

## NOTICE OF MEETING

# HEALTH AND WELLBEING BOARD

Thursday, 19th September, 2024, 2.00 pm - Woodside Room -  
George Meehan House, 294 High Road, N22 8JZ (watch the live  
meeting [Here](#) and watch the recording [here](#))

Please see attached membership and quorum

### 1. **FILMING AT MEETINGS**

Please note this meeting may be filmed or recorded by the Council for live or subsequent broadcast via the Council's internet site or by anyone attending the meeting using any communication method. Members of the public participating in the meeting (e.g. making deputations, asking questions, making oral protests) should be aware that they are likely to be filmed, recorded or reported on. By entering the 'meeting room', you are consenting to being filmed and to the possible use of those images and sound recordings.

The Chair of the meeting has the discretion to terminate or suspend filming or recording, if in his or her opinion continuation of the filming, recording or reporting would disrupt or prejudice the proceedings, infringe the rights of any individual, or may lead to the breach of a legal obligation by the Council.

### 2. **WELCOME AND INTRODUCTIONS (PAGES 1 - 4)**

### 3. **APOLOGIES**

To receive any apologies for absence.

### 4. **URGENT BUSINESS**

The Chair will consider the admission of any late items of urgent business. (Late items will be considered under the agenda item where they appear. New items will be dealt with at agenda item 16).

### 5. **DECLARATIONS OF INTEREST**

A member with a disclosable pecuniary interest or a prejudicial interest in a matter who attends a meeting of the authority at which the matter is considered:

- (i) must disclose the interest at the start of the meeting or when the interest becomes apparent, and
- (ii) may not participate in any discussion or vote on the matter and must withdraw from the meeting room.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Register of Members' Interests or the subject of a pending notification must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal interests and prejudicial interests are defined at Paragraphs 5-7 and Appendix A of the Members' Code of Conduct.

**6. QUESTIONS, DEPUTATIONS, AND PETITIONS**

To consider any requests received in accordance with Part 4, Section B, Paragraph 29 of the Council's Constitution.

**7. MINUTES (PAGES 5 - 12)**

To confirm and sign the minutes of the Health and Wellbeing Board meeting held on 17 January 2024 as a correct record.

**8. UPDATE ON NORTH MIDDLESEX UNIVERSITY HOSPITAL NHS TRUST MERGER INTO ROYAL FREE LONDON GROUP (VERBAL UPDATE)**

To receive a verbal update on the North Middlesex University Hospital NHS Trust Merger into Royal Free London Group.

**9. HARINGEY HEALTH AND WELLBEING STRATEGY 2024-29. DRAFT FOR APPROVAL AND COMMENT (PAGES 13 - 38)**

To receive an update on the Haringey Health and Wellbeing Strategy 2024-29 draft.

**10. UPDATE ON NEW LOCAL PLAN FOR HARINGEY (PAGES 39 - 50)**

To have an discussion regarding the update on the New Local Plan for Haringey.

**11. BETTER CARE FUND 2024/25**

Report to follow

**12. HARINGEY HEALTHWATCH ANNUAL REPORT 2023/24 (PAGES 51 - 94)**

To note the Haringey Healthwatch Annual Report 2023/24

**13. NEW ITEMS OF URGENT BUSINESS**

To consider any new items of urgent business admitted at item 4 above.

**14. FUTURE AGENDA ITEMS AND MEETING DATES**

Members of the Board are invited to suggest future agenda items.

To note the dates of future meetings:

28 November 2024

27 March 2025

Ayshe Simsek, Democratic Services and Scrutiny Manager

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Fiona Alderman

Assistant Director of Legal & Governance (Monitoring Officer)

George Meehan House, 294 High Road, Wood Green, N22 8JZ

Wednesday, 11 September 2024

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### Membership of the Health and Wellbeing Board

\* Denotes voting Member of the Board

Organisation		Representation	Role	Name
Local Authority	Elected Representatives	3	* Cabinet Member for Health, Social Care, and Wellbeing – Chair	Cllr Lucia Das Neves
			* Cabinet Member for Children, Schools and Families	Cllr Zena Brabazon
			* Cabinet Member for Climate Action Environment, Transport	Cllr Mike Hakata
	Officer Representatives	4	Director of Adults, Health and Communities	Beverley Tarka
			Director of Children's Services	Ann Graham
			Director of Public Health	Dr Will Maimaris
			Chief Executive	Andy Donald
	NHS	North Central London Integrated Care Board	3	Clinical Lead for Haringey
Director of Integration for Haringey, Enfield and Islington				Claire Henderson
Executive Director of Place				Sarah McDonnell-Davies
North Middlesex University Hospital NHS Trust		1	Chief Executive	Dr Nnenna Osuji
Whittington Health NHS Trust		1	Chief Executive	Dr Claire Dollery
Barnet, Enfield and Haringey	1	Managing Director, Haringey	Gary Passaway	

	Mental Health Trust			
	Haringey GP Federation	2	Chief Executive	Cassie Williams
			Medical Director	Dr Sheena Patel
<b>Patient and Service User Representative</b>	Healthwatch Haringey	1	* Chair	Sharon Grant
<b>Voluntary Sector Representative</b>	Bridge Renewal Trust	1	Chief Executive	Geoffrey Ocen
<b>Haringey Local Safeguarding Board</b>		1	Interim Independent Chair	David Archibald

Additional invitees:

Name	Organisation and role	
Helena Kania	Co-chair of Haringey Joint Partnership Board	
Paul Butler	Selby Trust CEO	
Lynette Charles	CEO Mind in Haringey	
Rod Wells	Haringey Keep our NHS Public	
Sarah Miller	Director Markfield	
Vida Black	Carer's Representative – Joint Partnership Board	
Gordon Peters	Older People's reference group	
Graham Day and Phil Stevens	Trustee and CEO Disability Action Haringey	
Mary Langan	Represents the severe and complex autism and learning	

	disability group on Haringey Joint Partnership Board.	
Bibi Khan	Haringey Multi-faith forum	

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## **MINUTES OF MEETING Health and Wellbeing Board HELD ON Wednesday, 17th January, 2024**

### **PRESENT:**

#### **Councillors:**

Councillor Lucia das Neves, Cabinet Member for Health Social Care and Wellbeing (Chair)  
Councillor Zena Brabazon, Cabinet Member for Early Years, Children and Families

#### **Other attendees:**

Dr Will Maimaris, Director of Public Health  
Beverley Tarka - Director of Adults, Health & Communities  
Sharon Grant – Healthwatch Haringey  
Nadine Jeal – Clinical and Care Director for Haringey (NCL ICB)  
Cassie Williams - Chief Executive, Haringey GP Federation  
Rachel Lissauer – Director of Integration – NCL CCG  
Jonathan Gardner - Director of Strategy, Whittington Health

### **14. FILMING AT MEETINGS**

The Chair referred to the filming at meetings notice and attendees noted this information. The meeting was held virtually and there was a member of public in attendance in person at George Meehan House.

### **15. WELCOME AND INTRODUCTIONS**

The Chair welcomed Board members and attendees to introduce themselves. An adjustment was made to the running order of items to accommodate for a scheduling conflict, with Item 9 being addressed as Item 12 and other items brought forward accordingly. It was noted that as the meeting was conducted virtually, it was considered inquorate, and therefore no decisions could be made at the meeting.

### **16. APOLOGIES**

There were apologies for absence from Mike Hakata, Ann Graham and Richard Gourlay. There were apologies for lateness from Lynette Charles.

### **17. URGENT BUSINESS**

There were no items of urgent business.

### **18. DECLARATIONS OF INTEREST**

There were no declarations of interest.

### **19. QUESTIONS, DEPUTATIONS, AND PETITIONS**

There were no questions, deputations and petitions.

**20. MINUTES**

**RESOLVED:**

To approve the minutes of the meeting held on 20th September 2023 as a correct record of the meeting.

**21. WORKFORCE UPDATE - NOVEMBER 2023**

Cassie Williams, CEO of the GP Federation, presented the Haringey Borough Partnership Workforce update. The focus was on recruiting, nurturing talent, and integrating insights from health and care colleagues. The goal was to address any unexplored concerns from Haringey and reinforce the importance of workforce development. A workforce integration lead was hired through the training hub to address and work on this initiative.

The North Central London Integrated Care System (NCL) had pinpointed three main areas of focus which were workforce supply, development, and transformation, incorporating new care models and work approaches. On Governance, the People's Board advanced initiatives in NCL, while in Haringey, the borough partnership had oversight over the workstreams such as the Neighbourhood and Health Inequalities Board, which handled workforce efforts. Early priorities for Haringey's Workforce Integration included entry-level recruitment, neighbourhood training, and workforce information dissemination.

The GP Federation's collaboration with Haringey Works had led to the local recruitment of numerous staff, which showcased efforts to maximise employment opportunities. Early initiatives in disseminating Workforce Information aimed to enhance the communication and address challenges within Haringey Borough Partnership.

The following points were noted in the discussion:

- Community Hubs such as the Northumberland Resource Centre, demonstrated effective collaboration. Integrated neighbourhood services worked to address frailty, and also involved multi-agency teams including the mental health trust, the Whittington, GP's, social workers, and the voluntary sector.
- Neighbourhood training involved multi-agency efforts which covered topics such as rough sleeping, CAMS care for suicide prevention, and had built awareness around gambling. The chair recommended that other examples of hub working should be shared with the Board.
- There were concerns about staff competition within the partnership and salary differences were acknowledged, and the Board was informed that development routes for all staff would be explored as part of this.
- It was noted in the meeting that further work was needed to enhance collaboration on the workforce and its integration with family hubs.
- Haringey tenant John Poulter raised concerns about delays and waiting times due to staff and resource shortages. Nadine Jeal, Clinical and Care Director for Haringey,

assured ongoing recruitment efforts, including new roles, and expanded apprenticeships to address the issues, while acknowledging challenges in wait times and lists for services such as physiotherapy heavily impacted by Covid-19 pauses.

- Some community services, like heart failure and diabetes programs, were able to meet targets around time and reached deprived areas successfully. The Chair suggested an examination into national strategies, and Councillors were encouraged to promote these efforts, especially those related to schools in their wards.
- It was recommended that neighbourhood working should be a key focus in the workforce plan.
- There were challenges in connecting primary care and mental health services due to stretched recruitment. The current workforce efforts focused on entry-level recruitment to address the challenge.

**ACTIONS:**

- It was agreed that some example projects of workforce, how it has worked and lessons learned would be brought to a future Health and Wellbeing Board in 6 months' time.
- Other examples of good practice in hub working should be circulated to members of the Health and Wellbeing Board.
- A fuller discussion on how to tackle issues around staff and resourcing in the NHS will be on the agenda for the next health and wellbeing board.

**RESOLVED:**

The update was received and noted.

**22. NORTH CENTRAL LONDON START WELL CONSULTATION**

The following points were noted in the discussion:

- Rachel Lissauer, NHS North Central London ICB, provided a brief update on the North Central London Start Well Consultation which had now been launched.
- It was advised that there should be a specific Haringey Council response going forward to the Start Well consultation.
- It was noted that the partnership, including Primary Care, had been active in providing feedback and Rachel thanked members for doing so.
- Councillors and local MPs had provided responses to the consultation.
- The Chair highlighted concerns particularly on Whittington maternity closures, on equity of outcomes for patients from black and minority ethnic backgrounds, access to services and outcomes for mothers and children within the borough.
- Jonathan Gardener, Whittington Health NHS Trust, emphasised the importance of maintaining Whittington services was the preferred option however urged the importance of respond to the consultation.

**RESOLVED:**

The update was received and noted.

**23. HARINGEY HEALTH AND WELLBEING STRATEGY DEVELOPMENT**

Will Maimaris, Director of Public Health, provided a brief verbal update on the new Haringey Health and Wellbeing strategy development.

The following points were noted in the discussion:

- It was noted that this was a key strategy for Haringey Health and Wellbeing that would be owned by the Health and Wellbeing Board for the next 4 to 5 years, previously the board was updated on the process of development of the strategy which incorporated working with the community and co-design.
- In Autumn 2023, several community engagement efforts were held including a large event, smaller focused events, library sessions, and online consultations. Principles guiding the work include co-production, equity, challenging discrimination, partnership working, and ensuring quality and accessibility of services. Key themes that emerged from the engagement activities included mental health, housing and health equity, placemaking, and preventative health. These themes were intended to inform the draft strategy document for future consideration by the Health and Wellbeing Board.
- The Chair concurred that the evolving themes demand collaboration across various council departments, partnerships, and the community. The next stage would focus on defining deliverables, establishing governance and structure, and wider efforts to enhance the ownership of the strategy.
- Councillor Brabazon agreed that housing should be prioritised for its crucial role in health and wellbeing of residents with an emphasis on allocating housing based on need, not just time on the housing list.
- It was noted that there were ongoing efforts by the People's Board calling for the review on housing allocations as there was a need to focus on addressing wealth disparities in the borough with an equity lens.
- Beverly Tarka, Director of Adults Health and Communities in Haringey Council provided feedback to the board from the previous ICP meeting, which covered topics such as outcome measurement and defining equity.
- John Poulter, member of the public, expressed concerns about delays in repairs, which led to him and his family onboarding at a hotel due to lack of heating. John highlighted the impact on NHS due to such issues and emphasised the disappointment in the repairs service. John expressed his readiness to collaborate with the Health and Wellbeing Board and sought clarity on outcomes and decisions from public consultation activities. The Chair offered to follow up with John on this issue outside of the meeting.

### **RESOLVED:**

The update was received and noted.

## **24. APPROVAL OF HARINGEY BETTER CARE FUND (BCF) 2023-25 - SUBMISSION TO NHS ENGLAND**

Paul Allen and John Tomlinson from NHS Haringey CCG presented the Better Care Fund Plan 2023/24.

