



**Director of Public Health
Annual Report 2019-2020**

Resetting Our Wellbeing

**A reflection on Coventry's level of
wellbeing in 2019/20 and our
approach to improving it**



Foreword

Cllr Kamran Caan

Cabinet Member for Public Health and Sport

Welcome to the Director of Public Health's Annual Report for 2020. We learnt a lot about wellbeing from our residents, partners, and colleagues in 2019 following a successful Year of Wellbeing and the adoption of a system-approach to improving wellbeing for residents. We recognise the importance of maximising opportunities to help residents enjoy healthier, longer lives, but also to help reduce the health inequalities in the city. This year we have all been affected by the COVID-19 pandemic, which has presented us with many challenges both at work and at home, and prompted us to reconsider the way we live, our health and our attitude towards wellbeing.

We have worked closely with the local NHS, Public Health England, universities, schools and businesses across Coventry to monitor the situation and coordinate the response across the city, especially working on how we can protect and maintain critical services to protect and support residents.

During these challenging times, it is more important than ever that we pay close attention to our own wellbeing, and the wellbeing of those around us. Based on learning from last year and our response to COVID-19, this report aims to set out 'what works' to promote and activate wellbeing as individuals and organisations.

I would like to thank everyone who has put this report together and who has worked so hard this year. Finally, I want to thank community members for their hard work, supporting each other and for keeping the delivery of essential services to residents in Coventry going, playing their part in reducing the risk of COVID-19 transmission.



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Introduction

Liz Gaulton

Director of Public Health and Wellbeing

COVID-19 has altered our lives and our attitude to wellbeing. Even with the easing of lockdown, we are unlikely to return to life exactly as we used to know it. There have been changes to what we value, to closeness with our communities, to our ways of working, to our economy, to how we choose to look after ourselves – all of which affect our wellbeing. We are calling our future thinking a 'Reset.' Resetting is a journey and we're only part way there.

The Year of Wellbeing 2019 campaign started a conversation on the importance of wellbeing. COVID-19 has furthered our appreciation of being connected to those around us, keeping ourselves healthy by enjoying physical activity, and making good use of our local outdoor spaces. As we continue to live with, and through COVID-19, this is the time for us, as individuals, to build our wellbeing and resilience.

From a system point of view, COVID-19 has drawn attention to health inequalities, where more people now understand the impact of disparities in our communities' wellbeing. The city's passion in tackling systemic inequality shone through in the numerous voices supporting the Black Lives Matter movement. There is also some evidence of people's shift in priorities, preferring the Government to pursue wellbeing ahead of

economic growth.¹ This is our chance to imagine a Coventry where improving wellbeing through addressing system-wide inequalities becomes embedded in our decisions and actions.

This report brings together statistical figures, performance reports and evaluations from the Council and partners, and interviews with over 20 colleagues across teams and organisations, to give a record of Coventry's state of wellbeing in 2019/20, and to offer a reflection on the city's approach to improving wellbeing last year and in our early COVID-19 response. These findings, and discussions from a virtual stakeholder event, shaped this report's recommendations, setting the direction on how to reset wellbeing in the city, minimise the harm of a global pandemic, and make use of the benefits we gained as part of our response.



Recommendations for individuals

There are things we can do in our everyday lives to improve our wellbeing, build our resilience and reduce the harm of COVID-19.

- Have vaccinations
- Have the flu vaccination
- Eat healthily
- Travel by walking or cycling
- Do physical activities
- Practise five ways to wellbeing – Keep learning; be active; connect; take notice; and give

Recommendations for organisations and Coventry's health and wellbeing system

Reflecting on last year's projects and partnerships – how they contributed to improving residents' wellbeing, and how they accelerated the city's response to COVID-19 – here are my recommendations for how we, as organisations and as a system, can minimise the impact and harm of COVID-19, while amplifying the benefits gleaned from the city's response to the pandemic.

1 RECOMMENDATION 1 – Wider determinants of health

COVID-19 has shone a light on inequalities within our communities. Coventry City Council and partners should continue to build on this increased awareness, and consider the findings from COVID-19-related research and surveys, to mitigate the health and wellbeing impact of inequalities in Coventry.

2 RECOMMENDATION 2 – Our health, behaviours, and lifestyles

Coventry City Council's approach to public health communications and engagement should be guided by lessons learnt and new relationships formed, especially as we continue to live with, and through, COVID-19.

3 RECOMMENDATION 3 – Our health, behaviours, and lifestyles

Coventry City Council and partners should continue to encourage local employers, and lifestyle and wellbeing services, to commit to improving workplace wellbeing.

4 RECOMMENDATION 4 – Integration of actions from the community, public sector, and voluntary sector

Building on existing health and wellbeing infrastructure, a collaborative partnership approach, which brings together residents' experience and partners' skills and assets, should be taken to strengthen health and wellbeing in communities.

5 RECOMMENDATION 5 – The places and communities we live in and with

Coventry City Council and partners should set up spaces and channels to meet with residents, with the aim of inspiring them to imagine the change they wish to see in their communities, and enabling residents to lead the change.

Section 1 Why does wellbeing matter?



What is wellbeing?

During the Year of Wellbeing campaign, when we asked residents and organisations what they considered as wellbeing, we found that it was widely understood as a concept, but it meant something different to everyone². This reflects wellbeing's multi-faceted nature, as it does not necessarily fit into a single definition. The Department of Health says it is about 'feeling good and functioning well'³, which includes a person's reflection of their life experience, as well as their basic human needs and rights. The Office for National Statistics (ONS) similarly puts it as "how we're doing" as individuals, communities and as a nation, and how sustainable that is for the future.⁴ It looks beyond what we produce, and considers our 'health, relationships, education and skills, what we do, where we live, our finances and the environment.'⁵

ONS's definition shows that our wellbeing is the sum of many parts. This closely aligns with Public Health concepts such as the principles of the Marmot Review and Population Health Management, both of which recognise that our health and wellbeing are shaped by a range of factors – some of which might be outside of our immediate control (e.g. growing up in a relatively deprived environment) and some of which we might be able to take responsibility for (e.g. choosing to do an act of kindness).

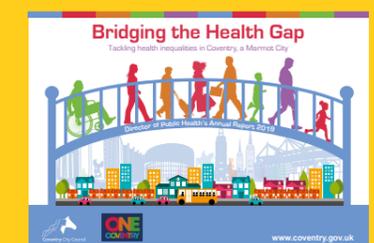
Who tends to have better wellbeing?

In general, 'the more favoured people are, socially and economically, the better their health.'⁶ Conversely, a person living in a more socio-economically deprived situation may find it more difficult to have the 'physical, social and personal

resources to identify and achieve their own goals and deal with changes in their circumstances,⁷ leading to worse health outcomes and levels of wellbeing. These are known as health inequalities.

Public Health England published evidence that 'the impact of COVID-19 has replicated existing health inequalities and, in some cases, has increased them.'⁸ Amongst those diagnosed with COVID-19 (based on testing offered to those in hospital with a medical need), risk of dying was 'higher in those living in the more deprived areas than those living in the least deprived; and higher in ethnic minority groups than in White ethnic groups.'⁹ For deprivation, 'the mortality rates from COVID-19 in the most deprived areas were more than double the least deprived areas, for both males and females.'¹⁰ Wider inequalities have also shaped our experiences of lockdown and affected changes to our ways of life and work. For example, there are remarkable inequalities in who can work from home – the lower the income, the less likely that they are able to work from home.¹¹

The Director of Public Health report 2019 explored health inequalities and the wider determinants of health in detail.



Why do we need to take action for our wellbeing?

According to the Department of Health, wellbeing brings benefits such as adding years to life and improving recovery from illness. It is also associated with broader positive outcomes and influences the wellbeing and mental health of those close to us.¹²

As we continue to live with, and through, COVID-19, we should aim to bolster our wellbeing and to build our resilience, so we are better able to navigate the consequences of the pandemic. This requires efforts from us as individuals and as a system of organisations.

COVID-19 is expected to have a long-lasting, negative effect on our economy and our health systems. The closing of small businesses, the lack of job opportunities for fresh graduates, and the redundancies made after furlough are expected to have long-lasting effects, especially to already vulnerable groups. It is even more important that we are all equipped with the means of improving our

wellbeing and resilience, while bearing in mind the necessity of carrying out compensatory actions to provide more help to those who are most negatively impacted.

On top of the economy, COVID-19 has brought long-lasting impacts on our health system as well. When the initial wave of pressure with responding to COVID-19 is over, there will hardly be enough time for the workforce to recover before having to face another surge in needs – the lockdown is expected to have exacerbated issues such as social isolation, domestic abuse, and poor mental health. In health and care, there is also an expectation not only to restore and recover, but to improve and create the next normal at the same time, which may prove difficult to manage.¹³ As individuals, actively improving our wellbeing may 'ultimately reduce the healthcare burden.'¹⁴ As organisations, finding ways to improve our residents' and communities' wellbeing will work to the same effect. Moreover, organisations are in the unique position to implement measures to improve their workforce's wellbeing, building resilience as a result.



Section 2 How do we measure wellbeing?

Life expectancy and healthy life expectancy, as well as the Warwick-Edinburgh Mental Wellbeing Scales, are some of the measures that give an overview of our levels of wellbeing.

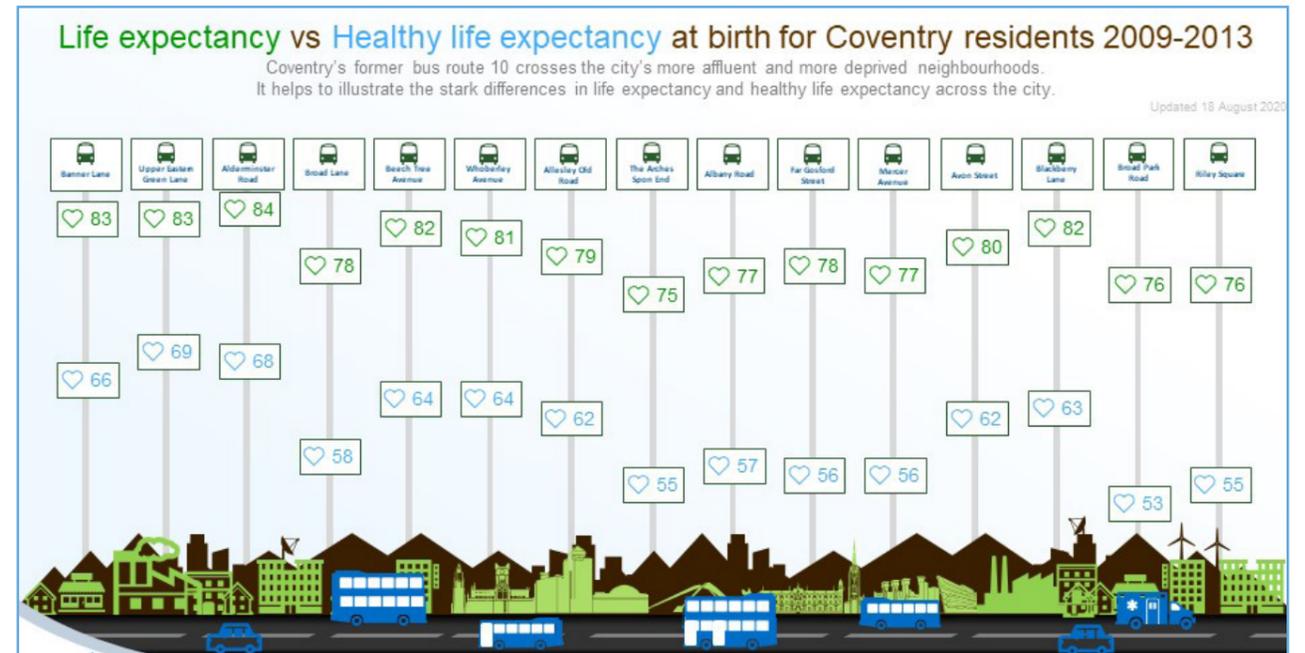
Given that wellbeing is a composite of multiple factors, another method of measuring wellbeing is to evaluate the factors that affect it.

