

LEWISHAM HEALTH AND WELLBEING STRATEGY: 2016 PROGRESS UPDATE FOR HEALTHIER COMMUNITIES SELECT COMMITTEE

1. OUR REFRESHED STRATEGIC PRIORITIES FOR 2015-18

1.1. In March 2016 the Lewisham Health and Wellbeing Board agreed to continue to monitor progress in delivering its original 9 priority outcomes using our H&WB Outcomes, but to provide a greater strategic focus on a smaller number of actions where collective and concerted effort could bring about significant population level improvements in Health and Wellbeing.

1.2. 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 was 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.

1.3. Consequently the board agreed three interdependent broader priorities for action 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

1.4. 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 South East London Sustainability & Transformation Plan, Lewisham Health Partners' Integrated Care programme, and Lewisham's Children & Young People's Plan.

2. THE APPROACH WE HAVE TAKEN

2.1. Since the refresh of the Strategy in 2015/16, we have taken action on these three priorities at three levels: at a population, community and individual/family level.

2.2 Population level approaches

- 2.2.1 Approaches directed at the whole population 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 are being used to achieve the biggest impact.

2.3 Community level approaches

- 2.3.1 Individuals and families will only choose certain behaviour and actions if those behaviours fit with the culture 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 (see below) 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.

2.4 Individual and family level approaches

- 2.4.1 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 have been 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.

3. **PUTTING IT ALL TOGETHER: LEWISHAM HEALTH & WELLBEING STRATEGY REFRESH 2015-18**

- 3.1 Our refreshed strategy can be summarised in the following narrative:

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

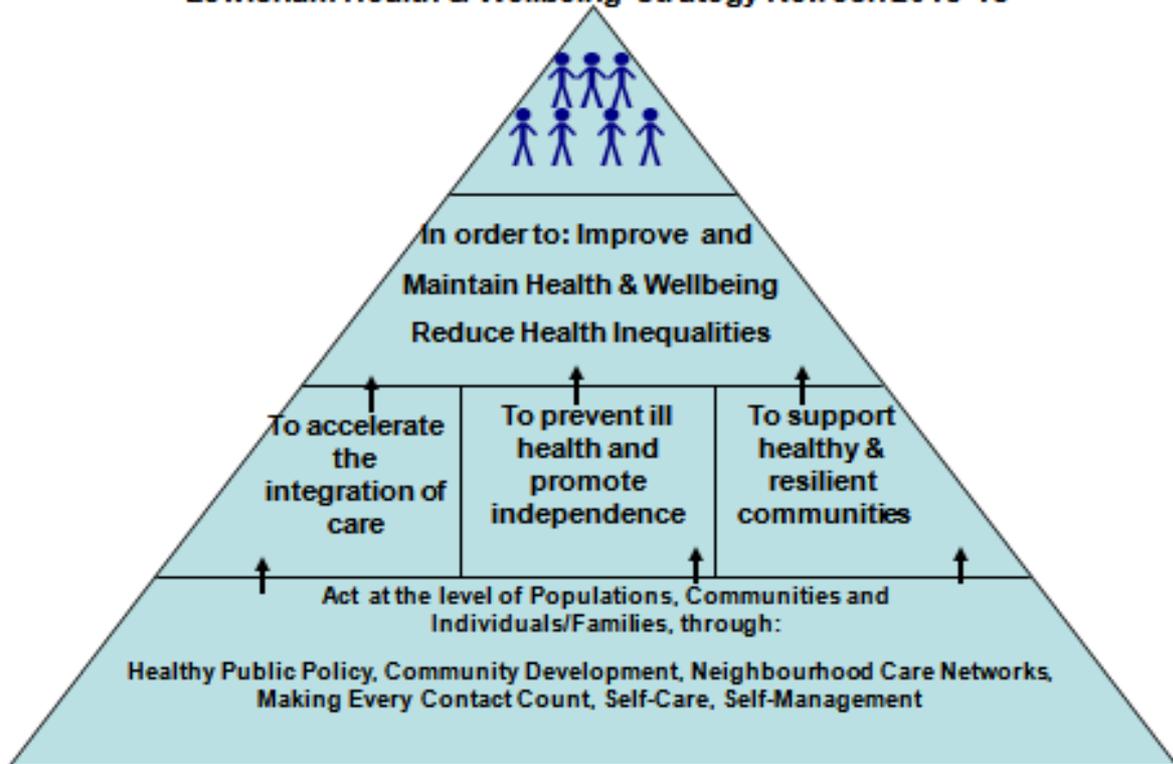
THROUGH: healthy public policy, community development, new neighbourhood care networks, making every contact count, self care and self management