The following Points were noted in the discussion:

- It was noted that this report was delayed for the Council meeting last year.
- The report included a narrative, an investment schedule, and metrics for delivery.
- The report also encompassed Demand and Capacity analysis for Haringey's intermediate care services.
- It was noted that the Health and Wellbeing Board's needed to approve the submitted Better Care Fund (BCF) Plan.
- BCF is a national program supporting health and social care integration for resident independence and improved outcomes.
- Haringey's BCF 23/24 aligns with the Borough Plan and supports the Ageing Well Strategy.
- The Plan was aimed to assure the Board of Haringey's commitment to health and social care integration.
- The national BCF requirements are for each Board to submit its Plan to the national BCF Team. The national BCF Policy Framework includes a jointly agreed local plan signed off by the Health and Wellbeing Board, NHS Contribution to social care maintained in line with uplift to NHS (at 5.7%) and investment into NHS commissioned out-of-hospital services.
- Boards were required to submit Narrative and Excel spreadsheet outline of its plan. Implementing the BCF policy objectives such as enabling people to stay well, safe and independent and home for longer and provide the right care in the right place at the right time.
- Haringey's investment schedule showed that the BCF plan was £38m investment in 2023/24 (£42M in 24/25) – nationally set level of minimum investment of which at least £7.7m needs to be on Adult Social Care related spend and £6.7m needs to be NHS commissioned out of hospital spend.
- There was also additional Funding for social care directly via Improved Better Care Fund (iBCF) and Disabled Facilities Grant (DFG's). £2.4m Discharge Fund included in 2023/24 with £4.3m available in 2024/25.
- On the structure of the narrative, it was noted that there was a tiered approach to investment or the 'Care Cone', which is followed through of the BCF Plan, this starts with Healthy Safe and Well, Early Help, Severe/Complex and Specialist/Emergency at the top.
- The Plan addressed three key challenges, both locally and nationally:
  - Firstly, the plan responded to the pandemic's legacy, managing increased cases of deteriorating underlying health. Secondly, to prepare out-of-hospital systems for heightened NHS Trust activity to ensure safe winter hospital discharge. Lastly, to tackle issues related to equity of access, outcomes, and experiences, especially in deprived areas within the Borough.
  - The progress since 2022 was highlighted and this included:
    - The successful distribution of 2,000 'Ageing Well Guide' copies and provided training for 'age-friendly Haringey'.
    - It was noted that there was an approximate 30% increase in GP consultations for older people, especially in deprived areas.
    - MACCT received positive evaluation, reducing emergency admissions by 40%.
    - There was a continued investment in out-of-hospital services, with 93% of patients discharged home.
    - Supported 'Home First' with 1,350 reablement episodes.
    - Experienced a 64% increase in monthly patients accessing Rapid Response service.
    - Achieved a one-third reduction in emergency admissions of Haringey patients aged 65+ between 2019/20 and 2022/23, with increased multi-morbidity.

- Some of the new or expanded investments in 2023/24 included:
- Continued investment in Early Help and Prevention. Investment in bereavement services for carers of individuals with terminal conditions. Expansion of community health services to support medium to long-term care needs, assisting Whittington Health colleagues with community self-referrals.
- Also, the Inclusion of ICB Wheelchair Services in the BCF plan scope. Continued investment in intermediate care services and support for those in challenging housing environments through the discharge fund. John Updated the Board on the Carers Support Network, with efforts to co-produce necessary services and update the Carers Strategy, including investments of an extra £400,000 in carer services.
- Collaboration among NCL Councils and ICB to refresh the 2024/25 BCF Plan and Discharge Fund arrangements in Q4 2023/24.
- It was noted that there was work was underway in NCL ICB to determine local needs, compare them with other boroughs, and allocate resources, accordingly, spanning beyond just community health. This work will be shared with Councillors to get their views and ascertain how to deliver services differently and innovate.
- The NCL ICB assessed local needs, compared them with other boroughs, and allocated resources beyond community health. They involved Councillors to gather views on service delivery and innovation.
- The Better Care Fund's effectiveness for reablement was questioned. It was explained ongoing work to assess needs across boroughs and allocate resources accordingly, beyond just community health.
- The collaborative efforts with carers groups to co-produce tailored services was emphasised, with positive feedback indicating successful initiatives. An extra £400k investment was announced to support carers, reflecting shared responsibility among partners beyond the council.
- There was recognition for the need to improve discharge coordination, noting it as a broader challenge across the public sector, not just unique to Central London.
- The Chair raised and expressed satisfaction over the increase in older people's GP consultations and raised concerns around the utilisation rate of the Ageing Well Guide among professionals working with older individuals. Broader concerns were voiced regarding the adequacy of community services, given the increasing pressures on the NHS and evolving patient needs upon discharge.
- John Poulter, a member of the public, raised concerns about improving pre-surgery procedures to prevent cancellations, based on personal experiences.
- Beverly Tarka, Director of Adults, Health & Communities, highlighted issues related to discharge procedures and emphasised the importance of supporting carers within the system.
- There was discussion regarding the use of agency workers versus paid carers.
- There were ongoing efforts to understand resource allocation and distribution, as well as initiatives to enhance service delivery through co-production and community engagement.
- Concerns were raised regarding the implementation of co-production initiatives, Sharon Grant emphasised the need for genuine consultation and community involvement.
- The Chair addressed and stressed the importance of a continued dialogue and collaboration.
- The NHS's evolving approach towards co-production was acknowledged with the promising initiatives aimed at addressing inequalities.

**RESOLVED:**

The Health and Wellbeing Board resolved:

1. To note the year end summary for the Haringey Better Care Fund (BCF) Plan Narrative for 2021/22 (Appendix 1).
2. To confirm the Plan meets national BCF Plan Conditions discussed for 2023/24 and 2024/25, and to note, however, that details in the latter year's Plan will need to be resubmitted to the Board as part of a national and local update in the latter half of 2023/24.
3. To endorse the BCF Plan submission for 2023-25:
  - The updated Haringey BCF Plan Narrative (Appendix 2);
  - The BCF National Funding Template for Haringey with an investment schedule and trajectories for BCF metrics, plus a demand & capacity analysis associated with Haringey's intermediate care services in 2023/24 (Appendix 3). The funding schedule in Appendix 3 includes additional Discharge Fund investments that assure the availability of the stated service capacity in 2023/24.
  - The BCF Plan Q2 update for Haringey is included in Appendix 4.

**25. HARINGEY BOROUGH PARTNERSHIP UPDATE AND INTEGRATED CARE PARTNERSHIP UPDATES**

Rachel Lissauer, NHS North Central London ICB, provided an update on various programs within the Haringey Borough Partnership and Integrated Care Partnership which included Start Well, Live Well, and Age Well and highlighted the positive progress in areas like speech and language support for primary schools and initiatives for long-term conditions and dementia.

The following points were noted in the discussion:

- Emphasis was placed on the multidisciplinary collaboration in neighbourhoods, with discussions involving GP and clinical leads.
- The Board received updates from Borough Partner Executive Meeting were discussed which focused on mental health challenges, workforce recruitment, and system priorities.
- The Chair highlighted the significance of medication accessibility for residents and suggested further discussion on the matter.
- John Poulter, member of the public, praised Rachel's efforts and shared his involvement with suicide management.
- Nnenna Osuji addressed concerns about the North Middlesex maternity unit's performance, clarifying that CQC ratings do not directly impact the review process.

**RESOLVED:**

The presentation was received and noted.

**26. NEW ITEMS OF URGENT BUSINESS**

There were no items of urgent business.

**27. ANY OTHER BUSINESS**

- Will Maimaris, Director of Public Health, provided a brief update to the board on the recent Integrated Care Partnership (ICP) meeting held on the 16<sup>th</sup> of January 2024.
- In the North Central London (NCL) integrated care system, efforts were focused on improving population health and wellbeing.
- The themes discussed in the recent ICP meeting included establishing working relationships with the council and NCL, adding value, and addressing health inequalities.
- The themes which emerged from the meeting encompassed physical and mental health, heart health, and admissions.

CHAIR: Councillor Lucia das Neves

Signed by Chair .....

Date .....

# Haringey's Health and Wellbeing Strategy 2024-2029

(September 2024 – draft for sign off and comment, prior to final formatting and publication)

## Who we are.

The Haringey Health and Wellbeing Board is a partnership board with local Health, Care and Community leaders that oversees our health improvement priorities for Haringey. It is chaired by Cllr Lucia das Neves, Haringey Council cabinet member for Adult Social Care, Health and Wellbeing. Our aim is to improve residents' health, prevent illness and reduce health inequalities in Haringey and this strategy sets out our priorities for the next 5 years.

## How we developed this strategy

We took a collaborative approach to developing this strategy. We tried to reach out to as many residents and local partner organisations as we could in the available time to understand what really mattered to their health. The strategy framework was developed based on findings from those engagement events and data analysis.

## Local and national context

The Health and Wellbeing Strategy is aligned to the following local and national strategies and approaches

### **North Central London Population Health Strategy**

NCL's Population Health and Integrated Care Strategy sets out how our integrated care system will approach improving the physical and mental health of local people and reducing health inequalities. It describes our shared vision focusing on prevention, early intervention, and proactive care, how systems can better join up to deliver care that meets residents' needs in a personalised and efficient way, and considers how wider factors such as economic, environmental and social factors contribute to our health and wellbeing.

### **Haringey Council Corporate Delivery Plan**

The Corporate Delivery Plan sets out how Haringey Council will build a fairer, greener borough and identifies eight themes: resident experience and working together; responding to climate emergency; children and young people; adults, health and welfare; homes

for the future; a safer Haringey; culturally rich borough; place and economy. There is particular focus throughout on reducing inequalities, climate justice and health, as well as incorporating the principles of co-production and improve residents' experience.

### **Haringey Deal**

The Haringey Deal was launched in November 2022. It builds on the findings of the Fairness Commission and has grounded what we have heard from residents more recently. It describes the Council's major commitment to work in partnership with communities to address residents' priorities, creating genuine opportunities for residents to get involved in decision making and designing services, and making efforts to reach out to those who are often seldom heard.

### **Marmot principles**

Our work is informed by the Marmot principles, the below set of national principles to tackle the challenge of health inequity.

- Give every child the best start in life
- Enable all people to maximise their capabilities and have control over their lives
- Ensure a healthy standard of living for all
- Create fair employment and good work for all
- Create and develop healthy and sustainable places and communities.
- Strengthen ill health prevention
- Tackle racism
- Environmental Sustainability

## Key background about health in Haringey

- Haringey has some great assets such as a young and diverse population, good transport links, high quality schools and valued green spaces.
- Haringey is the 4<sup>th</sup> most deprived borough in London and neighbourhoods in east Haringey are amongst some of the most deprived in London. 9,769 children in Haringey are living in absolute poverty (less than 60% of the 2010/11 median income adjusted for inflation).
- Life expectancy in Haringey for men is 78.2 years, and for women is 83.3 years. Life expectancy increased over the 2000s and early 2010s but began to stall prior to the COVID pandemic in Haringey. Life expectancy fell during the COVID pandemic, but is now beginning to recover.
- There are significant inequalities in health outcomes including life expectancy aligned with deprivation. A man in the least deprived wards will live on average 7 more years than a man from one of the most deprived wards. For women this difference is over four years, and for both genders this difference has widened since the 2017-19 period.
- There are significant inequalities in health and wellbeing in people from minoritised communities, disabled people and people experiencing social exclusion.
- Cancer and cardiovascular diseases (e.g. heart attacks and strokes) are the main causes of death in adults.
- Mental health issues are significant in all ages. Almost one in ten adults (9.2%) are diagnosed with depression in Haringey. Around 4,800 children and young people aged 5-15 years have a diagnosable mental health condition in Haringey.
- The wider building blocks of health such as good quality housing, secure and fulfilling employment and good air quality have a profound influence on health and wellbeing.
- The quality of our relationships also has a profound influence on our health and wellbeing.
- More information about health in Haringey can be found on our Joint Strategic Needs Assessment webpages.

## What you told us when we asked what would lead to Better Health in Haringey

- 4 key themes emerged from our engagement with Haringey residents and partner organisations

### Mental health and wellbeing

- Mental health and wellbeing is a very important aspect of our health, good mental health cannot exist without addressing the wider determinants of mental health
- There are significant disparities experienced by people from black and other minoritized groups
- Residents would like to see more affordable opportunities for physical/cultural activities – social isolation is a concern for all age groups.
- Waiting times for mental health services are a concern
- Mental health stigma is a barrier to people seeking help

### Housing

- Poor housing conditions are a significant driver to poor health and wellbeing, particularly for those with multiple complex needs
- There is a need for more housing that meets the requirements of people with complex health needs
- Concerns around housing quality in social housing and private rented sector
- Concerns around secure and stable housing, with issues exacerbated by the cost of living crisis

### Healthy Placemaking

- Our environment, including access to green spaces, good air quality and healthy high streets is important for our health and wellbeing.
- Cost of living is impacting on all aspects of health and wellbeing, including affordability of basic needs (e.g. healthy foods) and services to maintain health, creating additional stress and anxiety for many people
- Accessibility is a key enabling factors for health and wellbeing, particularly for older people and people with disability.

### Preventative health and care services for all

- Access and waiting times for health and care services is a concern. The shift to digital focus of service and information provision created barriers to some people.
- There are health inequalities relating to outcomes such as immunisation, maternal and infant health and cardiovascular disease.
- Some groups of people such as those with severe mental illness and people with learning disabilities may need extra support to achieve good physical health
- Better support for family and informal carers is needed

## Our Strategy

From Engagement to Action – How we will work together to implement our Health and Wellbeing Strategy

### Our Overall Vision

Health and wellbeing are fundamental to our success individually and collectively. We want to improve the health and wellbeing of all people in Haringey and reduce health inequalities, so that people can thrive and contribute to their communities, regardless of their age, gender, ethnicity, sexuality, religion or whether they are disabled.

### Our principles

#### **1. Co-production and working with people**

Our communities know what they need the most. We will engage and work with people to ensure our services are accessible, acceptable and effective as well as culturally sensitive.

#### **2. Knowing our communities**

We will make every effort to listen to and work closely with our residents, communities and community organisations. We will use data-led insights to better understand who our residents are, and how we can best work with them. We will support community organisations to thrive.

#### **3. Stronger partnership working**

We are stronger when we work together in a more collective and open way. We will all do our bit to deliver the strategy. Our primary aim will be the health of the population of Haringey as a place and we believe we can only do this collectively.

