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(Please note that "Information Only" reports do not require Integrated Impact Assessments, Legal or Finance Comments as no decision is being taken)

<b>Title of meeting:</b>	Health and Wellbeing Board
<b>Subject:</b>	Air Quality and Active Travel Priority (Health and Wellbeing Strategy)
<b>Date of meeting:</b>	23rd November 2022
<b>Report by:</b>	Penny Emerit, Chief Executive, Portsmouth Hospitals University NHS Trust
<b>Report author:</b>	Dominique Le Touze, Assistant Director of Public Health
<b>Wards affected:</b>	All

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**1. Requested by** Health and Wellbeing Board Chair

**2. Purpose**

2.1 To provide an update to the Board on the air quality and active travel priority of the Health and Wellbeing Strategy.

2.2. To recommend areas where Board member organisations can contribute to this priority, as key local anchor institutions.

**3. Information Requested**

3.1 The Health and Wellbeing Strategy outlines why air quality and active travel underpins health improvement outcomes, building on the work of the Marmot Review<sup>1</sup> to identify the wider determinants of health.

**4. Air Quality and Active Travel in Portsmouth**

4.1 Air pollution is the largest environmental risk to the public's health in the UK, contributing to cardiovascular disease, lung cancer and respiratory diseases<sup>2</sup>. It is estimated by Public Health England that long-term exposure to air pollution in the UK has an annual effect equivalent to between 28,000 to 36,000 deaths<sup>3</sup>. In 2020,

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<sup>1</sup> [Fair Society Healthy Lives \(The Marmot Review\) - IHE \(instituteofhealthequity.org\)](https://www.fair-society.org.uk/healthy-lives-the-marmot-review)

<sup>2</sup> Association of Directors of Public Health (ADPH) 2017 'Air quality: a briefing for Director's of Public Health' <http://www.adph.org.uk/2017/03/air-quality-a-briefing-for-directors-of-public-health/>

<sup>3</sup> <https://www.gov.uk/government/publications/health-matters-air-pollution>

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premature deaths in Portsmouth attributed to long term exposure to particulate matter were higher than the national average, making up 6.9% of all premature deaths in Portsmouth, compared with 5.6% of all early deaths in England and the second highest rate in the South East<sup>4</sup>.

4.2 Currently, the pollutants causing the most significant health impacts in the UK are emissions of nitrogen dioxide and particulate matter (PM2.5, PM2.5 and PM10). Data from the Public Health Outcomes Framework (PHOF) indicates that concentrations of particulate matter in Portsmouth are on average 9.2 micrograms per metre squared. The second highest in the South East after Medway (9.6 micrograms per metre squared).

4.3 The health effects of air pollution are wide ranging. They include but are not limited to:

- short-term worsening of pre-existing heart and lung conditions and respiratory conditions such as asthma, leading to increased hospital admissions.
- Long-term effects through increased chronic disease and mortality from heart and lung conditions
- There is emerging evidence that other impacts include low birth weight and premature birth in babies, childhood infections and impaired lung development and function as children grow<sup>5</sup>.

4.4 Air quality affects everyone, but there are inequalities in exposure, and air pollution has the greatest impact on the most vulnerable - children, the elderly, those with long-term health conditions, and those living close to main roads where pollution from traffic is worst<sup>6</sup>. Deprived areas are often located close to heavy traffic where air quality is worse. In Portsmouth, people living in some parts of the Charles Dickens ward, which has an Air Quality Management Area (AQMA) located in it, have a significantly worse than average rate of emergency hospital admission for Chronic Obstructive Pulmonary Disorder, Cardiovascular Disease, and under 25 years emergency admissions for asthma.

4.5 The main source of air pollution in Portsmouth is road traffic, which accounts for around half of the air pollution in the city. Other sources are industrial, commercial, domestic, and background and trans-boundary pollution (unavoidably brought into the city via weather systems). Of traffic pollution, around 34% comes from diesel cars; 14% light goods vehicles (diesel); 8% bus; 8% petrol cars; 4% rigid Heavy Goods Vehicles; 1% articulated Heavy Goods Vehicles.

4.6 Reducing car travel and increasing active travel (walking, cycling, bus and train travel) is therefore crucial to reducing air pollution in the city as well as reducing road traffic accidents in Portsmouth which is the fourth worst in the South East with 189 accidents per

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<sup>4</sup> [Public Health Outcomes Framework - at a glance summary \(phe.org.uk\)](https://www.phe.org.uk/publications/health-matters-air-pollution)

<sup>5</sup> <https://www.gov.uk/government/publications/health-matters-air-pollution>

<sup>6</sup> Portsmouth Mid-Year Population Estimates 2018 (ONS); Portsmouth Health and Wellbeing Strategy 2018 - 2021

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billion vehicle miles (compared to an average of 95 per billion vehicle miles in the South East, and 86 in England)<sup>7</sup>.

