

Committee: Council

Date: 6 July 2022

Wards: All

Subject: Strategic Theme Report: Supporting residents' who are most in need and promoting the safety and wellbeing of all our communities with an emphasis on Health Inequalities.

Lead member: Councillor Peter McCabe, Cabinet Member for Health and Social Care

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Recommendations:

A. That the Council notes the progress in relation to the contents of this report.

PURPOSE OF REPORT

Council, at its meeting on 2nd March 2022, approved the new Business Plan 2022 - 2026. The Business Plan sets out five strategic priorities and each meeting of the council receives a report updating against one of the council's strategic themes.

The Business Plan sets out how the council will deliver its ambition with five strategic priorities to shape and guide delivery.

- Maintaining excellent education and skills for all ages and needs;
- Promote a dynamic, connected and inclusive community and economy with safe, vibrant high streets and jobs for our residents;
- Support residents who are most in need and promote the safety and wellbeing of all our communities;
- Ensure a clean and environmentally sustainable borough with inclusive open spaces where people can come together and enjoy a variety of natural life;
- Work to make Merton a fairer, more equal borough and support those on lower income by tackling poverty and fighting for quality affordable housing

Performance against these priorities is monitored by Council. Each meeting of Council receives a report updating on progress against one of these priorities.

This report provides Council with an opportunity to consider progress against the priorities that are to be delivered, specifically under the priority to support residents who are most in need and promote the safety and wellbeing of all our communities;

The key outcomes set out in the Business Plan relating to this theme are those set out in Merton Health and Wellbeing Strategy 2019-24. This report also provides a report on progress against the priorities of the Strategy and gives an overview of health and wellbeing in Merton with a focus on the safety and wellbeing of all our communities with an emphasis on health inequalities.

Format and scope of the report

This report sets out in brief:

Introduction and context	Section 1
Merton Health and Wellbeing Strategy	Section 2
Health in All Policies	Section 3
Health and Wellbeing Governance	Section 4
How healthy people are in Merton	Section 5
Examples of continuing work on the key themes of Merton Health and Wellbeing Strategy and Safety and Wellbeing:	
Start well	Section 6
Live well	Section 7
Age well	Section 8
Healthy Place	Section 9
Safety and Wellbeing	Section 10
Healthier Communities and Older People Overview and Scrutiny Panel contribution	Section 11

- The report includes examples relating to both physical and mental wellbeing, as well as safety and wellbeing, with a focus on health equity.
- Rather than being comprehensive, the report gives a **range of examples** of relevant initiatives and their impact.
- Links to web pages and reports are provided for each section for further information.

1. INTRODUCTION AND CONTEXT

1.1 The Business Plan and its strategic priorities for Merton have been developed in response to the Council's widest-ever engagement with residents and includes commitments to housing, regeneration, keeping the borough clean and improving high streets. It means building on our assets and the strength of our local communities and helping them to thrive.

1.2 This will involve action on the full range of determinants of health, including employment, housing, education and transport and offers a way to address inequalities, including that in life expectancy, occurring across Merton. It also forms part of our response to the current cost of living crisis; those who experience health inequalities are too often those also worst affected by the swingeing increases in the cost of food and fuel. The current crisis has clear consequences for both physical health and mental health, through the psychological pressures of poverty, debt and isolation. Working collaboratively with partners, our approach will focus on action on health, equity and sustainability, all with the clear aim of reducing the health inequalities across the borough.

2. MERTON HEALTH AND WELLBEING STRATEGY

2.1 [Merton Health and Wellbeing Strategy 2019-2024](#) focuses on the influence that the wider determinants – the air we breathe, our schools, workplaces, homes, food, transport and relationships with friends and family – have on our health. This is in line with the report on Health Equity in England: [Marmot Review 10 Years On](#) published in 2020, and is focused on tackling health inequalities so that all residents can: Start Well, Live Well and Age Well in a Healthy Place.

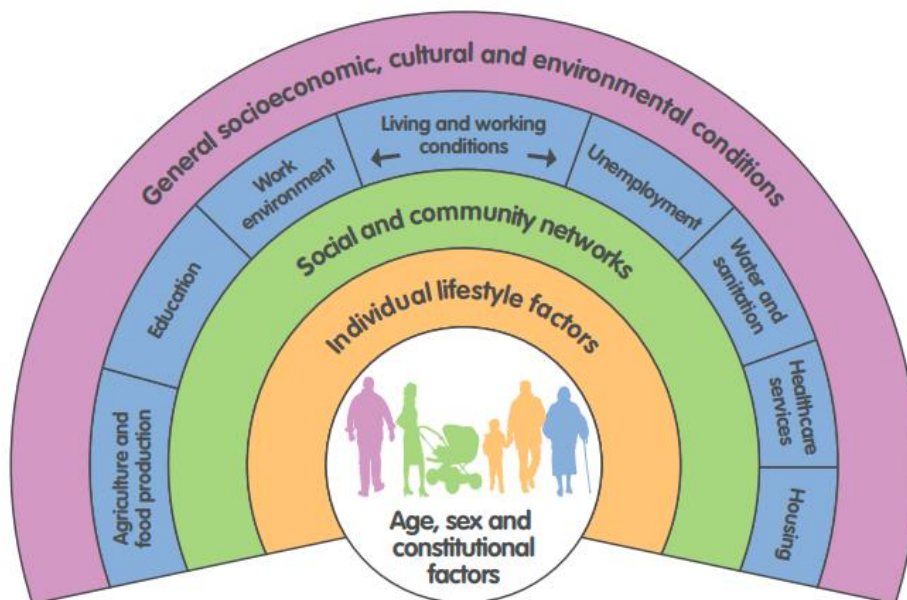


Diagram 1 – Wider determinants of health
Source: Dahlgren & Whitehead, 1991

2.2 By healthy place, we mean the physical, social and economic factors that help people lead healthy lives. The principles link to our work on Health in All Policies (HiAP) currently being developed as part of recovery. There is also a strong link to the Council’s Climate Emergency Action Plan, as a healthy place and healthy living for all are essential components of sustainability.

3. HEALTH IN ALL POLICIES (HiAP)

3.1 Health in All Policies (HiAP) is a collaborative approach that places consideration of health, equity and environmental sustainability at the centre of all policy decisions across the council and ideally across partners, HiAP can deliver benefits for a wide range of stakeholders – and most importantly can reduce inequalities while improving residents’ lives. It includes action on the full range of determinants of health.

3.2 Merton has a longstanding commitment to Health in All Policies (HiAP) reflected in our Health and Wellbeing Strategy and led by the Merton Health and Wellbeing Board. The COVID-19 pandemic has led to a worsening of inequalities across our communities. At the same time, Merton has committed to a Climate Strategy and Action Plan to tackle climate change. A HiAP approach proposes that given the interdependence and urgency of these challenges, it is vital that we find solutions that explicitly address health, equity and sustainability, simultaneously.

Every action undertaken as part of Health in All Policies should address each of these dimensions, reinforcing the impact and alignment across a wide range of council departments. Additionally, this means that each of these dimensions should be addressed by every aspect of policy making. It is for this reason the Council's Health in All Policies is being refreshed.

3.3 First published in 2016, the most recent Health in All Policies action plan was reviewed in 2018. A 2022 stock take reported in the [HiAP report to Health and Wellbeing Board](#) 21 June, has now been completed to assess progress showing substantial progress in embedding a Health in All Policies approach, including establishment of a Dementia Action Alliance, a draft Local Plan that includes a strong focus on health and wellbeing, a wide range of projects to improve air quality, the implementation of a social value toolkit in Council procurement processes and action on healthy workplaces.

3.4 The obvious ramifications of COVID-19, the current cost of living crisis and the urgent threat of climate change and our ageing population are influencing the accessibility of supplies of healthy foods, housing quality and the sustainability of local services, assets and employment. The impact of this on present and future residents of Merton makes this the ideal moment to take action.

3.5 Given that HiAP is an approach, we propose that the first part of the action plan be focused on developing the ways of working that enable the delivery of HiAP. This includes developing culture and relationships, a data led approach, external partnerships, and our cross-sector approach to return on investment.

3.6 It is also important to identify priorities for action; to identify a small number of trailblazers on a rolling basis. It is proposed that the first trailblazer be around a borough of sport, promoting physical activity in an inclusive way across the borough. Other trailblazers might include a focus on high streets, housing, or good jobs for all, for example (further details in full [report](#)). The trailblazers will need to be refined, and would ideally include a mix of initiatives, including short term wins and others which will manifest in longer term returns.

3.7 HiAP is everybody's business. The core of the HiAP action plan is thus about brokering, navigating and connecting, inviting partners to consider how they could further embed HiAP in their work. The Health and Wellbeing Board has a key role to play in strategic leadership and reviewing progress around HiAP, and given the partners around the table can play a crucial role in delivering trailblazers – for example the NHS and Voluntary and Community Sector are key partners to deliver a borough of sport and activity.

