
The Brent Health and Wellbeing Strategy

2012 – 2015

The role of the Health and Wellbeing Board

Brent's Health and Wellbeing Board brings together senior representatives from Brent Council, Brent Clinical Commissioning Group (CCG) and Public Health to work in partnership to improve the health of the population of Brent. The key functions of the Board include:

- To coordinate the development of the Joint Strategic Needs Assessment (JSNA) which articulates the health and wellbeing needs of the residents of Brent.
- To determine the priorities for, and prepare a Joint Health and Wellbeing Strategy for Brent.
- To promote joint commissioning and integrated provision between the NHS, public health and social care.
- To consider Brent Clinical Commissioning Plans and Social Care Commissioning Plans and ensure that they are in line with the new Health and Wellbeing Strategy.

What we hope to achieve

Through the development of the Health and Wellbeing Strategy, the Board aims to improve health and wellbeing across Brent and to reduce the health inequalities that exist within our borough.

This strategy is not a comprehensive collection of all future commissioning intentions across health, public health and social care; that can be found in other key documents such as the commissioning intentions of the CCG. It is also worth noting that just because something isn't explicitly mentioned in the strategy it is not important or that work on it won't continue. Rather this strategy focuses on four key priorities for the Board, where partnership working can bring real added value to health and wellbeing across Brent over the next three years.

How we developed our strategy

The bedrock of this new strategy is our refreshed local JSNA which articulates the challenges which need to be addressed to improve the health of our population.

We have developed our thinking bearing in mind the wider changes that are occurring in the NHS and social care. This strategy reflects existing commissioning plans and strategies such as the CCG Commissioning intentions and the Children's Partnership Plan. It also takes particular note of the proposed Out of Hospital Care Strategy which outlines the ambition to provide better integrated services closer to patients' homes within community and primary care settings.

How we developed our strategy (continued)

The other crucial element to develop this strategy has been stakeholder engagement throughout both the development of our JSNA and subsequently through consultation with both Brent LINK and Brent CVS on the key priorities for this strategy.

The Health and Wellbeing Board has considered all of these three elements in drawing up its list of key priorities. This document lays out the vision and principles of the Health and Wellbeing Board including the four key priorities for our strategy:

- Giving every child the best start in life**
- Helping vulnerable families**
- Empowering communities to take better care of themselves**
- Improving mental wellbeing throughout life**

For each of these priority areas, key strategic objectives have been defined with impact indicators to enable us to monitor overall progress over the next three years.

Next steps

This draft strategy was agreed by the Health and Wellbeing Board in July 2012 and will be put out for a formal two-month consultation in August 2012. It will be formally approved in October 2012

In parallel with the consultation we will also be conducting an Equality Impact Assessment (EIA), reports for both the consultation and the EIA will be published in October 2012.

People and place

Brent is a place of contrasts. Home of the iconic Wembley Stadium, Wembley Arena and the spectacular Swaminarayan Hindu Temple, our borough is the destination for thousands of British and international visitors every year.

Brent is served by some of the best road and rail transport links in London and the area is accustomed to the successful staging of major events such as the Champions League Final in 2011 and Olympic Games events in 2012.

Our population is young, dynamic and growing (311,200 according to the 2011 census). Our long history of ethnic and cultural diversity has created a place that is truly unique and valued by those who live and work here.

Despite these strengths Brent is ranked amongst the top 15% most-deprived areas of the country. This deprivation is characterised by high levels of long-term unemployment, low average incomes and supported through benefits and social housing. Children and young people are particularly affected with a third of children in Brent living in a low income household and a fifth in a single-adult household. The proportion of our young people living in acute deprivation is rising.

Key challenges

Living in poverty generally contributes to poorer health, wellbeing and social isolation. The statistics show that people on low incomes are more likely to have a life limiting health condition, take less exercise and have a shorter life.

While overall life expectancy is in line with the rest of London there are significant health inequalities within the borough. For example the gap in life expectancy for men between the most affluent and the most deprived parts of the borough is 8.8 years.

Our diversity is a great strength and our various communities are valuable assets to bring about real change for families and individuals. But at the same time, many new communities are still not accessing the information and services available to help them improve their health and wellbeing.

Community engagement is a cross-cutting theme which runs throughout this strategy. Only by working together with our communities and the voluntary sector will we be able to improve health and wellbeing for all of our population.

