Draft Barnet Joint Health and Wellbeing Strategy 2021-2025: Creating a borough of health together!

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Foreword

[Foreword to be added]

Introduction

This Barnet Joint Health and Wellbeing Strategy (JHWS) sets out our whole system vision for improving the health and wellbeing of the people who live, study and work in Barnet. It describes:

- Our strategy in context: The current health and care landscape, Barnet's key health data and our guiding principles.
- Our 3 Key Areas for wellbeing: why they were chosen, what we plan to achieve, and how we will measure our success.

For the next four years, the Barnet Health and Wellbeing Board (HWBB) will focus on delivering three Key Areas in order to drive integrated improvements in health and wellbeing in the borough. These key areas are:

- 1. Creating a healthier place and resilient communities
- 2. Starting, living and ageing well
- 3. Ensuring delivery of coordinated holistic care, when we need it

Within each key area we identify several priorities. Our priorities will inform the work we do over and above our current 'business as usual' in order to improve Barnet's health and wellbeing.

This strategy was written during the unprecedented national challenge of the COVID-19 pandemic. We have had to adapt to new ways of working, living, and providing services in response to this public health emergency which has had a vast impact on the overall physical, social, mental and economic health and wellbeing of the Borough. The long-term impact of the pandemic will likely extend beyond the four-year scope of this strategy. We will continue to respond to the COVID-19 pandemic. But we will also use the capacity and resilience of our systems and partnerships to support the borough to recover, restore and thrive.

We know that we face some big health challenges in Barnet, but, if anything, COVID-19 pandemic just highlighted further existing public health challenges and disparities in health and wellbeing. Therefore, our vision has been reinforced although somehow it is now further stretched! By working together with local residents and partners, we can continue to make positive differences to everyone's wellbeing in Barnet.

Our Strategy in broader context

What is a Health and Wellbeing Board?

Key partners in Barnet come together to form the statutory Health and Wellbeing Board (HWBB). These are partners who are in a position to help make a difference to our health and wellbeing, and include local Councillors, the Council (including adult social care, children's services and public health), the NHS, local voluntary and community sector organisations, and Healthwatch Barnet who represents the voice of Barnet people.

Developing this JHWS is one of the statutory responsibilities of the HWBB as set out by the Health and Social Care Act 2012. All HWBB members including the local authority and the North Central London Clinical Commissioning Group (CCG) must regard this strategy in the delivery of their respective health and wellbeing responsibilities.

The Health and Care Landscape – National, regional and local

The fast-changing health and care landscape in England provides many opportunities to maximise the population health outcomes for people in Barnet through systems improvements and partnership working. Emerging Integrated Care Systems¹ and the NHS long-term plan² set out key ambitions for the NHS in reducing inequalities and commissioning for population health outcomes. This direction will give greater responsibilities across the system in engaging residents and voluntary and community sector, as well as other partners in improving the overall wellbeing of local residents. Health and Wellbeing Board and its partnership is central to local leadership of the whole system and we have been working very closely to articulate our ambition and vision through this strategy. Below is a brief description of emerging structures.

North Central London Sustainability Transformational Programme (NCL STP)

Barnet works closely with partners across North Central London (NCL) to develop a strategic, place-based plan for transforming the health and care system. Joint working on this wider footprint will help in addressing the complex challenges we face and improve health of the population and NCL Population Health Plan is being delivered. This will form a central driver for commissioning and provision of health and care services via emerging Integrated Care System.

¹ Integrating Care -Integrating Care — The next steps to building strong and effective integrated care systems across England NHS England » Integrated care systems

² NHS Long Term Plan: NHS Long Term Plan

North Central London Clinical Commissioning Group (CCG)

In April 2020 the NCL borough CCGs (Barnet, Camden, Enfield, Haringey, Islington) were brought together to form North Central London CCG. This merger allows commissioning of health services at scale for North Central London while retaining borough-level commissioning of local services where appropriate.

NCL Integrated Care System

NHS England is currently consulting on the future of Integrated Care Systems (ICS): health and care integration at the place. The proposals suggest that all STP footprints should have ICS in a shadow form by 1st April 2021 and work towards statutory organisation established fully in April 2022. Barnet Council and its residents will play an important role in health and care partnership across North Central London. Further details will be included here, as they emerge.

Barnet Integrated Care Partnerships

Integrated Care Partnership (ICP) is an alliance of Local Authority and NHS organisations that works together to deliver coordinated care. Barnet ICP has been established in Autumn 2019, and includes local hospitals, community services, GPs, social care and public health. It is envisaged that Barnet ICP will be an integral part of local partnership and will be articulating needs of local population in a wider, North Central London ICS.

Barnet's Primary Care Networks

Primary Care Networks (PCNs) – a network of GPs – aims to deliver greater provision of proactive, personalised and coordinated health and social care. In Barnet, seven PCNs have been formed and started working to address specific needs of their community, including Social Prescribing services.

Partnership working during COVID-19

Barnet will continue to contribute to and influence national structures such as Public Health England / National Institute of Health Protection and NHS Test and Trace to ensure an efficient whole systems response to the pandemic.

What is our health and wellbeing locally?

Barnet is a growing, thriving and diverse borough

Barnet has **392,453 residents**By 2024, this is expected to grow to **404,208**

80% of residents are economically active (higher than London (79.2%))

Target to build **31,340 new homes** over the next 10
years (4th highest in London)

60% of residents are from backgrounds **other than White British**

Between 2018 and 2030 there will be a **33% increase** in people aged 65+

8th least deprived out of 33 London boroughs (IMD 2019)

The borough is generally healthy...

