

Haringey Health and Wellbeing Strategy 2020-24

Draft Slides for discussion



Why do we have a Health and Wellbeing strategy?

Health and wellbeing are fundamental to our success individually and collectively. We all want to improve the health and wellbeing of people in Haringey, so that people can thrive and contribute to their communities.

All partners:

- have a commitment to fairness and social justice; we want to make sure we are doing all we can to prevent ill health and reduce health inequalities.
- believe that we are stronger when we work together in a more collective and open way, solving problems with our communities and residents so people can make better, healthier lives for themselves.
- recognise the importance of the wider factors that influence our health, such as the environments we live in, our housing, schools, jobs and income.

The strategy will enable us to have a **clear joint vision, priorities to work towards and oversight through the Board to monitor progress and ensure accountability.**

Who is on Haringey's Health and Wellbeing Board?

The Health and Wellbeing Board is a small, focused decision-making partnership board.

Statutory membership includes:

- Local Councillors
- Directors of Adults' and Children's Services in Haringey Council
- Director of Public Health in Haringey Council
- Haringey Clinical Commissioning Group
- Healthwatch Haringey – Public Voice
- Voluntary sector representation

In the last 12 to 18 months, local NHS Trust Chief Executives and the Haringey GP Federation Chief Executive have also been attending the board meetings as non statutory invitees. This is to ensure that we are working collectively across Haringey's major health and care organisations to improve the health of Haringey's population, and to support development of Haringey's Borough Partnership (for health and care) as part of the North Central London integrated care system.

While we are developing this strategy we also want to review who sits on the Health and Wellbeing Board and the responsibilities the Board has, so that we can strengthen the ability of the board to lead and influence the health and wellbeing of Haringey's population

What are Haringey's assets?

We are a **young, ethnically diverse** borough but the number of older people is increasing

- Resident population – 270, 624¹
- We speak over **180 languages**
- Our life expectancy is now similar to England and London levels



- We have a dedicated health and care workforce
- We have strong community and voluntary sector involvement
- Just over a quarter (27.8%) of Haringey is made up of open space
- **Clean air levels are in line with London** but higher than the England average.

What are some of the challenges we face in relation to Health and Wellbeing?



Haringey is the 4th most deprived borough in London. The gap in healthy life expectancy between the richest and poorest areas is **15** years for men and **17** years for women.



We have higher rates of serious mental illness than other boroughs. Rates of employment and stable housing are low in people with severe mental illness or learning disabilities.



Access to green space across the borough is variable between areas. We have high rates of people living in temporary accommodation.



31.8% of older people in Haringey over the age of 60 are affected by income deprivation. 29% of residents over 50 live alone.



21.3% of children are in low income families. Over a third of Year 6 school children are overweight and this disproportionately affects those in more deprived areas.



Haringey has the third highest rate of domestic abuse with injury in London. 30% of youth offenders had witnessed domestic violence by the age of 7.

What are some key issues for Haringey residents?

The **wide range of life expectancies** across the Borough was highlighted as a key inequality to be addressed.

Housing was one of the biggest concerns of our residents, especially a lack of social housing. People are worried about the relationship between poor housing conditions and health.

Rough sleeping and homelessness were noted as being on the rise.

Isolation and loneliness were identified as an area to be addressed, particularly, but not only, for older people. There was a wish for more drop-in centres and lunch clubs.



Several residents expressed a desire to see **climate change and air quality** prioritised, including the promotion of active travel.

There was a high level of concern for the **young people at risk** in the borough, especially in relation to safety.



Residents expressed concern for **vulnerable residents**, such as those with disabilities or long-term conditions, who are more likely to live in poverty.



Residents would like greater access to good quality **swimming pools and leisure facilities** in some parts of the borough.

How is the strategy organised?

The Health and Wellbeing strategy is organised into key themes.

Our themes are:

- Creating a healthy place
- Start well
- Live well
- Age well
- Violence prevention

This strategy sets out initial priority areas of focus within each of these themes.

These priority areas have been chosen through understanding our health needs through resources such as our State of the Borough information pack, as well as through resident feedback and through consensus amongst people working in each of these areas.

We want to bring together all our efforts as partner organisations to work on the priority areas we have set out in this strategy

How will our strategy be delivered?

There are existing plans and strategies in place that can help us to deliver the Health and Wellbeing Strategy (see appendix) such as Haringey's Borough Plan.

However, for most areas of work we will need to develop new ways of working together in order to deliver the ambitions of the strategy.

The Borough Partnership is a new partnership between health and care organisations in Haringey, which can play a major role in delivering the priorities outlined in the Health and Wellbeing Strategy.

We also recognise that the themes of the strategy are interconnected so we will join up work across the themes where relevant.

