

HEALTH & WELL-BEING BOARD (CROYDON)

To: Elected members of the council:

Councillors Patricia HAY-HUSTICE, Yvette HOPLEY, Maggie MANSELL (Chair), Margaret MEAD (Vice-Chair), Callton YOUNG

Officers of the council:

Paul GREENHALGH (Executive Director of People)
Rachel FLOWERS (Director of Public Health)

NHS commissioners:

Dr Agnelo FERNANDES (NHS Croydon Clinical Commissioning Group) (Vice-Chair)
Dr Jane FRYER (NHS England)
Paula SWANN (NHS Croydon Clinical Commissioning Group)

Healthwatch Croydon

Charlotte LADYMAN (Healthwatch Croydon)

NHS service providers:

Zoe REED (South London & Maudsley NHS Foundation Trust)
John GOULSTON (Croydon Health Services NHS Trust)

Representing voluntary sector service providers:

Helen THOMPSON (Croydon Voluntary Sector Alliance)
Sara MILOCCO (Croydon Voluntary Action)
Nero UGHWUJABO (Croydon BME)

Representing patients, the public and users of health and care services:

Stuart ROUTLEDGE (Croydon Charity Services Delivery Group)
Karen STOTT (Croydon Voluntary Sector Alliance)

Non-voting members:

Lissa ANDERSON (London Probation Trust (Croydon))
Ashtaq ARAIN (Faiths together in Croydon)
Des CONNORS/Claire ROBBINS (Metropolitan Police)
Sally CARTWRIGHT (London Fire Brigade)
Adam KERR (National Probation Service (London))
Andrew McCOIG (Croydon Local Pharmaceutical Committee)

A meeting of the **HEALTH & WELL-BEING BOARD (CROYDON)** will be held on **Wednesday 8th June 2016 at 2:00pm**, in **The Council Chamber, The Town Hall, Katharine Street, Croydon CR0 1NX**.

GABRIEL MacGREGOR
Acting Council Solicitor and Acting
Monitoring Officer
London Borough of Croydon
Bernard Weatherill House
8 Mint Walk, Croydon CR0 1EA

MARGOT ROHAN
Senior Members Services Manager
(Democratic Outreach)
(020) 8726 6000 Extn.62564
margot.rohan@croydon.gov.uk
www.croydon.gov.uk/agenda
31 May 2016

Members of the public have the opportunity to ask questions relating to items on this agenda of the Health & Wellbeing Board, either in advance or at the meeting, at the discretion of the chair.

Written questions should be addressed to Margot Rohan, Democratic Services & Scrutiny, Bernard Weatherill House, 4th Floor Zone G, 8 Mint Walk, Croydon CR0 1EA or email: margot.rohan@croydon.gov.uk

Questions should be of general interest, not personal issues. Written questions for raising at the meeting should be clearly marked.

Other written questions will receive a written response to the contact details provided (email or postal address) and will not be included in the minutes.

There will be a time limit for questions which will be stated at the meeting.

Responses to any outstanding questions at the meeting will be included in the minutes.

AGENDA - PART A

1. Appointment of Chair and Vice-Chairs and Constitution of the Health & Wellbeing Board

To appoint Chair and Vice-Chairs and to appoint constituent bodies to the Board.

2. Minutes of the meeting held on Wednesday 13th April 2016 (Page 1)

To approve the minutes as a true and correct record.

3. Apologies for absence

4. Disclosure of Interest

In accordance with the Council's Code of Conduct and the statutory provisions of the Localism Act, Members and co-opted Members of the Council are reminded that it is a requirement to register disclosable pecuniary interests (DPIs) and gifts and hospitality in excess of £50. In addition, Members and co-opted Members are reminded that unless their disclosable pecuniary interest is registered on the register of interests or is the subject of a pending notification to the Monitoring Officer, they are required to disclose those disclosable pecuniary interests at the meeting. This should be done by completing the Disclosure of Interest form and handing it to the Business Manager at the start of the meeting. The Chairman will then invite Members to make their disclosure orally at the commencement of Agenda item 4. Completed disclosure forms will be provided to the Monitoring Officer for inclusion on the Register of Members' Interests.

5. Urgent Business (if any)

To receive notice from the Chair of any business not on the Agenda which should, in the opinion of the Chair, by reason of special circumstances, be considered as a matter of urgency.

6. Exempt Items

To confirm the allocation of business between Part A and Part B of the Agenda.

7. Strategic Items:

'Together for Health' - prevention, self-care, self-management and shared decision making (Page 9)

The presentation of the Chief Officer of Croydon Clinical Commissioning Group is attached.

The Healthwatch Croydon report is also attached, with an appendix covering Self Care.

8. Community Strategy (Page 41)

The report of the Chief Officer of Croydon's Clinical Commissioning Group, the Chief Executive of Croydon Health Services NHS Trust and Croydon Council's Executive Director of People is attached.

9. Business Items:

South West London Sustainable Transformation Plan (Page 89)

The presentation of the Chief Officer of Croydon's Clinical Commissioning Group is attached.

10. Food Flagship annual report (Page 119)

The report of the Director of Public Health is attached.

11. Heart Town annual report (Page 125)

The report of the Director of Public Health is attached.

12. Report of the chair of the executive group (Page 145)

The report of the Chair of the Executive Group is attached, covering the Work Programme and Risk Summary

13. Public Questions

For members of the public to ask questions relating to items on this agenda of the Health & Wellbeing Board meeting.

Questions should be of general interest, not personal issues.

There will be a time limit of 15 minutes for all questions. Anyone with outstanding questions may submit them in writing and hand them to the committee manager or email them to: Margot.Rohan@croydon.gov.uk, for a written response which will be included in the minutes.

14. The following motion is to be moved and seconded as the “camera resolution” where it is proposed to move into part B of a meeting

That, under Section 100A(4) of the Local Government Act, 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information falling within those paragraphs indicated in Part 1 of Schedule 12A of the Local Government Act 1972, as amended.

AGENDA - PART B

None

HEALTH & WELL-BEING BOARD (CROYDON)
**Minutes of the meeting held on Wednesday 13th April 2016 in The Community
Space, Bernard Weatherill House, 8 Mint Walk, Croydon CR0 1EA**

Present: **Elected members of the council:**
Councillors Maddie HENSON (deputising for Councillor
FLEMMING), Yvette HOPLEY, Maggie MANSELL (Chair), Margaret
MEAD (Vice-Chair), Louisa WOODLEY

Officers of the council:
Steve MORTON (Head of Health and Wellbeing)
Mark FOWLER (Director of Gateway and Welfare Services)

NHS commissioners:
Dr Agnelo FERNANDES (NHS Croydon Clinical Commissioning
Group)

Paula SWANN (NHS Croydon Clinical Commissioning
Group)

Healthwatch Croydon
Charlotte LADYMAN (Healthwatch Croydon)

NHS service providers:
John GOULSTON (Croydon Health Services NHS Trust)

Representing voluntary sector service providers:
Sara MILOCCO (Croydon Voluntary Action)
Helen THOMPSON (Croydon Voluntary Sector Alliance)

**Representing patients, the public and users of health and care
services:**
Stuart ROUTLEDGE (Croydon Charity Services Delivery Group)
Karen STOTT (Croydon Voluntary Sector Alliance)

Non-voting members:
Ashtaq ARAIN (Faiths together in Croydon)
Andrew McCOIG (Croydon Local Pharmaceutical Committee)
Claire ROBBINS (Metropolitan Police)

Absent: Councillor Alisa FLEMMING, Lissa ANDERSON (London Probation
Trust (Croydon)), Sally CARTWRIGHT (London Fire Brigade), Des
CONNORS (Metropolitan Police), Rachel FLOWERS (Croydon
Council), Dr Jane FRYER (NHS England), Paul GREENHALGH
(Croydon Council), Adam KERR (National Probation Service
(London)), Zoe REED (South London & Maudsley NHS Foundation
Trust (SLaM)), Nero UGHWUJABO (Croydon BME)

Apologies: Councillor Alisa FLEMMING, Des CONNORS (Metropolitan Police),
Rachel FLOWERS (Croydon Council), Dr Jane FRYER (NHS
England), Paul GREENHALGH (Croydon Council), Zoe REED
(South London & Maudsley NHS Foundation Trust (SLaM)), Nero
UGHWUJABO (Croydon BME)

A12/16 MINUTES OF THE MEETING HELD ON WEDNESDAY 10TH FEBRUARY 2016

The minutes of the meeting held on 10th February 2016 were agreed as an accurate record.

A13/16 DISCLOSURE OF INTEREST

There were no disclosures of a pecuniary interest not already registered.

A14/16 URGENT BUSINESS (IF ANY)

There was no urgent business.

A15/16 EXEMPT ITEMS

There were no exempt items.

A16/16 APPOINTMENT OF SECOND VICE-CHAIR

Paula Swann nominated, and Councillor Mansell seconded, that Dr Agnelo Fernandes be appointed the second vice-chair of the Health and Wellbeing Board.

The Board **RESOLVED** to appoint Dr Agnelo Fernandes as second vice-chair.

**A17/16 STRATEGIC ITEM
IMPROVING PEOPLE'S SATISFACTION WITH CARE: LEARNING FROM LOCAL BEST PRACTICE
• MATERNITY SERVICES**

Caroline Boardman and Ann Morling introduced this item with a presentation attached to the agenda.

Ensuring a positive user experience is a key priority for Maternity services. There are a number of key deliverables in achieving this outcome, including the numbers and quality of staff recruited as well as continuing to measure quality. The Friends and Family test provides important feedback data and comments received are captured for further action. Unique methods are being used to gather feedback such as a recent event that involved playing a board game to generate feedback which was then displayed by an artist's mural.

The profile of women in Croydon is very challenging, for example a high number of asylum seekers who may not be previously registered. The Birth Centre had recently been refurbished and was an excellent new facility.

It is important to promote choice in relation to births, for example creating awareness that home births are a safe option. Individualised care and the increased involvement of men were both important ways of continuing to increase quality.

In response to questions from the Board the following was reported:

- CTG is a method used to measure a baby's heartbeat and VBAC is reference to Vaginal Birth After Cesarean.
- John Goulston stated that there was a national issue over still births – of which rates have not changed for 25 years. However it should be noted that the rate of still births in Croydon had gone down by 50% and were thus bucking the national trend. There is a growth assessment programme in Croydon which monitors the baby's development in the womb; this enables early intervention were complications arise.
- Maternity services booklets are only printed in English; no requests have been received for translations however there is scope for this on the website. As there are such a large number of languages spoken in the borough is not feasible to make all such literature available.
- There is social and medical complexity in Croydon, particularly with regard to safeguarding issues. There are specialist teams in place to support particularly vulnerable women and to deal with particular medical complexities such as women suffering diabetes.
- The Trust has piloted a health care assistant whose key role is to help prompt discharge after birth. The postnatal ward is very busy and the pilot has thus far been a success.
- Women have a choice as to where to give birth, including whether that be in the labour ward or at the birth centre.
- There is a challenge with regard to late registration of women and there is a high rate of missed appointments for first check-ups. This is being addressed through a poster campaign and a direct booking system on the website.
- There was close collaboration with Best Start and maternity services play an important role in this programme.
- An outreach strategy is being formulated to go out into the community to engage with different sections of the BME community
- Dr Agnelo Fernandes commented that the maternity services is an example of a success story in Croydon. Now the reputation of the service needed to be improved, particularly for residents in the south of the borough.

The Board **NOTED** the report.

A18/16

**BUSINESS ITEMS
FINAL CCG OPERATING PLANS 2016/17**

Paula Swann introduced the report with a presentation attached to the agenda.

The Operating Plans must align with the south London transformation plan and the Health and Wellbeing Board priorities. The plan must account for national and London priorities, as well as local strategy in Croydon.

There are six GP networks in place to deal with the diversity of challenges across Croydon and each of these networks has key priorities. The national priorities are mainly performance related however the local priorities include implementation of Outcomes Based Commissioning and the urgent care strategy.

The presentation slides highlight a lot of key information regarding priorities for learning disabilities, dementia care, diabetes and obesity. The targets for Improving Access to Psychological Therapies (IAPTS) have been achieved which is a significant success.

In response to questions from the Board it was stated that the transition from child mental health services to adult mental health services is being looked into as part of the strategy.

The following comments were made:

- A member of the public questioned why the issue of the north and south health divide in Croydon was not addressed in the plan.
- Councillor Mansell responded that there was not a geographical divide as such; health disparities occur on a ward by ward basis.
- Councillor Woodley stated that the most recent Annual Public Health reported touched on the north/south health disparities. There is not a clear geographical divide – New Addington is an example of a ward with high levels of deprivation but not situated in the north of the borough. Whilst an overall strategy is important, a targeted approach is needed for hard to reach areas.

The Board **NOTED** the report and **AGREED** that the Operating Plans presented were aligned with the joint health and wellbeing strategy.

A19/16

**HEALTH AND SOCIAL CARE INTEGRATION: BETTER CARE
FUND AND TRANSFORMING ADULT COMMUNITY SERVICES**

Paula Swann introduced the item. It was stated that there was a requirement for the Better Care Fund (BCF) plan to be signed off by the Board. Much of the plan builds on the previous one and includes

a number of services such as rapid response GP teams, personal care coordination and multidisciplinary teams.

The original purpose of the BCF was to promote better integration locally and setting a number of associated targets, for example to reduce the number of hospital admissions. Those requirements are still in place and an important aspect is to commission more services in the community. There are local plans in place to further integrate health and social care by 2020.

- Andrew McCoig raised concern about the national picture with regards to underfunding and the effect this is having on staff shortages and the current service being at full stretch.
- John Goulston responded that current staff shortages were caused by NHS workforce planning seven years ago which wrongly predicted staffing needs. The agency staff that are now being hired to cover the staffing gaps are causing considerable expense.
- Dr Agnelo Fernandes added that there is additionally a funding crisis within the NHS – most Trusts are in deficit and recruitment of GPs, doctors and nurses is very challenging. However Croydon is achieving significant outcomes despite the challenges faced.
- Councillor Woodley expressed concern that the rhetoric from central government did not reflect the true scale of recruitment needed in the service.
- Councillor Mansell acknowledged that Croydon appears to be moving in the right direction and recognised the professionalism of the staff involved.

The Board **RESOLVED** to:

1.1 Give delegated authority to the Health & Wellbeing Executive to approve Croydon's 2016/17 BCF plan.

1.2 Note the status of BCF delivery.

1.3 Note the progress of TACS implementations

A20/16

PEOPLE GATEWAY - HOUSEHOLD INCOME AND CHILD POVERTY

Mark Fowler introduced the report, which was an update on the paper that had recently been submitted to Cabinet. One of the key elements of the gateway is financial inclusion and how to improve independence and wellbeing in the long term. Improving the digital programme has been a priority and went to scrutiny on 12th of this month. The Council's involvement with the Credit Union is also key for tackling poverty.

The outcomes of the gateway have included connecting with a large

number of customers and providing overall financial stability. In total 347 households have been supported and this includes home visits and identifying children entitled to free school meals. Additionally a number of London Living Wage contracts are coming through and there is a significant opportunity to expand the programme with the Westfield Hammerson development.

In response to questions, the following was reported:

- The Job Centre Plus (JCP) can and does refer people to the gateway service.
- Referrals can be made by anyone and the next phase will be to promote the gateway to GPs.
- It is not yet clear what effect the introduction of universal credit will have on free school meals.
- The social care department is being worked with to see how the gateway can support their work, for example through acting on the Southwark judgement order.

The following comments were raised:

- Charlotte Ladyman stated that feedback from some children was that there was a stigma attached to free school meals.
- Councillor Woodley responded that many schools now use a contactless payment system and thus this anonymised who was in receipt of free school meals. Councillor Woodley further stated that a Parliamentary Select Committee had recently visited the gateway team and were impressed with the scheme.
- Dr Agnelo Fernandes stated that as a GP we was not aware of the gateway and that the workload GPs receive in relation to these issues has gone up. The gateway collaboration with GPs was very welcome therefore.

The Board **NOTED** the report.

A21/16 REPORT OF THE CHAIR OF THE EXECUTIVE GROUP

Steve Morton introduced the report.

The Board **RESOLVED** to:

- 1.1 Note risks identified at appendix 1.
- 1.2 Agree the board work plan for 2016/17 at appendix 2.
- 1.3 Consider performance issues identified in the report at appendix 3 and summarised at paragraph 3.5.

A22/16 PUBLIC QUESTIONS

There were no public questions.

Councillor Louisa Woodley announced that there is free online training on autism available from the Council website:
https://croydon.melearning.university/course_centre

A23/16

FOR INFORMATION ONLY

Croydon Advertiser article covering Healthwatch Child Autism event on 15 March 2016

This was noted for information only.

The meeting ended at 4:10pm

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TOGETHER FOR HEALTH?

Presentation to
The Croydon Health And Wellbeing Board
8 June 2016

Dr Emily Symington, GP and Darzi fellow
Jimmy Burke, Senior Commissioning Programme Lead



TOGETHER FOR HEALTH?

We will cover:

1. The drivers
2. The policy context
3. An understanding of PSSSD
4. Work to date
5. Work to do
6. Risks and challenges
7. Opportunities
8. **A FREE takeaway!**



Previously discussed at HWBB 12 June 2013



Croydon CCG Prevention, Self Care and Shared Decision Making (PSS) Strategy



Longer, healthier lives for all the people in Croydon



Croydon Clinical Commissioning Group

In a nutshell...



A programme that seeks to **improve population outcomes and experience** as well as creating conditions for a more **financially sustainable local healthcare system**. It achieves this through actively **promoting and encouraging prevention, self-care, self-management and shared decision making (PSSSD)** among the population to **increase independence and responsibility** around health

Our local status

Three out of every five people aged over 60 suffer from a long term condition taking half of all GP appointments and nearly 2/3 of planned hospital appointments

18% of people attending Croydon Urgent Care Centre in 2012/13 got advice only

Well over half of Croydon adults were overweight or obese

A 9-year life expectancy gap exists between Croydon's best and worst wards



18% of all GP consultations are unnecessary

Nearly a quarter of Croydon children in Reception and over a third in Year 6 were either overweight or obese

Well over a quarter of adults are physically inactive

Croydon has around 20,000 people diagnosed as diabetic, costing the CCG around £123m per year

NHS in England reveals £2.45bn record deficit

NHS financial experts say true scale of overspend is even higher but has been hidden by use of 'accounting tricks'



The majority of NHS trusts are in the red, reviving claims the government is not providing enough funding to meet demand. Photograph: Peter Byrne/PA

The [NHS](#) in England has run up a record deficit of £2.45bn - the biggest overspend in its history - as it struggles to cope with a surge in demand for care while suffering a major budget squeeze.

Official figures released on Friday by NHS Improvement showed that NHS trusts in England, which predominantly run hospitals, ended the 2015-16 financial year £461m worse than the organisation had forecast. The combined deficit is almost three times bigger than the £822m overspend incurred the year before, and more

NATIONAL NEWS

- NHS deficits
- Underfunded social care
- Rising demand

“2016/17 will be a watershed year for the NHS – eradicating deficits and improving performance is going to be a Herculean challenge”

John Appleby, chief economist at the King's Fund

1. We have an unsustainable burden

2. Together for Health is about using our resources more effectively

3. Together for Health also improves outcomes and satisfaction too!

4. Even if money were no object Together for Health would be the right thing to do



Policy Context

- Five-year forward view
- CCG operating plan 2016-17
- Croydon Joint Health and Wellbeing Strategy
- Croydon Sustainability and Transformation Plan



PSSSD principles



Prevention is better than cure but...

When someone does become ill they are better able to manage their illness and...

When a person does need treatment they are seen in the right place at the right time and...

There is a shared decision making between the patient and the health professional.

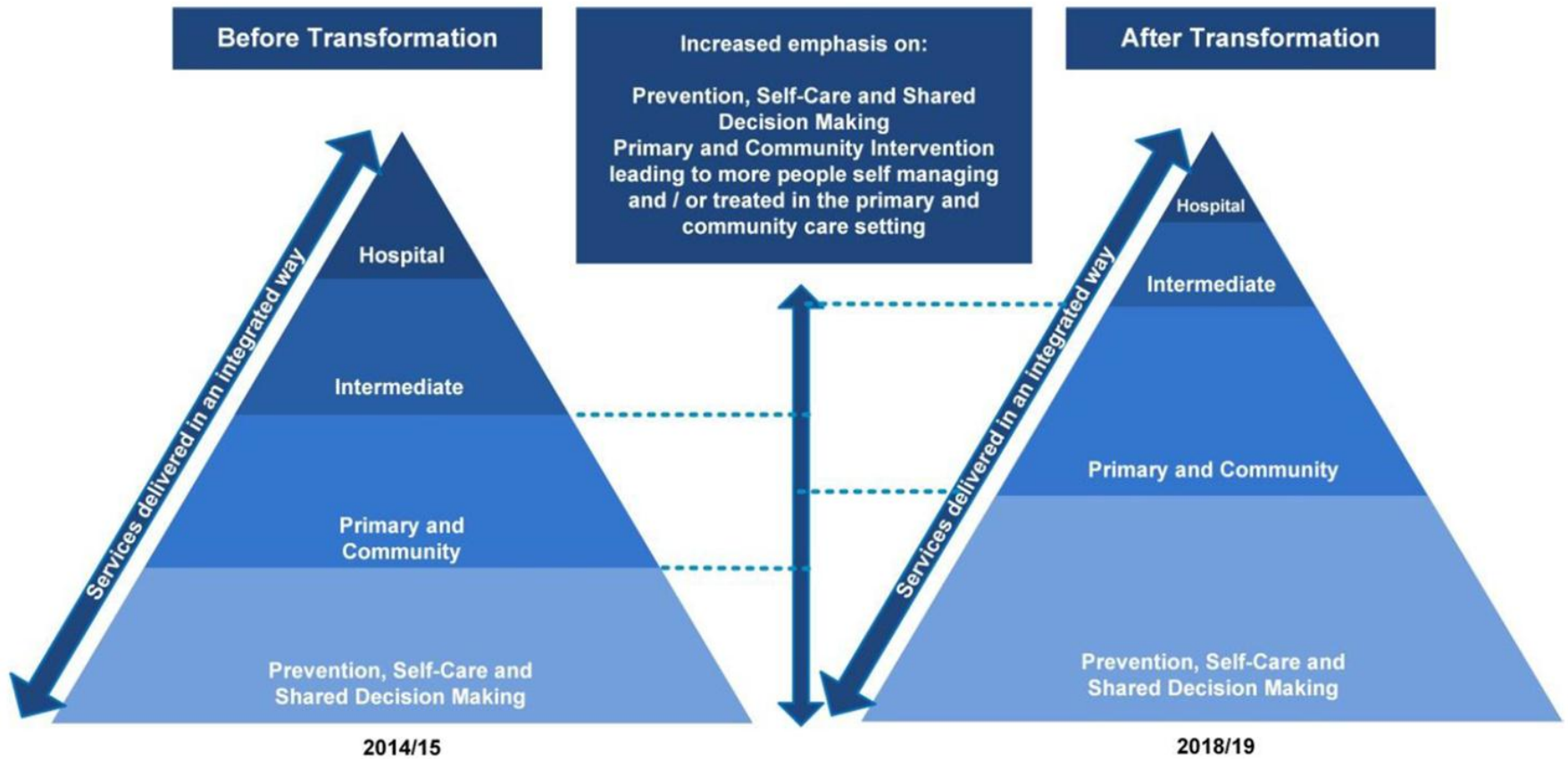
PSSSD is

Prevention: residents and patients are supported and provided with the necessary knowledge and resources they need to take responsibility for their own health, stay healthy and reduce the risk of disease in the future

Self care: People who need treatment in Croydon know the appropriate place to go, whether that is their pharmacy, GP practice, A&E department, urgent care centre or caring for themselves at home, so they can get the right treatment, in the right place at the right time.

Self management: patients with a long term condition have the support, knowledge and tools they need to manage their condition and make lifestyle changes that will improve their wellbeing

Shared decision making: patients who need to make choices about their healthcare have the support and information they need so they can make decisions with their GP that are best for them



A rebalanced system

How are we going about this?

- Training and education for local clinicians and the wider healthcare workforce
- A communication and engagement strategy for developing awareness among the local population
- A number of theme-areas for focused work including
 - Diabetes
 - Muscular-skeletal (MSK)
 - Respiratory conditions
- Asset Based Community Development with CVA



One service user said:

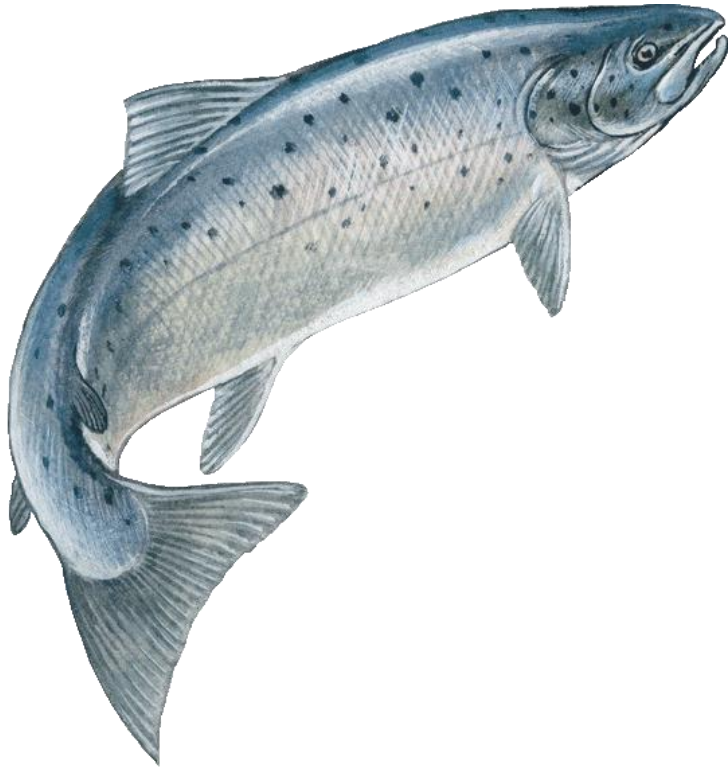
“Many people I spoke to have stopped going to their GP every time they get a headache or cramps because they are getting support from other people at the groups they are attending and now get less stressed and feel less ill.”

Current projects underway

- Prevention
 - Staff health and wellbeing initiative
- Self-care
 - Health Help Now digital solution for self-care
 - Articles in the Croydon Guardian and other local publications
- Self-management
 - GP group consultations with up to 15 patients in a single consultation
 - Structured 12-week education pilots for people with long term conditions
 - Pathway analysis using experience based co-production event at Croydon University Hospital
- Shared decision making
 - Working with CVA to enhance a shared decision making culture in GP practices, co-produced with the local community
- PSSSD training for commissioners
- Disease specific interventions



Risks and challenges



- Upstream investment – out of our comfort zone
- Outcomes framework to help us measure success
- Culture change for clinicians and patients – a different kind of NHS
- Clinical leadership with genuine public and patient involvement – the leader ‘being the change’

Overarching programme outcomes and process indicators, spanning prevention, self-care, self-management, and shared decision making

Outcome Domain	Outcome Description ('I' statements)	Long-term Outcome Measures	Process Indicators
Prevention	I adopt healthy behaviours: I stop smoking, I consume alcohol sensibly, I am physically active, I have a healthy weight and I eat a balanced diet.	Smoking prevalence (18 y/o plus)	Number of people referred to stop smoking service
		Obesity prevalence (16 y/o plus)	Number of people referred to weight management service
		Binge drinking prevalence / hospital admissions for alcohol related conditions	Number of people offered IBA / Number of Don't Bottle It Up website hits
		% active adults	Number of people referred to MI Change
		5 a day fruit and vegetables	Number of people referred to Integrated Healthy Lifestyles Service (IHLS)
Self-care	I take care of myself when I have symptoms such as sore throats, coughs; I use OTC products appropriately; I know how to manage minor ailments; and I use pharmacy, GP, urgent care and A&E services appropriately.	Healthy Life Expectancy	<i>Percentage of people that received an NHS Health Check of those offered</i>
			Number of people who report positive health outcomes from use of digital apps
		Know how to contact an out of hours GP service	Number of people accessing PSSSD information and advice
		Self-reported bad or very bad health	Number of people reporting use of pharmacy (before their GP)
		One or more long term	

Opportunities:

- Addressing wider determinants of health – Livewell service
- Promote prevention and self-care through the local authority and schools
- Collaborative working across Croydon – Outcomes Based Commissioning
- Nudging using behavioural economics

Your take away...



or



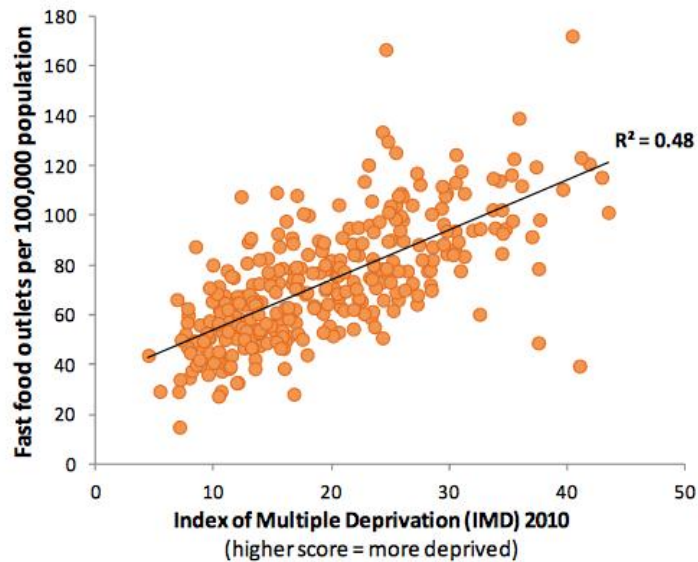
In the next week:

Please provide us with a named contact in your organisation who we can keep in the loop for Together for Health

Obesity and the environment

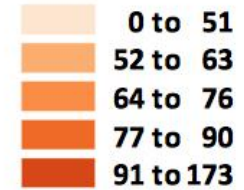
Fast food outlets

Relationship between density of fast food outlets and deprivation by local authority



Fast food outlets

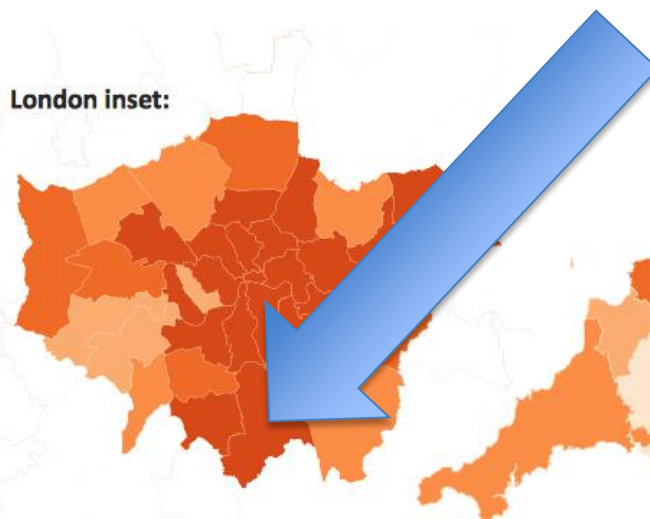
by local authority
per 100,000 population



England value
per 100,000 population

77.9

London inset:



TOGETHER FOR HEALTH

Did we cover?:

1. The drivers
2. The policy context
3. An understanding of PSSSD
4. Work to date
5. Work to do
6. Risks and challenges
7. Opportunities
8. **A FREE takeaway!**



TOGETHER FOR HEALTH

Thank you

For more information contact:

Jimmy.Burke@croydonccg.nhs.uk
emily.symington@nhs.net



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REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) 8 June 2016
AGENDA ITEM:	7
SUBJECT:	Healthwatch Croydon Report
BOARD SPONSOR:	Charlie Ladyman, CEO, Healthwatch Croydon
BOARD PRIORITY/POLICY CONTEXT:	
<ul style="list-style-type: none"> the joint health and wellbeing strategy – self-care and self-management www.croydonobservatory.org/Strategy_Health_and_Social_Care/ understand the community's expressed wants and choices and to ensure that ongoing engagement with the public is maintained and views and opinions considered and actioned where appropriate Prevention, self-care and self-management 	

1. RECOMMENDATIONS

- 1.1 This report is for information only. The Health and Wellbeing Board is asked to note the contents of the report.

