

# TOWER HAMLETS TOGETHER

## Tower Hamlets Health and Wellbeing Strategy 2017-2020

**Draft for consultation**

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# FROM THE MAYOR

I am delighted to support the Health and Wellbeing Board in taking this strategy forward.

In Tower Hamlets people start to develop poorer health ten years earlier than the rest of the country.

This is why this strategy is so vital for our borough. It is about partnership working to drive improvement, and how we can place local residents and communities at the centre of this change.

Only by working together can we start to tackle the inequalities we face and improve health and wellbeing for everyone in the borough.



**John Biggs**  
Mayor of Tower  
Hamlets

# FOREWORD

As local residents, we know that Tower Hamlets is a fantastic place to live and work. But as a borough we also face many challenges – and poor health is one of the starkest. Compared to other places we have some of the highest levels of mental health problems and higher rates of many physical illnesses like diabetes, heart disease and stroke.

For us, this is a matter of fairness and social justice. It can't be right that children in our borough are at greater risk of health problems – and that older people are less likely to live as long – as others in more affluent parts of London. Of course, these persistent challenges remain at a time of drastically reduced budgets across all parts of the public sector.

As Chair and Vice Chair of the Health and Wellbeing Board, we are determined that the council and NHS, together with our partners, will prioritise action on some of the most significant challenges in the next three years. We can't do everything at once and hope to have an impact, so we have used evidence to focus on five key themes where through joint leadership we believe we can and must make progress. We will still work hard through our organisations to deliver services and support across the full range of health issues, but the priorities set out in this strategy are where we will particularly focus our leadership as a Board.

Empowering communities to lead their own positive change in health and wellbeing, creating a healthier place and environment, and joining up our local services are all areas where the power of the Health and Wellbeing Board partnership will be critical to success. Employment and health, and children's weight and nutrition are two issues where Tower Hamlets has persistently poor outcomes but through focused effort we can make a huge difference to the physical and mental health of local people.

We can't achieve these ambitious goals alone, so we look forward to working with the public and our partners to deliver positive change in Tower Hamlets.



**Cllr Amy Whitelock  
Gibbs**  
**Chair of Health and  
Wellbeing Board**  
**Cabinet Member for  
Health and Adult  
Services**



**Dr Sam Everington**  
**Vice Chair of Health and  
Wellbeing Board**  
**Chair of NHS Tower  
Hamlets Clinical  
Commissioning Group**

# HELLO & WELCOME

Welcome to the Tower Hamlets Health and Wellbeing Strategy – our aim is to make a difference to the physical and mental health and wellbeing of everyone who lives and works in Tower Hamlets.

To do this, we have brought together those who are in a position to help make that difference. They include local Councillors; the council (including social care, education, housing, environment, public health and employment services); the NHS; community groups; other key partners (including housing providers and the police); and, most importantly, organisations which represent the voice of local people, such as Healthwatch Tower Hamlets. Together we form the Tower Hamlets Health and Wellbeing Board.

We know we face some big health challenges in Tower Hamlets but also that by working together across services – and with our local communities – we can make a positive difference to everyone’s wellbeing in Tower Hamlets. Therefore, we have looked at the evidence and worked hard to find out what needs to be done and plan how we will do it.

**This strategy will tell you:**

- a. what we want to do**
- b. why we have chosen these areas to focus on**
- c. what we plan to achieve.**



# WHAT MAKES FOR GOOD HEALTH?

## Factors of good health

The quality of our lives is strongly dictated by the state of our health. We are all subject to a range of factors which can make the difference between feeling good and feeling poorly. These include our environment (how clean is our air and do we have parks nearby); where we live (the condition of our homes and do we have access to affordable healthy food); how safe we feel (in our home and on our streets); how happy we feel (are we supported emotionally and socially); and where we go when we need additional support or help (how good are local services).

There are also other factors which can affect us physically (genetics, ethnicity, gender), emotionally (early life and childhood experiences, family life, relationships) and mentally (income, employment, stress).