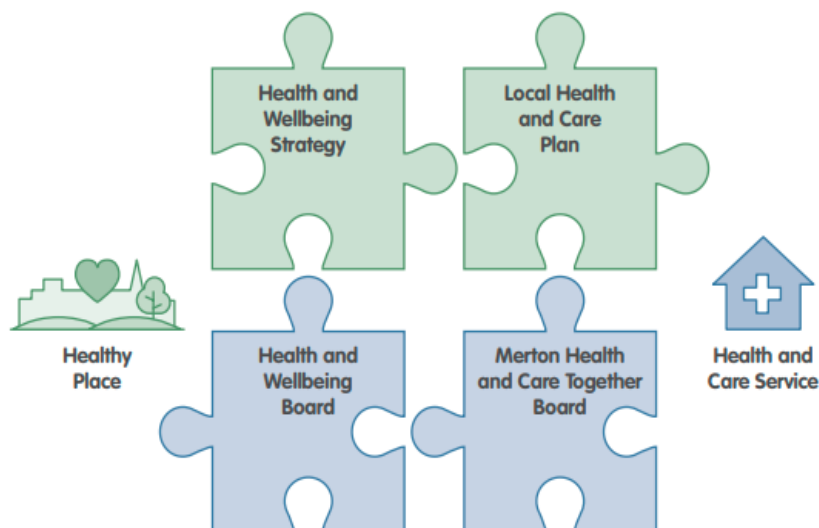
4. HEALTH AND WELLBEING GOVERNANCE

4.1 The Health and Care Act 2022 gained royal assent in April of this year and from 1st July 2022, will change the way the NHS is structured. A new South West London Integrated Care System (ICS) will come into operation, comprising an Integrated Care Body and Board (ICB) and Integrated Care Partnerships (ICP) at regional South West London level and, at borough level, a new Merton Borough Committee.

The Integrated Care System places a greater emphasis on working jointly to address health inequalities with shared responsibility for the health of the local population, and the flexibility to deliver commissioning activities differently. The changes offer potential to work more collaboratively building on our existing partnership structures:

- Merton Health and Wellbeing Board (HWBB) has been established with full statutory responsibilities since April 2013. It is chaired by the Cabinet Member for Health and Social Care and brings together the Council, Clinical Commissioning Group, HealthWatch and the voluntary and community sector. The HWBB delivers local leadership to improve health outcomes, providing the overall vision, oversight and strategic direction for health and wellbeing as set out in [Merton Health and Wellbeing Strategy 2019-2024](#), with a focus on tackling health inequalities.
- Merton Health and Care Together Board (MHCT) is a non-statutory partnership between the Council and the NHS, including providers of care and acute hospitals and reports to the HWBB. Its recently refreshed draft [Merton Health and Care Plan 2022-24](#) focuses on holistic integrated health and care services, prevention and health inequalities.

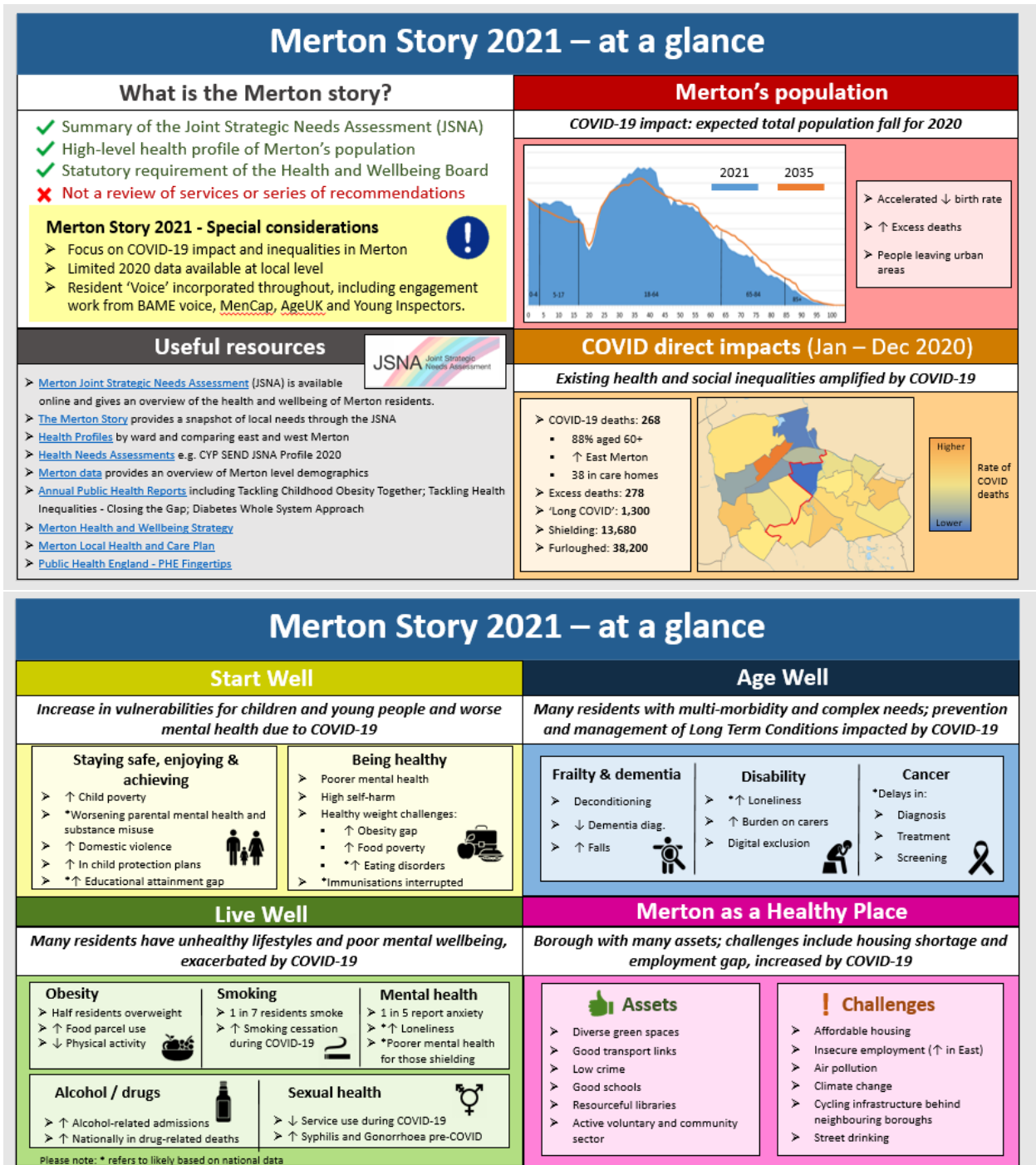
Diagram 2 – Relationship between Health and Wellbeing Strategy and Local Health and Care Plan



4.2 The new Merton Borough Committee is aligned closely to Merton Health and Care Together and the Health and Wellbeing Board and will receive local delegated NHS budget (guidance states, *‘the allocation of decision-making functions between system and place will vary across the country and should be shaped through collaborative discussions’*). Regular updates on developments are made in public reports and presentations to the Health and Wellbeing Board and shared with local GPs through the Primary Care Networks, newsletters and other communications. The Borough Committee includes as members the Merton Directors of Community and Housing, Children Schools and Families, and Public Health. It is envisaged that there will be opportunity over time for local governance structures to evolve with potential to for some streamlining.

5. HOW HEALTHY ARE PEOPLE IN MERTON?

5.1 [The Merton Story 2021](#) provides data on the health and wellbeing of people living in Merton. The Merton Story, and Joint Strategic Needs Assessment (JSNA) that informs it, is currently being updated. The recent [report](#) to the Healthier Communities and Older People's Overview and Scrutiny Panel gives details of the timescale and processes being followed. For further information please see the Public Health [JSNA and Merton Story](#) pages online. A summary version of the Merton Story 2021 is given below.



* **USEFUL RESOURCES** - for live links please see the online versions here [PowerPoint Presentation \(merton.gov.uk\)](#).

5.2 Merton Story 2021 focused on the impact of the COVID-19 pandemic. Here are the key points:

- There were 268 COVID deaths in Merton in 2020; 88% of COVID deaths occurred in those over the age of 60.
- Overall, a higher rate of deaths occurred in the east of the borough which is more deprived and ethnically more diverse; inequalities in case rates by deprivation and ethnicity have been seen in London and England.
- In 2020 there were 278 more deaths than expected, compared to previous years.
- During the COVID pandemic mental health worsened for children and young people and Merton has high admission rates for self-harm in 15-19 year olds compared with London.
- Merton residents' unhealthy lifestyles and poor mental wellbeing was exacerbated during the COVID pandemic, including reduced physical inactivity (which was worse than the London average); higher anxiety early on in the pandemic (in line with trends seen in London and England); and, an increase in alcohol related admissions compared to the previous year; with greater demand for food parcels in the east of the borough and a general overall increase in Merton since May 2020.
- Many residents with complex needs and the management of long term conditions were impacted by COVID with reduced dementia diagnosis. Also, in 2019/20 Merton had a higher rate of falls for older people than London, and anecdotally there was an increase in falls locally during the COVID pandemic.
- The COVID pandemic has highlighted inequalities between east and west Merton such as overcrowded housing (a risk factor for COVID transmission, higher in east Merton) and economic security (benefit claimant rates have increased during the pandemic and are again higher in east Merton).
- The impact of changes in the planned NHS acute service reconfiguration is covered in the externally commissioned Kings Fund report. This includes the impact that the failure to retain all services at St Helier will have on inequality and in the east of the borough which as detailed above is more deprived and ethnically diverse.

5.3 Work is currently underway to update the JSNA and Merton Story 2022 which will be reported to the Health and Wellbeing Board this September.

6. START WELL

Early Years

6.1 The early years, in particular the first 1,001 days from pregnancy to the age of two, set the foundations for an individual's cognitive, emotional, and physical development. The early years are also a time when babies and young children are most vulnerable. They require nutrition and sleep but also need to experience attachment to their parents and carers and play in order to develop and thrive. Parents generally want to do the best for their children but may need to build their skills and knowledge or overcome stressors such as isolation, poverty, homelessness, abuse and mental ill-health.

6.2 The pandemic reduced access to early education, socializing and play and has had an impact on development in the early years. Experimental statistics for 2021-2022 show that compared to the London and England average, a statistically lower % (75% in Q 3 of 2022) of 2-2.5 year olds in Merton reach or exceed all expected 5 levels of development. The impact of the pandemic has been greatest on those in low-income families, where children already had behavioural issues and disabilities and where children or their parents were clinically vulnerable. Without intervention, levels of development are likely to be lower in these groups and this is being seen in increased requests for special needs support in the school nursery and primary stages, highlighting the importance of early support to prevent escalation of needs.