2. EXECUTIVE SUMMARY

Healthwatch Croydon's role is to promote and support the involvement of local people in the commissioning of local services. Healthwatch Croydon obtained the views of local people regarding their needs for self-management, and experiences of local services. The overarching aim is to reduce health inequalities in Croydon, and ensure the public's voice is considered when designing services and empowered to make choices for their own health.

3. DETAIL

The Board's core functions are to:

- bring together needs assessment in relation to health, social care and broader wellbeing;
- use assessment of need to agree joint priorities;
- promote integration (both in commissioning and service delivery) and,
- promote the involvement of the public in the commissioning process.

CONTACT OFFICER: Darren Morgan, Community Analyst,
Darren.morgan@healthwatchcroydon.co.uk, 020 8663 5635,
<http://www.healthwatchcroydon.co.uk/impact>

BACKGROUND DOCUMENTS Trends analysis report of the views of local people regarding their needs for, and experiences of prevention, self-care and self-management.

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Trends Analysis Report

Self-Care/Self-Management

ABOUT THIS REPORT

Healthwatch Croydon has analysed the experience of self-care and self-management services.

The Coding

Service user comments have been coded using a nationally recognised coding matrix, which applies issue, care pathway location, and (positive, neutral or negative) sentiment.

Quality assurance of coding is ensured through the Healthwatch Croydon Patient Experience Panel.

The Care Pathway

Care Pathway locations are Transport (ability to get to-and-from services), Reception (reception services including back-office), Diagnosis/Testing (diagnosis of condition, including testing and scans), Clinical Treatment (treatment received by trained clinicians), Clinical Nursing (care received by trained nurses), Discharge (discharge from a service), Follow On (supplementary services following discharge, including care packages), Community (community based services, such as social care, district nursing and community mental health).

Disclaimer

The trends within this report are based on service user comments we have obtained from sources outlined in Section 1. Comments obtained from these sources may not be representative of all service users experiences or opinions.

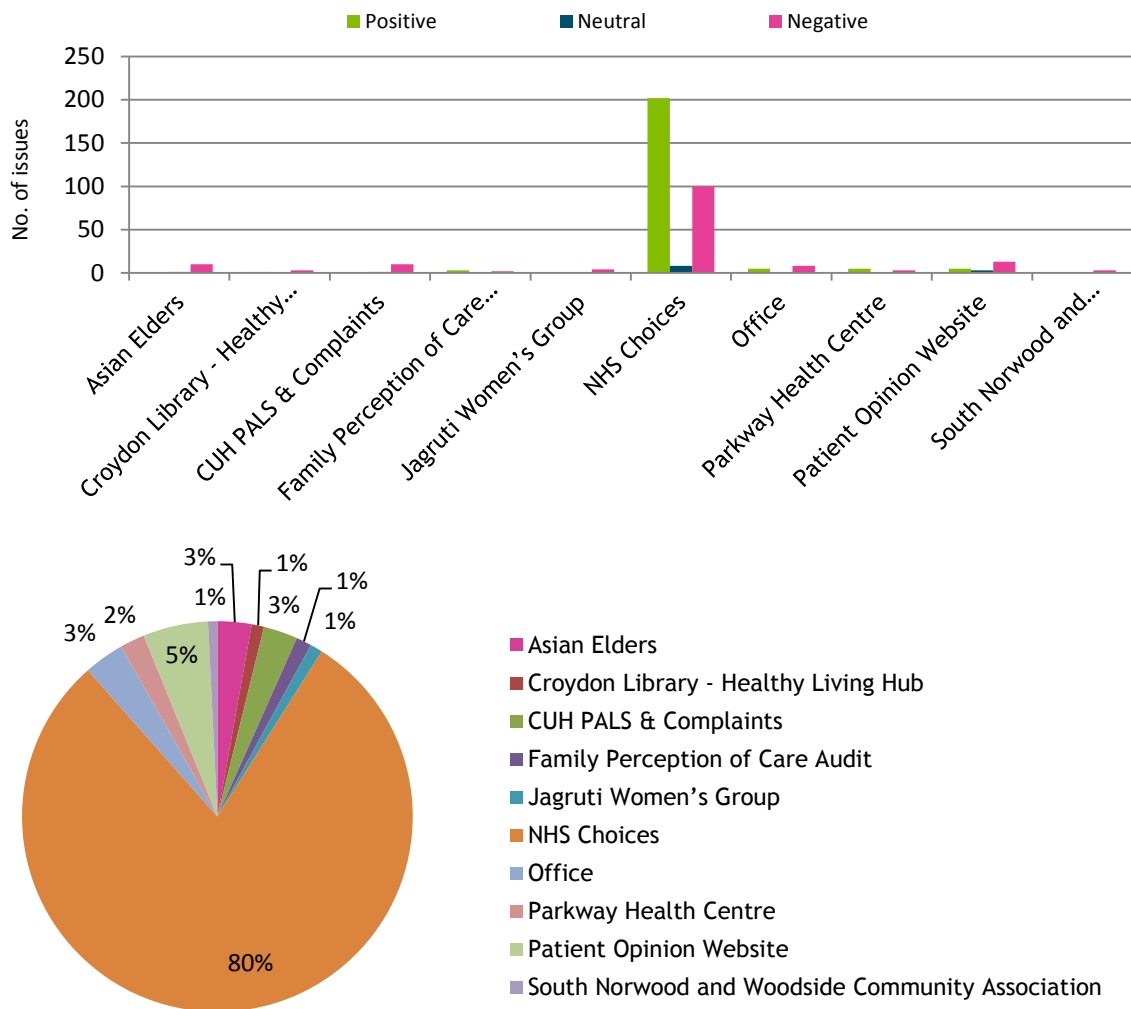
SECTION 1: REPORT CONTENT

Healthwatch Croydon has identified 410 issues during the period below:

1.1: Reporting Period: From: 01/01/2015
To: 26/05/2016

This report identifies the data origin (Section 1.2), the top trends (Section 2) and provides selected comments (Section 3).

1.2: Top Data Origin



The Data in this Report

80% of the service user comments originate from NHS Choices, with the remainder from Healthwatch Croydon activity.

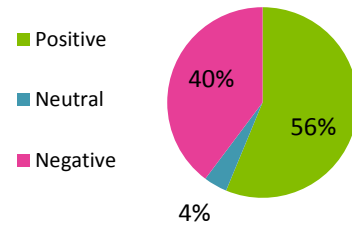
Please note that comments obtained from these sources may not be representative of all service users experiences or opinions.

Report Date: 26/05/2016

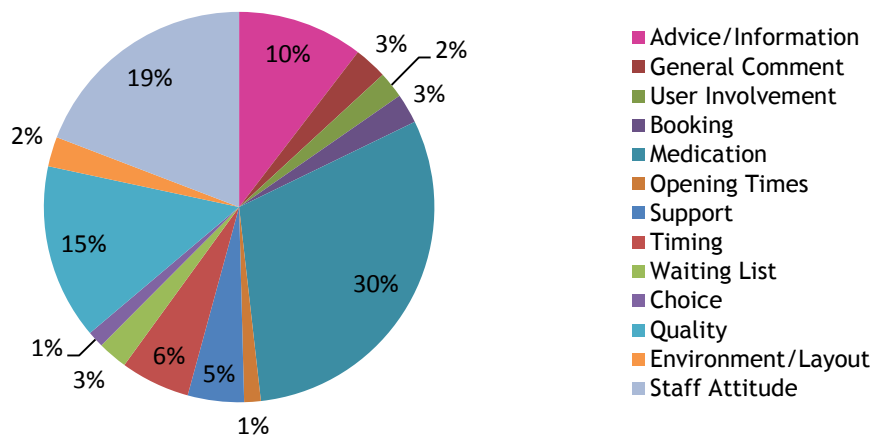
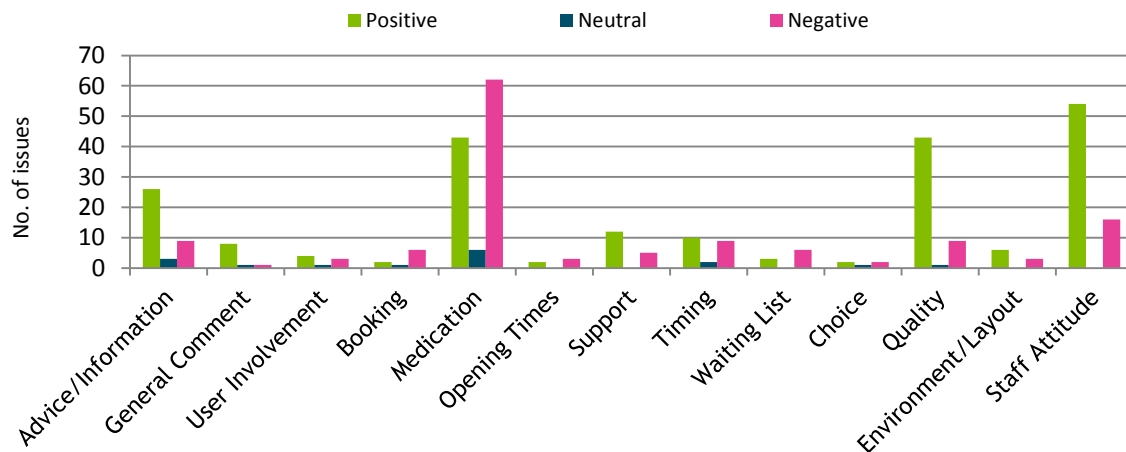
SECTION 2.1: TOP OVERALL TRENDS

2.1.1 Sentiment:

According to the comments, the overall sentiment as a whole is 56% positive.



2.1.2 Top Trends

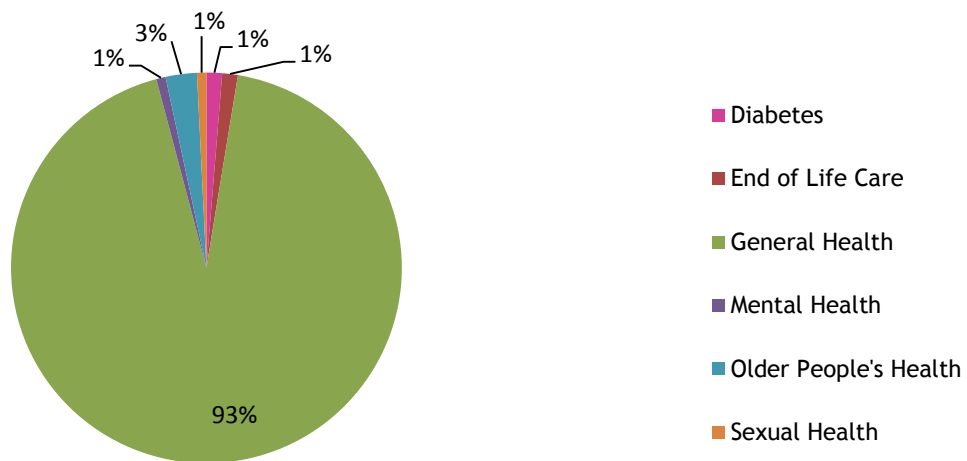
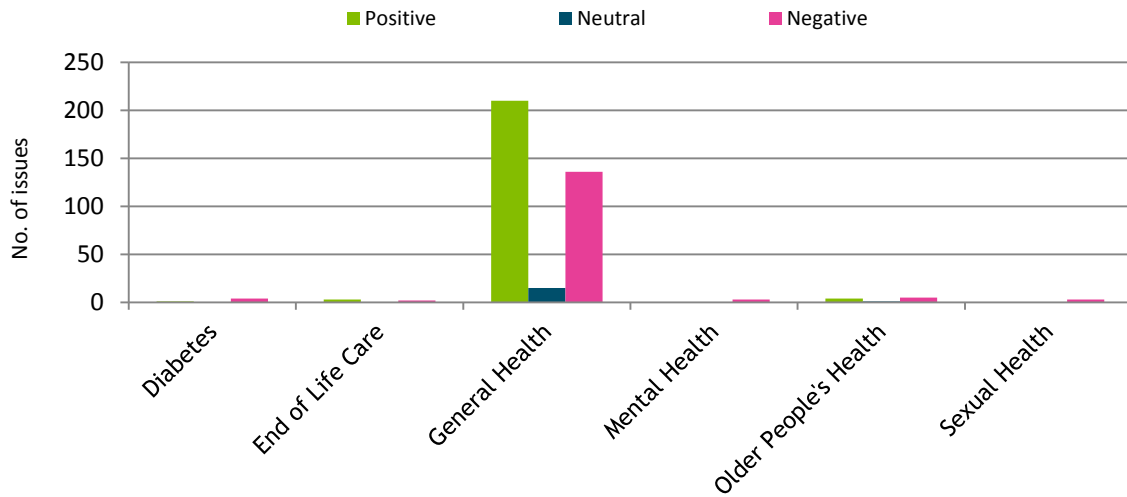


Trends to Watch:

When receiving self-care, many people express satisfaction (particularly about Pharmacists) on the Quality of service, Staff Attitude, and Advice/Information received. On Medication, patients say their GP's and Pharmacists could 'work more closely together', as the system is 'not always coherent', resulting in inconvenience and delays.

SECTION 2.2: TOP OVERALL TOPIC

2.2.1 Top Topic



Trends to Watch:

The vast majority of people did not describe their medical condition. Of those that did, most were about Older People's Health.

SECTION 3: SELECTED COMMENTS

1. Lack of dignity when seeking emergency contraception...

"Came in today seeking emergency contraception, asked to speak to someone in private and was told to enter a side room with who I can only assume is the pharmacist. Explained my situation and found them to be abrupt, insensitive, full of attitude and generally unhelpful. I left with no morning after pill and no advice as to what else I can do."

Sensitivity is paramount on matters of sexual health, otherwise people will be discouraged from seeking help.

2. Longer opening hours would be good...

"I use the pharmacy for my repeat prescriptions, and unlike the large chain I used to use, the service has been excellent, they always have my prescription ready for me, the staff are friendly and helpful. If I had to moan, it would be nice if they opened at 8:30am one day a week so I could pop in before work, but it's possible there would be very low demand for this. I've also been caught out by their half day opening on a Saturday."

Early morning opening would benefit working people.

3. Pharmacists are much more accessible than GP's...

"Helpful people to an old man. I am a man of 82 years of age. I visit Shirley Pharmacy regularly for medicine and advice. I find the pharmacists very accessible. It takes two/three weeks to see my GP. It only takes 2 minute to get help and information from my pharmacist. All the other members of staff are helpful too."

The accesibility advantage of pharmacists generally over GP's could be publicised.

4. Inconsistencies with medication packaging...

"Doctors are good, but I only go to one doctor, and so it is difficult to get a doctor with over a week's wait. The pharmacy gives out the same repeat prescription, but in different packaging, need for consistency at pharmacy or better communication that it is the same medication in different packaging."

Consistency is always a desirable thing.

5. The GP and pharmacist need to talk more...

"Friends Road medical centre provides a very good service. However, I feel that more communication is needed between the GP and pharmacy."

Working practice between pharmacists and GP's could be strengthened.

SELECTED COMMENTS CONTINUED

6. Language barriers...

"Staff attitude at this GP surgery is very bad. The receptionist was very rude to my elderly friend who requires an interpreter. Both the GP and pharmacy complain about the language barrier, as her elderly friend does not know how to take her medication when English is not her first language. The barriers that elderly polish people face is with language translation in health and social care services."

Language barriers may deter people from accessing services.

7. Pharmacy coverage....

"There's no pharmacy in Broad green and it's a 'long long walk' to get to one!"

Why is there a geographical inconsistency in coverage in the borough?

8. Accuracy of information...

"Wife was told that Boots Pharmacy and Tesco Purley Pharmacy are both 24 hour services, but they aren't. Husband asks that we (CUH PALS) instruct staff not to direct people to these services."

NHS providers are issuing inaccurate information - how is this reviewed?

9. Do more to emphasize the positives...

"A number of key themes emerged at a Healthwatch Public Meeting, one of which was provision of information. In respect of encouraging people to use 999 (indeed A&E) only in emergencies, evidence shows that advertising campaigns such as 'Choose Well' have actually resulted in increased usage. There is a clear public duty to educate residents on pathways, so the marketing must continue, however we may need to use a more insightful approach, perhaps a more positive message that puts alternatives such as pharmacies and NHS 111 more prominently in the spotlight, rather than the negative 'don't do that' headline which has the opposite effect."

A positive advertising campaign may be successful.

10. When the system works, it works well...

"Exceptional service! The pharmacist is very helpful and professional, and automatically renews my prescription with my GP which saves me having to remember. The pharmacist then calls me when it's ready so I can collect it. Truly great service, would recommend to everyone."

Some providers appear to work together very well. Can there be learning from this?

11. How to provide information and signposting...

"We need somewhere to drop-in - places where you can get local information on cookery classes for people leaving home, nutrition, diet, weight checks, fitness classes, cooking on a budget, etc. I don't know of any such place."

Residents say there's 'too much reliance on the internet', and being able to drop-in somewhere for advice would help.

12. Managing expectations of anti-biotics...

"I have diabetes and come here often (to the GP) and I'm very pleased to see posters on display promoting self-care and lowering expectations of anti-biotics."

Self-care posters are being noticed, particularly at venues such as GP's, Walk-In Clinics and Urgent Care Centres. How can we measure how effective this is? Could the scheme be expanded (if not already) to cover public transport (including bus stops)?

13. Greater use of key workers...

"I know in other boroughs they have 'Personal Independence Co-Ordinators' who are key to unlocking non-medical support and encouraging greater self-care."

Does the borough have sufficient key worker provision (including Health Trainers and Social Prescribers)?

14. Assessing for self-care at A&E triage...

"We were in A&E for 5 hours - given a box of over-the-counter aspirins and sent back to our GP. If self-medication was deemed more appropriate, why didn't they tell us to begin with! What a waste of time - theirs and ours!"

At A&E, are patients assessed for self-care options on triage? Making patients wait, then advising self-care, seems inefficient.

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REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) 8 June 2016
AGENDA ITEM:	8
SUBJECT:	Croydon's Community Strategy
BOARD SPONSOR:	Paul Greenhalgh, Executive Director People and Paula Swann, Chief Officer, Croydon CCG
BOARD PRIORITY/POLICY CONTEXT:	
<p>The Community Strategy reflects the commitments set out in <i>Ambitious for Croydon</i> and through focussing the efforts of Local Strategic Partnership members will help to achieve the aim 'to achieve a stronger, fairer borough where no community is held back'. The Community Strategy will also focus the efforts of partner agencies to improve health and wellbeing outcomes and address health inequalities for Croydon residents, and to achieving the priorities and objectives set out in Croydon's Joint Health and Wellbeing Strategy, and emerging priorities aimed at transforming Croydon's health care services.</p>	
FINANCIAL IMPACT:	
<p>Costs associated with implementing the Community Strategy will be funded from existing budgets. The borough's Community Strategy seeks to take a more strategic view of the combined resources available and determine how best these are deployed and coordinated across Council services and partner organisations to achieve the maximum benefit at the lowest cost.</p>	

1. RECOMMENDATIONS

This report recommends that the health and wellbeing board:

- 1.1 Approve the draft Community Strategy 2016-21, Appendix 1 to this report and recommend its adoption by Cabinet and Full Council
- 1.2 Agree that the Health and Wellbeing Board adopt the Community Strategy as approved by Full Council, for delivery over the period 2016-21
- 1.3 Agree that the Executive Director People and the Chief Officer of Croydon CCG are authorised to make minor factual or presentational amendments to the Community Strategy response to feedback from engagement detailed below prior to approval by Full Council.

2. EXECUTIVE SUMMARY

- 2.1 Croydon's Community Strategy is the overarching strategy for the borough. It is the Council's most important strategic planning document and provides a framework for the work of all partner organisations within Croydon's Local Strategic Partnership (LSP) and the context for future strategies and plans in the borough. The LSP is organised into five partnership boards.



- 2.2 The new draft Community Strategy 2016-21, attached at Appendix 1, continues to draw on Croydon's long-term vision and the final report of Croydon's Opportunity and Fairness Commission. It is an ambitious plan for Croydon's residents that seeks to focus the efforts of local public sector, business, voluntary and community sector partners on Croydon's most pressing and important priorities for the next five years.
- 2.3 Croydon's Community Strategy is a partnership plan. Its role and purpose is to address difficult cross-cutting issues which affect the social, economic and environmental wellbeing of the area. Its purpose is not to repeat the contents of other key partnership and organisational strategies and plans, but rather to influence the future direction.
- 2.4 Two major challenges during the life of this Community Strategy are ensuring that the benefits of major investment in Central Croydon are enjoyed by local people and local businesses and the continuing substantial reductions in funding available to the public and voluntary sectors. The scale of these challenges makes it vital that there is a shared strategic response across Croydon which takes a proactive approach to promoting economic growth, enabling local people to take up employment opportunities, tackling increasing poverty; supporting vulnerable people and making communities engaged and resilient while protecting priority local services, improving efficiency and reducing costs.

3. DETAIL

- 3.1 The Community Strategy provides the strategic direction for Croydon's Local Strategic Partnership (LSP). It will be presented for endorsement by the relevant organisational boards and management teams of the LSP, including the Health and Wellbeing Board. Delivery of the strategy and performance will be reported to the LSP and to Cabinet on an annual basis.
- 3.2 Table 1 below sets out the partnership boards that make up the LSP and their respective strategies and plans. A review will be conducted of the partnership boards to ensure that they are delivering the strategy and adding value. Part of the review will include ensuring supporting strategies and plans are aligned with the Community Strategy.

Table One: LSP Partnership Boards and their Strategies and Plans

Partnership Board	Strategy/Plan	Approval/Review	Responsible Cabinet Member
Health and Wellbeing Board	Health and Wellbeing Strategy 2013-18	New strategy to be approved in December 2016	Cllr Louisa Woodley, Families, Health and Social Care; Cllr Alisa Flemming, Children, Young People & Learning
Stronger Communities Partnership	Stronger Communities Plan 2016-19	Approval due in July 2016	Cllr Hamida Ali, Communities, Safety and Justice
Children and Families Partnership	Children and Families Plan 2016-17	Approval due in June 2016	Cllr Alisa Flemming, Children, Young People & Learning
Growth Partnership Board	The Croydon Promise 2014	2014	Cllr Alison Butler (Deputy Leader), Homes, Regeneration & Planning
Safer Croydon Partnership	Safer Croydon Strategy 2016-17	New strategy being developed in 2016-17	Cllr Hamida Ali, Communities, Safety and Justice

- 3.3 The Community Strategy 2016–21 provides a framework for all agencies in Croydon to work together on a set out key goals and priorities aimed at addressing key challenges over the next five years. The LSP would expect that all of its partner agencies will take the appropriate measures to ensure the outcomes set out in this strategy are reflected in their corporate strategies and plans.
- 3.4 The Community Strategy is based on an analysis of local economic, social, health and environmental needs including Public Health England's Croydon Health Profile, the Joint Strategic Needs Assessment (JSNA) Core Dataset, and Croydon's Director of Public Health Annual Report. This analysis provides the evidence base for the borough's supporting strategies and plans, including Croydon's Local Plan which provides the framework to guide the work of partner organisations in our local strategic partnership (LSP) in delivering Croydon's long-term vision.

3.5 The Community Strategy sets out Croydon's partnership approach to reducing health inequalities, increasing healthy life expectancy, reducing and preventing long term conditions through prevention and early intervention, strengthening the resilience of people and families with complex needs, maintaining the independence of older people and people with disabilities, and safeguarding vulnerable adults and children. It also sets out how the together the LSP partner agencies will also tackle the wider determinants of health including poverty, deprivation, homelessness, and will support and enable children and adults to achieve their full potential and develop the resilience to life's inevitable challenges through improving education services, providing support and opportunities to access employment, and holistic support to families with complex needs.

3.5 The Community Strategy's three key objectives and the priorities are:

Objective One: A Place to Learn, Work and Live in

Partnership priorities:

- Deliver the infrastructure for growth
- Build new homes
- Support the local economy to grow
- Deliver a vibrant cultural offer
- Secure a safe, clean and green borough.

Objective Two: A Place of Opportunity for Everyone

Partnership priorities:

- Reduce poverty and deprivation
- Support individuals and families with complex needs
- Prevent homelessness
- Deliver better education and the opportunity to reach full potential
- Secure a good start in life, improved health outcomes and increased healthy life expectancy

Objective Three: A Place with a Vibrant and Connected Community and Voluntary Sector

Partnership priorities:

- Connecting our residents, local groups and community organisations
- Strengthen and mobilise our voluntary, community and social enterprise sector.