4.7 Active travel has additional co-benefits for health including increasing physical activity, improving mental health and improving community cohesion and economic growth through greater social contact and higher footfall.

### **5. Action to tackle air pollution and increase active travel**

5.1 The multi-agency Air Quality and Active Travel Board was established in February 2022 to take forward the aims of this Health and Wellbeing Strategy priority. The Board has since established a broad membership, agreed terms of reference and undertaken a mapping exercise of existing member organisation policy.

5.2 A mapping exercise of air quality, active travel and sustainability policies and plans for Air Quality and Active Travel Board member organisations found commonalities particularly across travel and transport and the aims for delivery of services. Travel and transport goals included promotion of electric vehicle use and facilitation of active travel for business and leisure (including promotion of walking and cycling infrastructure, e-scooters, public transport and park and ride). These plans were supported by the Portsmouth City Council Transport Strategy 2021 - 2038<sup>8</sup> and Implementation Plan, Local Cycling and Walking Infrastructure Plan<sup>9</sup>, and the South East Hampshire Rapid Transit network initiative<sup>10</sup>, among others.

Promotion of digital services (particularly in health), shared courier services and a focus on limiting unnecessary business travel and flexible working practices all reduced car travel and therefore vehicle emissions.

5.3 A two hour workshop with members in September 2022 developed a delivery plan for the coming year (detailed in Appendix 1). This brought together evidence from the mapping exercise and recommendations for action from all partners, and built on work already underway in the city to tackle air pollution and increase active travel. It contains four main objectives:

1. A public awareness campaign on the impact of air pollution
  - Health threats linked to air pollution (including publicising mortality and morbidity costs linked to air pollution in the city)
  - Clinical champions; management plans for respiratory conditions that accommodate air pollution risks
  - Publicise existing active travel opportunities e.g. park and ride, My Journey, workplace support, walking links to PHT

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<sup>7</sup> [Public Health Outcomes Framework - at a glance summary \(phe.org.uk\)](https://www.phe.org.uk/public-health-outcomes-framework-at-a-glance-summary)

<sup>8</sup> [Portsmouth Transport Strategy 2021-2038](#)

<sup>9</sup> [74.463-LCWIP-Plan.pdf \(portsmouth.gov.uk\)](#)

<sup>10</sup> [Homepage - South East Hampshire Rapid Transit \(sehrt.org.uk\)](#)

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- Anti-idling campaign
  
- 2. Supports member organisations to develop active travel plans
  - peer support for all members
  - Sharing good practice between members, for example parking permit limitations for staff
  
- 3. Gaining public and political buy-in for reduced air pollution and increased active travel
  - Start discussions on a shared large-scale highly visible project to promote reduced air pollution and increase active travel for example. green corridor linking Port to city.
  - What is it that gets people on a bike and walking? Desktop and qualitative research to understand motivations and behaviour change
  
- 4. Coordinated EV infrastructure and policy
  - Sharing agreements for use across member organisations

**6. The role of the Health and Wellbeing Board in improving air quality and active travel**

6.1 Air pollution is the greatest environmental threat to the health of the population in the UK, negatively impacting on climate goals, worsening health outcomes and widening health inequalities in our city.

6.2 There are substantial co-benefits from addressing this issue for the climate, local economy, broader physical and mental health and continuing to make Portsmouth a good place to work, thrive and do business. Moreover, by collaborating as a group of anchor institutions, business and citizens working together, greater dividends can be achieved.

6.3 As health and wellbeing leaders in the city it is imperative that the Health and Wellbeing Board not only supports but actively champions this clinical priority.

6.4 We therefore ask Board Members to:

- Note and endorse the Air Quality and Active Travel Delivery Plan
- Commit to sharing electric vehicle charging points for staff across member organisations
- Commit to producing Active Travel Plans within the next year, which inform a shared and integrated Travel Plan for the city
- NHS members commit to providing clinical champions for the Board from community, primary and secondary care.
- All partners commit to developing staff wellbeing champions to promote clean air and active travel.

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Signed by (Director)

**Appendices:**

Appendix 1 - Air Quality and Active Travel Delivery Plan 2022 - 23

**Background list of documents: Section 100D of the Local Government Act 1972**

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

<b>Title of document</b>	<b>Location</b>
Health and wellbeing strategy 2022-2030	<a href="#">health-and-wellbeing-strategy-january-2022-accessible.pdf (portsmouth.gov.uk)</a>