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EQUALITIES BOARD

Wednesday, 2nd December, 2020 at 7.30 pm
This will be a virtual meeting

Membership:

Councillors: Guner Aydin, Lee David-Sanders (Deputy Leader of the Opposition), Ergin Erbil (Chair) (Associate Cabinet Member (Non-geographical based)), Margaret Greer (Vice-Chair), Charith Gunawardena, Bernadette Lappage, Dino Lemonides, Ayfer Orhan and Jim Steven

AGENDA – PART 1

- 1. WELCOME AND APOLOGIES**
- 2. DECLARATIONS OF INTEREST**

Members of the Council are invited to identify any disclosable pecuniary, other pecuniary or non-pecuniary interests relevant to the terms on the agenda.

3. MINUTES OF THE MEETING HELD ON 23 SEPTEMBER 2020 (5 MINUTES) (Pages 1 - 4)

To receive and agree the minutes of the meeting held on 23 September 2020.

4. TERMS OF REFERENCE (5 MINUTES)

To note the terms of reference.

5. EQUALITY AND DIVERSITY ANNUAL REPORT 2020 (20 MINUTES) TO FOLLOW

To receive a report from Harriet Potemkin, Head of Strategy and Policy.

6. THE IMPACT OF COVID-19 ON BAME GROUPS IN ENFIELD (15 MINUTES) (Pages 5 - 12)

To receive a presentation from Stuart Lines, Director of Public Health.

7. EQUALITY AND DIVERSITY IN MERIDIAN WATER (15 MINUTES) (Pages 13 - 14)

To receive a presentation from Peter George, Programme Director Meridian Water.

8. FAIRER ENFIELD POLICY CONSULTATION (10 MINUTES)

To receive a verbal update from Harriet Potemkin, Head of Strategy and Policy

9. FUTURE AGENDA ITEMS (5 MINUTES)

Members of the Equalities Board to discuss items for consideration at future meetings.

10. ANY OTHER BUSINESS (5 MINUTES)

With the approval of the Chair, any items of business, relevant to the Equalities Board.

11. DATES OF FUTURE MEETINGS

To note the date of future meetings as follows:

Tuesday 16 February 2021

Wednesday 28 April 2021

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MINUTES OF THE MEETING OF THE EQUALITIES BOARD HELD ON WEDNESDAY, 23RD SEPTEMBER, 2020

MEMBERS: Councillors Guner Aydin, Lee David-Sanders (Deputy Leader of the Opposition), Ergin Erbil (Chair) (Associate Cabinet Member (Non-geographical based)), Margaret Greer (Vice Chair), Charith Gunawardena, Dino Lemonides and Ayfer Orhan

Community Representatives:

Chandra Bhatia – Enfield Racial Equality Council
Ben Igber – Age UK Enfield
Mark Warwick – Enfield Carers Centre
Noelle Skivington – Healthwatch Enfield
Tim Fellows – Enfield LGBT Network
Nnenna Anyanwa – Citizens Advice Enfield
Nick Chanda – Enfield Faith Forum

Officers: Harriet Potemkin, Head of Strategy and Policy, Lucy Nasby, National Management Trainee, Strategy and Policy, Susan O’Connell, Governance and Scrutiny Officer, Andy Ellis, Governance and Scrutiny Officer.

1. WELCOME AND APOLOGIES

The Chair, Cllr Ergin Erbil welcomed everyone to the first meeting of the Equalities Board. The Chair asked Councillors and the external representatives to introduce themselves.

Apologies for absence were received from Cllr Lappage, Kayhan Ali, Young Mayor and Ginnie Landon from the Enfield Women’s Centre. Ginnie Landon had stated that the method of dialling in to the meeting was not suitable and with regret, offered her apologies.

Improved access to virtual meetings for external contributors is currently being reviewed by the Digital Services Team within the Council.

2. DECLARATIONS OF INTEREST

No declarations of interest were received.

