

<b>Committee(s):</b> Health and Wellbeing Board – For decision	<b>Dated:</b> 15/11/2024
<b>Subject:</b> <b>Overheating and health – opportunities to collaborate between partners.</b>	<b>Public report:</b> For Decision
<b>This proposal:</b> <ul style="list-style-type: none"> <li>• <b>Delivers Corporate Plan 2024-29 outcomes</b></li> </ul>	<ul style="list-style-type: none"> <li>• Leading Sustainable Environments</li> <li>• Providing Excellent Services</li> <li>• Diverse Engaged Communities</li> </ul>
<b>Does this proposal require extra revenue and/or capital spending?</b>	<b>N/A</b>
<b>If so, how much?</b>	<b>£ -</b>
<b>What is the source of Funding?</b>	<b>N/A</b>
<b>Has this Funding Source been agreed with the Chamberlain’s Department?</b>	<b>N/A</b>
<b>Report of:</b> Dr Sandra Husbands, Director of Public Health	For Decision
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### Summary

With the increase in temperatures expected due to climate change, the City of London and elsewhere can expect to be impacted by more frequent incidence of overheating. The resulting disruption and direct impacts will affect public health.

There will be a disproportionate distribution of these impacts with vulnerable members of society being unfairly impacted. Work to mitigate these risks forms an important part of a Just Transition.

The high number of workers coming into the Square Mile and its geographic position makes the risk of overheating to the City of London unusual. Complex interactions

govern the relationship between health, climate change and everyday life. Certain characteristics increase vulnerability to overheating.

This paper follows work to understand in detail the links between overheating-related climate risks and how they interact with various elements of health. These have then been considered in reference to key areas of work of the Health and Wellbeing Board. The details arising from this exercise are available in Appendix 1.

This paper sets out recommendations for continued and closer collaboration between teams working in Public Health and Climate Action. The paper includes potential actions which the board could take forward as shared actions between members.

## **Recommendations**

Members are asked to:

- Note the report.
- Endorse the continued collaboration between officers working in Public Health and Climate Action, and others on the issues outlined in the report.
- Consider further collaboration between partners on the areas identified within the report.
- Advise on areas for (further) collaboration to maximise the collective impacts of local action on overheating (and climate change more generally) to protect and improve population health (and reduce health inequalities) in the City of London.

## **Main Report**

### **Background**

1. As the climate changes we can expect to see a broad range of impacts including higher temperatures, more frequent heatwaves, and the disruption resulting from these. By the 2050s central London can expect to have 19 days of heatwaves a year, rising to 56 days by 2080. This is already having broad-ranging implications for health and health inequalities, and without action this will continue to worsen. Many systems in the UK are already facing unacceptable impacts, costing an estimated £6.8 billion per year.
2. The Health and Wellbeing Strategy sets out three priorities (increasing financial resilience, increasing social connection, improving mental health) which can each be demonstratively shown to be negatively impacted by higher temperatures and also create greater vulnerability. When considered alongside the other direct effects to health (heat related illness and mortality) and indirect effects (air quality, food/water supply, economic productivity, disruption to services etc) it is clear that the risks from extreme temperatures are one of the most important climate impacts for health. These impacts will be spread disproportionately, falling more heavily on the most vulnerable.

3. The link between heat and direct impacts to health is well established including exacerbating existing conditions, adverse mental health outcomes, and heat-related hospitalisations. There is an increasing trend between extreme heat days and heat-associated deaths in data from 2016 to 2023 and the number of heat-related deaths per year may triple by 2050.
4. These direct impacts increase demand on healthcare services at a time when the effects of heat will have a negative impact on the health and social care system itself. This occurs where care settings are not designed for higher temperatures, with staff being disrupted by transport and reduced productivity, and issues with supply chains and availability.
5. Prolonged higher temperatures will at the same time be negatively impacting the wider determinants of health. Amongst other things reducing the availability of fresh food, limiting opportunities to be active, and disrupting learning environments. Significantly though higher temperatures increase the risk of social isolation, often for those who are more vulnerable and at a time when having strong social connections plays an important role in ensuring that vulnerable community members receive the help and support they need.
6. Overheating and extreme hot weather is interlinked to wider environmental impacts. This includes poorer air quality, associated drought conditions, and a cascading risk where periods of heatwaves are often followed by thunderstorms and flash flooding. Each of which can result in negative impacts to health.
7. Overheating risks are particularly acute within the Square Mile. With its central position within the capital it is significantly impacted by the Urban Heat Island (UHI). The UHI effect results from the built environment absorbing heat during the day and then slowly releasing heat over time, increasing nighttime temperatures. This can result in temperatures up to 5 degrees higher on the hottest days than recorded in rural areas.
8. The demographics of the City of London's populations increase this risk yet further. The Square Mile has a residential population that primarily live within apartment buildings and that skews towards older age groups. In addition there is a significant workday population that largely commutes in via public transport. This includes a sizable and under-recognised workforce of those working outside or in already hotter conditions (such as kitchens) and are therefore more likely to be exposed to higher temperatures.
9. In London inequity is exaggerated compared to national averages. Where groups are at an increased risk of harm from overheating and/or are less resilient to or less able to recover from these harms, they will be disproportionately impacted. These groups may have existing social vulnerabilities that climate change will exacerbate. A Just Transition demands a fair approach, reducing the impacts on those most vulnerable and worst affected. However, care needs to be taken to ensure that these actions don't have unintended health 'disbenefits' or widen health inequalities.

