

Joint Communities and Adults Social Care & Health Overview and Scrutiny Committee

Tuesday 11 January 2022

Minutes

Attendance

Committee Members

Communities OSC

Councillor Jeff Clarke
Councillor Jonathan Chilvers
Councillor Richard Baxter-Payne
Councillor Jackie D'Arcy
Councillor Jenny Fradgley
Councillor Bhagwant Singh Pandher
Councillor Daren Pemberton
Councillor Tim Sinclair
Councillor Andrew Wright

Adults Social Care & Health OSC

Councillor Clare Golby (Chair)
Councillor John Cooke
Councillor John Holland
Councillor Christopher Kettle
Councillor Jan Matecki
Councillor Chris Mills
Councillor Kate Rolfe
Councillor Mandy Tromans

Portfolio Holders

Councillor Margaret Bell, Portfolio Holder for Adults Social Care & Health
Councillor Kam Kaur, Portfolio Holder for Economy & Place
Councillor Isobel Seccombe OBE, Leader of the Council

Officers

Dr Shade Agboola, Director – Public Health Warwickshire
Harpal Aujla, Specialty Registrar in Public Health
David Ayton-Hill, Assistant Director – Communities
Nigel Minns, Strategic Director – People
Isabelle Moorhouse, Democratic Services Officer
Keira Rounsley, Senior Equality Diversity & Inclusion Practitioner

Mark Ryder, Strategic Director – Communities
Paul Spencer, Senior Democratic Services Officer

1. Election of Chair

Councillor Jeff Clarke nominated Councillor Clare Golby to be Chair of the meeting. This was seconded by Councillor John Cooke.

Resolved

That Councillor Clare Golby become Chair of the meeting

2. General

(1) Apologies

Councillors Heather Timms, Marian Humphreys, Sandra Smith (North Warwickshire), Dave Humphreys, Andy Jenns, Wallace Redford, Pamela Redford (Warwick), Penny-Ann O'Donnell (Stratford) and Andy Crump.

(2) Disclosures of Pecuniary and Non-Pecuniary Interests

None

(3) Chair's Announcements

None.

(4) Minutes of previous meetings

The minutes of the 25 November 2020 were signed and approved as a true and correct record.

3. Public Speaking

None.

4. Health (2 parts)

(1) Mitigating the Impact of COVID-19 on Ethnically Diverse Communities

Dr Shade Agboola (Public Health Director – Warwickshire) presented the item and raised the following points:

- People from deprived and ethnic minority backgrounds were disproportionately affected by Covid-19 early on
- The first 11 doctors to die from Covid-19 had ethnic minority backgrounds
- Public Health England (PHE) made investigations into this reason
- People from ethnic minority backgrounds were dying and contracting Covid-19 more than their white counterparts. Lower social economic status' and being more at risk from health issues e.g. diabetes was a reason for this
- Seven recommendations were proposed by PHE including: organisations supporting communities, undertaking participatory research to understand what was occurring in relation to the wider determinants of Covid-19 among ethnic minority communities and to

develop implementable and scalable programmes to reduce risk and improve health outcomes

- Work went into Warwickshire County Council's (WCC) Covid-19 recovery plan which had 10 recommendations including PHE's research recommendation
- Money from the Outbreak Management Fund awarded to the Council was provided to do this
- WCC's Covid-19 plan included grants for ethnically diverse communities to access funding for projects that linked to the research findings i.e. projects addressing the social economic determinants of health inequalities relating to COVID-19
- This was done with WCC, PH Warwickshire, Warwickshire Communities & Partnerships and the Benn partnership in Rugby
- The research included a combination of case studies and a survey from people with ethnic minority backgrounds; these covered: GP experiences, experiences of caring for others, lockdown experiences, any long-term physical health conditions that increased their risk of contracting Covid-19, asking people with physical/mental health conditions, asking people struggling with isolation, people with accommodation issues and issues around vaccine hesitancy
- Many people from ethnic minority communities were vaccine hesitant
- Coventry University were commissioned to carry out a rapid literature review i.e. look at the published evidence to tackle health inequalities amongst ethnically diverse populations
- The aim of the review was to ensure that whatever strategies were implemented were based on the best available evidence
- Key findings from the research showed that there was lots of collaboration amongst community representatives which was an original PHE recommendation. It also found that the term BAME did not appropriately represent all ethnic minority groups and the literature review recommended that WCC needed to move beyond information provision to improve trust in health services
- Access to primary health care during the pandemic was more difficult
- There was now a WCC Community Development Worker and Benn Partnership Community Connector that work together to address PHE's recommendations
- WCC's grant process (as above) had £350,000 total funding across two funding rounds in three lots. Lot 1 for projects costing up to £2000, Lot 2 for projects up to £10,000 and Lot 3 for projects up to £25,000
- Each project had to demonstrate its relevance in: reducing social isolation, supporting mental health and wellbeing tackling, unemployment or tackling physical health. All applications had to include community engagement and demonstrate sustainability, use of volunteers and how they would evaluate it
- There was a clear scoring criterion used to assess applications and the project was live between August-October 2021. All applications were told if they were successful by November 2021
- The successful projects were designed to run for 18 months through a workshop by WCAVA (Warwickshire Community and Voluntary Action)
- Discussions happened with supporting successful applicants to ensure their projects did not deviate from the aims of the original projects were done, and a plan for publicising round two grant applications for greater representation in 2022 was underway. Round three was aimed for the end of 2022
- Projects that applied for funding were checked to ensure they were not already funded and any bids greater than £25,000 required an interview and approval by Warwickshire's Public

