promote awareness of rights of access to healthcare services •Raise awareness of resources for health professionals and community hubs to support migrant patients and clarifying the entitlements to free and chargeable NHS services •As well as translated guidance, videos with spoken guidance can help where there are issues with illiteracy in first languages (some languages are primarily oral). Audio-only guidance can be shared easily among communities.	
	COVID-19 Infection	Immigrants are at higher risk of COVID-19 infection and death because of poverty, overcrowding and jobs where physical distancing is difficult.	**Negative**	**Probable**	**Moderate**	**Short-term**	The Organisation for Economic Co-operation and Development (OECD). What is the impact of the COVID-19 pandemic on immigrants and their children? October 2020. Available at: http://www.oecd.org/coronavirus/policy-responses/what-is-the-impact-of-the-covid-19-pandemic-on-immigrants-and-their-children-e7cbb7de/. Refugee and asylum seeker patient health toolkit. BMA guidance. Available at: https://www.bma.org.uk/advice-and-support/ethics/refugees-overseas-visitors-and-vulnerable-migrants/refugee-and-asylum-seeker-patient-health-toolkit	NHS services provided for the investigation, diagnosis and treatment for COVID-19 are free of charge, irrespective of immigration status.	COVID-19 cases by ethnicity NB will only partially cover this group

Mothers and Babies	Covid-19 Infection	Pregnant women from BAME groups more likely to be admitted to hospital with COVID-19	**Negative**	**Probable**	**Major**	**Short-term**	Confirmed increase in hospital admissions during pregnancy. Coupled with the extensive evidence that BAME women have a poorer experience and poorer outcomes during pregnancy it is necessary to ensure greater protection during the pandemic (https://www.npeu.ox.ac.uk/news/1963-pregnant-women-are-not-at-greater-risk-of-severe-covid-19-than-other-women-but-most-of-those-who-have-problems-are-in-their-third-trimester)	Targeted advice to BAME pregnant women. Continuation of face to face antenatal care. Involve more BAME women in maternity voices partnership to ensure effective communications approach. Ensure all providers record on maternity information systems the ethnicity of every woman, as well as other risk factors, such as living in a deprived area (postcode), co-morbidities, BMI and aged 35 years or over, to identify those most at	Ensure all providers record on maternity information systems the ethnicity of every woman, as well as other risk factors, such as living in a deprived area (postcode), co-morbidities, BMI and
	Covid-19 Infection	Older pregnant women, those who are overweight or obese, and pregnant women who had pre-existing medical problems, such as high blood pressure and diabetes, are more likely to be admitted to hospital with the infection	**Negative**	**Probable**	**Major**	**Short-term**	Confirmed increase in hospital admissions during pregnancy (https://www.npeu.ox.ac.uk/news/1963-pregnant-women-are-not-at-greater-risk-of-severe-covid-19-than-other-women-but-most-of-those-who-have-problems-are-in-their-third-trimester)	Targeted advice to vulnerable mothers to be, continuation of face to face antenatal care, continue to reflect and deliver NHS England Covid-19 specific information and practices. Ensure all providers record on maternity information systems risk factors, such as living in a deprived area (postcode), co-morbidities, BMI and aged 35 years or over, to identify those most at risk of poor outcomes. A revised Standard Operating Procedure has been shared with all community midwives to explore and discuss risk, vulnerability and care at the time of booking.	Ensure all providers record on maternity information systems the ethnicity of every woman, as well as other risk factors, such as living in a deprived area (postcode), co-morbidities, BMI and aged 35 years or over, to identify those most at risk of poor outcomes
Older People	Housing	More people want to continue to live in their own homes rather than going into residential facilities	**Positive/Opportunity**	**Speculative**	**Moderate**	**Short-term**	Information from Key Informant	Promotion of the importance of physical activity including strength and balance exercises, for maintaining physical function and good mental health Targeting of resources for physical activity to the needs of the most vulnerable older people, including those who may be at risk of falls to keep muscles, bones and joints strong Access to healthcare among older people could be aided if services to become community based or members of the local community aided older people to get to and from medical appointments and/or obtain medical supplies.	
