



Exeter City Council

To the Chair and Members of Exeter Health and Wellbeing Board

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AGENDA FOR EXETER CITY COUNCIL EXETER HEALTH AND WELLBEING BOARD

The **Exeter Health and Wellbeing Board** will meet on **TUESDAY 7 OCTOBER 2014, commencing at 2.00 pm**, in the **Rennes Room, Civic Centre, Paris Street, Exeter**. If you have an enquiry regarding any items on this agenda, please contact Howard Bassett on **Exeter 265107**.

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| 5 | GETTING EXETER ACTIVE - UPDATE : 2.30PM | |
| 6 | LOCAL AIR QUALITY MANAGEMENT - PRESENTATION BY ALEX BULLIED: 2.45PM | 11 - 22 |

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7 **NEW PSYCHOACTIVE SUBSTANCES - PRESENTATION BY GILL UNSTEAD AND NICKI MAY OF TRADING STANDARDS : 3.10PM**

8 **RUGBY WORLD CUP : 3:40PM**

9 **DATES OF FUTURE MEETINGS**

Tuesday 11 November 2014

Tuesday 3 February 2015

Tuesday 14 April 2015

Tuesday 7 July 2015

Wednesday 2 September 2015

DATE OF NEXT MEETING

The next **Exeter Health and Wellbeing Board** will be held on Tuesday 11 November 2014 at 2.00 pm

EXETER HEALTH AND WELLBEING BOARD

Tuesday 8 July 2014

Present:-

Gillian Champion (in the Chair)	Clinical commissioning Group
Councillor Owen	Exeter City Council
Councillor Hannaford	Exeter City Council
Councillor Westlake	Devon County Council
Dr Virginia Pearson	Public Health – Devon County Council
Patsy Temple	Public Health – Devon County Council
Nicola Glassbrook	Public Health – Devon County Council
Julian Tagg	Exeter City Council
Matt Evans	Active Devon
Simon Bowkett	Exeter CVS
Caroline Lee	Devon Health watch
Robert Norley	Exeter City Council
Dawn Rivers	Exeter City Council
Howard Basset	Exeter City Council

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APOLOGIES

These were received from Councillors Edwards, Leadbetter and Prowse, Jayne Hanson and Martyn Rogers.

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CHAIR

In the absence of Councillor Edwards, the meeting was chaired by Gillian Champion, the Deputy Chair.

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MINUTES OF THE MEETING HELD ON 15 APRIL 2014

Subject to the amendment of Min. No. 15 to read “Public Health Director For Devon” and the substitution of Simon Bowkett for Councillor Owen in the last paragraph of Min. No. 17, the minutes of the meeting held on 15 April 2014 were agreed as a correct record.

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MATTERS ARISING FROM MINUTE - NEIGHBOURHOOD HEALTHWATCH PILOT (MIN. NO. 17)

Robert Norley, the Assistant Director Environment and Dawn Rivers, the Community Involvement and Inclusion Officer, reported that a discussion had been held with Martyn Rogers of Age UK Exeter and Westbank and it was felt that there was potential for a pilot in the St Thomas and Cowick area in co-ordination with existing community links fostered by the Police. Patsy Temple, the Public Health Specialist, advised that the health data on falls indicated an appropriate area to focus on.

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GETTING EXETER ACTIVE

Patsy Temple, the Public Health Specialist, presented the final behaviour change scoping report Getting Active and the proposed way forward for the implementation

of the agreed Board priority of targeting 30-50 year olds both those employed and those on low incomes/unemployed who were currently active but who did less than 3x30 minutes of physical activity a week. Delivery of the priority was being developed through the Exeter Physical Activity Group, the minutes of the meeting of 4 June having been tabled.

Patsy reported that the data collected through the Sport England Active People Survey was the source providing comparable data at a district local authority level determining whether Exeter was the most active City in the south west was problematic because of the volatility of this data. The Active People Survey used a small sample size of 500 respondents at district local authority level and it was therefore vulnerable to a variety of factors causing large fluctuations. Further, only two years of comparable data were available to pool for a more reliable measure – due to a recent widening of eligibility criteria. The use of further process outcomes measures to complement this headline measure was discussed.

A promotions led approach was proposed based on the 4 P's of marketing : Product, Placement, Price and Promotion. This would be using existing physical activities providers delivering opportunities in the City, in a broad range of outdoor and indoor venues with the barriers for participating now understood for the target population through the scoping report.

It was proposed that the Exeter Physical Activity Group take forward the Getting Exeter Active priority with regular reporting to the Board. A physical activity framework would be developed for the City with the development of a physical activity strategy happening later in the year. A promotions led campaign would be undertaken with EXPAG developing and directing physical activity opportunities for the targeted group in the City with the allocation of public health grant monies to assist this.

