



Northumberland

County Council

HEALTH AND WELLBEING BOARD

10 MARCH 2022

DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2020

Report of: Liz Morgan Interim Executive Director of Public Health and Community Services

Cabinet Member: Cllr Wendy Pattison - Adult Health and Wellbeing

Purpose of report

The purpose of this report is to present the Director of Public Health (DPH) Annual Report for 2020 which for this year, was focused on protecting the health of our communities from the impact of Covid 19.

Recommendations

It is recommended that Health and Wellbeing Scrutiny:

- a. Comments on the DPH Annual Report 2020; and
- b. Accepts and supports the recommendations.

Link to Corporate Plan

This report is linked to all priorities within the NCC Corporate Plan 2021 - 2024.

Thriving – The pandemic has impacted on the sustainability and availability of jobs and income and outlines the council's response to labour market disruption, unemployment and economic recovery.

Living/Learning – Covid 10 has had an enormous direct and indirect impact on health and wellbeing, more so in our most vulnerable communities. Children's education has been severely disrupted which for some could have long term consequences.

Enjoying/Connecting – The report highlights the impact that the pandemic has had on social isolation and mental health but also some of the positive impacts on reduced carbon emissions, increased social networks and capitalising on our green spaces.

Key issues

- The pandemic has exacerbated the structural inequalities which already existed nationally, regionally and locally. The direct and indirect impacts of COVID-19 have had the greatest impact on our most deprived and vulnerable communities.
- Disruption to education and digital exclusion; unemployment, furlough, the impact on the economy and knock on effect on income and poverty; the need to ensure people

are supported into suitable accommodation to enable self isolation and care and prevent families from tipping into homelessness; the negative and positive effects on social isolation, increased community action and strengthened social networks; these are all key features of the pandemic.

- Apart from the direct health protection response taken across the council and in partnership with NHS and other agencies, a range of activities have been undertaken to support individuals and communities across the wider determinants of health to try and mitigate against the indirect consequences of the pandemic.
- Four recommendations are made: That the council undertakes a COVID-19 Inequalities Impact Assessment to inform the council's recovery plan; develop an integrated carbon reduction, equality and health inequality approach as part of the council's policy development and appraisal process; ensure residents are at the centre of processes to design initiatives and services which meet their needs and aspirations; and encourage people to shop local, support local businesses, and support the local development of skills to enable employment.

Background

Directors of Public Health in England have a statutory duty to write an Annual Public Health Report on the health of the local population; the Local Authority has a duty to publish it. The DPH Annual Report is a vehicle for informing local people about the health of their community, as well as providing necessary information for commissioners and providers of services on health and wellbeing issues and priorities that need to be addressed.

The DPH Annual Report for 2020 is in the format of a series of short videos. It was developed during the 4th wave of SARS-CoV-2 in July 2021 and reflects the situation up until that point. Through a series of 5 short videos, the report explains:

- How COVID-19 has highlighted the two-way relationship between the health of our residents and the prosperity of the county;
- How the conditions within which our residents are born, live, work and age have affected their experiences of COVID-19;
- The groups who have been disproportionately impacted by COVID-19 through exposure to the infection, the measures put in place to control the virus and the longer term social and economic consequences;
- How the council has worked to protect the health of Northumberland residents;
- What more can be done to improve health and reduce inequalities so we emerge from this pandemic more resilient to future threats.

The report reflects the situation at the time of writing and represents only a proportion of the COVID-19 impacts on communities. Some of the data and conclusions are based on local data and experiences but national reports have been a significant source of evidence.

The videos cover the following:

- Video 1 – Introduction and overview including the purpose of the report;

- Video 2 – The impact of Covid 19 on income and job security; social isolation and mental health. The evidence indicates that nationally, over a quarter of adults experienced deteriorating finances with the poorest families experiencing the biggest impact; more likely to have increasing debt and to use their savings. Economic recessions disproportionately affect young people and the pandemic has also impacted on disabled people with more disabled people having their work impacted by COVID 19 than non-disabled people. Employers in some sectors have reported hard-to-fill vacancies and staff shortages impacting on recovery suggesting a need for employment and skills support for residents. 1 in 10 of the population have been furloughed for more than 6 months with consequences for mental health. A fifth of the population have experienced sustained poor mental health with a quarter experiencing a new mental health problem during the pandemic. Although contact within households and between neighbours increased, loneliness increased for those living alone and those who were shielding, cut off from their usual support networks.
- Video 3 – How the wider determinants of health have shaped the experience of COVID-19; the importance of a safe and healthy home; and the impact on healthy behaviours. The pandemic has shone a spotlight on existing inequalities and has largely exacerbated them; those communities least likely to be able to withstand adversity have been disproportionately affected by the direct and indirect consequences of the pandemic. In England, 1 in 3 households had a major housing problem before the pandemic such as overcrowding or struggling with housing costs; household size increases the risk of virus transmission and larger households had a five-fold increase in the risk of COVID 19 deaths compared to single occupancy households. People from lower income backgrounds, younger adults, and women are among those who have been disproportionately affected by the pandemic in the context of tobacco and/or alcohol use. Alcohol intake has become more polarised with heavy drinkers drinking more; heavy drinkers in the least deprived groups were more likely to try and reduce alcohol intake. However, during the first lockdown, increasing numbers of adults used it as an opportunity to quit smoking.¹
- Video 4 – Groups disproportionately affected by COVID-19; impact on children and young people; digital exclusion. People living on the lowest incomes have been worst affected by this crisis but many other groups overlapping the poorest have been disproportionately affected e.g. those with long term conditions, ethnic minority communities, those with a learning disability or mental health problem, those living in care homes and those who have been less able to work from home. Young people are less likely to come to harm from the direct effects of COVID-19 disease but the impacts on social and emotional development in younger children; disruption of education; social isolation and increased stress; increased levels of obesity; and mental health have been significant. Again, it is those children and young people from our most deprived communities who are more likely to have been affected. As services moved online and community buildings closed, the opportunity for those who relied on those resources to access online services was limited and highlighted the digital exclusion of some groups, particularly many jobseekers. Older people, those