3.6 Croydon's LSP has identified a range of challenges for all agencies. These are addressed in the Community Strategy and include:

• **Business and Growth**

- Ensuring Croydon is promoted as a place for investment, economic growth and employment opportunity
- Ensuring that growth and regeneration provide opportunities for local people and small and medium sized businesses and areas outside the metropolitan centre

- Broadening our cultural offer to appeal to a wider range of people during the two year closure of Fairfield Halls for refurbishment, and the creation of a new cultural quarter in the next 2-3 years.
- **Unemployment**
 - Tackling areas of high economic inactivity in the borough
 - Tackling youth unemployment and lack of opportunities for people, especially those aged between 16 – 24 to be in education, training or employment.
- **Crime and anti-social behaviour**
 - Tackling violent crime, especially domestic abuse and sexual violence and serious youth violence
 - Tackling anti-social behaviour, including hate crime, and reducing the fear of crime
- **Deprivation**
 - Addressing deprivation experienced by people living in the borough, in particular in neighbourhoods in the north and in New Addington and Fieldway, and targeting available resources at achieving outcomes that make a real difference to the lives of local people with the greatest need.
- **Poverty and homelessness**
 - Tackling growing social and economic pressures, including low pay and food and fuel poverty
 - Reducing the number of children in poverty which remains high, even though the proportion of children in poverty is falling.
 - Tackling the lack of affordable housing, overcrowding and rising homelessness, and addressing the impact of measures in the housing and planning bill and the freeze in housing benefit
- **Attainment**
 - Ensuring vulnerable young children and our looked after children receive the support they need
 - Continuing to improve the proportion of pupils attaining level 4 in reading, writing and mathematics at Key Stage 2 (77%) which remains below the London average (82%)
 - Increasing the percentage of good or outstanding secondary schools and attainment of A level students in Croydon which are below the London average.
- **Health**
 - Reducing health inequalities across the borough including in life expectancy and excess weight in children and adults
 - Strengthening the resilience of people and families with complex needs such as poor mental and physical health and drug and alcohol problems
 - Maintaining the independence of older people and people with disabilities for as long as possible and safeguarding vulnerable adults and children.
- **Community cohesion**
 - Tackling social isolation, particularly among older and disabled people, carers and those with a long term illness
 - Addressing underlying causes that prevent communities from becoming cohesive and integrated

- Working more extensively with communities to enable them to come together to tackle shared challenges, support people to become more resilient and reduce reliance on local services

4. CONSULTATION

- 4.1 The draft Community Strategy is based on the facts and figures about the population and its needs found in the borough profile. It has evolved through a process of information gathering, discussion and debate amongst partner organisations, themed partnerships, communities and individuals. Key to the strategy's development has been an extensive consultation programme conducted in a range of ways. The findings of the Opportunity and Fairness Commission, which took place during 2015 and interacted with over 3,000 people and local businesses to investigate issues of poverty and inequality, shaped the Community Strategy as did the Commission's recommendations on how the LSP can use its resources in a more effective and targeted way to address these challenges.
- 4.2 The Council has also conducted consultation through the LSP and its meeting of Congress and examined consultation undertaken previously on its behalf. Congress meets twice a year and involves key stakeholders from across a range of agencies and organisations. The Community Strategy has also been considered by the LSP Boards and their feedback incorporated into the current draft. The Community Strategy is informed by the views expressed by local people and key stakeholders about their experience of living and working in the borough and this draft strategy will be subject to further engagement with the community during June and July 2016 prior to approval by Full Council. Given the engagement already carried out it is not anticipated that significant changes will be required to the current draft of the strategy following this engagement, however, should any significant changes arise following approval by the Health and Wellbeing Board and Cabinet these will be notified to full Council

5. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 5.1 Costs associated with implementing the Community Strategy will be funded from existing budgets.
- 5.2 There are no direct future savings or efficiencies associated with this report. However, the borough's Community Strategy seeks to take a more strategic view of the combined resources available and determine how best these are deployed and coordinated across Council services and partner organisations to achieve the maximum benefit at the lowest cost.

Approved by – Lisa Taylor – Assistant Director of Finance and Deputy S151 Officer

6. LEGAL CONSIDERATIONS

- 6.1 The Acting Council Solicitor comments that there are no direct legal considerations arising from the recommendations within this report.

Approved by: Gabriel MacGregor, Acting Council Solicitor.

7. EQUALITIES IMPACT

- 7.1 The borough profile and consultation, including the report of the Opportunity and Fairness Commission (OFC), have informed the equality analysis and development of the Community Strategy 2016-21. The equality analysis is attached at Appendix 2.
- 7.2 The Council's Equality Policy 2016-20 and statutory Equality Objectives, agreed by Cabinet in April 2016, address issues identified by the OFC and Index of Multiple Deprivation. The work of the Stronger Communities Partnership Board will give effect to the Council's response to these issues. The Stronger Communities Plan 2016-19 is developed by the Stronger Communities Partnership Board as a supporting plan of the Community Strategy. It focusses on strengthening the community and voluntary sector and increasing community cohesion, as informed by the recommendations of the Opportunity and Fairness Commission and the Council's Corporate Plan.
- 7.3 The Stronger Communities Board's proposed high-level outcomes, which Cabinet is recommended to endorse, are:
1. Croydon is a place of opportunity and fairness
 2. Croydon is a place where people from different backgrounds get on well together
 3. Croydon is a place that has a thriving and joined-up community, faith and voluntary sector.

The Cabinet Member responsible for the Stronger Communities Board will be responsible for the Stronger Communities Plan that will deliver these outcomes. The full list of high-level outcomes and priorities are listed at Appendix 3.

CONTACT OFFICER: Sharon Godman, Head of Strategy and Community X 47034

Appendix 1 – Community Strategy 2016-21

BACKGROUND DOCUMENTS

None

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**CROYDON'S
COMMUNITY STRATEGY
2016-2021**

FOREWORD - CHAIR OF CROYDON'S LOCAL STRATEGIC PARTNERSHIP

Croydon is undergoing an exciting transformation, and is well on its way to becoming a Modern European City. It has amazing transport links to central London, Gatwick and Heathrow, and the M25 and South Coast, affordable homes to buy and rent, new cafes and restaurants opening to cater for a new generation of residents. Croydon is London's Growth Borough, a strategic centre in the London Plan, and is attracting leading companies, like the Body Shop, to locate their headquarters here. Massive investment including the development by Westfield of one of Europe's largest retail and leisure destinations will see more than 23,000 new jobs created and 9,500 new homes started over the next 5 years. **The most**

This is the context for our new Community Strategy and its overall aim is to deliver the benefits of growth and regeneration to local people and ensure that no one is left behind. This strategy brings together the outcomes and priorities of the main partner agencies in Croydon and focuses them on developing Croydon into:

- **A great place to learn work and live** where we will deliver new jobs and new homes for our residents, enable our local economy to grow, develop an exciting cultural offer and evening economy, in a safe and pleasant environment.
- **A place of opportunity for everyone** where we will tackle poverty and deprivation, prevent homelessness, and support

children, families and individuals to achieve their full potential and live a long healthy life through a good start, an excellent education, support to develop and maintain the resilience and self-reliance modern life requires, and providing holistic support to those that need it.

- **A place with a vibrant and connected community and voluntary sector** where we will enable and empower our communities to connect and collaborate in developing community-led responses to the many challenges we face.

The strategy covers the period 2016-21 and responds to the recommendations of Croydon's independent Opportunity and Fairness Commission and the priorities of local people. The strategy sets out the direction for the Local Strategic Partnership for the next five years and beyond. It outlines the outcomes we want to deliver and the priorities we will focus on to achieve them. We are not complacent and recognise there are significant challenges ahead. However, we are ambitious and confident that by working together with our communities we will deliver a bright future for the people of Croydon.



Councillor Tony Newman
Chair of the Local Strategic Partnership

1. INTRODUCTION

Croydon will transform into a modern European city over the next decade. Our key priority is to ensure local people benefit from this transformation. We will achieve this by working together, developing the talents and aspirations of our residents and communities, making Croydon an exciting place to visit, live and spend time in, and by continuing to build a reputation as a place where communities are empowered, and a place that is renowned for its fairness, diversity and tolerance.

The outcomes we want to achieve

To achieve this we will focus will be on delivering three overarching outcomes, which will see Croydon become:

- **a place to learn work and live** through ambitious placemaking, regeneration, economic growth, cultural renaissance and providing a safe pleasant environment
- **a place of opportunity for everyone** through better education, health promotion, supporting independence and resilience, and tackling poverty deprivation and homelessness
- **a place with a vibrant and connected community and voluntary sector** through enabling communities to connect, collaborate and take responsibility where they see a need and have the capacity and commitment to provide for it

The role of the Local Strategic Partnership

The strategy is structured around these three outcomes and Croydon's LSP, which brings together the main agencies responsible for health, housing, police, employment and education, together with representatives of the voluntary, community, faith and business sectors, will be responsible for delivery. The LSP provides coordinated leadership committed to tackling complex cross-cutting issues and improving the economic, social and

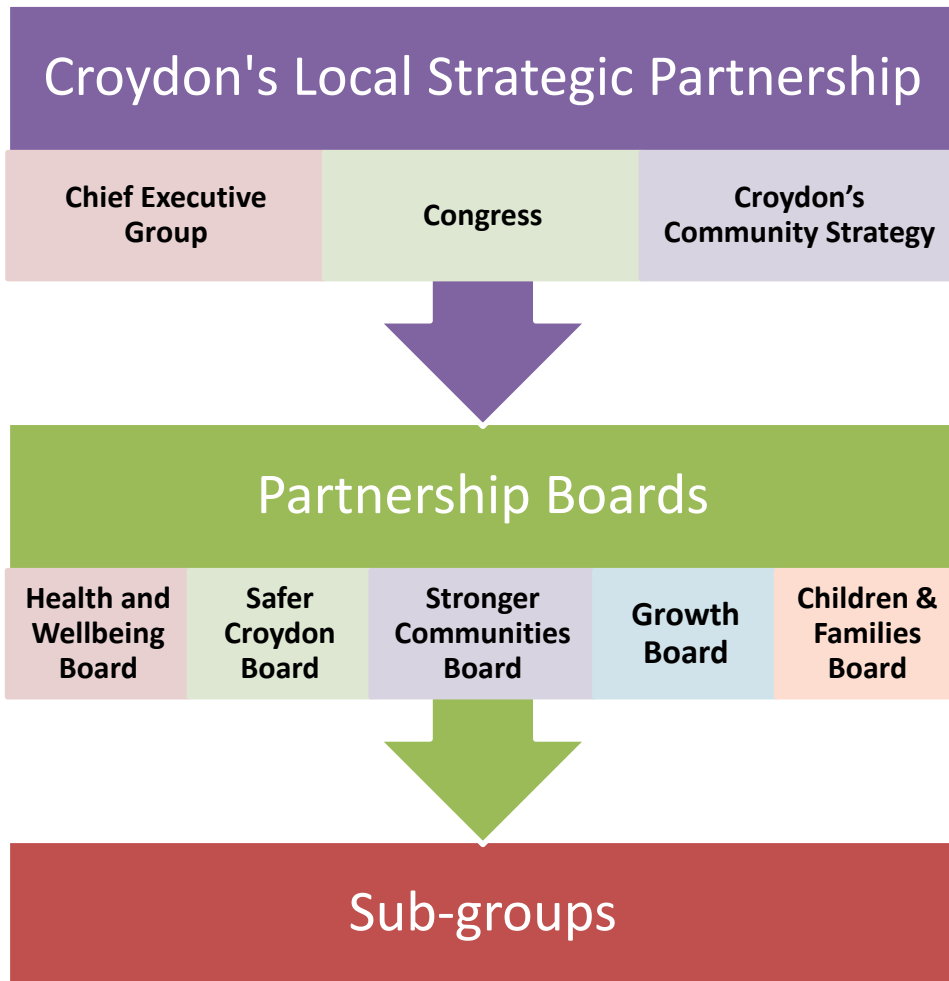
environmental wellbeing of our residents and communities. The LSP also provides a unified voice in making the case for a fair funding settlement for Croydon and the devolution of powers to the borough. The LSP is organised into five Partnership Boards responsible for delivery of specific themed action plans. The LSP Boards will drive the delivery of our agreed priorities over the next five years.

The purpose of this strategy

The Community Strategy is the overarching strategy for the borough. It sets our overall strategic direction, the outcomes and priorities we will focus on, and provides the framework for delivery that will guide and direct the activity of LSP boards.

The Community Strategy also responds to the challenges laid down by Croydon's independent Opportunity and Fairness Commission to make more of our community's assets. It is based on a thorough analysis of local economic, social, health and environmental needs and issues and provides the evidence base for the borough's supporting strategies and plans, including Croydon's Local Plan which provides the framework to guide the work of partner organisations in our local strategic partnership (LSP) in delivering Croydon's long-term vision.

Through a clear articulation of the borough's needs, aspirations and priorities we also hope that it influences regional and national policy. The Community Strategy should be the first point of reference for anyone interested in what Croydon plans to do to improve things for its residents and communities over the next five years.



How strategy has been developed

Regular consultation and engagement ensures we understand the needs and aspirations of our local communities, and this strategy has been produced through consultation with our themed partnerships, and through the Croydon Congress which brings together key stakeholders twice a year to discuss

important emerging issues. Our consultation findings are informed by a wide range of data presented in the borough profile that help us understand how the borough is changing and the challenges and opportunities these changes present.

2. VISION

The Community Strategy is set within a context of “We are Croydon”, Croydon’s long-term vision that was developed by approximately 20,000 residents and adopted in 2010. It is an ambitious and compelling vision of the type of place that Croydon wants to be by 2040. Our vision statement sets out the change we want to see over the coming years, and provides the touchstone for all other strategies and plans in the borough ensuring alignment in our future direction. Croydon’s vision is to be:

Enterprising - a place renowned for enterprise and innovation with a highly qualified and skilled workforce, and a diverse and thriving local economy

Connected - a place that is well connected, easy to get to and around, and supported by infrastructure that enables people to easily come together; with one of the best digital, communications and transport networks in the country

Creative - a place that draws people to its culture and creativity – an inspiration and enabler of new artistic and sporting talent

Sustainable - a place that sets the pace amongst London boroughs on promoting environmental sustainability and where the natural environment forms the arteries and veins of the

Learning - a place that unleashes and nurtures local talent and is recognised for its support and opportunity for lifelong learning and ambitions for children and young people

Caring - a place noted for its safety, openness and community spirit where all people are welcome to live and work and where individuals and communities are supported to fulfil their potential and deliver solutions for themselves

these challenges. The OFC listened to the views of over 3,000 people and local businesses.

77% of residents agree that people from different backgrounds get on well together. On fairness, 56% say that ‘what matters is ensuring everyone has equality of opportunity.’ Most think that ‘those in most need should get the most’. Most residents (75%) are satisfied with Croydon as a place to live and 72% identify with Croydon. 64% are proud of Croydon, particularly of transport/ease of access (16%), shopping/restaurants/markets (12%), people/community (8%) and improvements/ regeneration (7%).

- Residents feel that the most important issues facing Croydon are crime and safety (24%); housing (13%); parking (8%); and cleanliness/street cleaning (8%)
- 95% want more cultural activities
- 34% of people are struggling financially
- 33% want more paid work, but the barriers to getting it include lack of opportunities (36%) and family responsibilities (25%)
- 28% are involved in the local community or are keen to get involved. Likely ways of becoming involve included helping an elderly neighbour (39%), joining a group to solve local issues (17%), reporting environmental issues (15%) and helping in local community facilities (9%).

The OFC’s [report](#) produced recommendations under six themes which have informed this strategy:

- 1. A vibrant responsible and connected borough:** reciprocity, volunteering and community activism; devolving power to neighbourhoods and regenerating district centres

Our vision and focus



3. WHAT YOU TOLD US

The independent [Croydon Opportunity and Fairness Commission](#) (OFC) was set up in 2015 to investigate issues of poverty and inequality faced by residents and consider how Croydon could make better use of its resources to address

2. **A town centre that lifts the whole borough:** ensuring more businesses benefit from town centre development; promoting the London Living Wage; increasing job brokerage and support for the high tech and growth sectors; a university campus; and broadening the cultural offer
3. **Leaving no child behind:** early intervention to better lives; supporting resilience, development and wellbeing in schools and beyond; communities helping to raise aspirations
4. **A connected borough where no-one is isolated:** tackling social isolation through volunteering and joint commissioning; and better integration between health services and the community
5. **Finding homes for all:** support for tenants; promoting lodging; maximising use of land, more tenure options in New Addington and Fieldway; social impact bonds to tackle homelessness
6. **Supporting residents towards better times:** supporting small businesses; improving work experience and job opportunities; supporting long term sick and disabled people return to work; reducing debt and increasing financial security; and encouraging more childcare options.

More information about Croydon's needs and what our communities have told us can be found at www.croydon.gov.uk and www.croydonobservatory.org.uk. More on the OFC may be found at www.opportunitycroydon.org.

4. CROYDON'S OPPORTUNITIES AND CHALLENGES

Over five years, £5 billion is being invested which will create more local jobs and apprenticeships, more affordable homes to buy or rent, and more learning and leisure facilities. The £1bn Croydon Partnership redevelopment of the Whitgift retail centre will create one of Europe's largest retail and leisure destinations. A Growth Zone will devolve to Croydon powers to use locally generated taxes to accelerate this transformation. Croydon has a once in a

generation opportunity to ensure its residents benefit from this remarkable transformation.

Croydon is a great place to live and work in and to visit, but we still have areas that are among the most disadvantaged in the country. Croydon's population is changing rapidly. Over the next 25 years 75,000 more people will be living in the borough. It has one of the largest and fastest growing black and minority ethnic populations in South London, with 100 languages spoken, and the largest population of young people in London. Some 14% of residents have a long-term limiting health problem or disability. Between 2010 and 2019 a 21% increase in people aged over 65 is expected, some of whom will experience social isolation, reduced independence and dementia. 1 in 10 receives social care and each year, 200 are permanently admitted to care homes in Croydon. We need to work together to meet the rising demand for new jobs, new homes and school places and ensure services meet the needs of local people. We have a responsibility to promote integration and greater cohesion among existing and new communities.

With its transport links, economic and educational opportunities, Croydon is a great place to do business. The main challenges however are the cost of parking, perceived anti-social behaviour on high streets and the low spending potential of many customers. 26.9% of jobs pay below the London Living Wage. Croydon has a relatively high employment rate (75.4% of the population aged 16-64, compared with 72.9% in London), but the ratio of jobs available to the working age population (0.53) is lower than the London average (0.96). We need to do more to ensure local people have the right skills to access jobs and apprenticeships.

Croydon is currently ranked as 17th out of 33 London boroughs in terms of overall deprivation. Since 2010 it has become relatively more deprived compared to other local authorities. While some neighbourhoods have low

levels of disadvantage, six are among the 10% most deprived in England. The map overleaf shows examples of deprivation gaps in Croydon. The OFC has highlighted challenges around poverty and inequality. We need to address the range of deprivation experienced by people in particular neighbourhoods in the north as well as in Fieldway and New Addington. While life expectancy in Croydon is increasing, there are differences between men and women, between various protected groups and between those living in the south and in the north and east. We need to tackle the underlying determinants of health like homelessness, overcrowding, child poverty, unemployment and air quality and promote healthier and more active lifestyles.

Croydon is a safe place for most residents; the number of offences fell by over 5,000 in 10 years and is near the London average, but fear of crime is still significant. There are concerns over youth crime, violent crime including domestic abuse and sexual violence, and hate crime. We need to build trust among local people that agencies will deal with the issues that matter most to all communities.

Deprivation gaps in Croydon: IMD 2015 - Lower super output areas (LSOAs) and wards

LEAST DEPRIVED WARD

On out of work benefits 0.7% of working age population (Selsdon & Ballards)

Life expectancy at birth 84.6 years (Selsdon & Ballards)

Older people in poverty 5.5% in income deprived households (Selsdon & Ballards)

Child poverty 7.3% in income deprived families (Sanderstead)

Median annual household income £47,030 (Sanderstead)

Age 16+ with no qualifications 12% (Croham)

Violence against the person 8.76 incidents/1000 population (Sanderstead)

Overcrowding 3.6% of households (Sanderstead)

No central heating 1.2% of households (Coulsdon East)

MOST DEPRIVED WARD

On out of work benefits 3.4% of working age population (Thornton Heath)

Life expectancy at birth 77.5 years (Selhurst)

Older people in poverty 34.9% in income deprived households (Broad Green)

Child poverty 37.5% in income deprived families (Fieldway)

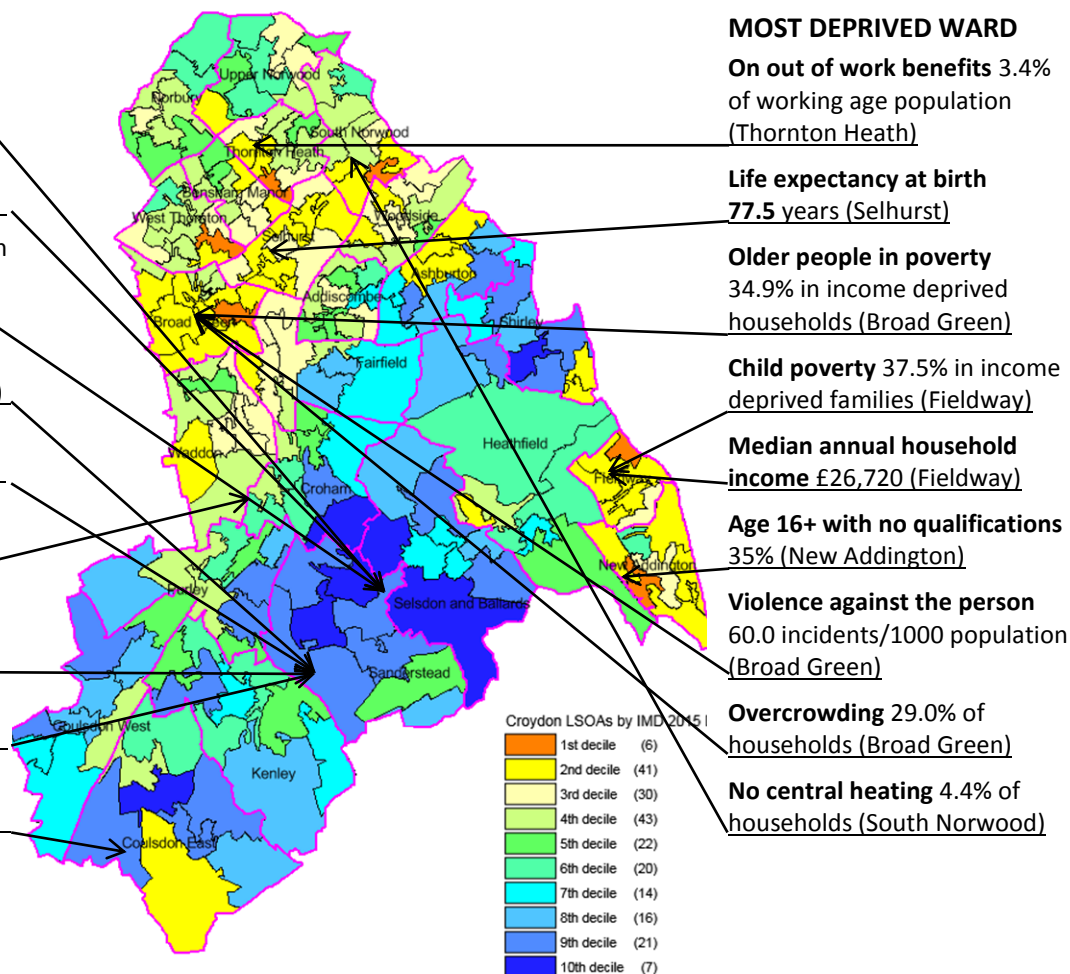
Median annual household income £26,720 (Fieldway)

Age 16+ with no qualifications 35% (New Addington)

Violence against the person 60.0 incidents/1000 population (Broad Green)

Overcrowding 29.0% of households (Broad Green)

No central heating 4.4% of households (South Norwood)



LSOAs in the 1st decile are in the top 10% most deprived LSOAs in England

Below are the main challenges for all agencies that need to be addressed jointly in this strategy.

Challenges addressed in Outcome One: To Cultivate Growth

• Business and Growth

- Ensuring Croydon is promoted as **a place for investment**, economic growth and employment opportunity
- Ensuring that growth and regeneration provide **opportunities for local people** and small and medium sized businesses and areas outside the metropolitan centre
- **Broadening our cultural offer** to appeal to a wider range of people during the closure of Fairfield Halls for refurbishment, and the creation of a new cultural quarter in the next 2-3 years.

• Unemployment

- Tackling areas of high economic inactivity in the borough
- **Tackling youth unemployment and lack of opportunities** for people, especially those aged between 16 – 24 to be in education, training or employment.

• Crime and anti-social behaviour

- **Tackling violent crime**, especially domestic abuse and sexual violence and serious youth violence
- **Tackling anti-social behaviour**, including hate crime, and reducing the fear of crime

Challenges addressed in Outcome Two: To Narrow the Gaps and Tackle Inequality

- **Deprivation**
 - **Addressing deprivation** experienced by people living in the borough, in particular in neighbourhoods in the north and in New Addington and Fieldway, and targeting available resources at achieving outcomes that make a real difference to the lives of local people with the greatest need.
- **Poverty and homelessness**
 - Tackling growing social and economic pressures, including low pay and food and fuel poverty
 - **Reducing the number of children in poverty** which remains high, even though the proportion of children in poverty is falling.
 - Tackling the lack of **affordable housing**, overcrowding and rising homelessness, and addressing the impact of measures in the housing and planning bill and the freeze in housing benefit
- **Attainment**
 - Ensuring vulnerable young children and the largest number of looked after children in London receive the support they need
 - Continuing to improve the proportion of pupils attaining level 4 in reading, writing and mathematics at Key Stage 2 (77%) which remains below the London average (82%)
 - Increasing the percentage of good or outstanding secondary schools and attainment of A level students in Croydon which are below the London average.
- **Health**
 - **Reducing health inequalities** across the borough including in life expectancy and excess weight in children and adults
 - **Strengthening the resilience** of people and families with complex needs such as poor mental and physical health and drug and alcohol problems
 - **Maintaining the independence** of older people and people with disabilities for as long as possible and safeguarding vulnerable adults and children.

Challenges are addressed under Outcome Three: To Develop an Active Community

- **Community cohesion**
 - **Tackling social isolation**, particularly among older and disabled people, carers and those with a long term illness
 - Addressing underlying causes that prevent communities from becoming cohesive and integrated
 - Working more extensively with communities to enable them to come together to tackle shared challenges, support people to become more resilient and reduce reliance on local services

For more information on the evidence base for this strategy, please consult:

The Borough Profile www.croydonobservatory.org, reports from Croydon Congress at

www.croydononline.org/get_involved and the Croydon Opportunity and Fairness Commission final report at www.opportunitycroydon.org

5. NATIONAL AND LOCAL CONTEXT

This continues to be a time of major change in terms of public sector funding and government policy.

Funding - Local public services in Croydon have seen significant reductions in government funding as a contribution to the government's national deficit reduction strategy. While funding of the police, the core schools budget and NHS will be protected to a certain extent, other public services, including public health, will continue to face major reductions. NHS services in Croydon are currently funded at lower levels than they should which, coupled with high underlying growth rates for acute services, means resources for healthcare will be stretched until funding reaches its required level in five or more years time. Councils will also be allowed to cut business rates to boost growth and small business tax relief will be raised from £6,000 to £15,000 exempting them from business rates.

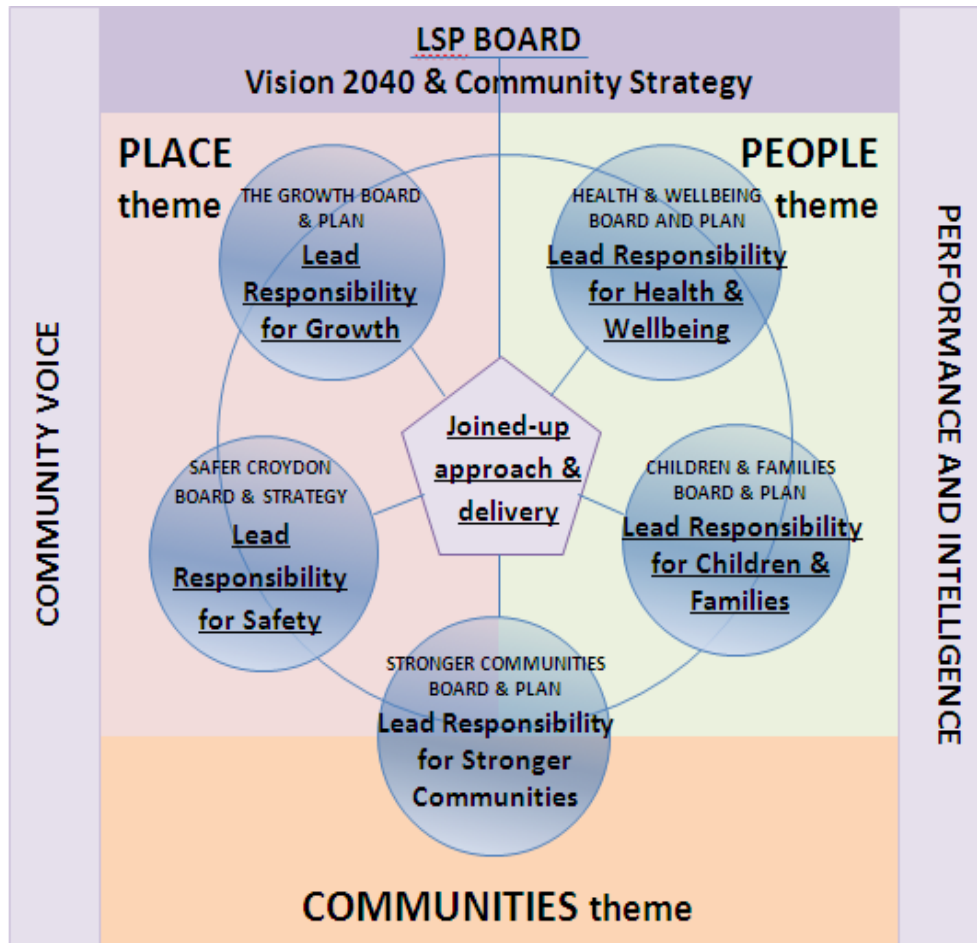
Devolution – Croydon's LSP supports the locally led process of devolution outlined in the Cities and Local Government Devolution Act 2016 which enables local people to determine the extent and pace of devolution in their area. The government will strengthen the Right to Contest to allow local communities to challenge the use of land and property that is in use by local authorities where it could be put to better use. Our objective is to ensure that any deal negotiated in respect of Croydon and its partner local authorities in the South London Partnership delivers real benefits for local people in the form of infrastructure improvements, local economic growth, more job opportunities, affordable housing and improvements in health and social care.

