

Merton Health and Wellbeing Strategy 2019-24

A Healthy Place for Healthy Lives

FINAL DRAFT



FOREWORD

Insert – from Chair and Vice Chair (to follow HWB agreement)

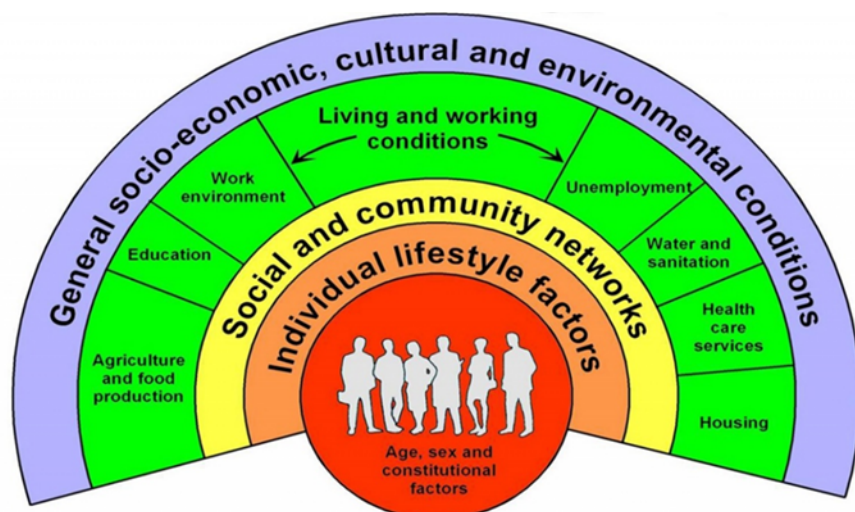
WELCOME

What makes us healthy?

The physical and social conditions that make us healthy are all around us; for example the air we breathe, our schools, workplaces, homes, our relationships with friends and family, the food available, how easy it is to move around in the borough, how safe we feel in our streets.

These are known as the wider determinants of health, shown in the diagram below.

Diagram 1 – Wider determinants of health



Source: Dahlgren and Whitehead, 1991

Differential access and exposure are the main drivers for health inequality.

The main unhealthy lifestyles that are responsible for over a third of all ill health are smoking, alcohol misuse, poor diet and sedentary behaviour, underpinned by lack of emotional and mental wellbeing. Rather than due to individual choice, they are shaped by the physical and social conditions in which we are born, grow, live, work and age.

This is why our Health and Wellbeing Strategy focuses on making Merton a healthy place for healthy lives.

What is the Merton Health and Wellbeing Board and how does it operate?

The Health and Wellbeing Board is a statutory partnership to provide overall vision, oversight and direction for health and wellbeing in Merton, including service provision and the wider determinants of health. It brings together local Councillors, GPs and community representatives supported by officers, as system leaders to shape a healthy place and health and care services.

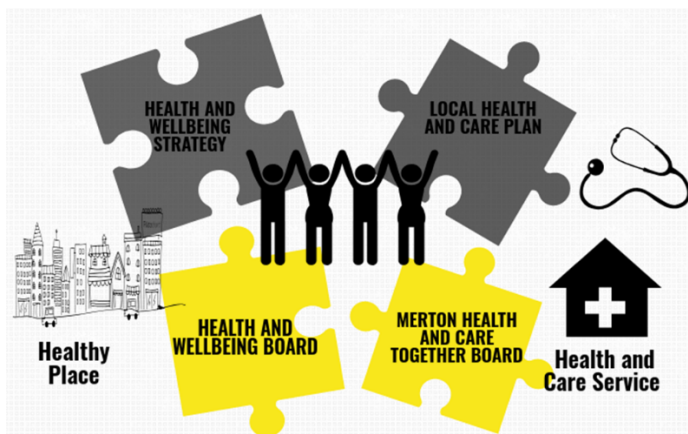
The Board operates as a partnership where members are accountable to their respective organisations.

Merton Health and Care Together Board is a separate non-statutory partnership between Council and NHS commissioners as well as the main local health and care providers, including acute and mental health hospitals, community trust and GP federation that reports to the Health and Wellbeing Board. It focuses on health and care service provision and integration.

The Health and Wellbeing Board and Merton Health and Care Together board have agreed to develop complementary strategies to best cover the breadth of health and wellbeing and avoid duplication.