Early Years Workforce

6.3 The early years' workforce provides families with the knowledge and support to prevent ill-health, to play and learn and to ensure the best possible outcomes for babies and young children in Merton. Merton's early years workforce deliver a range of services to children through the foundation years (birth to the end of reception year) in a range of settings including Children's and Health Centres, voluntary organisations and in nurseries, childminding and preschools where children access free nursery education from the age of 2 (vulnerable families) until they start school. The focus is for children in Merton to be ready for school at the end of their foundation years.

6.4 Health Visitors offer 5 nationally mandated visits to families which in Merton equates to approximately 2,400 of each visit each year. New Birth Visits are prioritised. Each visit includes an assessment of critical developmental milestones and trusted and expert advice is provided. If a family is assessed as vulnerable due to physical, mental, or social stressors, more support is available. An outreach team proactively and persistently engage with families in temporary housing and mothers in refuges. Young parents, whose babies are particularly vulnerable to poor outcomes, are referred to a Young Parents Project, where more visits as well as peer support are offered. In this way, Health Visitors prevent inequalities by identifying families who need more help to enable their babies and young children to thrive. Health Visitors are based in Children's Centres and refer directly to Early Help Services.

6.5 Early Help Services deliver a comprehensive range of evidence-based play and learning and parenting programmes and interventions which promote holistic early childhood development and positive parenting. Family and Information Service Hubs and targeted outreach provide access to information but are also able to navigate families to the services that they need. Family workers, including Portage staff, are able to provide expert support to families with more complex needs. Specific current work includes:

- Reviewing Health Visiting Services with a focus on equity and integration.
- Developing and testing a Family Hub model which aims to deliver a clear seamless service shaped by the views and experiences of parents and carers.
- Developing and testing approaches to universal speech and language development using the COLLABORATE - a model which focuses on empowering parents and communities through engagement and working better together across services, taking a community led approach.
- Testing joint GP and paediatric appointments in Children's Centres. This will ensure swift and local access to clinical advice, reducing barriers to access and building a holistic approach to child health including those with developmental delay.
- Refreshing our approach to integrated support within early years settings, supporting early identification and inclusive provision

SEND (Special Educational Needs and Disability)

6.6 Fifteen percent (15%) of pupils attending Merton's state funded schools have a Special Educational Need or Disability. 10.9% of these pupils have their needs met through enhanced support in the classroom, through what is known as 'SEN support'. 4% have their needs met through an Education Health and Care Plan (EHCP), either in a maintained school or in specialist provision. This is a high proportion compared to England, and includes a higher proportion of under 5 year olds.

6.7 The system of support offered to children with SEND follows a cycle of four stages: Plan, Do, Assess, Review, with interventions and support addressing their areas of need. In a mainstream school, the class teacher, working with the school's Special Educational Needs Coordinator (SENCO), discusses the child's needs and creates a baseline assessment against which progress will be measured. A support plan is drawn up for the pupil, implemented and reviewed regularly to monitor progress. The pupil is given extra support which is undertaken primarily by the class teacher, with support and guidance from the SENCO, and, where they are involved, other SEND professionals (for example Educational Psychologists and Speech and Language Therapists). Primary and community health services also offer advice and support to schools to deliver SEN support.

6.8 In Merton there has been a focus on improving the quality of the professional advice received as part of the EHCP process and the council has significantly improved the rate of compliance in issuing a first EHCP within 20 weeks, and Merton is above the national average. In April 2021 we recommissioned the Education

Occupational Therapy provision for pupils with an EHCP and feedback from Merton schools is that this has improved this provision.

6.9 The council is in the process of expanding the Additionally Resourced Provisions for pupils in mainstream schools with Communication Needs including children with Autistic Spectrum Condition (ASC). This will ensure that more pupils can remain within Merton schools, remain with their peer group and will not have to travel long distances to access their education. In addition Melrose extended its provision to admit primary age pupils in September 2021, which has decreased the dependency on out of Borough maintained and independent Special Schools; further expansion of Melrose will take place in September 2023.

6.10 A review of the Adult Social Care Transitions Team has taken to help ensure that young people aged from 14 years receive the right advice to plan for adulthood at the right time. In addition, the new team will ensure that young people, where eligible, receive their Care Act Assessment prior to their 18th Birthday. A Transitions Protocol and Leaflet have been written so that parents, young people, and services are clear on what to expect for Transition to adulthood.

6.11 The Council has entered into a Safety Valve agreement with the Department of Education under which the DfE will provide £28m towards the accumulated deficit on the Dedicated Schools Grant fund into return for the Council bringing the fund into balance in five years. Work is well underway on the Safety Valve plan. The Council has committed substantial resources to delivering the plan including £1.1m year for additional staff for the five years of the plan in addition to the temporary resources set aside in 2021/22 of £490k. It has also committed £500k additional funding per year General Fund contribution to the HNB and £500k each from Children's and Adults services. A combined revenue contribution of £8.4m over the five years. The council has had to make a further provision of £28.3 reserve as per the agreement if the safety plan does not balance at the end of the five years. Among the key actions are supporting more children with SEN in mainstream schools and increasing local specialist provision to reduce use of out of borough provision. A new SEND Strategic Governance Board has been established to provide leadership and oversight of all SEND programmes. We made clear that we would need additional capital to fulfil the need for more places and rapidly pulled together a bid as soon as the bidding round was opened. We were pleased to receive confirmation of £8.2m capital funding in June in addition to the £6.6m capital funding announced in April. This is in addition to £5.8m capital funding provided by the Council in 2021/22 and 2022/23. This will allow us to deliver 284 additional local special schools places starting with the Whatley Avenue annexe to Melrose School.

Children and Young People's Mental Health Support

6.12 Merton is adopting a new model of mental health support called 'i-Thrive', which is jointly led by LB Merton and SWL CCG. Under this model we have expanded the services on offer at a 'Getting Help' stage. 'Off the Record' have been commissioned to provide a self-referral talking therapies service and 'Kooth' as an

online app for young people is available across south London. Every maintained school and further education provider in Merton is now in a school mental health cluster and benefit from accessing a specialist team as well as working on a whole school model of support. These teams have been actively supporting children, parents and staff: for example, in the Mitcham Town cluster a new drama-therapy offer has been embedded, providing support to primary schools.

6.13 We know that many young people have struggled with their mental health through the pandemic and challenges include increased anxiety, increased referrals for support and increased complexity in presentations. The Merton CAMHS Board monitors referral rates to CAMHS and Off the Record, (our preventative service). CAMHS referrals dropped in lockdowns but have now exceeded pre pandemic levels and include cases of much higher complexity. We have also seen this come through in referrals to our Merton Medical Education Service (MMES) which accommodates children whose mental health means that they are struggling to access school at all. We are expanding this service and it will be moving to new and improved premises. We are also working with the i-Thrive partnership to address school absences due to increased anxiety. Off the Record take up is now above pre-pandemic levels and increased capacity has been introduced to address this.

6.14 A youth survey of 2,000 young people, and focus groups involving a further 200 young people, were led by Merton's young inspectors. Our young inspectors are young people trained to lead youth engagement and participation. One finding from this process has been that many young people were struggling with their mental health in lockdowns - but were feeling more positive being back in school and in sports clubs.

6.15 As with CAMHS teams nationally, the Merton CAMHS team has been struggling with a higher level of referrals to the service. There has been a 40% increase in referrals between Jan-March 2021 and Jan-March 2022, as well as an increase in urgent referrals which is a demonstration of the increase in complexity and risk presentation to the service following the pandemic lockdowns. The service has been able to recruit more staff through additional investment. They have also developed a comprehensive resource, a 'whilst you wait' pack, as well as signposting to digital resource/support for waiters.

Healthy Weight

6.16 The pandemic has had a negative impact on children's healthy weight with increases in obesity and eating disorders, together with significant food poverty, all underpinned by the associated impact on emotional and mental health. Obesity in childhood is a significant risk factor for poor physical and mental health in childhood and is a significant risk factor for diabetes and other health conditions into adulthood.

6.17 National and London data for 2020/21 shows the highest annual rise in obesity levels since measurement began in 2006/07. Local data for 2020/21 (unpublished) indicates that rates of overweight and obesity in Merton are similar to London, where 15 % of 4-5 year olds and 30% of 10-11 year olds are obese, and 45% of 10-11 year olds either overweight or obese. Childhood obesity is

a major health inequalities issue, with children living in the most deprived areas more than twice as likely to be obese than those living in the least deprived areas.

6.18 Evidence is emerging that restrictions during the pandemic, including stay-at-home guidance, the move to online education and closures of leisure facilities, has disrupted children's routines leading to negative impacts on sleep, nutrition and physical activity levels. The economic impact of the pandemic and the cost of living crisis has seen an increase in food poverty and impacted families' ability to maintain healthy weight through accessing and being able to afford healthier food options.

6.19 Since the pandemic, poorer mental health and wellbeing has been reported in children and young people, particularly those in care or disadvantaged financially. Poor mental health has a marked effect on obesity. There have been increases nationally in referrals to eating disorder services during the pandemic. Obesity stigma can be particularly severe for children and young people and can also lead to disordered eating, avoidance of physical activity and avoidance of support.