Other government reforms will also have a major impact on local people and organisations:

- **Education** - the government's aim is to enable schools in the poorest performing areas to convert to academies, to establish a new role for local authorities and a new funding formula, and to make schools more accountable for the progress of excluded pupils.
- **Housing and planning** – development of low cost Starter Homes for sale will be supported by planning reforms to free up land; reducing payment of the new homes bonus, an incentive payment to councils for each new home built, from six years to four, extending the right to buy to housing association tenants, funded by the sale of higher value council homes, and cutting social housing rents by 1% a year will reduce the development of new affordable homes; and fixed term tenancies will replace long-term social tenancies.
- **Health and Social Care** – the NHS is implementing its Five Year Forward View which looks to introduce a radical upgrade in prevention and public health, greater control for people over of their own care, and more locally delivered, integrated multidisciplinary services. By 2017 every area must also have a plan to create an integrated health and social care system by 2020; Council Tax may be raised by up to 2% to pay for social care; additional funding for home adaptations for disabled people will be made available.
- **Welfare reform** – £12bn savings will be secured from welfare expenditure by 2019-20, through the freeze in Housing Benefit levels and reductions in levels payable in the social housing sector, which could have a substantial impact on supported housing provision, and limits to levels of Universal Credit payable. To some extent this will be mitigated by the introduction of the National Living Wage, introduced in April 2016.

All services must pursue efficiency in the face of rising demand, integrating services across organisations and across borough boundaries. To mitigate the impacts on local people and services we must build strong local cross-agency partnerships capable of delivering integrated, holistic and cost-effective

services. This includes encouraging and supporting local people to come together in a spirit of cooperation to develop and implement local solutions to local issues. The OFC report has proposed ways in which this may be achieved and these have helped to shape the development of this strategy. We will also have to take account of priorities of new Mayor of London who assumed office in May 2016.



6. THE FRAMEWORK FOR OUR OUTCOMES AND PRIORITIES

We have ambitious plans for Croydon to develop into a modern European city. We want our residents and communities benefit from the opportunities this transformation provides. This strategy sets out our responses to the challenges we face, and clearly articulates how we will work together to develop Croydon as a thriving, successful Place, to enable our People to achieve their full potential and ensure our Communities are empowered to play a full part in making decisions, and delivering our priorities.

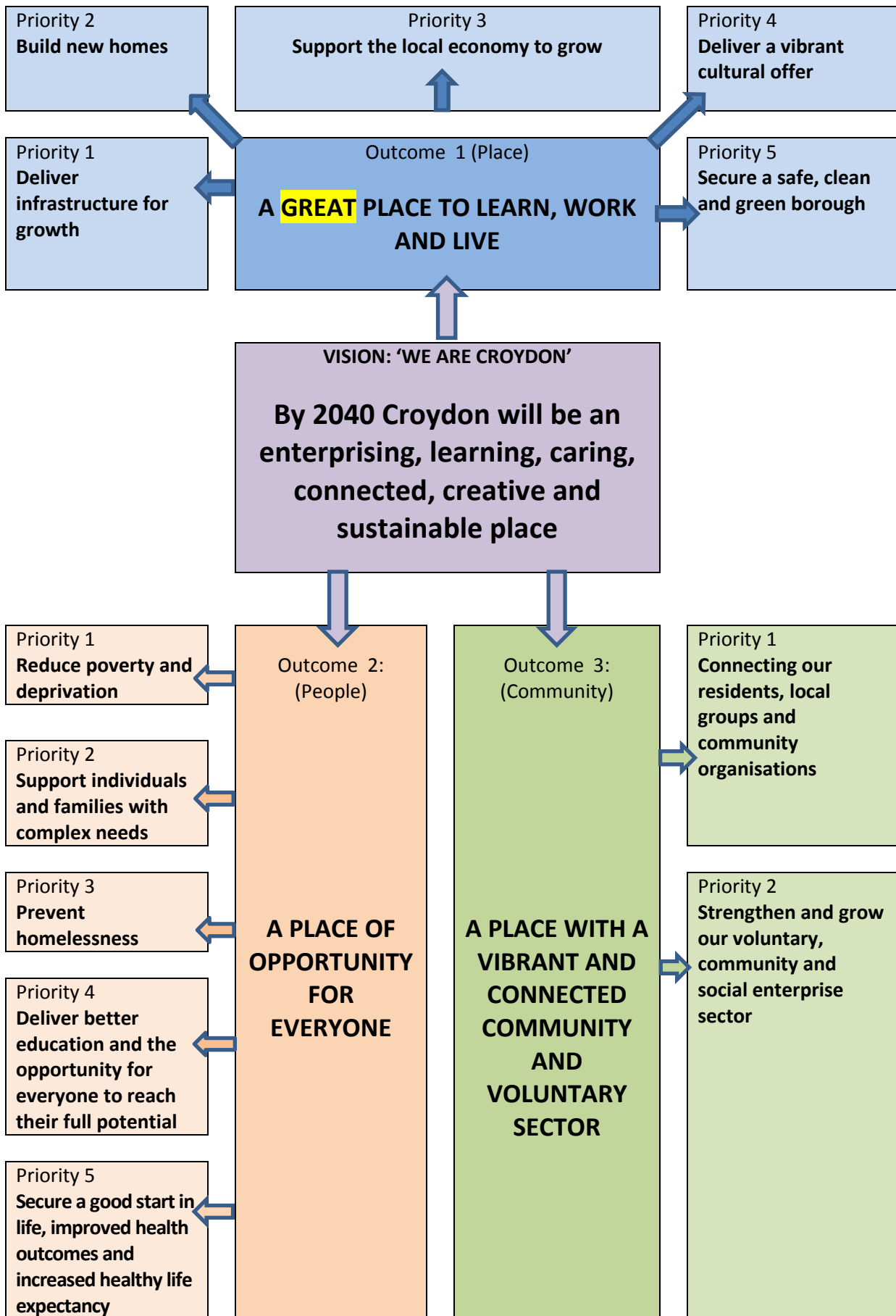
Place: One of Croydon’s greatest strengths is its location and connections with the City and central London, with two international airports, and with Brighton and the south coast. The borough is greener and more open than many people realise; it has attractive neighbourhoods with housing at competitive prices and rents, and some of the best schools in the country. Croydon is already making strides as an attractive location for business, with an expanding base of small and medium size enterprises (SME), a thriving tech sector and massive inward investment in business and residential development in Central Croydon. Our focus is to maintain this momentum and ensure that Croydon develops a commercial ecosystem that encourages new enterprises to flourish, supports innovation and emerging sectors, and delivers the supporting infrastructure to unlock growth.

People: We want our children to get a good start in life, and all our residents to live longer healthier lives, and to be resilient and independent throughout their lives. Poverty and deprivation impact on life chances and aspirations, and our challenge is to support our residents through difficult times, enable them to achieve their full potential, and equip them with the skills and qualifications modern businesses look for so that they benefit from Croydon’s growth. Ensuring there is a sustained focus on training and education in order to develop a modern, skilled workforce is a key part of our economic development work.

Communities: Croydon is known for its active and vital community. Our community is a key partner in the delivery of this strategy. More than ever in times of austerity we need to work closely with our local communities to find innovative ways of meeting the growing and changing needs of our population. This will involve enabling communities to develop resilience and identifying the assets in our communities (people and groups with skills, knowledge, interests and enthusiasms) that can help strengthen and grow community-led support, activities and services. The outcome we want to deliver is for Croydon to be known as **a place with a vibrant and connected community and voluntary sector**. To achieve this we will focus on two priorities:

- **Build cohesive and strong communities, connecting our residents, local groups and community organisations**
- **Strengthen and mobilise our voluntary, community and social enterprise sector**

7. CROYDON'S VISION, OUTCOMES AND PRIORITIES:



8. OUTCOME 1: A GREAT PLACE TO LEARN WORK AND LIVE

This section of the Community Strategy looks at how we will encourage places in Croydon to thrive, contributing to economic growth, providing employment for a growing population, driving educational attainment, qualifications and skills development, and helping to improve our health and well-being. It also looks at the importance of an exciting cultural life and a safe, clean environment to a place's success and future growth.

Priority 1: Deliver infrastructure for growth

Why is this important?

Globalisation, technology and transport have changed the way we live and work. The challenge for Croydon, like other areas, is to respond positively, make the most of its advantages and attract businesses and investment that will benefit our residents. Croydon is blessed with many advantages – its excellent connectivity, well-qualified workforce, clusters of world class research and education institutions, fast-growing tech sector and healthy entrepreneurial spirit – and it is in the middle of a renaissance, with more than £5bn investment over the next 5 years with the potential to create 23,500 new jobs, 9,500 new homes, and a world class cultural quarter. To deliver growth we need to bring in funding for the major infrastructure projects that unlock this regeneration, and securing a devolution deal that enables South London to develop to its full potential, and working closely with our partners in the Coast to Capital and London Local Enterprise Partnerships (LEPs), and with Transport for London (TFL) are key priorities.

What have we achieved? The foundations are in place for significant growth, with Croydon identified as an opportunity area and strategic centre in the Mayor's London Plan, our planning system streamlined to facilitate swift decisions on strategic developments, Croydon's Growth Zone under

development and a compulsory purchase order granted to enable the Croydon Partnership to begin transforming the Whitgift Centre into one of Europe's largest shopping and leisure malls. Major developments are underway across the metropolitan centre with Saffron Square entering its final stages, Ruskin Square under way and Box Park due to open in 2016. We have begun to close the infrastructure investment gap, with the Greater London Authority (GLA) committing business rates income and the Treasury allocating a further £7 million. Preparations are also well-advanced to take advantage of devolution, with Croydon, Kingston, Merton, Richmond and Sutton forming the South London Partnership, the first in London, led by a Joint Committee with statutory responsibility and the legal authority to make decisions.

What will we do?

Our focus over the next five years will be on securing further devolution of powers and financial support to realise Croydon's and South London's potential for growth. We will:

- Work with the government on further devolution and financial support for strategic infrastructure projects that support growth and enable jobs to come forward
- Work with our Local Enterprise Partnerships, Coast to Capital and the London LEP, to ensure they are effective and secure Single Local Growth Deal funding for our infrastructure priorities
- Work with regional funding partners to maximise funding for growth and infrastructure investment.

What will change?

- 23,000 new jobs will be created jobs - accessible to all – created in a range of growing sectors including creative, digital and information technology; financial and professional services; construction; retail; leisure; education; health and social care.

- Croydon will have one of Europe’s largest urban shopping and leisure centres – the redeveloped Whitgift Centre.
- New investment will be attracted to our district and local centres, creating vibrant communities across the borough and ensuring that all of Croydon is a great place to live, work and visit.
- New high-quality office space will be developed, and excess older office stock reduced, leading to Croydon to be recognised as the premier office location in South London.

Priority 2: Build new homes

Why is this important?

Housing is a top priority for Croydon people. Homes tend to be most expensive and in greatest demand in our most successful and thriving places. Successful places are productive and create jobs and opportunities, but they drive up housing demand too. If people cannot afford to live or work in them local demand for goods and services declines and so does the economy. Good quality, integrated and affordable housing enables people working in lower paid public and service sector jobs to live close to their place of work, relieves transport congestion and produces mixed and cohesive communities.

As housing supply has failed to keep pace with demand we need to build more homes in Croydon. However, to be effective we need to be proactive, use planning powers to ensure a decent rate of affordable homes and use public resources to bring forward stalled schemes. Government plans to reform housing and planning laws (extending the right to buy, introducing Starter Homes to buy, and reducing social housing rents by 1% per year) will have a serious impact on plans to build new affordable homes and maintain existing social housing stock. The Council and its housing association partners will need to revise their plans to meet this challenge and build affordable new homes.

What have we achieved?

We have an ambitious growth plan that links new homes to improved infrastructure, to new jobs and services that will drive our borough’s growth and regeneration. Croydon’s Local Plan will enable delivery of some 20,000 new homes by 2031, 50% of which will be affordable homes for Croydon residents. We are committed to building more homes for local people: over the two years 2013/15 3,048 new homes were completed and 2,680 new homes were started in 2014/15. We are working up more than 50 major housing development schemes. The Council has set up a Revolving Investment Fund (RIF) and new development company, Brick by Brick, to deliver up to 3,500 new market and affordable homes in Croydon. Our planning rules now require housing developers to provide 50% of all new homes as affordable housing on all housing development sites across the borough and prevent them from flooding our housing market with tiny, poorly designed and sub-standard homes converted from old offices under permitted development rights. A new borough-wide selective licensing scheme introduced in 2015 is driving up housing standards in the private rented sector and protecting private sector tenants from poor landlord practice.

What will we do?

- Deliver 9,500 housing starts in the next 5-years and ensure a sustainable level of affordable housing is brought forward
- Increase the rate of house-building with a minimum target of at least 1,200 new home completions a year over the period 2014/15 to 2017/18, with the aspiration of accelerating delivery so we can start up to 1,900 mixed tenure new homes per year
- With our housing association partners deliver a range of housing products and tenures for our growing population - from high quality home ownership, through starter homes and shared ownership, to homes for rent at a range of rental values including traditional social rents

- Guarantee a decent level of housing for local people on lower incomes by requiring housing developers to provide 50% of new dwellings as affordable housing.

What will change?

- 9,500 new homes will be started over the next five years,
- Current housing shortages in the borough will start to be addressed
- A greater choice of housing will be provided for people at all stages of life.
- A greater proportion of homes will be provided as affordable housing - 50% of new homes will be affordable to local people

Priority 3: Support the local economy to grow

Why is this important?

A vibrant, flourishing local economy encourages entrepreneurship and investment, provides employment opportunities for local people and helps tackle poverty and deprivation. It enables people and families to develop resilience and self-reliance, and raise their aspirations. It helps improve the quality of life for everyone in the area.

There are major opportunities for employment growth including: Croydon’s Growth Zone with potentially 23,500 new jobs; Ruskin Square with 1m ft² of new office space and 1,000 new jobs; Boxpark Croydon with 200 new jobs; and the Croydon Partnership with 5,000 new jobs. Two proposals outside Croydon could offer opportunities to our residents and local businesses: a second runway at Gatwick Airport could create 22,000 jobs; and Biggin Hill Airport, a strategic growth area, potentially 2,300 jobs over the next 20 years.

We want to work together to make the most of Croydon’s competitive advantages and provide the conditions and environment that encourage

businesses to locate in the borough. We can help emerging enterprises thrive and expand by attracting inward investment and funding, and providing financial and technical support and encouragement for SMEs. We also want to improve physical and soft infrastructure particularly in our district centres, and encourage the growth of particular clusters of businesses (for example, technology and research). We need all public sector organisations to use their commissioning power to offer opportunities to local enterprises to provide public services or take up opportunities in the public sector “supply chain”.

For Croydon residents to benefit from these opportunities we must ensure they are equipped with the necessary skills and qualifications that modern businesses look for. We need to focus on improving training and education by working in partnership with primary schools, Further Education colleges, universities and adult education providers. We must also establish an effective jobs brokerage service, encourage employers to use it to fill their vacancies, and develop clear pathways to employment.

What have we achieved?

Croydon’s small and medium sized enterprise (SME) base of 12,000 businesses is healthy and steadily growing. Croydon is also home to over 1500 technology and media businesses and is one of London’s fastest growing tech clusters. Unemployment rates in Croydon are improving and the proportion of young people not in employment, education or training (NEET) is falling. However, there are stubborn niches of worklessness in certain neighbourhoods and among young people. Croydon’s Enterprise Loan Fund has been successful in supporting more than 230 local businesses, safeguarding 271 jobs, and has recently been increased to £4m to continue this work. Croydon has also agreed a Memorandum of Understanding with Gatwick Airport to realise the opportunities for jobs and business growth provided by the possibility of a second runway. The regeneration of Croydon’s district centres is in progress in South Norwood, Thornton Heath, New Addington, Purley and Coulsdon.

What will we do?

- Support expansion of our business base to increase (enabling 2,000 new business starts per annum)
- Create over 23,500 new jobs through development, SME growth and regeneration schemes, such as Croydon Partnership and Gatwick
- Expand Croydon's Enterprise Loan Fund to £4m
- Nurture our tech sector and other enterprises in the borough
- Enable local business associations to have a stronger role in shaping their business community (through Business Improvement Districts, Town Teams and Business Associations)
- Develop partnerships with universities to offer more higher education in the borough to raise the number of residents with degree level qualifications and bring a new vibrancy to the metropolitan centre.
- Support working age residents into employment by implementing the Pathways to Employment programme; raising the skills of the workforce and ensuring the skills system is responsive to the needs of local employers, and delivering employability skills in schools to ensure the future workforce are job ready and supported in the transition from school to work
- Improve the attractiveness of the public realm and the physical condition of high streets in our district centres and metropolitan centre and reduce the number of vacant commercial units
- Work with Croydon SMEs to ensure they access opportunities provided by public and voluntary sector partners' supply chain and commissioning activity
- Encourage private and public sector employers to use the Job-Brokerage service
- Encourage private and public sector employers to pay the London Living Wage.

What will change?

- More small businesses and social enterprises will start in Croydon, and our business base will continue to grow
- Business registration rates will increase
- Opportunities in the technology and research sectors will increase
- Employment will increase and so will job density
- There will be fewer residents that have been unemployed long-term

Priority 4: Deliver a vibrant cultural offer

Why is this important?

A vibrant, attractive cultural life can enhance the competitive edge of a city or neighbourhood through defining its identity and sense of place, and improving its reputation. It draws in new visitors and encourages people to return. It increases the footfall that contributes to the local economy, particularly the evening economy of made up of restaurants, bars and entertainment venues, and encourages a diverse, skilled workforce to develop, with cross-fertilisation to the tech, media and academic sectors. Our vision is of a thriving culture and arts scene which attracts, engages and inspires residents, visitors and businesses by providing something of quality and interest for everyone. To shape the development of our cultural life and evening economy we want to encourage inward investment and improve Croydon's public realm and connectivity. We will use our regulatory powers to develop a family-friendly, less alcohol-driven scene and promote Croydon through a wide range of exciting attractions and events.

What have we achieved?

We have made significant progress towards our vision. A number of key schemes are at the centre of this drive. In 2015 plans were approved to regenerate the Fairfield Halls and College Green area and create a scheme of

national architectural significance with a mix of uses including new homes, cultural spaces, educational facilities, offices, shops and restaurants, a new high quality public space with public art, and a new accessible, step-free access route to East Croydon station and the town centre. Boxpark is due to open in summer 2016 providing a performance space, the redeveloped Whitgift Centre will open an IMAX and cinema complex in 2020, and consultation is under way on transforming our parks into community-led cultural hubs. These projects are supported by thriving existing cultural attractions including Matthew's Yard, the David Lean and Rooftop cinemas, and the Ambition Festival launched in July 2015 which put Croydon on the festival circuit, being nominated for 'best new festival' and 'best metropolitan festival' at the UK Festival Awards.

The Fairfield Halls and Croydon Council Youth Arts have been awarded funding from A New Direction, the Arts Council England Bridge Organisation, to form a local Cultural Education Partnership. This is one of 50 pilot partnerships the Arts Council wish to develop to address their Cultural Education Challenge which calls on the cultural and education sectors to work together to enable all children and young people to have a rich and rewarding cultural education. With visits to our libraries rising, we also launched an engagement with our residents to work together to develop the best possible 21st century library service within current public sector funding constraints.

What will we do?

- Hold Ambition Festival 2016 - a dynamic event to be run by BoxPark in summer 2016
- Ambitious for libraries - review our approach to libraries following residents engagement
- Deliver Fairfield Halls and College Green regeneration: phase 1 – including modernisation of Fairfield Halls, development on the multi-story car park, building a new college facility at Barclay Road – to be completed in 2018.

- Implement the parks transformation programme into community-led cultural hubs.
- Increase affordable venues for amateur groups (e.g. Stanley Halls and Selsdon Halls)
- Implement the Parks Transformation Programme starting with the “parks big conversation” engagement

What will change?

- Increased visits and footfall to venues, attractions and events
- A bustling, diverse, family-friendly evening economy
- A lively, diverse cultural offer rivalling the Southbank
- Our parks will increasingly be used for sports, community events, entertainment, and be run by community groups

Priority 5: Secure a safer, cleaner and greener borough

Why is this important?

An attractive place should look and feel safe. We want people who live, work or visit Croydon to feel a sense of security, satisfaction and comfort about being here. They should have confidence that agencies will tackle the safety and environmental issues that matter most to them. We know that crime and safety is the top priority for residents. Tackling nuisance and anti-social behaviour (ASB) is crucial, not only for residents; local businesses say that this can harm the high street and shopping environment. The condition and quality of the local environment is also an important factor: cleanliness and street cleaning are residents' joint third priority.

What have we achieved?

Croydon's reputation as a place is improving, but there is more work to do. Most residents do feel safe, but 23% feel unsafe to some degree. Yet the last 10 years have seen decreases in recorded crime and ASB. Statistics from the Mayor

of London’s Office for Policing and Crime show that in 2014/15 crime per 1000 population was below London rates for five of the seven key indicators. In recent years ASB, burglary, robbery and theft from persons and from motor vehicles have recorded the biggest falls. Reported incidents of violence with injury and domestic abuse and sexual violence (DASV) have increased. Concerning youth crime, good progress has been made to prevent it, protect young people and support victims.

Through Croydon Congress the LSP developed a partnership approach to change attitudes and behaviours towards domestic abuse and sexual violence (DASV) in the borough, to prevent it wherever possible, to support victims and hold perpetrators to account. Croydon has joined the White Ribbon campaign which aims to engage the community (especially men and boys) in condemning violence against women and girls. Through Congress we have raised awareness of child sexual exploitation (CSE) in the community to develop a joint approach to identify and stop it. The Safer London Foundation will deliver workshops and engage with young people working alongside multi-agency partners and will work with police in CSE and gang related operations to ensure victims receive help. Our recent focus on improving the local environment through the “Don’t Mess with Croydon – Take Pride” campaign has engaged the community, and increased reporting and enforcement of fly tips and other envirocrime.

What will we do?

- We will work in partnership to tackle crime and ASB, making full use of the new legislation and housing management interventions
- We tackle environmental crime such as graffiti and fly-tipping and target the worst affected areas
- We will target street based drinking and begging identifying repeat offenders and putting in place prevention and enforcement options

- We will review processes for managing unauthorised encampments and use of injunctions and ASB legislation as well as continuing to target harden locations frequently targeted
- We will work with police to bring domestic abuse offenders to justice, support victims and develop ways of promoting a change in attitudes to this crime

What will change?

- Levels of crime will continue to fall
- More perpetrators of DASV brought to account
- The borough will look and feel cleaner and greener



CABINET MEMBER FOR TRANSPORT & ENVIRONMENT
COUNCILLOR STUART KING

9. OUTCOME 2: A PLACE OF OPPORTUNITY FOR EVERYONE

This section of the Community Strategy looks at how we can tackle inequality and support our residents to achieve their full potential. We know there is a clear link between poverty and health, and we know the importance of good start in life, a good education and employment for life chances, and health and wellbeing. In this section we look at how our partnership approach to holistic, people-focused services improves resilience, self-reliance and employability and helps tackle and prevent homelessness, poverty and deprivation. We also look at how we approach giving our children a good start in life, and how we prevent people from developing long-term conditions through an active healthy lifestyle helping to increase independence and healthy life expectancy.

Priority 1: Reduce poverty and deprivation

Why is this important?

Social and economic factors affect our life chances, aspirations, health and wellbeing – poor education, low skills and qualifications, insecure employment, low pay, welfare policy, high crime and a range of other things affect the resources available to an individual or family to live in a way that most of us take for granted. We know that the poorer you are the less healthy you are likely to be, and that among the causes are housing conditions, lifestyle (including diet, smoking, alcohol), access to sport and leisure, social and support networks, and barriers to accessing healthcare. The 2015 Indices of Multiple Deprivation (IMD) shows Croydon has become more deprived, and highlights entrenched pockets of deprivation in the north and south east of the borough. Government policies to reform welfare benefits provide additional challenges, with more than 1,000 Croydon residents impacted by the reduced benefit cap (to £23,000 per year), and others affected by limits to housing benefit and the 4 year benefit freeze.

In Croydon one in five children lives in a low income family. We want Croydon to become a place of opportunity for all where regardless of a person's background there are no barriers preventing them from achieving their full potential, and we want to focus our activity on reducing deprivation in the areas where we can have the most impact. We want to support and enable our residents and communities as far as possible to take responsibility and identify and secure their own solutions to their needs.

What we have achieved

Working in partnership we have implemented a range of measures designed to alleviate the impacts and improve outcomes for individuals, families and communities experiencing the highest levels of deprivation. Croydon Council, Jobcentre Plus, the CAB and others are working in partnership through a new people-focussed service to provide a holistic advice and support service to help resolve the full range of issues that families experiencing crisis can face e.g. children's education, adult skills and employment, health, housing, adult social care, welfare benefits and money advice. We have also implemented practical solutions focusing on early help and prevention including Best Start, Early Help Pathways programmes, Pathways to Employment and encouraging businesses in Croydon to adopt the London Living Wage.

What will we do?

To help reduce inequality and deprivation, and support families to achieve their full potential the key priorities for the LSP are to:

- Reduce child poverty by increasing opportunities for flexible working
- Provide whole household services that increase resilience, self-reliance and independence, provide support to overcome crisis (including homelessness, unemployment) through high quality information, advice and guidance to support people living independent and healthier lives, supporting residents – young and old - into employment

- Provide tailored support for young people that are not in education, employment or training (NEET), people with disabilities and long-term unemployed to help make them access training and employment opportunities
- Encourage employers operating in the local economy to pay London Living Wage rates
- Provide advice and support to enable more people to access affordable childcare and flexible employment and thereby reduce child poverty

What will change?

- More working age residents will have the necessary skills to compete for jobs in the local economy and across the region
- Households on welfare benefit will be financially resilient
- More local employers will pay the London Living Wage rate
- More families will take up childcare through Best Start programme

Priority 2: Support individuals and families with complex needs

Why this is important

There are families and individuals in Croydon who struggle to cope with long-term and entrenched multiple complex needs. These can often include difficulties with parenting, homelessness, domestic abuse or violence, addiction and substance misuse, mental health problems, physical disability or long-term ill health, and anti-social behaviour and crime.

We want to provide support to these families and individuals, coordinate the input from public agencies, and work with them to address the underlying causes of their vulnerabilities. We know that this approach not only reduces the impact on our communities, and on public sector costs, but also helps people

“turn their lives around”, develop resilience and raise their aspirations. Croydon identified nearly 785 troubled families living in the borough at the start of the programme in 2012.

Croydon also provides supported housing and individual support to more than 800 vulnerable individuals who have either left an institution such as hospital or prison, or who are recovering from addiction or a traumatic experience to regain independence and resilience.

What we have achieved

Designing and implementing the multi-agency “People’s Gateway” concept originated to support Croydon residents impacted by welfare reforms introduced in 2013. Building on the success of our multiagency response to welfare reform and our Family Resilience Service, we want to broaden our whole family, holistic, early intervention and prevention focused approach to these groups. Of the 785 families identified as troubled families, 673 have “turned round” (as at September 2014)

What will we do?

- Develop intensive family support that reduces offending behaviour, non-attendance at school, worklessness and tackles domestic violence
- Across our multi-agency partnership embed a consistent, holistic approach to our contact with individuals and families
- Strengthen joint working to ensure individuals and families are identified and supported at key crisis trigger points to increase financial stability and increase independence and reduce demand and costs
- Reduce the number of people who present to services repeatedly through joint working, identifying support needs and a systemic approach
- Enhance our support to care leavers to improve their financial stability
- Reduce the barrier of unsuitable housing as a reason preventing a child from returning home

- Developing a Local Family Offer to strengthen parent / co-parent relationships
- Support Best Start Children’s Centres to reach more vulnerable families
- Initiate joint working to reduce the number of young people classed as not in employment, education or training
- Increase in the number of 16/17 year olds presenting as homeless who return to live at home

What will change?

- Individuals and families will be resilient and have increased their financial stability
- Increased focus on prevention and opportunities for earlier intervention, that is joined-up between services
- Housing will no longer be a barrier to returning a child home
- Fewer people will repeatedly present to services

Priority 3: Prevent homelessness

Why this is important?

Homelessness has been increasing since 2010 and its impact on Croydon has been particularly hard. The causes are complex and include the affordability of market housing, levels of house building, and the wider economy and labour market. Homelessness disproportionately affects young people, single parents and BME households. More than 3,000 of our households are homeless and living in temporary accommodation due to a lack of affordable housing. Spending on temporary accommodation has more than doubled since 2010. We also know that living in temporary accommodation impacts on families and particularly children’s health, effectively condemns families to “living in limbo” for long periods, and impacts employment, income and social inclusion. Rough sleeping has also increased, with Croydon having the fourth highest number of people sleeping on the street in London in 2015. We want to prevent homelessness wherever possible, enable individuals and families facing

homelessness to secure their own housing solutions, and ensure they are resilient and self-reliant enough to ensure the solution they choose is sustainable long-term.

What we have achieved?

Despite the scale and persistence of homelessness in recent years we have managed to restrain its increase through speeding up homelessness decision making, tackling processing pinch points, targeting housing options support to homeless applicants. In addition more than 1,000 households are prevented from becoming homeless every year by a range of organisations providing information, support and accommodation, including the Citizens Advice Bureau, local housing charities such as CAYSH. The multi-agency Gateway and Welfare Service mentioned above has helped over 1,100 families avoid homelessness, and helped 5,400 people to become more financially independent and supported 587 residents into employment. Considerable work has gone into securing accommodation for homeless households, including recently securing an additional 230 units of good quality, value for money accommodation in the borough at Concord, Sycamore and Willow Houses. Targeted support to people sleeping rough or that are destitute has also engaged over 100 people. Crisis have also secured premises for a new Skylight Centre which will provide education, health, housing advice and employment services to help homeless people rebuild their lives. The Croydon Skylight Centre will be located in Surrey St and will open in late summer 2016.

