

Committee/Meeting: Cabinet	Date: 8 th May 2013	Classification: Unrestricted	Report No: CAB 109/123
Report of: Assistant Chief Executive [Legal Services] Originating officer(s) Louise Russell (Service Head, Corporate Strategy & Equality) Nadir Ahmed (Strategy, Policy & Performance Officer)		Title: Towards a Healthier Tower Hamlets: Health and Wellbeing Plan Wards Affected: All	

Lead Member	Mayor Lutfur Rahman Cllr Abdul Asad
Community Plan Theme	A Healthy and Supportive Community One Tower Hamlets
Strategic Priority	Reduce health inequalities and promote healthy lifestyles; Enable people to live independently; Provide excellent primary and community care; Keep vulnerable children, adults and families safer, minimising harm and neglect; and Reducing Inequalities

1. **SUMMARY**

- 1.1 This report brings forward the final version of the Tower Hamlets Health & Wellbeing Board's Health and Wellbeing Strategy, entitled *Towards a Healthier Tower Hamlets: Health and Wellbeing Plan*.

2. **DECISIONS REQUIRED**

The Mayor in Cabinet is recommended to:-

- 2.1 Endorse *Towards a Healthier Tower Hamlets: Health and Wellbeing Plan*, contained in Appendix 1, and the delivery plan in Appendix 2.

3. **REASONS FOR THE DECISIONS**

- 3.1 The local Health and Wellbeing Board has a statutory duty under the *Health and Social Care Act 2012* to produce a Health and Wellbeing Strategy for the local area.
- 3.2 The Health and Wellbeing Strategy drives the collective actions of the NHS and local government, both commissioners and providers, and engages communities in the improvement of their own health and wellbeing.
- 3.3 The council, the Tower Hamlets Clinical Commissioning Group (CCG) and the NHS Commissioning Board will need to have regard to the Health and Wellbeing Strategy as they draw up their commissioning plans so that their plans are fully aligned with the agreed priorities in the strategy. Cabinet is being asked to endorse the proposed strategy ahead of its full adoption by the Health and Wellbeing Board.

4. ALTERNATIVE OPTIONS

- 4.1 Alternative options would be not to endorse the Plan at this time or to amend the strategy and delivery plan before endorsement. These options are not recommended as the strategy and delivery plan are based on a robust evidence base, expert advice, have been developed following extensive consultation with local people, and agreed by the Council's shadow Health and Wellbeing Board.

5. BACKGROUND

- 5.1 The *Health and Social Care Act 2012* introduced a requirement for the establishment of Health and Wellbeing Boards and for those boards to produce a Health and Wellbeing Strategy.
- 5.3 A review of intelligence and extensive consultation identified four priorities for the strategy:
- Maternity and early years;
 - Healthy lives;
 - Mental health; and
 - Long term conditions and cancer.
- 5.4 Those four priorities have been developed to provide an over-arching framework to ensuring a strategic response to the health and social care needs of the local population. This has resulted in *Towards a Healthier Tower Hamlets: Health and Wellbeing Plan*, contained in **Appendix 1**, the proposed Health and Wellbeing Strategy for Tower Hamlets. The Strategy

has been developed with the shadow Health and Wellbeing Board and will be submitted to the full Board at its inaugural meeting.

- 5.5 Following the production of the draft strategy, a delivery plan was developed to work towards the objectives of the strategy. This delivery plan also identified outcome measures that, in conjunction with the associated baseline data and targets, will enable progress against the aims of the strategy to be measured. The delivery plan is contained in **Appendix 2** to this report.

6. BODY OF REPORT

- 6.1 The vision of the proposed strategy is to:
Improve the health and wellbeing through all stage of life to:
- Reduce health inequalities
 - Promote choice, control and independence
- 6.2 Within the context of this broad vision, the Board and those engaged in the course of the development of the strategy identified some key principles:
- Focussing on prevention, early identification and early intervention
 - Putting patients first
 - Looking across the life course
 - Taking a family centred approach
 - Ensuring 'health in all policies'
 - Understanding and addressing diversity
 - Building on community potential and capacity
- 6.3 Following the development of the vision and principles, officers reviewed evidence from the local Joint Strategic Needs Assessment; reviewed existing intelligence from service users, carers, hard-to-reach groups and practitioners; engaged with key groups in the borough; and carried out an online survey that invited the views of the general public.
- 6.4 Those consulted included the local LGBT community forum, Rainbow Hamlets; the Carers Forum; the Interfaith Forum; the Youth Council; practitioners groups; statutory agencies; the Tower Hamlets Involvement Network and the general public.
- 6.5 This exercise led to the identification of four priorities:
- Maternity and early years;
 - Healthy lives;
 - Mental health; and
 - Long term conditions and cancer.

