

Agenda item:

**[No.]**

**Overview and Scrutiny Committee**

**On 2011**

Report Title: **Health: Everyone's Business**

Report of: **Councillor Gideon Bull, Chair of the Overview and Committee**

Contact Officers : Melanie Ponomarenko/Jodie Szwedzinski

Email: [Melanie.Ponomarenko@haringey.gov.uk](mailto:Melanie.Ponomarenko@haringey.gov.uk) / [Jodie.Szwezinski@haringey.gov.uk](mailto:Jodie.Szwezinski@haringey.gov.uk)

Tel: 0208 489 2933/2405

Wards(s) affected: **All**

Report for: **[Key / Non-Key Decision]**

**1. Purpose of the report (That is, the decision required)**

- 1.1. That the Overview and Scrutiny Committee approve the recommendations laid out in the attached report.

**2. Introduction by Cabinet Member (if necessary)**

- 2.1. N/A

**3. State link(s) with Council Plan Priorities and actions and /or other Strategies:**

- 3.1. This review links with the Sustainable Community Strategy Outcomes of:
- Healthier people with a better quality of life, specifically:
    - Tackle health inequalities

**4. Recommendations**

- 4.1. Recommendations are laid out in the attached report.

## **5. Reason for recommendation(s)**

5.1. Reasons for the recommendations laid out in the main report are covered within the main body of the attached report.

## **6. Other options considered**

6.1. N/A

## **7. Summary**

7.1. Overview and scrutiny has a specific role in relation health inequalities as part of its health scrutiny powers. These powers have been used regularly in looking at inequality in terms of access to healthcare. Following an external audit by Grant Thornton the Overview and Scrutiny Committee held its first 'Health: Everyone's Business' event in 2008. This event highlighted the wider determinants of health and their links to health inequalities as well as emphasising the role that each Thematic Board under the Haringey Strategic Partnership has in tackling health inequalities in Haringey.

7.2. Since this event the Overview and Scrutiny Committee have continued to be actively involved in work around health inequalities, and were commended on this work by the Health Inequalities National Support Team in their feedback in 2009.

7.3. In late 2010 the Overview and Scrutiny Committee, in conjunction with the Well-Being Partnership Board, held a follow up event focusing on three specific areas where it is felt there are significant health inequalities in the borough and where the Committee felt value could be added by it's involvement along with a range of other stakeholders. Dr Lynne Friedli attended as the key speaker.

7.4. This event focused on three areas:

- Mental Health
- Tobacco Control
- Physical Activity

7.5. These areas formed the focus of group discussions with the following questions.

- What should we as a partnership be doing that we aren't doing?
- What could we as a partnership be doing differently?

7.6. In response to the above questions key messages were collated from each group. These include:

Mental Health:

- Increased community education of mental health and further support for children

with mental health issues

- Prevention
- Increased community education and support of mental health

Tobacco Control:

- Advantages of brief interventions
- Ethnic and cultural targeting according to prevalence
- Support/Social networks

Physical Activity:

- Walking-based initiatives
- Interventions targeting children
- Closer partnership working with providers of sport/physical activity initiatives

7.7. This report provides best practice examples and cost effective interventions linked to the key messages of the event.

## **8. Chief Financial Officer Comments**

8.1. There are no direct financial implications arising from this report. However, if in the future, it is decided to implement programmes to tackle these health matters then the financial implications of each programme should be individually considered and the costs of these must be met from within existing resources.

## **9. Head of Legal Services Comments**

9.1. Legal Services have been consulted and have no comments.

## **10. Head of Procurement Comments – [Required for Procurement Committee]**

10.1. N/A

## **11. Equalities & Community Cohesion Comments**

11.1. Haringey has a high burden of mental illness and the needs of east and west Haringey are reflected by their demographic differences. There are more patients with dementia in West Haringey which has a greater proportion of older people. In the East of Haringey there are more people with common mental illnesses. It is likely that both dementia and common mental illnesses (particularly depression) are under-diagnosed.

11.2. The mental health problems are related to a variety of socio-economic conditions and within east Haringey there are greater levels of deprivation, poorer housing and a wider variety of socioeconomic groups which lead to greater health inequalities.

11.3. Modelled smoking prevalence data derived from the Health Survey for England

(2006/08), predicts that Haringey has a current smoking prevalence of 24.1%, compared with 20.8% in London and 22.2% in England. The figures for 2003/05 were released to Middle Super Output Area (MSOA) level. Highest smoking prevalence of between 29% and 33% was predicted for MSOAs in Noel Park, Tottenham Green, Northumberland Park, Tottenham Hale and White Hart Lane.

11.4. 17.7% of residents registered with a GP in Haringey were recorded as smokers as at March 2009. Smoking rates were lowest in the West Neighbourhood (15.4%) and highest in the North East Neighbourhood (19.9%).

