





	Health and Wellbeing Board
	12 May 2016
Title	Joint Health and Wellbeing Strategy Implementation plan (2015 – 2020) progress update
Report of	Commissioning Director – Adults and Health CCG Accountable Officer
Wards	All
Date added to Forward Plan	September 2015
Status	Public
Urgent	No
Кеу	Yes
Enclosures	Appendix 1: Joint Health and Wellbeing Strategy Implementation Plan (2015 – 2020) exceptions report
Officer Contact Details	Zoë Garbett, Commissioning Lead, Health and Wellbeing Email: zoe.garbett@barnet.gov.uk, Tel: 020 8359 3478

Summary

Following the approval of the final Joint Health and Wellbeing (JHWB) Strategy 2015 – 2020 by the Health and Wellbeing Board (HWBB) in November 2015 and the approval of the implementation plan in January 2016, this paper provides the HWBB with an update on the progress to deliver against the implementation plan.

Recommendations

1. That the Health and Wellbeing Board notes and comments on progress to deliver the Joint Health and Wellbeing Strategy (2015-2020) and agrees further action where necessary.

1. WHY IS THE REPORT NEEDED

1.1 Background

- 1.1.1 On 12 November 2015, the Health and Wellbeing Board approved a new Joint Health and Wellbeing (JHWB) Strategy (2015 2020)¹ for Barnet. The JHWB Strategy has four themes Preparing for a healthy life; Wellbeing in the communities; How we live and Care when needed. JHWB Strategy has a section on each theme which describes progress to date (since the last strategy), key data from the updated JSNA, and most importantly the planned activity to meet our objectives as well as specific targets.
- 1.1.2 The JHWB Strategy is the borough's overarching strategy which aspires to improve health outcomes for local people and aims to keep our residents well and to promote independence. The JHWB Strategy focuses on health and social care related factors that influence people's health and wellbeing, with clear recognition of the importance of prevention, early intervention and supporting individuals to take responsibility for themselves and their families. The JHWB Strategy also addresses wider factors such as education, employment, income and welfare. These wider factors can both impact on and be impacted by the health and wellbeing of an individual or population, and need to be considered in order to make sustainable improvements to health and wellbeing.
- 1.1.3 Actions in the JHWB Strategy have and will be included in other key strategies and action plans such as the Housing Strategy, Primary Care Strategy, Early Intervention and Prevention Strategy, Better Care Fund plans and Entrepreneurial Barnet to ensure delivery across the health and social care system in Barnet. The actions detailed in this implementation plan focus on the priorities that require a partnership approach. The Plan indicates where an action or target is aspirational. The plan has no new financial resources to support its implementation but provides a framework and direction for focus of existing resources to have a significant impact on the health and wellbeing of the borough.
- 1.1.4 The Implementation Plan was presented to and agreed by the Health and Wellbeing Board in January 2016. The Implementation Plan is structured around the four theme areas of the JHWB Strategy: Preparing for a healthy life; Wellbeing in the community; How we live and Care when needed. For each theme area, the priorities are highlighted.
- 1.1.5 The Joint Commissioning Executive Group (JCEG) manage the delivery of the JHWB Strategy and review detailed activity and targets (when available) at each meeting (every two months).
- 1.1.6 Health and Wellbeing Board agreed to receive progress reports at each meeting, the progress reports will highlight key achievements, concerns and remedial action and provide the Board with an opportunity to review and

¹ The final Joint Health and Wellbeing Strategy (2015 – 2020) can be found here: <u>home/public-health/Joint-Health-and-Wellbeing-Strategy-2015-2020.html</u>

comment on the progress to deliver the JHWB Strategy. The HWBB is able to ask for follow up reports on specific topics of interest or concern to its forward plan.

- 1.1.7 The targets and indicators in the JHWB Strategy will be reported when they become available. Each November the Board will receive a full annual report on progress including targets, indicators and activity which will allow the Board to review progress and refine priorities for the coming year, feeding into business planning processes.
- 1.1.8 The following Red, Amber and Green (RAG) status criteria have been applied to progress made:
 - Red: requires remedial action to achieve objectives. The timeline, cost and/or objective are at risk
 - Amber: there is a problem but activity is being taken to resolve it or a potential problem has been identified and no action has been taken but it being closely monitored. The timeline, cost and/or objectives may be at risk
 - Green: on target to succeed. The timeline, cost and/or objectives are within plan
 - Grey: completed
- 1.1.9 Items on the Health and Wellbeing Board agenda and workplan provide more detailed updates on specific areas of the Strategy.