	Access to healthcare	Fearful of going to medical appointments	**Negative**	**Probable**	**Moderate**	**Short-term**	Information from Key Informant	Services to become community based with more people doing them	Hospital Admissions
	COVID-19 Infection	Higher rates of COVID-19 related death among older people	**Negative**	**Confirmed**	**Major**	**Short-term**	Higher rates of death observed nationally with notably higher rates among 75-plus and 85-plus age ranges	Continued protection of the vulnerable cohort via wearing facemasks, social distancing, handwashing. Etc. Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitiagation against impact. Potential for higher scale local lockdowns or certain measures if cases continue to rise. The need for the elderly to self isolate may also need to be re-introduced	Death rates and number of cases among older people

	Social Isolation and Loneliness	Social isolation as a result of lockdown and social distancing measures. Older people fearful of going out.	**Negative**	**Possible**	**Moderate**	**Short-term**	Information from Key Informants	Commissioners to note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation against impact.	Social Isolation: percentage of adult social care users aged 65 plus who have as much social contact as they would like
People with Physical, Sensory or Learning Disability Challenges	Social isolation	Lack of access to support e.g. support groups, day services, voluntary work, college and regular activities. Lockdown and shielding measures restrict social contact for a group that is already vulnerable to loneliness.	**Negative**	**Probable**	**Moderate**	**Short-term**	Most respondents to a Healthwatch Worcestershire learning disability and autism survey had experienced a change in their support during COVID-19. Respondents described having less support and difficulties being able to access support via support groups, day services, voluntary work, college and regular activities. In two reports looking at the impact on adults with disabilities, it was found that they were significantly more likely than adults without disabilities to report spending too much time alone; 35% of adults with disabilities reported this compared to 20% of adults without disabilities. Health & Equity in Recovery Plans Working Group. Direct and indirect impacts of COVID-19 on health and wellbeing. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf	Work is continuing to identify appropriate mitigations	
	Access to support services	Lack of access to support e.g. support groups, day services, voluntary work, college and regular activities	**Negative**	**Probable**	**Moderate**	**Short-term**	Most respondents to a Healthwatch Worcestershire learning disability and autism survey had experienced a change in their support during COVID-19. Respondents described having less support and difficulties being able to access support via support groups, day services, voluntary work, college and regular activities.	Work is continuing to identify appropriate mitigations	
	COVID-19 Infection	Some people with disability may be more at risk of becoming infected or having unrecognized illness	**Negative**	**Probable**	**Moderate**	**Short-term**	Some people with disabilities might be at a higher risk of infection or severe illness because of their underlying medical conditions. The following groups might be at increased risk of becoming infected or having unrecognized illness: 1) People who have limited mobility or who cannot avoid coming into close contact with others who may be infected, such as direct support providers and family members 2) People who have trouble understanding information or practicing preventive measures, such as hand washing and social distancing 3) People who may not be able to communicate symptoms of illness (https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-disabilities.html)	Work is continuing to identify appropriate mitigations	

	Death from COVID-19	Higher age-adjusted mortality rates in disabled people	**Negative**	**Probable**	**Major**	**Short-term**	An analysis by the Office for National Statistics found that disabled people aged nine and over made up almost 6 out of 10 COVID-19 deaths between March and July. Both males and females aged nine and over had higher age-adjusted mortality rates than those that were non-disabled. (https://www.ons.gov.uk/peoplepopulationandcommun	Work is continuing to identify appropriate mitigations	