There are enormous organisational changes occurring and proposed within the wider NHS including: the reconfiguration of commissioning organisations and hospital providers;

Key challenges (continued)

and the replacement of many non-acute services in hospitals with better integrated services based closer to patients in the community and within primary care.

These organisational and service changes could bring about real improvements in the quality of care received by many patients. But at the same time there is a risk that organisational change will distract partners from much of the prevention work required to promote health and wellbeing more widely in our communities.

Our JSNA highlights a number of key health and wellbeing challenges which this strategy will aim to address including:

- Low rates of readiness for school amongst under-fives
- Poor oral health amongst children
- Rising levels of obesity – 12% of under 5s and 22% of 12 year olds are obese. Almost 25% of adults in Brent are estimated to be obese
- Low levels of participation in physical exercise – over 50% of adults do no physical exercise
- Increasing rates of alcohol-related hospital admissions

- Mental health remains the single largest cause of morbidity within Brent affecting one quarter of all adults at some time in their lives.
- Cardiovascular disease, chronic respiratory disease and cancers are the biggest killers in Brent and account for much of the inequalities in life expectancy within the borough.
- High levels of many long-term chronic conditions which are often related to our poor lifestyles, relative deprivation and in some cases our ethnic make-up. Diabetes is a good example of such a condition and we currently have 18,000 registered diabetic patients in Brent with numbers likely to grow in the future. We need to improve outcomes for these patients by helping more patients take a more active approach to their own care as well as improving the quality of our services in the community.
- The need to increase access to, and to expand, key prevention and screening programmes
- Rising levels of dementia amongst older adults
- Rates of tuberculosis (TB) in Brent are amongst the highest in the country.

The Health and Wellbeing Board wants to create an environment in Brent that enables individuals and families to lead healthy lives, and where health and wellbeing is at the heart of service delivery. This will require a commitment from both individuals and a range of local organisations to take more responsibility for our health and wellbeing. By focussing on our four key priority areas, we believe that we can add value to existing commissioning plans and make real inroads into reducing health inequalities across the borough.

Giving every child the best start in life

Giving each child in Brent the best start in life and preparing them for school is one of the strategy's priority areas. The first years of life are crucial for the physical, intellectual and emotional development of individuals and have lifelong effects on many aspects of health and wellbeing. We intend to divert much of our energy to improving the quality of life for our youngest residents, focussing on key areas such as parenting programmes, improving access to services for hard-to-reach groups; and encouraging healthy behaviours through a range of settings including children's centres and nurseries.

Helping vulnerable families

Helping vulnerable families to thrive is crucial to tackling the health inequalities that currently exist

Overview of our strategy

Aims:

- Improve health and wellbeing
- Reduce health inequalities

Vision/principles:

- Improving life chances
- Thriving families
- Resilient communities
- Influencing wider partners to sign up to the health and wellbeing agenda
- Delivering better care, closer to home: the best possible care at the right time in the right place

Priorities:

- Giving every child the best start in life
- Helping vulnerable families
- Empowering communities to take better care of themselves
- Improving mental wellbeing throughout life

within Brent. We will do more to help specific groups including families with complex social needs.

More widely, we recognise our responsibility to address the socio-economic factors which have the greatest impact on many of our families: low income, unemployment and housing. There are no quick solutions to these problems, but they will be a major focus of the Health and Wellbeing Board's work over the coming years, helping to ensure that partner organisations in Brent are working to help address the key social determinants of health.

Empowering communities to take better care of themselves

Given the rise in local demand for health and social care, the NHS in Brent will only thrive if local people develop greater capacity to manage their own health and health care. The NHS in Brent will play a full role in working with local people to improve self management and will achieve this by commissioning much better self management of care for people with long term conditions. We will also commission health improvement services that will work with communities to help them take better

care of themselves. We will work with our diverse resourceful communities to improve their capacity to take better care of themselves. This is vital across all aspects of health care, but is especially so for improving mental health.

Improving mental wellbeing

Mental health is a key priority for this strategy and we recognise the need to promote mental wellbeing in our communities and to address the stigma and lack of awareness around mental illness. This will involve us actively working with our communities, voluntary and faith groups to actively promote mental wellbeing and increase levels of awareness.

We are keen to ensure that Brent commissions a comprehensive, recovery focused, mental health service which will provide care in an integrated and coordinated manner. This will build on our commitment to expand the provision of early interventions for people with mental health problems and to improve the quality of care for individuals with serious mental illness; which includes the need to provide people recovering from illness with meaningful employment and secure housing.