#### **4. Equity and challenging discrimination and racism**

We will act collectively to challenge systemic discrimination and racism

#### **5. Advocating for high-quality local services that are resourced to meet the needs of our residents**

We will advocate for high quality local health and care services, and that Haringey receives the right funding to meet the needs of our communities particularly those with the highest needs

#### **6. Taking an all-age approach**

All the themes of our strategy will take an all-age approach, looking at the impact of issues on children and young people, working age adults and older people.

## The themes and objectives of our Health and Wellbeing Strategy 2024-2029

Housing and Health	Improving Mental Wellbeing	Healthy Place Shaping	Preventative Health and Care
<ul style="list-style-type: none"><li>• Improve existing homes<ul style="list-style-type: none"><li>• Tackling overcrowding</li><li>• Tackling damp and mould</li><li>• Reduce fuel poverty</li></ul></li><li>• Ensure homes are available for families with high levels of need</li><li>• Homelessness and health</li></ul>	<ul style="list-style-type: none"><li>• Improve access to preventative mental health services</li><li>• Improve access to crisis support services</li><li>• Increase opportunities for participation in community activities<ul style="list-style-type: none"><li>• Leisure and physical activity</li><li>• Culture</li></ul></li><li>• Reduce social isolation and increase connectedness</li></ul>	<ul style="list-style-type: none"><li>• Reduce air pollution, support active travel and tackle the climate emergency.</li><li>• Improve access to affordable, healthy food</li><li>• Improve access to green spaces and parks</li><li>• Focus on Healthier High Streets (tackle proliferation of gambling and hot food takeaways)</li><li>• Improve disabled access to local facilities</li></ul>	<ul style="list-style-type: none"><li>• Access to good quality preventative health and care in neighbourhoods</li><li>• Measurable improvements and improvements in equity in key outcomes including rates of childhood immunisation, premature mortality from strokes and heart attacks, stillbirth rates and speech and language development in children</li><li>• Holistic support for specific groups for example people with learning disabilities and carers</li></ul>

These themes and objectives have been identified through our engagement with residents and partner organisations in combination with looking at data on our health outcomes in Haringey

## Action plans for the first 18 to 24 months of the strategy

The above 4 themes are for the whole strategy period up to 2029.

In order to ensure we make progress on these themes and objectives, we have captured key actions across partner organisations for the next 18 to 24 months of the strategy. The four action plans for the four theme areas follow below in this document.

These action plans will be refreshed in 2026.

The Health and Wellbeing Board will have oversight of progress on these action plans and the governance for delivery of these outcomes is shown in Appendix 1.

In addition, we will also develop an outcomes framework for the strategy in the first 12 months that links to the North Central London Population Health Outcomes framework (see appendix 2)

## Health and Wellbeing Strategy – Housing and Health Theme Initial 18–24-month action plan

### Main objectives

1. Improving housing quality
  - Social Housing repairs (including repairs and adaptations to existing stock)
  - Private rented sector (including overcrowding)
  - Tackling damp and mould
  - Reducing fuel poverty through improvement in housing stock (including retrofitting, EPC improvements etc.)
  
2. Ensuring homes are available for those with highest needs – (e.g. those who are disabled or have significant health and care needs, older people, families etc) – links to housing allocations policy and new build programme.
  
3. Providing housing and health support for people who are homeless and providing clear information about housing pathways to residents and health professionals

Broad Objective	Priority Action	Lead/governance
<b>Improve housing quality including tackling damp and mould and reducing fuel poverty</b>	Continue work to ensure 100% of council housing stock reaches decent homes standard by 2028	Jahed Rahman. Operational Director, Housing and Building Safety, Haringey Council. Haringey Council Housing improvement board.
	Stock condition survey in council homes – identification of risk and remediation of damp and mould	Jahed Rahman. Operational Director, Housing and Building Safety, Haringey Council. Haringey Council Housing improvement board.
	Deliver Retrofit improvements to council housing stock energy performance, reducing fuel poverty (long-term target is	Jahed Rahman. Operational Director, Housing and

	to ensure council housing stock has an average EPC B rating by 2035	Building Safety, Haringey Council. Haringey Council Housing improvement board.
	Improve standards in TA by increasing the number of tenancy audits and improving void turnaround time. Complete review of inspection programme in 24/25	Sara Sutton, Assistant Director for Housing Demand. Haringey Council. Haringey Council Placemaking and Housing Board
	Improve quality of private rented sector through the council's property licensing schemes by ensuring standards are met at application stage through compliance inspections. Aim for 3000 compliance inspections in 24/25 and 4000 licenses issued for compliant properties	Eubert Malcolm, Assistant Director for Stronger Communities, Haringey Council. Placemaking and Housing Board.
	Work with registered providers of social housing (non-council) to improve quality	Hannah Adler, Head of Housing Strategy and Policy, Haringey Council Robbie Erbmann, Assistant Director for Housing Haringey Council.
	Identify opportunities to increase resilience of our housing stock (and other facilities with vulnerable groups) to heat waves	Adverse weather and health group, Director of Public Health, Haringey Council and Jahed Rahman. Operational Director, Housing and Building Safety, Haringey Council.
<b>Ensuring right homes for right people</b>	Expand supply of bespoke council homes for people and families with specific needs (target of 300 bespoke homes by 2031)	Robbie Erbmann, Assistant Director for Housing Haringey Council. Haringey Council Placemaking and Housing Board

	Begin work on new programme of building supported housing (target of 300 units by 2031)	Robbie Erbmann, Assistant Director for Housing Haringey Council. Haringey Council Placemaking and Housing Board
	New council housing allocations policy adopted by end 2024/25 with a view to taking into account health and care needs	Robbie Erbmann, Assistant Director for Housing Haringey Council. Haringey Council Placemaking and Housing Board
	Commission a new strategy to guide the delivery of new supported housing by end 24/25 (long-term target of 300 new units by 2031)	Robbie Erbmann, Assistant Director for Housing Haringey Council. Haringey Council Placemaking and Housing Board
	Prepare a strategy on the future needs of housing for older people in Haringey by end 24/25	Robbie Erbmann, Assistant Director for Housing Haringey Council. Haringey Council Placemaking and Housing Board
	Look at opportunities for key worker housing for health and care staff e.g. on St Ann's Hospital Site	Haringey Borough Partnership, North London Mental Health Partners
<b>Participate in academic research</b>	To review the recommendations and findings that come from the 'Living with housing insecurity' study led by researchers from Universities of Sheffield, Cambridge, Liverpool and Birmingham, funded by the National Institute for Health and Care Research (NIHR) School for Public Health Research (SPHR), and supported by the UK Collaborative Centre for Housing Evidence (UKCCHE) by Feb 2025.	Led by Public Health Team, to be reported back to the Haringey Council Placemaking and Housing Board.
<b>Providing housing and health support for</b>	Co-produce a new Homelessness Strategy in 2024/25 with partners in the borough	Robbie Erbmann, Assistant Director for Housing Haringey Council. Haringey

<b>people who are homeless and providing clear information about housing pathways to residents and health professionals</b>		Council Placemaking and Housing Board
	Continue to develop services for people experiencing rough sleeping and homelessness including Mulberry junction and commissioned services	Sara Sutton, Assistant Director for Housing Demand, Haringey Council. Haringey Borough Partnership. Live Well Board
	Improving wrap around support for people who are in temporary accommodation for longer periods and support for people in out of borough placements	Sara Sutton, Assistant Director for Housing Demand, Haringey Council. Haringey Council, Placemaking and Housing board
	Ensure residents and professionals have access to accurate advice on housing pathways, policies and re-housing, including social prescribing pathways, North Middlesex Connected Communities Pilot, hospital discharge teams and multi-disciplinary health and care teams such as the MACC team	Haringey Borough Partnership.

## Health and Wellbeing Strategy – All Age Mental Health and Wellbeing Theme

### Initial 18–24-month action plan

From this theme the following key areas emerged from the engagement:

1. Improving access to preventative mental health services for children and adults
2. Improving access to crisis support services for children and adults
3. Increasing opportunities for participation in community activities for children and adults and reducing isolation
  - a. Leisure and physical activity
  - b. Culture

Broad Objective	Priority Action	Lead/governance
Improving access to preventative mental health services for children	Developing a graduated response to social and emotional and mental health needs in schools and strengthen service offer going into schools	Start Well Board of Haringey Borough Partnership
	Continue to promote digital mental health support in children and ensure consistent information on support is available to residents	Start Well Board
	Develop the role of children’s centres, family hubs and early years settings in promoting perinatal mental health and emotional wellbeing in young children and their families	Start Well Board
Higher needs support for children	Implementing a single point of access to CAMHS services – improving experience and waiting times including into neurodiversity pathways	Start Well Board
Improving access to preventative mental health services for adults	Review and re-commission preventative early intervention services for adult mental health with a focus on tackling health inequalities	Live Well Board of Haringey borough partnership
	Strengthen preventative pathways between VCS, grassroots organisations, primary care and secondary care services - involving residents in the pathway design	Live Well Board

	Pilot and evaluate a peer-support programme for black men to promote mental wellbeing	Live Well Board
Higher needs support for adults	Continue to reduce waiting times for access to specialist mental health support including using a locality based approach	Live Well Board
	Completing a suicide prevention strategy for Haringey in 2024	Live Well Board
	Integration of crisis and recovery services between council, NHS and other partners	Live Well Board
	Building a more holistic approach for people with multiple disadvantage and mental health needs including people experiencing rough sleeping, drug addiction and involvement in crime	Live Well Board
	Improve physical health care services and support for adults with severe mental illness	Live Well Board and NCL ICB "Longer Lives" programme
<p>Increasing opportunities for participation in community activities for children and adults and reducing isolation</p> <ul style="list-style-type: none"> <li>• Leisure and physical activity</li> <li>• Culture</li> <li>• Intergenerational opportunities</li> <li>• Community based activities (e.g. art, gardening, support groups)</li> <li>• Befriending and navigation</li> </ul>	<p>Continue to expand on great mental health day – theme for 2025 – inter-generational connection</p> <p>Develop an inclusive Haringey wellbeing and leisure model linked to the in-sourcing programme for Haringey Leisure centres</p> <p>Ensure the Haringey culture strategy includes aspects that promote the health and wellbeing benefits of culture</p>	<p>Live Well Board</p> <p>Haringey Council Leisure and Culture Leads working together with Public Health and Health partners</p>

**All objectives**

**Work together to identify key gaps  
to add to this action plan as needed**

**All**

## Healthy and Wellbeing Strategy – Healthy Place shaping theme

### Initial 18-24 month action plan

Haringey Council has been committed to a Health in All Policies (HiAP) approach since 2017. HiAP is a collaborative approach focused on improving health and wellbeing equity by incorporating health considerations into policy and service areas. We work with teams across the Council (for example planning, regeneration, and parks), with the NHS North Central London Integrated Care Board, and the VCS.

#### Main objectives:

1. Reduce air pollution, support active travel and tackle the climate emergency
2. Improve access to affordable, healthy food.
3. Improving access to green spaces and parks.
4. Focusing on Healthier High Streets (including tackling proliferation of gambling, hot food takeaways)
5. Improving disabled access to local facilities including health facilities

Broad Objective	Priority Action	Lead/governance
<b>Reduce air pollution, encourage active travel and tackle the climate emergency</b>	Develop a new air quality action plan for Haringey by end 2024/25	Mark Stevens, Assistant Director, Direct Services, Haringey Council. Placemaking. Place Board, Haringey Council
	Develop active travel plans at schools	Mark Stevens, Assistant Director, Direct Services, Haringey Council. Placemaking. Place Board, Haringey Council
	Aim to deliver 6 more school streets in 24/25; projects to be launched on various dates.	Mark Stevens, Assistant Director, Direct Services, Haringey Council. Placemaking. Place Board,  Haringey Council

	Develop a Borough Idling Plan to reduce emissions from idling vehicles.	Mark Stevens, Assistant Director, Direct Services, Haringey Council. Placemaking. Place Board,  Haringey Council
	Introduce Healthy School Zones. Aim to identify 4 schools and implement measures by Summer 2025	Mark Stevens, Assistant Director, Direct Services, Haringey Council. Placemaking. Place Board,  Haringey Council.
	Implementation of Whittington Health NHS Trust Green Plan including developing a green travel plan for staff and visitors to the sites	Whittington Health. Jonathan Gardner, Director of Strategy
	Implementation of North Middlesex University Hospital NHS trust Green Plan including e-bike schemes, low/no emission vehicles scheme for staff and waste reduction	North Middlesex University Hospital NHS Trust. Richard Gourlay, Director of Strategy.
<b>Access to affordable food</b>	Convene and co-ordinate partners to deliver Haringey food action plan to improve access to affordable food including increasing uptake of healthy start vouchers, supporting local food growing projects, developing a food market strategy, healthier school meals	Sara Sutton, Assistant Director for Partnerships and Communities and Will Maimaris, Director of Public Health, Haringey Council. Food action plan core group – Haringey council led partnership group reporting into Health and Wellbeing Board
<b>Healthy High Streets</b>	Shaping Wood Green and Shaping Tottenham projects to have health inequalities actions.	Anna Blandford, Assistant Director for Regeneration and

<b>and Healthy place shaping</b>		Economic Development, Haringey Council. Placemaking and Housing Board, Haringey Council
	<p>Promote healthier high streets by focusing on the commercial determinants of health within the draft Local Plan, Regeneration works, and collaboration with Trading Standards, Environmental Health, and Licensing.</p> <p>This includes:</p> <ul style="list-style-type: none"> <li>- Mitigating gambling harms (through limiting new premises)</li> <li>- Food environments (limiting new hot food takeaways and promoting Healthy Catering Commitment)</li> <li>- Responsible Retailer Scheme (Age restricted products)</li> <li>- Smokefree generation (embedding new Government requirements)</li> </ul>	Marlene D’Aguilar, Health in All Policies Strategic Lead, Haringey Council
	Embed health and wellbeing throughout the draft Local Plan and encourage health and wellbeing consideration as a necessity for major planning applications through an impact assessment.	Rob Krzyszowski, Assistant Director for Planning, Haringey Council, Placemaking and Housing Board, Haringey Council
	Development of key Haringey partnership strategies that support health promoting environments. Alcohol strategy; Tobacco Control Plan, Healthy Weight Strategy, Toilet Strategy and Period dignity.	Will Maimaris, Director of Public Health, Haringey Council. Led by Haringey council public health team reporting into Haringey Health and Wellbeing Board.
	Ensure women and girls and young people fell safer on Haringey streets through the new Community Safety Strategy. Health and Wellbeing Board to receive updates	Eubert Malcolm, Assistant Director, Stronger and Safer Communities, Haringey Council