The Board discussed the way forward and gave further consideration to the target audience. A Member felt strongly that the identified target group, to a certain degree, had easier access/opportunities to health/fitness initiatives and that the programme would therefore be developed at the expense of those with practically no resource, opportunity or motivation to improve their fitness levels. The latter group was acknowledged as one with a multitude of social problems covering issues such as stress, substance abuse, self harm, cyber-bullying and that these correlated with poverty with a clear disparity between this group and the identified target group.

Whilst recognising that there might be a ripple effect between the two groups there was acknowledgement that more direct action would be necessary, Simon Bowkett suggesting partnerships with organisations who work with disadvantaged groups and Virginia Pearson proposing a separate piece of market research be undertaken to encompass this group as a later stage of the project. Ultimately, the goal of increasing physical activity in the wider population would impact positively on the use of health services in the City. There was support for seeking to bridge the inequality gap between the two groups.

RESOLVED that:-

- (1) the now established “Active Exeter Group” (Exeter Physical Activity Group) take forward the priority of Getting Exeter Active and develop the delivery plan;
- (2) the next EXPAG meeting be used to develop a framework for physical activity in the City outlining the broad direction of travel for the next year and

current thinking of key partners in the delivery of this e.g. the City Council, leisure providers, the Rugby World Cup legacy, Active Devon - this brief document to be developed with prior work from the Group's Members via email;

- (3) a physical activity strategy be developed through the EXPAG group with support from a strategic level later this year;
- (4) the public health grant monies be used to "purchase" this brand development and marketing of "Getting Exeter Active" and for the establishment through the EXPAG group of additional physical activity opportunities to engage the target population segment;
- (5) market research to be carried out with a different demographic (those from the most disadvantaged populations) at a later stage in the project; and
- (6) an update report be submitted to the meeting of this Board on 11 November 2014.

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PRESENTATION ON EVERY ADULT MATTERS

The Chair welcomed Nicky Glassbrook, Senior Public Health Officer (Health Inequalities). She explained that the Making Every Adult Matter Coalition had been formed in 2008 and represented over 1,600 agencies with the aim of improving policy and services for people facing multiple needs and exclusions. Those with multiple need experienced several problems at the same time such as homelessness, substance misuse, mental ill health and re-offending and had ineffective contact with services and lived chaotic lives. The MEAM approach was to deliver a coordinated service between local bodies and identify synergies between existing programmes. There was a focus on using existing resources and infrastructure, supporting frontline workers to work differently, encouraging managers to support new working processes and influencing the move to commission across systems and not services.

Councillor Hannaford referred to his experience, as Chair of the City Centre ASBAT Sub Group, where, in many cases, it was the same 20 or so individuals who were being dealt with by a variety of agencies, including, as confirmed by Caroline Lee, being discharged on to the streets from the RD&E. It was the hope that, at least some would ultimately accept the reality of their situations, and seek to seriously engage with the various support agencies.

The Chair thanked Nicky Glassbrook for attending.

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PRESENTATION ON DEVON HEALTHWATCH

The Chair welcomed Caroline Lee, Devon Healthwatch Partnership Officer. She explained that Healthwatch was the new independent consumer champion created under Section 221 of the Local Government and Public Involvement in Health Act 2007 to gather and represent the views of the public. It would take on the work of the Devon Local involvement Network (LINK Devon) and formerly the old Community Health Councils. Its work included:-

- representing the views of the public on Health and Wellbeing Boards;
- providing a complaints advocacy service; and
- reporting concerns about the quality of healthcare to Healthwatch England.

and locally it worked with bodies such as CAB, Devon Senior Voice, Devon Link Up, Be Involved Devon, Devon Carers Voice and Living Options. Further details are available on the link below:-

<http://www.healthwatchdevon.co.uk/aboutus/>

A representative of Healthwatch would attend future meetings of the Board. Robert Norley was requested to send all Councillors a link for them to sign up to Healthwatch bulletins.

The Chair thanked Caroline Lee.

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RUGBY WORLD CUP

RESOLVED that Catherine White be invited to the next board meeting to present an overview of the Rugby World Cup (RWC) background and legacy.

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LEGAL HIGHS

RESOLVED that Gill Unstead of DAAT be invited to the September meeting to give a presentation on issues posed by legal highs.

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EXETER ICE - INTEGRATED CARE FOR EXETER

The Chair reported that the Integrated Care for Exeter (ICE) Steering Group was to establish a community hub in Whipton, based at Whipton Hospital. Robert Norley advised that the City Council had supported a multi-agency expression of interest led by the County Council, for the Government Transformation Challenge Award 2015/16. The expression of interest centred on the ICE project and had been submitted on 1 July 2014.