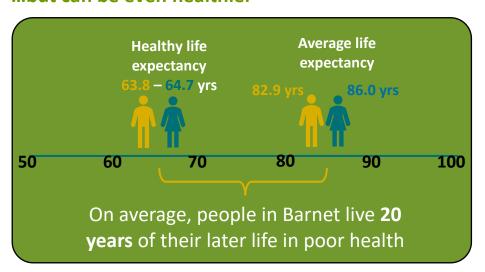
Average life expectancy is 82.4 years for males and 85.8 years for females

Average male and female life expectancies for Barnet are higher than London and England

2nd **lowest** mortality rate for cardiovascular diseases in London (51.1 per 100,000)



...but can be even healthier



An estimated **3,971** people aged 65+ in Barnet were living with **dementia**.

22,229 people live with diagnosed diabetes

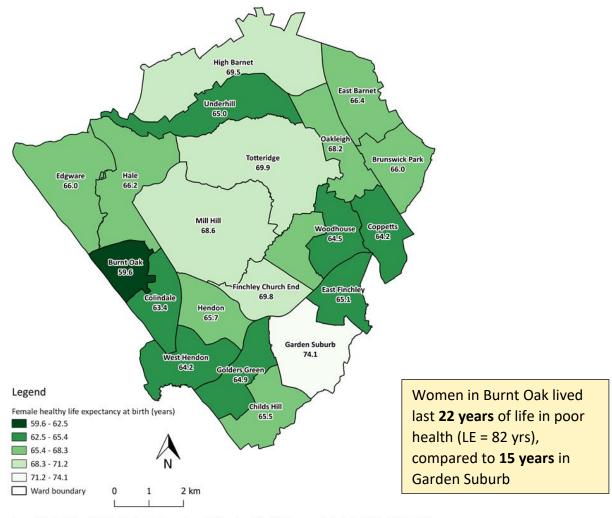
1 in 5 children aged 4-5 years in Barnet are overweight or obese

Just over a half of Barnet adults (56.4%) are overweight or obese

Variation in local health outcomes

Health starts where we live, study and work

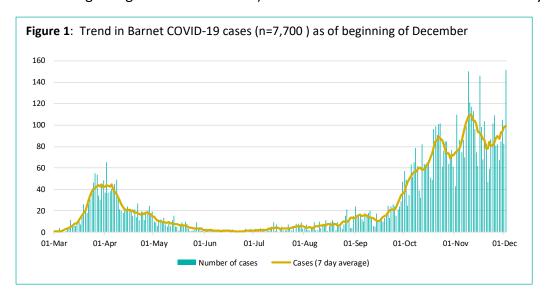
As little as 10% of population's health and wellbeing is linked to access to health care. Across Barnet, there is a wide variation in health outcomes.

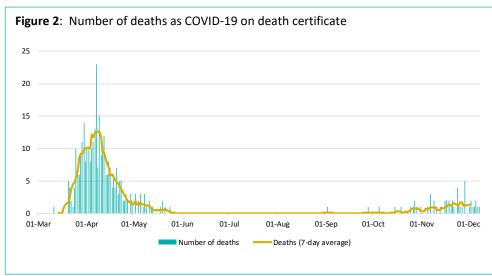


	Lowest	Highest
Men	59.2 yrs	72.6 yrs
	(Burnt Oak)	(Garden Suburb)
Women	59.6 yrs	74.1 yrs
	(Burnt Oak)	(Garden Suburb)

Impact of COVID-19 Pandemic on Barnet's residents

Given the age profile of our local residents and size of the borough, Barnet has been impacted significantly during the pandemic. Over 2% of local population tested positive for the virus (with the highest numbers in people over 80 years of age) and, of those, 484 people died (as of beginning of December 2020). It is estimated that a total number of truly positive cases is much higher than that.





The pandemic also has had an indirect impact on wider wellbeing aspects such as unemployment (over 40, 000 people furloughed locally), mental ill health, domestic violence, lack of physical activity and economic hardship. Recent resident's survey conducted in October-November 2020, highlighted the following aspects on local residents' lives:

38% of residents strongly agree that they have been worried about COVID-19

43% of residents fell that their community has pulled together during the pandemic

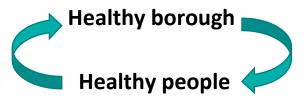
47% of residents felt the pandemic has negatively or very negatively impacted their personal relationships

The pandemic has had detrimental effects on all aspects of our life and highlighted a multitude of complex issues that indivertibly impact on people's health and wellbeing. This strategy is aiming to incorporate lessons learnt into all we propose to deliver over the next four years.

Our vision and guiding principles

Our vision is to make Barnet the London Borough of Health

A healthy borough makes healthy people. It is where the environment around us supports and promotes our health and wellbeing. In a healthy borough, everyone has access to a good education and can experience good and secure housing and employment. High quality health and social care is available for anyone when they need it. A healthy borough reaches out to the most vulnerable, giving everyone opportunities to thrive. With healthier and happier residents, communities are strengthened to support each other, and the local culture and economy flourishes.



Our five principles

1. Making health everyone's business

We will ensure health is everyone's business, not just for agencies primarily concerned with health and wellbeing, but also for those that works to improve wider determinants of health.

2. Collaborative partnership

We will work in collaborative partnership across organisational boundaries and learn from different viewpoints across the whole system. We will focus on the areas where collaborative work makes the most difference and HWBB can add the most value.