3. TERMS OF REFERENCE

EQUALITIES BOARD - 23.9.2020

At Cllr Greer's request and with the approval of the Chair, 4 amendments to the wording of the terms of reference were noted. Tim Fellows, on behalf of Ginnie Landon from the Women's Centre, made a suggestion to change the expertise of the Women's Centre representative as representing issues affecting gender rather than sex.

4. DRAFT 'FAIRER ENFIELD' POLICY

Noted: The presentation from Harriet Potemkin and Lucy Nasby on the draft 'Fairer Enfield' policy.

The 4 core values of Equal Outcomes, Respect, Diversity and Inclusion were highlighted.

There was a discussion regarding the 5 proposed quality objectives for 2020-24. The objectives contain themes relating to SEND and employment opportunities, the wellbeing and contribution of the LGBT community, isolation and mental health, overcoming racism and reducing domestic violence.

The purpose of the presentation was to gain any comments on the draft document from Board Members.

The Chair thanked Officers for the presentation and invited questions and comments from Board Members.

- i) The presentation referred to analysis of local data on the outcomes and experiences of different groups in the community. It was agreed that background data could be provided to Board Members.

ACTION: Harriet Potemkin

- ii) In relation to Objective 2, regarding the LGBT Network, it was noted that work is being carried out in conjunction with the Stonewall charity to create an LGBT workplace. A request was received to include mental health and homelessness issues within this objective.
- iii) A former sheltered housing scheme for abused women used to be available in Enfield but this is no longer the case. It was suggested that this could be a subject for discussion at a further meeting.
- iv) It was suggested that tackling hate crime should be included within the objectives.
- v) The effect of covid-19 on the BAME community should be considered.
- vi) It was considered that Objective 3, focusing on social isolation, lacked appropriate detail. Opportunities for social connection should be explored. It was noted that the scrutiny review of social isolation was used as a base document.
- vii) Aspects of religious freedom should be considered across all 5 objectives
- viii) The Board would support appropriate training opportunities.
- ix) A reference to the work of the Black Lives Matter movement will be included.

EQUALITIES BOARD - 23.9.2020

- x) The role of the Corporate Equalities Board was explained, comprising Executive and Senior Officers from the Council.
- xi) When the comments from the Equalities Board have been collated, the draft document will be amended accordingly. There will then be an 8-week consultation period before the document goes to Full Council in January 2021. Once implemented, the objectives will be closely monitored.

The Chair thanked Members of the Board for their input and suggested that if any further amendments were considered, these could be emailed to Officers

5. FUTURE AGENDA ITEMS

The Chair asked for suggestions at future meetings.

- i) A comment was noted that it would be more appropriate to decide upon future agenda items, once the background data used to inform the draft objectives had been received.
- ii) It was widely agreed that outcomes should be considered. What has the effect of Covid-19 been on the older community and the BAME community in Enfield?
- iii) How are the Council responding to the Equality Commission Report?
- iv) How is equality in the workplace measured in relation to young people and key workers?
- v) How are equality policies reflected within the procurement process in Enfield?
- vi) It was suggested that if the Corporate Equalities Board meet before the next meeting of this Board, then a report should be presented on their work. The Director of Human Resources and Organisational Design will be contacted.

ACTION: Harriet Potemkin

6. ANY OTHER BUSINESS

- i) The Chair confirmed that any recommendations from the Equalities Board would be considered by Full Council.
- ii) Further revision of the Terms of Reference may be required.

