

## Appendix 1

### LEWISHAM HEALTH AND WELLBEING STRATEGY DRAFT REFRESH 2015-18

#### 1. SUMMARY

##### 1.1 Refreshing Our Strategy

1.1.1 This is a refresh of Lewisham's ten year health and wellbeing strategy produced. It encompasses the original nine long term **priority outcomes** for Lewisham, identified in 2013, which were:

- 1 Achieving a healthy weight
- 2 Increasing the number of people who survive colorectal, breast and lung cancer at 1 and 5 years
- 3 Improving immunisation uptake
- 4 Reducing alcohol harm
- 5 Preventing the uptake of smoking among children and young people and reducing the numbers of people smoking
- 6 Improving mental health and wellbeing
- 7 Improving sexual health
- 8 Delaying and reducing the need for long term care and support
- 9 Reducing the number of emergency admissions for people with long term conditions

1.1.2 This refresh provides a greater strategic focus on a smaller number of short term **priorities for action** over the next three years:

1. **to accelerate the integration of care;**
2. **to shift the focus of action and resources to preventing ill health and promoting independence;**
3. **supporting our communities and families to become healthy and resilient.**

Collective and concerted action on these three priorities, working with our local communities, could bring about significant population level improvements over the next three years across all nine priority outcome areas. At the same time these priorities align with, and support delivery of, key national and local policies and programmes. These include the NHS five year Forward View, the Care Act, the Our Healthier South East London Consolidated Strategy, Lewisham's Adult Integrated Care Programme, and Lewisham's new Children & Young People's Plan. All these policies and programmes prioritise integration, prevention, collective action and stronger communities.

##### 1.2 Our vision remains the same: "Health and Wellbeing for all Lewisham residents by 2023"

1.2.1 Our strategy is an ambitious one – it sets out a strategic commitment to 2023 focused on achieving our vision of:

1.2.2 *"Health and Wellbeing for all Lewisham residents by 2023"*

1.2.3 We acknowledged in our original strategy that good health and wellbeing mean different things to different people, so we used the World Health Organisation's (WHO) definition of health as 'a state of complete physical, mental and social wellbeing' and we defined wellbeing as having 'the capability to do and be what you want in your life'.

1.2.4 Health inequalities can also be interpreted differently, so we have used the National Institute for Health and Care Excellence (NICE) definition of health inequalities as 'differences between people or groups due to social, geographical, biological or other factors that result in people who are worst off experiencing poorer health and shorter lives'.

### **1.3 Tackling the root causes of health inequalities**

1.3.1 We knew that achieving our goal of Health and Wellbeing for All by 2023 would require us to think differently about the root causes of health inequalities. We recognised that health and wellbeing is affected by social and environmental factors as well by the choices and actions taken by individuals.

1.3.2 Reducing inequalities is certainly a significant challenge but this should not stop us pursuing further action. In order to tackle health inequalities in Lewisham, we recognised:

- the importance of empowering individuals to take action by themselves, and also within their families and communities;
- the need to create physical and social environments that encourage healthy habits, choices and actions;
- that every aspect of people's lives, their work, their housing, their finances and their relationships can have an impact on their health and wellbeing.
- the roles that organisations across all sectors must play in order to achieve improvements in the borough.
- That while the underlying causes of health inequalities are common, the priority actions for reducing inequalities will vary between communities, in response to specific local circumstances.
- that there are opportunities to reduce inequalities across a range of settings – in schools, workplaces and community centres and at all stages of the life course.

### **1.4 Taking action at three levels – population, community and individual/family**

1.4.1 We propose to take action at three levels: at population, community and individual/family level. Approaches directed at the whole population will include healthy public policies, using legislation, and regulatory powers to support making 'healthy choices easy choices' for individuals and communities. Individuals and families will only choose certain behaviour and actions if those behaviours fit with the cultural and belief system of their own community. A powerful way to facilitate communities' awareness of and capability to alter the factors affecting health and wellbeing is through community development approaches that have been pioneered in Lewisham. At the individual and family level, developing the personal skills amongst staff and service users to allow those service users to manage their own care is critical to achieving population level changes.