1.2 **Delivering our Joint Health and Wellbeing Strategy**

- 1.2.1 The progress updated covers the period from March 2016 to May 2016. Due to data collection for the targets being quarterly or annually, this update mainly covers activity (programmes are RAG rated based on activity progress rather than targets).
- 1.2.2 Overall, activity to progress our plans is considered to be good as: 71% green, 28% amber and 1% red. However, there are 16% more amber rated actions in this report in comparison to the progress report from March 2016.
- 1.2.3 The table below contains is a list of key highlights reflecting areas which are progressing well:

Preparing for a healthy life: Improving outcomes for babies, young children and their families

• Focus on early years settings and providing additional support for parents who need it

Highlights

- Nine centres for children are now accredited as Healthy Children Centres with on achieving an outstanding rating
- CLCH Breastfeeding Peer Support continues to meet and exceed KPIs
- 74% of families with children under 5 are using centres for children (against

a target of 60%)

- Children and Young People's Plan in out to consultation before the final plan being presented for approval at Children, Education, Libraries and Safeguarding Committee in June 2016
- New UK Youth Parliament members were elected in March 2016 with over 800 children and young people voting
- Nine start up organisations have already been supported by CommUNITY Barnet since January 2016, a successful Funders Fair was also held in January 2016 with over 40 organisations benefitting from the event
- A domestic violence expert is now in the MASH three days a week
- Nineteen Oral Health Champions now trained; excellent engagement with hard to reach groups

Wellbeing in the community: Creating circumstances that enable people to have greater life opportunities

- Focus on improving mental health and wellbeing for all year one priority
- Support people to gain and retain employment and promote healthy workplaces
- Psychiatric liaison has been identified as a priority for the North Central London Mental Health programme. NCL commissioners continue to meet monthly and have commenced discussions to review and develop a core 24 model for psychiatric liaison
- Triborough (Barnet, Enfield and Haringey) discussions have progressed with regards to the crisis concordat, work in Barnet is focusing on preventing crisis through strengthening early intervention, primary care mental health liaison service development with secondary care and developing a wellbeing hub and spoke model
- In terms of exploring personal health budgets for people with personality disorders, commissioners are reviewing best practice and working with the Mental Health Trust to review current Mentalisation Therapy Service provision
- Trailblazer Action Learning Sets have been booked to progress Reimagining Mental Health; this is expected to deliver a new pathway model, collaborative development of wellbeing hubs and pilot innovative approaches to supporting people in the community. This is aligned with the Local Authorities mental health social work project.
- Child and Adolescent Mental Health Service (CAMHS) Transformation plan submitted and aligned with transforming care. There is on-going work with the Eating Disorder Service on waiting times
- Procurement of the support phase for Community Centred Practices is being led by Public Health, engagement with GPs has been positive and availability of funding will determine final numbers
- The Neighbourhood Services contract has been extended for two years; during 2016/17 the Provider Group will further expand activities, increase reach and further utilise volunteers
- Two successful appointment based adult social care hubs are in operation in the borough
- Burnt Oak Opportunity Support Team (BOOST) met its target supporting 121

people into work in 2015/16. BOOST need to reach more people on sickness benefit through referrals from Job Centre Plus and GPs

- Barnet Council signed the Time to Change pledge and is committed to delivering an action plan to improve the mental health and wellbeing of its employees
- Twenty Winterwell Grants and 43 packs have been distributed to the boroughs most vulnerable residents. Groundwork have completed 57 advice sessions and recruited 15 volunteers to deliver home visits.

How we live: Encouraging healthier lifestyles

- Focus on reducing obesity and preventing long term conditions through promoting physical activity
- Assure promotion and uptake of all screening including cancer screening and the early identification of disease
- Pre-procurement market testing took place in March 2016 which included 21 sessions with seven providers
- Resident engagement sessions were held to explore the initial designs for New Barnet Leisure Centre and Barnet Copthall
- In terms of increasing participation; from September 2015 March 2016 usage of leisure centres has increased by 21.1%, with significance in aquatics attendances +24.2%; 13.4% increase in usage by people over 45, 25.9% increase in usage by females and 33.3% increase in usage by children and young people
- Sport and Physical Activity Strategy currently in draft with engagement planned between April June including a Disability Sub Group with link to the Fit and Active Barnet (FAB) Network
- The Obesity Strategy is being developed by Public Health, a draft strategy and action plan will be available in June 2016
- Substance misuse service continues to deliver support to young people and adults; all service users leaving treatment early will have their case reviewed by Service Managers to ascertain what re-engagement was attempted. An alcohol / detox treatment pathway is being developed.

