

## NORTH YORKSHIRE OUTBREAK MANAGEMENT ADVISORY BOARD

### REMOTE MEETING

**ON: Tuesday 18<sup>th</sup> August 2020**

**AT: 11.00 a.m.**

This meeting will be held using video conferencing.

The live broadcast of this meeting will start when the meeting commences. Members of the press and public who would like to view it can do so via the County Council's website. For help and support in accessing the meeting, please contact the Democratic Services Officer responsible for the meeting (see contact details below).

This Board is an informal, non decision-making body and therefore there is no facility for public questions or statements. If you would like to find out more about the North Yorkshire Outbreak Management Plan you can do so from the link [here](#)

## AGENDA

NO.	ITEM	LEAD	INDICATIVE TIMINGS
1	Welcome/introduction	Chair	11.00 – 11:15
2	Apologies for absence	Chair	
3	Declarations of interest (if any)	Chair	
4	Notes of meeting held on 30 <sup>th</sup> July 2020 and any matters arising <b>ENCLOSED</b>	Chair	
5	Update on the current position in North Yorkshire.  <b>SLIDES ENCLOSED</b> which contain data internationally; for the UK; North Yorkshire; and by Districts  There will also be a verbal update on Theme 2 of the Outbreak Management Plan – High Risk Locations	Lincoln Sargeant, Director of Public Health	11:15 – 11:45

6	Beyond the data: Understanding the impact of Covid-19 on Black, Asian and Minority Ethnic Groups  <b>SLIDES TO FOLLOW</b>	Lincoln Sargeant, Director of Public Health	11:45 – 12:15
7	Communications Update	Faye Hutton, Marketing and Customer Communications Officer	12:15 – 12:20
8	Partner Updates (on an exception basis):  <ul style="list-style-type: none"> <li>• Business / LEP</li> <li>• Care Sector</li> <li>• Healthwatch</li> <li>• Local Government</li> <li>• NHS</li> <li>• Police</li> <li>• PF&amp;C Commissioner</li> <li>• Public Health England</li> <li>• Schools</li> <li>• Voluntary &amp; Community Sector</li> </ul>	ALL	12:20 – 12:30
9	Next Meeting – 8 <sup>th</sup> September 2020 at 11.00 a.m.	Chair	-
10	Any other business	Chair	-

Patrick Duffy  
Senior Democratic Services Officer  
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Tel: 01609 534546

13<sup>th</sup> August 2020



## North Yorkshire Outbreak Management Advisory Board

Notes of a discussion held remotely, via Skype, on Thursday 30<sup>th</sup> July 2020

### THOSE WHO JOINED THE DISCUSSION:

#### North Yorkshire County Council Representatives

Councillor Caroline Dickinson, Executive Member, Public Health, Prevention, Supported Housing  
 Councillor Stuart Parsons, Leader of the Independent Group, North Yorkshire County Council  
 Barry Khan, Assistant Chief Executive (Legal and Democratic Services)  
 Richard Webb, Corporate Director, Health and Adult Services

#### District Council Representatives

Councillor Mark Crane, Leader, Selby District Council  
 Councillor Claire Docrwa, Ryedale District Council (substitute for Councillor Keane Duncan)  
 Councillor Richard Foster, Leader, Craven District Council  
 Councillor Helen Grant, Richmondshire District Council (substitute for Councillor Angie Dale)  
 Councillor Ann Myatt, Harrogate Borough Council  
 Councillor Stephen Watson, Portfolio Holder for Environmental Health, Waste and Recycling, Hambleton District Council

#### Other Partners' Representatives

Amanda Bloor, Accountable Officer, North Yorkshire Clinical Commissioning Group  
 Phil Cain, Deputy Chief Constable (substitute for Lisa Winward)  
 David Kerfoot, Chair, North Yorkshire and York Local Enterprise Partnership  
 Phil Mettam, Test and Trace Lead, Humber, Coast and Vale  
 Caroline O'Neill, Community First (substitute for Leah Swain)  
 Mike Padgham, Chair, Independent Care Group  
 Sally Tyrer, Chair, North Yorkshire Local Medical Committee  
 Ian Yapp, Head Teacher, Riverside Primary School

#### In attendance (all from North Yorkshire County Council, unless stated)

Ray Busby, Principal Democratic Services Officer  
 Patrick Duffy, Senior Democratic Services Officer (Clerk)  
 Faye Hutton, Marketing and Customer Communications Officer  
 Cath Ritchie, Project Manager, Technology and Change  
 Lisa Dixon, Director, Scarborough Borough Council  
 Victoria Turner, Public Health Consultant  
 Louise Wallace, Assistant Director, Health and Integration

#### Apologies received from

Judith Bromfield, Healthwatch, North Yorkshire  
 Councillor Angie Dale, Leader, Richmondshire District Council  
 Councillor Keane Duncan, Leader, Ryedale District Council  
 Richard Flinton, Chief Executive, North Yorkshire County Council  
 Councillor Michael Harrison, Executive Member for Health and Adult Services  
 Councillor Carl Les, Leader of North Yorkshire County Council  
 Julia Mulligan, Police, Fire and Crime Commissioner  
 Simon Padfield, Public Health Consultant, Public Health England  
 Lincoln Sargeant, Director of Public Health  
 Leah Swain, Chief Executive, Community First Yorkshire  
 Lisa Winward, Chief Constable

