

# **REPORT FOR: HEALTH AND WELLBEING BOARD**

---

<b>Date of Meeting:</b>	5 November 2015
<b>Subject:</b>	Harrow Health and Wellbeing Strategy
<b>Responsible Officer:</b>	Sarah Crouch, Consultant in Public Health, Harrow Council
<b>Public:</b>	Yes
<b>Wards affected:</b>	All
<b>Enclosures:</b>	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:**

The Board is requested to:

- Approve the Harrow Health and Wellbeing Strategy
- Agree to receive a report back in January 2016 incorporating an action plan and feedback from stakeholders following public dissemination of the Strategy
- Plan Harrow Health and Wellbeing Board agendas around the 'start well', 'live well', 'work well', 'age well' objectives and implement the other process and performance changes outlined in the strategy.
- Agree to advocate that the Harrow Health and Wellbeing Strategy should underpin all commissioning intentions in Harrow.

## **Section 2 – Report**

### **Background**

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

### **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 person<sup>i</sup>. 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.

### **Main options**

The proposed mission of the Health and Wellbeing Board going forward is to provide the leadership to enable everyone living and working in Harrow to join together to improve health and wellbeing.

The vision is to help all in Harrow to start, live, work and age well concentrating particularly on those with the greatest need. Specifically, we want:

- children from the womb to adulthood to be safe, happy and have every opportunity to reach their full potential

- high quality, easily accessible health and care services when we need them and sufficient and good quality housing, green and active spaces, healthy high streets and neighbourhoods
- to help people to be financially secure by finding good jobs and staying in work in an organisation which promotes health and wellbeing
- to enable older people to remain well, connected to others and independent in their own homes for longer and enable dignified deaths.

The enclosed report explains this vision and the key determinants of health and wellbeing. It also highlights three priority areas which will be key components of work the Harrow Health and Wellbeing Board undertakes.

An action plan which defines the work the Harrow Health and Wellbeing Board will undertake in 2016 will be developed over the coming months in discussion with stakeholders and presented to the Board in 2016.

### **Other options considered**

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.

### **Implications of the Recommendation**

#### **Financial Implications/Comments**

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 workstreams 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.

## **Legal Implications/Comments**

Under section 116 and 116A of the Local Government and Public Involvement in Health Act 2007 (as amended), the local authority and CCG have a duty to assess the health and social care needs of the local population (joint strategic needs assessment) and to devise a joint health and wellbeing strategy in response to this (joint health and wellbeing strategy). Under section 196 of the Health and Social Care Act 2012, these functions are to be exercised by the Health and Wellbeing Board. In preparing a strategy, the Health and Wellbeing Board must consider the extent to which needs could be met more effectively by making arrangements under s.75 of the National Health Service Act 2006. It must also have regard to the mandate published by the Secretary of State under section 13A of the National Health Service Act 2006 and any statutory guidance. There is a requirement that Healthwatch and people living and working in the local area are involved in formulating the strategy.

Statutory guidance was published in 2013 and recommends setting a small number of key priorities within strategies. A mandate from the Secretary of State to NHS England was published in December 2014 and outlines the following objectives:

- managing ongoing physical and mental health conditions such as dementia, diabetes and depression – so that we, our families and our carers can experience a better quality of life; and so that care feels much more joined up, right across GP surgeries, district nurses and midwives, care homes and hospitals;
- helping us recover from episodes of ill health such as stroke or following injury;
- making sure we experience better care, not just better treatment, so that we can expect to be treated with compassion, dignity and respect;
- providing safe care – so that we are treated in a clean and safe environment and have a lower risk of the NHS giving us infections, blood clots or bed sores.

When exercising their functions, the local authority and CCG must take account of the joint health and wellbeing strategy. Health and Wellbeing Board may give its opinion on whether the local authority is complying with its duty under section 116B of the 2007 Act.

## **Risk Management Implications**

Identify potential key risks and opportunities associated with the proposal(s) and the current controls (in place, underway or planned) to mitigate the risks.

## **Equalities implications**

Was an Equality Impact Assessment carried out? Under development based upon the action plan agreed. The Strategy sets out an approach to improve the health and wellbeing of the whole population concentrating particularly on those with the greatest need. It explicitly highlights health inequalities associated with deprivation but also equalities groups (based upon the evidence presented in the Joint Strategic Needs Assessment) and reinforces the need for approaches which target and reach these groups. In considering an action plan and presenting this to the Board in the New Year, it will be important to review equality implications.

## **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 (Council and Joint Reports)**

Name: Donna Edwards	<input checked="" type="checkbox"/>	on behalf of the Chief Financial Officer
Date: 9 October 2015		
Name: Sarah Wilson	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 9 October 2015		

<b>Ward Councillors notified:</b>	<b>NO</b>
-----------------------------------	-----------

### **Section 4 - Contact Details and Background Papers**

**Contact:** Sarah Crouch, Consultant in Public Health, x 6834

**Background Papers:** none

---

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