with a small gap between the two. The difference between LE and HLE is known as the 'the window of need'¹⁶. The latest figures for Coventry are in the table below:

Life expectancy and healthy life expectancy

Life expectancy (LE) is the average number of years a person would expect to live.¹⁵ Healthy life expectancy (HLE) is the average number of years a person would be expected to self-report as living in good health. Together, they show a trend in the population's wellbeing. A population is said to enjoy good levels of wellbeing if it has high LE and HLE,

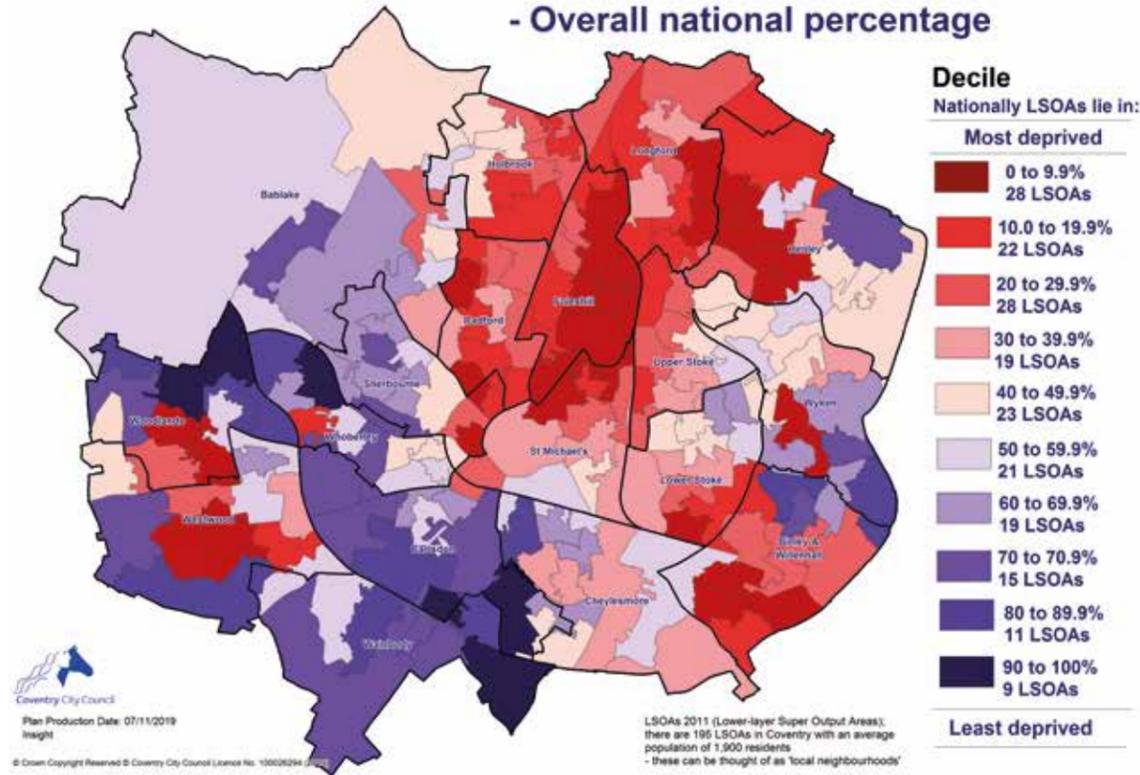
For 2016-18		
Life expectancy	78.5	82.3
Healthy life expectancy	61.9	62.5
% of life in poor health = (LE-HLE)/LE	21%	24%



For comparison, LE for Coventry's males and females is notably worse than England's average. For HLE, Coventry's males and females have similar figures to England's.

Deprivation and inequalities exacerbate these differences. People living in more deprived pockets of the city not only live shorter lives, but also have a bigger window of need which means they spend a greater proportion of their shorter lives in poor health. The Index of Multiple Deprivation (2019) combines information such as income, employment, crime and living environment, to rank England's neighbourhoods in order of deprivation. The map below shows Coventry's neighbourhoods and their relative levels of deprivation.

INDEX OF MULTIPLE DEPRIVATION 2019 - Overall national percentage



The Warwick-Edinburgh Mental Wellbeing Scales (WEMWBS)

WEMWBS is a set of 14 questions designed to measure the mental wellbeing of a population. Each question asks how often the respondent has been experiencing a positive aspect of mental wellbeing over the last two weeks. The answers are summed to provide a score between 14 (scoring 1 for each of the 14 questions) and 70 (scoring 5 for each of the 14 questions).¹⁷ The lower the score, the lower the level of mental wellbeing. When surveyed in 2018, 11% of Coventry residents had notably low mental wellbeing.¹⁸

Some researchers noted that 'a score of 40 and below corresponded to probable depression and a score of 41- 44 to possible depression.'¹⁹ According to data from GP surgeries in 2018/19, almost 10% of Coventry adults were diagnosed with depression, compared to just under 11% for England.



Depression diagnosis

10% COVENTRY **11%** ENGLAND

What affects wellbeing?

Our wellbeing is the sum of many parts. Factors that affect our wellbeing, such as income, education, and the environment, are known as the wider determinants of health. Considering the indicators of the wider determinants of health provides us with another way of measuring wellbeing. The Office for National Statistics (ONS) organised the factors affecting wellbeing into 10 domains.

This section offers a broad look at Coventry residents' level of wellbeing based on these domains. The focus will be on latest available data collected before COVID-19. Where possible, data from the COVID-19 period will be presented too. The section also signposts to the assessments that were carried out during COVID-19.



Our PowerBI report (<http://smarturl.it/coventrydph2020data>) compares Coventry's performance to other localities over the years.

Our citywide Joint Strategic Needs Assessment (JSNA) gives an in-depth look at the city's health and wellbeing.

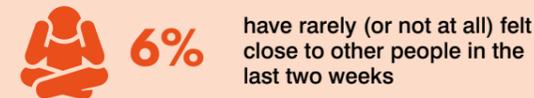
Our place-based JSNAs explore Coventry's residents' level of wellbeing at a neighbourhood level.

1. Personal wellbeing



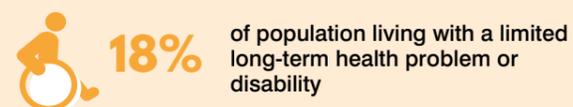
These are estimates of self-reported levels of wellbeing from a national survey. It asks about levels of life satisfaction, happiness, anxiety, and whether respondents feel things they do are worthwhile. In 2019/20, 80% of Coventry respondents reported high levels of life satisfaction (a score of 7+ out of 10), which is similar to the England average of 81%.²⁰ 20% of Coventry respondents reported high levels of anxiety (a score of 6+ out of 10), a slightly smaller percentage than the England average of 22%.²¹ During COVID-19, nationally, all four measures of personal wellbeing have worsened. The Coventry figures from the COVID-19 period are not yet available.

2. Our relationships



Feeling isolated or powerless is damaging to physical and mental health; loneliness increases our chances of dying early.²² One of the questions in WEMWBS asks respondents how often they have felt close to other people in the last two weeks. When surveyed in the 2018 Coventry Household Survey, 6% of respondents said rarely or less often, suggesting a small proportion but significant number of Coventry residents might not have people to rely on.

3. Health



Slightly more than one in every six Coventry residents reported in the 2011 Census that their daily activities were limited due to a long-term health condition or disability. Older people are more likely to feel limited.

4. What we do



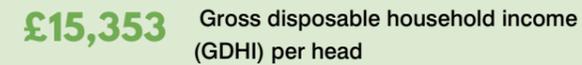
Our work and leisure activities affect our wellbeing. A systematic review shows that unemployment is damaging to wellbeing, permanently reducing life satisfaction, mental health levels, and self-esteem.²³ Coventry's unemployment rate in 2019 was at 5.3%, which was higher than the national average.²⁴ This is roughly 10,300 residents who are seeking employment but cannot secure it. During COVID-19, recent benefit claimant count statistics suggest that the number of unemployed residents in Coventry has increased significantly since 2019. For leisure activities, 78% of the 2018 Coventry Household Survey respondents attended local cultural events²⁵ at least three times in a year. 61% of Coventry adults are considered physically active, doing at least 150 minutes of moderate intensity physical activity per week. A smaller percentage of Coventry adults are physically active than the national average (67%).²⁶

5. Where we live



Living in a safe environment and being part of a cohesive community positively affect our wellbeing. 74% of Coventry residents reported feeling safe at night in their neighbourhood in the 2018 Household survey, a decrease from 2016. This suggests most people feel safe, but a quarter of residents don't feel the same, which could undermine their levels of wellbeing. From the same survey, 77% of residents felt 'very' or 'fairly strongly' that they belonged to their immediate neighbourhood. Our satisfaction with our accommodation and the quality of our dwelling affect our wellbeing. Fuel poverty data gives an indication of the number of households with high fuel costs and low income. High fuel costs are driven by energy prices and the energy efficiency of the property. In 2018, 12% of Coventry households were regarded as fuel poor, compared to 10% overall in England.²⁷

6. Personal finance



GDHI broadly measures the amount of Coventry's Gross Value Added (GVA) that becomes incomes for households, directly benefitting people. Coventry's figure is notably (about £6,250) less than that of England, meaning Coventry's residents might have significantly less to spend or save.²⁸

7. Economy



GVA is a measure of how much Coventry's businesses produce. It is one of the indicators that reflect the health and make-up of the local economy. GVA per head is a measure used to put the GVA of the city in context given its population size. Coventry's GVA per head in 2018 was £25,972, which was notably lower than England overall at £29,356.²⁹

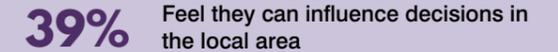
8. Education and skills



Not having formal qualifications may limit an individual's work opportunities. In 2019, just under one in ten working age Coventry residents had no formal qualifications.³⁰ Older residents are more likely to have no qualifications. In recent years, more residents have been gaining qualifications, however, Coventry still falls short of the England average.³¹

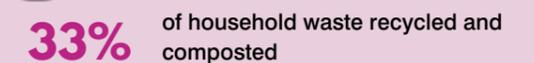
In 2019, about one in 20 (5%) of Coventry's residents aged 16 and 17 were not in education, employment, or training (NEET), or their activity was unknown.³² This is equivalent to 390 young people.

9. Governance



According to Public Health England, 'Community life, having social connections and having a voice in decisions that affect you are all vital to your wellbeing. They provide you with feelings of control, provide a buffer against illness or help you manage existing health conditions better.'³³ In the 2018 Coventry Household Survey, 39% of residents agreed that they could influence decisions affecting their local area.