Principles of working together

As important as our themes and priorities are the ways in which we will work together towards our shared vision and goals. Working in different ways will be essential if we want to succeed in delivering our strategy:

Partnership working

We will commit to working collectively with a wide range of partners in a transparent and open way. We will all do our bit to deliver the strategy. Our prime aim will be the health of the population of Haringey as a place and we believe we can only do this collectively.

Community-focused

We will listen to and work closely with our residents, communities and community organisations. We will support community organisations to thrive.

Long-term impact

We will make sure the decisions that we make benefit the health of our population in the long-term as well as the present

An informed approach

We will make sure decisions are based on good information including the views and feedback from our residents

Equity

We are committed to providing the most support to populations who need it most. We will focus on groups at risk of poorer health outcomes (see examples in appendix)

Quality

For all areas of the strategy, we will commit to getting the basics right in terms of quality and accessibility of local health and care services



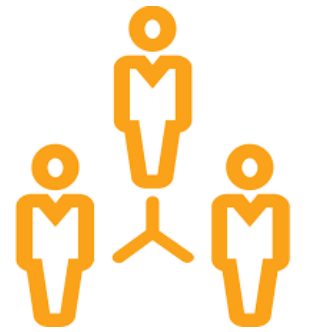
Start Well

The first few years of every child's life give them the long-term foundations to thrive and this is key to success in adulthood: we want to work together to ensure that every child in Haringey has the best start in life

Initial proposed priorities:

- Improving children and young people's mental and emotional health and wellbeing (0-25 years of age).
- Developing a multi-agency community based early help offer, meeting families needs at the earliest opportunity – we believe that stable resilient families living in strong communities are the key to helping children and young people lead happy, healthy and fulfilling lives.
- Ensuring schools and surrounding areas provide safe environments in which children are encouraged to make healthy choices

Live Well



The wellbeing of adults in Haringey is critical for their life opportunities and experiences. Improved wellbeing drives better personal and social outcomes whilst reducing negative outcomes and harm.

Initial Proposed priorities:

- Promoting good Mental Health and Wellbeing in our communities
- Improving access to healthcare services, stable housing and employment for vulnerable residents, including those with learning disabilities, autism, substance misuse issues and the homeless population
- Reducing drug and alcohol related harm
- Improving support for people with caring responsibilities

Age Well



We want to ensure our residents live as well as possible as they age and are well supported to do so. We see older people as an asset to their communities.

Priorities agreed through Haringey's Ageing Well Strategy

- Reducing social isolation
- Reducing financial hardship in older people
- Keeping people in their own homes for longer and preventing or shortening hospital admissions including by:
 - Developing multi agency networks of support for people who are identified as frail or becoming frail
 - Improving our services which help people to stay out of hospital at times of urgent need
- Improving the wellbeing of older people in care homes

Violence Prevention



Our aim:

We want to reduce the levels of violence on Haringey's streets and also the violence that takes place behind closed doors in Haringey's households.

We have existing Haringey strategies to tackle youth violence and violence against women and girls. These strategies are overseen by our Community Safety Partnership, but the Health and Wellbeing Board will also now review progress on these strategies ensure and that the partners on the Health and Wellbeing Board are contributing to this agenda.

We will focus on some particular agreed areas which might include:

- Reviewing and developing our approaches to preventing early trauma and adverse childhood experiences (such as domestic violence, the impacts of serious parental mental illness and parental alcohol and substance misuse)
- Speaking out against all forms of violence in Haringey
- Listening to our communities and voluntary sector groups to make sure we are collectively addressing and tackling youth violence and violence against women and girls

Outcome Measures

- We have proposed a small set of strategic outcomes measures for the Strategy on the next slide. Some of the things we want to measure are difficult to measure, so we will think about how we can monitor progress in these areas, and also about how we capture resident feedback on how we are doing.
- We also want to ensure we monitor inequalities in outcomes between different groups so that they can be reduced
- We want to also set intermediate goals so that we can review our workstreams and effect change if needed before the time period of the strategy runs out. Many of these are already set out in the existing delivery plans that will support the Health and Wellbeing Strategy

Outcome Measures

- Proposed outcome measures (placeholder slide)
- Overarching measure – years lived in good health and gap in years lived in good health across the borough
- Proportion of journeys made through walking and cycling
- Air quality measure
- Measures of emotional and mental wellbeing in children and adults
- School readiness
- Employment in people with learning disabilities and enduring mental illness
- Social isolation in older people
- Hospital admission rates for older people

Consultation

- We want to ensure that we have a robust consultation and engagement process, including a wide range of stakeholders
- We want to ask
 - Have we got the right themes and priorities?
 - What can residents do to play their part in delivering the strategy?
- We will follow the guidelines in Haringey's' Consultation and Engagement Toolkit: A Best Practice Guide.
- Minimum standards include:
 - Allowing a minimum of six weeks to enable meaningful engagement
 - Ensuring that the consultation is clear, concise and widely accessible
 - Giving feedback on the responses received.

