

Appendix 1: Harrow Health and Wellbeing Board 2016/17 action plan – Update report 30 June 2016

The table below outlines the actions which the Health and Wellbeing Board have committed to in 2016 and an update on progress to date.

	Objective	Explanation	Actions	HWB sponsor/ executive lead	Please provide update for HWB on 30 June 2016 focusing on achievements against actions and any barriers to success. At end of summary, please comment on whether you are on track to achieve all actions. Next review will be Sept 2016.
Start well					
1.	Transforming children and young people's mental health and wellbeing	In Harrow Children and young people currently have an inconsistent approach to services depending on the area, school, and GP they have. We want an integrated solution which provides a different sort of service for children and young people and their parents. We plan to deliver this through our Children and Adolescent Mental Health Service (CAMHS) transformation plan over the next 5 years and the Future in Mind programme.	<ul style="list-style-type: none"> - To identify additional resources to support the pilot of the new model of service delivery without impacting on existing services - To provide additional services for unaccompanied asylum seeking children - To commission a new eating disorder service across 5 boroughs - To develop an options appraisal for CAMHS service transformation across West London - To review workforce training needs 	Dr Genevieve Small Jessica Thom	<p>The key millstones achieved to date are:</p> <ul style="list-style-type: none"> • Harrow Project Manager- to implement local priorities • Harrow Engagement Lead- to implement local priorities and engage with local stakeholders and population • Local Pilot project to support the joint Emotional Health and Wellbeing Targeted Service consisting of 3.5 wte delivering in selected Harrow schools. • New Community Eating disorder service- Joint Harrow, Brent, Hillingdon, Central and West London CCG commissioned- CNWL providing

2.	Transforming early help for children and young people	<p>In Harrow, the services available for early help have been identified as having a degree of duplication and fragmentation. In order to make the services providing early help more effective and efficient we will review the current services with a view to developing an integrated offer of early help for children and young people that need it.</p> <p>Giving every child a good start means ensuring that the pre-natal and early years services identify and address problems in children and their families as early as possible. This means we will also need to review the health visiting services to ensure that they coordinate with the new integrated early help service.</p>	<ul style="list-style-type: none"> - To establish a project Board to review the current services - To agree the outcomes for the early help services - To redesign the early help service in collaboration with staff and users - To review the Health visiting service against the needs of the local population 	Chris Spencer	<p>The formal Staff Consultation regarding the EIS redesign commenced 8th June 2016.</p> <p>The proposed model will be adjusted as part of the formal consultation.</p> <p>The aim is to provide an integrated service for children's centres, youth development team, and early intervention service that maintains an offer of early help in the Borough.</p> <p>The timeline for implementation is end of September 2016</p> <p>Currently the specification (the service came with the national specification in October 2015) is being reviewed with a view to making any necessary adaptations for Harrow, including specifying not just what will be measured but levels of performance expected.</p> <p>A seminar was held on 20 May to which stakeholders (LBH Early Years, CIN, LNW Maternity Services/Midwifery, the service (LNW) and the CCG (Designated Safeguarding Nurse, Chair and COO) were invited. A further session is planned to be held in July.</p>
Live well					
3.	Explore new	Harrow Communities Click (HCC) is	- Harrow Communities Click to	Andrew	Presentation to be made to