6.20 Obesity is a complex problem and there is no single solution, with evidence indicating that a comprehensive programme focusing on the physical, food and cultural environment is most likely to be successful, and cost effective. There is the opportunity to increase physical activity through the new commitment to Merton as a borough of sport, with a focus on inclusion across the life-course. The Young people's survey highlighted that young people value the parks and green spaces in Merton and want to have a say and play a role in how they are developed. Young inspectors are leading this as part of their role on the Children's Trust Board. Specific current work through the Merton Child Healthy Weight Action Plan includes:

6.21 Making child healthy weight everyone's business:

- 50 schools in Merton have registered for the Healthy Schools London programme, and 83 early years settings are registered for Healthy Early Years London Programme.
- 29 primary schools in Merton participate in the Daily/Active Mile
- 12 organisations in Merton are signed up to Sugar Smart, an initiative aiming to help organisations reduce sugar consumption.
- A new school meals' contract is being awarded with public health, which includes nutritional outcomes, and a move to more plant based menus.
- We are rolling out training for frontline staff on having conversations about healthy weight and being able to signpost to support, starting with support to the Holidays and Activity programme.
- A refreshed communication and engagement plan for child healthy weight is being refreshed.

6.22 Supporting children, young people and their families:

- Community Health Services which includes Health Visiting, have achieved and maintained the Unicef Baby Feeding Friendly Initiative. Breastfeeding support is provided and a specialist clinic is also available for mothers

- School Nurses deliver the ‘Familystart’ programme, a weight support service for children and their families to achieve healthy lifestyle and reduce their weight
- Investment in Merton’s Food Poverty Action Plan has ensured the continuation of Merton’s Community Fridge Network and coordination of local efforts to reduce food poverty, through Sustainable Merton.
- Local Healthy Start Voucher scheme booklet has been developed to increase families access to vouchers for free fruit, vegetables, milk and vitamins
- Children and Young People’s Social Prescribing pilot to be developed and implemented for those classified as obese or with low level emotional health.

6.23 Healthy place - shaping the places we live, learn, work and play and influencing choices on the food we eat:

- Merton’s Climate Strategy and action plan contributes to tackling child healthy weight, committing to active travel and greening the borough.
- Merton’s Local Plan adopted mechanisms to manage new takeaway restaurants within 400 metres of schools.
- Water fountains have been installed in Mitcham, Colliers Wood, Morden and Raynes Park and Wimbledon.
- A Transport for London (TFL) style advertising policy aiming to tackle unhealthy advertising and promote wellbeing implemented in Merton.
- A School Superzone pilot will be testing out ways to make the environment around schools more healthy and 10 schools have been funded to make improvements, such as developing a school garden or open space.

7. LIVE WELL

7.1 We want to better support working age adults in Merton to improve their health and wellbeing, particularly given the pressures that COVID and the current cost of living crisis place on residents. We are committed to working in partnership so that, wherever possible, our services are developed and delivered together with our diverse communities and reach the people who need them most. We are piloting health and wellbeing offers on high streets and in community and faith venues, developing more options for people to personalise their care, based on their own needs. Our focus is on both physical and mental health, as well as the wider issues that determine health, and to take action early to prevent poor health wherever possible.

Prevention Framework

7.2 Working to prevent poor health is a core part of our work to tackle health inequalities. The Prevention Framework sets out in summary how we aim to do this. It takes a 'whole system approach', with interventions at population, community and individual level. Currently being refreshed in order to establish clear roles and responsibilities for the council and our partners, the Framework seeks to embed prevention with a focus across the life course (of Start Well, Live Well and Age Well). It includes:

- Healthy lifestyles - smoking, alcohol, diet, physical activity - underpinned by social, emotional and mental wellbeing
- Specific other high priority areas including frailty and falls and loneliness
- Interfaces with many other prevention activity including screening, immunisation, sexual health, clinical risk factor reduction such as high blood pressure, atrial fibrillation.

The prevention framework sets the context for the range work taking place across the borough, to promote good health and, particularly, to target those who may experience health inequalities with support to reduce poor health.

Promoting an Active Borough

7.3 The COVID-19 pandemic has had an unprecedented impact on activity levels throughout England, but has been most acute across disadvantaged groups and in areas of high deprivation. The [Sport England Active Lives Adults Survey 2020-21](#) found that existing inequalities in activity have widened and while there are signs of recovery for activity levels as restrictions have eased, not all groups or demographics are recovering at the same rate. Some groups have been hit harder by the pandemic than others: women, young people aged 16-34, over 75s, disabled people and people with long-term health conditions, and those from black, Asian and other minority ethnic backgrounds find it harder to be active according to the survey. Tackling these inequalities and helping people to get active can play a role in boosting people's physical health, building resilience and strength and also supporting mental wellbeing, helping to tackle both loneliness and anxiety.

7.4 The *Merton Can* physical activity campaign was developed to encourage everyone in Merton to be more physically active. It promotes the benefits of moving

more and sitting less and encourages every day activity, promoting our services and great community assets including the parks and open spaces that we have in Merton. In 2020 this campaign comprised of 20 free and low cost activities aimed at increasing physical activity amongst

- Babies and Toddlers
- Children and young people
- Adults

7.5 In 2022 we refreshed the *Merton Can* Campaign (see [Merton Can: tips to get active | Merton Council](#)) under the strap-line 'try 22 in 2022' to include 22 free and low cost activities for Merton residents, we also expanded the cohort groups to include

- Pregnant women
- Babies and Toddlers
- Children and young people
- Adults
- Adults and older adults (frailty)

Merton Can supports residents to understand the benefits associated with leading an active lifestyle, which includes better mental health and physical health. We also want to promote the social benefits of being physically active, by connecting people; through joining regular walking group, joining a sports club or playing in the park.

7.6 We know that 75% of Merton's population are physically active for more than 30 minutes per week but that means that there are still almost 1 in 4 people in Merton that are not, and are therefore physically inactive (Active Lives Survey November 2019 - November 2020, Sport England). Being active has benefits for everyone, young or old, it's never too early or late to start getting the benefits of an active lifestyle.

Social prescribing

7.7 Social prescribing is a means of enabling primary care services to refer patients with social, emotional or practical needs to a range of local, non-clinical services, often provided by the voluntary and community sector. In Merton, social prescribing has gone from strength to strength and this year is celebrating its fifth anniversary. Through a partnership, jointly funded, approach all 22 GP practices in Merton are now taking part in the programme, strengthening the links between primary care, voluntary sector and council services.

7.8 From April 2021 to March 2022, 2,892 new referrals were made to the team. The top referral issues were mental health issues, advice on benefits, financial advice and housing and support for social isolation. The ONS Patient Wellbeing score (Dec 2021 to March 2022) showed an improvement of 68.1%. Target utilisation rate (appointments) averaged 86% against a target of 80%, which equates to 560 hours of appointments each month.

Green Social Prescribing

7.9 In order to support and develop options for social prescribers Merton initiated a green social prescribing activities programme in February 2022. Merton's green spaces give people a chance to connect with nature, relax, meet others and feel connected to their community. Green spaces are also important for physical and mental wellbeing providing places to exercise and participate in the activity and sport facilities they offer. There is opportunity for greater use of outdoor space in Merton, building on the benefits that these assets offer.

7.10 The Walk and Talk Movement have been commissioned to provide a service until May 2023 to making use of green spaces and are currently rolling out a tried and tested model of 'walk and talks' from Wimbledon to other locations in the borough, extended to cover both Mitcham and Morden.

7.11 A small grants programme of £67,000 (via Merton Giving) has been established for local organisations to pilot of green related provision. Aiming to develop green social prescribing and provide opportunities to for people to work towards a healthy weight, tackle mental health issues and support those who experience social isolation.

One You Merton

7.12 One You Merton is our 'front door' into preventative services in Merton. It comprises of four elements,

- Outreach, engagement and community resilience
- Universal digital offer which provides information and brief advice on smoking, healthy eating, physical activity, mental wellbeing and alcohol consumption
- A targeted smoking cessation programme
- Frontline training

7.13 The One You Merton service continues to provide improved outcomes to promote the health and wellbeing of our residents. For example it expanded its targeted stop smoking service during the COVID-19 pandemic to include BAME communities, due to the disproportionate impact the pandemic had on these communities and the additional risk of severe outcomes such as hospitalisation and death associated with smoking. Between April 2021 and December 2022, 43% of people supported to stop smoking from BAME communities reported successfully quitting smoking. Merton is continuing to build on these services through commissioning more activity based programmes.

Health on the High Street

7.14 Health on the High Street (HOTH) is an approach to help change how people access health and wellbeing services, piloting health and wellbeing hubs on the high street and in community venues across Merton. The pilot aims to demonstrate the effectiveness of community health on the high street by:

- Bringing services (COVID-19 vaccination and testing, holistic health and care, prevention and welfare) to where people live their lives e.g. the high street,
- Providing support in an integrated way rather than expecting people to attend numerous different services,

- Reviving the high street.

7.15 In its initial phase the project will focus on addressing some of the key issues affecting the three life stages; for Start Well this is Mental Health; for Live Well, obesity and cancer; and for Age Well, loneliness. Since starting in March 2022, the project manager has engaged with the voluntary sector and council and NHS commissioned services to identify initial projects which can be trialled across the borough.

7.16 HOTH is working with youth counselling service Off the Record to hold sessions in Collier’s Wood Library for three months, to compare if this is a better location for children and young people to receive support. This has potential to expand to other locations across the borough and lead to a strong partnership with the Libraries Service as a base for Mental Health support.

7.17 The project is supporting the Biggest Issue survey work in East Merton to generate discussion about healthy weight to help inform a local plan to support healthy weight services. The project is also exploring moving cancer screenings into locations across the borough, as currently residents need to travel out of borough to St George’s in Wandsworth to access this care.

