Health and Wellbeing Board

Tuesday 18th April 2017



Classification:

Report of the London Borough of Tower Hamlets

Unrestricted

Health and Wellbeing Strategy, delivering the boards priority: Communities Driving Change

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Executive Key Decision?	No

Executive Summary

This action plan was developed by the Board Champion Group for the Communities Driving Change priority of the Health and Wellbeing Strategy, consisting of Councillor Rachel Saunders; Charlotte Ladyman (Healthwatch); Dianne Barham (Healthwatch); Gemma Cossins (Tower Hamlets Council for Voluntary Services); Flora Ogilvie (Public Health), Michael Keating (Tower Hamlets Together) and Sue Hogarth (Tower Hamlets Together).

The plan sets out what we will have achieved by March 2018; the overall plan for the year; what we will do in the next three months, and how we will measure success, for each of the actions within this priority area:

Action 1.1: Implement a 'health creation' programme in which residents:

- identify issues impacting on health and wellbeing that matter to local people
- recruit other residents who have the energy and passion to make a difference
- develop and lead new ways to improve health and wellbeing locally

Action 1.2: Implement a programme across the partnership to promote a culture in their organisations that empowers people to be in control and informed about how to improve their health

- **Action 1.3**: Engage local residents with the work of the Board and to deliver this strategy by:
 - hosting an event in each area at least one month prior to our Health and Wellbeing Board meetings
 - following this up with a further meeting with the public to report back
 - using social media to communicate more regularly and creatively with a wider range of local people.

Recommendations:

The Health and Wellbeing Board is recommended to:

1. Support the Action Plan to enable us to realise the ambition set out in the Health and Wellbeing Strategy Priority on Communities Driving Change.

1. REASONS FOR THE DECISIONS

1.1 This report sets out the proposed action plan for the Communities Driving Change priority within the Health and Wellbeing Strategy, in order to realise the ambition of the strategy. The action plan has been developed based on knowledge of the existing work that is already ongoing, and what is thought to be realistically achievable within existing budgets.

2. ALTERNATIVE OPTIONS

2.1 The alternative option of business as usual would not allow us realise the ambition within the Health and Wellbeing Strategy.

3. **DETAILS OF REPORT**

- 3.11 **Action 1. 1 (p13**)
- 3.12 Implement a 'health creation' programme in which residents:
 - identify issues impacting on health and wellbeing that matter to local people
 - recruit other residents who have the energy and passion to make a difference
 - develop and lead new ways to improve health and wellbeing locally
- 3.13 What will we have achieved by the end of March 2018?
 - Tower Hamlets Healthy Communities Programme in place
 - Existing initiatives for capturing insight better joined up
 - A publicly accessible repository of insights available
 - Clear pathway for residents to get involved established
 - Process for feeding back to residents established

The Council's Public Health Team is currently commissioning a 'health creation' programme – the Tower Hamlets Healthy Communities Programme, through which local residents will have the opportunity to come together and identify the health and wellbeing issues and outcomes that matter to them, as well as designing local delivery plans that set out how local people will come together with other stakeholders in order to achieve the outcomes that matter. This will build on the existing work being done through the Social Movement for Life programme and community cohesion commissioning, as well as the Tower Hamlets Together Stakeholder Council and the stakeholder engagement on 'health creation' that has been carried out by Tower Hamlets Council for Voluntary Services.

In addition, there is already a range of initiatives through which residents **identify issues** (Healthwatch's Community Intelligence; Tower Hamlets Together's Community Research Network; a range of public and patient participation groups; direct reporting to elected members) **recruit others**

(volunteers and volunteering opportunities) and **improve health and wellbeing**. We will build on the work already undertaken by the Tower Hamlets Together User and Stakeholder Focus Workstream to support and join up these initiatives. We will ensure that the Health and Wellbeing Board have a repository of the insights that are gathered and that there is a clear pathway for residents to become more involved in improving health and wellbeing.

3.14 What is the overall plan for the year?

The Tower Hamlets Healthy Communities contract is currently out to tender and will be awarded in July, with the contract due to start in October. The first 6 months of the contract will be spent engaging and planning with the identified communities, and by March 2018 action plans will be in place in a number of local areas around the borough, setting out how residents plan to improve health and wellbeing locally.

