



Report of the Strategic Director of Health and Wellbeing to the meeting of Bradford South Area Committee to be held on February 27th 2020

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Subject:

Health and wellbeing in the Bradford South Area of Bradford Metropolitan District

Summary statement:

This report from the Public Health team seeks to inform Bradford South Area Committee of data and activities relating to the health and wellbeing of the population of Bradford South constituency.

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Overview & Scrutiny Area:

Health and Wellbeing

1. SUMMARY

The following report aims to update members on the work and activities of Public Health in the Bradford South area. Under the Health and Social Care Act 2012 (18 6C) the Council, through the Director, assumed duties formerly held by various NHS bodies, primarily those of Health improvement and Health protection.

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Appendix 1 outlines the local and district wide performance data and outcomes. This shows that there are a range of health and wellbeing issues and needs for people living in Bradford South.

Supporting partnership working between voluntary and community sector organisations (VCS); the public sector (the Council and National Health Service -NHS organisations) and communities themselves can open up opportunities to make significant changes to improve wellbeing amongst Bradford South residents.

2. BACKGROUND

Public Health last reported to Bradford South Area committee on 28th March 2019. This years' report repeats the tailoring of issues to Bradford South, however some data is still only available on a district wide basis.

3. OTHER CONSIDERATIONS

3.1 Appendix 1 to this report updates the main statistics for Bradford South; Bradford District and the national picture. These have been updated from the last report, generally from data for 2017 to data for 2018, which is the usually the most recent data available.

3.2 Populations

The population of Bradford South continues to increase; by 3.3% since 2013. This is following the same growth trend as the District overall but is increasing at a slightly higher rate.

National figures show growing populations of people aged 16-64 and 65 plus which are not reflected in Bradford District's figures; instead there is a steady increase in 0-15s and those in the mid-life bracket.

21% of Bradford South's population described themselves as being from a black or minority ethnic (BaME) background in the 2011 census. The Bradford District wide figure is higher at 33%. Comparing this against other constituency breakdowns, Bradford South therefore has the third highest proportion of BaME residents in the district after Bradford West and East.

The next census will take place in 2021, giving more accurate baseline information on the population.

3.3 Life Expectancy

3.3.1 Life Expectancy at birth 2016-18

Average life expectancy is given below for England, Bradford District and Bradford South.

Average female average life expectancy at birth:

England 83.1 years

Bradford District 81.7 years,

Bradford South 80.7 years

Female life expectancy is lower than the District average in Queensbury, Royds and Tong wards and slightly lower in Great Horton ward.

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Average male life expectancy at birth:

England - 79.6 years

Bradford District - 77.7 years

Bradford South - 76.9 years

Male life expectancy is lower than the District average in Royds and Wibsey wards.

Potential reasons for premature mortality (early deaths) are explored in the report. Early deaths are defined as deaths under age 75. Bradford South has a higher rate of under 75 deaths than the average across the District, including higher rates of early death from cancer and respiratory disease than the District average.

3.32 Infant mortality 2016-18

Bradford District continues to have a high infant mortality rate – defined as the rate of infant deaths under the age of 1 year, per 1,000 live births. There has been a very slight reduction in each of the last 2 years taking the rate from 5.9 to 5.7 deaths per 1000 live births. The national figure is unchanged at 3.9 per 1000 live births meaning a very slight narrowing of the gap with the national average. However, Bradford District is still the 10th worst rate nationally and the highest rate in the region.

Between 2016-2018 there were 23 infant deaths in Bradford South over the three year period. This is a rate of 4.9 deaths per 1000 live births, lower than the average rate for Bradford district; but still a cause for concern. This is addressed in section

3.33 Under 75 mortality rates from cancer 2016-18

The mortality rates of people aged under 75 from cancer in South area have increased from 130 deaths on average each year to 146. South area continues to have the second highest figure for this in the district.

3.4 Child excess weight

3.41 Children aged 4-5 (averaged over 3 years) 2016 – 2018

Excess weight in children aged 4-5 continues to be an issue in South area where 25.5% of 4-5 year olds are overweight, considerably higher than both the Bradford average of 22.2% and the national average of 22.4% Three of the six wards are higher than both the District and national average – these are Royds, Tong and Wyke.

3.42 Children aged 10-11 (averaged over 3 years) 2016 – 2018.

Bradford South's average rate of excess weight in children aged 10-11 peaked in 2013-14 and has now decreased to match the district wide figure of 37.6%, but as this is higher

than the national average of 34.2% it is still a cause for concern.