Health Director

- There were three successful projects in Lot 1, eight in Lot 2 and four in Lot 3. The successful applications were county-wide and covered all areas of the criteria

In response to Councillor Tim Sinclair, Dr Shade Agboola stated that they did not have information in relation to whether bids submitted reflected a certain proportion of specific minority ethnic groups. The projects were needs led and dependent on organizations that who applied for the funding. The grants were heavily publicised, and all the successful projects were informed that they had to evaluate their project's success; the new community development officers were helping with this evaluation.

In response to Councillor Christopher Kettle, Dr Shade Agboola clarified that money was not awarded if the criteria was not met.

Following several questions from Councillor Kam Kaur (Portfolio Holder – Economy & Place), Dr Shade Agboola stated that there was engagement with borough and districts councils to ensure awareness of availability of grant funding. The census data when available should help inform WCC of its demographics for projects like these in the future and this would be embedded into the council plan.

In response to Councillor Margaret Bell (Portfolio Holder – Adult Social Care & Health), Dr Shade Agboola confirmed that the successful project applicants could be engaged with to build trust in health services, especially with rounds two and three of applications.

In response to the Chair, Dr Shade Agboola reiterated the importance of getting the booster jab for Covid-19, especially in Nuneaton and Bedworth borough. Communication colleagues were being engaged with to spread this message. Following a supplementary from the Chair, Dr Shade Agboola confirmed that Nuneaton and Bedworth had the highest amount of vaccine sites in Warwickshire, and she agreed to share this information.

Following a question from Councillor Jenny Fradgley, Dr Shade Agboola stated that WCC raised the concern with traveller communities when vaccines were first rolled out but she agreed to chase this up regarding booster vaccinations.

(2) Health Inequalities Strategic Plan

Harpal Aujla (Specialty Registrar in Public Health) presented the item and raised the following points:

- NHS England required all local authorities to produce a strategy by March 2022 to show how we're going to tackle inequalities locally but WCC's strategy was done with Coventry
- The aim of the strategy was to obtain health equity across Coventry and Warwickshire (resolve unfair differences between ethnicity groups), reduce health inequalities (every relevant piece of council work to resolve health inequalities) and challenge the system as a whole
- Health inequalities in Warwickshire included life expectancy which was slightly higher than the national average (79.9 compared to 79.6 for men and 83.6 compared to 83.1 for women). However, there was a big gap in life expectancy between deprivation areas and non-deprived areas. Deaths in deprived areas class as avoidable
- The King's Fund Health Equality model showed that not just health behaviours could be

addressed to tackle health inequalities and wider determinants like lifestyles, places, communities and an integrated care system need to be looked at. To do this, major programmes were done with Coventry