	<p>models to empower Harrow residents to do more for each other</p>	<p>a membership organisation aiming to promote and facilitate mutual networks and time banking to improve the quality of life for people living in Harrow. Harrow Communities Click is different to volunteering as you gain a one hour time credit per hour that you give, which you can use when you need support.</p> <p>In addition to this, Harrow Council is currently reviewing all the Council's approach to volunteering, considering best practice (including digital means of engagement).</p> <p>The Health and Wellbeing Board will promote Harrow Communities Click and review further opportunities for joint working with the Voluntary sector in Harrow to empower residents to support each other.</p>	<p>present to the Health and Wellbeing Board</p> <ul style="list-style-type: none"> - Health and Wellbeing Board to promote the Harrow Communities Click model and support integrated working - Share Harrow Council's review of best practice in relation to empowering the community and resident's preferences - Support the VCS to consider how they would like to engage with the Health and Wellbeing Board and how to link up work across the Harrow 	<p>Howe Carol Yarde</p>	<p>H&WBB on a date to be agreed.</p> <p>Following the above presentation the H&WBB will be asked to endorse Communities Click.</p> <p>The Council has just launched two pilots in Wealdstone and the south of the borough (Roxeth ward) on the MyHarrow Fund. These pilots are based on ethnographic research ran during 2015 to understand how residents act and what type of community engagement scheme residents would engage with (especially those who do not normally engage with the Council). The pilots will run for 3 months with the results being available in September with a view to then rolling out a borough wide scheme for 2017/18. The best practice elements of this are more about the more innovative ways the Council has tried to engage with local residents on the development of the scheme and the application of 'design principles' in the development of the schemes.</p> <p>The Council's work on developing a strategy for Information, Advice and Advocacy has just completed consultation and as part of the next steps we will co-ordinate co-</p>
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					design/production workshops with the VCS to develop the strategy. This process will be carried out over June and July and will be facilitated by the New Local Government Network, which has recently published a national report on better commissioning with the VCS, so we will draw on their expertise.
4.	Improve joint communications and promote effective engagement with all Harrow residents	The Health and Wellbeing Board has committed to provide the leadership to enable everyone living and working in Harrow to join together to improve health and wellbeing. As part of this, it is important that there is joined up approach to engaging with residents and for new ways of working to be explored to ensure a two way dialogue is established between a representative cross section of the Harrow population and the Health and Wellbeing Board. In particular it is acknowledged that the population of Harrow is extremely diverse and there is a need for a working group to highlight inequalities in Harrow and the needs of marginalised groups to ensure that the vision to improve the health and wellbeing of all, with particularly concentrated focus on those with the greatest need is addressed.	<ul style="list-style-type: none"> - Set up an engagement working group tasked with developing an integrated plan for communications - To develop a shared planner which outlines all planned engagement events in 2016 and look for synergies between planned activities of partners to increase efficiency and integration of messages - To develop a shared list of stakeholders and channels of communication with them - To incorporate into the planner key messages that Health and Wellbeing Board partners will be disseminating to residents at specific points in 2016 - To agree shared mechanisms to communicate the mission, vision and objectives of the Harrow Health and Wellbeing Board to residents and progress against these objectives 	Arvind Sharma Melissa Allison-Forbes/Carol Yarde	The engagement working group will meet on the 3 rd June for the first time, and will look to take this set of actions forward. This will also need to link with the new Sustainable Transformation Plan so that joint consultations and engagements are developed and delivered where there is benefit to do so.

		An integrated approach to communication and engagement will enable health and wellbeing messages to be more co-ordinated, targeted and powerful; culminating in residents feeling more informed about progress and future developments.	<ul style="list-style-type: none"> - To share learning in relation to engaging with seldom heard groups and improving access to services and facilities which promote health and wellbeing 		
5.	Assess the health impact of Harrow regeneration schemes	Regeneration of Harrow is a major priority for the years ahead. The Kodak site, College Road, sites in Wealdstone and major council sites, such as the Civic Centre, will be redeveloped with new affordable housing being a particular feature. There is an opportunity to consider how to enhance the positive impact this regeneration scheme will have on health, wellbeing and health inequalities and to minimise any possible negative impacts.	<ul style="list-style-type: none"> - Pilot the use of a Health Impact Assessment framework on Grange Farm re-development and make recommendations to promote health and wellbeing - Evaluate the effectiveness of the piloted HIA framework - Conduct an HIA on Civic Centre redevelopment - Planning and Public Health to participate in joint training with a view to mainstreaming the HIA approach within the Council - Consider a strategic approach to estates 	Andrew Howe Sarah Crouch	The Grange Farm Rapid HIA (led by Public Health) and Civic Centre redevelopment Rapid HIA (led by Planning) are in final draft form and have an extensive list of recommendations. A paper and the draft is being taken to the Regeneration Board in July 2016 which will outline the proposed process for future HIAs Training attended by council officers from both Public Health Planning The HIAs have been taken to the CCG Strategic Estates Board for their comment with particular reference to the impact on primary care services
Work well					
6.	Pilot integrated employment/ mental health support and ensure that Harrow residents are signposted to talking therapies available	We know that mental health problems such as depression and anxiety are common in Harrow but many don't get the help and support they need. It is estimated only 25% of those experiencing common mental health problems receive help compared to 90% of those with diabetes. Talking Therapies are effective	<ul style="list-style-type: none"> - Increase uptake of Talking Therapies amongst Harrow residents - Secure external funding to initiate the employment/mental health pilot - Consult with stakeholders to develop a service specification for integrated employment/mental health 	Andrew Howe Sarah Crouch	Harrow Employment and Mental Health Task and Finish group Funding secured and specification drafted and procurement ran from Nov-Dec 2015 The trailblazer has experienced significant delays in the official contract signing despite the preferred provider being identified in January. The delays are