3. Evidence-based decisions

We will use robust evidence base to inform our decisions, ensuring that our investment creates maximum value for money and our resources are distributed equitably.

4. Considering everyone's needs across the life course

We will consider needs of all parts of the population in all that we do. This includes children and young people and people with complex needs such as mental health issues and learning disabilities.

5. Co-design approach

We will champion co-design approach to resolve our challenges, making sure Barnet residents' needs are met and resulting services are practical and sustainable.

How we developed this strategy

Under the sponsorship of the HWBB, this strategy has been developed through a rigorous process triangulating the evidence base, HWBB's perspectives and residents' views on health and wellbeing in Barnet.

Barnet Joint Strategic Needs Assessment (JSNA) formed the basis for this strategy. The JSNA provides detailed assessment of health needs in Barnet, and is available at: https://jsna.barnet.gov.uk/

HWBB members' perspectives on health needs and the board's role were gathered through one-to-one interviews.

We were also keen to understand residents' views in shaping our strategy. This was done through:

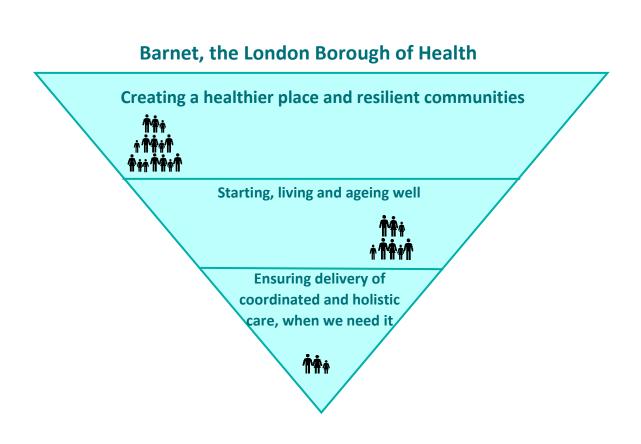
- Online development survey (9th September 13th October 2019)
- engagement at Annual Care Summit (26th September 2019).
- engagement to gather views of young people at Youth Board (26th September 2019).
- Commissioned research from Healthwatch Barnet to engage with residents on Health and Wellbeing and the impacts of COVID-19. This included specific engagement with BAME communities in Barnet (October to December 2020)

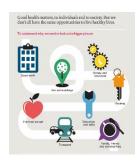


This strategy also links in with various other strategies and plans in Barnet, including Barnet Council's Corporate Plan and CCG's Business Plan.

Our Key Areas of focus

We recognise that most of our health and wellbeing outcomes are influenced by our environment and wider determinants of health (app. 85%) while good quality access to health and care influences only 10-15% of the overall health and wellbeing outcomes. Our strategy therefore starts to identify the right balance of key transformational area that can be delivered across the system and will add value locally.





Key Area 1: Creating a healthier place and resilient communities

Why is this important in Barnet?

According to the World Health Organisation toxic air is the leading environmental risk of early death, with 7 million deaths occurring annually due to air pollution. Long term exposure can produce respiratory symptoms and affect lung function, with high concentrations causing inflammation of the airways. Nitrogen Dioxide (NO2) pollution within the borough is largely due to transport, areas of higher NO2 pollution are mainly concentrated around the main roads and junctions, including the A1, M1, A406 and A1000.

In 2016/17, over half (53%) of adults in Barnet had excess weight. The food and drink environment is one of the main risk factors for obesity - the availability of calorie-rich food now makes it much harder for individuals to maintain healthier lifestyles.

Barnet has the 9th lowest crime rate of all 32 London boroughs and lower than the Metropolitan Police Force Area average (for the year ending June 2019). The burglary rate was slightly higher than the force average for the Metropolitan Police, but the violent, sexual and drug offences were lower than force average for the metropolitan police. In the rolling year to December 2017, there were 24 gang flagged offences in Barnet, and 51 youth victims (aged under 25) of knife crime with injury. Violence against women is a major public health concern. The number of domestic abuse offences in Barnet rose by almost a third (31%) between January 2018 (n = 194) and December 2019 (n = 255).

Residents have said that Barnet could be a healthier place to live, work and learn if;

- Air quality was improved, there was less road traffic and more support for active travel.
- There was an increased feeling of community safety.
- There was greater access to healthy food and junk food was less available.
- There was less child poverty and better social housing provision.

What residents see as priorities:

- Clean air, streets and well-maintained parks and open spaces.
- Creating an environment where healthy eating is the easy choice.
- Building stronger communities by making community space and funding available.

Our priorities for Creating a healthier place and resilient communities

Our commitments for creating a healthier place and resilient communities

Integrate healthier places in all policies

We will ensure that all of our policies and strategies across the system include specific actions on improving health and health equity through creating good housing, employment opportunities, active travel links and other economic and commercial conditions in Barnet

Create a healthier environment

We will create healthier choices locally with a focus on improving access to clean air, water and healthy food

Strengthen community capacity and secure investment to deliver healthier places

We will facilitate networking and capacity building between local communities and promote safety and cohesion while preventing violence and crime

Key Area 2: Starting, Living and Ageing Well

Why is this important in Barnet?

Taking a life course approach in Barnet enables us to prevent diseases at key stages of life from pre-conception, pregnancy, infancy, childhood, through to adulthood. Barnet has been forecast to have the largest number of children and young people (CYP) of any London borough in 2020 and we will continue to see a growth in the CYP up until 2025.

Tackling the wider determinants of health will enable us to focus on critical stages and settings (such as the early years, schools, opportunities for healthy lifestyles and workplaces) in order to improve health outcomes for Barnet.