10. Environment



This domain looks at areas such as climate change and the effects of our activities on the global environment. The [air quality map](#) shows Nitrogen Dioxide (NO₂) levels in different parts of the city. The figure for household recycling and compost helps to reflect Coventry's residents' interest in bettering the environment. The provisional data for 2019/20 shows that 33% of Coventry household waste was recycled and composted.³⁴

COVID-19 has prompted new research to better understand the changes brought by the pandemic. In Coventry, the Council commissioned Coventry University to undertake research into the impact of COVID-19 and its implications for future transport, especially mass transit. A Health Impact Assessment was also jointly carried out by Coventry City Council and Warwickshire County Council. The analysis shows that the wider impacts from the pandemic and lockdown will fall more heavily on communities most directly affected by the disease itself.³⁵ An over-arching Equality Impact Assessment will also be carried out by the Council, drawing on the findings of other local and national research and assessments, to better understand what the local impact of the pandemic has been on protected groups. This will inform the city's reset and recovery work in the medium to longer term. Surveys were also conducted with residents and voluntary and community organisations to understand their concerns and the impact COVID-19 has had on their lives.

Section 3

What can we, as individuals, do to improve our wellbeing?



As part of our responsibilities to keep ourselves healthy, it is important to understand how to look after our wellbeing as individuals.

Speaking to residents and partner organisations during the Year of Wellbeing 2019 campaign, we learnt that, while wellbeing was widely known as a concept, it was not always understood how our actions could affect our wellbeing.³⁶ This section aims to highlight some of the connections between our actions and wellbeing.

Vaccinations play an important role in protecting our health and wellbeing. They prevent the spread of infectious and communicable diseases (diseases that can be spread from one person to another). Before the introduction of widespread immunisation and vaccinations, these diseases were a major cause of death and permanent disability, especially for children. Building the population's immunity helps with limiting the spread of vaccine-preventable diseases.³⁷

To achieve population immunity for measles, for example, 95% of five-year olds must have received both doses of measles, mumps, and rubella (MMR) vaccines.³⁸ England unfortunately lost its measles elimination immunisation status,³⁹ with only 86% (nine percentage points lower than 95%) of five-year olds having had both doses in 2018/19.⁴⁰ Coventry rates have been similarly disappointing. In 2018/19, only 82% of Coventry five-year olds had had both doses of MMR vaccination in 2018/19.⁴¹ Coventry GPs and partners have set up a task force to increase the uptake of vaccines.

Follow up: Vaccinations can be received at GP surgeries or through the school-based immunisations service.

The **flu vaccine** (commonly known as the flu jab) is currently the best protection against the risk of flu and its complications.⁴² The level of protection may vary, but it is likely to make the flu milder and shorter-lived. As the flu strains often change, and as protection from the injected flu vaccine decreases over time, it is recommended that the flu vaccine is taken every year. While the flu may clear up within one week for some, for vulnerable people such as pregnant women or those with underlying health conditions, it is more likely to develop serious complications such as pneumonia. There is a chance that the flu season of 2020 will collide with the next peak of COVID-19.⁴³ The Government has expanded the eligibility for free flu vaccination in 2020 in preparation. Having the flu vaccine not only protects against flu, it also protects the NHS from being overwhelmed at a critical time.

Follow up: The flu vaccine can be obtained at GPs and local pharmacies from September 2020. The **Flu Vaccination Winter2020/21** pamphlet contains more information.

Our lifestyles have a profound impact on our wellbeing. Healthy eating, active travel, and regularly taking part in physical activity all contribute to lowering the chance of obesity. In 2018/19, 63% of Coventry adults were classified as overweight or obese, similar to England's average of 62%.⁴⁴ Evidence suggests 'people with COVID-19 who are overweight or living with obesity, compared with those of a healthy weight, are at an increased risk of serious COVID-19 complications and death.'⁴⁵

Healthy eating refers to having a balanced diet, paying attention to areas such as good nutrition, low salt intake, and good hydration. In Coventry in 2018, while 91% of surveyed adults agreed it was important to them to eat healthy foods, only 25% of adults self-reported to have at least five portions of fruits or vegetables in a typical day.⁴⁶ Meanwhile, 10% said they had about one or less than one portion.⁴⁷ In the same survey, 35% of residents said they ate takeaways at least once or twice a week.

Active travel refers to walking or cycling as a form of transport. 'Switching more journeys to active travel will improve health, quality of life, [the] environment, and local productivity'.⁴⁸ A survey in 2018 shows that 12% of Coventry residents walk to work, while 3% cycle.⁴⁹

There are plenty of benefits brought by regular **physical activity**. It is reported that 'people who have a physically active lifestyle have a 20-35% lower risk of cardiovascular disease, coronary heart disease and stroke compared to those who have a sedentary lifestyle'.⁵⁰ The image below illustrates its impact on wellbeing for children, adults, the elderly, and people with disabilities.



61% of Coventry adults are considered physically active, doing at least 150 minutes of moderate intensity physical activity per week.⁵¹ This is a smaller proportion than the national average of 67%.⁵² During COVID-19, Sport England reported that, nationally, while 'a third of adults [in England did] 30 minutes

or more of physical activity (at a level that raised their breathing rate) on five or more days a week,⁵³ inequalities were still replicated or even exacerbated. Groups who found it harder to be active before the pandemic, such as women, older adults, people of BAME background, and people from lower socio-economic groups, still found it more difficult than others to be active.

Follow up:

- ▶ **Better Health** provides further information on how individuals can prevent obesity from becoming a risk to their health.
- ▶ **Coventry Health Challenge** complements Better Health to provide support for Coventry residents, focusing on physical activity, nutrition, giving up smoking, and vaccinations.
- ▶ **Healthy Lifestyles Coventry** provides support with weight management, healthy diet, giving up smoking, getting more active, cutting down on alcohol or just improving overall wellbeing.
- ▶ **Free NHS Health checks** are provided for eligible people aged 40-74.
- ▶ **Best You** is an app that provides personalised health and wellbeing recommendations regarding healthy eating, healthy weight, and physical activity.
- ▶ **NHS's Eat Well page** provides information on having a healthy diet.
- ▶ All Coventry residents can benefit from membership incentives and options with **Go CV**. See page 22 for details.
- ▶ During COVID-19, the **NHS Diabetes Prevention Programme** delivered by Weight Watchers accepts self-referrals from residents of BAME background.⁵⁴
- ▶ The Council is using Government funding to reallocate road space in some parts of the city to pedestrians and cyclists. This is done by creating new pedestrian and cycle zones and by installing pop-up cycle lanes and 'modal filters', such as bus gates, to remove through traffic from some roads.⁵⁵

In recent years, health and care professionals have taken up the practice of **social prescribing**. Under social prescribing, patients can be referred to activities such as 'volunteering, arts activities, group learning, gardening, befriending, cookery, healthy eating advice and a range of sports',⁵⁶ that are usually provided by local organisations. Social prescribing reflects a recognition that sometimes, solutions to improving wellbeing lie outside of clinical services, and can be sought in our everyday behaviours.

The activities relating to social prescribing closely align with the **Five Ways to Wellbeing**. Developed by **New Economics Foundation** and endorsed by the NHS, they are actions that, if built into our day-to-day lives, will have an impact on our wellbeing. Specifically, Take notice and Give have been shown to influence wellbeing in a positive way, while the other three are 'important influencers of both wellbeing and ill-being'.⁵⁷

The actions mentioned above are general in nature. Quitting smoking or addressing substance misuse, paying attention to mental health levels, seeking support in a domestic abuse situation, for example, all contribute to better wellbeing. The Council's COVID-19 response webpages provide advice and links to services that can support your wellbeing, especially during the pandemic.

A person living in a more socio-economically deprived situation may find it more difficult to have the resources to identify and achieve wellbeing goals.⁵⁸ This is where, as organisations, we can act as a system to address health inequalities, so their barriers to wellbeing may be lifted.

5 ways to WELLBEING in Coventry and Warwickshire

- Keep Learning** Learning new skills can build your sense of achievement, confidence and self esteem - and will keep your mind active.
- Be Active** You can walk, run, dance or stretch your way to wellbeing - whatever works for you.
- Connect** Spending time building positive relationships and social connections with family, friends, neighbours and colleagues is great for your sense of happiness and wellbeing.
- Take Notice** Bring your attention and interest to your surroundings and look for things that bring you happiness. This is sometimes called mindfulness.
- Give** Giving time freely to help others builds your sense of community and belonging.

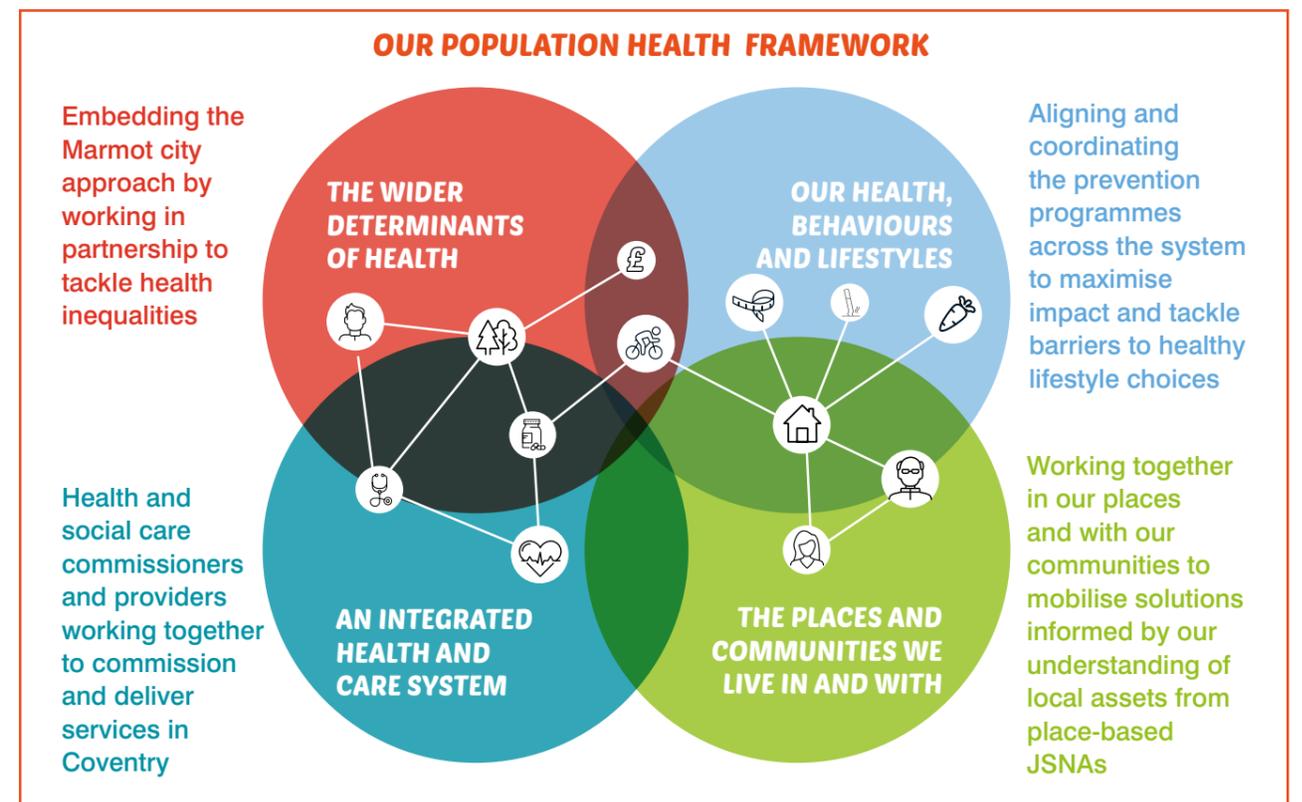
Section 4 What did we, as organisations and as a system, learn about Coventry's approach to improving wellbeing?



