



NAC

Equality News and Views – May 2020

As you are aware the Government has temporarily removed the legal requirement for local authorities to hold public meetings in person during the coronavirus pandemic and has introduced [the Local Authorities and Police and Crime Panels \(Coronavirus\) \(Flexibility of Local Authority and Police and Crime Panel Meetings\) \(England and Wales\) Regulations 2020](#) to enable meetings to be held ‘virtually.’

It may be prudent upon all Councillors to contact their respective Councils and ensure work is in progress to implement the above Regulations to ensure there is not a void in their democratic right to be included in Council decision making.

Feeling worried about the Coronavirus?

The Coronavirus outbreak means that life is changing for all of us for a while. It may cause us to feel anxious, stressed, worried, sad, lonely or frustrated. It's important to remember it is OK to feel this way and that everyone reacts differently. Remember, this situation is temporary and, for most of us, these difficult feelings will pass. There are some simple things you can do to help you take care of your mental health and wellbeing during times of uncertainty. Doing so will help you think clearly, and make sure you are able to look after yourself and those you care about.

The NHS has developed 10 tips to help improve mental health and wellbeing for anyone who is worried or anxious about the COVID-19 pandemic.

Please access this advice by following the below link:

<https://www.nhs.uk/oneyou/every-mind-matters/coronavirus-covid-19-anxiety-tips>

Coronavirus mortality varies based on ethnicity

The Office of National Statistics has found that black people are over four times more likely to die as a result of coronavirus than white people, while Bangladeshi and Pakistani males were 1.8 times more likely to die from the disease than white males, after other pre-existing factors were taken into account, with women from those ethnic groups 1.6 times more likely to die from the virus than white women. The ONS stated: “These results show that the difference between ethnic groups in COVID-19 mortality is partly a result of socio-economic disadvantage and other circumstances, but a remaining part of the difference has not yet been explained.”

Contact-tracing app project encounters problems

The leader of **Isle of Wight Council** has urged residents across the island to install the NHS's COVID-19 contact-tracing app, saying the area has “been asked to lead on the development of this pioneering technology and with your support we can give a great response. However, some Isle of Wight residents have said the app fails to work on phones that are only a few years old, while others have complained that it drains their phone's battery or bombards them with multiple notifications. The NHS has asked Swiss app developer Zuhkle to explore the “feasibility” of updating the app to use the same model as Apple and Google's contact-tracing app, where data



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remains on the phone rather than being uploaded to a central server. Hopefully this can be achieved before being rolled out across the UK.

You can also read the latest advice in respect of COVID19 by accessing the following:

<https://www.nhs.uk/conditions/coronavirus-covid-19/>

Councils have received no data from Deloitte tests

Local authorities and GPs have warned that the results of hundreds of thousands of COVID-19 tests being carried out at drive-through testing centres operated by the private sector have not yet been shared with them, leaving councils with “no idea” where local disease clusters are located. Chief medical officer Chris Whitty has apologised to local health leaders that they have not yet received data from the “pillar-two” tests conducted by Deloitte, which now make up the majority of tests carried out each day. During a conference call with council public health directors, Prof John Newton, the government’s national testing coordinator, also said that Deloitte did not “yet” ask people for their ethnicity – or whether they worked in health or social care.

Household Waste and Recycling Centres (HWRCs) are starting to reopen across the country in areas where councils can implement social distancing rules.

The Government published [guidance](#) for local authorities (May 5) on the safe re-opening of the HWRCs in their regions, as demand soars following the lockdown period.

Storing waste in homes and businesses has had to take place of correctly disposing it recently as the country locked down to avoid the spread of coronavirus. It has also led to the uptake of fly-tipping and littering in communities.

Now councils are being encouraged to open HWRCs to avoid this, and the public can travel to a centre to dispose of their waste if storing in their home presents risk of injury or risk to health or environment.

The Government guidance looks to support councils in planning the reopening, including limiting the number of people allowed on site at any one time and protecting the workforce through social distancing.

And finally, below I have included an interesting article for all of us who experience chronic pain due to various arthritic conditions. There may be more hope of future treatments.

Stay safe and hopefully we shall see each other at a conference soon.

Councillor Christopher Akers-Belcher – NAC Equalities Officer



IMPROVING OUTCOMES FOR PEOPLE WITH ARTHRITIS

Professor David Warwick, *President, British Society for Surgery of the Hand and Consultant Hand Surgeon, University Hospital Southampton*

Osteoarthritis and rheumatoid arthritis – the two most common types of arthritis – affect millions of people in the UK, negatively impacting their quality of life by causing painful and stiff joints. The most common sites in the body for osteoarthritis are the spine, knees, hips, hands and wrists.

Around 8.75 million people in the UK aged over 45 have sought treatment for osteoarthritis. By 2030, one in five people in the UK will be aged 65 or over and so with a growing and ageing population, this demand will only likely to increase.

Indeed, over the next 10 years, it is anticipated that there will be an increase of almost 40% in hand surgery for common conditions such as osteoarthritis and other degenerative hand problems. Reduced hand function has a significant impact on people's independence, their ability to carry out normal day to day activities, and their general quality of life.

There is a lot that can be done to help people with osteoarthritis in the hand or wrist. Non-surgical treatments such as painkillers, splints and steroid injections can help. If these are not adequate then surgery is considered.

Traditionally, an arthritic joint in the hand was fused. This took away the pain, but at the expense of all-important functional movement. However, joint replacements are now

available for the wrist, thumb and fingers. Although less commonly performed than hip or knee replacement, joint replacement in the hand or wrist can successfully relieve pain while preserving the range of motion that people need for daily life.

But whereas joint replacements for arthritic hips and knees are nowadays extremely reliable and durable, current designs in the hand and wrist are still in a developmental phase. When they work well, patients' lives can be transformed but the outcomes are unpredictable and sometimes rather disappointing.

With further investment to enable both development by engineers and good quality clinical studies, we can develop the best possible implants which provide a long-lasting solution for symptomatic hand and wrist arthritis.

Of course, the NHS is stretched, with multiple pressures for resources. Yet we should not neglect investment into joint replacement of the hand and wrist, since advances in this area would have significant benefits for so many patients with arthritis, enabling them to enjoy the full use of their hands, helping them to stay active and independent.