In the next 6 months we will build on the work already done by The Tower Hamlets Together User and Stakeholder Focus Workstream to map out the ways that residents' issues are currently being identified in order to ensure a more joined up approach and a reduction in duplication. We will then create a repository for these insights, owned by the Health and Wellbeing Board and accessible to the public, and ensure that action is taken in response to these issues (see Action 1.2) and that actions taken are feedback to residents (see Action 1.3).

3.15 What are we going to do in the next three months?

We will conduct a review of the issues raised through Members Enquiries, so that the new Healthy Communities Programme builds on existing intelligence about what matters to residents. We will review the work already done by Tower Hamlets Together, identify any gaps and agree the next steps for this workstream.

3.16 How will we measure success?

The Healthy Communities Programme will be evaluated against the outcomes within the Health and Wellbeing Strategy, including whether more people feel in control of their health and informed to make positive changes; support each other around their health and wellbeing; take joint action on issues that affect their health and wellbeing; and get involved in shaping local services. We will also measure levels of engagement with the range of public and patient engagement groups, as well as levels of volunteering.

3.2.1 Action 1.2 (p13)

- 3.2.2 Implement a programme across the partnership to promote a culture in their organisations that empowers people to be in control and informed about how to improve their health
- 3.2.3 What will we have achieved by the end of March 2018?
 - Partner organisations pledge to support Communities Driving Change

- Partner organisations clearly promote they ways that residents can drive change
- Partner organisations regularly feedback to residents on how residents have driven change
- Partner organisations support the delivery of initiatives that empower people to improve their health, for example Making Every Contact Count and Integrated Personal Commissioning

Tower Hamlets Council for Voluntary Service have already been working with partnership organisations to help them to understand the health creation approach and the role that the statutory sector needs to play in order to allow communities to drive change. We will work towards a pledge or set of principles that partner organisations can sign up to, to show their commitment to empowering people to be in control and informed about how to improve their health and wellbeing.

Tower Hamlets Together' User and Stakeholder Focus workstream have already been working in this area, mapping out the ways in which partner organisations currently engage and empower people. We will build on this this work, encouraging partner organisations to clearly promote the ways in which residents can engage with them, as well as regularly feeding back information to residents to let them know what has changed as a result of their input.

Beyond March 2018 we will look to see whether partnership organisations can adopt a unified approach to the way they engage and empower local people.

3.2.4 What is the overall plan for the year?

We will hold a public event at one of the Healthwatch quarterly events, which will give residents the opportunity to engage with organisations from across the partnership to discuss how they would like to better engage with statutory organisations. We will then organise a workshop at one of the Tower Hamlets Together staff events, which will share what is already known as a result of the Tower Hamlets Together work, as well as feeding back the comments from the Healthwatch event. We will use the staff event as an opportunity to look at organisational culture and how organisations, and individuals within them, currently empower local people to be in control and informed about their health, as well as what could be done differently.

We will also ensure that existing work to empower people to be in control and informed to improve their health and wellbeing, such as work on self-care, Making Every Contact Count, and Integrated Personal Commissioning are promoted across the partnership.

3.2.5 What are we going to do in the next three months? We will scope out the dates and content for the proposed workshops.

3.2.6 How will we measure success?

Through attendance and feedback from participants at the events as well as the number of partner organisations who commit to support communities driving change, as well as the uptake of specific empowerment initiatives such as Making Every Contact Count and Integrated Personal Commissioning.

3.31 Action 1.3 (p13)

3.32 Engage local residents with the work of the Board and to deliver this strategy by:

- hosting an event in each area at least one month prior to our Health and Wellbeing Board meetings
- following this up with a further meeting with the public to report back
- using social media to communicate more regularly and creatively with a wider range of local people.

3.33 What will we have achieved by the end of March 2018?

- Residents engaged in shaping engagement with the Board
- Process for engaging with the Board established and publicised
- Process for the Board feeding back to residents established and publicised
- Board Members using social media to engage residents on Board topics

There is already a process set up by which Healthwatch hosts a public event in a different area prior to each of the Health and Wellbeing Board meetings, to feedback information from the previous meetings as well as to gather new insights. Work has also been done by the Tower Hamlets Together communications team to align messaging across the partnership. By the end of March 2018 we will ensure this is a well-publicised process, with the Health and Wellbeing Board page on the Council's website making it clear how people can engage with the work of the Board as a whole, as well as with the work of individual partnership organisations. Board Members will be regularly using social media to promote the topics being discussed by the Board as well as opportunities for residents to get involved.

