

	Health and Wellbeing Board 15 July 2021
Title	Final Barnet Joint Health and Wellbeing Strategy 2021-2025
Report of	Director of Public Health and Prevention
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix I: Final Barnet Joint Health and Wellbeing Strategy 2021-2025 Appendix II: Barnet Joint Health and Wellbeing Strategy 2021-2025: one-page summary Appendix III: Draft outcome monitoring approach and draft implementation plan Appendix IV: Draft Barnet Joint Health and Wellbeing Strategy 2021-25: report of consultation findings
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Summary	
<p>This report provides the final update on the development of the Barnet Joint Health and Wellbeing Strategy (JHWS) 2021-25. Since the last update to the board in March 2021, progress has been made to finalise the Strategy. This report is asking for approval of the Strategy, in order to meet the Board’s statutory duties.</p> <p>Appendix I provides the final strategy document with the plan for its implementation; Appendix II provides a one-page summary of the strategy document; Appendix III provides an overview of the proposed approach to outcome monitoring and the draft implementation plan; Appendix IV provides the consultation findings report</p>	

Recommendations

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| 1. That the Health and Wellbeing Board approve the final version of the Barnet Joint Health and Wellbeing Strategy 2021-25 for implementation. |
| 2. That the Health and Wellbeing Board note and discuss the proposed approach to outcome monitoring and implementation plan, to be fully developed and presented at HWB Board in September. |

1. WHY THIS REPORT IS NEEDED

- 1.1 Producing a JHWS is a statutory duty of the Health and Wellbeing Board and it is aimed to articulate vision and ambition to improving health and wellbeing outcomes for Barnet's residents. Current Strategy has been extended to July 2021 and therefore final Barnet JHWS 2021 to 2025 is produced across the partnership, for final approval.

2. REASONS FOR RECOMMENDATIONS

- 2.1 Developing a new JHWS is one of our key priorities and a statutory duty, even during this unprecedented period of the COVID-19 pandemic. Health and Wellbeing Board oversees and approves the Strategy for the borough. Following on from previous updates to the board, recommendations provide the board the opportunity to review the final draft, approve the strategy and enable start of the JHWS implementation phase. This strategy has been developed over the last 18 months through a process of engagement workshops with the Board, wide residents' engagement and consultations, the intelligence and insight provided in the Barnet Joint Strategic Needs Assessment (JSNA), other national and international research and review of evidence base and best practice.
- 2.2 Healthwatch was commissioned to engage with residents and gather views on COVID-19 pandemic impact, with a specific focus on engagement with various minority ethnic groups. Healthwatch findings have fed into the strategy development. Full report and findings can be accessed here: [Health and Wellbeing Strategy Engagement | Barnet Council](#)
- 2.3 As JHWS has been developed and reviewed during the pandemic, particular attention has been paid to learn lessons from the pandemic and incorporate some emerging opportunities as well as longer-term impacts of the pandemic into the strategy.
- 2.4 The priorities within this strategy have been refined through engagement with our partners across the health and care system and with key departments within the local authority. The direction of the JHWS has also been guided by changes to the national and local reconfiguration of health and social care, as per the White Paper: [Integration and Innovation: Working together to improve](#)

[health and social care for all \(HTML version\) - GOV.UK \(www.gov.uk\)](#) . This includes the North Central London merger of borough-based clinical commissioning groups, the national development of Integrated Care Systems and the development of the Barnet Integrated Care Partnership.

- 2.5 Finally, Barnet JHWS is supporting delivery of the Barnet Plan 2021 to 2025, in particular, the cross-cutting Prevention workstream.
- 2.6 The JHWS development process articulated the vision and defined three key areas of focus. Key Area 1 is focusing on the things that can be improved for all residents in Barnet to promote the overall health and wellbeing of the borough, Key Area 2 is focusing on support for people at risk of developing physical and mental ill health, while Key Area 3 is focusing on improving services for those who do need to access them.
- 2.7 Key Area 1 looks to create healthy environment where a healthy choice is an easier choice and to support local communities to be safe and resilient. We are approaching this priority by focusing on the ‘Healthier High Streets’ Programme.¹ High Streets have a unique position within our communities and can positively affect our social, environmental and economic capital and as such, play an important role on both the direct and indirect health of local communities. COVID-19 pandemic will have longer-term impact on the future ‘look and feel’ of our High Streets and it is important that potential negative impact on lifestyle is minimised through this environment.