- Work with NHS England was done to create Core 20 +5 which became embedded across the system. Core 20 are the most deprived 20 groups in the country and this would be one element of tackling health inequalities. The +5 are the five clinical areas (maternity, early cancer diagnosis, severe mental illness, chronic respiratory disease and hypertension)
- The plus group could be locally determined so work was done with the local place partnerships to ask them what their plus groups were. These included travellers, people with learning disabilities and people in rural isolation.
- For ethnic minority communities, a quick analysis was done to look at the 20 nationally most deprived areas and fewer ethnic minorities were in deprived areas in Warwickshire compared to the rest of the country
- Children at risk was being worked on but it could be more locally determined whereas the Core 20 +5 groups had been predetermined, however this was still being worked on because of evidence gathering for each section
- Early cancer diagnosis in Coventry & Warwickshire had 52.7% of cancers diagnosed at stage one or two but the goal was 75% by 2028. Ethnicity was not recorded with this
- The NHS set out five key priorities, but Coventry and Warwickshire wanted six high impact actions to get a long term focus and capture things like inclusion and workforce development
- The model to achieve everything was called 'levelling up health' which will narrow down the authorities' goals with different tools. This will target disadvantaged communities with a health equity audit assessment tool to be embedded in all health strategies

Following several questions from Councillor Jonathon Chilvers, Harpal Aujla stated that life expectancy recently 'tailed off' but it was not clear whether the deprivation gap was growing or not. The gap with health inequalities did grow though. Dr Shade Agboola confirmed that the pandemic made the health inequalities between the most and least deprived in the population worse.

In response to Councillor Sinclair, Harpal Aujla confirmed that life expectancy only measured mortality and not how healthy a life is; more deprived areas had less healthier lives. Dr Shade Agboola added that prior to austerity measures being introduced, as an absolute, life expectancy increased with all groups but there was a decrease in healthy life expectancy for people in more deprived areas so a sustained increase in life expectancy overall, has not been observed due to a halting of life expectancy in the most deprived groups.

Following supplementary questions from Councillor Sinclair, Dr Shade Agboola stated that they were asked to develop and lead a systems health inequalities plan across Coventry and Warwickshire as an ICS (integrated care system). The strategy will set out how the system plans to tackle this over the next couple of years in a very high level strategic paper. Work was done with community groups and small projects, as well as the districts and boroughs, to see whether they could tackle some of the underlying factors responsible for the worse outcomes seen in minority ethnic groups. This strategy was still being developed at the time of the meeting and it was important that Warwickshire's health inequalities were not too overshadowed by Coventry's as Coventry had more health inequalities than Warwickshire. The Core 20 +5 system was being used to capture these groups as part of the strategy with

an action and implementation plan which would be drafted by March 2022.

In response to Councillor Kate Rolfe, Harpal Aujla clarified that there was an overlap of deprivation between Coventry and North Warwickshire and there was a deprivation issue in Rugby too. It was important that ethnic minority groups were not missed in Warwickshire but they were the second least deprived group in Warwickshire.

Following several queries from Councillor Bell, Harpal Aujla stated that they were planning to reduce the gradient in health inequality between the most and least deprived areas. Tailoring interventions so that they are proportionate to the degree of need is called proportionate universalism in public health. Dr Shade Agboola stated that there was always room for improvement that will not disadvantage less deprived groups. Resources and interventions should be targeted in areas where people were less likely to engage as this worked well. Everyone should be given access to services with some targeted support for people who were least likely to engage with universal services.

In response to Councillor Richard Baxter-Payne, Dr Shade Agboola confirmed that they used regionalised data from the boroughs and districts regarding life expectancy and other elements. There were multi-dimensional plans in place with the ICS to make residents take note of the strategy and show them how they would be supported.

The Chair informed the committee that Nuneaton and Bedworth Borough Council obtained a clinical trial for early cancer diagnosis; residents aged between 50-77 would be invited to a mobile station for a blood test.

Resolved:

1. **Note** the requirements for a Coventry and Warwickshire Health Inequalities Strategic Plan.
2. **Support** the recommended local priority population groups for the strategic plan (covering transient communities; black and minority ethnic groups; people with disabilities; older people experiencing rural deprivation).
3. **Support** the implementation of the plan and ensure organisations are implementing the plan as single organisations and in partnership with others.

5. Education

Mark Ryder (Strategic Director – Communities) introduced the item and raised the following points:

- Equality in schools includes encouraging schools to increase the participation of pupils with protected characteristics when it is disproportionately low so these students who are not participating as well on any part of the curriculum or school activities
- A lot of school resources were used to mitigate Covid-19 problems
- WCC must support schools to make sure they fulfil their duty in supporting these students and have all the information needed to develop skills to eliminate discrimination to promote equality of opportunity amongst all students. These resources were available on council webpages for school which were updated in July 2021 and this update had over 2000 views
- Most schools used the equality, diversity and inclusion (EDI) policy for schools and guidance on collecting diversity information
- Feedback was obtained on these tools to see how successful these tools were