Lastly, our lifestyle choices and the habits we develop also form part of our health equation; they may have a positive impact (e.g. regular exercise, healthy diet, managing stress) or a negative one (e.g. smoking, problem drinking, being overweight).

Because of these factors, all 300,000 of us in Tower Hamlets will have our own unique story, which will include our past, present and (not yet written) future health.

As individuals, we have the power to influence our own stories and to support others to improve their health. The council and its partners also play a key role in shaping the environment and services which help or hinder our health.



# HEALTH IN TOWER HAMLETS

## How we compare

In Tower Hamlets, people typically start to develop poorer health around ten years earlier than London and England. On average, a man living in the borough starts to develop health problems from the age of 54 compared to 64 in the rest of the country. For a woman, it is 56 compared to 64.



## Reasons for poor health

The reasons for this are varied but include the health impacts of higher levels of poverty (low income, unemployment, insecure employment), poor housing quality, overcrowding, homelessness, social isolation, poor air quality, lack of access to affordable healthy food and lack of green spaces.

These factors are linked to low birth weight, dental decay in children, childhood obesity, smoking, unhealthy diet, alcohol consumption, high risk sexual behaviour and the use of illegal drugs.

The end result is reflected in our higher levels of physical and mental health conditions such as anxiety, depression, diabetes, heart disease, stroke, lung cancer, long-term lung diseases, liver disease, tuberculosis and HIV.

**These are serious issues needing urgent solutions. The link between poverty and poor health is a social justice issue. That's why this strategy is so important.**

# WHAT WE INTEND TO DO

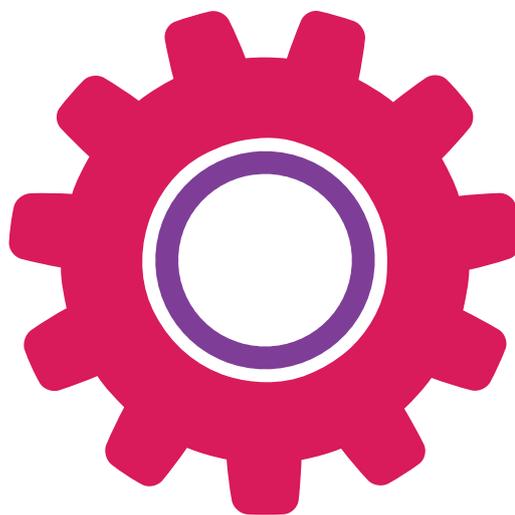
## We need to take action now

The issues we face are urgent if we are going to be successful in combating the factors that will negatively impact the future health of people living in the borough.

However, we recognise that there are challenges – we will need to address issues such as rapid population growth, a transient population (high levels of people moving in and out of the borough), a diverse population with its individual needs, public expectations, scientific advances and welfare reform – all of this with less money available due to significantly reduced funding for local councils and lower levels of government spending on the NHS.

But we are prepared. Our Health and Wellbeing Board have the experience and expertise to approach these issues strategically; commission services that will have impact; and ensure that our residents are given the opportunities, guidance and support that will help them live healthier lives.

**It is not right that people living in poverty do not live as long and face more unhealthy lives than those in wealthier areas. Together we can change this.**



# INTEND

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## Our next steps

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We face lots of challenges, but we can't tackle them all at once. We want to drive change but if we spread ourselves too thinly, we will not have as big an impact. Our focus, therefore, will be on a small list high priority issues - where we know we face particular health challenges and where only by working together will we achieve the change we need for local people.

We will still be overseeing all strategic health issues across the borough, but we will be concentrating on five themes in the next four years which will have the most significant impact on the health and wellbeing of our residents.

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## How we decide

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Our list of priorities was decided upon using the following criteria:

1. **Change** - Is the scale of the problem significant in Tower Hamlets and is there evidence that action will have a positive impact?
2. **Feedback** - What are the concerns of local residents?
3. **Feasibility** - Can change be supported by the system within the next four years?
4. **Motivation** - Is there enough collective will to achieve the change?