7. DATES OF FUTURE MEETINGS

The dates of future meetings of the Equalities Board were noted as follows:

Wednesday 2 December 2020

Tuesday 16 February 2021

Wednesday 28 April 2021

EQUALITIES BOARD
Appointed by: Chair and Vice Chair appointed by Council
Proportionality: Applies
Membership: 9 members with up to 9 members from local groups representing the 9 protected characteristics
Chair and Vice Chair appointed by: Council
Public/Private meetings: Public
Quorum: 3
Frequency: minimum 4 times a year
<p>Terms of reference:</p> <p>Equalities Board is the forum by which the Council can oversee its processes to eliminate discrimination on the protected characteristics. The following characterises are protected under the Equalities Act 2010:</p> <ul style="list-style-type: none"> • age; • disability; • gender reassignment; • marriage and civil partnership; • pregnancy and maternity; • race; • religion or belief; • gender; • sexual orientation <ol style="list-style-type: none"> (i) To monitor the Council's performance against current equality legislation. (ii) To act as a consultative and advisory body with regard to the development of new policies/initiatives and to actively support such initiatives. (iii) To raise awareness of the specific needs of service users in terms of service delivery. (iv) To provide a sounding board for any initiative or proposal that the Council is making and how they may affect the protected characteristics either directly or indirectly. (v) To provide a better understanding of equalities in order to gain knowledge, and to promote awareness and encourage mutual respect. (vi) To encourage the Council to recognise the benefits of a diverse workforce that reflects the make-up of the local population and work toward that vision. (vii) To encourage the Council support to staff in a manner that motivates them and makes them feel secure in their working environment. (viii) To analyse data and information gained from monitoring, impact assessments and general consultation activity to inform priorities and

- future practice.
- (ix) To consider workforce equalities and diversity matters referred to it by the Director of Law and Governance, Human Resources, Audit & Risk Management