- Mental health and race training was delivered in 2021 to 81 people; these sessions included looking at the impact of mental health through different characteristics and what might could be considered to resolve these issues
- EDI content was regularly provided into education forums to help head teachers develop their school agendas around supporting inclusion
- Department for Education (DFE) funding was used to pay for the commissioning of attendance service to support vulnerable students who had poor outcomes from equalities to support improving attendance at schools so as extra resource
- Data was collected on educational attainment which cut across various ethnic groups but this was halted due to Covid-19 so no information was collected in Key Stage 2 and the data was not comparable to previous years. When possible, this work would be picked up again when possible
- One of the key challenges moving forward is to understand the impacts that Covid-19 had on education equality, this work would be done with health colleagues, the economy and EDI teams across Warwickshire to decide on what these impacts are and what we could be addressed

In response to Councillor Fradlgey, Mark Ryder agreed to get an update on the Pupil Premium Project. Following a supplementary from Councillor Fradgley, Mark Ryder confirmed that these resources were accessed by academies as well as primary and secondary schools.

Councillor Bell raised concerns with autism waiting lists and schools needing support with children on a 'managed move', especially if they have moved school multiple times. Mark Ryder concurred that support with this would be sought.

In response to Councillor Sinclair, Mark Ryder stated that the data looked at outcomes across different ethnic groups and this could be used to look at measures to encourage participation in these groups. Following a supplementary from Councillor Sinclair, Mark Ryder confirmed that this data meant that they needed to decide if a future strategy was needed.

6. Economy and Skills

David Ayton-Hill (Assistant Director – Communities) presented the item and raised the following points:

- Data presented for Warwickshire unfortunately looks at ethnic minorities as a single group as disaggregated data is just not available at this geographic level
- In Warwickshire the employment rate of ethnic minority groups was higher than the national average and this improved recently
- Ethnic minorities in Warwickshire have a lower economic inactivity rate than the national average which suggested more employment
- Warwickshire only data on levels of pay and earnings was not available because of the small sample size but national data showed that some ethnic groups (Indian and Chinese) were above the average pay rate but others were significantly below (Pakistani, Bangladeshi and Black ethnic groups). Supporting this earning growth needed to be looked at due to other determinants like health
- High inflation rates and energy costs affected the earning rates especially with slow pay rate increases. Between 2021-2023 there would likely be a loss of real earnings (2% reduction)
- Ethnic groups have a lower earning potential on average than others which was made worse by inflation pressures; this could impact their wellbeing/lifestyle

- Work around supporting businesses was done (Survive & Sustain) as well as business start-up opportunities for deprived communities and supporting self-employed people (Jump Start Programme). These operated successfully, and still were at the time of the meeting, for over 18 months
- 8% of these projects beneficiaries were from ethnic minorities which was in line with Warwickshire's demographics, and one quarter of new businesses started in 2021 following support provided were by individuals from an ethnic minority background
- A lot of focus is now on employment and skills as we move more into economic recovery. The Warwickshire Skills Hub, which is both a virtual hub for information (<https://skillshub.warwickshire.gov.uk>) and a physical hub based at Eliot Park Innovation Centre in Nuneaton, is the core focus for this work.
- The Skills Hub are launching a programme called 'fair chance employer' shortly that will work with businesses to encourage them to become fair chance employers i.e. get businesses to expand their job-search horizons and not always go through the traditional job routes and look at hiring people with disabilities, care leavers, NEET people (not in employment, education or training), people who left the armed forces, migrants/refugees and people with mental health issues especially with businesses facing labour shortages. These groups were being worked with to get them into employment
- The council has also obtained funding from the Community Renewal Fund and the Warwickshire Brighter Futures project is focused on running employment support programmes for c. 1000 young people to get them back into employment. This will be done with five different strands, providing a range of initiatives, including a programme (extra ability) focused on people with special educational needs and how they could have an easier transition from education into sustainable employment

In response to Councillor Chilvers, David Ayton-Hill stated that the council would push people into apprenticeship programmes which were tailored to business needs; the council tries selling the idea of apprenticeships to businesses. The council tries to look ahead to get people ready for future jobs e.g. automotive and low carbon jobs.

In response to Councillor Baxter-Payne, David Ayton-Hill stated that the fair chance employer scheme had not been launched at the time of the meeting, but the skills hub would contact him with the project details.