# THE FIVE PRIORITIES

These are our five priorities:

1. **Communities Driving Change** - changes led by and involving communities
2. **Creating a Healthier Place** - changes to our physical environment
3. **Employment and Health** - changes helping people with poor working conditions or who are unemployed
4. **Children's Weight and Nutrition** - changes helping children to have a healthy weight, encouraging healthy eating and promoting physical activity
5. **Developing an Integrated System** - changes which will join up services so they are easier to understand and access.

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## What is in this report?

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For each of the priorities, we have asked:

- > **Why is this important?**
- > **What is being done already?**
- > **What is our focus for action?**
- > **First 12 months - what will we do?**
- > **What will have changed in 3 years?**
- > **How will we know if it's working?**

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## How will it be reviewed?

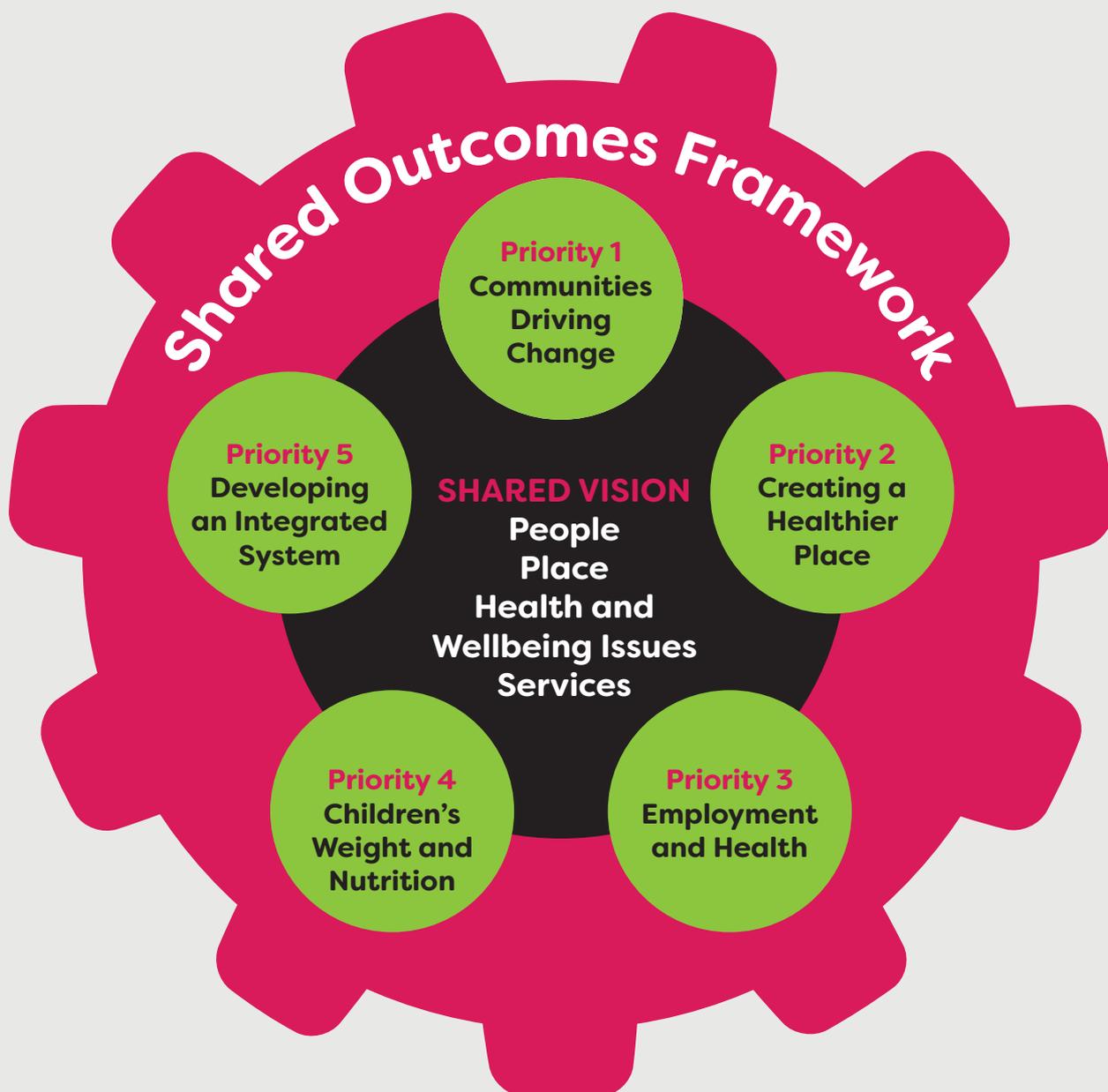
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We will review these priorities every year looking at what is working; what needs to change; what lessons have been learnt; and how our approach may need to be altered.