In adults, the top three broad causes of mortality, and the top three contributors to the gap in life expectancy between the most and least deprived quintiles in the borough for both sexes are circulatory diseases, cancers and respiratory diseases. During 2015-17, circulatory diseases led to 2,319 deaths, cancers caused 1,853 deaths and respiratory diseases resulted in 996 deaths. In the same period, mental and behavioural disorders were associated with 830 deaths.

Residents have said that Barnet could be a healthier place to live, work and learn if;

- There was better support for active travel.
- They were enabled to eat healthily and do more physical activity.
- We used social media platform to communicate messaging by young people, for young people
- There were clearer pathways to enable families to easily access the CYP services they require.
- It was dementia friendly.

Focusing on the life course allows us to intervene during these stages in life:

- Preconception and becoming a parent
- Infancy and early years (0-5)
- Childhood and adolescence (5-19)
- Working age (16-64)
- Ageing well

There were an estimated 13,804 households in Barnet in fuel poverty during 2016, which equated to 9.7% of households; this was significantly lower than both the London and England averages. Housing affordability is a major concern with both rents and house prices in Barnet high compared to the national average.

What residents see as priorities:

- Mental wellbeing promotion
- Green space and affordable leisure facilities
- Support for employment and workplace health
- Child poverty and improving life chances

As our population becomes increasingly sedentary, physical activity is importantly recognised as an essential component of our wellbeing; providing a positive contribution to our physical, mental and emotional health. Barnet has the 6th highest proportion of adults out of all the London boroughs who were physically inactive – 28.6%. As of 2015, the total green space provision of the borough is 888 hectares (nearly 10% of the area). London Borough of Barnet (LBB) are committed to making the borough's parks and green spaces "amongst the best in London".

Active travel (including cycling and walking) offers a variety of health benefits including lowering the risks associated with cardiovascular disease, type 2 diabetes, depression, dementia and some forms of cancer. 54% of journeys originating in the borough are made by car - twice the proportion of trips made using active transport (27%).

Our priorities for Starting, Living and Ageing Well

Our commitments for starting, living and ageing well

Improve children's life chances

We will improve children's life chances by supporting their health and wellbeing from very early age

Promote mental health and wellbeing

We will promote good mental and emotional health across all ages and different communities and work together to prevent severe mental illness and suicide

Get everyone moving

We will improve choices for physical activities locally for all ages and abilities, and ensure residents know how to access it

Support a healthier workforce

We will invest time and resources to ensure our workforce is supported to be healthy, happy and productive at work

Prevent long term conditions

We will work with communities to understand what support can be offered to reduce risks of developing long term conditions and recognise early signs and symptoms

Key Area 3: Ensuring delivery of coordinated and holistic care, when we need it

Why is this important in Barnet?

Barnet has an aging population with an estimated 15% of residents being aged 65 and over. In 2018/19, 50% of those admitted to hospital for an emergency admission longer than 1 day were 65 or over. The large population of Barnet also means it has 85 care homes which is the largest number of care beds for over 65s in London.

Barnet has approximately 2, 500 care beds, one of the largest number in London and it has the largest care market in North Central London. Residents in care settings have been heavily affected by COVID-19 pandemic and it is of a paramount that we work across the partnership to ensure we support residents to live healthy and independent life as long as possible and safeguard those most vulnerable.

The ICP's vision is to maximise health and wellbeing for all people of Barnet by working together as an integrated care partnership. Its aims are:

- A population health management approach that considers the wider determinants of health
- Addressing the challenging commissioning issues to develop integrated solutions
- Addressing performance issues where Barnet is an outlier
- Support residents in self-care and prevention

Embedding a preventative approach meets the triple aim of:

- 1. improving outcomes for local residents and patients,
- 2. saves costs for health services
- 3. reduces the impact on planned care of unplanned events which are common with more severe conditions such as cardiovascular disease.

Residents have said that Barnet could be a healthier place to live, work and learn if;

- They had better access to primary care including GPs, with shorter referral times.
- Technology was embraced but not leave anyone behind.
- Care was joined-up and coordinated and met their holistic needs.
- Mainstream healthcare services addressed specific needs of people with complex needs e.g. Learning Disability, Mental Health (long waiting time for a consultation in busy waiting room is a very distressing experience for people with LD)

What residents see as priorities:

- Access to GPs and out of hours services (walk in centres and community pharmacies).
- Supporting carers to look after their own health.
- Services to help prevent long term conditions such as weight management, stop smoking and promoting self-care

The Barnet ICP brings together:

- NCL CCG
- London Borough of Barnet
- Royal Free London NHS Foundation Trust
- Central London Community Healthcare NHS Trust
- Barnet, Enfield and Haringey
 Mental Health Trust
- Barnet Federated GPs

Our priorities for Ensuring delivery of coordinated and holistic care, when we need it

Our commitments for ensuring delivery of coordinated and holistic care, when we need it

Support digital transformation of services

We will create circumstances where access to digital care can be easy for all who need it

Enable carers health and wellbeing

We will support care staff and informal carers to look after their health and wellbeing

Deliver population health integrated care

We will work together to ensure the Barnet Integrated Care Partnership is centred around resident's need, aims to reduce health inequalities, promotes good physical and mental health and enables seamless access to health and care services

Key Area 1: Creating a healthier place and resilient communities

Integrate healthier places in all policies

What have we done so far?

