

| AGENDA ITEM: | Pages – |
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| Meeting | Health and Well-Being Board |
| Date | 25 April 2013 |
| Subject | Proposal for a Barnet Schools - Wellbeing Programme |
| Report of | Director of Public Health- Barnet and Harrow |
| Summary of item and decision being sought | <p>This paper outlines a proposal for a Barnet multiagency Public Health led programme for the development and implementation of a Barnet Schools Wellbeing Programme targeting children in Primary and secondary schools. The programme will be aligned with the Council's One Barnet Early Intervention and Prevention Project.</p> <p>The programme aims to address strategic commissioning targets described in Barnet Joint Health and Wellbeing Strategy through development of a number of interventions in partnership with local partners utilising schools as the Local Delivery Unit model for early intervention and prevention services.</p> |
| Officer Contributors | Vittorio Graziani, Laura Fabunmi, Jeffrey Lake. |
| Reason for Report | For information and direction. |
| Partnership flexibility being exercised | N/A |
| Wards Affected | All |

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1. RECOMMENDATION

- 1.1 That the Health and Well Being Board support the proposal for a Barnet Schools Wellbeing Programme.

2. RELEVANT PREVIOUS DISCUSSIONS AND WHERE HELD

- 2.1 The Health and Wellbeing Board endorsed the Joint Health and Wellbeing Strategy on 4th Oct 2012. It identified the need to promote healthy lifestyles amongst children and young people. A healthy weight strategy was endorsed on the 29th Nov and plans for smoking cessation and tobacco control, including discouraging young people from taking up smoking, on 31st Jan 2013.

Recognising schools to be a key partner in reaching children and young people across a range of lifestyle interventions, a coordinated approach is preferred. A paper outlining this has been presented to the education senior leaders.

3. LINK AND IMPLICATIONS FOR STRATEGIC PARTNERSHIP-WIDE GOALS (SUSTAINABLE COMMUNITY STRATEGY; HEALTH AND WELL-BEING STRATEGY; COMMISSIONING STRATEGIES)

- 3.1 The Barnet Joint Strategic Needs Assessment (JSNA) has shown that there are significant differences in health and well-being across Barnet, between places and between different demographic groups. As a growing and changing Borough with less public money available to spend the Barnet Health and Wellbeing Strategy aims to reduce health inequalities by focusing on how more people can 'Keep Well' and 'Keep Independent' through:

- *Preparation for a healthy life – that is, enabling the delivery of effective pre-natal advice and maternity care and early-years development;*
- *Wellbeing in the community – that is creating circumstances that better enable people to be healthier and have greater life opportunities;*
- *How we live – that is enabling and encouraging healthier lifestyles; and*
- *Care when needed – that is providing appropriate care and support to facilitate good outcomes and improve the patient experience*

This programme is focused on promoting healthy lifestyles amongst children and young people. Health behaviour patterns are often established before adulthood so intervention during the schools years has the potential to deliver long term benefits.

- 3.2 The Public Health Outcomes Framework for England 2013-2016 sets the context and strategic direction for the new public health system with the vision of 'improving and protecting the nation's health while improving the health of the poorest fastest'. The framework is comprised of 66 indicators across four domains, covering the wider determinants of health, health improvement, health protection, and healthcare.

The framework covers the factors that contribute to healthy life expectancy, including, importantly, what happens at the start of life and how well we live across the life course. The indicators relevant to this proposal are as follows.

| Domain | Objective | Indicator |
|--|---|-------------------------|
| <i>1. Improving the wider determinants of health</i> | <i>Improvements against wider factors which affect health and</i> | <i>School readiness</i> |

| | | |
|------------------------------|--|---|
| | <i>wellbeing and health inequalities</i> | |
| | | <i>Pupil absence</i> |
| <i>2. Health improvement</i> | <i>People are helped to live healthy lifestyles, make healthy choices and reduce health inequalities</i> | <i>Excess weight in 4-5 and 10-11 year olds</i> |
| | | <i>Emotional well-being of looked after children</i> |
| | | <i>Smoking prevalence – 15 year olds</i> |
| | | <i>Hospital admissions caused by unintentional and deliberate injuries in under 18s</i> |

3.3 Barnet Children and Young People Plan 2013 – 2016 sets out local priorities based on the journey of the child and cross cutting priorities:

- Early Years
- Primary
- Secondary
- Preparation for Adulthood
- Early Intervention and Prevention
- Targeting Resources to Narrow the Gap
- Keeping Children and Young People Safe

The plan includes specific commitments to encourage healthy lifestyles and choices, to support children and young people’s mental health and emotional wellbeing to reduce rates of obesity.