NO.	ITEM	ACTION
26	<p><b>CHAIR</b></p> <p>County Councillor Caroline Dickinson advised that, in the absence of the Chair and Vice-Chair, she had been asked to Chair today's meeting.</p> <p style="text-align: center;">County Councillor Caroline Dickinson in the Chair.</p>	
27	<p><b>APOLOGIES</b></p> <p>As stated in the attendance on the previous page.</p>	
28	<p><b>DECLARATIONS OF INTEREST</b></p> <p>There were no declarations of interest.</p>	
29	<p><b>NOTES OF MEETING HELD ON 10<sup>TH</sup> JULY 2020</b></p> <p><b>AGREED</b> that these were an accurate reflection of the discussion.</p>	
30	<p><b>UPDATE ON THE CURRENT POSITION IN NORTH YORKSHIRE</b></p> <p>Slides had been circulated with the Agenda containing data internationally; for the UK; North Yorkshire and by District; and information on Care Home Settings.</p> <p>Victoria Turner provided an overview of the data.</p> <p>Globally, the virus is still spreading. The national picture is variable with low rates in North Yorkshire. Overall, rates are below national and regional rates. We take an interest in Bradford's rate, with it bordering North Yorkshire. No outbreaks being managed currently.</p> <p>She also provided an update on the Themes in the Outbreak Management Plan. Among the points made were:-</p> <ul style="list-style-type: none"> <li>- Customer Contact Cards are being developed. Local and national cards will be available on the County Council's website.</li> <li>- Regarding testing, a key issue is the transfer of mobile units from the military to commercial providers. We are having to find alternative venues, as those that had been in use in tourism and leisure are now returning to their original purpose.</li> <li>- Joint working is in place with the military with respect to Catterick Garrison and other bases.</li> </ul> <p>Slides had also been circulated that contained information on Care Settings and the lessons learned so far. Victoria advised that two elements had been crucial in the approach to managing outbreaks in these settings:-</p> <ul style="list-style-type: none"> <li>• A pro-active, preventative approach, including daily calls to all care settings to pick up issues early; and</li> <li>• Multi-Agency outbreak management, including daily discussions with partners.</li> </ul>	

Richard Webb made a number of points, including:-

- The Council and partners had tried to keep the human element uppermost in their minds. It is too easy to see statistics but the reality is this is about people who have lost their lives and grieving families.
- The Council had also tried to do more than (and keep ahead of) Government Policy. For instance, the Government said there should be a focus on people aged 65 plus. Locally, the decision was taken to continue support for younger age groups, as well as refugees and the homeless, working with Districts.
- The Council had not shied away from taking action where required.
- There had been good joint working with the Independent Care Group, with emphasis on support and help rather than inspection.
- Extra Care settings appear more Covid-free than Residential Nursing Homes. This could be due to the physical space (people have their own front door) and the way that the care is organised.
- The response is beginning to be stepped down but active relationships with care settings will continue.
- Now planning for winter and safe discharges from Hospitals.
- In terms of lessons learned, improved computerisation and improved collection around data/timeline on cases, deaths, etc., are the key points.

Victoria Turner and Richard Webb responded to a number of questions raised by Members through the chat facility as follows:-

- The Council has no direct power to take action against pubs, etc., who do not take customers details to facilitate track and trace. It is mostly a persuasive approach but, ultimately, the Council could make the non-compliance public.
- Will feedback to colleagues that some tourists are not adhering to social distancing as much as the local population and the fact that people are finding information and publicity at destinations, useful, alongside the national cards and links to Welcome to Yorkshire.
- As the flu season approaches, a variety of potential testing sites will be considered.
- The joint work being undertaken by Public Health with the Military, will look at how to combat young soldiers not adhering to social distancing and the fact that this is causing concern.
- Will take on board the helpful comments about how the public can best be kept informed.
- Work is on-going with businesses with high concentrations of foreign labour.

	<ul style="list-style-type: none"> <li>Regarding enforcement powers of District Councils, this will be covered more under the next Item on the Agenda (Contain Framework) but, for individuals, there is the power to remove someone to a testing place and hold them there. For premises, any action must be proportionate and reviewed regularly. This is limited in that, if the premises are deemed to be part of essential infrastructure, the decision rests with Central Government. Richard Webb added there is national debate whether HSE may delegate power to Environmental Health Officers (EHOs), using a joint warrant. EHOs have queried whether any such delegation will be accompanied by resources to support this. District colleagues are involved in these conversations.</li> </ul> <p>Mike Padgham (via the chat facility) thanked Richard Webb and Victoria Turner for the support provided to Care Providers and for being several steps ahead of national guidance.</p> <p>Phil Mettam (via the chat facility) said that across Humber, Coast and Vale and wider, he could confirm and commend the breadth and proactive aspects of the approach outlined by Richard and Victoria.</p> <p>The Chair thanked Mike Padgham and Phil Mettam for their positive comments and expressed her thanks to staff and partners for their work in keeping residents of North Yorkshire safe from the pandemic. NOTED.</p>	
31	<p><b>CONTAIN FRAMEWORK</b></p> <p>Slides had been circulated with the Agenda.</p> <p>Richard Webb advised that:-</p> <ul style="list-style-type: none"> <li>- The new powers wrap around the work in Leicester and other areas and set out arrangements for future management of the virus.</li> <li>- The Framework refers to areas of intervention; areas of concern and local lockdown - which provide a fast track route for Councils to lockdown premises; events; and public spaces. The headline had been around “Local lockdowns”. In reality, the approach is more nuanced.</li> <li>- Central Government retain power to lockdown geographically and critical infrastructure.</li> <li>- Triggers are based on data and intelligence. For instance, the number of positive test results. In North Yorkshire this is running at about 1% whereas, in areas giving cause for concern, the figure is between 5% and 7%.</li> <li>- Local intelligence – the sort that partners on the Board are aware of – will be significant.</li> </ul> <p>Barry Khan outlined the legal aspects of the powers.</p> <ul style="list-style-type: none"> <li>- The Framework contains powers for the County Council to issue directions to the Borough/District Council “to exercise any of the district council’s functions in a specified way”. He did not envisage this happening, given the already good working relationships that exist between county and district colleagues.</li> </ul>	