3.34 What is the overall plan for the year?

We will engage with the 30 residents who indicated, through the consultation on the Health and Wellbeing Strategy that they would like to get more involved. We will invite them to shape the specific actions that we take to better engage local residents with the work of the Board. We will share insights gained from the residents on how they would like to be engaged with the Board. We will update the Health and Wellbeing Board' webpage, taking advice from the residents we have engaged, to ensure that the information that is provided is meaningful and accessible and local people, and will work to expand the Tower Hamlets Together Communications Plan to enable it to encompass communications relating to the Health and Wellbeing Board.

3.35 What are we going to do in the next three months?

We will engage with the residents identified above to agree the best way to engage a wider range of residents. We will develop a plan to update the Health and Wellbeing Board webpage on the council's website to make it

clear how people can engage, both with the Health and Wellbeing Board as a whole, as well as with each of the partner organisations.

3.36 How will we measure success?

We will monitor the number of people who attend the Healthwatch events and Board meetings as well as the numbers who engage in other ways.

4. COMMENTS OF THE CHIEF FINANCE OFFICER

- 4.1. The Communities Driving Change programme is fully funded from the Public Health Grant. The programme is expected to cost £800K per year plus a £50K support cost in year 1.
- 4.2. The ongoing support costs after year 1 is yet to be ascertained but it is expected that this would be managed/monitored in line with LBTH's financial management policy.

5. LEGAL COMMENTS

- 5.1. Section 116A of the Local Government and Public Involvement in Health Act 2007 places a duty on the Health and Wellbeing Board ('HWB') to prepare and refresh a joint strategic health and wellbeing strategy in respect of the needs identified in the Joint Strategic Needs Assessment, so that future commissioning/ policy decisions are based on evidence. The duty to prepare this plan falls on local authorities and the Clinical Commissioning Group, but must be discharged by the HWB. It is therefore consistent with this duty that the HWB receives this report on the action plan so that it can review how this part of the Strategy is being discharged.
- 5.2. With regard to Action 1.1 this involves engagement with residents. If this engagement is considered to be consultation then any such should comply with the following criteria: (1) it should be at a time when proposals are still at a formative stage; (2) the Council must give sufficient reasons for any proposal to permit intelligent consideration and response; (3) adequate time must be given for consideration and response; and (4) the product of consultation must be conscientiously taken into account. The duty to act fairly applies and this may require a greater deal of specificity when consulting people who are economically disadvantaged. It may require inviting and considering views about possible alternatives.
- 5.3. In carrying out its functions, the Council must comply with the public sector equality duty set out in section 149 Equality Act 2010, namely it must have due regard to the need to eliminate unlawful conduct under the Equality Act 2010, the need to advance equality of opportunity and to foster good relations between persons who share a protected characteristic and those who do not.

6. ONE TOWER HAMLETS CONSIDERATIONS

6.1. Communities coming together to drive change is likely to have a positive impact on cohesion.

7. <u>BEST VALUE (BV) IMPLICATIONS</u>

7.1 One of the drivers shaping the strategy is the cost pressure on the health and care economy. Communities coming together to drive change is likely to have implications around prevention and reducing demand for future health and care services. Best value will be an important discussion point for the delivery group and Health and Wellbeing Board over the next three years.

8. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

8.1 Communities may wish to drive change for environmental improvements. Empowering residents to take action on their own health and wellbeing may reduce travel trips to seek professional healthcare advice which could improve environmental sustainability.

9. RISK MANAGEMENT IMPLICATIONS

9.1 The actions proposed will be carried out within existing budgets and there are no specific risks identified.

10. CRIME AND DISORDER REDUCTION IMPLICATIONS

10.1 Improving health and wellbeing may have a positive impact on crime and disorder reduction.

Appendices and Background Documents

Appendices

NONE

Background Documents

If your report is a decision making report, please list any background documents not already in the public domain including officer contact information.

NONE

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