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

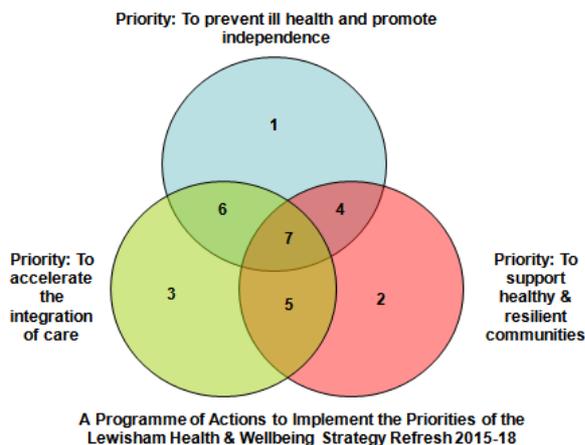
IN ORDER TO: improve and maintain health and wellbeing and reduce health inequalities.

- 3.2 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:

**Achieving 'Health for All Lewisham Residents 2023':
Lewisham Health & Wellbeing Strategy Refresh 2015-18**



3.3 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

3.4 When considering the achievements during 2016 described below, it should be borne in mind that although achievements are described under one of the three priority action headings, many operate across two or even three priorities.

4 ACHIEVEMENTS DURING 2016

4.1 Accelerating the integration of care

4.1.1 Lewisham Health and Care Partners set itself a number of ambitious goals for integration of care during 2016, and although there has been slippage in some areas, good progress has been made in the following areas:

4.1.2 **The Safe and Independent Living (SAIL)** in Lewisham programme is designed to improve referral and access to a broad range of coordinated support and/or information services provided by the NHS, Council, Fire Brigade, Voluntary Sector and Private organisations to help keep people safe and independent in their own home. The SAIL programme was designed and commissioned during 2016, but the launch date was delayed while Information Governance concerns were addressed; however, these have now been resolved and SAIL went live in January 2017.

4.1.3 **The community falls team** (model based on current NICE guidelines) is part of a wider **falls pathway**. The pathway will also link with the UHL based Fracture Liaison Co-ordinator, Primary Care and health and social care partners to identify and proactively manage those at risk of falling (primary prevention) as well as providing a range of physical activity interventions and care coordination to reduce repeat falls (secondary prevention). Progress was made in 2016 with the design of the pathway, and commissioning of the community falls team. Although the implementation of a falls service has slipped from the original timeframe, progress has been made with the recruitment of a Falls Lead; however, a fully operationalised service is dependent on the contract variation between the CCG and Lewisham and Greenwich NHS trust.

4.1.4 The development of effective **Neighbourhood Care Networks** is a key element in the transformation of Community Based Care (CBC). The term **Local Care Network**, as used within the South East London Sustainability and Transformation Plan (STP), describes a more formalised model of care and governance structure which is more akin to our proposed partnership and governance arrangements for Community Based Care. Locally, our wider definition of a Neighbourhood Care Network is the way in which links and connections are made across all those delivering Community Based Care, across statutory providers, voluntary and community sector and communities themselves.