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DATES OF FUTURE MEETINGS

Wednesday 3 September 2014

Tuesday 11 November 2014

Tuesday 3 February 2015

Tuesday 14 April 2015

Tuesday 7 July 2015

Wednesday 2 September 2015

(The meeting commenced at 2.00 pm and closed at 4.20 pm)

Chair

Proposal for the Exeter Health and Wellbeing Board to provide the Governance structure for the Making Every Adult Matter pilot

1. Proposal

- 1.1 This report proposes that the Exeter Health and Wellbeing Board provides the governance structure for the 'Making Every Adult Matter' pilot.

2. Background

- 2.1 Making Every Adult Matter (MEAM) is a national partnership between four national charities; Homeless Link, Drugscope, Clinks and Mind and aims to influence policy and services for adults facing multiple needs and exclusions.
- 2.2 Devon's MEAM partnership has evolved from an Action Learning Set initiated by the Devon DAAT and is led by Public Health. The steering group includes commissioners from, Devon and Cornwall Probation, National Offender Management Service, Devon County Council Adult Services, Public Health, Exeter City Council, the CCG Mental Health Commissioner as well as representation from the Voluntary sector via Devon Reform and Exeter Shilhay / Chapter One.
- 2.3 The Strategic Group (above), submitted an 'Expression of Interest' to the MEAM coalition in early 2013 to become a pilot area for the South West and was chosen as one of the 9 local authority areas to work with the national partners to deliver improved outcomes and interventions for people with complex needs.
- 2.4 The Strategic group have met regularly over the past 12 months to plan the pilot, with aim that it sits alongside and works in symbiosis with other initiatives such as 'targeted families' and 'Turnaround.
- 2.5 The pilot is now nearly at 'delivery stage' with a potential initial cohort identified and agreed upon. Before proceeding, a governance structure needs to be agreed

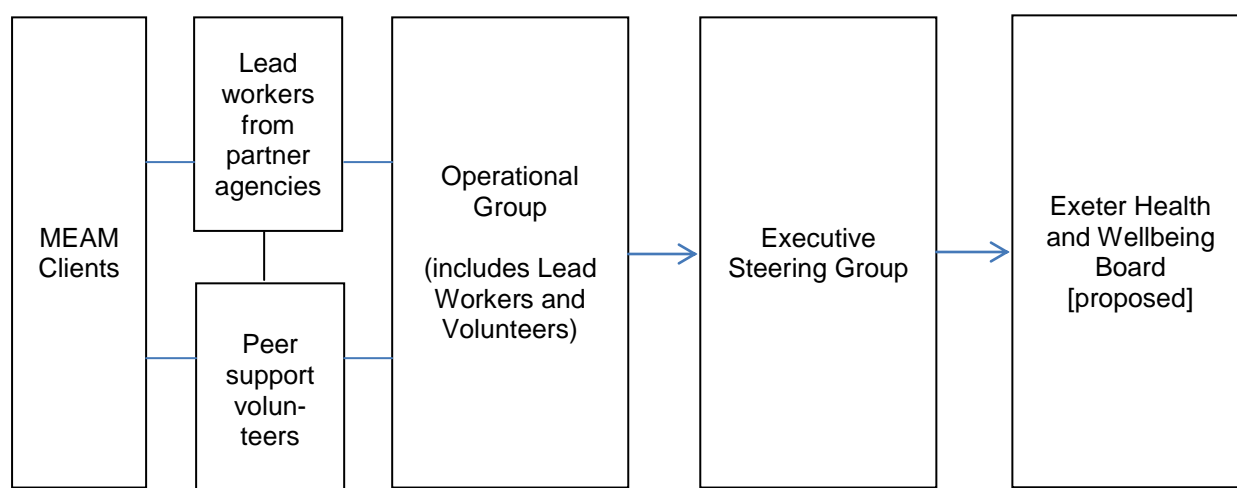
3. Business Case

- 3.1 The MEAM pilot meets one of the Exeter Health and Wellbeing Board's priorities: '(4) health of the most disadvantaged.' as such it is felt that the board is best placed to provide the strong overview and scrutiny that The MEAM initiative requires.

3.2 Exeter City Council has bid into the Single Homeless Fund (Department of Communities and local Government). If successful, the intention is to fund two posts and provide money for training to support the MEAM pilot. It is therefore appropriate that the Exeter Health and Wellbeing Board are sighted on and able to scrutinise these evolving developments in order to satisfy the Board's stated priority (4).

3.3 A strategic group has been established comprising of senior managers within key organisations; this group will interface between the Board and the operational group, to ensure that barriers and blockages are removed or worked around in order to achieve MEAM outcomes for those that are most disadvantaged.

