

Health and Wellbeing Board 26 April 2018	
Report of the London Borough of Tower Hamlets	Classification: Unrestricted
Health and Wellbeing Strategy – Communities Driving Change	
Health and Wellbeing Strategy – Healthy Place	
Health and Wellbeing Strategy – Employment and Health	

Lead Officer	Somen Banerjee, Director of Public Health
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Executive Key Decision?	No

Executive Summary

This paper sets out the action plan update and rationale for the Health and Wellbeing Strategy priorities 1-3.

Priority Area One: Communities Driving Change

Action 1. 1

We aim to implement an asset-based community development 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
- encourages services delivered across the partnership to be responsive to the priorities of local residents

Priority Area Two: Healthy Place

Action 2. 1

We acknowledge that multifaceted action is required against the obesogenic environment that exists in Tower Hamlets: the built environment determines both physical activity and healthy food consumption. In 18/19 we will focus on developing a built environment that encourages walking as part of active travel and leisure. We will further develop established ways of working with local fast food outlets, and other catering services, to improve the food offer to local residents.

Action 2.2

Continue to support the council's Air Quality Plan and implement an air quality

communications campaign across the partnership targeted at residents to:

- increase awareness of poor air quality, how to minimise exposure and adopt less polluting behaviours
- introduce pledges from organisations to minimise their impact on air pollution

Priority Area Three: Employment and Health

Action 3.1

We will focus on integrating available resources from health and employment services for groups where there is potential for employment to have a considerable impact on their health and wellbeing:

- People with a mental health diagnosis
- People with a learning disability
- People who are parents of young children

Recommendations:

The Health and Wellbeing Board is recommended to:

1. Review and approve the 18/19 action plan for:
Priority 1: Communities Driving Change
Priority 2: Healthy Place
Priority 3: Employment and Health

1. REASONS FOR THE DECISIONS

The Health and Wellbeing Board has agreed that action plans against the five priorities in the Health and Wellbeing Strategy would be determined on an annual basis. This enables strategic action to develop on the basis of what has gone before, and where the Board's support can drive action.

This paper sets out the 18/19 action plans for:
Priority 1: Communities Driving Change
Priority 2: Healthy Place
Priority 3: Employment and Health

2. ALTERNATIVE OPTIONS

- 2.1 Without an action plan updated to the current context, the Health and Wellbeing Board, its members and networks would fail to realise the ambition within the Health and Wellbeing Strategy.

3. DETAILS OF REPORT

3.1 Priority Area One: Communities Driving Change

Action 1. 1

We aim to implement an asset-based community development 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*
- *encourages services delivered across the partnership to be responsive to the priorities of local residents*

3.2 What will we have achieved by the end of March 2019?

- Twelve areas or themes across the borough will be selected for localised work that impacts on health and wellbeing
- Each of the twelve areas will have recruited local residents to coproduce and co-deliver localised action plans
- Services across the partnership will be able to demonstrate how they have adapted in response to the Communities Driving Change programme

3.3 What is the overall plan for the year?

The Communities Driving Change programme is a flagship programme for the Health and Wellbeing Board, commissioned by public health. It provides an adapted version of the *Well Communities*¹ programmed delivered at scale over 3-5years. Four providers (the Young Foundation, MyTime Active, the Poplar and Limehouse Network CIC, the Bromley by Bow Centre) work in each of the localities, with the University of East London providing programme support.

3.4 The providers adopt an asset based community development approach and undertake a two-phased scoping phase - first with stakeholders to identify areas of focus, and then with local residents to coproduce action plans that will impact on the health and wellbeing of communities. The programme will move into its delivery phase from May 2018. Community members are encouraged and supported to take civil action to improve their community's health and wellbeing. In addition to community powered programmes, the programme will enable both community insight to be produced and shared with relevant partners across the partnership to meaningfully influence how they (we) do business.

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

- We will approve twelve coproduced action plans and communicate them across the partnership.

¹ <http://wellcommunities.org.uk/>

3.6 How will we measure success?

- We will coproduce accompanying KPIs and outcomes to the twelve action plans, based on the Tower Hamlets Together Outcomes Framework. These are yet to be determined at this stage of the programme's delivery.

3.7 Are there any further issues to share with the Board at this point?

- Oversight of the Communities Driving Change Programme is through its Steering Group, on which the Health and Wellbeing Board champions (Cllr. Denise Jones, Dianne Barham, Alison Roberts) sit.

3.8 Priority Area Two: Healthy Place

Action 2. 1

We acknowledge that multifaceted action is required against the obesogenic environment that exists in Tower Hamlets: the built environment determines both physical activity and healthy food consumption. In 18/19 we will focus on developing a built environment that encourages walking as part of active travel and leisure. We will further develop established ways of working with local fast food outlets, and other catering services, to improve the food offer to local residents.