The impact of Covid-19 on BAME groups in Enfield

Equalities Board

Stuart Lines, Director of Public
Health

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Agenda Item 6

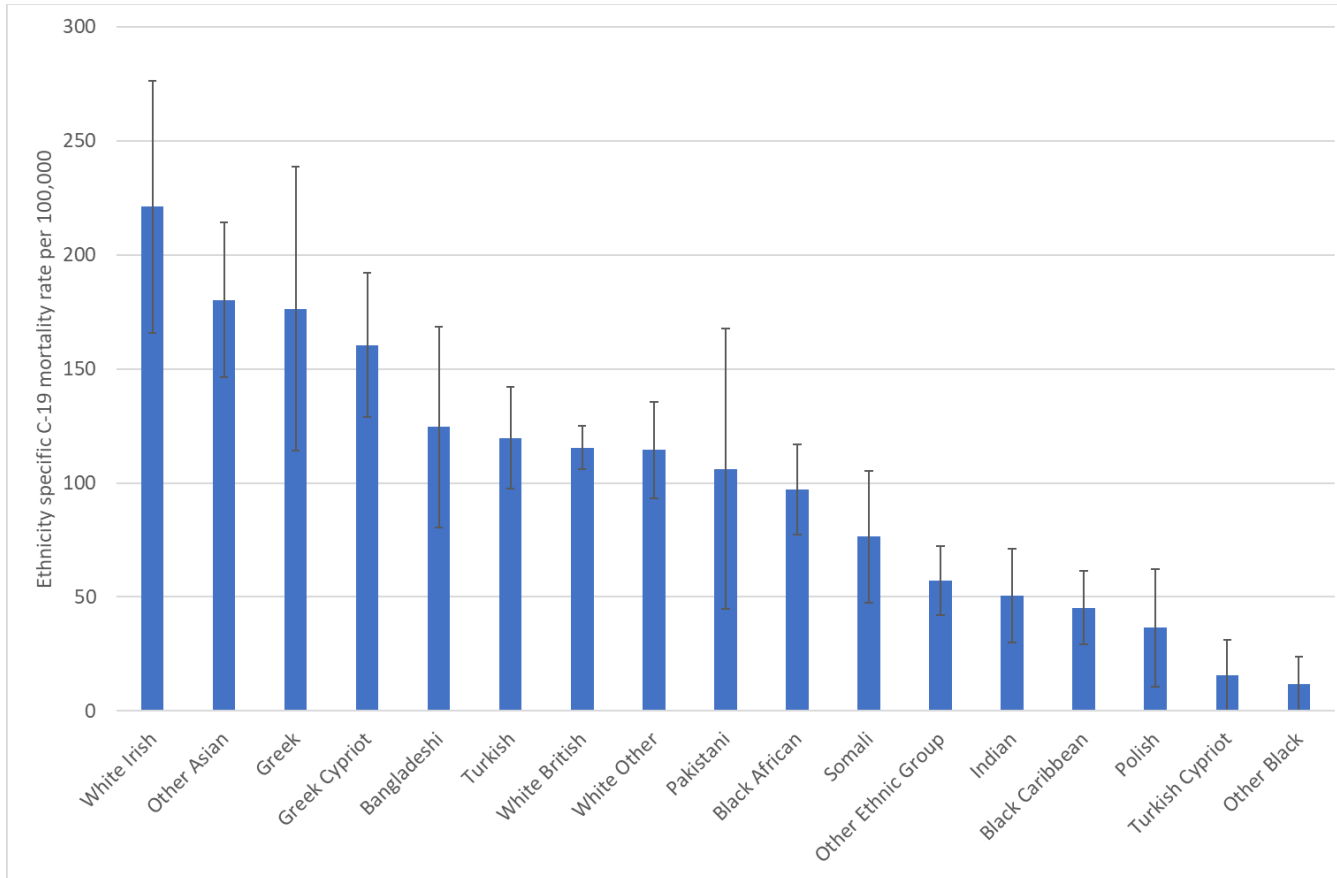


Number of COVID-19 cases by ethnicity from February 2020 until 24th September 2020 identified after testing

Ethnicity	Enfield Population	Number of COVID-19 cases	COVID-19 cases per 1,000
White Other	25,353	335	13.2
Asian	36,657	207	5.6
Other*	68,969	328	4.8
Black	59,941	280	4.7
White British	117,517	407	3.5
Irish	7,236	17	2.3
Mixed	18,384	30	1.6
Enfield	334,057	1604	4.8

- White other community groups have highest reported infection rates.
- Mixed and Irish community groups have the lowest reported COVID-19 infection rates.

COVID-19 mortality rate per 100,000 by ethnicity in Enfield



In terms of mortality- White Irish group has the highest COVID-19 death rate in Enfield with 16 deaths at a rate of 221 per 100,000

Interpretation of reported COVID-19 infection rates and mortality

	Number of people tested per 1000 residents	Positive rate per 1000	Number tested positive
White other	232.87	13.21	335
Asian	113.68	5.65	207
White British	112.66	3.46	407
Black	101.32	4.67	280
Irish	88.03	2.35	17
Mixed	88.01	1.63	30
Other	53.23	4.76	328

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Irish community group have high COVID-19 mortality, but have low COVID-19 infection rates. This may be due to COVID-19 testing rates are low among this group.

Actions taken locally

Engagement with Enfield Faith Forum

- Fortnightly public health briefings
- Special Covid-19 and flu meeting
- Education & awareness

Covid Resilience Board

- Collaborative working with VCS and partners to respond to Covid-19 community challenges
- Membership includes Faith Forum and BAME representatives

Health Champions Engagement

- Covid-19 training sessions provided and on-going
- Wider reach of messages and communications to under-represented communities
- Newham Knowledge Sharing

Community Pantry

- Project was designed to support different ethnic minorities by catering for different religious and dietary requirements.
- Worked alongside different community leaders for this insight

Simply Connect Enfield

- Supported the launch of the online Social Prescribing service, managed and delivered by EVA to support residents during the pandemic

Samafal

- Commissioned to make no/low cost face covering primarily for the Somali community
- Short-term employment for 3 local Somali women

Communications

- Three video campaigns with support from the VCS and Councillors in community languages e.g. Bengali
- Targeted to local demography

Workforce Risk Assessment

- All Council staff have completed risk assessment to safeguard staff most at-risk of serious outcomes from COVID-19, particularly those on front-line services

Winter flu preparation

- Winter flu preparation & awareness for BAME communities
- Occupational flu programme

