



To: Health and Social Care Scrutiny Board (5)

Date: 2 March 2016

From: Jane Moore, Director of Public Health

Subject: Improving health and wellbeing through the environment - Joint working between Public Health and Place Directorate

1. Purpose

The purpose of this report is to provide Health and Social Care Scrutiny Board with an overview of how the Public Health department is working in partnership with colleagues across the Place Directorate to reduce health inequalities linked to the environment in Coventry, and to invite Health and Social Care Scrutiny Board to comment on the proposed approach for continuing to reduce health inequalities in Coventry.

The report provides information about the impact of the physical and socioeconomic environment on health inequalities, the way we have collectively worked to reduce inequalities, the projects and initiatives that aim to make a difference and planned next steps.

2. Recommendations

It is recommended that the Scrutiny Board:

- (i) Endorse the suggested approach for continuing to reduce health inequalities in Coventry
- (ii) Contribute comments and suggestions to the approach and work undertaken

3. Introduction to health inequalities

Reducing health inequalities is a key priority in the Council Plan¹. Tackling health inequalities will improve the health, wellbeing and life chances of the people of Coventry. Where someone is born, where they live, whether they work or not and what they do all affect how long someone will live, how healthy they will be and the quality of life they will experience. Inequalities affect everyone. People in lower socio-economic groups are more likely to experience chronic ill health and die earlier than those who are more advantaged. There is a social gradient to health: the better the conditions in which you are born, grow up and live, the more likely you are to enjoy better health and a longer life^{2 3}. Statistics from Public Health England show that health inequalities are reducing in Coventry. Men in the most affluent areas of Coventry will live, on average, 9.8 years longer than men in the most deprived areas (last year's figure was 11.2 years) while for women the difference is 8.5 years (last year's figure was 8.6 years). The difference is even greater for those who are homeless or who suffer from a mental health condition.

Reducing health inequalities, targeting resources based on need and investing in prevention and early intervention can:

¹ Council Plan, Coventry City Council, 2014, http://www.coventry.gov.uk/info/11/strategies_plans_and_policies/2089/council_plan

² Acheson, *Independent inquiry into inequalities in health report*, London: The Stationery Office, 1998

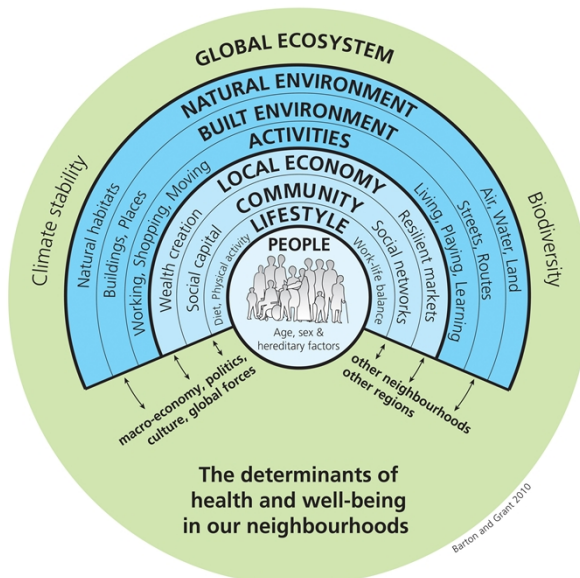
³ Dahlgren, Whitehead, *Policies and strategies to promote social equity in health*, Stockholm: Institute of Futures Studies, 1991

- Improve health outcomes, wellbeing, mental health and community and social relations
- Increase productivity and improve educational attainment, which will ensure the area is attractive to employers, develop the local economy and promote good growth
- Reduce the costs of welfare and healthcare
- Reduce future demand for council services and associated costs including social care, child protection, housing, domestic and sexual violence and substance misuse.

4. Impact of environment on health inequalities

Communities and the environment are important to an individual's physical and mental health and wellbeing, and the actions an individual takes to improve their lifestyle or health status are likely to be influenced by the physical and socioeconomic environment in which they take place. This includes the built environment of physical structures and buildings, along with the connections between spaces, such as transport infrastructure, parks and green spaces. The built environment includes several material determinants of health, such as housing, transport and neighbourhoods.

The different influences on health and wellbeing are demonstrated in the diagram below ⁴



The socioeconomic environment refers to the influences of education, income and, most importantly, employment.

Unemployment is associated with a range of health risks and health inequalities caused both by the event of becoming unemployed as well as the reduced income, deprivation and poverty due to being out of work. The risk of ill health increases as the duration of unemployment increases⁵.