The Health and Wellbeing Strategy focuses on making Merton a healthy place, meaning creating the social and physical conditions in which people can thrive; the Local Health and Care Plan focuses on provision of integrated high quality health and care services, as depicted in the diagram below.

Diagram 2 - Relationship between Health and Wellbeing Strategy and Local Health and Care Plan



Both the Health and Wellbeing Strategy and Local Health and Care Plan commit the Health and Wellbeing Board to championing its guiding principles and key aspirations. Health and Wellbeing Board members have a collective and individual responsibility to ensure these are reflected in the business of their own and partner organisations, are heard in other groups and committees and become embedded in strategies and commissioning across the health and care system.

About the Health and Wellbeing Strategy

The purpose of this Strategy is not to give a comprehensive overview of all major health issues. This is provided by the Joint Strategic Needs Assessment, which in Merton is called the Merton Story. The Health and Wellbeing Strategy is a tool to support the Health and Wellbeing Board as system leader where it can add most value. In particular:

- To champion our guiding principles and ways of working in everything we do;
- To focus on the key health outcomes we want to achieve for people in Merton to Start Well, Live Well and Age Well in a Healthy Place, considering the key attributes of a Healthy Place and the main healthy settings;
- To select a rolling programme of priorities for action, a few at a time, which will be underpinned by specific implementation plans;
- To be accountable jointly as Board and as individual organisations to partners and the community we serve.

Our Methodology

The Health and Wellbeing Strategy has been developed on the basis of a thorough evidence base and comprehensive engagement programme.

- Desk research including the Joint Strategic Needs Assessment/Merton Story, Resident's Survey, data and latest publications
- A series of engagement workshops, involving over 100 people, led by Health and Wellbeing Board members, finishing with a lively session on Healthy Place.
- In-depth surveys circulated to workshop attendees, their networks and contacts.
- Stakeholder engagement with partners and learning from the Local Health and Care Plan deliberative event.

Navigating the Strategy

The Health and Wellbeing Strategy is divided into four main sections:

1. Our starting position
2. What we want to achieve
3. Our way of delivery
4. Our framework for accountability

The Strategy is a concise document with a separate [Supplementary Information Pack](#) for further details.

1. OUR STARTING POSITION

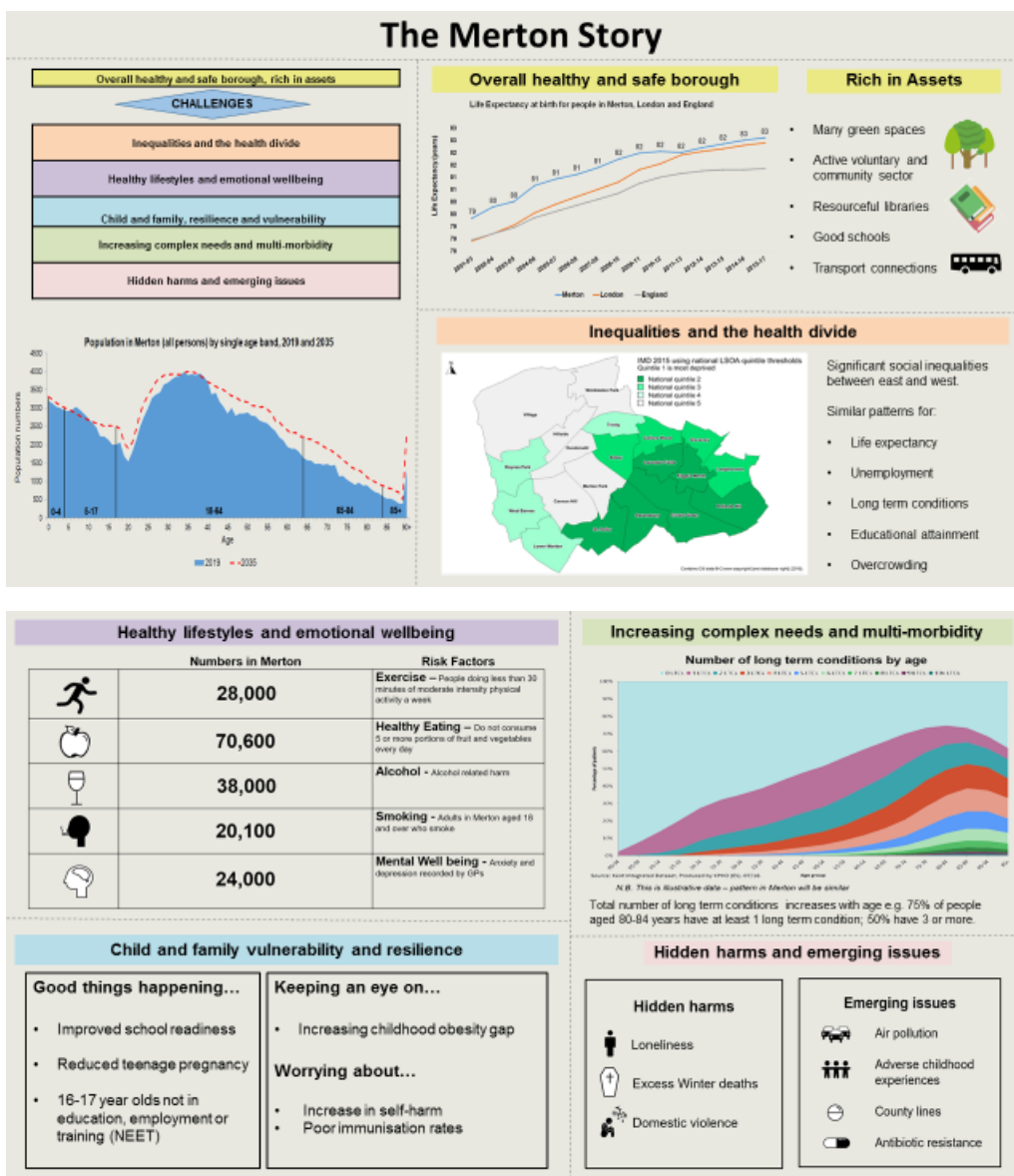
How healthy are people in Merton?