3.5 Public Health and partner programmes

Public Health and their partners offer a range of services across Bradford District including in the Bradford South area. Since the last report to the area committee in March 2019 some of the new workstreams and new programmes reported to the Committee have been further developed to tackle health and wellbeing. Further details are set out throughout the report;

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3.6 Stop Smoking services and tackling illicit tobacco

3.6.1 Stop smoking support is provided by a team of specialists based in Public Health and via a network of providers in primary care and pharmacies. Stop smoking support continues to be available at a range of venues including General Practitioners (GP) surgeries, libraries, supermarkets and children's centres to ensure that support is accessible within communities. Within secondary care services a tobacco lead at Bradford Royal Infirmary acts as the first point of contact to refer patients into the specialist team.

3.6.2 Reducing smoking in pregnancy continues to be a priority, including for the Every Baby Matters programme. Public Health work with a range of health partners to ensure a systematic and evidence based approach to tackle maternal smoking is embedded throughout the antenatal care pathway.

3.6.3 Breathe 2025 is the smoking reduction vision for the Yorkshire and Humber. Its aim is to see the next generation of children born and raised in a place free from tobacco, where smoking is unusual, and not seen as the norm. A multipronged approach to reduce the number of young people taking up smoking is a priority. This includes tackling the trade in illegal tobacco to reduce harm. 'Keep it Out' is a programme jointly funded by local authorities across West Yorkshire. Illegal or illicit tobacco is unregulated and can be even more damaging to health than regular tobacco. It is available from a range of sources within some local communities. Its sale seriously undermines the impact of other tobacco control measures, makes it easier for children to start smoking and enabling them to become addicted to nicotine at a young age.

3.6.4 Lung cancer kills more people in West Yorkshire and Harrogate than any other cancer, with high levels of the disease still being diagnosed at a late stage, when it is more advanced and harder to treat. There is now robust evidence that earlier diagnosis can be effectively encouraged through a combination of targeted lung health checks in high risk areas, public awareness, clinician education and better access to diagnostic testing. With funding from West Yorkshire and Harrogate Cancer Alliance a pilot lung health check scheme has been run in Bradford in a number of General Practices. The programme identified current smokers and offered them a free lung health check in the community close to their home, along with access to specialist stop smoking advice and appropriate follow-up, including CT scanning, if needed. The pilot tested the opportunity to establish a local health and care partnership focused on improving early diagnosis and improving survival rates between the local council, providers of National Health Services (NHS) and commissioning organisations in order to drive the programme. Its success is currently being evaluated.

3.6.5 Public Health continue to work in partnership with the District's Clinical Commissioning groups (CCGs) who are moving towards operating as a single CCG. Their

Bradford Breathing Better programme focuses on improving respiratory health outcomes for children, young people and adults in Bradford with Chronic Obstructive Pulmonary (lung) disease (COPD) or asthma. The attached health profile shows that the higher rate of early death (under age 75) from respiratory disease is equivalent to 71 deaths per 100,000 population per year in South Bradford, higher than the District average of 51 per 100,000.

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3.7 Screening

3.7.1 There are currently three national screening programmes for Bowel, Cervical and Breast cancers, organised by Public Health England, NHS England, local Clinical Commissioning groups (CCGs) and/or local General Practices (GPs). Cervical screening is managed in primary care. However, as of 2018-19 Bradford District's take-up figures for these programmes continued to be poor in comparison to other areas of the country. This may be contributing to high mortality rates due to cancer for people aged under 75.

3.7.2 Public Health England leads a Bradford and Airedale Screening Group which meets quarterly. The aim of this group is to share good practice and develop joined up work programmes and is attended by representatives of all relevant local stakeholders, including CCGs, screening programme leads, LA Public Health, VCS organisations and Cancer Research UK. In addition to this, the West Yorkshire and Harrogate Cancer Alliance have a focus on improving screening uptake and both the CCGs and Public Health are closely involved in their work.

3.8 Social Prescribing

3.8.1 Community Connectors is a social prescribing project currently working across the ten community partnerships formed through the CCGs in Bradford. It offers support to people with social, emotional or practical needs which may be impacting on their health and wellbeing. The Council and the CCG contracted a VCS provider Health Action Local Engagement (HALE) and their partners to deliver this.

3.8.2 All GP practices across Bradford have a Community Connector linked to them. The service provides information and offers support and training for staff on the benefits the scheme can bring for patients and the practice. This includes how to refer into the service using the NHS's electronic management system, the sharing of good practice, case studies and delivering promotional info.