We have outlined how we will be monitoring this progress over the next three years, including what we intend to achieve within the first year.

These actions will be reviewed annually so as to set out a plan for the following year.

# Tower Hamlets Health and Wellbeing Strategy 2017-20



# 1. COMMUNITIES DRIVING CHANGE

## Why is this important?

- Evidence suggests that supporting people to take action addressing factors influencing their health and that of their communities has long-term benefits.
- Listening to what residents are saying about what matters to them and the issues they face gives organisations valuable insight into how services can be changed to respond to residents' priorities.
- In areas with higher deprivation and diversity, such as Tower Hamlets, it is particularly important for the contribution of local residents to health improvement to be valued and encouraged.



## What is being done?

- Numerous projects involving residents are currently being run by the voluntary sector, housing associations, Healthwatch, the NHS and the council.
- Organisations who have developed (or are in the process of developing) community engagement strategies include the Clinical Commissioning Group (CCG), the council, Tower Hamlets Together, Barts Health and the Council for Voluntary Service.

## What is our focus for action?

- We want to shift the focus from 'engaging' and 'involving' residents towards supporting residents to take leadership roles in identifying and acting on health challenges and improving the system's capacity to respond.
- We want to embed a culture across partner organisations that focusses on empowering and enabling people to have a sense of control over their lives, which evidence suggests leads to improvements in individual and community health.

# VALUES CHANGE

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## First 12 months - what will we do?

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We aim to:

- > 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
- > 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
- > 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.

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## What will have changed in three years?

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We would like more people to:

- > **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**
- > **get involved in shaping local services.**

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## How will we know if it's working?

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- > improvements to health outcomes or services which can be attributed to what local people are doing
- > an increase in the hours given by volunteers (relating to health and wellbeing), the range of their experiences and levels of satisfaction
- > we will develop further measures based on work we are currently doing with communities on outcomes that matter to them .

# 2. (CREATING A HEALTHIER PLACE

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## Why is this important?

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- Evidence strongly suggests that our environment (both in and outside) has an impact on our health and wellbeing. This includes the quality of our air; the condition of our homes; the safety and infrastructure of our localities (e.g. parks and roads); the promotion of everyday walking and cycling; the availability of affordable healthy food; and access to places where we can meet and socialise with other people.
- These issues are important in Tower Hamlets due to our higher levels of air pollution; lower standard of housing; overcrowding; high number of fast food outlets; and a high number of road traffic accidents. To compound this, not only do we have one of the highest levels of new development in London, but also one of the lowest expanse of green space.

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## What is being done?

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- A new Local Plan is being developed which sets out spatial and development management policies. Evidence supporting the links between health and development are set out in this plan.
- Strategies have also been written for the following – open spaces, leisure facilities, green grid development (which links green spaces in the borough), transport, air quality and town centres.

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## What is our focus for action?