- Put health and wellbeing at the forefront of policy development such as Growth Strategy, Local Plan, Long Term Transport Strategy, Infrastructure Delivery Plan, Local Plan and Air Quality Action Plan, Housing Strategy and Community Safety Strategy.
- Created a temporary, light segregated cycle lane along the A1000 to enable and promote active travel. As one of the main north-south routes through the borough, the A1000 links key town centres. This work is intended to provide an easily installed cycling route allowing residents to access a number of important local centres and transport hubs (including tube stations).
- Produced Healthy Equity Impact Assessment on Long Term
 Transport Strategy, Health Impact Assessment on Local Plan and
 Growth Strategies. These assessments evaluate the potential direct
 and indirect health impacts policies and strategies may have on the
 health of residents, with particular focus on those who are most
 vulnerable.

What are we going to do next?

- Support the delivery of strategic outcomes across council departments which promote
 health and wellbeing through behaviour change interventions, improving built environment
 or improving air quality.
- Review the digital connectivity of all interventions and infrastructure that supports delivery
 of active travel in the borough e.g. Active Trails, Health Walks and Heritage Walks
- Comprehensive evaluations of health benefits obtained from the delivery of strategic outcomes to identify what works well. This will take the form of health impact assessments, consultations with residents and data available from public health outcomes framework.
- Continue to work with partners to promote health and wellbeing through the built environment with strategy and policy.
- Promote WHO Dementia Friendly Neighbourhoods.
- Work with communities to identify felt needs and priorities when developing programmes and policies. Require policies to consider the needs of older adults and children and young people.
- Continue to delivery health equity and health impact assessments where appropriate.
 Require large developments to provide HIAs in line with the draft local plan policy CHW02.

What will show our progress?

- Inclusion of health and wellbeing in strategies/masterplans
- Ownership of healthy places related activities and projects by other council departments.
- Feedback from Consultation/evaluations. HIAs and the public
- Measure use of temporary cycle lanes
- Board reports (non-HWBB) have a section detailing how it is relevant to health? How will this report contribute to health?
- Use of relevant health data within applications
- Consultation with different age groups as part of built environment delivery plans.
- References to dementia friendly communities within strategies and reports/masterplans
- Health equity assessments

Create a healthier environment

What have we done so far?

- Produced the Air Quality Action Plan 2017-2022 to contribute to London Local Air
 Quality Management. It outlines the action the council will take to improve air quality
 in the borough. It replaces the previous action plan which delivered successful
 projects, such as the Air Quality Champion project.
- Adopted the Barnet Tree Policy, which lays out the borough's plans for the improving the tree planting and maintenance across the borough. It commits us to planting an additional 4,500 trees between 2018-2023
- Adopted our new Long-Term Transport Strategy 2020-2041, which lays out our commitment to making travel across the borough more sustainable by supporting and encouraging residents to use active modes of transport.
- Installed over 100 Electric Vehicle Charge Points across the borough
- Developed an overarching Healthy Weight Strategy which promotes access to good food across the life course. This includes Healthier Catering Commitment, Sugar Smart and a food security action plan.
- Barnet has become partners with Refill London to promote access to free drinking water.
- Successfully negotiated for a 200m ban of junk food advertising from schools within the new council advertising contract.
- Developed an evidence paper for the draft local plan to limit access to takeaways at key points in the borough

What are we going to do next?

- Conduct air quality audits and implement measures on all schools with high air pollution (as identified by TfL). Continue to encourage schools to join the TfL STARS accredited travel planning programme and pilot school streets programmes where appropriate.
- Continue to invest in measuring air quality across the borough to ensure we can evaluate
 whether air quality is improving or not; particularly when new interventions are being
 assessed.
- The council is delivering the first phase of a new temporary light cycle lane along the A1000 going north from East Finchley. Once installed, officers will assess the initial impact of the cycle lane and will determine whether recommendations should be made to extend this further, in line with the Draft Long-Term Transport Strategy.
- Develop a Council-wide advertising policy which limits junk food advertising where appropriate.
- Continue to shift towards a healthier food cultures as a part of our Local Government Declaration on Sugar Reduction and Healthier Eating by expanding and Healthier catering commitment, Refill London and Sugar Smart.
- Explore opportunities for public access to drinking water within council premises.
- Consult with partners around the development of an alcohol licensing scheme
- Support the ratification of Local Plan policy TOW03 which prevents new hot food takeaways from opening near schools and requires all new takeaways to have signed up to the Healthier Catering Commitment.

- Realisation of Air quality action plan
- Number of schools participating in air quality audits
- Measuring progress against the targets laid out in the Barnet Tree Policy
- Progress updates on cycle lanes and charge point usage within the borough
- Delivery of council-wide advertising policy which limits junk food advertising where appropriate
- Availability of free drinking water
- Number of schools, businesses and other stakeholder participating in Sugar Smart initiatives.
- Monitor policy TOW03 in the Barnet Local Plan.

Strengthen community capacity and secure investment to deliver healthier places

What have we done so far?

- Employed 8 social prescribing link workers. Public health was a leading partner for developing induction and training.
- Promoted and supported VCS with utilising available tools and training such as Club Matters and 'Join In' to increase their volunteering offer and develop the confidence to engage and support volunteers.
- Put in place a comprehensive community safety strategy which public health and health partners support.
- Invested £41.5m into 2 brand new leisure facilities at Barnet Copthall Leisure Centre and New Barnet Leisure Centre.
- Delivered a £5.5m transformation of Montrose Playing Field and Silkstream Park, which also included a combination of grants from the Greater London Authority, Environment Agency and London Marathon Charitable Trust.
- Directed £450,000 of revenue investment into the borough to support delivery of interventions since implementation of the FAB Framework.
- Secured investment from the London Marathon Trust to deliver a sports development initiative at Montrose Playing Fields.
- Submitted bids totalling approximately £12.1M to the Department of Transport (DfT), Transport
 for London (TfL) and the Ministry of Housing, Communities and Local Government as part of
 COVID-19 recovery within town centres (including liveable neighbourhoods, cycle lanes etc.).
- Invested in a software to enable data entry by all partners involved in the delivery of social prescribing.