		<p>psychological treatments available for free and through self-referral for Harrow residents but take-up of this service is below target. The Health and Wellbeing Board partners will champion the service and improve signposting to increase uptake of the service.</p> <p>Common mental health problems are also major reasons for unemployment in Harrow. An estimated 28% of people claiming Employment Support Allowance (ESA) and Jobseekers' Allowance (JSA) have a common mental health problem and 95% of these people will continue to be out of work for more than 12 months. While unemployment in Harrow is reducing, there has not been a commensurate reduction in the number of people with mental health conditions getting back to work. A programme will be launched in 2016 which will trial the impact of joining up employment and mental health support with a view to helping residents back to sustained employment.</p>	<p>service which meets needs and is integrated with current local provision</p> <ul style="list-style-type: none"> - Develop targets for the employment/mental health service for 2016 - Procure a provider for the service and ensure the service fits well with other related local services such as Talking Therapies - Launch and promote the service - Monitor outcomes in line with targets set 		<p>between the GLA and WLA sign off.</p> <p>The provider has begun mobilisation plans and engagement locally</p> <p>Harrow Employment and Mental Health Task and Finish group has met and reviewed the TORs and attendance to reflect a close monitoring role which will inform the quarterly meetings held by the GLA with the provider on the mobilisation and service activity when it begins</p> <p>Launch has been ear marked for July</p> <p>Targets will be set in light of delayed start and the Task and Finish group has all relevant stakeholders engaged.</p>
7.	Commit to London Healthy Workplace Charter	Each Health and Wellbeing Board member organisation will demonstrate that they take the health of their staff seriously by signing up to and implementing the London Healthy Workplace Charter.	Harrow Council will take action in 2016 to attain 'achievement' status of GLA Healthy Workplace Charter	Andrew Howe Sarah Crouch/	Harrow Council will take action in 2016 to attain 'achievement' status of GLA Healthy Workplace Charter Public Health have undertaken review of workplace health needs

		<p>The Charter is a set of standards which if met, will enable us to get the best from the health and wellbeing workforce in Harrow and position the Health and Wellbeing Board members as exemplary employers, inspiring other local businesses and organisations. Harrow Council has already signed up to the Charter achieving 'commitment' grade but should now work towards 'excellence' grade.</p>	<p>Harrow CCG will take action in 2016 to attain 'Commitment' level of the GLA Healthy Workplace Charter</p>	<p>Jason Parker and Bashir Arif</p>	<p>for Harrow Council, and mapped current service provision against this and the standards set out in the LHCW. Our self-assessment record suggests that we have achieved approx. 26% of the full charter (i.e. of standards required to meet 'excellence' level). Continued progress on initiatives underway will help us score higher but this requires systematic and high level corporate and councillor support that it must be a priority, even in a difficult financial climate if we are to retain a productive and resilient workforce.</p> <p>A 2016-17 workplace health plan has been developed for the Council and a paper is being taken to Corporate Equalities Board and Corporate H&S group (probable steering group). Progress is being made on mental health components of charter particularly.</p> <ul style="list-style-type: none"> - Public Health has engaged departmental health champions, and the Making a Difference Group who have actively contributed to development of the plans. <p>As a result of Harrow CCG action, LNWHHT have registered their interest in the Charter, CLCH are engaged in discussions about the Charter and there are intentions to include a staff health and</p>
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			A plan for engaging other local organisations will be developed		wellbeing CQUIN in the CLCH contract A plan for engaging other local organisations will be developed Limits on capacity mean focus is currently on Council workforce and PH will produce a plan later in year for engaging other organisation
Age well					
8.	Roll out virtual wards ensuring an integrated approach to health and social care is adopted	<p>Virtual wards are a team of health and social care professionals who work together to provide integrated health and social care to Harrow residents aged 65 and above with one or more long term condition.</p> <p>The Virtual Wards will provide hands on care to the patient, either in a GP Practice or the person's home and give support to their GP / social worker in managing their conditions. The group of professionals come together to provide treatment to patients with complex conditions as if they were on a hospital ward - intensive but proactive treatment.</p> <p>It will mean people will be better for longer, it will mean that when people become ill, their experience of being cared for will be more integrated (and thus better), it will mean people will avoid</p>	<ul style="list-style-type: none"> - Three virtual wards presently established - Six virtual wards to be operational by 31 March 2016 - Virtual Wards to be supported by multi disciplinary team consisting of social care, community and specialist nursing staff, case manager and dedicated GP 	<p>Amol Kelshiker/ Bernie Flaherty</p> <p>Jon Manzoni/ Garry Griffiths</p>	<p>The full Business case for WSIC was presented to the CCG Governing Body and gained approval. This further development will support the expansion of the model across Harrow.</p> <p>The 7 key priorities for the expanded service are:</p> <ul style="list-style-type: none"> • Improving End of Life Care • Reducing Non Elective Admissions • Improving Hospital Discharge and Reducing Readmission • Identifying Dementia • Reducing the risk of falls. • Improving patient activation • Improving patient satisfaction

