HEALTH AND WELLBEING BOARD

08 November 2017

Title:	Consultation on the Mayor's Health Inequalities Strategy (HIS)	
Report of the Director of Public Health		
Open Report		For Decision
Wards Affected: ALL		Key Decision:
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Sponsor:

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Summary:

This paper aims to

- Brief the Health and Wellbeing Board about the key elements of the Mayor's Health Inequalities Strategy (HIS).
- Inform the Board on the local public consultation process
- Give the Board the opportunity to reflect on the implications for Barking and Dagenham and inform the council's consultation response.

The Mayor of London's Health Inequalities Strategy has as its aim to reduce unfair inequalities across the city. It sets five strategic aims for reducing health inequalities in London between 2017 and 2027: healthy children; healthy minds; healthy places; healthy communities and healthy habits. These priorities form the basis of the Mayor's consultation that commenced on 23rd August.

Addressing health inequalities is a key ambition of our Joint Health and Wellbeing Strategy and Joint Strategic Needs Assessment. It is a statutory function of the Council, undertaken via the Health and Wellbeing Board. In addition, member organisations have legal duties to have regard to the need to reduce health inequalities under the Health and Social Care Act 2012 and all public-sector organisations have responsibilities to have due regard for advancing equality for protected groups under the Public Sector Equality Duty.

The Mayor of London is seeking feedback from Councils, the NHS, the education sector, community groups, businesses and other consultees until 30th November 2017.

This paper will be accompanied by an interactive presentation to give consultees the opportunity to discuss the Mayor's strategy in the context of Barking and Dagenham. Members are invited to comment on the strategy, share plans for reducing health inequalities locally and indicate what more the Mayor of London can do to support work to reduce health inequalities at a local level or across London. This will inform the final response(s) from the council, and potentially other member organisations.

Recommendation(s)

The Health and Wellbeing Board is asked to

- Endorse the five aims of the draft strategy
- Consider the implications of the Mayor's Health Inequalities Strategy for Barking and Dagenham and respond to the consultation questions
- Grant delegated authority to the Deputy Chief Executive & Strategic Director for Service Development and Integration to sign off a detailed consultation response on behalf of the Council in consultation with the Chair, Director of Law and Governance and the Director of Public Health.
- Encourage other member organisations to submit consultation responses
- Agree that the Mayor's final strategy will be reviewed to inform the refresh of the Barking and Dagenham Joint Health and Wellbeing Strategy in 2018

1. Introduction

- 1.1 The Mayor's Health Inequalities Strategy (HIS) consultation launched on 23 August 2017 for a period of just over 3 months to November 30th. The overarching aim of the strategy is to end the unfair inequalities in health that exist across the city whilst also improving the overall health of all Londoners.
- 1.2 Barking and Dagenham as a borough has some of the worst health and social indicators of all London boroughs¹. A consultation response to this strategy offers us the opportunity to review our own approach to health inequalities, consider ways in which we may work with other London Boroughs and give feedback to the Mayor.
- 1.3 This paper outlines the key elements of the Mayors Health Inequalities strategy, considers these in the context of Barking and Dagenham: policy context, health and wellbeing issues and examples of our current programmes to address these issues. It also describes the Mayor's consultation process and how we have raised awareness of this locally. The paper will be accompanied by an interactive presentation that will allow Health and Wellbeing board members the opportunity to shape our local response to the strategy.

2. The Mayors Health Inequalities strategy

2.1 The length of time that Londoners can expect to live in good health varies widely across London. This is an unjust and preventable health inequality.

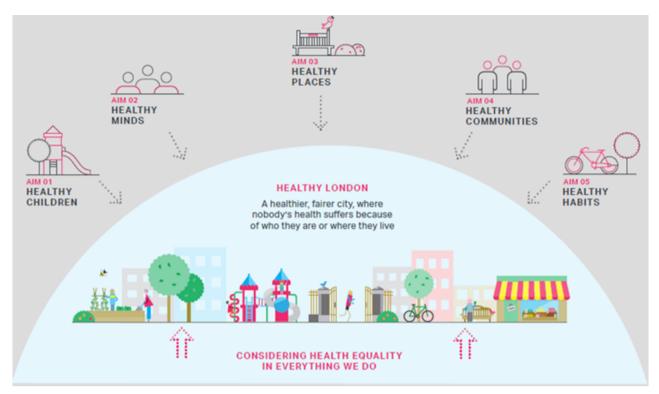
¹ Barking and Dagenham Joint Strategic Needs Assessment, 2016. http://www.lbbd.gov.uk accessed 08/09/2017

"Health inequalities are systematic, avoidable and unfair differences in mental or physical health between groups of people. These differences affect how long people live in good health. They are mostly a result of differences in people's homes, education and childhood experiences, their environments, their jobs and employment prospects, their access to good public services and their habits."