Brent



Giving every child the best possible start

What are our key issues?

Brent has seen an improvement across a number of child health outcomes in recent years including immunisation and breastfeeding rates. However oral health and childhood obesity remain two areas of real concern. More than 11% of local children are already obese in their reception year, this is a significantly higher rate than the rest of London. Similarly we have the highest rates of dental decay in young children (44% of our under-5s).

The first few years of life have a crucial impact on the future development of children. Positive and supportive parenting is key to this and there is good evidence of the beneficial impact of parenting programmes. In Brent we have a range of parenting programmes, however the drop-out rate from local programmes is high and we need to examine how we can better tailor our services to meet the needs of our communities.

We are committed to supporting the early development of healthy behaviours and fostering a supportive community and accessible services for parents and families. There are a whole range of teams who contribute to this including midwives, health visitors, children's centres, primary care teams and specialist services. However we need to do more to ensure that

all communities have access to the same information and services. And we need to increase engagement with black and minority ethnic groups who have not traditionally accessed our local services.

Readiness for school is a key marker of future life chances. In Brent only 57% of 5-year olds reach a good level of development at age 5 (compared to 59% across London). In addition to the support that is given to families by Children's and health services, we are keen to expand on work with schools and nurseries to improve the wellbeing of children in their early years.



Brent



Giving every child the best possible start

Key objectives:

Our six key objectives to deliver progress on this priority will include:

1. Strengthening and expanding our current **parenting programmes** with a focus on learning from evaluation.
2. Ensuring the sustainability and delivery of the **Child Oral Health Strategy**
3. To expand **partnership working** with schools, nurseries, playgroups and other Early Years settings to improve the wellbeing of children.
4. Improve the offer of our current **interventions to prevent and manage childhood obesity**
5. Engage with **hard-to-reach individuals and communities** through the use of community champions

Impact indicators:

We will monitor progress around three key impact indicators:

Oral health in children under-5s

Obesity at reception year

Readiness for school

Additional output/outcome measures are described against each objective in the action plan which follows.

What are our key issues:

The importance of working with vulnerable families to tackle health and social problems cannot be overstated. A whole family approach is being developed to help break the cycle of poverty, unemployment, crime, substance abuse and poor educational attainment that affect some families in Brent. We are developing an initiative to work intensively with 300 such families initially and this number will eventually rise to 800.

There are a number of drivers behind the Health and Wellbeing Board's decision to prioritise helping vulnerable families, not least the Ofsted Inspection of Safeguarding and Looked After Children in 2011. This inspection identified key areas for improvement that are being taken forward. The importance of this work is understood and recognised by the Board and is a central component to this part of the strategy.

The reported use of drugs, alcohol and smoking amongst young people remains a high priority and given our dynamic demographic make-up we need to remain focused and build on existing work to further reduce risk-taking behaviour amongst adolescents.

Brent's unemployment rate is higher than the London and national average. Similarly, average incomes in Brent are below London and national averages, which makes much of the borough unaffordable to live in for people on low incomes. There are currently 18,000 people on the Housing Register in Brent (11,000 who have an identified housing need), but only 871 lettings to social housing were made in 2011/12. New changes to the benefit system may result in even more overcrowding within the private and social housing sectors and the accompanying detrimental impacts on physical and mental health.

Reducing the impacts of poor quality housing and low income on health and wellbeing is one of our key objectives. And the Health and Wellbeing Board is determined that it does all that it can to enable all families in Brent to thrive. Our current regeneration strategy focuses on getting people back into work and the council is drafting a new tenancy and housing strategy which will also examine how we can further reduce the impacts of poor housing.

Key objectives:

Our six key objectives to deliver progress on this priority will include:

1. Improve the **identification and assessment of all vulnerable children** underpinned by **robust safeguarding procedures**
2. Better **multidisciplinary working for children with additional or complex needs**
3. Improve outcomes for **Looked after children**
4. Helping **families with complex needs**
5. Improve the health of young people through **addressing risk-taking behaviour.**
6. Reduce the impact of **poor quality housing** on health and wellbeing
7. Reduce the impact of **unemployment** on health and wellbeing

Impact indicators:

We will monitor progress around the following key impact indicators:

Educational and health outcomes of Looked after Children*

Childhood poverty

Overcrowding

Long-term unemployment

Additional output/outcome measures are described against each objective in the following action plan.