	<p>A more likely scenario is that the County Council would want to empower a District Council Officer to do some of the enforcement role jointly with the County.</p> <ul style="list-style-type: none"> <li>- Principally, the County Council can: <ul style="list-style-type: none"> <li>1. Close individual premises</li> <li>2. Put a restriction on events</li> <li>3. Close public outdoor spaces</li> </ul> </li> <li>- However, as mentioned by Victoria Turner, if premises are classed as critical infrastructure, the power of closure is with Central Government.</li> <li>- There are several things the County Council must do before taking action, such as taking advice from the Director of Public Health, potentially engage this Board; and review decisions every 7 days. The decision must be evidential based and fulfil the stated criteria.</li> <li>- The notification and decision making process were also outlined.</li> <li>- A number of areas are awaiting clarification, including adequacy of the new powers and the position re households of multiple occupation (licensing arrangements, testing and outbreak management enforcement). Richard Webb advised that discussions with the Ministry of Housing, Communities and Local Government had taken place, but they are not minded to change their approach. He referred to links to the latest guidance, set out below:-  <a href="https://www.gov.uk/government/publications/covid-19-and-renting-guidance-for-landlords-tenants-and-local-authorities">https://www.gov.uk/government/publications/covid-19-and-renting-guidance-for-landlords-tenants-and-local-authorities</a>  <a href="https://www.gov.uk/government/publications/covid-19-and-renting-guidance-for-landlords-tenants-and-local-authorities">https://www.gov.uk/government/publications/covid-19-and-renting-guidance-for-landlords-tenants-and-local-authorities</a> </li> </ul> <p>In response to question from a Member, via the chat facility, Barry Khan advised that the Council can close down open spaces where a large number of people are congregating. There is a right of appeal, but the closure remains in place until the appeal is held.</p> <p><b>AGREED:</b></p> <ul style="list-style-type: none"> <li>a) To note the powers and ensure constituent organisations are briefed and able to implement the new powers and expectations.</li> <li>b) To flag up any practical issues to the Director of Public Health and Assistant Chief Executive (Legal and Democratic Services).</li> <li>c) That, where powers need to be used, an emergency meeting of this Board will be convened on an advisory basis, where possible and practicable.</li> <li>d) To set in place a rolling programme of scenario-testing.</li> <li>e) That the Chair, in consultation with North Yorkshire County Council's Assistant Chief Executive (Legal and Democratic Services), have the delegated authority to make any necessary changes to the Board's Terms of Reference, to ensure compliance with the new powers.</li> </ul>	<p>Barry Khan</p> <p>ALL</p> <p>Barry Khan</p> <p>Richard Webb</p> <p>Barry Khan</p>
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<p>32</p>	<p><b>PARTNER UPDATES</b></p> <p><u>David Kerfoot, Local Enterprise Partnership:</u>  Referred people to the website <a href="http://www.businessinspiredgrowth.com">www.businessinspiredgrowth.com</a> and the Chief Executive’s Newsletter, which the LEP contribute to.</p> <p><u>Mike Padgham, Independent Care Group:</u></p> <ul style="list-style-type: none"> <li>- Reiterated his thanks to the County Council for its support to providers and for keeping one step ahead of Government.</li> <li>- Testing is still an issue and the sector is mindful that some care staff returning from holiday may be subject to quarantine, which could create pressure on the service.</li> <li>- The recommencing of visiting to care settings is something that the sector must get right.</li> <li>- The sector remains calm, but challenges remain.</li> <li>- A positive has been that the pandemic has flagged up nationally and locally how important social care is to the public and the NHS.</li> <li>- Some lessons have been learnt on technology.</li> </ul> <p><u>Caroline O’Neill, Community First Yorkshire:</u></p> <ul style="list-style-type: none"> <li>- The voluntary and community sector appreciate the way that partners are combining and sharing information to disseminate to networks.</li> <li>- They are finding a focus on Parish Councils to be useful, especially in villages, given their links to communities.</li> <li>- A lot of work is being undertaken on the reopening of community buildings and supporting groups.</li> <li>- Sustainability of the sector is crucial - particularly small organisations who reach people that do not engage with health. These contacts will be key in any outbreak.</li> <li>- Have been sharing messages with Danny Kruger, MP, who is leading on work for the Prime Minister on voluntary and community services and how that work can be sustained.</li> </ul> <p>The Chair referred to the tremendous work being done by the voluntary and community sector.</p> <p>NOTED.</p>	
<p>33</p>	<p><b>A PROPOSAL RE LIVE STREAMING OF MEETINGS AND ASSOCIATED MATTERS</b></p> <p>Barry Khan presented this report which had been circulated with the Agenda.</p> <p>Richard Webb commented that this is a big issue of public interest and therefore he felt this Board should be open to the public. There will still need to be occasions when a full and frank discussion is required on items that are not in the public domain.</p>	



	<p><b>AGREED:</b></p> <p>a) That the Agenda papers and Notes of future meetings of this Board (i.e. with effect from the meeting to be held on 18<sup>th</sup> August 2020) be published on the Council's website.</p> <p>b) That, whilst not subject to requirements that papers be published five clear days before the meeting, papers be published as soon as it is practicable to do so i.e. as soon as they are available.</p> <p>c) That all future meetings of the Board be live streamed via the County Council's You Tube Channel.</p> <p>d) That where a confidential discussion needs to take place between partners, half an hour be set aside at the end of the live streamed meeting, once the live stream has ended.</p>	<p>Patrick Duffy</p> <p>Patrick Duffy</p> <p>ALL TO NOTE Patrick Duffy</p> <p>Patrick Duffy</p>
34	<p><b>NEXT MEETING</b></p> <p>Thursday 18<sup>TH</sup> August 2020 at 11.00 a.m.</p>	<p>ALL TO NOTE</p>
35	<p><b>ANY OTHER BUSINESS</b></p> <p>None.</p>	

The meeting concluded at 1:15 p.m.