3.8.3 This service has been successful in helping individuals to tackle aspects of health and wellbeing which are not necessarily 'medically' treatable. Along with the personal benefits for individuals in receipt of services, a recent evaluation showed that there had been a 14% reduction in GP appointments for people in receipt of Community Connector support.

3.9 The Living Well Approach in Bradford- a whole system approach

"Making the healthy choice, the easy choice for people in Bradford District"

3.9.1.The Council and CCG have continued to develop work programmes to embed a broad 'Living Well' approach into service delivery across the District. Living Well is a 'whole systems approach' to reduce preventable ill health and premature deaths in Bradford. We are working with communities and partners to create local environments and places that promote healthy lifestyle behaviours. Thereby making health everyone's

business. The main goal is to empower people to adopt healthier lifestyle behaviours and to take better care of themselves.

3.9.2 Many preventable health conditions can be caused by lifestyle behaviours such as poor diet, lack of physical activity, smoking, excess alcohol and stress. However, these lifestyle choices often depend on the environment in which people live, work and play. For example, access to good food that is affordable, opportunities to engage in physical activities and the right support to deal with stressful life situations.

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3.9.3 The Living Well approach is creating an environment that encourages and supports people to eat well, move well and maintain a good mental well-being. This will reduce the number of people living with long term health conditions, improve the quality of people's lives and increase life expectancy across the District.

3.9.4 The Living Well approach brings a different emphasis, adding to a focus on working with individuals through a variety of personalised *programmes such as:*

- Weight management
- Physical activity
- Nutrition advice
- Smoking cessation
- Drug and alcohol services
- Support for mental well being

3.9.5 Without neglecting individual support, Living Well places greater emphasis on actions that have wider impact across society and the local system. These are actions that create an environment that enables people to make healthy lifestyle choices. It will ensure that promoting health and wellbeing is prioritised and embedded in policies and practices across all organisations in Bradford District. These will include the NHS, local businesses, communities and the voluntary sector.

3.9.7 The objectives of Living Well will be delivered through 4 main work streams:

Living well system:

- Is advocating for the adoption of the 'Living Well' approach across Bradford, thus making it everyone's business

Living Well People:

- creating and promoting access to opportunities for all people to engage in living healthier lifestyles
- developing an Interactive **Living Well website** as a one-stop shop for health and wellbeing advice and referral
- providing Living Well advisers trained on a wide variety of lifestyle behaviours
- working with General Practices and hospitals to refer individuals for help

Living Well Societies:

- creating the Living Well Brand and Social Movement
- delivering Living Well Health Campaigns
- supporting organisations and communities to adopt the Living Well approach through the Living Well Academy

Living Well Environments:

- creating a physical environment in Bradford where people find it easy to eat well, be physically active and maintain good mental wellbeing.

- working with relevant partners to eliminate or reduce outdoor and indoor threats to good health such as air pollution and excess cold
- working with schools to become Living Well Schools
- working with businesses and employers to become **Living Well organisations**

During the ongoing development of the Living Well approach the Bradford Encouraging Exercise in People (BEEP) has continued to operate including in Bradford South. BEEP is a long standing Exercise Referral Scheme (ERS) that includes a 52 week follow up support service. BEEP was hosted by the NHS until its move into the Council Public Health team in April 2013.

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BEEP practitioners follow the latest evidence based guidelines for exercise referral. BEEP practitioners provide patients with practical support and condition-specific exercise advice, with onward referral into safe and appropriate discounted exercise options. There is a 20-30% less chance of premature death in adults who become regularly active and 50% lower risk of developing other chronic disease such as obesity, diabetes, hypertension, cancers, CHD and bone conditions (CMO 2019).

The health profile in Bradford for physical activity shows only 51% of adults are reaching the Chief Medical Officers (CMO) recommendations of 150 minutes per week of moderate intensity exercise. This is significantly lower than the national average, with higher than national rates of adults being overweight or obese in Bradford, nearly 68%.

259 inactive people from Bradford South were referred into the BEEP service in 2018, 17% of total referrals into the service. Of these 80% of those who were contacted at week 12 reported being more active than they had been, and 46% of these were achieving the recommended 150 minutes per week.

Whilst the percentage of people reaching the recommended level of physical activity in South is lower than the Bradford average, the majority of these individuals reported that they had never exercised before and were also living with long term health conditions.

After 52 weeks just over half (52.62%) of those who were contacted in Bradford South were still active. Of those 56% were meeting CMO guidelines of 150 minutes per week.