There are many social factors that affect our wellbeing, such as income, education, and the environment. They are known as the wider determinants of health. By addressing the avoidable inequalities in these factors, the population's wellbeing can be lifted. Furthermore, some groups that are more vulnerable will require compensatory actions and extra support to overcome barriers.

Since the social factors affecting our wellbeing stretch across a range of expertise, it is essential that a partnership approach is adopted. Coventry has been a Marmot city since 2013, championing the approach of working with partners to address health inequalities and carry out compensatory action.⁵⁹ Furthermore, the Council introduced the One Coventry approach in 2018, bringing renewed emphasis on working with organisations across the system and within the community.

How does Coventry's system look from a Public Health perspective? The population health framework provides an overview of how we can work together as organisations and as a system. The framework is developed by the **King's Fund**, a national health and care think tank, with the aim of reducing health inequalities and improving health and wellbeing in a population. The Council adopted the approach, making it the heart of the **Health and Wellbeing Strategy 2019-2023**.



Through the lens of the four quadrants of the population health framework, this section is a reflection on the projects and partnerships from last year and the early months of COVID-19. This section is informed by performance reports and evaluations from the Council and partners, as well as semi-structured and unstructured interviews conducted with over 20 colleagues across teams and organisations. Together, they gave a view of what worked well in Coventry's approach to improving residents' wellbeing (as defined by ONS's 10 domains) and how these characteristics played a part in the city's response to COVID-19.

QUADRANT: Wider determinants of health

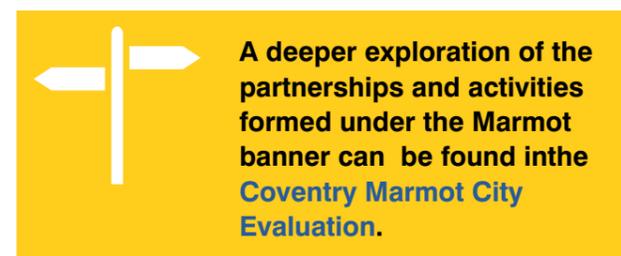
This quadrant reflects Coventry's ambition to work in partnership with services and organisations to address health inequalities within the wider determinants of health. Here are some things we learnt about Coventry in the last year:

More organisations in the system now understand the concept of wider determinants of health and consider tackling health inequalities as part of their work.⁶⁰ The number of partners in the Marmot Partnership Group increased between 2013 and 2020, with membership from local charities, emergency services, universities, and Government bodies. The diversity of partners allows considerations of health inequalities to shape a range of works across the system. The Police's Youth Violence Reduction Strategy and the Fire Service's Safe and Well Checks, for example, both acknowledge the influence of social factors on the risk of crime and fire.

During COVID-19, at a strategic level, the Marmot Partnership Group responded to the city's shifting needs by highlighting four areas of focus – 1) BAME communities; 2) Families with 0-5-year olds; 3) Economy and regeneration including employment and young people; 4) Income inequality. The COVID-19 needs and impact assessments inform the actions for the four priorities.⁶¹ At an operational level, a high level of willingness to collaborate helped to deliver a speedy response to the city's food needs.

Within the Council, there was a similar embracement of cross-team working and awareness of the wider determinants of

health.⁶² A deeper integration developed between Public Health and teams across the Council, leading to the continual application of the Marmot principles in the Planning, Parks, Licensing, and Transport teams at a strategic and operational level. Public Health concepts and highlights from the JSNA now form part of the Council's mandatory training for new staff members.



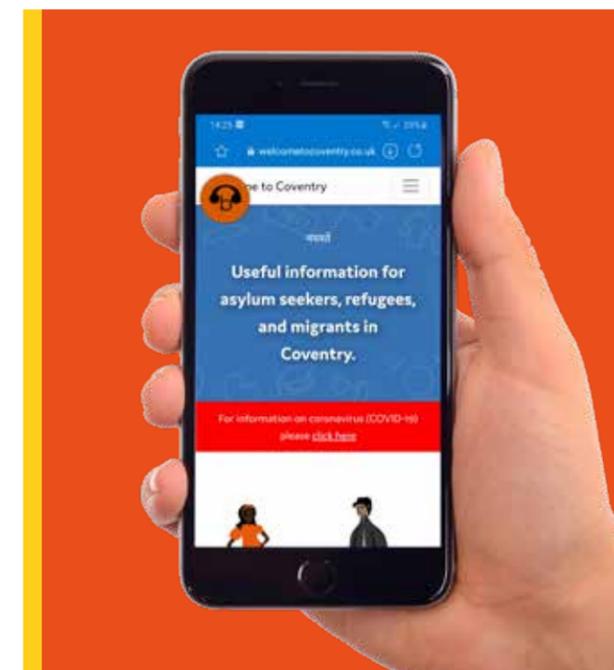
Employment inequality was addressed through influencing employers and providing rounded training for refugees.⁶³ This relates to **What we do in ONS's 10 domains for wellbeing.** Given that 'unemployment is damaging to people's wellbeing,'⁶⁴ the What Works Centre for Wellbeing identifies raising employment levels as an effective method of improving the population's wellbeing. In Coventry, employment inequality was addressed by delivering specialist employment support services via a city centre hub, the Job Shop; influencing employers with their recruitment practice; and providing specialist support for residents who were most excluded from the labour market.

Employability support for residents is delivered directly at the Job Shop and in partnership with specialist community organisations such as WATCH, Foleshill Women's Training, and the Coventry Refugee and Migrant Centre. The Employer Hub has encouraged local employers to employ Coventry residents who were experiencing deprivation. There were instances when partners and the Council successfully influenced employers to offer work trial periods, training, and higher pay for prospective employees. A partner reflected, 'There are very few organisations that try to influence the quality of the job on offer. I think we've made a big difference with the employers we've worked with, and I think there's loads more that could be done on that side'. Other examples of Coventry partners seeking to influence employers include strategic work with the West Midlands Combined Authority and the Coventry and

Warwickshire Local Enterprise Partnership. It has also included the direct management of specialist interventions with employers including, the NHS, the City Council itself and a wide range of small and medium size local businesses.

The Ignite programme, for example, which was delivered in conjunction with the Council's Migration Team and ACH, merged integration and employability support for refugees. The Resettlement Induction Programme enrolled refugees in Coventry to learn about the UK's laws, policies, and employment procedures.⁶⁵ There were additional sessions to help them gain an understanding of the UK job market. The employability classes also offered the opportunity for socialising and building ambitions for life in the UK. Recognising the trauma that they had experienced, confidence building was a key part of the programme too. The Council partnered with Stand and Be Counted theatre company to deliver confidence-building workshops.

Collaboration with community health champions and multi-lingual technology enabled increased communication with migrant groups and residents from BAME backgrounds.⁶⁶ This relates to **Health in ONS's 10 domains for wellbeing.** Some migrants struggle with the English language or with literacy, putting them at a disadvantage. Fifteen volunteers of refugee and migrant backgrounds were trained as **Community Health Champions** to disseminate public health messages to their communities. Some of them were medical professionals in their home countries. They represent 15 nationalities and are fluent in English and 19 languages between them. They led on new initiatives such as a regular health-focused podcast and virtual art therapy sessions. On the technology side, a culturally-sensitive app and multi-lingual social media campaigns were developed. The Council worked with a focus group of 30 residents to develop the **Welcome to Coventry app** to overcome the language barrier. The app provided key information on education, employment, and health in multiple languages. Its built-in 'BrowseAloud' technology allowed users to select a language and listen to its translation.

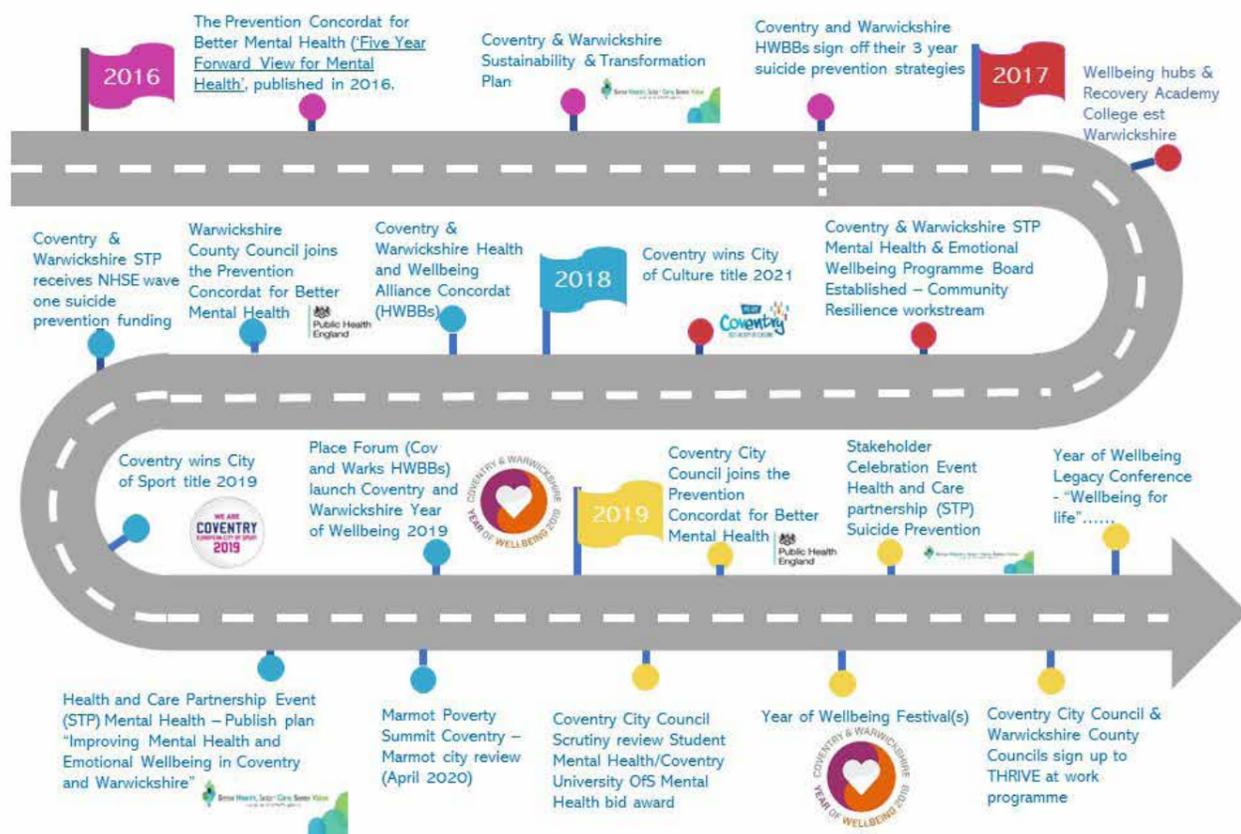


These ties proved especially impactful during COVID-19. The health champions helped to disseminate messages to their communities in over 60 languages. The Director of Public Health, health champions, and faith leaders co-hosted webinars to inform communities of the COVID-19 situation. The app disseminated COVID-19-related advice, employment rights, and avenues of accessing mental health support. Similarly, when childhood vaccination rates decreased during COVID-19, a social media campaign was published in seven languages. By helping to clear misconceptions of GP surgeries being unsafe or closed, residents were encouraged to return to GP surgeries to complete their vaccinations.