¹ Jackson SE, Beard E, Angus C, Field M, Brown J. Moderators of changes in smoking, drinking and quitting behaviour associated with the first COVID-19 lockdown in England. *Addiction*. 2021;1–12. <https://doi.org/10.1111/add.15656> First published: 25 August 2021 available from: <https://onlinelibrary.wiley.com/doi/full/10.1111/add.15656>

living in rural areas and communities in areas of significant deprivations have been most affected.

- Video 5 - The council's response. From an economic and employment perspective the council put in place a variety of rapid response services and support which included an employment and skills triage service to provide support for those unemployed, at risk of unemployment or furloughed. Wellbeing support was provided for those affected by labour market disruption. Grants were provided for VCSE organisations to digitalise support services. For young people, the council supported the Kickstart programme and took a Youth Employment Partnership approach for broader support. For those whose first language is not English, digital access to skills support was provided. In response to the need to support those most at risk from COVID-19 and its impacts, Northumberland Communities Together was established, drawing on different agencies, sectors and services to help coordinate and target the local response. To ensure those who were homeless or at risk of homelessness could access support and accommodation, reducing the risk of transmission of infection and enabling self-isolation, a multi-agency Homeless Coordination Cell was set up. A range of dedicated housing options were established. Tenants were supported with rent arrears. This is just a snapshot of the areas in which the council has supported Northumberland residents over the course of the pandemic.

Recommendations. The report makes four recommendations:

- Undertake a COVID-19 Inequalities Impact Assessment and use that to inform the council's recovery plan to ensure that areas of deepening inequalities are recognised and addressed. This should inform future budget and planning cycles.
- Develop an integrated carbon reduction, equality and health inequality approach as part of our policy development and appraisal process. This would be consistent with the Health in All Policies approach we are developing.
- Build on the strong community networks and increased social cohesion to ensure residents are at the centre of processes to design initiatives and services which meet their needs and aspirations.
- Encourage people to shop local, support local businesses, support the local development of skills to enable employment, especially those living in Northumberland who are furthest away from the employment market and exploit the wider social value of the Northumberland pound.

The DPH Annual Report for 2020 is available [here](#).

Implications

Policy	The council is already committed to delivering on the principles of Health in All Policies; this report recommends that that approach takes into account the inequalities that have been exacerbated by COVID-19.
Finance and value for money	The report has no direct financial implications but makes recommendations on how the recovery plan and associated budget planning cycle should take into consideration the

	intelligence which how investment in the arts and culture can reduce the financial costs of health and social care.
Legal	The report meets the statutory requirement of the DPH to produce an annual report on a health issue relevant to the local population.
Procurement	N/A
Human Resources	N/A
Property	N/A
Equalities (Impact Assessment attached) Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	The impact that COVID-19 has had on those with some protected characteristics is reflected in the report which recommends a wider impact assessment is undertaken.
Risk Assessment	Not undertaken
Crime & Disorder	Covid 19 has had an impact on crime but this has not been considered as part of this report
Customer Consideration	The impact on service users of a selection of council services are considered and the recommendations propose a commitment for the council to include residents in the development of new services building on the strong social networks and participation arising from the pandemic.
Carbon reduction	The recommendations include a proposal to adopt a triple assessment process for the development of programmes and policies which includes carbon reduction, equality and health inequalities
Health and Wellbeing	The direct and indirect health and wellbeing consequences of COVID 19 are at the centre of this report which includes a selection of the interventions the council has put in place to address these issues. The recommendations are all related to improving health and wellbeing and addressing health inequalities.
Wards	This report relates to population health and wellbeing in all wards.

Background papers

None

Report sign off

Authors must ensure that officers and members have agreed the content of the report:

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Monitoring Officer/Legal	Suki Binjal
Executive Director of Finance & S151 Officer	Jan Willis
Relevant Executive Director	Elizabeth Morgan
Chief Executive	Daljit Lally
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