3.4 Proposed structure:



The Governance group would be the Exeter Health and Wellbeing Board, The Executive Steering Group would be the current Strategic Group with additional stakeholders, the operational group will comprise of managers and frontline workers from agencies that are in contact with individuals who have complex needs and will to some extent mirror the strategic group in membership.

3.5 It is envisioned that the Exeter Health and Wellbeing Board will oversee the MEAM pilot and serve as a continuous 'evaluation tool' and a 'critical friend' for the project. A report giving an update of the pilot, highlighting achievements and challenges will be made available at the quarterly meetings

3.6 Continuity will be provided by having member(s) of the Exeter Health and Wellbeing Board sitting on the Executive Steering Group and members of the Executive Steering Group sitting on the Operational Group.

4. Next Steps

4.1 There is an executive Steering group on 24th September where the action

plan will be updated.

- 4.2 Exeter City Council are still waiting to hear if their bid to the Single homeless Fund has been successful.

Nicola Glassbrook
(Senior Public Health Specialist)
PUBLIC HEALTH DEVON

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EXETER CITY COUNCIL

EXETER HEALTH & WELLBEING BOARD 7th OCTOBER 2014

LOCAL AIR POLLUTION – EXPOSURE TO ULTRA-FINE PARTICLES IN EXETER AND WRITTEN SUBMISSION TO THE ENVIRONMENTAL AUDIT COMMITTEE

1 PURPOSE OF THE REPORT

- 1.1 The purpose of this report is to seek the Board's approval for funding to undertake a study into the exposure of Exeter residents to ultra-fine particles (PM_{2.5}); and to ask the Board to make a written submission to the Air Quality Enquiry, currently being conducted by the Government's Environmental Audit Committee.