<p><b>Increasing access to green spaces</b></p>	<p>Achieve inclusive parks and greenspaces for all to benefit from, such as physical activity, and contribute to improved health and wellbeing.</p> <p>Ensure parks and greenspaces usage reflects the communities that live in Haringey and contributes to improved health and wellbeing for all.</p>	<p>Simon Farrow, Head of Parks and Leisure, Haringey Council</p>
<p><b>An accessible borough for all</b></p>	<p>To embed inclusive design, making places usable for everyone no matter age, ability or circumstance, and being a fairer borough, into the new Local Plan. Ensure inclusive community engagement happens at the earliest stage of development, compliant with the Equality Act 2010.</p>	<p>Rob Krzyszowski, Assistant Director for Planning, Haringey Council, Placemaking and Housing Board, Haringey Council</p>
	<p>Future collaborative work with residents that have a disability (for example hearing impairment or visual impairments) to better understand and improve their experience of the borough.</p>	<p>Will Maimaris, Director of Public Health, Haringey Council. Led by Haringey council public health team reporting into Haringey Health and Wellbeing Board.</p>
	<p>North Mid are continuing to implement a disability charter; one of the key commitments includes improved accessibility of the Trust estates for staff, visitors and patients. North Mid are influencing local partners to create step free access at Silver Street station (nearest station to the hospital site) and surrounding areas.</p>	<p>North Middlesex University Hospital NHS Trust. Richard Gourlay, Director of Strategy.</p>

Our Joint Strategic Needs Assessments provide local data, analysis and evidence by examining key issues which impact health and wellbeing of our local population aligning to Public Health, and our wider partners, works. There is an Air Pollution, Gambling Harms, Heatwave and Place JSNA (all to be updated/ published ASAP).

## Healthy and Wellbeing Strategy – Preventative Health and Care Services theme

### Initial 18-24 month action plan

From this theme of the Health and Wellbeing Strategy the following key areas emerged from the engagement

1. Work as a health and wellbeing board to ensure that our communities have access to good quality preventative health and care in the neighbourhoods where they live
  - Including ensuring that moving to digitalisation of services is not a barrier to access
2. We want to see measurable improvements and improvements in equity in key outcomes including rates of childhood immunisation, premature mortality from strokes and heart attacks, infant mortality and stillbirth rates and speech and language development in children
3. Co-design holistic support for specific groups for example people with learning disabilities, people experiencing rough sleeping, carers etc

Broad Objective	Priority Action	Lead/governance
<b>Ensure that our communities have access to good quality preventative health and care in the neighbourhoods where they live</b>	Implementing national standards for primary care access across all GP practices in Haringey	NCL ICB – Primary care committee  Borough placed based lead for ICB
	Continuing to improve quality of primary care estate	NCL ICB – Primary care committee  Borough placed based lead for ICB
	Delivery of two further Family Hubs (to build on first two) including identifying sites, agreeing service delivery model based on core offer and additional support based on needs of local community	Haringey Council – and Haringey borough partnership – Start Well Board  Jackie Difolco
	Implement the Community Hubs programme – including the refurbishment of the Northumberland Resource Centre, that will deliver a simpler, more joined-up local system	Haringey Council and Haringey borough partnership  Sara Sutton

	that offers the right support at the right time for residents	
	Adult social care services will be redesigned to deliver a localities model to improve connections and understanding with the local community, designed with resident participation and incorporating Assistive Technology	Haringey Council – adult social care Vicky Murphy
	A prevention framework/strategy will be developed for Adult Social Care that links into the operating model for social care	Haringey Council – adult social care Vicky Murphy
	Continue to invest in community level interventions to tackle health inequalities (inequalities fund),	Haringey borough partnership NCL ICB communities team
	Welcoming health services for all, including Safe surgeries, meeting language and communication needs	Haringey borough partnership
	Develop a plan to reduce digital exclusion for residents	Haringey Council and NCL ICB
<b>Deliver improvements and improvements in equity in key outcomes including rates of childhood immunisation, premature mortality from strokes and heart attacks, infant mortality and stillbirth rates and speech and language</b>	Start well Embedding a new Speech, Language and Communication Needs Pathway, used for assessing levels of speech, language and communication support needed	Haringey Borough Partnership – Start Well Board

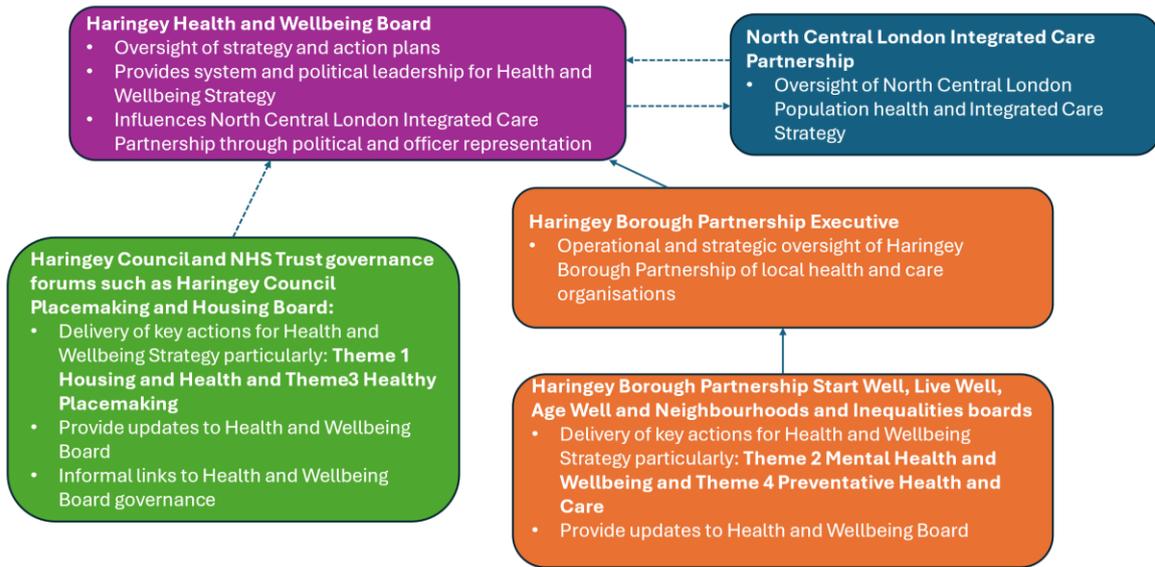
<b>development in children</b>		
	<p>Start well</p> <p>Complete Haringey still-birth audit and implement recommendations across maternity pathway – with a focus on tackling health inequalities</p>	<p>Haringey borough partnership - Start Well Board</p>
	<p>Live Well</p> <p>Continue to invest in and develop services for inclusion health groups (including people experiencing rough sleeping, refugees and asylum seekers, Gypsy, Roma and Traveller communities, people involved in sex work and people involved in the criminal justice system, and LGBTQ+ people)</p>	<p>Haringey borough partnership – Live Well Board</p>
	<p>Live Well</p> <p>Develop clear pathways for employment and health support for people with physical and mental wellbeing needs</p>	<p>Haringey borough partnership – Live Well Board</p>
	<p>Live Well and Age Well</p> <p>Focus on early identification and improved management of long-term health conditions including roll out of long-term conditions, locally commissioned service in primary care and links into NHS Health Checks and community based lifestyle support.</p> <p>Link into NCL Heart Health Programme</p>	<p>Haringey borough partnership – Live Well Board and Age Well Board</p> <p>NCL Heart Health Programme</p>
	<p>Age Well:</p> <p>Continue to build on out-of-hospital support for people with frailty and dementia including Piloting of Ageing</p>	<p>Haringey borough partnership – Age Well Board</p>

	Well/Frailty self-assessment tool in West Haringey	
	<p>Age Well</p> <p>Promoting independence and reducing social isolation</p> <ul style="list-style-type: none"> <li>• Social movements amongst organisations and with residents to encourage them to promote 'ageing well' agenda and keep fit and well as possible, e.g. Age Well Festival</li> <li>• Better join up with housing providers to provide primary and community support with health issues into sheltered housing</li> <li>• Awareness-raising and training for staff and volunteers to become Age Well Friends and Champions as part of pilot in Haringey/ Enfield</li> </ul>	Haringey borough partnership – Age Well Board
	All ages: Improving access and uptake of immunisations & screening, preparation for/response to adverse weather events, and response to infectious disease outbreaks in all communities – including rolling out of health protection champions	<p>Haringey borough partnership</p> <p>NCL ICB</p> <p>Immunisations steering group</p> <p>Haringey Council</p> <p>Public Health team</p>
	All ages; Improve data on health equity by ethnicity for key health and care services in Haringey	<p>Haringey health and care racial equity group – linking into Haringey Borough Partnership</p> <p>Dr Nnenna Osuji/Geoffrey Ocen</p>
<b>Co-design holistic support for specific groups including people with learning</b>	<p>The carers strategy will be reviewed and updated</p> <p>A co-produced carers' offer and forum will be developed</p>	<p>Haringey Council – adult social care</p> <p>Vicky Murphy</p>

<b>disabilities and carers</b>		
	Ongoing Co-design of SEND services with parents and carers	Haringey Borough Partnership – Start Well
	Continue to work with people with learning disabilities and their carers on access and quality of physical health checks	Haringey Borough Partnership – Live Well
<b>All objectives</b>	<b>Work together to identify key gaps to add to this action plan as needed</b>	<b>All</b>

Appendix 1: Illustration of governance for Haringey Health and Wellbeing Strategy

Illustration of governance and accountability for Haringey Health and Wellbeing Strategy



Appendix 2: Potential outcomes metrics and monitoring

Note this is in an early stage of development

Potential outcomes framework for the Health and Wellbeing Strategy



Theme	Key outcome indicators	Supporting indicators	Key equity measures
Housing and Health	<ul style="list-style-type: none"> <li>• % of households that experience fuel poverty [1]</li> </ul>	<ul style="list-style-type: none"> <li>• % of council's homes that meet the decent homes standard [2]</li> <li>• # of people sleeping rough</li> </ul>	<ul style="list-style-type: none"> <li>• # of people rough sleeping by equity group</li> </ul>
Improving mental wellbeing	<ul style="list-style-type: none"> <li>• % adults reporting loneliness</li> <li>• % of physically active adults [1,3]</li> </ul>	<ul style="list-style-type: none"> <li>• # accessed mental health support via core community CAMHS and IAPT services [4]</li> <li>• # attending Haringey Wellbeing Network or Connected Communities</li> <li>• # of people subject to detention*</li> </ul>	<ul style="list-style-type: none"> <li>• Mental health services access data by equity group (held by provider)</li> <li>• # of people subject to detention by ethnicity*</li> </ul>
Healthy Place Shaping	<ul style="list-style-type: none"> <li>• Air pollution: fine particulate matter [1]</li> <li>• % reception children and adults who are obese [1,3]</li> <li>• % adults who are current smokers [1,3, 5]</li> </ul>	<ul style="list-style-type: none"> <li>• # of School Streets delivered [2]</li> <li>• # of additional open spaces in areas of deficiency [6]</li> <li>• # of completers of local stop smoking service</li> </ul>	<ul style="list-style-type: none"> <li>• Smoking prev in adults in routine and manual occupations</li> <li>• Smoking prev in adults with a long term mental health condition (18+)</li> </ul>
Preventative Health and Care	<ul style="list-style-type: none"> <li>• % of children fully vaccinated by age 5 [5]</li> <li>• % of people with high blood pressure treated to target [5]</li> </ul>	<ul style="list-style-type: none"> <li>• # of health protection champions/ambassadors across system</li> </ul>	<ul style="list-style-type: none"> <li>• % of children fully vaccinated by age 5 by ethnicity group</li> <li>• Prevalence gap between different under-served groups (TBC)</li> </ul>
	Long term measures included for monitoring at population level	Medium term measures to indicate progress of partners contributions	Long term measures included for monitoring inequalities

[1] Included in [NCL IBC Outcomes framework](#)

[2] Included in the [LBH Corporate Delivery Plan 2024-26 \(draft\)](#)

[3] Included in the [NCL IBC Sentinel metrics Long List \(draft\)](#)

\* Data is at ICB or NHS Trust level

[4] Included in the [NCL ICS Mental Health Outcome Measures](#)

[5] Included in the [NCL IBC Sentinel metrics Short List \(draft\)](#)

[6] Parks and Greenspaces Strategy

Appendix 3: Engagement approach for Haringey Health and Wellbeing Strategy

## Engagement approach for Haringey Health and Wellbeing Strategy

- There has been a wide range of engagement on the topic of health and wellbeing in the past year or so in Haringey, so we wanted to ensure what we've heard in previous engagement is reflected in the new strategy.
- To fill some of the gaps, we also designed a series of new engagement opportunities last Autumn and Winter.

Questions we asked in our engagement:

1. What does good health look like to you and those around you?
2. What will help you/those around you achieve good health and wellbeing?
3. What are the key challenges to better health? What might help you/those around you overcome these challenges?
4. Thinking about your community, what are the top 3 issues we should be addressing/focusing our efforts on? [Examples to choose from included: Housing; Our environment; Access to healthcare (for example, GP, specialist services); Mental Health and Wellbeing, Addiction including gambling, alcohol, smoking;



[haringey.gov.uk](http://haringey.gov.uk)



## Additional routes of engagement for Health and Wellbeing Strategy

Approach	Target Audience
Online resident survey	General Public
Library engagement sessions	Residents accessing libraries and other Council services
Learning Disability Carers Forum	
Get Haringey Talking event at Triangle Children's Centre	Children and families
Stakeholder workshop	Voluntary Community Sectors, Community leaders, other residents' representatives, and the Council and the NHS services/departments representing communities
People's Day event at Tottenham Leisure Centre	Older people
Joint Partnership Board – reference groups	Engagement with joint partnership board, representing specific population groups.