PD

# Public Health Intelligence

## **Outbreak Management Advisory Board – 18 August 2020**

Data pack produced – 12<sup>th</sup> August 2020

Produced by Leon Green / Emel Bagdatlioglu

# International

## Global situation

The WHO reports:

- 19,936,210 confirmed cases (216,000 daily)
- 732,499 deaths (5,100 daily)
- 216 areas / nations with cases

Dashboard accessed 08:45 BST 12/08/20. Data will reflect different reporting timeframes.

## Comparison with Europe

The table to the right shows 14-day COVID-19 case notification rate per 100,000.

The UK is ranked 19<sup>th</sup> for new cases and 4<sup>th</sup> for deaths, after Romania, Bulgaria and Luxembourg.

Total cases in the UK are second highest after Spain and total deaths are highest in Europe, but subject to variation in death registration practices between countries.

Source: [European Centre for Disease Prevention and Control](#)

Rank	Country	Cases	Deaths
1	USA	4,999,815	161,547
2	Brazil	3,035,745	101,049
3	India	2,268,675	45,257
12	UK	311,645	46,526

Globally, cases now exceed 18 million, up 1.7 million in a week. Over 700,000 deaths to date.

The UK has the 12<sup>th</sup> highest total cases globally and the 4<sup>th</sup> highest number of deaths in the world.

Nation	Total to date		14-day cumulative rate per 100,000	
	Cases	Deaths	Cases	Deaths
Luxembourg	7,216	121	145.8	1.5
Spain	322,980	28,576	90.3	0.3
Romania	62,547	2,729	85.7	2.7
Malta	1,012	9	63.0	0.0
Belgium	74,527	9,879	61.7	0.4
Bulgaria	13,512	459	41.3	1.6
Sweden	82,972	5,766	35.0	0.6
Netherlands	59,139	6,148	34.6	0.0
Iceland	1,962	10	30.3	0.0
France	202,775	30,340	29.4	0.2
Czechia	18,494	389	28.0	0.2
Portugal	52,825	1,759	24.6	0.4
Poland	52,410	1,809	23.7	0.4
Cyprus	1,252	19	21.9	0.0
Denmark	14,815	620	21.8	0.1
Croatia	5,649	158	18.8	0.5
Ireland	26,768	1,772	17.9	0.2
Austria	22,122	723	17.7	0.1
United Kingdom	311,641	46,526	17.1	1.2
Greece	5,749	213	14.2	0.1
Germany	217,293	9,201	13.3	0.1
Norway	9,638	256	9.8	0.0
Estonia	2,158	63	9.1	0.0
Lithuania	2,265	81	8.8	0.0
Slovenia	2,255	120	8.1	0.1
Slovakia	2,599	31	7.7	0.1
Italy	250,825	35,209	7.5	0.2
Liechtenstein	89	1	5.2	0.0
Latvia	1,293	32	3.8	0.1
Finland	7,601	333	3.7	0.1
Hungary	4,731	605	2.8	0.1

# UK

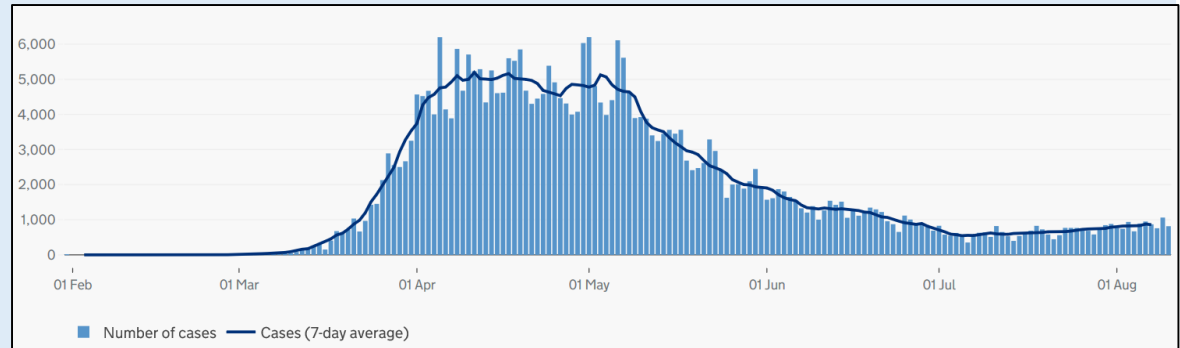
Public Health England data shows there were 311,641 lab confirmed cases in the UK on 10<sup>th</sup> August, up by 816 from the previous day. This is more recent than the data reported by the WHO.

The UK, the rolling average of daily new cases saw a minimum of 546 on 5<sup>th</sup> July and has increased slowly since, with the latest average at 856 daily cases.