### **1.4 Summary statement of intent**

1.1.3 Our refreshed strategy can be summarized in the following statement:

We will ACT at the level of: populations, communities, individuals and families

THROUGH: healthy public policy, community development, new neighbourhood care networks, making every contact count, self care and self management

TO: accelerate the integration of care, to prevent ill health and promote independence, and to support healthy and resilient communities

IN ORDER TO: improve and maintain health and wellbeing, reduce health inequalities and deliver our nine priority outcomes.

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## **2. LEWISHAM HEALTH AND WELLBEING BOARD AND ACHIEVEMENTS TO DATE**

### **2.1 Role of the Health and Wellbeing Board**

2.1.1 Lewisham's Health and Wellbeing Board brings together individuals from the key organisations that deliver health and care services, as well as representation from the borough's voluntary and community sector. The perspective of citizens and patients is provided by Healthwatch. Key roles of the board include the promotion of integrated health and care services and the development of a Health and Wellbeing Strategy, based on a clear understanding of the needs of the population (through the Joint Strategic Needs Assessment process).

### **2.2 Delivery of the Health and Wellbeing Strategy 2013-15**

2.2.1 In the period from 2013 to April 2015, significant progress was achieved for each of the nine ten year priority outcomes of the health and wellbeing strategy. Key achievements have included:

2.2.2 Priority 1: Achieving a Healthy Weight: Community and maternity services achieved the UNICEF Baby Friendly Initiative stage 2 award in 2014; implementation of a universal free vitamin D scheme reached 30% of eligible women and 50% of infants under 1 year; and the introduction of an exclusion zone (400m) for new fast food takeaways around schools and maximum percentages outside exclusion zones.

2.2.3 Priority 2: Increasing the number of people who survive colorectal, breast and lung cancer for 1 and 5 years: Reducing variation in early detection has been incorporated into the work of the CCG Primary Care Development Strategy Board; and Public Health England's National Be Clear on Cancer Campaigns have been promoted to Primary care and communities.

2.2.4 Priority 3: Improving Immunisation Uptake: Overall, uptake of immunisation in Lewisham's children continues to improve so that, with the exception of one vaccine, local uptake is now at or above the mean uptake in London. Local performance continues to improve whilst uptake in other boroughs has begun to decline. In the 2014/2015 Flu season, Lewisham saw its best performance yet and its greatest levels of improvement on uptake of flu vaccine.

2.2.5 Priority 4: Reducing Alcohol Harm: training was delivered to at least 750 front line workers to skill them in Identification and Brief Advice on Alcohol; and there was a focus on enforcing the sensible supply of alcohol, including a Responsible Retailers Scheme the introduction of the Director of Public Health as a 'Responsible Authority' and the re-commissioning of some specialist services.

2.2.6 Priority 5: Preventing the uptake of smoking among children and young people and reducing the numbers of people smoking: Lewisham had the biggest seizure of any local authority of illegal tobacco in the UK and has been cited as a model of success regionally; training was delivered to at least 1200 front line workers in very brief advice on smoking ie skills and confidence to raise the issue of smoking and refer for support; and training was delivered to more than 300 pupils aged 12 to 13 years to persuade more than 3000 of their peers not to start smoking.

2.2.7 Priority 6: Improving mental health and wellbeing; mental health first aid training was successfully delivered to all front line public and voluntary sector workers to support them to respond to the needs of people with mental health needs; and over 400 families have benefited from targeted family support in the year ending March 2015.