		<p>unnecessary visits to hospitals and GPs when they can be better cared for at home.</p> <p>The Health and Wellbeing Board will support full roll out of virtual wards and ensure an integrated approach to health and social care is adopted.</p>			<p>In addition an f/t project lead has been appointed to take the work forward.</p>
9.	<p>Join up approaches and signposting which enable residents to keep themselves healthy and well</p>	<p>Harrow has one of the highest older people populations in London and this is set to rise by around 12% by 2020. One of the key priorities for all Health and Wellbeing Board partners is to 'add life to years' and enable older people to remain well and independent in their own homes for longer. Enabling people to care for themselves for longer means signposting people and their carers – many of whom are over 65 as well - to facilities and sources of information and support which keep them healthy. It is particularly important to consider mental wellbeing in older age groups, given they may be more vulnerable to social isolation and loneliness due to the loss of friends and family, mobility or income. A one size fits all approach will not work in a community as diverse as Harrow and special consideration should be given to engaging with seldom heard groups of older people.</p> <p>The Health and Wellbeing Board can help to improve signposting to appropriate facilities and sources of</p>	<ul style="list-style-type: none"> - Promote 5 ways to wellbeing - to connect, be active, keep learning, take notice and give - amongst older people - Explore what mechanisms are already in place to signpost residents to facilities, information, advice and services which promote health and wellbeing. - Promote existing mechanisms for signposting residents to facilities, information, advice and services which promote health and wellbeing. - Identify gaps and opportunities to improve signposting, particularly for seldom heard groups and those who do not have access to digital information. 	<p>Andrew Howe</p> <p>Carole Furlong</p>	<p>Harrow PH has been actively contributing to the North West London working group discussions in empowering residents to self-care & manage better. Now that a NWL approach to self-care has been developed, PH is keen to use this & the current work, as the basis for engaging with all local stakeholders in developing a holistic self-care strategy for Harrow. In other boroughs this has been successfully led by the voluntary sector. As part of this approach, Harrow CCG is investigating piloting a system to assess patient's motivation and readiness to self-care. If we know this then we can direct patients to the most useful source of support.</p> <p>The annual Public Health report in 2015 covered the topic of social isolation and loneliness. The report promoted the 5 ways to well-being – plus a sixth on creativity</p>

		<p>support and campaign to promote wellbeing. This does not necessarily mean having a single point of access to information but ensuring that at every point a resident may seek out information, they find the same high quality comprehensive information and support.</p>		<p>Rachel Gap</p>	<p>Six guides were produced and distributed across the borough that brought together the various activities to promote wellbeing across Harrow ranging from mindfulness sessions to dance classes.</p> <p>The Warm Homes Healthy People Project has supported almost 600 people over the past two years. The project's main aim is to help people who live in cold homes. As well as dealing with fuel poverty issues, the advisors also signpost people to social activities and befriending schemes to reduce social isolation.</p> <p>The council is undertaking a review of all of the advice and advocacy services it commissions with a view to identifying gaps and duplications and commissioning these services more effectively in the future</p> <p>The Council is developing an Information, Advice and Advocacy Strategy for the borough, and is in discussions with the CCG on how such services they commission can be integrated in the strategy. Following the development of strategy this will lead to a new commissioning approach with related services in place by April 2017. One clear aspect that has arisen during the consultation is</p>
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					<p>around join-up of services and also join-up with those services provided in the community but not commissioned by public sector organisations. Co-production workshops on the strategy development will take place in June and July.</p>
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