The Routes to Ambition (RtA) project provided education and employment support for young people who were disengaged, or at risk of exclusion, or facing major barriers to employment due to health and disability.⁶⁷

This relates to **Education and skills in ONS's 10 domains for wellbeing.** Under the project, the Work Related Learning Team offered learning programmes for young people who were at risk of becoming not in education, employment, or training (NEET). RtA coaches were attentive to the young people's needs, which was reflected in the range of support provided, including confidence-building exercises and guidance on routes to the young person's dream career.⁶⁸

Coventry & Warwickshire Road Map to Better Mental Health



An RtA coach noticed a young person's talents in sport and music, brought him to a live production at Belgrade Theatre, and arranged for him to meet with the show's directors and actors. This gave the young person the confidence to be open about his dreams of working in the music scene and to share with staff and peers the music he had made. He later reflected, 'I'm glad I got to go and see the show at the theatre with the RtA coaches because I have never seen a show like that before and would love to do more stuff like that in the future. I have lived through a lot of shady (bad) things in my past, but if you keep looking back, then you won't see what is in front of you.'

For a seamless transition from education into employment, RtA has referral routes into Ambition Coventry, a project where 20 organisations collaborate to support marginalised young people⁶⁹ with further education, employment training and opportunities, vocational qualifications, and paid placements.⁷⁰

An increase in staffing and accommodation resources brought about significant changes for people who are homeless.⁷¹ This relates to *Where we live* in ONS's 10 domains for wellbeing. The Homeless Team expanded to become the Housing and Homelessness Team. In particular, funding from the Ministry of Housing increased the Council's capacity to work with street homeless people, expanding from five hours of outreach per week to having nine full-time members of staff. The increase in staffing has enabled the team to build relationships with more partners. The Homelessness Forum now has over 50 members, with representation from charities and specialist service providers. The Housing and Homelessness Team reflects that they now 'have better understanding of who is street homeless and the issues they are facing. We can also quickly pick up when new people are on the streets.' The procurement of alternative temporary accommodation options, such as self-contained flats designed for family living, led to the elimination of bed and breakfast usage for homeless families in September 2019.

Public Health led on the commissioning of the Housing First project and embedded a housing-led approach to tackle homelessness. As part of the COVID-19 response, over 180 individuals have been accommodated. Users were given time to emotionally adjust to being in accommodation – in 'a space they feel in control of' – and to build trust with services. All accommodated individuals have since drawn up bespoke move-on plans, detailing available housing options that would best meet their longer term need so they did not return to the streets. 'It is difficult to engage people on the street. When they were given a space, we saw people who we did not think would change their behaviours, suddenly start looking after themselves,' reflected the Housing and Homelessness Team. After they were accommodated, services were able to deliver the necessary drug and alcohol support and Hepatitis C treatment. Between May and July 2020, more than 20 recovering drug users commenced Hepatitis C treatments, putting Coventry on track to eliminating the disease among drug users accessing addiction support by 2021.

The Coventry and Warwickshire Health and Care Partnership (HCP) has led on our COVID-19 mental health responses. Through collaboration between the statutory and voluntary and community sector partners a 'Working Together Partnership' was formed prior to COVID-19 to support and engage mental health organisations to develop and improve commissioning, communications, and pathways. This relates to *Health and Personal wellbeing* in ONS's 10 domains for wellbeing. The Working Together Partnership also enabled organisations to collaboratively bid for funding and access training opportunities. The graphic on page 18 illustrates the HCP's journey to improve mental health and emotional wellbeing for our population which received national attention. Partnership members were asked to present on their approach to mental health and wellbeing at two national events. As part of the response to COVID-19, the Partnership has developed and provided virtual training on suicide awareness to help services to identify at risk populations. Mental health resource packs were produced and distributed to partners and residents, as well as a bereavement pack which was developed to provide people with help, ranging from emotional to financial support.

Volunteering opportunities in nature have helped to improve the wellbeing of people with mental ill health.⁷² This relates to *Health and Personal wellbeing* in ONS's ten domains for wellbeing. What Works Centre for Wellbeing cites existing evidence that doing outdoor activities 'can make us feel happier, and more satisfied with life, or less anxious and depressed.'⁷³ The Council collaborated with Warwickshire Wildlife Trust, and Coventry MIND, a mental health charity, to deliver a project called The Environment and Me. For the third year running, the project offered Coventry residents with mental ill health the opportunity to socialise while making a visually-evident, positive impact on the environment. Together, they worked across allotments, nature reserves, parks, rivers, and woodlands, to create new wildlife ponds and meadows, plant trees, install otter holts, and grow organic fruits and vegetables. The project has engaged over 600 people, working closely with 200, including individuals who are suicidal. Some participants in the project successfully minimised hospital admissions, or progressed back into employment and education, while some branched into other social and volunteering activities. The project received the Countryside Management Association (CMA) Award.

The City Council developed alternative solutions to improving air quality, protecting the economic and social interests of people living in relatively deprived areas of Coventry.⁷⁴ This relates to *Environment* in ONS's 10 domains for wellbeing. In 2017, it was forecasted that Coventry would be non-compliant with Nitrogen Dioxide (NO₂) levels in



the future. The Government advised on introducing a Clean Air Zone (CAZ), where more polluting vehicles would be charged for entering a large part of the city.⁷⁵ Noting that the charging zone would have mainly affected residents living in deprived areas, such as people who could not afford a new electric vehicle or the daily zone charges, the Council rejected the CAZ, consulted widely, and submitted alternatives to achieve compliance with legal limits for NO₂ in the shortest possible time. The new Local Air Quality Action Plan was approved in February 2020, with a focus on improving the city's infrastructure, encouraging behaviour change, and making cleaner vehicles more accessible. Infrastructure changes include building the city's first segregated, two-way cycle route along Coundon Road; remodelling junctions to change the flow of traffic; and introducing a Dynamic Traffic Management system to monitor air pollution in real-time and redirect traffic to another route when pollution levels are high. Under COVID-19, the Council has secured Government funding to reallocate road space in some parts of the city to pedestrians and cyclists.

Quadrant: Our health, behaviours and lifestyle

As individuals, we understand that having a healthy lifestyle will improve our wellbeing. However, some may find that they face more barriers than others when it comes to adopting healthy behaviours. It is our role as organisations and as a system to help minimise these barriers.

Coventry and Warwickshire designated 2019 as the Year of Wellbeing, resulting in a campaign to raise awareness for wellbeing; activities ranged from encouraging employers to promote workforce wellbeing, to empowering residents to share their experiences in overcoming mental and physical adversities.⁷⁶

The Year of Wellbeing led to an increase in the number of organisations across Coventry and Warwickshire assessing and improving their staff wellbeing offers. This relates to Personal wellbeing and What we do in ONS's 10 domains for wellbeing. The Year of Wellbeing campaign found that 'there was a high level of interest in workplace-driven wellbeing offers, with many staff feeling this



should be a focus for organisations to improve performance, retention, and staff satisfaction.⁷⁷ Considering 19% of the working age population of Coventry and Warwickshire worked in the public sector,⁷⁸ this was judged to be a measurable starting point for awareness-raising and introducing cultural and behavioural change.

In 2019, Coventry City Council joined dozens of Coventry and Warwickshire organisations in adopting the Thrive At Work scheme, a workplace commitment with criteria and guidelines on creating a workplace that promoted employee health and wellbeing, through organisational enablers such as line manager support, attendance management, policies and procedures.⁷⁹ Before and during lockdown, Warwickshire County Council and Coventry City Council respectively carried out surveys to better understand the workforces' needs and their priorities around health and work, informing the City Council's wellbeing offer. The Council also started to provide Mental Health First Aid training in 2019 to help managers to spot signs of poor mental wellbeing amongst colleagues and to signpost them to appropriate support.

The Year of Wellbeing campaign evidenced effective awareness-raising for wellbeing. This relates to Personal wellbeing and What we do in ONS's 10 domains for wellbeing. The campaign reframed public health messages, putting the inspirational voices and stories of real people at the heart of its communications. Seventy three residents were empowered to share their wellbeing stories on BBC radio, in meetings, and on social media. Feedback suggested that people responded well to real life stories and could connect with them.⁸⁰ Amongst many examples, trustees and senior leaders in South Warwickshire NHS Foundation Trust (SWFT) acted as independent advocates for the campaign by talking about their personal wellbeing pledges on camera on the first day of the year, setting an example for colleagues across the system. When the Council wanted to raise awareness of the 'One Coventry' way of working, a similar approach of filming senior leaders was adopted.

The city hosted events to promote sports and wellbeing.⁸¹ The city was UK European City of Sport during 2019, holding over 180 events around the



city. Summer saw Coventry host Europe's largest corporate multi-sports festival. The four-day event had over 3,000 people participate in 23 sports. Summer 2019 also saw the annual event, Sports Fest, getting over 14,000 people active for free in 10 days, along with 21 Vodafone Gigafast Broadband Community Festivals around the city. Sport and wellbeing activities were hosted in the Go CV Sports Zone at Godiva Festival, getting a further 7,000 active.

Amongst many other sport and wellbeing events, the sport sector collaborated with Free Radio's Cash for Kids charity where £36,000 was raised to help disadvantaged children in the city get moving. Coventry Smashes Sport Week was hosted in January 2020, focused on taking physical activity with wellbeing messaging around the city for free, also celebrating the end of Coventry's Year of Sport. There was also investment via Sport England as a priority place to develop work in our local communities.



Coventry will be hosting the 2021 Rugby League World Cup, rugby 7s, judo and wrestling for the Birmingham 2022 Commonwealth Games and will be host city for the International Children's Games in 2022. The Festival of Wellbeing was hosted in Coventry City Centre in 2019. There were organisations for physical and mental health, arts, and food, forming 30 stalls to promote wellbeing.

There was investment in new sports and leisure facilities in the city. A discount scheme and card were set up to ensure residents, especially families on low incomes, could enjoy the city's attractions.⁸² There was over £100m of investment in new sports and leisure facilities in Coventry, including new facilities at The Alan Higgs Centre, an established leisure centre, along with The Wave, a new water park and fitness destination. The Wave is designed as one of the most accessible water parks in the UK. The Go CV scheme was set up to offer discounts to Coventry residents for the city's arts and sports venues (currently over 45,000 people registered), with additional discounts for families with low income and qualifying benefits, helping to remove some of the financial barriers of taking part in sports and cultural activities. New partners are always joining the Go CV scheme, bringing offers from discounted tickets to The Wave water park and fitness memberships, to free tennis and tickets to see professional Champion of Champions snooker matches.