- 2.2.8 Priority 7: Improving sexual health: A total of 19 pharmacies are now offering emergency contraception & Chlamydia and gonorrhoea screening; the number of online screening for sexually transmitted diseases requests in 2014/15 increased on the previous year; all secondary schools were offered access to free Sex & Relationships Education (SRE) in the 2013/14 school year, and 9 schools took up this offer.
- 2.2.9 Priority 8: Delaying and reducing the need for long term care and support: The Adult Integrated Care Programme Board (AICPB) has reviewed a service map of intermediate care, rehabilitation, admissions avoidance and enablement; co-location of key healthcare staff in each of the four neighbourhoods is being progressed; and estates issues are being resolved in order to enable the co-location of key staff.
- 2.2.10 Priority 9: Reducing the number of emergency admissions for people with long term conditions: The CCG has supported GP practices to deliver the National Unplanned Admissions Enhanced Services (ES) and 40 of the 41 GP practices have used the Risk Stratification Tool to identify patients who are at most risk; a structured programme was successfully delivered to support practices to increase the numbers of NHS health checks, increase stop smoking and improving immunisations 2013/14; and DESMOND (Diabetes Education and Self-Management for On-going and Newly Diagnosed) has been commissioned by the CCG and is enabling patients to self-refer for support.

### 3. OUR REFRESHED STRATEGIC PRIORITIES FOR 2015-18

- 3.1.1 While the Board will continue to monitor progress using our H&WB Outcomes Dashboard and ensure that existing delivery groups and plans work effectively to deliver the original 9 priority outcomes within the resources available, the board now wants to provide a greater strategic focus on a smaller number of actions where collective and concerted effort by the Health and Wellbeing Board member organisations in partnership with other stakeholders, and working with our local communities, could bring about significant population level improvements in Health and Wellbeing.
- 3.1.2 Over the last six months a series of Board workshops and stakeholder engagement events have taken place. They confirmed that our ten year strategy has not changed: our vision remains to achieve health and wellbeing for all residents by 2023. They also generated a strong consensus that the best way to make progress over the next three years towards realising this vision is by preventing ill-health, maintaining good health and keeping more people well and independent throughout their life course. This will require a much greater focus on creating the conditions that make healthier lifestyle choices easier for individuals and families, and providing the support for older people and those with disabilities to live well and independently for as long as they can.
- 3.1.3 In order to prevent ill health and promote wellbeing and independence the board and its partners identified a clear need for an integrated health and social care system and stronger communities. What also emerged from discussions is the need for simultaneous joined up action across the following 'fronts':
- integration of physical and mental health services;
  - Integration of health and social care;
  - Integration of care and prevention;
  - Integration of primary and second health services (including community services);
  - building on the strong and active communities that already exist in Lewisham, to mobilise their efforts and support them to help each other to make changes in their daily lives, and empower them to take control over their health and wellbeing.
- 3.1.4 Following the engagement activity with stakeholders and the discussions by the Board, the three interdependent broader priorities have been identified for 2015-18:
- 1) To accelerate the integration of care
  - 2) To shift the focus of action and resources to preventing ill health and promoting independence
  - 3) Supporting our communities and families to become healthy and resilient
- 3.1.5 These broad priorities align with, and support delivery of, key national and local policies and programmes. These include the NHS five year Forward View, the Care Act, the Our Healthier South East London Consolidated Strategy, Lewisham's adult integrated care programme, and Lewisham's new Children & Young People's Plan.

## **4. THE APPROACH WE WILL TAKE**

4.1.1 We propose to take action on these three priorities for action at three levels: at a population, community and individual/family level.

### **4.2 Population level approaches**

4.2.1 Approaches directed at the whole population will include healthy public policies, using legislation, and regulatory powers to support making 'healthy choices easy choices' for individuals and communities. Social marketing, communication and education strategies, service support and even enforcement actions will be required to achieve the biggest impact.