Integrated Care Partnership

- Priorities:
- Inequalities
 - Flu
 - Diagnostics

COVID-19 Vaccine

- Identification of sites
- On-going work with NCL working group

North Central London CCG

- Workstream led by the NCL CCG is looking at strategies to address existing health inequalities faced by BAME communities

PHE: Beyond the data: Understanding the impact of COVID-19 on BAME groups

Recommendations	Actions
<p>1. Mandate comprehensive and quality ethnicity data collection and recording as part of routine NHS and social care data collection systems including the mandatory collection of ethnicity data at death certification, and ensure that data are readily available to local health and care partners to inform actions to mitigate the impact of COVID-19 on BAME communities</p>	<ul style="list-style-type: none"> – Accurate ethnicity recording for positive cases – The Public Health Intelligence team have used software to assign an ethnicity using country of birth and name data on the death certificate.
<p>2. Support community participatory research, in which researchers and community stakeholders engage as equal partners in all steps of the research process to understand the social, cultural, structural, economic, religious, and commercial determinants of COVID-19 in BAME communities, and to develop readily implementable and scalable programmes to reduce risk and improve health outcomes</p>	<ul style="list-style-type: none"> – Integrated Care Partnership inequalities workshop: funding allocated to for community participatory research – Conducted stakeholder engagement with Enfield Faith Forum to understand cultural and religious factors that may influence adherence to government advice, for example

PHE: Beyond the data: Understanding the impact of COVID-19 on BAME groups- cont'd

Recommendations	Actions
<p>3. Improve access, experiences and outcomes of NHS, local government and integrated care systems commissioned services by BAME communities including: regular equity audits; use of health impact assessments; integration of equality into quality systems; good representation of black and minority ethnic communities among staff at all levels; sustained workforce development and employment practices; trust-building dialogue with service users</p>	<p>This is being taken up by the People Commissioning Service.</p>
<p>4. Accelerate the development of culturally competent occupational risk assessment tools that can be employed in a variety of occupational settings and used to reduce the risk of employee's exposure to and acquisition of COVID-19, especially for key workers working with a large cross section of the general public or in contact with those infected with COVID-19</p>	<p>Council staff have completed a workplace risk assessment to safeguard staff most at-risk of serious infection from COVID-19, particularly those on front-line services and key workers who may come into contact with many vulnerable residents</p>

PHE: Beyond the data: Understanding the impact of COVID-19 on BAME groups- cont'd

Recommendations	Actions taken locally
<p>5. Fund, develop and implement culturally competent COVID-19 education and prevention campaigns, working in partnership with local BAME and faith communities to reinforce individual and household risk reduction strategies; rebuild trust with and uptake of routine clinical services; reinforce messages on early identification, testing and diagnosis; and prepare communities to take full advantage of interventions including contact tracing, antibody testing and ultimately vaccine availability</p>	<ul style="list-style-type: none"> - Several stakeholder engagement activities including 'myth busting' and Q&A sessions on flu and potential COVID-19 vaccinations - Introducing the NHS COVID-19 app at the Community Resilience Board to encourage key community influencers to download and use the app and to reassure communities around privacy/data concerns
<p>6. Accelerate efforts to target culturally competent health promotion and disease prevention programmes for non-communicable diseases promoting healthy weight, physical activity, smoking cessation, mental wellbeing and effective management of chronic conditions including diabetes, hypertension and asthma</p>	<p>The Health & Wellbeing (HWB) Strategy aims to address the prevention of these areas and there are efforts to accelerate the strategy.</p>
<p>7. Ensure that COVID-19 recovery strategies actively reduce inequalities caused by the wider determinants of health to create long term sustainable change. Fully funded, sustained and meaningful approaches to tackling ethnic inequalities must be prioritised</p>	<p>A key priority of the Integrated Care Partnership is addressing health inequalities. A workstream led by NCL is looking at strategies to address existing health inequalities faced by BAME communities, that have been exacerbated by COVID-19</p>