3.10 Recovery Services - Drugs & Alcohol

3.10.1 All Police Force Districts in West Yorkshire saw an increase in possession of drugs offences over the year and 12 out of the 15 Community Safety Partnerships within Bradford's comparison group also reported an increase over the year suggesting that this is not an issue isolated to the district and may be due to a number of factors.

3.10.2 Nationally, there has been a reduction in the number of individuals who are accessing drug or alcohol treatment. This is reflected in the district where the number of individuals in Opiate treatment had reduced. The number of Opiate users in treatment is ageing and reducing, the average age of individuals in treatment across the district is 30-49 years. Half of individuals in treatment have a mental health need which is also being addressed. Many individuals will require a number of separate treatment episodes spread over a period of time, however evidence tells us that most individuals who complete successfully do so within two years of treatment entry.

3.10.3 The substance misuse services in the District were significantly redesigned to make it easier for people to access drug and/or alcohol treatment. A new single service (previously 14 separate providers) has been in place since October 2017 providing an additional 500 treatment places for the District. Successful completion of drug treatment for opiate use remains a priority and those new in to treatment and in active treatment are continually reviewed, challenged and encouraged throughout their treatment journey to increase the chance of success.

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3.10.4 The change to substance misuse delivery has seen the following:

- An increase in individuals accessing support for drug and alcohol issues.
- Availability of a 24/7 Single point of contact, which has allowed more people to access initial advice and support.
- Access to Community locations where individuals can be seen nearer to their home with treatment hubs in both Bradford and Keighley available for individuals requiring a more intense additional clinical intervention.
- District saw a decrease in the proportion of opiate clients in treatment for 6 years or more from 38.6% to 33.3% between (17/18 and 18/19)
- Support provided to over 230 carers who have been affected by another person's substance misuse with an aim to improve physical health, mental health and quality of life for carers .This has been highlighted as a positive in a recent CQC inspection.

3.10.5 A new prevention and early help service has been launched for young people - Alcohol Drug Education Prevention Team (ADEPT). The service offers advice and information about alcohol and drugs, to young people up to the age of 21years, parents, carers and professionals. Any young person who requires structured treatment is referred into the newly commissioned Substance Misuse Service – One80 provided by The Bridge Project. A real positive is that no young person under the age of 18 has been referred requiring treatment for Opiate use. The main substances of misuse for young people requiring support are Alcohol and Cannabis, reflecting the national picture.

3.10.6 The 'shrink drink 'campaign ran throughout the last quarter, linked with alcohol awareness week. The targeted alcohol campaign which was led by our community educators (CEs) across both Bradford and Keighley has seen the New Directions team raise awareness, deliver training and strengthen relationships within the community. The CEs have been out across the district raising awareness and delivering a range of creative brief interventions in a variety of locations including religious, educational, medical, professional and retail establishments. These include Bradford University, Bradford College, Morrison's, Tesco's, Bradford Crown Court and the Fire service. The team have spoken to over 1200 members of the public and have conducted 899 brief interventions including the alcohol audit.

3.10.7 The service has received lots of positive feedback following the campaign including a substantial amount of requests for repeat training, stalls and events. As a result of the campaign the service has been asked to link in with the health initiative project as part of the PHE targeted approach to raising awareness of the benefits of 'living well'. The aim is to work in unison with PHE to raise awareness of how to 'live well' by utilising our existing training sessions as part of an overall training package for professional organisations across the district.

3.11 Services for Children and Families

3.11.1 Infant Mortality

Infant mortality remains a key health outcome for infant and child health. The 3-year rolling Infant Mortality Rate (IMR) in Bradford has reduced from 8.2 in 2006-08 to 5.7 per 1000 live births in 2016-18. Following five successive years of reductions, the District's rate has been fairly static since 2011-13. The latest rate remains higher than the average rate for England (3.9) and Yorkshire and the Humber (4.0) and is higher in the more deprived parts of the district. Analysis shows that the rate has reduced faster over time in the more deprived areas of the district, but wide variation and health inequalities remain across the district.

3.11.2 The Every Baby Matters Programme (EBM)

This programme is a multi-agency partnership with commitment to improve maternal and infant health and reduce infant mortality across Bradford District. It builds on the recommendations of the 2004-6 Bradford District Infant Mortality Commission, considers annual findings from the Child Overview Death Panel, and sets out an action plan to continue to progress this important agenda in partnership. The group is also working closely with the local maternity system on the Maternity transformation programme work stream on prevention.