What are we going to do next?

- Social prescribing: We are investing/funding a team manager post and have a contract with AgeUK Barnet. We will closely monitor the outcomes agreed within the direct enhanced services (DES) specification
- Adopt an innovative approach to volunteering, to ensure community benefit is at the
 very core. Provide access to high quality, diverse volunteering opportunities that fulfil
 personal needs, enable utilisation of skills and the development of new skills and
 experiences
- Lead on Trigger Trio: Working collaboratively across the partnership to identify those
 most at risk of multiple complexities and intervening early.
- Embed public health approaches to serious youth violence.
- Securing investment through developer contributions (CIL, S106) to support physical activity and community safety infrastructure as outlined in the Infrastructure Delivery Plan.
- Be prepared for funding opportunities: With Covid-19 significantly changing the
 funding landscape there is likely to be increased demand for shovel ready' projects,
 i.e. those that are fully scoped and can be delivered within a relatively short space
 of time. It remains critical that the council continue to develop and scope works in
 accordance with council strategy to ensure that we remain in position to access
 funding.
- Actively seek out opportunities for additional funding; monitoring the DfT and TfL for opportunities.

What will show our progress?

- Directed Enhanced Services
 (DES) outcomes are achieved
- VCS participating in social prescribing.
- Monitor actions as outlined within the defined trigger trio action plan.
- Serious youth violence: a reduction in crime. We will measure progress against measures in the Jtag. Focus on crimes over-reported in key areas such a Grahame Parkincluding violent crime and vehicle crime.
- Funding applications submitted across the council.
- Secured third part funding to support improvement/opportunities

Key Area 2: Starting, living and ageing well

Improve children's life chances

What have we done so far?

- Worked with the multiple agencies on the Family Service led Life Chances strategy, our HWB strategy would be aligned with this strategy. We have multiple programmes to improve life chances through the healthy child programme, healthy schools and early years, resilient schools, and the healthy weight pathway.
- Worked across the council to improve quality of school lunches and holiday hunger programme, during COVID worked with wider council to work on access to essential supplies and free school meals.
- Immunisation action plan for Barnet was implemented in 2019, this has been paused during COVID to focus on working with the CCG and commissioned providers to ensure access to pre-school vaccination, promotion of flu immunisations, and catch up for school aged immunisations post lockdown.
- Commissioned and delivered oral health programmes in the borough.
- Engaged with secondary schools on period poverty and raised awareness
 of the issue with schools and various forums.

What are we going to do next?

- Ensuring access to adequate and healthy Food.
- In line with Barnet's CYP Life Chances strategy we are committed
 to upholding the UN Convention on the Rights of the Child
 (UNCRC) including doing all we can to ensure that every child
 develops to their full potential. The results of our CYP COVID-19
 health impact assessment drawing on information fed in by
 young people, local partners and data, and national research
 and data will help to inform these commitments.
- Promote oral health
- Work to reduce risk of vaccine preventable infectious diseases by improving uptake of childhood vaccination.
- Provide information and education to boys and girls about periods, period poverty and hygiene to help remove the stigma around talking about this subject
- Encourage schools to access the PHS Group period poverty portal and make period products available to all pupils.

- Increased number of eligible children accessing free school meals
- Improved school meal quality.
- Improved Life satisfaction as reported by young people.
- Reduced percentage of children with one or more decayed or missing teeth.
- -A and E attendances in under 5s.
- Hospital admissions for asthma in under 19s.
- Hospital admissions for injuries in under 15s and under 24s
- Feedback from young people in the borough.
- Percentage of children living in low income families (for monitoring purposes).
- Increased uptake of Flu, MMR, and other CYP routine immunisations

What have we done so far?

- Established the Fit & Active Barnet (FAB) Framework, FAB Partnership Board, launch of the Fit & Active Barnet Campaign and introduction of the Fit & Active Barnet (FAB) Hub and Card.
- Delivered targeted interventions and indicatives in partnership with a range or organisations.
- Delivered our leisure management contract, which measurably improves the health and wellbeing of residents.
- Engaged with residents and stakeholders to develop the; Barnet
 Playing Pitch Strategy, Barnet Indoor Sport & Recreation Study, Parks
 and Open Spaces Strategy and Fit & Active Barnet Framework.
- Engagement through digital behavioural change intervention for Active Travel.
- Established the Fit & Active Barnet Hub; a dedicated website providing information, advice and guidance on physical activity.
- Installed new technology (facial recognition and cashless) within leisure facilities.
- Provided remote appointments for service users during COVID
- Developed the healthy weight pathway for Barnet

What are we going to do next?