Note that these engagement routes supplemented existing knowledge we had from community research for example from Bridge Renewal Trust and Healthwatch and from our own work



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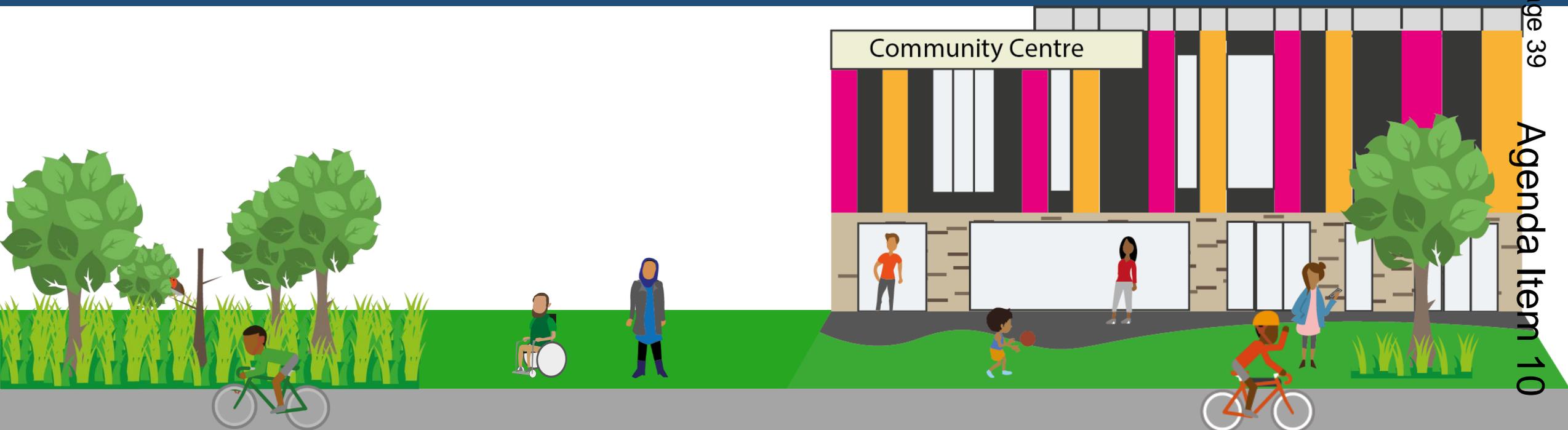




# Draft Local Plan briefing

## Health & Wellbeing Board

19 September 2024



1. What is the Local Plan
2. Developing a New Local Plan
3. Placemaking for Haringey
4. Embedding Health & Wellbeing



## Key planning document

Provides a long-term vision for development and change in Haringey and alongside the London Plan is the starting point for deciding all planning applications in the borough

## Key corporate document

Key opportunity to reflect the Council's latest strategic aspirations and a key tool to address major challenges i.e. Public Health, Climate Emergency, Housing, Equity

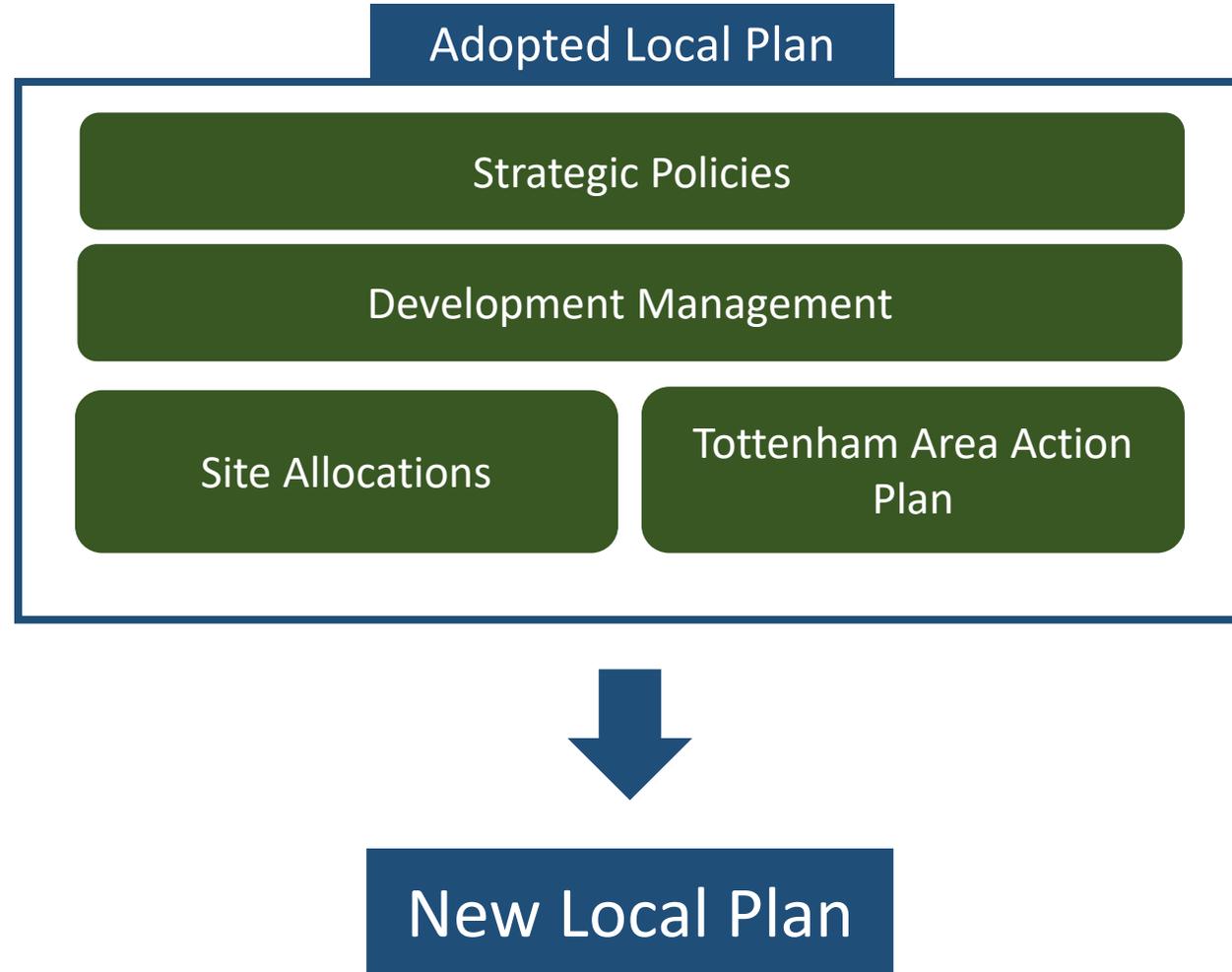
## Key engagement document

Includes a broad and extensive engagement process for residents to shape planning consistent with Haringey Deal

## Requires updating every 5 years

Needs to respond to new regional and national policy, new political drivers, new context and challenges

**New Local Plan  
will replace  
4 x documents  
adopted in 2017**



# Developing a New Local Plan

## Adopted Local Plan

Covers period 2013 to 2026

Narrative based on **MANAGING GROWTH**

Focus on **'Growth Areas'**

- Tottenham
- Wood Green

Comprised of **numerous PDF documents**

## New Local Plan

**Covers period 2026 to 2041**

Set out borough wide framework for **PLACEMAKING**

Vision and strategies set out for **all neighbourhoods in the borough.**

**Clearly embeds Placemaking** for Haringey within all policies

A **Digital Plan** that seeks to effectively monitor and measure the effectiveness of its policies

**2021** – First Steps Engagement (award winning )

**2022-2024** – Collaboration with internal services, Cabinet Member for Planning, New Local Plan Member Working Group

**2023-2024** – Draft Local Plan under preparation

**Late 2024** – Cabinet decision to consult on Draft Local Plan

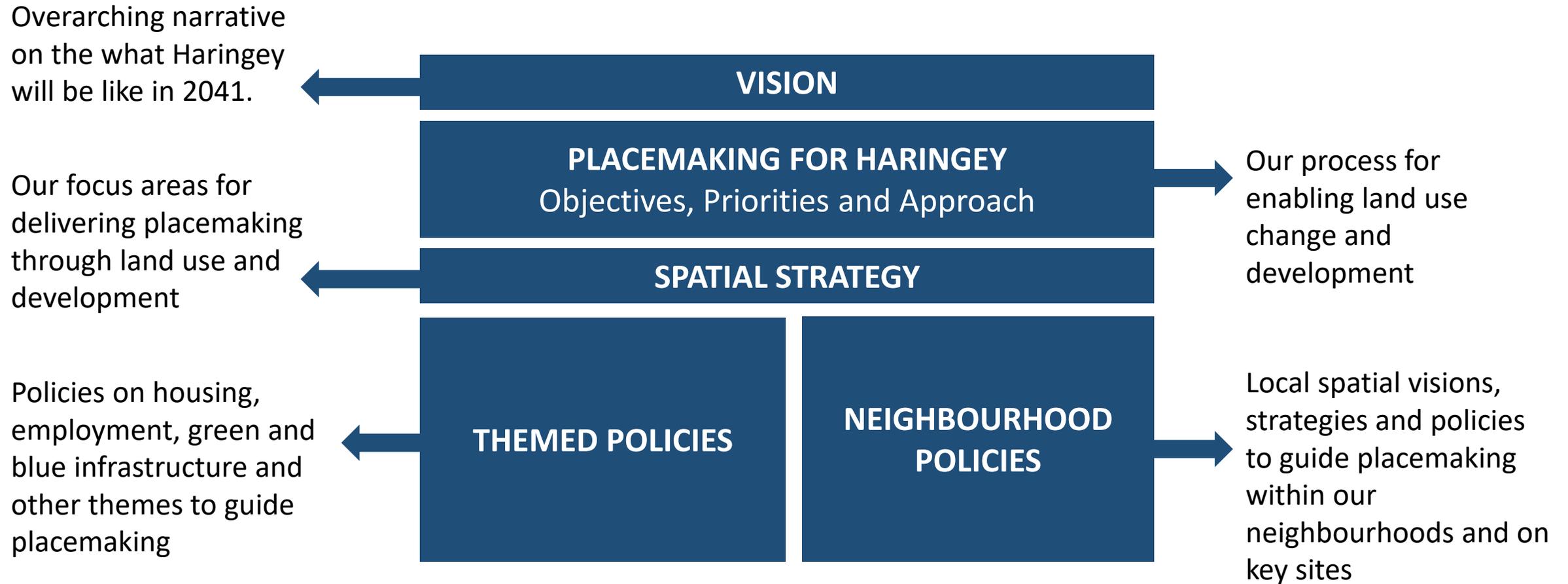
**Early 2025** – Draft Local Plan consultation

**Summer 2025** – Proposed Submission Local Plan consultation

**Winter 2025** – Submission & Examination

**Spring 2026** - Adoption

# Structure of the Local Plan



## Definition of Placemaking

A process that seeks to:

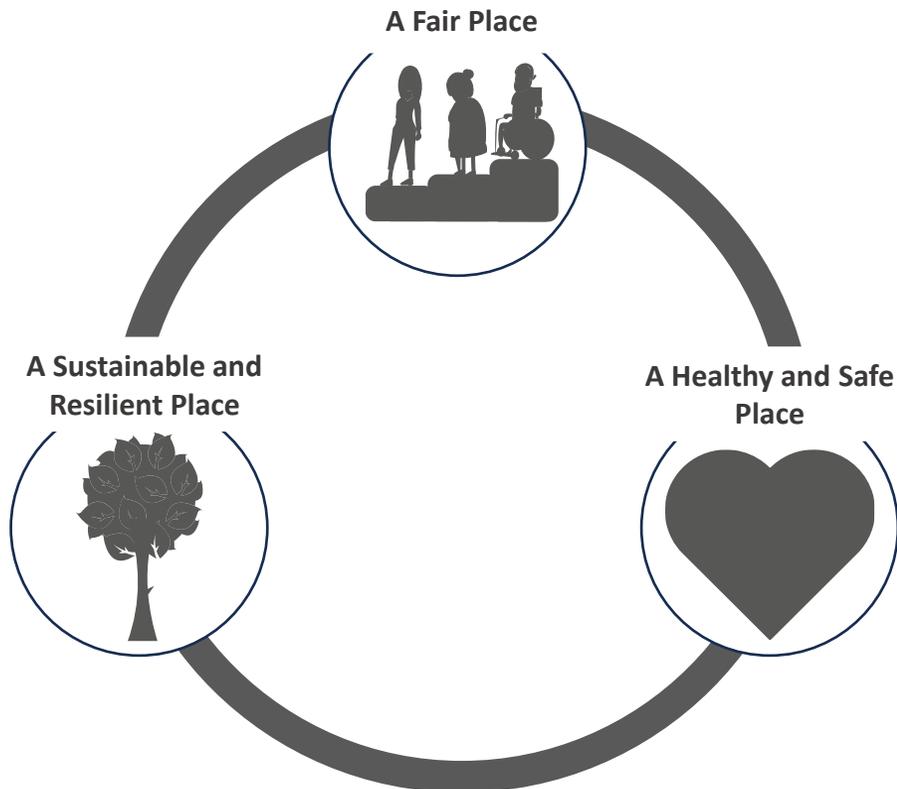
- **empower our people** to shape places that enable everyone to reach their potential
- **meet our needs and ambitions** for a fairer, healthier, greener Haringey
- **enhance and celebrate** our unique environments, histories, cultures, communities, and identities