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- We will gather evidence showing the link between health and development so that health and wellbeing is central to planning and development decisions.
- We will make health impact assessment core to policy decisions across the partnership (not just the council).
- We will ensure that a healthy place is a priority for policy decisions around the Community Infrastructure Levy.

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## First 12 months - what will we do?

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We aim to:

- > identify three areas in the borough where there is particular need to improve the physical environment (e.g. lack of green space, population growth) and engage with residents and local organisations on priorities for improvement to benefit health and wellbeing
- > develop a process to ensure that the impacts on health and wellbeing made by major developments are routinely assessed and considered in planning decisions
- > support the council's Air Quality Plan and implement an air quality communications campaign across the partnership targeted at residents and organisations 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



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## What will have changed in three years?

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We would like:

- > **better and more creative use of open spaces**
- > **better connections between green spaces**
- > **reduced exposure to air pollution**
- > **more residents using public spaces for healthy activities.**

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## How will we know if it's working?

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- > increase in active travel (e.g. walking, cycling)
- > increase in use, quality and satisfaction with open spaces
- > better air quality.

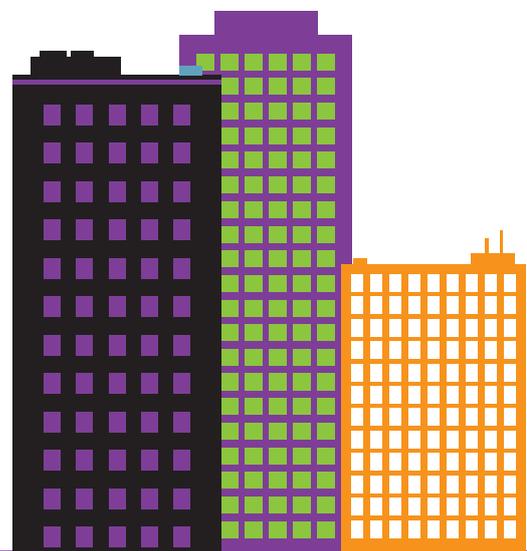
# 3. EMPLOYMENT AND HEALTH

## Why is this important?

- Unemployment and poor working conditions (e.g. lack of control, low wages, job instability, physical hazards, poor or stressful culture and environment) affects people both psychologically and physically. Evidence shows that being unemployed or in poor employment can lead to:
  - increased levels of risk factors for poor health (e.g. smoking, problem drinking, poor diet, low physical activity)
  - mental health issues, and
  - higher rates of long-term health problems (e.g. heart disease, stroke and musculoskeletal conditions such as back pain and arthritis).
- These issues are particularly important in Tower Hamlets due to our high levels of:
  - unemployment
  - people on a low income or who are on health-related employment benefits
  - people for whom mental health or learning disabilities is a barrier to employment.

## What is being done?

- Employment provision is currently being reviewed in order to shape the council's new employment strategy. The review states that 'close strategic and operational links between health and employment is critical to the way forward in Tower Hamlets; to prevent unemployment, to maximise work opportunities for those who experience health and mental health problems and to support the long term unemployed back to work.'
- The council, the NHS and voluntary organisations are working both individually and collectively on programmes to support this agenda including social prescribing, apprenticeships and volunteering schemes offering pathways into employment.



## What is our focus for action?

- > We will take action that reduces unemployment and increases good or healthy employment.
- > We will strengthen the integration between health and employment services.
- > We will address health inequalities by developing the workplace as a setting for prevention and early help.

## First 12 months - what will we do?

We aim to:

- > strengthen the integration between health and employment services by:
  - using social prescribing as a lever to strengthen links between health and employment services
  - reviewing best practice elsewhere
  - shaping and ensuring effective local delivery of the Department of Work and Pensions Work and Health programme
- > sign up our partner organisations to the London Healthy Workplace Charter and to:
  - undertake self-assessment
  - identify priorities for improvement and shared priorities for action to improve the level of healthy employment.