7.18 The pilot is working with Merton’s Dementia Hub on a series of outreach pop-ups and drop-ins across the borough, out of their base in Mitcham. This can help reduce health inequalities for residents who may not be able to access this support due to transport issues, and learning can be applied to other services and similar schemes with other organisations. We will also work with local voluntary sector groups to use the council and NHS’s communications and engagement resources to increase public awareness of the services offered to older adults in the borough.

Mental Health and Suicide Prevention

7.19 There were 18 suicides in Merton registered in 2020, and a total of 38 suicides in Merton during 2018–20¹. This is equivalent to an age-standardised rate of 6.9 deaths per 100,000 people (95% CI: 4.8–9.5) during 2018–20, which is similar to the suicide rate in London (8.0, 7.6–8.4 deaths per 100,000) and lower than the suicide rate in England (10.5, 10.2–10.5 deaths per 100,000). The suicide rates observed in Merton are similar to other neighbouring SWL boroughs.

Borough	Suicide rate per 100,000 persons in 2018–20 (95% confidence intervals)
Sutton	11.0 (8.3 - 14.2)
Richmond upon Thames	9.9 (7.3 - 13.1)
Kingston upon Thames	9.1 (6.5 - 12.3)
Croydon	8.6 (6.8 - 10.7)
Wandsworth	8.0 (5.9 - 10.5)
Merton	6.9 (4.8 - 9.5)

Where 95% confidence intervals overlap, we are unable say there is a difference between the suicide rates between SWL boroughs. Source: OHID (2022) Fingertips tool: Suicide Prevention Profile for Merton. Available from: <https://fingertips.phe.org.uk/suicide#page/1/gid/1938132828/pat/6/ati/202/are/E09000024/iid/41001/age/285/sex/4/cat/-1/ctp/-1/yr/3/cid/4/tbm/1>

The suicide rate is higher among men (10.0, 6.4–14.8 per 100,000 people) compared to women (4.0, 1.9–7.2 per 100,000 people) in Merton, in line with trends seen in the rest of the country.

Source: OHID (2022) Fingertips tool: Suicide Prevention Profile for Merton. Available from:

<https://fingertips.phe.org.uk/suicide#page/1/gid/1938132828/pat/6/ati/202/are/E09000024/iid/41001/age/285/sex/4/cat/-1/ctp/-1/yr/3/cid/4/tbm/1>

7.20 One way of measuring the impact of suicide in Merton is to look at years of life lost due to suicide, which estimates the length of a time a person would have lived if they had not died prematurely. In Merton, the years of life lost is lower than the national estimate for men and for persons, but is similar for women.

Years of life lost due to suicide (age-standardised rate per 100,000)	Merton	England
Persons	23.4 (15.7–33.4)	34.0 (33.4–34.6)
Men	30.4 (19.1–45.8)	51.5 (50.4–52.6)
Women	16.9 (7.2–32.4)	16.5 (15.9–17.1)

The data shows age-standardised rate of years of life lost due to suicide among 15-74 year olds per 100,000. A three-year average is presented for 2018–20. Data for London is not available.

Source: OHID (2022) Fingertips tool: Suicide Prevention Profile for Merton. Available from:

<https://fingertips.phe.org.uk/suicide#page/1/gid/1938132828/pat/6/ati/202/are/E09000024/iid/41001/age/285/sex/4/cat/-1/ctp/-1/yr/3/cid/4/tbm/1>

There is a significant and persistent risk of future suicide following hospitalisation for self-harm. Emergency admissions for intentional self-harm in Merton was 91.0 (95% CI: 78.1–105.4) per 100,000 in 2020–21, which is similar to London (82.7, 80.8–84.6) and lower than England (181.2, 180.1–182.3).²

7.21 Work continues to deliver the annual action plan of [Merton's Suicide Prevention Framework 2018 -2023](#) which, during 2021/22, has included partnership working with South West London Clinical Commissioning Group to deliver a number of projects:

- A programme of training offered to secondary schools/colleges in Merton and those working with young people on suicide prevention and awareness with youth charity, Papyrus.
- SWL CCG alongside Council and CAMHS and community and voluntary sector partners are developing a protocol on supporting young people at risk of self-harm and suicidal ideation.
- Training has continued providing a programme of Mental Health First Aid and Suicide Prevention courses in Merton.
- We have worked with MIND to promote suicide prevention champions (who also offer suicide awareness training) to the community and voluntary sector, including a session with Merton's community champions.
- We have secured £15,000 in funding from SWL CCG for work on self-harm amongst young people and suicide prevention activity.

- We have engaged with rail companies to check on their suicide prevention activity across stations in the Borough and their network.
- The first suicide prevention Forum was held including a presentation and discussion on the impact of COVID-19 and potential risk of suicide to at risk groups.

Residents with a disability

7.22 Work continues to support residents with a disability and their parents and carers including important work with disability organisations such as Merton Mencap to support digital access for people with a disability. Other areas of focus include

- Working with organisations as part of the Carers Strategy work to support carers and family members of people with a disability
- Engaging with organisations including disability organisations to co-produce the new Strategic Partner Programme that provides preventative services to Merton residents including people with a disability
- Commissioning Services to provide information, advice and practical support to residents who are isolated including people with a disability through the Merton Community Hub and Wider Voluntary Sector and Community Response
- Working with people with a learning disability through the Community Activities review following the Big Conversation and Big Explore engagement work.
- Providing support to people with a hearing impairment through a deaf drop-in and support via Deafplus
- Providing support to people with a visual impairment by commissioning services with MertonVision
- Providing Direct Payments as a positive alternative to ‘traditional’ care packages so that people with a disability can exercise greater choice and control over how their care and support is delivered.

7.23 For the council’s Provider Services, all customers have a care and support plan, which has a section on health and wellbeing. In day services staff liaise with carers and residential/supported living staff to ensure there is consistency with support and that all health appointments are met and medication administered. In residential and supported living, staff have the responsibility to support residents to manage their health and in terms of medication and health management and the service is subject to Care Quality Commission regulation and inspection. Customers are supported to make positive choices around healthy eating, exercising and enjoying good mental health by engaging in a range of social and learning activities.

7.24 During the COVID-19 pandemic staff worked closely with Public Health colleagues to ensure that all infection control guidelines were followed and residents

enabled to have their vaccinations. Services were successful in helping to have very few COVID infections amongst our customer group.

Sexual Health

7.25 Work has re-started post COVID to take forward the priorities identified in [Merton's Sexual Health Strategy 2020-2025](#). The strategy and associated implementation plan recognise that sexual health and wellbeing impact on, and are affected, by wider determinants of health, including the social, economic and environmental issues which shape daily life and impact on people's health.

7.26 Prevention is a priority and although a universal approach is identified it is also recognised that certain groups, such as under 25s, men who have sex with men and black and minority ethnic groups, are disproportionately affected and so targeted interventions are required. Current work includes:

- Procurement of a targeted service for those most at risk of poor sexual health which will include mentoring, support for schools, counselling, advocacy services, support for families newly diagnosed with HIV, information & advice.
- Pilot of GP Federation run hub to widen access to long acting reversible contraception across the borough.
- Dedicated walk in clinics provided by the integrated sexual health for under 18s, gay men and chemsex (sexual activity while under the influence of stimulant drugs).
- A co-ordinated response to strengthening and embedding sexual health knowledge and support and providing training to inter-linked services particularly for those: experiencing poor mental health; living and ageing with HIV; experiencing domestic violence or dealing with previous past abuse; who are the victim of child sexual exploitation and who are using substances.
- Supporting schools with relationship and sex education, including drama workshops.

8. AGE WELL

8.1 The Council are working with a range of partners are committed to ensure prevention is embedded into the work we do, so that older people are able to lead healthy, active and fulfilling lives and to age in a way that promotes as much independence as possible. Work this year has focused on a number of key areas including frailty and physical activity, dementia and creating greater social connectivity for older people.

Frailty, Falls Prevention and promoting an 'Active Ageing' Approach

8.2 Frailty¹ is important as it is linked to our ability to carry out day to day activities and therefore linked to our ability to maintain independence. Nationally it is estimated that 25% of over 65's and 25-50% of over 85's live with frailty². Falls are important as they are the number one reason for older people to be admitted to hospital and outcomes for the worst type of falls, hip fractures, can include disability and mortality. Falls can limit an older person's confidence to go outside, risking isolation and loneliness and reduced quality of life. Regular physical activity can help address both frailty and the risk of falls. It also can reduce the risk of long-term conditions and create opportunities for social connection with others.

8.3 National research shows older people are less active than younger people and those living in more deprived communities are more likely to be inactive. This may be due to a range of factors such as lack of open green space, fear of crime and transport issues. COVID-19 has also led to concerns outlined by Public Health England research around older people 'de-conditioning', as exercise classes closed and older people had less opportunities for activity such as going to the shops or to meet friends. This has potentially increased the risk of frailty and falls amongst older people.

'Get up and Go' Programme

8.4 As part of a pilot project Public Health have commissioned a £158,000 programme of strength and balance and physical activity classes for those aged 65+ in East Merton and Morden Primary Care Network (PCN) areas, where rates of frailty are highest. The areas also have higher rates of admission for hip fractures³. The programme will run from end of June 2022 to August 2023 including activities such as 'Move it or Lose it' strength and balance activity, Nordic walking, New age Kurling and Bowls, Tai Chi and Dance classes. More activities will be added as the programme is established over the next few months. The programme also includes a 'train the trainer' element and small grants programme to support community and voluntary sector groups establish physical activity groups or sessions.

The focus on physical activity in East Merton and Morden areas should help address health inequalities and increased levels of frailty in these areas. Over the longer term, and dependent on evaluation of the project and funding availability, we will explore rolling the programme out Borough wide.