The Foleshill Partnership Group set an example of partnership working in delivering a healthy lifestyles programme to local families. The successful summer programme in Edgwick Park led to increased usage and a reduction of anti-social behaviour in the area.⁸³ This relates to **What we do** and **Where we live** in ONS's 10 domains for wellbeing. To bring the local community together and to encourage lifestyle improvements in physical activity and healthy eating, 10 local communities collaborated to form the Foleshill Partnership Group. The group met regularly to review and plan future delivery, allowing for better alignment of, and referrals to, timetabling, projects and funding opportunities. Together, they delivered a programme of summer activities at Edgwick Primary School and Edgwick Park. Having the school as a base helped to build confidence amongst parents about the programme as the school was a trusted organisation in the community. Edgwick Park had been known as an area that struggled with anti-social behaviour; hosting activities in the park helped to increase park usage by residents, subsequently reducing police reports in the area. The summer 'Sport in the Park' programme was attended by over 200 children. Throughout the summer, 14 families became regular attendees. To ensure sustainability, the partners created a delivery calendar for 2020. The success of this group was recognised as it was named winner of Partnership award at the 2020 Coventry Health and Wellbeing Awards.

The City of Culture Trust built engagement across the city through targeted programming and geographically dispersed consultations, workshops and other events.⁸⁴ This relates to **What we do** in ONS's 10 domains for wellbeing. 46,000 attended cultural events in the city in 2019. In response to the 2018 Coventry Household Survey finding that 2% of Upper Foleshill residents participated in publicly invested cultural events (compared to 77% in Earlsdon), the Trust undertook a programme of targeted work in Upper Foleshill to encourage cultural engagement and participation. The next phase of development for the Trust is to address other neighbourhoods with historical and current low levels of engagement, such as Binley, Willenhall, Canley, Longford, and Wood End, Henley and Manor Farm (WEHM).



QUADRANT: Integration of actions from the community, public sector, and voluntary sector

When the health system and the care system are well aligned, there will be fewer gaps in the support provided to vulnerable individuals, improving their chances of living healthier for longer.⁸⁵ A tighter partnership between service commissioners (e.g. the Council and Clinical Commissioning Groups) and service providers (e.g. GPs and mental health services) can improve residents' wellbeing by providing services of better quality.

Intelligence sharing across agencies has led to improved identification, management and contact tracing for tuberculosis (TB).⁸⁶ This relates to **Health** in ONS's 10 domains for wellbeing. Coventry has a large ongoing TB outbreak amongst its homeless, substance misusing and sex worker populations, many of whom are street homeless or 'sofa surfing' in overcrowded accommodation, providing optimum environments for the onward transmission of the disease. This group is typified by poor treatment adherence leading to risk of treatment failure, relapse, incomplete

contact notifications, persistent infectiousness, drug resistance and a much higher risk of TB-related death. The TB Multi-disciplinary Team was set up in 2019 with representation from the TB Team, voluntary sector organisations working with the cohort, the Police, Public Health England, the Council's Housing and Homelessness Team and the Drug and Alcohol Service. Through information sharing and holistic care planning, the team accelerated city-wide response when a TB patient was identified, better enabling patients to commence and complete treatment, reducing the transmission of TB in the city. This experience of TB contact tracing is being used to inform how we test, trace and manage outbreaks of COVID-19 in our homeless population, including effective data sharing and referral pathways.

GPs were encouraged to share best practice to help increase uptake of vaccinations.⁸⁷

This relates to **Health** in ONS's 10 domains for wellbeing. Coventry and Warwickshire convened an Immunisations Task and Finish Group with stakeholders such as local Clinical Commissioning Groups, the child health and information systems, and Public Health England. Under the group, a review was undertaken to identify obstacles to good rates of vaccination. Following results from the review, GPs were able to identify best practices from each other and share their experiences.

A new procurement practice brought about system change for domestic abuse (DA) services.⁸⁸ This relates to **Our relationships** in ONS's 10 domains for wellbeing. Following a **needs assessment** and a new **strategy**, consultation was carried out with service providers professional stakeholders, domestic abuse victims and members of the public. It was identified that there was scope for service providers to collaborate better and work more closely with operational staff in Police, social care, and housing services. The requirement for collaboration – as well as priorities from the strategy like improved data collection and better provision for previously under-represented groups of victims was written into the procurement process and supported with lengthier contracts of up to nine years to reduce the disruption associated with re-commissioning and encouraging providers to establish more robust long-term partnership

arrangements. Annual service improvement plans will be established to ensure providers adapt to changing local needs, good practice and technology throughout the contract.

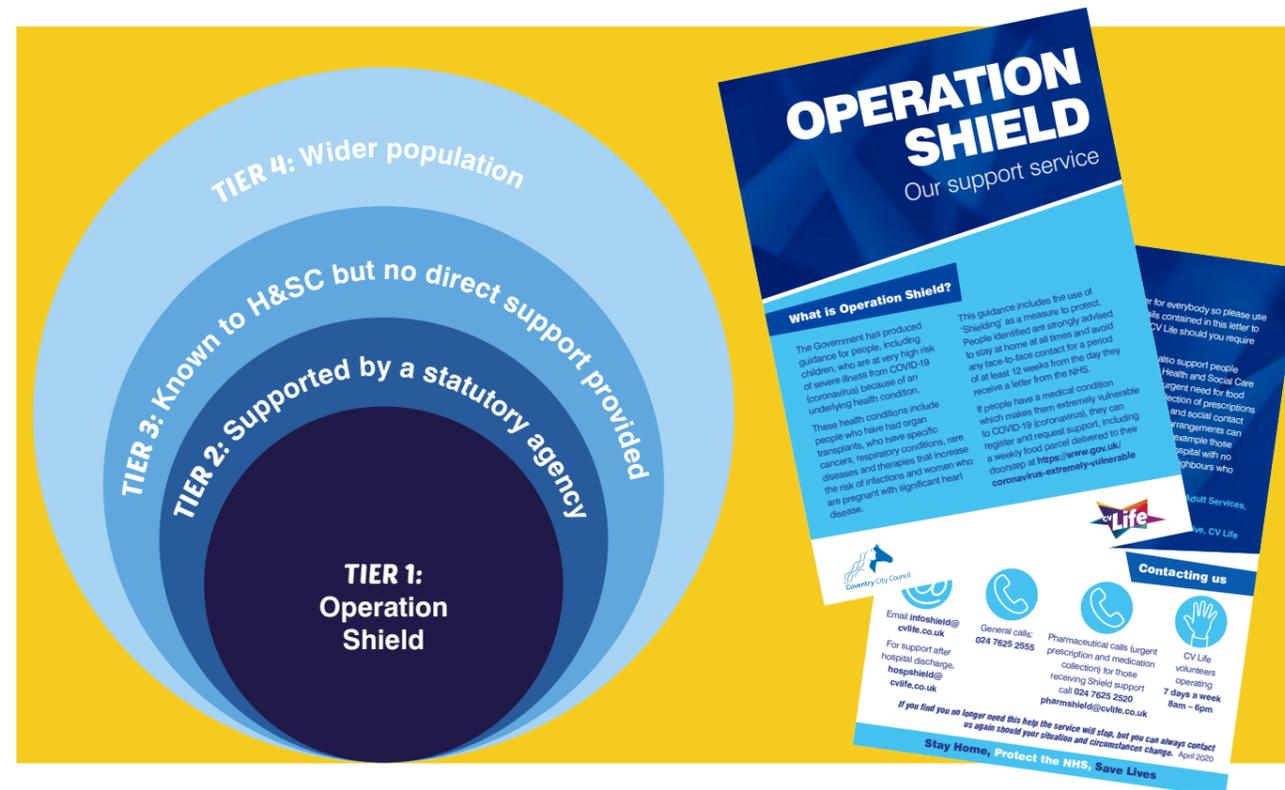
The success of system change brought by procurement was evidenced during COVID-19 where providers worked with housing services to improve pathways into specialist accommodation. Domestic abuse services also joined other Public Health commissioned services to share their experiences during the pandemic, learn lessons and gain reassurance from each other that they were adopting safe practice.

Improved use of data has helped with early identification of pupils who may need additional support.⁸⁹ This relates to **Our relationships and Health** in ONS's 10 domains for wellbeing. The Council's Family Health and Lifestyles Service adopted the Lancaster Model in 2019, where pupils complete a needs assessment on areas including emotional health and wellbeing, lifestyle choices, and relationships. Amongst other information, the needs assessment data identified pupils with safeguarding concerns, mental ill health, and anxiety issues, enabling schools and services to intervene at an earlier stage.

Under COVID-19, NHS England identified some Coventry residents as Extremely Vulnerable Persons (EVP) who were eligible for protection under Operation Shield. The scheme offered the delivery of food parcels, medicines, and social contact calls to EVP who did not have a support network. However, some residents who local health and care partners believed to be at risk, were not on the Shielded list. In response, the Council pooled data with University Hospitals Coventry & Warwickshire (UHCW) and Sowe Valley primary care network to complement the list from Operation Shield. This provided a more holistic picture of different levels of vulnerability and risk within Coventry's communities, as illustrated in the diagram below. It also identified gaps in provision, allowing community services to better mobilise support for residents.

Putting the voice of the user at the heart of service design has enabled more fit-for-purpose delivery and helped to build trust between users and services. This relates to **Governance** in ONS's 10 domains for wellbeing.

A person with lived experience of homelessness acted as a chair for the Homelessness Forum.⁹⁰ As mentioned earlier in the report, the Homeless Forum is attended by over 50 partners. It created a space for recognising assets in the city's infrastructure and



its specialist wrap-around services and enabled a better understanding of gaps in provision from the perspectives of users and providers. Through the forum, the Council was able to work with providers to enhance the offer at winter night shelters, adding extra resources where it was most needed.

A similar approach was taken for parent's mental health.⁹¹ A Co-production and Communications work stream aims to promote and raise awareness of the initiatives undertaken to help reframe the narrative surrounding mental health and support parents as they enter parenthood. The group leads across Coventry and Warwickshire in the planning and co-ordination of co-production and participation for Parent Infant Mental Health and Wellbeing (PIMHW). A parent representative sat on the strategic board and at the working group, ensuring parents voices influenced the system at all levels. Parents worked alongside the Council to organise a conference around parent infant mental health in February 2020. Case studies of parents' experiences were discussed, and parents and professionals worked collaboratively to explore ways to improve parent infant mental health services in Coventry and Warwickshire. Feedback and input from parents have helped to further the Co-production and Communications work stream and shaped future actions for parent infant mental health.

QUADRANT: The places and communities we live in and with

Populations in different neighbourhoods will have different needs, as evidenced by the Council's Place-based Joint Strategic Needs profiles. Often, local communities may already have efforts in place to address them; these are known as assets. Taking these needs and assets into consideration, each area will require bespoke actions to improve its population's wellbeing. Understanding the population at a neighbourhood level, also known as taking a place-based approach, is the first step. Joint decision-making initiatives that involve meaningful participation from local communities can increase wellbeing.⁹²

Local Joint Strategic Needs Assessments (JSNA) by neighbourhood, enabled residents, local organisations, and health and care leaders to have a better understanding of each area's

needs and assets, informing their decision-making. This relates to all domains in ONS's 10 domains for wellbeing. The JSNA's traditional role is to provide leaders with an understanding of the local health and care status to inform their decision making. In addition to the statutory requirement of producing a **citywide JSNA**, eight accompanying **place-based (neighbourhood level) JSNAs** were in production between 2018 and 2020. Moving away from mainly reporting on statistics, qualitative findings from workshops held across the city helped to inform each neighbourhoods' profiles. Over 200 residents and 70 local organisations took part in the workshops. It was fed back that, while the evidence provided by residents and local organisations provided richer insight for health and care leaders, the accessible statistics also benefitted schools and communities with their planning delivery. There was appetite for similar reports, with keen anticipation for the remaining three place-based JSNAs.⁹³

New methods of community engagement were trialled last year, with positive results.⁹⁴ This relates to **Governance** in ONS's 10 domains for wellbeing. Using a new online engagement platform, Let's Talk Coventry, the Council carried out three pieces of consultation on housing and homelessness in 2019. The consultations brought renewed focus on increasing residents' understanding of the issues and increasing the avenues for feedback. A mixture of traditional method of surveys and face-to-face meetings with those affected were used. The consultations also used case studies to inform the public of the current system and to visualise the impact of potential future changes. The Homefinder policy review had almost five times more responses online compared to the year before, highlighting the effectiveness of the new online platform to reach wider audiences; discussion of this sensitive topic was constructive; and the press featured this engagement exercise positively.



