


Health and Wellbeing Board Wednesday 20 th December 2017	 Tower Hamlets Health and Wellbeing Board
Report of the London Borough of Tower Hamlets	Classification: Unrestricted
Health and Wellbeing Strategy – Communities Driving Change	

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Executive Key Decision?	No

Executive Summary

This report provides an update on three partnership work programmes designed to ensure communities drive change and are central to our health and care system.

The Healthy Communities tender has been awarded, and the programme went live on 1st October 2017. In its initial phase, the programme will work with local people in each of the four localities to identify natural neighbourhoods where local action can positively impact on health and wellbeing.

The Community Insight Network was launched on 31st October 2017. The network provides a coordinating and support function to local people trained in participatory research approaches. This enables them to develop and make best use of their skills. It also provides a platform to enable coproduced approaches to service delivery and commissioning across Tower Hamlets Together.

Healthwatch has developed a proposal for a joint repository of patient experience and community feedback on health and social care services and support. This builds on the existing repository of Healthwatch reports and national reports, websites and other intelligence sources. The repository incorporates a coding matrix, monitors dignity, equality and safety, and flags any potential safeguarding risks.

Recommendations:

The Health and Wellbeing Board is recommended to:

1. Review the Communities Driving Change priority update

1. REASONS FOR THE DECISIONS

- 1.1 The updates on three projects in this paper all relate to the Health and Wellbeing Strategy priority, Communities Driving Change, objective:

Develop and implement a 'Health Creation' programme with residents to identify issues impacting on health and wellbeing, and develop and lead new ways to improve health and wellbeing locally.

2. ALTERNATIVE OPTIONS

- 2.1 Without progressing these critical projects, the Health and Wellbeing Board, its members and networks would fail to realise the ambition within the Health and Wellbeing Strategy for Communities Driving Change.

3. DETAILS OF REPORT

- 3.1 The Healthy Communities tender has been awarded to the following organisations:

- North West Locality – the Young Foundation
- South West Locality – MyTime Active
- North East Locality – Bromley by Bow Centre
- South East Locality – Poplar and Limehouse Network

- 3.2 In consultation with providers, the programme has been rebranded to better reflect the aspirations of the Health and Wellbeing Strategy:



- 3.3 The Community Insight Network launched its knowledge sharing forum on 31st October 2017. The event was well attended by stakeholders across the Tower Hamlets Together partnership and featured external presenters to talk about participatory appraisal research. Critically it brought together local people with an interest and experience in community research.
- 3.4 It is envisaged that this forum will provide opportunities for skills development and maintenance. It is also a platform to better inform each other of community research activity within the borough, consider how to adopt a quality assurance tool, engage in the evaluation of community research within the borough, and link with the Healthwatch Community Insight Repository.

- 3.5 The Healthwatch Community Insight System involves local residents gathering feedback, that feedback is reviewed by local residents who agree priorities for more in-depth projects and research, they undertake the research, review it and make recommendations for improvement. Where possible they then present the findings and recommendations to commissioners and providers.
- 3.6.1 The existing Healthwatch Community Insight Repository provides a single, simple to use, community managed system that:
- Enables the processing of vast quantities of information, qualitative and quantitative, resulting in a large, robust evidence base of user and resident views (Healthwatch Tower Hamlets has processed some 15,000 items during 2017 using this system. Our aspiration for a joint system would be to process in excess of 50,000 separate pieces of information.)
 - Features a coding matrix that contains broad categories (limiting selection ambiguity) and is based on the care pathway, enabling identification of service and support gaps. This allows us to identify more effectively the points in the care pathway where patients or users are experiencing problems.
 - Produces automated trends analysis reports on date, source, origin, service name or type, condition, commissioner, locality, cluster/hub, demography, keywords, or any combination of criteria. Runs 'league table' style reports to identify best practice.
 - Monitors dignity, equality and safety/risk and flags potential safeguarding incidents;
 - Helps to build a repository of reports, websites and other intelligence resources through a simple tagging system ensuring that we learn from and build upon existing intelligence;
 - Is comprehensive, covering stakeholder management and participation, mapping and signposting, case management, activities and events, volunteer recruitment and supervision, service user experience, impact measurement and 360 degree feedback;
 - Includes a comprehensive CRM (used by Healthwatch nationwide) facilitating stakeholder management and participation, mapping and signposting, advocacy case management, activities and events, volunteer recruitment and supervision, impact measurement and stakeholder feedback.
 - Can be accessed remotely by multiple users simultaneously through a virtual desk top; and
 - May be locally customised to meet specific requirements.
- 3.7 Health and Wellbeing Board partners are asked to consider creating a joint repository of patient experience and community feedback on health and social care services and support. Key benefits would be:

- To enable local people to be involved in the design, gathering, coding, reporting and presentation of community intelligence;
- To build and share intelligence that can be accessed and interrogated quickly for a wide range of purposes and that can measure progress towards THT integrated care outcomes;
- To avoid duplication and learn and build from existing community intelligence before making a decision to invest in gathering more;
- To ensure greater evenness of quality of information gathered;
- To report back to the local community the difference that their involvement has made to the health and wellbeing of Tower Hamlets residents improving their understanding of the health system and giving them a greater sense of responsibility for managing limited resources.

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. The Communities Driving Change priority aims to target action to improve health and reduce health inequalities where the need is greatest by using coproduction and participatory appraisal techniques to better understand and respond to the needs of the local population.

7. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

- 7.1 Coproducing local action for better health and wellbeing, considers improving the health-related aspects of place, including access to open spaces, improving air quality and other environmental considerations.

8. RISK MANAGEMENT IMPLICATIONS

- 8.1. Actions proposed will be carried out within existing budgets and no specific risks are identified

9. CRIME AND DISORDER REDUCTION IMPLICATIONS

- 9.1 Coproduction and community research may have an impact on both health and crime and disorder.

10. EFFICIENCY STATEMENT

- 10.1 Not applicable

Linked Documents, Appendices and Background Documents

Linked Documents

- [Tower Hamlets Together: Tower Hamlets Health and Wellbeing Strategy, 2017-2020.](#)

Appendices

- None

Background Documents

- None

Officer contact details for background documents:

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