Care when needed

- Focus on identifying unknown carers and improving the health of carers (especially young carers)
- Work to integrate health and social care services
- Barnet's Carers Strategy (2015 2020) was submitted and agreed by Policy and Resources Committee (16 February 2016); reference group is being established to implement the strategy
- Carers and young carers support service specification has been drafted and went live in April 2016; includes specific targeted support regarding raising awareness of employment rights of carers with businesses and with carers and young carers
- Adults and Communities are managing a project to establish a new team by June 2016 which will deliver a specialist programme of support to carers of people with dementia through assessments, support planning and facilitating a targeted training programme

- Barnet's dementia diagnosis rate has increased to 77.6% and the 12 week referral to diagnosis target continues to be met by providers. The recommissioned dementia support service delivered by Alzheimer's Society commenced on 1 April 2016. Dementia Alliance is being established with an event during Dementia Awareness Week in May
- Quality Review Visits have been completed of the Acute Stroke Units good access to timely stroke rehabilitation, effective stroke community services and review service. Re-commissioned stroke service commenced on 1 April 2016 (stroke navigator service, community support service and 6 month reviews)
- Events organised for Dying Matters Week (9 15 May) which have been developed by CCG, Jewish Care, Public Health, Marie Curie, Healthwatch and North London Hospice
- 1.2.4 Areas considered to be performing less well (Red / Amber) are listed below, further commentary and detail around mitigating actions, can be found in appendix 1:
 - Implementing the healthy child programme
 - Increasing the supply and demand for the two year old (free childcare) offer
 - Social action projects delivered by our Volunteering Service
 - Monitoring Safeguarding referrals for advice on the issue of FGM
 - Review, update and deliver Barnet's DV and VAWG Strategy
 - Updating Barnet's Safeguarding Children's Board Business plan
 - All initial health assessments for Looked After Children (LAC) completed within time frame (28 days)
 - Uptake of childhood immunisations
 - CAMHS and Eating Disorder Services: Develop school traded approach
 - Participation (sports and physical activity)
 - Target NHS Health Checks: high risk groups to be identified
 - Develop a training resource to up skill staff who interact with residents to maximise opportunities to promote good health (Making Every Contact Count Training)
 - Roll out of BILT
 - Develop programmes to support self-management
 - Performance of general practice
 - Falls prevention.

2. REASONS FOR RECOMMENDATIONS

2.1 The production of a (Joint) Health and Wellbeing Strategy is a legal requirement of the Local Government and Public Involvement in Health Act (2007). Local Authorities and Clinical Commissioning Groups (CCGs) have equal and joint duties to prepare a JHWB Strategy, through the Health and Wellbeing Board. To ensure that we deliver the JHWB Strategy and meet its targets, an implementation plan, developed with and agreed across the partnership, is essential.

2.1.1 The Implementation Plan enables the Health and Wellbeing Board to monitor progress and success in the short, medium and long terms. The Health and Wellbeing Board will receive regular progress reports which will allow the Health and Wellbeing Board to continue to develop its work programme.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 There is a legal requirement to draft a Health and Wellbeing Strategy. Not producing a JHWB Strategy implementation plan would create a risk of non-alignment across the Health and Wellbeing Board membership, could result in decisions being made either in silos or based on sub-optimal evidence and intelligence, and increase the likelihood of unnecessary duplication and overlap of public sector spend.
- 3.2 Receiving regular performance and activity reports allows the HWBB to review and ensure progress is being made to deliver the JHWB Strategy.

4. POST DECISION IMPLEMENTATION

- 4.1.1 Action will continue as outlined in the report.
- 4.1.2 JCEG will receive detailed activity updates.
- 4.1.3 The Board will be kept up to date with progress being made in implementing the HWBB Strategy through regular performance reports.

5. IMPLICATIONS OF DECISION

5.1 **Corporate Priorities and Performance**

5.1.1 The JHWB Strategy supports evidence-based decision making across the Health and Wellbeing Board and its partners. The JHWB Strategy has been developed to align and bring together national and local strategies and priorities including Barnet Council's Corporate Plan 2015-2020 and BCCG's strategic plans.

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

5.2.1 The JHWB Strategy directs the Health and Wellbeing Board priorities for the period 2015 – 2020, building on current strategies and focusing on areas of joint impact within current resources. The priorities highlighted in the JWHB Strategy will be considered by all the relevant organisations when developing activities. The JHWB Strategy will support the work of all partners to focus on improving the health and wellbeing of the population. It emphasises on effective and evidence-based distribution of resources for efficient demand management. Each project will be individually funded however, using the existing resources of the participating organisations.

5.3 Social Value

5.3.1 The JHWB Strategy focuses on the health and social care related factors that influence people's health and wellbeing, with clear recognition of the importance of addressing wider factors such as education, employment, income and welfare. These wider factors can both impact on and be impacted by the health and wellbeing of an individual or population, and need to be considered in order to make sustainable improvements to health

and wellbeing. The JHWB Strategy will inform commissioning.