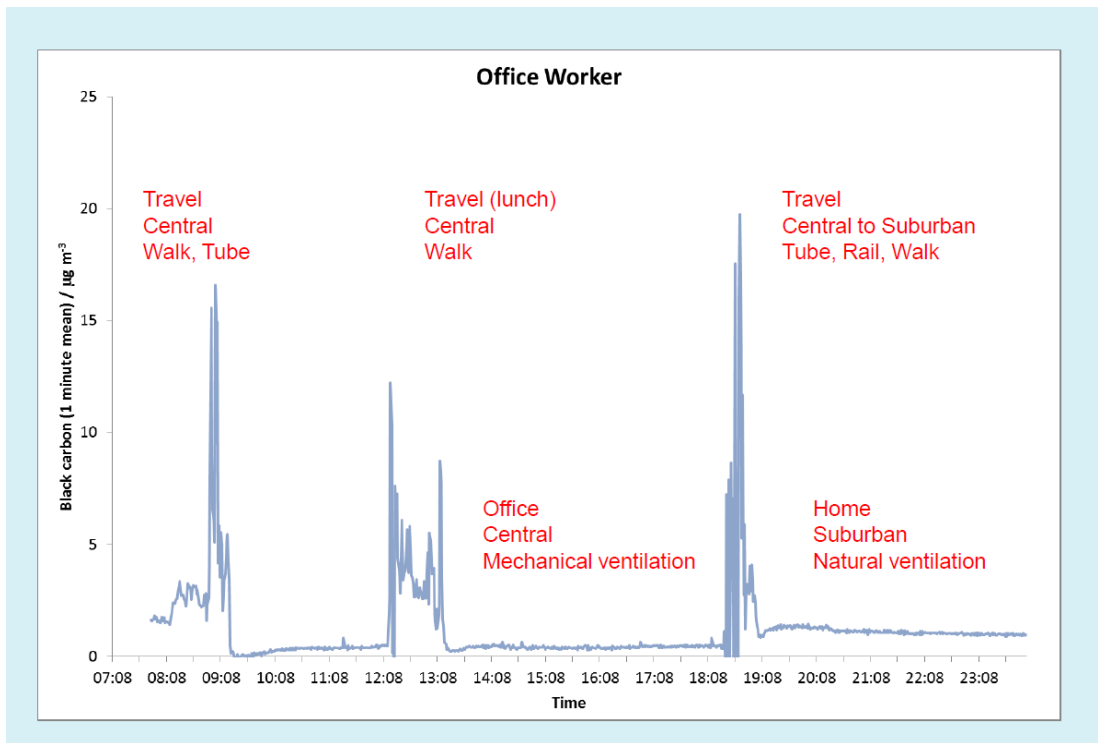
2 BACKGROUND

- 2.1 Air pollution has been linked to a variety of health effects. The greatest body of evidence is for effects on the respiratory system. These range from immediate effects such as coughing and wheezing, to triggering and worsening respiratory diseases such as asthma or chronic obstructive pulmonary disease (COPD). Recent research has also found a clear relationship between air pollution and cardiovascular problems, including hospital admissions and deaths.
- 2.2 Air pollution affects all those who are exposed to it, but it has a more serious effect on vulnerable people. Particularly vulnerable groups include children, pregnant women, the elderly and patients with existing respiratory diseases.
- 2.3 Air pollution does not cause a specific and identifiable 'air pollution disease'. This makes it difficult to measure the impact of poor air quality in health and mortality statistics. Some recent estimates are that fine particles (PM₁₀) cause an annual effect equivalent of 25,000 deaths in England alone. This is more than the number of deaths caused by passive smoking in a year. Estimates of the costs of air pollution to society are equally large. One suggestion is that ultrafine particles (PM_{2.5}) cost the UK £15bn per year in health costs.
- 2.4 Recent modelling suggests that the equivalent of 42 deaths per year in Exeter are attributable to ultra-fine particles (PM_{2.5}). The vulnerable groups listed above are likely to be particularly affected. Areas with high levels of air pollution also tend to be relatively deprived.
- 2.5 Another reason that air pollution effects are hard to identify in health statistics is that exposure varies greatly between individuals. In Exeter, the main source of local air pollution is from traffic. The areas most affected are busy roads, with queuing traffic and where buildings are close to the kerbside.
- 2.6 Recent research by Kings College London shows that factors such as where you live and work, where you travel and how, and where you take your lunch break will affect your daily exposure to pollution. This means that a single measure of roadside pollution levels alone is not enough to determine the impact of pollution, particularly on individuals.
- 2.7 In response to measured levels of pollution, and its predicted effects, Exeter City Council has published an Air Quality Action Plan, with four objectives:

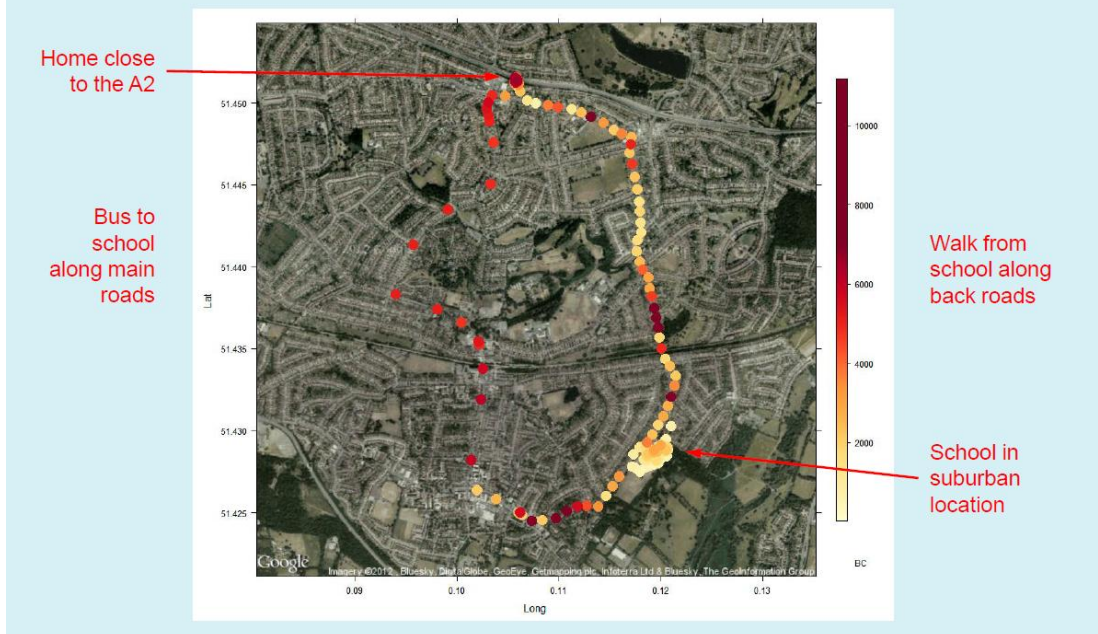
- 2.7.1 To describe the impact of predicted growth and existing plans on NO₂ concentrations within the city.
 - 2.7.2 To identify where further improvements are required, how these could be achieved and where multiple benefits can be realised.
 - 2.7.3 To provide a process for assessing the air quality aspect of the sustainability of future plans and policies.
 - 2.7.4 To provide tools to engage local communities in air quality issues alongside wider sustainability issues.
- 2.8 Current plans and policies are expected to have a low positive impact on air quality, although there is some uncertainty associated with this. This is a modest predicted change, but should be set against the background of significant development in the city and therefore significant upward pressure on emissions. The Action Plan also identifies some new projects that could be pursued by Exeter City Council and partners to further reduce air pollution and its impacts. This includes a commitment to further the understanding of the negative health impacts of poor air quality locally, and to communicate these.
- 2.9 Despite the Air Quality Action Plan, Exeter City Council and partners can only tackle the local factors that control air pollution, such as traffic congestion. Vehicle emissions standards for example are controlled by EU directives. Some co-ordination by central government could also make local action more effective, for example by creating a national framework for low emission zones.