- The overarching aim of the Mayor's strategy is to reduce the differences in how long people live in good health across the city; whilst also improving this for the city as a whole. To achieve this aim, the consultation document has five key themes (Figure 1):
- **Healthy children:** every London child has a healthy start in life

 The Mayor of London's key ambition within this aim is to support development of a new health programme for London's early years settings.
- Healthy minds: all Londoners can share in a city with the best mental health in the world
 - The Mayor of London's key ambition within this aim is to inspire more Londoners to have mental health first aid training.
- **Healthy places:** all Londoners benefit from a society, environment and economy that promotes good mental and physical health
 - The Mayor of London's key ambition within this aim is to work towards London having the best air quality of any major global city
- **Healthy communities:** all of London's diverse communities are healthy and thriving.
 - The Mayor of London's key ambition within this aim is to support the most disadvantaged Londoners to benefit from social prescribing to improve their health and wellbeing.
- **Healthy habits:** the healthy choice is the easy choice for all Londoners
 - The Mayor of London's key ambition within this aim is to work with partners towards a reduction in childhood obesity rates and a reduction in the gap between the boroughs with the highest and lowest rates of child obesity.

Figure 1: Overview of the Mayor's Health Inequalities Strategy (HIS)



- 2.3 The causes of and solutions to health inequalities are multiple and complex. They are mostly a result of differences the conditions in which people live, work and grow. The Mayor has major responsibilities and powers in these areas for example in relation to housing and transport. In the light of this and the areas of influence of the Mayor, the HIS has been developed closely with other GLA strategies (environment, economic development, housing and transport for example) and key objectives relating to these are reflected in the theme on Healthy Places.
- 2.4 It is recognised that meeting the challenges set out in the strategy will require more than any one organisation can achieve in isolation. This Mayoral strategy therefore goes beyond the statutory duty of the Mayor. It seeks to provide an opportunity for London to combine offers to strengthen what we can do together to reduce health inequalities.

3. Implications for Barking and Dagenham

- 3.1 Reducing inequalities and improving the health of our local people are key priorities for the London Borough of Barking and Dagenham.
- 3.2 Barking and Dagenham rates poorly on many of the key measures of inequalities relating to the HIS. These are some examples:
 - Healthy Children: One in four (25%) children aged 4-5, are overweight or obese, the third highest in London (18th in England) and more than two in

- five (43%) children aged 10-11, are overweight or obese, the highest proportion in London and England.²
- **Healthy Minds:** The proportion of people with mental illness living in settled accommodation was 79% in 2015/16, higher than the England average (60%) and similar to London (78%).
- **Healthy Places:** As one of the most deprived locally our employment levels are significantly London and England³. 34% of the borough's surface has green space coverage. But within Barking and Dagenham, more than 50 per cent of households in 4 out of 17 wards have deficient access to nature.⁴
- Healthy Communities: B&D has the 12th highest rate of notifiable offences in London (81.6 per 1,000 residents) and is ranked highly in London for issues such as: criminal damage; domestic abuse, theft of motor vehicles and serious youth violence victims.⁵
- Healthy habits: B&D has one of the highest smoking prevalence rates in London. Around 1 in 12 pregnant women smoke at the time of their delivery – one of the highest rates in London.⁶
- 3.3 The response to the Mayor's strategy gives us the opportunity to promote our good activities and to consider areas to strengthen or work with others across London to address local concerns. Examples of our good work include:
 - Healthy children: actions to address childhood obesity including a local school survey, the Healthy Exercise and Nutrition for the Really Young (HENRY) and the newly modified weight management programmes for children.
 - Healthy places: the council (as one of the boroughs largest employers) has achieved accreditation at Achievement level for the London Healthy Workplace Charter. The local plan covers housing and planning and as such we conducted a Health Impact Assessment We have undertaken a health impact assessment of our emerging local plan. Barking Riverside is one of the 10 Healthy New Towns in the country, and only one in London.
 - Healthy minds: Mental health first aid training; THRIIVE London a citywide movement supported by the Mayor of London which supports good mental health for Londoners.
 - Healthy communities: work has commenced on social prescribing; Everyone
 Every Day a partnership with Participatory Cities. To support those suffering
 as a result of domestic violence the domestic abuse services in the borough
 work together to help deliver a coordinated community response model which
 increases survivor safety and challenges the social tolerance to domestic
 abuse.