# Components of Placemaking

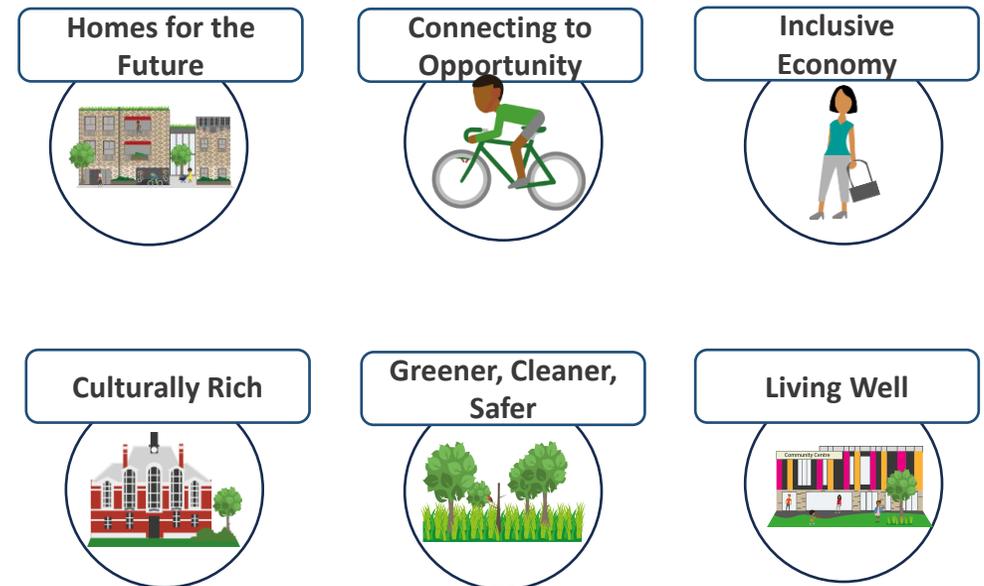
## Objectives

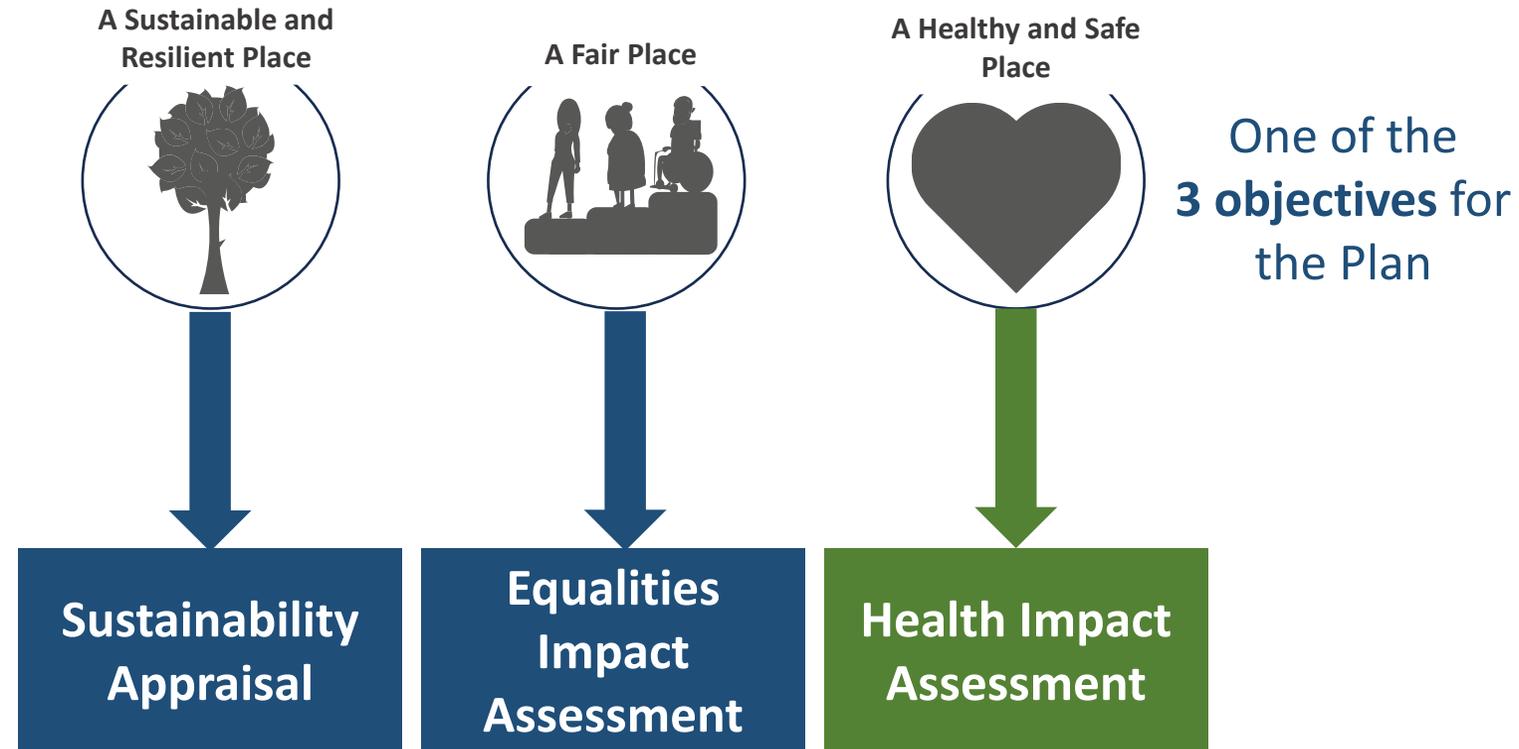
The fundamentals of what we want to achieve. They cut across all the different topics within the Local Plan and are embedded within each policy.



## Priorities

Our Haringey-specific priorities to be embedded within each section of the Local Plan.





## Integrated Impact Assessment

A tool for ensuring we are making good decisions when developing the Local Plan

## Approach to Growth

- Supporting accessible, walkable neighbourhoods
- Encouraging a mix of activities, public spaces, and uses to improve access and social interaction
- Strategically planning for infrastructure alongside growth to ensure local amenities and services
- Specific focus on ‘Healthy Homes’
- Health Impact Assessments

## Transport

- Principles include ‘Healthy Streets’
- Significantly more emphasis on walking and cycling

## Design

- Health is woven into Design Principles
- Health emphasis within public realm, tall and high-density buildings policies

## Town Centres

- Fast Food Takeaways
- Gambling premises
- Shisha Shops

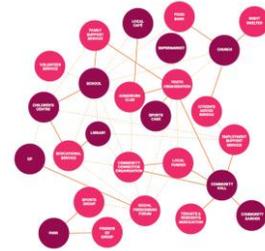
## Climate Change & Pollution

- Passive Design approach improving quality and comfort
- Specific ‘Healthy Homes’ sub-policy

## Green & Blue Infrastructure

- Health woven into Green and Blue Infrastructure Principles
- Access to open space and nature
- Protecting trees

## A holistic understanding of social infrastructure



### Social infrastructure principles

Meeting needs and understanding the wider network of social infrastructure

Promoting community cohesion and a sense of belonging

Equitable and safe access

Flexible and adaptable infrastructure

Integrating with its context and character

Becoming a community focal point

Contributing to the local economy and vitality of town centres

Contributing to disaster resilience

Maintenance, longevity and long-term management

Planned, delivered and maintained together with residents and stakeholders

## The Infrastructure Delivery Plan

- Digital document
- Collaborative development
- Identifying opportunities for co-location

### Policies

- Public Toilets
- Food Growing
- Sports, Recreation and Play

# The value of listening

Healthwatch Haringey  
Annual Report 2023-2024



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Public Voice through the Haringey Healthwatch team carried out Haringey Council's statutory Healthwatch functions in accordance with the Health and Social Care Act 2012 and any subsequent relevant legislation.

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# Contents

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Message from our Chair	02
About us	03
Our year in review	06
How we've made a difference this year	07
Your voice heard at a wider level	09
Listening to your experiences	11
Hearing from all communities	23
Advice and information	26
Volunteering	29
Finance and future priorities	31
Statutory statements	33
Contact us	Back cover



**Over the last year, local Healthwatch have shown what happens when people speak up about their care, and services listen. They are helping the NHS unlock the power of people's views and experiences, especially those facing the most serious health inequalities.**

Louise Ansari,  
Chief Executive at Healthwatch England



# Message from our Chair

Once again, I am proud to provide an overview of our work in the past year. This year more than ever, our reputation for close involvement in our diverse communities has attracted system partners to work with us to address the deep underlying inequalities that persist in the health and social care system.

As you will see in this report, we were able to successfully engage the communities who are well known to have a disproportionately high risk of particular conditions, and who may not for some reason be accessing the services they need, or whose situation may not be understood by policy makers and planners.

The context in which we have worked has only increased the urgency we attach to this task. With services of all kinds under pressure for resources and staffing, there remains a danger that inequalities are accentuated rather than addressed – unless we give voice to the most vulnerable and work closely with partners to find solutions.

I'm especially pleased that GP practices and the Haringey GP Federation have continued to work so positively with us again this year, despite the many difficulties facing them locally and nationally. In particular we have worked to improve appointments systems and to ensure GP access for migrants. Our work with Patient Participation Groups across the borough has enabled more patients to have a better understanding of the challenges facing general practice, and to constructively influence services for the better.

Our resources at Healthwatch Haringey have again been stretched this year, and I must thank our small team for their hard work, and the many thousands who have shared their ideas and experiences with us once again. Together, we made a difference!



**With services of all kinds under pressure for resources and staffing, there remains a danger that inequalities are accentuated rather than addressed – unless we give voice to the most vulnerable and work closely with partners to find solutions.**

Sharon Grant OBE, Healthwatch Haringey



# About us

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Healthwatch Haringey is your local health and social care champion. From Tottenham to Wood Green to Highgate and everywhere in between, we make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



## Our vision

A world where we can all get the health and care we need.



## Our mission

To make sure people's experiences help make health and care better.



## Our values

- **Listening** to people and making sure their voices are heard.
- **Including** everyone in the conversation – especially those who don't always have their voice heard.
- **Analysing** different people's experiences to learn how to improve care.
- **Acting** on feedback and driving change.
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

# Meet the team

Healthwatch Haringey is delivered by a small team of five, with additional staffing and resources provided by service delivery manager, Public Voice.



**Paul Addae**

**Healthwatch Haringey Manager**

Paul has extensive experience in health inequalities research, and has worked in a range of environments, including with young offenders, people with complex needs, and those with a range of long-term care needs. Paul is passionate about capturing the experiences of seldom-heard communities in Haringey and the healthcare access challenges they face.



**Anushka Shahrouz**

**Information and Signposting Manager**

Anushka oversees and manages all enquiries (via phone, email and events) supporting Haringey residents with concerns regarding NHS Primary and Secondary care and other health related matters. She supports the team with community engagement, identifying and liaising with seldom heard groups as well as contributing to our projects and research work.



## Tanya Murat

### Engagement and Communications Officer

Tanya supports our work with engagement and communications activities, including creating regular content for our website and social media channels, and editing and publishing our monthly newsletter. Tanya supports the Haringey Patient Participation Groups Network and the North Central London Mental Health Experts by Experience Board. She also carries our research and delivers reports and recommendations to help improve local health and care services.



## Emily Arama Sánchez

### Information, Policy and Research Officer

Emily supports our research projects, presentations, engagement and reporting, and identifies service failures and policy gaps. Emily is passionate about bringing light to the concerns of underrepresented communities.



## Fardowsa Sharif

### Information and Signposting Officer

Fardowsa acts as our first point of contact to emails and phone enquiries, dealing with casework and light-touch advocacy in relation to health and social care services. She records data on our systems and prepares case studies, whilst also supporting the team in engaging with communities for research projects. Fardowsa liaises with GPs and hospitals on behalf of residents, escalating matters where relevant as well as offering holistic support.

# Our year in review

Find out how we have engaged and supported people.

## Reaching out



**1079 people**

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

**279 people**

came to us for clear advice and information.

## Making a difference to care



We published

**5 reports**

about the improvements people would like to see to health and social care services.

The research report with the highest participation was:

**Haringey School Superzones Vaping Project**

which highlighted the prevalence of vaping among young people in Haringey.

## Health and care that works for you



We're lucky to have

**5**

outstanding volunteers, who gave up their time to help improve health and care services for our community.

We're funded by our local authority. In 2023-24 we received

**£152,000**

Which is the same as the previous year.

We currently employ

**5 staff**

who help us carry out our work.

# How we've made a difference throughout the year

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Spring

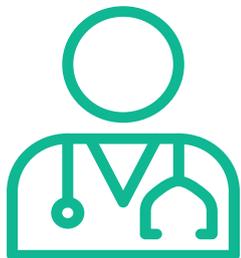


We drew attention to the lack of GP registrations amongst seldom-heard groups in Haringey.



We held events and distributed leaflets about 'Safe Surgeries' in Haringey and how to register with a GP.

Summer



We worked with Whittington Health NHS Trust to assess why particular communities in Haringey were under-represented in their utilisation of the Wood Green Community Diagnostic Centre (CDC).

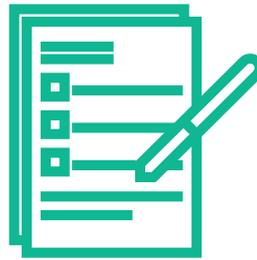


We hosted a feedback session with staff from Wood Green CDC, NHS UCLPartners and voluntary and community sector partners to discuss ways to improve awareness of the Centre for specific communities.

Autumn



We worked with Healthwatch England to explore the 'Pharmacy First' scheme in Haringey.



Findings from Healthwatch Haringey contributed to the wider Healthwatch England report on the 'Pharmacy First' scheme.

Winter



Working alongside partners from Haringey's Public Health Team, we engaged with several local schools and health professionals to discuss vaping amongst pupils through focus groups, interviews and a survey.



We gained insights from 358 survey responses, focus groups and interviews, to inform the School Superzones Project and Haringey Public Health Team's initiatives around vaping amongst young people.

# Your voice heard at a wider level

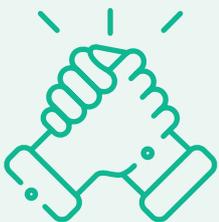
We collaborate with other local Healthwatch to ensure the experiences of people in Haringey influence decisions made about services across North Central London NHS.

## This year we've worked with Healthwatch across North Central London to achieve:



### Healthy Hearts

We have continued to work on the 'Community Connectors Hypertension Programme' in North Central London. This project aims to tackle health inequalities by focusing on underserved communities in the most deprived areas of Haringey, Islington, Camden, Enfield and Barnet. We've been engaging Haringey residents via blood pressure checks with the aim to improve heart health, sharing tips to improve health and wellbeing, and providing information on relevant services available for those with poor access.