Physical Health	COVID-19 Infection	People experiencing a prolonged and relapsing course of the illness	**Negative**	**Confirmed**	**Moderate**	**Short-term**	There is growing evidence that a number of people who initially experience only mild to moderate COVID-19 disease are experiencing a prolonged and relapsing course of the illness - a condition that has been termed 'Long-Covid' (Health & Equity in Recovery Plans Working Group. Direct and indirect impacts of COVID-19 on health and wellbeing. Rapid Evidence Review. July 2020. Available at: https://www.ljmu.ac.uk/~/media/phi-reports/2020-07-direct-and-indirect-impacts-of-covid19-on-health-and-wellbeing.pdf)	Post-covid services should provide joined up care for physical and mental health. Promotion of the NHS 'Your Covid Recovery' online service. Available at: https://www.yourcovidrecovery.nhs.uk/. Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	People accessing services for Long Covid
	COVID-19 Infection	Patients who have required ventilation due to COVID-19 may develop Post-Intensive Care Syndrome (PICS) - an amalgamation of persistent physical, cognitive and psychological impairments	**Negative**	**Confirmed**	**Moderate**	**Short-term**	Patients who have required ventilation due to COVID-19 may develop Post-Intensive Care Syndrome (PICS) - an amalgamation of persistent physical, cognitive and psychological impairments following prolonged ventilation. A significant proportion of all patients, across all ages, admitted to an Intensive Care Unit (ICU) requiring mechanical ventilation go on to develop PICS. Although, data on this topic hasn`t been collected yet for COVID-19 patients, it is reasonable to assume that the number of people with PICs is going to increase (Jaffri U.A. and Jaffri A. Post-Intensive care syndrome and COVID-19: crisis after a crisis? Heart Lung. June 2020. Available at: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7301100/)	Post-covid services should provide joined up care for physical and mental health. Promotion of the NHS 'Your Covid Recovery' online service. Available at: https://www.yourcovidrecovery.nhs.uk/. Commissioners should note impacts and ensure services are designed and/or reconfigured to provide sufficient mitigation.	People with Post-Intensive Care Syndrome (PICS)
	Access to information	Information about COVID-19 and what actions to take changes rapidly. People with learning disabilities may not have access to easy read/accessible information	**Negative**	**Probable**	**Moderate**	**Short-medium term**	Healthwatch Worcestershire has conducted a learning disability and autism survey. Of the 84 people who completed the survey 37% said they had been able to find information that was easy to understand.	There is a need for up-to-date easy-read and accessible information for people with learning disabilities. This should include information that people who are digitally excluded can access.	

	COVID-19 Infection	A small number of children have been identified who have developed a significant systemic inflammatory response following COVID-19 infection.	**Negative**	**Confirmed**	**Minimal**	**Short-term**	Children and infants typically experience a mild illness. However, a small number of children have been identified who have developed a significant systemic inflammatory response following COVID-19 infection (Royal College of Paediatrics and Child Health. Guidance: Paediatric multisystem inflammatory syndrome temporally associated with COVID-19. London: Royal College of Paediatrics and Child Health; 2020)	Early recognition by paediatricians and specialist referral including to critical care is essential	Children with Paediatric Multisystem Inflammatory syndrome (PIMS)
Screening Services, Vaccinations and Services for Women and Children	Immunisation for childhood diseases	Reduction in take up of childhood immunisations	**Negative**	**Probable**	**Moderate**	**Short-term**	A search of local primary care data showed there has been a reduction in the take up of immunisations in eligible children	Targeted catch up programme with primary care and school immunisation programme. Media campaign to promote childhood immunisations. Maintain media campaign to promote immunisations, whole system approach.	Primary care data on immunisation
Sexual Health	Sexually Transmitted Infections	Adverse effects due to reduced service delivery	**Negative**	**Probable**	**Moderate**	**Short-term**	In May 2020 it was reported that nationally 54% of UK sexual health services had closed, and 38% of sexual health staff had been moved to work in other parts of the NHS (Health and Social Care Inquiry on delivering core NHS and care services during the pandemic and beyond, Joint submission by the British Association for Sexual Health and HIV (BASHH) and the British HIV Association (BHIVA) May 2020)	Ensuring adequate local provision of sexual health services during COVID-19, particularly for key vulnerable groups, will be a challenge. However, the increased use of remote and online services is an opportunity to change the way that services are delivered.	Sexually transmitted infection rates, Sexually transmitted infection prevalence