11.5. In the UK there are significant inequalities in levels of physical activity in relation to age, gender, ethnicity and disability, and corresponding inequalities in health. For example, in Haringey white adult populations are more active than non-white adults, men tend to be more active than women, younger people are more active than their older counterparts and activity levels are lower in those who have a limiting illness or disability.

## **12. Consultation**

12.1. A wide range of stakeholders were consulted at the 'Health: Everyone's Business' event. These included Age Concern Haringey, Crucial Steps, BEH Mental Health Trust, NHS Haringey, Haringey Council departments, Polar Bear, Middlesex University, Whittington NHS Trust, Cabinet Members and Non-Executive Members.

12.2. The Public Health Department has been consulted in the writing of this report.

## **13. Use of appendices /Tables and photographs**

11.2 Please see Contents page in main report for appendices

## **14. Local Government (Access to Information) Act 1985**

- [Sustainable Community Strategy](#), Haringey Council, 2010
- Health Inequalities Cross Party Working Group, Haringey Council, 2011
- Based on average scores of Super Output Areas.
- Green H, McGinnity A, Meltzer H, Ford T, Goodman R (2005) *Mental Health of Children and Young People in Great Britain*, 2004. Basingstoke: Palgrave Macmillan.
- Richardson J, Joughin C (2002) *Parent Training Programmes for the Management of Young Children with*
- *Conduct Disorders: Findings from Research*. London: Gaskell.
- Dretzke J, Davenport C, Frew et al (2009) The clinical effectiveness of different parenting programmes for children with conduct problems: a systematic review of randomised controlled trials. *Child and Adolescent Psychiatry and Mental Health*

3:7.

- Lundahl B, Risser H, Lovejoy M (2006) A meta-analysis of parent training: moderators and follow-up effects. *Clinical Psychology Review* 26:86–104.
- Skapinakis P, Weich, S et al (2006) Socio-economic position and common mental disorders. Longitudinal study in the general population in the UK. *British Journal of Psychiatry* 189:109–117.
- Williams K, Sansom A (2007) *Twelve Months Later: Does Advice Help? The Impact of Debt Advice: Advice Agency Client Study*. London: Ministry of Justice.
- Pleasence P, Balmer NJ (2007) Changing fortunes: results from a randomised trial of the offer of debt advice in England and Wales. *Journal of Empirical Legal Studies* 4:465-475.
- NICE (2009) *Depression in Adults with Chronic Physical Health Problem: Treatment and Management*. London: NICE.
- Katon WJ, Von Korff M, Lin EHB et al (2004) The Pathways study: a randomized trial of collaborative care in patients with diabetes and depression. *Archives of General Psychiatry* 61:1042–1049.
- National Institute for Health and Clinical Excellence (2007). *Public health interventions to promote positive mental health and prevent mental health disorders among adults*. London: NICE.
- Berry, H.L., Rickwood, D. J. (2000) Measuring social capital at the individual level: personal social capital, values and psychological distress. *International Journal of Mental Health Promotion*, 2, 35-44.
- Cacioppo JT, Hughes ME, Waite LJ, Hawkley LC, Thisted RA (2006) Loneliness as a specific risk factor for depressive symptoms: cross-sectional and longitudinal analysis. *Psychology and Aging* 26:140–151.
- Tobacco in London: The preventable burden. [www.lho.org.uk/viewResource.aspx?id=8716](http://www.lho.org.uk/viewResource.aspx?id=8716)
- Jaddoe, V.W. et al., (2008), Active and passive maternal smoking during pregnancy and the risks of low birthweight and preterm birth: the Generation R Study, *Paediatric and Perinatal Epidemiology*, 22, pp. 162-171
- Fleming, P., and Blair, P.S., (2007), Sudden Infant Death Syndrome and parental smoking, *Early Human Development* 83, pp. 721-725
- National Statistics, Health Survey for England 2004. [The health of minority ethnic groups](#). 2006
- Measuring smoking prevalence in local populations <http://www.apho.org.uk/resource/item.aspx?RID=87192>
- Smoking cessation services in primary care, pharmacies, local authorities and workplaces, particularly for manual working groups, pregnant women and hard to reach communities, NICE, 2008
- The Need for Effective Mass Media Public Education Campaigns As Part of Comprehensive Tobacco Control Programs, [www.stopsmokingcampaigns.org](http://www.stopsmokingcampaigns.org), 2007
- Smoking cessation services in primary care, pharmacies, local authorities and workplaces, particularly for manual working groups, pregnant women and hard to reach communities, NICE, 2008
- Working with Black and Minority Ethnic Communities: A guide for Stop Smoking