The Joint Strategic Needs Assessment, Merton Story, shows us that, overall, Merton is a safe and healthy place, rich in assets such as green spaces, libraries, good schools and strong transport connections and compares favourably with other London boroughs. Our main challenges are:

- Significant social inequalities between the East and West of the borough that drive a health divide including a persistent gap in life expectancy and ill-health;
- Large numbers of people with unhealthy lifestyles (smoking, poor diet, sedentary behaviour and alcohol misuse underpinned by poor emotional/mental health and wellbeing);
- Child and family vulnerability and resilience, i.e. increase in self-harm;
- Childhood obesity;
- Increasing numbers of people with complex needs and multi-morbidity including physical and mental illness, disability, frailty and dementia; and
- Hidden harms and emerging issues such as air pollution, loneliness, violence and exploitation.

The below diagram shows an infographic summary.

Diagram 3 – Merton story infographic summary



What people tell us matters to them about a healthy place

The following topics have emerged as being particularly important to local people:

- Mental health, good relationships and feeling connected to their communities and networks is one of the most frequently raised topics;
- Air quality is a top concern to people of all ages, but especially young people;
- Inter-generational opportunities had significant support, to connect older and younger people and build social cohesion;
- The food system needs to be tackled as adverts, fast food outlets, price of food, lack of healthy alternatives make the healthy choice difficult;
- Libraries and green spaces are assets that are very valued and people would like more use of community spaces and places to connect socially;
- Work places are a key setting with influence on people’s health and offer a great opportunity to improve mental wellbeing and healthy lifestyle choices; and,
- Safety of the physical and social environment was another recurring theme of importance for people of all ages

The diagram below is a summary drawing of the findings from our Healthy Place workshop.

Diagram 4 - Healthy Place workshop illustration



Learning from the last Health and Wellbeing Strategy

Over the three-year period of the last Health and Wellbeing Strategy (2015-18) the Board has explicitly sought to experiment and learn about its challenge to add value and be an effective system leader. This covered:

- Reflective Board development work with the Leadership Centre;

- Promoting and embedding principles and ways of working based on shared values including social justice in partner organisations;
- Quarterly dashboard reviews replaced by an annual review that combines quantitative and qualitative information to produce insights for the Board role, rather than replicate performance management approach;
- Practical role for of all members in community engagement (i.e. community conversations about the Wilson health and wellbeing campus and the Diabetes Truth programme, where members were connected to residents with diabetes bringing to life the day-today challenges);
- Selecting a small number of priority areas for action as a rolling programme, with clear rationale for concerted effort, rather than trying to cover a wide range of issues at the same time (i.e. whole system approach to tackle diabetes and childhood obesity; spotting the value of social prescribing and championing its development and roll out);
- Making best use of the fact that the Board is more than the sum of its individual members' contributions; and in a similar way it is part of a set of partnerships and other Boards whose potential impact as a system is greater than the sum of its parts.