In response to the Chair, David Ayton-Hill said that if a business wanted an apprenticeship, the skills hub would tailor one for the business depending on what skills were needed; if a business wanted an apprenticeship but could not fund it then some money from the levy could be used to fund this. Work experience for schools was difficult to obtain during the pandemic so this was another reason why the fair chance employer scheme was set up; apprenticeships and academies needed to be blended together.

In response to a point raised by the Chair, Councillor Jan Matecki informed the committee that requesting a degree for a job interview instead of skill-based interview, was a form of indirect discrimination.

7. Equality, Diversity and Inclusion (within WCC)

Keira Rounsley (Senior EDI Practitioner) presented the item and raised the following points:

- In line with the refresh of Our People Strategy in January 2021, after approval by Staff & Pensions Committee, a new approach to our reporting was developed through annual reviews on WCC's continual development in improving equality, diversity and inclusion.
- Achievements included a tool to measure work done with how employees felt valued as well and the ongoing recruitment and retention
- The median ethnicity pay gap in WCC was -2.2% meaning that Black, Asian and minority ethnic employees working for WCC were paid more on average than their White British/Not Stated counterparts. To get full accurate data the 'not stated' and 'prefer not to say' ethnicity employees would need to be disclosed. WCC's pay gap is significantly lower than the 2018 West Midlands median ethnicity pay gap of 9.5%
- There was an increase of employee diversity data disclosure rates across all the groups
- Staff networks increased from three to seven because of home working, creating a desire for employees to engage with others
- More WCC employees said that they felt valued/recognised (increased by 8% to 71% of respondents) and there was an increase in employees believing that WCC valued equality and diversity in the workplace (increased by 2% to 83%).
- 2% of staff identified as Black/Black British (a reduction of 0.9%) but this figure is impacted by the increase in headcount by 5.2%.
- 96% of employees have disclosed their ethnicity but 8.9% did not want to say. Employee's not disclosing their ethnicity made it difficult to break down our ethnicity data for the Senior Leadership Team
- WCC employee's were over-representative compared to the Warwickshire's ethnicity demographics.
- There was a pay gap of 1.7% between Asian/Asian British and White British/Not Stated employees whereas nationally it was 0.9% and compared with Black/Black British it was -2.1% compared to the national average of 5.7%.
- Employee's would rather not disclose their religion or sexual orientation compared to ethnicity and these employee's scored lower on wellbeing and staff engagement
- The main targets WCC wanted to address were making gender, ethnicity and disability pay gaps between 0-5%, increase diversity disclosure rates to make sure WCC's workforce represents the diversity of Warwickshire at all levels within the organisation and continue the upward trends for employee's agreement scores as part of the regular check-ins.
- WCC's EDI project included looking at active practices within recruitment and onboarding in relation to becoming a more inclusive employer and with talent development too. All employee's should have progression opportunities regardless of ethnicity or disability.
- For Black History Month 2022 there was an action to empower and equip WCC employee's with the skills and knowledge to be able to embed the EDI agenda throughout the organisation. For 2021's Black History Month there was a lot of different activities that had really high engagement including speeches on talking about racism, a special session on Black and Asian history in the archives, Public Health colleagues delivered a webinar on providing inclusive mental healthcare and 200 employee's watched a play as part of WCC's learning and development. There were new courses relating to race added to WCC's learning and development catalogue and a Children & Families EDI adviser was employed to work on outcomes for children and families within the EDI arena.
- An anonymous harassment system was launched as well as training 500 employees on microaggressions and their impact.

In response to Councillor Matecki, Keira Rounsley confirmed that a negative pay gap meant that Black, Asian and minority ethnic employees were being paid more on average than their White

British counterparts, but they needed employees to disclose their ethnicity data to ensure this was accurate.

In response to Councillor John Cooke, Keira Rounsley stated that personal data was filled in through 'YourHR', if someone applied for a job and was successful then any diversity information submitted via the diversity monitoring form put onto the application form went onto the system. To put 'not stated' was better than leaving it blank.

In response to Councillor Sinclair, Keira Rounsley stated that the local benchmark scores were poor so WCC was doing well but it was important for all opinions to be shared in case a large percentage of employees disagreed with those filling in the survey. All data provided in the meeting was available on Power-BI.

The Chair proposed a future joint meeting to follow up on everything discussed. This was seconded by Councillor John Holland who praised the work done. The committee unanimously voted for this.

The meeting rose at 15:57

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Chair