3 PROPOSED STUDY INTO LOCAL EXPOSURE TO ULTRA-FINE PARTICLES

- 3.1 In order to gain local data on exposure to air pollution, a study is proposed which would measure the exposure of five individuals as they go about their normal daily routine. The study would not provide direct data on the health effects of this exposure, but it would allow comparison between activities, locations, modes of travel and individuals. From this data it should be possible to identify some simple behavioural changes that individuals can make to reduce their exposure. Depending on costs for hire of equipment, it may be possible to repeat the exposure measurements after giving the participants advice on exposure reduction.
- 3.2 A similar study has been conducted by Kings College, London. In their project, the results were immediately recognisable and personal to the volunteers (toddler, school pupil, office worker, home worker, cycle courier, ambulance driver and pensioner). For example, exposure throughout the day for the office worker is shown below, together with a map showing exposure by location for a school pupil. This work increased the understanding of personal exposure, but it also provided highly visual outputs for public information, which could be used to encourage behavioural change.



School pupil travelling to/from school



- 3.3 The proposed Exeter study methodology is still being developed, including detailed costs for hire of equipment. The proposed study methodology and budget will be presented to the next meeting of the Board.

4 PROPOSED WRITTEN SUBMISSION TO THE ENVIRONMENTAL AUDIT COMMITTEE'S AIR QUALITY ENQUIRY

4.1 The UK Parliament's Environmental Audit Committee is currently making an enquiry into air quality, following up on its 2011 report on Air Quality. Since then further scientific evidence has emerged on the link between air quality and health. The European Commission has started proceedings against the UK for failure to meet pollution limits on nitrogen oxides.

4.2 The new inquiry will aim to identify the state of progress on the recommendations from the 2011 report which focussed on a need for action in six areas:

1. the priority and targets on air quality in Defra's planning;
2. strategy and inter-departmental co-ordination, including on transport and planning matters;
3. support for local authorities in tackling air pollution, and how any European Commission fines might fall on them;
4. the implications of local authorities' enhanced responsibilities for public health;
5. Low Emissions Zones and vehicle emissions limits; and public awareness campaigns.

The inquiry will also examine the role that might be played by new environmental technologies, and the scope for wider transport policies — for example on public transport and cycling and walking, to cut air pollution.

4.3 The Committee is accepting written submissions from interested parties, and a draft submission has been prepared on behalf of the Chair and Vice-Chair of the Exeter Health and Wellbeing Board, and the Portfolio Holder for Environment, Health and Wellbeing. A copy of the submission is attached to this report.

4.4 The draft submission summarises the current levels of air pollution in Exeter, and what is already being done by Exeter City Council and partners to reduce vehicle emissions. It makes recommendations for Government action which would improve understanding of the impacts of local air quality, and support Local Authorities in their efforts to reduce pollution.

5 RESOURCE IMPLICATIONS

5.1 There are no resource implications associated with the written submission to the Environmental Audit Committee.

5.2 A budget will be required for the personal exposure study. The costs have not yet been finalised, but will be less than £2,000.

6 RECOMMENDED

That the Board:

- 1 Endorses the proposal to make a submission to the Environmental Audit Committee as contained in this report; and
- 2 Earmarks a budget of £2,000 to carry out a personal exposure study, subject to an appropriate project brief being agreed at the next Board meeting.

ASSISTANT DIRECTOR ENVIRONMENT

Originator: R. Norley, Assistant Director Environment

Local Government (Access to Information) Act 1972 (as amended)
Background papers used in compiling this report:-

Public Health England, PHE-CRCE-010: Estimating Local Mortality Burdens associated with Particulate Air Pollution 2014. <http://www.hpa.org.uk/Publications/Environment/PHECRCEReportSeries/PHECRCE010/>

Exeter City Council, Air Quality Action Plan 2011. <http://www.exeter.gov.uk/index.aspx?articleid=15179>

www.londonair.org.uk/london/asp/LAQNSeminar/pdf/June2013/Ben_Barratt_Insights_into_personal_exposure_to_air_pollution.pdf

Date

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Environmental Audit Committee – Air Quality Enquiry

Written Submission by the Chair and Vice-Chair of the Exeter Health and Wellbeing Board, and the Portfolio Holder for Environment, Health and Wellbeing, Exeter City Council

Executive Summary

- Exeter City Council is concerned about the impact that air pollution is having on the population of the city.
- The main source of poor air quality in Exeter is traffic emissions.
- The Council is taking steps to reduce emissions, using the tools that it has available as a second tier (district) council.
- Future air quality is still expected to have a significant impact on the health of the local population.
- Further action by Government is recommended to reduce the impact of traffic emissions, and to give local councils the tools to take effective local action.