Coventry faces a number of challenges in employment for residents, with no significant improvement in the number of residents in employment or the number of people unemployed since the end of the recession in 2009⁶. The Jobs and Growth Strategy for Coventry 2014-17 has highlighted that whilst creating high value jobs is a key priority for the city, creating jobs that are accessible to groups of residents who are unable to compete at this level, for example those

⁴ Barton H, Grant M. A health map for the local human habitat. Journal of the Royal Society for the Promotion of Public Health 2006

⁵ Chief Medical Officer's Report 2011

⁶ A Jobs and Growth Strategy for Coventry 2014 - 2017

with lower level skills is also important to ensure that they too have access to employment opportunities. It is also key that jobs in the city are 'good jobs' which support the physical and mental health and wellbeing of employees, are inclusive, sustainable, offer fair pay, have good working conditions and provide opportunities for employees to advance.

5. What are we doing?

Public Health is working with colleagues in the Place Directorate to address key issues which impact on health inequalities. These are described below.

Local Plan

Planning ensures that the right development happens in the right place at the right time, benefitting communities and the economy. It plays a critical role in identifying what development is needed and where, what areas need to be protected or enhanced and in assessing whether proposed development is suitable.

A Local Plan is a statutory document which sets out planning policies in a local authority's area. The main legislation that sets out the process for the preparation of Local Plans can be found in Part 2 of the Planning and Compulsory Purchase Act 2004 as amended and The Town and Country Planning (Local Planning) (England) Regulations 2012 as amended. Every area in the country has to produce a local plan following a detailed process of drafting and consulting. It contains strategic policies which will guide the future development of the city. All other documents within the Local Development Scheme must be consistent with it. In turn, the Local Plan has to be consistent with national policy and must be applied when considering proposals for development.

Coventry City Council are preparing a local plan to guide how the city grows and develops so, once again, we can become a top ten city. The plan covers the whole city and sets out how and where new homes, jobs, services and infrastructure could be developed and the kind of places and environments that will be created. A good local plan means we have the ability to protect Coventry for decades to come.

In Coventry we have a public health practitioner working alongside the planning policy team, leading on embedding health and wellbeing across all aspects of the planning process, including public health input into the local plan. This has supported development of the local plan, individual policy development, and has resulted in a Coventry Local Plan that contains specific policy guidance on health and wellbeing for the first time since the 1950s. It promotes active travel, access to healthy food, improved housing quality, and adequate provision of green spaces and improvements to air quality. Together these factors will help reduce health inequalities and improve life expectancy.

The Coventry Local Plan 2016 alongside the city centre area action plan is out for consultation until Monday 29th February.

Cycle Coventry

Coventry City Council has also improved facilities for cyclists and pedestrians in the city, focusing on areas of deprivation in the southwest and northeast of the city covering the residential areas of Canley, Tile Hill, Henley, Foleshill and the city centre, and has provided cycle training, route planning and travel planning to adults and children. The Cycle Coventry project is a three year project which aims to reduce health inequalities by improving facilities for cyclists and pedestrians. Additional funding from Public Health has enabled over 1,100 children and adults to access cycle training and bike maintenance sessions. These include free Bikeability courses in areas of higher deprivation and greatest health need. For some of these participants, these sessions have been the first time they have ridden a bike. Public Health has

worked with the Cycle Coventry team to promote cycling and greater use of new cycle routes by funding volunteer-led Sky Ride Local events in areas of greater deprivation and other mass cycling events.

A personal travel planning project has targeted over 12,000 households in the most deprived area of Coventry to promote cycle training, bus rides and offer other information and support to encourage cycling, walking and bus use. This method proves effective at reaching those most in need of improving their lifestyle. These initiatives are enabling more people to get to work, education and training using the 32km of new and improved cycle routes that have been created as part of the project.

Environmental Enhancements

Green spaces offer a unique range of opportunities to improve health and reduce health inequalities. The use of open space for recreational purposes has a profound impact on both an individual's physical and mental health.

The Public Health team is working with Place Directorate on a range of initiatives to increase the use of open spaces by people experiencing greater deprivation including:

- Investment in outdoor gym equipment as part of the wider redevelopment and improvement of Swanswell Park in Hillfields. This has led to a range of equipment being installed and work with local schools, businesses and health providers in the local area to encourage its use.
- Work with Warwickshire Wildlife Trust to operate a series of green gyms along the city's river corridors in Spon End, Wood End / Bell Green and Stoke Aldermoor / Stoke Floods. Green gyms deliver a physical activity programme by 'stealth' through outdoor environmental work. The programme is specifically working with inactive people living in areas of greater deprivation or with mental health conditions. These projects also leave a legacy through improved open space facilities for the wider community.