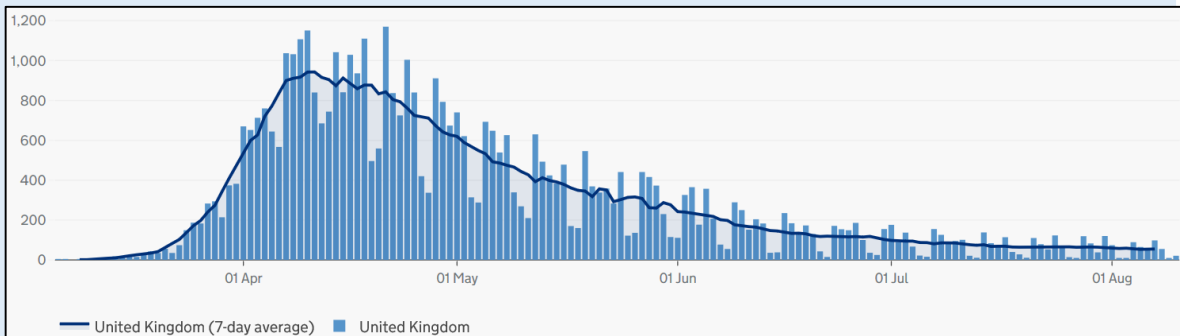
As of the 10<sup>th</sup> August, there have been 46,526 deaths recorded in the UK, up by 21 from the previous day.

The UK rolling average continues to reduce, with 55 average daily deaths recorded most recently.

## Daily cases (UK)



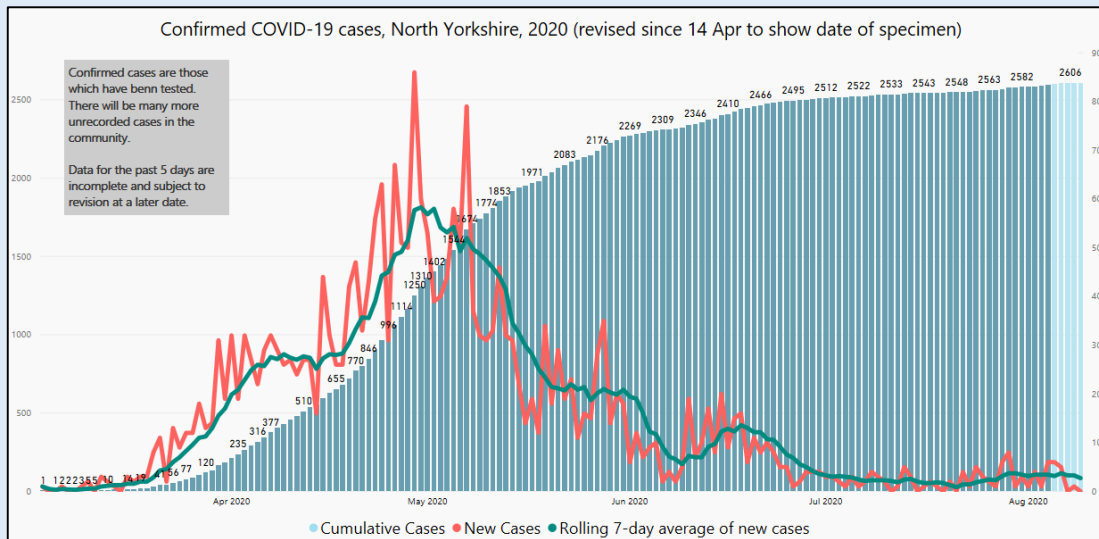
## Daily deaths (UK)



PHE revised the presentation of deaths to include all the deaths of people who have had a positive COVID-19 test result from a Public Health or NHS laboratory. The data do not include deaths of people who had COVID-19 but had not been tested, people who were tested positive only via a non-NHS or Public Health laboratory, or people who had been tested negative and subsequently caught the virus and died. Deaths of people who have tested positively for COVID-19 could in some cases be due to a different cause.

# North Yorkshire

## Cases

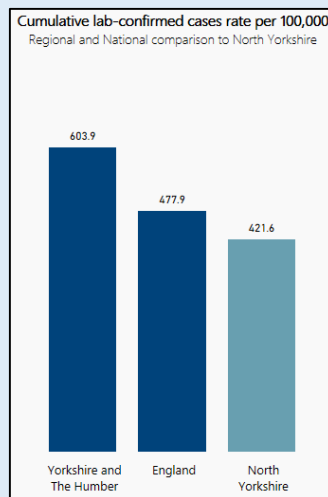
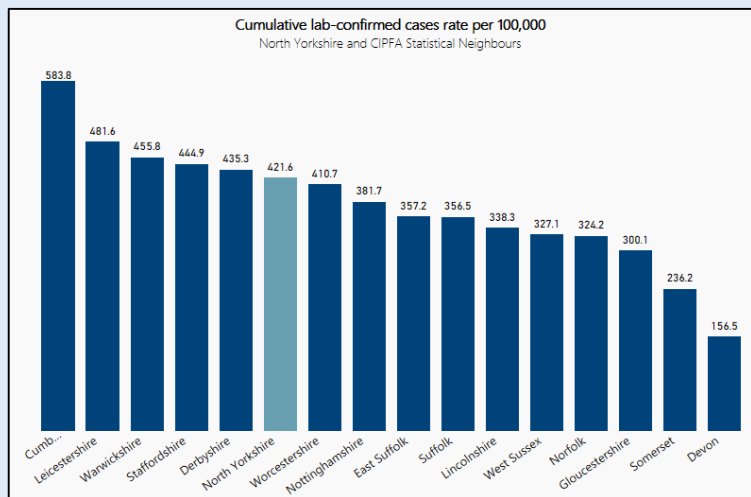


## Cases

The number of cases of COVID-19 in North Yorkshire continues to increase. At 9<sup>th</sup> August, there have been 2,606 positive tests since 3<sup>rd</sup> March, up by 5 from the previous day.