1 Introduction

- 1.1 Exeter City Council is committed to working with our partners to improve the quality of life for all people living, working in and visiting the city. This includes commitments to¹:
- Reduce car dependency and encourage walking, cycling and the use of public transport
 - Encourage lower emissions in Exeter's taxi fleet
 - Submit an Air Quality Action Plan to DEFRA and seek to increase awareness of the health impacts of poor air quality
- 1.2 The evidence for the impact of poor air quality on health is building, including respiratory and cardiovascular effects. Recent research by Public Health England² estimates that the equivalent of 42 deaths per year in Exeter can be attributed to particulate pollution alone.
- 1.3 Exeter City Council first declared five Air Quality Management Areas in 2005, because of exceedences of the annual objective level for NO₂. Since then, the original areas have been combined and extended, and possible exceedences of the hourly objective have also been identified. Road transport has been identified as the most significant local contributor to the NO₂ problem³.

¹ Exeter City Council, Corporate Plan 2012-2014.

<http://www.exeter.gov.uk/index.aspx?articleid=10038&detailid=12770>

² Public Health England, PHE-CRCE-010: Estimating Local Mortality Burdens associated with Particulate Air Pollution 2014.

<http://www.hpa.org.uk/Publications/Environment/PHECRCEReportSeries/PHECRCE010/>

³ Exeter City Council, Air Quality Progress Report 2014.

<http://www.exeter.gov.uk/index.aspx?articleid=15179>

- 1.4 Significant growth is planned for the greater Exeter area, including 12,000 homes within the city and a further 13,500 within the greater Exeter area⁴. Accommodating this growth in a sustainable fashion will require significant effort by the City Council, and partners.

2 Air Pollution in Exeter

- 2.1 Monitoring by Exeter City Council⁵ has shown that concentrations of NO₂ at hotspots are over 60 µg/m³. Background concentrations of NO₂ in the city are around 15 µg/m³, so a reduction in the local contribution of over 50% would be required in order to achieve the EU limit value (40µg/m³). NO₂ concentrations in the last five years are stable, or possibly show a slight decline.
- 2.2 Exeter City Council also operates an ozone monitoring station, as part of the DEFRA network. Ozone has no local air quality objective, but there is an EU limit value. For the first time in 2013, the Exeter monitoring station recorded an exceedence of this limit value. Concentrations of ozone over the last five years are stable, or increasing slightly.
- 2.3 Peak time traffic levels in Exeter have been stable, or reduced in the last five years. This is unusual in the national context, and reflects the work that the Highways Authority (Devon County Council) have done in managing traffic in the city. Given zero or negative growth in traffic, and predicted improvements in vehicle technology, traffic pollution in Exeter would have been expected to improve significantly. This has not taken place.
- 2.4 Other than Public Health England's estimate of local mortality associated with particulate pollution, no data is available on the impact of air pollution on Exeter's population. This data is a key piece of missing evidence which would demonstrate the need for local action to reduce air pollution.

3 Action to Improve Air Quality in Exeter

- 3.1 Exeter City Council's current Air Quality Action Plan⁶ covers the period from 2011 to 2016. The Plan's four objectives are discussed below:
- 3.1.1 To describe the impact of predicted growth and existing plans on NO₂ concentrations within the Air Quality Management Area.
- 3.1.1.1 Current plans and policies are expected to have a low positive impact on air quality, although there is some uncertainty associated with this. This is a modest predicted change, but should be set against the background of significant

⁴ Exeter City Council, Core Strategy 2012. <http://www.exeter.gov.uk/CHttpHandler.ashx?id=16913&p=0>

⁵ Exeter City Council, Air Quality Progress Report 2014.
<http://www.exeter.gov.uk/index.aspx?articleid=15179>

⁶ Exeter City Council, Air Quality Action Plan 2011. <http://www.exeter.gov.uk/index.aspx?articleid=15179>

development in the city and therefore significant upward pressure on emissions.

3.1.2 To identify where further improvements are required, how these could be achieved and where multiple benefits can be realised.