4.1.5 In Lewisham we are focusing on connecting people and services across four neighbourhood areas. Many existing health and care services delivering care outside hospital have been arranged to cover four neighbourhood areas. By arranging services at a neighbourhood level, the people working within them are able to connect more easily with other services working in that area and deliver holistic care in a joined up way. Mirroring the way in which many statutory health and care services have been organised, the voluntary and community sector (VCS) have also formed four **Neighbourhood Community Development Partnerships**. These neighbourhood partnerships bring together the voluntary and community sector in that area to support community development and to work with local statutory agencies to build stronger, healthier communities.

- 4.1.6 In order to facilitate integrated working at neighbourhood level, four **Neighbourhood Community Teams (NCTs)**, that include community nursing and social care staff, have been established. Good progress has been made in relation to the co-location of NCT1 at the Waldron. At an operational level, managers have committed to identifying and resolving issues collaboratively in their monthly meetings. Joint training has been undertaken in every NCT. Going forward in 2017, a more coherent workforce development plan will be developed to deliver a shared culture.
- 4.2 To shift the focus of action and resources to preventing ill health and promoting independence
- 4.2.1 In addition to the actions described above, many of which aim to prevent illness and promote independence (e.g. SAIL and the Falls Team), the most significant shift in the focus of action and resources was in the area of obesity, when Lewisham became a national pilot site for taking a whole system approach to tackling the obesity epidemic. Significant achievements are listed below.
- 4.2.2 In October 2016 Lewisham Council joined forces with Jamie Oliver and Sustain, to become the first local authority in London and only the second in the UK to launch a **SUGAR SMART campaign**. SUGAR SMART is an exciting campaign to reduce the amount of sugar in our diets by raising awareness of the health impact of the high levels of sugar in foods and drinks and encouraging action to reduce sugar intake. Local organizations, businesses and settings that join the Lewisham **SUGAR SMART** campaign pledge to make simple changes to promote healthier, lower sugar alternatives and limit less healthy choices.
- 4.2.3 The first Lewisham organisations to take the SUGAR SMART pledge in October 2016 included: Lewisham and Greenwich NHS Trust, Chartwells (our main school meal provider), Millwall Football Club, FareShare London, Bonus Pastor Catholic College and St William of York Primary school. Pledges included Millwall FC introducing a sugary drinks tax on match days, and Bonus Pastor Catholic College making the entire school premises water-only. Since the launch a further 14 organizations have submitted pledges and joined the campaign. These organizations cover a wide range of sectors such as food businesses, a GP practice, nurseries and secondary schools. A further 9 fast food premises will become SUGAR SMART as part of the Healthier Catering Commitments scheme by the end of the financial year. As part of the Neighbourhood Community Development Partnership approach, it is now proposed to approach 200 restaurants and takeaways in Neighbourhood 3 inviting them to join the campaign.
- 4.2.4 Breastfeeding improves the health and wellbeing of both mothers and babies. Evidence shows that for both mother and baby, in the longer term, breastfeeding reduces the risk of obesity. One of the key actions to support increasing breastfeeding prevalence in the borough is working towards achieving **UNICEF UK Baby Friendly accreditation** through the implementation of the Baby Friendly practice standards. As well as working to protect, promote, and support breastfeeding, the UNICEF Baby Friendly revised practice standards introduced in 2012 also aim to strengthen mother-baby and family relationships for all babies, not only those who are breastfed.