There have been 43 new cases reported in the past two weeks. The rolling average of new cases in North Yorkshire is 3 cases per day.

## Rates



## Rates

Compared with 15 other statistical neighbour local authority areas, North Yorkshire is ranked 6<sup>th</sup>, with 421.6 cases per 100,000 population. The three areas with the lowest rates are all in the South West region, which has been less affected by COVID-19 to date.

The North Yorkshire rate is lower than both the England and Yorkshire & Humber rates.

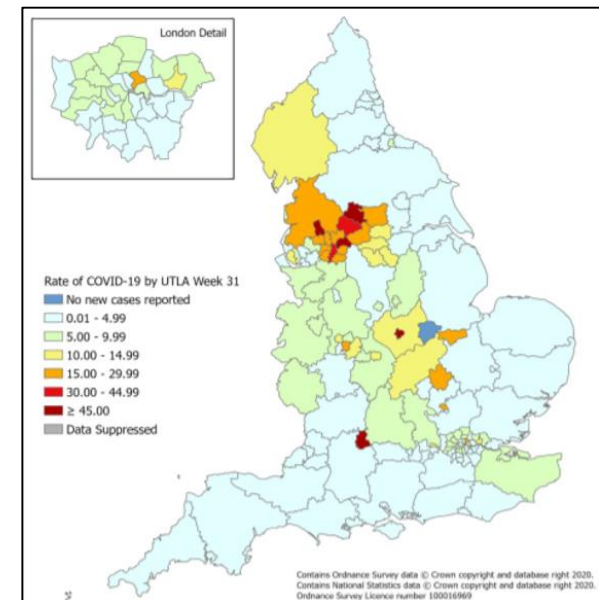
# Infection rates 2

Last refreshed	10/08/20 (daily) and 04/08/20 (weekly)	Data source(s)	NYCC Dashboard via PHE; <a href="#">PHE Weekly surveillance report</a>
Descriptor	Crude rates per 100,000 population for North Yorkshire and its CIPFA statistical neighbours; weekly rate of new cases per 100,000 (map)		
Key points	<ul style="list-style-type: none"> <li>The rate of cases in North Yorkshire is slightly lower than England.</li> <li>Scarborough has the highest rate amongst the county's districts and Ryedale the lowest.</li> <li>Compared with the highest rates in authorities in England, all North Yorkshire's districts are much lower. Scarborough has less than half of the rate in Leicester.</li> <li>Weekly new cases in North Yorkshire are below 5 per 100,000 population.</li> </ul>		

North Yorkshire districts		
Area	Cases	Rate per 100,000
Craven	253	422.8
Hambleton	318	347.2
Harrogate	737	458.2
Richmondshire	275	511.8
Ryedale	137	247.4
Scarborough	563	517.7
Selby	323	356.4
North Yorkshire	2,606	421.6
England		477.9

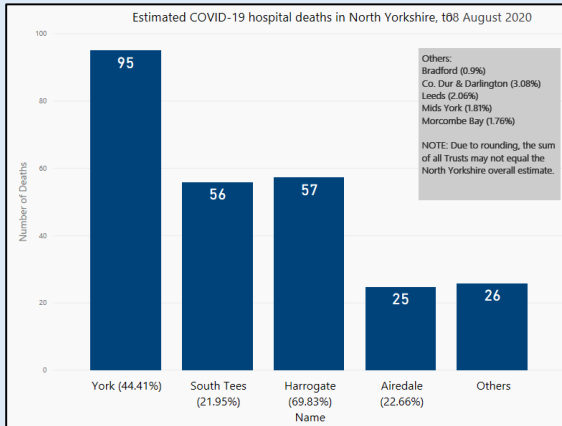
Ten highest local authorities in GB	
Area	Rate per 100,000
Leicester	1,465.7
Blackburn with Darwen	1,041.4
Bradford	1,007.8
Oldham	1007.5
Wrexham	1001.8
Merthyr Tydfil	961.4
Rochdale	893.8
Denbighshire	845.4
Barnsley	823.1
Bedford	799.8

Weekly rate of new cases, week 32 (to 4<sup>th</sup> August)

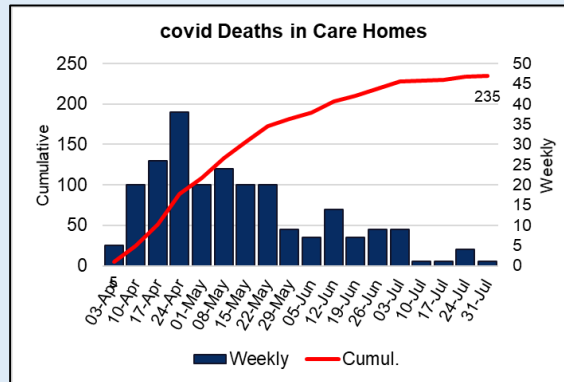


# Deaths

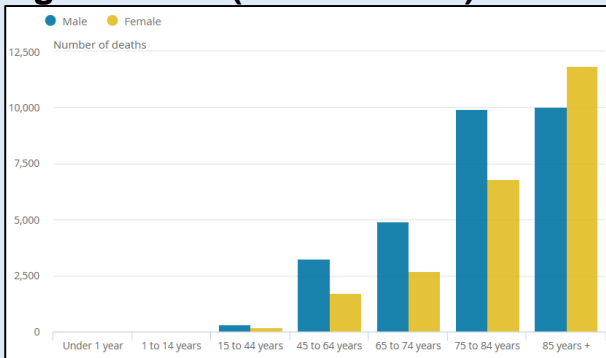
## Estimated hospital deaths



## Care homes



## Age and sex (national data)



## Hospital deaths

Estimates suggest about 259 deaths in hospital for North Yorkshire residents, unchanged since the last report. As well as the four main hospital trusts, this total includes additional estimated deaths from other surrounding hospital trusts: Darlington, Leeds, Mid Yorkshire, Morecambe Bay and Bradford.