There were also lessons to be learnt from Grapevine's, a local charity, creative engagement methods.⁹⁵ Their youth group, Coventry Youth Activists, worked with Imagineer Productions and Open Theatre to set up an outdoor engagement space with a sofa and plants in Broadgate, creating a living room to simulate the experiences of young disabled people who were less able to leave the house, as part of a campaign to raise awareness about isolation for young disabled people. They also led a walk and talk through the city centre for over 80 individuals, to bring together people working in services and people who want to make change in their lives and in their communities.

During COVID-19, an innovative approach to the Engagement for Test and Trace work was established,⁹⁶ where local community leaders (people who were well connected and a trusted voice in the community) worked with the Council to get messages out to communities and to feedback valuable community information and intelligence. This approach will be used as a framework for further work by the engagement service.

Eight family hubs across Coventry continue to form a core part of community and early help support.⁹⁷ This relates to **Where we live** in ONS's 10 domains for wellbeing. Established two years ago, family hubs are centres where children, young people, and families can visit when seeking support. Family hubs offer a space for providers to drop in and bring services to the community. The family hubs moved to a virtual delivery model in March 2020 due to lockdown.

Regular place-based stakeholder meetings brought together organisations to improve their neighbourhoods.⁹⁸ This relates to **Where we live** in ONS's 10 domains for wellbeing. Coordinated by the Council, organisations with an interest in certain wards met to share local knowledge, promote their services, and to discover ways of collaboration. Areas with such meetings include Foleshill, Hillfields, Spon End, Canley, and Willenhall.

During lockdown, these groups stepped up to help with the city's COVID-19 response. The Foleshill group, for example, grew in membership, creating

a virtual meeting place for Councillors, the City of Culture Trust, the Police, religious groups, the food bank, and charities such as Sky Blues, Carriers of Hope, GoodGym, and Feeding Coventry.

Additionally, across the rest of the city many community groups sprang up to help as part of the COVID-19 response, including mutual aid group and WhatsApp groups – these were supported and co-ordinated by the Council's Community Resilience team and additional Council staff who were deployed.

A thriving community food network, which encompassed all the food banks and grub hubs of the city, was formed during COVID-19. The Council enabled the growth of this network and supported them to become sustainable. The food banks and grub hubs each have their roots in their place-based communities, whilst working together to provide support across the city. The pandemic has highlighted the need for a more sustainable approach to providing access to food for vulnerable groups of the population. As a result, the Coventry Food Network has been established. The Network incorporates a range of partners including Feeding Coventry, the Community Centre Consortium, The



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Pod, Groundwork and both Coventry and Warwick universities. It will build on the work already done, and will work to create a coordinated, city-wide sustainable Food Strategy and action plan that recognises the scale and breadth of the problem and seeks to address these.

Local organisations were invested in inspiring and enabling residents to make the changes they wanted to see. This relates to Governance in ONS's 10 domains for wellbeing. Speaking to local organisations, there was consensus that, in order to be sustainable, residents must be empowered to help themselves.⁹⁹ From 2019 to the present, the Collaboration Station project, led by Grapevine, a local charity, invited residents to raise issues that mattered to them relating to isolation and loneliness, and to start a movement to address it. As a result, 13 initiatives were established and designed by local people. An example of this is the creation of the Lads and Dads to engage men in community, culture, and music in support of men's health. They explored the way arts and culture could benefit mental health, especially for people of BAME background. The Council supported the group by signposting to mental health services. Grapevine noted that 'there's appetite for [making] local change, but there's also feelings of being disempowered – we want them to understand they have the right to make change, but not everybody comes to us thinking they can make change.' During COVID-19, Grapevine created the '**Changemaker University**' to upskill residents on storytelling, leadership, and tools for making change. These online training sessions brought together migrants, people with autism, people with mental ill health, and people who 'felt they were the regular kind of people.'

There were pockets of activities across the city to tackle social isolation for the elderly, migrant communities, and people with disabilities and learning disabilities. This relates to Our relationships and Where we live in ONS's 10 domains for wellbeing. Social isolation was identified as an 18-month priority for the Health and Wellbeing Board.¹⁰⁰ An executive group was formed to tackle the issue. Grapevine, a local charity, ran a workshop to identify how organisations could connect and seek opportunities to work together. Chatty cafés

were launched in Coventry in January 2020. The scheme allowed cafés to sign up for a small fee, set up a 'chat and natter' table, where residents could talk to each other to combat loneliness. A number of cafés joined the scheme and the feedback was positive. Chat Central, which is run by Voluntary Action Coventry, offers a telephone and drop-in service to bring the community together, to work on confidence building, and to offer support with life changes such as retirement and bereavement.

For the elderly, the Council worked with housing centre managers and residents to establish a number of 'friendship groups' within sheltered housing complexes.¹⁰¹ These groups helped residents to make friends, do light exercise together and go on trips.

For migrant communities, the Council arranged a befriending service with Coventry Muslim Forum to provide an opportunity for the city's Arabic-speaking women to connect with each other.¹⁰² Hosting a Christmas event at the library, the Council welcomed newly arrived families. In addition to providing a programme of children's activities, event attendees were consulted and linked to appropriate volunteering and training programmes, effectively maximising their skills and helping them settle into their new homes and communities.

Before COVID-19, Grapevine's Collaboration Station brought together people with a passion for music and going out to co-create ideas for accessible gigs.¹⁰³ They formed 'Fight For Your Right To Party' which was made up of local people with a range of disabilities and long-term health conditions. A local student offered DJ workshops and the group worked closely with JJ's nightclub staff team to co-create accessible nights: a silent disco with games consoles, outdoor seating and a place to talk, a doodle corner, better lighting and all the newly trained DJ's playing at their own gig. During lockdown these gigs moved online, providing a weekly socialising space for over 20 people.

As part of the COVID-19 response, vulnerable residents were identified through Operation Shield. For the residents who requested social contact calls, library staff volunteered to reach out to them. By mid-July, over 2,000 calls were made.

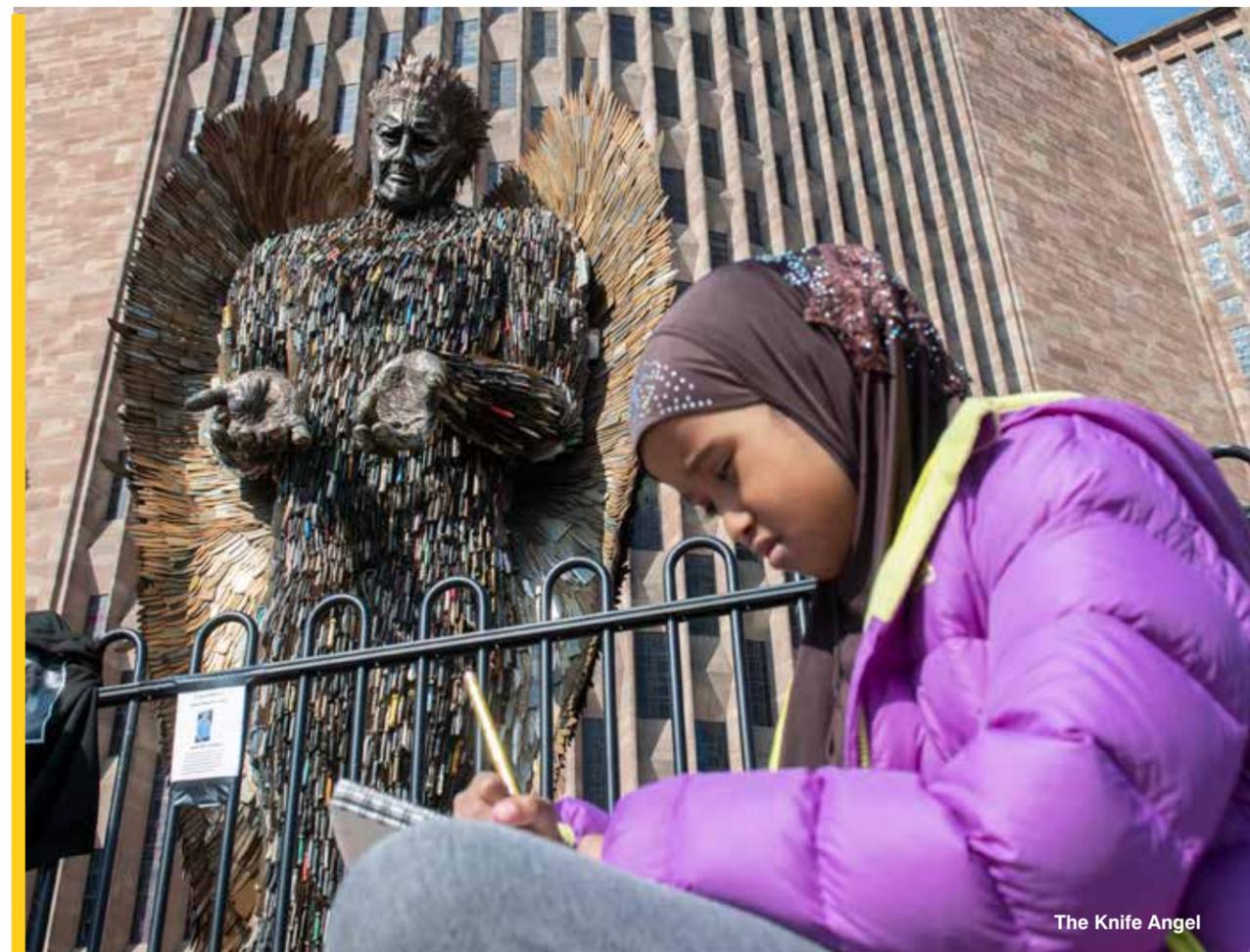
There were cultural and multi-faith events in Coventry to improve community cohesion. This relates to **Where we live** and **What we do** in ONS's 10 domains for wellbeing. Share My Language, a project by MiFriendly Cities, supported Rhyme Times in libraries.¹⁰⁴ These sessions for children brought together people from different backgrounds to share language and culture through rhymes and activities. Share My Language also partnered with university student volunteers at Offbeat to host an **Open Mic evening**. Performances from the community included Arabic rapping and songs in ancient Chinese and Kurdish.