Merton Moves Project with Wimbledon Guild

8.5 Merton Council Public Health also fund (£20,000 over 20/21) Wimbledon Guild's 'Merton Moves', a six week coaching project working 'one to one' with older

¹ Frailty describes reduced resilience with slower recovery after a period of ill health. It is a long-term condition associated with reduced muscle mass and fatigue. Frailty is associated with falls, immobility and incontinence.

² Age UK <https://www.ageuk.org.uk/our-impact/policy-research/frailty-in-older-people/understanding-frailty/>

³ Merton Story 2021, page 103.

people to take up physical activity. To date nearly 100 people have been supported through the programme starting up activities including walking, tennis, pilates and yoga. Coaching is available borough wide and the Guild have worked with smaller community organisations in the East of the Borough to ensure the offer is available throughout Merton. Latest performance data puts 39% of clients from an ethnic minority and 28% from Mitcham postcodes and 18% from Morden postcodes. For 2022/23 the project is continuing with further funding of £18,000.

Dementia

8.6 The number of people in Merton with dementia is predicted to increase from 2,050 to 3,300 by 2035, with only 70% currently diagnosed⁴. Dementia prevalence is unequally distributed in the borough. East Merton has a higher percentage of dementia (0.7%), whereas North, Northwest and West Merton (0.5% for all) have the least. The incidence of dementia nationally is linked to socio-economic factors, with greater risk of developing dementia found amongst those with the lowest incomes compared to those with the highest incomes⁵. Deprivation is also associated with increased dementia mortality, younger age of death and poorer access to specialist diagnosis⁶.

8.7 Ethnic minority communities may face a number of inequalities around dementia and access to support. These include knowledge and awareness of dementia, reluctance to engage with services (such as due to fear of discrimination), the existence of 'stigma' around dementia within communities and lack of knowledge of local services and support that is available. Carers may also feel isolated from services and reluctant to ask for help⁷.

Community Dementia Services

8.8 The Council commissions a range of community dementia services with the Alzheimer's Society with the aim of keeping people living with dementia as independent as possible for as long as possible. Services based at the Dementia Hub in Mitcham, but also out in the wider community, include advice, information and education, wellbeing assessment and support planning, peer support, activities and volunteering support.

8.9 During 2021/22 Public Health and Adult Social care staff have worked to re-design community dementia services, taking into consideration results of consultation and working collaboratively with the current provider, the Alzheimer's

⁴ Merton Story 2019

⁵ Individual and Area-Based Socioeconomic Factors Associated With Dementia Incidence in England Evidence From a 12-Year Follow-up in the English Longitudinal Study of Ageing, Cadar, D et al, (2018), JAMA Psychiatry. 2018;75(7):723-732. doi:10.1001/jamapsychiatry.2018.1012

⁶ The Influence of Socioeconomic Deprivation on Dementia Mortality, Age at Death, and Quality of Diagnosis: A Nationwide Death Records Study in England and Wales 2001–2017, Jitlal M et al, (2021), Journal of Alzheimer's Disease vol 81, no 1 pp321-328.

⁷ SCIE research briefing 35, "Black and Minority Ethnic people with dementia and their access to support and services", Moriarty, J et al, (2011) available at [SCIE Research briefing 35: Black and minority ethnic people with dementia and their access to support and services](#)

Society. Still based in the East of Borough at the Dementia Hub in Mitcham, the new community emphasis has increased engagement and presence with voluntary, community and health partners across the Borough as well as increased co-location of other partners at the hub, for example Wimbledon Guild offer their bereavement support service (aimed at older people bereaved due to COVID-19) one day a week from the Hub. The service in 2021/22 also trained two staff to run the START programme, offering one to one tailored advice for carers, with the aim of addressing particular issues around caring for someone with dementia. In this regard Merton is a front-runner as we understand this service is only being offered in Merton compared to other South West London boroughs.

Dementia Friendly Merton

8.10 Merton is committed to being a Dementia Friendly Borough, where awareness of dementia is widespread and people know how their actions, however small, can support fellow residents. Being dementia friendly is vital for both people living with dementia but also their family and carers, supporting wider aims around keeping people independent in their homes for as long as possible. Work on this agenda also includes community engagement and awareness raising around dementia.

8.11 During 2021/22 Merton's Dementia Action Alliance (MDAA) has focused on responding to some of the inequalities highlighted by local and national research on the impact of Covid-19 on people living with dementia and carers. Key local issues included increased loneliness and isolation and linked to this, digital exclusion. Responding to this, an MDAA meeting this year focused on digital inclusion, promoting a number of local support schemes that can help residents. Further, it led to a collaboration between a local training college and the Alzheimer's Society to offer IT workshops for people living with dementia. Other meetings have included a focus on equalities, raising awareness of dementia issues facing ethnic minorities, LGBTQ communities and people living with a learning disability.

8.12 Other key work has included engaging with faith and ethnic minority community organisations on dementia, increasing MDAA Membership and running dementia friends' awareness sessions.

Addressing social isolation and loneliness

8.13 Social isolation and loneliness can impact our physical and mental health. For example it increases risk of mortality, risk of stroke and cardiovascular disease, risk of high blood pressure and alongside social isolation is a risk factor for frailty. Loneliness also increases our risk of cognitive decline and dementia and is one predictor of suicide risk amongst older people⁸.

8.14 Whilst people of all ages can face loneliness and isolation, older people in particular face a range of factors that put them at greater risk. This includes ageing and bereavement of partner and friends, family moving away such as for work, increased risk of long-term conditions and frailty that may limit ability to get out and

⁸ Summary available from <https://www.campaigntoendloneliness.org/threat-to-health/>

about to meet people. COVID-19 has also impacted older people disproportionately and their ability to connect with others.

8.15 Merton Council Public Health commission a befriending service for older people aged 65 and over. The scheme matches a volunteer to an older person, based on shared interests. Run by Age UK Merton in partnership with Wimbledon Guild, in 2021/22 the service recruited 72 new volunteers and matched 123 new clients with a volunteer. The current service runs until March 2023 and we are currently in the early stages of plans to re-commission the service.

9. HEALTHY PLACE

9.1 The local environment is a key shaper of people's health and wellbeing. Across the Council and with partners we are working to create a healthy place in Merton. This work links closely to the ongoing delivery of the Merton Climate Strategy and Action Plan, as healthy living is beneficial for the health of people and the planet. It also links to initiatives to support people into employment, to develop skills and more broadly to promote community connectedness and wellbeing.

Libraries as Health and Wellbeing Hubs

9.2 Merton's libraries play an important and visible role as the 'High Street presence' of the Council and play a vital role in supporting and signposting residents to information and accessing Council services. Our seven libraries already host a range of groups and services that support our communities, including health and wellbeing services of healthy eating, sexual health, diabetes, mindfulness and smoking cessation, as a year round approach to promoting healthier lifestyles.

9.3 *Tuned In* is a project that aims to combat loneliness by facilitating musical jam sessions every Monday at Merton Arts Space, Wimbledon library. The sessions share and develop musical skills and build knowledge, as well as helping individuals build social connections and friendship groups. They create an environment for people from all walks of life to come together and enjoy mutual support, targeting men, particularly those aged 50 plus, where loneliness is at its highest, but open to all, and participants have reported impressive results.

9.4 The Library Service provides an equipment loaning scheme for vulnerable and/or isolated residents who do not have access to IT equipment in the home called *Connecting Merton*. The scheme not only provides good quality IT equipment such as laptops and tablets but advice, guidance and training on how to get the equipment set up and how to get online in a safe way. Library staff and volunteers support residents by providing training either in person or via the telephone. Participants are also linked into a range of free IT learning courses provided by Merton Adult Learning and other providers. So far over 200 residents have joined the scheme with 100% of residents reporting improvements in their IT skills.

9.5 Libraries provide a range of employability support services working with training providers. Examples include CV writing workshops, job clubs and other skills

training. The use of library services is integral for a number of community based courses and in a more informal way through sessions such as one to one IT support and other activities delivered by partners and volunteers. They are also developing more services to support with the cost of living including new money management courses provided by Barclays.

9.6 Wimbledon Library hosts 'Wimbletech', an organisation that provides space, advice and support for start-up companies and co-workers and is part of Merton's Inward Investment Strategy. Building on the success of Wimbletech, the Workary at Mitcham Library launched in April 2022, and will play a vital role in supporting entrepreneurs and start-up businesses in the east of the borough.

To address branch closures Mitcham, Colliers Wood and Pollards Hill libraries also host a new community banking service. Apart from the usual banking services the service also provides money management and digital skills training

9.7 Health and Wellbeing Zones have been established in all our libraries. Residents are now able to undertake health checks and use digital equipment to improve their personal health and wellbeing. The project links in closely with the Health on the High Street initiative.

Adult Learning

9.8 Merton Adult Learning provides vital training and support to improve the life chances of our residents. The London Borough of Merton is committed to providing high quality and sustainable adult learning in order to improve the social, economic, health and wellbeing of our residents. This is delivered through a strategic investment approach: commissioning provision to the best providers in the field and by developing sophisticated evidence based approaches to what we deliver. It is focussed on reducing inequalities across the borough by focussing a significant proportion of its investment on those most socially and / or economically disadvantaged whilst providing a broad range of learning opportunities to develop all resident's skills

Mitcham Health and Wellbeing hub

9.9 Supported by the council, the NHS is leading a programme with health and care partners to develop a new health and wellbeing hub to serve the people of Mitcham and the surrounding areas. The hub will support people to stay healthy and stop health conditions getting worse, through prevention work – because this is one of the most important ways we're able to tackle health inequalities. It will be home to a range of integrated services, complementing and enhancing existing ones, including: wellbeing services, social prescribing, children's services, children and young people's mental health services and adult mental health services, subject to confirmation. There will also be outside community space as part of its wellbeing offer and bookable rooms for community use and multi-disciplinary team working.