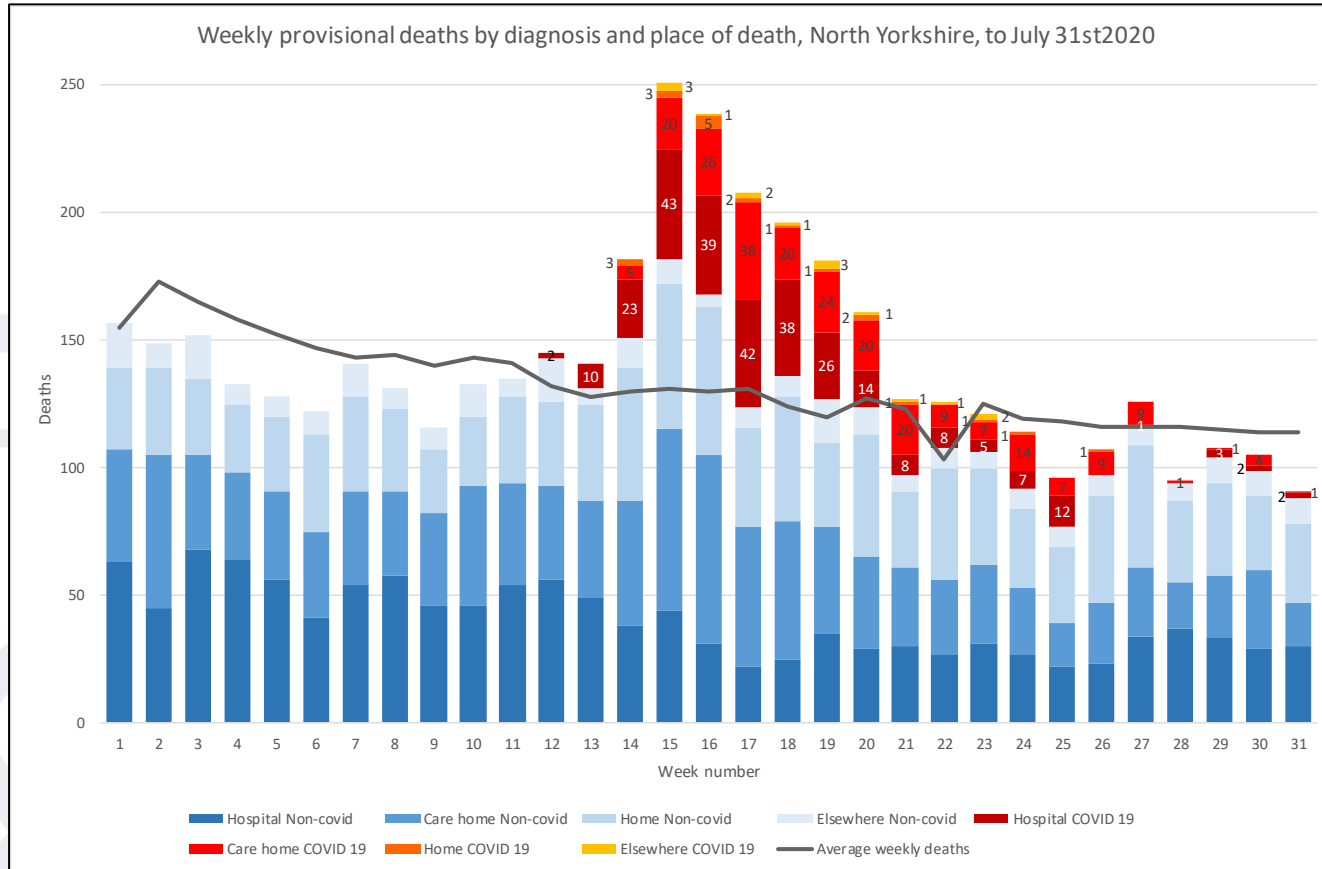
## Care home deaths

235 deaths in care homes up to 11th August, up from 229 in previous report (to 10<sup>th</sup> July).

## Age and sex

Nationally, the number of deaths involving COVID-19 remains higher in the older age groups than in younger age groups. The highest proportions of deaths involving COVID-19 are in people aged over 75 years.

# ONS provisional weekly deaths to 31<sup>st</sup> July



For week 31, there were 91 deaths reported in North Yorkshire. This is 23 (20%) below the long-term average of 114 for week 31 and 12 lower than week 30 (103 deaths).

There were 3 deaths attributable to COVID-19, down from 5 death in week 30.

In week 31, COVID deaths comprised 3% of all deaths in the county, down from 6% in week 30 and lower than 40% in week 17.

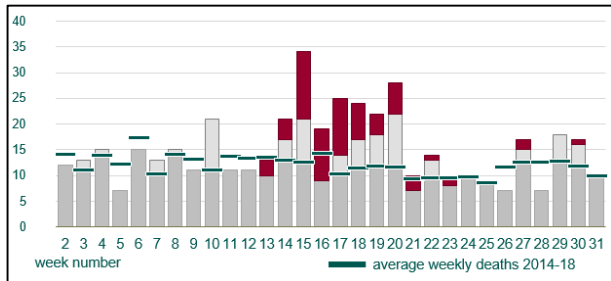
To 31<sup>st</sup> July 2020, there have been 4,417 deaths in North Yorkshire from all causes and 556 (12.6%) from COVID-19. 31.8% of deaths from all causes have occurred in care homes. There have been 235 deaths in care homes from COVID-19, 42.3% of all COVID deaths.