The City of Culture Trust presented A Mile in my Shoes in June 2019 to 'highlight the city's activism, pioneering spirit and welcome.'¹⁰⁵

The interactive experience allowed 'visitors to walk a mile in someone else's shoes while listening to them tell their story.'¹⁰⁶ Furthermore, the Knife Angel,

an eight-metre sculpture made up of 100,000 confiscated knives dedicated to the victims of knife crime, was temporarily installed outside Coventry Cathedral in Spring 2019. The City of Culture Trust worked with local organisations to deliver a programme of activities around the Angel. The local community laid flowers and photos by the Angel to pay respects to the victims of knife crime. It was estimated that over 100,000 people visited the sculpture.¹⁰⁷

Under COVID-19, the Sacred Spaces initiative brought together faith leaders, emergency services, local organisations, and the West Midlands Combined Authority to produce a **video** for residents.¹⁰⁸ To show solidarity, faith leaders spoke about recent events and traditions that were significant to each other's faiths and urged residents to support their neighbours regardless of cultural or religious background.



Section 5 What can we, as organisations and as a system, do to improve our residents' wellbeing during COVID-19?

Based on findings from the projects and partnerships from last year and our early COVID-19 response, this section offers recommendations for the Council and partners to reset wellbeing in the city, minimise the harm of a global pandemic, and make use of the benefits we gained as part of our COVID-19 response.

18 individuals from partner organisations and across the Council joined a virtual meeting in early August 2020 to share their thoughts on the report's initial findings and recommendations. Their input has been invaluable in identifying the following as recommendations for this report.

WIDER DETERMINANTS OF HEALTH

FINDING

More partners in the system now have a better understanding of health inequalities and are willing to consider it in their work.

Health champions and the Migration app were effective in spreading health messages to BAME communities and new migrant groups. Early COVID-19 responses show success with collaboration with faith groups.

Employment inequality was addressed through specialist support for residents and influencing employers to improve recruitment practice.

RECOMMENDATION 1

COVID-19 has shone a light on inequalities within our communities. Coventry City Council and partners should continue to build on this increased awareness, and consider the findings from COVID-19-related research and surveys, to mitigate the health and wellbeing impact of inequalities in Coventry.

OUR HEALTH, BEHAVIOURS AND LIFESTYLE

FINDING

Effective methods of engagement and awareness raising were explored through the Year of Wellbeing campaign, JSNA workshops, our work with community messengers, and Grapevine's initiatives.

RECOMMENDATION 2

Coventry City Council's approach to public health communications and engagement should be guided by lessons learnt and new relationships formed, especially as we continue to live with, and through, COVID-19.

FINDING

Year of Wellbeing encouraged organisations to build workforce resilience.

RECOMMENDATION 3

Coventry City Council and partners should continue to encourage local employers, and lifestyle and wellbeing services, to commit to improving workplace wellbeing.

INTEGRATION OF ACTIONS FROM THE COMMUNITY, PUBLIC SECTOR, AND VOLUNTARY SECTOR

FINDING

Many aspects of Public Health work have become more integrated and effective through partnership working. The benefits from this approach were especially evident during COVID-19. This model has been adopted in areas such as:

- Domestic abuse services;
- Mental health services;
- Parenting and early help;
- Homelessness;
- Healthy lifestyles;
- Tuberculosis treatment; and
- Childhood and flu vaccination.

RECOMMENDATION 4

Building on existing health and wellbeing infrastructure, a collaborative partnership approach, which brings together residents' experience and partners' skills and assets, should be taken to strengthen health and wellbeing in communities.

THE PLACES AND COMMUNITIES WE LIVE IN AND WITH

FINDING

A place-based approach has enabled organisations to better tailor their support to local needs and share resources and intelligence more effectively. During COVID-19, place-based groups were significant forces in providing food relief and spreading public health messages.

New methods of consultation and engagement helped to empower residents to make informed decisions about their local area. Organisations also enabled residents to raise issues that mattered to them, and to start movements to address them.

Socially isolated individuals have been identified through Operation Shield and the vulnerable list. Before and during COVID-19, pockets of activities by local organisations and the Council have been successful in alleviating loneliness and building community cohesion.

RECOMMENDATION 5

Coventry City Council and partners should set up spaces and channels to meet with residents, with the aim of inspiring them to imagine the change they wish to see in their communities, and enabling residents to lead the change.

As part of the Reset and Recovery exercise, the Council has drawn up priorities for a system-wide response. Details are in the diagram below.

To minimise the harm brought by COVID-19 and to amplify the benefits gleaned from the city's response, it is important for organisations to work together with wellbeing at the heart of our decisions and actions. If you or your organisation would like to share ideas on working together to improve the wellbeing of Coventry residents, please contact CommunityResilience@coventry.gov.uk.

RESETTING OUR FOCUS - KEY PRIORITIES



ENABLING ACTIVITIES

- **JSNA** - understanding our communities and using emerging data relating to COVID and inequalities
- **Staff capacity**
- **Developing our PHM approach** to support COVID-19 response and recovery planning
- **Re-thinking our commissioning strategy** so that it is more flexible/responsive to emerging trends

Section 6 Progress on 2019 recommendations



This chapter outlines progress made on last year's report's recommendations. Preparing for, and responding to, COVID-19 has created a shift in priorities across the resources and capacity of the Council and our partners.

No	Recommendation	Action to date
1	Review and revise the Marmot Action Plan taking account of the findings in the evaluation and considering how a One Coventry approach can help to embed partnership working and promote ownership of initiatives throughout organisations and community groups, and how using a place-based strategy as set out by Public Health England can facilitate effective action through civic, service and community interventions	<p>Towards the end of the 2016-2019 action plan, work began with partners to identify the next steps for Coventry and the Marmot approach. The Marmot Partnership Group identified new priorities for the next three years, with input from partners and the report titled 'Coventry – A Marmot City Evaluation'. With the outbreak of COVID-19, Marmot partners used the One Coventry approach to identify more pressing areas of focus. Through the One Coventry approach, health inequalities are considered through all aspects of the Council's reset and recovery plans. The number of organisations in the Marmot Partnership Group also increased.</p> <p>To emphasise the One Coventry approach, indicators of social determinants and inequality are reported in the Council Plan and is seen as a mechanism for achieving health equity in all policies.</p>
2	Improve partnership-working with Place Directorate within Coventry City Council to ensure that public realm works and developments in the city take account of their potential impacts on health inequalities and use initiatives in a proactive way to reduce inequalities	<p>Taking the One Coventry approach, Marmot principles continue to be applied to Planning, Parks, Licensing and Transport, at a strategic level in policy and operationally in individual applications. Partnership working has supported the Public Realm work currently under construction to incorporate plans positively impacting on health inequalities (making the city centre accessible to all, providing pleasant walking routes, encouraging active travel).</p> <p>With the Planning policy 'Health Impact Assessment Supplementary Planning Document' adopted, developers are submitting evidence with applications for new developments showing consideration of health inequalities (in addition to other health impacts).</p>

No	Recommendation	Action to date
3	Utilise community asset-based approaches to improve health and wellbeing, maximising the legacy of City of Culture 2021	Community groups are well established within areas of the city and work effectively with other stakeholders in projects such as offering substance misuse support to those seeking work or delivering services through the city's eight family hubs. The City of Culture is working with established community groups to develop local artistic and cultural projects. The COVID-19 pandemic has brought opportunities, with more community support groups being established and people becoming more involved in supporting vulnerable neighbours. Work is underway, particularly through the City of Culture Trust, to find ways to build on the strengths of these groups and ensure that they deliver a legacy in the health and wellbeing of their communities.
4	Ensure there are strong links with the Skills Board and Local Enterprise Partnership to promote skills development to enable Coventry citizens to gain the necessary qualifications and skills to fill local jobs	There is representation on the Marmot Partnership Board from Adult Education; the Coventry and Warwickshire LEP; Employment and Skills; and Education. In addition, Public Health attend the Skills Board and Work and Poverty Working Group. This has led to citywide projects from these areas being targeted at more deprived communities, therefore contributing towards reducing health inequalities.
5	Recognise and respond to barriers and challenges which may prevent people in some groups from accessing and engaging in physical activities and healthy lifestyle choices	<p>The Coventry on the Move framework 2019-2024 was published in April 2019, drawing attention to the challenges and inequalities that residents face when trying to be more active. The Year of Wellbeing and Coventry City of Sport programme were key delivery elements of the framework which highlighted the success and demand for ongoing opportunities for residents to engage in physical activity.</p> <p>New leisure facilities were opened last year and the Go CV scheme has been launched and targeted at every resident. The scheme includes incentives and staggered membership rates to increase engagement. These programmes will continue to be developed and uptake monitored. Increasing the number of disabled residents taking part in sporting and cultural events in the city has also been established as a City Council equalities objective.</p>
6	Council and partners to embed an integrated early help offer which improves life chances for the more vulnerable families	<p>The Early Help Strategy was launched in July 2020, developed by partners including Children's services, Education colleagues, and Health colleagues to work together on ten key early help outcomes.</p> <p>Coventry's Early Help Partnership aims to reach children, young people and families when the need first emerges; and intervene when there will be the greatest impact. Several workshops were developed to create the baseline of how well the partnership was working and if it had been strengthened over time. Warwick University is completing an evaluation to understand the integration of services.</p>

No	Recommendation	Action to date
6	Continued	Family Hubs continue to facilitate multi-agency Family Matters Meeting, providing an opportunity for partners to discuss cases where there were unmet needs in the family, identifying concerns at an earlier stage and working with partners to support families. The Family Hub offer remains a core part of Coventry's early help partnership. Eight Family Hubs have been operating for two years and continue to bring a range of partners into their localities to deliver bespoke services for their respective neighbourhoods.
7	Evaluate the impact of the Year of Wellbeing and examine ways in which the Health and Wellbeing partnerships have raised the profile of health and wellbeing and maximise the legacy that can be achieved	<p>An evaluation of the impact of the Year of Wellbeing was carried out by Risk Solutions, with a focus on 'what worked' regarding awareness raising and participation levels. The campaign's immediate impact and its long-term impact were also examined. It was reflected that the campaign helped to raise awareness of wellbeing; encouraged changes to individuals' behaviours; enabled system-wide networking; and created the basis for better partnership working in the future.</p> <p>The Wellbeing for Life campaign, a follow up to the Year of Wellbeing campaign, was meant to commence in 2020. The Council's COVID-19 response shifted away some resources necessary for its promotion. The branding is still in use in some projects, such as the virtual Wellbeing Festival in September 2020.</p>
8	Maximise the opportunities available with the NHS as a key partner, through implementation of the NHS Plan around prevention and health inequalities and the Coventry and Warwickshire Health and Care partnership	The Council plays a leading role in the Population Health and Prevention programme of the Health and Care Partnership. The content of the draft Strategic Five Year Health and Care Plan was shaped and influenced by the P&P programme and there was a strong commitment to prevention and addressing health inequalities running through the Plan. The King's Fund population health framework has been adopted by the system as a whole and there has been considerable progress made in galvanising support for Population Health Management which is central to ensuring that we understand our population needs and variations in outcomes and target interventions where they will have the greatest impact. This will also start to drive a stronger focus by NHS partners on prevention and the wider determinants of health.
9	Mobilise the 2019-2023 Health and Wellbeing Strategy to ensure that the priorities are addressed utilising the population health framework to underpin change	The Health and Wellbeing Strategy was approved in October 2019. As part of the refresh, the Council has adopted the King's Fund model of population health management to enable system-wide changes to improve residents' health and wellbeing. Overall, as demonstrated in this report, the population health framework has become central to the Council's approach and has evidenced the benefits of this style of partnership working. Preparing for and responding to COVID-19 has prompted a reconsideration of the priorities identified in the Strategy. In the following months of recovery and reset, the framework still underpins the Council's course of action.

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