3.9 What will we have achieved by the end of March 2019?

- We will have submitted a Project Initiation Document (PID) for Community Infrastructure Levy (CIL) funding to develop walking connectivity routes across the borough, based on the Open Space Strategy and the Green Grid Strategy, supporting documents to the Local Plan
- We will have developed a programme of community engagement that informs the design of the connectivity routes, and supports activation for their use
- We will have applied TfL's Healthy Streets assessment tool to the PID once approved
- We will have established a refreshed Food for Health Awards programme, based on a review and market insights

3.10 What is the overall plan for the year?

In summary, we decided that it would be helpful to build on the work conducted by Land Use Consultants - which identified opportunities for greening projects across the borough, as part of the Green Grid Strategy refresh – by considering how these projects might connect and develop attractive green walking routes through the borough, and encourage access to open space and other key community assets. In doing so we believe we would have positive impact on the following outcomes:

- Increased physical activity
- Improved mental wellbeing
- Reduced loneliness
- Improved air quality / mitigated impact
- Improved accessibility of community assets

- Reduced severance.

3.11 We will invite local residents to support the identification and design of these routes. Where possible, this will involve intergenerational groups and build on the important findings of the 'Neighbourhood perspectives' insight work on loneliness.

3.12 The Food for Health Awards scheme was established in 2011. Since that time Tower Hamlets has complemented that programme by working with local retailers on supply chain factors and commercially viable opportunities for calorie reduction and tracked changing trends in demand factors for these products. It is timely to therefore capitalise on this work by refreshing the Food for Health Awards scheme to be responsive to current and future trends in hot food purchasing with the ambition of reducing overall calorie consumption.

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

In the next three months, the focus will be on developing a draft PID for the connectivity routes and a plan for its supporting community engagement. There will be a completed review of the current Food for Health Awards scheme and market insights.

3.14 How will we measure success?

By monitoring:

- The amount of green space and routes delivered
- The number of people using outdoor space for health and wellbeing (Public Health Outcomes Framework (PHOF) indicator)
- The number of physically active adults (PHOF indicator)
- The number of children in year 6 who are of a healthy weight (PHOF indicator)
- The number of adults social care users and carers who have as much social contact as they would like (PHOF indicator)
- Self-reported well-being (PHOF indicator)

In addition we will collect qualitative data on people's perception of the quality of the physical environment, as well as on their experience of being involved in the decision-making process.

3.15 Are there any further issues to share with the Board at this point?

The Health and Wellbeing Board needs to consider the most appropriate way for it to influence the future allocation of Section 106, Community Infrastructure Levy, and other sources of funding in order to ensure adequate funding is obtained to fund the physical environment improvements that have been prioritised.

3.16 Action 2.2

Continue to support the council's Air Quality Plan and implement an air quality communications campaign across the partnership targeted at residents to:

- ***increase awareness of poor air quality, how to minimise exposure and adopt less polluting behaviours***

- ***introduce pledges from organisations to minimise their impact on air pollution***

3.17 What will we have achieved by the end of March 2019?

- The Air Quality Action Plan 2018/19 actions will be fully implemented
- The Health and Wellbeing Board will have responded to its named actions within the plan:
 - AQAP05: Support patients with heart and lung conditions by providing air quality advice to discharged patients, particularly vulnerable & those with heart/lung conditions. This would be a continuation of the 'Protecting Patient' work stream from the Barts Project.
 - AQAP08: Air quality at schools – Roll out the cleaner air for schools program that was previously run in 2 schools, to more schools in high pollution areas.
 - AQAP14: Work with Residential Providers to develop and implement a strategy for disseminating air quality information to their tenants.
 - AQAP15: Use Health and Wellbeing Board to get existing and future public sector and RP partners to pledge to increase the number of, electric, hybrid, and cleaner vehicles in their fleets.
- We will have built momentum with an air quality communications campaign, in-line with pan-London messages, in order to:
 - Encourage people to adopt less polluting behaviours
 - Advise people, including high-risk groups, on measures they should take to protect their health in areas or on days of particularly high air pollution

3.18 What is the overall plan for the year

- We will be working with the Air Quality Partnership Board to strengthen links between the two boards and deliver partnership activity against the air quality action plan
- We will apply best evidence guidance from the Association of Directors of Public Health (ADPH) to a momentum-building air quality campaign within Tower Hamlets, to include:
 - Promoting the existing Air Quality alerts to residents, and 'what to do when' advice
 - A programme of play streets to demonstrate benefits of car free areas
 - Working with schools to design communications products
- The Health and Wellbeing Board will contribute to air quality consultation and support advocacy activity.

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

In the first three months we will focus on developing plans for an ongoing and measurable communications and campaign plan. We will also invite transport representatives from each of the member organisations of the Health and Wellbeing Board to a workshop to discuss fleet shift to lower emission alternatives.