### **4.3 Community level approaches**

4.3.1 Individuals and families will only choose certain behaviour and actions if those behaviours fit with the cultural and belief system of their own community. These communities can be based on place (neighbourhood, school, workplace), culture (ethnicity, faith), and others (disability, sexual orientation). A powerful way to facilitate communities' awareness of and capability to alter the factors affecting health and wellbeing is through community development approaches that have been pioneered in Lewisham. Lewisham's voluntary, community and faith sector acts as a bridge between services and communities, and the new neighbourhood care networks emerging from the integration of health and social care can provide an additional vehicle for engaging and empowering communities to improve their own health and wellbeing. Working with businesses is also part of a community approach.

### **4.4 Individual and family level approaches**

4.4.1 Many interventions taken up at the individual and family level can only be implemented effectively to scale in an integrated health and care system where every contact presents a health improvement opportunity. Brief Interventions for behaviour change will be delivered to scale by front line staff, developing the personal skills amongst staff and service users to allow those service users to manage their own care is also critical to achieving population level changes.

## 5. PUTTING IT ALL TOGETHER: LEWISHAM HEALTH & WELLBEING STRATEGY REFRESH 2015-18

### 5.1 Our refreshed strategy can be summarised in the following narrative:

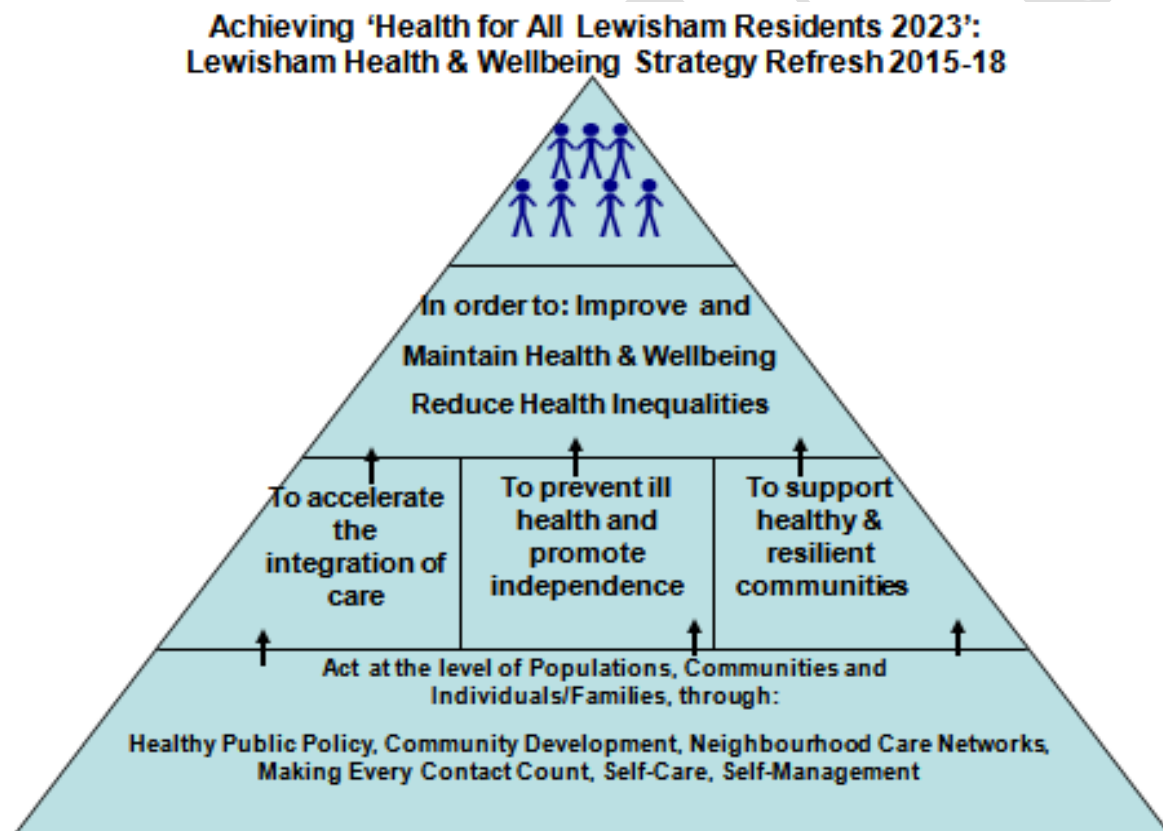
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IN ORDER TO: improve and maintain health and wellbeing and reduce health inequalities.