With the “Healthier High Streets Programme” we want to maximise promotion of health and wellbeing via local businesses already operating within our high streets, and ensure that new retail, hospitality and leisure premises are conducive to health. We will work with local businesses to promote access to drinking water, changing places and to establish an engagement schemes aimed to improve the local food environment, social inclusion of older adults and breastfeeding parents.

- 2.8 Key Area 2 is focusing on preventing long-term conditions and mental ill health by taking life-course approach. The Marmot Review² emphasised the importance of having a best start in life and its impact on the rest of ones’ life. Therefore, improving life chances for children and young people by promoting good nutrition through breastfeeding, protecting from illness through vaccinations and ensuring that oral health is maintained, will set healthy foundations for later life. The COVID pandemic has demonstrated how children and young people’s mental health has been compromised by

¹ PHE 2018: Healthy high Streets [Healthy High Streets Briefing document \(publishing.service.gov.uk\)](#)

² Institute of Health Equity, 2020: Health Equity in England: Marmot Review, 10 years on. [Health Equity in England: The Marmot Review 10 Years On | The Health Foundation](#)

significant disruption to education, access to services and social contact. The Resilient Schools Programme, which has been in place for 3 years so far, aims to equip teachers and schools with the skills to support young people and provide environments which support mental and emotional wellbeing. This Programme is set to expand and strengthen over the coming years. Barnet has a large older population and people live long life locally however, on average, last 20 years are spent in poor health, mainly due to long-term conditions. Key Area 2 focuses on promoting healthy lifestyle behaviours, improving physical activity and mental wellbeing – factors that influence overall physical health.

- 2.9 The Barnet Integrated Care Partnership (ICP) within North London Partners in Health and Care have been developing closer integration of services across health and social care. This collaboration, particularly embracing the statutory and voluntary sectors, has strengthened further during the pandemic. Key Area 3 of the JHWS links to the priority areas identified for the ICP for 2021 (children and young people, mental health and health inequalities) and builds on the positive opportunities emerged during the pandemic, such as embracing digital consultation and better multidisciplinary work. Key Area 3 will also tackle big challenges caused by the pandemic in terms of clearing backlog and reducing existing waiting times for managing long-term conditions, as well as looking into impacts of long-Covid on local residents.
- 2.10 Although the Strategy aims to articulate vision and provide the overall priority framework, its implementation/action plan is seen as an iterative document that will be reviewed and updated on annual basis, to reflect local progress, identify further area of concern and integrate lessons learnt.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 Alternative options were not considered.

4. POST DECISION IMPLEMENTATION

- 4.1 Once the Strategy is approved, a communication plan will be developed to support its dissemination. It is proposed to socialise the strategy at various Committee meetings, where relevant (e.g Adults and Safeguarding Committee, Environment Committee etc.) in order to ensure cross-council engagement in improving residents' health and wellbeing outcomes. The implementation plan will be supported by a set of outcomes, aimed at tracking the progress. Regular updates to the Board on the progress of the strategy implementation will be made by the Director of Public Health and Prevention, in collaboration with local partners.

5. IMPLICATIONS OF DECISION

- 5.1 **Corporate Priorities and Performance**

5.1.1 The purpose of the Barnet Joint Health and Wellbeing Strategy is to improve the health and wellbeing of the local community and reduce health disparities for all ages. The priorities articulated in this Strategy will link to The Barnet Plan 2021 to 2025.

5.1.2 In addition to linking to corporate priorities, an outcome monitoring approach is currently being devised. This approach will provide outcomes and measurables for each key area and align with the implementation plan included in the final strategy document. An overview of the approach to implementation and outcome monitoring as well as the draft implementation plan are included as Appendix III.