Next steps

- Finalise draft strategy for consultation
- Begin process of consultation and wider engagement – We would like to get input on the best way to do this at this Health and Wellbeing Board
- Finalise strategy for publication, including outcomes and delivery mechanisms (aim for June 2020)

Appendix: Links to existing delivery plans - Place

In order to deliver the ambitions of the Healthy Place section of the strategy, the Health and Wellbeing Board wants to play a stronger leadership and oversight role in local policies and plans that impact on healthy place.

Some of the linked delivery plans for our proposed priorities are shown below, but this area of work will also require further development and closer involvement from senior council officers (e.g. leads on Regeneration, Housing, Environment and Planning) and other key partners who are not currently members of the Health and Wellbeing Board.

Proposed Priority	Linked delivery plans (all areas are linked to Haringey's Borough Plan)
Designing and planning future major public developments in Haringey to maximise health and wellbeing of residents	This is an area of work we want to do explore how we do differently using an example area as an initial way of developing best practice
Scoping how housing in the borough can promote good health and wellbeing	This is a new area of work but links to Haringey's Housing Strategy
Using licensing and planning policies to promote healthy high streets	Link to Haringey's Local Plan Statement of alcohol licensing, Statement of gambling policy
Organising our services around places or localities, so teams get to know each other and can connect residents more readily to the support they need, be it housing, employment or health and care advice or ways to be more active.	Haringey Borough Partnership Delivery Plan (in development) including North Tottenham work as an exemplar Physical Activity Strategy Parks and open spaces strategy
Improving Air Quality	Haringey Air Quality Action Plan
Reducing carbon emissions	Haringey Borough Plan

Links to delivery plans – Start Well

Proposed Priority	Linked Delivery Plans
Improving children and young people's mental health.	Haringey Borough Partnership Plan Haringey Borough Plan Haringey CAMHS Transformation Plan
Developing a multi-agency community based early help offer, meeting families needs at the earliest opportunity	Haringey Borough Partnership Plan Haringey Borough Plan Haringey Young People at Risk Strategy
Ensuring schools and surrounding areas provide safe environments in which children are encouraged to make healthy choices	Haringey Borough Plan Haringey Superzones Project

Links to delivery plans – Live Well

Proposed Priority	Linked Delivery Plans
Promoting good Mental Health and Wellbeing in our communities	This will require new ways of working and plans including for Haringey to sign up to Prevention Concordat for Better Mental Health and will build on work set out in. Haringey Borough Plan Haringey Suicide Prevention Action Plan
Improving access to healthcare services and employment for vulnerable residents, including those with learning disabilities and the homeless population	Haringey Borough Partnership Plan Haringey Borough Plan
Reducing drugs and alcohol related harm	A multi-agency approach to reducing drugs related harm is in development
Improve support for people with caring responsibilities	Haringey Borough Partnership Delivery Plan New Haringey Carers Strategy

Links to delivery plans – Age Well

Proposed Priority	Linked delivery Plans
<p>Making Haringey Dementia and Age Friendly</p> <p>Reducing social isolation</p> <p>Reducing financial hardship in older people</p> <p>Keeping people in their own homes for longer and preventing or shortening hospital admissions including</p> <p>Improving the wellbeing of older people in care homes</p>	<p>Haringey Borough Partnership Delivery plan</p> <p>Haringey Ageing Well Strategy</p>

Appendix: Examples of groups affected by health inequalities

Some population groups are more likely to have poor health and wellbeing. These groups may require a particular focus to improve health outcomes.

- People in the **lowest socio-economic group** have the lowest life expectancy and spend the longest time living with poor health and disability.
- **Looked after children** are more likely to have mental health problems, with 60% of children and young people who are looked after in England reporting emotional and mental health problems.
- Having a **severe mental illness** increases the likelihood of physical health problems, such as cancer and heart disease.
- People with **learning disabilities** have worse physical and mental health than people without a learning disability. Life expectancy is 18 years shorter for women and 14 years shorter for men, compared with the general population.
- Adults living with **disabilities** are twice as likely to be unemployed, compared to adults without a disability.

- People who are **unpaid carers**, providing high levels of care for relatives and friends are more than twice as likely to have poor health, compared with those who are not carers.
- Some **Black and ethnic minority (BME) groups** have an increased risk of health conditions such as type 2 diabetes. They can also have poorer access to healthcare services, including preventive services such as screening and immunisations.
- The **lesbian gay bisexual and transgender (LGBT)** population have higher levels of mental health problems and sometimes experience discrimination in healthcare services.
- **Older adults** have the highest proportion of excess winter deaths.
- **Homeless** men have a life expectancy of 47 years, **homeless** women have a life expectancy of 43 years (3). Rough sleepers have higher rates of long-term physical and mental health conditions, compared with the general population.