3.4 The Barnet Corporate Plan 2013-16 identifies targets of increasing the percentage of schoolchildren who spend a minimum of two hours each week on high quality PE and school sport within and beyond the curriculum and reducing the proportion of children who are identified as obese by the National Child Measurement Programme.

4 NEEDS ASSESSMENT AND EQUALITIES IMPLICATIONS

4.1 It is intended that the investment of resources be provided to all schools but with additional resources directed to those schools with the greatest needs. For example, previous data from the National Child Measurement Programme identifies rates of overweight and obesity at reception year and year six. Whilst we intended to provide support for all schools, those with the greatest needs will receive additional support. Consideration will also be given to any differential support that may be needed for pupils with disabilities or according to ethnicity, gender and faith.

5. RISK MANAGEMENT

5.1 A delivery plan including risk assessment and management will follow.

6. LEGAL POWERS AND IMPLICATIONS

- 6.1 Section 12 of the Health and Social Care Act 2012 introduces section 2B to the NHS Act 2006. This imposes a new target duty on the local authority to take such steps as it considers appropriate for improving the health of people in its area. Steps that may be taken include providing information and advice, providing services or facilities designed to promote healthy living, providing services for the prevention, diagnosis or treatment of illness, providing financial incentives to encourage individuals to adopt healthier lifestyles, providing assistance (including financial) to help individuals to minimise any risks to health arising from their accommodation or environment, providing or participating in the provision of training for persons working or seeking to work in the field of health improvement, making available the services of any person or any facilities. In public law terms this *target* duty is owed to the population as a whole and the local authority must act reasonably in the exercise of these functions. Regulations setting out the detailed obligations are yet to be issued. Proper consideration will also need to be given to the duties arising from the Equality Act 2010 as mentioned above.

7. USE OF RESOURCES IMPLICATIONS- FINANCE, STAFFING, IT ETC

- 7.1 The programme will be fully funded from Public Health Funds. The table below illustrates the Public Health investments intended for 2013/14 as reflected in commissioning intentions to enable effective delivery of Barnet Joint Health and Wellbeing Strategy targets.

| | |
|--|---------|
| Weight management | 200,000 |
| Childhood Obesity | 150,000 |
| Parenting Support | 100,000 |
| Local Sexual Health Promotion, Smoking Cessation and Drug awareness/ prevention work with Young People | 175,000 |

In each of these areas modelling and options appraisal work is underway to identify how the investment will best be directed. Schools reports of their willingness and interest in the proposed programme will inform this model. The degree of interest will influence the scale and priorities of the programme.

8. COMMUNICATION AND ENGAGEMENT WITH USERS AND STAKEHOLDERS

- 8.1 A paper on this proposal has been presented to the education senior leaders team and various informal discussions have taken place suggestion the proposed programme will be well received.

9. ENGAGEMENT AND INVOLVEMENT WITH PROVIDERS

- 9.1 Engagement with providers is taking place within each of the health topic areas included in the proposal (below).

10. DETAILS

Proposal for Barnet Schools Wellbeing Programme.

- 10.1 Barnet Public Health team in partnership with Children Commissioning (CCG) have been involved in initial discussions with regards to the development of primary schools

wellbeing programme tackling priorities from Barnet Joint Health and Well-being Strategy aligning and utilising expertise gained from One Barnet – Early Intervention and Prevention programme.

10.2 Programme Outline -

The programme will be fully developed and implemented in partnership with Barnet schools, Barnet CCG, LB Barnet and other local partners (list not exhaustive). The programme will cover a number of health and well being domains by delivery of specifically designed interventions covering the following:

| Domain | Intervention content proposal |
|---|--|
| Mental Health | Working with the CCG Children Commissioning Lead in partnership with CAMHS – Options appraisal and business case to follow. |
| Healthy weight, physical activity and nutrition | LB Barnet Public Health Team is in the process of developing an options appraisal paper exploring commissioning of weight management, physical activity and healthy eating programmes across Barnet schools. These include universal and targeted interventions. A business case will follow |
| Tobacco Control | Exploring possibilities for commissioning of an external service provider, scoping exercise – options appraisal and business case to follow lead |
| Substance Misuse | Exploring possibilities for commissioning of an external service provider, scoping exercise – options appraisal and business case to follow lead |
| Sexual health (clinic in a box) | Exploring possibilities for commissioning of an external service provider, scoping exercise – options appraisal and business case to follow lead |
| Parents and Carers | Exploring possibilities for commissioning of an external service provider, scoping exercise – options appraisal and business case to follow lead |