Sports

Physical inactivity is linked to a range of adverse health and wellbeing outcomes. While levels of physical activity have improved, local rates are still lower than the England average and significant inequalities remain. The Public Health team is supporting the Place Directorate sports development function on a range of initiatives to improve uptake of physical activity and sporting opportunities across the city. One example is 'In it Together', a school based project delivered by Sky Blues in the Community, targeting young women aged 14-18 years living in areas of high deprivation. The project builds on a pilot and aims to promote and engage participants in regular physical activity through a series of weekly after school group activities. The project aims to shift attitudes towards physical activity amongst participants and build groups and networks to identify opportunities to continue outside of the intervention.

Eating Out Coventry

The health implications of excess weight are widely documented, ranging from diabetes, respiratory problems, stroke, high blood pressure, coronary heart disease, psychological and emotional problems, musculoskeletal problems, liver disease, and cancer.

Excess weight is commonplace among adults, with between 51.6% and 61.5% of Coventry's adult population, and 20.6% of the city's reception-age children (4-5 years of age), being overweight or obese.

Poor eating habits and insufficient physical activity drive obesity. Local research indicates that only 27% of adults eat 5 portions of fruit or vegetables a day. A survey in 2013 found that 40% of local primary school children eat at least 4 portions of fruit or vegetables a day, falling to only 19% of secondary school pupil eating at least 4 portions per day⁷.

The last few decades has seen an increase in the amount of food being eaten out of the home, with restaurants, cafés, work canteens and other food outlets providing one in six meals. As a nation, we are spending almost 30% of household expenditure on eating out, snacks and soft drinks. The growth in consumption of takeaway foods poses significant challenges and can make healthy choices more difficult for consumers. Coventry University, in collaboration with the City Council (predominantly Public Health and Regulatory Services) and individual business involved in the production and / or retailing of food are working to develop and deliver a range of interventions to contribute to healthier eating through:

- Improving the nutritional content of food sold to local people by caterers, restaurants and takeaways.
- Improving labelling to better enable the local population to make healthy choices.
- Demonstrating the competitive advantage of adopting healthier food production and retailing to local businesses

Fuel Poverty

A household is said to be in fuel poverty if they have required fuel costs that are above average (the national median level) and were they to spend that amount they would be left with a residual income below the official poverty line. National fuel poverty statistics show that 15.9% (20,579) of all Coventry households were in fuel poverty in 2013, compared to 10.4% of all households in England. Coventry has the 6th highest level of fuel poverty of all 326 local authorities in England. Living in cold, damp homes can exacerbate a range of health conditions, particularly cardiovascular and respiratory diseases, as well as being linked with poor mental health. Furthermore an estimated 10 - 30% of all excess winter deaths are due to people living in cold homes.

Between mid-January and the end of April 2015, 450 vulnerable households were provided with advice through Keeping Coventry Warm services, commissioned by Public Health alongside Place Directorate colleagues, and over 50 households were identified for support with boiler replacements/repairs, loft and cavity wall insulation etc. An “Affordable Warmth on Prescription” pilot is currently underway in Coventry, based on a successful scheme run in Sunderland, providing heating and insulation measures to households dependent on benefits and in which at least one individual has a long term condition. Public Health and the Sustainability and Low Carbon team are working with two GP practices in the City to deliver this pilot.

36% of households in Coventry where at least one resident has a disability are in fuel poverty. These residents can’t afford to keep their homes warm enough, and their health and wellbeing can be adversely affected by the cold and damp. The City Council’s Sustainability and Low Carbon Team won funding from the Department of Energy and Climate Change and from British Gas to provide insulation and heating improvements for disabled householders likely to be fuel poor. Over 80 homes have now had insulation and heating improvements carried out, saving householders £460 each year on fuel bills, keeping them warmer and healthier.

Coventry and Warwickshire Air Quality Alliance

A Coventry and Warwickshire Air Quality Alliance is in the process of being established. The proposal is to form a partnership between relevant colleagues from Coventry City Council, Warwickshire County Council, as well as District and Borough Councils in Warwickshire, including representation from planning, transport, environmental health and public health, as well as Public Health England.