3.20 How will we measure success?

By monitoring levels of air pollution in the borough, particularly those in areas of high risk, such as schools.

3.21 Are there any further issues to share with the Board at this point?

The Health and Wellbeing Board needs to consider how it works with the Air Quality Partnership Board and supports its priorities.

3.22 Priority Area Three: Employment and Health

Action 3.1

We will focus on integrating available resources from health and employment services for groups where there is potential for employment to have a considerable impact on their health and wellbeing:

- *People with a mental health diagnosis*
- *People with a learning disability*
- *People who are parents of young children*

3.23 What will we have achieved by the end of March 2019?

- We will have developed an Action to Employment Action Plan for people with a mental health diagnosis, which will set out specific commissioning recommendations.
- We will have commissioned and mobilised a service supporting people with Learning Disabilities into employment and have a set of employers with whom we have identified suitable positions for recruitment.
- We will have developed a volunteering programme within children's centres to support parents of young children back into employment and bid for additional funding.
- We will work with the Department of Work and Pensions Work and Health programme to maximise the benefit for Tower Hamlets residents

3.24 What is the overall plan for the year?

Work to support the three identified groups is already underway and at three stages of development:

- People with a mental health diagnosis – early stages of commissioning plan development
- People with a learning disability – developing specification to commission work
- People who are parents of young children – maintaining skills development programmes and develop new volunteering programmes

There are certain activities that will support each of these workstreams: mapping the employment support offer and provisions to address poverty across Tower Hamlets, and having discussions with employers about the suitability of available positions. Joint oversight of these programmes will

enable a shared an efficient approach. We will also continue to shape and ensure effective local delivery of the Department of Work and Pensions Work and Health programme.

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

- We will have taken an outline proposal of the Action into Employment Action Plan to the Mental Health Partnership Board
- We will have met with the providers of the Work and Health programme to determine opportunities to shape its delivery
- We will have completed the tender process for the new providers of the reconfigured services for people with Learning Disabilities.
- We will have run a Job Fair in partnership with the Job Centre Plus and the Early Years Integrated Programme.

3.26 How will we measure success?

- Children in low income families (under 16s) (PHOF indicator 1.01ii)
- Gap in employment rate between those with a learning disability and the overall employment rate (PHOF indicator 1.08ii)
- Gap in employment rate between those in contact with mental health services and the overall employment rate (PHOF indicator 1.08iii)
- Percentage of people aged 16-64 in employment (PHOF indicator 1.08iv)
- Number of parents who took up volunteering opportunities, completed adult learning courses or completed ESOL training

4. COMMENTS OF THE CHIEF FINANCE OFFICER

- 4.1. Expenditure relating to the 2018/19 action plan will be contained within existing revenue budgets (including Public Health Grant funding) and capital budgets (including Community Infrastructure Levy and Section 106 funding).

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 the Council and the Clinical Commissioning Group, but must be discharged by the HWB.
- 5.2. The JSNA must assess current and future health and social care needs within the health and wellbeing board area for the whole population, and ensure that mental health receives equal priority to physical health. The HWB will therefore need to consider wider social, environmental and economic factors that impact on health and wellbeing – such as access to green space, the impact of climate change, air quality, housing, community safety, transport, economic circumstances, employment. The priorities outlined within the report are therefore consistent with the HWB's duties.

- 5.3. In preparing this strategy, the HWB must have regard to whether these needs could better be met under s75 of the National Health Service Act 2006. Further, the Board must have regard to the Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies published on 26 March 2013, and can only depart from this with good reason.
- 5.4. In this report, officers have advised that, by the end of March 2019, they will have submitted PIDs, in line with the Infrastructure Delivery Framework process, for approval to access CIL monies to meet their priorities. CIL is a pounds per square metre charge, introduced by the Planning Act 2008 on most new development and must be used to help deliver infrastructure to support the development of an area. It can be used to provide new infrastructure, increase the capacity of existing infrastructure or to repair failing existing infrastructure, if this is necessary to support development.
- 5.5. When considering the recommendation above, and when finalising the strategy, regard must be given to the public sector equalities duty to eliminate unlawful conduct under the Equality Act 2010. The duty is set out at Section 149 of the 2010 Act. It requires the Council, when exercising its functions, to have 'due regard' to the need to eliminate discrimination (both direct and indirect discrimination), harassment and victimization and other conduct prohibited under the Act, and to advance equality of opportunity and foster good relations between those who share a 'protected characteristic' and those who do not share that protected characteristic

6. ONE TOWER HAMLETS CONSIDERATIONS

- 6.1. The Health and Wellbeing Strategy priorities aim 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

Appendices and Background Documents

Appendices

- None

Background Documents

- None

Officer contact details for background documents:

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