



External Advisory Board Agenda

Friday 27th November 2020, 10am-12pm

Minutes

Attendees:

Julia Goldsworthy (Chair), Daniel Black, Rachel Brierley, Ed Cox, Nancy Edwards, Leah Fisher, Leila Gamaz, Matthew Hickman, Paul Leinster, Richard Meier, Victoria Ofovbe, Sunand Prasad, Gabriel Scally, Richard Upton

Apologies: Stephen Aldridge, Dan Bristow, Halima Khan

Actions:

- DB/RB to ask WP2 whether the tool will include existing guidelines / tools from different sectors.
- DB to update Terms of Reference, including foundational principles and key definitions (including coproduction) and confidentiality.
- TRUUD team to share more information on economic model when it is ready.
- LF to share meeting slides and copy of draft protocol.
- LF to circulate communication to establish preference of meeting frequency.

1. Introductions and welcome

All attendees introduced themselves and gave some background on their roles and experience.

2. Introduction to TRUUD

TRUUD is funded by UKPRP and is one of four funded consortia. The aim of TRUUD is to transform decision-making for the urban environment, so that it values or considers the impact of urban spaces on non-communicable diseases, these include cancer, respiratory disease and mental health.

UPSTREAM <https://urban-health-upstream.info/> was the successful pilot study which interviewed key decision makers in the public and private realms. This study showed that there was interest in seeing economic evidence on valuing health, and of the impact of urban design on health. Many different barriers were identified in the system – which led to TRUUD and the development of a 3-pronged intervention (economic evaluation, opportunities for change, public involvement/community engagement).

The TRUUD consortium is transdisciplinary – with researchers in fields including Public Health, Law, Real Estate, Engineering, Management, Economics.

Case Studies

Information was presented on the case studies. The Bristol case studies (focusing on mixed use commercial and residential developments) are:

- Frome Gateway: This development is relatively downstream and includes 1000 units near the city centre.

In Greater Manchester, the case study has been identified as Streets for All. The focus of the case study for Greater Manchester is transport. Streets for All is a large initiative and TRUUD will be focussed on certain aspects of the project.

Interviews about the case study will commence in January 2021. Information was shared with the EAB about the governance and structure of TRUUD. Slides will be available with these minutes for the EAB members to review.

3. Discussion of potential strengths / gaps / issues

COVID has caused some disruption but has provided valuable learning along the way. Build environment issues are a fundamental part of the responses to the pandemic. Areas for improvement highlighted included: access to green space for example (closed parks/no access at all); air pollution (as an effect of reduced traffic); overcrowded housing – this was highlighted as a particular issue in Manchester with high levels of deprivation/overcrowding; suitable ventilation in buildings is crucial in tackling airborne viruses, historically this has not been taken seriously enough. The point was made that public/personal buildings in the future should be built to limit overcrowding and improve ventilation. The economic tool aims to provide evidence of the potential implications of the urban environment on health. 'Sanitary principles' was given as an example of building practice which would have been effective in helping to fight the spread of COVID-19.

Delivery/timelines for TRUUD spans a five to six-year timeline. Phase 1 is building understanding of systems, phase 2 is building the intervention and phase 3 is evaluating and refining the intervention. The aim is to develop an intervention that has been piloted and is ready to be rolled out for wider use. A slide with flow chart of phase framework was shared with the group.

It was flagged that West Midlands Combined Authority (WMCA) have just published their Health of the Region report. There was a question about whether TRUUD will also look at repurposed buildings – e.g., offices becoming flats, commercial buildings, regeneration of high streets; this is not part of the scope of TRUUD, which is focussed on new builds.

There was a question about whether there will be any interaction with the NHS. Some of the TRUUD team met with NHS "Healthy New Towns" in London a couple of years ago so are familiar with their work. TRUUD plans to feed into the NHS through standard practice. TRUUD is looking at next generation solutions, hoping for a sentinel system in areas where we are active, which would allow us to find traces of the effect of COVID-19 and examine how this affects our thinking. This can be explored over the lifespan of the project, looking at what the possible changes might be and use that thinking to explore with the partners with whom we are engaged – evaluating their reactions and level of engagement.

Case studies are now set, there were a limited number of options in the Bristol area. They were purposively selected. There were originally four or five large sites available, however for political reasons some were eliminated. The two chosen case studies will enable one to be sufficiently downstream to be suitable for cost benefit analysis, and one sufficiently upstream to have an impact on downstream outcomes. There will be no further case studies selected / used unless unanticipated issues with the existing ones. There will however be opportunities, when developing the economic tools, to use them in different scenarios.

There was a question about the generalisability / scalability of the work - the generalisability has to sometimes come from discussing results and how they might be different. Interventions and understanding on systems will hopefully be implementable, adaptable and modifiable.