## What will have changed in three years?

**We would like:**

- > **more unemployed people given the support they need to maintain or improve their health**
- > **an equal chance of good employment given to those with a physical or mental health condition**
- > **more local employers to actively support the health and wellbeing of their employees.**

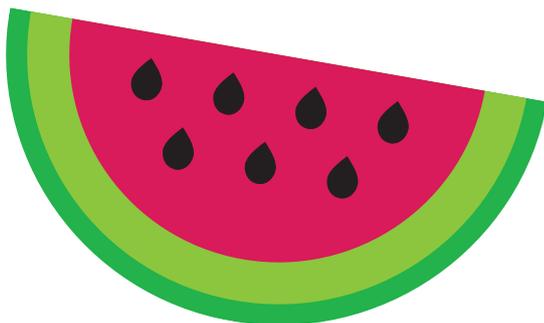
## How will we know if it's working?

- > improvement in the health and wellbeing of those using employment services
- > improvement in the health and wellbeing of people who work in Tower Hamlets
- > increase in the rates of employment for those who have been unemployed due to a health barrier.

# 4. CHILDREN'S WEIGHT AND NUTRITION

## Why is this important?

- A healthy weight and good nutrition in childhood sets you up for life. It is a key factor in our life-long general physical and mental wellbeing as well as preventing common long-term conditions such as diabetes, heart disease, stroke and some cancers.
- This issue is of particular importance in Tower Hamlets as childhood obesity levels of our 4-5 year olds and 10-11 year olds are significantly higher than national levels (although levels have been decreasing for those aged 4-5, but not 10-11).
- In addition, a very small proportion of children (around 2%) are underweight, which is also significantly higher than the national average.
- There is also evidence of widespread micronutrient deficiencies e.g. Vitamin D which is mainly due to lack of exposure to sunlight.



## What is being done?

- Action is being taken to improve access to healthy food, parks and play areas.
- A range of programmes exist which promote healthy weight, good nutrition and physical activity for children. These include healthy start vitamins and food vouchers, breastfeeding support, health visiting, school nursing, active play, active travel, healthy schools, child and family weight management and healthy parenting programmes.
- New 'primary school neighbourhood pathfinders' to engage parents and communities in shaping local services and identifying new opportunities for their children to be more active and eat healthily.

## What is our for action focus?

- We want to ensure that schools and early years providers are promoting child health and wellbeing, focusing on healthy weight and good nutrition.
- We want to find out the best way to communicate effectively with parents and communities.

# HEALTHY WEIGHT NUTRITION

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## First 12 months - what will we do?

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We aim to:

- strengthen existing school programmes by:
  - identifying and supporting a ‘health representative’ on the governing body of every school
  - telling parents what each school is doing for their child’s health and wellbeing
  - promoting the ‘Healthy Mile’ in schools, which is a scheme ensuring that pupils run or walk for a mile a day
  - inviting a representative from the Tower Hamlets Education Partnership onto the Health and Wellbeing Board.
- develop and implement a community engagement and communications strategy around healthy weight and nutrition in children, with particular emphasis on high risk groups.

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## What will have changed in three years?

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We would like:

- **more 10-11 year olds to be a healthy weight**
- **more schools and early years providers to promote child health and wellbeing**
- **more parents and communities to be involved with improving the healthy weight and nutrition of children.**

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## How will we know if it’s working?

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- increase in 4-5 year olds and 10-11 year olds who are a healthy weight
- improvement in healthy weight by age, ethnicity, gender and school
- improvement in physical activity and healthy eating (indicators to be developed).

# 5. DEVELOPING AN INTEGRATED SYSTEM

## Why is this important?

- Many of our residents have multiple and complex needs and not everyone has the same access to services.
- A fragmented system is hard to understand therefore joined up services are needed to improve people's experiences (across health and social care, as well as other services).
- Even though our resources are diminishing, we still have a large and diverse range of community and voluntary organisations.
- We need to look at total investment so as to make best use of available resources.
- Nationally, the idea of integration is being promoted and all local areas have to have a plan for joined up services by 2020.