What will we do?

The LSP will focus resources on:

- Reducing the number of homeless families and individuals living in TA
- Providing timely housing advice, housing options, and support services (including with budgeting, debt advice, skills and employment) for households at risk of becoming homeless
- Explore the potential for a single homelessness hub

- Consulting on proposals to amend Croydon’s housing allocations scheme to include a higher priority for homelessness prevention
- Introduce a choice based lettings allocations service for housing applicants
- Working with voluntary and faith sector organisations provide shelter, engagement and a “hand-up” off the streets
- Continue to engage people living in destitute circumstances in Croydon

What will change?

- Homelessness will be prevented wherever possible
- Fewer homeless households living in temporary accommodation TA
- Croydon will have an effective, transparent and understandable housing allocations policy that provides choice to applicants
- Rough sleeping in Croydon will fall dramatically

Priority 4: Deliver better education and the opportunity for everyone to reach their full potential

Why is this important?

We want our children have the best possible start in life, to go on to achieve their potential, and to be independent and resilient throughout their lives. A good quality, well-rounded education leading to the best possible attainment at key stages, particularly at GCSE and A level, is the ideal every local authority area is striving to achieve. However, we know there is a complex relationship between poverty, inequality and social disadvantage and educational attainment, life chances, health and social contribution. This makes it very challenging to improve educational attainment in areas where a proportion of children grow up in deprived, socially disadvantaged families and communities. Croydon also has to respond to high numbers of refugees and unaccompanied asylum seekers. Teacher recruitment is a challenge as Croydon borders other local authority areas that can attract teachers with higher wages due to London weighting. We also know that raising educational standards contributes to

economic growth, personal independence, and helps make a place more attractive to potential residents, entrepreneurs and investors.

What have we achieved?

Croydon has made significant improvements in educational attainment in recent years. In 2015, 94% of parents were offered one of their top three primary school choices, and 89% were offered their top three secondary school choices. The percentage of pupils achieving a good level of development in Croydon in the Early Years Foundation Stage (EYFS) has been steadily improving and our attainment gap (between lowest and average achievers) is also falling. The proportion of pupils achieving Level 4 or above in reading, writing and maths in Croydon has also improved. At Key Stage 2 (KS2) tests at age 11, Croydon results in the expected level of achievement (Level 4+) in reading, writing and mathematics combined improved by 2% to 77%. At Key Stage 4 (KS4), GCSE results were above the national and statistical neighbours’ average. Croydon has had its highest proportion ever of Croydon schools judged by Ofsted at good or better. The progress made by Croydon schools in terms of inspection outcomes has been very encouraging: nevertheless we will continue to work for all our schools to be good or outstanding and for children to achieve outcomes in line with their peers in London at all key stages.

What will we do?

- Promote high standards in all schools, particularly where areas of weakness have been identified i.e. KS2 outcomes
- Ensure that vulnerable schools and schools causing concern improve rapidly by building on the success of the SPRM process and robustly challenging any slow progress, making full use of statutory powers when required
- To enable schools to improve English and mathematics outcomes at a faster rate, in all key stages, by securing differentiated, quality assured training and development

- Support and challenge post-16 collaboration to strengthen post-16 curriculum, viability and standards, and work with post 16 education providers on extending choice and improving outcomes
- Ensure Link Advisors challenge publicly funded schools in Croydon and achieve 2016 targets
- Work with Head Teacher Advisory Group to take forward whole borough priorities for improvement
- Improve home the learning environment and engage in the Early Language Development programme
- Improve familiarity with and provide training in EYFS Profile
- Implement the Croydon Improvement Challenge and support schools where there are concerns about pupil outcomes at KS1 and KS2
- Continue improving educational attainment with specific focus on:
 - Increasing take up of Best Start provision
 - Improving attainment at KS2 and A levels
 - Improving attainment of pupils in the most deprived areas of the borough (wards in the north and east)
 - Improving attainment of Looked after children including unaccompanied asylum seeking children (UASC)
- Further close the attainment gap for vulnerable groups
- Close the inequality gap at L2 and L3
- Higher grades at GCSE and 'A' level particularly for high achieving pupils

What will change?

- EYFS levels will improve and the attainment gap will narrow
- KS1 attainment in reading, writing and mathematics will improve and will exceed London attainment by 2017
- The number of schools below government floor standards will fall until in 2017 no Croydon school will be below the standard
- KS2 and KS 4 attainment levels will exceed the London average by 2017

- All schools will be judged to be good or better by OFSTED by 2017
- There will be no attainment gap, at all key stages (and particularly in combined reading, writing and mathematics at KS2), between Croydon's schools and the rest of London by 2017
- Young people will have a wide range of high quality post 16 education choices
- Young people will find the transition from education to employment easy and will have access to a range of opportunities
- The number of pupils achieving 5A*- C GCSE will increase to at least equal outer London by 2017

Priority 5: Secure a good start in life, improve health outcomes and healthy life expectancy

Why is this important?

We want everyone in Croydon to live longer healthier lives, and enjoy positive health and wellbeing. We know that this will enable people to fulfil their potential, to make a contribution and to be more resilient to life's inevitable challenges. However, our health is shaped by the relationship between our individual characteristics, our lifestyle and our environment. We also know that poverty, education and employment have a significant influence on health and wellbeing and this strategy also focuses on addressing these broader determinants of health (Outcome 1: A place to learn, work and live set out our approach to tackling the housing and employment challenges we face).

Croydon faces serious challenges, including an ageing population with the number of people over 85 increasing by two thirds by 2029. We are seeing an increasing demand for services with more people living with long term health conditions such as diabetes, heart disease, respiratory problems, and epilepsy. Croydon's health profile shows higher levels of obesity among adults and

particularly children (22.8%) than England, life expectancy 9.1 years lower for men and 7.7 years lower for women in the most deprived areas of Croydon than in the least, and rates of sexually transmitted infections and TB are worse than the national average. We also know that we have more work to do in encouraging people to reduce their alcohol intake and take up an active healthy lifestyle. Our overall aims are to increase healthy life expectancy and reduce the life expectancy between communities.

We also recognise that by improving the effectiveness, focus and integration of our partnerships and concentrating on the needs of our places and communities we can improve the way that health care services are delivered, ensure that services meets national standards, address future challenges such as obesity and diabetes by delivering services in the right way, and deliver services within the budgets available.

What we have achieved?

The JSNA core data set shows Croydon is doing significantly better than England and among the top performing 25% of authorities/CCGs in: hospital admissions caused by injuries in children; deaths from oesophageal and colorectal cancers; early deaths from liver disease; alcohol attributable deaths (men); and emergency admissions for acute conditions that should not require admission to hospital.

Croydon is also a food flagship borough and this project is helping improve health, cooking skills and food standards through school-based and community projects. Our public health grant provides resources to tackle the health consequences of poor housing, inequalities in access to work in new ways, for example, our 'First Steps into Work' supports lone parents in Croydon; we also support alcohol and drug awareness education in schools and colleges; and target the causes of social isolation and loneliness through befriending services, lunch clubs and other activities.

Stopping smoking is an effective way of improving health and preventing long-term conditions developing, and our evidence-based stop smoking services have helped nearly 18,000 people quit smoking since 2001, preventing an estimated 890 deaths. Croydon's levels of smoking at time of delivery, and levels of smoking related deaths are also better than the England average. In the 2015 Croydon provided support for 2,200 local people who successfully quit smoking.

Croydon CCG achieved the highest performance on Quality on the national and local indicators of all South London CCGs. It also implemented 18 new care pathways across a variety of specialities, a GP led minor injuries unit at Purley and Parkway to reduce attendances at A&E, and invested in multi-disciplinary, rapid-response teams to provide a single point of access for older people in the community. Croydon has also developed outcomes based commissioning (OBC) for our residents aged over 65 which brings together high quality, safe, seamless care and supports people to stay well and independent. The OBC uses an innovative Accountable Provider Alliance (APA) model where the provider is responsible for delivering health and social care services over the 10 year contract term, which begins in 2016. The APA is made up of the following local organisations: Age UK, Croydon Council Adult Social Care, Croydon GPs Group (this is all the GP practices in the borough), Croydon Health Services NHS Trust, South London & Maudsley NHS Foundation Trust.

What will we do?

- Transform and improve the sustainability of our health care services by:
 - placing a greater emphasis on prevention and early intervention;
 - focusing on delivering better health and social care services when our populations need them;
 - improving the patient journey through the system and delivering the right care in the best setting;

- Improving the outcomes delivered in our acute services by optimising site configuration and clinical networking;
- addressing the challenges of cost reduction, performance and operational improvement by exploring opportunities for collaborative productivity.
- Give children a good start in life by
 - Improving immunization take up
 - Reducing levels of obesity in children
 - Improving childrens emotional and mental wellbeing
 - Improve health outcomes for looked after children
 - Reducing low birth weight
 - Increasing breast feeding
- Prevent illness and injury by
 - Reducing obesity among our adult population
 - Reducing smoking prevalence
 - Reducing harm caused by alcohol misuse
 - Increasing early diagnosis and treatment of sexually transmitted infections and HIV
 - Preventing illness and injury and promote recovery and
- Increase healthy life expectancy by early detection and treatment of cancers, cardio vascular diseases and diabetes
- Encourage healthy lifestyles through our digital Livewell platform, integrated leisure services provision
- Support people to be resilient and independent through rehabilitation and reablement, and supporting carers
- Provide integrated, safe, high quality services including redesigning mental health and urgent care pathways
- Focus on safeguarding priorities that impact upon children and adults, including Female Genital Mutilation, Trafficking, DASV and Radicalisation, also focus upon child sexual exploitation (CSE) and missing children.

What will change?

- Everyone will have the information and support they need to live a healthy active lifestyle and make healthy choices
- Healthy life expectancy will increase and the gap between different communities will reduce
- Organisations will work together to address factors that influence health problems amongst
- More people will participate in physical activity as part of a healthy lifestyle, and fewer will smoke , or drink unsafe levels of alcohol

WHO IS RESPONSIBLE?

CROYDON HEATH AND WELLBEING BOARD

CHILDREN & FAMILIES PARTNERSHIP BOARD

CHAIR OF THE HEALTH AND WELLBEING BOARD
COUNCILLOR MARGARET MANSELL

CABINET MEMBER FOR CHILDREN, YOUNG PEOPLE & LEARNING
COUNCILLOR ALISA FLEMMING

CABINET MEMBER FOR FAMILIES, HEALTH AND SOCIAL CARE
COUNCILLOR LOUISA WOODLEY

10. OUTCOME 3: A PLACE WITH A VIBRANT AND CONNECTED COMMUNITY AND VOLUNTARY SECTOR

Communities are a critical resource. They are our extended local family where we come together to discuss and make decisions, sort out problems, improve our surroundings, celebrate and entertain. Community-driven, neighbourhood-based actions are therefore best placed to underpin work to improve and develop our local areas. With major public sector reforms underway and ever reducing budgets, cooperation between public, voluntary and community sectors to deliver smart, innovative and localised services is more important than ever. Without active residents, strong communities and a resilient voluntary sector our priorities to deliver growth, promote safety and support and empower people cannot fully be realised.

In order to develop an active community that helps secure the success of partnership work and provide stability and reassurance when delivering our joint priorities, we need first to understand the extent and variety of community based activities that already exist. This will allow us to link our community resources better and provide the foundations for further development of the community and voluntary sector, so that it has the capacity and confidence to tackle local issues and deliver innovative solutions.

Priority 1: Connecting our residents, local groups and community organisations

Why is it important

Croydon has a diverse community – ethnically, racially and culturally. Such diversity brings great social and economic benefits to the borough, but makes it all the more important to work to strengthen community cohesion and advance opportunity and fairness. As partners we want to support the development of inclusive communities that are dynamic, connected and fair, where people are

not divided by differences but recognise the benefits of diversity, respect and learn from each other, and connect by sharing common goals and aspirations.

We want to support areas that face difficulties, share best practice between groups and organisations and raise awareness of local forums to bring people together to collaborate. Croydon is very fortunate in having a wide-range of community groups, networks, clubs and associations. We need to build on the wealth of existing community-driven initiatives to encourage more engagement and participation, create a sense of belonging for more local people and inspire more residents from diverse backgrounds to connect and communicate.

We publish information on community and voluntary sector (VCS) activities to help groups and organisations share intelligence and good practice. We will work with local partners to encourage a wider range of social and cultural street and neighbourhood activities. We will also introduce a programme of inter-faith and cultural activity that celebrates diversity and promotes community integration. This will help people get to know each other and connect with their neighbourhoods. Improving links between existing community resources will help to foster the development of common goals, such as engaging more residents in civic participation and community work.

What we have achieved

Local groups and community organisations are run by local people from diverse backgrounds, focusing on a variety of activities and delivering a wide-range of benefits. Equality and inclusion is promoted through community engagement activities like Holocaust Memorial Day, the London Road Carnival, faith celebrations to generate tolerance and understanding of the beliefs and traditions of faith groups in Croydon. Over 80 Big Lunch events brought neighbours together to share a meal and enjoy each other's company, an opportunity to tackle social isolation. Braithwaite Hall was used for community events such as a Craft Beer Festival; a Cultural Food Festival is planned.

What will we do?

- Publish a directory of community and voluntary sector organisations
- Map out areas with strong community engagement and activism as well as areas with underdeveloped community involvement
- Publish information that celebrates community activities, promotes community engagement and dispels myths preventing community cohesion
- Work with partners to develop an engagement programme and advance equality and inclusion
- Encourage social and cultural street and neighbourhood activities
- Develop a programme of inter-faith and cultural activity that promotes community integration
- Work with local partners to support community development.

What will change?

- A greater proportion of people say they are involved in civic participation
- A greater proportion of people say people from different backgrounds get on well together in their local area
- A greater proportion of people feel they belong to their local neighbourhood
- Local people have information about community groups and organisations in their areas
- Increased number of street and neighbourhood-based social, cultural and inter-faith activities.

Priority 2: Strengthen and mobilise our voluntary, community and social enterprise sector

Why is it important

Devolution brings exciting opportunities to encourage local improvements and growth through locally initiated actions. We recognise that the challenges we face are complex and often manifest themselves through issues and needs embedded in local neighbourhoods. We understand that while each neighbourhood is unique, many experience common issues that become barriers to community cohesion and tackling inequalities. Factors such as population growth, insecure housing, language barriers, crime and ASB, social isolation, lack of accessibility of good quality amenities and retail offer can impact on residents' ability to come together to improve their neighbourhoods.

We see the potential for local community, voluntary, faith and social enterprise groups and organisations (VCSE sectors) to become an embedded resource that supports our 'place' and 'people' targeted partnership priorities and facilitate engagement with residents and communities to help better respond to unique neighbourhood needs and inspire long-term improvements. Strong communities require facilitators that will understand local needs, and deliver services that fit their requirements. We believe that Croydon's VCSE sector is crucial in supporting delivery of smarter public services, as well as in creating locally run services that address the need in a flexible and efficient way to prevent or address the issues, improve lives of communities and facilitate community development.

We know that delivery of better outcomes relies on creating prosperous communities that feel empowered to shape and support local services. It relies on more people taking up volunteering opportunities and it relies on VCSE sector's resilience to engage volunteers in a meaningful way. We want to make

sure that we build on existing community resources and work closely with our voluntary and community organisations and social enterprises (VCSE) to create joined-up, flexible frameworks and structures that will maximise growth and resilience within the sector. We want to develop approaches that enable creation of an environment in which a thriving VCSE can deliver even greater benefits to our residents.

We will explore opportunities such as development of connected community spaces and places using a range of assets. We recognise that community isolation and fragmentation can be successfully challenged by shifting the focus from what's missing to mapping community skills, resources and assets and strengthening what's already there in neighbourhoods and communities. We will work with partners to develop a borough-wide volunteering framework to ensure there is a wide spectrum of volunteering opportunities that will make it easier for anybody to get involved, from one-off, temporary involvement to regular engagement and volunteer leadership opportunities. We will work with partners to leverage more funding to the VCS and opportunities to deliver greater social value. We will be re launching the Active Communities Fund and are reviewing our community ward budgets to ensure they support community development. We created an outcome-based framework for the new Community Fund to ensure it tackles issues and delivers priorities raised by local people through the opportunity and fairness commission. We want to work with the VCSE to address those tough issues.

We understand that the solutions cannot be delivered by "one size fits all" service models.

We believe that joined-up, tailored initiatives designed to tackle local issues that are being delivered or supported by services provided by VCSE to address neighbourhood-based needs, can greatly improve the outcomes for our residents, prevent and provide solutions to many of the problems, release some of the pressure placed on public services and become triggers to increasing

local activism as communities unite to tackle disadvantage and develop local solutions together with local organisations. Thus, we will be working with local partners to create an environment which strengthens the sector and mitigates barriers to its growth.

What we have achieved

Croydon has a thriving voluntary and community sector, with more than 1700 organisations working in the borough in all sectors including the arts, environment, sport, health and social care. We want to harness the talents of local people through strengthening our local voluntary, community, social enterprise and faith sectors.

What will we do?

- Explore opportunities to develop connected community spaces and places, using a range of assets [Check IDP and local Plan]
- Deliver and review community ward budgets
- Work with partners to leverage more funding to the VCS and opportunities to deliver greater social value
- Work with partners to develop a borough-wide volunteering framework
- Relaunch the Active Communities Fund
- Work together to address tough issues including social isolation...
- Ensure that the new Community Fund delivers outcomes from the opportunity and fairness commission

What will change?

- A greater proportion of local organisations report that Croydon provides an environment for thriving and growing voluntary, community and social enterprise sector
- Increased levels and models of volunteering
- A greater proportion of people feel that they influence decisions in their local areas

- Improved trust in local agencies
- Voluntary, community, social enterprise sectors actively engaging and participating in partnership work and developing and delivering local services
- An increased proportion of social enterprises and voluntary sector organisations deliver services in the borough

WHO IS RESPONSIBLE?

STRONGER COMMUNITIES PARTNERSHIP BOARD

11. MAKING IT HAPPEN

This sections sets out what will be achieved over the five year term of this strategy. The Local Strategic Partnership (LSP), which brings together partners from the public, private, voluntary, community and faith sectors has overall responsibility for ensuring that all partners collaborate effectively to achieve the priorities outlined in this strategy.

The LSP will review performance against this plan on a quarterly basis, members directing resources as appropriate to work on issues that can only be addressed jointly. The five thematic partnership boards (Growth, Safer Croydon, Children and Families, Health and Wellbeing, Stronger Communities) as well as the children and adult safeguarding boards will be primarily responsible for ensuring that these outcomes are achieved. The LSP will continue to develop a joint understanding of the implications of key policy developments, emerging priorities, as well as working together to influence areas requiring improvement.

Principles

The LSP will promote and encourage innovation, collaborative working and robust community engagement, including co-production of services

to ensure that together we deliver outcomes that make a real and valued difference to people's lives. In order to achieve the best outcomes we will commit resources to preventative and early intervention services. This will include harnessing community and voluntary sector resources to bridge gaps between funded provision and actual need in the ever present austere economic climate. Wherever it is practical and beneficial we will seek to integrate service planning, resources and delivery mechanisms across partner organisations in order to maximise efficiency and achieve best value.

OUTCOME ONE: A PLACE TO LEARN, WORK AND LIVE

PRIORITY	PARTNERSHIP OUTCOME	PERFORMANCE INDICATORS (AFC if possible)	WHO IS RESPONSIBLE?
1. Deliver the infrastructure for growth	<ul style="list-style-type: none"> Support the creation of 16,000 jobs - accessible to all - in a range of growing sectors including creative, digital and information technology; financial and professional services; construction; retail; leisure; education; health and social care. 	<ul style="list-style-type: none"> Number of employee jobs within Croydon Not AFC Percentage of working age adults claiming out-of-work benefits AFC – JSA claimants indicator 	
	<ul style="list-style-type: none"> Promote opportunities relevant to the development of one of Europe’s largest urban shopping and leisure centres – the Whitgift redevelopment. 	<ul style="list-style-type: none"> Overall occupation rates for business premises within the borough AFC Occupation rates for business premises within the town centre AFC 	
	<ul style="list-style-type: none"> Attract investment to our district and local centres, creating vibrant communities across the borough and ensuring that all of Croydon is a great place to live, work and visit. 	<ul style="list-style-type: none"> Occupation rates for business premises within the district centres AFC 	
	<ul style="list-style-type: none"> Work to promote Croydon’s position as a premier office location through the development of new high-quality office space, and reduce the excess supply of older office stock. 	<ul style="list-style-type: none"> The volume (m²) of new Grade A commercial space delivered within the borough AFC 	
2. Build new homes	<ul style="list-style-type: none"> Provide a choice of housing for people at all stages of life, addressing housing shortages in the borough by enabling at least 9,500 housing starts over the next five years. 	<ul style="list-style-type: none"> Number of market homes started (for sale or for rent) AFC The number of affordable homes completed (gross) AFC 	
3. Support the local economy to grow		<ul style="list-style-type: none"> Number of small and medium enterprises (SMEs) in Croydon AFC Number of business births not AFC 	
4. Deliver a vibrant cultural offer		<ul style="list-style-type: none"> Number of visitors to Croydon AFC 	
5. Secure a safer, cleaner		<ul style="list-style-type: none"> How people rate the overall level of crime 	

PRIORITY	PARTNERSHIP OUTCOME	PERFORMANCE INDICATORS (Afc if possible)	WHO IS RESPONSIBLE?
and greener borough		<p>in Croydon today compared with the overall level one year ago AFC</p> <ul style="list-style-type: none"> • How safe people feel in Croydon AFC • Reduction in the number of offences for priority crimes AFC – MOPAC 7 – renamed as current MOPAC 7 set out by Mayor’s Police and Crime Plan due to expire in 2016 • Number of flytipping incidents not AFC – this indicator in AFC has been changed to % cleared in 48 hours • Reported incidents of antisocial behaviour AFC • Percentage of domestic violence sanction detections AFC 	

OUTCOME TWO: A PLACE OF OPPORTUNITY FOR EVERYONE

PRIORITY	PARTNERSHIP OUTCOME	PERFORMANCE INDICATORS	WHO IS RESPONSIBLE?
1. Reduce poverty and deprivation	<ul style="list-style-type: none"> Increasing proportion of working age residents across all cohorts have the necessary skills enabling them to compete for available jobs in the local economy and across the region Household incomes of welfare benefit claimants is maximized and they are more financially resilient Increasing proportion of local employers paying London Living Wage rate Increasing take-up of childcare through Best Start programme Work with CCG to review current practice around health issues and employment 	<ul style="list-style-type: none"> Percentage of working age adults claiming out-of-work benefits AFC – JSA claimants indicator The reduction in the number of adults who have no qualifications in the borough – NEW AFC equalities indicator Number of households engaged with welfare teams who are being provided with debt / budgetary advice AFC Proportion of people earning less than the London Living Wage not AFC Percentage of eligible three and four year olds accessing funded early education AFC Percentage of eligible two year olds accessing funded early education AFC 	
2. Prevent homelessness	<ul style="list-style-type: none"> Reducing number of homeless presentations, particularly from the black community where the rate is high relative to other groups in the community. Improving standards in the private rented sector 	<ul style="list-style-type: none"> A) The number of households accepted as homeless under the Housing Act AFC. B) Reduction in the number of households accepted as homeless under the Housing Act from BME backgrounds New AFC equalities indicator. The % of private rental housing stock licensed through the selective licensing scheme AFC Affordability of private rent - median monthly private sector rent as a % of the median gross monthly salary AFC 	
3. Support families with complex needs	<ul style="list-style-type: none"> Individuals and families are able to achieve their full potential 	<ul style="list-style-type: none"> The number of families who have been successfully supported through the Think Family programme AFC - Number of 	

PRIORITY	PARTNERSHIP OUTCOME	PERFORMANCE INDICATORS	WHO IS RESPONSIBLE?
		<p>families who have achieved a Troubled Families Outcome</p>	
<p>4. Deliver better education and the opportunity to reach full potential</p>	<ul style="list-style-type: none"> • Increasing take up of Best Start provision • Improving attainment at KS2 and A levels • Improving attainment of pupils in the most deprived areas of the borough (wards in the north and east) • Improving attainment of Looked after children including UASC 	<ul style="list-style-type: none"> • The proportion of pupils achieving Level 4 or above in Reading, Writing and Maths at Key Stage 2 AFC • Educational attainment by the age of 19 at Level 3 AFC – alternative more closely linked to outcome is ‘% of students achieving AAB grades or better at A – level’ which is not in AFC • Proportion of children in care achieving Level 4 or above in Reading Writing and Maths at Key Stage 2 not AFC • Proportion of children in care achieving 5 or more GCSEs grades A*-C including English and maths not AFC 	
<p>5. Secure a good start in life, improved health outcomes, and increased healthy life expectancy Improve health outcomes and life expectancy</p>	<ul style="list-style-type: none"> • Improved practice in relation to pre-birth and children under one year old to mitigate risks identified • Reduction in level of child poverty • Reducing childhood obesity through healthy eating and increased physical activity • Improving health outcomes for looked after children • Improving emotional wellbeing and mental health of children and young people • Better multi agency working to deliver more effective early help for children • Better trained workforce to better safeguard children and adults and tackle issues such as Female Genital Mutilation, 	<ul style="list-style-type: none"> • Proportion of children aged under 16 in low income households AFC • Percentage of children in Reception (aged 4-5) who are classified as overweight or obese AFC • Percentage of children in Year 6 (aged 10-11) classified as overweight or obese AFC • Average Strengths and Difficulties Questionnaire score for Looked After Children not AFC • The number of Child Protection Plan (CPP) cases per 10,000 children within the borough AFC • The number of Looked After Children (LAC) cases per 10,000 children within the 	

PRIORITY	PARTNERSHIP OUTCOME	PERFORMANCE INDICATORS	WHO IS RESPONSIBLE?
	Trafficking, Domestic abuse and sexual violence, Radicalisation, Child sexual exploitation and Missing.	borough AFC	

OUTCOME THREE: A PLACE WITH A VIBRANT AND CONNECTED COMMUNITY AND VOLUNTARY SECTOR

PRIORITY	PARTNERSHIP OUTCOME	PERFORMANCE INDICATORS	WHO IS RESPONSIBLE?
<p>1. Connecting our residents, local groups and community organisations</p>	<ul style="list-style-type: none"> • Increasing the proportion of people who say they are involved in civic participation • Increase the proportion of people who say people from different background get on well together in their local area • Increasing the proportion of people that feel they belong to their local neighbourhood • Increased intelligence around existing community groups and organisation so that everybody in the community knows, understands and has access to information about different groups that exist in their area • Increasing number of street and neighbourhood based social, cultural and inter-faith activities 	<ul style="list-style-type: none"> • The proportion of people from different backgrounds who feel they participate and influence NEW AFC equalities indicator – requires new data collection • Percentage of people who believe people from different backgrounds get on well together NEW AFC equalities indicator – requires new data collection • Percentage of people who feel they belong to their current neighbourhood not AFC – requires new data collection 	<p>EVERYBODY!</p>
<p>2. Strengthen and mobilise our voluntary, community and social enterprise sector</p>	<ul style="list-style-type: none"> • Increasing proportion of local organisations which report that Croydon provides an environment for thriving and growing voluntary, community and social enterprise sector • Increasing levels and models of volunteering • Increasing proportion of people that feel that they influence decision in their local areas • Improved trust in local agencies • VCSE sector actively engaging and participating in partnerships work and 	<ul style="list-style-type: none"> • The proportion of people from different backgrounds who volunteer NEW AFC equalities indicator – requires new data collection • The proportion of people from different backgrounds who feel they participate and influence NEW AFC equalities indicator – requires new data collection • The proportion of people from different backgrounds who have trust in public services NEW AFC equalities indicator – requires new data collection 	

PRIORITY	PARTNERSHIP OUTCOME	PERFORMANCE INDICATORS	WHO IS RESPONSIBLE?
	developing and delivering local services <ul style="list-style-type: none"> <li data-bbox="562 272 1115 373">• Increasing proportion of social enterprises and voluntary sector organisation that deliver services in the borough 		

12. LINKED STRATEGIES AND PLANS

Strategies and plans which support this Community Strategy are listed below under each partnership board [LINKS TO BE INSERTED]:

Children and Families Board

- Children and young people's plan 2016-17 [INSERT LINK WHEN AVAILABLE]
- [Child Poverty Strategy 2013-16](#)

Health and Wellbeing Board

- [Joint Health and Wellbeing Strategy 2013-18](#) [UPDATE LINK WHEN AVAILABLE]
- [Croydon Integrated Mental Health Strategy for adults 2014-19](#)
- [Dementia strategy 2013-16](#)
- [Joint sexual health strategy 2012-16](#)
- Drug and alcohol strategy 2013-18 [INSERT LINK]

Stronger Communities Board

Stronger Communities Plan 2016-19 [INSERT LINK WHEN AVAILABLE]

Safer Croydon Partnership Board

- Safer Croydon Community Safety Strategy 2014-17
http://www.croydonobservatory.org/Strategy_Crime_and_Community/
- Domestic and sexual violence strategy 2015-18 [INSERT LINK]

Growth Board

- [Croydon Promise 2014](#)
- The Local Development Framework (Croydon Local Plan and Master plans) can be found at www.croydon.gov.uk/planningandregeneration/framework

Supporting LSP strategies, plans and supporting documents

- Joint Health and Wellbeing Strategy 2013/18
- Children and Families Plan 2016-17,
- Skills and Employment Plan
- Joint Strategic Needs Assessment – Core dataset
- Croydon Health Profile (Public Health England)
- Annual report of director of public health

South West London Sustainability and Transformation Plan

Croydon CCG Governing Body 24th May 2016

Croydon Health and Wellbeing Board 8th June 2016

Agenda

- Overview of the STP incorporating Croydon Sub Regional Plan
- Timeline
- Engagement
- Next Steps

What is a sustainability and transformation plan?