### 5.2 The diagram below illustrates this narrative, bringing together our original vision and overall aim, our new strategic focus and priorities for the next three years, and the approaches we will take to addressing these priorities, in a Lewisham Health & Wellbeing Strategy Refresh 2015-18:

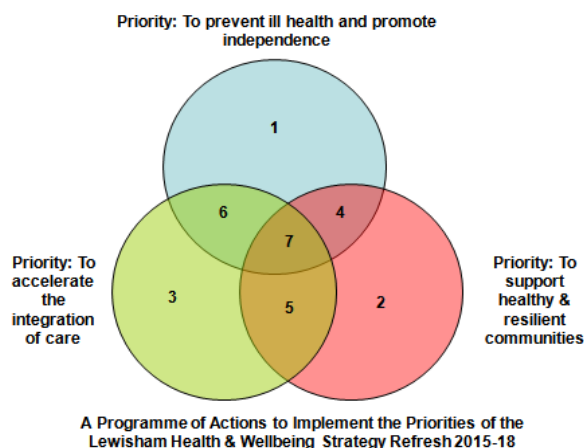




## 6. ACTIONS WE WILL TAKE TO DELIVER OUR STRATEGY

6.1.1 The series of board workshops and stakeholder engagement events held during 2015 culminated in a large stakeholder event in which partners across agencies met to identify the key actions required to deliver a refreshed strategy over the next three years.

6.1.2 In order to achieve population level change in outcomes, we recognised the need to identify a programme of actions that addresses all three priorities, and wherever possible to identify actions that operate on two or three priorities at the same time. The Venn diagram below illustrates how identified actions operate together:



### Examples of how actions will operate together to address H&WB Strategy Refresh Priorities

- 1 – Promote smoke free environments, including homes & playgrounds
- 2 – Identify community assets & gaps, and how public services can better support communities to support themselves
- 3 – Co-locate health & care staff (inc primary care) in each of the four neighbourhoods
- 4 – Work with local retailers / off licenses to reduce the supply of super strength lager/beer
- 5 – Promote cancer screening programmes in the community & work with GP practices so that they are more proactive in following up cancer screening non-attenders
- 6 – Support children at risk of deteriorating mental health or those exposed to risk factors for mental ill health
- 7 – Achieve and maintain baby friendly accreditation across maternity and community health

6.1.3 In order to achieve population level change in outcomes with maximum impact, it will not be sufficient to identifying actions that operate across priorities. We will also need to ensure a balanced programme of actions that operates simultaneously at a population, community and individual level.

6.1.4 The Health & Wellbeing Board will review all the actions identified through the engagement events in 2015, and use the approach described above to develop a new three year action plan that will deliver our refreshed strategic priorities.

## **7. HOW WE WILL MONITOR AND MEASURE SUCCESS**

- 7.1.1 Over the last three years, existing governance and performance monitoring arrangements have delivered significant progress in implementing Lewisham's Health and Wellbeing strategy. A Health and Wellbeing Strategy Implementation Group, with representation from local authority and health commissioners, and the voluntary sector, will take responsibility for developing a Health and Wellbeing delivery plan and monitoring its implementation. The Implementation Group will report on progress in delivery of actions to the Health and Wellbeing Board every six months, but will exception report performance issues when necessary. It will also use the the Health and Wellbeing Board's outcomes dashboard to monitor progress in delivery of outcomes.
- 7.1.2 The JSNA process and the public health annual report will also be used to assess the success of implementation of the strategy in addressing health and social care needs.

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