3.1.2.1 The Council obtained a DEFRA grant for establishing a Low Emission Strategy. This project will be completed in February 2015 and has the following strategic aims:

- a) To integrate low emission strategies into mainstream policy development for transport and planning within Exeter and to influence policy in the greater Exeter area.
- b) To reduce emissions from the Council-owned fleet and grey fleet, including by increased uptake of low emission vehicles.
- c) To work with partners in the private and public sectors to increase the uptake of sustainable transport choices, including low emission vehicles within the greater Exeter area.

3.1.2.2 The Low Emissions Strategy project started in January 2014. So far, models have been produced of current baseline emissions and emissions in 2018. These will be used to test scenarios and assess the impact of potential actions. Six stakeholder meetings and a steering group workshop have identified a range of actions which will be considered for inclusion in the final strategy.

3.1.2.3 Initial consultation on the Strategy options has begun, by means of an online survey. The Council hopes to engage with residents groups and businesses by means of targeted publicity at specific groups, as well as a general press release. This is seen as the first step in raising awareness of air pollution as a localised problem, and so the Council is seeking to obtain as wide coverage of this consultation as possible. A more detailed consultation on the draft strategy will take place later in the autumn.

3.1.2.4 In the Action Plan, the Council also commits to making closer links between air quality and climate change work, to recognise multiple benefits. The Plan also recognises the need for the negative health impacts of poor air quality to be better understood and communicated locally.

3.1.3 To provide a process for assessing the air quality aspect of the sustainability of future plans and policies.

3.1.4 To provide tools to engage local communities in air quality issues alongside wider sustainability issues.

- 3.2 Exeter City Council has already invested in its fleet, with the purchase of two electric pool cars. A bid has also been made to the Clean Vehicle Technology Fund to install Lightfoot⁷ technology to the majority of the Council's vehicles. This technology improves driving style, to reduce fuel consumption and emissions. The manufacturer predicts reductions in NO_x emissions of up to 21%.
- 3.3 Exeter City Council is currently consulting on changes to hackney carriage licenses which would require all vehicles to either be electric, or meet the Euro 6 emissions standard.

4 Predicted Future Air Quality in Exeter

- 4.1 The best estimates currently available (the Low Emissions Strategy project has not yet been completed), are that action in Exeter will have a modest positive effect on emissions⁸. This will not be sufficient to remove the exceedences of the NO₂ limit value at hotspot locations.
- 4.2 Although no exceedences of the PM₁₀ objective are predicted, the Council is still concerned about the impact of PM₁₀ and PM_{2.5} on the health of the local population. The modest predicted reduction in emissions achieved by local action in Exeter is unlikely to significantly change the estimated 4.2% of local mortality that is attributable to particulate pollution⁹.
- 4.3 If expected improvements in vehicle technology deliver reductions in real world emissions, then significant improvements to local air pollution will occur. However recent trends in local pollution¹⁰, and a growing body of research suggest that these improvements are not achieved in practice¹¹. This is caused by factors beyond the control of Exeter City Council, such as a taxation policy which has encouraged the uptake of diesel vehicles, and the fact that test cycles used for engine testing are not realistic of real world driving.

5 Recommendations

- 5.1 Exeter City Council would wish to the committee to consider the following recommendations for action by the Government.

⁷ <http://www.ashwoodslightfoot.co.uk/>

⁸ Exeter City Council, Air Quality Action Plan 2011. <http://www.exeter.gov.uk/index.aspx?articleid=15179>

⁹ Public Health England, PHE-CRCE-010: Estimating Local Mortality Burdens associated with Particulate Air Pollution 2014.

<http://www.hpa.org.uk/Publications/Environment/PHECRCEReportSeries/PHECRCE010/>

¹⁰ Exeter City Council, Air Quality Progress Report 2014.

<http://www.exeter.gov.uk/index.aspx?articleid=15179>

¹¹ BBC Radio 4, Costing the Earth 26 August 2014. <http://www.bbc.co.uk/news/science-environment-28898901>

- 5.1.1 That Government fund further research into mortality and morbidity on a local level as a result of poor air quality to provide evidence for action.
- 5.1.2 That Government clarify how any European Commission fines for failing to meet the limit values might be passed on to Local Authorities.
- 5.1.3 That the Government provide greater support for local authorities in tackling air pollution, and greater resources dedicated to air pollution work, in particular:
 - 5.1.3.1 That Government implement a national framework for Low Emissions Zones that Local Authorities can implement to ensure consistency and reduce burdens on individual Local Authorities, businesses etc.
 - 5.1.3.2 That Government take urgent action to ensure that real world vehicle emissions are reduced.
 - 5.1.3.3 That Government initiate national public awareness campaigns.

Cllr Pete Edwards, Chair Exeter Health and Wellbeing Board
Gillian Champion, Deputy Chair Exeter Health and Wellbeing Board
Cllr Keith Owen, Portfolio Holder for Environment, Health and Wellbeing

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