- NHS shared planning guidance 2016/17 – 2020/21 sets out new approach to ensure health and care services are planned by place rather than around institutions
- A plan to improve the way that health care services are delivered to ensure that:
 - the quality of services meets national standards;
 - we address future challenges such as obesity and diabetes by delivering services in the right way;
 - inequalities are reduced across the area;
 - we work within the available budget
- This is an opportunity to build or strengthen relationships - across health and local government – but also with patients, communities, staff and the voluntary sector.

Our plan should:

- be based on the geographical area of south west London - include all services across this area
- improve quality of care
- reduce waiting times for A&E, cancer and mental health
- address the sustainability and quality of general practice
- align with the CCG's 2016/17 Operating Plan
- reflect local Health and Wellbeing Strategies
- return the system to financial balance

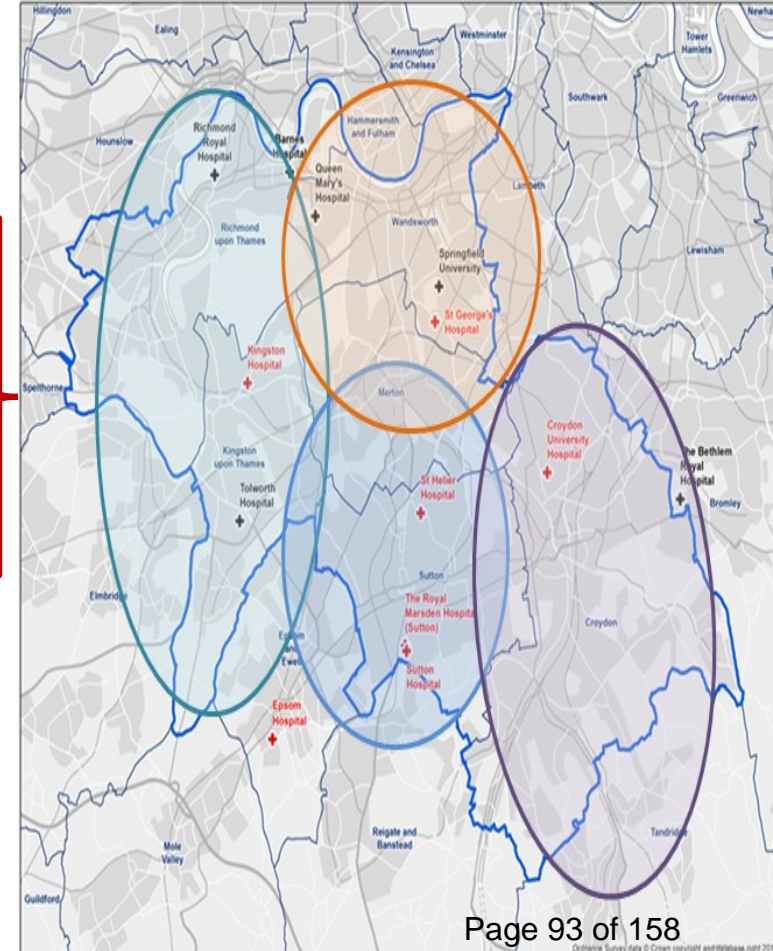
Planning levels that contribute to the STP

Existing SWL workstreams, e.g. Urgent & Emergency Care	Develop condition/pathway specific quality improvement, productivity enabling plans. Input commissioners and providers across SWL.
4 x sub-regional planning groups:	Responsible for the development of sub-regional out of hospitals plans.
6 x CCGs working with local authorities	Responsible for the development of local cross partner prevention plans.

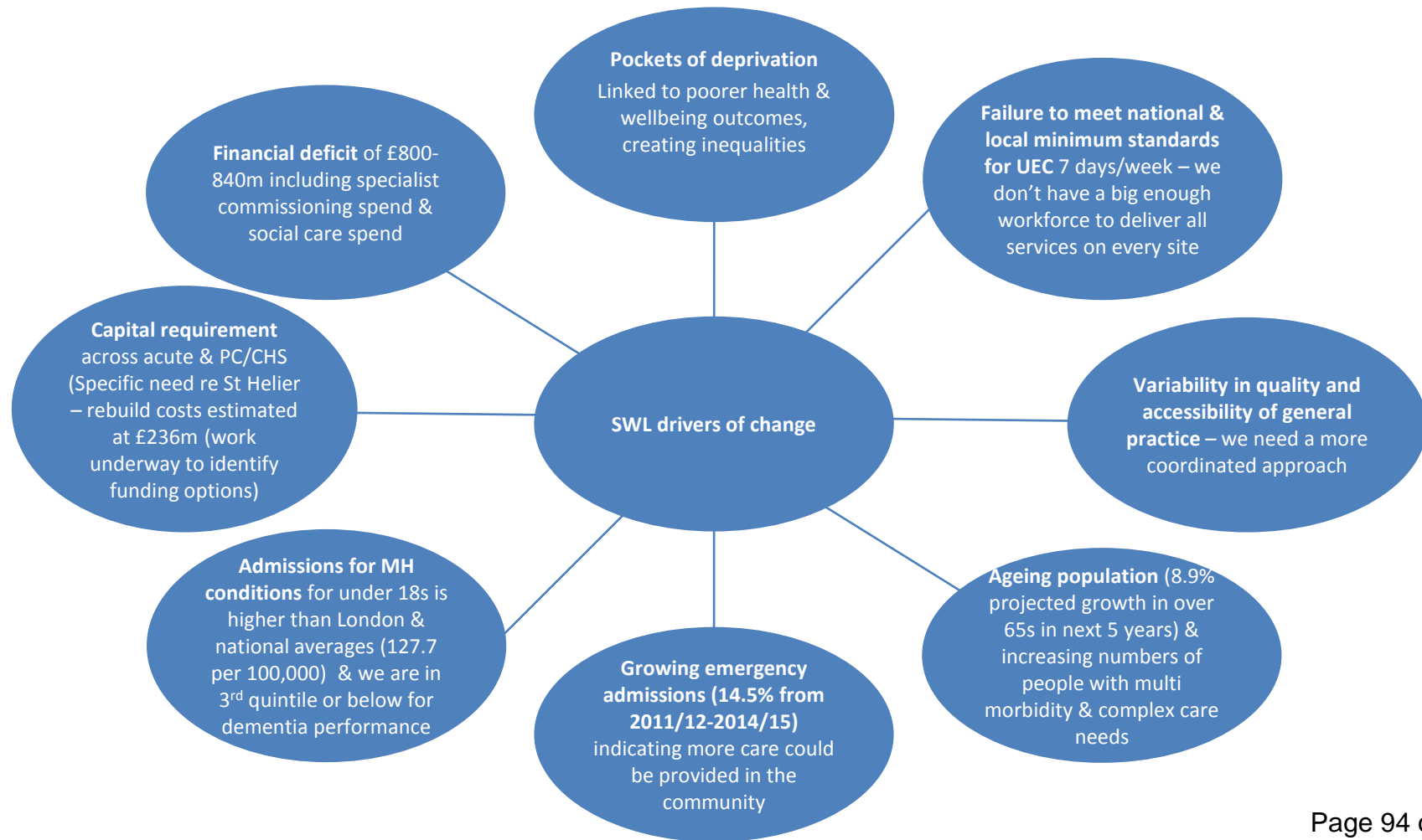
Four sub-regional planning footprints (borough not CCG combined pops):

Richmond and Kingston Planning Group	Population: 363,543
Croydon Planning Group	Population: 376,040
Wandsworth and Merton (*2/3) Planning Group	Population: 447,822
Sutton and Merton (*1/3) Planning Group	Population: 265,972

Plus patient flows to ESUH from Surrey Downs CCG



Drivers for change in South West London:



Our three gaps - to be met through the STP

1. **Health and wellbeing**
2. **Care and quality**
3. **Finance and efficiency**

Our Health and Well Being Challenge

South West London

- Inequalities with pockets of **deprivation** across South West London
- **Behaviours** - Smoking, inactivity, poor diet and drinking too much
- **Growing and aging population with diabetes**
- **Cancer** is a major cause of premature death
- High **hospital admissions for mental health conditions for under 18s**
- **Prevention in early years could be improved particularly childhood obesity**



Croydon

- Increasing **deprivation** with significant deprivation in north of the borough, Fieldway, New Addington and Shrublands
- **Smoking:** Smoking prevalence in Croydon is close to the national average. (est 17.0% of adults smoke)
- **Obesity:** One in four children aged four to five years are overweight or obese, and one in three children aged ten to eleven years are overweight or obese. An estimated 62.1% of adults are overweight or obese. **Physical activity** levels are lower than the regional average
- There are 48,500 **over 65s** in Croydon and they represent approximately 1 in 8 of Croydon's population at present and projected to grow.
- **Diabetes:** Croydon has a higher prevalence of people with diabetes than London or England
- **Circulatory diseases, cancers and respiratory diseases** remain the cause of the majority of excess **deaths which contribute to the gap in life expectancy**
- Health Screening: Breast and cervical **cancer** screening rates are both significantly worse than the national average
- The **prevalence of severe mental illness** in Croydon is significantly higher than the national average, but similar to London. **Admissions for mental health conditions for under 18s** is higher than London and national averages.



In addition Croydon faces a number of other health and well being challenges

- **Significant population growth** - from 376,000 to 200,000 by 2022
- Over half of the population is from a **black, Asian and minority ethnic group**
- **Inequality in Life Expectancy:** Life expectancy is 9.1 years lower for men and 7.7 years lower for women in the most deprived areas of Croydon than in the least deprived areas
- **Employment:** Over a quarter of jobs in Croydon are estimated to pay below the London Living wage in 2014 and the proportion of people claiming Job Seekers Allowance is above the regional and national average
- **Housing:** Housing and homelessness represents a significant and growing challenge for Croydon in coming years. Homelessness has been increasing in Croydon over the past few years following a sustained decrease since 2003
- **Social Isolation:** Croydon has a lower rate of permanent admission into care homes, 421 per 100,000 over 65s compared to 465 per 100,000 in London and 651 per 100,000 in England. Only 44.3% of people have reported they have as much social contact as they would like, which is similar to the national average of 44.5%

Our Care and Quality Challenge

South West London

- **Failing minimum standards** for urgent care and emergency care in our hospitals including 7 day working
- **Variation in how primary care** is co-ordinated for patients and perceived perceptions of accessibility
- **Increase in emergency admissions, non elective bed days and bed occupancy**
- **13% of patients could have avoided admission and a further 42% could have benefit form early discharge**
- **Poor rate of admissions for people**

Croydon

- Of the 172 applicable **London Quality Standards**, Croydon Health Services met 99 standards and did not meet 61 standards (there is insufficient evidence for 12 of the standards)
- Number of **variations in primary care quality and performance**, including diagnosis, referrals, leading to varying experiences of care and outcomes for people
- Highest level of NEL Admissions in London
- 18% of patients could have avoided admission and a further 39% could have benefit form early discharge

In addition Croydon faces a number of other care and quality challenges

Independence and independent living

- **Patients living at home:** The percentage of older people still at home 91 days after leaving hospital was 65.3% in 2012/13 compared with 81.4% for London overall
- **Social care-related quality of life:** People report quality of life in 2012/13 was 18.4 compared to 18.7 the previous year and the national average of 18.8
- **Control over daily life:** The percentage of people who use services who reported control of their daily life decreased to 68.8 in 2014/15 from 74 the previous year and remains below the national average of 75.1

Patient experience

- **Access to GP services:** patient experience has fallen to 71.4% from 73.4% from the previous year and remains below the national average of 73.3%
- **Community mental health:** patient experience has fallen during 2014 from a score of 8.75 to 7 (out of 10)
- **Hospital care – inpatient:** patient experience has improved for 2014/15 to 70.5% from 67.1%. It is however below the national average 76.6%
- **Hospital care – outpatient:** patient experience has remained similar for 2014/15 at 74.4% however it remains below the national average 79.5%
- **Hospital care - A&E:** patient experience has remained similar for 2014/15 at 73% however remains below the national average 80.7%
- **Carer with social services:** satisfaction has fallen from the previous year to 25.5% from 29.9% and remains below the national average of 42.7%
- **People who use services with their carer and support:** satisfaction has improved to 59.9% in 2014/15 from 57.9% the previous year. It however remains below the national average 64.1%

Our Financial Challenge

South West London

Across South West London **the health and local authority pressure is £864m**. Of this:

- the **health 'do nothing'** financial scenario is £595m
- The **local authority challenge** is £128m*

Under this scenario, with activity continuing to grow the demand for beds would increase by an estimated 454 by 2020/21, requiring additional capacity across the provider sites.



Croydon

Financial Gap (5 Years) based on do minimum scenario

- CCG** = £53.8m
- CHS** = £80.8m
- SLAM** = £13.2m
- NHSE (Primary Care) = NIL
- LA Adult Social Care = £35.5m

Assessed Opportunities (5 Years)

- CCG = £17m
- CHS = £23.5m
- SLAM = £3m
- NHSE (Primary Care) = NIL
- LA Adult Social Care = £24m

* Due to budgetary processes this an estimate for 2019/10 and not 2020/21

** Source: Deloitte (8 March 2016) adjusted to remove all CIPs

The SWL Vision

Our Mission

Helping South West London's residents to start well, live well and age well



Our Vision

People live longer, healthier lives. They are supported to look after themselves and those they care for. They have access to high quality, joined up health and care services when they need them that deliver better health outcomes at a lower cost of provision to the system

Service design principles

1. Care is patient centred & holistic

- Inclusive & recognises the role of family, friends, communities & voluntary organisations
- Joined up and crosses organisational boundaries, encompassing people's physical, mental and social care needs
- Easy to navigate

2. Care is proactive & preventative

- Focussed on enabling people to stay well and avoid healthcare instances
- Prioritises early detection – people have access to early support mechanisms
- Promotes self management – people are encouraged to take responsibility for their healthy lives

3. Care supports the quality of life and the outcomes people value

- People are supported to live life as fully as possible for as long as possible
- People are aware of the choices available and have greater control

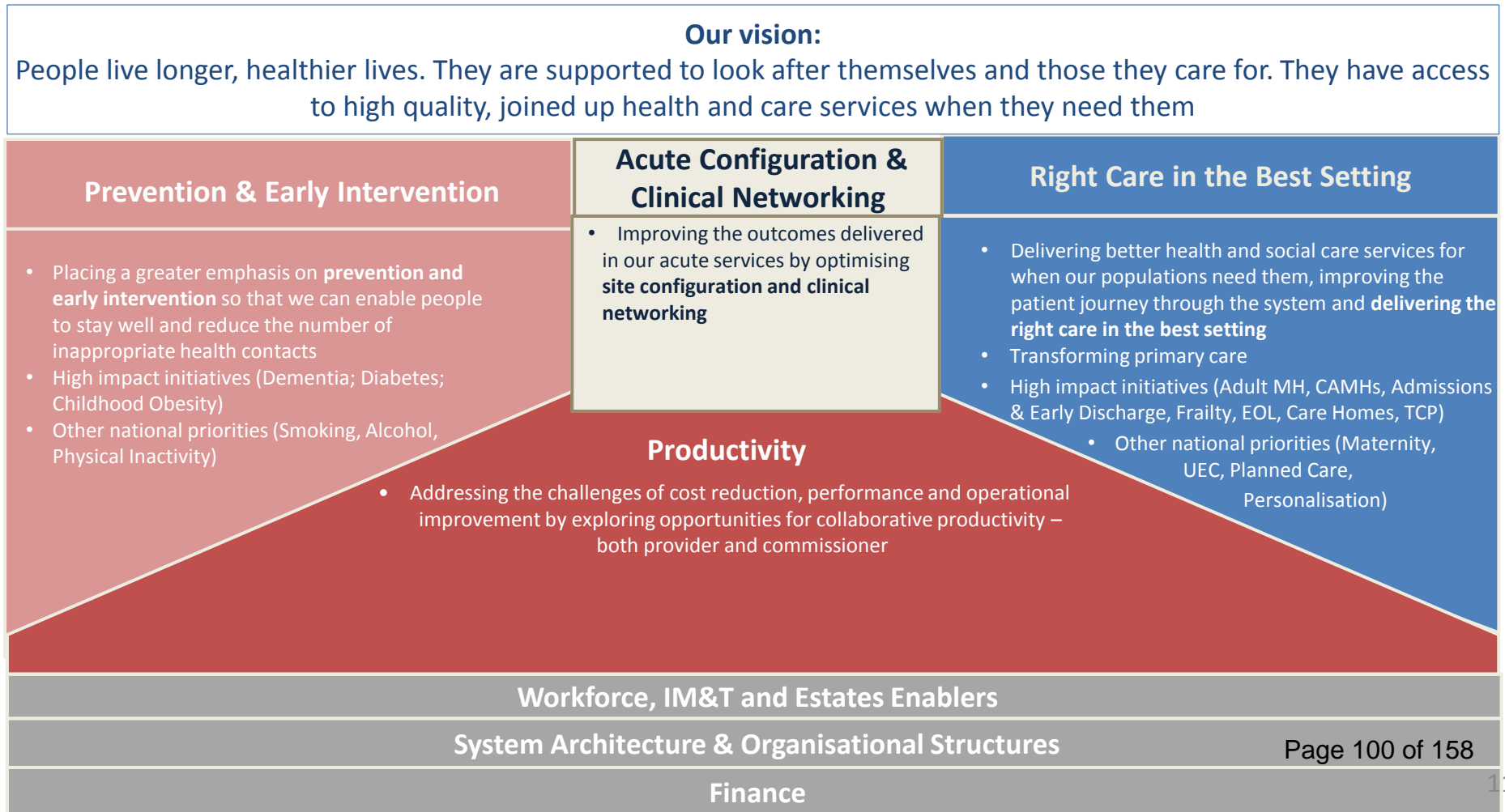
4. Care is financially sustainable

5. Our staff and care givers feel supported and able to do their roles

Service development principles

1. We focus on **better health outcomes at lower cost of provision to the system**
 - We work in partnership across all health and social care organisations including the third sector to design and deliver the solutions
 - We make better use of resources, irrespective of the organisation
 - We plan for a changing environment
2. We will rapidly adopt **evidence based care** (where possible)
3. We maximise the use of **digital technology**, for the benefit of all stakeholders

Our vision & priorities to close the gaps on quality, health & finance by 2021



The CEO/COs agreed the following principles for the sub-regional plans which need to focus on whole system joined up working:



The scope of the sub-regional plan

Responding to the Clinical Board hypothesis about “delivering care in the best setting” including:

- Plans to avoid acute attendances and admissions
- Plans to enable earlier discharge from hospital
- Combining physical and mental health care elements
- Driving health and social care integration and connecting clinical with wider non-clinical support and assets in the community
- A particular focus on frailty and the development of locality teams

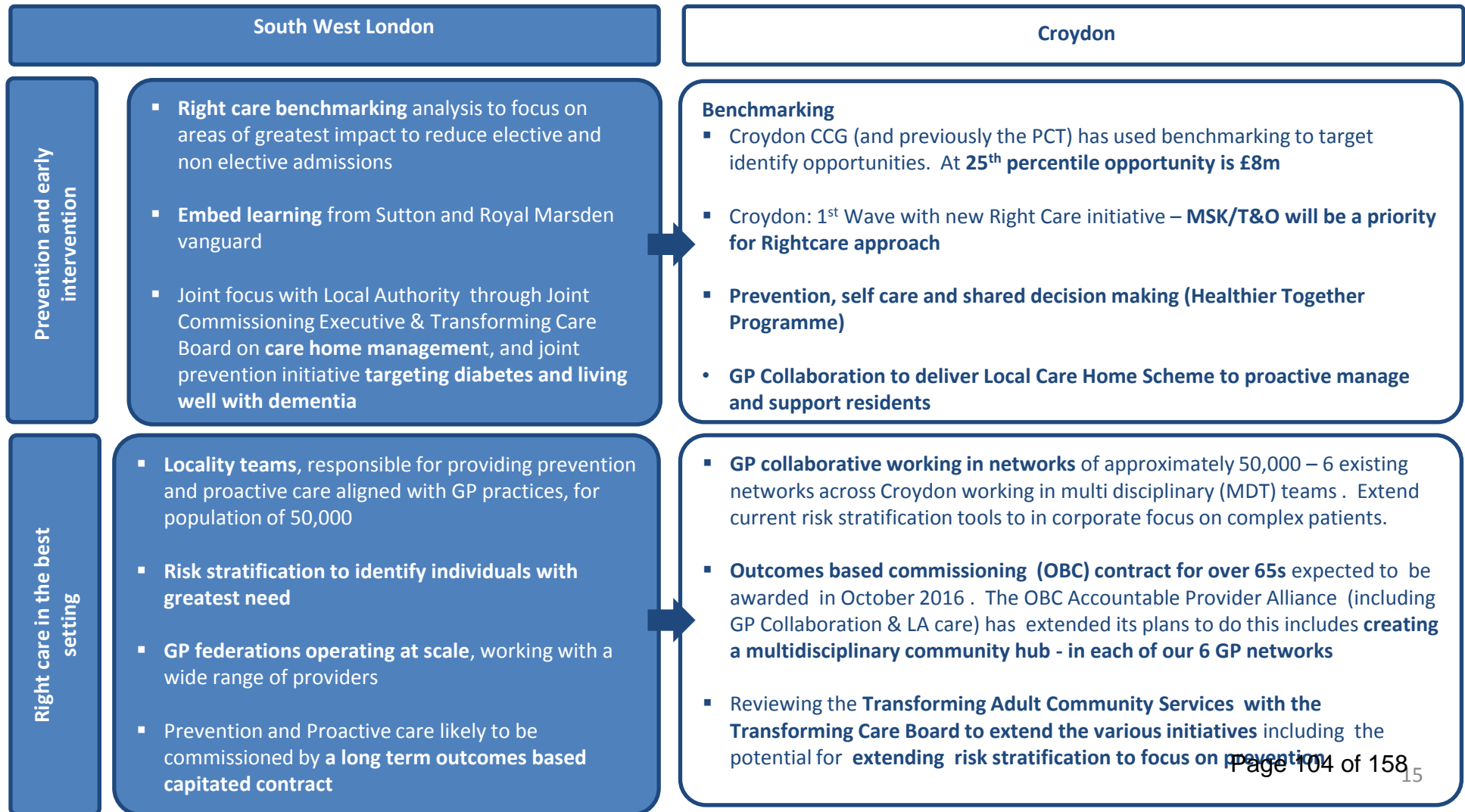
Plans should cover all population groups; children and young people, adults and older people.

The scope of the sub-regional plan

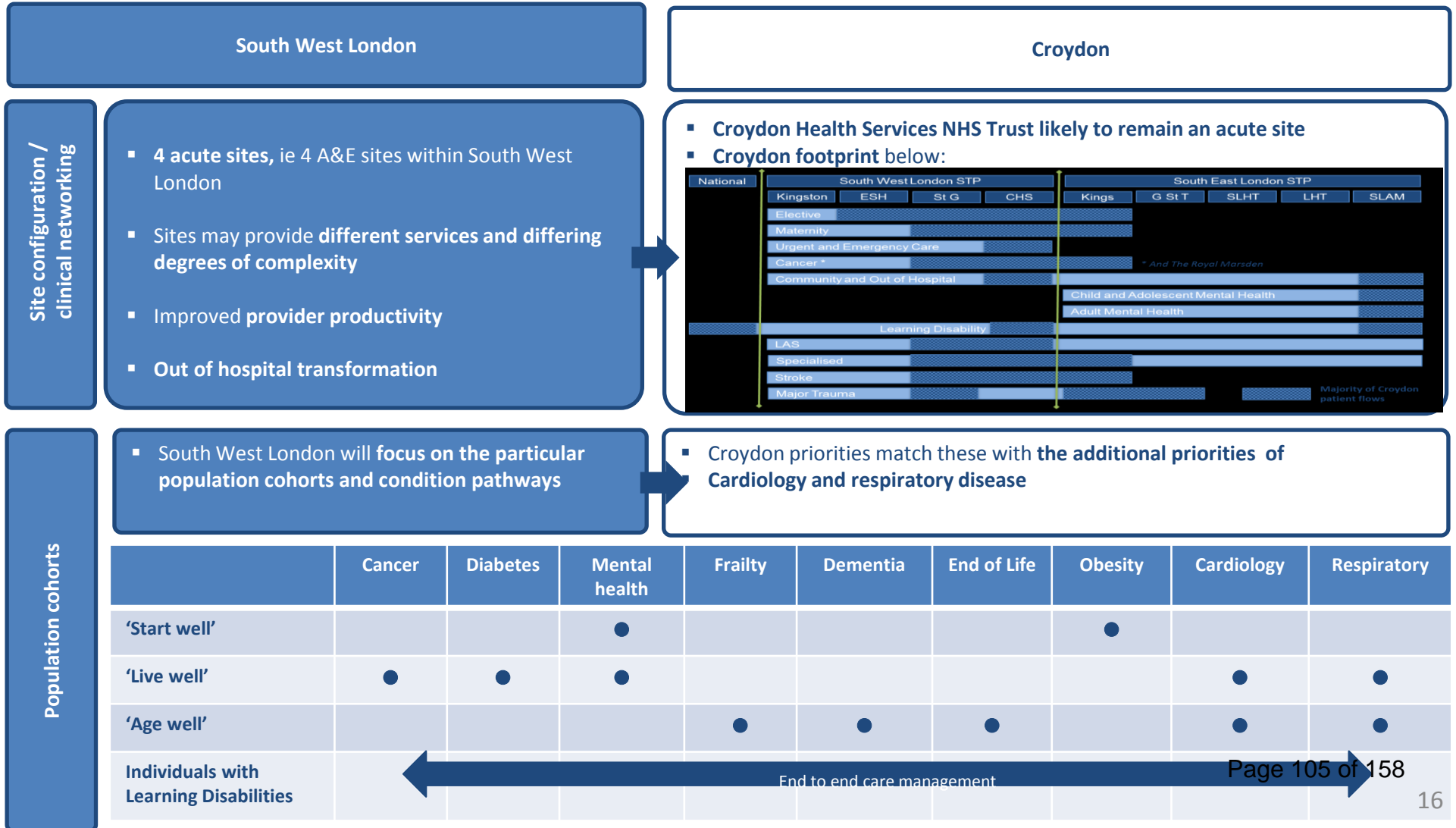
Other elements within the sub-regional plans and are being addressed on a SWL-wide basis, drawing on plans/initiatives developed by individual CCGs and Boroughs. These include:

- Outpatient activity
- Productivity within organisations; CIP and QIPP
- Public health and long term prevention plans
- Primary care; implementation of specifications and development of GP federations

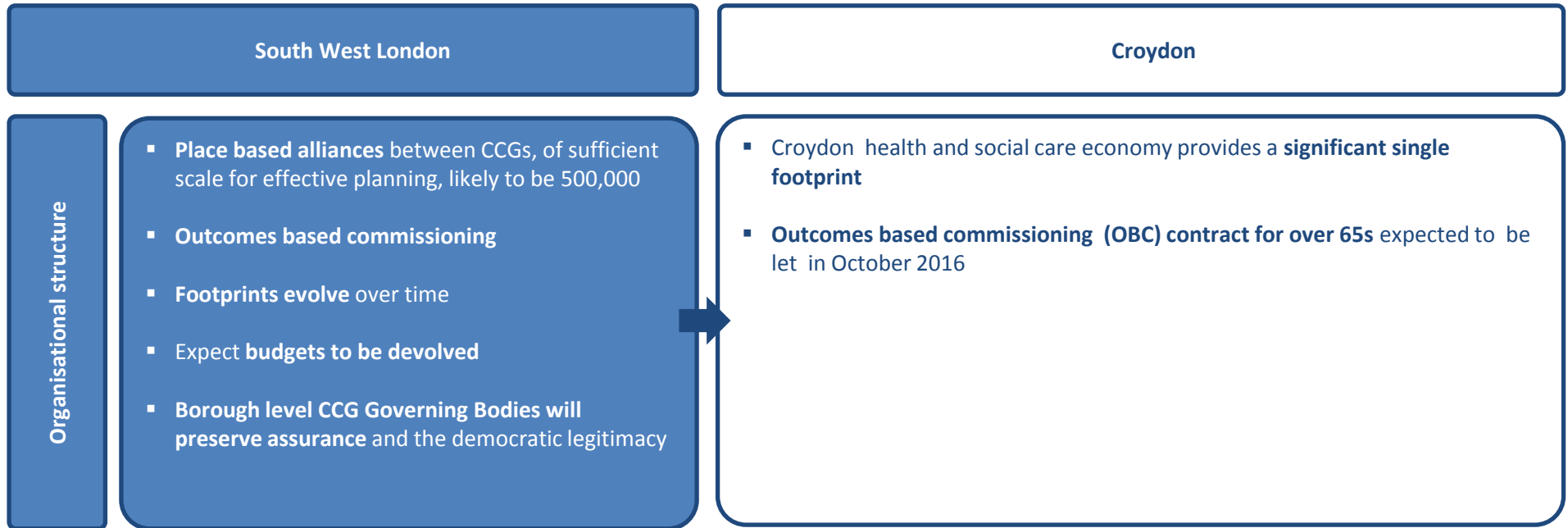
Our emerging solutions (1)