3.11.3 Key EBM workstreams. Over the past year these have included:

- i) Ensuring pregnant women and young families have priority access to safer and healthier housing where appropriate and standards in the private sector are improved.
- ii) Systematic work across the district to promote breastfeeding using evidence based approaches and promoting healthy eating and healthy weight for pregnant women, as well as continued promotion of Vitamin D tablets and Vitamin D awareness.
- iii) Early access to high quality antenatal care for all pregnant women with a focus on identifying those who are at risk or vulnerable at an early stage to provide support
- iv) Robust universal healthy child programme offer for young children and their families focusing on support and signposting for those who are more vulnerable to services in Children's Centres, voluntary and community sector and Primary care.
- v) Support for women to stop smoking in pregnancy with specialist midwifery services (14.6% of women report being smokers at time of delivery, versus 10.6% for England)
- vi) Development of a family leaflet and video planned around increasing genetic inheritance awareness.
- vii) A range of social media campaigns to support safe sleeping, breastfeeding, stopping smoking in pregnancy and other key areas
- viii) Continued in depth analysis of why infants die in the district as part of the Child Death Overview Panel work with an annual published report
- ix) Use of national and local research such as the Born in Bradford research and emerging research and evaluation from the Big Lottery funded Better Start Bradford programme.

3.12. 0-19 years old services

3.12.1 The Early Prevention and Help service is now co-located and integrated with the Public Health 0-19 Service. 0-19 services include health visitors, school nursing and oral health improvement services. Co-location and closer working across disciplines will help to make sure that more support is offered to families with the greatest need; aiming to ensure that families get the 'right support at the right time'.

3.12.2 Inbuilt within this new model is the need to support an asset based service model to foster greater self-care and resilience within families and communities themselves for the future. There will be a particular focus on how we support the first 1001 days as evidence shows that these are the most important in establishing good wellbeing in a child's life. The 0-19 prevention and early help service will be investing in pregnancy and up to the 2nd birthday using all the evidence we have nationally and from Better Start Bradford.

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3.12.3 The HENRY programme is training on Health, Exercise and Nutrition for the Really Young, to enable staff working in prevention and early help, the 0-19 service and primary schools to deliver wellbeing messages and support families through a parenting programme and one off workshops on supporting families with health and nutrition.

3.13 Children's Dental Health

3.13.1 Whilst tooth decay among 5 year olds in the district is improving overall, it remains poor in comparison to the region and nationally. Bradford has high levels of dental disease; however there have been significant improvements to reducing levels of decays in children. 60.2% of 5 year olds were free from dental decay in 2016-17. However this was lower than the regional (69.7%) and national averages (76.7%). There is significant variation in the oral health of young children across the district by locality. Higher levels of decay are found in Bowling and Barkerend, Great Horton, Manningham, City, Toller, and Keighley Central.

3.13.2 There is still much more to be done particularly in the more deprived parts of Bradford where average number of teeth affected by decay is higher than the District's average. Bradford Council's Public Health team has worked hard to keep children free of tooth decay through commissioning a number of evidence-based programmes under the banner of Building Brighter Smiles. These programmes reach young children in a variety of early year's settings and includes a focus on prevention, early intervention and targeted approach focused on areas of greatest need within the district and include fluoride varnish programmes, tooth brushing schemes delivered in some deprived primary schools, community based prevention projects and health visitor oral health promotion at 6-9 months.

3.13.3 Partnership working and training initiatives to ensure parents, carers, education and health workers are aware of best practice for oral health have been integral to the success of these programmes. Public Health are working with NHS England to support dentists with a new opportunity for flexible commissioning which will allow some dentists to work preventatively in Bradford, with a proposal to focus on 0-5 year olds and marginalised communities across the wards with greatest dental decay.

3.14 Sexual Health services

3.14.1 A new Relationships and Sex Education programme has been developed for schools across the district in preparation for September 2020 when it becomes mandatory for schools to deliver.