* To be developed further

What are our key issues?

Far too many of us in Brent are not living well and are storing up health problems for the future. We have a relatively young population and yet we have the third lowest levels of physical activity in England. Sedentary lifestyles, poor diets and stress are leading to a large proportion of our population developing long-term chronic diseases such as diabetes, heart disease, high blood pressure and chronic bronchitis.

Worryingly, local people who do develop these long-term conditions often have poor outcomes in terms of complications and deaths. There are a multitude of reasons for this, which include the need to improve the quality of some community and primary care services.

However at the same time we need to ensure that communities are able to promote more independence and responsibility for their health and healthcare needs. This includes encouraging individuals to seek appropriate help earlier, as good treatment started early can prevent many future complications.

In addition, patients need to become more engaged with and more knowledgeable about their care, so that they feel happy to engage with and agree with the long-term treatment plans which are needed to control

their disease(s) over the years. Too often we find that many patients simply do not understand their treatment and unilaterally stop taking their medicines, which often has serious adverse consequences.

If we want primary and community services to be more pro-active and prevent more future disease, than we need to ensure that we use our resources more wisely. In these difficult economic times we need to maximise the impact of our doctors and nurses by reducing the number of inappropriate visits which could have been dealt with at home or by the pharmacist; for example common coughs and colds.

Similarly, changes in adult social care, mean that more families need to become aware of the new personalisation agenda and how this can maximise opportunities to access better social care for themselves or their loved ones.

We need to reach out to all people in Brent and promote healthier lifestyles, better preventative services and a more responsible use of our healthcare resources. And once people do develop a chronic condition, we need to work with communities to help ensure that patients are engaged with, and better understand their health and social care package.

Key objectives:

Our six key objectives to deliver progress on this priority will include:

- 1.Promoting **independence and responsibility for our health and healthcare**
- 2.Encouraging everyone to be **physically active**
- 3.Promoting **healthy eating**
- 4.Strengthening our **tobacco control** partnership
- 5.Strengthening **partnership work around alcohol**
- 6.Increasing **early diagnosis and testing for HIV and TB**

Impact indicators:

We will monitor progress around the following key impact indicators:

Cardiovascular admissions

Cardiovascular mortality

Proportion of adults who are physically inactive

Smoking prevalence

Additional output/outcome measures are described against each objective in the following action plan.

Mental ill health is the single most common cause of morbidity in Brent. It will affect around one in four of all adults and one in ten children.

Promoting mental wellbeing and intervening early to help children and adults before they develop serious mental health conditions is the most effective approach to tackle these conditions. This approach needs to be taken throughout the life course whether it is helping; new mothers with post-natal depression, children who are finding it hard to adjust to school, or adults who are struggling with mild anxiety or depression.

We have made some progress to-date but need to continue to expand our service offer. For example we have some very good programmes which work with children with low-level conduct disorders in schools. Family group-therapy is an excellent intervention which can benefit children, families and schools and overall this is one of the most cost-effective mental health interventions. However at the moment this service is only provided to a limited number of Brent schools.

In 2010/11 there were over 16,000 Brent adults who were on a GP practice register for depression. We have recently made large increases in the provision of psychological therapies which can help many

individuals with anxiety disorders or depression. However we still need to do more to match the growing needs of our population.

During the JSNA consultation many individuals and organisations raised concerns over the quality of services for people with a serious mental illness. Our rates of in-patient admission for individuals with a serious mental illness are high. And we are aware that we need to improve the general health and wellbeing of these patients, rather than simply focusing on medical treatments alone. This includes the need to help individuals find meaningful employment and secure housing following recovery.

Finally as our population ages, older people's mental health will become an increasing priority with the need for better early intervention to reduce the impact of dementia on patients and families.

Key objectives:

Our six key objectives to deliver progress on this priority will include:

1. **Mental health promotion** before people become unwell
2. Early identification of mothers with **post-natal depression**
3. Helping **children with low-level mental health problems** in school
4. Increase the provision of **talking therapies**
5. Improving **wellbeing for people with a serious mental illness**
6. Early identification and intervention for **dementia**

Impact indicators:

We will monitor progress around the following four key impact indicators:

Dementia prevalence

Depression prevalence

Emergency hospital admissions for mental illness

Additional output/outcome measures are described against each objective in the following action plan.