## What is being done?

- 'Tower Hamlets Together' brings together partners across the council, NHS and voluntary sector to drive this change. Current actions include:
  - a new community model with GPs, local hospitals, social care and mental health providers working together
  - development of new models of integrated children's services across health, education, social care and community organisations
  - integrated personalised commissioning' pilot exploring how people can control their own budget for health and social care
  - extending the range of 'prescriptions' available to health and care providers to include wider council and voluntary sector services such as housing, employment and healthy living services ('social prescribing')
  - developing a single point of access for residents to easily access information and advice on healthy living, health and care services.

## What is our focus for action?

- We will agree a shared vision.
- We will set out the system wide changes needed and prioritise these.
- We will ensure that the priorities are moving us towards achieving this vision.
- We will lead and inspire a campaign to support the cultural changes required across the system.

## First 12 months - what will we do?

We aim to:

- create our shared vision and 'golden thread' developed through community engagement
- develop and agree our plan for a fully integrated health and care system by 2020
- campaign within our organisations to support the necessary culture change to join up services (see also Communities Driving Change).

## What will have changed in three years?

**We would like joined up health and social care for all (a vision which is based on community engagement and ownership) with more people saying:**

- **'I have easy access to information, advice and guidance which helps me to find what I need.'**
- **'It's easy to get help from my GP practice and I can contact my Care Co-ordinator whenever I have any questions.'**
- **'There are different people involved in supporting me but everyone listens to what I want and helps me to achieve my goals.'**

## How will we know if it's working?

- improvement in resident self-reported measures (to be developed) focussing on effectiveness of coordination
- increased number of staff in joint or multi-skilled roles
- measure of culture change (e.g. 'pulse check' for use across our joint workforce).

# TOWER HAMLETS HEALTH AND WELLBEING BOARD

## MEMBERS

### Chair

**Councillor Amy Whitelock Gibbs** Cabinet Member for Health and Adult Services

### Vice Chair

**Dr Sam Everington** Chair, NHS Tower Hamlets Clinical Commissioning Group

**Councillor Rachael Saunders** Cabinet Member for Education and Children's Services

**Councillor David Edgar** Cabinet Member for Resources

**Councillor Sirajul Islam** Statutory Deputy Mayor and Cabinet Member for Housing Management and Performance

**Councillor Danny Hassell** Labour Group

**Dr Somen Banerjee** Director of Public Health, London Borough of Tower Hamlets

**Dianne Barham** Healthwatch Tower Hamlets

**Simon Hall** Acting Chief Officer, NHS Tower Hamlets Clinical Commissioning Group

**Debbie Jones** Corporate Director, Children's Services, London Borough of Tower Hamlets

**Denise Radley** Director of Adult Services, London Borough of Tower Hamlets

**Det Ch Supt. Sue Williams** Borough Commander, Metropolitan Police

## CO-OPTED MEMBERS

**Jane Ball** Tower Hamlets Housing Forum

**Aman Dalvi** Corporate Director, Development and Renewal, London Borough of Tower Hamlets

**Councillor Abdul Asad** Independent Group

**Deng Yan San** Young Mayor

**Dr Ian Basnett** Public Health Director, Barts Health NHS Trust

**Dr Navina Evans** Chief Executive, East London NHS Foundation Trust

**Jackie Sullivan** Managing Director of Hospitals, Barts Health NHS Trust

**John Gillespie** Tower Hamlets Council for Voluntary Service

**Christabel Shawcross** Independent Chair, Safeguarding Adults Board

**Stephen Ashley** Independent Chair, Safeguarding Children Board

The Tower Hamlets Health and Wellbeing Board want to hear your thoughts about this strategy, the priorities we have identified, what we plan to do and how you would like to be involved in the future.

To provide your feedback please visit our consultation page on:

[www.towerhamlets.gov.uk/healthandwellbeing](http://www.towerhamlets.gov.uk/healthandwellbeing)