- Support health intervention pathways, harnessing the relationship between health and activity (e.g. post health check, children & young people healthy weight pathway, weight management and cardio vascular disease).
- Review of the existing FAB Framework to focus on wider engagement for physical activity amongst various population groups (expires March 2021)
- Improve strategic alignment to ensure opportunities are concentrated and a range of facilities are utilised to sustain future activity; via the workplace, community, leisure, education, travel and open environment.
- Review of partnership strategic outcomes.
- Maximise the use of facilities and identify opportunities for co-location and community hubs, widening access to ensure that facilities and open spaces are better used by the communities they serve.
- Review the connectivity of all interventions and infrastructure that supports delivery of active travel in the borough e.g. Active Trails, Health Walks and Heritage Walks
- Review where digital innovation developed during COVID may be beneficial to continue as part of a mixed remote and face to face model post COVID, the enhance service user experience and access.
- Expand the CYP section of the healthy weight pathway to support schools promote a healthy environment and daily exercise, and to support teenagers and CYP with SEND better.
- Increasing green space and capitalising on the national interest in daily exercise.
- Demographic specific approach to physical activity / active travel, including working with schools to promote active travel.

What will show our progress?

- Increase in percentage of the population taking part in sport and physical activity (as defined by Sport England / CMO)
- Increase in the percentage of children and adults utilising outdoor space for exercise.
- Securing investment in parks, open spaces and leisure to create and improve facilities.
- Delivery of masterplan proposals.
- Increased children and adults engaging in active travel.
- Service user feedback
- Group participation level
- Appointment attendance
- NCMP data (increased children of healthy weight in reception and year 6).
- Primary school engagement with physical activity projects
- Increase in percentage of the population taking part in sport and physical activity

Support a healthier workforce

What have we done so far?

- Set up the LBB Workplace Health and Wellbeing Working Group and produced an action plan with actions including mental health, physical activity, healthy eating, workplace safety
- Achieved London Healthy Workplace Award (LHWA) Excellence Award
- Provided Mental Health First Aid training
- Commissioned the Working Well service (job retention support to employees of SMEs (Small and Medium Enterprises) and working with employers to work towards becoming a Mindful Employer)
- Introduced 'Able Futures' a staff welfare support service, to run alongside our Employee Assistance Programme and mental health first aiders

What are we going to do next?

- Ensure resilient workforce that work safely
- Ensure our policies and processes are modern and fit for purpose
- Continue to work with SMEs and their employees to prevent job losses due to mental health problems
- Promote equality throughout our workforce

- Delivery of the Workplace Health Action Plan delivered
- Maintain LHWA Excellence status
- Increased number of Mental Health First Aiders from the baseline
- Working Well service contract targets are achieved
- Reduction in work related ill health and incidents
- Staff feedback and satisfaction.

Promote mental health and wellbeing

What have we done so far?

- Provided specific services for children and young people in Barnet such as the Resilient Schools Programme, the healthy schools programme, the healthy child programme, sexual health promotion and healthy lifestyles programmes.
- Worked alongside partners to implement the CAMHS transformation plan.
- Produced yearly suicide prevention action plans through the multi-agency suicide prevention working group
- Commissioned comprehensive sexual health clinical services and as well as a sexual health promotion services for young people.
- Developed the healthy weight pathway for Barnet
- Social Prescribing within the Primary Care Networks
- Patient participation groups
- Put in place Recovery college and intensive enablement
- Created integrated community mental health teams including intensive support

What are we going to do next?

- Support children aged 0-5 and their families to enable them to have a healthy and happy start.
- Provide comprehensive mental and physical health support to schools, including staff
 education to enable support for children with long term health conditions (eg asthma
 or mental illness).
- Work with partners to improve access to mental health support for CYP, and implement relevant recommendations from the local CYP COVID HIA (which has been informed by local young people).
- Expand the CYP section of the healthy weight pathway to support schools promote a healthy environment and daily exercise, and to support teenagers and CYP with SEND better.
- Work with partners to promote parity of access to mental and physical health services for children, young people and adults with mental illnesses or SEND.
- Embed a new model of Social Prescribing in the borough
- Local development of Barnet Suicide Prevention Strategy includes reviewing lives lost to suicide amongst mental health service users as well as broader prevention aims.

What will show our progress?

- Number of schools participating RS programme and with trained MH first aiders, peer mentors, and teachers delivery mindfulness and first aid awareness in schools.
- Number of schools and EYs settings with bronze/silver/gold awards. healthy schools award and holistic healthy lifestyle policies.
- Life satisfactions scores among CYP
- A clear CYP mental health pathway.
- Breastfeeding rates at 8 weeks.
- Primary school engagement with physical activity projects
- Increase in percentage of the population taking part in sport and physical activity
- Directed Enhanced Services (DES) outcomes are achieved
- Reduction in DSH admissions
- Suicide data from ONS, PHE and Thrive London database and feedback from partners.
- Healthy child programme service data and service user and stakeholder feedback.
- Reduction in number of self-harm attempts and lives lost to suicide amongst users of mental

Prevent long term conditions

What have we done so far?

- Encouraged high quality employment and work experience through the sports and physical activity sector to benefit local residents e.g. supporting the implementation of London Sport's disability sport employment programme 'Activity Works
- Commissioned the COVID 19 Health Champions programme
- Practice pharmacist virtual clinic review of AF (atrial fibrillation) register for anticoagulation improvement.
- 85% of places taken up for first contract of National Diabetes Prevention Contract completed July 2019. Increased equity of access to programme with targeted primary care communications to practices in areas of high deprivation and eligible population.

What are we going to do next?