2. WHAT WE WANT TO ACHIEVE

Vision for Health and Wellbeing Strategy

Working together to make Merton a healthy place by creating the physical and social conditions for all people to thrive, and to complement the provision of holistic health and care services.

Vision for Merton Local Health and Care Plan

Working together to provide truly joined up, high quality, sustainable, modern and accessible health and care services, for all people in Merton, enabling them to start well, live well and age well.

Principles and ways of working

The Health and Wellbeing Board has prioritised the following principles and ways of working underpinning everything that we do including delivery of this strategy:

- Tackling health inequalities - especially the east/west health divide in the borough that is driven by social inequality and the wider determinants of health.
- Prevention and early intervention – helping people to stay healthy and independent and preventing, reducing or delaying the need for care.
- Health in All Policies approach – maximising the positive health impacts across all policies and challenging negative impacts.
- Community engagement and empowerment- working with and for the people and communities we serve; explicitly using and developing assets and strengths.
- Experimenting and learning- the problems we want to tackle are complex and there are no single or neat solutions; using the evidence base, data and intelligence transparently to understand and monitor impact and adjust accordingly.

- Think Family – taking a whole family approach where seeing the parents means seeing the child and seeing the child means seeing the parents as a routine.

Table 1 in the Appendix shows the impact we can make through applying the above Principles and Ways of working and how we propose to measure progress.

Key Outcomes

For people in Merton to Start Well, Live Well and Age Well in a Healthy Place we have brought together a set of key health outcomes based on the main attributes of a healthy place. These are proposed to form the core of the Health and Wellbeing Strategy.

They are meant to be specific enough to clearly articulate the direction for the Board without unduly constricting its ability to adapt over the five- year period.

The key attributes for a Healthy Place that the Health and Wellbeing Board has identified are:

- Promoting good mental health and emotional wellbeing.
- Making the healthy life style choice easy (with focus on food, physical activity, alcohol & drugs, tobacco).
- Protecting from harm, providing safety (with focus on air quality, violence).

Table 2 below shows how our outcomes for people to Start well, Live Well and Age Well fit within a matrix of the key attributes for a healthy place and allow easy cross reading to the Local Health and Care Plan.

Table 2 – Outcomes matrix of the Health and Wellbeing Strategy

Life course stage	Start Well	Live Well	Age Well
Key Healthy Place attributes:	Key Outcomes of the Health and Wellbeing Strategy:		
Promoting mental health & wellbeing	Less self-harm Better relationships	Less depression, anxiety and stress	Less loneliness Better social connectedness
Making healthy choice easy	More breastfeeding Less childhood obesity	Less diabetes More active travel More people eating healthy food	More active older people
Protecting from harm	Less people breathing toxic air Less violence		

Table 3 in the appendix shows a set of indicators to track progress against each of the key outcomes. We are working with partners to develop targets where appropriate which will be included in the annual review to the Health and wellbeing Board.

The [Supplementary Information Pack](#) provides a rationale for the key outcomes.

Delivering Outcomes through Healthy Settings

People live their lives in various places or settings such as home, school and work. They experience a healthy place in a setting where the three attributes - promotion of mental health and wellbeing, easier healthy choices and protection from harm – come together. This forms a ‘healthy setting’ and creating healthy settings is a way to deliver on our key outcomes. The Health and Wellbeing Board has identified the most relevant healthy settings for people in Merton as shown in the table below.

Table 4 – Key Healthy Settings

Life course stage	Start Well	Live Well	Age Well
Healthy settings Key attributes of a Healthy Place	Healthy inter-generational settings (i.e. connecting care homes and nursery schools, links to Dementia-friendly Merton); Healthy Homes		
<ul style="list-style-type: none"> Promoting mental health and wellbeing Making the healthy choice easy Protecting from harm 	Healthy early years; Healthy schools; Healthy school neighbourhoods	Healthy work places; Healthy libraries	Healthy health and care organisations

Each of the above healthy settings has or can work towards a quality mark or level to help us track progress. Examples include the London Healthy Early Years scheme, London Healthy Schools award scheme, London Healthy Work Place Award, and Transport for London Healthy Streets descriptor.

We will work with partners to develop our healthy settings as part of our rolling programme of priorities for action, which will be included in the annual review to the Health and Wellbeing Board.