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² http://www.content.digital.nhs.uk/catalogue/PUB22269

³ https://www.nomisweb.co.uk/reports/lmp/la/1946157260/report.aspx#tabempunemp

⁴ https://www.lbbd.gov.uk/wp-content/uploads/2017/01/5.9-Access-and-utilisation-of-green-space-2016.pdf

⁵ London Landscape, 2016

⁶ PHOF, 2015/16

- Healthy habits: implemented the Great Weight Debate locally; Mayesbrook park health promoting activities; tackling shisha and illicit tobacco
- 3.4 The Mayor's Health Inequalities Strategy aligns well with our local plans. The recently published borough manifesto has as key themes Employment, Skills and Enterprise, Education, Regeneration, Housing Health and Social Care, Community and Cohesion, Environment, Crime and Safety, Fairness and Arts, Culture and Leisure. Our Joint Health and Wellbeing Strategy (JHWS) sets, starting well-establishing healthy habits in pregnancy, Living Well-making it easier for adults to maintain healthy habits and Ageing Well- Living healthier for longer and making the most of old age, as key goals. This manifesto will provide a focus for our work over the next few years. The refresh in 2018-19 of the JHWS provides an opportunity to review our actions in partnership in the light of the Mayor's strategy. The Mayors strategy also aligns well with our Accountable Care System which looks at how we better integrate our health and social care services. The recently formed Community Solutions, which sits within the council acts as an early intervention service laying the foundation.

4. The Mayor's consultation process on the draft HIS

- 4.1 As part of the formal consultation on the strategy, statutory consultees including the Council, Clinical Commissioning Group and Trusts, have been invited to comment They are also invited to support the five aims of the strategy in order to help progress a shared agenda for reducing health inequalities in London. Consultees have also been asked to share their plans for reducing health inequalities, to work together to support action to reduce health inequalities within and between areas and to indicate what more they think the Mayor of London can do to support work to reduce health inequalities.
- 4.2 The strategy consultation asks the following questions of Londoners and partners (on each chapter):
 - 1) Whether there is more that the Mayor should do.
 - 2) How we (as Londoners and Partners) can help to reduce health inequalities.
 - 3) What you think our measures of success should be
- 4.3 The deadline for the formal consultation period is 30th November. During this time (and beyond) the GLA and partners invite responses from partners and the public to the mayoral strategy in a number of ways:
 - Public engagement: e.g. through Talk London and a London.gov poll
 - Feedback via an online consultation
 - Engagement with statutory consultees
 - Stakeholder engagement through attending existing meetings or bespoke workshops/events
 - Working with partners to develop a set of indicators for monitoring progress.
- 4.4 After the consultation closes at the end of November 2017 the GLA will undertake analysis of the consultation responses. Any offers for action in support of the strategy

- will be collated and local bodies will be invited to commit to implementation. The Mayor will publish a final health inequalities strategy and delivery plan and a core set of health inequality indicators. A new governance system will also be established.
- 4.5 The strategy aligns with the other mayoral strategies' ambitions where there are topics that are cross cutting such as air quality. The GLA will also aim to ensure indicators/ metrics are aligned across the strategies where appropriate.

5. Local public consultation on the HIS in Barking and Dagenham

- Over the last 4 weeks, the council has undertaken actions to raise awareness with residents of the Mayor's strategy and the aims, themes and related issues in Barking and Dagenham. Residents are being encouraged to respond directly to the consultation in a number of ways:
 - Public engagement: e.g. through Talk London and a London.gov poll
 - Feedback via an online consultation; and
 - By email to <u>healthinequalities@london.gov.uk</u> (copying the council into their response)
- 5.2 Residents and local organisations are being engaged through the One borough newsletter, which has an approximate reach of 70,000 households. We have also engaged with local community organisations and residents through the Council for voluntary sector (CVS) newsletter, social media and at public events eg. to celebrate world mental health day.