- Residents will be invited from across the borough to join the COVID 19
 Health Champions network, to enable people to help their family, friends
 and other community members to make sense of the facts about COVID 19,
 so that they can make informed choices and improve the health and
 wellbeing outcomes of people across the Borough.
- Increasing reach of cardiovascular disease programmes in BAME communities
- Improving our digital prevention offer
- Working with COVID champions in the long term converting to local health champions with a focus on health priorities
- Collaborating within the ICP (Integrated Care Partnership) Pathway workstream to improve CVD prevention (primary & secondary) and reduce inequalities
- Secondary prevention: NCL structured education offer

- Champions reflect on the key demographics of the Barnet population, with a focus on under-served communities
- Increased knowledge and understanding of health messages in relation to COVID-19 amongst the COVID champions and their contacts
- Reduction in new diagnoses of CVD
- Reduction of hospital admissions due to CVD
- Uptake of NHS Health Checks
- Uptake of NDPP

Support digital transformation of services

What have we done so far?

- The 'Talk before you walk approach' has been widely adopted in many GPs due to covid-19.
- We are a national leader in use of technology in care

What are we going to do next?

- Practices to offer digital training / group participation for Long Term Conditions (LTC)
- Improve digital access for all whilst also ensuring that digital divide does not affect access to services e.g. setting up access to COVID testing service which does not require accessing website by individual.

What will show our progress?

- Proportion of patients with LTCs who have participated
- Difference in participation between those in the most deprived areas compared to the least
- Impact on disease-relevant outcomes

Enable carers health and wellbeing

What have we done so far?

- Barnet Flu programme with additional focus on care setting, carers and others
- Specialist dementia support team
- Care Quality Support team
- Commissioned services for carers wide range in place
- Carers strategy in place for both adult and young carers

What are we going to do next?

- Ensure our care staff and informal carers are supported to look after their own health and wellbeing
- Address the COVID risk to staff from Black Asian and Other Minority ethnic groups

- Reduction in carers who feel isolated
- Increase satisfaction in carers

Deliver population health integrated care

What have we done so far?

Supporting those with complex needs

- Use of health services by different segments of the population.
- Integrated care in mental health, learning disabilities, urgent care/hospital discharge and primary care networks across Barnet
- 0-19 hubs and integrated support for young people with complex needs in place
- Long standing Prevention and Wellbeing model in Barnet, led by a team of local area co-ordinators and supported by a network of commissioned evidence-based prevention services

Integrated care and pathways

- Scoping work completed regarding existing provision of clinics for older people in
- Barnet service mapping complete
- Public Health population health outcomes presentation completed to support
- ICPW development for frail/ older people and LTCs ICPW's work
- Key findings of PCN 2 frailty and palliative care MDT shared
- Long Covid clinics across NCL open to all NCL residents BGH, RF, UCLH

Care settings

- Worked with NCL leads to align the Barnet Multi-disciplinary Team (MDT) model
- Worked with NCL leads to align proposed Barnet MDT process
- Specialist dementia support team
- Care Quality team

Impact of COVID and LTCs on BAME groups

Work with Healthwatch to gather residents' views

Same day access and discharge

- Completion of NCL Gap Analysis of the IDT and Peer Review Meeting with CNWL completed
- Review of IDT data reporting across all IDTs being undertaken to ensure consistency of reporting
- Community bed sharing arrangement implemented across NCL units
- Additional brokerage support now available at weekends to support flow, including access to YCE default provider for Barnet Borough
- Increased usage of 111 to triage minor illness away from local services

What are we going to do next?

Supporting those with complex needs

• Ensuring rapid access to care in the most appropriate way

Integrate pathways

- Rapid Design Event (November 2020)
- Resource and membership of LTCs TFG to be confirmed
- Key findings and full PCN 2 evaluation to be submitted
- Focus on areas identified from population needs assessment i.e. frail elderly and cardiovascular disease pathways to make greatest impact on health outcomes
- Continue to develop understanding and approach to addressing the health needs of local residents with long COVID

Care settings

- CLCH to mobilise MDT
- Liaise with RFL Consultant input into MDT
- Engagement activity with Primary Care and Care homes to introduce MDT pathway
- Further development of ways of partnership working with Barnet ICP within context of North London Health and Care Partnership
- Ensure our care staff are supported to look after their own health.
- Address the COVID risk to staff from Black Asian other ethnic groups

Impact of COVID and LTCs on BAME groups

- Co-produce our plan and interventions with members from affected communities, taking into account findings from Healthwatch consultation with different communities on impact of COVID on them.
- Lead by example within each organisation involved in this programme;
- Ensure that any materials we produce are accessible in terms of channels used, ease of language and translated languages used (as appropriate); and
- Deploy cultural competence in developing our approaches taking inspiration for existing strategies such as the NHS People Strategy

Same day access and discharge

 Develop local triggers points for use of Barnet community beds by other NCL Boroughs

What will show our progress?

Supporting those with complex needs

Increase in carer's and patients satisfaction

Integrated pathways

- Each partner contribution to specific pathways evidenced
- Overall impact on disease-relevant outcomes
- Reduction in health inequalities for frail elderly population and cardiovascular disease areas of focus.

Care settings

- Reduction in impact of COVID on care staff from Black,
 Asian and other ethnic groups compared to first wave
- Each partner contribution to specific pathways evidenced
- Overall impact on disease-relevant outcomes
- Reduction in health inequalities for frail elderly population and cardiovascular disease areas of focus
- Reduction in emergency admissions from care homes for ambulatory care sensitive conditions

Impact of COVID and LTCs on BAME groups

- Uptake of prevention programmes proportionate to the local ethnic group and their risk of LTCs
- Improvement in risk factor measures across all ethnic groups

Same day access and discharge

- Maintenance of low number of cases of COVID in care settings
- Reduction in delayed discharges
- Improvement in same day access to medical/professional support using variety of approaches