


<p style="text-align: center;"><b>Health and Wellbeing Board</b> 6 February 2014</p>	 <p style="text-align: right;">Tower Hamlets <b>Health and Wellbeing Board</b></p>
<p><b>Report of the London Borough of Tower Hamlets</b></p>	<p><b>Classification:</b> Unrestricted</p>
<p style="text-align: center;"><b>Tower Hamlets Health and Wellbeing Strategy 2013-16</b></p>	

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<b>Executive Key Decision?</b>	No

### **Executive Summary**

This report outlines the approach taken to develop the Tower Hamlets Health and Wellbeing Strategy. All Health and Wellbeing Boards have a duty to publish and deliver local health and wellbeing strategies. This strategy has been developed through a partnership approach, consulted on, presented to the CCG Board, Shadow HWBB and endorsed by the Council's Cabinet.

Formal approval of the Health and Wellbeing Strategy and its delivery plans is now sought from the Health and Wellbeing Board. Once approval has been given, the Strategy will then be published.

### **Recommendations:**

The Health and Wellbeing Board is recommended to:

1. Agree the strategy, delivery plans, proposed outcome measures and targets. These will be the measures used to track progress on the plan and on which performance will be reported to the Board. The measures are drawn from the social care, public health and NHS outcomes frameworks to reflect our strategic priorities.
2. Agree the delivery and performance monitoring arrangements set out in section 3 below.

## **1. REASONS FOR THE DECISIONS**

- 1.1 All Health and Wellbeing Boards have a statutory duty under the Health and Social Care Act 2012 to publish and deliver local health and wellbeing strategies.

## **2. ALTERNATIVE OPTIONS**

- 2.1 All Health and Wellbeing Boards are required to publish a health and wellbeing strategy. Alternative options for the content of the strategy have been considered through the consultation and approval process.

## **3. DETAILS OF REPORT**

### **3.1 Introduction**

- 3.1.1 A consultation on the draft Outline Health and Wellbeing Strategy was undertaken during August 2012 through widespread circulation to key stakeholders and local publicity. Responses were sought through an online survey and a revised outline strategy agreed by the Board in September 2012.
- 3.1.2 Delivery Planning activity has since taken place around the key themes, including delivery planning workshops with key stakeholders and discussions around the wider determinants.
- 3.1.3 The strategy has been revised to reflect these and Delivery Plans have been developed for the key themes, with the exception of Mental Health where the delivery plan will be developed in response to the Mental Health strategy which will be completed shortly.
- 3.1.4 The Shadow Board reviewed and agreed a final draft last year. Since then, the Delivery Plans have been finalised and targets for key outcome measures have been set in consultation with key partners.
- 3.1.5 The Strategy, outcome measures and targets have been endorsed by the Council's Cabinet in May 2013 and the borough's Clinical Commissioning Group.
- 3.1.6 A more accessible summary version of the strategy has been drafted and is also attached. Once endorsed by the Board, the Strategy and summary version will be formally published online and communicated via press release and directly to relevant stakeholders. A dissemination/communication plan is being developed.
- 3.1.7 The Board has agreed a set of delivery and performance monitoring arrangements for the Strategy. These are set out in section 3 below.

## **3.2 Key decisions for the Board**

### **3.2.1 The Board is asked to**

- Agree the strategy, delivery plans, proposed outcome measures and targets. These will be the measures used to track progress on the plan and on which performance will be reported to the Board. The measures are drawn from the social care, public health and NHS outcomes frameworks to reflect our strategic priorities.
- Agree the delivery and performance monitoring arrangements set out in section 3 below.

## **3.3 Delivery and Performance Monitoring**

### **3.3.1 A workshop of the HWB Board Strategy sub-group agreed to propose the following arrangements to the Board:**

- There will be arrangements for overseeing delivery of the Delivery Plans , as follows
  - Healthy Lives – group to be set up and chaired by Somen Banerjee;
  - Maternity and Early years – MEY Group of Children and Families Board;
  - Long Term Conditions and Cancer – Integrated Care Board, and additional leads in Council and CCG for relevant issues; and
  - Mental Health – Mental Health Partnership Board
- The Council's Corporate Strategy and Equality team, on behalf of the Strategy sub-group, will liaise with agreed leads to oversee the monitoring of progress of the strategy compiling six monthly reports to the Board on progress with key outcome measures and an annual report on progress against the delivery plans;
- Delivery of cross-cutting activity in the Strategy in relation to wider determinants or enablers will be overseen by the Strategy sub-group which will meet bi-monthly to progress this work, liaising with other Boards and Community Plan Delivery Groups as required. The sub-group's first meeting will focus on taking forward joint work in relation to Housing;
- Performance reports to the Board will ensure performance on key measures is benchmarked annually and targets reviewed for the 2 years ahead;

- Healthwatch will also make regular dashboard reports to each quarterly Board meeting identifying key issues from patient and resident experiences of health and social care services, as well as a more in-depth examination of a key issue related to the HWB agenda; and
- Based on the regular review of performance and patient experience data, the Board may identify areas for improvement and request 'spotlight' sessions on specific issues of concern or local significance. These sessions will seek to understand improvement plans in place and identify areas where partnership working might help to resolve blockages.