3.14.2 The Integrated Sexual and reproductive health service is available through a city centre hub with 5 spokes across the district for young people to access contraception and sexual health. Bowling Hall Medical Practice acts as a spoke for Tong Ward and a health bus provides outreach for young people. Provision for 19s and under can be accessed via 10 pharmacies across Bradford, via GPs and from Locala Sexual and Reproductive Health

Service www.locala.org.uk/services/sexual-health

The bespoke website providing sexual and relationships health information for young people is: <http://www.bashbradford.org.uk>

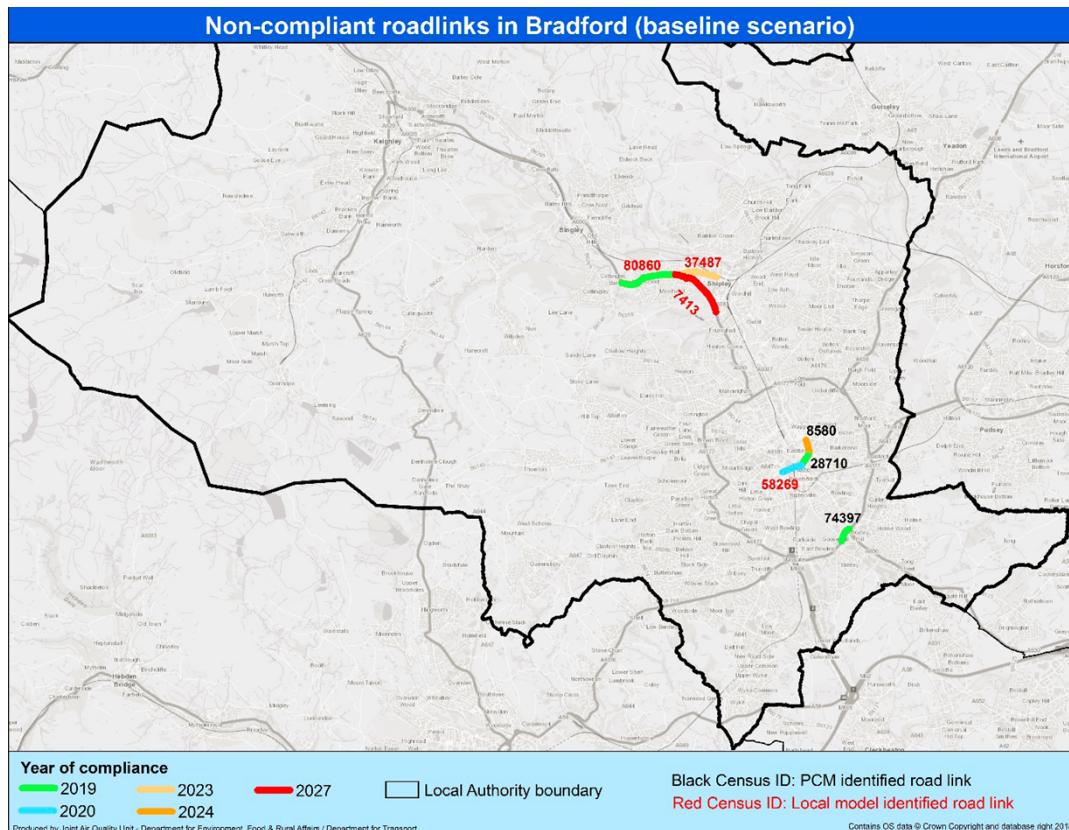
3.15 Cross system provision

3.14.1 Air Quality

The Government's air quality plan in 2018 identified several road links in Bradford which exceed the legal limit for nitrogen dioxide. This is in common with other urban parts of Bradford as follows;

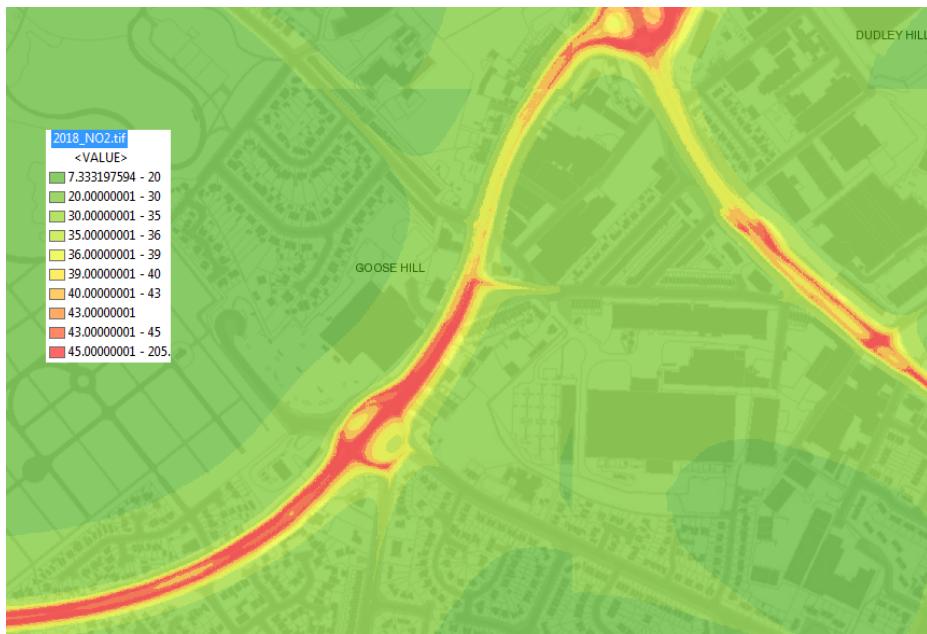
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Fig 1: Non-compliant road links identified in the UK government's air quality plan