- Service managers, Department for Communities and Local Government
- National Institute for Health and Clinical Excellence. (2006). *Four commonly used methods to increase physical activity*. <http://www.nice.org.uk/Guidance/PH2>
  - Department of Health. (2007). *Department of Health statement on exercise referral (2007)*. [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_072689](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_072689)
  - Department of Health. (2001). *Exercise Referral Systems: A national quality assurance framework*. Department of Health. London.
  - Department of Health. (2006). *The General Practice Physical Activity Questionnaire (GPPAQ)*. Gateway reference 6746. Department of Health. London.
  - National Institute for Health and Clinical Excellent. (2009). <http://guidance.nice.org.uk/PH17/QuickRefGuide/pdf/English>
  - Green H, McGinnity A, Meltzer H, Ford T, Goodman R (2005) *Mental Health of Children and Young People in Great Britain, 2004*. Basingstoke: Palgrave Macmillan.
  - Richardson J, Joughin C (2002) *Parent Training Programmes for the Management of Young Children with Conduct Disorders: Findings from Research*. London: Gaskell.
  - Friedli L, Parsonage M (2007) *Mental Health Promotion: Building an Economic Case*. Belfast: Northern Ireland Association for Mental Health.
  - Scott S, Knapp M, Henderson J, Maughan B (2001) Financial cost of social exclusion : follow up study of antisocial children into adulthood. *British Medical Journal* 323:191–194.
  - Sainsbury Centre for Mental Health (2009) *The Chance of a Lifetime: Preventing Early Conduct Problems and Reducing Crime*. London: Sainsbury Centre for Mental Health.
  - Dretzke J, Davenport C, Frew et al (2009) The clinical effectiveness of different parenting programmes for children with conduct problems: a systematic review of randomised controlled trials. *Child and Adolescent Psychiatry and Mental Health* 3:7.
  - Lundahl B, Risser H, Lovejoy M (2006) A meta-analysis of parent training: moderators and follow-up effects. *Clinical Psychology Review* 26:86–104.
  - Bywater T, Hutchings J, Daley D et al (2009) Long-term effectiveness of a parenting intervention for children at risk of developing conduct disorder. *British Journal of Psychiatry* 195:318–324.
  - Puig-Peiro R, Stevens M, Beecham J (2010) *The costs and characteristics of the parenting programmes in the NAPP Commissioners' Toolkit*. London: Personal Social Services Research Unit, LSE.
  - Hilton M (2007) *Assessing the Financial Return on Investment of Good Management Strategies and the WORC Project*. Brisbane: University of Queensland.
  - Wang PS, Patrick A, Avorn J et al (2006) *The costs and benefits of enhanced*

- depression care to employers. *Archives of General Psychiatry* 63:1345–1353.
- Fearnley J (2007) Gauging Demand for Free to Access Money Advice: a Discussion Paper. London: Money Advice Trust.
  - Skapinakis P, Weich, S et al (2006) Socio-economic position and common mental disorders. Longitudinal study in the general population in the UK. *British Journal of Psychiatry* 189:109–117.
  - McCrone P, Dhanasiri, S et al (2008) Paying the Price. The Cost of Mental Health Care in England to 2026. London: Kings Fund.
  - Pleasence P, Buck A et al (2004) *Causes of Action: Civil Law and Social Justice*. London: Legal Services Commission.
  - Williams K, Sansom A (2007) *Twelve Months Later: Does Advice Help? The Impact of Debt Advice: Advice Agency Client Study*. London: Ministry of Justice.
  - NICE (2009) Depression in Adults with Chronic Physical Health Problem: Treatment and Management. London: NICE.
  - Katon WJ, Von Korff M, Lin EHB et al (2004) The Pathways study: a randomized trial of collaborative care in patients with diabetes and depression. *Archives of General Psychiatry* 61:1042–1049.
  - Lloyd CE (2010) Diabetes and mental health: the problem of co-morbidity. *Diabetic Medicine* 27:853–854.
  - Das Munshi J, Stewart R, Ismail K et al (2007) Diabetes, common mental disorders, and disability: findings from the UK National Psychiatric Morbidity Survey. *Psychosomatic Medicine* 69:543–550.
  - Simon GE, Katon W, Lin EHB et al (2007) Cost effectiveness of systematic depression treatment among people with diabetes mellitus. *Archives of General Psychiatry* 64:65–72.
  - Clarke P, Gray A, Legood R, Briggs A, Holman R (2003) The impact of diabetes-related complications on healthcare costs: results from the United Kingdom Prospective Diabetes Study. *Diabetic Medicine* 20:442–450.
  - Cacioppo JT, Hughes ME, Waite LJ, Hawkley LC, Thisted RA (2006) Loneliness as a specific risk factor for depressive symptoms: cross-sectional and longitudinal analysis. *Psychology and Aging* 26:140–151.
  - Mead N, Lester H, Chew-Graham C, Gask L, Bower P (2010) Effects of befriending on depressive symptoms and distress: systematic review and meta-analysis. *British Journal of Psychiatry* 196:96–101.
  - Department of Health (2009) *Partnerships for Older People Projects Final Report*. London: Department of Health.
  - Knapp M, Henderson C, Perkins M, Roman A (2009) *Brighter Futures Group final report* (unpublished). Maidstone: Kent County Council.
  - Beecham J, Knapp M, Fernandez JL et al (2008) *Age Discrimination in Mental Health Services, Discussion Paper*. London: PSSRU, LSE.