#### **4. COMMENTS OF THE CHIEF FINANCE OFFICER**

- 4.1. There are no financial implications of this report as it sets the framework within which the Board would consider prioritisation of available resources.

#### **5. LEGALCOMMENTS**

- 5.1. Section 193 of the Health and Social Care Act 2012 inserts a new s116A into the Local Government and Public Involvement in Health Act 2007, which places a duty on the Health and Wellbeing Board to prepare a joint strategic health and wellbeing strategy in respect of the needs identified in the Joint Strategic Needs Assessment. The duty to prepare this plan falls on local authorities and the Clinical Commissioning Group, but must be discharged by the Health and Wellbeing Board.
- 5.2. In preparing this strategy, the Board 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.
- 5.3. This strategy must be prepared in accordance with the public sector equalities duty to eliminate unlawful conduct under the Equalities 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 do not.

#### **6. ONE TOWER HAMLETS CONSIDERATIONS**

- 6.1 An equalities assurance exercise has been undertaken as part of the strategy development the strategy was informed by a detailed assessment of equalities impacts on health attached as appendices 6 and 7. Key considerations emerging include:

#### **7. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT**

- 7.1 There is a wealth of evidence, most recently compiled and presented within the Marmot review of health inequalities, identifying the considerable impact on health of wider social, economic and environmental impact on health, in particular housing, educational attainment, employment and the physical environment. These are addressed as wider determinants of health within the Health and Wellbeing Strategy.
- 7.2 One specific initiative is the 'Green Grid' which seeks to sustain and create across the borough a network of high quality well-connected open spaces to promote bio-diversity and healthy, active lifestyles. In addition, the Tower Hamlets Partnership encourages walking and cycling through a range of projects and programmes delivering training in schools to encourage students to cycle by equipping them with the necessary confidence, skills and safety training and free adult cycle confidence training for anyone who lives, works or studies in the borough. Schemes are also in place to promote cycling amongst disabled people and traditionally harder to reach groups such as BME women.
- 7.3 Other initiatives already in place include a Healthy Walking Programme, the borough-wide expansion of the Barclays Cycle Hire Scheme, and meeting the targets set through the Community Partnership's Air Quality Action Plan.

## **8. RISK MANAGEMENT IMPLICATIONS**

- 8.1. The Tower Hamlets Health and Wellbeing Strategy is, by its nature, extremely broad. Its success depends on a range of enablers which are considered within the Strategy.
- 8.2. Delivery planning and performance management arrangements have been put in place to ensure delivery of the strategy and they are outlined in this report. The Health and Wellbeing Strategy Sub-Group, which is formed of representatives from partners on the Board, including Healthwatch and voluntary sector representatives, will be key to driving the strategy centrally, as will the groups and leads driving and reporting on each of the four priority areas. The Health and Wellbeing Board will need to play a pivotal role in ensuring that outcomes are met and that challenges are raised where necessary.
- 8.3. Due to the breadth of the strategy and its four delivery plans, there is a risk that the Board could be overburdened with data and reporting. Therefore, it is suggested that the Board instead agrees the suggested monitoring arrangements set out in paragraph 3.3.1 of the report.

## **9. CRIME AND DISORDER REDUCTION IMPLICATIONS**

- 9.1 Health issues, in particular in relation to mental health, alcohol and drugs misuse have a significant impact on crime and disorder. The Health and Wellbeing Strategy identifies key opportunities where it could work with

partners and the Crime and Disorder Partnership, including around substance misuse, domestic abuse and the health needs of sex workers.

## **10. EFFICIENCY STATEMENT**

10.1 The Health and Wellbeing Strategy identifies effective use of shared resources as a key enabler, seeking to increase efficiency through effective partnership working, collaboration over use of resources and assets and integrating health and social care.

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### **Appendices and Background Documents**

#### **Appendices**

- Tower Hamlets Health and Wellbeing Strategy
- Tower Hamlets Health and Wellbeing Summary
- Maternity and Early Years Delivery Plan
- Healthy Lives Delivery Plan
- Long Term Conditions and Cancer Delivery Plan
- Equalities Assurance Checklist
- Equalities Insights

#### **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.

- Consultation responses and insights