	Sexually Transmitted Infections	Reduced sexual activity may have positive effect on STI spread	**Positive/ Opportunity**	**Possible**	**Minimal**	**Short-term**	Speculation by the British Association for Sexual Health and HIV (BASHH) and the British HIV Association (BHIVA) in their submission to the Health and Social Care Inquiry on delivering core NHS and care services during the pandemic and beyond.		Sexually transmitted infection testing rates, Sexually transmitted infection prevalence, Teenage conceptions
	Sexually Transmitted Infections	Increased testing at home/use of online services	**Positive/ Opportunity**	**Probable**	**Moderate**	**Uncertain**	The lockdown has led to increased testing at home/use of online services - this may be more effective and efficient for some population groups (Health and Social Care Inquiry on delivering core NHS and care services during the pandemic and beyond, Joint submission by the British Association for Sexual Health and HIV (BASHH) and the British HIV Association (BHIVA) May 2020)	Build on the increased use of remote and online services as an opportunity to change the way that services are delivered whilst ensuring that vulnerable groups can still access services.	Sexually Transmitted Infection Testing rates
	Contraception	Difficulty obtaining long acting contraception	**Negative**	**Possible**	**Moderate**	**Short-term**	Highlighted by a key informant	Ensure adequate local provision of sexual health services during COVID-19	
Urban/Rural Classification and Access to Green Space	Access to green space	Lack of access to green space for people without a private garden	**Negative**	**Confirmed**	**Moderate**	**Short-term**		Work is continuing to identify appropriate mitigations	
	Access to green space	Increasing numbers of people accessing public green space	**Positive/ Opportunity**	**Possible**	**Moderate**	**Short-term**	Lockdown measures have caused huge changes in people's lifestyles and habits. At the time of writing Google mobility data shows that nationally there has been a sustained increase in people visiting parks	Work is continuing to identify appropriate mitigations	

	Type of area someone lives in (urban vs rural)	Higher rates of death and number of Covid-19 cases among people in more urban areas	**Negative**	**Probable**	**Major**	**Short-term**	Local analysis shows Covid-related deaths per 10,000 population in urban areas may be higher than more rural areas in the county.	Continued protection of the vulnerable cohort via wearing facemasks, social distancing, handwashing. etc Potential for higher scale local lockdowns or certain measures if cases continue to rise.	Mortality rates and number of cases in urban compared to rural areas
Working Age People Including Key Workers	Covid-19 Infection	Higher age-adjusted mortality rates in certain occupations	**Negative**	**Probable**	**Major**	**Short-term**	Nationally, age standardised mortality rates for male security guards and related occupations were nearly four times higher than those for all men of working age, while for taxi, cab, bus, and coach drivers the age standardised mortalities were well over double (Covid-19 in the workplace. BMJ Editorial. Available at: https://www.bmj.com/content/370/bmj.m3577.short?rss=1&utm_source=feedburner&utm_medium=feed&utm_campaign=Feed%3A+bmj%2Frecent+%28Latest+from+BMJ%29)	Persuading members of public who use transport and areas protected by security guards adhere to guidance on social distancing, facemasks etc to limit risk to workers	Mortality rates and infection rates by occupation, with specific attention on those in occupations that require frequent public exposure.
	Work environment	Impact of the pandemic on health and care staff	**Negative**	**Possible**	**Moderate**	**Short-Medium term**	Information from a key informant	Ensuring key workers are safe, mentally and physically well, have childcare and family support, and able to continue their duties going forward as COVID-19 cases potentially increase in the future and in the wake of any future further national or local restrictions	Health and care workers testing positive for COVID-19 and number of health and care staff able to access and do their job
Working Conditions and Practices	Better work life balance	Homeworking; new hobbies and interests as a result of having more time	**Positive/ Opportunity**	**Possible**	**Moderate**	**Short, medium and long term**	Increasing referrals to social prescribing		Referrals to social prescribing, nature of refferals