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

5.2.1 Implementation of the Barnet JHWS will need to be affordable and funded within the existing budget and staffing from the (non-Covid-19) PH Grant and wider system. Opportunities for attracting external funding will be sought, going forward. For example, Public Health England's external funding was recently attracted to fund Healthy Weight pathway locally. It is envisaged to pursue similar opportunities during the life of the Strategy.

5.3 **Social Value**
Not applicable

5.4 **Legal and Constitutional References**

5.4.1 Developing a JHWS is a statutory responsibility of the Health and Wellbeing Board, as set out in the Local Government and Public Involvement in Health Act 2007 (as amended by the Health and Social Care Act 2012).

The requirements of the Equality act 2010, and in particular the Public Sector Equality Duty (PSED) under s149 apply when drafting the JHWS.

The PSED requires that public bodies 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.

5.4.2 Article 7 Committees, Forums, Working Groups and Partnerships of the Council's Constitution sets out the terms of reference of the Health and Wellbeing Board which includes:

- 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 promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health. To explore partnership work across North Central London where appropriate
- 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.

- Specific responsibilities for overseeing public health and developing further health and social care integration

5.5 Risk Management

- 5.5.1 Due to unpredicted nature of COVID-19 Pandemic, it is possible that the Strategy will not be finalised by July 2021. In order to mitigate those risks, development of the Strategy has started early, and sufficient time has been allocated to develop the Strategy, within limited capacity and resources that may be diverted to respond to the Pandemic.

5.6 Equalities and Diversity

- 5.6.1 A whole systems approach to prevention and health and care integration focus on health disparities which persist amongst groups with protected characteristics. By consulting and engaging with appropriate communities and stakeholders, it is expected that a whole systems approach to prevention will prevent unintended harms against marginalised groups and promote health equity. As the COVID-19 pandemic has shone a further light on disproportionality of the health outcomes amongst various groups, reviewed Health and Wellbeing Strategy process included an engagement with diverse communities with a particular focus on Black, Asian and Minority Ethnic Groups.

5.7 Corporate Parenting

- 5.7.1 As a result of the Health and Wellbeing Strategy development, the objectives set out in the strategy do provide opportunities to support the council's role as corporate parent through the health and wellbeing improvement interventions for children and young people residing in the borough, including children in care.

5.8 Consultation and Engagement

- 5.8.1 A consultation on the draft strategy was carried out between 29 January 2021 and 12 March 2021. This consultation consisted primarily of an online questionnaire with an engagement session taking place with Barnet MENCAP users. The option of alternative questionnaire formats was advertised but not taken up by respondents. 72 responses were received for the questionnaire.
- 5.8.2 Overall the feedback from the consultation was positive with the majority of respondents in agreement with the proposed vision, guiding principles and key areas. From the consultation there were some suggestions on changes to the strategy document which produced a series of recommendations from the findings. These recommendations have been included in the drafting of the strategy. The full findings report for this consultation and the recommendations are included as Appendix IV.
- 5.8.3 Healthwatch Barnet were commissioned by the Public Health Directorate to conduct engagement activities with a focus on gaining residents views on the draft strategy and how the pandemic has affected resident's health and access

to services. This engagement also included focused work with Asian, Jewish, Black African and Black Caribbean residents to gain an in-depth understanding of their experiences of the pandemic. Insights on residents' views provided through the course of the Healthwatch engagement have provided us with a valuable understanding of what is important to residents including those in BAME communities and we have applied this to our approach to developing and writing the new JHWS. The full findings of this engagement can be accessed here: [Health and Wellbeing Strategy Engagement | Barnet Council](#)

5.9 **Insight**

5.9.1 Barnet's Joint Strategic Needs Assessment informed development of the Strategy as well as in-depth information on COVID-19 impact in the borough.

6. **BACKGROUND PAPERS**

6.1 Final Joint Health and Wellbeing Strategy (April 2021) Available at: <https://barnet.moderngov.co.uk/documents/s64507/Final%20JHWS%20board%20Report.pdf>

6.2 The Barnet Plan 2021 to 2025, Available at: <https://www.barnet.gov.uk/your-council/policies-plans-and-performance/corporate-plan-and-performance>