- 6.6 **Maternity and early years – a healthy start for every child** – Maternal health, before, during and after pregnancy, and the first few years of a child's life are a critical period for a child's longer term health and well-being. The accumulation of social, economic, psychological and environmental influences during the early years 'cast a long shadow' over the subsequent social development, behaviour and health and wellbeing of the individual. Given the level of health inequalities within the borough, a focus on maternity and early years within the strategy is vital to ensure that we improve the health and wellbeing outcomes for our residents in future years.
- 6.7 **Healthy lives – living healthier together** - Living a healthy life prevents illness and enhances wellbeing. We know that people who do not have healthy lifestyles have a risk of dying early that is around four times more than those who do. We also know that they tend to have worse mental health. Local authorities, health services and others can do much to support and promote healthy lives. It also involves working alongside local communities, and the individuals, families and institutions, within them, to develop locally led approaches. Although there have been improvements in recent years, we know that there are higher levels of lifestyle risk factors in Tower Hamlets compared to elsewhere. Comparison of national and local intelligence tells us that within the Tower Hamlets population there are higher levels of tobacco use, unhealthy diet, physical inactivity, problem drinking in those who drink alcohol, risky sexual behaviour and drug use.
- 6.8 **Mental health and wellbeing – no health without mental health** - Good mental health and wellbeing is fundamental to quality of life: it impacts on all the aspects of a person's life. With a high prevalence of risk factors in Tower Hamlets for poor mental health, including deprivation, inequality, low levels of employment and less access to green space, the proportion of people with mental health conditions are thought to be higher than the national prevalence rates.
- 6.9 **Long term conditions and cancer – early identification and person centred care** – Long term health conditions and cancer have a significant impact on quality of life; reducing the ability of those experiencing them to participate in employment, social and family life, contributing to the development of disability, reducing life expectancy and affecting mental wellbeing. Tower Hamlets has some of the highest premature death rates from three of the most life threatening conditions; cancer, cardiovascular (heart) disease, and lung disease. People with long term conditions, cancer and disabilities often report that there is a need for health and social care services to be more joined up and integrated in their approach to delivering care and support, and take a holistic and person centred approach to supporting them.

- 6.10 Early identification of risk and encouragement to healthier lifestyles are key to addressing conditions such as diabetes. This strategy also seeks to improve rehabilitation for those with long term conditions and ensure proactive planning for deteriorations and management of last years of life.
- 6.11 Not surprisingly, given higher levels of long term conditions, Tower Hamlets has a high level of carers – an estimated 9,000 people locally provide 20 or more hours of unpaid care per week. Carers’ needs have been recognised in the strategy by seeking to ensure that carers receive the support they require to continue to fulfil this vital role.
- 6.10 Actions have been identified under each of the priorities that will deliver the vision of the strategy. These actions are included in Appendix 2, the delivery plan. Actions for the Mental Health and Wellbeing section of the delivery plan are being delivered as part of a wider mental health strategy and will be included in an updated version of the delivery plan once the mental health strategy is finalised.
- 6.11 The delivery plan also identifies measures that can be used to track the success of the strategy in fulfilling its vision. Baseline data and targets for future years have also been provided where possible. These will form the basis of Health and Wellbeing Board’s regular monitoring of the strategy.
- 6.12 The strategy contributes to the Community Plan theme of *A Healthy and Supportive Community*, contributing to all the strategic priorities that sit beneath it. These strategic priorities also loosely correlate with the key areas of the NHS Mandate. It also contributes to the *One Tower Hamlets* strategic priority to *Reduce Inequalities*.

7. COMMENTS OF THE CHIEF FINANCIAL OFFICER

- 7.1 The establishment of the Health & Wellbeing Board presents an opportunity to transform health and wellbeing in Tower Hamlets by joining up council services with those provided by local health services and other partners. While the primary goal would be to improve health and wellbeing opportunities for residents, there may also be indirect financial efficiencies that could be realised through a joined up strategy – these are currently difficult to quantify.
- 7.2 The Health & Wellbeing Strategy brings together all of the things that are important for the health and wellbeing of our residents and sets our priorities for the future.

7.3 There are no specific financial implications arising directly from the recommendations in this report.

8. CONCURRENT REPORT OF THE ASSISTANT CHIEF EXECUTIVE (LEGAL SERVICES)

8.1 Section 116A of the Local Government and Public Involvement in Health Act 2007 came into force on 1 April 2013. It requires the Council and its partner clinical commissioning groups, *through the health and wellbeing board*, to prepare a strategy for meeting the needs identified in the joint strategic needs assessment (**JSNA**). This strategy is referred to as the joint health and wellbeing strategy (**JHWS**).