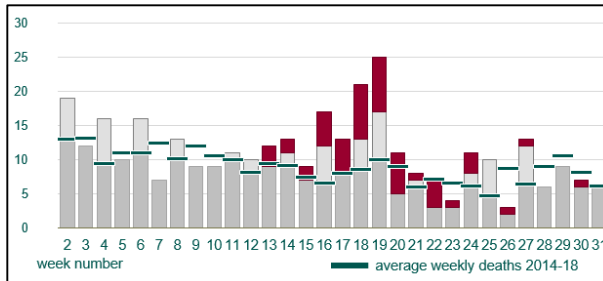
# Weekly provisional deaths by diagnosis and place of death, North Yorkshire, (to 31<sup>st</sup> July 2020, wk 31)

Charts show number of deaths by district. Non-Covid shown grey, Covid-coded deaths shown red. This week there were Covid-19 deaths in Harrogate and Selby districts. Total deaths increased in Hambleton and Selby districts.

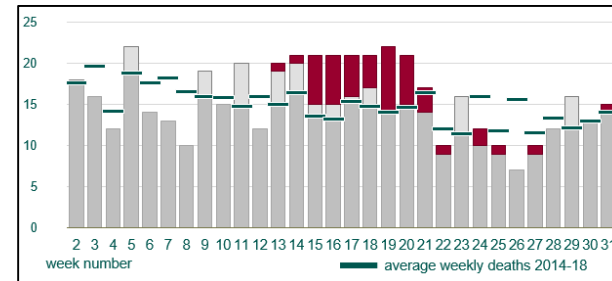
## Craven



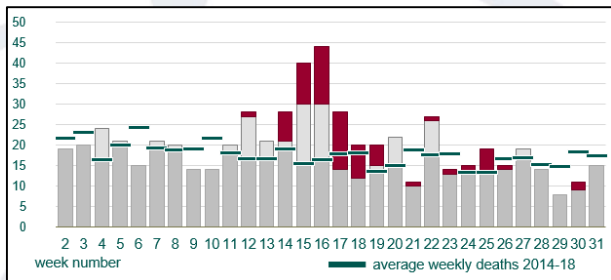
## Richmondshire



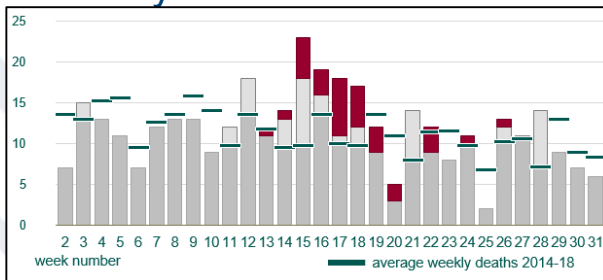
## Selby



## Hambleton

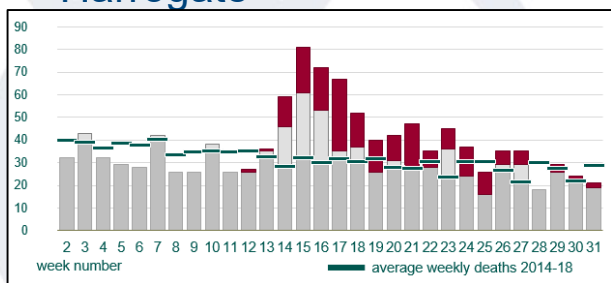


## Ryedale

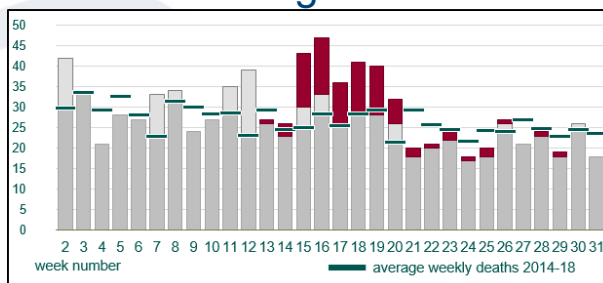


Key	
Covid19 mentioned on the death certificate	
Covid19 not mentioned	

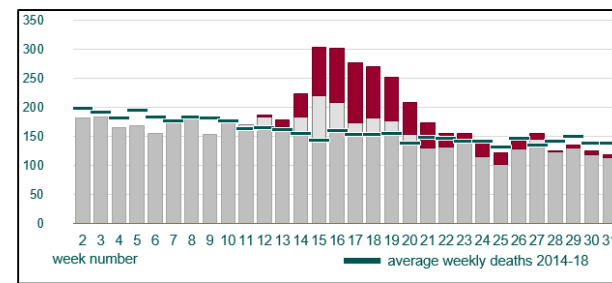
## Harrogate



## Scarborough



## North Yorks LRF



# Data sources

WHO Coronavirus Disease (COVID-19) Dashboard:

<https://covid19.who.int/>

European Centre for Disease Prevention and Control:

<https://www.ecdc.europa.eu/en/cases-2019-ncov-eueea>

Coronavirus (COVID-19) in the UK: <https://coronavirus.data.gov.uk/>

NHS England, COVID-19 Daily Deaths:

<https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-daily-deaths/>

Office for National Statistics, Deaths registered weekly in England and Wales, provisional: week ending 24 July 2020:

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsregisteredweeklyinenglandandwalesprovisional/weekending31july2020>