





	Health and Wellbeing Board
	28 March 2019
Title	Sustainability and Transformation Partnership (STP) Update Barnet's Paediatric Asthma Plan
Report of	Director of Commissioning, Barnet CCG Director of Public Health, LBB
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix A: Designing and delivering system-wide asthma improvement in Barnet – PowerPoint presentation. This paper contains the outcomes and objectives of the overall NCL Paediatric Asthma Plan which are being delivered in Barnet Appendix B: Barnet local plan
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## **Summary**

Asthma is the most common long-term medical condition among children in the UK affecting three children in every classroom. There are currently 8,447 children (and their families) living with asthma in Barnet. Asthma is the most common cause of emergency hospital admissions for children and young people, with a significant proportion (up to 75%) thought to be avoidable if care and support was provided earlier and as part of a more integrated approach.

In 2016, 13 children under 14 years old died from asthma in the UK, which has the third highest risk of childhood asthma amongst developed nations. Within North Central London, there have been a number of recent child deaths related to asthma leading the partnership to agree for asthma to be a priority across the North Central London's Sustainability and Transformation Partnership (STP).

The recently published NHS Long Term Plan has also committed to focus increasingly on

respiratory illness and acknowledged the complexity of issues related to asthma, including the effective use of medicine, the impact of air pollution and the risk associated with smoking, amongst other factors.

This report outlines our approach to improving the health and care of children and young people in Barnet who suffer from asthma and how Barnet's plan contributes and is in line with the North Central London approach.

### Recommendations

- 1. That the Health and Wellbeing Board note the North Central London objectives and approach.
- That the Board endorse the proposed Barnet plan to improve the outcomes for paediatric asthma and note that Public Health agreed to oversee delivery of the plan jointly with the CCG.

#### 1. WHY THIS REPORT IS NEEDED

- 1.1 Asthma is a local, regional and national priority. The causes of asthma are often complex and interrelated but there is significant acknowledgement of the links and 'triggers' for asthma and the impact of wider determinants of health, such as housing and air quality.
- 1.2 As a co-ordinated, multi-agency approach to tackling asthma across Barnet is being taken with a focus on both local needs-led and borough-based integrated solutions it is appropriate that the plan in endorsed by the Health and Wellbeing Board.

#### 2. REASONS FOR RECOMMENDATIONS

- 2.1 In May 2018, the North Central London (NCL) Children and Young People Programme board agreed that in order to fundamentally address this long-term condition for children and young people, a holistic whole-system response to asthma was required. Therefore taken a co-ordinated, multiagency approach is being taken to tackle asthma across Barnet and North Central London with a focus on local solutions and strategic approaches across NCL, where it makes sense to do so.
- 2.2 System leaders across NCL came together at the end of last year to develop and agree our strategic outcomes and objectives, which have formed the basis of the NCL plan (see appendix A):
  - 1. Young People & Families informed and empowered to manage the condition more effectively into adulthood
  - 2. Enable healthy environments, which support children and young people with asthma to remain as well as possible

- 3. Enable all children to have access to a full education and activities unhindered by asthma
- 4. All children have access to high quality asthma care
- 5. Earlier identification of children at risk of life threatening asthma attack or those with poor control.
- 2.3 These strategic outcomes and associated objectives have been shared with a number of key stakeholder groups across North Central London including public health and other local authority services and teams, secondary, primary and tertiary care and community services, all of whom have validated our aspirations and are in agreement with the approach.
- 2.4 It is recognised that significant work had already been underway across Barnet to support children and young people with asthma. This good practice has been incorporated into the plan and aligned to the agreed strategic outcomes and objectives and will form the basis for this work.
- 2.5 More recently, at the end of February 2018, a group of Barnet colleagues from health (health visiting, school nursing, GP clinical leads, pharmacy), family services, public health, education and housing came together to discuss current plans to support the delivery of the NHS asthma plan.
- 2.6 Whilst the integration and refinement of the plan across the five boroughs is still underway (due for completion by April 2019), it is clear that whilst there are a number of pieces of work that can be delivered across NCL, there are others that are better placed to be progressed at borough level. Although Barnet is part of the STP NCL plan, local support is needed to tackle wider determinants of health such as housing conditions and air quality.
- 2.7 Local work is detailed within the plan (appended B) and includes a range of intervention initiatives which are already in place in Barnet which include;
  - Barnet Early Years initiatives
  - Continued provision of inhaler technique training for pharmacy and other professionals
  - Care Closer to Home Networks (CHIN) with focus on Children and Young People asthma and one CHIN focused on diagnostics and spirometry (decision to be made by GP Federation in March)
  - Smoking cessation 'Baby Clear' across maternity pathway
  - Royal Free Clinical Pathway Group (CPG) 'end to end' pathway developed for asthma/wheezy child
  - Map asthma and air pollution hotspots (public health).
- 2.8 Barnet plan includes further details on areas the group felt further work could be undertaken to support the objectives of the NCL plan. Three key areas were agreed:

- Explore feasibility of introducing Asthma Friendly Schools using existing 'Healthy Schools' mechanisms (Public Health / Education)
- Increase joint efforts to reduce tobacco dependence by (CCG / Public Health/Acute Trusts):
  - a. Providing consistent advice around harm reduction (i.e. electronic cigarettes)
  - b. Consider C02 measure campaign in clinic
  - c. Review smoking cessation offer across Barnet in order to focus in areas of most need
- Training and education for all professionals (including non-health professionals)
- 2.9 Engagement with partners in Barnet and across NCL has confirmed that there is also value in delivering some elements of the strategic work at a North Central London level, including:
  - A shared approach to training and development of workforce in relation to asthma
  - A networked learning approach across the system to support continuous improvement in outcomes for children and young people with asthma
  - A consistent approach to engaging with and communicating to children, young people and families in relation to asthma awareness and education
  - A system-wide asthma dashboard to monitor progress against our shared outcomes across the partnership
  - A coherent NCL-wide approach to addressing wider social and environmental triggers, such as air pollution, smoking, poor housing, to dovetail with both borough and London regional work on these issues.
- 2.10 The plan will be monitored through the North Central London Asthma Network which meets on a quarterly basis and also through the CYP Programme Board as part of the NCL STP. Locally, the plan will be overseen and delivered via oversight from Public Health and the CCG, bringing colleagues together as necessary.

#### 3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 Imposition of a NCL-wide plan on all boroughs – this was rejected because it is not insightful, helpful or warranted.

#### 4. POST DECISION IMPLEMENTATION

- 4.1 Many of the activities contained within the plan are already on going or have been agreed for implementation in 2019/20.
- 4.2 Review of local planning outputs to reconcile and agree strategic NCL deliverables (February-March/April)
- 4.3 NCL leads to development of asthma dashboard to track and measure delivery against plan (February-March)
- 4.4 Continued engagement with families and young people to inform development of plan (February-March)
- 4.5 Seeking endorsement across the system for the plan and ensuring alignment across organisational priorities (March-April)
- 4.6 Formal launch of plan on World Asthma Day 7th May 2019

#### 5. IMPLICATIONS OF DECISION

#### 5.1 Corporate Priorities and Performance

5.1.1 The plan supports Barnet's Health and Wellbeing Strategy Priorities and is in line with the Corporate Plan 2019-2020 outcome for residents to live happy, healthy, independent lives with the most vulnerable protected and encouraging residents to lead active and healthy lifestyles and maintain their mental wellbeing.

# 5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

5.2.1 Currently the local plans build on existing programmes, any resource implications will be considered by individual agency

#### 5.3 **Social Value**

5.3.1 The plan brings together many of the agencies tasked with securing the wider social, economic and environmental determinants of health and wellbeing and improves collaborative working between these agencies and the health and wellbeing of children and young people (and their families) who are living with asthma.

#### 5.4 Legal and Constitutional References

5.5 The terms of reference for the Health and Wellbeing Board include To work together to ensure the best fit between available resources to meet the health and social care needs of the population of Barnet (including children), by both improving services for health and social care and helping people to move as close as possible to a state of complete physical, mental and social wellbeing.

#### 5.6 **Risk Management**

5.6.1 Risks will be managed by the NCL Network.

#### 5.7 **Equalities and Diversity**

- 5.7.1 The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:
  - Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
  - Advance equality of opportunity between people who share those protected characteristics and people who do not;
  - Foster good relations between people who share those characteristics and people who do not.
- 5.7.2 The three parts of the duty applies to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.
- 5.7.3 This approach will have a positive impact on children and young people, and in particular those who are likely to develop asthma. There are no other equalities concerns relating to the delivery of this plan.

#### 5.8 Corporate Parenting

5.7.1 This will have a positive impact on children in care by strengthening interagency working and collaboration. Programmes will include reach to CYP in care and people who support them.

#### 5.9 **Consultation and Engagement**

- 5.9.1 To ensure that the plan is meaningful and informed by the children, young people and families we serve, in February and March engagement commenced with children, young people and families through workshops and questionnaires to ensure that their views underpin the NCL plan and inform the way it is delivered.
- 5.9.2 Consultation and engagement will be undertaken as local plans develop.

#### 5.9 **Insight**

5.9.1 Barnet's Joint Strategic Needs Assessment, Barnet Joint Health and Wellbeing Strategy and the NHS Long Term Plan informed the development of the NCL and local plans.

## 6. BACKGROUND PAPERS

6.1 None.