There was a discussion around how good intentions for one outcome can mitigate against good intentions for another outcome. For example, there is current practice around making energy efficient buildings airtight (potential to negate ventilation). There can be conflicts between policy pools of sustainability and health. There was a question about how TRUUD will work through and understand where these pinch points are around conflicts within policy pools. The TRUUD economic tool will include some analysis on these issues, for example the effect of temperature: over and under heating on health.

Interest was expressed in understanding more about how the economic tool will work. There is information about the valuation tool in the UPSTREAM documents. The TRUUD team will share the tool from UPSTREAM once it has been published. There was a question about whether TRUUD will compile existing guidelines / tools that are currently being used in different sectors for economic evaluations. This will be taken to the WP2 team. The main findings from UPSTREAM show acknowledgement that health is not being "baked" into decision making. There was a discussion about whether it is possible to look at key changes resulting from COVID, e.g., the review of the Green Book which include natural benefit.

There was a question about whether the tools resulting from TRUUD will be just for decision makers to use, or also intended to benefit residents/communities. It was confirmed that they will be designed for both parties with the intention to co-produce them with decision makers and communities. The aim is to enable citizens to understand the links between health and the urban environment. Work Package 4 is concentrating on how to communicate health inequalities to decision makers. By 2030 there should start to be a wholistic approach in some areas around health, wellbeing and economic growth for all. There was a discussion around potential leverage for this and it was suggested that there is a white paper that is currently parked, that could be used as a vehicle.

There was a question about what 'great' would look like for TRUUD. Ideally this would be a completely different approach to new build and re-thinking our towns and cities. A holistic approach to environment and health with greenery, air quality, building quality. Understanding amongst citizens of the connections between environment and health, food production and systems.

There was a discussion around having evidence and solutions, but without effective implementation. There is not currently a suitable mechanism for balancing long-term issues with short-term budgets, which is a key issue and challenge. We should have an upstream system, linked to evidence, that sets budgets with consideration for the long-term outcomes. There was a discussion about how long-term programmes could be empowered - findings from UPSTREAM suggested that the evidence was unevenly distributed. There is also the issue that the same evidence means different things to different disciplines, this is something that TRUUD aims to address.

4. Co-production options and opportunities

There was discussion around what is meant by co-production. Within TRUUD the areas identified for coproduction relate to developing the public intervention, understanding of systems and how the valuation tool works. WP4 is developing representative groups for each city but exactly what this involvement will be is still unclear to Public Contributors at this stage as it is still in development. It was argued that there is a risk that what is being done is consultation, rather than coproduction (if the research has already been determined). For coproduction, it is essential that the research can be shaped and changed by the coproducers. It was agreed that the TRUUD team would review the definition being used for coproduction and share this with the EAB. Ed Cox offered to help with this area. It was agreed that the EAB are acting in an advisory, rather than coproduction, capacity.

5. Discuss Terms of Reference

It was suggested that the Terms of Reference (ToR) should be updated to set out the key principles (similar to a foundational business plan), this should include coproduction. Information should also be provided on the economic tool.

The EAB will then review and consider the foundation of approach and strategies. The EAB were in general agreement that more frequent meetings than annual would be preferable, quarterly meetings were suggested. The more frequent meetings could be shorter with a more focused approach, potentially using breakout rooms for this.

6. Conflict of interests – Declaration form

Please complete and return forms within next two weeks.

7. Next steps

Terms of reference to be updated by the TRUUD team and circulated for agreement via email. The TRUUD team should also develop a proposal for the ongoing meeting schedule.

External Advisory Board Membership:

Julia Goldsworthy (Chair): Director of Strategy, West Midlands Combined Authority

Stephen Aldridge: Director for Analysis & Data, Ministry of Housing, Development & Local Government

Dan Bristow: Director of Policy & Practice, Wales Centre for Public Policy

Ed Cox: Director for Inclusive Growth & Public Service Reform, West Midlands Combined Authority

Nancy Edwards: Professor Emeritus, School of Nursing, University of Ottawa

Leila Gamaz: Public Contributor

Halima Khan: Executive Director Communities & Skills, Mayor of London/London Assembly

Paul Leinster: Professor of Environmental Assessment, Cranfield University

Richard Meier: Co-Founder & CEO, Stories

Victoria Ofovbe: Public Contributor

Sunand Prasad: Principal, Penoyre & Prasad Architects London

Richard Upton: Chief Development Officer, U+I

TRUUD Management Team:

Matt Hickman: PI and Research Director, Professor in Public Health and Epidemiology, University of Bristol

Gabriel Scally: Research Director, Visiting Professor, University of Bristol

Daniel Black: Programme Director and WP3 Lead, Specialist in Urban Development for Planetary Health, University of Bristol

Rachel Brierley: Programme and Communications Manager and WP5 lead, University of Bristol

Leah Fisher: Programme Administrator, University of Bristol