Our emerging solutions (2)



Our emerging solutions (3)

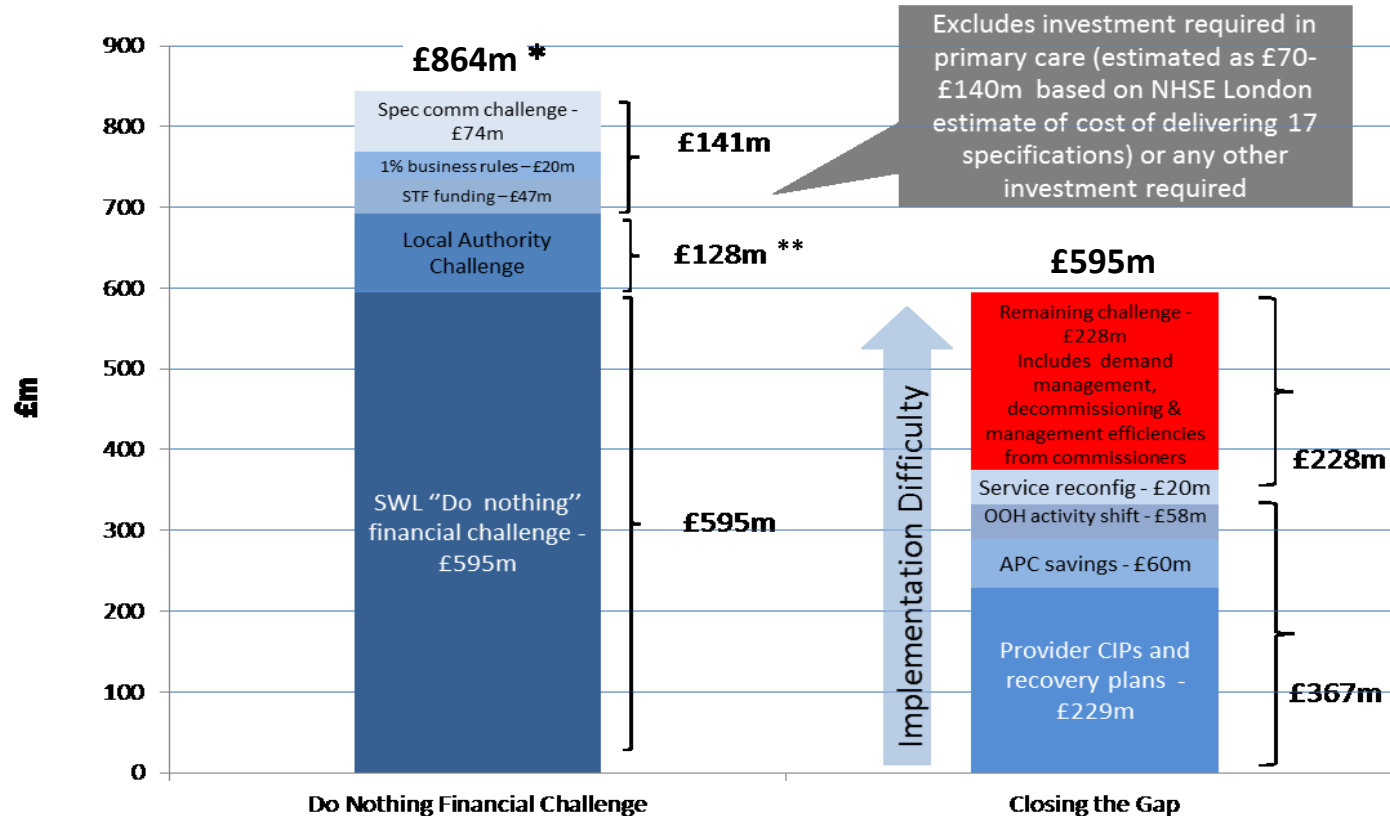


Our emerging solutions (4)

Our financial base case indicates the scale of the challenge for SWL over the coming five years and the need for a radical and transformational approach to how we deliver health and care services.

As an SPG we are committed to establishing financial sustainability across providers, commissioners, and local authorities in SWL, and collectively targeting investment into the most effective areas of care, including a shift from acute to community provision.

** Due to funding processes the £128m is an estimated positive for 19/20 rather than for 20/21

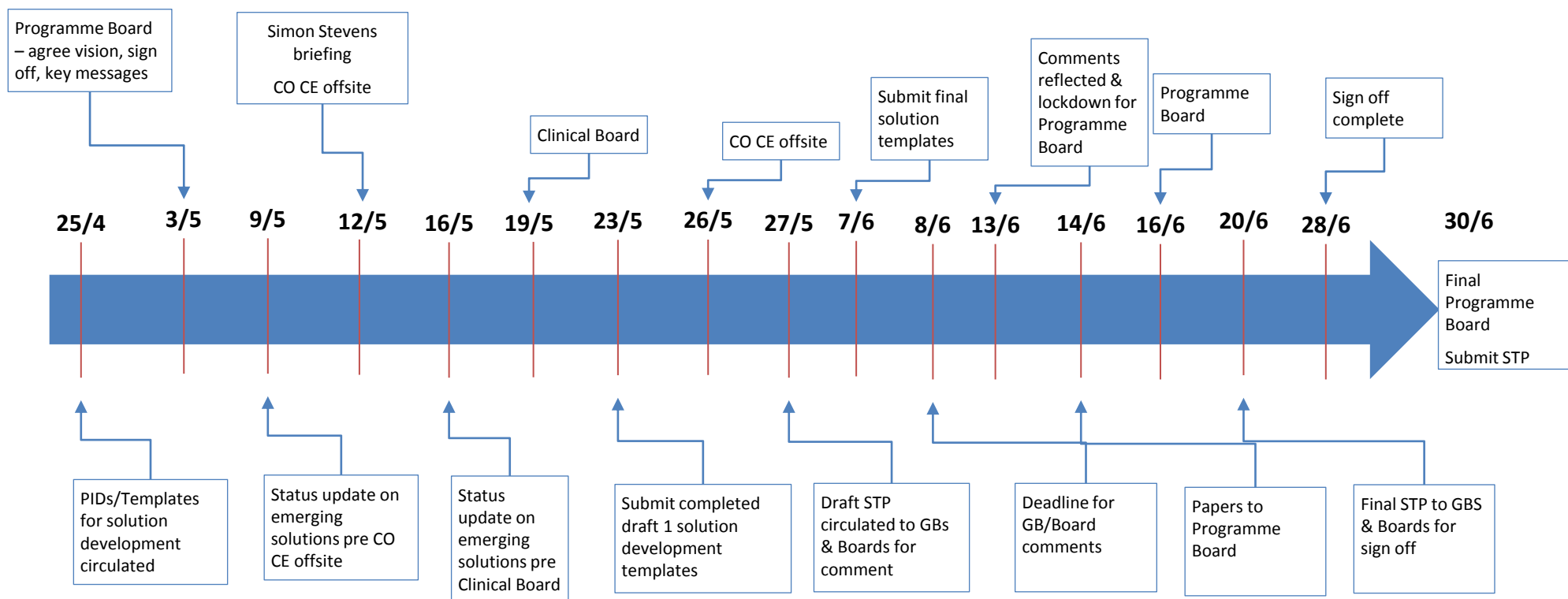


* The total challenge is £736m - £595m for South West London and a further £128m for the Local Authority gap

Estimated savings are initial high level hypotheses only – further work required to test as part of development of the STP

The financial diagnostic includes an overall capital requirement of approximately £685m (including the redevelopment of St Helier hospital). The do something scenario will consider the overall investment need (and funding source) is on-going.

Timeline for STP submission



Engagement - Developing the STP

- Letters sent to MPs, councillors 6th May
- Letter to voluntary organisations 9th May seeking views by 20th May
- Transforming Care Board Work shop – 11th May
- Draft available 27th May for LA Briefing & Reflection and Stakeholder comment
- Croydon HWBB Discussion – 8th June

Engagement - Ongoing

- Engagement on these issues have been on going for many years (SWL Issues Paper)
- Commitment to full public engagement and encourage local people to be involved (Croydon event held in 15/16)
- Various working groups include members of the public
- Patient and Public Engagement Working Group remains

Next steps

- The first draft STP will be circulated for comment by GBs/Boards and their members on 27 May with comments due by 8 June
- A final draft STP will be agreed by the Programme Board on 13 June before circulation to GBs/Boards by 20 June with sign off due by 28 June
- The final STP will be submitted on 30 June

Thank you

Any questions or comments?

Does the HWBB endorse this approach?

Appendix

Overview of Current and Planned Croydon CCG & Local Authority Out of Hospital Initiatives

South West London Collaborative Commissioning

Aim	Objective	Services Already in Place	Planned Initiatives	Time Scale for Delivery
A) Improving delivery of Preventative & Proactive Care	Single point of access	<ul style="list-style-type: none"> ▪ Single point of assessment for healthcare needs 	<ul style="list-style-type: none"> ▪ Extended single point of assessment including access to social care provision or information 	<1yr (Jun17)
	Consistent model for managing long-term conditions (including MH and LD) and frailty, including risk stratification, and the development of care plans	<ul style="list-style-type: none"> ▪ Embedded risk stratification supporting proactive case management of people at risk of hospital admission ▪ GP Practice multidisciplinary team (MDT) care planning for at-risk people 	<ul style="list-style-type: none"> ▪ Expanded more holistic health and social care risk stratification models to support preventative care ▪ Extended models of MDT care planning ▪ Expanded preventative support for people at medium risk of admissions 	<1yr (Jun17) <1yr (Apr 17) <1yr (Apr 17)
	Locality based teams, and Primary Care at the centre of highly coordinated multidisciplinary teams	<ul style="list-style-type: none"> • Integrated health and social care MDT's supporting proactive case management (supported by Community Geriatrician, Health Visitors for Older People, Community Matrons, and Social Care Workers) • Embedded GP Practice palliative care planning meetings with St Christopher's, Marie Curie, and District Nurses for end of life care (EOLC) patients • Provision of respite care in EOLC patient's own home during the day to support carers 	<ul style="list-style-type: none"> • Expanded delivery of integrated care provision with full involvement from Mental Health and voluntary sector • Increased access to rapid community and primary care support, domiciliary care, intermediate care bed capacity • Increased preventative focus on care homes • Increased delivery of end of life care supporting people and carers in their place of choice 	<1yr (Apr 17) <1yr (Apr 17) <1yr (Apr 17) <1yr (Apr 17)

South West London Collaborative Commissioning

Aim	Objective	Services Already in Place	Planned Initiatives	Time Scale for Delivery
A) Improving delivery of Preventative & Proactive Care	Locality based teams, and Primary Care at the centre of highly coordinated multidisciplinary teams	<ul style="list-style-type: none"> ▪ Working with GP Practices to address primary care variations ▪ Rapid Response (nursing, and therapy) service ▪ New focus on preventative care for nursing care homes with nursing and speech and language therapy input ▪ 12 commissioned intermediate care beds and xxx reablement beds ▪ Rapid Acute Medical Unit (RAMU) service providing rapid access to specialist support 	<ul style="list-style-type: none"> ▪ Greater integration between the RAMU and other specialist services within the Edgecombe Unit ▪ Delivery of 8am-8pm GP access to patients 7 days a week in a hub model ▪ Increased patient engagement in self-management through Together for Health programme ▪ Increased use of technology to improve patient self-care and access ▪ Improvements in GP Practice variations using benchmarking information from the Atlas of Variation, and Commissioning for Value reviews ▪ Implementation of the 17 Transforming Primary Care London standards for Accessible Care, Proactive Care, Co-Ordinated Care for the whole population ▪ Development of Primary Care services and capacity to support out of hospital care 	<p><1yr (Apr 16)</p> <p><1-3yr (Apr 18)</p> <p><1-3yr (Apr 18)</p> <p><1-3yr (Apr 18)</p> <p><1-3yr (Apr 18)</p> <p><1-3yr (Apr 18)</p> <p><1-3yr (Apr 18)</p> <p><1-3yr (Apr 18)</p>
	Resilient and supportive communities		<ul style="list-style-type: none"> ▪ As with PSS & APA Model of Care 	<p><1-3yr (Apr 18)</p>

South West London Collaborative Commissioning

Aim	Objective	Services Already in Place	Planned Initiatives	Time Scale for Delivery
A) Improving delivery of Preventative & Proactive Care	Activated patients, citizens and carers, supported by tools and resources to promote self-management	<ul style="list-style-type: none"> ▪ Started implementation of the Together for Health programme to improve patient outcomes and experience. ▪ Commissioned asset based community connectors ▪ Piloting of group consultations for patients with a common long term condition in 6 GP practices ▪ Piloting of Health Help Now app to support self-care 	<ul style="list-style-type: none"> ▪ Expanded implementation of Together for Health programme across primary, community and acute care 	<1-3yr (Apr 18)
	Shared responsibility, risk and incentive for all care professionals in the system to be proactively keeping people well (including hospitals)	<ul style="list-style-type: none"> ▪ Implementing 10 year Outcome Based Commissioning (OBC) contract with the Accountable Alliance Provider to improve patient outcomes for people 65 ▪ Development of a jointly commissioned Mental Health Strategy ▪ Expansion of psychiatric liaison service ▪ £xxm of commissioned GP primary care incentive schemes to support out of hospital care 	<ul style="list-style-type: none"> ▪ Implementation of OBC contract and use contractual levers to further improve patient outcomes ▪ Implementation of the transformation programme for Adult Mental Health Services ▪ Greater integration of physical and mental health 	<1yr (Oct16)

South West London Collaborative Commissioning

Aim	Objective	Services Already in Place	Planned Initiatives	Time Scale for Delivery
<p>Improved delivery of Planned Care</p>	<p>Delivering high quality planned care closer to home</p>	<ul style="list-style-type: none"> ▪ Redesigned diabetes, cardiology, urology pathways supporting better management of patients at primary care level ▪ Service reviews in progress for ophthalmology, falls, anti-coagulation, stroke, respiratory, falls, obesity, cancer, and digestive systems ▪ Currently procuring new gynaecology, dermatology, Ear Nose and Throat, and termination of pregnancy services 	<ul style="list-style-type: none"> ▪ Implementation of pathway redesign to address priority areas of focus highlighted through the Commissioning for Value and ongoing service reviews, including: <ul style="list-style-type: none"> ▪ Trauma and Injuries ▪ Genito Urinary ▪ Neurological ▪ Respiratory ▪ Ophthalmology ▪ Falls ▪ Anti-coagulation ▪ Stroke ▪ Obesity ▪ Cancer ▪ Digestive systems ▪ Commissioning of new services to support delivery of care in the appropriate setting 	
<p>Improved delivery of Urgent Care Services</p>	<p>Delivering integrated accessible urgent care services</p>	<ul style="list-style-type: none"> ▪ Provision of GP Out of Hours, Urgent Care Centre, Minor Injuries Unit, Walk-in Centre services across Croydon by different providers 	<ul style="list-style-type: none"> ▪ Procurement of a new Urgent Care model focusing on integrated delivery 	<p>1 April 2016</p>

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REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) 8 June 2016
AGENDA ITEM:	10
SUBJECT:	Food Flagship programme
BOARD SPONSOR:	Rachel Flowers – Director of Public Health
BOARD PRIORITY/POLICY CONTEXT:	
<ul style="list-style-type: none"> The programme is linked to the joint health and wellbeing strategy priorities of reducing obesity in children and adults. It also contributes to the reduction of diabetes and aims to improve educational attainment in children from disadvantaged groups. The Food Flagship programme provides an opportunity to improve health outcomes for communities and maximise the opportunities for sustained change via regeneration. 	
FINANCIAL IMPACT:	
This report is to update the board on the progress of the programme.	

1. RECOMMENDATIONS

- 1.1 This report recommends that the health and wellbeing board
- notes the recent developments of the Food Flagship programme and
 - ratifies the direction of travel for the future which is to embed system transformation across the council and its partners

2. EXECUTIVE SUMMARY

- 2.1 Obesity is an increasing problem in Croydon. The causes are multi-factorial and include greater consumption of processed food, more sedentary lifestyles in both adults and children, and changes in employment and family norms. Obesity rates in Croydon children and adults are higher than the London average.
- 2.2 The national School Food Plan was published in 2013, with a recommendation that two London Boroughs be established as Food Flagship Programmes, with schools being the catalyst for change in a whole system transformation of the food landscape.
- 2.3 After a competitive bidding process, Croydon and Lambeth were awarded food flagship status by the GLA (Greater London Council) in 2014. The high level outcomes for the Croydon food flagship programme which have been specified by the London Food Board are:
- Reduction in levels of childhood obesity
 - Increase in school attainment
 - Decrease in the numbers of new cases of type-2 diabetes

- 2.4 The programme is intended to last five years, to allow time for the whole system transformation needed, and to make an impact on the chosen outcomes. The two year funding from the GLA of £530k ends in December 2016.
- 2.5 The programme has achieved significant successes in the past 14 months with key funded projects achieving, and in some cases exceeding targets (listed later on in the report). Aside from the funded projects, a vast amount of work has gone in to establishing relationships with other sectors and departments to help transform the food environment in Croydon, whilst at the same time focusing on the wider determinants of health. Examples of these are given later in the report.
- 2.6 An independent evaluation of the programme is currently underway at both the Croydon borough and GLA level. It will look at the effectiveness and cost effectiveness of some of the elements and make recommendations for embedding the programme in the future, . Preliminary findings will be presented in November 2016 and final recommendations made in January 2017.
- 2.7 The vision is to transform the food environment in Croydon through increasing skills, knowledge and access to good food.. The key challenge is to build on the successes of the first two years and embed transformation throughout the system after the GLA funding ends. Over the coming months the programme aims to embed the principles of the Food Flagship programme across the council and with partners. We request that the health and wellbeing board support the direction of travel for the future of the programme.

3. DETAIL

Strategic context

- 3.1 The Food Flagship programme links to Croydon Council's themes of "Ambitious for Croydon":
- Longer, healthier lives
 - Healthy and resilient families
 - Quality schools and learning
 - Places that communities are proud of
 - Financial resilience and affordable living
- 3.2 The programme links to Croydon Clinical Commissioning Group's objectives of reducing the difference in life expectancy between communities and enabling children to achieve their full potential. It contributes to the local priority of reducing diabetes.

The Programme

- 3.3 The principles underpinning the design of the programme are as follows:
- When children experience the benefits of eating good food at school, this will encourage longer term behaviour change not only in themselves but also in their parents, wider family and local community

- Learning to cook real food at school (for parents/carers as well as children) will influence food shopping habits and cooking at home
- Learning how to grow food, and experiencing the satisfaction of cooking and eating the produce will similarly change longer term shopping habits and diets.

The programme includes the following specific projects which aim to deliver on the local outcomes:

- School Food Plan – improving the quality of school meals and increasing uptake by involving children in growing and cooking from reception onwards
- Community Food Learning Centre – expanding the work of this innovative community regeneration project and offering free cooking and growing courses.
- Developing Food Businesses – supporting the development of new small businesses which sell good quality food.
- Community Grants - providing support and opportunity to those groups and individuals who have innovative ideas for growing and cooking healthy food, partnering with the councils Active Communities Fund.
- Community Gardening Projects – building the communities capacity for growing and to optimise the potential of new growing areas in Croydon.
- Food Partnership Board – develop a strong partnership board to continue changing the food environment in Croydon.
- Eat Well Croydon (non FF Funding) – Support current food businesses to provide healthier food provision and make small changes.

<i>Project</i>	<i>Outputs to date</i>
<i>School Food Plan</i>	<p><i>175 staff members (from 75 schools) have received food training.</i></p> <p><i>Flagship schools have delivered 11 parent/carers healthy eating workshops.</i></p> <p><i>All 11 caterers signed to agree to meeting School Food Standards in all schools.</i></p> <p><i>Universal Infant Free School Meal:</i></p> <p><i>Autumn 2014= 81.7%</i></p> <p><i>Autumn 2015= 84.8%</i></p> <p><i>KS2 meal uptake overall:</i></p> <p><i>Autumn 2014= 53.7%</i></p> <p><i>Autumn 2015= 62.1%</i></p>
<i>Community Food Learning Centre</i>	<i>119 residents have completed a catering or horticultural course as of March 2016.</i>
<i>Food Businesses</i>	<i>6 businesses have successfully completed the first course and 18 businesses are currently on the second course.</i>
<i>Community Grants</i>	<i>£21,000 has been awarded to 6 projects.</i>
<i>Community Gardening</i>	<i>22 Master Gardeners have been trained, 12 food buddies have been trained and 41 referrals to date.</i>

<i>Food Partnership Board</i>	<i>15 core members have joined the food partnership board with a wider 30 who receive updates.</i>
<i>Eat Well Croydon (Non FF funding)</i>	<i>19 businesses have signed up to this scheme in the last year, 39 businesses have signed up in total.</i>

Aside from the funded projects, several other additional projects have been developed together with other sectors and departments. Three examples are given below:

- **Glass Houses** –The Food Flagship programme has an aim to grow more food locally and the Food Partnership Board are working in partnership with Quadron to re-instate 1/2 of the glass houses off Conduit Lane.
- **Housing** – Planned Maintenance; Kitchen Refit - A Food Flagship package is to be offered to a selection of council households that receive a new kitchen. Working with the contractor Mulalley to agree sponsorship and deliver against their social value objectives.
- **Edible Playgrounds** - Edible Playgrounds transform areas in school grounds into vibrant outdoor spaces that excite and teach children about growing and eating healthy food. Rockmount Primary, St Giles, and Fairchildes and Meridian school all have an edible playground soon to be launched in June 2016.

Programme Management

- 3.4 The programme has a full time Programme Manager who is responsible for overseeing the programme of funded projects, administering the grant in accordance with the terms and conditions, and developing strategic partnerships around the programme area introducing new initiatives where appropriate. There is also a full time School Food Improvement Officer who is the lead for the School Food Plan.

Embedding the programme – future direction

- 3.5 Public health plans to continue funding the programme manager and School food improvement roles beyond March 2017 when funding from the GLA will end. The food flagship programme will contribute to two of the Public Health key priorities; *Healthier Urban Realm* and *Children’s Health and Wellbeing*. As well as continuing to support the schools work, the Programme Manager will consider the wider determinants of health, and work with regeneration, planning and development to embed policies around good food and healthy eating. The future direction will be influenced by the independent programme evaluations. Preliminary evaluation findings will be presented in November 2016 and final recommendations will be made in January 2017.

A review of the funded projects is currently taking place including exploring funding opportunities and exit routes.

Risks

- 3.6 The Food Flagship programme has a 5 year vision, to help transform the food environment in Croydon in a bid to reduce childhood obesity, type 2 diabetes and increase attainment in schools. Without continued support this vision will not be realised and momentum and enthusiasm may cease affecting the potential for whole system change.

4. CONSULTATION

- 4.1 There are ongoing discussions with GLA around the future of the Food Flagship programme and the support needed to ensure sustainability. The Governance Group has also been consulted on a monthly basis. A borough wide and programme wide evaluation is currently in progress and is due to present initial findings in November 2016 and a full report in January 2017.

5. SERVICE INTEGRATION

- 5.1 The Food Flagship programme brings together a number of partners including statutory, third sector and private organisations to achieve shared objectives. The Food Partnership Board is currently in development and has the aim to be the main vehicle for promoting an integrated approach to transforming Croydon's food landscape.

6. EQUALITIES IMPACT

- 6.1 An equalities impact assessment has not yet been conducted.

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BACKGROUND DOCUMENTS: None

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REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) 8 June 2016
AGENDA ITEM:	11
SUBJECT:	Croydon Heart Town Annual Report
BOARD SPONSOR:	Rachel Flowers, Director of public health, Croydon Council
BOARD PRIORITY/POLICY CONTEXT:	
<p>Croydon's joint health and wellbeing strategy set out to increase healthy life expectancy and reduce differences in life expectancy between communities. Heart and cardiovascular diseases are the major cause of death in the borough and the main contributor to differences in life expectancy between communities. Croydon Heart Town addresses a number of priorities in the strategy including child and adult obesity, helping people stop smoking, and early detection and management of people at risk for cardiovascular diseases and diabetes</p>	
FINANCIAL IMPACT:	
There are no financial impacts arising from this report.	

1. RECOMMENDATIONS

This report recommends that the health and wellbeing board notes the contents of the draft Croydon Heart Town Annual Report for 2015/16.

2. EXECUTIVE SUMMARY

2.1 At its meeting on 23 October 2013 the health and wellbeing board endorsed a strategic partnership approach to improving heart health in the borough and the extension of Croydon's Heart Town programme from two to five years. This report provides the health and wellbeing board with an update on Heart Town activity since the last report to the board on 10 June 2015.

3. DETAIL

3.1 Croydon Heart Town is intended to make a major contribution to the delivery of the joint health and wellbeing strategy 2013-18. This in turn reflects the community strategy's aim of protecting vulnerable people and offering good quality, accessible and joined up services and information so that agencies can make a difference to local people through coordinated prevention and early intervention.

3.2 Heart and circulatory diseases, including coronary heart disease and stroke, are responsible for around a third of all deaths in Croydon and are also major causes of early death (under 75 years) and disability. Women in the borough are over three times more likely to die of heart disease than breast cancer.

Croydon's population is increasingly overweight and inactive, putting those individuals at risk of cardiovascular diseases.

3.3 Core outcomes for Croydon Heart Town are to:

- Increase the proportion of people who take action to reduce their risk of heart and circulatory diseases by:
 - achieving a healthy weight
 - increasing their level of physical activity
 - stopping smoking
- Identify undiagnosed heart disease in people aged 40-74 through NHS Health Checks

3.4 Examples of work to deliver these outcomes are set out in the draft Croydon Heart Town Annual Report attached.

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BACKGROUND DOCUMENTS None



Croydon **Heart Town**

DRAFT Annual Report

April 2015 to March 2016

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Foreword

It is with very real pride in the achievements of our third year as a Heart Town, that I am writing the foreword to the Croydon Heart Town Annual Report for 2015/16.

Heart Towns were launched by the British Heart Foundation during its 50th anniversary year, with the aim of establishing 50 Heart Towns across the UK. The Heart Towns initiative aims to mobilise communities to prevent and fight Britain's biggest killers, circulatory and heart diseases. Heart Towns work by bringing communities together through local fundraising and volunteering to help beat heart disease.

Croydon became a Heart Town on 15 July 2013 with the signing of the Heart Town Pledge by the Mayor of Croydon and representatives of the British Heart Foundation. In our third year as a Heart Town we have continued to work closely with the British Heart Foundation to increase awareness and provide education around how to prevent heart disease with a particular focus on schools and workplaces. Since becoming a Heart Town we have also raised over £30,000 to help fight heart disease.

This report summarises the progress made during Croydon's third year as a Heart Town as well as our plans for future developments.

Councillor Maggie Mansell
Chair of Croydon Health and Wellbeing Board

Heart and circulatory diseases in Croydon

Heart and circulatory diseases, or cardiovascular diseases (CVD), are responsible for around a third of all deaths in Croydon and are also major causes of early death (under 75 years) and disability. Almost half (46%) of these deaths are from coronary heart disease and nearly a fifth from stroke (18%). Whilst Croydon performs close to, or better than, the national average on most CVD indicators, CVD remains one of the borough's biggest killers. Women are over three times more likely to die of heart disease than breast cancer. Croydon's population is increasingly overweight and inactive, putting those individuals at risk of CVD.

The rate of early death from CVD in Croydon has been falling for over a decade and is similar to the national rate. However, 215 individuals die early every year in Croydon from CVD. It is estimated that around 133 of these deaths could have been prevented.

Data from the Joint Strategic Needs Assessment indicates that both the one and three year trends for early death from circulatory diseases and two other key indicators (deaths from coronary heart disease and emergency readmissions within 28 days of discharge for stroke) have been worsening. Although Croydon's performance is not significantly different from the national average, without action these may well become future challenges for the borough.

There are significant health inequalities for CVD in Croydon in terms of age, gender, ethnicity and deprivation. Deaths from CVD are concentrated in the over 75s age group. More men than women die of CVD. Croydon GP data on CVD (including hypertension, atrial fibrillation, stroke, heart attack, coronary heart disease and heart failure) record greater prevalence amongst men compared to women for all these conditions except hypertension. Black people had the greatest recorded prevalence for hypertension and stroke. Atrial fibrillation was greatest amongst White people, while for Asian people the greatest prevalence was for heart attack and coronary heart disease.

People from the most deprived communities in Croydon have a CVD death rate that is twice as high as people from the least deprived communities. Differences in smoking and obesity rates are factors that may partly explain this inequality.

Why did Croydon become a Heart Town?