⁷ Coventry Children and Young People’s Survey 2013

The purpose of the Air Quality Alliance will be to:

- Provide a multi-professional partnership forum for the sharing of ideas and evidence-based practice related to reducing the negative health and environmental impacts of poor air quality, and to identify opportunities for collaboration.
- Agree an overarching set of areas for action, identifying all relevant and planned work in these areas as well as gaps.
- Raise the profile of air quality in appropriate professional and political fora, and the health, environmental and financial benefits associated with addressing the problems associated with poor air quality.
- Co-ordinate collective actions required to address poor air quality, including acting as a vehicle for national, regional and local campaigns.

Licensing

Coventry City Council has a duty under the Licensing Act 2003 to carry out its functions with a view to promoting the licensing objectives and operate in line with the Council's Statement of Licensing Policy. Under the terms of the Act, the Council's Statement of Licensing Policy has to be renewed every five years. The Statement of Licensing Policy has recently been updated for 2016-2021.

The Licensing Act 2003 allows the scrutiny of licence applications by people working or living in the vicinity of licensed premises, interested parties and a number of public bodies. Directors of Public Health are the most recent addition to the list of responsible authorities and in Coventry, a public health practitioner represents the DPH to act as the public health lead for all alcohol licensing matters. All responsible authorities, including public health, meet regularly to review applications and share intelligence, which is used, for example, to trigger operations to seize illegal alcohol or identify premises selling alcohol to under-18s.

A number of new paragraphs have been added to Coventry's Statement of Licensing Policy acknowledging that the Director of Public Health is now a Responsible Authority, strengthening the inclusion of public health principles in licensing decisions.

Job Shop

To reduce health inequalities, getting people into work is vital, but it is also important for jobs to be high quality and sustainable. Coventry City Council's Job Shop along with its partners have worked with businesses to improve employment opportunities for Coventry people and get people into work.

Coventry City Council's Employment Team based at the Job Shop offers a bespoke service to help each customer to get a high quality, sustainable job. Public Health have worked with the City Council's Place Directorate to base a mental health worker in the Job Shop for six months. This has enabled existing staff to extend their knowledge and develop new skills to help those with mental health difficulties to find suitable work. Three workshops were delivered: **Mental Health Awareness, Employment and Mental Health and Frames of Reference**, with 40 staff attending in total. This provision also reviewed working practices within the Job Shop and made a series of recommendations about how to improve support for people with mental health conditions.

The Council is also working with the Job Shop to attract people looking for employment to the council's vacancies. Through open days at the Job Shop and in-house events, 30 relief supervisors, 12 cleaners and 63 general assistants have been appointed to roles within the council.

Workplace Wellbeing Charter

Coventry City Council is also working with employers to ensure jobs are of a high quality and take account of the health and wellbeing needs of employees, through the use of the Workplace Wellbeing Charter. Coventry City Council's Business Investment Team provide support and guidance to businesses that want to achieve the Charter accreditation. The Charter requires employers to achieve a set of standards, developed by Public Health England, which take account of elements of the organisation's Leadership, Communication and Culture.

In the first half of 2015/16, 90 Coventry organisations were engaged with the Business Investment Team regarding completion of the Charter. These include major local employers such as Jaguar Land Rover and Ikea. Support for achievement of the Charter is provided free to Coventry employers, and is available at a cost to sites outside of the city.

The Team also facilitate a Workplace Health Champion Network and run specialist training workshops covering areas such as Stress and Wellbeing in the Workplace and Physical Activity in the Workplace.

6. Next steps

The development of the Marmot Strategy, focussing on good growth in the city, will be a key area of work for Public Health and the Place Directorate. Another priority will focus on the concept of 'Health in All Policies'. The Public Health team recently hosted a two day peer review visit as part of a sector led improvement programme developed by the LGA, Associate of Directors of Public Health and Public Health England to examine how effectively health impacts are considered in council policies. The recommendations from the visit will inform some of the future areas of work.

The Public Health Team has created a new Project Officer role specifically to work with the Place Directorate around issues of health inequalities. This will enable a number of projects to be undertaken, such as supporting the Kickstart Team to develop active travel plans for the new Friargate building and working with the Parks Team to produce a number of parks management plans.

Senior leads within Public Health and the Place Directorate maintain links between teams, enabling colleagues to identify shared priorities and potential for future joint working informing on-going work plans.

Report Author(s):

Name and Job Title:

Hannah Watts, Public Health Programme Officer – Inequalities

Directorate: People

Telephone and E-mail Contact: 02476 833973; Hannah.watts@coventry.gov.uk

Enquiries should be directed to the above person