

REPORT TO: Health and Wellbeing Board

DATE: 7th July 2021

REPORTING OFFICER: Eileen O'Meara

PORTFOLIO: Health and Wellbeing

SUBJECT: Amendment to the One Halton Health and Wellbeing Strategy 2017-2022 in the context of the global COVID-19 pandemic.

WARDS: Borough Wide

1.0 PURPOSE OF THE REPORT

- 1.1 The global pandemic arrived as we entered the second half of our five-year One Halton Strategy. This report is an amendment to the Strategy, considering the impacts of COVID-19 on our priorities and the health inequalities in our Borough. Key data and statistics are updated.
- 1.2 Eileen O'Meara, Director of Public Health asked a specialty registrar in public health (Dr Matthew Atkinson) to lead this rapid update of the One Halton Strategy.

2.0 RECOMMENDED: That

- 1) the Board approves this amended strategy for publication and use.
- 2) the Board considers the impact of the COVID-19 pandemic in preparing the next Health and Wellbeing Board Strategy.

3.0 SUPPORTING INFORMATION

COVID-19

3.1 COVID-19 has impacted on Halton's residents and every facet of our work to improve their health. Our frontline health and social care staff and public health professionals have worked tirelessly to fight COVID-19. But beyond this, every service and organisation has had to rethink how they deliver their work in a COVID-secure manner, whilst managing cases and outbreaks. We thank all our partners, from education settings, to businesses, to key service and infrastructure providers and to volunteers, for their continuing efforts to keep Halton safe.

3.2 The pandemic began in early 2020, at a time where England was already seeing a widening of health inequalities¹. More deprived local areas saw higher death rates during the pandemic. Other factors, such as poorer living conditions, certain occupations and being from a Black, Asian or Minority Ethnic group increased the risk of severe disease, as did having a pre-existing health condition. Many residents will experience persistent symptoms following an episode of COVID-19.

3.3 We have seen higher rates of COVID-19 in the North West than England overall and have experienced restrictions over and above national measures as a result. People in more deprived groups were also most affected by control measures and restrictions and will bear the brunt of the economic impact of COVID-19 unless measures are in place to protect them. We have already seen falls in income for younger workers and lower earners, with a rise in applications for Universal Credit and Jobseeker's Allowance benefits. Any economic downturn will lead to poorer health outcomes across our priority areas.

Detrimental and beneficial impacts of the pandemic on Halton's six priorities:

3.4 Children and Young People: improved levels of early child development:

- Reduced social contact leading to under development of communication and social skills.
- Increased anxiety and depression in parents leading to change of behaviour in the child.
- Missed school or nursery leading to under development of educational and social skills.
- Increased food insecurity.

3.5 Generally Well: increased levels of physical activity and healthy eating and reduction in harm from alcohol:

- Reduced organised sport and exercise.
- Increased walking and cycling for some.
- More home cooking with fresh ingredients increasing nutrition.
- Increased reliance on ready meals and takeaways leading to weight gain and unhealthy eating.
- Shift from night-time economy to home drinking resulting in increased intake to harmful levels.
- People with excess weight are at greater risk from COVID-19.

¹ <https://www.health.org.uk/publications/build-back-fairer-the-covid-19-marmot-review>

- 3.6 Long-term Conditions: reduction in levels of heart disease and stroke:
- People with pre-existing heart conditions are more at risk due to COVID-19.
 - Impact of changes in physical activity, healthy eating and alcohol use is increasing heart disease.
 - Impact of COVID-19 on capacity of primary care, secondary care and NHS Health Checks resulting in later diagnosis and treatment.
 - Delayed presentations of heart and stroke conditions resulting in exacerbated conditions.
 - Improved air quality due to reduced traffic.
 - Increased inequalities in smoking with more people quitting but not in the most deprived groups.
- 3.7 Mental Health: improved prevention, early detection and treatment
- Direct impact of COVID-19, restrictions and lockdowns on people's social and emotional health.
 - Financial stress and increased levels of precarious employment leading to anxiety and depression.
 - Increased risk of exposure to domestic violence and abuse during lockdowns.
 - Frontline staff reporting increased stress and post-traumatic stress disorder.
 - Deferment of face-to-face counselling and related services resulting in worsening conditions.
 - Increase in the requirement for bereavement services.
- 3.8 Cancer: reduced level of premature death
- Disruption to cancer screening and treatment resulting in late diagnosis and poorer outcomes.
 - People presenting later with symptoms resulting in poorer outcomes.
 - Increase in risky lifestyle resulting increased incidence of cancer.
- 3.9 Older People: improved quality of life
- Older people more at risk from COVID-19 resulting in higher rate of illness and deaths.
 - Older people more vulnerable to social isolation, reduction in community services and groups and limits to visiting in care homes as a result of lockdown.
 - Older people prioritised for COVID-19 vaccinations high uptake has resulted in a reduction in illness and death since December 2020.

4.0 POLICY IMPLICATIONS

- 4.1 The updated Strategy has implications for partner organisations undertaking recovery work. Partners should address underlying health

inequalities that have been exacerbated by the COVID-19 pandemic when designing and delivering interventions and services.

5.0 FINANCIAL IMPLICATIONS

5.1 There are no specific financial implications at this stage.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

Recognises that young people have been disproportionately affected by measures to control COVID-19, through loss of social contact and education opportunities. Those in the most deprived groups will be most affected through the impact of living in child poverty, or exposure to adverse events at home. Resources should be targeted to allow the most vulnerable groups to catch up.

6.2 Employment, Learning and Skills in Halton

Keyworkers and frontline health and care staff have been under pressure to deliver services safely and may need additional support. Some public facing jobs have put people at increased risk of contracting COVID-19. Those in the most deprived groups will face the most severe impact of the economic consequences of the pandemic. Young people have had disruption to their education and exams and will face an uncertain employment future, especially as many businesses in the hospitality and retail sectors face ongoing disruption.

6.3 A Healthy Halton

The pandemic has increased inequalities in health behaviours and we must ensure that those in deprived groups have improved access to healthier choices. We present the impact of COVID-19 on specific priorities, including heart disease and stroke, mental health, cancer and the health of young people and older people.

6.4 A Safer Halton

None anticipated

6.5 Halton's Urban Renewal

None anticipated

7.0 RISK ANALYSIS

Risk that we will make less progress against the priority areas than planned and that recovery from COVID-19 will continue to negatively impact the work of all partners.

8.0 EQUALITY AND DIVERSITY ISSUES

We discuss the impact of COVID-19 on different groups, including how both the disease and measures to control it have affected those in the youngest and oldest age groups, those living in areas of higher deprivation, those with existing health conditions and those in Black, Asian and Minority Ethnic groups.

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9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

'None under the meaning of the Act.'