The two outcomes that Croydon Heart Town aims to make a significant contribution to are:

- increased healthy life expectancy
- reduced differences in life expectancy and healthy life expectancy between communities

The first outcome is to improve not only how long people live – their life expectancy, but also how well they live – their healthy life expectancy. The second goal focuses attention on reducing inequality in health outcomes between people, communities and areas in the borough. By focusing on longer healthier lives and narrowing the gap we will help increase independence, a key goal for both the council and the NHS locally. Heart Town aims to do this by reducing the levels of disease and disability caused by heart and circulatory diseases. A heart healthy lifestyle also provides protection against cancer, diabetes and, to some extent, liver and respiratory diseases.

Cardiovascular disease is estimated to cost the UK economy £19 billion a year. Of the total cost of cardiovascular disease around 46% is due to direct health care costs, 34% to productivity losses, and 20% to the care of people with cardiovascular disease (both social care and informal care). Local work to model the cost of just one modifiable risk factor for cardiovascular disease – smoking – estimated that the cost of smoking to the Croydon economy is around £82 million a year. By tackling cardiovascular disease we aim to reduce these costs and contribute to the growth of the local economy.

What can we do to prevent heart disease?

In Croydon there is a mixed picture in relation to the modifiable lifestyle factors that cause heart and circulatory diseases. Whilst the adult smoking rate is falling, there are rising levels of overweight and obesity in both adults and children. The estimated level of healthy eating in adults is better than the national average, with levels of physical activity in adults close to average.

Excess body fat and smoking are the two single most significant causes of cardiovascular disease and preventable death. Other contributory factors include high levels of alcohol consumption, too much fat and salt in the diet and stress. Conditions such as diabetes also carry an increased risk of developing cardiovascular diseases.

21% of heart disease is attributable to excess body fat. In Croydon, almost a half of all adults are overweight or obese (one in four are obese). One in three children under the age of 11 is overweight or obese. Helping people achieve and maintain a healthy weight, eating well and being more active is a key goal for Croydon Heart Town.

14% of deaths from cardiovascular diseases are caused by smoking. One in five adults (around 50,000 individuals) in Croydon smoke: this is close to the national average. Although the smoking rate is falling there remains considerable scope to help more people to quit through the Heart Town. This will also contribute to reducing sickness, disability and deaths from respiratory diseases and cancers.

Good mental health and the reduction of stress can also contribute to reducing the risk of cardiovascular diseases. Physical activity and volunteering are two elements of the Heart Town programme which contribute to better mental health and reduced stress.

Croydon Heart Town objectives

All British Heart Foundation Heart Towns are expected to:

- raise levels of public awareness of heart disease;
- activate and involve business and the community in charitable fundraising; and,
- provide education, advice and support on how people can reduce their risk.

In Croydon we also aim to:

- increase the proportion of people who take action to reduce their risk of heart and circulatory diseases by:
 - achieving a healthy weight
 - increasing their level of physical activity
 - stopping smoking
- identify undiagnosed heart disease in people aged 40-74 through NHS Health Checks

A range of indicators have been chosen to help us measure progress. These can be found at appendix 1.

Fundraising and volunteering

Croydon Heart Town has provided the impetus for a wide range of fundraising activities both large and small.

In June 2015 a team from the borough competed in the London to Brighton Bike Ride to raise funds for the British Heart Foundation. Croydon Heart Town also got behind the Great British Bagathon in September 2015 - the UK's biggest bag filling challenge. The idea behind the Bagathon is simple – British Heart Foundation can turn the things people don't need into bags of life-saving research. We promoted registration for the Bagathon amongst Croydon's workplaces, asking staff to fill as many bags as they could with unwanted clothes, shoes, toys, books, CDs or DVDs.

Croydon marked National Heart Month in February by promoting Wear It Beat It, British Heart Foundation's campaign to encourage as many people as possible to wear red for a day to raise awareness of heart disease and funds for lifesaving research.

The Big Lunch aims to get as many people as possible across the whole of the UK to have lunch with their neighbours. In June 2015 all organisers of lunches big and small were sent a Croydon Heart Town message and fundraising pack. As part of the celebrations Croydon Heart Town supported an inter-faith bike ride to promote physical activity and strengthen community connectedness.

Since becoming a Heart Town, Croydon has raised over £30,000 for the British Heart Foundation - a truly 'heartening' achievement.

[FUNDRAISING ACTIVITY PHOTOS HERE]

Campaigns & awareness raising

Croydon Heart Town has coordinated a number of health promotion campaigns and awareness raising events over the year. These include:

- Surrey Street Market Harvest Festival (September 2015)
- Stoptober quit smoking campaign (October 2015)
- New Year quit smoking campaign (January 2016)
- Dry January Campaign (January 2016)
- NHS Health Checks campaign (October 2015)
- British Heart Foundation's 'Wear It, Beat It' campaign (February 2016)
- National No Smoking Day (March 2016)

[SELECTED CAMPAIGN IMAGES HERE]

Events

In June 2015 Heart Town was one of the sponsors of the Pearl Izumi Tour Series and Matrix Fitness Grand Prix. Thousands of people lined the streets of Croydon as the town hosted a hugely successful visit from cycling's elite. Heart Town also had a presence at the inaugural summer Ambition Festival. Our aim was to increase participation in dance as a great way to be physically active. Heart Town ran a number of dance workshops, across the two days of the festival. The workshops included learning a Bollywood routine, maypole dancing and a highly popular tea dance. In August 2015 Croydon Heart Town supported the third Vanguard marathon. This is a marathon like no other, across varying terrain from urban central Croydon into leafy Surry, taking in the steep slopes of the North Downs.

Healthy Heart song competition

To engage communities and raise awareness during February's National Heart month, Croydon Heart Town launched a Healthy Heart song competition for schools with award-winning music industry judges selecting the winners. Over 200 school children in the borough entered the competition with the winner having the opportunity to record their song in a professional music studio and have the song aired on local radio. The competition had local children coming together to write a song that celebrates what we can all do to keep our hearts young and healthy.

Healthy Living Hub

The Healthy Living Hub in the Central Library has promoted heart health throughout the year. This walk in service is aimed at those people who might need some extra help and encouragement to change to a more healthy diet and lose weight, to stop smoking or to increase their physical activity. It also acts as a signposting and referral service. Visitors can have an NHS Health Check or get one to one stop smoking support with no need to book. The Hub runs regular chair based exercise classes that attract older members of the community and table-tennis for participants of all ages (the oldest is in her 70's). There are regular slots for host visiting agencies including Diabetes UK, British Heart Foundation, and Age UK. Over 6,000 people visited the Hub in 2015/16. It has been particularly successful in attracting men, with 52% of the visitors being male. This shows the acceptability of a neutral venue, like a public library, as a place for reaching out to men who are less likely to visit traditional healthcare settings. One visitor said: *'If I wasn't here I'd be sitting at home alone. This class has helped me greatly, not just with exercise but with my depression. It motivates me to come out of the house and I look forward to laughing and exercising with the friends I have made.'*

Healthy eating

Croydon Food Flagship

We are in the second year of the Food Flagship programme which was established with the active support of Croydon Heart Town. The vision is to transform the food environment in the borough through increasing skills, knowledge and access to good food..

We have three Food Flagship schools working to make whole school improvements to food. They are also trying out new ideas and sharing what works with other schools to inspire positive changes across the borough. Fairchildes Primary, Rockmount Primary and Meridian High, formerly known as Addington High School started their Food Flagship journey by auditing current provision and creating their own School Food Plans, with actions to increase school meal take up, develop large scale food growing areas and engage the wider school community in activities relating to growing and cooking. Since becoming a Food Flagship school, Fairchildes Primary School has created a new family breakfast club menu with more fruit and vegetables and less high fat, high sugar items. They have swapped pastry items for lower fat bread products and now have healthy protein choices such as boiled or scrambled eggs and baked beans. They also have daily specials such as watermelon and fruit loaf. The busy breakfast club enables children and parents to enjoy breakfast together, play games, make smoothies or spend time digging in the school allotments.

The Community Food Learning Centre, based in New Addington, offers fantastic cooking and growing lessons, working with both children and adults. From the kitchen to the garden, the Community Gardening Project trains residents to become Master Gardeners and Food Buddies, and has helped contribute towards maintaining and utilising the fantastic green spaces we have locally. The Healthy Businesses project aims to stimulate the local economy and provides an eight week free course for those who want to set up a food business. Croydon's Food Partnership Board has been established and brings together a wider range of people involved in providing great food for local people.

[FOOD FLAGSHIP PICTURE HERE]

Eat Well Croydon Healthy Catering Award

Heart Town is working to encourage food businesses to provide healthier options for their customers. The Eat Well Croydon Healthier Catering Award is a voluntary scheme for food businesses in Croydon. It is based on the principle that small changes in food choices, preparation and

cooking methods can make a big difference to health. The project is focused on the areas of highest childhood obesity in Croydon. Businesses are invited to apply for the Award and supported to make changes to their food service to make healthy eating easy and accessible for their customers. All businesses applying for the Award are required to meet set criteria adapted from the Chartered Institute of Environmental Health Healthier Catering Commitment award and to attain a minimum food hygiene standard rating of 3. So far, 39 businesses have been signed up for the Eat Well Award. The Award is continuing for the next year with the aim of signing up a further 20 businesses and growing a network of venues in Croydon where people can choose to Eat Well.

Phunky Foods & Alive N' Kicking

Croydon is pioneering a new approach to supporting children and young people to reach or maintain a healthier weight. We have two services: Phunkyfoods promote physical activity and healthy eating in early years, primary and special schools. Alive N' Kicking provides a weight management service for 4-12 year old children. The new service motivates and supports children to improve their health, well-being and self-esteem. Both services work in more deprived wards in Croydon (due to the local link between deprivation and obesity), and work with the whole family. Over the last year Phunkyfoods have worked in over 40 schools and pre-schools with a combination of *curriculum support and activities*. *Alive N' Kicking have delivered their programmes in leisure centres, youth centres and schools. One parent said 'My son thoroughly enjoyed the sessions and looked forward to it every week. He has achieved so much and I'm very proud of him. Thanks to you all at Alive N' Kicking. I believe he will continue to make good progress and keep healthy'.*

One example of a project delivered by Phunky Foods is a six week 'back to school' cookery club for parents at South Norwood Primary. Parents were taught about the Eat Well Plate, what a balanced diet looks like. They learnt about the consequences of a healthy or not so healthy diet. They were also taught how to read food labels. Parents taking part reported that they had changed their family's eating habits by using the skills and knowledge they had learnt. All of them made new friends. Support has carried on in the school with a regular coffee morning for the parents. Claire Austridge, Families First Co-ordinator at South Norwood Primary said 'Hosting a cookery club at school without a kitchen is hard work, but the rewards from it have been fantastic. The school has been able to engage with parents through the cookery sessions. The parents not only enjoyed the sessions, the food and the social side but they have also made life enhancing changes for themselves and their families. The Cookery Club has had a very positive impact on all those attending.'

[PHUNKY FOODS AND ALIVE N' KICKING LOGOS HERE]

Physical activity

Croydon Heart Town is working hard to encourage everyone to be more active, whatever their ability and baseline activity level.

Fitter Fans

Heart Town has given its backing to the Crystal Palace 'Fitter Fans' scheme. This is aimed primarily at men aged 30 and over and aims to improve overall health and fitness through a free 10 week course. Each session lasts two hours and includes a workshop and fitness session. The workshops cover topics like healthy eating, stopping smoking, CPR and general health and fitness, as well as a Q&A session with current and former players. The most recent group to graduate through the programme was made up of 22 fans aged between 30 and 70 years old. Fifteen of them managed to lose weight, 16 saw a reduction in blood pressure, one participant saw his waist shrink by a massive 12cm! After completing the course the fans can join the next level of the programme and take part in weekly football training sessions. The scheme has helped over 250 fans improve their health.

'The fitter fan session yesterday was awesome. The warm-up session was very professional and at a good level for all involved. The fitness test was gruelling but very rewarding... Basketball was so much fun... You don't even realise you're actually working out and getting healthier. I think it's because we all laugh and share the common goal of becoming fitter.'

Workplace health

Physical activity programmes at work have been found to reduce absenteeism by up to 20%. The results of Croydon Council's staff health and wellbeing survey showed that 90% of roles in the council are entirely sedentary. More than 50% of staff reported doing no or minimal physical activity during the week. Fifty four percent of staff who responded to the survey were overweight or obese. The council's workplace health group have developed a plan to increase people's level of physical activity, help them lose weight and reduce their level of stress. Some of the innovations introduced during the year include providing table tennis tables for staff to use during breaks; and exercise classes including ballroom dancing, circuit training and Pilates. In February 2016 the council held a Step Challenge to encourage people throughout the organisation to move more by taking part in a fun competition. Two hundred and fifty staff members (50 teams of five) took part in the Challenge. Twenty nine teams had scores of over 1,000,000 steps each by the end of the Challenge, with the winning team recording an amazing 1,644,304 steps. In recognition of its achievements in promoting workplace health the council has been awarded the Employer's Network for Equality and Inclusion Wellbeing at Work Award and the London Healthy Workplace Charter (LHWC) at Achievement Level Award.

NHS Health Checks

[NHS HEALTH CHECK CAMPAIGN POSTER IMAGE HERE]

The NHS Health Check programme aims to help prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia. Everyone between the ages of 40 and 74, who has not already been diagnosed with one of these conditions or have certain risk factors, will be invited (once every five years) to have a check to assess their risk and will be given support and advice to help them reduce or manage that risk. More than 6,000 people in Croydon received an NHS Health Check last year, mainly through GP surgeries and pharmacies.

Our outreach service aims to increase take up of NHS Health Checks in higher risk and harder to reach groups (including the homeless and people not registered with a GP). This year we have extended our focus to workplaces across the borough. The outreach team has seen more than 300 employees in Croydon businesses over the past year.

We have also focused on raising awareness and promoting the service among our population to ensure that every person in Croydon has the opportunity to improve their health and wellbeing. We promoted the service by sending a mail out with information to all households in Croydon. This led to a significant increase in people requesting an NHS Health Check.

[BIG UP YOUR HEALTH EVENT PHOTO HERE]

Free NHS Health Checks were offered to the public during a promotional event at the Whitgift Shopping Centre. Shoppers were offered a free NHS Health Check as well as receiving advice about healthy eating, weight management, getting active, quitting smoking, reducing alcohol intake and more. There was also an opportunity to burn some calories on the smoothie bike. Forty three health checks were carried out by the outreach team and they engaged with around 200 people on the day.

Stop smoking support

For several years, Croydon has successfully achieved its quit target - delivering over 2000 quits a year. Services we provide in the borough include stop smoking advice in GP surgeries and in pharmacies, an outreach service and a hospital based service for people wanting to give up before they have surgery or give birth. Although many people are able to give up smoking with little or no support some people need extra help. There are also differences in smoking rates between communities. This is one of the most significant drivers of health inequalities in the borough. Amongst routine and manual workers in Croydon, 29% of adults are smokers, whereas only 17% of the general population are. This is one of the reasons why we are now targeting our efforts at people from routine and manual groups, people who are unemployed and people living in areas of higher deprivation. Quit rates of targeted groups have been steadily improving. Quits from routine and manual workers increased by 13% and quits from sick and disabled people by 77% from a 2013 baseline. Quits from people living in New Addington and Fieldway are also up 18.5%.

This year we piloted a harm reduction strategy to help reduce smoking among people with severe mental illness. By recognising the challenges that people with mental illness face in quitting smoking entirely, this innovative approach aims to support those who can't quit or aren't ready to set a quit date. The programme works with people to reduce their smoking at their own pace until they are ready to set a quit date.

Our plans for 2016/17

Croydon Heart Town brings together a wide range of programmes and project with the aim of improving heart health in the borough. In 2016/17 we will continue to promote healthy eating by developing a healthy food culture with local schools and communities leading the way. We have some exciting new projects in the pipeline including launching Good Gym and a new weekly park run in South Norwood Country Park. Most excitingly we will be launching a new integrated healthy lifestyle online service - Just Be. We are supporting the south London diabetes prevention programme and will be using NHS Health Checks to identify and support people at risk of developing diabetes. We will be working to get Croydon moving by promoting active transport, including walking and cycling, as well as continuing to promote participation in sport and use of our green spaces. We also want to do more to support people with heart and circulatory conditions (like AF and angina) to manage their health and live active and productive lives by working with the Together for Health programme.

Appendix 1 2015/16 Croydon Heart Town Outcome Indicators [INSERT UPDATED TABLE HERE]

REPORT TO:	HEALTH AND WELLBEING BOARD 8 June 2016
AGENDA ITEM:	12
SUBJECT:	Report of the chair of the executive group: incorporating risk register and board work plan
LEAD OFFICER:	Paul Greenhalgh, Executive Director, People, Croydon Council
CORPORATE PRIORITY/POLICY CONTEXT:	
The Health and Social Care Act 2102 created statutory health and wellbeing boards as committees of the local authority. Their role is to improve the health and wellbeing of local people by promoting integration and partnership working between the NHS, social care, children's services, public health and other local services, and to improve democratic accountability in health.	
FINANCIAL IMPACT:	
None.	

1. RECOMMENDATIONS

The health and wellbeing board is asked to:

- Note risks identified at appendix 1.
- Agree revisions to the board work plan for 2016/17 at appendix 2.

2. EXECUTIVE SUMMARY

2.1 The board risk register was developed by the board at a seminar on 1 August 2013. The board agreed that the executive group would keep these risks under review and update them as required. A summary of current risks and their ratings is at appendix 1.

2.2 The health and wellbeing board agreed its work plan for 2016/1 at its meeting on 13 April 2016. The work plan is regularly reviewed by the executive group and the chair. This paper includes the most recent update of the board work plan at appendix 2.

3. DETAIL

3.1 The purpose of health and wellbeing boards as described in the Health and Social Care Act 2012 is to join up commissioning across the NHS, social care, public health and other services that the board agrees are directly related to health and wellbeing, in order to secure better health and wellbeing outcomes for the whole population, better quality of care for all patients and care users, and better value for the taxpayer.

Work undertaken by the executive group

3.2 Key areas of work for the executive group in April and May 2016 are set out below:

- An annual report on the work of the board was made on 8 March 2016 to the Scrutiny Health, Social Care and Housing Sub-Committee. (This was not reported in the previous executive group chair's report on 13 April.)
- The annual report on the work of the board was also presented to Council on 18 April 2016.
- Agreed the Better Care Fund plan for 2016/17 on behalf of the board.
- Reviewed the board work plan including preparation of board meeting agenda and topic prioritisation against the joint health and wellbeing strategy.
- Commented on the draft community strategy.
- Liaised with other strategic partnerships including Croydon strategic partnership and children and families partnership.
- Reviewed board strategic risk register.
- Considered responses to public questions and general enquiries relating to the work of the board.

Risk

3.3 Risks identified by the board are summarised at appendix 1. The executive group regularly review the board risk register. The risk register was reviewed by the executive group at its meeting on 27 April 2016, with existing controls updated and a number of new controls identified. There have been no changes to the risk ratings since the board meeting on 13 April 2016.

Board work plan

3.4 Changes to the 2016/17 board work plan from the version agreed by the board on 13 April 2016 are summarised below. This is version 75 of the work plan. The work plan is at appendix 2.

3.4.1 Item on prevention, self-care and shared decision making moved to 8 June 2016.

3.4.2 Item on cancers moved to 14 September 2016.

3.4.3 Item on early years added to agenda for 14 September 2016.

3.4.4 Item on JSNA key dataset brought forward to 14 September 2016.

3.4.5 Item on the annual report of the director of public health added to 19 October 2016.

3.4.6 Item on partnership groups report 19 October 2016 amended to read 'joint commissioning executive report'.

3.4.7 Item on commissioning intentions 2017/18 brought forward to 19 October 2016.

3.4.8 Items on the annual report of the director of public health and outcomes based commissioning for over 65s added to agenda for 19 October 2016.

3.4.9 Item on JSNA programme for 2017 brought forward to 14 December 2016.

Appendices

Appendix 1 risk summary.

Appendix 2 board work plan.

4. CONSULTATION

- 4.1 A number of topics for board meetings have been proposed by board members. These have been added to a topics proposals list on the work plan.

5. SERVICE INTEGRATION

- 5.1 All board paper authors are asked to explicitly consider service integration issues for items in the work plan.

6 FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 6.1 Where there are financial or risk assessment considerations board paper authors must complete this section and gain sign off from the relevant lead finance officer(s). Where there is joint funding in place or plans for joint funding then approval must be sought from the lead finance officer from both parties.

7. LEGAL CONSIDERATIONS

- 7.1 Advice from the council's legal department must be sought on proposals set out in board papers with legal sign off of the final paper.

8. HUMAN RESOURCES IMPACT

- 8.1 Any human resources impacts, including organisational development, training or staffing implications, should be set out for the board paper for an item in the work plan.

9. EQUALITIES IMPACT

- 9.1 The health and wellbeing board, as a committee of the council, has a statutory duty to comply with the provisions set out in the Equality Act 2010. The board must, in the exercise of all its functions, have due regard to the need to comply with the three arms or aims of the general equality duty. Case law has established that the potential effect on equality should be analysed at the initial stage in the development or review of a policy, thus informing policy design and final decision making.
- 9.2 Paper authors should carry out an equality analysis if the report proposes a big change to a service or a small change that affects a lot of people. The change could be to any aspect of the service – including policies, budgets, plans, facilities and processes. The equality analysis is a key part of the decision-making process and will be considered by board members when considering reports and making decisions. The equality analysis must be appended to the report and have been signed off by the relevant director.
- 9.3 Guidance on equality analysis can be obtained from the council's equalities team.

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BACKGROUND DOCUMENTS

None

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Risk Status

Risk Ref	Business Unit	Risk	Risk rating		Control measures			
			Current	Future	Future	Existing	Total	% Implemer
HWB5	HWB	Limited or constrained financial allocations in health and social care which gives rise to the inability to balance reducing budgets with a rising demand	25	20	4	5	9	70%
HWB6	HWB	Failure to ensure that the Board continuously develops and has the capacity and capability to operate effectively and efficiently.	16	12	3	2	3	67%
HWB8	HWB	Board is not able to demonstrate improved outcomes for the population	16	12	4	4	4	60%
HWB4	HWB	Failure to understand the community's expressed wants and choices and to ensure that ongoing engagement with the public is maintained and views	16	12	5	2	6	40%
HWB1	HWB	Failure to ensure that the board's focus is balanced (for example, between statutory requirements / national guidance and local priorities; or health and wellbeing)	16	8	2	4	6	67%
HWB3	HWB	Failure to clearly understand the purpose, boundaries and remit of the Board	12	4	2	3	3	67%
HWB2	HWB	Failure to successfully integrate commissioning or service provision due to inability or unwillingness to share data	15	12	3	2	5	71%
HWB7	HWB	The Board fails to respond flexibly and effectively to changes in national policy or developing local issues	12	8	2	4	4	80%

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Agenda Item 12 – Appendix 2

HWB work plan 2016/17 version 75.0

Topic proposed: date to be agreed

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
8 June 2016	Strategic items				
	Prevention, self-care and shared decision making	To consider work to increase self-care and self-management	Promoting self-management and self-care	Paula Swann	Jimmy Burke
	Business items				
	Croydon Community Strategy	To consider the Community Strategy	n/a	Paul Greenhalgh / Paula Swann	Dave Morris
	South West London Sustainable Transformation Plan	To consider the South West London Sustainable Transformation Plan	n/a	Paula Swann	Fouzia Harrington
	Food Flagship annual report	To report on activity undertaken by the Food Flagship	Reduce overweight and obesity in children	Rachel Flowers	Ashley Brown
Heart Town annual report	To report on activity undertaken by the Heart Town project	Early detection & treatment of cardiovascular disease and diabetes	Rachel Flowers	Steve Morton	

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
	Report of the chair of the executive group <ul style="list-style-type: none"> • Work plan • Risk 	To inform the board of work undertaken by the executive group and consider the board risk register		Paul Greenhalgh	Steve Morton
14 September 2016	Strategic items				
	Cancers	To discuss work to increase the early detection and treatment of cancers	Early detection and treatment of cancers	Paula Swann	Jimmy Burke
	JSNA key dataset 2016	To consider key challenges and needs identified by the key dataset	n/a	Director of public health	Steve Morton
	People's experience of using mental health day care services	To report to the board on work being undertaken to improve users' experiences of mental health day care services		Paula Swann	Susan Grose
	Business items				
	Tobacco control update	To report to the board on work to reduce smoking prevalence	Reducing smoking prevalence	Rachel Flowers	Bernadette Alves
	Early years update	To report to the board on work to improve health and wellbeing in early years	Giving our children a good start in life	Tbc	tbc

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
	Partnership groups proposal (Partnership group: All)	To propose a reconfiguration of the partnership groups accountable to the board to better align them to the board's core functions	n/a	Paul Greenhalgh	Brenda Scanlan / Steve Morton
	Report of the chair of the executive group <ul style="list-style-type: none"> • Work plan • Risk 	To inform the board of work undertaken by the executive group and consider the board risk register		Paul Greenhalgh	Steve Morton
19 October 2016	Strategic items				
	Commissioning intentions 2016/17	The board has a duty to give an opinion on the alignment of the CCG's commissioning plan to the JHWS and the power to give its opinion to the council on whether the council is discharging its duty to have regard to the JSNA and JHWS.	n/a	Paula Swann/Paul Greenhalgh	Stephen Warren / Brenda Scanlan
	Annual report of the director of public health 2016	To discuss the content of the director of public health's annual report and agree any actions for the board arising from it	All	Rachel Flowers	tbc

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
	Business items				
	Joint commissioning executive report	To provide an overview of the work of the joint commissioning executive	All	Paul Greenhalgh / Paula Swann	tbc
	Safeguarding adults annual report	To inform the board of the work of the Safeguarding Adults Board	n/a	Paul Greenhalgh	Sean Oliver
	Safeguarding children annual report	To inform the board of the work of the Safeguarding Children Board	n/a	Paul Greenhalgh	Gavin Swann
	Outcomes based commissioning for over 65s	To update the board on progress since the last report on 10/02/16	Prevent illness and injury and promote recovery in the over 65s	Paula Swann / Paul Greenhalgh	Martin Ellis
	Better Care Fund	To inform the board of progress on the work schedule of the Better Care Fund	n/a	Paula Swann / Paul Greenhalgh	Paul Young / Vanda Learey
	Report of the chair of the executive group <ul style="list-style-type: none"> • Work plan • Risk 	To inform the board of work undertaken by the executive group and consider the board risk register	n/a	Paul Greenhalgh	Steve Morton

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
14 December 2016	Strategic items				
	Business items				
	Health protection update	To inform the board of key health protection issues for the borough including uptake of immunisations & vaccinations	Improve the uptake of childhood immunisations	Rachel Flowers	Ellen Schwartz
	Pharmaceutical needs assessment (PNA) update	To consider any changes to the PNA and agree process for full update	n/a	Rachel Flowers	Claire Mundle
Report of the chair of the executive group <ul style="list-style-type: none"> • Performance • Work plan • Risk 	To inform the board of work undertaken by the executive group and consider the board risk register	n/a	Paul Greenhalgh	Steve Morton	
8 February 2017	Strategic items				
	Business items				
	JSNA programme for 2017	To agree the JSNA programme for 2017	n/a	Rachel Flowers	Steve Morton
Health and social care integration: Better Care Fund	To inform the board of progress on the work schedule of the Better Care Fund	n/a	Paula Swann / Paul Greenhalgh	Paul Young / Vanda Learey	

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
	Report of the chair of the executive group <ul style="list-style-type: none"> • Work plan • Risk 	To inform the board of work undertaken by the executive group, to consider performance and review the board risk register	n/a	Paul Greenhalgh	Steve Morton
5 April 2017	Strategic items				
	Business items				
	CCG operating plan 2017/18	The board has a duty to give an opinion on the alignment of the CCG's commissioning plan to the JHWS	n/a	Paula Swann	Fouzia Harrington
	Report of the chair of the executive group <ul style="list-style-type: none"> • Performance report • Work plan • Risk 	To inform the board of work undertaken by the executive group and consider the board risk register	n/a	Paul Greenhalgh	Steve Morton

Appendix 1b Topics covered at HWB meetings from April 2016

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
13 April 2016	Strategic items				
	Improving people's satisfaction with care: learning from local best practice <ul style="list-style-type: none"> • Maternity services • Mental health day services 	To share learning on how services have improved people's experience of care	Improve people's satisfaction with care	Paula Swann (maternity services) Paula Swann / Paul Greenhalgh (mental health day services)	Caroline Boardman (maternity) Susan Grose (mental health)
	Business items				
	CCG operating plan 2016/17	The board has a duty to give an opinion on the alignment of the CCG's commissioning plan to the JHWS	n/a	Paula Swann	Fouzia Harrington
	Health and social care integration: Better Care Fund and Transforming Adult Community Services	To inform the board of progress on the work schedule of the Better Care Fund and provide an update on TACS	n/a	Paula Swann / Paul Greenhalgh	Paul Young / Vanda Learey
People Gateway	To update the board of the work of the People Gateway	Household income is a key determinant of health. This item relates to the JHWS priority of child poverty.	Paul Greenhalgh	Mark Fowler	

Appendix 1b Topics covered at HWB meetings from April 2016

Date	Item	Purpose	JHWS priority	Board sponsor	Lead officer / report author
	Report of the chair of the executive group <ul style="list-style-type: none"> • Performance report • Work plan • Risk 	To inform the board of work undertaken by the executive group and consider the board risk register	n/a	Paul Greenhalgh	Steve Morton