8.2 Section 194 of the Health and Social Care Act 2012 also came into force on 1 April 2013 and requires the Council to establish a Health and Wellbeing Board ("**HWB**") for its area. Section 196 of the 2012 Act expressly provides that the functions of a local authority and its partner clinical commissioning groups of preparing the JSNA and the JHWS are to be exercised by the HWB established by the authority.

8.3 The JHWS may include a statement of the views of the Council and its partners on how arrangements for the provision of health-related services in Tower Hamlets could be more closely integrated with arrangements for the provision of health services and social care services.

8.4 When preparing the joint health and wellbeing strategy, the Council and its partner clinical commissioning groups must meet the following requirements—]

- Consideration is required to be given to the extent that the needs could be met more effectively by means of a partnership agreement made under section 75 of the National Health Service Act 2006.
- Regard must be had to the mandate published by the Secretary of State under section 13A of the National Health Service Act 2006 and to guidance issued by the Secretary of State.
- The Local Healthwatch organisation for Tower Hamlets must be involved in preparation of the Strategy, once the Council has entered into local healthwatch arrangements under section 222 of the LGPIHA 2007. This is not required to be in place until April 2013.
- People who live and work in Tower Hamlets must be involved in preparation of the Strategy.

- 8.5 The statutory guidance published by the Department of Health on 26 March 2013 does not mandate any standard format for LHWSs as they are intended to be unique to the local area. In relation to setting priorities based on the JSNA, the statutory guidance specifies that: “This is not about taking action on everything at once, but about setting a small number of key strategic priorities for action, that will make a real impact on people’s lives. JHWSs should translate JSNA findings into clear outcomes the board wants to achieve, which will inform local commissioning – leading to locally led initiatives that meet those outcomes and address the needs”.
- 8.6 When developing the JHWS through the HWB, the Council must have due regard to the need to eliminate unlawful conduct under the Equality Act 2010, the need to advance equality of opportunity and the need to foster good relations between persons who share a protected characteristic and those who don’t. Information relevant to these considerations is set out in the One Tower Hamlets section of the report.

9. ONE TOWER HAMLETS CONSIDERATIONS

- 9.1 The borough has a vibrant and diverse population, including a large BME population, a young population and a very active faith community. At the same time, poverty is also widespread and unemployment is above the London average. These factors often impact on health outcomes – e.g. poorer parts of the borough have a lower life expectancy than more affluent parts. One of the key visions of the strategy is to reduce health inequalities by focussing the strategy on areas where the Health and Wellbeing Board has the ability to make transformational changes to the health and wellbeing of local residents. An equality analysis has been undertaken and has informed the strategy and delivery plans – it will be further used to set targets for equality groups to reflect areas of disadvantage identified.
- 9.2 The consultation to date has included a wide variety of stakeholders, health practitioners and residents and elicited a wide range of responses. This has included, amongst others, Rainbow Hamlets, faith groups, local health professionals and statutory agencies. A key principle of the strategy is to build on local community capacity and skills to enable communities to play a key role in the delivery of the strategy.

10. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

- 10.1 Although there are no immediate environmental implications, the strategy does reference what the council is doing in relation to air pollution.

11. RISK MANAGEMENT IMPLICATIONS

11.1 There are no immediate risk management implications arising from this report. Risks relating to the achievement of the strategies objectives are monitored through the appropriate organisation's risk registers.

12. CRIME AND DISORDER REDUCTION IMPLICATIONS

12.1 Crime and disorder, anti-social behaviour in particular, are known to impact on the general health and wellbeing of the population.

12.2 The strategy references other strategies that work towards reducing crime and disorder including the Partnership Substance Misuse strategy, the Cumulative Impact policy for the Brick Lane area, the Violence against Women and Girls strategy, and the Community Safety Plan.

13. EFFICIENCY STATEMENT

13.1 Although not a primary purpose of the strategy, the joined-up working and integrated care provide opportunities for financial efficiencies. Where there is the intention of reconfiguring services to realise financial efficiencies, these will be subject to the council's normal procedures in those circumstances.

14. APPENDICES

Appendix 1 – Towards a Healthier Tower Hamlets: Health and Wellbeing Plan

Appendix 2 – Health and Wellbeing Strategy Delivery Plan

Local Authorities (Executive Arrangements) (Access to Information) (England) Regulations 2012

Brief description of "background papers"	Name and telephone number of holder and address where open to inspection.
--	---

None

N/A