More details about healthy settings and their quality marks are set out in the [Supplementary Information Pack](#).

3. OUR WAY OF DELIVERY

To deliver this Strategy the Health and Wellbeing Board will:

- Apply the Principles and Ways of Working set out earlier to all routine and statutory Health and Wellbeing Board business.
- Champion Principles and Ways of Working in our respective partner organisations and embed them into other strategies and plans.
- Focus on a rolling programme of a few priority actions at a time to promote key attributes of a healthy place, main healthy settings and corresponding outcomes using explicit rationale based on criteria below:
 - Consider evidence of need (using the Merton Story and community voice) together with an opportunity to tackle emerging and/or topical issues.
 - Investigate how the proposed priority will address the principles of the Health and Wellbeing Board (specifically promoting fairness, engaging and empowering communities and demonstrating a health in all policies / Think Family approach).
 - Be clear how will the Health and Wellbeing Board add value in a way that cannot be delivered in another way; how will the partner contributions create something bigger and more impactful together than individually, and how this will contribute to wider local and regional work.

Examples of different types of actions that the Board might use for best influence are summarised in the [Supplementary Information Pack](#).

4. OUR FRAMEWORK FOR ACCOUNTABILITY

The Health and Wellbeing Board is committed to learning and wants to understand whether it is delivering on its commitments.

An annual review of the Health and Wellbeing Strategy will be reported to the Health and Wellbeing Board. This will include:

- Progress on chosen priorities for action, including any chosen healthy settings.
- Application of Principles and Ways of Working.
- A summary dashboard of key outcomes.
- Ongoing development of the Health and Wellbeing Board as effective system leadership team (including work with the Leadership Centre).

There will also be ad-hoc exception reports to the Health and Wellbeing Board for any issue that requires the Board's attention.

Appendices

Table 1 – Applying our principles and ways of working – how we will track progress

Principle	Expected outcomes/impact	How we will know*	Timescale†
Tackling health inequalities *	People in deprived areas live longer healthier lives	Reduction in childhood obesity gap between east and west Merton.	Long
Prevention and early intervention *	Reduction in premature mortality from main long-term conditions	Proportion of the population meeting the recommended '5-a-day' on a 'usual day' (adults). Percentage of physically active adults Smoking Prevalence in adults (18+).	Medium Short Short
Health in all policies	Impacts on health are considered across main policy areas	An annual review will be reported to the Health and Wellbeing Board which will include a qualitative description of significant Board activity across these four principles. This will be backed by any relevant quantitative data including for example from the Merton Resident's Survey.	Short
Community engagement and empowerment	More focus on main health challenges as residents perceive them		Medium
Experimenting, learning and applying the evidence base	Complex problems are tackled and evidence base applied		Short
Think Family	Policies and practice reflect impact on the whole family		Medium

*Indicators have been chosen as 'markers' for Tackling Health Inequalities and Prevention - as we cannot measure everything and the Health and Wellbeing Board cannot deliver alone but as part of a wider system.

†Timescales for impact vary, as shown in final column. "Short" means an estimate of 1-2 years before we will see an effect; "Medium" 3-5 years, "Long" 6 or more years

Table 3 –Key outcomes and corresponding indicators to track progress

Key Healthy Place attributes:	Key outcome of the Health and Wellbeing Strategy:	Indicator*	Timescale†
Promoting mental health & wellbeing	Less self-harm Better relationships	Hospital admissions for self-harm aged 15-19	Medium
	Less depression, anxiety and stress	Prevalence of depression as recorded by GP Quality Outcomes Framework	Medium
	Less loneliness Better social connectedness	% adult carers reporting as much social contact as they would like	Short
Making healthy choice easy	More breastfeeding	Prevalence at 6-8 week check	Short
	Less childhood obesity	Overweight or obese in Year 6	Medium
	Less diabetes	Diabetes: Quality Outcomes Framework prevalence (17+)	Long
	More active travel	% adults cycling three or more times per week for travel	Short
	More people eating healthy food	Percentage of adults eating recommended five portions of fruit and vegetables per day	Medium
	More active older people	Percentage of adults aged 65+ walking for travel at least three days per week	Short
Protecting from harm	Less people breathing toxic air	Deaths attributable to particulate matter (PM2.5)	Short
	Less violence	Violent offences per 1000 residents	Medium

* as for Table 1 above.

† as for Table 1 above