10. Unlike some other climate impacts such as flooding, managing risks from overheating is not a well-established field. There is a lack of clarity and fragmentation as to who holds responsibility for managing risk. The UK Health Security Agency (UKHSA) plays a lead role in managing the health impact of overheating. They do this through the Adverse Weather and Health Plan. For the immediate future the UKHSA considers the main risk associated with temperature to be from extreme cold and this is therefore the primary focus on the plans.
11. This lack of clarity is noted in the London Climate Resilience Review (LCRR), the full report of which was published in July 2024. A key recommendation from the review is that the Mayor of London takes on a regional responsibility for coordinating local actions to ensure that the risks from heat are managed holistically. The LCRR makes a number of further recommendations in relation to health and climate resilience.

### **Current Position**

12. Work has already been undertaken locally on climate action that addresses overheating. The North East London Integrated Care System Green Plan (NEL ICS Green Plan) sets out the partnership's journey to Net Zero. And the City of London Corporation's Climate Action Strategy (CAS) sets its own ambitious objectives on net zero and climate resilience within the Square Mile. Issues associated with extreme heat are covered in the Severe Weather Emergency Protocols as part of the City Corporation's Homelessness and Rough Sleeping Strategy.
13. Through the CAS work, a City Specific Heat Risk Index has been created. This combines datasets on vulnerability (population characteristics that increase the risk from overheating) with datasets on exposure (characteristics that increase the likelihood of a place being hotter). This Index has then been mapped to aid understanding heat risk across the Square Mile (see Appendix 1).
14. Detailed reviews for key target areas associated with the work of the Health and Wellbeing Board have been undertaken. The key target areas considered are:
  - a. Healthcare settings and their surroundings
  - b. Healthcare provision and services
  - c. Education and libraries
  - d. Housing
  - e. Homelessness and rough sleeping
  - f. Ports and markets
15. The specific climate-health impacts for each of these areas have been identified and this has been used to see where possible solutions align with existing CAS works or there may be future opportunities for further work. Climate action includes both mitigation (Net Zero) and adaptation. This review also considered where climate actions could result in unintended negative health consequences or maladaptation.

## Options

16. Option 1: This option would see the current level of engagement between partners continue, working on a case-by-case basis on specific projects where shared interests align (**not recommended**).
17. Option 2: This option would see the Health and Wellbeing Board - as a collective body and as leaders within their organisations - use its influence to strengthen local partnership action on climate-health impacts (**recommended**).

## Proposals

18. The Health and Wellbeing Board is being asked to endorse enhanced collaboration to continue to explore and take forward shared actions to prevent/reduce the harms of extreme temperatures. Members are asked to consider and advise on the following potential Climate-Health Actions:
  - a. Place-based partnership: setting up a climate-based partnership to look at specific place-based interventions. This should include guidance for local occupiers.
  - b. Roofs designed to cool: sharing best practice on cooling roofs and targeting a white roofs programme for key buildings. Working with the planning team to ensure that overheating is accounted for in new developments. Using heat index and data to identify key sites and working with partners to prioritise and apply for funding.
  - c. Heat Plan exercise: partaking in a joint exercise of Extreme Weather Plans to test responses to heatwave incidents.
  - d. Cool spaces network: expanding the network of cool spaces within the Square Mile, tailoring to City requirements and needs. Focusing on supporting vulnerable settings, areas and population groups. Using heat index and data to identify key sites and working with partners to prioritise and apply for funding.
  - e. Community Champions: explore opportunities for wider community engagement, including through the existing City & Hackney Community Health Champions programme.
  - f. Further suggestions and opportunities from Board Members and partner organisations.
19. Should they agree to the above, Health and Wellbeing Board partners are asked to express how they would wish to see these actions taken forward and the frequency with which progress updates should return to this Board.

## Key Data

20. There is an increasing trend in both extreme heat days and heat-associated deaths. The five periods of heat during summer 2023 resulted in an estimated 2295 deaths in England. The population size for the City of London is too small to

give meaningful statistics, which is not to say that works would have limited impacts.

21. As part of the CAS, climate sensor networks have been installed across the Square Mile. These will give longer term data on the number of extreme heat days within the City of London and granular detail of how these events are felt within the public realm.

## **Corporate & Strategic Implications**

### **Strategic implications**

Progressing work outlined within this paper will contribute towards Corporate Plan aims of Leading Sustainable Environment, Diverse Engaged Communities, and Providing Excellent Services through creating the conditions for places, people and processes to be more resilient to overheating. The work actively fulfils objectives within the Climate Action Strategy and Health and Wellbeing Strategy.

### **Financial implications**

There are no new financial implications arising from the proposal within the paper at this stage.

### **Resource implications**

There are no new resource implications arising from the proposal within the paper at this stage.

### **Legal implications**

None.

### **Risk implications**

The proposals in this paper seek to actively address and mitigate risks arising from climate change and overheating.

### **Equalities implications**

If unmitigated, the impacts from overheating will have a disproportionate impact on some groups of people associated with protected characteristics. The Just Transition approach proposed within this paper actively prioritises reducing the impacts on those most vulnerable and worst affected. Subsequent works outlined should it be taken forward may require a full Equality Impact Assessment.

### **Climate implications**

The primary aim of this paper is to further mitigate and adapt to the impacts of climate change, using opportunities to specifically address health related impacts. The proposals outlined would increase climate resilience of the most vulnerable and seek to ensure that climate action minimises potential unintended health disbenefits.

### **Security implications**

None.

## **Conclusion**

22. Overheating is one of the main risks to public health from climate change. Without action it will have a disproportionate impact on already vulnerable groups. The City of London has specific challenges due to its location and population characteristics.
23. This paper seeks to gain high level support from the Health and Wellbeing Board to continue to progress a range of collaborations which would manage the risks from overheating to health.

## **Appendices**

- Appendix 1 – Overheating and health – Presentation to Health and Wellbeing Board.

## **Background Papers**

[Climate & Health – Opportunities for Collaboration](#) [Presented to City Health & Wellbeing Board on 24/11/2023]

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