10.4 Programme Governance - The overall programme management and coordination of the Barnet Schools Well-being programme activities will be managed internally by LB Barnet Public Health team, utilising One Barnet Programme Management Methodology

10.5 Barnet Wellbeing Schools Programme – The Offer

LB Barnet Public Health Team have been working on the development the Barnet Wellbeing Schools Programme offer. The offer acknowledges existence of different educational/support structures in different schools as some elements of the offer might have been already developed and imbedded within individual schools delivery programmes.

The aim of the offer is to improve outcomes through a holistic approach to the education and wellbeing of the children in Barnet The offer list is not exhaustive and each individual support package will be tailored to the individual needs of the school.

The offer proposal covers the following areas of health and wellbeing delivery programme:

- Physical Activities
- Obesity
- Tobacco control / smoking cessation

- Drugs and Alcohol
- Sexual Health

The offer will be available for Primary and Secondary Schools in Barnet. In recognition of different support needs required by primary and secondary schools, the programme proposes to cover following areas of health and wellbeing:

| | Physical Activities | Obesity | Mental Health | Sexual Health | Smoking Cessation | Drugs and Alcohol |
|-------------------|---------------------|---------|---------------|---------------|-------------------|-------------------|
| Primary Schools | ✓ | ✓ | ✓ | | | |
| Secondary Schools | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |

NB: Sexual health, smoking cessation and drugs and alcohol intervention is only intended to be directed to secondary schools. Physical activity and obesity intervention will be primarily focused on primary schools.

Each of the areas of the programme delivery will seek to build on current structures and resources in place. The effectiveness of the programme will be dependent on the engagement of Barnet schools. A mapping exercise will need to be carried out to determine resources and services available in school settings at present and to identify schools understanding of pupil needs and their interest in receiving and engaging with wellbeing initiatives. This will help further shape the offer. Appendix 1 outlines a draft questionnaire which could be used.

In addition to the above, the offer is inclusive of providing support with development and accreditation processes for the following:

- Healthy Schools London
- Travel Plans

SUMMARY:

- **Public Health would like to commission a multi-intervention programme targeting schools in Barnet in line with the aims and objectives of the Barnet Joint Health and Well-being Strategy and Barnet Public Health Commissioning Intentions**
- **The programme will operate alongside the One Barnet Early Intervention and Prevention work stream – Schools as a Local delivery Unit**
- **The aim is to deliver a holistic and coordinated approach for tackling health and well-being issues in primary and secondary schools in Barnet**
- **Partnership approach to programme design and delivery**

11 BACKGROUND INFORMATION

11.1 Pan – London Schools Wellbeing Programmes - Healthy Schools London – Overview

Following from the National Health Schools Programme that expired in 2011, the Greater London Authority (GLA) office has re-launched a London Healthy Schools Programme, with an official launch date in May 2013. Healthy Schools London (HSL) is an Awards Programme that aims to reach out to every London child, working with schools to improve children and young people's well-being. It will use a whole school approach to

improve health and wellbeing, increase access to healthy food throughout the school day, provide opportunities to be more physically active, and reduce childhood obesity.

HSL will provide Awards for schools to recognise work that they are doing around health and wellbeing and childhood obesity linked to 4 key themes: Personal, Social, Health and Economic Education; Healthy Eating; Physical Activity; Emotional Health and Wellbeing and the school environment. HSL will be a self validating Programme with schools submitting action plans with intended measurable outcomes and success indicators as well as reports on activities undertaken. A system of moderation will be developed to ensure that quality can be assured through the system of self validation.

It is envisaged that some schools will wish to pursue HSL awards and that work conducted as part of the Barnet Schools Wellbeing Programme will contribute.

- 11.2 Additional funding for physical activity provision in schools has recently been announced. In developing the physical activity and healthy weight components of the programme consideration will be given to how these funds are utilised with a view to ensuring efficient coordination.

Legal – HP
CFO – JH/AD