### Resident involvement

We were asked by North Central London Integrated Care Board (NCL ICB) to help with recruiting participants for the 'Community Partnerships Forum' to enable residents to be involved in developing strategies and improving services across NCL health and care systems. We helped shape an inclusive volunteer role description, plan interview processes, and make the final selection. We were directly involved in the recruitment process and ensured that it was open to a diversity of candidates.



## Voices of underrepresented communities

NCL ICB conducted consultations with residents to gain feedback on proposed changes to maternity, neonatal, and children's surgical services in North Central London. We supported this work by engaging underrepresented communities in Haringey to capture the voices of local people and patients.



## Clarity on 'Physician Associates'

Following questions from patients in Haringey on the function and responsibilities of Physician Associates (healthcare professionals with a general healthcare education who work alongside GPs), we worked with other local Healthwatch, the Haringey GP Federation and NCL ICB to clarify and demystify the role of Physician Associates in order to bring about better understanding for service users across North Central London.

# Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to services and help them improve.



# Wood Green Community Diagnostic Centre (CDC)

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**Healthwatch Haringey worked with Whittington Health NHS Trust to explore why particular communities in Haringey were underrepresented in their use of the Wood Green Community Diagnostic Centre (CDC).**

In July 2023, we successfully organised four focus groups, actively involving members of the Turkish, Black Caribbean, and Polish Communities in Haringey. These sessions were thoughtfully designed to gather invaluable insights from underrepresented communities and placed a special emphasis on strategies to enhance accessibility and to help shape the services on offer at the Centre.

We found a low level of knowledge about the CDC, with participants in all groups expressing surprise about the range of diagnostic testing available at the centre. Clarification was specifically needed on the type of provision in the ophthalmology (eye and visual systems) department. All groups suggested advertising the CDC more widely to raise awareness in their communities.

The location inside the mall shopping centre was seen as a positive, and the potential of shorter waiting times and interpreting services were welcomed.

Participants felt that a diverse and friendly workforce, reflective of the local multicultural community, would help to make the Centre welcoming.

Word of mouth was an important source of information and participants talked about their willingness to promote the CDC to friends and family. They supported a dedicated NHS communications campaign, acknowledging the necessity of actively promoting the CDC to allow it to flourish effectively. GPs were seen as key to promoting the CDC to patients. The use of promotional materials in other languages was seen as essential.

## Our recommendations

- Address long wait times, overcrowding, staff behaviour and communication gaps.
- Ensure the CDC is properly staffed.
- Ensure the CDC is recruiting a diverse and friendly workforce, reflective of the local multicultural community.
- Improve awareness about the CDC.
- Produce promotional materials in other languages.



### What difference did this make?

- Healthwatch Haringey facilitated a feedback session inviting members of staff from Whittington Health, the CDC, UCLPartners and the voluntary and community sector (VCS) to come together to discuss ways in which the CDC can improve awareness for specific communities.
- The CDC began to collaborate with Haringey's diverse VCS networks to raise awareness among their service users about the CDC and its services.
- The CDC began to consider tailored communication strategies that cater to seldom-heard communities, ensuring effective outreach.

# Experiences of Sickle Cell in Haringey

**In 2024, Healthwatch Haringey worked together with Haringey Advice Partnership to explore the experiences of people living with sickle cell in Haringey and the challenges they face.**

This was both a look back at the history of sickle cell patient experience, research on how the condition impacts the patient, and how current services address patient need.

Sickle cell patients face a range of challenges which can also impact their families and close friends. Addressing these challenges can help to better support people with sickle cell in the management of the condition. We found that people with sickle cell often feel that low priority is given to their challenges, especially around workplace discrimination and accessing benefits.

Many patients told us that they face stigma, delays in care, allegations of exaggerating their condition, being discredited, racism, inadequate pain management and poor assessments.

## What difference did this make?

- Our research contributes to widening the knowledge-base in North Central London around sickle cell disease and the challenges faced by those with the condition.
- Our project raised greater awareness of the George Marsh Centre for the wellbeing of people with sickle cell disorder and thalassaemia, and its activities.
- Our research will support partners and stakeholders in understanding patient need, and both the barriers to accessing benefits and the difficulties in maintaining employment by those with the condition.
- Our research provides patient insights into health inequalities.

Social support initiatives can lead to enhanced quality of life and also better coping with the condition. Primary care in North London has faced criticism for being slow to address the concerns of people with sickle cell disease, but the recent positive moves to reopen the George Marsh Centre at St Ann's Hospital, following calls from patients, is testimony to the realisation that there is a necessity to better address the concerns of people with sickle cell in Haringey and North Central London.

# Haringey School Superzones Vaping Project

In September 2023, Healthwatch Haringey were commissioned by Haringey's Public Health Team to explore the attitudes and behaviours of secondary school age pupils around vaping.

The research explored vape usage, health implications, the attraction and appeal of vapes, and the motivations for vaping. The aim of this research was to help schools in Haringey to consider specific policies, approaches and alternative support for pupils in Haringey who may be vaping.

We arranged and hosted seven focus groups with a total of 60 pupils. We carried out eight interviews and we surveyed 358 pupils.

54%

of survey respondents said that TikTok was the best social media platform to raise awareness of the harms of vaping for young people.

## What did we hear about vaping?

- There is easy access to vapes for young people in Haringey.
- Social media has played a role in the attraction and popularity of vaping among young people.
- Illicit vape sales are prevalent in Haringey and neighbouring boroughs.
- Other substances can be mixed into vapes, sometimes unbeknown to users.

## Our key recommendations

- Increased joint-working among statutory partners, schools and healthcare services in Haringey.
- Litter-picking initiatives within schools involving pupils to actively engage in their local environment.
- Creative interventions via social media.

- Reduce the social aspect of vaping among teenagers.
- Workshops and outreach work around vaping for teenagers at schools.
- Measures to make vaping less appealing to children.
- Regular monitoring of vape use among secondary school pupils.
- Non-judgmental smoking, vaping and drugs information and counselling in schools.

### What difference did this make?

- Our findings and recommendations will inform and shape the next phase of project aimed at raising awareness of vaping harm, supporting workshops and developing educational materials targeted at schools and parents.
- Our research amplified the voices of young people around vaping.
- Our research contributed to the wider body of knowledge around young people and vaping.
- Haringey Council is now committed to joint-working with neighbouring boroughs to tackle the illicit trade of vapes to children.
- Our research provided recommendations and guidance for the Haringey Public Health Team to reduce the prevalence of vapes among secondary school pupils.
- Our research led to the early development of more creative interventions to be utilised on social media.

School Superzones are systems and processes put in place around schools in areas of the greatest disadvantage. They aim to protect children's health and enable healthy behaviours through the place-shaping powers of Local Authorities and local partnership working.

# GP Access in Haringey

Following on from the GP registration project of 2022/23 and the GP review project which took place in 2021, Healthwatch Haringey continued to explore GP access for residents in the borough and the practical aspects required to achieve change and improve patient experience.

We were keen to understand what the specific ongoing challenges are and then consider recommendations which fit with the reality of GP services. We wanted to look at what, if any, differences have been made within GP practices in Haringey and what has been incorporated to bring about improvements. We also reviewed persistent barriers to access and what can be done to achieve positive change.

## What we did

This project was not designed to be another widescale study, but rather to focus on a few cases to encourage thinking across the borough's GP services. Our intent was to understand the challenges GP practices face through semi-structured interviews with practice managers, patient surveys, and a case study of a GP practice in the borough which has undergone some management changes in recent years.

### What difference did this make?

- Our findings (which will be detailed in the final report) enabled us to provide seven key recommendations which will improve knowledge sharing, best practice and communication.
- Our research informed us, and in turn, the GP practices, of the different challenges that impact GP service delivery and what measures can be taken to lessen these.
- Our research will contribute to wider representation on PPGs within GP surgeries and practices in Haringey.
- The project enabled us to take the first steps towards Healthwatch Haringey, patients, the VCS and practice staff working together to co-produce solutions and practical ways of working to improve patient experience.
- After we publish our research report, and as part of our recommendations, we will facilitate knowledge exchange via roundtable discussions with practice managers across Haringey.

# 'Pharmacy First' in Haringey

**In 2023, Healthwatch Haringey was selected by Healthwatch England as one of the local Healthwatch to take part in national research on the benefits and challenges of pharmacy care.**

The Pharmacy First initiative is designed to not only ease pressure on hospitals and GP surgeries, but to also provide a preventative layer to healthcare via simple consultations in local communities. The initiative is designed to provide convenient access to prescription medicines for patients, thereby taking strain away from out-of-hours services.

Healthwatch England coordinated a nationally representative poll of 1,650 adults in November 2023. Interviews were undertaken by local Healthwatch, including Healthwatch Haringey. Each Healthwatch interviewed two pharmacy users and a pharmacist.

## What difference did this make?

- Our research contributed to a larger Healthwatch England report on Pharmacy First, entitled Pharmacy: What people want.
- The report was endorsed by the Chairs of the Royal Pharmaceutical Society in England, the General Pharmaceutical Council and the National Pharmacy Association, the CEO of Community Pharmacy England and the President of the Association of Pharmacy Technicians UK.
- Our research highlighted good practice and the challenges in rolling-out the Pharmacy First initiative.
- Our research brought to light the importance of targeted communications to raise awareness of the Pharmacy First scheme, building on the existing campaign launched by NHS England.

The successful rollout of Pharmacy First will rely on addressing existing challenges facing pharmacy teams. It will also be important that patients know about the scheme, can access their local pharmacy, and are confident in the support local pharmacies can offer.

# Barriers to GP Registration in Haringey

Following our research project in 2022/23, which revealed the multiple barriers that people from migrant communities and those affected by homelessness face when accessing a GP in Haringey, we developed and distributed digital and print materials to help people understand their rights to register with a GP in Haringey.

Our leaflet and poster entitled 'Do you need to see a doctor?' was co-produced with NHS North Central London Integrated Care Board (NCL ICB), Haringey GP Federation, Doctors of the World, Haringey Welcome, Haringey Council and various VCS partners. In 2023/24, our staff and volunteers distributed the information materials across Haringey.

## This year, we distributed:

7,300

**Leaflets**

Outlining the steps to GP Registration, answering commonly asked questions, and addressing misconceptions to ensure that people understand their right to access GP services.

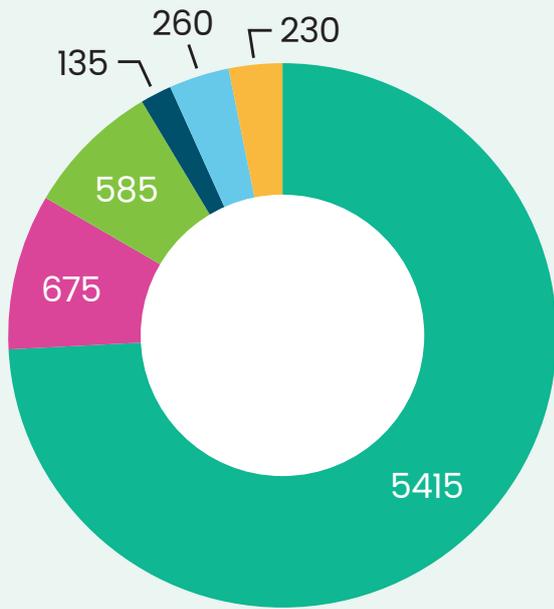
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**Posters**

The leaflets were made available in English, Turkish, Spanish, Polish, Bulgarian and Somali, all key community languages in Haringey. They were distributed to GP surgeries, pharmacies, community buildings, community organisations, and various support services.

On the following page we provide a comprehensive overview of the number of leaflets distributed in different languages across the borough.

### Languages

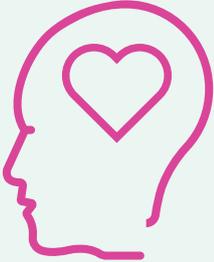


### Locations

- ROJ Women
- Latin American House
- Alevi
- Bridge Renewal Trust
- Garden House Kitabevi
- Szampion Polskie Delikatesi
- Community Cook Up
- Haringey Libraries
- Selby Food Bank
- Reach and Connect Community Connector Team
- Triangle Children Centre Family Hub
- Pueblito Paisa
- Children's Centre
- Haringey Neighbourhood Resource Centre
- Northumberland Park Resource Centre
- ICMG Turkish Community Centre
- GP Surgeries
- Pharmacies
- Refuge Workers Cultural Association
- Turkish Cypriot Community Association
- IRMO
- Haringey Welcome
- HOPEC
- Selby Centre
- CARIS

# Ways we've made a difference

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.



## Creating empathy by bringing experiences to life

It's important for services to see the bigger picture. Hearing personal experiences and the impact on people's lives provides them with a better understanding of the problems.

We have been running sessions offering free blood pressure checks to residents on the Broadwater Farm Estate, and used the opportunity to connect with local people and capture their views on health and care services. In doing this, we learnt more about the seldom-heard communities on the estate. We met people from the Turkish, Ghanaian, Eritrean, Black Caribbean and Somali communities, ranging in age from their 30s to their 70s, and heard about their experiences of local health and care.



## Getting services to involve the public

Services need to understand the benefits of involving local people to help improve care for everyone.

We worked with Whittington Health NHS Trust and the team at NHS Wood Green Community Diagnostic Centre (CDC) to engage local Turkish, Black Caribbean and Polish communities to improve communication between Centre and the community. Many residents had not known about the range of diagnostic testing available there. Involving local people through our focus groups meant that we could feedback their insights to the CDC, UCLPartners and VCS partners to ensure that their views were heard and presented to service providers to improve awareness, access and communication.



## Improving care over time

Change takes time. We often work behind the scenes with services to consistently raise issues and bring about change.

Through research and engagement with sickle cell patients in Haringey we were able to look back at the history of patient experience, understand the impacts of the condition, and how current services address patient need. We became acutely aware of how a lack of care and understanding over many years has contributed to current inequalities in health for patients, with many interview participants stating that they suffered traumatic healthcare experiences in the past. We believe that the inclusion of this past will help shape policy for the future and can help service providers to think carefully about the services available for sickle cell patients and what can be both improved now, and in the future.