9.10 The work to develop the Mitcham health and wellbeing hub had to be paused in 2019 due to funding issues when the national LIFT (Local Improvement Finance

Trust) scheme came to an end. Enough potential funding, approximately £15m, has now been identified through the new NHS Property Services Disposal policy, along with investment from NHS South West London, to enable the project to move forward, and the draft Outline Business Case is expected to be ready this year. A recent options appraisal process considered the Wilson Hospital site, a site on Birches Close and the Sibthorpe Road car park. The site is not yet confirmed as the councils view on the Wilson site is that it has poor access and is poorly served to those in the most deprived wards in the east of the Borough due to its location.

Air Quality

9.11 Air quality is a fundamental determinant of health with many acute and chronic diseases and premature deaths linked to air pollution; often the least well off suffering most while polluting the least. Particularly affected are the most vulnerable, including the elderly, the young and those with underlying health conditions. That is why air quality is one of the priorities identified in Merton's Health and Wellbeing Strategy and it is a key part of Merton's Climate Strategy and Action Plan

9.12 Actions taken to tackle air pollution are outlined in the Council's Air Quality Action Plan and reported annually as part of an Annual Status Report. Notable successes include the Borough's School Streets Programme that now covers 29 schools, the highest number of any London borough. Anti-idling initiatives aimed at key hotspots in the borough and raising awareness in schools and businesses, including a Public Health funded Behavioural Insights, currently being delivered, and using active signage to change driver behaviour.

9.13 As part of a grant funded project, we have increased air quality monitoring in the borough, with 68 new Breathe London Monitors to provide a better picture on pollutants of health concern and help inform policy and decision making. The Air Quality Team continue to deliver the world first Construction Low Emission Zone in London on behalf of the Mayor of London and London Councils. This project is ensuring that sites in London use less pollution plant and equipment and improve health outcomes for Londoners.

9.14 Merton is also leading on a project to link the air quality agenda with health professionals, to review the air quality health alert systems for the most vulnerable, so that active steps can be taken to ensure lifestyle and medical needs can be considered better for those exposed to local pollution.

9.15 Partnership working with the NHS on air quality and sustainability has developed since the NHS committed to an ambition to become carbon neutral, that requires all NHS organisations to produce 'Green Plans'. One example of this work is that the Council commissioned a programme through the Chamber of Commerce to support GP practices to accredit around the RCGP's Green Impact for Health Toolkit and Active Practice Charter, leading to two practices accrediting under these standards.

Fuel Poverty in Merton

9.16 Living in a cold home has both direct and indirect physical and mental health impacts, such as asthma and depression, as well as wider social impacts, such as poor educational attainment in children^{9,10}. Population groups that are most vulnerable to the impacts of cold housing include those on a low-income, with cardiovascular conditions, respiratory conditions, older people, people living with pre-existing conditions and young children^{10,11}.

9.17 The proportion of fuel poor households in Merton in 2020 was 10.5%, more than our neighbouring boroughs of Wandsworth (8.6%), Kingston upon Thames (9.3%) and Sutton (9.8%) but less than Croydon (12.8%)¹². Please note these figures should be interpreted with caution and may be affected due to changes in methodology and sampling method over the COVID-19 pandemic (for 2019, this figure for Merton was 14.7%)¹³.

9.18 Households experiencing fuel poverty (and therefore likely experiencing other types of poverty), are targeted by the Council's local services, such as Warm and Well, as well as through our engagement with national programmes, such as the Green Homes Grants Local Authority Delivery schemes. Monthly Fuel-Poverty Sub-group meetings take place between Merton Council and key voluntary sector partners in the borough to ensure effective communication and coordination. Public facing events, led by the voluntary and community sector, also take place across the borough to disseminate key information and promote services to help those experiencing fuel poverty.

'Warm and Well' in Merton

9.19 Funded by Merton Council Adult Social Care, Warm and Well is a local service in a partnership with Wimbledon Guild, Age UK Merton and Thinking Works. The service targets older adults in Merton, many of whom are on a low-income and in receipt of other benefits and provides:

- Information and advice on keeping well for vulnerable residents in winter and summer, as well as a wider 'wrap-around' service including advice on benefits, accessing and providing small grants, transport and housing for older people.

⁹ Public Health England. Data sources to support local services tackling health risks of cold homes. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/770963/data_sources_to_support_local_services_tackling_health_risks_of_cold_homes.pdf Accessed [24th June 2021]

¹⁰ Public Health England. Local action on health inequalities: fuel poverty and cold home-related health problems. PHE. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/357409/Review7_Fuel_poverty_health_inequalities.pdf, Accessed [29th June 2021]

¹¹ National Institute for Health and Care Excellence. Excess winter deaths and illness and the health risks associated with cold homes. Available at: <https://www.nice.org.uk/guidance/ng6/chapter/What-is-this-guideline-about> . Accessed [24th June 2021]

¹² GOV UK, Fuel Poverty Sub-Regional Statistics, UK Government, Available at: <https://www.gov.uk/government/collections/fuel-poverty-sub-regional-statistics>, Accessed [25th May 2022]

¹³ GOV UK. Fuel poverty detailed tables 2021. Available at: <https://www.gov.uk/government/statistics/fuel-poverty-detailed-tables-2021>. Accessed [24th June 2021]

- Funds for 300 energy assessments through Thinking Works, who offer advice on energy saving and grant applications.
- A free handyman service which supports vulnerable residents with small home improvements.

9.21 Warm and Well effectively raises awareness of fuel poverty and the wider support available as well as directly assisting vulnerable residents in the borough through providing talks, winter packs, advice and grants, where possible.

Green Homes Grants

9.22 There are a number of schemes being delivered by partners around housing retrofit and energy efficiency, including the national Green Homes Grant and Sustainable Warmth, which aim to provide grants to eligible households to retrofit properties to raise their energy efficiency, reduce carbon emissions and reduce fuel poverty. The programmes target low-income households with the lowest Energy Performance Certificate to provide grants to some of the most vulnerable households. Merton's Public Health and Climate Change teams have been working hard with the GLA, regional and local partners to help promote these schemes locally. Work completed to date includes:

- Merton residents have been referred to the regional support programme via our local energy advice service, Thinking Works. The Climate Change team have secured carbon offset funds to top up this funding where appropriate.
- A communications plan submitted for Sustainable Warmth for Merton to the GLA (awaiting feedback) planned to include a mail-out to potentially eligible households and social media advertising to promote the scheme to local residents.

9.23 The retrofitting of households will help raise their energy efficiency and improve the quality of housing in the long-term, reduce energy bills and help to deliver Merton's commitment of becoming a net-zero carbon borough by 2050. As these schemes continue to develop, we will work to understand their impact and make best use of all opportunities to retrofit.

10. SAFETY AND WELLBEING

The Merton Partnership Violence Reduction Plan

10.1 During the 12 months between April 2021 and March 2022 there were a total of 13,315 crimes reported as taking place in Merton. This equates to a rate of 63.2 crimes per 1000 person. This was the third lowest crime rate of all 32 London boroughs. The two boroughs with lower crime rates were: Bexley and Richmond Upon Thames.

10.2 The Merton Violence Reduction Plan is developed in partnership to ensure that the borough has a range of up-to-date actions focused on reducing violence (including knife crime) and vulnerability. The plan is overseen by the Merton Safer

and Stronger Executive Board (SSEB) and is reviewed on a regular basis by the Mayor's Office for Policing and Crime Violence Reduction Unit (MOPAC). The most recent review of the plan in April 2022 found that Merton has 'a good plan. Examples of ongoing work linked to the Merton partnership Violence Reduction Plan include:

- The 'Towards Employment' project, engaging young people at risk of offending or who have offended. It has also been successful in securing funding to continue its work.
- Young victims of violence provided with a trauma informed needs assessment, with therapeutic support in place, and an early trauma referral pathway currently being developed by Child and Adolescent Mental Health Services Board.
- Test purchases (checks carried out by Trading Standards or the Police to see if premises comply with the law in respect of age restricted products) with children and Challenge 25 with young people 18-25 in retail premises and/or online (dependent on securing suitable volunteers - challenging during the COVID-19 pandemic).
- Multi-agency panels seek to ensure that vulnerable adults are supported and encourage referrals from a wide range of partner agencies. Close links are in place with the police adult social care and other partner agencies.

Specific Projects delivered in 2021/22 include:

10.3 Crimestoppers Fearless Campaign - Merton secured funding for a campaign, aimed at 11–16-year-olds, raising awareness on safety issues and how to report crime – including the option to report anonymously via CrimeStoppers. It is estimated that 95% of people making reports to CrimeStoppers would otherwise not have reported the incident to police. During the project 20 young people attended a workshop on knife crime, 36 practitioners attended professional training sessions and the social media campaign achieved a reach of over 45,000.

10.4 St Giles Project - In October 2021 the Safer Merton Team secured £62,500 for work to support vulnerable children in schools to reduce the risk of child criminal exploitation and violence. This work is being delivered by the St Giles Trust SOS+ preventative project engaging with young people in several schools across the borough through a combination of whole year assemblies, focused group work and one to one support and mentoring.

10.5 Phipps Bridge Contextual Safeguarding Project Evaluation - to reduce violent crime, anti-social behaviour and facilitate safeguarding on the estate, engaging with community, providing reassurance and early interventions. The Safer Merton team is currently working with partners to carry out an assessment of the impact of the work and identify any areas for ongoing focus.