In parts of the South area of Bradford, on Rooley Lane, concentrations of air pollutants are higher than they should be (see the green road link 74397). In response to this Government served Bradford a ministerial direction on Bradford Council on the 4th October 2018 to 'develop an air quality plan to deliver compliance with the legal limit for nitrogen dioxide in the shortest time possible'. This area has been modelled in detail below as part of the work to develop the air quality plan.

Figure 2 - Rooley Lane area



Bradford is currently working to assess the effectiveness of a comprehensive package of options to tackle air quality within the district, which includes the implementation of a charging clean air zone along with other activities to reduce traffic, emissions, and increase active travel. The outline business case for the plan was submitted to Government on the 31st October 2019.

A full public consultation will now take place, leading to development of a costed full business case which will then be submitted to government for approval. It is expected that following government approval significant funding will be made available to implement the plan and improve air quality and health in Bradford District.

This work builds on the Bradford Low Emission Strategy (2013) and West Yorkshire Low Emission Strategy (2016).

3.152 Welfare Advice

3.151. St Vincent du Paul –Catholic Housing Aid Society (CHAS) is the contracted local provider of welfare advice operating in Bradford South. Through the budget plan 2020-21 the Council has committed £700,000 to welfare advice from the Public Health budget, thereby reducing the previously approved reductions across the District (which were set at £1.2m) and strengthening the council's support for vulnerable people through welfare advice. The Welfare Advice and Customer Services (WAAC) Transformation Programme continues, with multi-agency work on-going to identify and implement improved and new ways of working in order to see a fundamental change to the way the Council and its partners deliver customer facing services, focussing on customers getting the 'right support at the right time'.

3.16 Warm Homes Healthy People (WHHP)

3.161. This is a short term programme delivered during the winter months to mitigate the impact of cold weather for more vulnerable households in the district. Funding for the programme has traditionally been via the Council and the CCG. The current programme has been commissioned jointly with the CCG to run over the winters of 2019-20 and 2020-

21 and is funded 60% by the CCG and 40% through the Adult Social Care Winter Resilience monies. The contract for the delivery of these services is held by Groundwork whose input is management of the programme, co-ordination of four delivery partners who provide specific interventions and provision of Groundwork's own 'Green Doctors' service which provides home energy checks, supports switching to cheaper tariffs to reduce bills, enables people to apply for Winter warmth payments and registers vulnerable households with energy and water providers' Priority Service Registers.

3.162 Programme activity:

Groundwork co-ordinates a range of partners who help with the delivery of WHHP. This includes:

- Age UK in Bradford who provide services such as heating repairs, winter warmth packs and emergency heating to households.
- Bradford Family Action who offer benefit checks and debt advice
- Innchurches who provide emergency food parcels; bedding and other practical needs
- HALE who provide support with eating well over the winter, and direct referrals to their 'Community Connectors' social prescribing service from primary care into the Warm Homes Healthy People Programme where food and fuel poverty interventions are required.

At the time of reporting the current programme has been active for just over 3 months. Detailed analysis of local provision will be available in early summer.

4. FINANCIAL & RESOURCE APPRAISAL

In the main, proposals for the public health budget in 2020-21 were agreed during an earlier two year budget-setting process for 2019-20 and 2020-21. At the time of writing the Council is consulting on further budget proposals for 2020-21 which will be finalised in late February 2020.

As the majority of these programmes are district wide it is difficult to identify the individual impacts on specific wards including that for Bradford South. Public Health remains committed to targeting resources to areas of need.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

This report contains a deal of information contributed by colleagues from across Public Health teams; independent provider agencies and different parts of the Council. It has received clearances and input from Legal services and Finances amongst others. Once all contributions have been received the report was formally agreed by the Health and Wellbeing Department's Departmental Management team.