**About six months ago I had a major crisis. I thought I was dying. I went to hospital, they did give me pain relief, but then I was just left on the trolley, because there's nothing else they can do. The doctor just came and said, "you've just had a sickle cell attack". That was it, I was just left on the trolley until it passed.**

Sickle cell study participant interviewed by Healthwatch Haringey

# Hearing from all communities

Over the past year, we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently to gather their feedback and make sure their voice is heard, and services meet their needs.



# Engaging residents on Broadwater Farm Estate

**We worked with the Broadwater Farm Regeneration Team to deliver free blood pressure checks for residents and used the opportunity to capture their views.**

In March 2024, we carried out free blood pressure checks to residents on the estate. With the local Broadwater Farm Surgery closing daily at 1pm, we aimed to ensure that residents could access blood pressure checks and key information about the risks of high blood pressure, without the need for a GP appointment.

Many residents on the estate have struggled with a lack of access to health information and access to GP services. Moreover, there is a high prevalence of conditions such as Type 2 diabetes and high blood pressure amongst residents.

## Why was it important for residents to check their blood pressure?

- Persistent high blood pressure can increase their risk of several serious and potentially life-threatening health conditions
- All adults over 40 years old are advised to have a blood pressure check at least every 5 years
- Demographic data indicates that most residents on the estate are people of colour. People from Black African, African-Caribbean or South Asian backgrounds may have high blood pressure at a younger age and are encouraged to get their blood pressure checked earlier.

# Championing Health on International Women's Day

**On Saturday 9th March, we partnered with Haringey Advice Partnership to run a stall at an International Women's Day Event held at Chestnuts Community Centre.**

The theme for the event was 'Let's Inspire Inclusion'. At Healthwatch Haringey, we proactively ensure that our research methods are inclusive of the experiences of different service users. This event helped us to consider how various intersections of race and ethnicity interact with other aspects of one's identity such as gender and sexuality.

At the event, we engaged with over 80 members of the local community and heard their views.

## What did we do at the event?

- Raised awareness of the importance of good health and wellbeing.
- Increased our visibility and presence and raised awareness of our service.
- Listened to people about their experiences of local health and social care services.
- Celebrated the achievements of women in Haringey represented through various local organisations and businesses.
- Networked with local voluntary and community sector organisations to extend our partnerships and reach.

# Advice and information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, making a complaint or choosing a good care home for a loved one – you can count on us.



# Supporting people with complex needs

**Mental health facilities can help vulnerable people to get the care they need – but only if they are accessible for them.**

**Issue:** Sara contacted us via phone enquiries, regarding the case of her young son (16) who was experiencing a serious mental health crisis and had been admitted to Whittington Hospital. Sara's son had been having psychotic episodes, was sectioned, and admitted to a centre where Sara felt he was ill-treated.

**Action Taken:** We contacted Barnet Enfield and Haringey Mental Health NHS Trust to discuss the case, which led to meetings with a Clinical Psychologist and the Transition Team Lead. Afterwards we were put in contact with the Head of Children's Commissioning in Haringey. After a productive meeting and consultation with a relevant professional, we were advised that an Autism assessment should be carried out.

**Outcome:** With our help Sara was able to engage with a range of professionals; her son was assessed again and placed in a more safe and secure unit. The most recent update from Sara revealed that her son has been transferred to a mental health facility that's he's happy, is feeling much better and should return home soon. Sara thanked us for all the support she received from us with this case.



**Healthwatch Haringey used its network and relevant partnerships in the borough to act promptly in emergency cases.**

**“Thank you so much for all your efforts in trying to help my son, you have been amazing, God Bless you.”**

Sara

# Giving People a Voice in Primary Health Care

**It's essential that vulnerable people are supported to navigate Primary Health Care systems.**

**Issue:** Maria contacted Healthwatch Haringey stating that her GP surgery was sending her reminders for a cervical screening, which she does not require on medical grounds. She reported feeling mistreated by the receptionist during their communication and expressed concerns about the reminders triggering past trauma.

**Action Taken:** We corresponded with the GP surgery, addressing Maria's concerns and how these reminders were triggering her past trauma.

**Outcome:** The GP surgery acknowledged Maria's concerns and apologised for any distress caused. They took proactive steps by inviting Maria for a face-to-face meeting and effectively ceased the reminders.



Thank you so much for your help! After the incident, my mood plummeted. I have mental health problems, so this was a serious issue, and I have to thank you for your patience with my desperation and rambling explanations. I literally was not able to contact the surgery about this or other issues in any way. I couldn't even imagine I'd get an apology from the surgery when I reached out to you, I just hoped a note in a file somewhere might help somebody in the same shoes down the line. Thank you for giving me a voice! I've managed to contact the surgery since, and it's entirely thanks to you.

Maria

# Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.



# Chris Goodyear: Celebrating 10 years as a Healthwatch volunteer

January 16th 2024 marked Chris Goodyear's ten-year anniversary volunteering with Healthwatch Haringey.

To celebrate this incredible achievement, we sat down with Chris to hear how she has found her ten years volunteering with us.



**Patients can have their say and it does work. When we did assessments of hospitals and GP surgeries, seeing the suggestions we put forward on behalf of patients being implemented is satisfying.**

Chris Goodyear,  
Healthwatch Haringey Volunteer



See our video interview with Chris here: <https://bit.ly/HWH-Chris-Goodyear>

## Do you feel inspired?



We are always on the lookout for new volunteers, so please get in touch today.



Telephone: 020 8888 0579



Email: [info@healthwatchharingey.org.uk](mailto:info@healthwatchharingey.org.uk)



Website: [www.healthwatchharingey.org.uk](http://www.healthwatchharingey.org.uk)

# Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.



# Finances

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Income		Expenditure	
Funding received from local authority	£152,000	Staff costs	£110,898
Additional funding	£50,804	Operational costs	£65,821
		Support and administration	£26,085
Total income	£202,804	Total expenditure	£202,804

## Additional income is broken down by:

- £10,638 funding received from North Central London Integrated Care System as detailed below.
- £12,750 funding received from UCLPartners for work on joint projects.
- £27,416 funding received from Haringey Public Health for engagement and research projects.

## North Central London Integrated Care System (NCL ICS) funding

Healthwatch across North Central London receive funding from our Integrated Care System (ICS) to support new areas of collaborative work at this level, including project funding for Healthwatch Haringey:

Purpose of ICS funding	Amount
Healthy Hearts project	£2200
Blood Pressure project	£8438

# Next steps

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Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

## Top three priorities for 2024–25

1. Hearing more from the seldom-heard groups in the borough, including the growing Latin American community, the Somali and Turkish communities, and the experiences of Black women on maternal care in Haringey.
2. Childhood obesity in Haringey, and its links to socio-economic inequalities.
3. Looking at the experiences of young carers in Haringey.

# Statutory statements

Healthwatch Haringey is run and managed by Public Voice. Public Voice translates the insights and needs of people into actions to improve public services, leading to reduced inequalities and improved outcomes for the community.



# Statutory statements

## The way we work

### Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch Board consists of eight members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

### Methods and systems used across the year's work to obtain people's views and experience

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using health and care services. During 2023/24, we have been available by phone, and email, and through social media, provided a contact web form on our website as well as attending meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website and social media.

## Responses to recommendations

We had no providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations.

## Taking people's experiences to decision makers

We ensure that people who can make decisions about services hear about the insights and experiences that have been shared with us.

We ensure wider public involvement in deciding our work priorities. We listen to concerns and challenges raised directly with Healthwatch Haringey through local people contacting us by phone and email for help and support.

In our local authority area, for example, we take information to various stakeholder meetings, including the Haringey Borough Partnership Executive Group, Health Inequalities Investment Oversight Group, and the Neighbourhoods and Health Inequalities Board.

We also listen to the concerns and challenges raised by our service user groups - our Joint Partnership Board, our Reference Groups, our Experts by Experience Board, and the Haringey Patient Participation Group Network, and take our insight and experiences to decision makers in North Central London Integrated Care System and Haringey Council to bring about service improvement.

We attend the Race Equity Committee and also the Haringey Adult Safeguarding Committee.

We also share our data with Healthwatch England to help address health and care issues at a national level.

### **Healthwatch representatives**

Healthwatch Haringey is represented on the Haringey Health and Wellbeing Board by Sharon Grant OBE, Chair of Healthwatch Haringey. During 2023/24 our representative has effectively carried out this role by attending all the Health and Wellbeing Board meetings which were quarterly, and by being actively engaged in discussions on the Integrated Care System (ICS).

Healthwatch Haringey is represented in a selection of North Central London (NCL) Integrated Care Board (ICB) committees by Healthwatch Enfield, as a representative of the five collective local Healthwatch in NCL. Local Healthwatch are also invited to the NCL Integrated Care Board's Community Partnership Forum.

Project / Activity Area	Outcomes achieved
<p><b>Haringey Adult Safeguarding Committee</b></p>	<ul style="list-style-type: none"> <li>• During this year Healthwatch Haringey argued strongly for prevention and engagement to be key work strands in the borough's Five Year Plan.</li> <li>• We succeeded in establishing a Prevention and Safeguarding Sub-committee on which our co-chair sits.</li> <li>• As a result, we are considering consultation and awareness raising on such issues as financial abuse and neglect.</li> </ul>
<p><b>Wood Green Community Diagnostic Centre</b></p>	<ul style="list-style-type: none"> <li>• Healthwatch Haringey facilitated a feedback session inviting members of staff from the CDC, UCLPartners and our VCS Partner Leads to come together to discuss the report and ways the CDC can improve awareness for specific communities.</li> <li>• The CDC began to collaborate with Haringey's diverse VCS networks to raise awareness among their service users about the CDC and its services.</li> <li>• The CDC began to consider tailored communication strategies that cater to seldom-heard communities, ensuring effective outreach.</li> </ul>
<p><b>The Experiences of People with Sickle Cell in Haringey</b></p>	<ul style="list-style-type: none"> <li>• Our research contributes to the broader knowledge-base in North Central London around sickle cell disease and the challenges faced by those with the condition.</li> <li>• Our project raised greater awareness of the George Marsh Centre and its activities.</li> <li>• Our research will support partners and stakeholders in understanding both the barriers to accessing benefits and the difficulties in maintaining employment by those with the condition.</li> <li>• Our research provided insights into health inequalities.</li> </ul>

Project / Activity Area	Changes made to services
<p><b>Haringey School Superzones Vaping Project</b></p>	<ul style="list-style-type: none"> <li>• Our research amplified the voices of young people in regard to vaping.</li> <li>• Our research contributed to the wider body of knowledge around young people and vaping.</li> <li>• The local authority is committed to joint-working with neighbouring boroughs to tackle the trade of vapes to children.</li> <li>• Our research provided recommendations and guidance for the Haringey Public Health Team to follow to reduce the prevalence of vapes among secondary school pupils.</li> <li>• Our research has led to the potential of more creative interventions to be utilised via social media.</li> </ul>
<p><b>Broadwater Farm Estate Engagement</b></p>	<ul style="list-style-type: none"> <li>• Healthwatch Haringey have collaborated with the Broadwater Farm Regeneration Team in order to disseminate information and advice on healthcare services.</li> <li>• We conducted blood pressure checks on the estate and are planning on further activities in the year ahead.</li> <li>• We captured the views and experiences of residents on local health and care services to help inform our work and priorities.</li> </ul>
<p><b>Pharmacy First Scheme in Haringey</b></p>	<ul style="list-style-type: none"> <li>• Our research contributed to a larger Healthwatch England document on Pharmacy First, entitled Pharmacy: What people want.</li> <li>• Our research brought to light the importance of clear communication as to what a pharmacy can do under the scheme and how patients can utilise it.</li> </ul>

Project / Activity Area	Changes made to services
<p><b>GP Access Project</b></p>	<ul style="list-style-type: none"> <li>• For this project we incorporated other methods of understanding barriers to GP access in the local area by speaking directly to practice managers to better understand the challenges faced.</li> <li>• Our research will serve as a springboard to the facilitation of knowledge-exchange through shared learning sessions of best practice across Haringey.</li> <li>• Our research can serve to contribute to wider representation on PPGs within GP practices in Haringey.</li> <li>• Our recommendations include knowledge exchange roundtable discussions with practice managers across Haringey, which we will facilitate.</li> </ul>
<p><b>Pathway to Equity in Elective Care: Health Inequalities for Young People (with UCLPartners)</b></p>	<ul style="list-style-type: none"> <li>• Healthwatch Haringey has facilitated workshops for UCLH with schools and colleges in Haringey to engage young people in co-developing research methods to explore why young people have low attendance of clinical appointments.</li> </ul>
<p><b>GP Registration in Haringey</b></p>	<ul style="list-style-type: none"> <li>• We have distributed thousands of information leaflets on GP registration rights in a number of local community languages to GP surgeries and community buildings across the borough, including Spanish Turkish, Somali, Polish, and Bulgarian.</li> </ul>
<p><b>Healthy Hearts</b></p>	<ul style="list-style-type: none"> <li>• We've engaged Haringey residents via blood pressure checks with the aim to improve heart health, sharing tips to improve health and wellbeing, and providing information on relevant services available for those with poor access.</li> </ul>

<p><b>Start Well Programme</b></p>	<ul style="list-style-type: none"> <li>• We engaged underrepresented communities in Haringey to capture the voices of local people and patients on proposed changes to maternity, neonatal, and children's surgical services in North Central London.</li> </ul>
<p><b>Community Partnerships Forum</b></p>	<ul style="list-style-type: none"> <li>• We helped to recruit participants for the 'Community Partnerships Forum' to enable residents to be involved in developing strategies and improving services across NCL health and care systems. We helped shape an inclusive volunteer role description, plan interview processes, and make the final selection.</li> </ul>
<p><b>Consultation on Physician Associates in Haringey</b></p>	<ul style="list-style-type: none"> <li>• We worked with other local Healthwatch, the Haringey GP Federation and NCL ICB to clarify and demystify the role of Physician Associates in order to bring about better understanding for service users across North Central London.</li> </ul>
<p><b>Healthwatch Haringey information and support</b></p>	<ul style="list-style-type: none"> <li>• We received feedback about a number of GP services and supported residents via signposting and follow-up.</li> </ul>



## Contact us



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