
**REPORT FOR: HEALTH & SOCIAL
CARE SCRUTINY SUB-
COMMITTEE**

Date of Meeting:	24 October 2015
Subject:	Harrow Health and Wellbeing Strategy
Responsible Officer:	Sarah Crouch, Consultant in Public Health
Scrutiny Lead Member area:	Councillor Michael Borio, Policy Lead Member & Councillor Mrs Vina Mithani, Performance Lead Member
Exempt:	No
Wards affected:	All
Enclosures:	Appendix A - Harrow Health and Wellbeing Strategy

Section 1 – Summary and Recommendations

The Harrow Health and Wellbeing Strategy enclosed with this report sets out the purpose and vision of the Harrow Health and Wellbeing Board for the next 5 years.

Recommendations:
For information only

Section 2 – Report

Introduction

The Harrow Health and Wellbeing Board was first established in 2011 and an initial strategy was developed in 2013 to guide action until the end of 2015. This strategy now needs to be refreshed to guide collaborative action for the next five years.

Background

Current situation

In the future, the Health and Wellbeing Board will focus on a small range of priorities, which are relevant to every Board member and where whole systems work can bring about significant change.

It is important to state that because of this approach, this strategy does not mention every disease, need, inequality or health and wellbeing-related issue in Harrow. The Health and Wellbeing Board have chosen to move away from a disease or deficit-focused approach (looking at what is wrong with health and wellbeing in Harrow) and instead focus on a model for enhancing health and wellbeing across the life course.

Why a change is needed

We know only 20% of the health of the population of Harrow is determined by the 'services' they receive so the new strategy adopts a life course rather than service development approach. Combined with the squeeze on public finances, Health and Wellbeing Board members need to think differently about how we invest for the future. We need to consider what residents will need in ten years and what we can do to enable people to live healthier lives for longer, reducing their need for public services. Prevention is better than cure. That does not just mean simply encouraging people to quit smoking, lose weight and improve their lifestyles – although that is important; a physically inactive person is likely to spend 37% more time in hospital and visit the doctor 5.5% more often than an active personⁱ. However, the most important action we can take is to influence the circumstances in which we are born, develop, live, work and age – specifically our housing, education, employment, financial security and the built environment. The refreshed strategy therefore reflects this approach.

Implications of the Recommendation

The strategy is presented to the Health and Social Care Scrutiny sub-committee for information and discussion only prior to formal presentation to the Harrow Health and Wellbeing Board on 5 November 2015.

The Strategy has been developed with regard to the views of a range of stakeholders including Board members, staff and residents.

The Harrow Health and Wellbeing Board hosted an engagement event on 16 July 2015 where leaders from across the health and care system in Harrow,

along with politicians and residents came together to discuss how to work in partnership to improve wellbeing in Harrow. Additionally, a series of focus groups were held with a range of voluntary sector service users.

The comments from residents and voluntary sector representatives were drawn together into themes and these have informed the development of this Health and Wellbeing Strategy. The major themes that emerged were about the importance of the community and support provided within it, how much residents value the environment and neighbourhoods they live in and how they want good access to health and care services when they need them.

Healthwatch has also played a major part in shaping the content of this strategy.

Financial Implications

There is no budget assigned to the Health and Wellbeing Board and each organisation is facing considerable financial and capacity challenges.

This Strategy does not seek to create new work streams and action plans, and as a result is expected to be delivered within the existing financial envelope for partner organisations. It aims to facilitate smarter collaborative working across the health and wellbeing system and guide commissioning intentions for all engaged in improving wellbeing for Harrow residents. If successful, there should be a clear thread which joins Harrow Council, CCG, Healthwatch and the voluntary sector together.

There is a risk however that if existing funding arrangements for the Health and Wellbeing Board partners are reduced significantly, the Board will not be able to fulfil the vision and objectives set out in this strategy.

Performance Issues

A variety of health and wellbeing indicators will be monitored (and these are presented within the strategy) but they are intended to enable the Harrow Health and Wellbeing Board to retain an overview of health and wellbeing in the borough rather than serve as a performance management tool. An annual action plan will be developed each year and implementation will be reported in an annual report.

Environmental Impact

The Harrow Health and Wellbeing Strategy sets out an ambition to support all in Harrow to start, live, work and age well. Part of 'living well' is considering the extent to which the environment influences health and wellbeing. Over the next five years the Harrow Health and Wellbeing Board will therefore be looking for ways to assess the impact of environmental change e.g. regeneration schemes, on health and wellbeing, how to enhance positive effects and mitigate negative effects.

Risk Management Implications

There is a risk that if existing funding arrangements for the Health and Wellbeing Board partners are reduced significantly, the Board will not be able to fulfil the vision and objectives set out in this strategy. The Board will adopt a flexible approach, working closely together to ensure that the work of the Board is realistic and achievable.

Equalities implications

Was an Equality Impact Assessment carried out? Yes – under development based upon the action plan agreed. The Strategy sets out an approach to improve the health and wellbeing of the whole population of Harrow. It highlights health inequalities associated with deprivation particularly and reinforces the need for approaches which target and reach those groups with the greatest needs.

Council Priorities

The Council's vision:

Working Together to Make a Difference for Harrow

Please identify how the report incorporates the administration's priorities.

- **Making a difference for the vulnerable**
The strategy highlights the unacceptable differences between people living in different parts of Harrow and the Health and Wellbeing Board's desire to narrow the six-year gap in life expectancy across the borough.
- **Making a difference for communities**
The Strategy talks about helping people to live well, a large component of which is about community cohesion but also about how important the environment people live in – their housing, high streets and green spaces – are to resident's health.
- **Making a difference for local businesses**
One element of the Strategy is to support Harrow residents to 'work well'. The Harrow Health and Wellbeing Board is keen to find opportunities to help people in Harrow to be financially secure by finding good jobs and staying in work in an organisation which promotes health and wellbeing. Engaging with local businesses will be key to successful achievement of this objective.
- **Making a difference for families**
The strategy highlights the need to support children from the womb to adulthood to be safe, happy and have every opportunity to reach their full potential. Children need to be loved and nurtured if they are to achieve long term physical, mental and emotional wellbeing. Good attachment with our parents and carers in early life are important so a family focused approach is critical to help children have the best start in life.

Section 3 - Statutory Officer Clearance

Not required.

Ward Councillors notified:	NO
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Section 4 - Contact Details and Background Papers

Contact: Sarah Crouch, Consultant in Public Health Tel: 020 8736 6834

Background Papers: List **only non-exempt** documents (ie not Private and Confidential/Part II documents) relied on to a material extent in preparing the report (eg previous reports). Where possible also include a web link to the documents.

ⁱ Sari N. Physical inactivity and its impact on healthcare utilisation. Health Econ. 2009; 18:885-901