Domestic Violence

10.6 Safer Merton continues to co-ordinate the partnership approach to respond to violence against women and girls (VAWG) as part of its core business and a priority

for the partnership Safer and Stronger Executive Board. Interventions and activities include:

- Management of the VAWG Strategic Board and developing a new VAWG strategy, due to be launched in September 2022, with an increased focus on the safety of women and girls in public spaces and the importance of male accountability for ending violence against women and girls.
- Developing and delivering the annual VAWG action plan and ensuring we meet the policy and statutory requirements, specifically conducting Domestic Homicide Reviews.
- Commissioning and managing front-line services for victims of domestic abuse, including: The Independent Domestic Violence Advocacy Service (IDVA); running the virtual weekly One Stop Shop drop-in surgeries; joint commissioning of the complex needs IDVA service and refuge; and the Refuge provision – 17 beds provided through Hestia.

10.7 In March 2022 Merton Council signed up to the Mayor's Night Safety Charter (as a statement of the Council's commitment to improving the safety of women and girls and in light of the range of measures being implemented). Additional work to be delivered during 2022/23 includes:

- Investing in extra capacity for street pastors to be trained and deployed to busy night-time economy locations; and targeted training and support for night-time economy staff, via a roving Welfare Licensing Officers to check premises are promoting welfare and safety inside their premises.
- The Task Group will lead on coordinating the work required for Merton Council to achieve White Ribbon accreditation status. White Ribbon UK is a charity focused on engaging with men and boys to end violence against women and girls.

10.8 The Safety of Women and Girls Task Group will work to develop a clear understanding of the applicability and appropriate role for restorative justice processes. The Safer Merton Team has submitted a joint bid to the Home Office's Safer Streets funding for work to help prevent violence against women and girls in public places and engage with men to change attitudes and behaviours.

Safeguarding Children in Merton

10.9 The Merton Safeguarding Children Partnership (MSCP) brings together partners to safeguard and promote the welfare of children in Merton, and partners are committed to working together so that every child in Merton is safe, well and able to reach their full potential. The MSCP is focused on the following four priority areas, as set out in the MSCP 21-23 Business Plan:

- **Early Help and Neglect** – ensuring Early Help is part of a whole system approach and based on a clear understanding of local need. Good early help will mean that children and their families will experience a high quality and coordinated service that meets their assessed needs and prevents issues from escalating into a safeguarding risk. Ensuring the MSCP provides a

strategic and operational framework to improve the identification of early signs of neglect.

- **Contextual Safeguarding** – ensuring as partners we are proactively addressing risks that occur in contexts beyond the family home (e.g. neighbourhood, schools, local shopping centres, youth venues). These risks could include child criminal exploitation, child sexual exploitation, serious youth violence, peer on peer abuse, harmful sexual behaviour and other overlapping forms of harm.
- **Domestic Abuse and Think Family** – monitoring, coordinating and evaluating the work of partner agencies to safeguard children who are at risk of, or witnessing, domestic abuse. Working effectively with families, including victims and perpetrators of abuse to create and sustain a safe parenting environment.
- **Strong Leadership & Strong Partnership** – leading an impactful safeguarding agenda, challenging the safeguarding work of partners and committing to an approach that learns lessons, embeds good practice and is continually influenced by children, young people and their families.

10.10 The MSCP also oversees the development of multi-agency policies and procedures and delivers a comprehensive training programme for the multi-agency workforce, overseen by the Policy and Training sub-group. During 21-22, the MSCP delivered training to over 700 practitioners working with children and families in Merton, and we continue to commission new training topics to respond to emerging needs.

10.11 The MSCP is also committed to an approach that learns lessons and the Quality Assurance and Practice Review sub-group oversee a regular audit programme to test the quality of our safeguarding processes in Merton. The MSCP also oversees the delivery of Rapid Reviews and Local Child Safeguarding Practice Reviews, as per Working Together 2018 statutory guidance, to ensure that partners learn from serious incidents involving children living in Merton.

10.12 The MSCP is chaired by an Independent Person, Aileen Buckton, who scrutinises the senior leadership of partners in the MSCP. The MSCP also work with an Independent Scrutineer and Young Scrutineer, who undertake a programme of thematic scrutiny to provide reassurance of the effectiveness of the MSCP's work. They recently reported on their thematic scrutiny reviewing how effective the MSCP is in responding to sexual harassment in schools, following the national concerns raised in Everyone's Invited. They are planning further scrutiny this year on 'Adultification', in response to the recent concerns raised by Child Q's story, and on family networks in assessments, in response to Merton's local Ananthi review.

Safeguarding Adults in Merton

10.13 As part of the work of the multi-agency Merton Safeguarding Adults Board, partners across the borough are working to ensure that adults at risk can live life free from abuse, neglect, and exploitation. The Board's priorities for 2021-2024 are:

- Prevention and Early Detection: Aim - adults from all communities will feel supported to keep safe. Partners, service users and residents will recognise risk and be confident in their response.
- Building and strengthening connections: Aim - partners, service users and residents from all communities are engaged and working together to ensure an inclusive safeguarding framework.
- Making Safeguarding Personal: Aim - people will feel listened to and have a real choice and control in shaping their safeguarding journey.
- Quality Assurance & Embedding Learning: Aim- to establish a Quality Assurance & Performance Framework to provide assurance that the Board and its partner agencies have effective systems, structures, processes and practices in place. To learn from reviews, for example SAR's, Domestic Homicide Reviews (DHR's) and Learning Disability Mortality Reviews (LeDeR) and ensure mechanisms are in place to measure effectiveness.

10.14 Annual priorities are currently being agreed and are planned to include carers support, transitions and support for young adults, low level mental health needs and dual diagnosis (co-existing mental health and substance misuse needs) and Fire Safety. One area of focus is to understand lived experience from stakeholders, residents and service users to inform the emerging service model, and procurement of the adults' substance misuse service. Regular audits are undertaken of the Safeguarding Adult Enquiries where cases are identified for a potential 'Discovery Interview' allowing the person who has experienced the safeguarding process to feedback their experiences to the interviewer on what went well and what could be improved.

10.15 The Board's Communication and Engagement Subgroup are working with Merton Connected on a model of Safeguarding Adults Champions similar to existing Community Champions. Champions will be the vehicle for raising awareness of adult safeguarding in the community and amongst residents, as well as informing the board of gaps and emerging issues.

10.16 The Board's Learning and Development Subgroup has secured a Safeguarding Adult Training package that will be accessible via the Merton Safeguarding Adults Board Website. The website will allow reporting on how the training is used as well as providing feedback on where we need to focus our support in the future.

10.17 Work to support people with a Learning Disability continues via monitoring the Learning Disability Mortality Reviews and Learning Disability Health Checks. Regular reporting via the Performance and Quality Subgroup, provides a mechanism for scrutiny as well as informing actions for improvements for the partnership. The Board has agreed to further develop data sets and assurance tools, including an assurance framework, which can inform emerging themes and priorities. Sharing the right information, at the right time, with the right people, is fundamental to good practice in safeguarding adults.

Health protection

10.18 Health protection seeks to prevent or reduce the harm caused by communicable diseases, as well as environmental hazards such as chemicals and radiation. Nationally, the UK Health Security Agency (UKHSA) has responsibility to deliver a specialist health protection response and the regional Health Protection team for South London covers Merton.

10.19 Local authorities have had a statutory duty, since April 2013, to provide oversight to ensure that health protection arrangements are robust. Local, regional and national roles need to be complementary to ensure an effective response, and Merton Public Health have an active Health Protection Oversight Group and protocol that discharges this responsibility. In addition Directors of Public Health have a wider health protection role in supporting UKHSA with the management of outbreaks and incidents within their local area. The Health Protection functions covered by the Health Protection Oversight Group include:

- Immunisations
- Antenatal and new-born screening
- Cancer screening
- Infection control and healthcare acquired infections
- Emergency planning and resilience
- Infectious disease outbreaks
- Cold and hot weather planning
- Chemical and environmental hazards

10.20 Most recently the focus for health protection has been on COVID-19, with local authorities taking an important role in the pandemic response - including community engagement, supporting settings such as care homes and schools, delivering local asymptomatic testing and local contact tracing – linking to the London Coronavirus Response Cell and the UK Health Security Agency at a national level.

10.21 The impact of COVID-19 means that some health protection programmes are now working to 'catch-up' and improve their performance e.g. cancer screening and some adult and children's immunisations. Merton Council has an oversight function for this and takes a partnership approach to working with NHS England and Improvement to support improvement. This includes using our established network of Community Champions, set up as part of our COVID-19 response and still meeting regularly, and our strong partnerships with voluntary and community sector, to raise awareness of screening and immunisations programmes in Merton.

11 Healthier Communities and Older People Overview and Scrutiny Panel

11.1 Over the last year the Healthier Communities and Older People Overview and Scrutiny Panel has looked at health inequalities through several work streams, Panel members monitored the impact of the pandemic and uptake of the vaccine for vulnerable groups. There are plans for a new Health and Wellbeing Hub in East

Merton, this panel has expressed concerns about the delay and highlighted the need for GP Services within the vicinity.

12. CONSULTATION UNDERTAKEN OR PROPOSED

Ongoing consultation and engagement has taken place as set out in this report.

13. FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

There are no direct financial implications arising from this report.

14. LEGAL AND STATUTORY IMPLICATIONS

Any legal or statutory implications are addressed in the report and for the purposes of this report there are no further comment.

15. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

Health equity is a key focus of Merton Health and Wellbeing Strategy and is integral to the work set out in this report.

16. CRIME AND DISORDER IMPLICATIONS

None for the purposes of this report.

17. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

None for the purposes of this report.

18. BACKGROUND PAPERS

[Merton Health and Wellbeing Strategy 2019-2024](#)

[Merton Local Health and Care Plan summary 2022-24](#)

[Merton Story 2021](#)