6. Barking and Dagenham's formal response to the consultation

- 6.1 At the Health and Wellbeing Board today we will have an interactive discussion and presentation. The Health and Wellbeing Board members are invited to:
 - consider their respective roles in reducing health inequalities in Barking and Dagenham
 - identify alignment between the existing joint strategic plans in Barking and Dagenham with the London-wide priorities in the draft strategy
 - discuss what more can be done locally, what needs to be in place across London and what the Mayor can do to better enable local action in Barking and Dagenham to address health inequalities
- 6.2 After discussion at this board we propose that a formal response be drafted informed by the discussion and on behalf of the council. We ask that delegated authority should be given to the Deputy Chief Executive & Strategic Director for Service Development and Integration to sign off a detailed consultation response on behalf of the Council in consultation with the Chair, Director of Law and Governance and the Director of Public Health.

7. Mandatory implications

7.1 Joint Strategic Needs Assessment

The Joint Strategic Needs Assessment, identified health inequalities across the borough. It has described the groups of people that are affected most and includes the key themes highlighted within the HIS. These themes can also be a focus of the next JSNA.

7.2 Joint Health and Wellbeing Strategy

Core to the Joint Health and Wellbeing Strategy is addressing inequalities and prevention across the lifecourse and improving healthy life expectancy. These are strongly reflected in the HIS. The HWB board is asked to agree that the future JHWS is informed by the HIS.

7.3 Implications completed by: Dr. Paul Feild Senior Governance Solicitor

The Health and Social Care Act (2012) conferred the responsibility for health improvement to local authorities. The consultation exercise by the Mayor gives the HWB the opportunity to make representations regarding health inequalities in the borough from the perspective of respective roles in reducing health inequalities in Barking and Dagenham at a stage where the Boards view can be taken into account. In addition there is a public consultation. Furthermore the Report seeks authority for the Director of Public health to draw the strings of the responses and observations together and complete the Boards response.

7.4 Financial

Implications completed by Katherine Heffernan Service Finance Group Manager:

This report is largely for information and sets out to brief the Health and Wellbeing Board about the key elements of the Mayor's Health Inequalities Strategy and the local public consultation process. As such there are no financial implications arising directly from the report.

AIM 1, healthy children: every London child has a healthy start in life Draft objectives:

- London's babies have the best start to their life
- Early years settings and schools support children and young people's health and wellbeing.

Key Mayoral ambition:

• Launching a new health programme to support London's early years settings, ensuring London's children have healthy places in which to learn, play and develop.

AIM 2, healthy minds: all Londoners share in a city with the best mental health in the world Draft objectives:

- Mental health becomes everybody's business across London
- The stigma associated with mental ill-health is reduced, and awareness and understanding about mental health increases
- London's workplaces are mentally healthy
- Londoners can talk about suicide and find out where they can get help.

Key Mayoral ambition:

• To inspire more Londoners to have mental health first aid training, and more London employers to support it.

AIM 3, healthy place: all Londoners benefit from a society, environment and economy that promotes good mental and physical health

Draft objectives:

- Improve London's air quality
- Promote good planning and healthier streets
- Improve access to high quality green space and make London greener
- Address poverty and income inequality
- More Londoners are supported into healthy, well paid and secure jobs
- Housing quality and affordability improves
- Homelessness and rough sleeping is addressed.

Key Mayoral ambition:

• To work towards London having the best air quality of any major global city.

AIM 4, healthy communities: London's diverse communities are healthy and thriving Draft objectives:

- It is easy for all Londoners to participate in community life
- All Londoners have skills, knowledge and confidence to improve health
- Health is improved through a community and place-based approach
- Social prescribing becomes a routine part of community support across London
- Individuals and communities supported to prevent HIV and reduce the stigma surrounding it
- TB cases among London's most vulnerable people are reduced
- London's communities feel safe and are united against hatred.

Key Mayoral ambition:

 To support the most disadvantaged Londoners to benefit from social prescribing to improve their health and wellbeing.

AIM 5, healthy habits: the healthy choice is the easy choice for all Londoners Draft objectives:

- Childhood obesity falls and the gap between the boroughs with the highest and lowest rates of child obesity reduces
- Smoking, alcohol and substance misuse are reduced among all Londoners, especially young people.

Key Mayoral ambition:

 To work with partners towards a reduction in childhood obesity rates and a reduction in the gap between the boroughs