5.3.2 The Public Services (Social Value) Act 2013 requires those who commission public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders.

5.4 Legal and Constitutional References

- 5.4.1 Producing a JHWB Strategy is a legal requirement of the Local Government and Public Involvement in Health Act (2007). Local authorities and CCGs have equal and joint duties to prepare JSNAs and JHWSs, through the Health and Wellbeing Board. The Board must have regard to the relevant statutory guidance – Statutory Guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies - when preparing the JSNA and JHWS.
- 5.4.2 The Council's Constitution (Responsibility for Functions Annex A) sets out the Terms of Reference of the Health and Wellbeing Board which include:
 - To jointly assess the health and social care needs of the population with NHS commissioners, and apply the findings of a Barnet Joint Strategic Needs Assessment (JSNA) to all relevant strategies and policies.
 - To agree a Health and Well-Being Strategy for Barnet taking into account the findings of the JSNA and performance manage its implementation to ensure that improved outcomes are being delivered.
 - To consider all relevant commissioning strategies from the CCG and the NHS Commissioning Board and its regional structures to ensure that they are in accordance with the JSNA and the JHWBS and refer them back for reconsideration.
 - To directly address health inequalities through its strategies and have a specific responsibility for regeneration and development as they relate to health and care. To champion the commissioning of services and activities across the range of responsibilities of all partners in order to achieve this.
 - To promote partnership and, as appropriate, integration, across all necessary areas, including the joined-up commissioning plans across the NHS, social care and public health.
 - Specific responsibilities include overseeing public health and developing further health and social care integration.

5.5 **Risk Management**

5.5.1 There is a risk that if the JSNA and JHWB Strategy are not used to inform decision making in Barnet that work to reduce demand for services, prevent ill health, and improve the health and wellbeing and outcomes of people in the Borough will be sub optimal, resulting in poorly targeted services and an

increase in avoidable demand pressures across the health and social care system in the years ahead.

5.5.2 Receiving regular performance and activity reports allows the HWBB to review and ensure progress is being made to deliver the JHWB Strategy.

5.6 Equalities and Diversity

- 5.6.1 The JHWB Strategy has used evidence presented in the JSNA to produce an evidence based resource which has equalities embedded at its core, explicitly covering the current and future needs of people in Barnet from each equalities group.
- 5.6.2 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010, advance equality of opportunity between people from different groups and foster good relations between people from different groups. Both the Local Authority and the CCG are public bodies. The relevant protected characteristics are age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

5.7 **Consultation and Engagement**

- 5.7.1 A number of partners have been involved in the development of the JHWB Strategy including a public consultation which ran from 17 September 25 October 2015 which included an online survey and workshops.
- 5.7.2 Feedback from the consultation has informed the final JHWB Strategy 2015-2020. Overall there was support for our vision, themes and areas of priority focus. A full consultation report was presented to the HWBB in November 2015.
- 5.7.3 The implementation plan has been developed with a number of partners to ensure the plan is universally agreed and embedded across the public sector.

5.8 Insight

5.8.1 The JSNA is an insight document and pulls together data from a number of sources including Public Health Outcomes Framework, GLA population projections, Adults Social Care Outcomes Framework and local analysis. The Joint HWB Strategy has used the JSNA as an evidence base from which to develop priorities.

6. BACKGROUND PAPERS

6.1 Joint Health and Wellbeing Strategy Implementation Plan (2015 – 2020) progress update, Health and Wellbeing Board 10 March 2016, item 9: <u>https://barnet.moderngov.co.uk/documents/s30322/JHWB%20Strategy%20i</u> <u>mplementation%20plan%20March%202016.pdf</u>

- 6.2 Joint Health and Wellbeing Strategy Implementation Plan (2015 2020), Health and Wellbeing Board 21 January 2016, item 7: <u>https://barnet.moderngov.co.uk/ieListDocuments.aspx?Cld=177&Mld=8389& Ver=4</u>
- 6.3 Joint Health and Wellbeing Strategy (2015 2020) including Public Health report on activity 2014/15 and the Dementia Manifesto, Health and Wellbeing Board, 12 November 2015, item 6: <u>https://barnet.moderngov.co.uk/ieListDocuments.aspx?Cld=177&Mld=8387& Ver=4</u>
- 6.4 Draft Joint Health and Wellbeing Strategy (2016 2020), Health and Wellbeing Board, 17 September 2015, item 8: <u>https://barnet.moderngov.co.uk/documents/s25837/Draft%20Joint%20Health</u> <u>%20and%20Wellbeing%20Strategy%20HWBB%20September%202015.pdf</u>