6. LEGAL APPRAISAL

The City Bradford Metropolitan District Council (CBMDC) was created on the 1 April 1974 as a result of the Local Government Act 1972 and empowered to provide services and support for the residents of the District. This incorporates the responsibilities laid out in the Education Acts of 1944 and 1996 and the Local Government Act 2000.

As a Local Authority CBMDC has statutory Public Health responsibilities as set out in the Health and Social Care Act 2012. Many of the services narrated in this report are underpinned by the Health and Social Care Act 2012 and by the Duty of wellbeing placed upon the Council - to promote and improve the wellbeing of the District and protect the health of the local population.

7. OTHER IMPLICATIONS

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7.1 EQUALITY & DIVERSITY

The Equality Act 2010 sets out the public sector equality duty replacing the three previous duties for race, disability and gender. In engaging with our stakeholders, the Public Health Department has regard to our Equality and Diversity Policy.

Bradford South's population, in common with Bradford's wider district, includes a range of communities, nationalities and residents many of whom have distinct needs and experiences.

Public Health therefore recognises that services, consultations and communication must be delivered in an inclusive and appropriate way to ensure equality of access. This includes specific language and cultural needs.

An example of a proactive approach to population health is the use of Controlling Migration funding (CMF) from the Home Office to facilitate better access to welfare advice services for people from Central and Eastern European origins. This has helped skill up community members in relevant languages; resulting in the training of 14 people in interpretation and/or translation skills and qualifications. This fund (CMF) also supported the extension of immigration advice training and accreditation across the Bradford District.

7.2 SUSTAINABILITY IMPLICATIONS

Public Health fosters sustainability by supporting and building on the community assets which are prevalent amongst the communities and wards across Bradford.

Bradford South area ward plans are vital as include the needs and concerns of people and places in their strategic development and can help to empower the population to participate in programmes which support health and wellbeing at neighbourhood level.

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

Many services delivered in neighbourhoods are switching over time to transportation which is less damaging to the wider environment. This includes public transport and the use of Bradford Council's lease cars which are electric and therefore emit less harmful pollutants into the air.

7.4 COMMUNITY SAFETY IMPLICATIONS

Community safety concerns can and do impact on an individual's and family's sense of health and wellbeing. This is particularly relevant in relation to crime and the fear of crime; concerns relating to drug and alcohol use; the sale of illicit tobacco and the way that these can disrupt feelings of safety and security in communities can contribute to lower level anxiety and have a detrimental impact on mental wellbeing.

Public Health contributes to a number of key programmes tackling Community Safety concerns; some of which are noted earlier in this report

7.5 HUMAN RIGHTS ACT

There are no direct implications arising from the Human Rights Act in relation to this report however some of the services listed above contribute significantly to individual's and family's quality of life.

7.6 TRADE UNION

Financial reductions to externally contracted services outlined in budget proposals for 2020-21 currently under consideration as noted in section 4 may result in the loss of jobs in provider agencies. At this stage Council officers and delivery partners are working together to reduce the level of these and to make plans which will maintain services for residents in the district.

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7.7 WARD IMPLICATIONS

See below

7.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS

This report has been prepared for Bradford South Area Committee and includes data and information for wards within the area; Great Horton, Queensbury, Royds, Tong, Wibsey and Wyke. Where possible data and service details are provided at ward level, where this is not possible district-wide activity and information has been provided.

7.9 IMPLICATIONS FOR CORPORATE PARENTING

In common with other areas of the district there will be 'looked after' children resident in Bradford South. These may be children and young people living in temporary housing and/or foster care, or other settings where the Council retains a Corporate Parenting role. This responsibility cannot be derogated and is seen as the responsibility of all Council officers not only those whose specific job is to work with looked after children. As such, agreements binding the delivery of services include specific terms to ensure that this important role is maintained and supported

7.10 ISSUES ARISING FROM PRIVACY IMPACT ASSESSMENT

The Council has a privacy notice in place and as this report contains no personal data there are no impacts under the relevant data management and/or data sharing legislation

8. NOT FOR PUBLICATION DOCUMENTS

None

9. OPTIONS

9.1 That Bradford South Area Committee considers the contents of this report.

9.2 That Bradford South Area Committee engages with and encourages community and residents of Bradford South to take up all available and relevant wellbeing offers to maximise their health and wellbeing.

10. RECOMMENDATIONS

10.1 It is recommended that option 9.2 above is adopted in order to support the overall health and well-being of the residents of Bradford South.

11. APPENDICES

Appendix 1 - Public Health data report outturns for Bradford South Area