- 4.2.5 The UNICEF UK Baby Friendly Initiative is an externally evaluated programme recognized to improve breastfeeding prevalence and the health and wellbeing outcomes of all infants. The process consists of implementing the standards in three stages over a number of years. **Lewisham Health Visiting service achieved their Stage 3 award in July 2016** with the support of Lewisham Children's Centres and Lewisham Council's Public Health Team. Lewisham Maternity services are preparing for their Stage 3 assessment in April 2017.
- 4.2.6 According to the National Obesity Observatory, Lewisham has the 13th highest density of hot food takeaways per head of population in England. The Council adopted a **restrictive planning policy in relation to hot food takeaway uses** as part of its Development Management Local Plan in November 2014. The policy seeks to prevent the establishment of new hot food takeaways within 400 metres of any primary or secondary school. In areas further away from schools, the policy seeks to limit the number of takeaways by applying a maximum percentage in town centres and parades. As the Local Plan progressed through the decision-making process, the policy gained leverage in planning decisions. In the latter stages of preparation and following adoption **the policy was used successfully to refuse five applications in 2015-16 alone**. The policy has been used in discussion with applicants resulting in a number of withdrawn applications.
- 4.2.7 Lewisham has established a partnership of community members, public and voluntary services to help secure a healthier and sustainable food future for the borough. The aim of the **Lewisham Food Partnership** is to transform the food environment as part of the whole system approach to obesity, reducing health inequalities and improving the health outcomes of our residents. Bringing together a wide variety of partners allows a more joined-up approach, improving collaboration and increase awareness of what is going across the borough.
- 4.2.8 The partnership developed action plans to help address a wide range of issues, including access to healthy foods, building community knowledge and skills, food waste, procurement and food poverty. Examples of the some of the initiatives to transform the food environment are included in this report. The borough has now signed up to the **Sustainable Food Cities Network** in order to share ideas and learn from others working towards similar goals. Lewisham was recognised as a **leader borough in the 2016 Good Food for London awards** for 'its excellent achievements' and being consistently in the top five boroughs for their involvement in improving London's food. The report measured progress over 10 actions to support healthy and sustainable food: in supporting breastfeeding, supporting food growing, being an accredited living wage employer, serving Silver Catering Mark meals in the majority of schools and nurseries, serving sustainable fish in primary schools, serving cage-free eggs, running the healthier catering commitment, and being a member of Sustainable Food Cities, being a Fairtrade borough, and assuring access to good food.
- 4.2.9 Lewisham council has been working with local primary schools to implement **The Daily Mile**. This initiative, which began in a primary school in Stirling, Scotland, aims to improve children's physical fitness, as well as their social and emotional wellbeing, by getting children to run in the playground for 12 minutes every day, which averages one mile. This simple, 'no cost' initiative has swept the UK in the last year, and in 2016, a number of primary schools began to introduce the Daily Mile. **As of January 2017, 3,000 Lewisham**

children are now running the Daily Mile every day across 12 primary schools, with all Lewisham schools expressing an interest and three more schools about to start running after the half term holiday.

4.3 Supporting our communities and families to become healthy and resilient

- 4.3.1 In addition to the programmes and initiatives described above that clearly support our communities and families to become healthy and resilient, two innovative initiatives have been particularly successful in the last year in applying a community development approach to health improvement:
- 4.3.2 In 2016 a new **borough wide community nutrition and physical activity service**, taking a community development approach, was commissioned to enhance the existing and very successful North Lewisham Health Improvement programme in Neighbourhood 1 and Bellingham Well London programme in Neighbourhood 4. The contract was awarded to the Greenwich Co-operative Development Agency (GCDA).
- 4.3.3 Between September and December 2016, 97 Lewisham residents attended 5 week cookery clubs, 47 residents attended food growing sessions in community gardens, and 21 volunteers from 12 different organizations were trained to deliver cookery sessions.
- 4.3.4 In 2015, Lewisham council and Age UK established a **Community Connections Partnership**. The Partnership: provides support to vulnerable adults to assist them in accessing services; prevents their needs from escalating; reduces the burden on statutory services and provides links to statutory services; maximizes the potential of community organizations to meet the needs of vulnerable adults in the community; identifies gaps in service provision and works with local voluntary sector organizations to develop services to meet these needs. Community Connections workers form part of the neighbourhood teams.
- 4.3.5 During 2016/17, the partnership has worked with over 800 vulnerable adults, and generated over 200 referrals from health services.